The WHO HPH Standards

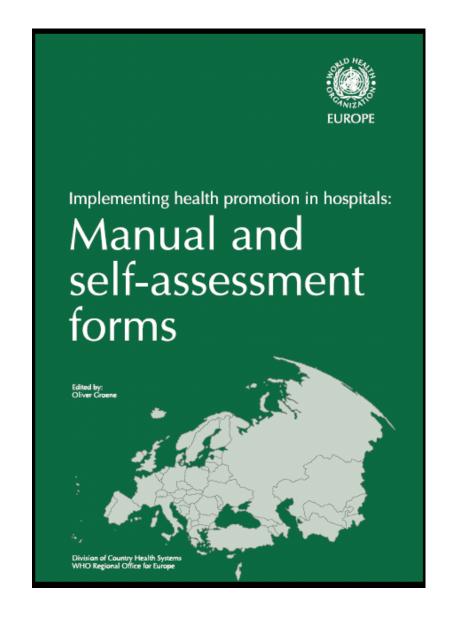
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WHO 2006

5 standards,
13 substandards,
40 measurable
elements;
18 indicators







Standard 1.

Management Policy

Standard 2.

Patient Assessment

Standard 3.

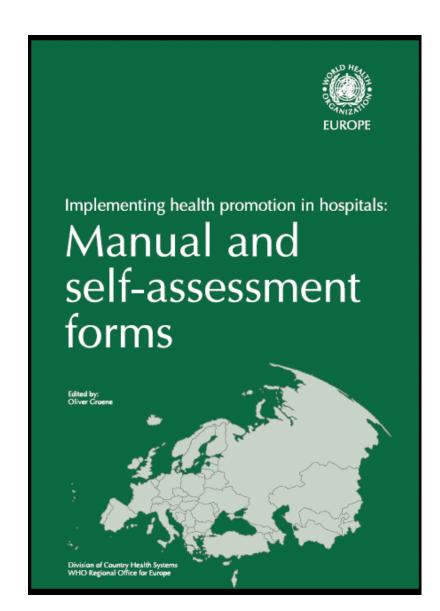
Patient Information and Intervention

Standard 4.

Promoting a Healthy Workplace

Standard 5.

Continuity and Cooperation







Standard Management Policy

Objective

The organization has a written policy for health promotion. The policy is implemented as part of the overall organization quality improvement system, aiming at improving health outcomes. This policy is aimed at patients, relatives and staff.







Standard Patient Assessment

Objective

The organization ensures that health professionals, in partnership with patients, systematically assess needs for health promotion activities.







Objective

The organization provides patients with information on significant factors concerning their disease or health condition and health promotion interventions are established in all patient pathways.







Objective

The management establishes conditions for the development of the hospital as a healthy workplace.





Standard Continuity and cooperation

Objective

The organization has a planned approach to collaboration with other health service levels and other institutions and sectors on an ongoing basis.





Clin HP Performance

3 types of quality indicators

- Structural Indicators
 - e.g. resources, competence level, quality of equipment, facilities etc.
- Process Indicators
 - Specific activities in pathway, e.g. counselling, intervention, treatment etc.
- Result Indicators
 - Health results for patients, e.g. survival, symptoms, physical capability, satisfaction with treatment, health gain etc.
 - A) End result indicators: cured/not cured, survival/death, symptoms/no symptoms, regain of functionality etc.
 - B) Intermediary indicators: evidence-based, predicting end results (if these are years away etc.)





Structural Indicators

 Easy to use – but is there a clear, documented relation to end goals? (end result indicators)

Process Indicators

- Easy to use but is there a clear, documented relation to end goals? (end result indicators)
- Process sometimes, by themselves, reflect quality – e.g. to what degree evidence based guidelines are followed etc.



Clin HP Performance

Result Indicators

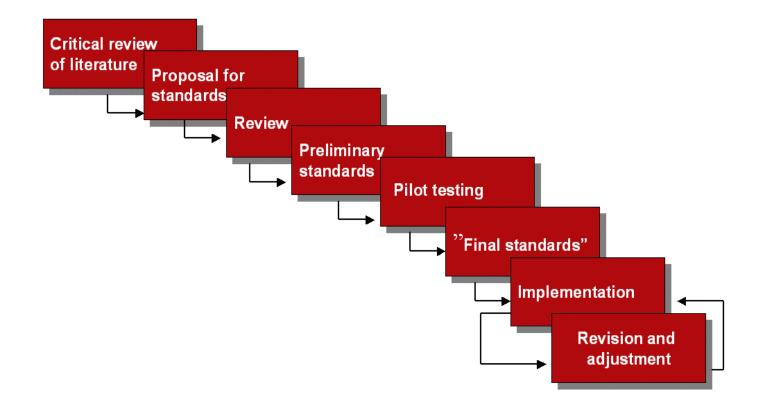
- A) End result indicators:
 - the most important indicator for patience, staff and organization
 - But they can be hard to asses (e.g. years away in future?, impossible to get sample size for rare things, financially demanding if result data is not registered already)
- B) Intermediary indicators:
 - More readily accessible, no delay



Guiding principles for standards developement

- Health promotion, disease prevention and rehabilitation are quality issues.
- Standards and Indicators are needed for the assessment of goalachievement.
- Policies and principles must result in clinical programs and guidelines.
- Standards must be understandable, relevant and based on evidence.

ISQUA ALPHA programme for development of standards







Pilot Testing

The standards were pilot tested in 36 hospitals in 9 countries on their applicability and relevance.

Country	No. Hospitals
Denmark	5
Finland	3
Germany	3
Ireland	4
Italy	10
Lithuania	2
Poland	5
Slovakia	3
Switzerland	1
	36 assessed

Figure 1. Key components of the standard

Standard Management Policy

The organization has a written policy for health promotion. The policy is implemented as part of the overall organization quality improvement system, aiming at improving health outcomes. This policy is aimed at patients, relatives and staff.



Objective

To describe the framework for the organization's activities concerning health promotion as an integral part of the organization's quality management system.

Substandards

1.1. The organization identifies responsibilities for the process of implementation, evaluation and regular review of the policy.

The hospital's stated aims and mission include health promotion [Evidence: time- table for the action].

Comments/suggestions

Substandard definition

Text box for comments, problems, goals, responsibilities, details on evidence and follow-up actions

Measurable element

Demonstrable evidence



The organization ensures that health professionals, in partnership with patients, systematically assess needs for health promotion activities.

Objective

To support patient treatment, improve prognosis and to promote the health and well-being of patients.

Substandards

2.1. The organization ensures the availability of procedures for all patients to assess their need for health promotion.			
Guidelines on how to identify smoking status, alcohol consumption, nutritional status, psycho-social-economic status are present [Evidence: check availability]. Comments:	Yes	Partly	No
Guidelines/procedures have been revised within the last year [Evidence: check date, person responsible for revising guidelines]. Comments:	Yes	Partly	No
The organization ensures procedures to assess specific needs for health promotion for diagnosis-related patient-groups. Guidelines are present on how to identify needs for HP for groups of patients (e.g. asthma patients, diabetes patients, chronic obstructive pulmonary disease, surgery, rehabilitation) [Evidence: for groups of patients specifically treated in the clinical department].	Var	Paralle 1	No.
Comments:	Yes	Partly	No

- **5** Standards
- 13 Substandards
- 40 Measurable elements
- 18 Indicators

Combining standards and indicators

Standard

Promoting a Healthy Workplace

The management establishes conditions for the development of the hospital as a healthy workplace.

Objective

To support the establishment of a healthy and safe workplace, and to support health promotion activities for staff.

Substandards

4.1. The organization ensures the establishment and implementation of a comprehensive Human Resources Strategy that includes the development and training of staff in health promotion skills

A performance appraisal system and continuing professional development exists [Evidence: documented by review of staff files or internal and the continuing professional and the continuing pr

interview).	Yes	Partly	No
Comments:] [
New staff receive an induction training [Evidence: interviews with new staff].	Yes	Partily	No
Comments:			, lerole
Training plans are set up and fulfilled by the end of the year [Evidence: check with staff].			
Comments:	Yes	Partly	No
Working practices (procedures and guidelines) are developed by multidisciplinary teams [Evidence: check procedures, check with staff].			
Comments:	Yes	Partiv	No

Standard 4 Promoting a Healthy Workplace

Complementary indicators

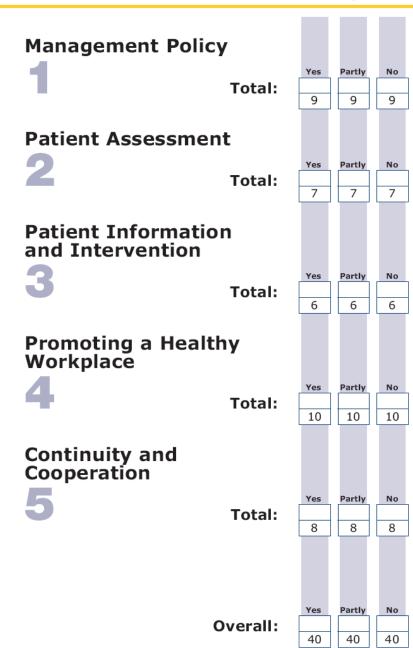
	% of short-term absence
_	% of work-related injuries
_	% of staff smoking
_	Score of survey of staff experience with working conditions
-	Score on burnout scale
-	% of staff participating in regular health promotion activities within the hospital
_	% of staff coming to work by bicycle
_	Retention rate
_	Turnover rate

Additional indicators

(local indicators you may want to consider for the action plan)

CLINICAL HEALTH PROMOTION CENTRE

Overall assessment of standards compliance





Overall action plan

(add more pages for full report if necessary)

General actions

Actions related to the assessment of specific standards and indicators



Organisational HPH approaches

- 1. Ad hoc health promotion projects
- Delegated to a specific division, department or staff member
- 3. Integrated health promotion program that involves the entire institution (limited to actions within the institution)
- Combination of the institutional approach (#
 with actions and partnerships with the community



Workshop

Questions to discuss in groups:

How to use the WHO HPH
 Standards in your hospital/health
 service?