Differences with The Joint Commission and DNV GL- Healthcare Integrating the ISO Quality Management System

National Property Management Association

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What is the culture (perception) of accreditation?

- Fear for the hospital staff
- Punitive thinking
- “Preparing” for the survey – ramp up.
- The Accreditation Exercise
- “Just Fix It” thinking
- Not sustaining improvements

“We are what we repeatedly do; excellence, then, is not an act but a habit.”

- Aristotle
Survey Process

Joint Commission Standards

- Target important elements of patient care functions within an organization’s structure that are essential to providing safe, high quality care.

- Reach beyond the CMS Conditions of Participation

DNV Standards

- Integrates the Conditions of Participation with the International Standards Organization 9001 Quality Management Systems Requirements (ISO 9001).

- Currently 25 chapters in the NIAHO® manual. Most chapters coincide with the CMS CoPs and departments/functions within a hospital.

- Focus on outcomes
Some of the differences...

- Collaborative process which includes 3 annual surveys and ISO 9001 Quality Management System fostering continual improvement vs as Triennial Survey

- NIAHO Standards directly aligned with CMS CoPs reducing clarification issues vs a more prescriptive standard in addition to the CMS CoPs

- DNV does not have a scoring system, tipping points or levels of accreditation. - accredited or none accredited vs categories such as Preliminary Denial or Conditional Accreditation

- Integrating the ISO 9001 Quality Management System vs. Quality chapter more aligned with measurement yet lacking some of the infrastructure.
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- 73% Fewer Standards - \( \uparrow \) Efficiency
- Consistency & Accountability
- Standardized Integrated Structure – ISO
- Competitive Advantage – ISO
- \( \downarrow \) Cost

**Benefits**

- Integrated into workflow
- Promotes Innovation
- Develop Best Practices
- Sustainable improvement

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- Change
- Understanding and applying the ISO Quality Management System
- Receptive to annual surveys

**Challenges**
Reported Outcomes: Transformation

- Paradigm shift - gaining accreditation to constant improvement
- Outcomes focused & Organization driven
- Improved communication between leaders, physicians, and staff
- Accreditation becomes a management asset for quality, patient safety, and customer satisfaction improvement instead of the burden of “something more to do”
Why introduce ISO 9001 to hospitals and tie this to accreditation?

- Reducing uncertainty, increasing safety
- Improving efficiency
- Enabling sustainability
- Building trust

The Broader View of DNV GL
SAFER, SMARTER, GREENER
### About ISO 9001

- **Why is healthcare embracing ISO 9001?**
  - Many healthcare organizations focus the management of their system from a standpoint of compliance to standards established by Regulatory Bodies or CMS.

- **These standards do not adequately address basic management needs such as:**
  - Continual improvement
  - Control of documented information (Consistency)
  - Purchasing Aspects (Vendor Accountability)
  - Process based internal audits/surveys (Introspective review)
  - Risk assessment (Proactive approach for mitigation)
Introduction of ISO 9001 Quality Management System

- Understanding what works and what doesn’t – a lot healthcare organizations can already demonstrate
- This is a hospital’s quality management system incorporating ISO 9001 to what is currently in place
- Taking the time to implement this the right way and prioritizing
- We are healthcare people and we need to have an in depth understanding to embrace this approach
- A process approach fits healthcare

- Quality improvement and cost reduction have been elusive goals in the complex environment of healthcare delivery.

- ISO 9001 provides the overarching management structure needed to incorporate process improvement tools, such as Lean and Six Sigma, into a more encompassing quality management system suited to healthcare organizations.
System Approach

Management Responsibility
Customer Focus, Commitment, Quality Policy
Business Planning, Quality Objectives, Roles, Responsibility and Authority
Communication, Management Reviews

Quality Management System
General Requirements
Documentation, Control of Documents
Control of Records

Realization of Services
Planning - Development – Purchasing – Treatment – Monitoring – Discharge

Resource Management
Provisions of Resources
Human Resources
Infrastructure & Work Environment

Quality Management System
General Requirements
Documentation, Control of Records

Measurement, Analysis and Improvement
Patient Satisfaction
Internal Audit
Monitoring & Measurement of Processes and Services

Feedback Loop for Continual Improvement
Corrective Action
Preventive Action

Continual Improvement

Feedback Loop for Continual Improvement
Corrective Action
Preventive Action

Resource Management
Provisions of Resources
Human Resources
Infrastructure & Work Environment

New Clinical Service

Patient Admission

Admission

Analysis Of Data

Continual Improvement

Corrective Action
Preventive Action

Patient Satisfaction
Internal Audit
Monitoring & Measurement of Processes and Services
Focus on sequence and interaction of process all hospital processes...

- Understanding the processes – from paper to reality
- Support processes seem to get lost in the survey process
- How can we help in breaking down the silo effect?
- The basic premise of ISO 9001...
  - **Document what you do** (Policies, Procedures, Protocols, Work Instructions)
  - **Do what you document** (How we carry out these processes?)
  - **Prove it** (How have we demonstrated we follow what we say we will do?)
  - **Improve it** (How do we change, fix, enhance, innovate?)
A Few Common Myths…and debunked

- ISO 9001 is a Manufacturers standard, NOT for hospitals
  - ISO 9001 IS applicable to hospitals
- ISO 9001 doesn’t improve quality
  - ISO 9001 IS all about quality improvement
- ISO 9001 is all about documentation generation
  - ISO 9001 is NOT about an “ISO Format/Structure”
- ISO 9001 is a bureaucratic nightmare
  - ISO 9001 is NOT a bureaucratic nightmare
- ISO 9001 is very costly and time-consuming to put in place
  - ISO 9001 is NOT very costly and time-consuming to put in place
- ISO 9001 destroys creativity and innovation
  - ISO 9001 ENCOURAGES creativity and innovation
- ISO 9001 interferes with Lean and Baldrige CPE implementation
  - ISO 9001 SUPPORTS Lean and Baldrige CPE implementation
Reasons for following the ISO quality management system...

- Describe, Understand, and Communicate Your Company Processes
- Focus Management and Employees
- Improve Process and Service Quality
- Improve the Consistency of Your Operations
- Develop a Professional Culture and Better Employee Morale

- Improve Efficiency, Reduce Waste, and Save Money
- Increase revenue and new business

- Meeting Customer Expectations
- Increase Customer Satisfaction

- Recognition of quality – resonates with the market
Connecting everything

Because of ISO 9001 . . . NIAHO connects **compliance** and **quality** into one seamless activity.

- A systematic approach to managing quality
- Evolved from a set of ‘Conformance’ requirements into an effective ‘**Business Management**’ process
- Focus is now on Continual Improvement
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