

# Accreditation of Primary Care Teams in Catalonia

## Standards Manual

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## Criterion 1. Leadership

Leadership is a key element for the operation of any organisation; indeed, it is very difficult – if not impossible – to be an organisation of excellence without leadership.

As time goes on, changes take place (population needs, new technologies, personal knowledge, and information and management tools). To innovatively integrate and apply changes the primary care team (PCT) needs to implement a culture of quality and safety, with a clear understanding of how to monitor processes and outcomes and of how to assess, plan and implement improvements.

Definition of leader: the person in the primary care team (PCT) who, due to his/her responsibilities, directly influences decision-making concerning the activities of other professionals in the PCT. The leaders are appointed by the institution. In a typical PCT, the director is the person who represents the team and is ultimately responsible for it; however, other people in the PCT such as the assistant director and the administration management contact person form part of the management team because they also exert an influence over and are responsible for others in the team.

The leadership and management of certain processes in primary care are developed by management. Hence, diverse levels of action are proposed depending on the organisational model in question.

It is important for the leaders to be aware of the basic principles of healthcare quality management:

- Drafting of the mission, vision and values and how these are transmitted by the PCT leaders.
- Visible commitment of the management to the continuous improvement programme to ensure that these activities are effective in the organisation.
- Management must lead this process, ensure that it is implemented and track the results of these activities.
- The leader must approve the activities to improve the health centre, including:
  - Planning of improvement processes.
  - Priorities, measurement and assessment.
  - The improvement activities that are implemented and whether or not the improvements achieved are maintained.
- It is important for everyone in the team to know the lines set by the management of the institution.



To summarise, the idea is to see how the leaders develop and support the achievement of the mission and vision, how they develop the necessary values to achieve long-term success, and how they implement all of this in the organisation through appropriate actions and behaviours and get personally involved to ensure that the organisation's management system is developed and implemented.

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**Conceptual grouper 01.** Fostering change

## **Sub-criterion 1.a) The management team of the PCT develops the mission, vision and values, acting as role models within the culture of excellence**

### **Conceptual grouper 01. Mission of the PCT**

#### **Definition**

The PCT has an explicit mission that determines its *raison d'être* and future projection (vision), its values and the action policies it must follow.

#### **Objectives**

- Include recognition of what it does, for whom it does it and how it does it.
- Keep the mission, vision and values up to date and put in place recognised approval, development, communication and renewal mechanisms.

#### **1a-01-E01**

**1**

#### **Definition**

The PCT mission is approved, up to date, and the people in the PCT are made aware of it.

#### **Clarifications**

The PCT must identify its *raison d'être*. The mission consists of a series of elements related to values, scope, the public and products. The mission is not immutable, given that, while maintaining its *raison d'être*, the PCT can reorient its scope, redefine its values, change its strategies, etc.

Even though it is desirable for the mission to remain stable, its validity period and its review points and mechanisms should be defined.

#### **Dimensions**

E and D

#### **Tools**

RD, ED

### **Possible evidence**

- Existence of a document (e.g. strategic plan, quality plan, functional plan, welcome plan, etc.) outlining the mission.
- It will be reviewed to make sure that it is up to date and has been approved by the management of the PCT and/or the organisation.
- Existence of a communication system (website, posters, intranet, welcome plan, leaflets, screen savers, etc.).

### **Related standards**

HA: 1a-01-E01-E

## **1a-01-E02**

**2**

### **Definition**

The PCT's vision is approved, up to date, and the people in the PCT are made aware of it.

### **Clarifications**

The vision defines and describes the future situation of the PCT. The purpose of the vision is to guide, monitor and support the PCT as a unit to achieve the desired state.

### **Dimensions**

E and D

### **Tool**

RD, ED

### **Possible evidence**

- Existence of a document (e.g. strategic plan, functional plan, welcome plan, etc.) outlining the vision.
- It will be reviewed to make sure that it is up to date and has been approved by the management of the PCT and/or the organisation.
- Existence of a communication system (website, posters, intranet, welcome plan, leaflets, screen savers, etc.).

## 1a-01-E03

3

### Definition

The PCT's values are approved, up to date, and the people in the PCT are made aware of them.

### Clarifications

It is necessary to identify the concepts and expectations that describe the behaviour and determine the relationships of the people in the team. The values are the answer to the questions: "What do we believe in?" and "What are we like?"

### Dimensions

E and D

### Tools

RD, ED

### Possible evidence

- Existence of a document (e.g. strategic plan, functional plan, welcome plan, etc.) identifying the values.
- It will be reviewed to make sure that it is up to date and has been approved by the management of the PCT and/or the organisation
- Existence of a communication system (website, posters, intranet, welcome plan, leaflets, screen savers, etc.).

## **Sub-criterion 1.b) The management team of the PCT and of the management are involved in the organisation's management system**

### **Conceptual grouper 01. Leadership organisational model: senior management**

#### **Definition**

The organisation has a defined, approved and communicated organisational structure. Management roles and responsibilities are described and assumed.

#### **Objectives**

- Adapt the organisational structure to meet the objectives in alignment with its mission.
- Define the various responsibilities and assign roles, responsibilities and procedures for management.

#### **1b-01-E01**

**4**

#### **Definition**

The organisation has an organisational chart that is approved and up to date and has been disseminated to the people in the organisation.

#### **Clarifications**

All organisations need a structure to support them. This structure, formed by the framework of positions with organisational responsibility, must be clearly defined and disseminated to all the members of the organisation.

#### **Dimensions**

E and D

#### **Tools**

RD, EP

#### **Possible evidence**

- Existence of an organisational chart indicating the relationships, dependencies and persons responsible for all managerial elements of the organisation.
- It will be reviewed to make sure that it is up to date and has been approved by the organisation.

- Existence of a communication system (website, posters, intranet, welcome plan, leaflets, etc.).

### **Related standards**

HA: 1b-01-E01-E

## **1b-01-E02**

**5**

### **Definition**

The structures forming the organisational chart have an identified person who is responsible for them.

### **Clarifications**

The positions on the organisational chart must be defined and the people who occupy them must be identifiable.

### **Dimensions**

E

### **Tools**

RD, ED

### **Possible evidence**

- Proof of the appointment of a person responsible for each one of the most important positions in the organisation.
- Confirmation that all executive functions have a person responsible for them.

### **Related standards**

HA: 1b-01-E03-E

## **1b-01-E03**

**6**

### **Definition**

The responsibilities, roles and competencies of the management are clearly described and all members of the management team of the PCT are familiar with them.

**Dimension**

E and D

**Tools**

RD, ED, VE

**Possible evidence**

- Existence of a document, regulation or official publication outlining the various responsibilities, which are understood by those who have them.

**Related standards**

HA: 1b-02-E01-E

**1b-01-E04****7****Definition**

Meetings between management and the PCT management team are documented.

**Clarifications**

The interaction/communication between management and the PCT management team is recorded in documents (e.g. minutes or other documents).

**Dimensions**

E and D

**Tool**

RD

**Possible evidence**

- Existence of documents recording the content covered in meetings (e.g. minutes).

**Related standards**

HA: 1b-02-D02-E

## Conceptual grouper 02. Leadership organisational model: management team

### Definition

The organisation or the PCT has a defined, approved and communicated organisational structure. The roles and responsibilities of the management team of the PCT must be described.

### Objectives

- Adapt the organisational structure to meet the objectives in alignment with the mission.
- Assign roles, responsibilities and procedures to the PCT's management team.
- Define the various responsibilities.

## 1b-02-E01

8

### Definition

The roles, competencies and responsibilities of the PCT's management team are described.

### Dimension

E

### Tools

RD, ED

### Possible evidence

- Existence of a document outlining the roles, competencies and responsibilities of the management team. Verification through an interview with the management team.

### Related standards

HA: 1b-03-E02-E

## 1b-02-E02

9

### Definition

The PCT's management team participates in the formulation of the strategic objectives of the PCT.



### Clarifications

The strategic objectives are the points where the organisation aims to be in the future. These objectives must be measurable and achievable.

### Dimension

E

### Tool

RD, ED

### Possible evidence

- Existence of documentation describing the participation of the management team in the formulation of the strategy and objectives of the PCT (collaboration on the strategic plan, participation in the preparation of the SWOT analysis, management by objectives, etc.).

## 1b-02-E03

10

### Definition

The management team of the PCT participates in the planning and monitoring of the PCT's budget.

### Dimensions

E and D

### Tools

RD, ED

### Possible evidence

- Existence of documentation substantiating the participation of the management team in the drafting and planning of the budget (e.g. minutes).
- Existence of documentation substantiating the monitoring of the PCT's budget (e.g. incidents, etc.).

## 1b-02-E04

11

### Definition

The organisation or the PCT's management team facilitates coordination with other levels of care.

**Clarifications**

The possible evidence is related to the existence of documentation harmonised by the various levels of care, committees, mixed meetings, etc.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of a document (e.g. minutes, agreements, processes) substantiating the relationship between levels of care and documents.

**Related standards**

SP

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**1b-02-E05**

**12**

**Definition**

The PCT's management team documents economic deviations and justifies their reasons.

**Dimension**

D

**Tools**

RD, ED

**Possible evidence**

- Existence of documentation substantiating compliance with the objectives or justifying the reasons for economic deviations in relation to these objectives. This is not applicable if there are no economic deviations.

**Related standards**

HA: 1b-03-D02-E

## 1b-02-E06

13

### Definition

The PCT's management team participates in the design of positions.

### Clarifications

The management team defines the specific requirements of each position, the training, skills, knowledge and any other requirement to meet the needs of the public.

### Dimension

E

### Tools

RD, ED

### Possible evidence

- Existence of documentation substantiating the participation of the management team in the design of positions.

### Related standards

HA: 3a-01-D06-E

## 1b-02-E07

14

### Definition

The PCT's management team reviews its leadership.

### Clarifications

The PCT's management team analyses the results of the surveys conducted in the organisation or the PCT to detect opportunities for improvement. The work environment survey or other qualitative methodologies include questions on the perception of the PCT's people regarding the leadership ability of the management team.

### Dimensions

D

### Tools

ED, RD

**Possible evidence**

- Existence of documentation substantiating the review of its leadership (analysis of surveys, use of leadership review tools, etc.).

## Conceptual grouper 03. Leadership and strategic lines

### Definition

The PCT's management team and the organisation act in accordance with a strategic plan, which is consistent with the mission and determines the action lines that are fundamental for the organisation; its time frames and reviews are also defined.

### Objectives

- Establish a short-, mid- and long-term planning mechanism to identify the priorities of its action.
- Identify the threats and opportunities of the environment and their characteristics.
- Identify the fundamental strategic lines and specify them as operational objectives and action plans with assigned deadlines and responsibilities.
- Announce the strategic plan to everybody in the organisation.
- Evaluate and review the strategic plan in order to adapt to the new contexts of the environment.

## 1b-03-E01

15

### Definition

The PCT's management team has defined a strategic plan that has been approved and is up to date.

### Clarifications

The strategic plan is a document in which those responsible for an organisation set out the strategy that their company must follow in the mid term.

A strategic plan is quantitative, explicit and time-based. It is quantitative because it expresses the numerical objectives of the PCT. It is explicit because it specifies a set of policies and lines of action for achieving these objectives. And it is time-based in the sense that it sets clear and specific time limits that the organisation must meet for successful implementation of the plan.

The strategic plan must be approved by the management of the PCT and/or the organisation, and must be aligned with the strategic lines of the organisation.

### Dimension

E

## **Tools**

ED, RD

## **Possible evidence**

- Existence of documentation that substantiates the objectives of the strategic plan.
- Existence of documentation substantiating the participation of the management team in the drafting of the strategic plan.

## **Related standards**

HA: 1b-04-E01-E

## **1b-03-E02**

**16**

### **Definition**

The PCT's management team defines the operation and regulations of the team and aligns them with the strategic plan.

### **Dimension**

E

### **Tool**

RD

## **Possible evidence**

- Verification of the involvement of the management team in the implementation of the functional plan and whether it is aligned with the strategic plan of the organisation.

## **1b-03-E03**

**17**

### **Definition**

The PCT's management team is actively involved in the planning and development of the quality plan.

### **Clarifications**

One of the essential actions for the proper development of the quality plan is the involvement of the PCT's management team.

**Dimension**

E

**Tools**

EP, RD

**Possible evidence**

- Existence of documentation (e.g. minutes) substantiating the involvement of the management team in the planning and development of the quality plan.

**Related standards**

SP

HA: 1b-05-E10-E

---

**1b-03-E04**

**18**

**Definition**

The PCT's management team is actively involved in the planning and development of the people management plan.

**Dimension**

E

**Tools**

ED, RD

**Possible evidence**

- Existence of documentation substantiating the involvement of the management team in the planning and development of the people management plan (e.g. career plans of the people in the team).

---

**1b-03-E05**

**19**

**Definition**

The organisation or the management team of the PCT has set criteria for the selection of people and the filling of new positions.

### **Clarifications**

The organisation or the PCT has a structured mechanism in place to identify and evaluate candidates, manage the selection process, evaluate merits and make decisions, with the active involvement of the management team, in the definition of the needs and requirements of the positions to be filled.

### **Dimension**

E

### **Tools**

ED, RD

### **Possible evidence**

- Existence of documentation (job vacancies, requirements of competitive examinations, etc.).
- Interview with the management about the involvement of the leaders in the people selection process (both permanent and temporary) and the filling of new positions.

### **Related standards**

HA: 1b-03-E08-E



## **Sub-criterion 1.c) The organisation or the management team of the PCT personally participates with the public, providers and other institutions in joint improvement activities**

### **Conceptual grouper 01. Engagement of the organisation or the management team of the PCT in improving relations with the public**

#### **Definition**

The organisation or the PCT's management team is personally involved with the public in continuous improvement activities.

#### **Objective**

- Engage with the public, guide them, get to know them, work with them and communicate with them to meet their needs and expectations, understand them and give them answers.

#### **1c-01-E01**

**20**

#### **Definition**

The organisation or the PCT's management team has designed a public service policy, which has obtained approval.

#### **Clarifications**

Actions relating to public opinion must be structured, scheduled and financed and include mechanisms for their evaluation and correction. The evaluation and improvement of public opinion are important.

#### **Dimension**

E

#### **Tools**

ED, RD

**Possible evidence**

- Existence of documentation substantiating the involvement of the organisation or the management team in the public service policy and its approval by the organisation.

**Related standards**

HA: 1c-01-E01-E

**1c-01-E02**

**21**

**Definition**

The organisation or the PCT's management team designs a mechanism to evaluate the grounds for public complaints and suggestions and to provide a response to them.

**Dimension**

E

**Tools**

ED, RD

**Possible evidence**

- Existence of documentation substantiating the participation mechanism used by the organisation or the management team to evaluate and respond to complaints and suggestions from the public.

**Related standards**

AP: 6b-01-E01

HA: 1c-01-E04-E and 1c-01-E05-E

## **Conceptual grouper 02. Engagement of the organisation or the management team of the PCT in improving relations with providers**

### **Definition**

The organisation or the PCT's management team is personally involved with providers in continuous improvement activities.

### **Objective**

- Engage with providers, guide them, get to know them, work with them and communicate with them to meet their needs and expectations, understand them and give them answers.

### **1c-02-E01**

**22**

### **Definition**

The organisation or the PCT's management team defines referral criteria agreed with the providers of the various levels of care.

### **Dimension**

E

### **Tool**

RD

### **Possible evidence**

- Existence of documentation substantiating the criteria for referral and describing the involvement of the organisation or the PCT's management team.

### **1c-02-E02**

**23**

### **Definition**

The organisation or the PCT's management team applies general rules for the selection of providers.

### **Dimension**

D

**Tool**

RD

**Possible evidence**

- Existence of specific regulations for the selection of providers that is consistent with the mission.

**Related standards**

HA: 1c-02-E02-E

## **Sub-criterion 1.d) The management team of the PCT motivates its people and gives them support and acknowledgement**

### **Conceptual grouper 01. Management style**

#### **Definition**

The management team of the PCT motivates the people who work for it and gives them support and acknowledgement.

#### **Objective**

- Communicate directly with the people in the PCT to foster their initiatives and give them support in order to introduce improvements at every level.

#### **1d-01-E01**

**24**

#### **Definition**

The PCT's management team has participated in the development of an internal communication plan, which has obtained approval.

#### **Clarifications**

An internal communication plan should take into account bottom-up, top-down and horizontal communication.

- Top-down communication: operating regulations, meeting notices, general interest news, etc.
- Bottom-up communication: suggestion boxes, open-door programmes, staff satisfaction surveys, etc.
- Horizontal communication: organisational, scientific, etc.

A system of oral channels (clinical sessions, talks, etc.) and written channels, both paper (internal newsletter, posters, etc.) and IT (email, intranet, etc.) is facilitated to favour communication between people.

The plan must be aligned with the strategic lines of the organisation.

#### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

- Existence of the internal communication plan, describing the involvement of the PCT's management team in its development.
- Documentation (minutes) from the work sessions in which the PCT's internal communication plan was defined.

### **Related standards**

HA: 1d-01-E01-E

## **1d-01-E02**

**25**

### **Definition**

The PCT's management team is involved in the drafting of the welcome plan for new members of the PCT.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

- Existence of the welcome plan for new people in the PCT, describing the involvement of the PCT's management team in its development.

## **1d-01-E03**

**26**

### **Definition**

The PCT's management team informs the people of the PCT of the assessment of their aptitudes, attitudes and skills.

### **Clarifications**

Aptitudes, attitudes and skills are assessed on an annual basis for each person in the organisation. The assessment has a uniform formal structure and the assessment process is standardised by fostering the participation of the person assessed in the interview with the management team. It seeks the conformity of the person and his/her commitment to positive development.

### **Dimension**

D

### **Tools**

RD, VE

### **Possible evidence**

- Verification of the signatures on the assessments of the aptitudes, attitudes and skills of the PCT's people, with confirmation of receipt and conformity on this issue.

## **Sub-criterion 1.e) The PCT's management team drives change in the PCT**

### **Conceptual grouper 01. Fostering change**

#### **Definition**

The PCT's management team identifies the key elements related to change and develops the methodology to drive and assess it.

#### **Objectives**

- Define a change-oriented management approach.
- Implement activities designed to drive it and achieve improvements in service quality through assessment and review.

#### **1e-01-E01**

**27**

The management team defines activities related to change management within the organisation.

#### **Clarifications**

The PCT's management team plans and carries out activities to drive change. There is evidence of work documentation and minutes in relation to activities to drive change (involvement in global quality management systems, management autonomy, etc.).

#### **Dimensions**

E and D

#### **Tools**

RD, ED

#### **Possible evidence**

- Participation in activities related to change management (involvement in global quality management systems, accreditation model of the Ministry of Health, management autonomy, etc.).



## Criterion 2. Strategy

This criterion concerns how the PCT implements its mission and vision through a strategy clearly focused on all stakeholders and supported by relevant policies, plans, objectives, goals and processes.

Definition of *strategy*: actions that put the mission into practice; synonymous with 'plans' and 'objectives'.

The strategy is the essence of any organisation. It is defined by all the plans of the organisation or the PCT, which are translated into objectives to achieve.

This approach seeks to answer the question: how does the PCT develop its mission, with a strategy based on stakeholders, supported by the various relevant plans, objectives and processes?

An assessment is made of the planning and its development in the PCT.

Benchmarking, a SWOT analysis and a study of economic and demographic indicators are all performed.

### Contents

**Sub-criterion 2.a) The strategy is based on the current and future needs and expectations of the stakeholders**

Conceptual grouper 01. Stakeholder needs

Conceptual grouper 02. Benchmarking

**Sub-criterion 2.b) The information from activities related to performance measurement, research, learning and creativity is the basis of the policy and the strategy**

Conceptual grouper 01. Information for the strategy

**Sub-criterion 2.c) Development, review, assessment and updating of the strategy (plans, objectives and results)**

Conceptual grouper 01. Strategic and quality plan

**Sub-criterion 2.d) Implementation of the strategy through a system of key processes**

**Conceptual grouper 01. Key processes**

**Sub-criterion 2.e) Communication and implementation of the strategy**

**Conceptual grouper 01. Communication of the strategy**

## **Sub-criterion 2.a) The strategy is based on the current and future needs and expectations of the stakeholders**

### **Conceptual grouper 01. Stakeholder needs**

#### **Definition**

The PCT knows and acknowledges its stakeholders, pinpoints and monitors their characteristics, and acts in accordance with their needs and expectations. It also observes the environment, detects and evaluates new opportunities or threats, and adapts to them and acts accordingly.

*Stakeholders* are taken to mean 'organisations, entities, associations, companies or groups of individuals with an interest in the organisation.' They may be public administration bodies (on all levels), the PCT's people, the public, providers, hospitals, service buyers, financial institutions, residents' associations, educational institutions, trade unions, etc.

#### **Objectives**

- Study the demographic, epidemiological, socio-economic, cultural and related characteristics of its public and of the community it serves.
- Be aware of expectations regarding the good that it supplies and the way in which it is supplied.
- Dimension its future development.
- Know the contextual reasons for using or not using the organisation's healthcare resources.
- Obtain a diagnosis of the population's health, assess the current and future needs of the public and the community, and obtain a diagnosis of community health.
- Identify the strengths, weaknesses, opportunities and threats that are posed.
- Understand the characteristics of the competition in its scope of activity.
- Design strategies based on the knowledge obtained from the study and act in accordance with the defined strategy.
- Meet the stakeholders' needs that affect it.
- Determine what their needs are and which concepts and criteria can be used to evaluate them.
- Design and develop strategies to cover (or reconcile) these needs and expectations.
- Identify the key success factors for each stakeholder and monitor their compliance.

## 2a-01-E01

28

### Definition

The PCT's planning identifies its stakeholders and their needs with respect to the activity of the PCT.

### Clarifications

Document describing the necessary information on the various stakeholders (which must be defined by the PCT). This must always include the needs of the stakeholders in relation to the activity of the PCT.

### Dimension

E

### Tool

RD

### Possible evidence

- Existence of a document identifying the stakeholders (e.g. strategic plan), as well as their needs with respect to the activity of the PCT.

### Related standards

HA: 2a-02-E01-E

## 2a-01-E02

29

### Definition

The PCT's strategic lines are defined in its planning and aligned with those of the organisation.

### Dimension

E

### Tool

RD

### **Possible evidence**

- Existence of a document defining the strategic lines of the PCT, which must be aligned with the strategic lines of the organisation.

## **2a-01-E03**

**30**

### **Definition**

The objectives of the PCT are aligned with the mission and set out in the PCT's planning.

### **Dimension**

E

### **Tool**

RD

### **Possible evidence**

- Existence of a document identifying the objectives aligned with the team's mission (e.g. management by objectives, etc.).

### **Related standards**

AP: 9a-01-E03

## **2a-01-E04**

**31**

### **Definition**

The PCT's planning contains demographic, epidemiological, socio-economic and cultural data on the population.

### **Clarifications**

Information is systematically collected to determine the demographic, socio-economic, epidemiological and cultural profile of the public. This information must be adapted to the current and future needs and expectations of the current and potential public (those who could use the centre's offer and have not yet done so).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of a document containing demographic, epidemiological, socio-economic and cultural data on the population.

**2a-01-E05**

**32**

**Definition**

The PCT's planning includes the objectives, which are aligned with the current Health Plan.

**Clarifications**

The PCT's objectives must include all the objectives aligned with the current Health Plan.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of a document identifying the objectives aligned with the Health Plan (e.g. contract with CatSalut).

**Related standards**

AP: 9a-01-E03

## 2a-01-E06

33

### Definition

Public opinion is taken into account in the PCT's planning.

### Clarifications

To ensure complete information on the public, the PCT must include an analysis of public opinion, covering complaints, suggestions and surveys conducted in relation to the products or services provided.

### Dimension

E

### Tool

RD

### Possible evidence

- Existence of a document including the opinion of the public (e.g. public opinion poll on CatSalut).

### Related standards

AP: 6a-01-E01

## 2a-01-E07

34

### Definition

The opinion of the team's people is taken into account in the PCT's planning.

### Clarifications

The opinion of the PCT's people is obtained through surveys and interviews (e.g. quality of professional life: QVP-35).

### Dimension

E

### Tool

RD

**Possible evidence**

- Existence of a document explaining how and when the opinion of the team is obtained (either through a survey or other methods).

**2a-01-E08**

**35**

**Definition**

The PCT's planning includes needs related to a continuous quality improvement system.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Quality plan identifying the continuous improvement system.

**Related standards**

SP



## Conceptual grouper 02. Benchmarking

### Definition

The PCT learns from itself and from the best.

### Objectives

- Foster knowledge with respect to how the key processes act, are organised, tackled and developed.
- Apply – through the organisation itself – and assess the knowledge gained.
- Collaborate with other organisations in its own and other sectors to share experiences.

## 2a-02-E01

36

### Definition

The PCT includes comparisons with other PCTs and organisations in the planning process.

### Clarifications

The PCT has information that allows it to make external comparisons.

### Dimension

E

### Tool

RD

### Possible evidence

- Existence of a document (e.g. Healthcare Quality Standard (HQS), Pharmaceutical Prescription Quality Standard (PPQS), CatSalut document on benchmarking, etc.).

### Related standards

HA: 2a-03-E03-E

## **Sub-criterion 2.b) The information from activities related to performance measurement, research, learning and creativity is the basis of the policy and the strategy**

### **Conceptual grouper 01. Information for the strategy**

#### **Definition**

The organisation and the PCT design their information system with a view to decision-making.

#### **Objectives**

- Obtain information to determine the most appropriate objectives and strategies, which contain: population and epidemiological data, public opinion, the opinion of the people (QVP, opinion polls), the current state of knowledge – documents, protocols, evidence-based medicine (EBM) guidelines – results, health diagnosis and people management.
- Identify, collect, analyse and use the relevant information relating to the public, providers, communities and other external organisations to formulate the strategy and plans based on relevant and complete information.
- Develop plans (process management plan, communication plan, health diagnosis for the community, continuous quality improvement plan, etc.).

### **2b-01-E01**

**37**

#### **Definition**

The PCT's planning includes a dashboard.

#### **Clarifications**

A dashboard (tool that provides management with concise, precise, structured and periodic information about its development) is used.

#### **Dimension**

E

#### **Tools**

ED, RD (SI)

### **Possible evidence**

Existence of a dashboard that includes:

- Analysis of activity, financial information and resources.
- Health indicators.
- Comparison with the budget, trends, industry data and technical standards.
- Frequency with which the information is issued.

### **Related standards**

AP: 9a-01-E01

SP

HA: 2b-01-D05-E

## **2b-01-E02**

**38**

### **Definition**

In the planning, the organisation and the PCT set out a plan for managing key information.

### **Clarifications**

The information management plan refers to the information from the various subsystems and its aim is to facilitate the handling and use of this information in the decision-making process. It provides us with information on various activities.

### **Dimension**

E

### **Tools**

ED, EP, RD

### **Possible evidence**

The existence of an information management plan.

It must be verified that it includes:

- Productivity and resources.
- The selection of information relevant to the PCT and the organisation (data on activity, productivity, data on the resources used, economic data, data on quality, stakeholders and others).
- The frequency with which information is analysed and obtained.
- The possibility of comparing internal and external development.

- The existence of a person who is responsible for it.
- The recipients of the information.
- The frequency with which the information is issued.
- The information sent to the recipients and its structure.
- The deadlines for the evaluation and review of the plan.

The plan must be aligned with the strategic lines of the organisation.

### **Related standards**

HA: 2b-01-E01-E

## **2b-01-E03**

**39**

### **Definition**

The PCT's planning contains information related to shortcomings in the healthcare offer.

### **Clarifications**

This information concerns waiting lists, the underfunding of certain technologies, etc., which may lead to opportunities for the organisation or the PCT.

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

- Existence of a document identifying shortcomings in the healthcare offer and evaluating any that could represent an opportunity. For example, accessibility, delays for activities carried out at the centre (electrocardiograms – —ECGs— –, blood tests, etc.).

### **Related standards**

SP

HA: 2a-01-E05-E

## **2b-01-E04**

**40**

### **Definition**

The PCT's planning incorporates information from process management.

### **Clarifications**

The process management system must include the key, strategic and support processes defined by the PCT.

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

The PCT's information system must incorporate information from the processes.

### **Related standards**

HA: 2b-01-D06-E

## **2b-01-E05**

**41**

### **Definition**

The PCT's planning uses the results and trends from previous years.

### **Clarifications**

Results from at least the previous three years are used in the PCT's planning.

### **Dimension**

E

**Tool**

RD, ED

**Possible evidence**

- Existence of a document substantiating the use of these results in the PCT's planning.

**2b-01-E06****42****Definition**

The PCT's planning includes the financial results.

**Clarifications**

The PCT plans the management of the funds that it administrates directly. It includes indicators for assessing income and expenditure, and produces an income statement for the recognition of profits or losses. For public providers, these indicators seek to obtain a balanced budget without generating a fund deficit (e.g. management of the PCT's people) and monitoring of the allocated budgets according to the maximum acceptable cost (MAC).

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

- Existence of a document substantiating the use of these results in the PCT's planning.

**Related standards**

AP: 9b-01-E01

HA: 2b-01-D04-E

## 2b-01-E07

43

### Definition

In its planning, the organisation takes into account the opinion of the PCT's people with regard to the care materials they use.

### Clarifications

There is a systematic method used by the organisation to collate the opinions of the PCT regarding the quality of the materials used by the PCT for care (electro-medical equipment, consumables, care materials, examination materials, temperature-controlled refrigerators, etc.). IT materials and furniture are excluded. These opinions are considered when selecting the materials to be used.

### Dimension

E

### Tool

RD, ED

### Possible evidence

- Existence of a document (e.g. reports, surveys, incident software, etc.), minutes of approval committees or similar.
- Verification of the management team's knowledge in order to determine the process used.

### Related standards

SP

## **Sub-criterion 2.c) Development, review, assessment and updating of the strategy (plans, objectives and results)**

### **Conceptual grouper 01. Strategic and quality plan**

#### **Definition**

The PCT implements its strategic and quality plan. This plan permeates the entire team and involves everyone from management down to the last operational level. Quality is measured and improvements are put in objective terms. The quality objectives may be included in the strategic plan.

#### **Objectives**

- Develop the strategy in alignment with the mission, vision and values of the organisation, based on the needs and expectations of all stakeholders and the information gleaned from learning and innovation activities.
- Balance the needs and expectations of all the stakeholders.
- Balance short- and mid-term pressures and requirements.
- Develop alternative scenarios and contingency plans to address the risks posed.
- Identify current and future competitive advantages.
- Align the organisation's strategy with that of its collaborators.
- Reflect the fundamental concepts of excellence in the strategy.
- Assess the importance and effectiveness of the strategy.
- Identify the key success factors.
- Review and update the strategy.

### **2c-01-E01**

**44**

#### **Definition**

The PCT has an approved and up-to-date strategic plan that it implements and disseminates to the PCT's people.

#### **Clarifications**

The strategic plan is a document in which those responsible for an organisation determine the strategy that their company must follow in the mid term.

A strategic plan is quantitative, explicit and time-based. It is quantitative because it expresses the numerical objectives of the PCT. It is explicit because it specifies lines of



action for achieving these objectives. And it is time-based in the sense that it sets clear and specific time limits that the organisation must meet for successful implementation of the plan.

There are actions and activities designed to develop the strategic plan.

**Dimension**

E and D

**Tools**

RD, ED

**Possible evidence**

- Existence of an up-to-date strategic plan that has been approved by the management of the PCT and/or the organisation and is accessible to all the PCT's people.

**Related standards**

SP

HA: 1b-04-E01-E

---

**2c-01-E02**

**45**

**Definition**

The strategic plan includes continuous improvement as one of its fundamental priorities.

**Dimension**

E

**Tool**

RD

**Possible evidence**

One of the strategic objectives of the plan is directly linked to continuous improvement.

## Related standards

SP

HA: 1b-04-E06-E

## 2c-01-E03

46

### Definition

The PCT has a quality plan that is approved, up to date and has been disseminated to all the PCT's people.

### Clarifications

The quality plan includes the performance of a set of actions to achieve qualitative improvement in a structured and progressive manner.

The existence of quality objectives can be seen in a number of documents and it is understood that the PCT plans this continuous quality improvement regardless of the text in which they are contained (plan, programme).

The plan must be aligned with the strategic lines of the organisation.

There are actions and activities to develop the quality plan.

### Dimension

E

### Tools

RD, EP

### Possible evidence

- Existence of a quality plan
- Existence of an up-to-date quality plan that has been approved by the management of the PCT and/or the organisation and is accessible to all the PCT's people.

## Related standards

AP: 9a-01-E04

SP

HA: 1b-05-E01-E

## 2c-01-E04

47

### Definition

The quality plan identifies opportunities for improvement.

### Clarifications

Various methods can be used to identify opportunities for improvement, such as the implementation of a quality management system, suggestions from the public, satisfaction surveys, active listening, professional participation through problem reports, etc.

### Dimension

E

### Tools

RD, EP

### Possible evidence

The quality plan must be checked to confirm that it expressly indicates the methodology to be used to identify opportunities for improvement.

## 2c-01-E05

48

### Definition

The PCT defines how to identify and develop the various improvement projects.

### Clarifications

The PCT sets the criteria for the identification, implementation and tracking of improvement projects.

### Dimension

E

### Tools

RD, EP

### Possible evidence

- Existence of a document containing the criteria for identifying and developing improvement projects.

## Related standards

SP

### 2c-01-E06

49

#### Definition

The quality plan includes activities related to patient safety.

#### Clarifications

Definition of activities related to patient safety.

#### Dimension

E

#### Tools

RD, EP

#### Possible evidence

- Quality plan that explicitly defines the orientation towards improved safety and provides evidence of objectives and activities directly related to this improvement.

## Related standards

AP: 9a-01-E04

SP

HA: 1b-05-E01-E

### 2c-01-E07

50

#### Definition

The PCT's management team has designated a person to be responsible for the quality plan.

#### Dimension

D

### **Tools**

ED, EP

### **Possible evidence**

- The team has a person responsible for developing the quality plan.

### **Related standards**

SP

HA: 1b-05-D01-E

## **Sub-criterion 2.d) Implementation of the strategy through a system of key processes**

### **Conceptual grouper 01. Key processes**

#### **Definition**

The PCT has a system of key processes to implement its strategy.

#### **Objectives**

- Have key processes in place that are normally those most directly affecting public satisfaction and results.
- Align the key processes with the strategy.
- Inform people of the key processes related to the strategy.
- Assess the key processes related to the strategy.

### **2d-01-E01**

**51**

#### **Definition**

The PCT identifies and defines the key processes that are aligned with the strategy.

#### **Dimension**

E

#### **Tools**

RD, ED

#### **Possible evidence**

- Existence of key processes identified and defined by the management team, which must be aligned with the strategy of the team (strategic or other plans).

#### **Related standards**

HA: 2d-01-E01-E

## **Sub-criterion 2.e) Communication and implementation of the strategy**

### **Conceptual grouper 01. Communication of the strategy**

#### **Definition**

The organisation or the PCT has a communication plan in place to convey its strategy to everybody in the organisation, providers and the public.

#### **Objectives**

- Ensure that everybody in the organisation, providers and the public receive information on the objectives based on the strategy.
- Review, evaluate and update the strategy communication plan on an annual basis.

#### **2e-01-E01**

**52**

#### **Definition**

The PCT has defined how the strategy must be internally communicated.

#### **Clarifications**

The PCT has a document setting out how to make everybody aware of the strategy.

#### **Dimension**

E

#### **Tool**

RD

#### **Possible evidence**

Existence of a document (strategic plan, internal communication plan, etc.) specifying the strategy dissemination system.

#### **Related standards**

HA: 2d-02-E01-E

## 2e-01-E02

53

### Definition

The organisation or the PCT, in line with the strategy, has an external communication plan that is up to date.

### Clarifications

The organisation or the PCT has an external communication plan that decides what is communicated to the public, providers and society, and develops it.

### Dimension

E

### Tool

RD

### Possible evidence

- Existence of the external communication plan and its implementation.

### Related standards

AP: 8b-01-E01 and 8b-01-E02



## Criterion 3. Management of the PCT's people

This criterion relates to how the organisation manages (plans, develops and harnesses) all the knowledge and potential of the people within it, both from an individual and group perspective, and the way in which it plans these activities to support the policy and strategy that it follows and the effective operation of the processes it carries out.

This criterion assesses:

- The organisation and the processes relating to people.
- The identification of the participation of the people in the organisation.
- The way in which values such as knowledge and creativity are managed.

In other words, how the organisation manages people appropriately, how it maintains the competence and knowledge of its people and, lastly, what the involvement of the people in the organisation is.

### Contents

#### **Sub-criterion 3.a) Planning, management and improvement of the PCT's people.**

**Conceptual grouper 01.** People strategy

**Conceptual grouper 02.** People management and control

#### **Sub-criterion 3.b) Identification, development and maintenance of the knowledge and competencies of the PCT's people.**

**Conceptual grouper 01.** Competencies and privileges

**Conceptual grouper 02.** Training plan

**Conceptual grouper 03.** Appraisal of aptitudes, attitudes and skills

#### **Sub-criterion 3.c) Involvement and assumption of responsibilities by the PCT's people**

**Conceptual grouper 01.** The PCT's people and work groups

#### **Sub-criterion 3.d) Existence of dialogue between the people and the organisation**

**Conceptual grouper 01.** Welcome plan

**Conceptual grouper 02.** Communication guarantee

#### **Sub-criterion 3.e) Recognition of and attention to the PCT's people**

**Conceptual grouper 01.** Recognition of people's efforts

**Conceptual grouper 02. Attention to people**

## **Sub-criterion 3.a) Planning, management and improvement of people in the organisation or the PCT**

What does the organisation or the PCT do to manage people and respond to the public, the community and other care units? This criterion encompasses all plans and strategies used by the organisation or the PCT to adapt and ensure excellent people management.

### **Conceptual grouper 01. People strategy**

#### **Definition**

The organisation or the PCT develops its people strategy in accordance with its mission and aims to have a staff or team of trained people with recognised attributes who are permanently up to date in terms of knowledge and skills, motivated and committed to the organisation and its objectives.

The people strategy of the organisation or the PCT encompasses all the professional groups of the organisation or the PCT, including subcontracted groups, trainees and others.

#### **Objectives**

- Devise and implement strategies for the selection, training (except for subcontracted staff) assessment, determination of attributes, productivity, motivation, recognition and communication of the people who work for the organisation.

### **3a-01-E01**

**54**

#### **Definition**

The organisation or the PCT has a people management plan that is approved, up to date and being implemented.

#### **Clarifications**

Taking into account the fundamental value of people in the achievement of institutional objectives, an action plan must be introduced for the people in the organisation which, in line with the mission and strategies of the organisation, serves as an instrument to plan, implement and review the main roles related to the people of the organisation.

## Dimensions

E, D

## Tools

RD, ED, EP

## Possible evidence

- Existence of a people management plan and actions designed to implement it, which must be up to date and approved by the organisation.

## Related standards

HA: 3a-01-E01-E

## 3a-01-E02

55

## Definition

The people who work for or collaborate with the PCT (staff, subcontracted workers, trainees and volunteers) must be identified.

## Clarifications

Their full names and positions must be correctly identified.

## Dimension

D

## Tool

CIS

## Possible evidence

- In situ verification of the correct identification of all staff in a visible place during the visit to the centre, and particularly in the areas open to public traffic.
- Correct identification of their full name and positions.

## **Related standards**

HA: 3a-01-E07-E

### **3a-01-E03**

**56**

#### **Definition**

The organisation or the PCT has a document setting out the competencies and responsibilities of all trainees.

#### **Dimension**

E

#### **Tool**

RD

#### **Possible evidence**

- Existence of a document defining the competencies and responsibilities of undergraduate and post-graduate trainees.

## **Related standards**

HA: 3a-01-E04-E

### **3a-01-E04**

**57**

#### **Definition**

The organisation or the PCT has organised individual files on the PCT's people with defined access criteria.

#### **Clarifications**

Each person must have his/her own file. This file (on paper or in electronic format) must be restricted and kept confidential.

The organisation or, where not applicable, the PCT must temporarily or permanently file records of terminations and have regulations on the use of personnel files.

## **Dimension**

D

## **Tools**

RD, EM

## **Possible evidence**

The content of individual files must be checked for compliance by taking a sample.

People must have an individual file recording the following information:

- Details of the file opening
- Details of the file closure
- Professional title
- Academic qualifications
- Curriculum vitae and development following their recruitment
- Signed contract(s) and amendments
- Assessments performed
- Disciplinary action
- Training
- Recognitions
- Leave
- Etc.

## **Related standards**

HA: 3a-01-E12-E

## **3a-01-E05**

**58**

## **Definition**

The organisation or the PCT has an updated description of the positions.

## **Clarifications**

The position description is a tool for assigning and directing work, and for determining whether the people occupying the positions meet their responsibilities.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

It is necessary to review the inventory of positions and their descriptions, and whether the people in these positions have the requisite competencies.

**Related standards**

HA: 3a-01-E17-E

**3a-01-E06**

**59**

**Definition**

The organisation or the PCT plans the need for people (staffing) to develop its activity, as well as the criteria used to adjust this planning.

**Clarifications**

For each group, and in accordance with the tasks assigned and the volume of activity, the organisation forecasts and determines the people needed in each team.

**Dimension**

E

**Tools**

RD, ED, EP

**Possible evidence**

Staffing needs must be planned in order to carry out the activity; the existence of objective criteria for this calculation must also be verified.

### 3a-01-E07

60

#### Definition

The PCT has general internal operating regulations that are defined, approved and up to date.

#### Clarifications

The PCT has general operating regulations for the team's people. These regulations set criteria on organisation, operation, identification, access, safety, uniforms, treatment of the public and the PCT's people, responsibility, confidentiality, discipline and other matters.

#### Dimension

E

#### Tool

RD

#### Possible evidence

It is necessary to review the existence and content of the internal operating regulations.

They should be assessed to determine whether they are defined, approved and up to date.

This document may include:

- The scope of application for all the PCT's people
- General principles of organisation of the PCT
- General operational criteria
- Rules on identification, uniform, access and safety
- General interpersonal criteria and criteria for dealing with the public
- General responsibility, confidentiality and discipline criteria

#### Related standards

SP

HA: 3a-01-E03-E



## Conceptual grouper 02. People management and control

### Definition

As part of the development of its people strategies and policies, the organisation or the PCT establishes suitable mechanisms to guarantee compliance with its internal operating procedures and the instruments necessary for the comprehensive management of its people.

### Objectives

- Ensure effective compliance with the regulations established in relation to people.
- Have homogeneous and systematic instruments that provide the organisation with elements to aid decision-making.

### 3a-02-E01

61

### Definition

The organisation or the PCT requires all personnel to provide certified copies of their qualifications and credentials necessary for their positions, and includes these in their files.

### Clarifications

The organisation or, if not applicable, the PCT evaluates the credentials of all personnel (correct association membership, completed academic training, any required advanced training or additional practical experience).

The required information for the candidate is outlined, there is a system to check accuracy by certified copies and an assessment is performed depending on the needs of the organisation and the patients. There is a working system in place to keep curricula vitae up to date.

### Dimension

D

### Tools

RD, EM

### Possible evidence

The existence of the procedure must be confirmed and checked in the records review.

### Related standards

SP

HA: 3a-02-D01-E

## 3a-02-E02

62

### Definition

The organisation or the PCT has information about the absenteeism of the PCT's people.

### Clarifications

The PCT must have information at an appropriate frequency, allowing it to observe trends in absenteeism, broken down by groups and causes.

### Dimension

E

### Tool

RD

### Possible evidence

- Existence of a document recording trends in absenteeism, broken down by groups and causes and available at an appropriate frequency. This data content may be included in the dashboard.

### Related standards

AP: 7b-01-E01

HA: 3a-02-E03-E

## 3a-02-E03

63

### Definition

The PCT has specific criteria to cover absences, independently of the cause.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of specific criteria for groups to cover absences (e.g. outlined in the functional plan).

## **Sub-criterion 3.b) Identification, development and maintenance of the knowledge and competencies of the people of the organisation or the PCT.**

### **Conceptual grouper 01. Specific competencies**

#### **Definition**

The PCT is equipped with and maintains competent people to meet the needs of the public. It recognises their specific competencies and ensures that the needs of the public are met by people qualified to do so.

#### **Objectives**

- Ensure that the needs of the public are met and foster lifelong learning among the PCT's people in order to keep their specific competencies up to standard and improve on them.

### **3b-01-E01**

**64**

#### **Definition**

The PCT defines the specific competencies that the PCT's people must demonstrate in their care and support duties in order to meet the needs of the public.

#### **Clarifications**

For the recognition of specific competencies, the PCT sets individual assessment criteria for the performance of certain roles.

#### **Dimension**

E

#### **Tools**

RD, ED

#### **Possible evidence**

- Existence of a document outlining the individual assessment criteria for the performance of certain roles.

**Related standards**

SP

HA: 3b-01-E01-E

## Conceptual grouper 02. Training plan

### Definition

The organisation or the PCT ensures that its people are up to date in terms of technical and scientific knowledge and skills in order to meet the needs of the public and the objectives of the organisation. For this reason, the organisation plans and undertakes group and individual training for its people.

### Objectives

- Detect the training needs of individuals and groups.
- Plan and manage the provision of training in accordance with the detected needs.
- Provide compulsory training on key aspects.
- Provide the means to train people and quantify the provision of training in financial terms.
- Foster the effectiveness of the training.

### Related standards

HA: 3b-01-E01-E

## 3b-02-E01

65

### Definition

The PCT has a training plan that is approved and up to date.

### Clarifications

It is important for the PCT to create and implement a tailored training plan based on training needs and shortcomings in professional knowledge and skills, which is compatible and consistent with the strategic lines of the organisation.

The plan must be aligned with the strategic lines of the organisation.

### Dimension

E

### Tools

RD, ED

**Possible evidence**

- Existence of a training plan, together with actions and activities to implement it, which must be up to date and approved by the management of the PCT and/or the organisation

**Related standards**

AP: 7b-02-E01

SP

HA: 3b-02-E01-E

**3b-02-E02**

**66**

**Definition**

The PCT's training plan includes criteria for the detection of the individual and group needs of its people, including trainees.

**Clarifications**

The detection of training needs is carried out individually or by group.

**Dimension**

E

**Tools**

RD, EP

**Possible evidence**

- Verification that the training plan includes criteria to identify the training needs of the PCT's people.

**Related standards**

AP: 7b-02-E01 and 7b-02-E02

### 3b-02-E03

67

#### Definition

The PCT's management team has designated a person to be responsible for the PCT's training plan.

#### Dimension

E

#### Tools

EP, RD

#### Possible evidence

The person responsible for the process must be identified.

#### Related standards

HA: 3b-02-D01-E

### 3b-02-E04

68

#### Definition

The PCT's training plan sets out the criteria determining access to training.

#### Clarifications

The organisation or the PCT must have explicit, disseminated and known criteria for the establishment of priorities in the use of the resources available for training and how they can be accessed.

#### Dimension

E

#### Tool

RD

#### Possible evidence

- Verification that criteria exist for transparent access to training.



### 3b-02-E05

69

#### Definition

The PCT's training plan includes the most relevant training topics and subjects for the needs of the public and the services offered.

#### Clarifications

The training plan must be geared to the needs of the public and the PCT's people. Training activities on the following topics could be recommended: training on patient quality and safety; infection prevention and control; community health; preventive and health promotion activities; health education; new technologies, etc.

#### Dimension

E

#### Tool

RD

#### Possible evidence

- Verification of the training plan.

#### Related standards

SP

### 3b-02-E06

70

#### Definition

The PCT's training plan includes training on cardiopulmonary resuscitation.

#### Clarifications

The PCT's people receive specific cardiopulmonary resuscitation training.

#### Dimensions

E and D

### Tools

RD, ED, VE

### Possible evidence

- Verification that the training plan includes specific theoretical and practical training and has a set frequency for both adult and paediatric services (annual). The teachers or instructors must provide proof of their training knowledge and expertise and/or be accredited by the Catalan Resuscitation Council (CCR).
- The PCT's training plan must include basic annual cardiopulmonary resuscitation (CPR) training for all the PCT's professionals

### Related standards

AP: 7b-02-E03

SP

HA: 3b-02-E09-E

## 3b-02-E07

71

### Definition

The PCT's training plan includes management training for the PCT's management team.

### Clarifications

The PCT's management team must receive training on health management, people management and finance management.

### Dimensions

E and D

### Tools

RD, ED

### Possible evidence

- Verification that the PCT training plan includes training specific to the management team on health management, people management and finance management.

### 3b-02-E08

72

#### Definition

The PCT's training plan includes training for all the PCT's people on quality, continuous improvement and patient safety.

#### Clarifications

The PCT will establish the priorities and content of the training in accordance with the needs detected in the organisation.

#### Dimension

E

#### Tools

RD, EP

#### Possible evidence

- Verification that the PCT's training plan includes specific training for all the PCT's people on quality, continuous improvement and patient safety.

#### Related standards

SP

HA: 3b-02-E06-E

### 3b-02-E09

73

#### Definition

The PCT's training plan outlines how the PCT's people participate in training through clinical sessions.

#### Clarifications

The PCT's training plan outlines how the PCT's people participate in the various participatory sessions covering common topics (organisational, bibliographical, protocol drafting, etc.).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the training plan.

**3b-02-E10**

**74**

**Definition**

The PCT registers all training activities and their participants, whether given by the PCT's people or acquired externally.

**Dimension**

D

**Tool**

RD

**Possible evidence**

- Verification that the record of all training and its participants is complete.

**Related standards**

AP: 7b-02-E01

HA: 3b-02-D02-E

**3b-02-E11**

**75**

**Definition**

The organisation or the PCT trains the PCT's people on how to use equipment.

### Clarifications

The PCT's people must receive training on the care equipment available at the centre within the scope of their competence. The PCT's people must receive appropriate training on the use of any new equipment at the centre within the scope of their competence. New staff must also be given appropriate training where applicable on the use of equipment that is already installed.

### Dimension

D

### Tools

RD, EP

### Possible evidence

- Verification that the record of training undergone by the PCT's people on the use of the equipment of the centre is complete.

### Related standards

AP: 7b-02-E04

SP

HA: 4d-01-D03-E and 4d-01-D04-E

## 3b-02-E12

76

### Definition

The PCT's training plan provides for the assessment of the satisfaction of the people of the organisation with each training course.

### Clarifications

As with any improvement process, the assessment of people's satisfaction is fundamental for effective progress. All courses except for clinical sessions must include the collection of the opinions of the participants on the content, the skills and capabilities of the instructors, the material used, the organisation of the technical and support resources and comfort.

### Dimension

D

### **Tools**

RD, ED

### **Possible evidence**

Check whether completed satisfaction surveys are available on the training given to the team's people and their results.

### **Related standards**

HA: 3b-02-E13-E

## Conceptual grouper 03. Appraisal of aptitudes, attitudes and skills

### Definition

The organisation or the PCT conducts individual, systematic and regular appraisals of the organisation's people.

The appraisal is oriented towards professional improvement in relation to the aptitudes, attitudes and skills of each one of the people that form the organisation.

### Objectives

- Express the expectations of the organisation with respect to the people who work for it.
- Identify the necessary training actions in accordance with the needs of the position filled by each person in the organisation.

## 3b-03-E01

77

### Definition

The organisation or the PCT has a system for the individual, systematic and periodic assessment of aptitudes, attitudes and skills that is applicable to all its people.

### Clarifications

This refers to the assessment of aptitudes, attitudes and skills within the organisation.

The assessment of aptitudes, attitudes and skills is a periodical appraisal instrument, performed by the direct supervisor of each member of the organisation. The content of the appraisal is shared with the person assessed, who will also be asked to appraise it. The appraisal reviews the results of personal objectives, sets new ones and identifies possible improvements and training opportunities. This appraisal must be carried out at least once a year using a standardised system.

### Dimension

E

### Tools

RD, ED

**Possible evidence**

It must be verified that the PCT has a standardised assessment system for the annual appraisal of the attitudes, aptitudes and skills of the PCT's people.

**Related standards**

HA: 3b-03-E01-E



## **Sub-criterion 3.c) Involvement and assumption of responsibilities by the PCT's people**

### **Conceptual grouper 01. The PCT's people and work groups**

#### **Definition**

To determine the organisational structure of the necessary improvement in each case (tailored to each PCT), the PCT creates temporary or permanent work groups as needed (specific work groups, quality improvement teams, supervisors), with different levels of responsibility, open to the participation of the people involved or interested in these activities.

#### **Objectives**

- Determine the necessary groups and their composition, competencies, etc., in accordance with internal regulations.
- Communicate the procedure to create the groups, the work methodology, the degree of responsibility that their participation implies and the measures that are consequently taken within the organisation.

### **3c-01-E01**

**78**

#### **Definition**

The PCT has a methodological guide outlining how the groups function.

#### **Clarifications**

This methodological guide may include the definition of clear objectives, the determination of members, the methodology used, operating rules, rules for decision-making, measuring systems, the definition of a calendar, etc.

The methodological guide must be applicable to all work groups.

#### **Dimension**

E

#### **Tool**

RD

#### **Possible evidence**

- Verification of the existence of a complete methodological guide.

### 3c-01-E02

79

#### **Definition**

The PCT's people are involved in improvement activities.

#### **Dimension**

D

#### **Tools**

RD, VE

#### **Possible evidence**

- Verification of documents related to involvement in improvement activities and interviews with the team's people.

#### **Related standards**

AP: 7b-04-E03

SP

## **Sub-criterion 3.d) Existence of dialogue between the people and the organisation**

### **Conceptual grouper 01. Welcome plan**

#### **Definition**

As part of its people management plan and in accordance with its communication plan, the PCT has a specific process to inform and train new staff.

#### **Objectives**

- Have a welcome programme for new staff, regardless of their type of contract.
- Provide information and training on general aspects (general operating rules) and about the specific organisational and functional aspects of the department or position.
- Periodically update, communicate and evaluate the plan.

### **3d-01-E01**

**80**

#### **Definition**

The PCT has a welcome plan for new staff that is approved and up to date.

#### **Clarifications**

The welcome plan must include fundamental orientation and knowledge elements to facilitate the swift integration of the personnel into the institution and into their functional unit.

A signature of conformity to the content of the welcome plan must be assessed.

The welcome plan states that new staff should meet the management team.

The plan must be aligned with the strategic lines of the organisation.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

Verification of the existence of a welcome plan for new PCT staff that is approved and up to date.

**Related standards**

AP: 7b-06-E01

SP

HA: 3d-01-E01-E

## Conceptual grouper 02. Communication guarantee

### Definition

The organisation or the PCT identifies vertical (top-down and bottom-up) and horizontal communication needs and expectations and provides the necessary means in its communication plan.

### Objectives

- Facilitate the circulation of information through the creation of various channels.
- Design a variety of procedures to share corporate information, knowledge and best practices.
- Periodically assess and update both channels and procedures.

### 3d-02-E01

81

### Definition

The PCT has an internal communication plan that is approved and up to date.

### Clarifications

An internal communication plan should take into account bottom-up, top-down and horizontal communication.

- Top-down communication: operating regulations, meeting notices, general interest news, etc.
- Bottom-up communication: suggestion boxes, open-door programmes, staff satisfaction surveys, etc.
- Horizontal communication: organisational, scientific, etc.

A system of oral channels (clinical sessions, talks, etc.) and written channels, both paper (internal newsletter, posters, etc.) and IT (email, intranet, etc.) is facilitated to favour communication between people.

The plan must be aligned with the strategic lines of the organisation.

### Dimension

E

### Tools

RD, ED

### Possible evidence

- Verification that the internal communication plan is approved and up to date.

### Related standards

AP: 7b-06-E02

SP

HA: 3d-02-E01-E

## 3d-02-E02

82

### Definition

The PCT communicates the key results to the various levels.

### Clarifications

The key results are:

- Key organisational results and indicators
- Key economic results and indicators
- Key operational results and indicators
  - Public service and service support unit
  - Immediate care
  - Care for the public at the centre and at home:
    - Clinical history
    - Public assessment
    - Use of medication
    - Public education and information
  - Community care
  - Ethics and citizens' rights
  - Infection control and prevention
  - Healthcare continuity

### Dimension

D

### Tools

RD, VE

**Possible evidence**

Verification that the key results are reported (see clarification).

## **Sub-criterion 3.e) Recognition of and attention to the PCT's people**

### **Conceptual grouper 01. Recognition of people's effort and care**

#### **Definition**

The PCT recognises people's efforts, whether in improvement activities or when assessing objectives, in accordance with its people management policy. It also fosters the improvement of the quality of working life.

#### **Objectives**

- Have a system in place to give recognition to people and develop it to maintain their level of participation and involvement in the PCT.
- Update, communicate and evaluate the recognition system.
- Have and develop a working life quality plan.

#### **3e-01-E01**

**83**

#### **Definition**

The organisation or the PCT has and develops a personal recognition plan that is approved and up to date.

#### **Clarifications**

Actions carried out to express recognition to the individuals and groups to which it applies and the dissemination of the mechanisms used to implement this recognition.

The plan must be aligned with the strategic lines of the organisation.

#### **Dimensions**

E and D

#### **Tools**

RD, ED

#### **Possible evidence**

- Verification of the existence of a plan in place to recognise individuals and their development.



### Related standards

AP: 7b-04-E02

HA: 3e-01-E01-E

## 3e-01-E02

84

### Definition

The organisation or the PCT has a working life quality plan that is approved and up to date.

### Clarifications

Working life quality includes:

1. Biophysical well-being: general physical fitness of the organism, physical and mental health, physical and functional safety and stability, occupational health and safety and protection, retirement, adequate pay, health, rest and recreation.
2. Social well-being: a sense of belonging, acceptance and integration into groups, harmonious interpersonal relationships, friendly work environment, teamwork, functional compatibility and recognition.
3. Mental well-being: prestige, appreciation, self-esteem, personal growth and professional development.

Essential aspects of the working life quality plan include: the performance of satisfaction surveys on professionals and the existence of projects to improve the quality of working life, the work environment improvement committee (festivals committee and performance of non-care activities, etc.). The work-life balance is fostered.

The plan must be aligned with the strategic lines of the organisation.

### Dimension

E

### Tools

RD

### Possible evidence

- Verification of the working life quality plan and its development.

### Related standards

AP: 7a-01-E01, 7a-01-E02, 7a-01-E03, 7a-01-E04, 7a-01-E05 and 7b-03-E02.

## Conceptual grouper 02. Attention to people

### Definition

The organisation and the PCT have mechanisms in place to raise awareness about safety and the protection of the health and rights of the individual.

### Objectives

- Define procedures to ensure improvements in occupational safety, health and the protection of the rights of the individual.
- Update, communicate and evaluate the occupational health and safety plan, which should include a review of the structures and professionals, the performance of occupational health surveys, the maintenance of the structures of centres, ergonomics in the workplace and the emergency and fire evacuation plan.

3e-02-E01

85

### Definition

The organisation or the PCT plans and implements actions aimed at protecting the health of its people in the workplace.

### Clarifications

The organisation or the PCT, beyond strict compliance with legislation, adopts a proactive position on the protection of the people's health, given that a healthcare institution is a potentially high-risk environment. They act to detect risks, adopt the corresponding preventive measures, identify and register any accidents or healthcare effects arising from professional activity and implement measures to minimise them.

### Dimensions

E and D

### Tools

RD, EP, ED

### Possible evidence

- Existence of a document on the protection of the people's health in the workplace.

## Related standards

AP: 7b-05-E01

## 3e-02-E02

86

### Definition

The PCT has designed and implemented a procedure to protect PCT members from abuse.

### Clarifications

The PCT must have a standardised prevention, detection and action procedure to combat abuse, discriminatory action, victimisation, harassment, discrimination by sex, race, disability, religion, etc. or similar actions that infringe on the personal and professional dignity of the individual.

### Dimensions

E and D

### Tools

RD, ED, EP

### Possible evidence

- Verification of the existence of a specific procedure to protect the PCT's people from unacceptable attitudes that sets out the communicating and reporting system (how and to whom) and ensures confidentiality.
- Record of complaints made and the organisation's response.

## Related standards

AP: 7b-03-E01

HA: 3e-02-E04-E

## Criterion 4. Partnerships and resources

This criterion deals with how the organisation plans and manages its internal resources and external partnerships to support its policy and strategy and to promote the effective operation of its processes.

It also covers how the PCT manages its external relationships (relationships with any other organisation, entity or institution to which it is related, with the population assigned to the PCT or with the team itself), plans relating to financial management, management of the structure, maintenance, information, supplies and environmental management and, finally, it establishes information, knowledge and technology management aspects.

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**Conceptual grouper 03.** Partnerships

#### **Sub-criterion 4.b) Management of economic and financial resources.**

**Conceptual grouper 01.** Management of economic and financial resources

#### **Sub-criterion 4.c) Infrastructure management: buildings, equipment and materials**

**Conceptual grouper 01.** Facilities and maintenance of the building

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#### **Sub-criterion 4.d) Technology management**

**Conceptual grouper 01.** Healthcare technology management

#### **Sub-criterion 4.e) Information and knowledge management**

**Conceptual grouper 01.** Information systems

**Conceptual grouper 02.** Knowledge management

## Sub-criterion 4.a) Management of external partnerships

### Conceptual grouper 01. Healthcare providers

#### Definition

To guarantee the provision of excellent services, the organisation or the PCT may use external healthcare providers to complement them or ensure their continuity. For this reason it is necessary to determine the degrees of quality and efficiency they require.

#### Objectives

- Determine the limits of its healthcare capacity in order to detect external provision needs.
- Establish the criteria for the selection of external healthcare providers.
- Actively interact in the improvement of the external healthcare provision process.

External healthcare providers include specialists and other primary care professionals, the hospital, intermediate products such as laboratory tests, radiodiagnosis, additional tests, etc.

*Reference* is taken to mean "the healthcare unit to which primary care refers the demand that it cannot meet". The organisation acts in this case as a referrer.

*Contrareference* is taken to mean "the healthcare unit or units from which primary care receives a flow of patients".

#### 4a-01-E01

87

#### Definition

The organisation or the PCT identifies the external care support required by the PCT to carry out its activity.

#### Clarifications

External care providers include specialists and other personnel working in primary care and hospitals, specialists from care units serving the same population (mental health care, home support team, immediate care and emergency medical services), providers of services and intermediate products (laboratory services, radiodiagnosis, additional tests, etc.).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of a document identifying the need to contract external care services.

**Related standards**

SP

HA: 4a-01-E01-E

---

**4a-01-E02**

**88**

**Definition**

The organisation or the PCT has criteria for the selection of care providers.

**Clarifications**

There are criteria for contracting external care services. The selection of external providers considers: information on competencies, the characteristics of the buildings, facilities and equipment (age, condition, models), working capacity, logistics and quality certification from external accredited bodies.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of a document specifying the criteria for the selection of care providers.

#### 4a-01-E03

89

##### Definition

The organisation or the PCT has a contract between the organisation and the healthcare provider.

##### Dimension

E

##### Tool

RD

##### Possible evidence

- Review of contracts.

##### Related standards

AP: 9a-01-E05

HA: 4a-01-D02-E

#### 4a-01-E04

90

##### Definition

The organisation or the PCT internally disseminates the list of its healthcare providers and how to obtain their services.

##### Clarifications

The organisation or the PCT must inform the PCT's management team of its healthcare providers and how to obtain their services, who must in turn inform the PCT's people.

##### Dimension

D

##### Tools

RD, ED



### Possible evidence

- Existence of a system for communicating who the external healthcare providers are and how to obtain their services.

## 4a-01-E05

91

### Definition

The PCT is familiar with and communicates the identity of its references and contrareferences.

### Clarifications

*Reference* is taken to mean "the healthcare unit to which the PCT refers patients for whom it cannot care". The organisation acts in this case as a referrer.

The *contrareference* is the "entity from which the PCT receives a given flow of patients".

### Dimensions

E and D

### Tools

RD, ED, VE

### Possible evidence

- Documentation review or verification with the management of its references and contrareferences.

### Related standards

SP

HA: 4d-02-D02-E

## 4a-01-E06

92

### Definition

The organisation or the PCT identifies the needs of the references and contrareferences for the proper management of patient care.

### **Clarifications**

Patient referral and reception criteria, care circuits, etc.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

- Existence of documents confirming identification of the needs of the references and contrareferences.

## **4a-01-E07**

**93**

### **Definition**

The organisation or the PCT periodically coordinates with its references to foster improvement actions.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

- Verification of the minutes or documents confirming coordination to foster improvement actions.

## **4a-01-E08**

**94**

### **Definition**

The organisation or the PCT coordinates with external healthcare providers.

### **Clarifications**

The healthcare coordination protocol seeks to introduce a foundation for action agreed with healthcare providers and minimum requirements for achieving the highest quality care possible.

**Dimension**

D

**Tool**

RD

**Possible evidence**

- Existence of documents or contracts confirming coordination with external healthcare providers.

**4a-01-E09**

**95**

**Definition**

The organisation or the PCT has a methodology in place for the periodic assessment of each external healthcare provider.

**Clarifications**

This methodology must include the mechanism for the assessment of external healthcare providers.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of a methodology for the assessment of external healthcare providers.

**Related standards**

HA: 4a-01-E05-E

## 4a-01-E10

96

### Definition

The organisation or the PCT has a record of nonconformities in the service provided and reports them.

### Clarifications

There is a record of events or incidents describing nonconformities in the service provided and the reporting circuit.

### Dimension

D

### Tool

RD

### Possible evidence

- Existence of a record of nonconformities in the service provided by healthcare providers.

### Related standards

SP

## Conceptual grouper 02. Non-healthcare providers

### Definition

The organisation ensures compliance with the characteristics of the contracted service in terms of effectiveness and quality, and ensures the maintenance of consistency with the institutional policies, mission and values.

### Objectives

- Determine which of its functions can be carried out by other entities; select the non-healthcare providers based on service quality, effectiveness and efficiency criteria, based on the determination of its needs.
- Integrate the subcontracted entities into its general functions and encompass them.
- Involve them in the monitoring of the institutional mission and its policies, and bind the subcontracted entities in its continuous improvement process.
- Guarantee the supply of goods necessary for its activities and establish control and action mechanisms in the event of contingencies.

### 4a-02-E01

97

### Definition

The organisation or the PCT identifies the external non-healthcare support required by the PCT to carry out its activity.

### Clarifications

External non-healthcare providers include maintenance, security, cleaning, laundry, etc.

When contracting external non-healthcare services, the organisation or the PCT must describe and justify the need for support.

### Dimension

E

### Tool

RD

### **Possible evidence**

- Existence of a document identifying the need to contract external non-healthcare services.

## **4a-02-E02**

**98**

### **Definition**

The organisation or the PCT has criteria for the selection of non-healthcare providers.

### **Clarifications**

The subcontracted services must comply with a series of requirements that respond to the policies and strategies of the organisation, so it is important to have a set of criteria setting these out. These criteria may include the responsibilities, competencies and dependencies (organic and functional) of the subcontracted entities, in addition to their obligations with respect to the organisation, and the existence of a committee (representation of different professional groups) that uses criteria based on scientific and technical evidence. Decisions are made based on reports on adverse events.

### **Dimension**

E

### **Tool**

RD

### **Possible evidence**

- Existence of a document specifying the criteria for the selection of non-healthcare providers.

### **Related standards**

HA: 4a-04-E01-E

#### 4a-02-E03

99

##### Definition

The organisation or the PCT has a contract between the organisation and the non-healthcare provider.

##### Dimension

E

##### Tool

RD

##### Possible evidence

- Review of contracts.

##### Related standards

AP: 9a-01-E06

HA: 4a-03-D02-E

#### 4a-02-E04

100

##### Definition

The PCT's management team knows who its non-healthcare providers are.

##### Dimension

E

##### Tools

RD, ED

##### Possible evidence

- Verification that the PCT's management team knows who its non-healthcare providers are.

#### 4a-02-E05

101

##### Definition

The organisation or the PCT's people appointed for this purpose know the representatives of the subcontracted entities and coordinate them.

##### Clarifications

When subcontracted organisations carry out their activity at the organisation, the organisation will coordinate with them to improve the service and correct any shortcomings.

##### Dimension

D

##### Tools

RD, ED

##### Possible evidence

- Verification through meeting minutes, meeting schedules, agreements, etc.

#### 4a-02-E06

102

##### Definition

The organisation or the PCT has a record of its providers.

##### Dimension

E

##### Tool

RD

##### Possible evidence

- Existence of a record of companies providing non-healthcare services.

##### Related standards

HA: 4a-04-E04-E



#### 4a-02-E07

103

##### **Definition**

The PCT has a list of supplied products with the characteristics and data necessary for purchasing management.

##### **Dimension**

E

##### **Tool**

RD

##### **Possible evidence**

- Existence of the list of the products supplied by non-healthcare providers, together with their characteristics.

##### **Related standards**

HA: 4a-04-E04-E

#### 4a-02-E08

104

##### **Definition**

The organisation or the PCT responds to nonconformities to the established objectives and service requirements.

##### **Clarifications**

The organisation or the PCT takes action when it detects a nonconformity to the contracted service requirements.

##### **Dimension**

D

##### **Tools**

RD, ED

#### **Possible evidence**

- Verification of the action taken by the PCT in the event of nonconformity to the established service requirements. Documentation to verify this must be provided (e.g. emails, complaints, etc.).

#### **Related standards**

AP: 9c-01-E04

SP

HA: 4a-04-D03-E

### **4a-02-E09**

**105**

#### **Definition**

The organisation or the PCT has criteria to periodically assess the degree of compliance with the objectives and the requirements for the provision of the subcontracted services.

#### **Clarifications**

These criteria must be included in the methodology used in the assessment. There must also be records and the communication of results.

#### **Dimensions**

E and D

#### **Tool**

RD

#### **Possible evidence**

- Verification of the existence of indicators to measure compliance with the contractual quality requirements and those used by the PCT to select the subcontracted services.

#### **Related standards**

SP

## Conceptual grouper 03. Partnerships

### Definition

The PCT creates partnerships with its environment to ensure quality care for its public.

### Objectives

- Define the health coverage provided to the assigned population.
- Identify which organisations and entities from the environment it will collaborate with to meet the healthcare needs of the community.
- Act as a reference for the population.
- Actively engage in the development of partnerships with the environment.
- Make a commitment in accordance with its policy and strategy to develop prevention and health promotion activities in the community.
- Create partnerships with the community by including community representatives.

## 4a-03-E01

106

### Definition

The organisation or the PCT creates partnerships with local government.

### Clarifications

There are partnerships with the City Council and the Ministry of Health (protocols, communication, sharing of information, case management, regular meetings, public health, etc.).

### Dimension

D

### Tools

RD, ED

### Possible evidence

- Interview with the management team and documentation confirming the existence of these partnerships (minutes, schedules, protocols, etc.).

### Related standards

AP: 8a-01-E01

## 4a-03-E02

107

### Definition

The organisation or the PCT creates partnerships with community agents not included in local government.

### Clarifications

There are partnerships with health education groups, community representation bodies, the media, meetings with neighbourhood social actors, residents' associations, schools, etc. that are not included in standard 4a-03-E01.

### Dimension

D

### Tools

RD, ED

### Possible evidence

- Interview with the management team and documentation confirming the existence of these partnerships (minutes, schedules, protocols, etc.).

### Related standards

AP: 8a-01-E01

## **Sub-criterion 4.b) Management of economic and financial resources.**

### **Conceptual grouper 01. Management of economic and financial resources**

#### **Definition**

The organisation has an economic and financial resource management system to support its policy and strategy, with mechanisms that guarantee the efficient use of resources.

#### **Objectives**

- Manage the resources of a given plan.
- Document policies and decisions in the economic and financial area.
- Determine relations between departments in terms of customer and supplier.
- Control financial management.
- Have the information necessary to make economic decisions.

#### **4b-01-E01**

**108**

#### **Definition**

The PCT has an economic management assessment system.

#### **Dimension**

E

#### **Tool**

RD

#### **Possible evidence**

- Existence of an economic management assessment system.

#### **Related standards**

AP: 9b-01-E01

HA: 4b-01-D08-E

#### **4b-01-E02**

**109**

**Definition**

The organisation or the PCT has an investment plan.

**Clarifications**

The organisation or the PCT has reports and indicators to assess its investments and sources of funding. These investments are subject to a structured system of investment need planning. The indicators commonly used are: annual investment volume, investments as a percentage of the total budget, the degree of implementation of investments, deviation from the cost of planned investments.

**Dimension**

E

**Tool**

RD

**Possible evidence**

Existence of an investment plan.

**Related standards**

AP: 9b-01-E03

HA: 4b-01-E03-E

**4b-01-E03****110****Definition**

The organisation or the PCT keeps the inventory up to date and has an asset replacement programme.

**Clarifications**

This relates to health technology, equipment, structures, furniture, IT, etc.

**Dimension**

D

**Tool**

RD

**Possible evidence**

- Existence of an up-to-date inventory and an asset replacement programme.

**Related standards**

HA: 4b-01-D07-E

**4b-01-E04**

**111**

**Definition**

The organisation or the PCT has designed and implemented a third-party billing system.

**Dimensions**

E and D

**Tool**

RD

**Possible evidence**

- Existence of a third-party billing system and actions to implement it.

**Related standards**

AP: 9b-01-E02

**Sub-criterion 4.c) Infrastructure management: buildings, equipment and materials**

**Conceptual grouper 01. Facilities and maintenance of the building**

### Definition

The PCT adapts, from the perspective of the building (including civil engineering and installations), to its needs (healthcare, technological, security. etc.). It is also committed to guaranteeing its safe operation at full capacity.

### Objectives

- Conserve the building in accordance with the design parameters throughout its useful life.
- Identify the building's maintenance, replacement and adaptation needs.
- Adapt to the new needs of the building to support improvements.
- Prioritise changes and investments, in accordance with legislative amendments, needs and economic resources.

## 4c-01-E01

112

### Definition

The organisation or the PCT has developed and implemented a building maintenance plan (interior and exterior).

### Dimensions

E and D

### Tools

RD, ED

### Possible evidence

- Verification of the actions designed to implement the building maintenance plan.

### Related standards

AP: 9c-11-E08

SP

HA: 4c-01-E01-E

## 4c-01-E02

113

### Definition

The organisation or the PCT detects the need to modify its infrastructure.



### **Clarifications**

The organisation or the PCT provides for the possibility of the growth of the building and the installations due to changing needs and the implementation of new technologies.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

- Requests from the team to the organisation to modify the infrastructure.

### **Related standards**

HA: 4c-02-E01-E

## **4c-01-E03**

**114**

### **Definition**

The PCT has detailed and up-to-date plans of the facilities.

### **Dimension**

E

### **Tool**

RD

### **Possible evidence**

- Existence of detailed and up-to-date plans of the facilities.

### **Related standards**

SP

HA: 4c-01-E04-E

#### 4c-01-E04

115

##### Definition

The PCT has a maintenance service that is guaranteed at all times.

##### Clarifications

The continuity of the service, especially at night and on public holidays, must be checked.  
The service must be guaranteed 24/7.

##### Dimension

D

##### Tool

RD

##### Possible evidence

- Existence of a contract and circuit for the PCT to follow in order to confirm the continuity of maintenance (weekends, public holidays and at night).

##### Related standards

SP

HA: 4c-01-D02-E

## Conceptual grouper 02. Accessibility of the building and of the environment

##### Definition

The PCT facilitates accessibility to all its resources, informing them how and organising it in such a way as to meet the needs of the public.

### Objectives

- Guarantee public accessibility to its resources.
- Inform, guide and facilitate flows, adapting resources to the specific needs of the various types.

## 4c-02-E01

116

### Definition

The PCT has designed and implemented a signage plan.

### Clarifications

The plan must include the correct identification of public and restricted areas.

### Dimensions

E and D

### Tools

RD, CIS

### Possible evidence

- Existence of a signage plan.
- In situ check that public and restricted areas are correctly identified.

### Related standards

SP

HA: 4c-03-E01-E

## 4c-02-E02

117

### Definition

The PCT has a visible and up-to-date information system to help the public reach the care site.

#### **Clarifications**

The information system (directory or other) must be up to date and include the identification of the people in the organisation, timetables, days and the physical location.

#### **Dimension**

D

#### **Tool**

CIS

#### **Possible evidence**

- In situ verification of the system used to guide the public to the care site.

---

### **4c-02-E03**

**118**

#### **Definition**

The PCT informs the public of its opening hours.

#### **Clarifications**

The opening hours of the centre must be visible to the public at the entrance of the centre.

#### **Dimension**

D

#### **Tool**

CIS

#### **Possible evidence**

- Opening hours visible to the public.

#### **Related standards**

HA: 4c-03-E03-E

---

### **4c-02-E04**

**119**

**Definition**

The PCT has resources to ensure telephone accessibility by the public.

**Dimension**

D

**Tools**

RD, ED, CIS

**Possible evidence**

- Verification of the centre's resources to ensure telephone accessibility by the public.

**Related standards**

AP: 6b-02-E02

SP

HA: 4c-03-D14-E

---

**4c-02-E05****120****Definition**

The PCT has resources to guarantee its internal and staff communication systems for emergency situations or when it needs to locate the PCT's people.

**Clarifications**

For example, there is a PA system, a list of staff telephone numbers, pagers, etc.

**Dimension**

D

**Tools**

RD, CIS

**Possible evidence**

- In situ verification of any PA systems or other mechanisms that guarantee the existence of internal communication systems to locate team members in emergency situations.

### **Related standards**

SP

HA: 4c-03-D17-E

## **Conceptual grouper 03. Comfort of the facilities**

### **Definition**

The PCT considers aspects that refer to the comfort of the public and its people.

### **Objectives**

- Take into account the specific needs of the public and their environment at difficult times (pain, communication of terminal illness, etc.).

- Generate an environment of care and recovery with maximum quality and comfort conditions.

#### 4c-03-E01

121

##### **Definition**

The PCT has specific rest areas for the PCT's people.

##### **Dimension**

D

##### **Tool**

CIS

##### **Possible evidence**

- Confirmation in situ.

##### **Related standards**

HA: 4c-04-D23-E

#### 4c-03-E02

122

##### **Definition**

The PCT has surgeries and waiting rooms for paediatric care separate from those of adults.

##### **Clarifications**

Emergency services are excluded.

##### **Dimension**

D

##### **Tool**

CIS

##### **Possible evidence**

- Confirmation in situ.

### **Related standards**

HA: 4c-04-D21-E

## **4c-03-E03**

**123**

### **Definition**

The PCT has protection measures in place to prevent people from falling.

### **Clarifications**

The organisation must take measures to prevent the risk of people falling on stairs and through windows

### **Dimension**

D

### **Tool**

CIS

### **Possible evidence**

- In situ evaluation of the measures taken to prevent the risk of falling on stairs and through windows, in accordance with Royal Decree 314/2006, of 17 March 2006, approving the Technical Building Code of the Ministry of Housing.

### **Related standards**

SP

HA: 4c-05-D08-E

## **4c-03-E04**

**124**

### **Definition**





The PCT is equipped with spaces for consultation and advice that guarantee privacy and confidentiality in the public service unit.

#### **Clarifications**

The PCT must have a system allowing it to attend to the public in a specific space that meets the necessary conditions of privacy and confidentiality (e.g. care for women) in the public service unit.

#### **Dimension**

D

#### **Tool**

CIS

#### **Possible evidence**

- Confirmation in situ.

#### **Related standards**

HA: 4c-04-D16-E

## **Sub-criterion 4.d) Technology management**

### **Conceptual grouper 01. Healthcare technology management**

#### **Definition**

The technical resources to support diagnosis and treatment available to the PCT must be effective, operational, safe and used correctly.

### Objectives

- Ensure that it is technologically up to date.
- Innovate technologically in accordance with its needs and possibilities.
- Know and value the technology that it has and uses, whether it is its own, transferred or being demonstrated.
- Ensure correct use of the available technology and its suitable replacement.
- Guarantee the effectiveness and safety of the technological equipment used and the skills of the individuals who handle the technological equipment.

### 4d-01-E01

125

#### Definition

The PCT has a technical sheet for each item of healthcare equipment.

#### Clarifications

This technical sheet states the details of its acquisition, specifications, inspections and scheduled and completed repairs.

#### Dimension

D

#### Tool

RD

#### Possible evidence

- Existence of technical sheets for each item of technical healthcare equipment.

#### Related standards

SP

### 4d-01-E02

126

#### Definition

The PCT has a person in charge of guaranteeing the maintenance of the centre's technical healthcare equipment.

#### **Clarifications**

The PCT has appointed a person to guarantee the preventive and corrective maintenance of the centre's technical healthcare equipment.

#### **Dimension**

D

#### **Tool**

ED

#### **Possible evidence**

An interview must be held with management to confirm that a person has been appointed to guarantee the preventive and corrective maintenance of the centre's technical healthcare equipment.

#### **Related standards**

SP

### **4d-01-E03**

**127**

#### **Definition**

The PCT has a periodic verification record for the devices that require it.

#### **Clarifications**

The record includes a description of the device, the scheduled calibration dates, the dates of past calibrations, etc.

#### **Dimension**

D

#### **Tool**

RD

#### **Possible evidence**

- Existence of a periodic calibration record for the devices that require it.

## Related standards

SP

## 4d-01-E04

128

### Definition

The PCT has a record of the devices that require continuous monitoring of their operational status.

### Clarifications

Each one of these devices has protocols, including the monitoring system, permissible tolerance limits and how to act in case of deviation. In particular, electrical or mechanical devices in potential contact with the public, defibrillators, monitors, etc. It also affects refrigerators used for the storage of medicinal products, sterilisation controls, etc.

### Dimension

D

### Tool

RD

### Possible evidence

- Existence of documentation listing the devices that require continuous monitoring of their operational status.

## Related standards

SP

## Sub-criterion 4.e) Information and knowledge management

### Conceptual grouper 01. Information systems

#### Definition

The PCT has, in accordance with its strategy, mechanisms to guarantee the correct collection, structuring and management of clinical information.

#### Objectives

- Detect and plan its own and third-party information needs.
- Design and implement the most suitable system, in accordance with its policy and strategy.
- Guarantee the accessibility, distribution and security of information.
- Allocate the necessary resources.

#### 4e-01-E01

129

##### **Definition**

The PCT has an information management plan that is approved and up to date.

##### **Clarifications**

The plan must manage the information with a view to satisfying its own (healthcare and support) and external (providers, the public, other entities and volunteers) information needs.

This plan must take into account at least the following aspects:

- Identification of the information needs to be covered (internal and external).
- Necessary resources (structural, technological, human).
- Information access and availability systems.
- Support for the information processed in public service, the management of the organisation and quality management.
- Combination of information from diverse sources to prepare reports, and design and manage specific clinical records (mortality, neoplasms, infections, etc.).

The plan must be aligned with the strategic lines of the organisation.

##### **Dimension**

E

##### **Tools**

RD, ED

##### **Possible evidence**

- Existence of an information management plan.

## **Conceptual grouper 02. Knowledge management**

### **Definition**

The organisation or the PCT has a process to manage knowledge, one of the most important assets generated by its personnel or members, given that one of the benefits it provides is the capacity for innovation.

### **Objectives**

- Guarantee new methods of communicating, collaborating, coordinating, sharing and using its knowledge.
- Manage the knowledge of the organisation.
- Detect the knowledge it has.
- Value people who have specific knowledge.
- Revert this knowledge so it can be used efficiently.
- Foster development.

#### 4e-02-E01

130

##### **Definition**

The organisation or the PCT has a knowledge management plan that is approved and up to date.

##### **Clarifications**

The knowledge management plan seeks to encourage the development of collective knowledge by harnessing the intellectual capital of its people for self-learning. This can be done, for example, by hosting systematic sessions (bibliographical sessions, reviews of topics, sessions with experts, etc.).

The plan must foster the detection, growth, development, organisation and dissemination of collective knowledge and the innovation and creativity of the team members.

This plan must have a budget that covers the necessary resources (technological, material, human, time). For example, the following may be specified as resources: time to prepare the information; the use of own and external databases; intranet; email; internal magazines, internal newsletters, files at specific points, etc.

The plan must be aligned with the strategic lines of the organisation.

##### **Dimension**

E

##### **Tools**

RD, ED

##### **Possible evidence**

- Existence of a knowledge management plan.





## Criterion 5. Processes

The "Processes" criterion develops what constitutes the *raison d'être* of the team: the production of healthcare services (servuction), within the health sector for its public. In this phase, the team applies its structure, leadership, culture and resources (human, physical and technological), the conditioning factors and characteristics of which have been reviewed and assessed in the four previous criteria (enablers). The purpose is to provide its customers with healthcare that is qualitatively satisfactory from the technical and scientific and organisational perspectives and meets their needs.

To provide the required healthcare services, the PCT is structured into processes, which are activated through the recognition of the existence of a given health problem and which the organisation is considered competent and capable of resolving.

This document, oriented to primary care teams, identifies and proposes, as the structural basis for the conceptual groupers, the various processes in which primary care is undertaken.

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#### **Sub-criterion 5.a) Process design, management and improvement**

**Conceptual grouper 01.** Process management and organisation of care

#### **Sub-criterion 5.b) Introduction of the necessary improvements to the processes through innovation.**

**Conceptual grouper 01.** Improvement of processes and innovation

#### **Sub-criterion 5.c) Design and development of products and services based on the needs and expectations of the public**

**Conceptual grouper 01.** Processes and needs of the public

#### **Sub-criterion 5.d) Production, management and distribution of services.**

**Conceptual grouper 01.** Public service and service support unit

**Conceptual grouper 02.** Healthcare: immediate care

**Conceptual grouper 03.** Clinical history

**Conceptual grouper 04.** Public assessment

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**Sub-criterion 5.e) Management and improvement of relations with the public**

**Conceptual grouper 01.** Processes to improve relations with the public

## Sub-criterion 5.a) Process design, management and improvement

### Conceptual grouper 01. Process management and organisation of care

#### Definition

The PCT adopts process management as its framework for the provision of primary care for the public. A results-oriented approach in response to the needs of the public, the control of resources and guidelines for the development of activities are key elements of process management.

#### Objectives

- Understand the organisational model of the PCT through process management.
- Have defined methodologies to identify the various processes and types in the quality management system and any interactions.
- Consider the process map as the graphical representation and base of the functional organisation of the centre.

#### 5a-01-E01

131

#### Definition

The PCT plans, designs and manages processes in accordance with the defined mission and strategy.

#### Clarifications

The planning, design and management of the processes are performed by the PCT in accordance with the defined mission and strategy; therefore, mechanisms are put in place for evaluation and continuous improvement. The PCT has mechanisms in place for the planning, design and management of its processes, which have set levels of participation.

#### Dimension

E

#### Tools

RD, ED

### **Possible evidence**

- Verification of the documents outlining the processes. A check will be performed to ensure that all of the processes studied are prioritised and the most important ones are implemented.

### **Related standards**

HA: 5a-01-E02-E

## **5a-01-E02**

**132**

### **Definition**

The organisation or the PCT has a process map that is up to date.

### **Clarifications**

The organisation or the PCT outlines the key, strategic and support processes, considers their relationships and provides a comprehensive graphic description of them on the process map.

### **Dimension**

E

### **Tool**

RD

### **Possible evidence**

- Existence of a process map.

### **Related standards**

HA: 5a-01-E01-E

## **5a-01-E03**

**133**

### **Definition**

The PCT ensures that its people are aware of and have access to the procedures corresponding to their competence.

### **Clarifications**

The working procedures of all processes applicable to each position must be known by the professionals concerned and they must have access to them.

### **Dimension**

D

### **Tools**

VE, CIS

### **Possible evidence**

- Verification that the members of the team are aware of and have access to the procedures corresponding to their competence.

### **Related standards**

SP

HA: 5a-01-D06-E

## **5a-01-E04**

**134**

### **Definition**

The PCT has a system of tools to aid clinical decision-making.

### **Clarifications**

The PCT has a system of agreed working tools (practice guidelines, care protocols and standards of correct care) based on scientific and technical knowledge and evidence.

These tools must be unique (without duplicates) and have a uniform structure.

At least two protocols are needed to reach the standard.

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

- Verification that there are unique and agreed guidelines and protocols. All guidelines and protocols must be reviewed. At least two protocols/guidelines are needed to reach the standard.

**Related standards**

AP: 9c-04-E02

SP

## **Sub-criterion 5.b) Introduction of the necessary improvements to processes through innovation in order to fully satisfy the public and other stakeholders and generate increasing value**

### **Conceptual grouper 01. Improvement of processes and innovation**

#### **Definition**

Process management is a dynamic model that adapts to the context of organisations. Hence, for changes to be more effective, they must undergo process innovation. The needs of the public and other stakeholders must be well defined and lead to the process innovation necessary for maximum effectiveness.

#### **Objective**

- Have process innovation elements as a response to the needs of the public for continuous quality improvement.

#### **5b-01-E01**

**135**

#### **Definition**

The PCT develops the oral anticoagulation process to adapt to the needs of the public.

#### **Dimension**

D

#### **Tool**

RD

#### **Possible evidence**

- Verification of the existence of the circuit by subsequently checking the procedure used.

#### **Related standards**

SP

## **Sub-criterion 5.c) Design and development of products and services based on the needs and expectations of the public**

### **Conceptual grouper 01. Processes and needs of the public**

#### **Definition**

The assessment of the needs and expectations of the general public is the starting point for the design and development of the services.

The PCT must have mechanisms in place to periodically determine these needs and expectations; by doing so, it can design the most appropriate services and the most effective adaptations.

#### **Objective**

- Have access to process design and development elements based on the needs and expectations of the public in order to deliver the best services.

### **5c-01-E01**

**136**

#### **Definition**

The PCT adapts its care timetables in accordance with the collective needs of the public.

#### **Clarifications**

The PCT ensures adult and paediatric care in both the morning and afternoon shifts.

#### **Dimension**

D

#### **Tools**

RD, ED, CIS

#### **Possible evidence**

- Verification through interviews with the management, in situ testing and the presence of documents (service portfolio, directory, etc.).

#### **Related standards**

HA: 5d-01-D03-E



## 5c-01-E02

137

### Definition

The PCT's people use agreed clinical protocols suited to the needs of the reference population.

### Dimension

D

### Tools

RD, ED

### Possible evidence

- Verification of the existence of clinical protocols based on the needs of its reference population (e.g. existence of a protocol for foreign nationals, a protocol for drug addicts, etc.).

### Related standards

SP

## **Sub-criterion 5.d) Production, management and distribution of services**

### **Conceptual grouper 01. Public service and service support unit**

#### **Definition**

The PCT, in accordance with its strategy, has a unit dedicated to the integration of the healthcare contacts and operations of the public. It coordinates and facilitates the healthcare work of the various services and people in the organisation.

The PCT has people who complement the provision of healthcare services. These people carry out a variety of activities to enable the comprehensive provision of care. They must be very close to the people in the team and the public. We could define them as facilitators of the service. It is important for their activities to be high quality, especially in areas such as accessibility, treatment, communication, reducing bureaucracy and speeding up administrative processes.

The PCT must be able to identify the organisation in relation to its customers; be aware of its scope of responsibility; standardise the service and customise it for each member of the public, and add value to the organisation.

#### **Objectives**

- Guarantee the availability of a portfolio of services or products of the centre.
- Receive and attend the public (welcome).
- Give support to the team members.
- Inform the public of the services and how to access them.
- Schedule appointments for the public in relation to the centre and specialist care.
- Coordinate activities between all the healthcare services and levels.
- Prioritise care based on objective criteria.
- Accompany and serve the public and their families in situations that are sometimes difficult and complex.
- Provide support and information about the various additional services.
- Advise the public on administrative procedures or in relation to the various levels of care throughout the care process.
- Manage the clinical histories archive (safeguarding, conservation and availability of the clinical history).
- Retrieve information on healthcare activity.

## 5d-01-E01

138

### Definition

The public service unit of the PCT has and develops internal procedures for the processes it carries out.

### Clarifications

The procedures of the key processes are: request to change doctors, referrals to other providers, intermediate products and specialists, diverse services such as managing the administrative delivery of chronic medication, the administrative delivery of temporary disability notes, healthcare validation, orthopaedic services, reimbursement of expenses, home nutritional preparations, etc.

The procedures of the support processes are: clinical material orders, offices, pharmacy, surgery materials, laundry management circuits, supplies, cleaning, etc.

### Dimensions

E and D

### Tools

RD, ED

### Possible evidence

- Existence of the internal procedures of the key and support processes.

### Related standards

SP

HA: 5d-12-E01-E

## 5d-01-E02

139

### Definition

The public service unit of the PCT has a public index file.

### Clarifications

This file must be separate from the Central Record of the Insured (RCA).

This file must contain at least the following: history number or identifier, full name, sex, date of birth, personal identification number (ID or passport and patient identification code), address, telephone number, insurance company and affiliation number.

**Dimension**

D

**Tools**

RD, ED

**Possible evidence**

- Existence of an index file with at least the content described above. This file must be unique, centralised, permanent and independent of the reason for care.

**Related standards**

SP

HA: 5d-12-D01-E

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**5d-01-E03**

**140**

**Definition**

The public service unit of the PCT ensures that the public has access to information about the service portfolio.

**Dimension**

D

**Tools**

RD, CIS

**Possible evidence**

The existence of the service portfolio must be checked in situ.

**Related standards**

HA: 5d-12-E03-E

## 5d-01-E04

141

### Definition

The public service unit of the PCT informs the public of their care references.

### Clarifications

The public must be told the full name of their reference doctor and nurse. For example, unique basic healthcare card (TUAB).

### Dimension

D

### Tools

RD, ED, CIS

### Possible evidence

A check must be carried out to ensure that the public are informed of their references – e.g. card with the full name of their references (TUAB).

## 5d-01-E05

142

### Definition

The public service unit of the PCT manages scheduling throughout the opening hours of the centre.

### Dimensions

E and D

### Tools

ED

### Possible evidence

The possibility of making appointments through a number of channels (Internet, telephone, etc.) must be verified.

### Related standards

AP: 9c-01-E01

## 5d-01-E06

143

### Definition

The public service unit of the PCT has a mechanism for managing scheduling incidents caused by the absence of professionals.

### Dimension

E

### Tools

RD, ED

### Possible evidence

Verification that there is a mechanism for managing scheduling incidents caused by the absence of professionals.

### Related standards

AP: 9c-01-E01

SP

## 5d-01-E07

144

### Definition

The public service unit of the PCT has a mechanism in place for managing delays in the scheduling of visits with the healthcare reference of the citizen.

### Clarifications

A delay in the scheduling of a visit refers to the time elapsed between the requested date of the visit and the scheduled date with the healthcare reference of the citizen.

### Dimension

E

### Tools

RD, ED

### **Possible evidence**

A check must be carried out to confirm that there is a mechanism in place for managing delays in the scheduling of visits with the healthcare reference of the citizen.

### **Related standards**

AP: 6b-02-E01

SP

## **5d-01-E08**

**145**

### **Definition**

The public service unit of the PCT handles case transfers.

### **Clarifications**

A check must be carried out to determine which mechanisms have been defined by the PCT to manage transfers of clinical histories between centres.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

A check must be carried out to determine which mechanisms have been defined by the PCT to manage transfers of clinical histories between centres.

### **Related standards**

SP

## **5d-01-E09**

**146**

### **Definition**

The public service unit of the PCT has designed and implemented a mechanism to manage queues at the reception desk.

### Clarifications

The public service unit must try to minimise waiting times for administrative procedures, e.g.

- By organising the public service unit according to reason (information, appointments, referrals, etc.).
- By setting up an information point.

### Dimensions

E and D

### Tools

ED, CIS

### Possible evidence

The methods used to facilitate appointment scheduling and administrative procedures with the aim of minimising queues at the reception desk must be verified by means of an interview with management and in situ verification.

## 5d-01-E10

147

### Definition

The public service unit of the PCT has designed and implemented a mechanism to manage external requests for clinical information.

### Clarifications

The PCT guarantees the conservation of the interests of the public in information deliveries and the traceability of the information delivered. The request must contain at least:

- Full name of the citizen and the requester
- Accredited documentation of the requester
- Relationship between the requester and the citizen
- Reason for the request
- The clinical information requested
- Date
- Signature

### Dimensions

E and D

### Tools

RD, ED, CIS



**Possible evidence**

- Existence of a document confirming the mechanism used for external requests for documentation.
- Interview and verification in situ of the implementation of this mechanism.

**Related standards**

SP

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**5d-01-E11**

**148**

**Definition**

The public service unit of the PCT manages the emergency record and coordinates the healthcare process.

**Dimension**

D

**Tools**

RD, ED, CIS

**Possible evidence**

In situ verification of how the unit carries out its emergency registration activity and how it coordinates the care process.

**Related standards**

SP

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**5d-01-E12**

**149**

**Definition**

The public service unit of the PCT informs and welcomes the public and helps them reach their care site.

**Dimension**

D

**Tools**

ED, CIS

**Possible evidence**

In situ verification of how it informs and welcomes the public when they ask for care.

**Related standards**

SP

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**5d-01-E13**

**150**

**Definition**

The PCT has a list of its supplies and the corresponding providers.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of a document listing the approved providers and products.

**Related standards**

HA: 5d-16-E01-E

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**5d-01-E14**

**151**

**Definition**

The PCT checks the supplies before they are stored in certain areas in accordance with the established criteria.

**Clarifications**

The standard refers to: temperature conditions, humidity, etc.; dry and wet material areas; sterile equipment areas, etc.

**Dimension**

D

**Tools**

RD, ED, CIS

**Possible evidence**

- Existence of criteria relating to the storage of the supplies described in the clarifications.

**Related standards**

AP: 9c-01-E03

SP

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**5d-01-E15**

**152**

**Definition**

The PCT has a warehouse management system.

**Clarifications**

The PCT must manage the organisation of its warehouses to ensure the maximum effectiveness of the purchasing process and the performance of services.

The determination of stock (optimum, alarm and minimum levels), the definition of the supply system for each surgery, incident records, etc. ensure an efficient process.

**Dimensions**

E and D

**Tools**

RD, ED

**Possible evidence**

The way that the PCT manages the warehouse must be verified by a documentation review and an interview with the management.

**Related standards**

SP

**5d-01-E16**

**153**

**Definition**

The PCT has designed and implemented a system to control the expiry of consumable materials.

**Clarifications**

Consumable materials are those that are used and consumed (gauze, probes, syringes, needles, etc.).

**Dimensions**

E and D

**Tools**

ED, CIS (automated record)

**Possible evidence**

The system for the control of the expiry of consumable materials must be confirmed by a review, an interview with management and in situ verification.

**Related standards**

SP

**5d-01-E17**

**154**

**Definition**

The organisation and/or the PCT has a system in place for the cleaning of the facilities.

### **Clarifications**

The centre has defined a system for cleaning and to guarantee the service based on specific needs, using its own or subcontracted staff.

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

It must be verified that the centre has a defined system for cleaning and to guarantee the service based on specific needs, using its own or subcontracted staff.

### **Related standards**

AP:9c-01-E05

SP

## **5d-01-E18**

**155**

### **Definition**

The organisation and/or the PCT has designed and implemented a system for the laundry process.

### **Clarifications**

The PCT has a system in place to ensure the correct level and standard of laundry for the team members, using its own or subcontracted staff.

### **Dimensions**

E and D

### **Tools**

RD, ED

### **Possible evidence**

The way that the PCT acts to ensure service quality in relation to the laundry circuit must be checked by a documentation review and an interview with the management.

**Related standards**

HA: 5d-15-E03-E

**5d-01-E19**

**156**

**Definition**

The organisation and/or the PCT has mechanisms for waste treatment.

**Clarifications**

Recycling and reuse of all types of waste.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

Verification of how the PCT ensures the correct treatment of waste by means of an interview with management and a documentation review.

**Related standards**

AP: 8b-03-E02 and 9c-09-E03

SP

## Conceptual grouper 02. Healthcare: immediate care

### Definition

In accordance with its strategy, the PCT has a process in place to provide the public with spontaneous care. *Immediate care* is taken to mean “the request for an immediate visit without a scheduled appointment”.

### Objectives

- Classify the public and prioritise their care so that it does not interfere with non-emergency activity.
- Allow for the possibility of transfers to the other centres.
- Inform the public within the set time frame and in proper form.

## 5d-02-E01

157

### Definition

The PCT handles emergency care requests and prioritises immediate healthcare needs and treatment.

### Clarifications

This refers to the emergency circuit, flow management, reception, welcome and classification, etc.

### Dimension

D

### Tools

RD, ED

### Possible evidence

This must be checked through: documentation review and an updated procedure on the emergency circuit, flow management, reception, welcome and classification.

### Related standards

AP: 9c-02-E01

SP

## 5d-02-E02

158

### Definition

The PCT keeps a record of the immediate care activities performed.

### Clarifications

*Immediate care* is taken to mean “the request for an immediate visit without a scheduled appointment”.

This record must include: full name, age and sex, personal identification code, date and time of entry and departure, origin of citizens, destination of citizens, identification of the medical and nursing staff, diagnosis or reason for the visit, treatment and others.

### Dimension

E

### Tool

ED

### Possible evidence

The existence of the record must be verified. This record must be checked to ensure that it includes the content set out in the clarifications.

## 5d-02-E03

159

### Definition

The PCT has procedures in place to communicate with and inform the competent authorities and public services where necessary.

### Clarifications

The PCT has procedures in place to communicate with the competent authorities and public services where necessary: telephone numbers, medical and legal documents, police, fire-fighters, courts, medical examiners, epidemiological data, notifiable diseases, etc.

### Dimension

E

### Tools



RD, ED

**Possible evidence**

- Existence of procedures that specify how to communicate with and inform the relevant authorities where necessary and the necessary contact details.

**Related standards**

AP: 9c-09-E02

SP

HA: 5d-02-E06-E

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**5d-02-E04**

**160**

**Definition**

The PCT has a procedure in place to check the crash cart.

**Clarifications**

Review of the crash cart (including medication, defibrillator and other devices). The cart must be sealed for greater control and to ensure that the medication and devices to be used are in the correct condition.

For example:

- Review record specifying the date, the person responsible, the medication replaced, correct sealing of the cart.
- Record of cart opening: date opened, the person who used it, the reason for opening it, the medication used and verification of replacement, and verification of the correct sealing of the cart.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

- Verification of the crash cart review system using a procedure that specifies its content (consumables, medication and devices), the person responsible for the review, when reviews are performed and how they are registered.
- Definition of the material replacement procedure if the crash cart is used.

**Related standards**

AP: 9c-02-E03

SP

HA: 5d-02-D11-E

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**5d-02-E05**

**161**

**Definition**

The PCT has procedures in place for medical emergencies that the PCT's people are familiar with.

**Clarifications**

The existence of procedures for dealing with emergencies must be verified with a documentation review.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Existence of procedures for dealing with medical emergencies (at least AMI and stroke codes). These procedures must be made available to professionals so that they become familiar with them (emergency cubicle, information on stroke and AMI codes, internal communication system, etc.).

**Related standards**

SP

HA: 5d-01-E09-E

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**5d-02-E06**

**162**

**Definition**

The PCT has a protocol in place for the treatment of cardiorespiratory emergencies that is disseminated by the PCT's people.

**Clarifications**

This refers to the existence of protocols, specific procedures and appropriate equipment (crash cart, monitors, defibrillator, emergency bag, etc.) for cardiorespiratory emergencies, whether at the centre or at home. It is disseminated to the PCT's people.

**Dimension**

E

**Tool**

RD, ED

**Possible evidence**

- Existence of specific protocols and procedures for the treatment of cardiorespiratory emergencies. This protocol must be available to the professionals (emergency cubicle, information on updated CPR logarithms, internal communication system).

**Related standards**

AP: 9c-02-E02

SP

HA: 5d-02-D11-E

**5d-02-E07****163****Definition**

The PCT guarantees the immediate availability of medication in emergency situations, as well as control of stocks and a record of expiry dates.

**Dimension**

D

**Tools**

RD, ED, CIS

**Possible evidence**

- Verification through an interview with management, documentation review and in situ checks of the availability of medication in emergency situations.

**Related standards**

SP

## Conceptual grouper 03. Clinical history

### Definition

The PCT has a clinical history system to meet the needs of team members and the public.

### Objectives

- Put in place strategies to meet the information needs of the people in the organisation.
- Ensure the confidentiality, integrity and security of the data generated during the healthcare process.
- Manage information in the clinical history.
- Identify levels of security.
- Protect clinical histories from loss or unauthorised handling or use.

## 5d-03-E01

164

### Definition

The PCT's people with healthcare duties formalise the summary of patient clinical histories.

### Clarifications

The clinical history of the patient includes a summary of the most relevant pathology.

### Dimension

D

### Tool

EM

### Possible evidence

- Verification through sampling studies.

### Related standards

SP

## 5d-03-E02

165

### **Definition**

The PCT studies clinical history quality with a predetermined periodicity.

### **Clarifications**

The results are then assessed and appropriate measures are taken to improve the quality of the clinical histories. Various dimensions are assessed: identification of the citizens, healthcare process, formalisation and quality of informed consent, formalisation and quality of other data.

For example, audits are performed as a way to update and review the information system.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

Any qualitative or quantitative system that evaluates the quality of clinical histories should be considered. For example, audits and self-audits covering various dimensions.

### **Related standards**

AP: 9c-03-E01

SP

## Conceptual grouper 04. Public assessment

### Definition

The PCT provides healthcare to the citizens that request it.

### Objectives

- Determine the type of services offered to the public at the centre and at home.
- Adapt the use of its services and their efficient delivery.
- Define the actions of the healthcare process from the request for care through to its conclusion.
- Reduce variability in the actions of all members of the team.
- Ensure healthcare continuity and coordination between the various levels of healthcare.

The protocols and programmes must be aligned with the current health plan.

## 5d-04-E01

166

### Definition

The PCT has a plan in place to welcome new citizens.

### Clarifications

The welcome plan includes information on:

- The service portfolio
- How the centre operates
- The opening of the clinical history
- Rights and duties of citizens
- The allocation of care references
- Identification of needs
- Etc.

### Dimension

E

### Tools

RD, ED

**Possible evidence**

- Verification by means of an interview with management and a documentation review to confirm the existence of a welcome plan for new citizens.

**Related standards**

AP: 9c-04-E01

SP

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**5d-04-E02**

**167**

**Definition**

The PCT has protocols for acute pathologies at the centre and at home.

**Clarifications**

The PCT must have specific protocols for the care of people with acute pathology, both at the centre and in the home.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of protocols. (At least two protocols are required.)

**Related standards**

AP: 9c-04-E03

SP

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**5d-04-E03**

**168**



### Definition

The PCT has a programme of preventive and health promotion activities for childhood and adolescence.

### Clarifications

The PCT must have a programme for each group in relation to preventive and health promotion activities.

For example, the detection of growth problems, psychomotor development, visual function, auditory function, musculoskeletal system, the detection of potential abuse, blood pressure, nutrition, accident prevention, oral hygiene, healthy eating habits, drug consumption, physical activity, vaccinations, etc.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the programme.

### Related standards

AP: 9c-04-E04

SP

HA: 1c-03-E01-E

## 5d-04-E04

169

### Definition

The PCT has a programme of preventive and health promotion activities for adults.

### Clarifications

The PCT must have a programme for each group in relation to preventive and health promotion activities.

For example, systemic vaccinations, blood pressure readings, cholesterol testing, record of smoking habit, record of alcohol consumption, weight, height, physical activity, screening for breast cancer, cervical cancer, etc.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the programme.

**Related standards**

AP: 9c-04-E05

HA: 1c-03-E01-E

SP

**5d-04-E05**

**170**

**Definition**

The PCT has protocols to address cardiovascular risk factors.

**Clarifications**

The PCT must have specific protocols for the care of individuals with cardiovascular risk factors (high blood pressure, diabetes mellitus, dyslipidemia, cardiovascular risk, obesity, smoking, etc.).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of protocols. (At least three protocols are required.)

**Related standards**

AP: 9c-04-E06

SP

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**5d-04-E06**

**171**

**Definition**

The PCT has a home care programme for chronic patients where necessary.

**Clarifications**

The PCT must have specific protocols for chronic patients in relation to the home care programme (elderly, chronic, multimorbid patients, etc.).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the programme.

**Related standards**

AP: 9c-04-E07

SP

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**5d-04-E07**

**172**

**Definition**

The PCT has protocols for sexual and reproductive healthcare.

**Clarifications**

The PCT must have specific protocols for sexual and reproductive health (family planning, choice of contraceptive methods, emergency contraception, etc.).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of protocols. (At least two protocols are required.)

**Related standards**

SP

**5d-04-E08****173****Definition**

The PCT has a programme to address oral health needs where required.

**Clarifications**

The PCT must have a specific programme to address oral health needs.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the programme.

**Related standards**

AP: 9c-04-E08

SP

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**5d-04-E09**

**174**

**Definition**

The PCT has protocols to deal with sexually transmitted diseases when necessary.

**Clarifications**

The PCT should have specific guidelines for the care of sexually transmitted diseases (syphilis, gonorrhoea, chlamydia, HIV, genital herpes, etc.).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of protocols. (At least two protocols are required.)

**Related standards**

SP

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**5d-04-E10**

**175**

**Definition**

The organisation or the PCT has rapid diagnosis circuits for possible neoplasms.

### Clarifications

For example, colon, lung, etc.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of protocols. (At least three protocols are required.)

### Related standards

AP: 9c-04-E09

SP

## 5d-04-E11

176

### Definition

The PCT has protocols to address cardiovascular diseases when necessary.

### Clarifications

The PCT must have specific protocols to address cardiovascular diseases (heart disease – IAM, angina pectoris –, heart failure, cerebrovascular disease: TIA or stroke, arrhythmia due to atrial fibrillation, etc.). One compulsory health plan protocol and two for the other pathologies.

### Dimension

E

### Tool

RD

**Possible evidence**

- Verification of the existence of protocols. (At least three protocols are required.)

**Related standards**

AP: 9c-04-E10

SP

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**5d-04-E12**

**177**

**Definition**

The PCT has protocols to address acute and chronic respiratory diseases when necessary.

**Clarifications**

The PCT must have specific protocols for the care of acute and chronic respiratory diseases (acute bronchitis, upper respiratory tract infection, flu, pneumonia, COPD, asthma, etc.). Two protocols for COPD and asthma, plus one for another pathology (three protocols).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of protocols. (A minimum number of protocols is required.)

**Related standards**

AP: 9c-04-E11

SP

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**5d-04-E13**

**178**

**Definition**

The PCT has mental health protocols when necessary.

### Clarifications

The PCT must have specific protocols for the care of mental health needs (dementia, depression, anxiety, adjustment disorders, etc.). One protocol required by the Health Plan (dementia) and an optional one.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of protocols. (At least two protocols are required.)

### Related standards

SP

## 5d-04-E14

179

### Definition

The PCT has protocols to deal with rheumatic and musculoskeletal diseases when necessary.

### Clarifications

The PCT must have specific protocols for the care of rheumatic and musculoskeletal diseases (chronic pain, osteoarthritis, osteoporosis, arthritis, tendonitis, etc.). In accordance with the Health Plan, one compulsory protocol for chronic pain.

### Dimension

E

### Tool

RD



**Possible evidence**

- Verification of the existence of protocols. (At least two protocols are required.)

**Related standards**

SP

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**5d-04-E15**

**180**

**Definition**

The PCT has protocols to deal with suspected abuse.

**Clarifications**

The PCT must have specific protocols to deal with health needs when there is a suspicion of abuse (suspected physical or mental abuse of children, adults or the elderly).

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of a protocol for children, adults and the elderly.

**Related standards**

SP

HA: 5d-03-D27-E

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**5d-04-E16**

**181**

**Definition**

The PCT has protocols to treat the consumption of drugs when necessary.

### Clarifications

The PCT must have specific protocols for the care of health needs arising from the consumption of toxic substances (tobacco, alcohol, marijuana, cocaine, heroin, etc.).

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of protocols. (At least two protocols are required.)

### Related standards

AP: 9c-04-E12

SP

## 5d-04-E17

182

### Definition

The PCT has a protocol to address end-of-life symptoms.

### Clarifications

The PCT must know and respect the special needs of patients such as the terminally ill. As a minimum, the treatment of pain plus other symptom controls.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of protocols. (At least two protocols are required.)

### Related standards

AP: 9c-04-E14

SP

HA: 5d-03-E06-E

## 5d-04-E18

183

### Definition

The PCT has a system in place for reporting adverse events and incidents related to patient safety.

### Clarifications

We understand *patient safety* as defined by the World Health Organization: the reduction of risk of unnecessary harm associated with healthcare to an acceptable minimum. An acceptable minimum refers to the collective notions of given current knowledge, resources available and the context in which care was delivered weighed against the risk of non-treatment or other treatment.

According to the World Health Organization, an incident is when there has been an event or circumstance that could have resulted in or which did result in unnecessary harm to a patient. This definition includes:

- Reportable circumstance: situation in which there was significant potential for harm, but no incident occurred.
- Near miss: incident which did not reach the patient.
- No harm incident: incident in which an event reached a patient but no discernible harm resulted.
- Adverse event: incident that results in harm to a patient.

A sentinel event is any event that has resulted in an unanticipated death or major permanent loss of function, not related to the natural course of the patient's illness or underlying condition.

An incident reporting system must be in place to improve patient safety based on the analysis of situations, problems or incidents that could have resulted in or did result in harm to the patient. The main purpose of this mechanism is learning in order to improve.

This standard covers having a reporting system in place for ADRs and medication errors.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the reporting system for adverse events, sentinel events and incidents related to patient safety and their resulting actions. It includes medication errors.

**Related standards**

AP: 9c-04-E13

SP

HA: 5a-01-D10-E

## Conceptual grouper 05. Use of medication

### Definition

The PCT, in accordance with its strategy, ensures the effective, efficient and safe use of the medication prescribed, prepared and administered.

### Objectives

- Establish a policy for the use of drugs, foster their uniform use among prescribers and ensure their therapeutic use and safety for the public.
- Control the purchasing, storage, conservation, safeguarding, prescription, preparation, dispensing and administration processes of pharmaceutical products.
- Foster the detection and reporting of errors in any of the phases.
- Foster the detection of adverse effects and medication interactions.

## 5d-05-E01

184

### Definition

The PCT has an updated, evidence-based formulary that is known by its team members.

### Clarifications

This formulary should ensure the effective and efficient use of medication in relation to the system in place for the prescription of medication to be purchased by the public at the pharmacy.

It should include:

- the specific drugs available,
- the possible formats, and
- their technical specifications.

### Dimension

E

### Tool

RD, ED

### Possible evidence

The existence, content and validity of the formulary must be verified.

### **Related standards**

AP: 9c-05-E01

SP

HA: 5d-07-E01-E

## **5d-05-E02**

**185**

### **Definition**

The PCT has a stock control system for medication that is applied consistently throughout the PCT.

### **Clarifications**

The PCT has a medication management system in place to ensure effective and efficient availability. Therefore, it is necessary to determine the criteria to be used to correctly control the centre's stocks and to explicitly define how to act in the event of stockout in order to guarantee permanent coverage.

### **Dimension**

E

### **Tools**

RD, ED, CIS (consider the automated record)

### **Possible evidence**

The existence of systems to control medication stocks throughout the centre (warehouse and doctors' surgeries) must be verified. The existence of criteria to be followed in the event of shortages must be verified. An in situ check must be carried out on the stock control system, both in the warehouse and doctors' surgeries.

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### **Related standards**

AP: 9c-05-E02

SP

HA: 5d-07-E07-E

## 5d-05-E03

186

### Definition

The PCT has a system in place to control the expiry of medication.

### Clarifications

The PCT has a medication management system in place to ensure effective and efficient availability; it is therefore necessary to determine which criteria should be used for the control of the expiry of medication.

### Dimension

E

### Tools

RD, ED, CIS

### Possible evidence

The existence of systems to control medication expiries throughout the centre (warehouse and doctors' surgeries) must be verified.

### Related standards

AP: 9c-05-E03

SP

HA: 5d-07-E12-E

## 5d-05-E04

187

### Definition

The PCT has a system to maintain the cold chain of thermolabile medication.

### Clarifications

The PCT has a management system in place for thermolabile medication to ensure their effective, efficient and safe use; it is therefore necessary to determine which criteria should be used for the correct storage of thermolabile medication with daily temperature control. For example, exclusive use of medication, maximum and minimum controls and locating them near the point of care.

### **Dimension**

D

### **Tools**

RD, ED

### **Possible evidence**

The existence and application of the systems for the proper storage of medication and vaccines must be verified. For example, refrigerator temperature control.

### **Related standards**

AP: 9c-05-E04

SP

## **5d-05-E05**

**188**

### **Definition**

The PCT has designed and implemented a control system for multi-dose containers.

### **Clarifications**

The PCT has a medication management system in place to ensure effective and efficient availability; it is therefore necessary to determine which criteria should be used for the proper management of multi-dose containers (with the opening date printed on them).

### **Dimensions**

E, D



### **Tools**

RD, EP

### **Possible evidence**

- Verification of the existence and implementation of systems for the control of multi-dose containers.

### **Related standards**

AP: 9c-05-E05

SP

## **5d-05-E06**

**189**

### **Definition**

The PCT has defined and applies criteria for the control of medicines provided as samples by pharmaceutical laboratories.

### **Dimensions**

E, D

### **Tools**

RD, ED, CIS

### **Possible evidence**

The criteria governing the administration of sample medicines from laboratories must be requested. An in situ check must be carried out to confirm the presence of sample medicines in the team.

### **Related standards**

SP

HA: 5d-07-E11-E

## 5d-05-E07

190

### Definition

The organisation or the PCT has a standardised procedure to ensure the safe use of medication for the public.

### Clarifications

The PCT must establish criteria to ensure the correct prescription of drugs and the control, correct preparation and safe administration of medication.

The PCT has criteria to prevent the verbal prescription of medication and uses the clinical history to identify the person making the prescription and the time and date of the administration of a medication to a patient.

### Dimension

E

### Tools

RD, ED

### Possible evidence

It is necessary to review the procedure to ensure safe use of the medication (circuit from the correct prescription, correct preparation and safe dispensing to correct administration). The criteria to prevent verbal prescription must be assessed. For example, treatment orders from nurses.

### Related standards

AP: 9c-05-06, 9c-05-E08 and 9c-05-09

SP

## Conceptual grouper 06. Public education and information

### Definition

The PCT, in accordance with its strategy, fosters healthcare education for citizens and their families, in accordance with their needs. Health education is approached both from a preventive point of view (emphasising healthy habits) and from the point of view of making decisions related to immediate or home care, chronic disease, involvement in the correct use and administration of prescriptions and the advice of medical staff.

### Objectives

- Foster the training of the citizens and their environment with respect to the promotion of healthy habits and disease prevention, and also knowledge of their disease and how to approach their participation in the healthcare process.
- Determine for which groups of diseases it is necessary to provide education for citizens and their environments.
- Design an educational process for each circumstance and prepare the supporting documentation to which the citizens have access.
- Facilitate the channels for communication with the citizens and their environment to clarify or complement their education.
- Review the effectiveness of the educational actions implemented.

## 5d-06-E01

191

### Definition

The PCT offers an educational programme to meet health education needs of the public.

### Clarifications

The PCT designs the individual and/or group educational programme to be taught with the participation of the organisation's people.

It also determines which groups of citizens and their environments and which processes or techniques are suitable for specific training, and defines the content and methods for the training and how to access it.

### Dimension

E

**Tool**

RD

**Possible evidence**

- Verification of the educational programme.

**Related standards**

AP: 9c-06-E01

HA: 5d-18-E01-E

**5d-06-E02**

**192**

**Definition**

The PCT has procedures in place to inform the public and their families about the living wills circuit, where suitable.

**Dimension**

E

**Tool**

RD

**Possible evidence**

It must be verified by a documentation review of the circuits described in the relevant living wills protocol.

**Related standards**

AP: 6a-01-E07

HA: 5d-19-E13-E

## 5d-06-E03

193

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about health promotion and disease prevention, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the protocol.

## 5d-06-E04

194

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, on cardiovascular risk factors, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

**5d-06-E05**

**195**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, on the safe use of medicines and their potential adverse effects, where indicated.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

HA: 5d-07-D06-E

## 5d-06-E06

196

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, on the prevention of interactions between medications, foods and other substances, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the protocol.

### Related standards

AP: 9c-05-E07

SP

## 5d-06-E07

197

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about the safe use of medical equipment, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

**5d-06-E08**

**198**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about healthy lifestyle habits.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP



## 5d-06-E09

199

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about rehabilitation techniques, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the protocol.

### Related standards

SP

## 5d-06-E10

200

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about reducing accidents in the home, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

**5d-06-E11**

**201**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about the healthy child programme, where indicated.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

## 5d-06-E12

202

### Definition

The PCT informs the public and their families, in accordance with a protocol, on sexual and reproductive health, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the protocol.

### Related standards

SP

## 5d-06-E13

203

### Definition

The PCT informs the public and their families, in accordance with a protocol, on oral health, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

**5d-06-E14**

**204**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about sexually transmitted diseases, where indicated.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

## 5d-06-E15

205

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about drug use, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the protocol.

### Related standards

SP

## 5d-06-E16

206

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about chronic disease, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

**5d-06-E17**

**207**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about cardiovascular disease, where indicated.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

## 5d-06-E18

208

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about infectious diseases, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

### Dimension

E

### Tool

RD

### Possible evidence

- Verification of the existence of the protocol.

### Related standards

SP

## 5d-06-E19

209

### Definition

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about mental health, where indicated.

### Clarifications

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

**5d-06-E20**

**210**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about acute respiratory diseases, where indicated.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP



**5d-06-E21**

**211**

**Definition**

The PCT has procedures in place to inform the public and their families, in accordance with a protocol, about rheumatic and musculoskeletal diseases, where indicated.

**Clarifications**

The PCT must have the required protocol on this matter. It can either be a specific protocol or a section on how this particular information is given as part of the various clinical protocols.

**Dimension**

E

**Tool**

RD

**Possible evidence**

- Verification of the existence of the protocol.

**Related standards**

SP

## Conceptual grouper 07. Community care

### Definition

The PCT adopts a leadership role in the planning of the activities carried out in the community.

### Objectives

- Define and identify the services required in the reference community of the PCT.
- Get involved in the community.
- Carry out activities for the promotion of health and the prevention of disease in the community.
- Involve community members in the operation of the PCT.

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#### 5d-07-E01

212

### Definition

The PCT has a programme of community activities based on the objectives of the Health Plan and of the organisation.

### Dimension

D

### Tool

RD, EP

### Possible evidence

- Verification of the existence of a community programme.

### Related standards

AP: 9c-07-E01

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#### 5d-07-E02

213

### Definition

The PCT has a portfolio of services related to community care.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

Verification of the existence of a portfolio of services related to community care.

**5d-07-E03**

**214**

**Definition**

The PCT has one or more people responsible for the community care programme, appointed by the management team.

**Dimension**

E

**Tool**

EP

**Possible evidence**

Confirmation that a person has been appointed for community care.

## Conceptual grouper 08. Ethics and citizens' rights

### Definition

The PCT, in accordance with its policy and strategy, ensures respect for the rights of citizens and takes into account cultural and philosophical differences and acts with ethical institutional criteria.

### Objectives

- Have an institutional code of ethics that guides the collective and individual actions of the team members.
- Respect the rights of citizens and disseminate them.
- Establish mechanisms for internal discussion and set ethical action criteria that both staff and the public can access.
- Foster the ethical principle of autonomy and encourage the participation of citizens and their environment in decision-making related to their care.
- Prepare action lines in relation to ethically conflictive situations and establish methods for their conciliation.

## 5d-08-E01

215

### Definition

The PCT has an institutional code of ethics accessible to the public, and ensures that the members of the team are familiar with it.

### Clarifications

The institutional code of ethics is made known to all the PCT's people in both hierarchical and subordinate roles, regardless of the nature of their employment relationship with the PCT.

### Dimensions

E, D

### Tools

RD, ED, VE

### **Possible evidence**

The following should be verified through the existence of a formal code of ethics: content, dissemination, the knowledge of the PCT's people and the access of the public.

### **Related standards**

AP: 9c-08-E01

SP

HA: 5d-19-E01-E and 5d-19-E02-E

## **5d-08-E02**

**216**

### **Definition**

The PCT has mechanisms in place to ensure equality of care for the public.

### **Clarifications**

It applies care criteria without discrimination based on grounds of ethnicity, culture, gender, socio-economic status or beliefs. Concepts included in the code of ethics. Adaptation of the team, e.g. through the incorporation of cultural mediators.

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

This concept must be checked to confirm that it has been included in the code of ethics. Management interviews.

The team must be adapted, e.g. through the incorporation of cultural mediators.

### **Related standards**

HA: 5d-19-E03-E

## 5d-08-E03

217

### Definition

The PCT has procedures in place to guarantee the rights of the public to participate in decision-making and in situations of incapacity.

### Clarifications

Criteria are adopted for replacements in decision-making (relatives, guardians or legal representatives) in cases of incapacity or when the patients are minors or not intellectually or emotionally capable of understanding the scope of the intervention. Particularly in judgement and behavioural disorders and adolescence with regard to informed consent and living wills.

### Dimension

E

### Tool

RD

### Possible evidence

Verification of the existence of criteria related to giving information and obtaining informed consent in the processes described and action criteria in the case of citizens who are unable to provide informed consent.

Verification through the existence of criteria with respect to IC and LWs.

### Related standards

SP

HA: 5d-19-E04-E

## 5d-08-E04

218

### Definition

The PCT provides care with the appropriate privacy and confidentiality.

### Clarifications

Throughout the care process, from the public service unit to the doctor's surgery.

### Dimensions

E, D

### Tools

ED, CIS

### Possible evidence

This concept should be checked to ensure that it is included in the code of ethics and an in situ verification should be performed during the visit.

### Related standards

HA: 5d-19-E04-E

## 5d-08-E05

219

### Definition

The PCT takes into account comfort and dignity in end-of-life care.

### Clarifications

This should be verified by a document or protocol of action to ensure end-of-life care and promote comfort and dignity. For example, by coordinating with the Home Care and Support Teams Programme (PADES).

### Dimension

E

### Tool

RD

### Possible evidence

This should be verified by a document or protocol of action to ensure end-of-life care and promote comfort and dignity.

**Related standards**

SP

HA: 5d-03-E06-E

**5d-08-E06**

**220**

**Definition**

The PCT informs the public and the PCT's people of the rights and duties of citizens.

**Clarifications**

This should be done through posters, leaflets, information displays, etc.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

Review of the document (or alternative medium) providing information on rights and duties provided by the PCT to the public and its location.

**Related standards**

HA: 5d-19-D02-E



## Conceptual grouper 09. Infection control and prevention

### Definition

The PCT has, in accordance with its policy and strategy, mechanisms to guarantee that the set of activities for the prevention and control of infections is coordinated, up to date and accessible to the whole centre.

### Objectives

- Identify the areas of the centre and situations that could lead to the transmission of infections.
- Have sufficient internal information to make decisions related to the prevention and control of nosocomial infections.
- Assure interdisciplinary treatment of all matters that refer to the prevention and control of infections.
- Ensure the safety of the public and of staff in relation to the transmission of contagious diseases.
- Have measures to ensure that staff are suitably trained and that their professional activity is geared towards adequate risk prevention in relation to the transmission of contagious diseases.

### 5d-09-E01

221

### Definition

The PCT has a programme to reduce the risk of infection among the public.

### Clarifications

This programme must be comprehensive and establish care for the public.

The programme must be adapted to the size of the team, the geographical location, the services and the public.

This programme must include:

- Storage and shelving rules.
- Clean/soiled separation.
- Rules on the reuse of disposable material.
- Rules for cleaning rooms, equipment and reusable material (through a sterilisation system guaranteeing the control of spores).

- Hand-washing rules.

The PCT has a record of issued product nonconformities and a system for managing information related to infection control measures.

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

- Verification of the existence of a programme that includes the above aspects and their application at the centre. For example, a programme to reduce the risk of infection, sterilisation, waste management, etc.

### **Related standards**

AP: 9c-09-E01

SP

## **5d-09-E02**

**222**

### **Definition**

The PCT implements a programme to reduce the risk of infection among the PCT's people.

### **Clarifications**

This programme must be comprehensive and establish protective and preventive care for the PCT's people with regard to the risk of transmission of infection.

The programme must be adapted to the size of the team, the geographical location, the services and the public.

- Use of masks, eye protection, rules for the disposal and removal of material with biological remains and infectious waste.

The PCT has a record of issued product nonconformities and a system for managing information related to infection control measures.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

- Verification of the existence of a programme that includes the above aspects and their application at the centre.

**Related standards**

AP: 9c-09-E01

SP

HA: 5d-13-E04-E

---

**5d-09-E03**

**223**

**Definition**

The PCT has a hand hygiene programme in place.

**Clarifications**

The PCT adopts criteria for hand-washing that, among others, should include hydroalcoholic solution dispensers or any system that allows the use of this product for washing hands, which should be accessible in the care areas.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

Check that there is a hand hygiene programme in place at the centre. The existence of a related document should be considered.

**Related standards**

SP

HA: 1b-05-E04-E and 1b-05-D03-E

## Conceptual grouper 10. Healthcare continuity

### Definition

The PCT ensures continuity of care throughout the process.

### Objectives

- Guarantee healthcare continuity between the various healthcare scopes of the same organisation.
- Guarantee healthcare continuity through effective coordination with other external healthcare providers, which may be those for which it acts as a reference (receiver) and those for which it acts as a referrer (issuer).

### 5d-10-E01

224

### Definition

The PCT has mechanisms in place to ensure healthcare continuity between primary care and emergency care.

### Clarifications

The PCT establishes relationships with the referral hospital to ensure the continuity of care, transportation and timely and efficient treatment of referred citizens (e.g. referral forms, etc.).

### Dimension

E

### Tools

RD, ED

### Possible evidence

- Check that there is a defined mechanism.
- Existence of a shared clinical history.

**Related standards**

AP: 9c-10-E01

SP

HA: 5d-01-E14-E

**5d-10-E02**

**225**

**Definition**

The PCT has mechanisms in place to ensure healthcare continuity between primary care and specialist visits.

**Clarifications**

The PCT establishes relationships with other specialists to ensure appropriate and efficient healthcare continuity for referred citizens.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

- Check that there is a defined mechanism.
- Existence of a shared clinical history.

**Related standards**

AP: 9c-10-E02

SP

HA: 5d-01-E14-E

## 5d-10-E03

226

### Definition

The organisation or the PCT participates in joint work groups with hospitals and primary care with a view to reaching a consensus on clinical protocols for chronic disease in the Health Plan.

### Clarifications

Process management should be adopted for the most prevalent diseases in primary care with interlevel care related to chronic disease such as the management of patients with heart failure, COPD, etc. Work groups must be set up to draw up diagrams and develop procedures. At least three diseases.

### Dimension

E

### Tools

RD, ED

### Possible evidence

Verification should be carried out through the minutes or records of the meetings of work groups and at least three clinical protocols and/or paths should have been developed.

### Related standards

AP: 9c-10-E03

SP

## 5d-10-E04

227

### Definition

The PCT holds consultation sessions with the hospital or specialists.

### Clarifications

The PCT organises meetings with people from the hospital (face-to-face or virtually) on the most prevalent disease in primary care (mental health, cardiology, rheumatology, endocrinology, orthopaedics, etc.).

**Dimension**

D

**Tools**

RD, ED

**Possible evidence**

- Proof that these meetings take place (face-to-face or virtually) in at least three services in the form of minutes, work documents, etc.

**Related standards**

SP

**5d-10-E05**

**228**

**Definition**

The PCT works in coordination with the social services of its surrounding environment.

**Clarifications**

It has inter-level diagrams and circuits (protocol consensus): residencies, social workers, support teams, etc.

**Dimension**

E, D

**Tools**

RD, ED

**Possible evidence**

Verification by checking the existence of a coordination circuit with the medical and social services; interview with management.





## Conceptual grouper 11. Laboratory

### Definition

The PCT has access to laboratory services in order to meet the needs of the public.

### Objectives

- Guarantee accessibility to the previously defined laboratory services and their continuity.
- Guarantee the reliability of the results obtained using systems to guarantee the quality of the objectives.
- Comply with safety rules and the regulations in force.

## 5d-11-E01

229

### Definition

The PCT has access to reference laboratory services with a defined service portfolio.

### Dimension

E

### Tool

ED

### Possible evidence

An interview must be held with management to confirm that the team has access to laboratory services.

### Related standards

AP: 9c-11-E01

SP

HA: 5d-05-E01-E and 5d-05-D01-E

## 5d-11-E02

230

**Definition**

The PCT has safety mechanisms in the analytical samples extraction process.

**Clarifications**

The PCT adopts criteria to ensure the safe extraction of samples from the public: correct identification, the sample extraction and collection process, the transfer of the samples to the reference laboratory, and finally, the reception of the results. There must be an incident record.

**Dimension**

E

**Tool**

RD

**Possible evidence**

Verification, through the existence of related criteria, of: collection of the sample, its correct identification, handling, safe transport (temperature, time, etc.) and reception of results. Existence of a record book.

**Related standards**

AP: 9c-11-E02

SP

**5d-11-E03****231****Definition**

The PCT ensures that samples are accompanied by a duly formalised request.

**Clarifications**

The formalisation includes the clear identification of the prescribing professional.

**Dimension**

D

**Tool**

CIS (security core assessment).

**Possible evidence**

The request accompanying the sample must be verified.

**Related standards**

SP

HA: 5d-05-D05-E

**5d-11-E04****232****Definition**

The PCT has procedures in place for the collection, identification, handling and storage of laboratory samples.

**Dimension**

E

**Tools**

RD, ED

**Possible evidence**

Verification that the procedures exist.

**Related standards**

AP: 9c-11-E03

SP

HA: 5d-05-D06-E

## 5d-11-E05

233

### Definition

The PCT has mechanisms in place to inform the public of prior instructions and the documentation that they must bring to prepare for laboratory diagnostic studies.

### Dimension

E

### Tools

RD, ED

### Possible evidence

Documentation review and an interview with management must be conducted to confirm the existence of mechanisms to inform the public.

### Related standards

AP: 9c-11-E04

SP

## Conceptual grouper 12. Radiodiagnosis

### Definition

The PCT has access to suitable radiodiagnostic services to meet the needs of the public.

### Objectives

- Equip its radiodiagnostic services with technology and procedures to make them safe, effective and efficient.
- Guarantee the availability of its products at suitable places and times.
- Guarantee the safety of the public, staff and the community with controlled procedures.

### 5d-12-E01

234

### Definition

The PCT has access to reference medical imaging services.

### Dimension

E

### Tool

ED

### Possible evidence

An interview must be held with management to confirm that the team has access to radiodiagnostic services.

### Related standards

AP: 9c-11-E05

SP

HA: 5d-08-E01-E

## 5d-12-E02

235

### Definition

The PCT has mechanisms in place to inform the public of prior instructions and the documentation that they must bring to prepare for medical imaging studies.

### Dimension

E

### Tools

RD, ED

### Possible evidence

Documentation review and an interview with management must be conducted to confirm the existence of mechanisms to inform the public.

### Related standards

AP: 9c-11-E06

SP

HA: 5d-08-D02-E

## Conceptual grouper 13. Clinical research

### Definition

The PCT, in accordance with its strategy, facilitates scientific progress and fosters research while guaranteeing the ethical compliance of research and the safety of the public. This conceptual grouper is applicable to centres conducting research.

### Objectives

- Foster research by providing resources, encouraging professional exchanges and providing methodological and document support.
- Identify the priority lines of research.
- Delimit the resources allocated to healthcare by differentiating them from research resources.
- Guarantee respect for the rights of citizens who participate in research.

## 5d-13-E01

236

### Definition

The PCT has procedures in place to effectively differentiate research from care.

### Clarifications

The PCT identifies the patient's participation in clinical research projects in the documentation and the clinical history.

### Dimension

E

### Tools

RD, ED, CIS

### Possible evidence

Verification that procedures are in place to effectively differentiate research from care.

### Related standards

SP

HA: 5d-14-E02-E



## 5d-13-E02

237

### Definition

The PCT implements procedures for the filing of all information generated in clinical trials and for its storage.

### Dimensions

E and D

### Tools

RD, ED

### Possible evidence

Verification that there are procedures in place and that there is a file for the storage of information produced in clinical trials.

### Related standards

AP: 9c-12-E01

SP

## 5d-13-E03

238

### Definition

The PCT has mechanisms to foster the participation of the PCT's people in research.

### Clarifications

Participation in seminars, conferences, the publication of articles, participation in research projects, etc.

### Dimension

E

### Tools

RD, ED

### Possible evidence

Verification of the existence of mechanisms and actions to foster the participation of the PCT's people in research.

**Related standards**

AP: 7b-04-E04, 8b-02-E01 and 8b-02-E02

**Conceptual grouper 14. Social services**

### Definition

The PCT, in accordance with its strategy, facilitates the detection, assessment and treatment of social problems arising from diseases.

### Objectives

- Identify citizens with social difficulties who need the support of a professional.
- Guarantee accessibility, care and continuity in the service.
- Guarantee confidentiality.
- Allocate the necessary resources.

## 5d-14-E01

239

### Definition

The PCT has a social care system for the public to respond to social problems arising from disease.

### Clarifications

The PCT adopts criteria to ensure the detection, identification, evaluation and improvement of social problems arising from the diseases of its patients.

### Dimension

E

### Tools

RD, ED

### Possible evidence

Verification that procedures are in place for the detection, identification, evaluation and resolution of social problems.

### Related standards

AP: 9c-11-E07

HA: 5d-17-E01-E

## **Sub-criterion 5.e) Management and improvement of relations with the public**

### **Conceptual grouper 01. Processes to improve relations with the public**

#### **Definition**

The PCT defines the methodology and resources to engage the public in improving the service, with the aim of discovering their expectations, opinions, complaints and suggestions. It encourages action and carries out activities based on the detection of opportunities for improvement in order to improve its relations with the public and their satisfaction through a written document.

#### **Objectives**

- Allow the public to express its views on the functioning of the services and the care process in order to identify opportunities for improvement.
- Guarantee operation in such a way that appropriate action can be taken in response to requests made.

### **5e-01-E01**

**240**

#### **Definition**

The PCT has a public service policy.

#### **Clarifications**

The PCT promotes the development of spaces for public participation in which citizens can express their opinions freely with regard to the overall operation and services. The information collected by this method is taken into consideration by management and the PCT's people in the design and development of public services and processes. For example, suggestion boxes, surveys, group meetings, complaints, acknowledgements, etc.

#### **Dimension**

E

#### **Tools**

RD, ED

### **Possible evidence**

- Verification by confirming the existence of a process to encourage public participation in matters affecting the operation and services of the centre. For example, suggestion boxes, surveys, group meetings, complaints, acknowledgements, etc.

### **Related standards**

HA: 1c-01-E01-E

## **5e-01-E02**

**241**

### **Definition**

The organisation or the PCT has a mechanism to assess the public's degree of satisfaction.

### **Clarifications**

This system must include the assessment of the public's perception of care, the treatment received from the PCT's people, the waiting time before being seen, the delay in being treated, the information received about the healthcare process, consideration of their views in clinical decisions, the general organisation of services, privacy, the comfort of the facilities, the cleanliness of the centres, etc. (For example: CatSalut survey.)

### **Dimension**

E

### **Tools**

RD, ED

### **Possible evidence**

- Verification by confirming that there is a process to assess satisfaction through surveys, group meetings, etc.

### **Related standards**

AP: 6a-01-E01, 6a-01-E02, 6a-01-E03, 6a-01-E04, 6a-01-E05, 6a-01-E06, 6a-01-E7, 6a-01-E08, 6a-01-E09 and 6a-01-E10.

HA: 5e-01-E02-E

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## 5e-01-E03

242

### Definition

The PCT has mechanisms to manage suggestions and complaints.

### Dimension

E

### Tools

RD, ED

### Possible evidence

- Verification by confirming the existence of a mechanism for handling complaints and suggestions.

### Related standards

AP: 6b-01-E01, 6b-01-E02

SP

HA: 5e-01-D10-E

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## 5e-01-E04

243

### Definition

The PCT has a record of oral complaints in the public service unit.

### Clarifications

This record contains the oral complaints made by the public about the PCT in the public service unit.

### Dimension

E

**Tool**

RD

**Possible evidence**

- Verification by confirming the existence of the oral complaints record of the public service unit.

**Related standards**

HA: 5e-01-D10-E

## Criterion 6. Citizen results





This criterion covers the objectives being achieved by the organisation in relation to the public.

## **Contents**

### **Sub-criterion 6.a) Perception measurements**

**Conceptual grouper 01.** Public perception

### **Sub-criterion 6.b) Performance indicators**

**Conceptual grouper 01.** Complaints, claims, suggestions and appreciations

**Conceptual grouper 02.** Accessibility of the service

## **Sub-criterion 6.a) Perception measurements**

## Conceptual grouper 01. Public perception

### Definition

This refers to the perception of the public as external customers of the PCT with respect to the quality of the products and services received, in accordance with value judgements and in relation to their expectations. The organisation has access to the public's opinion on various aspects of the care process and assesses it.

### Objective

Systematically and periodically have information on the public's perception of PCTs and measure it so that decisions can be made with regard to the organisation of the processes and the design and provision of services.

The following standards are designed to be obtained through surveys, group meetings or other methods allowing assessment of the public's perception of the quality of the products and services received.

The results are evaluated and reviewed, and possible actions are put forward as a result of this process.

### Possible evidence

- Standardised methodology for the assessment of patient perceptions of service quality.
- Analysis of the results at least once.
- Review, making proposals based on the results.

## 6a-01-E01

244

### Definition

The PCT has access to the results of the CatSalut survey on the public about the quality of the service, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

**Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

**Related standards**

AP: 2a-01-E06 and 5e-01-E02

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**6a-01-E02**

**245**

**Definition**

The PCT has access to the results of the public's perception of telephone accessibility, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

**Related standards**

AP: 4c-02-E04 and 5e-01-E02

SP

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**6a-01-E03**

**246**

**Definition**

The PCT has access to the results of the public's perception of the time they have to wait for visits and punctuality, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

### **Related standards**

AP: 5e-01-E02

## **6a-01-E04**

**247**

### **Definition**

The PCT has access to the results of the public's perception of emergency care, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

### Related standards

AP: 5e-01-E02

## 6a-01-E05

248

### Definition

The PCT has access to the results of the public's perception of the information they receive about the healthcare process, and evaluates them and implements improvement actions where necessary.

### Clarifications

The information on the services that they will receive and their components and features are key to patients' perception of quality.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

### Related standards

AP: 5e-01-E02

## 6a-01-E06

249

### Definition

The PCT has access to the results of the public's perception of how they are treated by the PCT's people, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The treatment that patients receive from professionals is one of the most relevant for them and it is a determining factor in the final result on how they perceive service quality.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

### **Related standards**

AP: 5e-01-E02

## **6a-01-E07**

**250**

### **Definition**

The PCT has access to the results of the public's perception of the consideration of their views in the clinical decisions made and of their rights and wishes, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The centre has defined what it considers patient participation should be in terms of clinical decision-making and respect for the rights and wishes of the public.

### **Dimensions**

A and R

### **Tools**

RD, ED

**Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

**Related standards**

AP: 5d-06-E02 and 5e-01-E02

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**6a-01-E08**

**251**

**Definition**

The PCT has access to the results of the public's perception of the general organisation of services, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

**Related standards**

AP: 5e-01-E02

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**6a-01-E09**

**252**

**Definition**

The PCT has access to the results of the public's perception of the comfort of the facilities, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The centre must define the quality criteria and requirements with respect to the comfort of its facilities, including aspects such as surgeries, common areas, furniture, etc.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

### **Related standards**

AP: 5e-01-E02

## **6a-01-E10**

**253**

### **Definition**

The PCT has access to the results of the public's perception of the cleanliness of the centre, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The centre has defined the cleanliness quality criteria and requirements of its facilities.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**



- Documented proof of results (on paper or in electronic format) and of the improvement actions, if taken. Interview with the management team if appropriate.

**Related standards**

AP: 5e-01-E02

## **Sub-criterion 6.b) Performance indicators**

### **Definition**

The measurements related to the public that the organisation applies internally with a view to assessing, understanding, forecasting and improving its satisfaction.

### **Objectives**

- Manage the complaints, suggestions and appreciation expressed by the public.
- Measure its capacity to satisfy the public with respect to accessibility to the services.

### **Possible evidence**

- Analysis of the results obtained with the indicators referring to claims, complaints and suggestions.
- Indicator data based on lines of service.
- Actions and changes following analysis of the results.

## Conceptual grouper 01. Complaints, claims, suggestions and appreciations

### Definition

The public can express its opinion on the PCT's services through complaints, claims, suggestions and appreciations, so the organisation must apply indicators for these services.

Proper management of the information obtained from complaints, claims, suggestions and appreciations is regarded as a result that will lead to a specific answer for dealing with the issues and topics identified.

### Objectives

- Have access to indicators relating to information about patient complaints, claims, suggestions and appreciations, based on the reasons and the areas and people involved.
- Assess the components of indicators relating to the handling of complaints, claims, suggestions and appreciations such as response times and the type of action taken following analysis of these data.

## 6b-01-E01

254

### Definition

The PCT has access to results on the number of claims, suggestions and appreciations, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 1c-01-E02 and 5e-01-E03

SP

## 6b-01-E02

255

### Definition

The PCT has access to results on the response time for claims, and evaluates them and implements improvement actions where necessary.

### Clarifications

The centres must respond to claims in writing following the set procedure.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 5e-01-E03

SP

## Conceptual grouper 02. Accessibility of the service

### Definition

Service quality is closely related to the response time of the PCT with regard to obtaining an appointment and being visited at the surgery.

Punctuality in appointments and at the surgery is a very important aspect to consider as a result of the service accessibility component.

### Objectives

- Have access to the results of indicators that reflect information on the time taken to obtain an appointment by the public and the time spent waiting to be seen at surgeries, and evaluate these results.

## 6b-02-E01

256

### Definition

The PCT has access to the results on the time taken to schedule a visit with the public healthcare reference, and evaluates them and implements improvement actions where necessary.

### Clarifications

Results are available on the time elapsed between the requested date of the visit and the scheduled date with the public healthcare reference.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 5d-01-E07

SP

**6b-02-E02**

**257**

**Definition**

The PCT has access to the results of telephone accessibility to obtain an appointment, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 4c-02-E04

SP

## Criterion 7. PCT people results

This criterion covers the objectives being achieved by the organisation in relation to its people.

### Contents

#### **Sub-criterion 7.a) Perception measurements**

**Conceptual grouper 01.** Perception of the PCT's people

#### **Sub-criterion 7.b) Performance indicators**

**Conceptual grouper 01.** Indicators of PCT people management

**Conceptual grouper 02.** Training of the PCT's people

**Conceptual grouper 03.** Rights of the PCT's people

**Conceptual grouper 04.** Care for the PCT's people

**Conceptual grouper 05.** Occupational health of the PCT's people

**Conceptual grouper 06.** Communication and welcome plan for the PCT's people

## Sub-criterion 7.a) Perception measurements

### Conceptual grouper 01. Perception of the PCT's people

#### Definition

The organisation or the PCT measures the perception of its people in relation to the coverage of their needs and their levels of motivation and satisfaction.

The perception of an organisation's people and their opinion and satisfaction with their workplace is a fundamental outcome for the organisation. The results of its people are a very important conditioning factor in the development of processes and, ultimately, the quality of the services delivered to the public.

#### Objectives

- Measure the perception that people have with regard to the organisation they belong to, in relation to motivation, sense of belonging, satisfaction, coverage of expectations and a work environment that allows decisions to be made on the organisation of processes and the design and delivery of services.

The dimensions related to the staff perception include working conditions, the work environment, management style, recognition, job satisfaction and personal development, remuneration, occupational health and safety, organisational ability and improvement, training, the possibility of participation, internal communication and knowledge and the appropriateness of the objectives.

- Measure people's perception with respect to the organisation in:
  - a) Motivation: participation, empowerment, equal opportunities, leadership, opportunities for learning and achieving recognition, goal-setting and evaluations, knowledge of the mission, vision and values of the organisation, and training.
  - b) Satisfaction: working conditions, facilities and services, health and safety conditions, job security, pay and benefits, relationship with colleagues, environment policy, the role of the organisation in the community and society and work environment.

The following standards are designed to ensure that all of the above are obtained through surveys, group meetings and other methodologies that the staff of the organisation must put



into practice to determine people's perception. In order to understand the significance and representativeness of the results, surveys must clearly state:

- The total number of people to whom the survey is addressed.
- The percentage of valid responses obtained.
- Discrimination by functional area and group.

**Possible evidence applicable to all standards in sub-criterion 7.a)**

- Standardised methodology for assessing people's perception in terms of the satisfaction of the professionals with their work.
- Analysis of the results at least once.
- Review of the subject with proposals related to the results on the satisfaction of the professionals with their work.

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**7a-01-E01**

**258**

**Definition**

The PCT has access to the results on the overall satisfaction of the PCT's people with their work, expectations, motivation, etc., and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3e-01-E02

## 7a-01-E02

259

### Definition

The PCT has access to the results on the satisfaction of the PCT's people with their work environment, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 3e-01-E02

## 7a-01-E03

260

### Definition

The PCT has access to the results on the satisfaction of the PCT' people with their involvement in the management of the service, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.

- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3e-01-E02

**7a-01-E04**

**261**

**Definition**

The PCT has access to the results on the possibility of the PCT's people expressing opinions, and evaluates them and implements improvement actions where necessary.

**Clarifications**

Possibility that their proposals are heard and subsequently implemented.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3e-01-E02

**7a-01-E05**

**262**

**Definition**

The PCT has access to the results on the workload of the PCT's people and the pressure that they face in the performance of their duties, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3e-01-E02

## Sub-criterion 7.b) Performance indicators

### Definition

The organisation objectively measures the development and efficacy of its functions in relation to its personnel.

*Productivity* is taken to mean “activity that can be measured by the professional and which is tailored to the objectives of the team”. These measurements are used as a criterion for deciding on the necessary resources and comparing them with similar organisations.

### Objectives

The measurements taken are used to control, understand, predict and improve people’s performance and predict their perceptions. The performance indicators for people may include:

- Productivity.
- Motivation and involvement (participation in improvement teams, participation in suggestion procedures, training, recognition, level of participation in satisfaction surveys).
- Satisfaction (absenteeism, level of accidents, demands, strikes, labour disputes, use of social benefits, etc.)
- Services provided for the people of the organisation (effectiveness of communication, evaluation of training).

## Conceptual grouper 01. Indicators of PCT people management

### Definition

Sick leave is an organisational problem in PCTs. The PCT must have access to results on absenteeism. It must be aware of its frequency by group and the reasons, the cost and the impact on the services provided.

### Objective

- Have access to information and measurements on absenteeism by group and cause, and its impact on the service.

## 7b-01-E01

263

### Definition

The PCT has access to results on absenteeism, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 3a-02-E02

## 7b-01-E02

264

**Definition**

The PCT has access to results on substitutions, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3a-02-E03

**7b-01-E03****265****Definition**

The PCT has access to results on productivity, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

## Conceptual grouper 02. Training of the PCT's people

### Definition

Training activities are a result in the people of the organisation and will have a direct consequence on the quality of the processes developed and the services provided.

Organisations must have parameters to measure the level of development of training and its impact on service quality.

### Objectives

- Have information on the level of implementation of professional training activities.
- Know the level of participation of professionals in lifelong learning and the evaluation and impact of this training on the quality of the services provided.

The standards in this training grouper are related: course attendance, cost of training and cost of the teachers themselves. The latter two are the expression of financial support for training (3b).

## 7b-02-E01

266

### Definition

The PCT has access to results on completed training activities, and evaluates them and implements improvement actions where necessary.

### Clarifications

The PCT must have access to a training report and evaluate it.

### Dimensions

A and R

### Tools

RD, ED



### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 3b-02-E01 and 3b02E10

## **7b-02-E02**

**267**

### **Definition**

The PCT has access to the results on training on the methodology for quality management and public safety, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED (Ministry of Health)

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 3b-02-E02

SP

## **7b-02-E03**

**268**

### **Definition**

The PCT has access to results on training on cardiopulmonary resuscitation procedures, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The frequency is annual.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 3b-02-E06

SP

## **7b-02-E04**

**269**

### **Definition**

The PCT has access to results on training on the use of equipment, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP:3b-02-E011

**7b-02-E05**

**270**

**Definition**

The organisation or the PCT reviews, evaluates and updates the knowledge management plan.

**Clarifications**

The knowledge management plan must have a validity period and established procedure in order to review it and evaluate compliance with the objectives.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

## Conceptual grouper 03. Rights of the PCT's people

### Definition

Workers' rights must be guaranteed and protected by the organisation. To this end, the organisation must establish the relevant mechanisms for prevention and action in the event of breach.

### Objective

- Analyse the risk factors and their causes in positions with a view to establishing prevention and correction policies.

## 7b-03-E01

271

### Definition

The PCT has access to results on incidents and complaints against dignity, the abuse of power, harassment, assaults and others on the PCT's people, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 3e-02-E02

## 7b-03-E02

272

### Definition

The PCT has access to results on labour conflict, and evaluates them and implements improvement actions where necessary.

### Clarifications

In terms of the complaints lodged with the Labour Court and Labour Inspection Service, based on the number of people affected, the number of days lost to strikes, etc.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 3e-01-E02

## Conceptual grouper 04. Care for the PCT's people

### Definition

The organisations implement activities to address the needs of the PCT's people in relation to their personal and professional lives. These actions are aimed at achieving the work-life balance and fostering engagement with the PCT.

### Objective

- Have access to information and measurements relating to the activities carried out at the centre in terms of attention to professionals.

### 7b-04-E01

273

### Definition

The PCT has access to results on suggestions and complaints made by the PCT's people, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### 7b-04-E02

274

### Definition

The PCT has access to results on actions for the acknowledgement of the PCT's people, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3e-01-E01

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**7b-04-E03**

**275**

**Definition**

The PCT has access to results on the involvement of the PCT's people in improvement activities, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 3c-01-E02

## 7b-04-E04

276

### Definition

The PCT has access to results on the scientific output of the PCT's people, and evaluates them and implements improvement actions where necessary.

### Clarifications

The PCT quantifies activity in scientific publications (articles, publications, posters, presentations, etc.) and presence at professional meetings.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Availability of the report on the scientific output of the PCT.
- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 5d-13-E03

## Conceptual grouper 05. Occupational health of the PCT's people



### Definition

Occupational health in the workplace must be measured and evaluated using specific indicators that allow monitoring to ensure compliance.

### Objective

- Have access to information and measurements through indicators relating to health and safety in the workplace.

## 7b-05-E01

277

### Definition

The PCT has access to results on activities undertaken to ensure the health and safety of the PCT's people, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 3e-02-E01

## **Conceptual grouper 06. Welcome plan and internal communication plan for the PCT's people**

### **Definition**

The PCT has access to results on the implementation of the welcome plan for new staff recruits.

The PCT has access to results on the implementation of the internal communication plan.

### **Objective**

- Have access to information on the implementation of the welcome plan and the internal communication plan.

## **7b-06-E01**

**278**

### **Definition**

The PCT has access to results on the welcome plan for new staff recruits, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP:3d-01-E01

SP

### **Definition**

The PCT has access to results on the internal communication plan, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The PCT has indicators to assess the activities it implements in relation to communication with the PCT's people (meeting attendance, intranet use, emails, surveys of the PCT's people, improvement opportunities form, etc.).

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 3d-02-E01

SP

## Criterion 8. Society results

This criterion covers the objectives being achieved by the organisation in relation to society.

### Contents

#### Sub-criterion 8.a) Perception measurements

**Conceptual grouper 01.** Perception of society

#### Sub-criterion 8.b) Performance indicators

**Conceptual grouper 01.** Media presence

**Conceptual grouper 02.** Publications and research

**Conceptual grouper 03.** Energy consumption and the environment

### Definition

Society in general has a perception of what organisations are. This is what is known as the *corporate image*.

A variety of mechanisms come into play in the generation of society's perception of an organisation and its image, including their media presence, their scientific work, contributions to social causes and sustainability.

### Objectives

- Have access to information on society's perception of the organisation and its image.
- Be aware of the activities that have a favourable impact on society's perception of the PCT.

The organisation or the PCT conducts regular surveys or uses other indirect methods to obtain information on its external image, the confidence it inspires in the population, social responsibility, its commitment to a sustainable society and the image it projects in society.

### Possible evidence

- Standardised methodology to assess society's perception of satisfaction.
- Analysis of the results at least once.
- Review of the results, making suggestions based on them.

#### Sub-criterion 8.a) Perception measurements

## Conceptual grouper 01. Perception of society

### Definition

The PCT takes into consideration the perception of social institutions with respect to the services performed.

### Objectives

- Have access to information on society's perception of the operation of the PCT.
- Evaluate the information from society and act on the results.

## 8a-01-E01

280

### Definition

The PCT has access to the results of society's perception of the services and operation of the PCT, and evaluates them and implements improvement actions where necessary.

### Clarifications

The PCT has access to information and evaluates the perception of social organisations such as patient associations, neighbourhood groups, etc., regarding the operation and services of the PCT. For example, surveys conducted on society, awards, acknowledgement of the PCT, notifications, minutes of meetings with various organisations, etc.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 4a-03-E01 and 4a-03-E02

## **Sub-criterion 8.b) Performance indicators**

### **Conceptual grouper 01. Media presence**



### Definition

The presence of the PCT in the media can be a good gauge of its impact on society.

### Objective

- Have access to information on the media presence of the PCT and evaluate this.

## 8b-01-E01

281

### Definition

The PCT has access to results on its media presence, and evaluates them and implements improvement actions where necessary.

### Clarifications

Information is compiled about press articles and news about the PCT in other media.  
The PCT takes part in radio and television programmes on health promotion.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 2e-01-E02

## 8b-01-E02

282

### Definition

The PCT has access to results on its participation in talks and meetings with local government, patient associations and other neighbourhood and resident groups, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 2e-01-E02, 4a-03-E01 and 4a-03-E02.



## Conceptual grouper 02. Publications and research

### Definition

Professionally, and in a more limited and specific scope, the centre can give information to society in the form of publications and research related to the services performed.

### Objective

- Have indicators relating to the level of participation in scientific meetings of the sector and in publications.

## 8b-02-E01

283

### Definition

The PCT has access to results on the scientific research that it carries out and its contribution to scientific development, and evaluates them and implements improvement actions where necessary.

### Clarifications

The PCT quantifies its scientific development activity through its participation in research studies or projects (multi-site, national, international, etc.) or other forms of cooperation in research projects.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 5d-13-E03

## 8b-02-E02

284

### Definition

The PCT has access to results on information regarding its awards and certifications, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 5d-13-E03

## Conceptual grouper 03. Energy consumption and the environment

### Definition

The PCT contributes to environmental sustainability through the performance of actions for energy consumption reduction, waste treatment and other significant variables.

### Objective

- Have access to results on the level of energy use, activities related to waste treatment and any other measurement of environmental impact.
- Implement improvement actions where necessary.

### 8b-03-E01

285

### Definition

The PCT has access to results on energy consumption, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### 8b-03-E02 / SP

286

### Definition

The PCT has access to results on waste treatment, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

The PCT has indicators to assess the volume of all forms of its waste; its treatment; the percentage of recycled and reused waste, and any other environmental impact caused by its activity.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 5d-01-E19

SP

## Criterion 9. Key results

This criterion covers the objectives being achieved by the organisation in relation to its planned performance.

### Contents

#### **Sub-criterion 9.a) Key organisational results and indicators**

**Conceptual grouper 01.** Key organisational results and indicators

#### **Sub criterion 9.b) Key economic results and indicators**

**Conceptual grouper 01.** Key economic results and indicators

#### **Sub-criterion 9.c) Key operational results and indicators**

**Conceptual grouper 01.** Public service and service support unit

**Conceptual grouper 02.** Immediate care

**Conceptual grouper 03.** Clinical history

**Conceptual grouper 04.** Public assessment

**Conceptual grouper 05.** Use of medication

**Conceptual grouper 06.** Public education and information

**Conceptual grouper 07.** Community care

**Conceptual grouper 08.** Ethics and citizens' rights

**Conceptual grouper 09.** Infection control and prevention

**Conceptual grouper 10.** Healthcare continuity

**Conceptual grouper 11.** Healthcare support

**Conceptual grouper 12.** Clinical research

## Sub-criterion 9.a) Key organisational results and indicators

### Conceptual grouper 01. Key organisational results and indicators

#### Definition

The PCT has access to results on the organisational structure and strategic, key and support processes, and evaluates them and implements improvement actions where necessary.

#### Objective

- Have access to results on the actions of the PCT in relation to:
  - the strategic plan,
  - the quality plan, and
  - healthcare and non-healthcare providers.

#### 9a-01-E01

287

#### Definition

The PCT has access to results on the dashboard, and evaluates them and implements improvement actions where necessary.

#### Dimensions

A and R

#### Tools

RD, ED

#### Possible evidence

- Evidence of the dashboard with results and interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

#### Related standards

AP: 2b-01-E01

SP

## 9a-01-E02

288

### Definition

The PCT has access to results on the implementation of the strategic plan, and evaluates them and implements improvement actions where necessary.

### Clarifications

The strategic plan must have a validity period and an established procedure in order to review it and evaluate compliance with the objectives.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation evidence of the results of the strategic plan and interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

## 9a-01-E03

289

### Definition

The PCT has access to results on the objectives of the PCT, which are aligned with its mission, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Interview with the management team to verify the evaluation of results.

- Review of the documentation outlining the completed improvement actions, e.g. the achievement of a management agreement or management by objectives or the objectives specific to the PCT.

#### **Related standards**

AP: 2a-01-E03

### **9a-01-E04**

**290**

#### **Definition**

The PCT has access to results on safety and quality objectives, and evaluates them and implements improvement actions where necessary.

#### **Clarifications**

For example, the percentage of achievement of the established quality and safety objectives.

#### **Dimensions**

A and R

#### **Tools**

RD, ED

#### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

#### **Related standards**

AP: 2c-01-E03 and 2c-01-E06

SP

### **9a-01-E05**

**291**

#### **Definition**



The organisation or the PCT has access to results on incidents affecting the contract between the organisation and the healthcare provider, and evaluates them and implements improvement actions where necessary.

**Clarifications**

This refers to the quality of the service, agility in programming and performance, delays in the delivery of results or performance of care, interaction with the PCT's people.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Documentation verification of the incident record.
- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken

**Related standards**

AP: 4a-01-E03

**9a-01-E06**

**292**

**Definition**

The organisation or the PCT has access to results on incidents affecting the contract between the organisation and the non-healthcare provider, and evaluates them and implements improvement actions where necessary.

**Clarifications**

This refers to the quality of the service, agility in the performance of tasks and execution and interaction with the PCT's people.

**Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documentation verification of the incident record.
- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### **Related standards**

AP: 4a-02-E03

## **9a-01-E07**

**293**

### **Definition**

The organisation or the PCT reviews, evaluates and updates the information management plan.

### **Clarifications**

The information management plan must have a validity period and an established procedure in order to review it and evaluate compliance with the objectives.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

## Sub criterion 9.b) Key economic results and indicators

### Conceptual grouper 01. Key economic results and indicators

#### Definition

The PCT has access to the financial results of its activities in order to ensure its sustainability and achieve maximum efficiency.

#### Objectives

- Evaluate the economic activity of the PCT.
- Implement improvement actions where necessary.

#### 9b-01-E01

294

#### Definition

The PCT has access to results relating to deviations from the planned allocation of funds that it directly manages, and evaluates them and implements improvement actions where necessary.

#### Dimensions

A and R

#### Tools

RD, ED

#### Possible evidence

- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

#### Related standards

AP: 2b-01-E06 and 4b-01-E01.

## 9b-01-E02

295

### Definition

The PCT has access to results on third-party billing incidents, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation verification of the incident record.
- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

### Related standards

AP: 4b-01-E04

## 9b-01-E03

296

### Definition

The organisation or the PCT has access to results relating to incidents with investments aimed at solving structural deficits, and evaluates them and implements improvement actions where necessary.

### Clarifications

The organisation or the PCT has reports and indicators to assess its investments and sources of funding. These investments are subject to a structured system of investment need planning. The level of implementation of the planned investments is assessed. The indicators commonly used are: annual investment volume, investments as a percentage of the total budget, the degree of implementation of investments and deviation from the cost of planned investments.

### Dimensions

A and R

**Tools**

RD, ED

**Possible evidence**

- Documentation verification of the incident record.
- Interview with the management team to verify the evaluation of results.
- Review of the documentation outlining the improvement actions undertaken.

**Related standards**

AP: 4b-01-E02

## Sub-criterion 9.c) Key operational results and indicators

### Conceptual grouper 01. Public service and service support unit

#### Definition

The PCT has access to the results relating to the key processes of public service and service support, and evaluates them and implements improvement actions where necessary.

#### Objectives

- Evaluate the results of the key processes of public service and service support.
- Implement improvement actions where necessary.

#### 9c-01-E01

297

#### Definition

The PCT has access to results on incidents in programming management, and evaluates them and implements improvement actions.

#### Clarifications

The PCT must record the incidents that occur at the centre in relation to programming (time, date, type of visit, absences of professionals, etc.).

#### Dimensions

A and R

#### Tools

RD, ED

#### Possible evidence

- Documentation verification of the incident record.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-01-E05 and 5d-01-E06

SP

## 9c-01-E02

298

### Definition

The PCT has access to results on incidents relating to waiting room delays, and evaluates them and implements improvement actions where necessary.

### Clarifications

Results are available on the time elapsed between the scheduled time of the visit and the actual time that the visit began.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation verification of waiting room delay results.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

## 9c-01-E03

299

### Definition

The PCT has access to results relating to nonconformities due to incorrect storage, and evaluates them and implements improvement actions.

### Dimensions

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documentation verification of the results of nonconformities related to incorrect storage.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-01-E14

SP

## **9c-01-E04**

**300**

### **Definition**

The PCT has access to results relating to nonconformities in supply orders with regard to the agreed requirements, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Documentation verification of the results of nonconformities in supply orders and the evaluation of these results.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 4a-02-E07

SP



## 9c-01-E05

301

### Definition

The PCT has access to results on incidents with the cleaning of facilities, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation verification of the record of incidents in the cleaning of the facilities.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-01-E17

SP

## Conceptual grouper 02. Immediate care

### Definition

The PCT has access to the results relating to the key processes of immediate care, and evaluates them and implements improvement actions where necessary.

Immediate care is taken to mean "any spontaneous visit or one without an appointment".

### Objectives

- Assess the results of the key processes of immediate care.
- Implement improvement actions where necessary.

## 9c-02-E01

302

### Definition

The PCT has access to results relating to incidents affecting the prioritisation of the immediate care needs of the public, and evaluates them and implements improvement actions.

### Clarifications

Incidents relating to alterations to the established order of priority. For example, through demand management, the results of welcomes and classifications.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation verification of the record of incidents affecting the prioritisation of the immediate care needs of the public.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-02-E01

SP

**9c-02-E02**

**303**

**Definition**

The PCT has access to results on incidents in the treatment of medical emergencies, and evaluates them and implements improvement actions where necessary.

**Clarifications**

This refers to any incidents that have emerged during the care process for general emergencies. It also includes cardiorespiratory emergencies.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-02-E06.

SP

**9c-02-E03**

**304**

**Definition**

The PCT has access to results on incidents in the review and use of the crash cart, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED, CIS

### **Possible evidence**

- Review of the results of incidents in the inspection and use of the crash cart.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-02-E04

## Conceptual grouper 03. Clinical history

### Definition

The PCT has access to the results on the key processes relating to clinical histories, and evaluates them and implements improvement actions where necessary.

### Objectives

- Assess the results of the key processes related to clinical histories.
- Implement improvement actions where necessary.

## 9c-03-E01

305

### Definition

The PCT has access to results on clinical history quality incidents, and evaluates them and implements improvement actions where necessary.

### Clarifications

The quality of the clinical history must be assessed and an analysis must be made of the results and the improvement actions undertaken.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Verification of the evaluation of the results relating to the quality of clinical histories through audits performed by the PCT and the improvement actions undertaken.

### Related standards

AP: 5d-03-E02

SP

## Conceptual grouper 04. Public assessment

### Definition

The PCT has access to results relating to the development of key processes in the application of healthcare programmes and protocols, and evaluates them and implements improvement actions where necessary.

### Objectives

- Have access to results on the objectives set for key processes relating to the application of healthcare protocols and programmes and evaluate them.

**9c-04-E01**

**306**

### Definition

The PCT has access to results on incidents in the application of the welcome plan for new citizens, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Verification of the evaluation of the level of implementation of the welcome plan for new citizens and the improvement actions undertaken.

### Related standards

AP: 5d-04-E01

SP

## 9c-04-E02

307

### Definition

The PCT has access to results relating to incidents in the application of protocols and other standardised documents of clinical events, and implements improvement actions where necessary.

### Clarifications

This refers to the results of the assessment of the use of protocols, procedures or other standardised clinical events.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation verification of the incident record.
- Verification of the evaluation of the level of implementation of protocols and other standardised documents of clinical events and improvement actions undertaken.

### Related standards

AP: 5a-01-E04 and 5d-04-E02

SP

## 9c-04-E03

308

### Definition

The PCT has access to results on the care of acute patients at the centre or in their homes, and evaluates them and implements improvement actions.

### Dimensions

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-04-E02

SP

## **9c-04-E04**

**309**

### **Definition**

The PCT has access to results relating to the programme of activities for prevention and health promotion in childhood and adolescence, evaluating them and implementing improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-04-E03

SP

## **9c-04-E05**

**310**



**Definition**

The PCT has access to results relating to the programme of activities for prevention and health promotion in adults, evaluating them and implementing improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP:5d-04-E04

SP

**9c-04-E06****311****Definition**

The PCT has access to results relating to cardiovascular risk factors, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-04-E05

SP

## 9c-04-E07

312

### Definition

The PCT has access to results on the home care programme for chronic patients, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-04-E06

SP

## 9c-04-E08

313

### Definition

The PCT has access to results relating to oral health care, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-04-E08

SP

## 9c-04-E09

314

### Definition

The PCT has access to results relating to rapid diagnosis circuits for possible neoplasms, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-04-E10

SP

## 9c-04-E10

315

**Definition**

The PCT has access to results relating to cardiovascular disease, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-04-E11

SP

**9c-04-E11****316****Definition**

The PCT has access to results relating to the treatment of chronic and acute respiratory diseases, and evaluates them and implements improvement actions where necessary.

**Dimension**

A and R

**Tools**

RD, ED

**Possible evidence**

- Review of the results of implementing protocols and programmes.

- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP:5d-04-E12

SP

## **9c-04-E12**

**317**

### **Definition**

The PCT has access to results relating to the treatment of drug use, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-04-E16

SP

## **9c-04-E13**

**318**

### **Definition**

The PCT has access to results on the use of processes to reduce the risk of unsafe care for patients, and evaluates them and implements improvement actions where necessary.

### **Clarifications**

It refers to aspects such as errors in the medication process, falls at home, etc.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-04-E18

SP

## **9c-04-E14**

**319**

### **Definition**

The PCT has access to results on end-of-life decisions, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Review of the results of implementing protocols and programmes.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-04-E17

SP



## Conceptual grouper 05. Use of medication

### Definition

The PCT has access to results relating to the development of key processes in the use of medication, and evaluates them and implements improvement actions where necessary.

### Objectives

- Have access to results on the objectives set for key processes relating to the use of medication, and to evaluate them.

## 9c-05-E01

320

### Definition

The PCT has access to results relating to use of the institutionalised formulary, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Review of the results of use of the formulary.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-05-E01

SP



## 9c-05-E02

321

### Definition

The PCT has access to results on incidents with the management of stocks of medication, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

ED, CIS

### Possible evidence

- Review of the results of the management of stocks of medication.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-05-E02

SP

## 9c-05-E03

322

### Definition

The PCT has access to results on incidents with the control of the expiry of medication, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

ED, CIS

### Possible evidence

- Review of the results of the control of the expiry of medication.

- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-05-E03

SP

**9c-05-E04**

**323**

**Definition**

The PCT has access to results on incidents with the control of the cold chain of medication, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

ED, CIS

**Possible evidence**

- Review of the results of the control of the cold chain of medication.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-05-E04

SP

**9c-05-E05**

**324**

**Definition**

The PCT has access to results on incidents with the control of multi-dose containers, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

ED, CIS

### **Possible evidence**

- Review of the results of the control of multi-dose containers.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-05-E05

SP

## **9c-05-E06**

**325**

### **Definition**

The PCT has access to results relating to the identification of adverse reactions to medication, and evaluates them and implements improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Review of the results of the identification of adverse reactions to medication.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP:5d-05-E07

SP

## 9c-05-E07

326

### Definition

The PCT has access to results relating to the identification of interactions between medicines, foods and other substances, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Review of the results of the identification of interactions between medications.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-06-E06

SP

## 9c-05-E08

327

### Definition

The PCT has access to results relating to systems for reporting incidents, sentinel events, medication errors and ADRs, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

**Possible evidence**

- Review of the results of systems for reporting incidents, sentinel events, medication errors and ADRs.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP:5d-05-E07

SP

**9c-05-E09**

**328**

**Definition**

The PCT has access to results relating to patients on diverse medications, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Review of record of results relating to patients on diverse medications.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-05-E07

SP

**Definition**

The PCT has access to results relating to sentinel events and incidents relating to patient safety, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tools**

RD, ED

**Possible evidence**

- Review of the results of the identification of sentinel events and incidents related to patient safety.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

SP

## Conceptual grouper 06. Public education and information

### Definition

The PCT has access to results relating to the development of key processes in public education, and evaluates them and implements improvement actions where necessary.

### Objectives

- Have access to results on the objectives set for key processes relating to public education, and to evaluate them.

## 9c-06-E01

330

### Definition

The PCT has access to results on training activities relating to the educational programme, and evaluates them and implements improvement actions where necessary.

### Clarification

The PCT issues a report on its activities, which it evaluates.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation outlining the extent to which the set objectives of the activities related to the educational programme are achieved.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-06-E01

## Conceptual grouper 07. Community care

### Definition

The PCT has access to results relating to the development of key processes in community care, and evaluates them and implements improvement actions where necessary.

### Objective

- Have access to results on the objectives set for key processes relating to community care, and evaluate them.

## 9c-07-E01

331

### Definition

The PCT has access to results on community activities, and evaluates them and implements improvement actions where necessary.

### Clarifications

Existence of the report on community activities.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Existence of the report on community activities.
- Documentation outlining the extent to which the set objectives of the community activities are achieved in relation to the Health Plan and the organisation.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-07-E01



## Conceptual grouper 08. Ethics and citizens' rights

### Definition

The PCT has access to results relating to the key processes of ethics and the rights of citizens, which it evaluates.

### Objective

- Have access to results on the objectives set for key processes relating to ethics and citizens' rights, and evaluate them.

## 9c-08-E01

332

### Definition

The PCT has access to results relating to the application of the institutional code of ethics, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation relating to the level of achievement of the objectives of the key processes of ethics and citizens' rights.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-08-E01

SP

## Conceptual grouper 09. Infection control and prevention

### Definition

The PCT has access to results relating to the implementation of processes for the prevention and control of infection, and evaluates them.

### Objective

- Have access to results on the objectives set for key processes relating to the prevention and control of infection, and evaluate them.

## 9c-09-E01

333

### Definition

The PCT has access to results relating to incidents arising during implementation of the programme to reduce the risk of infection in the public and in the PCT's people, and evaluates them and implements improvement actions where necessary.

### Clarifications

This refers to the minimum separation of clean and soiled materials; cleaning rules for rooms, equipment and materials, sterilisation rules and accidental inoculation.

### Dimensions

A and R

### Tools

RD, ED, CIS

### Possible evidence

- Record of incidents arising during implementation of the programme to reduce the risk of infection in the public and in the PCT's people.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-09-E01 and 5d-09-E02

SP

## 9c-09-E02

334

### Definition

The PCT has access to results relating to the reporting of incidents affecting any relevant health issue for epidemiological studies to the competent health authority, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Record of incidents in the reporting of any relevant health issue for epidemiological studies to the competent health authority.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-02-E03

SP

## 9c-09-E03

335

### Definition

The PCT has access to results relating to incidents arising in the treatment of waste, and evaluates them and implements improvement actions where necessary.

### Clarifications

This refers to the recycling and reuse of all types of waste.

Contaminated waste deposited in the wrong place, collection delays, accidents during handling, absence of personal protective equipment, modification of containers, etc.

### Dimensions

A and R

**Tools**

RD, ED

**Possible evidence**

- Record of waste treatment incidents.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-01-E19

SP

## Conceptual grouper 10. Healthcare continuity

### Definition

The PCT has access to results relating to the implementation of processes for healthcare continuity, and evaluates them.

### Objective

- Have access to results on the objectives set for healthcare continuity processes, and evaluate them.

## 9c-10-E01

336

### Definition

The PCT has access to results relating to incidents in the continuity of care between primary care and emergency care, evaluating them and implementing improvement actions where necessary.

### Dimensions

A and R

### Tool

ED

### Possible evidence

- Documentation on incidents arising in healthcare continuity between primary care and emergency care.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-10-E01

SP

## 9c-10-E02

337

### Definition

The PCT has access to results relating to incidents in the continuity of care between primary care and other specialities, evaluating them and implementing improvement actions where necessary.

### Clarifications

Results must be available on the continuity of care between the PCT and other specialists, outpatient services, relationships with medical and social services professionals, etc.; these results must be evaluated.

### Dimensions

A and R

### Tool

ED

### Possible evidence

- Documentation on incidents arising in healthcare continuity between primary care and other specialities.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-10-E02

SP

## 9c-10-E03

338

### Definition

The PCT has access to results relating to the set objectives for joint work groups between levels of care, evaluating them and implementing improvement actions where necessary.

### Dimension

A and R

**Tools**

RD, ED

**Possible evidence**

- The PCT has access to the results relating to the set objectives for joint work groups between levels of care.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-10-E03

SP

## Conceptual grouper 11. Healthcare support

### Definition

The PCT has access to results relating to the implementation of healthcare support processes, and evaluates them.

### Objective

- Have access to results on the objectives set for healthcare support processes and evaluate them.

## 9c-11-E01

339

### Definition

The PCT has access to results on incidents with the services of the reference laboratory, and evaluates them and implements improvement actions where necessary.

### Clarifications

This must be analysed using indicators of incidents, response times for urgent requests, waiting times, etc.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Verification of documents containing the results of incidents, response times, waiting times, etc. for laboratory services.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards



AP: 5d-11-E01  
SP

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## 9c-11-E02

340

### Definition

The PCT has access to results on safety incidents during the sample extraction process, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Record of safety incidents arising during the sample extraction process.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-11-E02  
SP

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## 9c-11-E03

341

### Definition

The PCT has access to results relating to incidents in the collection, identification, handling and storage of laboratory samples, evaluating them and implementing improvement actions where necessary.

### Dimensions

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Record of incidents arising during the collection, identification, handling and storage of laboratory samples.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### **Related standards**

AP: 5d-11-E04

SP

## **9c-11-E04**

**342**

### **Definition**

The PCT has access to results relating to incidents with prior instructions and the documentation that the public must bring with them before the performance of laboratory diagnostic studies, evaluating them and implementing improvement actions where necessary.

### **Dimensions**

A and R

### **Tools**

RD, ED

### **Possible evidence**

- Record of incidents related to prior instructions and the documentation that the public must bring with them before the performance of laboratory studies.

### **Related standards**

AP: 5d-11-E05

SP

## 9c-11-E05

343

### Definition

The PCT has access to results on incidents with reference medical imaging services, and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Verification of documents containing the results of incidents, response times, waiting times, etc. for medical imaging services.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP:5d-12-E01

## 9c-11-E06

344

### Definition

The PCT has access to results relating to incidents with prior instructions and the documentation that the public must bring with them before the performance of medical imaging studies, evaluating them and implementing improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

**Possible evidence**

- Record of incidents related to prior instructions and the documentation that the public must bring with them before the performance of medical imaging studies.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-12-E02

SP

**9c-11-E07**

**345**

**Definition**

The PCT has access to results relating to social care, and evaluates them and implements improvement actions where necessary.

**Dimensions**

A and R

**Tool**

RD, ED

**Possible evidence**

- Documentation review of periodic evaluations of social care in order to identify improvements.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

**Related standards**

AP: 5d-14-E01

## 9c-11-E08

346

### Definition

The PCT has access to the results of the building maintenance plan (interior and exterior) and evaluates them and implements improvement actions where necessary.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Verification of the evaluation of the results of the building maintenance plan (interior and exterior) and the improvements made, where applicable.

### Related standards

AP: 4c-01-E01

SP

## Conceptual grouper 12. Clinical research

### Definition

The PCT has access to results relating to the implementation of clinical research processes, and evaluates them.

### Objective

- Have access to results on the objectives set for clinical research processes and evaluate them.

## 9c-12-E01

347

### Definition

The PCT has access to results relating to incidents arising from participation in research projects, and evaluates them and implements improvement actions where necessary.

### Clarifications

This refers to incidents affecting the identification of patients in the relevant documentation or in clinical histories, drop-outs, etc.

### Dimensions

A and R

### Tools

RD, ED

### Possible evidence

- Documentation review of incidents during participation in research projects.
- Interview with the management team to verify the evaluation of results and the improvement actions undertaken.

### Related standards

AP: 5d-13-E01 and 5d-13-E02  
SP

## Glossary

**Accessibility:** attribute of the healthcare systems that refers to the possibility of citizens receiving the services offered by a system, in accordance with their health or condition, at the time and place they need them, with sufficient quality and at a reasonable cost. It measures the degree to which a healthcare system allows an individual or group access to use its services. It is a condition linked to the equality of healthcare service distribution.

**Accreditation:** process through which a healthcare centre is incorporated into an external verification, which evaluates the degree to which this centre complies with a set of previously established standards. The evaluation of the healthcare centre is undertaken by an accreditation body, which issues the corresponding ruling in the form of a certificate.

**Accreditation certificate:** document issued by the accreditation body stating the result of the accreditation process.

**Availability:** measurement of the type, volume and location of the supply of healthcare resources, with respect to the demands or needs of an individual or group in a given geographical area.

**Benchmarking:** continuous process for the comparison of the products, services and practices of the organisation over time with itself (internal benchmarking) or with organisations in the sector or other sectors (external benchmarking). It involves research into best practices, both internal and external.

**Clinical information:** administrative, financial and health information relating to the public who are cared for.

**Committee:** interdisciplinary group that facilitates the participation and interrelationships of the personnel. The name, competencies, composition and decision-making procedure of each committee are set by the internal regulations of each organisation.

**Contrareference:** the healthcare unit or units from which primary care receives a flow of patients.

**Dashboard:** structured and periodically published document that incorporates product, productivity, economic, quality and other data that the organisation or a given functional unit considers to be basic for management and control.

**Delay:** difference between the day of the indication and the day of the performance of the care, for example first outpatient visits, examinations, surgical operation.

**Healthcare technology:** equipment related directly or indirectly to customer care. Therefore, this excludes fixed installations or equipment (boilers, air conditioning, lifts, etc.).

**Key process:** activity that has a priority within the strategy of the organisation. Generally, it is a process that, at a given time, has a greater impact on customer satisfaction and the results of the organisation. In general, the responsibility for its management lies directly with the leaders.

**Knowledge management:** detection, capture, development, organisation and dissemination of the intangible assets that represent the set of knowledge, experience and skills of all the people that make up the organisation.

**Leader:** the person in the primary care team (PCT) who, due to his/her responsibilities directly influences decision-making concerning the activities of other professionals in the PCT. The leaders are appointed by the institution. In a typical PCT, the director is the person who represents the team and is ultimately responsible for it; however, other people in the PCT such as the assistant director and the administration management contact person form part of the management team because they also exert an influence over and are responsible for others in the team.

**Living will:** document for health professionals in which an adult or emancipated minor with sufficient legal capacity freely sets out his/her wishes in advance, which must be taken into account in situations where he/she is unable to express such wishes. The concept excludes provisions that are contrary to the legal system and good clinical practice.

**Management:** individual or individuals forming the PCT's command structure.

**Management system:** the structure, organisation, responsibilities and processes established and the resources used to manage the organisation.



**Mission:** the explicit recognition of an organisation's *raison d'être*, identifying the products or services that it provides, the market they are aimed at and how it produces or serves them. It includes recognition of the essential values that guide its action as fundamental elements of its personality as an organisation and differentiate it from others with similar products or services and markets. At the same time it determines the basic policies to be followed with respect to the main stakeholders (external customers, internal customers, payment entities, suppliers, the community, public administrations, etc.). It is clearly stated and disseminated within the organisation, seeking adhesion from the people who work in it and those related to it, and commits management to act in accordance with its contents. It is not immutable and therefore it requires periodic reviews and adaptation. It is a fundamental part of the formulation of an organisation's strategic plan.

**Organisation:** set of managed health centres, including the organisation being assessed.

**Organisational structure:** organisational architecture formed by positions with recognised organic responsibility within the organisation and represented on an organisational chart.

**Partners:** the people or groups with which the organisation has established a partnership (providers, other institutions, etc.).

**Performance appraisal:** procedure by which leaders assess – typically on an annual basis – the people who report directly to them, through a personal interview that is structured in accordance with a specific appraisal script incorporating the concepts and criteria used to appraise the person.

It is an opportunity to manifest and modulate the organisation's expectations with respect to the people who work for it and to review professional development objectives on an individual level, propose and agree improvement actions, and establish specific training objectives. In relation to criteria, performance appraisal includes aspects related to knowledge, skills and attitudes. The person is made aware of the leader's appraisal and can accept or disagree with it, providing arguments.

**Person:** individual who has acquired a commitment to the organisation.

**Procedure:** specific way of undertaking an activity or a process.

**Procedure manual:** set of structured and ordered instructions that contains the procedures and also the instructions and rules corresponding to the formulation, preparation, identification, conservation, access, review and periodic reassessment of these procedures.

**Process:** sequence of associated activities that add value to a product, for a specific customer.

**Protocol:** set of agreed uses and rules, expressed in an orderly and written manner, referring to the activity of the healthcare staff, based on scientific evidence.

**Quality plan:** the organisation's global management and planning instrument with regard to quality and the implementation of continuous improvement to achieve excellence. As one of the elements that naturally form the strategic plan of the organisation, it prioritises and sets the quality objectives to be achieved, the programmes and action plans to achieve them, the structure that supports the organisation to undertake them, the periods and the people responsible for their execution. It is also a continuous review, renewal and feedback process.

**Reference:** in health settings, the healthcare unit to which primary care refers demand that it cannot meet. The organisation acts in this case as a referrer.

**Stakeholder:** any organisation, entity, association, company or group of individuals with an interest in the organisation. They may be public administration bodies (on all levels), providers, service buyers, financial institutions, residents' associations, customer or consumer associations, teaching entities, trade unions, etc. They have certain expectations with respect to the organisation, from which they expect specific behaviours. Even though the organisation cannot meet all these expectations, it should be familiar with them, interact with the representatives of the stakeholders and define the degree of coverage of their needs and expectations. Although an organisation's staff is traditionally also a stakeholder, they are excluded from this definition because they are discussed more extensively in criterion 3.

**Strategic plan:** the organisation's global management and planning instrument for the short, mid and long term that allows it to establish the priorities of its action. It incorporates the definition of the mission, the vision, the values and the policies of the organisation, the determination of the strategic objectives to be achieved, the strategies that develop them and the tactical and operational objectives and the action plans for their implementation. Accordingly, it identifies opportunities and threats in the environment and the market, in addition to the organisation's strengths and weaknesses.

It determines execution periods and the people responsible, and is based on the allocation of the resources necessary to achieve the objectives.

It must be a continuous evolution instrument that periodically reviews its effectiveness and prioritises new action lines to provide it with feedback. Its essential content must be known and recognised by the organisation, which identifies its specific actions as elements to help the plan, reinforcing the adhesion of the professionals that make up the organisation.

**Support process:** process that supports the generation and distribution of the services and products that form the organisation's activity. It is any process that facilitates key processes, provides products and services without which a key process could not operate or would be deficient. Its contribution to the creation of value for customers is indirect, but its importance in the compliance with and achievement of the objectives of the organisation is similar to that of the key processes.

**Validation:** confirmation through objective evidence that requirements are met for a specific use or application.

**Values:** the philosophical principles that establish a particular method of action and that differentiate the organisation from others, forming the culture of the organisation. All organisations have them even if they are only implicit. As they form part of the organisational strategy, they are understood to be recognised and explicit and when communicated they entail a commitment to coherently and consistently act in a given manner.

**Verification:** confirmation through the contribution of objective evidence that something has been completed in accordance with specific requirements.

**Waiting list:** number of citizens waiting to receive healthcare and the time it takes to schedule examinations, for example.

**Vision:** representation of the ideal situation that an organisation aspires to reach in the future and which is used as a strategic planning instrument.

**Waiting time:** difference between the scheduled time and the actual attention time.

**Waste:** substance or object that the generator or owner has discarded or intends or is obliged to discard. In the case of healthcare centres, in addition to waste that is strictly healthcare, the following must also be taken into account: oils (industrial and cooking); dead animals used in experimentation; cloths, paper and cardboard; glass; batteries; mattresses, instruments, devices, furniture, etc. and laboratory chemical products and others (e.g. thermometer mercury), and X-ray plates.

**Waste recovery:** set of operations with the aim of partially or fully reusing waste. It basically covers recycling or reuse.