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CONFLICTS AND THE MANAGEMENT OF CHANGE

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In the last years the "Psychiatric Hospital of the City of Vienna - Baumgartner Höhe" undertook project oriented action research in the field of organizational conflict. With voluntary teams we did empirical analyses of conflicts, in order to shed light on the background of them. In the course of time some typical causal elements could be worked out which again and again seemed to underlie disturbances of communication on our wards and appeared to be essential in bringing up (unnecessary) conflicts. Almost always the consequences of such social tensions within our wards is that staff members react with a high level of anxiety. This hinders the organizational development of the respective operational unit. To regard the above-mentioned factors early enough and to try to influence them successfully is therefore an important instrument for the promotion of organizational health. To know about these factors and how to modify them could probably facilitate the

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NEWS CHALLENGES IN QUALITY ASSURANCE DURING THE HEALTH CARE REFORM IN HUGARY

Trixler

Among the aspects of quality assurance usually structure quality, process quality, and outcome quality are considered. Structure quality has dominant importance compared with process and outcome quality. Mental health reforms started in recent years in Hungary began with changing the structure. Structure quality indicators as numbers/rates of psychiatric beds, size of mental hospitals, number/rate of chronic patients in hospitals versus community care facilities, community psychiatric facility available etc. have markedly changed. Forced by financial shortages health administrators are more and more defining quality assurance as a means to reducing costs. Restructuring psychiatric service systems results in shorter hospital stays and correspondingly in a reduction of psychiatric beds, simultaneously. This means that a well-developed community psychiatry service is needed to maintain and increase the quality of life for the patients as well as satisfaction for other consumers. In this new psychiatric service structure, community psychiatry must play a special role in the implementation of quality assurance.

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ESTABLISHMENT OF QUALITY ASSURANCE IN AN EXTRAMURAL CARE ORGANIZATION

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The managers of "pro mente Upper Austria" decided to initiate the quality system "ISO 9001". This system includes only the process quality and must be interpreted by every organization. The focus of this system in "pro mente Upper Austria" is the work with our clients. The members of "quality circles" have established every step of their work with the clients; that means they have regulated who must do which work and which documentation. These results are collected in the "pro mente - quality management handbook" in the form of flow-charts and descriptions of the working process. The handbook represents the minimal standard that must be realised in "pro mente Upper Austia". Every year there will be an "audit" to develop the quality system and to adapt the processes to changes (changes in the society or in "pro mente Upper Austria".

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Quality Assurance with BADO - A new Documentation System

Cording, Clemens (Regensburg/Germany)

The German Psychiatric Association (DGPPN) in 1995 has introduced a new system of patient documentation, called BADO (= „Basic Documentation") BADO consists of a catalogue of standardized items to be assessed for each patient on admission and discharge, and recommendations regarding the evaluation and practical use of these data, corresponding PC-software programs are available
Both catalogue and software have modular structure with abasic module to be used by all psychiatric inpatient departments in Germany, and optional modules for special fields of interest. This approach combines a sufficient homogeneity for interinstitutional comparisons with a maximum variability for individual demands.
BADO is especially designed to serve as a database for internal and external Quality Assurance programs, providing information for continuous feed-back on characteristics of the patient population treated, on applied diagnostic and therapeutic processes, and on various outcome measures.
Ten psychiatric hospitals within Bavaria/Germany are taking part i na pilot study comparing indicators of process- and outcome quality as assessed with BADO. Design and first results of this ongoing study will be presented.

References:

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