

Ibni Sina Health Capacity Building Programme.

Hospital and Health Care Facilities
Management and Administration
Training Programme

Service Quality Standarts

METHODOLOGY



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How Should Healthcare Be ?

- .Equitable
- .Meet the needs and expectations of the people,
- .Accessible
- .Efficient
- .Of High Quality
- .Effective

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The most important parameter of Corporate Performance and Quality Improvement which is implemented in public hospitals in 2005 are Quality Criterias for Healthcare

In 2007 these criterias were updated to 150 questions

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- . In 2008,the 150 questions were completely revised and both structural quality criteria and methodological aspects were revised again.
- . Quality Criteria Standarts has become a set of 354 standard and 900 sub-components,taking the name of the **Service Quality Standards**
- . In 2009, a total of 388 standarts and about 1450 sub-components for private hospitals and university hospitals were published as **Private Hospital Service Quality Standards**

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In dimensions system, standards placed on a model of five dimensions (including vertical and horizontal) and is designed to cover all parts of the organization. Vertical dimensions are,

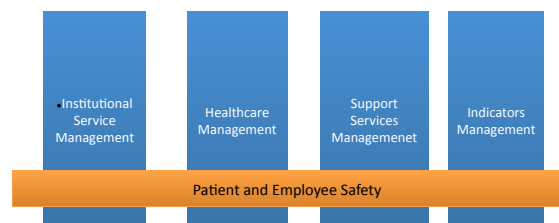
- . **Institutional Service Management,**
- . **Healthcare Management,**
- . **Support Services Management,**
- . **Indicators Management**

Horizontal dimension

- . **Patient and Employee Safety.**

In this way, our country developed a unique dimensions structure.

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Development of Coding System

A coding system was developed to create a record in determining the degree of statistical standards in hospitals, and ensure the traceability of standards by providing an identification.

In this way, the codes associated with these standards will provide an opportunity for data processing and a comparison between hospitals.

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Development of Scoring System

The aim of scoring system is comparison between the standards. In order to ensure that, scoring should be done according to certain rules and strategy.

In addition, a certain categorization of the standards helps the standards to become holistic and balanced.

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As a result the Turkish health care system started to improve public health by;

- increasing the quality of service,
- targeting the same high quality service to all service providers
- and periodically evaluating the institutions with the same rating system,
- aiming at continuous improvement,
- care about employee safety, and employee benefits as much as benefits of patient safety and patients
- and also assumed the function of the upper authority to guide and lead the system

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These studies which are following the scientific and accurate methodology, have shown the efficacy and acceptability of "**Hospital Service Quality Standards**" increases, and appears to be embraced by all stakeholders.

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Example: 01.04.03.00.H

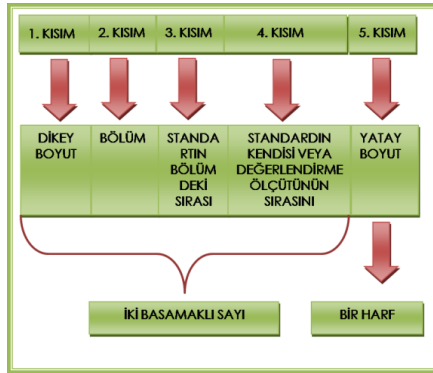
- Coding consists of five sections.
- The first 4 parts are two-digit numbers, and the 5th part is a letter
- **Two-digit number at first part, identifies the vertical dimensions.**
- 01: **Institutional Service Management**
- 02: **Healthcare Management**
- 03: **Support Services Management**
- 04: **Indicators Management**

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Example: 01.04.03.00.H

- The two-digit number in the second part, identifies the partition in the vertical dimensions
- The two-digit number in the third part, identifies the sequence location of the standard.
- The two-digit number in the fourth part, describes the standards and assessment criteria.
- Standard is defined with 00.
- Evaluation criteria are defined with consecutive numbers, starting from 01
- Sub-segments of the Evaluation criteria is defined by "o" mark.

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The fifth section shows the horizontal dimension.

Identified by letters "H", "Ç" ve "G" .

- "H" is for the standart of patient safety
- "Ç" is for the standart of Employee safety
- "G" is for the standart of Patient and Employee safety
- No letter is used in the standarts which is not related to Patient safety and Employee safety or both.

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Institutional Services Management

- 01 Management Services
- 02 Patient Care Services
- 03 Control and Prevettionn fo Infections
- 04 Facility Management
- 05 Emergency and Disaster Management
- 06 Information Management
- 07 Stock Management
- 08 Waste Management

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Healt Care Management

- 01 Outpatient Services
- 02 Emergency Medical Services
- 03 Biochemistry Laboratory Services
- 04 Microbiology Laboratory Services
- 05 Pathology Laboratory Services
- 06 Medical Imaging Services
- 07 Endoscopy Services
- 08 Clinics
- 09 Operating Room Services

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Health Care Management

- 10 Intensive Care Services
- 11 New Born Intensive Care Services
- 12 Pharmacy Services
- 13 Sterilization
- 14 Transfusion Medicine Services
- 15 Oral and Dental Health Services
- 16 Physical Therapy Services
- 17 Dialysis Services
- 18 Birth Services
- 19 Psychiatric Services

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Support Service Management

- 01 Patient File and Archive Services
- 02 Food Services
- 03 Laundry Services
- 04 Mortuary Services

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Indicators Management

Quality Indicators

- Stab wounds should be monitored.
 - Workers exposed to splashes of blood and body fluids should be monitored.
 - Mortality rates in intensive care should be monitored.
 - Rates of pressure ulcers in intensive care units should be monitored.
 - Hospital infection rates in intensive care units should be monitored.
 - Surgical site infection rates should be monitored.
- Rate of falling injuries should be monitored.
- Cesarean section rate should be monitored.
 - Rate of Operating table utilization should be monitored.
 - Rehospitalization rates in ICU should be monitored

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Indicators Management

The ratio of the number of patients re-admitted to the emergency department within 24 hours with the same complaint should be monitored

- Rate of the number of patients who were referred to another health center and the diagnostic distribution , should be monitored
- Length of stay in hospitalized patients in observation room, should be monitored.
- Time to reach to the emergency department after calling the consultant / emergency room physician should be monitored.
- Agreement between the cytological and pathological diagnosis should be assessed and the rates should be monitored.
- Department change ratios of nurses should be monitored .
- Rate of Completely filled patient files should be monitored
- Clinic room rate per physician should be monitored.
- Rates of correct use of antibiotics in surgical prophylaxis should be followed.

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Example 1

01.01-21.00.H code;

- Section one "01" Institutional Services Management,
- Section two "01" Department of Management Services,
- Section three "21" 21. Standart,
- Section four "00" The standard itself,
- Section five "H" Defines the standart is related to patient safety

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Specifications of Standards

Score

- Documental regulations-related standarts 5
- Education-related standards 10
- Quality Management-related standarts 10
- Physical characteristics related standards 10
- Process-oriented applications standards-1 10
- Process-oriented applications standards-2 15
- Patient and Employee related standarts -1 15
- Indicators Monitoring related standarts -1 15
- Patient and Employee related standarts -2 20
- Self-worth, Committees,disabled people related standards 20

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Standard Code Standard Name Description

01.01.38.02.H Patients who are at risk of falling should be identified with the figure of four-leaf clover and the identifier must be attached to entrance door to the patient's room

In rooms where more than one patient stays , the figure of four-leaf clover should be placed per bed .

01.01.48.00.H Arrangements should be made for the Pink code management

Should be applied at Children's hospitals, obstetrics and gynecology hospitals and obstetrics and pediatrics clinics

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01.01.50.00 Arrangements should be made for organ donation.

Hospitals that have no Intensive Care Units and has only 1 intensive care and neonatal intensive care units are excluded of evaluation.

01.01.64.00 Must have arrangements to ensure patient privacy.

Neonatal Intensive Care Units and childrens followed who are under age of 5 are excluded of evaluation

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01.03.06.02 Alcohol-based hand antiseptic solutions should be placed at the bedsides

A hand antiseptic between the two beds is sufficient

01.05.04.02 Emergency exit doors must have inside panic bars

It is allowed to use locks for the sections where mentally disabled, prisoners or correctional patients stay.

02.02.01.06 Should be created a separate room for resuscitation.

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02.04.15.00 Culture plates should be regulated for decontamination.

Institutions which dispose of medical waste at medical waste sterilization units are excluded of evaluation.

02.10.03.00 Arrangements should be made for the process of transfer of patients.**02.10.01.06 Ventilation systems which has hepa filters must be used to ensure the terms of sterilizations of microorganisms**

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02.10.07.00 Patients should be evaluated by scoring systems which determine the severity of illness.**02.11.08.00 Babies should be evaluated by scoring systems which determine the severity of illness.**

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02.15.04.02 Arrangements should be done for cleaning the remaining amalgams in amalgam mixers

Except facilities which use capsule amalgam

04.01.03.00 Death rates for ICU should be monitored**04.01.04.00 Rates of pressure ulcers in ICU should be monitored.**

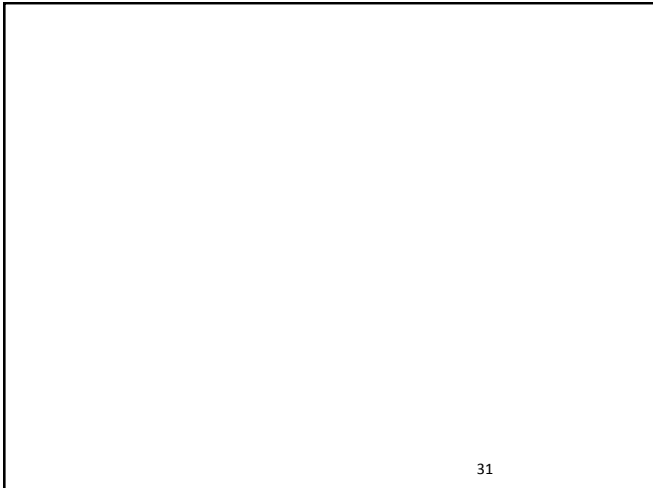
Except Newborn ICU, Pediatrics ICU

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Table II

Length of time for making appointment and giving results at Medical Imaging Services	Imaging Service Type	Time for making Appointment	Results Giving Time
CT	Latest 10 business days from the day of the examination requested		3 business days excluding the day of the examination
MR	Latest 10 business days from the day of the examination requested		3 business days excluding the day of the examination
EKO	Latest 5 business days from the day of the examination requested		30 minutes after the examination
USG	Latest 3 business days from the day of the examination requested		30 minutes after the examination
EEG	Latest 20 business days from the day of the examination requested		3 business days excluding the day of the examination
EMG	Latest 20 business days from the day of the examination requested		3 business days excluding the day of the examination

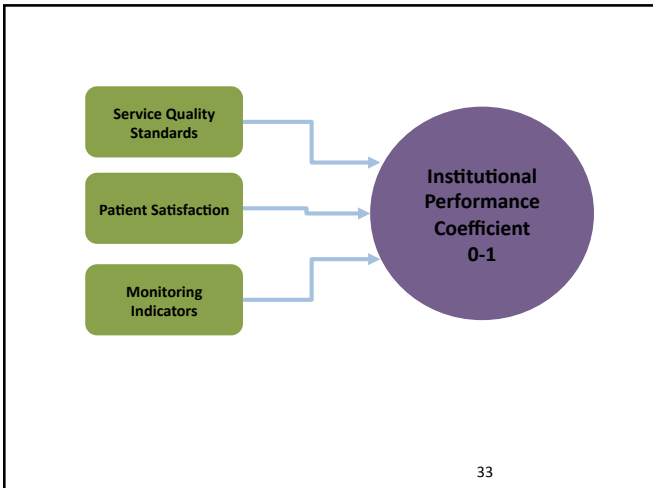
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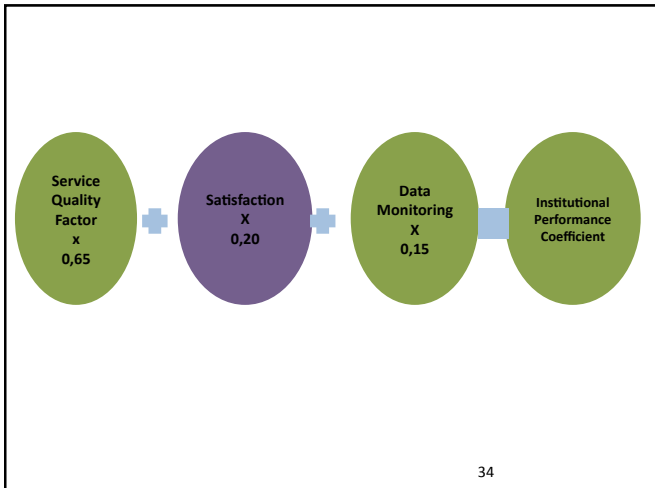
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Every manager should lead to the point of application of these standards in order to be more successful and should be a role model for many aspects

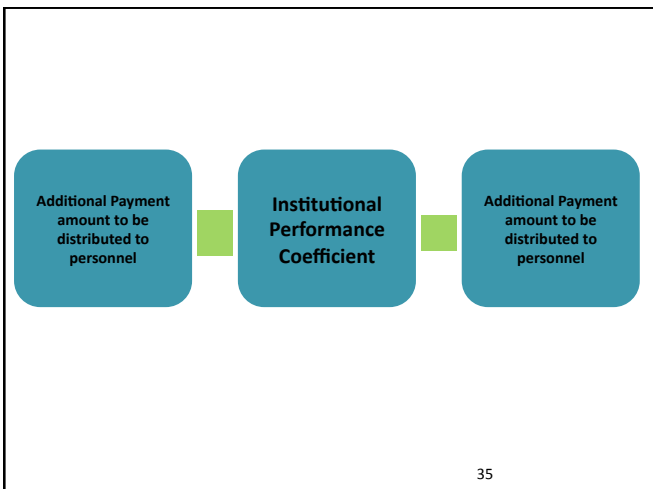
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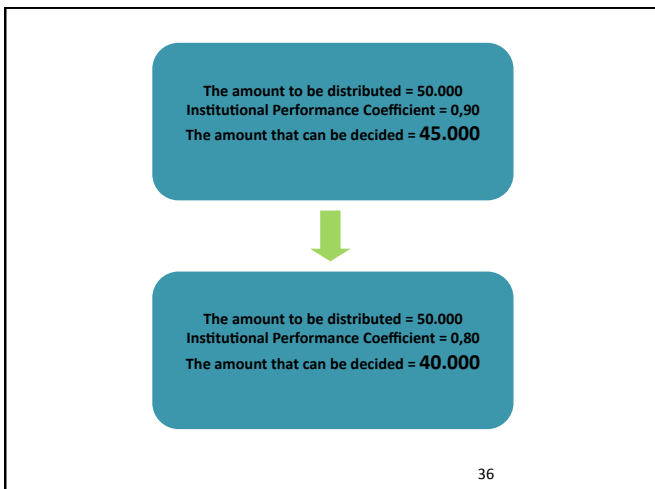
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