

**Quality Management, Measurement,
Standards & Conducive Environments**



**Good Afternoon
to all Delegates from
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Speakers Topic



**“Quality Management requires
Measurement, Standards and
Conducive Environments”**

Linkages



Let us look at the linkages that take us from

- Quality Management

to

- Measurement

to

- Standards

to

- Conducive Environments

An ENVIRONMENT of CARE

Quality Management



There are many definitions for Quality & Quality Management. Here is one very simple example quoted by [Dr. W. Edwards Deming](#): (1900-1993) who is considered to be the Father of Modern Quality. (See Deming's 14 point Plan)

[http://en.wikipedia.org/wiki/W. Edwards Deming](http://en.wikipedia.org/wiki/W._Edwards_Deming)

**To do the “RIGHT” thing “RIGHT”
this time, next time, every time!”**

Quality Management (Continued)



To do the “RIGHT” thing “RIGHT” this time, next time, every time!”

This objective is the goal of us all in every specialist area and in every function of Healthcare.

Standards



- Let us ask ourselves, why are healthcare Standards so Important?
- Without Standards how do we have an objective assessment to measure our Performance or Quality?

We don't!

Measurement



- If we “Cannot Measure it”
we “Cannot Manage it”
- The development of meaningful measurement criteria (Key Performance Indicators (KPI's) is a vital step in establishing & improving quality)

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Conducive Environments



- This is an Environment where Standards and Quality are in alignment aimed at meeting the Goals and Objectives of the Healthcare Organizations mission.

An Environment of Care

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PREMISE #1



- QUALITY AND
 - QUALITY IMPROVEMENT
- Must be one of Healthcare's Number One Priority Core Value's

PREMISE #2



QUALITY IMPROVEMENT SHOULD BE ONE of the ESSENTIAL BUSINESS STRATEGIES in all HEALTHCARE ORGANIZATION'S

PREMISE #3



HIGH QUALITY HEALTH CARE IS
PREDICATED ON **SAFE CARE**

PREMISE #4



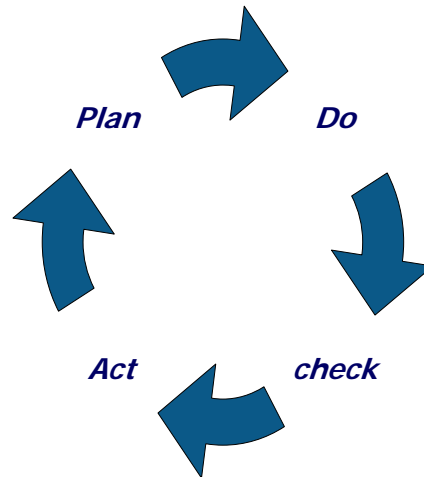
QUALITY IMPROVEMENT
REQUIRES CHANGE, SUCCESSFUL
CHANGE REQUIRES A
SYSTEMATIC APPROACH,
CONCERTED EFFORT AND TAKES
TIME

**“We can do the Impossible
Miracles Take a Little Longer”**

The Quality Circle

The purpose of the whole Quality Improvement process is to initiate a never-ending circle of quality improvements.

Quality improvement is planned - **plan**
it is executed - **do**
it is examined - **check**
and then acted upon - **act**



Healthcare Quality Programmes

Strategies which aim to:

- Prevent errors and promote high quality
- Apply best practice to the daily work
- Build bridges between the health sectors
- Improve the quality of the patients' journey
- Create continuous quality development

Theory into Practice!

The Use of Standards and Accreditation as a concept?

Accreditation is defined as:-
 “Quality assessment, where an acknowledged authority assesses whether an activity, service or institution meets a set of prepared standards”



Joint Commission International

JCI is one of many Accreditation Bodies

I have selected an “Actual Example” using the Joint Commission International Accreditation Standards for Facilities management and Safety (FMS)

- Facilities Engineering is a Service function of the Hospital therefore improved service to the customer e.g. staff, results in improved patient services

Benefits of adopting “Standards”



- To adopt the FMS standards “Framework” in your Organization immediately improves the Quality and Safety bringing with it a system that enables you to control costs, manage your responsibilities by adding structure to your activities and improve customer satisfaction

JCI Standards & (FMS)



The Joint Commission International Accreditation Standards for Hospitals 3rd Edition Effective January 2008

- Consists of thirteen functional chapters

Section I: Patient Centered Standards
(Seven Standards)

Section II: Health Care Organization
Management Standards (Six Standards)

(FMS is one of these six specific standards)

(FMS)



Facility management and Safety (FMS) contains :-

- Eleven (11) Standards

Sixteen (16) Sub Standards and

- Ninety Seven (97) Measureable Elements

How to Get “Started”?



- 1.Executive management’s total commitment is a pre-requisite to success
- 2.A passion to do better & improve
- 3.Understanding and knowledge
- 4.Training
- 5.Measure current conditions

HOW?

Gap Analysis Strategy



1. Conduct a “Current Status” survey using the (FMS) standards as the basis to determine existing baseline
2. Prepare report with all identified deficiencies listed showing :- Compliance, Partial Compliance or Non Compliance and describing the extent of variance from the standards and Measureable elements

3. Develop Action Plan and Implementation Strategy to close the “Gaps”

4. Review success of actions after implementation plan has been completed

5. Conduct PROOF TEST “MOCK SURVEY”

JCI (FMS) Plans for a Quality Environment of Care



(FMS) The Cornerstone to Success:-

(FMS) Identifies SEVEN Master Plans

1. Safety Plan
2. Security Plan
3. Hazardous Materials Plan (HAZMAT)
4. Emergency Plan
5. Fire Safety Plan
6. Medical Equipment Plan
7. Utility Systems Plan (Facilities management Plan)

JCI (FMS) –Is Success Guaranteed?



Question:-If you Implement JCI (FMS) or any of the other accreditation models does this Guarantee Success?

Answer:-

Your presenter firmly believes and has proven experience that the reply is **YES!**

With Management Support, Commitment, Effort, Understanding and Passion to Improve you cannot Fail in your continuing search for Excellence.

TRUST ME!!!



JCI (FMS) is one Tool that is tried
& tested and
DELIVERS RESULTS

SO TRY IT & LET ME KNOW!!!

Thank You - Len Cochrane

