#### **DNV-GL**

# 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

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#### 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.

# DNV GL NIAHO/ISO Integrated into workflow 73% Fewer Standards - ↑ Efficiency **Promotes Innovation Develop Best Practices** Consistency & Accountability Sustainable Standardized Integrated Structure improvement ISO Competitive Advantage – ISO **↓** Cost **Benefits** Challenges **DNV GL NAIHO/ISO** Change Understanding and applying the ISO Quality Management System Receptive to annual surveys

#### **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"

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Why introduce ISO 9001 to hospitals and tie this to accreditation?



The Broader View of DNV GL SAFER, SMARTER, GREENER

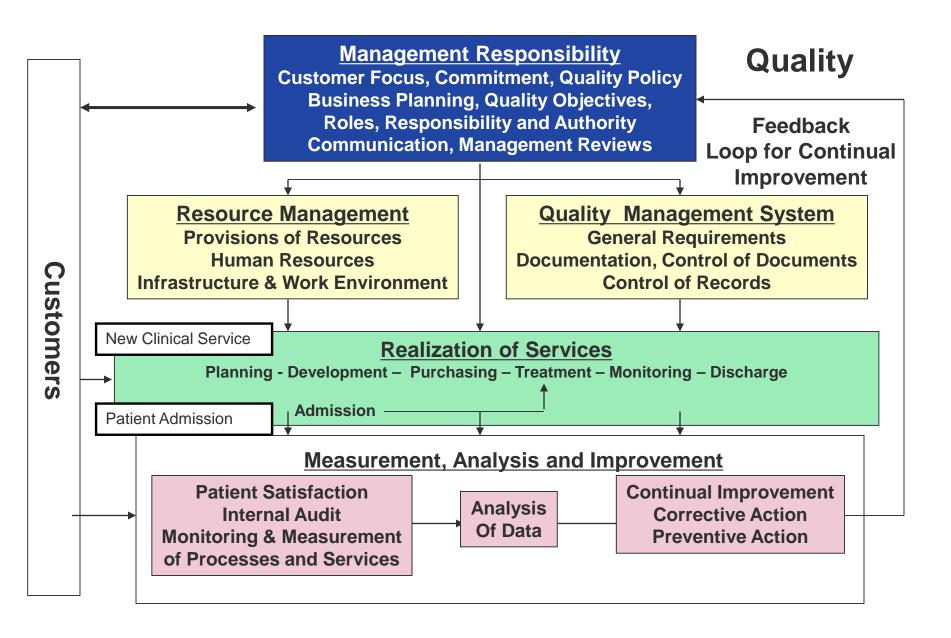
### About ISO 9001

- 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**



#### 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

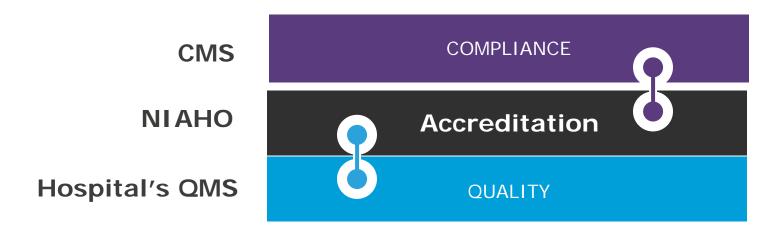
- ISO 9001 is a Manufacturers standard, NOT for hospitals
  - ISO 9001 IS applicable to hospitals
- ISO 9001 doesn't improve quality
  - ISO 9001 IS all about quality improvement
- ISO 9001 is all about documentation generation
  - ISO 9001 is NOT about an "ISO Format/Structure"
- ISO 9001 is a bureaucratic 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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