INTERNATIONAL HOSPITAL FEDERATION AWARDS 2021

RECOGNIZING EXCELLENCE IN HEALTHCARE

www.worldhospitalcongress.org/awards
AFTER ALMOST two years in a state of near standstill, the world has started its recovery from the COVID-19 pandemic. We are now regaining normalcy little by little, thanks to the combined herculean efforts of governments, public and private organizations, and at the forefront, healthcare workers and the institutions they belong to.

Hospital leaders and their fellow front-liners have worked non-stop – to the point of exhaustion in some parts of the world – in order to brave the pandemic to save lives, at the risk of their own. True to their oaths, healthcare workers went beyond their call of duty to deliver care for the sick and to keep others healthy and well.

More than ever, the challenges posed by the pandemic demanded hospitals to be innovative and in constant vigilance for all new needs and concerns that may arise. They had to deal with the sudden surge of patients that kept many hospitals at full occupancy while ensuring that people in far-flung areas still get the healthcare they deserve. At the same time, hospitals had to be inventive and adaptive with their policies and operations to guarantee that processes and practices are beneficial not only to their patients but also to the staff and even the environment.

The International Hospital Federation Awards 2021 honors the great work of various hospitals and healthcare organizations around the world. The Awards recognise how lives, health and wellbeing of populations were improved through better leadership and management, innovative services, outstanding projects and programs that promote green healthcare, sustainable environment and corporate social responsibility.

The International Hospital Federation is truly delighted with this year’s awards and awardees. More projects have been recognized because there really are more hospitals and healthcare organizations that are doing exemplary work in different fields of medicine.

It is undeniable that the awardees deserve the recognition, but more importantly, they should share their stories and become inspirations on excellent healthcare services for others. As a global organization committed to supporting hospitals and healthcare organizations, the IHF is very happy to provide an avenue through which these stories can be told, for they solidify the hope that no matter what the world goes through, people around the globe can always count on hospitals and healthcare organizations to deliver the best care and services possible.
Faced with pressing issues ranging from the COVID-19 pandemic to climate change, hospitals all over the world stepped up to deliver extraordinary services and solutions to address both immediate and long-term necessities arising from these crises. After a call for entries in May 2021, The International Hospital Federation is recognizing about 40 hospital and health service providers across the globe for being leaders in their fields, expediting solutions and undertaking incredible innovations even under these difficult times. They have introduced significant developments in the healthcare industry, from predictive models to assist in the monitoring of COVID-19 cases to the utilization of technological advancements such as virtual reality and 3D printing to help in making procedures safer and more precise. The International Hospital Federation Awards 2021 is sponsored by the American College of Healthcare Executives, Austco, Japanese Red Cross Ashikaga Hospital and Nikken Group, Seddiqi Holding, Ministry of Health at the Sultanate of Oman, and Dr. Kwang Tae Kim. The following list contains the recognized institutions.

### DR. KWANG TAE KIM GRAND HOSPITAL AWARD

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<td>Vicente Sotto Memorial Medical Center</td>
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<td>H+ Yangji Hospital</td>
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<td>Onassis Cardiac Surgery Center</td>
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<td>Onassis Cardiac Surgery Center: Services Transformation, Crises Response &amp; Change Management towards High Quality Precision Medicine</td>
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### AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES EXCELLENCE AWARD FOR LEADERSHIP AND MANAGEMENT

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<td>Dubai Health Authority</td>
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<td>Mutua Terrassa Healthcare Foundation</td>
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<td>Integrated Health Care Model in Mutua Terrassa during the SARS-COV 2 Pandemic</td>
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<td>NEO HOSPITAL Ltd</td>
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<td>Establishment of a new hospital together with a Center for Robotic Surgery and new technologies</td>
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<td>Dubai Health Authority</td>
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<td>Optimizing patient journey in OPD setting “Patient centric flow”</td>
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<td>Dr L H Hiranandani Hospital</td>
<td>India</td>
<td>Primary Angioplasty in Myocardial Infarction (PAMI) – Achieving Excellence</td>
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<td>Cho Ray Hospital</td>
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<td>The quality standards to assess the leadership and management competencies of the heads of departments and the head nurses</td>
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<td>Multi-disciplinary Simulation and Skills Centre, Queen Elizabeth Hospital, Hospital Authority</td>
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<td>Northwell Health</td>
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THE IHF AWARDS 2021 recognizes hospitals and health service providers for their extraordinary contributions in the healthcare field.
### AUSTCO EXCELLENCE AWARD FOR QUALITY AND PATIENT SAFETY

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<tr>
<td>Kaiser Permanente Northern California</td>
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<td>Automated Early Warning System of Adults at Risk for In-Hospital Clinical Deterioration - Advance Alert Monitor (AAM) Program</td>
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<td>Royal Hospital</td>
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<td>Learning through the cycle of improvement: A comprehensive approach to surgical site infection (SSI) prevention in post cardiac surgery patients</td>
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<td>Saudi German Hospital Riyadh</td>
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<td>Department of Medical Education of Taipei Veterans General Hospital</td>
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<td>Immersive virtual reality materials increase tracheostomy and decrease the inappropriate care skills-related complications by educating healthcare providers-3 years projects</td>
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<td>Multi-disciplinary Simulation and Skills Centre, Queen Elizabeth Hospital, Hospital Authority</td>
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### ASHIKAGA-NIKKEN EXCELLENCE AWARD FOR GREEN HOSPITALS

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<td>E-DA Hospital</td>
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University Hospitals of Geneva (HUG), Switzerland
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IHF GC Member

Dr Muna Tahlak
Latifa Hospital, Dubai Health Authority (DHA), United Arab Emirates
IHF President Designate

Mr. Shiro Tsukami
NIKKEN SEIKI, Japan
Egyptian national accreditation modelling reference

Supporting the Egyptian community has always been the core of Saudi German Hospital Cairo’s quality of service, and the institution has full faith in its role to help develop the country’s healthcare service, not only by providing the best healthcare services, but also by supporting the implementation of a clearly controlled and transparent regulatory system.

“There is no modelling reference for healthcare standards implementation in Egypt, no proper training for the surveyors, and no ready healthcare facilities that support and facilitate the application of the standard.” explained Dr. Dina El-Maghraby, CEO Technical Office Member of Saudi German Hospital Cairo. “There is also a weak culture of sharing the experience and knowledge between different healthcare facilities, public or private, and a lack of an independent body for accreditation, regulation, and control of health services.” Dr. El-Maghraby added.

Recognizing this problem, Saudi German Hospital Cairo came up with the Egyptian National Accreditation Modelling Reference initiative as the first hospital in Egypt to communicate with the country’s General Authority for Healthcare Accreditation & Regulation (GAHAR) Board with the ultimate goal of facilitating the registration or accreditation of healthcare facilities.

Under the program, Saudi German Hospital Cairo will also act as a modelling reference for GAHAR and all other health institutions in Egypt in terms of developing the standards, providing training for surveyors, implementation and application of First Egyptian National Healthcare Accreditation Standards, serving as a model for all hospitals in Egypt.

To date, in a span of just over a year, Saudi German Hospital Cairo has already received Joint Commission International Accreditation, TEMOS Accreditation for Medical Tourism and Canadian Accreditation, as well as membership of the Mayo Clinic Clinical Network. “The presence of the accreditations has demonstrated the hospital’s outstanding performance in delivering the highest quality of care by allowing the hospital to regularly maintain, check and monitor all processes which are impacting healthcare quality and patient safety positively.” Dr. El-Maghraby said.

“Achieving the accreditations and registrations is the first step to achieving universal health insurance based on Egypt Vision 2030.” Dr. El-Maghraby added.

Establishing the program, however, was no small feat. The roots of the idea began in 2018, with the establishment of GAHAR. Months later, in March 2019, Saudi German Hospital Cairo struck an agreement with GAHAR to help introduce accreditation in Egypt, either by developing the standard or by being the first one to attain registration and accreditation.

After winning GAHAR approval, Saudi German Hospital Cairo then lost no time in launching the registration preparation process, which involves meeting with hospital staff, creating task force teams to identify the actions and resources needed and conducting monitoring and follow-up. The efforts bore fruit in May 2019, when Saudi German Hospital Cairo became the first hospital in Egypt to be registered by GAHAR.

To build up on the development and to help other healthcare facilities in the process, the hospital hosted a quality symposium to share its experience of GAHAR application. The developments also culminated in Saudi German Hospital Cairo hosting GAHAR surveyors in March 2020 to receive the training on the accreditation standards. In 2021, the hospital also hosted GAHAR employees to train on the accreditation standards for the first batch.

Saudi German Hospital Cairo’s vision to unify healthcare standards in Egypt rapidly caught the attention of healthcare authorities in the country, resulting in the registration of 19 hospitals by the trained surveyors in Saudi German Hospital Cairo premises. To demonstrate the program’s national reach, Dr. Dina El-Maghraby said the program will take the highest score in the coming years and is expected to be implemented by law mandatorily.
The onset of the COVID-19 pandemic in 2020 highlighted the importance of managed care across the world. The outbreak, which elicited drastic changes in everyone’s life, also shed light on areas of improvement for the delivery of such services by healthcare organizations like Spectrum Health.

Recognizing the need for a better, more efficient system, the not-for-profit healthcare organization piloted an Operational Deployment System (ODS), with an aim to provide clarity, appropriately cascade goals, and create an intentional alignment system that would help prevent employee burnout. Spectrum Health leads a team of more than 20,000 care providers across 13 countries. Through the ODS, it collated best practices from individual project management and process improvement methodologies to ensure sustainable deployment of services and reinforce the principle of delivering the right work at the right time.

The framework, which started at a divisional level for Spectrum Health’s post-acute leadership, has driven incredible improvements in determination among its manpower.” said Atty. Rey Cris Panugaling.

Specifically, Sotto wants financial risk protection, a responsive health system and better health outcomes for every Filipino. In pursuit of these targets, the hospital implemented programs such as overseeing and monitoring the electronic referral system to reduce the number of times patients had to be handed off from one facility to another; helping address the issue of lack or shortage of doctors, particularly in far-flung areas, through its CNU-VSMMC College of Medicine; and assisting in the training of doctors at provincial hospitals through its practice-based residency training program. The hospital also established the Malasakit Center, a one-stop shop that it also operates to facilitate patients’ access to healthcare-related government services, including financial assistance.

Because of its continuous efforts toward its goals, Sotto received multiple recognitions and accolades from both in and out of the Philippines. At the height of the COVID-19 pandemic, the hospital received recognition from the International Hospital Federation. However, the hospital believes there is no greater recognition than the overwhelming support for its projects and having them enacted into law, such as the Malasakit Center that was added to universal healthcare that is now being enjoyed by communities across the country, as well as Republic Act No. 11509, which was somewhat influenced by its College of Medicine and now provides funding for the scholarships and return to service of deserving medical students.

Vicente Sotto Memorial Medical Center (VSMMC) has always aspired to be a globally recognized multi-specialty academic medical center and healthcare training facility that promotes accessible healthcare services in the Philippines for every resident regardless of social status.

The hospital, widely known as Sotto, is a government-owned and controlled institution. While the nobility of its goal is unquestionable, the road to its reality would not be without challenges.

"The major hindrance in the attainment of this vision is the limited resources a government-operated hospital has. While this is a going concern that could take time to be addressed, never will this faze Sotto from achieving its goals as it embodies the passion and determination among its manpower.” said Atty. Rey Cris Panugaling.

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UNIVERSITY HOSPITAL OF KRAKOW  POLAND

Adaptation of new premises of the university hospital to the needs of the specialist COVID-19 hospital during the COVID-19 pandemic

After the University Hospital of Krakow was declared as a specialist COVID-19 hospital in Poland at the start of the pandemic, it had to formulate a way to assign some of its premises for COVID-19 positive patients while maintaining its services for its other patients. The University Hospital is the sole trauma centre in Małopolska and its closure would prevent a significant number of patients from availing of specialist treatment, thus presenting a plethora of challenges on how the hospital would keep both its old and new designations. To ensure maximum safety for all stakeholders involved, the hospital created two zones, which required additional construction works. A portion of the hospital’s newly created premises was dedicated to an infectious diseases department, while a “temporary hospital” was also created in the trauma centre building. The hospital ensured that all its staff had sufficient PPE, which was hard to accomplish especially in the early days of the pandemic. Through a public awareness campaign, the hospital was able to raise significant resources to meet this demand. By properly addressing the issues at hand at the very beginning of the pandemic, the hospital was able to effectively meet its mandate as a Specialist COVID-19 Hospital and has even become a leader of opinion for other medical facilities, earning wide recognition from both its stakeholders and the general community.

For its efforts, the University Hospital has become the coordinator of procurement of medical equipment for all facilities in the region under European Union programs. Ongoing contact and dialogue with the Ministry of Health has also allowed for the making of numerous joint decisions, as well as achieving a consensus on extremely difficult decisions at critical times during the pandemic.

CORNICHE HOSPITAL

UNITED ARAB EMIRATES

Creating a center of excellence for women’s and newborn care

Previously a high-volume obstetrics facility, United Arab Emirates’ Corniche Hospital has established itself as a leading tertiary, super-specialized hospital for women and newborns. The hospital’s transition to its status began in 2015, when the government instructed a reduction in the volume of deliveries to support the goal of creating a robust private sector for healthcare and ensure that Corniche’s limited physical capacity would still be accessible for UAE nationals. The shift enabled Corniche to develop expertise on high-risk obstetrics, fetal medicine, infertility and IVF, advanced gynecological services, obstetric medicine and neonatology. Part of the process was the recruitment of the right clinicians for each subspecialty who are tasked to create their own vision and business plan, serving as a catalyst for the maturity of the services over the next three to five years. In 2019, Methods Analytics, an independent UK consulting company that reviewed all the outcomes for maternity services in the Emirate of Abu Dhabi, validated Corniche’s progress on achieving its strategy. “The conclusion was that Corniche cared for the most complex patients in the Emirate and had successfully shifted the less complex patients to the private sector,” the hospital said, noting that the review also assessed that its clinical outcomes were comparable to the best on the international stage.

It is also important for Corniche Hospital to set standards for itself, and it strives to meet or even exceed international standards or best practices through external accreditations of clinical and operational services. The gold standard in accreditation for healthcare is that of Joint Commission International, under which the hospital has been accredited since 2007. For its maternity specialty, Corniche Hospital has been continuously accredited since 2008 under the WHO Mother Baby Friendly Hospital certification, which is an appropriate international standard.
ONASSIS CARDIAC SURGERY CENTER  GREECE

Onassis Cardiac Surgery Center: Services transformation, crises response & change management towards high quality precision medicine

With Greece’s hospital system facing back-to-back lashings from the previous financial crisis and the COVID-19 pandemic, the Onassis Cardiac Surgery Center, or OCSC, has introduced a response composed of several projects as a way to assure the provision of high-quality tertiary health services for its patients. The projects include the DELTA project, introducing dynamic change management measures that foster, among others, the supplier and customer relationship and improved patient access; project CEREBRO, a first in Greece in terms of adopting a value-based approach for procurement decisions; and project LETO, which removes financial and other access barriers for congenital or acquired heart disease services. “The Bridges of Life Project” aims to reshape organ donation and transplantation in the country while Project Panacea was the center’s pandemic response focused on enhancing patient and personnel safety, among other goals. Despite facing pressures from the current economic and pandemic situations, the center has been able to keep, or increase at times, both the number of its surgeries and the number of patients to whom it offers its services, while retaining a low complication rate and even a slight decline in mortality. “We transform care delivery by preparing the hospital for precision medicine.” the OCSC said. “And we do so, in a sustainable fashion so that the hospital may offer its high-level services to both today’s patients but also to tomorrow’s ones.”

MEDIKER GROUP  KAZAKHSTAN

The Mediker Group: Kazakhstan’s healthcare leaders

The Mediker Group has emerged as the leading healthcare provider in Kazakhstan not by way of profit but through prioritizing the welfare of the public. Following the collapse of the Soviet Union in the 1990s, which Kazakhstan was a part of, Mediker has helped in developing the country’s healthcare system by offering its entrepreneurial hand to the government. The group committed to become a major partner for state facilities in providing care to citizens and participated in public-private partnerships to revitalize failing facilities. Such initiatives can be observed in the group’s goal of having the community’s most underprivileged members account for at least half of its patient base, as well as in its support for City Polyclinic #2 in Atyrau, in which it prioritizes the improvement of the failing hospital’s operational efficiency while preserving its public profile. Mediker also pioneered Kazakhstan’s first country-wide PCR testing network, which addressed the lack of epidemiological data at the start of the COVID-19 pandemic. By the beginning of 2021, more than 170,000 people were affiliated with Mediker medical centers through the state healthcare system, growing by more than 50% from 2019. “In a country that had suffered for so long with an unreliable healthcare system, Mediker has become the largest private medical company for a reason – strong leadership that’s set the standard for excellence,” the group said.

H+ YANGJI HOSPITAL  REPUBLIC OF KOREA

Walk-through booth that drew the attention of the world

H+ Yangji Hospital in the Republic of Korea developed the world’s first walk-thru booth to administer COVID-19 screening tests during the early days of the pandemic, as a means of adapting to the situation under certain constraints – such as limited space and the lack of protective gear for its staff – and addressing concerns regarding cross-infection and a more efficient screening time. The booth enables the conduct of the test with the patient inside the booth and the medical person doing the screening outside. The hospital was also able to tackle the problem of limited space by minimizing the size of the booth and by installing four booths in a row on a space previously occupied by a single container. The process required simplified clothing for the medical staff, while the reduction in space made it possible to conduct between 70 and 80 screening tests per day, a 10-fold increase. “Through continuous further improvement following the initial development of the walk-thru screening booth, we are now able to conduct approximately 250 screenings a day, which is a 30-fold increase from the number prior to the development of the walk-through booth.” the hospital added.
In dealing with a global pandemic like COVID-19, the ability to maximize resources becomes vital. Dubai Health Authority was aware of this, and realized that it was necessary for the organization to adopt novel business models ensuring the continuity of its critical services, while at the same time assuring the flexibility of its operations to meet the increasing toll on healthcare systems. This was the backdrop in the development of DHA’s Rapid Resilience Screening Framework, or SPARC.

“DHA developed a statistical analysis model to forecast and predict numbers of COVID-19 cases by taking into consideration global/local infection rates. This was done by looking at Dubai’s population, the number of tests conducted on a daily basis and comparing this to the positivity rate,” according to Aseel Darwish, Senior Specialist, Corporate Excellence at Dubai Health Authority. “The analysis identified gaps and weaknesses in existing operations and processes, starting with maintaining a level of business continuity, and the need to rapidly maximize the value of process chains with respect to resilience.”

The identified gaps were then used to prioritize process portfolios requiring immediate action to maintain critical services, and meet increasing healthcare demands. The origin of the program was more of a necessity for DHA, as international resilience frameworks were built mostly for long-term implementation and were not feasible for a pandemic response. As a result, DHA created a new state-of-the-art framework to rapidly assess the responsiveness of more than 200 processes and to sustain three targeted resilient themes – maintain safety, increase flexibility, and business continuity.

Part of the development of the program includes tailoring the themes to the needs and expectations of stakeholders. “DHA used a stakeholder analysis tool to assess the influences and interests. It defined nine external stakeholders in the process, namely Dubai Command and Control Center, Ministry of Health, private healthcare facilities, Federal Crisis and Disaster Committee, customer/patient, society, vendors/suppliers, Department of Finance and Executive Council.” Darwish said. “DHA also identified seven internal stakeholders, such as process owners, process executers, resilience team, department directors, managers’ council, mission controller, and mission commanders.”

The project likewise involved two stages – development and deployment. Under the development stage, a set of experts with a solid background in resilience and business continuity were selected to develop the framework. “SPARC stands for 5 steps – (1) Study the process, (2) Predict adverse scenario, (3) Assess responsiveness, (4) Revamp the process, and (5) Control resilience capabilities.” Darwish said. The deployment stage commenced with studying the affected processes. The SPARC toolkit was then used to predict COVID-19 stress scenarios, ranging from the best case to the worst case. This was followed by assessing the responsiveness and current resiliency using a pre-defined scale, where the gaps and weaknesses in processes were captured.

“The team has discussed the best rapid resilience capabilities that need to be embedded in processes. Post obtaining the buy-in, the team has revamped the processes and established the needed resilience measures.” explained Darwish.

DHA’s program was lauded by stakeholders as evidenced by perception surveys conducted during and after implementation. “The department directors, process owners and executers intensely realized the benefit of SPARC on their daily duties, while the Dubai Command and Control Center, Ministry of Health, and private healthcare facilities highly appreciated the outcome.” Darwish said.

Reflective of the results and uniqueness of the project, DHA also won first at the Global Continual Improvement & Innovation Symposium & Award 2021, or GCIIS, in the Best Practices in Management Category. SPARC was also a major contributor to the achievement of a number of global recognitions including three International Hospital Federation “Beyond Call of Duty” COVID-19 recognitions.

Moving forward, DHA will coordinate with Dubai Executive Council to officially publicize the experience and allow for the adoption of the SPARC methodology by Dubai governmental entities.
MUTUA TERRASSA HEALTHCARE FOUNDATION
SPAIN
Integrated healthcare model in Mutua Terrassa during the COVID-19 pandemic

The onset of the COVID-19 pandemic heavily affected people, institutions, and economies around the world. For hospitals, the changes have been disruptive, considering how they are at the core of every country’s containment strategy to tackle the outbreak.

In Spain, the Mutua Terrassa Healthcare Foundation heavily altered how it did things to adapt to the demands of the pandemic. The need to go with the flow while being highly responsive paved way for the organization’s integrated healthcare model, which aimed to capitalize on the coordination and integration of the foundation’s various care levels to improve the delivery of services to people during the COVID-19 pandemic.

As an integrated healthcare organization built around the four primary pillars of primary care, outpatient specialized care, hospital care and extended care, Mutua Terrassa understood that cross-departmental works are heavily embedded in its processes. But because of the restrictions that needed to be put in place amid COVID-19, the organization had to deal with new issues that required new solutions, such as not being able to conduct face-to-face meetings.

There were issues specific to its primary care department and Mutua Terrassa’s management formulated new objectives that will limit contagion, ensure the safety of its staff, and still allow the organization to deliver services even in schools through the redCOV platform.

The centralization of suspected COVID-19 consultations in primary care centers, particularly those requiring radiology and laboratory services, has protected the hospital from being overwhelmed by patients with mild COVID-19. Teleconsultations also helped in keeping control of the number of physical visits to the hospital. The creation of work teams for different care levels also helped ensure that its human resources are not heavily exhausted.

The project follows the CatSalut guidelines, which accepts the main actions of the program and solicits information about some of the results obtained. While the program has not been presented to other organizations, an abstract regarding the informatization of Mutua Terrassa’s primary care has been received by the IHF Barcelona World Hospital Congress.

EMIRATES HEALTH SERVICES
UNITED ARAB EMIRATES
Newborn screening program

In the Middle East, critical congenital heart disease (CCHD) takes the life of children below one year old at the rate of 2117 for every 100,000. To help curb the alarming mortality rate, the Emirates Health Services (EHS) of the United Arab Emirates launched the National Program for Early Detection of CCHD in July 2018.

The program, which hopes to prevent neonatal deaths and chronic complications, will measure the oxygen saturation rate for newborns before discharge and ensure that all babies who tested positive of the condition will receive critical interventions in a timely and safe manner. EHS’ hospital department collaborated with the AlQassimi women and children hospital to develop a novel IT solution that will oversee the whole screening process from identification to intervention.

The EHS system formulated a policy for the screening of CCHD among newborns at all member hospitals. It developed detailed guidelines that streamline clinical workflow with an outline of roles and responsibilities. The policy also involved the procurement of recommended pulse oximetry devices and the training of staff for the screening process. Furthermore, EHS designed an electronic medical record (EMR) solution to help ensure that the workflow is running smoothly.

EHS logged a 97.3% compliance rate after its initial implementation of the program. In the first year after implementation, the compliance rate grew to 98%. Dr. Noor Almheiri, head of medical services unit at Emirates Health Services’ Hospitals Department, attributed the improvement to the IT solution and the multidisciplinary approach to the implementation of the project.

The development of a well-defined workflow in the screening of CCHD, as well as conducting follow ups on children with potential CHD, has a positive effect on the overall final diagnosis of the condition among newborns. Findings also showed that the use of an EMR solution for the implementation of the screening can yield high compliance to hospital protocols.

The hospital system’s newborn screening program was recognized both in and out of UAE. Among the honors it received are the Cerner Middle East Forum, the HIMSS Middle East Award and the silver Steve Award for IT in 2019, as well as the MOHAP Innovation Award in 2020.
Guided by a belief that highly values the patient’s health, as well as the feeling of comfort and safety, the Polish Hospital Federation established the NEO Hospital in Cracow, Poland, with an aim to make it one of the most innovative, effective, and friendly medical centers in Central and Eastern Europe.

The organization brought technology to the forefront of the hospital’s operations. It is now recognized as a surgical center, in which 98% of procedures are performed using minimally invasive techniques such as operating with a da Vinci robot and other advanced technologies.

In the first two years of its operations, the NEO Hospital has catered to the needs of more than 25,000 patients with a team of more than 200 specialists. Every month, approximately 35 procedures are performed at the center concerning various branches of medicine including oncology, urology, and gynecology.

The hospital offers trainings, internships, and apprenticeships for practitioners in and out of Poland. Some of the trainees opted to stay with the center and now make up for a large portion of NEO Hospital’s workforce.

NEO Hospital is also home to the first research and development program in Poland that used a da Vinci robot for oncological gynecology. The program eventually secured additional financing from the European Union.

NEO Hospital also hosts the Living Lab where creators of new technologies can test their inventions and gain feedback directly from end users.

Within its operations, the management of the hospital integrated sustainable development. It pays close attention to the impact of its operations to its patients, employees, investors, suppliers, social milieu, and its natural environment.

Despite its contributions to the wellbeing of its patients and the wider community, the hospital is still having difficulty in obtaining funding for its projects, implementing new technologies that haven’t been used so far in Poland, implementing a model of operation based on interdisciplinary teams’ cooperation and coordination, preparing the clinical base for didactic activity and establishing a research and development center, and preparing a concept of communication and educational programs for patients.

Thankfully, the efforts of the hospital and its continuous pursuit of new innovations have been lauded not only by its stakeholders but by other organizations. In recognition of its effort to improve the quality of treatment for patients with prostate cancer, NEO Hospital was honored in June 2021 with the European Medal for its implementation of a prostate cancer surgery with the use of a da Vinci robot – Cowllar technique.
Dubai Health Authority’s Dubai Hospital has been developing its Out-Patient Department (OPD) expansion project since 2017, but challenges presented by the COVID-19 pandemic as well as a rising number of OPD visitors have necessitated the creation of specific goals and targets addressing these circumstances. Specifically, Dubai Hospital aimed to cut patients’ waiting time in seeing physicians during the first wave of the pandemic as well as increase its clients’ happiness percentage to 92%, among other goals. One of the OPD project’s components is the redesign of the OPD concept, in which patient-centered care is a priority. In this approach, patients in the clinic are visited by healthcare providers, as opposed to them moving from nurses’ assessment rooms to physicians’ examination rooms. The OPD expansion project, through the OPD expansion project, Dubai Hospital was able to reduce several of its waiting time metrics and raised customer happiness, satisfaction, and trust in areas such as staff professionalism, premises, and quality of given information. Specifically, the program resulted in a reduced waiting time to access general and sub-specialty clinics in Dubai Hospital from 30 days to less than 15 days, while the hospital was likewise able to reduce waiting time to see physicians from 60 minutes to around 15 minutes in the clinics.

Ultimately, the OPD project helped in the accreditation of JCI, ICXS and the Dubai Government Excellence Award – reflecting the universal recognition of the program’s implementation. Similarly, outcomes of the 360-degree assessment likewise showed the great potential of implementing and expanding the OPD model in relation to other business entities.

Primary angioplasty in myocardial infarction (PAMI) – achieving excellence

India-based Dr. L H Hiranandani Hospital established its Primary Angioplasty in Myocardial Infarction (PAMI) program in 2011 to tackle issues observed within its community, including the frequent incidents of acute myocardial infarction among its youth and, as a developing nation, the lack of standardized interventional care for a heart attack occurrence especially for developing nations. The program establishes an emergency response team, composed of Advanced Cardiac Life Support (ACLS)-trained members, that are prompted to approach their respective stations at the hospital once an emergency call is received. The team has a 90-minute window to assemble and do the procedure, which is “rehearsed to perfection” and leads to consistent improvements in terms of the door-to-balloon time. A first for the city of Mumbai, the PAMI program has been considered a success, leading to thousands of lives saved and even being replicated by other hospitals.

Over the last 17 years, the program has resulted in the extension of thousands of lives, while the hospital’s door-to-balloon time emulated global standards consistently over the years. Additionally, the program has also attracted the attention of the American College of Cardiology. In recognition of this, the ACC team had actually visited the hospital to understand its process flow due to the time and results.

The quality standards to assess the leadership and management competencies of the heads of departments and the head nurses

Arising from the lack of professional training in terms of management skills for its doctors and nurses, Vietnam’s Cho Ray Hospital established leadership and management quality standards for its heads of departments and head nurses in January 2021. The standards seek to address the consequences resulting from inadequate leadership skills of the hospital’s heads, such as patient dissatisfaction, lack of cooperation from staff and even internal conflicts. In addition to the main objective of identifying and evaluating the heads’ leadership skills, the standards also serve as a framework for creating support programs for training, improving professional qualifications and leadership capacity for unit leaders. “According to the world’s medical literature, the capacity of the leadership team is related to the quality of medical services, the effectiveness of treatment and care.” Cho Ray Hospital noted. The quality standards serve as a unique effort in Vietnam and have been approved and issued for application on hospital leadership.

Currently, Cho Ray Hospital’s standard is regarded as the first in Vietnam and has been approved and issued for application to hospital leadership. Particularly, the standards have been recognized and certified by the National Office of Intellectual Property of Vietnam.
MULTI-DISCIPLINARY SIMULATION AND SKILLS CENTRE, QUEEN ELIZABETH HOSPITAL HONG KONG

Innovating for better care – transforming healthcare service through 3D printing technology

A leading Hong-Kong based simulation training center, the Multi-disciplinary Simulation and Skills Centre in Queen Elizabeth Hospital of Kowloon Central Cluster under Hong Kong Hospital Authority has been spearheading the implementation of an innovative medical 3D printing service since 2015. The Centre has used 3D printing as a new method for pre-operative planning, surgical guides production and skills training to promote and reshape its healthcare service. A central governance structure supports the framework, with the 3D Model Service Development and Strategic Planning Committee tasked to come up with strategies that promote continued improvements in its service delivery. Backed by strong leadership from the hospital management and centre directors, the center’s 3D printing service has achieved accolades not only locally but also on an international scale. One of the program’s crowning achievements is the use of its patient-specific 3D-printed heart model for the successful assistance of the first Transcatheter Tricuspid Valve-In-Valve Implantation (TVIV) case in Asia.

The prominent impact of Queen Elizabeth Hospital’s medical 3D-printing service was likewise well-illustrated by its publications and presentations in international and local journals and conferences, such as Radiological Society of North America and American Roentgen Ray Society meetings.

In further recognition of its efforts, its centre representatives were invited to present our achievements in various public occasions including the first HK International Interdisciplinary Clinical 3D-printing Forum in 2018. Its patient-specific 3D-printed heart model also assisted the first TVIV case in Asia successfully.

NORTHWELL HEALTH

UNITED STATES

Leadership in healthcare

Despite being one of the most advanced nongovernmental emergency response systems in the United States, Northwell Health described the unprecedented onslaught of the COVID-19 pandemic as “a singular humbling experience”. However, the organization has taken its learnings from the ongoing health crisis to craft innovative systems and forward-looking responses that utilize its full scale. Backed by a decisive, data-driven, and supportive senior leadership, Northwell Health has been able to come up with life-saving measures, such as being the first in the state of New York to initiate a mask mandate for its employees and becoming the first US healthcare provider to administer the COVID-19 vaccine. Northwell Health’s pandemic response is focused on protecting the health and safety of its employees, patients, and communities – especially those that are disadvantaged, exemplified through its offering of no-cost, large-scale testing in partnership with various organizations during the initial surge. “Our approach to leadership locally, regionally, nationally, and internationally has been one of optimism and hope,” according to Northwell Health, a rallying cry that has helped in cascading a strong culture of emergency preparedness throughout the organization.
In providing quality healthcare, time is of the essence. Failure to identify, communicate, and provide interventions on early-clinical indicators of deterioration can lead to delay in care, adverse events, unplanned ICU admissions, and unexpected death. Realizing this need, Kaiser Permanente Northern California developed the Automated Early Warning System of Adults at Risk for In-Hospital Clinical Deterioration Advance Alert Monitor, or AAM program, a predictive analytic scoring system.

“The specific aim of the AAM program was to quantify the benefit of an automated predictive algorithm model that identified high-risk patients for clinical deterioration resulting in lower mortality within 30 days of the alert,” according to Dr. Vanessa Martinez, DNP, MHA, RN, who is the Director of Virtual Nursing Care at Kaiser Permanente Northern California. “The AAM alerts were monitored 24/7 by a virtual quality nursing team and rapid response team (RRT) model to respond and act on the alerts.”

According to Dr. Martinez, RRT staffing posed a challenge due to variation in staffing structures, and there was also poor role clarity and variability across the hospitals. As such, RRT nurses were required to respond to the alerts and perform proactive rounding on high-risk patients, but lack standardized workflows and response protocols. “The alert afforded a 12-hour lead time which provided a proactive early response to potential clinical deterioration, rather than the familiar reactive rapid response at the time of clinical deterioration.” Dr. Martinez explained.

“Training was provided to RRT nurses, physicians, social workers, palliative care, unit nurses, and virtual quality nurses on standardized communication, response protocols, hand-offs and documentation,” Dr. Martinez added. “The training also emphasized the aim and value of the program, which was to proactively identify patients with a high risk of mortality or up-transfer to the ICU through the use of a predictive algorithm coupled with a standard staffing model and supportive workflows to enhance hospital patient safety and outcomes including integration of life care planning.”

To test the program, it was piloted in two hospitals from 2013 to 2014, which included 453 beds with 17,000 annual discharges. The AAM score allowed the clinicians 12 hours of lead time to respond, plan and take action. The pilot’s results also showed decreased mortality, decreased length of hospital stay, and improved provision of palliative care. Due to the encouraging pilot, the AAM program was then implemented in 19 hospitals on a staggered basis between August 1, 2016 and February 28, 2019.

Meanwhile, the AAM Program systemwide deployment strategy also involved an afferent arm and an efferent arm and system governance. “The afferent arm includes the standardization of early detection using remote monitoring. Due to the potential harmful impact of alert fatigue on RRT nurses, the alert was displayed in the Electronic Medical Record dashboard for the virtual quality nursing team to monitor,” Dr. Martinez explained. “The different component consisted of standardization of the infrastructure and clinical response, which involved the RRT nurses, standardized clinical rescue and palliative care workflows and clear, defined governance structures that managed the quality assurance and training,” Dr. Martinez said.

The AAM program is reflective of Kaiser Permanente Northern California’s brand of excellence in promoting quality and patient safety. The program featured the organization’s expertise in combined predictive analytics, virtual and in-person care to proactively identify and intervene for high-risk patients with clinical deterioration.

Meanwhile, the benefit of the AAM program is also reaching other healthcare systems, who have started inquiring about the organization’s model. “The integration of the AAM predictive model is currently being evaluated by additional Kaiser Permanente markets for inter-regional spread. External healthcare systems including Mercy Virtual in Missouri and Oshner in New Orleans have inquired about our model,” Dr. Martinez said.

Due to the success of the AAM program, it was also awarded the Kaiser Permanente National Lawrence Patient Safety Award for 2020. “It is vital to have a fully engaged team and governance structure and standardized workflows fully supported by the organization. The AAM program was an important step forward in making our hospitals the safest in the world,” Dr. Martinez said.
ROYAL HOSPITAL OMAN

Learning through the cycle of improvement:
A comprehensive approach to surgical site infection (SSI) prevention in post cardiac surgery patients

Following a significant hike in 2017 of surgical site infections (SSI) in post cardiothoracic surgeries for adults and pediatric patients, the Royal Hospital in Oman developed a new SSI-prevention system that will eventually be recognized and replicated across the country.

The Royal Hospital provides tertiary care as part of the Oman Ministry of Health. It is the biggest referral center in the country and caters, on an annual average, to 70,000 emergency visits, 66,000 inpatient admissions, and 250,000 ambulatory care visits. The hospital’s National Heart Center department performs roughly 800 cardiac surgeries and 6,500 cardiac catherization procedures per year.

In 2017, the hospital was made aware of a surge in SSI to 15.4% for adults and 5% for pediatric patients. The rates were alarming considering the benchmark for both the Centers for Disease Control and the National Healthcare Safety Network was only at 2%.

Royal Hospital found that it was lacking standardized measures to prevent SSI. It also discovered that it had an ineffective infection control monitoring system for the environmental audit in the operating theater, as well as ineffective patient education on wound management for after cardiac surgeries.

In response, the hospital developed a new SSI bundle system and after a year of its adoption, the hospital saw SSI rate reduced to 11% in adult patients and to 2% in pediatric patients. The rate of decline, however, was still slower than intended and poor compliance was identified to have been hindering the project’s success. Once change was fully embraced by stakeholders, SSI rate further dropped to 4.6% in adults and to 1.6% in pediatric patients by 2019. Higher results have been reported for 2020 but it was primarily because of the change in patient admission areas to less qualified wards due to the COVID-19 outbreak.

The new system, which the Royal Hospital claims can be used at any healthcare organization, was since replicated in its other surgical serves and referenced in seminars and symposiums.

SAUDI GERMAN HOSPITAL RIYADH SAUDI ARABIA

Patient Safety Index (PSI) Program: An innovative methodology to monitor and evaluate patient safety practices

Saudi German Hospital Riyadh initiated the Patient Safety Index (PSI) program upon its discovery over the past few years that its existing quality measures for different specialties and care areas are not bringing about meaningful change to the organization. The previous assessment had different definitions for each measurable area and the management of data, as well as its delivery across the hospital, which was not resulting in actionable information, prompting the hospital to make some changes.

The PSI program is the hospital’s new standalone patient safety measure across different disciplines and specialties. It is a systematic, comprehensive, and inclusive framework that is used to gather, aggregate, and analyse compliance data from patient safety processes to determine a number that will gauge the patients’ assessment. The program includes eight measurable domains, namely: patient identification, effective communication, high-alert medications, surgical safety, infection control, patient falls, venous thromboembolism, and pressure ulcer.

The program was launched in April 2020. The baseline PSI back then was 7.8 but after the project’s implementation, the hospital achieved and sustained a PSI of at least 9.5 since October 2020. The improvement was highly attributed to the information generated through PSI that was integrated into the hospital’s operations to improve its processes of delivering patient care.

Saudi German Hospital Riyadh’s mantra is to provide “care like family.” The program enables it to continuously improve and evolve, with results regularly shared to all members of the committees on quality and patient safety, person-centered care, and all clinical staff.

With the implementation of the program, the hospital also satisfied its purpose of having “a positive impact on people’s health and to relieve suffering” as well as its vision of becoming “the most accessible and agile healthcare group, providing innovative, comprehensive, [and] patient-centric care to all people anywhere, anytime” according to Dr. Amir Rizwan, Group QPS Director at Saudi German Hospital. The program was well received by the organization’s stakeholders, as well as by the patients and their families. It also paved the way for a little healthy competition between different departments and patient care areas and will now also be included in the global quality and patient safety framework of the Saudi German Hospital network.
In Spain’s Catalonia region, the prevalence of Autism Spectrum Disorders (ASD) has grown by five times in the last decade from roughly 1.23%. People with ASD have a mortality rate that is higher than average, with mortality expected 20 years earlier than the general population. Approximately a third of people with ASD also have severe psychiatric comorbidities that require hospitalization. Despite their special needs, this vulnerable group is often treated in ordinary health resources. For children and adolescents with the condition, the experience is frequently stressful and could even add problems that are sometimes imitated such as self-harm, eating disorders and disruptive behaviors.

Recognizing the need for a specialized ward for ASD families, Hospital Universitari Mutua Terrassa established an Autism General Hospital Tertiary Unit (UH-ASD), with the primary goal of offering evaluation and multidisciplinary integrated treatment to ASD children and adolescents with severe psychiatric comorbidities, aggressiveness, and conduct problems. These patients did not respond to treatments including several stays in acute inpatient psychiatric units.

The launch of the program was also in response to the increasing preoccupation that the Guardian ad Litem and family associations expressed over the poor safety conditions and restraining techniques used on ASD children in acute psychiatric wards.

The UH-ASD Unit was formally established in 2018 with the support of the Catalan Government’s Department of Mental Health. Its mantra was to create a humanistic space with a multidisciplinary therapeutic program for the ASD patients and their family.

What started as a unit with sufficient room for four patients and two families eventually became a ward with capacity for 10 ASD patients and their families. In addition, Hospital Universitari Mutua Terrassa also has a Hospital ASD Day Unit with capacity for 20 ASD children and adolescents with severe comorbidities.

Dr. Amaia Hervas, Head of Child and Adolescent Psychiatry Service at Hospital Universitari Mutua Terrassa, said the UH-ASD unit was highly successful in the treatment of these severe and vulnerable children. It recorded a 100% improvement on the cause of admittance for patients who stayed an average of 107 days in the unit.

The program has been well received, garnering an average rating of 4.27 out of 5 in a survey completed by 81% of the families of patients treated in the UH-ASD unit. Outside of the hospital, similar units in other places across Spain have also garnered support from family associations and efforts to replicate the program have also started.
MEDICLINIC MIDDLE EAST
UNITED ARAB EMIRATES

Journey to zero preventable harm

Caring the belief that most errors leading to pain, injury or even death during patient care are preventable, United Arab Emirates-based Mediclinic Middle East has made zero harm one of its most important visions. "The zero harm initiative was born in 2018 from the conviction that zero preventable harm is a rational goal, in fact the most important patient safety goal," according to the hospital. Mediclinic Middle East acknowledged that zero harm is hard to achieve in a year or two and that completion is harder to estimate, thus an initial three-year strategy – open for further extension – has been set. From the five targets that the hospital set in March 2020, it was able to exceed four during an interim analysis for that year, including the reduction in inpatient falls, hospital acquired skin lesions and healthcare-associated infections as well as increased medication safety event reporting. Despite difficulties faced during its zero harm journey, Mediclinic Middle East draws inspiration from the fact that the initiative is backed by "improving teamwork, leadership support, effective communication, mutual trust and implementing a just culture".

CHO RAY HOSPITAL VIETNAM

Patient safety patrol unit

Vietnam-based Cho Ray Hospital established the Patient Safety Patrol Unit, or PSPU, to address the excessive demand for healthcare services in the facility that has led to overcrowding and increased staff pressure, in turn negatively impacting patient safety. Composed of 26 key members from various departments in the hospital, the PSPU’s main function is to set up special patrol teams to conduct periodic evaluations of the activities providing medical examination and treatment services in all departments in the hospital. The creation of the PSPU has led to positive outcomes, including a significant reduction in the number of reported incidents from 411 in 2019 to 341 in 2020 and 97 in the first six months of 2021. The hospital has not recorded any serious incident or death caused by system errors in 2020, nor has it observed any case of COVID-19 cross-infection. The initiative is the first of its kind in Vietnam, according to Cho Ray Hospital.

Aside from the program’s positive values, Cho Ray Hospital recognizes that PSPU has much to improve on. For instance, PSPU members are taking action on their non-compliance issues, resulting in delay in taking actions to correct the problems. To solve this, Cho Ray Hospital plans to recruit more members divided into specific specialized groups to provide comprehensive monitoring. From there on, the institution plans to develop specific regulations and policies to further polish the program.

CENTRO HOSPITALAR UNIVERSITÁRIO DO PORTO, EPE PORTUGAL

Home-based care in COVID management: telemonitoring using self-reporting and health professional surveillance

The logistical challenges presented by the exponential rise in patients admitted to home-based care during the COVID-19 pandemic have prompted Portugal’s Centro Hospitalar Universitário do Porto, EPE, or CHUPorto, to adopt a new telemonitoring model with two components: a new webAPP for patients’ self-monitoring data and a newly developed feature in its Electronic Health Record to assist professionals handling lists of hundreds of patients. The multichannel communication model was born at a time when almost half of the hospital’s COVID-19 positive patients were monitored from home. Positive results came out of the model’s adoption, including a shorter recovery period for patients who have used the WebAPP, ensured data protection and security, as well as real-time updates on patients’ clinical data. “It was clear that improving access to and better ways of delivering, clinical information contributed to cost reduction, increased accessibility and quality health care,” according to CHUPorto.

The community’s response to the program was markedly positive. Healthcare professionals specifically were accepting of the program as it significantly reduced the level of effort required to carry out daily monitoring and manage patients during home-based care, by providing meaningful data to support quality clinical decision-making.

On the side of the patients, there was a significant adherence in the use of the webAPP to interact with health professionals. Specifically, each one of the 862 patients monitored at home received a leaflet to promote the use of the webAPP. Of these, 688 patients adhered to the webAPP and, of these, 617 effectively reported their symptoms through the webAPP – showing a significant level of adherence.
The Multi-disciplinary Simulation and Skills Centre in Queen Elizabeth Hospital of Kowloon Central Cluster under Hong Kong Hospital Authority has widely utilized its 3D-printing services for simulation training, allowing students to exercise their skills before performing real-life surgeries. By practicing through a simulation, adverse events during high-stake and complex procedures are prevented, leading to the reduction of clinical errors during operations. The center’s Insufficient information from healthcare providers regarding the advantages of tracheostomy over endotracheal intubation for ventilator-dependent or difficult-to-wean patients leads to a significant number of family members declining consent for the more effective procedure. According to the Division of Clinical Skill Training Center of Taipei Veterans General Hospital’s Department of Medical Education, inadequate information on tracheostomy warrants educational programming to enhance healthcare providers’ knowledge and care skills about the surgical procedure, reduce patient and family hesitation, and shorten the procedure’s delay. As a result, the center’s service has been in demand, receiving 183 requests from 11 departments, with major purposes categorized into pre-operative planning (75%), training and education (19%), and medical device prototyping and miscellaneous (6%). Feedback from expert trainers entails “that not only could 3D-printed models enhance realism and training standards, it also significantly enhanced workflows and resources allocation and eliminated contamination risks during training” the center said.

So far, the program has received promising feedback from stakeholders of its 3D printing service. In fact, being the leading hospital in the local 3D-printing service, the Centre’s representatives were invited to present its innovation development at all levels, including at the HA Board meeting and Journal Club of the Central Nursing division. Similarly, it has also received compliments from the HA Central Committee on Trauma Service Chairman and the multidisciplinary surgical team.

The Taipei Veterans General Hospital’s VR program has received wide recognition nationally. The VR and simulation center products have been disseminated nationwide across Taiwan and received numerous patents and prizes for continuous care quality improvement.

Also, since the institution-wide implementation of the VR materials for education and clinical services in 2018, the institution has earned several national prizes for patient safety and care quality, received two utility model patents, and contributed several publications.

The hospital has also had international exchange with medical education and clinical services institutions about these newly developed VR materials. Specifically, on September 18, 2019, the VR Center hosted international experts from more than 18 countries attending the International Forum on Quality and Safety in Healthcare-Site Visiting by BMJ.
ASHIKAGA-NIKKEN EXCELLENCE AWARD FOR GREEN HOSPITALS

UNIVERSITY HEALTH NETWORK CANADA

A healthier world through a sustainable environment

When the Energy & Environment team at University Health Network in Canada was established in 1999, the team had a core goal – to embed environmental stewardship in its system, resulting in triple benefits to the environment, finance and health. Starting with a lone environmental coordinator, the department has since grown into nine full-time staff in addition to 700 volunteers. The goal however, remains the same as climate change remains a major threat to human health.

“Energy & Environment helps UHN address many challenges in bringing sustainability into the healthcare setting by collaborating widely from top down to bottom up. Energy Project Managers, licensed engineers, identify and validate energy and GHGe-saving opportunities as well as implement projects.” explained Lisa Vanlint, Energy Steward at University Health Network.

“UHN is aware of the global impact that energy and water consumption have on its environment and financial resources, and is committed to providing ongoing awareness and training to assist staff in mitigating these impacts.” Vanlint added.

According to Vanlint, the main goal of the Energy & Environment department is to provide patient and planet-centred care so that healthcare does not create health problems. Because energy is a major part of healthcare's carbon emissions, Vanlint considers UHN’s energy management plan as the centerpiece of the endeavor.

The department also has a waste reduction goal, a cycling master plan and communications goals. The waste reduction goal involves increasing the diversion rate and reducing the amount of materials being thrown out entirely. “By using the waste index, dividing waste weight by the poor space, we get a more accurate picture. Whether taking a single-use material and replacing it with a reusable material, or eliminating use entirely, waste reduction aids climate goals.” Vanlint said.

The cycling master plan involves the transitioning of staff into the use of bicycles, including bike parking, a bicycle user group, as well as working with the city to improve infrastructure such as bike lanes. On the other hand, the communications goals focus on staff engagement and training on all areas of sustainability and environmental compliance.

Since November 1999, UHN has held a policy on environmental management, which is reviewed and updated regularly to emphasize the importance of sustainability in all hospital activities.

“The Environmental Management System is not just a policy, but also an active database to keep the Energy and Environment team and projects organized,” Vanlint explained. “Our EMS tracks extensive metrics in each pillar of sustainability, such as energy, water, GHGe, hazardous and non-hazardous waste, sustainable transportation, environmental compliance, training, communications and more.”

“Environmental audits, internal and external, keep UHN on its sustainable toes,” Vanlint added.

UHN’s Energy & Environment, through its planet-centred efforts, has garnered global, national and municipal sustainability awards. These include being recognized as Canada’s Greenest Employer 2021, via Canada’s Top 100 Employers; being awarded Global Green & Healthy Hospitals 2020 Health Care Climate Challenge: Climate Resilience: Gold in both 2019 and 2020; as well as receiving the Toronto Hydro Energy Innovation Award: Best MUSH Customer 1MW+ in 2018.

Meanwhile, UHN is also a founding member and leader within the Canadian Coalition for Green Healthcare, dedicated to sharing best sustainable health care practices across Canada. The organization likewise participated in the Climate Change Resiliency Mentoring program and mentored two hospital cohorts using the Health Care Climate Change Resiliency Toolkit.

“By demonstrating the value, of embedding sustainability into healthcare via the Energy & Environment Department, this model is gaining steam at many other hospitals and health care organizations across Canada.” Vanlint said.
Plenty of initiatives have attempted to integrate the pursuit of environmental preservation and sustainability into progress. For more than 10 years now, the Fundació Sanitària Mollet (FSM) hospital in Barcelona has been proving that these ideologies can go hand in hand through its sustainable practices and its construction of an acute hospital, which became the core of its strategies for sustainability. Attached to the University of Barcelona, FSM is a non-profit institution that provides public social and health services to more than 165,000 people across 10 municipalities in the Spanish city. It has always paid close attention to its corporate social responsibility and continuously worked toward balancing the sustainable and responsible management of its income. It even reinvested the surplus to its annual €70 million revenue in technology and qualitative improvements for its employees. With the joint commitment of its leadership, employees and the entire organization, FSM started using lightwells and sustainable architecture, radiant ceilings and sustainable roofs, rainwater to help reduce water consumption, geothermal energy, electricity sourced from renewable energy since 2017, and solar panels. It also started practising recycling and waste management. In its development of the acute hospital, FSM’s objectives included making sure that there is accessibility and functionality in the arrangement of spaces, circulation and relationships between the general public healthcare workers, and services. Furthermore, it wanted structure with flexibility and versatility in the design and of course, a commitment to energy and environmental sustainability. The new hospital has been operating now for more than 10 years. Within that time, FSM modernized the building’s boilers and invested constantly in geothermal equipment. It also shifted to using electric vehicles and solar power, which helped minimize its waste and made possible the reduction of its carbon dioxide emissions into the atmosphere.

In an effort to become carbon neutral by 2030, Fachklinik Gaissach (FKG) initiated the sustainable transformation of its hospital for chronic diseases of children and adolescents. It adopted a behavioral transformational change management toolkit and reiterated the plan, do, change, and act (PDCA) cycle in response to the call for hospitals across the world to alter various areas of operations in pursuit of carbon neutrality and the least possible carbon footprint. FKG wants to contribute to ongoing efforts worldwide to address climate change, which the Lancet commission and the World Health Organization described as the biggest global health care challenge and threat of the century. Together with international networks such as Health Care Without Harm and the National Health Service of the United Kingdom, the organization will participate over the next 10 years in the Race to Zero initiative. To achieve carbon neutrality and net zero health services, FKG implemented changes in various areas of operation at the hospital. It enforced initiatives that particularly target the reduction of waste and energy, green building, green procurement, saving of pharmaceuticals, reduction of hazardous chemicals, public and emission free transportation, plant-based food and reduction of food waste, and leadership. In doing so, the hospital started the regular monitoring of its energy expenditure, photovoltaic generation, food waste and other disposals, as well as its production of photocopies. Medical doctor and Prof. Edda Weimann, the point person for the program, said the sustainability transformation that was taken up by FKG’s stakeholders will be adapted by other hospitals in and out of the organization’s chain. A guiding framework for the program was also published across Germany to assist other institutions at the start of their own change management process toward sustainability.
Apollo Hospitals, Chennai in India initiated a project that sought to reduce its increasing annual electrical consumption rate by merging and balancing the air conditioning load between its two primary blocks, the Main Block and the Sindoori Block. The energy conservation initiative targeted the HVAC, or air conditioning, system given its 60% share of the hospital's total power consumption. Specifically, energy consumption in the Sindoori Block had been rising by an average of 2% annually and had gone beyond the permitted limit of 500 KVA by the State Electricity Board. The team technically reengineered the HVAC system schematic and optimized the utilization of the chiller plants between the two primary blocks. To not interrupt patient service, team members identified two nights for shutdown welding operations to complete the connection works. Significant results were observed following the initiative, including electricity reduction and savings of 26.50%, on average, per month.

Apollo Hospitals has since reaped the benefits of its efforts to arrest rising energy consumption by streamlining its air conditioning needs. Outcomes also include a refund in current consumption deposit, 42% man hours saved per month and increased overall equipment efficiency. Meanwhile, the project has also won a special award in the excellence category in environmental conservation in Apollo Internal Group Awards for innovation and quality.

CONSORCI SANITARI DE L’ALT PENEDÈS I GARRAF SPAIN
Energetic and ecological transition in hospitals

The prolonged absence of necessary renovations in the three hospitals comprising the Consorci Sanitari de l’Alt Penedès i Garraf (Alt Penedès - Garraf Health Consortium, or CSAPG) has been the cause of inefficient energy consumption for both gas and electricity within the facilities. This has led the Spain-based consortium to implement goals that are meant to improve efficiency, safety, and quality of health service in the territory.

The organization’s targets include improvements in the facilities with technologically advanced and energy efficient equipment; usage of renewable energies; a reduction in CO2 emissions; and the reinvestment of economic savings in infrastructure improvement. To achieve these goals, the CSAPG carried out steps such as the development of energy audits; the formation of a five-year public-private partnership contract for energy services with a specialized company; a six-month implementation of the technical installations’ renovations; and a measurement and verification plan for monitoring of gas and electricity savings over time.

Two of the consortium’s hospitals, which started the project in 2017, exceeded their savings targets in the second year for both electricity and gas, hitting 10.14% and 21.41%, respectively.

ONTARIO SHORES CENTRE FOR MENTAL HEALTH SCIENCES CANADA
Ontario Shores: Operational excellence, sustainability, innovation and utility reduction

Canada-based Ontario Shores Centre for Mental Health Sciences found opportunities to implement several environmentally friendly initiatives and savings after reviewing its 2017 Greening Health Care annual report. This kickstarted the facility’s long-term sustainability plan during the following year, focusing on utility savings, waste diversion, and innovation without compromising its high quality of service. Since then, the facility has implemented several no-to-low-cost practices that have helped in reducing its energy consumption. Comparing the facility’s overall 2020 usage compared to a 2017 baseline, it observed savings of 16% on electricity, 5% on natural gas and 19% on water usage.

Other efforts have also branched out from Ontario Shores’ commitment to promote sustainability, including the installation of a beehive on the facility’s grounds in partnership with Alveole, the Urban Beekeeping Company; and an Innovation Fund application process in which any staff member could submit an application to propose an innovative savings idea.
Citing the energy-intensive operations and high volume of waste generated by Philippine tertiary hospitals, Manila Doctors Hospital embarked on a campaign to promote climate change solutions, with a focus on energy and water preservation, waste reduction through recycling and adopting bio-compostable materials, and carbon footprint reduction by using sustainable construction materials for its facilities’ renovation. In 2006, the hospital leadership established ENVICOM, a committee with task forces for energy and resource management, hazardous and non-hazardous waste, supply chain management and infection control. Since then, the hospital implemented several efforts aligned with its green targets, including significant investments in switching to LED lights, as well as the use of bio-compostable materials for food packaging. “The hospital-wide implementation of the recyclables program has netted PHP 5,675,981.92 ($115,836.40), earned from the segregated non-toxic waste collected from 2006-2020 – showcasing how leadership by example is an effective form of communication,” the hospital said.

Germany-based Evangelisches Krankenhaus Hubertus has been advancing green initiatives for a long time, being the first hospital in the country to be awarded “energy efficient” by the BUND in 2001. However, the healthcare provider acknowledged that climate protection initiatives have been led mainly by the technical department and there is a need to raise greater awareness regarding climate change among its other stakeholders, including employees. The hospital is also part of the KLIK green project, which aims to encourage healthcare providers to integrate “planetary health” into healthcare education, help in achieving a CO2-neutral healthcare sector by 2050, and promote the role of climate managers as a recognized occupational group in the industry. To achieve this goal, the hospital hired a climate manager among its nurses to develop an action plan that looks to reduce its CO2 footprint and drive sustainability, crafted in a manner that it is easily understandable and achievable for employees. Some of the projects carried out by the climate management team include installing detectors to shut down lights and using rain water for flushing toilets or watering the hospital park to lessen energy consumption; developing online sustainability lessons for employees; and educating them about regular things that can be done to help curb climate change. “We take the idea of climate management a step further by using a nurse as a multiplier.” the hospital said. While the hospital noted that it is still early to measure the impact of the climate manager’s initiatives on its CO2 footprint, it is hopeful that it will eventually see “an accountable effect” from these efforts.
In a developing country like the Philippines, blindness is not only a health issue but also remains a major psycho-socio-economic problem, with vision impairment ranking among the major concerns in the country. Concurrently, basic ophthalmology services are hard to access in the country’s isolated healthcare processes, not to mention the lack of adequate exposure to intervention and surgical procedures. These are the problems which Manila Doctors Hospital, through its Share the Gift of Vision (STGOV): Advancing the Right to Sight and Ensuring Quality of Life program, hopes to alleviate.

“The Philippines has 1,573 ophthalmologists, 44 are pediatric ophthalmologists, 95% are practising in urban areas. Majority of Filipinos in rural areas have no access to ophthalmologists due to the high cost of setting up a facility and even if available, poor patients cannot afford to pay,” according to Jill Alvarez, head of the Corporate Social Responsibility Office at Manila Doctors Hospital. “The situation demands increased provision of cataract surgery for poor Filipinos as they are particularly vulnerable to visual impairment from cataract.”

The goals of STGOV are preventing avoidable blindness for children and adults by providing free cataract surgery for poor patients both from urban and rural underserved areas in the Philippines; utilizing the nationwide reach of the Manila Doctors Hospital Corporate Social Responsibility Office Circle of Partners to bring poor patients from hard-to-reach areas who need eye surgery to MDH through the provision of free transportation, accommodation, meals, and post-operative medicine; and to utilize the MDH vision center to provide non-discriminatory eye care intervention to poor patients.

STGOV likewise aims to provide underserved patients with access to ophthalmologists with sub-specialties during medical missions and for those who are sent to MDH for various eye conditions and provide accurate eye refraction, Alvarez said.

The STGOV program was started through the funding of Metrobank Foundation, the majority stockholder of MDH, and then later by GT Foundation, for supplies and medicines. The MDH management also allows its equipment and facilities to be used for free, including full access to its vision center.

“The MDH Vision Center features state-of-the-art equipment and facilities capable of undertaking quick and accurate eye tests for cataract, glaucoma, retinal detachment, diabetic retinopathy, and macular degeneration among others.” Alvarez explained. “This assures patients of quality and safe intervention not just for cataract surgery, and also allows MDH CSR and its external partners to address other cases like cornea transplant, orbital mass, congenital eye diseases, etc. for poor patients.”

Meanwhile, MDH management also extends discounts of 30% to 70% for basic laboratory procedures needed by the patients for their medical clearance before surgery, specifically for those with pre-existing conditions such as hypertension and diabetes. According to Alvarez, from 2017 to 2020 alone, the total number of volunteer hours of MDH doctors, nurses and pharmacists is at 3,333 hours rendered from screening during medical missions to actual surgery, corresponding to a monetary value of about PHP P20,450,000 or $409,375.

As for the personnel, MDH’s team is composed of volunteer ophthalmologists, nurses, and pharmacists for screening and surgery with support from volunteer cardiologists, pulmonologists, and pediatricians while social workers also conduct socio-economic assessments to ensure that the economically disadvantaged patients receive the free surgical products and services. Meanwhile, external partners provide transportation, meals, accommodation, post-operative medicines and free RT-PCR testing since the pandemic started.

Now on its 20th year, the STGOV program has garnered immense support and acceptance from various stakeholders, external partners composed of nine non-profit organizations, nine government agencies, ten business entities, and three faith-based organizations are continuously engaging in the program.

Alvarez also highlighted that the municipal board of Basco, Batanes in the Philippines passed a resolution recognizing MDH for “demonstrating genuine humanitarian care, compassion and generosity, of time and resources specially for the marginalized people in this far-flung province of the country.” This was after MDH conducted two medical missions in Batanes funded by the “One Hour of Help” donation of MDH employees as well as proceeds from the MDH ENVICOM recyclable funds.

“A number of private tertiary hospitals not just in Metro Manila (Medical City Pasig, St. Luke’s Quezon City, Chinese General Hospital) have replicated STGOV while hospitals located in provinces, who in recent years were able to set up eye care facilities, have invited our specialists for surgical missions specifically focusing on eye diseases.” Alvarez said.
Stay’n Deadly & Stay’n In Project

In order to address the long-standing problem of high incomplete treatment rates for Aboriginal and Torres Strait Islander patients, St. Vincent’s Health Network Sydney (SVHNS) initiated the Stay’n Deadly & Stay’n In Project to ensure the equitable delivery of health services to vulnerable groups within the community.

The hospital recognized that it had one of the highest rates of incomplete treatment for Aboriginal and Torres Strait Islander patients. In the 2018-2019 financial year, it recorded 19% of incomplete treatments for Aboriginal patients, with 8% of those accounted categorized as having left at own risk (LAOR) and 11% as those who did not wait (DNW) for treatment.

SVHNS’ acknowledged that the rates have become a contributing factor to lower life expectancy and a reflection of how Aboriginal patients are at a greater risk of poorer health outcomes. Furthermore, the rates represent the accessibility, cultural safeness, and appropriateness of hospital services for Aboriginal communities.

The hospital understood that reducing the number of incomplete treatment rates would not only improve patient satisfaction and quality of care but also increase staff satisfaction, as well as decrease hospital expenditure related to potential clinical deterioration and future hospital admission.

The implementation of the Stay’n Deadly & Stay’n In Project involved critical changes to rostering, patient flow pathways, and the rollout of cultural awareness training for all Emergency Department (ED) employees at SVHNS. The hospital aimed to reduce by December 2020 the DNW rates of Aboriginal, the LAOR rates to 25% from 8%, and to improve face-to-face contact with Aboriginal Health Workers to 50% from 27.5% within the same time period.

Mr. Sean Allen, Health Management Trainee at SVHNS, said within 10 months of the project’s implementation, the quality of medical care at SVHNS-ED significantly improved, with incomplete treatment rates for Aboriginal and Torres Strait Islander patients dropping to 4.5% from 19.5%.

“The development and successful delivery of the Stay’n Deadly & Stay’n In Project is evidence of our commitment to better supporting Aboriginal and Torres Strait Islander patients and improving their health and wellbeing in a systematic way. We are committed to closing the gap in relation to health outcomes for Aboriginal and Torres Strait Islander people and will continue to look for further opportunities to support our community,” he added.

Miles Smiles Vietnam Project

In support of the Sustainable Development Goals and its own philosophy of serving the community, E-DA Hospital formulated the Miles Smiles Vietnam Project.

The project is inspired by Operation Smile, an international charity that provides free surgery to people who suffer from cleft lips, cleft palates, and other craniofacial deformities in more than 30 countries. Miles Smiles was started in 2011 after Prof. Seng-Feng joined the hospital and in 2014 it was formally seen as a successful venture, resulting in the signing of a memorandum of understanding with Operation Smile Vietnam (OSV).

The initiative was an exciting and new collaborative opportunity to support and develop the innovative deliver of medical missions. Its objectives are to enhance the effectiveness, efficiency, and accountability, as well as improve the overall quality of medical outreach in Vietnam. It championed the proper delivery and execution of short-term medical missions, recognizing that the traditional “fly-in” approach is not the most effective strategy to achieve long-term and sustainable impacts.

Equitable care became one of the cornerstones of Miles Smiles. Volunteerism was also highlighted in recognition of the fact that the cost of healthcare remains a barrier for many patients in Vietnam. E-DA Hospital committed to financially support the project, and its personnel voluntarily participate in the medical missions and forego work wages to have additional funding for necessary items such as medical supplies.

From 2013 to 2019, 36 education-based microsurgeries and 40 cleft lips/palates surgeries were performed under the program. After every medical mission, the E-DA Hospital and OSV conduct an annual retreat wherein feedback from local stakeholders, performance, and the plan for the succeeding missions are discussed. Revisions are made to achieve best results and now, the partner organizations are working together to incorporate the COVID-19 pandemic in the program.

Miles Smiles was honored by the Alliance for Sustainable Development Goals in 2020 with the Global Corporate Sustainability Award. As the project approaches its 8th year, it received various praises from across Asia, but the most reliable proof of its success remains to be the people whose lives were changed because of Miles Smiles.
EMIRATES HEALTH SERVICES
UNITED ARAB EMIRATES

Community psychiatry program

To achieve the objectives set out by the UAE National Mental Health Policy for promoting mental health, the Emirates Health Services implemented several related efforts such as the Al Amal Hospital Community Mental Health Program, which aimed to deliver holistic, accessible, and recovery-oriented Community Mental Health Services for community members with mental illness. In conjunction, the facility introduced the Community Psychiatry program, with a focus on developing a robust clinical, process-oriented program to manage high-risk psychiatry patients enrolled in community psychiatry service.

The program will streamline the workflow for the Community Psychiatry Department, which is part of Al Amal Psychiatry Hospital, and act as a model workflow for any future community psychiatry service setups. As part of its mental health initiatives, the Emirates Health Services looks to provide accessible services through tele-mental health, which uses video, audio or phone communication between the healthcare provider and the client.

Apart from being replicated by other hospitals and liaised with local community and social services, the project was also shortlisted as the best community wellbeing initiative in 2018 by the UAE Ministry of Happiness.

VICENTE SOTTO MEMORIAL MEDICAL CENTER PHILIPPINES

Malasakit Center: Compassion through linking patients and the government

Philippine-based Vicente Sotto Memorial Medical Center has developed the Malasakit Center, an out-of-the-box, one-stop-shop solution that seeks to address the fragmented access to medical financial assistance availed by patients outside of the hospital. With the state’s Philippine Health Insurance Corporation, or PhilHealth, possibly not funding all healthcare related costs, hospitals are prevented from providing all services to patients while those that are unable to afford the healthcare costs resort to seeking financial assistance from several agencies. This fragmented framework prolongs the patient’s stay in the hospital and delays medical procedures and treatment.

As such, the Malasakit Center, established by the hospital in partnership with several government agencies, aims to ease the burden of prolonged procurement of services by eliminating paperwork, redundant assessments, and the need to go out of the hospital to seek financial assistance. Since 2018, over 400,000 patients from Visayas and Mindanao have benefited from the program covering catastrophic illnesses.

ASKLEPIOS HARZKLINIK GOSLAR GERMANY

Movement and balance. Health in the city.

Germany-based Asklepios Harzklinik Goslar’s “Movement and Balance in Dementia” project looks to provide a sensorimotor program for dementia patients using rollators and wheelchairs as well as those with mental/physical impairments. It is a three-part programme that is undertaken individually and is situation-based. The project is part of the “Movement and Balance in Dementia” program, a sustainable, low threshold and innovative method with positive cost-effectiveness ratio that caters to all people, regardless of age, gender, origin, nationality, and physical and mental requirements.

Aside from providing care for dementia patients, other goals of “Movement and Balance in Dementia” include, but not limited to, improvement during a hospital stay, sustainable care, countering dementia through prevention and restoration of external and internal balance.

The project received an award from the Lower Saxony Ministry for Health, Equality and Social Affairs in 2019.
DEMOCRITO O. PLAZA MEMORIAL HOSPITAL  PHILIPPINES

Piso Para sa Pagbabago: Employees’ initiative in raising funds for hospital improvements and staff assistance program

Democrito O. Plaza Memorial Hospital’s “Piso Para sa Pagbabago” program is an employee-led initiative that aims to raise funds for hospital improvements and staff assistance. The old nature of the hospital’s main building presents infrastructure constraints that lead to dissatisfaction from patients. Patient’s satisfactory experience is likewise greatly affected by the overall psycho-emotional well-being of the healthcare worker, who may be feeling distress as well. The “Piso Para sa Pagbabago” program looks to address these issues that could be overlooked given a tight budget for health. The strategy is to collect one peso a day for each employee, translating to PHP P12,000 a month, which then are pooled to serve as a trust fund. “The program has created enormous difference in the lives of the employees, the patients and the entire hospital community,” the hospital said. Specifically, the trust fund was used for emergency purchases of construction materials and repair of structures to meet the needs presented by the pandemic. It also provided emergency funding for employees who were victims of fire, flood and typhoon and medical financial assistance for the employees and their family.

MARIANO MARCOS MEMORIAL HOSPITAL AND MEDICAL CENTER  PHILIPPINES

Putting equity in healthcare the value of benefit packages

With a goal of promoting equitable healthcare, the Mariano Marcos Memorial Hospital and Medical Center has made efforts that include becoming a contracted healthcare institution for Z-benefit packages, finding more funds for allocation of medical assistance, and launching fundraising activities to set up a trust fund for kids with cancer.

The hospital found it necessary to implement these targets to assist low-income patients that are burdened by financial instability and who often forgo care in favor of basic needs.

The hospital holds the status as a Contracted Healthcare Institution for Z-Benefit package for acute lymphocytic leukemia, premature and small newborn, and peritoneal dialysis. The institution also continuously seeks sponsors, donors, and proponents to fund the Medical Assistance for Indigent Patients Program and has a “Hospital Share” effort to lessen the financial burden of indigent patients in their hospital bills through the implementation of a “partial pay” initiative.

For the institution, it’s more about giving young cancer patients a cheerful reminder of child play. Under the Arapaap, a dream photography exhibit and fashion show, the Mariano Marcos Memorial Hospital and Medical Center was able to raise over PHP P200,000 which was used to set up a trust fund for the young cancer patients.

With the initiatives, everyone receives the same level of healthcare wherein patients who are unable to pay for high cost procedures would still receive the same quality of care as those who are able to.

An equitable funding arrangement closes the gaps as it is an effective way of improving health outcomes for indigent patients. Thousands of patients are now confident enough to visit the hospital facility and access healthcare knowing that equitable healthcare awaits them.

As a result, the hospital and medical center has received positive feedback. Aside from assistance from the national government, support has outpoured from local government units as well as private sectors for funds to be allocated to those in need.
Since its inception in 2017, the eHealth program of the French Medical Institute for Mothers and Children (FMIC) in Afghanistan has been serving as a bridge to medical services particularly for people living in remote areas. The program allows live teleconsultation, which proved really essential with the onset of the COVID-19 pandemic in 2020.

The program started in Pakistan after the Aga Khan Development Network established a teleradiology link between the FMIC and the Aga Khan University Hospital (AKUH). What began with just two participating hospitals eventually grew to include four more, namely: the provincial hospitals of Bamyan and Faizabad, Mirwais Regional Hospital, Khorog Oblast General Hospital and the Necker Hospital.

Although the eHealth program started in 2007, the real importance of the program was actually felt in 2020 during the COVID-19 pandemic and its national impact. The number of teleconsultations during the period increased dramatically as it became the only viable option. The eHealth program was also helpful for those who lived in far flung areas and do not have the capability to access a healthcare facility.

Meanwhile, among the specific goals of the eHealth program include improving access to healthcare services through videoconference equipment, creating a user-friendly system to make the healthcare system equitable, to establish live contact form any place and time through the hub site professional medical staff, to reduce the cost of travel of the patients through eHealth services and to reduce geographic boundaries as barriers for individuals who seek healthcare services.

The hospitals are spread across Afghanistan, India, Pakistan, Tajikistan and Paris. Through the program, they created a user-friendly system to guarantee an equitable access to healthcare services, as well as a valuable information system that helped improve the delivery of such services to people. Furthermore, the program cuts five days on the waiting period for consultations and US$200 per case on average.

To date, FMIC’s eHealth program has facilitated over 40,951 consultations in a variety of specialties, including teleradiology (interpreting CT scans, mammograms and MRI images), telepathology (working together to study and diagnose diseases) and conducting live teleconsultations in specialties such as cardiology, obstetrics/gynaecology, pediatrics, dentistry, ophthalmology, orthopaedics, surgery, adult internal medicine, ENT, dermatology, psychology, and neurology.

Considering its life-changing impact, the eHealth service has been well-received not just by the people who use it but also by the donors, suppliers and other healthcare organizations involved with the FMIC. At the regional level, the program was lauded by stakeholders such as the Central Asia Health Strengthening System Project for Tajikistan, Kyrgyzstan, Pakistan and Afghanistan. It was also replicated in and out of Afghanistan, with adaptations in five other provinces of the country.
Despite growing evidence supporting the importance of mobile health units or mobile clinics, the versatile model of care remained underappreciated in Africa and Zambia. They were not widely supported and overlooked until they ended up being a key player in the response strategy for the COVID-19 outbreak.

In recognition of the value of mobile health units, the Medland Health Services in Zambia launched the Q-Medland project to capitalize on the versatility of the mobile facilities and support national effort to control further spread of SARS CoV-2, which has become the largest public health emergency in the history of the country.

Medland Health Services kicked off the program in February 2021 with one mobile unit in Lusaka, Zambia. The site contributed 3,500 tests on average monthly ever since and will soon be replicated at eight more locations within various regions of the country.

The Ministry of Health and the Zambia National Public Health Institute (ZNPHI) highlighted the importance of adequate diagnostic capacity in controlling the pandemic. Guided by the testing, tracking and tracing (TTT) response approach, the Q-Medland project paved way for the establishment of COVID-19 Mobile Lab Units, which boosted testing capacity in Zambia by more than 15%. The project also aimed to promote testing within communities and boost local testing capacity.

The primary objectives of the mobile units are to maintain a daily testing rate of 800 to ensure early detection and continue the screening of incoming travelers, encourage Zambians to get tested by providing fast and convenient collection/swabbing options, and assist with the deployment of resources to areas of concern.

To maximize the efficiency of the mobile units, Q-Medland also invested in the creation of the Q-Medland COVID-19 App, a fully automated platform where patients can register and make appointments for testing, as well as receive emailed results. The platform provides unique QR codes and enables lab technicians to confirm collection of specimens and upload results in real time.

In June 2021, Q-Medland was recognized at the Africa Healthcare Award Summit in Lagos, Nigeria, for Upholding Excellence in Care and Innovation in Healthcare. According to Dr. Mohammed El Sahili, Medland Health Services CEO, neighboring countries of Zambia even expressed interest in replicating the program because of its innovative.

Given the challenges presented by the COVID-19 pandemic, India’s Apollo Hospitals launched Project Kavach, a multipronged strategy to handle the health crisis with several unique facets such as an AI-based COVID-19 screener, a 24-7 integrated app for teleconsultations and medication delivery, i-stay and methods to rapidly update care protocols across its entire system to help reduce spread and mortality. Within the Apollo system, 55,199 patients (6,081 in intensive care units) have been treated for COVID-19, and the inpatient mortality rate dropped from 3.02% between June and August 2020 to 2.38% between September and

November 2020. Its 24/7 tele-app has over 5 million people registered and roughly 100,000 active daily users, enabling about 240,000 consultation appointments across 75 cities. “The result of our endeavors for a better patient experience while ensuring patient safety has a complete holistic approach to it,” integrating outcomes, quality of care and patient trust, the organization said.
Amiri Medical Complex (tertiary-care hospital)

Amiri Medical Complex was inaugurated in 2015 as a fully-fledged hospital in Kabul, Afghanistan to address the issue of citizens visiting nearby countries even for very basic medical issues. Due to the ongoing war in the country, its healthcare system previously faced problems both in infrastructure and service delivery, with no authentic hospital or diagnostic center to assure access to advanced medical care services. AMC seeks to address these issues by rendering high-quality, efficient, and sustainable cardiac and other medical sub-specialty services that were previously not feasible in the country. “With state-of-the-art infrastructure and expert medical and administrative teams, AMC is the premier choice for comprehensive medical care.” the hospital said.

Prior to the establishment of the AMC, the institution has often received patients whose treatment was not actually feasible inside the country. As such, in order to receive the appropriate and required medical services, the institution has referred the patients to institutions abroad. “Despite bureaucratic hurdles, poverty, getting visa, unfamiliarity, local language, fraud, accommodation, higher costs, police abuse and other social problems during their visit to foreign countries, they frequently return with undesirable outcomes, sometimes with terrible results.” according to the hospital.

It is under this premise that the institution sought to make technologically advanced medical services and harness the multi-million dollars derived from the national fiscal cycle each year.

Dr. Jose N. Rodriguez Memorial Hospital and Sanitarium

From Tala to Taal: The deployment of DJNRMHS - Philippine emergency medical assistance team In response to Taal Volcano eruption

During the eruption of Taal Volcano in Batangas, Philippines in January 2020, Dr. Jose N. Rodriguez Memorial Hospital and Sanitarium was deployed to give medical services to the evacuated people. The hospital is tasked to extend provision of effective and efficient health service delivery to affected populations and to ensure timely and coordinated mobilization of appropriate emergency medical teams. The hospital was able to fulfill its mandate given the significant development of the capacity of its health emergency preparedness and response in terms of manpower, logistics, skills, and competencies. The hospital has its emergency medical teams available for deployment during health emergencies and disasters, composed of doctors, nurses, and allied health professionals that provide life-saving medical services in the first days and weeks after the occurrence of a health emergency or disaster. At difficult times such as occurrences of natural disasters, DJNRMHS has accepted the call for public service and has shown dedicated response to address the health needs of the displaced families and individuals.” the hospital said.

Democrito O. Plaza Memorial Hospital

Laging Handa: Disaster risk reduction and management in health plan – mitigating effects of natural and man-made calamities

Democrito O. Plaza Memorial Hospital’s “Laging Handa” (“Prepared Always”) program is a mantra that it follows due to its proximity from the active Philippine fault, with all of its sites possibly affected by ground shaking in the event of an earthquake. It is also an initiative adopted by the hospital given the vulnerable nature of healthcare facilities to disease outbreaks, an epidemic or even a pandemic. To pave the way for the “Laging Handa” project, the hospital established policies, guidelines, and procedures with the country’s Disaster Risk Reduction and Management Plan for Health (DRRM-H). Other health care institutions within the province of Agusan del Sur have studied and benchmarked the COVID-19 Quick Response project under the umbrella program of “Laging Handa” which has also been the leading program in the province, adopted and modified to tailor fit other institutions’ needs and availability of resources.
MAX SUPERSPECIALITY HOSPITAL  INDIA

"Suraksha" - Save the lives during COVID pandemic

MAX Superspeciality Hospital’s COVID-19 experience was not an easy one, as it has been hounded by several unforeseen problems and had to adapt to changes brought forth by regulatory changes and new evidence. However, the organization was able to push through and delivered its best in handling the crisis through the crafting of standardized policies/protocols and their implementation. This has led to the Suraksha project, composed of four stages: the formation of a task force consisting of a medical, nursing and infection control team; facility modifications in view of patient and employee safety; manpower modifications to adopt the use of PPE and a “buddy system;” and the management of oxygen crisis, with a team composed of Rakshak (Saviors) monitoring oxygen demand and validating the utilization of oxygen and controlling wastage. As one of the effort’s results, the hospital has an average of less than 5% mortality among its COVID-19 patients despite having about 80% of COVID-19 beds. Also, no doctor has been infected due to exposure to a COVID-positive patient under the project due to the meticulous use of PPE.

Further, according to the institution, it is critical that it does not only focus on the acute care of COVID-19 patients, but also that it proactively manages patients without COVID-19. “We used this opportunity to prepare ourselves for the impending surge in COVID-19 patients and became the preferred hospital in Delhi and surrounding region. No staff or patient mortality due to oxygen crisis has been faced. Despite the crisis situation, our infection control indicators were maintained as per standard.” according to Dr. Archana Bajaj, Medical Superintendent at Max Superspeciality Hospital.

Iran’s Shahid Beheshti Medical University of Sciences developed a machine-learning-based screening system that the public could use at home before reaching the hospital for COVID-19-related concerns to limit unnecessary visits and overcrowding, which could lead to cross-infection. The group’s system compares all people in categories of vulnerabilities and mortality risk from COVID-19, quantitatively and qualitatively, with acceptable accuracy. It also can predict the possible occurring symptoms for individuals in the case of infection. Using both predictions would give an ordinary person the means to decide when to refer to a hospital. The hospital believes that early prediction of symptoms and mortality risk for COVID-19 patients would improve healthcare outcomes.

The AI tool, named Riskeman, is posted online and is free of charge. As of June 20, 2021, more than 500,000 users have adopted the system. “This project was the first major AI-based system that was used by a meaningful percentage of the population,” the hospital said.

Meanwhile, the project, which is known generally as Riskeman in Iran, has now garnered many approvals for mass use, including approvals from the Ministry of Health and Vice Presidency Office of Science and Technology. In fact, the unveiling of the project and its introduction to the general public was directly televised live through national television and attendees ranged from the head of major medical universities to the health ministry of Iran’s representatives.
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