13. Improving Performance

CODE	STANDARDS	CRITERIA	HOSPITAL	PHIC
13.1.a	The organization has a planned systematic organization-wide approach to patient safety, process design and performance improvement.	a. An organization wide policy on quality and patient safety is developed collaboratively. CORE	_ DOCUMENT REVIEW _ LEADERSHIP INTERVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW _ LEADERSHIP INTERVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written policy and procedures including other relevant supporting documents as prescribed in the criterion. Put a v mark if present and X mark if none. As this is core, the evidence score is either **0** or **3**.

For leadership interview, select at least ONE hospital leader. Put a v mark if the leader was able to discuss and offer examples of how this criterion is achieved and X mark if otherwise. As this is core, the evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a v mark for the staff who is able to explain the Hospital QA Program (relevant to his work place) and X mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of patients interviewed. As this is core, the evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **0**
• If 1 out of 3, the evidence score will be **0**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 3 evidences to get the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record* to get criterion score.

CODE	STANDARDS	CRITERIA	HOSPITAL	PHIC
13.1.b	The organization has a planned systematic organization-wide approach to patient safety, process design and performance improvement.	b. The policy prioritizes the key areas of operations in its scope.	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written policy and QI Program as prescribed in the criterion. Put a v mark if compliant and X mark if none at all. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record* to get criterion score.

CODE	STANDARDS	CRITERIA	HOSPITAL	PHIC
13.1.c	The organization has a planned systematic organization-wide approach to patient safety, process design and performance improvement.	c. The policy identifies the individual/s who oversees the quality and patient safety program.	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written policy as prescribed in the criterion. Put a <u>v</u> mark if compliant and <u>X</u> mark if none at all. Evidence score is either <u>0</u> or <u>3</u>.

The evidence score shall serve as the proof of performance score.

Determine track record score.

Combine proof of performance + track record* to get criterion score.

13.1.d	The organization has a planned systematic organization-wide approach to patient safety, process design and performance improvement.	d. The policy specifies the approach and methods to be used for quality improvement and risk management.	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written policy and procedure including other documents prescribed in the criterion. Put a <u>v</u> mark if compliant and <u>X</u> mark if otherwise. Evidence score is either <u>0</u> or <u>3</u>.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.1.e	The organization has a planned systematic organization-wide approach to patient safety, process design and performance improvement.	e. The policy defines the roles of leaders, managers, staff, patients and their families and relevant third parties.	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written policy and procedure as prescribed in the criterion. Put a <u>v</u> mark if compliant and <u>X</u> mark if otherwise. Evidence score is either <u>0</u> or <u>3</u>.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.2.a	Leadership and management support and sustain the patient safety and quality improvement program.	a. The organization provides resources for staff hiring and training in quality improvement and patient safety.	_ DOCUMENT REVIEW _ LEADERSHIP INTERVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW _ LEADERSHIP INTERVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written policy and procedure as prescribed in the criterion. Put a <u>v</u> mark if compliant and <u>X</u> mark if otherwise. Evidence score is either <u>0</u> or <u>3</u>.

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is

achieved and X mark if otherwise. Determine evidence score as either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and X mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. The evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 3 evidences to get the proof of performance score.

The track record is <u>n/a</u>.

The proof of performance score will serve as the criterion score.

13.2.b	Leadership and management support and sustain the patient safety and quality improvement program.	b. The organization's leaders provide resources for the staff to carry out continuous quality improvement activities.	_ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW	_ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and X mark if otherwise. Evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> mark if the staff's explanation showed achievement of the criterion and X mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed, and then get evidence score:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 2evidences to get the proof of performance score.

The track record is <u>n/a</u>.

The proof of performance score will serve as the criterion score.

13.2.c	Leadership and management support and sustain the patient safety and quality improvement program.	c. There are resources available for developing or adopting clinical practice guidelines and pathways.	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check presence of documentation activities (eg., CPGs, cPaths, research materials, medical journal subcscriptions, etc.). Put a <u>v</u> mark if compliant and X mark if none. Evidence score is either **0** or **3**.

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and X mark if otherwise. Evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and X mark if otherwise.

Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. The evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 3 evidences to get the proof of performance score.

The track record is <u>n/a</u>.

The proof of performance score will serve as the criterion score.

13.2.d	Leadership and management support and sustain the patient safety and quality improvement program.	d. The organization provides resources for the formal and collaborative evaluation of care using analysis of process and outcomes data.	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check for presence of document prescribed in the criterion. Put a <u>v</u> mark if compliant and <u>X</u> mark if none. Evidence score is either **0** or **3**.

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and <u>X</u> mark if otherwise. Evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 3 evidences to get the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.3.a	New services, programs and processes of care are designed collaboratively based on scientific evidence, clinical standards, cultural values and patient preferences.	a. New services, programs and processes of care are developed collaboratively by leaders, managers and staff.	_ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW	_ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For leadership interview, select at least ONE hospital leader (QA person). Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and <u>X</u> mark if otherwise. Determine evidence score as either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 2 evidences to get the proof of performance score.

The track record is <u>n/a</u>.

The proof of performance score will serve as the criterion score.

13.3.b	New services, programs and processes of care are designed collaboratively based on scientific evidence, clinical standards, cultural values and patient preferences.	b. New services, programs and processes of care are developed on the basis of: • Best available scientific evidence • Professional and clinical standards of care • Cultural values • Patients' and families' preferences	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of written processes as prescribed in the criterion. Put a <u>v</u> mark if achieved and <u>X</u> mark for none at all. Evidence score is either <u>**0**</u> or <u>**3**</u>.

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and <u>X</u> mark if otherwise. Evidence score is either <u>**0**</u> or <u>**3**</u>.

Combine the scores for the 2 evidences to get the proof of performance score.

Determine track record score.

Combine proof of performance + track record to get criterion score.

13.3.c	New services, programs and processes of care are designed collaboratively based on scientific evidence, clinical standards, cultural values and patient preferences.	c. Clinical practice guidelines or clinical pathways for the top 10 causes of admissions and/or consultations or PhilHealth-adopted guidelines are disseminated and monitored.	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check presence of any ONE for compliance (see examples). Put a <u>v</u> mark if there is at least one present and <u>X</u> mark for none at all. Evidence score is either <u>**0**</u> or <u>**3**</u>.

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and <u>X</u> mark if otherwise. Evidence score is either <u>**0**</u> or <u>**3**</u>.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
• If 3 out of 3, the evidence score will be <u>**3**</u>
• If 2 out of 3, the evidence score will be <u>**2**</u>
• If 1 out of 3, the evidence score will be <u>**1**</u>
• If 0 out of 3, the evidence score will be <u>**0**</u>

Combine the scores for the 3 evidences to get the proof of performance score.

Determine track record score.

Combine proof of performance + track record to get criterion score.

13.3.d	New services, programs and processes of care are	d. Clinical practice guidelines (CPGs)or clinical	_ DOCUMENT REVIEW	_ DOCUMENT REVIEW

	designed collaboratively based on scientific evidence, clinical standards, cultural values and patient preferences.	pathways(CPs) are: • Selected from available evidence-based CPGs or CPs. • Approved by leaders and managers for adoption and implementation. • Adapted to the organization's available resources. • Tested and implemented. • Monitored for effectiveness	_ LEADERSHIP AND MANAGEMENT INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ LEADERSHIP AND MANAGEMENT INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, look for presence of documentation of activities and related proofs. Put a v mark for compliance if there is at least one present and X mark for none at all. Evidence score is either **0** or **3**.

For leadership interview, select ONE appropriate leader. The leader should be able to show knowledge on the subject matter. Put a v mark if expected answers were given to all the questions and X mark if answers sound non-consistent. Evidence score is either **0** or **3**.

Combine the scores for the 2 evidences to get the proof of performance score.

Determine track record score.

Combine proof of performance + track record to get criterion score.

13.3.e	New services, programs and processes of care are designed collaboratively based on scientific evidence, clinical standards, cultural values and patient preferences.	e. New clinical practice guidelines or pathways are developed or adopted every year.	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check for presence of documentation and related proofs (see manual). It should be based on hospital category level. Put a v mark if compliant and X mark if none at all. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.4.a	Management is primarily responsible for developing, communicating, and implementing a comprehensive quality improvement and patient safety program throughout the organization and delegating responsibilities to appropriate personnel for its day-to-day implementation.	a. Policies and procedure define the roles and responsibilities of managers	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check policy and procedure and other related documents supporting achievement of criterion. Put a v mark if compliant and X mark if none at all. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.4.b	Management is primarily responsible for developing,	b. Managers oversee the development and	_ LEADERSHIP AND MANAGEMENT INTERVIEW	_ LEADERSHIP AND MANAGEMENT INTERVIEW

			_ STAFF INTERVIEW	_ STAFF INTERVIEW
	communicating, and implementing a comprehensive quality improvement and patient safety program throughout the organization and delegating responsibilities to appropriate personnel for its day-to-day implementation.	implementation of the quality improvement and patient safety programs of their respective units or departments.	PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For leadership interview, select at least ONE hospital leader. Put a v̲ mark if the leader was able to discuss and offer examples of how this criterion is achieved and X̲ mark if otherwise. Determine evidence score as either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a v̲ if the staff's explanation supports achievement of the criterion and X̲ mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Get evidence score:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 2 evidences to get the proof of performance score.

The track record is n̲/̲a̲.

The proof of performance score will serve as the criterion score.

13.4.c	Management is primarily responsible for developing, communicating, and implementing a comprehensive quality improvement and patient safety program throughout the organization and delegating responsibilities to appropriate personnel for its day-to-day implementation.	c. Managers train and supervise their staff in applying quality improvement and patient safety principles to their daily activities.	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check written proof that managers train and supervise their staff in applying QI and patient safety principles. Put a v̲ mark if present and X̲ mark if none at all. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score.

Combine proof of performance + track record to get criterion score.

13.5.a	All service units and staff are responsible for, and demonstrate involvement in performance improvement that results in better services in internal and external clients.	a. Quality improvement activities incorporate the following elements: • Monitoring, assessment, analysis and evaluation of activities. • Appropriate and timely action. • Evaluation of the effectiveness of any action taken. • Feedback of evaluation results • Quality improvement activities are documented.	_ DOCUMENT REVIEW _ STAFF INTERVIEW _ DIRECT OBSERVATION PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW _ STAFF INTERVIEW _ DIRECT OBSERVATION PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check for presence of written policy and other relevant documents. Put a v̲ mark if at least one is present and X̲ mark if none at all. Evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
- If 3 out of 3, the evidence score will be <u>3</u>
- If 2 out of 3, the evidence score will be <u>2</u>
- If 1 out of 3, the evidence score will be <u>1</u>
- If 0 out of 3, the evidence score will be <u>0</u>

For direct observation, check presence of structural inputs to confirm explanation. Put a <u>v</u> mark for compliance if there is at least one present and <u>X</u> mark if none at all. Evidence score is either <u>0</u> or <u>3</u>.

Combine the scores for the 3 evidences to get the proof of performance score.

Determine track record (based on document review).

Combine the proof of performance score + track record score to get criterion score.

13.6.a	Managers and staff evaluate the effectiveness of the quality improvement program and take action to address any improvements required.	a. Managers monitor and evaluate their staff members' adherence to quality improvement and patient safety policies.	_ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW _ DIRECT OBSERVATION PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW _ DIRECT OBSERVATION PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For leadership interview, select at least ONE hospital leader. Put a <u>v</u> mark if the leader was able to discuss and offer examples of how this criterion is achieved and <u>X</u> mark if otherwise. Evidence score is either <u>0</u> or <u>3</u>.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
- If 3 out of 3, the evidence score will be <u>3</u>
- If 2 out of 3, the evidence score will be <u>2</u>
- If 1 out of 3, the evidence score will be <u>1</u>
- If 0 out of 3, the evidence score will be <u>0</u>

For direct observation, check for presence of inputs. Put a <u>v</u> mark if compliant and <u>X</u> mark for none at all. Evidence score is either <u>0</u> or <u>3</u>.

Combine the scores for the 3 evidences to get the proof of performance score.

Determine track record score.

Combine the proof of performance score + track record score to get criterion score.

13.6.b	Managers and staff evaluate the effectiveness of the quality improvement program and take action to address any improvements required.	b. Managers are evaluated by leaders and staff.	_ DOCUMENT REVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____	_ DOCUMENT REVIEW _ STAFF INTERVIEW PROOF OF PERFORMANCE: _____ TRACK RECORD: _____

For document review, check for presence of supervisor survey report and staff satisfaction report. Put a <u>v</u> mark if at least one is present and <u>X</u> mark if none at all. Evidence score is either <u>0</u> or <u>3</u>.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
- If 3 out of 3, the evidence score will be <u>3</u>

• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 2 evidences to get the proof of performance score.

Determine track record score.

Combine proof of performance score + track record score to get criterion score.

13.6.c	Managers and staff evaluate the effectiveness of the quality improvement program and take action to address any improvements required.	c. Results of care evaluation are fed back to the health care providers concerned.	_ DOCUMENT REVIEW _ STAFF INTERVIEW	_ DOCUMENT REVIEW _ STAFF INTERVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check for presence of documentation of activities (see examples). Put a <u>v</u> mark if at least one is present and <u>X</u> mark if none at all. Evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a <u>v</u> if the staff's explanation supports achievement of the criterion and <u>X</u> mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• if 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 2 evidences to get the proof of performance score.

Determine track record score.

Combine the proof of performance score + track record score to get criterion score.

13.6.d	Managers and staff evaluate the effectiveness of the quality improvement program and take action to address any improvements required.	d. Results of evaluation of care are routinely presented and discussed in meetings of top management.	_ DOCUMENT REVIEW	_ DOCUMENT REVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check presence written policies and other documentation activities as prescribed in the criterion. Put a <u>v</u> mark if compliant and <u>X</u> mark if none at all. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score.

Combine proof of performance + track record to get criterion score.

13.6.e	Managers and staff evaluate the effectiveness of the quality improvement program and take action to address any improvements required.	e. Evaluation of care leads to formal and collaborative performance improvement activities that harness the resources of appropriate services.	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW	_ DOCUMENT REVIEW _ LEADERSHIP AND MANAGEMENT INTERVIEW _ STAFF INTERVIEW

			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check presence of written policy as prescribed in the criterion. Put a v̲ mark if compliant and X̲ mark if none at all. Evidence score is either **0** or **3**.

For leadership interview, select at least ONE hospital leader. Put a v̲ mark if the leader was able to discuss and offer examples of how this criterion is achieved and X̲ mark if otherwise. Evidence score is either **0** or **3**.

For staff interview, select at least THREE hospital staff. Put a v̲ if the staff's explanation supports achievement of the criterion and X̲ mark if otherwise. Repeat the process for the 2nd and 3rd staff. Count the number of staff with check marks over the total number of staff interviewed. Evidence score is:
• If 3 out of 3, the evidence score will be **3**
• If 2 out of 3, the evidence score will be **2**
• If 1 out of 3, the evidence score will be **1**
• If 0 out of 3, the evidence score will be **0**

Combine the scores for the 3 evidences to get the proof of performance score.

The track record is n̲/a̲.

The proof of performance score will serve as the criterion score.

13.7.a	The organization provides better care service as a result of continuous quality improvement activities.	a. The organization improves on its clinical quality measures.	_ DOCUMENT REVIEW	_ DOCUMENT REVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check presence of monitoring reports of activities based on existing clinical programs of hospital. Put a v̲ mark if all programs have report and X̲ mark if there is any one missing. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.7.b	The organization provides better care service as a result of continuous quality improvement activities.	b. The organization improves on its management quality measures.	_ DOCUMENT REVIEW	_ DOCUMENT REVIEW
			PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
			TRACK RECORD: _____	TRACK RECORD: _____

For document review, check presence of monitoring reports based on existing quality programs of hospital. Put a v̲ mark if all programs have report and X̲ mark if there is any one missing. Evidence score is either **0** or **3**.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.

13.7.c	The organization provides better care service as a result of continuous quality	c. The organization uses best available local or international benchmarks.	_ DOCUMENT REVIEW	_ DOCUMENT REVIEW

improvement activities.		PROOF OF PERFORMANCE: _____	PROOF OF PERFORMANCE: _____
		TRACK RECORD: _____	TRACK RECORD: _____

For document review, check presence of documentation or references of benchmarks used by the organization. Put a <u>v</u> mark if there is and <u>X</u> mark if none at all. Evidence score is either **<u>0</u>** or **<u>3</u>**.

The evidence score shall serve as the proof of performance score.

Determine track record score (based on document review).

Combine proof of performance + track record to get criterion score.