



Experiences with the Use of Standards

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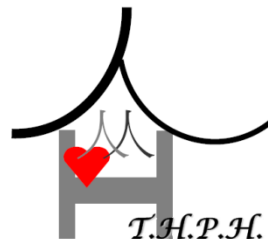


Outline

- The WHO HPH Standards
- Use of standards in Taiwan Network



The WHO HPH Standards

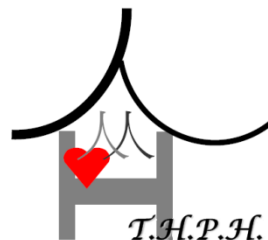


A Health Promoting Hospital and Health Service Is...

Shu-Ti

- An organization that aims to improve health gain for its stakeholders **by developing structures, cultures, decisions and processes.**

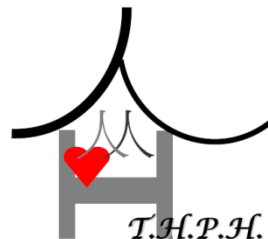
=>Applying a setting-based (system-oriented) approach involving changes in structures, cultures, decision-making processes and delivery processes.



The WHO standards:

An evidence-oriented implementation guide that

- Contains strategies proven to be effective,
- Emphasizes the importance of gathering evidences, performing evaluation and taking CQI actions throughout the process of implementation, and
- Help transform our organization to better adapt to the HP needs of our stakeholders.

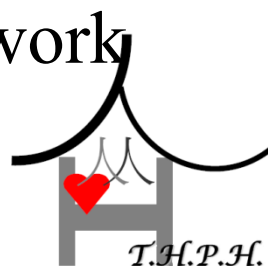


Use of standards in Taiwan Network



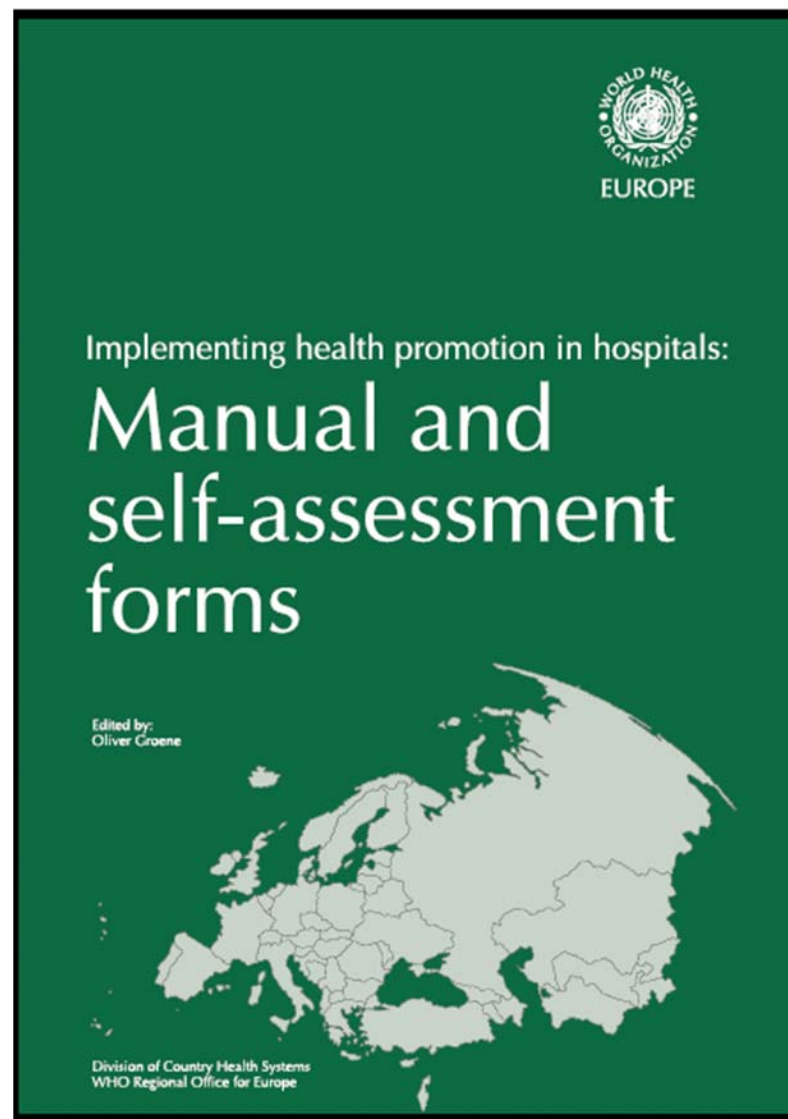
How do we use the standards?

1. To tell people: what is a HPH? How can we become one?
2. Doing self-assessment with the standards is a criterion **to become a network member** as well as to renew the membership
3. As a framework **to select annual model HPH award**
4. As a tool to support the implementation of a specific **hospital-wide project**
5. To cross-check with the **hospital accreditation standards** and make recommendation on adding HP items
6. **To identify common weaknesses** and take network actions
7. **To monitor the progress** in the whole network



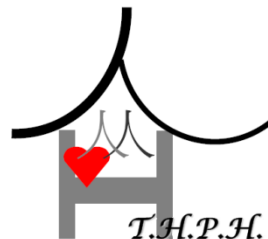
The HPH Standards

- **Standard 1. Management Policy**
- **Standard 2. Patient Assessment**
- **Standard 3. Patient Information and Intervention**
- **Standard 4. Promoting a Healthy Workplace**
- **Standard 5. Continuity and Cooperation**



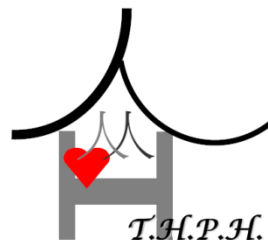
Prepare to do the self-assessment

- The commitment (and involvement) of the **hospital leader** (the superintendent)
- Setup of a HPH Committee including:
 - a **high-ranked senior manager**
 - + a high-ranked senior doctor
 - + a senior nurse
 - + a human resource personnel
 - + department leaders
 - + a committee coordinator



Perform the self-assessment

- The committee: look at the standards
- The committee: role assignment
- Separately collect data and fill-in the self-assessment
- The committee: together look at the results and discuss
- Develop a quality improvement plan
- Apply for site-visit and discussion with external experts
- Periodically re-assess



1.1.1. The hospital's stated aims and mission include health promotion
[Evidence: e.g. time- table for the action].

Comments

Yes

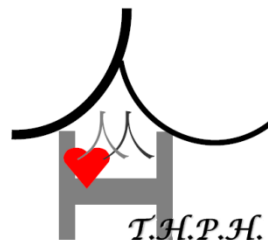
Partly

No



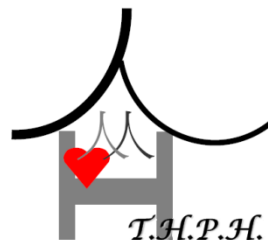
The self-assessment and the application for international membership -1

- In HPH Core Courses, always include “Introduction” and “The example”.
- Every hospital which applied for international membership was provided with the manual.
- Self-assessment must be done before the site visit



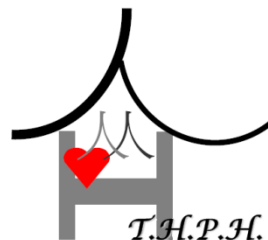
The self-assessment and the application for international membership -2

- During the site visit, the applying hospital shall:
 - (1) report the results by showing evidences of achievement upon each measurable element, and
 - (2) report their plan of improvement based on the results.
- The consultants shall:
 - (1) help clarify some of the interpretation of and level of achievement on specific elements if indicated ,
 - (2) share their experiences and suggestions to help hospitals improve

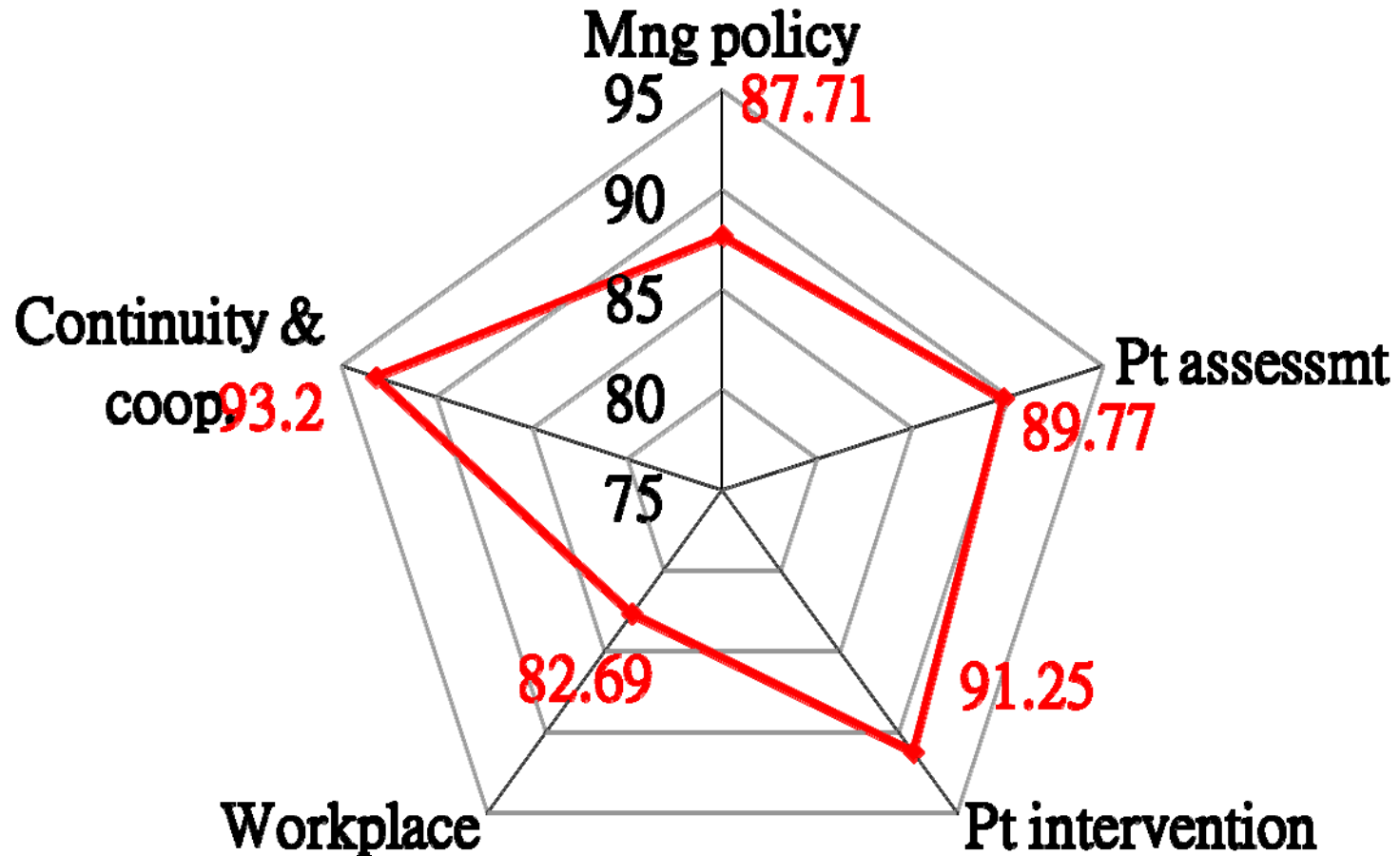


Identifying aspects to be improved in ^{Shu-Ti} Taiwan Network

- We calculate average score (S) for each measurable element from the data of 40 hospitals, giving 0 to no or 0%, 0.25 to 25%, 0.5 to partly or 50%, 0.75 to 75%, and 1 to yes or 100%; $S = \sum S_n / 40$
- Then calculate the average score for each substandard and standard in a similar way



Performance among 5 standards



Substandards which got scores <85 in Tw^{Shu-Ti}

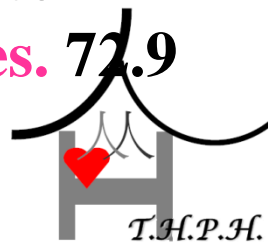
1.2 The organization **allocates resources** for the implementation of health promotion. 84.8

1.3 The organization ensures the availability of procedures for collection and evaluation of data in order to monitor the quality of health promotion activities. 78.8

2.1 The organization ensures the availability of procedures for all patients **to assess their need for health promotion. 85.2**

4.2 The organization ensures the development and implementation of a comprehensive **Human Resources Strategy** that includes training and development of health promotion skills of staff. 83.9

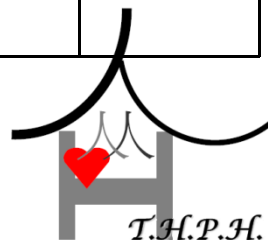
4.3 The organization ensures availability of procedures to develop and maintain staff awareness on health issues. 72.9



Elements with scores (<85) in Tw

1.2.2	Operational procedures such as clinical practice guidelines or pathways incorporating HP actions are available in clinical departments	73.1
1.3.1	Data are routinely captured on HP interventions and available to staff for evaluation	82.5
1.3.2	A programme for quality assessment of the health promoting activities is established	75.0
2.1.2	Guidelines/procedures have been revised within the last year	80.6
3.1.2	Health promotion activities and expected results are documented and evaluated in the records	83.1

continued



4.2.2	Staff in all departments are aware of the content of the organization's health promotion policy.	81.3
4.2.3	A performance appraisal system and continuing professional development including health promotion exists	71.3
4.2.4	Working practices (procedures and guidelines) are developed by multidisciplinary teams	84.4
4.3.1	Policies for awareness on health issues are available for staff.	80.0
4.3.2	Smoking cessation programmes are offered	65.6
4.3.3	Annual staff surveys are carried out including an assessment of individual behaviour, knowledge on supportive services/policies, and use of supportive seminars	73.1
5.2.4	If appropriate, a plan for rehabilitation describing the role of the organization and the cooperating partners is documented in the patient's record.	80.6

Consultant assessments on hospital preparedness -1

Commitment And support	%
High	90.0
Mod to high	10.0
low	0

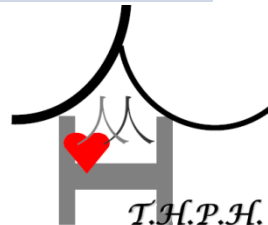
Allocation of resources, team-up, and mobilization of staff	%
Good	40.0
Fair to good	42.5
fair	17.5
inadequate	0



Consultant assessments on hospital preparedness -2

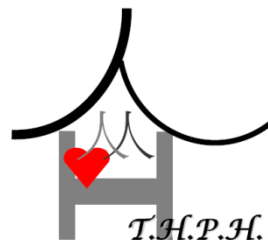
Past achievement in HP	%
A lot	50.0
Some to a lot	32.5
some	12.5
little	5.0

Potential of future development	%
Very optimistic	75.0
optimistic	25.0
difficult	0



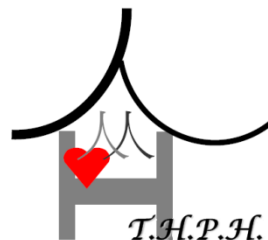
Overall picture

- Very high support from hospital leaders
- Good continuity and cooperation
- A lot of activities in delivering “patient information and intervention”
- HP Not fully integrated into the processes yet
- Often not recorded
- Little evaluated
- Staff health not a focus in the past



The network's action -1

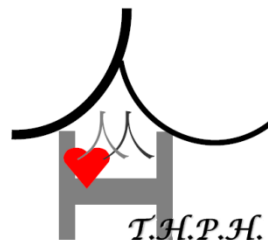
- **Feedback** the collective results to members in educational activities.
- Select and share experiences of best practices of **delivery process redesign**
- Held scientific conference and workshop on **project planning and evaluation**



The network's action -2

■ For HP workplace:

- Select and share experiences of best practices of promoting healthy workplaces
- Held training activities on HP healthcare workplaces
- Developed a shared questionnaire for annual staff survey
- Advocate the Taiwan JCAHO to include occupational hygiene and staff HP into the National Standards for Hospital Accreditation

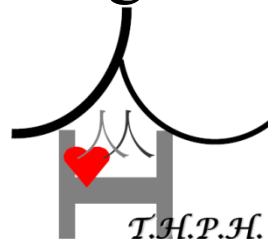


Brief comments



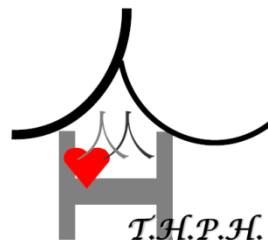
How about using the HPH standards

- A very **good tool to communicate** with people about “HPH” and to promote it.
- No specific **complaint** from hospitals about using it.
- People welcome to have a set of “international standards” and think it’s a clear and very useful guidance.
- “By checking the items one by one, we’re very glad to know that we are doing pretty good, not so far away, and also glad that I easily know how can I do better, **it saves a lot of time**”. (to know what are the right things to do and how to do the right things right)



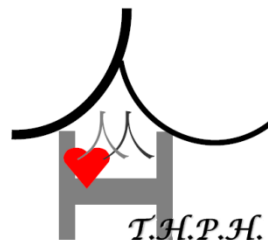
Any problem?

- Often had questions in how to choose levels of achievement.
- Frequent misunderstandings on certain elements
- 2 meetings on whether some **local adjustments** were needed:
 - only 1 element was added (the assessment of HP needs in outpatient department).
 - Scales of response was divided from 3 levels (yes, partly, no) to 5 (completely 100%, mostly 75%, partly 50%, a few 25%, not yet 0%)



Future development

- Considering to add further criteria for levels of achievement on certain elements
- Encourage use of indicators by picking up some to include in the selection criteria of model HPH award



Thank you for your attention!

