

Gap analysis with action plan of 2 GAHAR standards

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We will make our project about two standard:

- ACT.03 : Accurate patient identification through at least two identifiers to identify the patient and other elements associated with his plan of care.
- PCC.16 : During hospitalization, the patient stay is comfortable.



INTRODUCTION

- ❖ **Acess, continuity and transition of care:**

- It can help health care providers to identify the gap in the care quality and improve care coordination between different providers.

- ❖ **Patient centeredness culture:**

- ▶ Patient centered care has been shown to improve patient outcomes, including better health outcomes, better treatment, and higher patient satisfaction.
- ▶ Patient centered care can help increase patient engagement in their own health care, enhance trust and communication between patient and the health care professionals.

Access, Continuity, and Transition of Care chapters



Purpose of Access, Continuity, and Transition of Care chapter:

- ▶ The main objective is to ensure that organizations provide and maintains equitable, effective access to patient care services in a safe and efficient way.
- ▶ The patient may start accessing healthcare services through the emergency room, outpatient department, admission office, dialysis unit, daycare unit, or registration/admission offices.
- ▶ Sometimes, care plans change, and another doctor needs to be called in for a consultation or even become completely responsible for patient care. These situations also need to be addressed by the hospitals, and clear processes need to be established.
- ▶ Sometimes, patients need to be physically transported from one place to another; this process entails a risk of mishandling and missing some information, organizations need to develop a process to avoid these risks.
- ▶ Finally, upon discharge, transfer, or referral to a service outside the hospital, clear information needs to be documented.

1st standard:

ACT.03 Accurate patient identification through at least two identifiers to identify the patient and other elements associated with his plan of care

- ❑ Providing care or performing interventions on the wrong patient are significant errors, which may have grave consequences.
- ❑ Using two identifiers for each patient is the key driver in minimizing such preventable errors, which is especially important with the administration of high alert medications or performing high risk or invasive procedures.
- ❑ The hospital develops and implements a policy and procedures to guide the process of patient identification. The policy addresses at least the following:



The policy should address the following:

- a) Two unique identifiers (personal).
- b) Occasions when verification of patient identification is required.
- c) Elements associated with care such as medications, clinical specimens, blood and blood products and others.
- d) Method to document identifiers such as wrist bands, ID cards, and others.
- e) The exclusion criteria for the patient identification such as the patient's bed number, patient's room number and others.
- f) Special situations when patient identification may not follow the same process, such as for new born babies, unidentified patients, disasters and others.

ACT.03 NSR.01 Accurate patient identification through at least two identifiers to identify the patient and other elements associated with his/her plan of care.

Safety

Keywords:

Patient identification

Intent:

Providing care or performing interventions on the wrong patient are significant errors, which may have grave consequences. Using two identifiers for each patient is the key driver in minimizing such preventable errors, which is especially important with the administration of high alert medications or performing high risk or invasive procedures.

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- a) Two unique identifiers (personal).
- b) Occasions when verification of patient identification is required.
- c) Elements associated with care such as medications, clinical specimens, blood and blood products and others.
- d) Method to document identifiers such as wrist bands, ID cards, and others.
- e) The exclusion criteria for the patient identification such as the patient's bed number, patient's room number and others.
- f) Special situations when patient identification may not follow the same process, such as for new born babies, unidentified patients, disasters and others.

Survey process guide:

- GAHAR surveyor may review relevant policy to check the required two identifiers (personal) and the occasions when they should be used.
- GAHAR surveyor may review an appropriate number of medical records and check each sheet for the presence of the two identifiers mentioned in the policy.
- GAHAR surveyor may interview a number of healthcare professionals (can be 10) to ask them about the two identifiers and when should they be used.
- GAHAR surveyor may observe patient identification wristbands for the two identifiers and to observe the patient identification process before procedures or care.

Evidence of compliance:

1. The hospital has an approved policy and procedure for patient identification that addresses all elements mentioned in the intent from a) through f).
2. All healthcare professionals are aware of hospital policy.
3. The patient's identification occurs according to the policy.
4. The patient's identifiers are recorded in the patient's medical record.
5. The hospital tracks, collects, analyzes, and reports data on the patient's identification process.
6. The hospital acts on improvement opportunities identified in its patient identification process.

Related standards:

ACT.16 Referral and transfer sheet; DAS.08 Medical imaging results; DAS.15 Pre-examination process; ICD.17 Order and request; SAS.07 Time-out.

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➤ **Quality dimension : safety**



Gap Analysis:

| standard | Scorable items | requirement | status | Comment and findings | Required sources |
|---|---|--|-------------------|--|-----------------------------|
| Accurate patient identification through at least two identifiers (Name & National ID) to identify the patient and other elements associated with his plan of care. | approved policy and procedure for patient identification. | 1-Policy of patient identification | Met 90% | Hospital has approved policy and procedure for patient identification. | 1-Qualified staff. |
| | Awareness of All healthcare professionals about hospital policy. | 2-Interview staff to ensure their awareness. | Partially met 60% | Not all staff aware about hospital policy. | 2- Accurate medical record. |
| | patient's identification occurs according to the policy. | 3-patient's identifiers in the patient's medical record. | Met 80% | patient's identification occurs according to the policy. | |
| | Recording of patient's identifiers in the patient's medical record. | | Partially met 70% | Not all patient identifiers recorded in medical record. | |

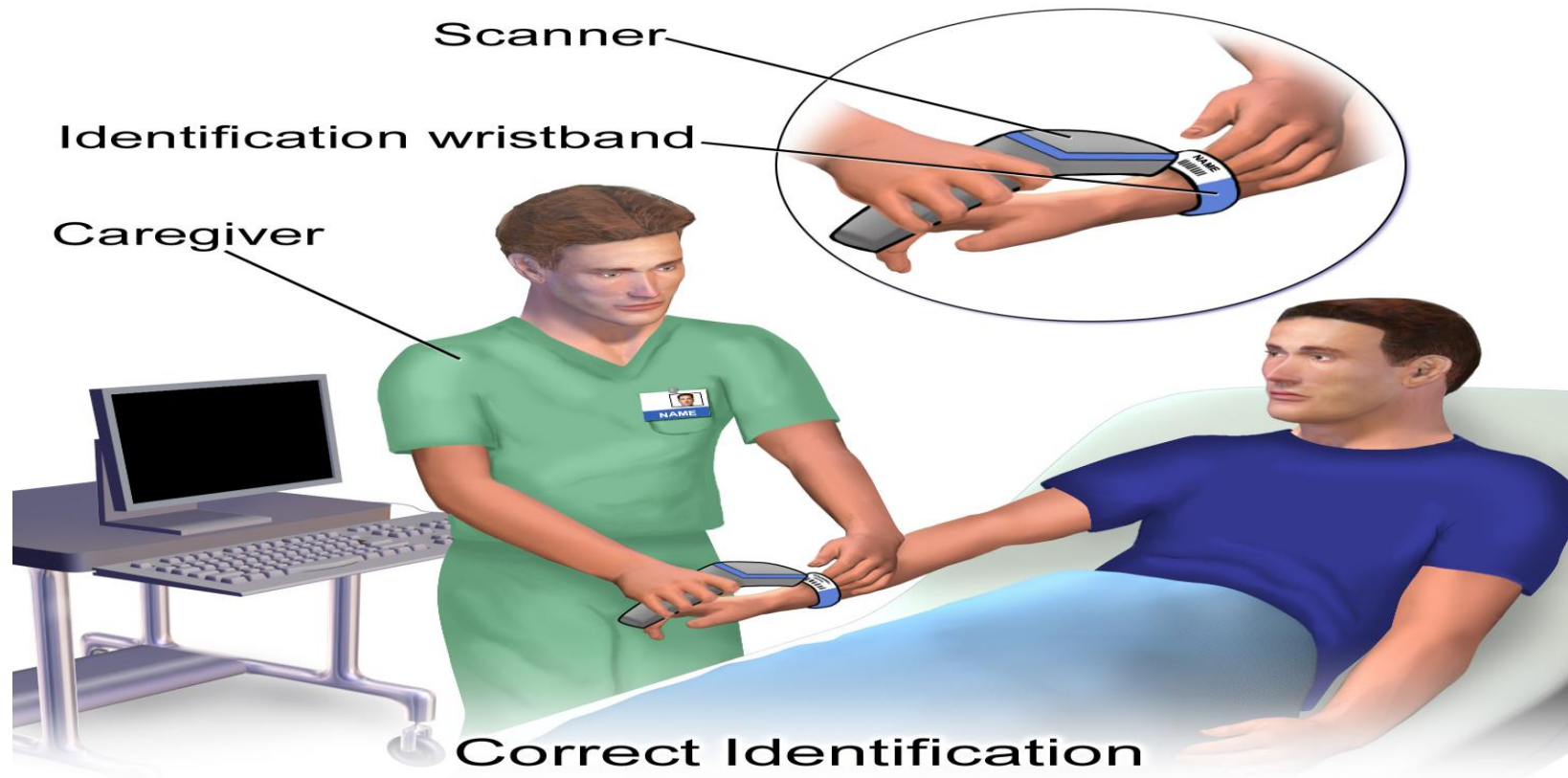
| standard | Scorable item | requirement | status | Comment and findings | Required sources. |
|---|--|--|-------------|---|---|
| Accurate patient identification through at least two identifiers to identify the patient and other elements associated with his plan of care. | track, collect analyze, and report data on the patient's identification process. | Check data collect on patient identification process. | Not met 40% | 1-most of patients do not wear wrist bands. 2-Most of treatments have no label to ensure right treatment received by right patients. | 1-Qualified staff. 2-Accurate medical record. |
| | improvement opportunities identified in its patient identification process. | Check methods that improve patient identification process. | Met 80% | The hospital acts on improvement opportunities identified in its patient identification process. | 3-Effectivene method to enhance patient identification such as labels and wrist bands |

ACTION PLAN from June 2023 to august 2023:

Our hospital score for this standard is 70% it is partially met.

| What | How | Who | Where | When |
|--|---|---|--|---|
| Enhance the Awareness of All healthcare professionals about hospital policy of patient identification. | 1-regular training of staff on patient identification policy and procedure. 2-use reminders such as poster in staff area to magnify principles of importance of patient identification. | Head of quality . | Quality department | In august 2023 (By the end of three months the percentage will be 80%) |
| Recording of all patient's identifiers in the patient's medical record. | 1-develop policy and procedure that require staff to record all patient identifiers in medical record. 2-use technology as barcode scanning to help staff accurately identify patients. | Head of quality. | ▪Quality department. ▪Medical records room. | |
| Method to improve patient identification process. (wrist band-label) | 1-Educate patient who refuse to wear wristbands about its importance for his safety. 2- if patient refuse because of allergy, use alternative material of it. 3-check labels on the treatment of patient before administration. 4-check collected data against identification band before any administration or operation. | 1-head of nurses. 2-head of quality. | Nursery department | |

Using technology as barcode scanning to help staff accurately identify patients.



2-Purpose of Patient-Centeredness Culture chapter:

- This chapter is written and arranged in a logical order that describes the infrastructure and culture needed to comply with the chapter requirements.
- It describes basic patient rights and responsibilities.
- It touches on those techniques and cultural changes that organizations need to address while building a patient-centered culture.



2nd standard:
PCC.16: During hospitalization, the patient stay is comfortable



PCC.16 During hospitalization, the patient stay is comfortable:

Quality dimension: patient centeredness

- Creating a comfortable place for patients to get well again is integral in ensuring that they will leave the hospital with a positive outcome.
- More than 600 studies have linked the hospital-built environment to factors such as patient satisfaction, stress, health outcomes, and overall healthcare quality, as quoted by the American Hospital Association.
- Overarching factors in the healthcare hospital environment include noise levels, patient and pain management, and environmental factors inhibiting or facilitating communication; these factors all tie together.
- When an environment is too noisy, patients may have a hard time getting sleep or being comfortable, inhibiting their abilities to recover and may also limit communication.
- Cleanliness of the hospital is crucial for keeping patients comfortable and at ease during their stay, and cleanliness creates a calmer atmosphere.
- The hospital ensures that the patient's stay is comfortable and suitable for the patient's.

PCC.16 During hospitalization, the patient's stay is comfortable.

Patient-centeredness

Keywords:

Comfortable stay

Intent:

Creating a comfortable place for patients to get well again is integral in ensuring that they will leave the hospital with a positive outlook. More than 600 studies have linked the hospital-built environment to factors such as patient satisfaction, stress, health outcomes, and overall healthcare quality, as quoted by the American Hospital Association. Overarching factors in the healthcare hospital environment include noise levels, patient and pain management, and environmental factors inhibiting or facilitating communication; these factors all tie together. When an environment is too noisy, patients may have a hard time getting sleep or being comfortable, inhibiting their abilities to recover. This may also limit communication. Cleanliness of the hospital is crucial for keeping patients comfortable and at ease during their stay, and cleanliness creates a calmer atmosphere. The hospital ensures that the patient's stay is comfortable and suitable for the patient's and family's needs.

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Survey process guide:

- GAHAR surveyor may visit multiple patient rooms of multiple economic statuses to assess their comfort.
- GAHAR surveyor may interview patients or staff to inquire about visiting hours, healthy food availability, and stay comfortable.

Evidence of compliance:

1. Patients are allowed to control the environment of their space, such as ventilation, temperature, lighting, and noise.
2. Comfortable spaces and equipment are available for patient use.
3. Healthy food is available for patients and their companions 24 hours a day and seven days a week.
4. Visiting hours are convenient for patients and their families.

Related standards:

PCC.15 Physical access and comfort

Evidence of compliance:

- ▶ Patients are allowed to control the environment of their space, such as ventilation, temperature, lightning, and noise.
- ▶ Comfortable spaces and equipment are available for patient use.
- ▶ Healthy food is available for patients and their companions 24 hours a day and seven days a week.
- ▶ Visiting hours are convenient for patients and their families.



GAP Analysis:

| Standard | Scorable item | Requirement | Statuses | Comment findings | Required resources |
|--------------------------------------|---|---|-------------------|--|--|
| Comfortable patient stay in hospital | Controlled environment of the patient space. | 1-policy to ensure comfortable stay. | Partially Met 60% | There are comfortable furniture , good lightning, and good ventilation but there are noise and no cleaning room. | 1-Enough patient rooms. 2-Qualified and trained staff. 3-Timetable to regulate visits . |
| | Comfortable spaces and equipment are available for patient use. | 2-programme for regular maintenance of equipment. | Met 80% | There is adequate space for patient to move around. There is regular maintenance and all staff trained for appropriate use of equipment. | |
| | Availability of healthy food for patients. | 3-presence of nutritional guidelines. | Partially met 65% | There are healthy food and special diets such as vegan, vegetarian or gluten free options but the ingredients are not all fresh. | |
| | Visiting hours are convenient for patients and their families. | 4-check schedule of patient visits. | Not met 40%: | No flexible and convenient visiting hours. | |

Action plan from June 2023 to august 2023:

Our hospital score for this standard is 61.25% so it is partially met.

| What | How | Who | Where | When |
|--|--|---|--------------------------|---|
| Reduction of noise and increasing room cleanance. | 1- Using sound isolator material to minimize the noise. 2- Monitoring the noise level to ensure that it is within limit. 3-cleaning room schedule. 4-training housekeeping on cleaning policy. 5-use appropriate cleaning product. | 1-Head of infection control team. 2-Head of quality team. | patient room. | In august 2023 (By the end of three months the percentage will be 80%) |
| Availability of healthy food with fresh ingredients. | 1-Estaplish relationships with suppliers to get fresh ingredients. 2-Train kitchen staff on the importance of using fresh food and how to prepare healthy meals and how to properly store and handle them. | 1-head of kitchen staff. 2-head of infection control team. | Kitchen of the hospital. | |
| Enhance Flexibility of visiting hours. | 1-regular check of visiting timetables. 2-comfortable waiting area with wi-fi and refreshment. 3- use technology to allow patient to connect with those who unable to visit him. | 1-Receptionest. 2-head of quality team. | Hospital reception. | |



Thank you