

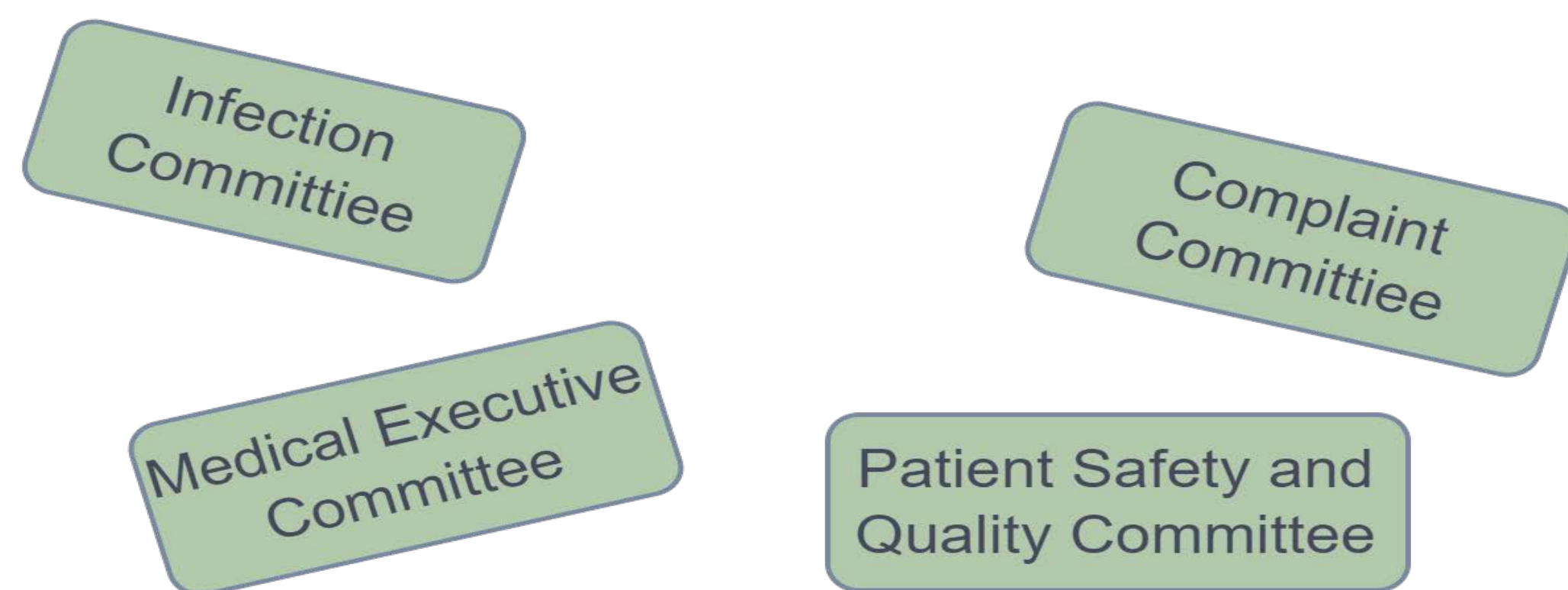
THE PROBLEM

Lack of a cohesive quality system: The framework for support and ongoing improvement was practically non-existent. The committees that were required by law were functioning however each worked independently with no feedback to/from management and the hospital's quality departments.

AIM

Establish a cohesive quality improvement and control structure which will ensure continuous quality improvement in the hospital resulting in continual increase in the hospital's quality of care and patient safety and promote communication and involvement of management, the medical staff, the quality department, and the hospital staff.

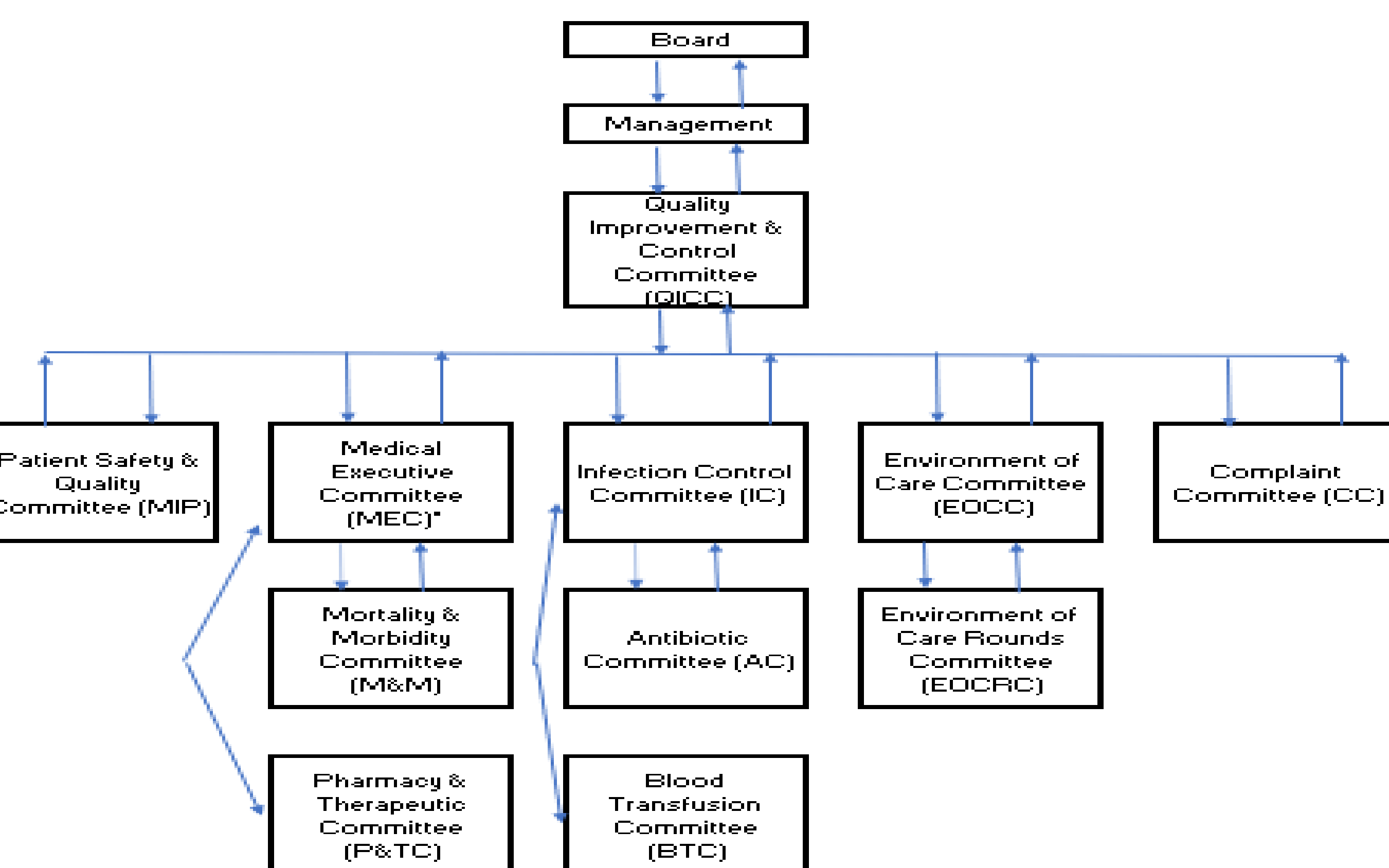
FLOW MAP OF PAST STATE



FLOW MAP OF PRESENT STATE



Quality Improvement and Control Organization and Structure



PLAN DO ACT STUDY CYCLE



RESULTS

The implemented quality structure has ensured many improvements in the organization. These include:

- More cohesiveness in data collection.
- Improved data on the quality and patient safety process.
- Improved functioning of the Medical Executive Committee and the medical staff.
- Positive shift in the culture and environment of the organization.
- Departments are guided based on planned quality improvement activities.

SUMMARY

The implementation of the Quality Improvement and Control structure proved to be valuable to the organization. These are:

- The structure/program provides support and coordination to the departments, management, and medical staff.
- Improved communication on quality and patient safety
- Measuring performance based on data.

DATA



FUTURE STEPS/ WHAT'S NEXT?

After little over a year with the new quality program, we have seen pleasant fruits, and as we move towards the future the plan is to continue to develop the efficiency of communication, have consistent data collection, set up quality meetings to keep all committees informed of the quality status of the hospital and get input from all as to how to further grow our quality program.