

062: FIRST ALL-INCLUSIVE ACCREDITATION: SIMULTANEOUS ACCREDITATION OF ALL SOMATIC HEALTHCARE SECTORS IN A DANISH COUNTY

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Objective:

To improve quality in hospitals, general practice, and community health services in a single coordinated programme developed by The Health Care Service, UK and the County of Southern Jutland, Denmark

Methods:

The entire somatic hospital sector in the county of Southern Jutland (four general hospitals and a private hospital for rheumatic diseases), nine general practices, and the healthcare sector of one municipality participate in a project to result in an internationally acknowledged accreditation, but especially in an improved and sustained level of quality with a continuous state of alertness towards quality issues.

In 1999 The Health Quality Service (HQS) and the County of Southern Jutland agreed on project KISS (Danish acronym for "Quality in the Southern Jutland Healthcare"). Forty-eight standards for the hospital sector, 16 standards for the participating practices, and 21 standards for the municipality of Aabenraa have been translated, adjusted, and coordinated to meet international accreditation requirements, giving a basis for a process of accreditation based on similar (but sector-adjusted) criteria (2289 criteria for the hospitals, 501 for the GP's, and 511 for the municipality) with a special attention to the interfaces between the sectors in order to prevent patients being lost to follow-up when moving from one sector to the next. One way of ensuring the quality of these transitions has been to establish comprehensive care plans for selected patient groups (see relevant paper). Patient satisfaction is monitored early and again at the end of the project.

Ten cross-sectorial working groups have been established to address areas of special importance and general interest (Fire prevention; nutrition; infection control; complaints management; communication around referral, admission, and discharge; medication; partnership with patients; patient information; patient rights; safety and security).

A steering committee consisting of leaders from all the participating institutions was set up to coordinate strategy and approve suggestions from the simultaneously organized group of project coordinators who were appointed by the institutions to adjust and later locally implement the criteria set out for the accreditation process.

To ensure co-ordination, develop the concept, and manage the entire project we established a secretariat led by a Quality Manager, assisted by two secretaries, one with an academical background.

The development of the project includes an initial auto-evaluation by all departments and other participants, a period of approximation to the demands of the criteria, a mock survey by local surveyors and a final accreditation survey performed by surveyors sent out from the HQS with the technical assistance (translation etc.) of the local group of surveyors.

The local surveyors have been trained by the HQS in a sufficient number to perform the above tasks in institutions different from their own.

Results:

The initial phases of this pioneering project have proved feasible, the structure is adequate for the task, and the project involves and is met with the acceptance of all personnel at all levels.

At the time of submission of this abstract the auto-evaluation and the mock survey have been performed, groups have been adjusting performance and establishing documentation to comply with criteria and the accreditation survey by HQS surveyors should be under way by the time this paper is read.

Despite an unforeseen major restructuring of the hospital system in the county, imposed after the planning of the project, only minor delays have been experienced, and no significant alterations have been necessary.

Conclusions:

At present the project seems to become a success despite the problems created by the simultaneous structure alterations in the hospital system.

The project has been rather more expensive and required more manpower than initially calculated.

The special strong points of this project (coordinated involvement of all the sectors involved in active healthcare, integrated patient care plans across the sector interfaces, the auto-evaluation procedure) can be recommended for adoption by other wide-scale accreditation projects.