

# Annex 20. Measuring Quality in Health Care thru Accreditation of Health Providers and Facilities



## Measuring Quality of Health Care through Accreditation of Health Providers and Facilities

APEC Seminar on Trade in Health Services  
9-11 February 2010  
Cebu City



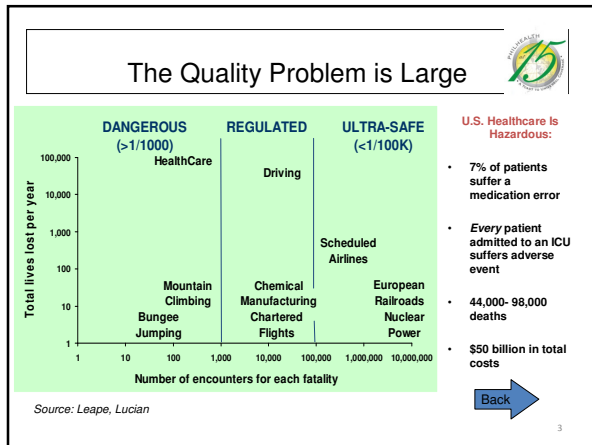
Shirley B. Domingo MD  
OIC Senior Vice President  
Health Finance Policy Sector  
Philippine Health Insurance Corporation

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- 'Health Systems need protection from possible adverse effects of globalization treaties... There is danger that important global trade treaties will create a competitive environment with a focus on clinical sophistication at the expense of affordable, cost effective, public health investments.'


Eastern Mediterranean Regional Office  
World Health Organization

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## Quality Dimensions

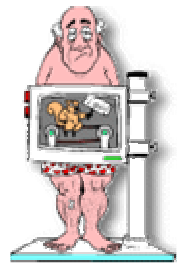
- Safety
- Effectiveness



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## Quality Dimensions


- Efficiency
- Appropriateness



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## Quality Dimensions

- Accessibility
- Consumer participation

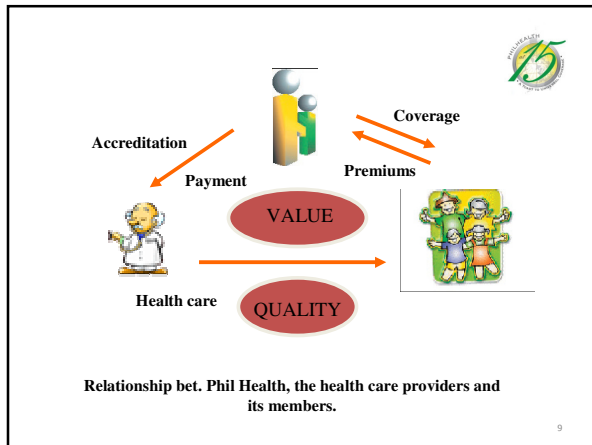


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Accreditation – a self assessment and external peer assessment process used by health care organizations to accurately assess their level of performance in relation to established standards and to implement ways to continuously improve



### PhilHealth Benchbook

- Contains Philhealth’s standards of quality
- Continuous quality improvement
- Self-assessment
- Demonstration of achievements and outcomes

### Benchbook Indicators


- Developed through several consultative meetings
- Stakeholders suggested indicators for each standard and criteria
- Stakeholders agreed to set some indicators as CORE indicators
- Survey tool which contains CORE indicators were pilot tested in 2008
- Revision of some indicators and listing/delisting of CORE indicators

### Rationale for Benchbook Standards



PhilHealth perspective:

- Legal mandate
- Existing accreditation standards do not promote a quality improvement culture among hospitals
- Concern with variation with health care practice, outcomes and costs
- Need to influence provider behavior to increase the likelihood of better outcomes at affordable costs- member protection
- Rising demand and costs, limited health expenditures and resources-- efficiency

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Rationale for Benchbook Standards 

Provider perspective:

- Tougher competition
- Frequent [medical errors- safety issues](#)  
 lawsuits!
- Rising demand and costs, limited health expenditures/resources
- Concern with variation with health care practice, outcomes and costs
- Patient satisfaction 

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Performance Area	Standards n=78	Criteria n=141	Indicators n=239	Core Indicators n=51
Patient Rights	6	14	19	1
Patient Care	30	75	112	15
Leadership & Mgt	6	4	14	3
HR Mgt	8	19	27	2
Info Mgt	5	11	15	3
Safe Practice	16	16	40	25
Improving Performance	7	2	12	2

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## Patient Care

**Goals:**

- Comprehensive assessment of every patient enables the planning and delivery of patient care
- Care is delivered in a timely, safe and appropriate manner
- Upon discharge, care is coordinated with providers in the community

**Standards:**

- Professionals perform coordinated patient assessment
- Care plan is consistent with scientific evidence

**Criteria:**

- Previously obtained information is reviewed at every stage of the assessment to guide future assessments
- Expert judgment, practice standards and patients' values are considered in developing care plans.

**Indicators:**

- Percentage of charts with progress notes by doctors
- Proof that practice standards and when necessary, expert judgment and patient's values are considered in the care plan

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## Patient Rights and Organizational Ethics

**Goal:**

- To respect patients' rights and ethically relate with patients

**Standard**

- Follows procedures for confidentiality, privacy and security

**Criteria:**

- Informed consent
- Policies on confidentiality and privacy

**Indicators:**

- Percentage of patient charts with signed consent
- Proof of hospital staff awareness and compliance with policy in addressing patients' needs for confidentiality and privacy

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## Leadership and Management

**Goals:**

- The organization is effectively and efficiently governed and managed according to its values and goals to ensure that care produces the desired health outcomes, and is responsive to patients' and community needs

**Standards:**

- The organization develops and implements policies and procedures which cover the major services and aspects of operations

**Criteria:**

- The organization's by laws, policies and procedures support care delivery and are consistent with its goals, statutory requirements and its community responsibilities

**Indicators:**

- Presence of written by-laws, policies and procedures, which are consistent with goals, statutory requirements, accepted standards and community and regional responsibilities

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## Human Resource Management

**Goals:**

- The organization provides the right **number and mix** of competent staff to meet the needs of its internal and external customers and achieve its goals

**Standards:**

- Appropriate skill mix and staff numbers are available

**Criteria:**

- Staff numbers and skill mix are based on actual clinical needs

**Indicators:**

- Presence of policies and procedures on hiring of staff

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## Information Management

**Goals:**

- Integrity, safety, access and security of records are maintained and statutory requirements are met (**Records management**)

**Standards:**

- Relevant, accurate quantitative and qualitative data are collected and used in efficient patient care
- Clinical records are accessible, kept confidential and safe, and comply with all relevant statutory requirements and codes of practice.

**Criteria:**

- Organization defines procedures to improve accuracy, completeness and reliability of relevant data

**Indicators:**

- Presence of policies and procedures to monitor and improve the accuracy, completeness and reliability of relevant qualitative and quantitative data relating to its operations

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## Improving Performance

**Goals:**

- The organization continuously and systematically **improves its performance** by invariably doing the right thing the right way the first time and meeting the needs of its internal and external clients

**Standards:**

- New processes of care are designed based on scientific evidence
- Better care service as a result of continuous quality improvement activities

**Criteria:**

- PhilHealth CPGs for the top 10 admissions are disseminated and monitored

**Indicators:**

- Proof of dissemination of PhilHealth-adopted CPGs for the 10 conditions (if CPG is applicable in the hospital)
- Presence of patient satisfaction survey

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## Safe Practice and Environment

**Goals:**

- Risks of acquisition and transmission of **infections** among patients, employees, physicians and other personnel, visitors and trainees are identified and reduced

**Standards:**

- Infection Control Program ensures prevention of infection in all services

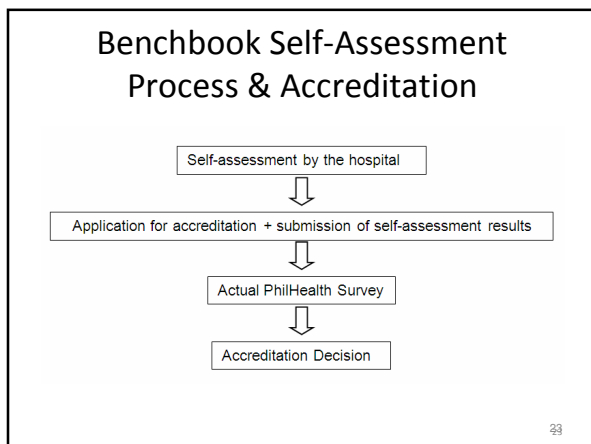
**Criteria:**

- Safety from hazardous materials and biological wastes, fire safety, emergency and disaster preparedness are implemented
- The organization takes steps to prevent and control outbreaks of nosocomial infections

**Indicators:**

- Proof of the implementation of the policies and procedures for safe and efficient use of medical equipment
- Presence of a coordinated system-wide procedure for case containment of nosocomial infections

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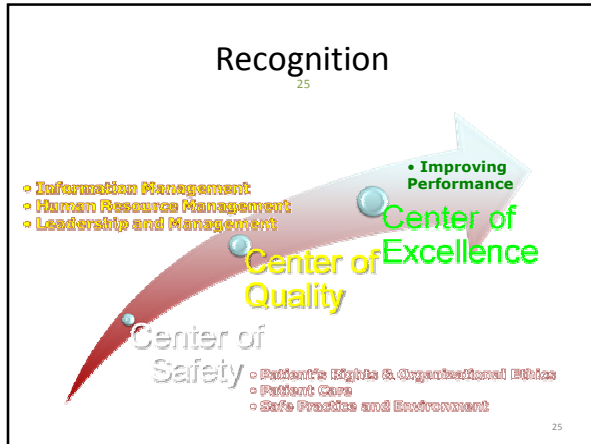


## Warranties of Accreditation, Institutions

- they recognize the authority of PhilHealth to any inspection or investigation
- accept the program of quality assurance, payment mechanism and utilization review of the NHIP
- shall guarantee safe, adequate, and standard medical care
- its personnel shall adhere to a strict Code of Ethics
- they agree to adhere to practice guidelines or protocols, peer reviews and other QA activities

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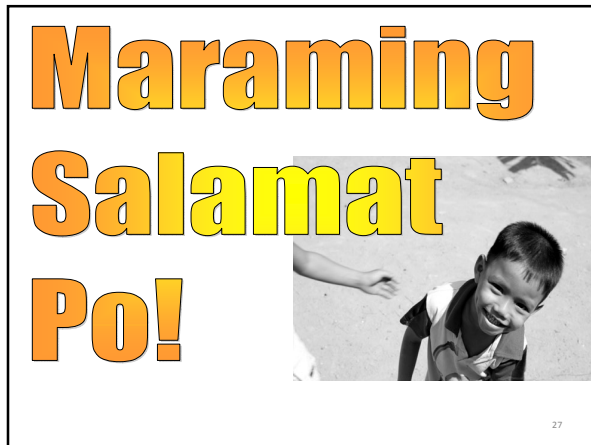
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## Number of Health Care Providers (as of December 31 2009)

<b>Health Care Professionals</b>	
Physicians	22,951
Dentists	195
Midwives	355
<b>Health Care Institutions</b>	
Hospitals	1,654
Ambulatory Surgical Clinics	36
Free Standing Dialysis Clinics	39
OPB Providers	1,301
Maternity Care Clinics	627
Anti -- TB/DOTS Clinics	710

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## Definition of Quality

- Refers to the degree to which **health care increases the likelihood of desired health outcomes**, and is consistent with **current professional knowledge**

- Lohr, Institute of Medicine

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- ## PhilHealth's QAP Activities
- Accreditation
  - Feedback Mechanism
  - Performance Monitoring
    - Utilization Review
    - Outcomes Assessment
  - Implement QA standards in the medical evaluation of claim applications for reimbursement
  - Program Review/Formulation of policies
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- ## Legal Mandate
- R.A. 7875 (as amended by R.A. 9241) Sec. 37. Quality Assurance
    - ...health care providers shall take part in programs of quality assurance, utilization review, and technology assessment ...
  - IRR Rule IX, PhilHealth shall...
    - Implement a QAP applicable to all HCPs for the delivery of health services nationwide
    - Shall ensure that the health services rendered to members by accredited HCPs are of the quality necessary to achieve the desired health outcomes and member satisfaction
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