

The web-based IT-system TAK - replaces paper in the quality work

TAK is developed as a practical tool in relation to the Danish Healthcare Quality Programme, DDKM and is an abbreviation for the Danish Iværgående Akkreditering og Kvalitetsudvikling.

It is used in all parts of the implementation process - right from the division of accreditation standards and indicators for the institutions to completion of the accreditation report.

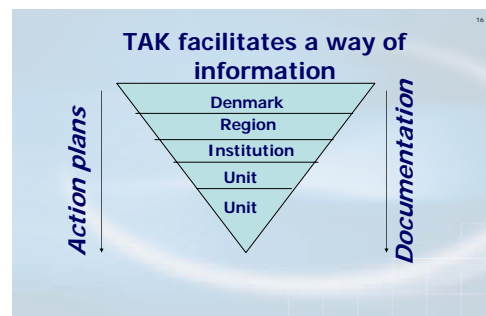
TAK comprises all the accreditation standards and makes it possible to divide the standards between those who are going to work with compliance of standards. Furthermore, TAK provides possibilities to follow the process of compliance of standards. – and guidelines and action plans can be attached to TAK in both a central and decentralised way.

Thereby, TAK provides an overview of the division of labour in connection with the work with the DDKM and with the results – likewise the system eases the collection of relevant data.

TAK is developed by IKAS in collaboration with the regions and users from municipalities and community pharmacies.

Facilitation of ways of information

TAK is a national system making it possible for the different organisational levels to collaborate on quality development in one system: At national level, guidelines can be attached to a standard. At regional level, action plans can be added for a number of standards – and at the individual units the quality coordinator can use the documents. Data are shared in stead of being passes round and filed in a lot of different places.

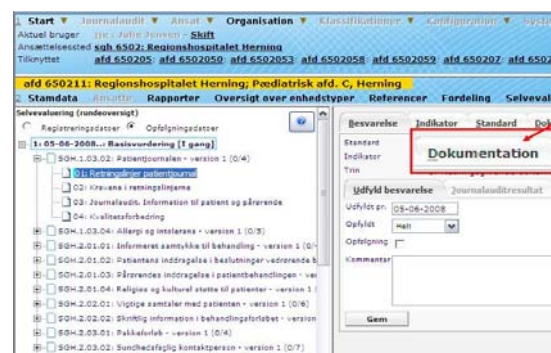


TAK and local systems

Standards and indicators in DDKM are delivered in the TAK. Via links the standards are available in local electronic document management systems and thereby data are shared and not passed or moved round.

Self-assessment

In TAK, the institutions are able to divide accreditation standards and work tasks between the individual units without use of spreadsheet or e-mail. Immediately thereafter, the unit has an overview of the standards which it is going to meet and may start planning according to instructions outlined in TAK by the institution's management.



The units are able to register the degree of achievement, add comments, action plans and follow-up dates in TAK. Thus, the management gets an overview and prioritises the focus areas either at the individual units or in the entire institution.

Guidelines – overview across the institution

TAK provides an overview of the guidelines already existing in the institution for the same indicator (or criteria). The institution can ask the units to attach the guideline which is connected to a given standard. The institution or entire region thereby easily gets an overview of the different documents which exist in the organisation in relation to a single indicator. This forms a good basis when deciding the presentation of the action plan.

Record audit

TAK comprises different questionnaires which can be used in different types of units when completing the record audit:

50209_013 Øjenklinik, Herning Journalauditnr. 13 : Indtæring Rapportering Søg

Opret Anden somatisk

Journalaudit: afd_650209_013 Øjenklinik, Herning Journalauditnr. 13

Aktuel organisatorisk enhed: afd_650209: Regionshospitalet Herning: Øjenklinik, Herning

Journalid: 1

Registreringsdato: 16-06-2008 09:32

2.4.1(3) Henvi sning

Er henvisningen i overensstemmelse med retningslinjerne i indikator 1?

Afgrænsning: Behandling omfatter udredning, behandling og pleje

Ja

Nej

Ikke relevant

Bemærkning

Henvi sningen indeholder oplysninger om:

Markér hv

Patientens standard og eventuelt pårørende/værge

Henvi sningsdiagnose og relevante bidragener

The answers to the individual questions are automatically gathered in the self-assessment module in relation to relevant indicators. They can be used as the basis for rating achievement of the indicators. At the same time an overview of the quality development of the individual indicators across the records appears.

Besvarelse Indikator Standard Doku

Standard SGH.1.03.02: Patientjournal

Indikator 03: Journalaudit. Informati

Trin 3: Kvalitetsovervågning

Udfyld besvarelse Journalauditresultat

Senest udførte journalaudit:

Journalauditnr. 02April08

Auditdato 29-03-2008 10:44

Indikator spørgsmåle:

Er der dokumentation for, hvilken informati

Besvarelserne fordeler sig på følgende antal journaler

Ja	3
Nej	2
Ikke relevant	0
Ikke besvaret	0

Gem

TAK makes it possible to follow the development:

afd 9001023: Nuuk Sgh. (Dr.Ingrids Hosp.); Ortopæd kirurgisk afdeling

Stamdata Ansatte Oversigt over enhedstyper Referencer Fordeling Selve

Selvevaluering (rundeoversigt)

Registreringsdatoer Opfølgningsdatoer

1: 29-03-2008.: Basisvurdering [1 gang]

- SGH.1.03.02: Patientjournalen - version 1 (3/4)
 - 01: Retningslinjer patientjournal
 - 02: Kravene i retningslinjerne
 - 03: Journalaudit. Information til patient og pårørende
 - 04: Kvalitetsforbedring
- SGH.1.03.04: Allergi og intolerans - version 1 (4/5)

Besvarelse Indikator

Standard SGH.1.03.0

Indikator 03: Journal

Trin 3: Kvalitetsc

Udfyld besvarelse Jour

Udfyldt pr. 30-03-2008

Opfyldt

Opfølgning

Adjustment of organisation

It is both possible to read in an organisation structure automatically and to either establish or adjust the organisation manually. TAK thereby provides an exact picture of the organisation which the accreditation standards and indicators are divided between.

User registration

User access is secured by a password. User registration is made in accordance with the procedure of other user registrations in the organisation. The management thereby chooses whether the user registration is a decentralised or central registration.

Survey

During the spring of 2009 TAK is going to be developed so the system supports the surveyors in their jobs of assessing the institutions' compliance of the Danish Healthcare Quality Programme. In addition, the system is going to support the preparation of report and publication at IKAS.

For further information

TAK is introduced as e-learning at www.ikas.dk/TAK-systemet

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