

THEME

Applying Best Practices in Healthcare Delivery

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HOSPITAL SELAYANG MINISTRY OF HEALTH, MALAYSIA



Patient and Family Rights:
Who bears the responsibility for its
development and implementation?

Panel Discussion: The Impelentation and Monitoring
of Patient and Family Rights

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PRESENTATION OVERVIEW

- **INTRODUCTION**
- **TERM OF REFERENCE**
- **DEVELOPMENT**
- **IMPLEMENTATION**
- **MONITORING**





I. INTRODUCTION

Selayang Hospital is a hospital with 960 inpatient beds and 20 clinical disciplines, located in Selayang in the Gombak District, Selangor. This hospital provides secondary and selected national tertiary care services.

The first hospital in Malaysia and the world to operate with T.H.I.S. covering all aspects of its operation.

Selayang Hospital is a centre for Gastroenterology, Rheumatology, Hepatology, Hepatobiliary Surgery, Vitreoretinal Surgery, Colorectal Surgery, Hand & Microsurgery, and Renal Service.



Workforce:
2700.



2. TERM OF REFERENCE

- Private Healthcare Facilities And Services 1998 (Act 586).
- Private Healthcare Facilities And Services (Private Hospitals And Other Private Healthcare Facilities) Regulation 2006
- Laws and Medical Act 1971 and Regulation 1974 other related Acts.
- Medical Ethics, Etiquette and LAWS
- MSQH Hospital Accreditation Stds
- Joint Commission Int. Accreditation. Stds.



- Oath – Hippocratic
Declaration of Geneva
Oath of a Muslim Physician
The Oath of Medical Graduands
MU, UKM, USM, UPM.
Good Clinical Practice
Code of Professional Conduct for Allied
Health Professionals



Private Healthcare Facilities And Services 1998 (Act 586) – PHFS Act 1998

This Act is meant for the regulation and control of private healthcare facilities and services and other health related facilities and services that are related to it.



It is the responsibility of the licensee that the requirements of the act are met with. The main responsibilities are to:

- Ensure the standards of healthcare facilities and services
- Ensure integrity of healthcare professions (medical, nursing, etc)
- Ensure professionalism in all the professions
- Ensure that quality of health care facility and service e.g. Quality Assurance, Mortality Reviews
- Provision of Social interest (public)



- This act spells out clearly the **role, responsibilities and accountability** of the Hospital Directors, CEOs, Boards of Directors, of the Healthcare Facilities and Services.



Hospital began as an institution to care for the sick and with time they have taken on additional roles. Thus the role of hospitals expanded and now hospitals have 4 major roles:-

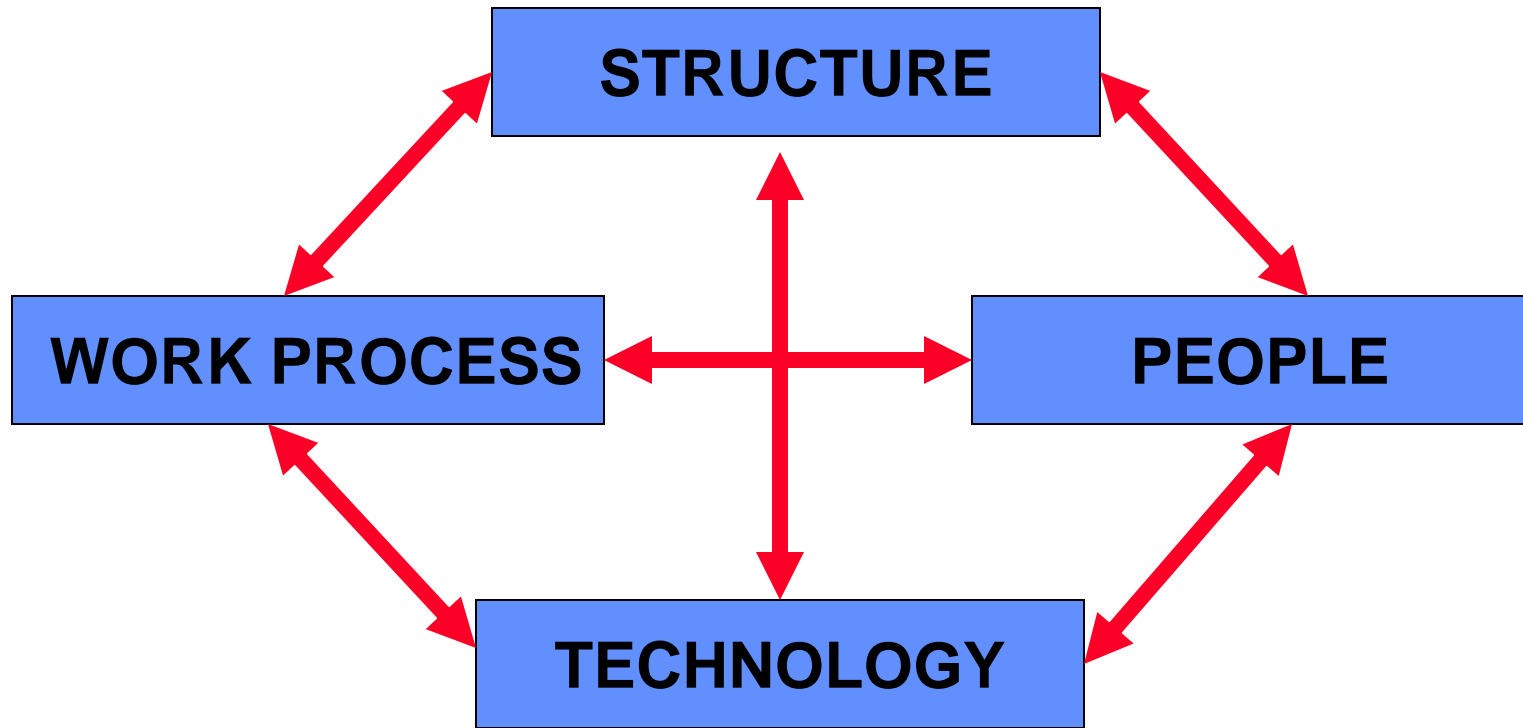
- Patient Care
- Training or Teaching
- Research
- Health Education





Hospital Framework

- Hospital organization is complex
- However complex an organization, there are 4 main components interlinked and interdependent on each other.
- The four main component are structure, people, technology, and work process.



HOSPITAL FRAMEWORK



STRUCTURE

- Structure
- Organization
- Hospital Planning
- Evaluation and monitoring
- Hospital Statistics
- Financial management and budgeting
- Quality Management in Hospitals
- MS ISO 900
- Private Health Care Facilities and Services Acts, 1998
- Computerization and Telemedicine
- Medical Ethics



PEOPLE

- Human Resource Planning
- Leadership
- Motivation
- Supervision
- Communication
- Public and Human Relations
- Time Management
- Meetings
- Handling Complaints
- Recruitment of Personnel
- Performance Appraisal
- Training
- Staff Discipline
- Employee Relations
- Problem Solving and Decision Making
- Managing Change in Hospitals
- Conflict in Hospitals



WORK PROCESS

- Infection and Antibiotic Control
- Accident in Hospitals
- Procurement of Goods and Services
- Hospital Security
- Laundry and Linen Services
- Hospital Waste Management System
- Hospital Management and Information System/Medical Records
- Medico-legal issues
- Hospital Accreditation
- Medical Audit
- Clinical Pharmacy Services
- Kitchen and Catering Services
- Engineering Services
- Health Promoting Hospitals
- Disaster Management
- Palliative Care Services



TECHNOLOGY

- Asset Management
- Inventory Management
- Health Technology Assessment

Note: Any change in the organization will affect the 4 main components of the Hospital Framework.



Patient and Family Rights: Who bears the responsibility for its development and implementation?

- Healthcare facilities and services providers need to establish confidence, trust and clear communication with patients and to understand and protect each patient's cultural, psychosocial and spiritual beliefs/ religion.
- The Facility is responsible for providing processes that support patients and families' rights during care.



Who are they responsible in Hospitals

- Hospitals function as a System and various Departments/Units are Subsystem.
- Organization structure is the foundation on which structure provides the framework of a whole range organizational component exists.
- The Hospital is headed by the Hospital Director, assisted by Head of Department, Unit or service, the so called *The Hospital Management/Governing Body*.
- The establishment of committees are to assist in the implementation of existing and new policies or programs to be introduced.



3. Development of Patient and Family Rights:

The Hospital Management/Governing Body is responsible:

- providing processes that support patient's and families' rights during care
- supports patients' and families' rights to participate in the care process
- Four Areas of Focus
 1. Identify, Protect and Promote Patient Rights
 2. Informed Consent
 3. Research
 4. Organ Donation



Key questions to be considered in the action plan:
e.g.

- What are the rights of patients in our organization?
- How can we protect and promote these rights?
- How can we involve patients and their families in care decisions?
- What do patients with a complaint do?
- How will we educate our staff about rights?
- How will we make sure our patients understand their rights?



Steps

1. A Framework for Patient and Family Rights encompassing four main areas which includes strategy, structure, environment and outcome.
2. Developing a Systemwide Approach to Patient and Family Rights.
3. The Patient and Family Rights Checklist Program
4. Providing the Rights Infrastructure to Lead the Culture Change for Patient and Family Rights Program in line with Patient Safety Goals and Safety Program.



Policy statement (Part of the Framework)

Establishment of:

- Vision statement from a framework approaching Patient and Family Rights.
- An organization's/hospital's description of patient and family rights and responsibilities should be viewed as a policy document with legal significance, processes and distributed hospitalwide.
- Patient and Family Bill of Rights
- Availability of Codes and Supporting Policies.



4. Implementation of Patient and Family Rights:

a. Develop the staff

- Motivate the staff
- Provide training for all levels of the staff
 - Orientation training
 - Public relation training and
 - Technical training for all level of staff
- Educate staff and give regular feedback regarding their performance
- Encourage social activities - will help the staff to improve teamwork and know each other.
- Praise the staff when due.
- Take disciplinary action on the problem staff



b. Improve communication in the hospital

- Two way communication with staff
 - circular
 - meetings
- Regular purposeful meeting
- Good working relationship with media

c. Improve physical environment of the hospital



d. Engaging Our Workforce and and involement of public during implementation phase is crucial:

1. Comunication, Communicate, Communicate!

Communication and communicate – with employee, with customers, with physicians, with board members and with the community at large.



2. How to Involve Staff

- Educate
- Respect unique needs (physicians, nursing, midlevel managers, and so forth)
- Communicate clearly and openly
- Discuss challenges honestly
- Encourage involvement across all levels
- Seek feedback



3. Everybody makes a difference – tell the story.
Use them to recognize outstanding service, congratulate deserving employee, and reinforce the emerging culture.
4. Other tools to communicate
 - communication boards,
 - employee forums
 - cascade learning kits

Communication is key to driving culture change



5. People Make a Difference

- Each staff member must play a role in achieving the set standards
- Each staff member can help to ensure Patient and Family Rights where is the norm in the service delivery.



e. Executive Leadership

- Executive Rounds
- Executive participation on Patient and Family Rights Team.
- Executive emphasis on Patient and Family Rights in all Hospital Meetings.
- Patient and Family Rights is monthly agenda item at board and medical executive committee meetings.



Leadership Support

Key to eventual success

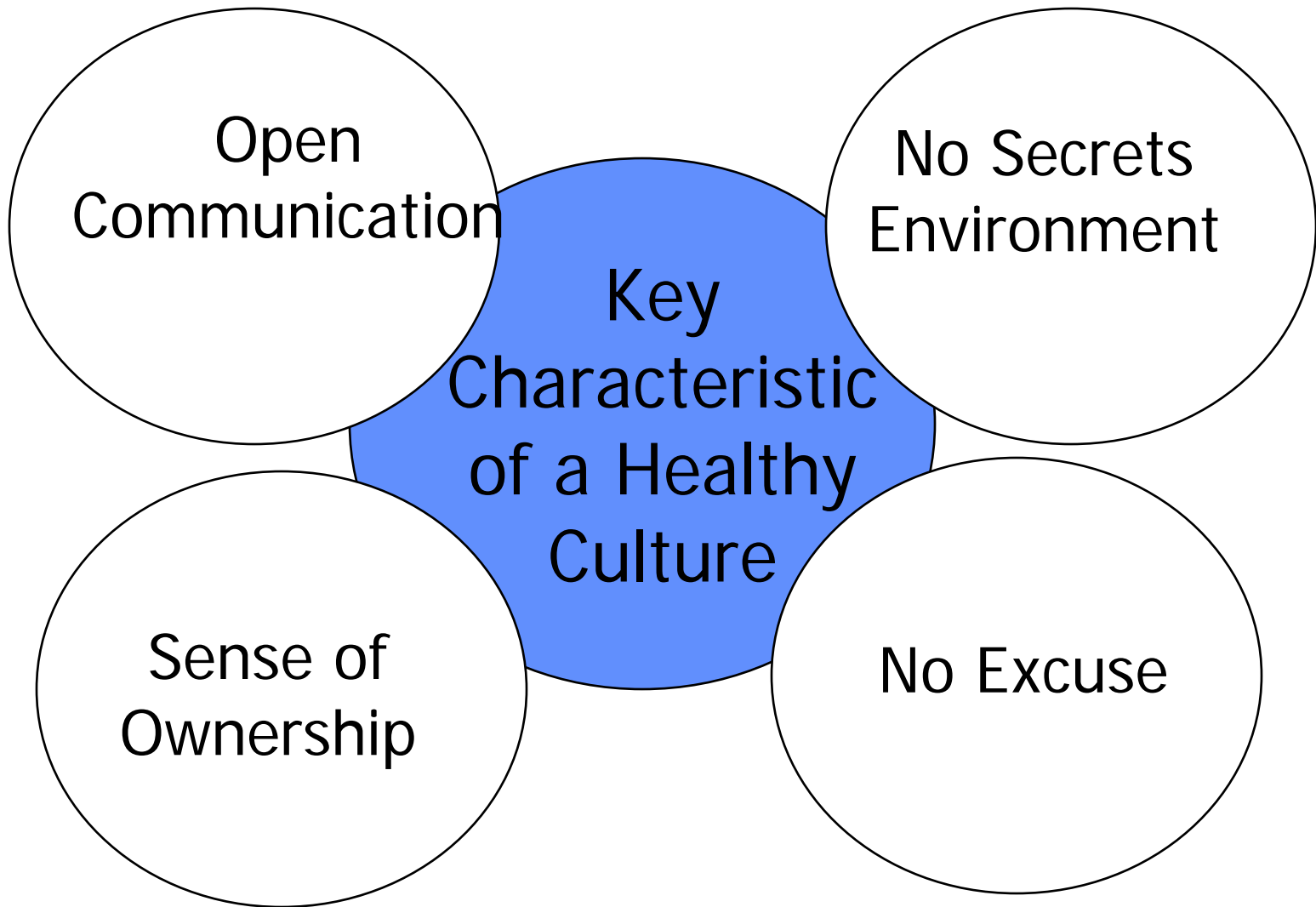
- Governing body
- Senior leaders
- Clinical leaders



f. Listening and learning

Create a feedback rich environment

- the more information we have about the perception and opinions of our employee, patients and their families, physician and service area residents, the likely we are to find additional ways to improve our performance and effectiveness and consequently their level of satisfaction.





Culture will drive strategy
Or Culture will drag strategy.

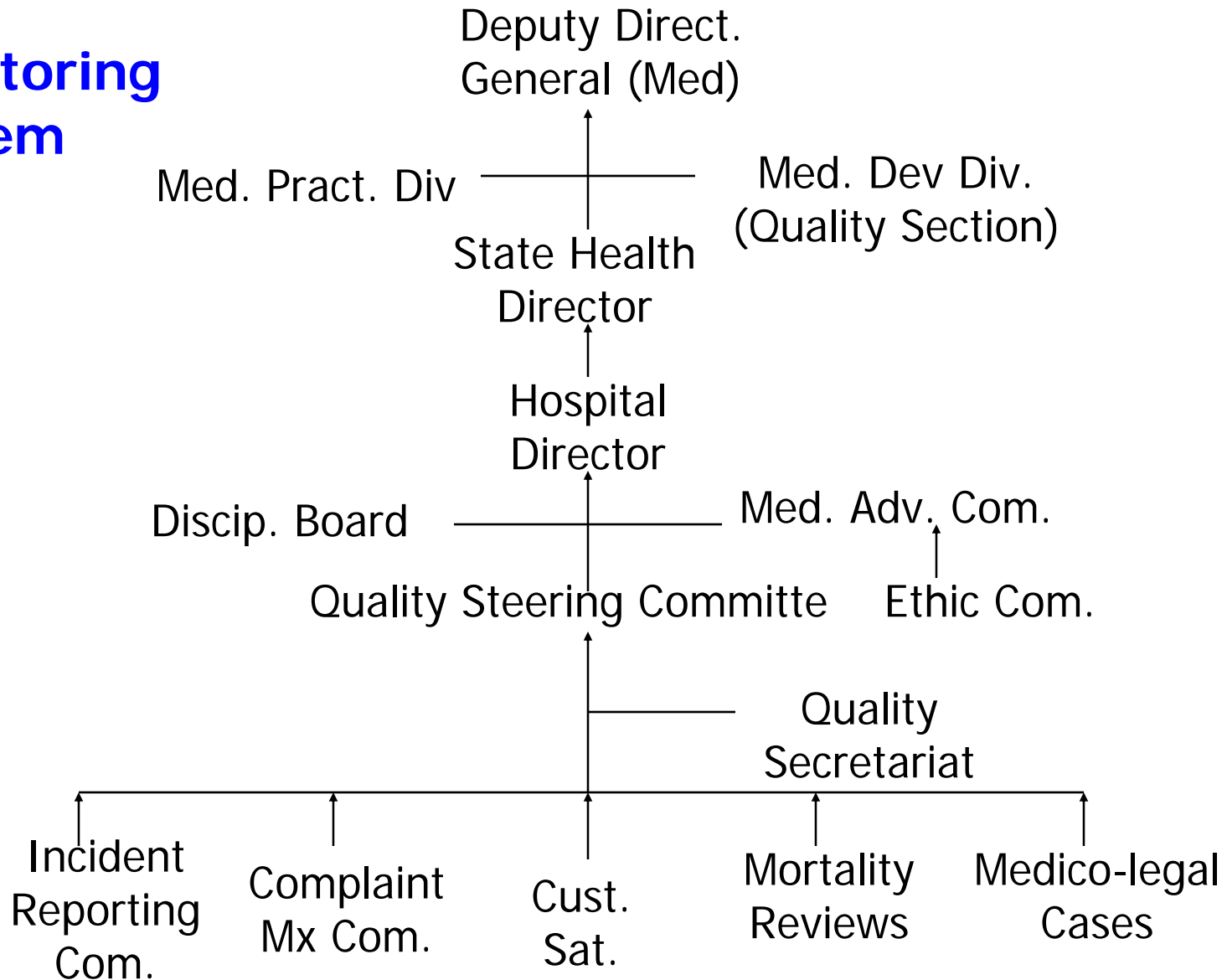


5. Monitoring

1. Event Reporting/Incident Reporting
 - Anonymous reporting
 - Simplified reporting form
2. Event Investigation
 - Root cause analysis
 - Risk assessment
3. Complaints
4. Medico-legal
5. Customers Satisfaction Survey.
6. Internal Control and Corrective Action



Monitoring System





Continuous improvement

1. Raise awareness
2. Set service expectations and standards of behavior.
3. Identify and eliminate barrier and obstacles
4. Learn and develop skills
5. Listen to your customers
6. Reinforce and support continuous improvement





THANK YOU