

The Danish Healthcare Quality Programme

DDKM



Danish Institute for Quality and Accreditation in Healthcare



Accreditation general practice

DDKM

Quality Measurement



Danish Institute for Quality and
Accreditation in Healthcare



The University of
Manchester

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What are the essentials in developing a new set of organisational accreditation standards and indicators?

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Questions

- Conceptual and logistical set up of Danish FP?
- Organisational and/or clinical / patient?
- New set?
- Knowledge transfer : EPA, RCGP-PA, ICGP?
- Baseline: current “quality” & evidence?
- Purpose: summative and/or formative? How pass?
- Data: what is feasible? Storage? Ownership?
- Politics: what needs to/could be done? CQC...
- What’s in it for me (practices)?!
- Is PDSA possible for all indicators?

What is quality?

Defining quality of care

Quality of care for individual patients

- Access - can patients access the health care they need?
- Effectiveness - is it effective when they get there?
 - clinical or technical effectiveness
 - effectiveness of interpersonal care

Additional domains of quality for populations

- Equity
- Efficiency

→ Leading to desired health outcomes

Expanded components of quality (from Campbell et al 2000)

The “structure, process and outcome” model of quality

Structure: The more visible aspects of a health system – e.g. buildings, equipment, staff, appointment systems

Process: What goes on within the structure – e.g. consulting, decision-making, prescribing, referring

Outcome: The consequences of providing care – e.g. morbidity, mortality, quality of life, user satisfaction and experiences

Intermediate outcomes: link activity with achievement
e.g. record of BP, treatment for BP = BP level

Why measure quality? Purpose

- As a basis for formative quality improvement: comparisons can stimulate and motivate change
- As part of pay for performance schemes (e.g. QOF)
- To reward perceived performance
- As part of regulation (e.g. of minimum standards)
- To assist purchasing (e.g. contracts which include minimum quality standards)
- To identify areas of need for future investment
- To inform service users
- Clear purpose and clear criteria by which to judge subsequent success

Purpose: how to measure success?

Summative assessment: assessment of learning (pass or fail)

Extrinsic motivation

- somebody else tries to make you do something or
- the motivation is external to yourself (P4P)

..standards and indicators...

contrasted with



Formative assessment: assessment for learning (non-judgmental & educational)

Intrinsic motivation

- when you want to do something for its own sake (professional values)
- when the control comes from within



Accreditation: clear purpose?

- *Certification* of competency, authority, or credibility
 - Official *recognition*, acceptance or approval
 - *Checking* and standardising the provision and quality of health care
- Against (implicit or explicit) standards or criteria

...accreditation...

Accreditation: 5 purposes (Buetow and Wellingham 2004)

- Quality control: provision of services to an intended (defined) standard: Essential?
- Regulation: to comply with minimum legal and safety standards (licensure?)
- Quality improvement: formative & internal: Desirable?
- Information giving: enabling comparison e.g. by patients
- Marketing: highlight standards at a practice

Levels of application for indicators

General practice level

Disease specific

Preventive care

G practice improvement

G practice accreditation

Quality and safety

RACGP level

Disease specific

Preventive care

G practice improvement

G practice accreditation

Health system improvement

Quality and safety

Health system level

Disease specific indicators

Preventive care

Health system improvement

Quality and safety

**Clinical indicators and the RACGP: Policy endorsed by the 51st RACGP, Council
5 May 2009**

Domains

EPA

Info / finance
Infrastructure
People
Quality & safety

Access (Infras.)

RCGP-PA

Management
Premises...
Teams
Learning org
Patient resp..

HIHP

ICGP

Access
Human res / finance
Prem /IT /recs/ Meds
Team work
Learning Org
Patient info/inv

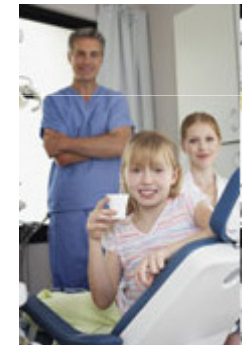
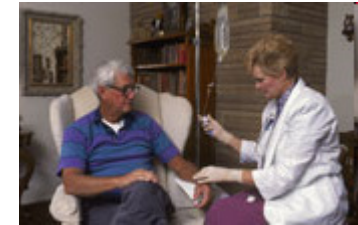
Health & safety
Continuity / coord

Each domain should include a coherent group of indicators/criteria (e.g. premises) that avoid duplication and address specifically defined aspects of quality of care.

Who should measure quality?

Different stakeholders

- Patients
- Clinicians / health professionals
- Managers
- Commissioners/ payers
- Depends on the purpose



Know the baseline!



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