



Standards for Health Promotion in Hospitals



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This document is the outcome of an international working group initiated two years ago and has been developed in accordance and in cooperation with international quality organizations and the members of the International Network of Health Promoting Hospitals.

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PREAMBLE

The European Strategy of Health Promoting Hospitals

The Regional Office for Europe's strategy for work with countries “Matching services to New needs”¹ focuses on the analysis of needs and aspirations of the country in question and supports the implementation of strategies based on the best evidence available, considering the country's own capacities and possibilities of implementation. In line with this strategy, and upon request of member hospitals of the Health Promoting Hospitals network, experts from 25 countries have been involved in drafting the Standards for health promotion in hospitals.

The World Health Organization initiated the Network of Health Promoting Hospitals with the aim to reorient health care institutions to integrate health promotion and education, disease prevention and rehabilitation services in curative care. Many activities have been carried out and more than 700 hospitals in 25 European Countries and worldwide have joined the WHO network since the establishment of the network².

Health Promoting Hospitals have committed themselves to integrate health promotion in daily activities, i.e. to become a smoke-free setting, and to follow the *Vienna Recommendations*, which advocate a number of strategic and ethical directions such as encouraging patient participation, involving all professionals, fostering patients` rights and promoting a healthy environment within the hospital³. However, so far no tool or set of standards was available to systematically assess, monitor and improve the quality of health promotion activities in hospitals.

Additional information on the project is available on the website of WHO Europe (www.euro.who.int/healthpromohosp).

Defining health promotion

Health promotion is defined as “*the process of enabling people to increase control over, and to improve, their health*” (Ottawa Charter for Health Promotion⁴), and is here understood to embrace health education, disease prevention and rehabilitation services. It is also understood to include health enhancement by empowering patients, relatives and employees in the improvement of their health-related physical, mental and social well-being.

Hospitals play an important role in promoting health, preventing disease and providing rehabilitation services. Some of these activities have been an essential part of hospital work, however, the increasing prevalence of lifestyle-related and chronic diseases require a more

expanded scope and systematic provision of activities such as therapeutic education, effective communication strategies to enable patients to take an active role in chronic disease-management or motivational counselling.

Changing public expectations, an increasing number of chronic patients requiring continuous support, and staff frequently being exposed to physical and emotional strains require hospitals to incorporate a health promotion focus as a key service for patients and staff.

In addition, hospitals impact on health not only through the provision of prevention, treatment and rehabilitation services of high quality, but also through their impact on the local environment

The need for standards for health promotion in hospitals

The predominant approach to quality management in hospitals is through setting standards for the services. Health promotion is a core quality issue for improving health and sustaining quality of life, however, a review of existing standards for quality in health care for references to health promotion activities yielded little results⁵. Standards for health promotion in hospitals are necessary to ensure the quality of services provided in this area.

Furthermore, reimbursement systems do not yet facilitate the systematic incorporation of health promotion as an integral part of hospital activities. For the long-term benefits for patients and systems health promotion activities should be facilitated by national and regional health policies. Standards will facilitate both the implementation of health promotion and the assessment and continuous monitoring for quality improvement.

Recognizing the need for standards for health promotion in hospitals, WHO established a working group at the 9th International Conference on Health Promoting Hospitals, Copenhagen, May 2001. Since then several working groups and country networks have been working on the development of standards.

As a result, five core standards applicable to all hospitals have been developed in accordance with international requirements established by the ALPHA program developed by the International Society for Quality in Health⁶. The process included critical review of the literature, definition and review of standards, pilot testing, revision and adjustment. It involved a wide range of scientists, health promotion experts and managers of health care organizations from the WHO European Region, as well as members of the international Health Promoting Hospitals Network.

Format and application of standards

The standards presented in this document are the result of series of workshops and consultations. They have been piloted in 36 hospitals in nine European countries and were assessed to be relevant and applicable. Based on the feedback from the pilot test, substandards and measurable elements have been amended and specified and steps for the further development and facilitation of standards have been planned.

Each standard consists of standard formulation, description of objective and definition of substandards. The standards are related to the patient's pathway and define the responsibilities and

activities concerning health promotion as an integral part of all services offered to patients in a hospital. The standards are mainly generic with the focus on patients, staff and the organizational management. Disease specific standards are included for groups of patients with evidence for specific needs. The quality goals described in the standards address professional, organizational, and patient-related quality issues.

- Standard 1 demands that a hospital has a written policy for health promotion. This policy must be implemented as part of the overall organization quality system and is aiming to improve health outcomes. It is stated that the policy is aimed at patients, relatives and staff.
- Standard 2 describes the organizations' obligation to ensure the assessment of the patients' needs for health promotion, disease prevention and rehabilitation.
- Standard 3 states that the organization must provide the patient with information on significant factors concerning their disease or health condition and health promotion interventions should be established in all patients' pathways.
- Standard 4 gives the management the responsibility to establish conditions for the development of the hospital as a healthy workplace.
- Standard 5 deals with continuity and cooperation, demanding a planned approach to collaboration with other health service sectors and institutions.

The following pages present the complete standards, including the description of objectives and substandards.

The way forward

In order to facilitate the practical use of the standards in planning, implementation and assessment of health promotion in hospitals measurable elements and indicators are being defined and a tool for self-assessment is being developed.

It is not the aim of WHO to externally assess the activities in hospitals in the European Network of Health Promoting Hospitals, but hospitals within and other hospitals are encourage to use the self-assessment tool for improving their health promotion services.

The standards are considered public domain and quality agencies and accreditation bodies are encouraged to include the standards for health promotion in hospitals in their existing standards sets.

STANDARDS FOR HEALTH PROMOTION IN HOSPITALS

Management Policy

Standard 1. The organization has a written policy for health promotion. The policy is implemented as part of the overall organization quality improvement system, aiming at improving health outcomes. This policy is aimed at patients, relatives and staff.

Objective:

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

Substandards:

- 1.1 The organization identifies responsibilities for the process of implementation, evaluation and regular review of the policy.
- 1.2 The organization allocates resources to the processes of implementation, evaluation and regular review of the policy.
- 1.3 Staff are aware of the health promotion policy and it is included in induction programmes for new staff.
- 1.4 The organization ensures the availability of procedures for collection and evaluation of data in order to monitor the quality of health promotion activities.
- 1.5 The organization ensures that staff have relevant competences to perform health promotion activities and supports the acquisition of further competences as required.
- 1.6 The organization ensures the availability of the necessary infrastructure, including resources, space, equipment, etc. in order to implement health promotion activities.

Patient Assessment

Standard 2. The organization ensures that health professionals, in partnership with patients, systematically assess needs for health promotion activities.

Objective:

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

Substandards:

- 2.1 The organization ensures the availability of procedures for all patients to assess their need for health promotion.
- 2.2 The organization ensures procedures to assess specific needs for health promotion for diagnosis-related patient-groups.
- 2.3 The assessment of a patient's need for health promotion is done at first contact with the hospital. This is kept under review and adjusted as necessary according to changes in the patient's clinical condition or on request.
- 2.4 The patients' needs assessment ensures awareness of and sensitivity to social and cultural background.
- 2.5 Information provided by other health service partners is used in the identification of patient needs.

Patient Information and Intervention

Standard 3. The organization provides patients with information on significant factors concerning their disease or health condition and health promotion interventions are established in all patient pathways.

Objective:

To ensure that the patient is informed about planned activities, to empower the patient in an active partnership in planned activities and to facilitate integration of health promotion activities in all patient pathways.

Substandards:

- 3.1 Based on the health promotion needs assessment, the patient is informed of factors impacting on their health and, in partnership with the patient, a plan for relevant activities for health promotion is agreed.
- 3.2 Patients are given clear, understandable and appropriate information about their actual condition, treatment, care and factors influencing their health.
- 3.3 The organization ensures that health promotion is systematically offered to all patients based on assessed needs.
- 3.4 The organization ensures that information given to the patient, and health promoting activities are documented and evaluated, including whether expected and planned results have been achieved.
- 3.5 The organization ensures that all patients, staff and visitors have access to general information on factors influencing health.

Promoting a Healthy Workplace

Standard 4. The management establishes conditions for the development of the hospital as a healthy workplace.

Objective:

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

Substandards:

- 4.1 The organization ensures the establishment and implementation of a comprehensive Human Resource Strategy that includes the development and training of staff in health promotion skills.
- 4.2 The organization ensures the establishment and implementation of a policy for a healthy and safe workplace providing occupational health for staff.
- 4.3 The organization ensures the involvement of staff in decisions impacting on the staff's working environment.
- 4.4 The organization ensures availability of procedures to develop and maintain staff awareness on health issues.

Continuity and Cooperation

Standard 5. The organization has a planned approach to collaboration with other health service levels and other institutions and sectors on an ongoing basis.

Objective:

To ensure collaboration with relevant providers and to initiate partnerships to optimise the integration of health promotion activities in patient pathways.

Substandards:

- 5.1 The organization ensures that health promotion services are coherent with current provisions and health plans.
- 5.2 The organization identifies and cooperates with existing health and social care providers and related organizations and groups in the community.
- 5.3 The organization ensures the availability and implementation of activities and procedures after patient discharge during the post-hospitalisation period.
- 5.4 The organization ensures that documentation and patient information is communicated to the relevant recipient/follow-up partners in patient care and rehabilitation.

References

¹ *Matching Services to needs*. Copenhagen, WHO Regional Office for Europe, 2002 (document EUR/RC50/10)

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³ *Vienna Recommendations for Health Promoting Hospitals* (<http://www.euro.who.int/document/IHB/hphviennarecom.pdf>) (accessed 4 March 2004).

⁴ *Ottawa Charter for Health Promotion* (http://www.who.int/hpr/NPH/docs/ottawa_charter_hp.pdf). Ottawa, WHO, 1986 (accessed 4 March 2004).

⁵ WHO Standards Working Group. Development of standards for disease prevention and health promotion. *WHO Meeting on standards for disease prevention and health promotion, Bratislava, 14 May 2002*.

⁶ The International Society for Quality in Health Care. *Alpha and accreditation* (<http://www.isqua.org.au/isquaPages/Alpha.html>). Victoria, ISQua, 2003 (accessed 4 March 2004).

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