

Objective quality measurement criteria in order to warrant quality of care
Practical implementation considerations



Where Leaders Consult Leaders

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This presentation ..

■ ... is mainly based on the recommendations of:

- World Bank and
- USAID

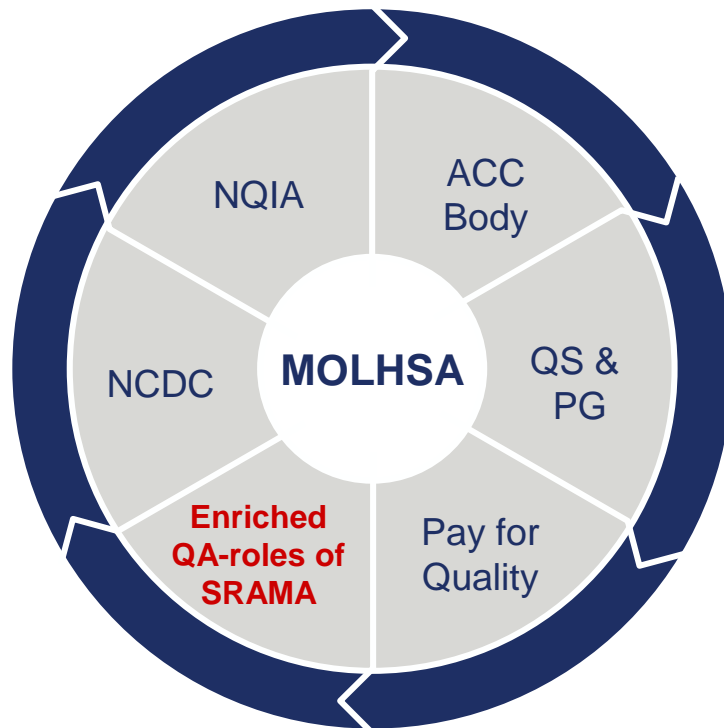
■ ... invites you to see

- our tools and
- criteria for quality improvements

■ ... gives you an impression about CKW's holistic approach to set up practical quality instruments with special regards to the MOLHSA-activities – recommended by World Bank

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Overview



World Bank recommends...

- To establish a National Quality Improvement Agency (NQIA)
- To assign the National Center of Disease Control (NCDC) the responsibility of standardized quality measurement
- To create a Accreditation Body (ACC Body)
- To establish a Quality Strategy and Planning Group (QS & PG)
- To phase-in a multi-year period expectation for pay for quality
- To advise the State Regulatory Agency for Medical Activities (**SRAMA**) to introduce clinical relevant standards into their audit/QA -roles

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Core recommendations World Bank

Core Recommendation

- Quality criteria to be collected in different sectors of health care
- Public reporting on disease surveillance
- To build QI skills in workforce
- To launch Q-campaigns around topics like nosocomial infections, chronic diseases et al
- Establish decision supports by flow sheets and operative procedures
- Periodical assessments of organizations against established standards
- Emphasis re-licensure of providers through State Regulatory Agency
- Develop pay for performance principles

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Core findings USAID

Patient centered survey results, such as

- more informations about UHC needed
- more & exact info for patients by the agency (hotline)
- providers' staff to be trained and to be familiarized with UHC coverage
- patients attitude towards providers reflects their lack of knowledge about coverage and costs

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1

Various participants

2

Thematic overlaps

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- Coordinated approach of activities
- Find and set up state-of-the art instruments, criteria, indicators, rules, standards that are successfully in use world wide
- Covering all relevant subjects and organizations such as...
 - Hospitals
 - Primary care units and family doctors
 - Patients and citizen
 - Social security agencies



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Our approach :

Ready to support MOLHSA when converting World Bank recommendations into strategy and to develop work plan for all subjects involved, assembling all relevant stakeholders under MOLHSA leadership equipped with high class quality tools and precise criteria.



How?

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To ensure a holistic approach, avoid thematic overlaps and to use high-class tools CKW harks back to

- Medical Quality Indicators derived from Maryland Hospital Quality Indicator Project
- German Inpatient Quality Indicator Scheme
- Recommended patient safety indicators
- Acknowledged Risk-Prevention Standards
- Established CIRS-Reporting tools
- Well known surgery-procedures and check-lists
- Quality Management systems like EFQM
- Compliance plans and patient involvement procedures
- Applied standards for workflows and processes in the health care system
- Pay-for-performance experience
- QMXray TM - a holistic screening model focussing all major aspects of health care – including the patient's focus

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Exemplary approach for the hospital inpatient sector

| Issue | Criteria | Tools & rules | Source |
|-------------------------------|--|---|--|
| Obstretical procedures | <ul style="list-style-type: none"> ▪ Perioperative mortality ▪ C-section incidents ▪ Mortality of new born Children | Quality Indicators | Maryland QI Project |
| Surgery | <ul style="list-style-type: none"> ▪ Infected wound ▪ Postoperative unscheduled return to operation room ▪ Perioperative mortality ▪ Unscheduled returns to intensive care units | Quality Indicators | Maryland QI Project |
| Emergency inpatient | <ul style="list-style-type: none"> ▪ Unscheduled admission following ambulatory treatment | | |
| Chronic diseases | <ul style="list-style-type: none"> ▪ Hypertension treatment | Medical outcome indicator | |
| Hygiene | <ul style="list-style-type: none"> ▪ Nosocomial infection prevention ▪ Hospital infections | Obligatory hand disinfection plan with testing scheme | In line with Recommendations of Deutsche Gesellschaft für Hygiene und Mikrobiologie (DGHM) |

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Further focus in the hospital sphere on

Compliance

Pharmaceutical safety

Child health issues

Risk management

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Similar approach applied to:



Note:
 please pay attention to USAID survey facts regarding hotline quality, patient's attitude to providers, information behavior of ambulance services, waiting time problems et al

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In a nutshell:

We are ready to assemble quality indicators, tools, rules, standards which have proven their quality in practical utilization.

- Let us take the best from other functioning health care systems
- Suitably adjusted to Georgian cultural and market particularities
- And let us be aware that many other factors rather than the mere treatment influence public opinion as to QUALITY