
LD.10 Hospital leaders drive effectively the quality improvement initiatives in the hospital.

LD.10.1 Hospital leaders are familiar with the basic concepts and tools used in continuous quality improvement, such as:

LD.10.1.1 Basic data analysis and interpretation of quality reports.

LD.10.1.2 Basic tools used in quality management (e.g., PDCA cycle).

LD.10.1.3 Root cause analysis.

LD.10.2 Hospital leaders participate actively in quality improvement plans and projects.

LD.10.3 Information about the quality and performance of the services offered (including the accreditation status) are communicated to the staff, governing body, public, community, and other customers in an appropriate format.

Standard Intent:

Achieving high levels of performance usually are not easily attainable without leadership support to ensure staff engagement and to provide the context for change and improvement. Therefore, leaders are required to actively engage in different activities of quality improvement, including training and support and participation in improvement teams.

Basic data analysis and interpretation of quality reports, different quality tools and root cause analysis, among others, are important means used in day to day effective management, thus, leaders must be trained on these basic concepts and tools.

To ensure the involvement of staff and community in the care process and to provide them with feedback about the hospital performance, effective communication means (e.g., web pages, newsletters, bulletin boards) should be used to provide staff, governing body, public, community, and other customers with information about the quality and performance of the services offered.

LD.11 Hospital leaders consider the community input during planning for health care needs of the population.

LD.11.1 Hospital leaders identify the relevant community leaders (e.g., members of the regional council, members of municipalities, patient's rights advocates, civil defense, health related commissions and councils, other society organizations and representatives).

LD.11.2 Local community leaders participate in planning for the current and future health care needs of the population (e.g., planning for health-relevant demographic changes, public health issues, groups with special needs).

LD.11.3 Hospital leaders plan with the community leaders to provide services related to health education and health promotion for patients and the wider community.

Standard Intent:

To provide better health services and improve health outcomes, some basic information is needed about patients' needs and their community features; such as address, age, gender, race and ethnicity, endemic diseases, health problems, etc. Improved collection of this information will allow hospitals to develop an understanding of the patients and communities they serve and to identify and address any differences in health outcomes they may face.

Hospitals must bear effort to list and involve all local community leaders in the area in identifying community healthcare needs and putting hospital strategies. Community leaders may include but not limited to members of the regional council, members of municipalities, patient's rights advocates, civil defense, health related commissions and councils, other society organizations and representatives.

Hospital planning sessions should consider inputs from local community leaders for the current and future health care needs of the population in addition to health education and health promotion for patients and the wider community.

LD.12 Hospital leaders work collaboratively to develop an effective planning process.

LD.12.1 The planning process includes soliciting inputs from patients and staff (e.g. feedback from patient satisfaction surveys and patient's/staff complaints).

LD.12.2 The planning process is consistent with the hospital's mission and strategic directions.

LD.12.3 The planning process considers cultural and religious needs of the local community.

LD.12.5 The planning process ensures coordination and integration of services throughout the hospital.

LD.12.6 The planning process ensures efficient use of different resources through regular evaluation by hospital leaders against plans and budgets.

LD.12.7 The planning process considers the upgrade or replacement of buildings, equipment, and other resources.

LD.12.4 The planning considers environmental and financial factors and is consistent with the hospital's mission and strategic direction.

Standard Intent:

A properly designed and facilitated planning process will efficiently guide the work team from organizational goals to specific objectives and actions for every member, that leads to better performance in all areas and a stronger team culture.

Planning has to be precise and effective for the success of the organization and its departments and units. Every organization unit has its own problems and these are taken