

ENSH-Global Standards review

Why & How?

Task Force:

Miriam Gunning Ireland (Lead)

Christa Rustler, Germany

Rudi Gasser, Australia

Laura Anton, Catalonia

www.ensh.org

Regional/National Networks



ENSH Tools

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- Developed in 2001 and updated in 2007 on European Level
- Proved to support implementation globally at ENSH Gold Level

ENSH-Global STANDARDS & Self Audit



ENSH-Global STANDARDS	ENSH-Global AUDIT QUESTIONNAIRE
Standard 1 Commitment : The healthcare organisation engages decision-makers, appoints a tobacco free policy working group and is committed to rejecting all tobacco industry sponsorship and designates	Commitment ENSH Self Audit Questions
1.1 The health care organisation publicly adopts and demonstrates commitment to a policy towards the implementation of the ENSH Standards.	1.1 The healthcare organisation documents specify commitment to a policy towards the implementation of the ENSH Standards
1.2 The health care organisation's tobacco- free policy prohibits the acceptance of any sponsorship or funding from the tobacco industry.	1.2 The healthcare organisation does not accept any sponsorship from the tobacco industry.
1.3 The health care organisation establishes a working group or committee to develop and support the implementation and monitoring of the tobacco free policy.	1.3 A policy working group or committee is designated to coordinate the development, implementation and monitoring of the tobacco free policy.
1.4 A senior manager is appointed to oversee and take responsibility for the tobacco free policy and lead the working group/ committee.	1.4 A senior manager has responsibility for the actions of the policy working group or committee.
1.5 The healthcare organization's operational plan or contract identifies actions and allocates financial and human resources for the communication, implementation and monitoring of the policy.	1.5 Financial and human resources are allocated in the healthcare organisation's operational plan and/or contract to implement and monitor the tobacco-free policy



Leads to

- identifying strengths and areas for improvement
- systematic implementation instead of single action
- internal controlling instrument

ENSH-Global Self-audit Questionnaire **Performance evaluation towards a tobacco-free Organisation**

Standard 1: Commitment	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
1.1 The healthcare organisation documents specify commitment to a policy towards the implementation of the ENSH Standards.				
1.2 The healthcare organisation does not accept any sponsorship from the tobacco industry.				
1.3 A policy working group or committee is designated to coordinate the development, implementation and monitoring of the smoke-free policy.				
1.4 A senior manager has responsibility for the actions of the policy working group or committee.				
1.5 Financial and human resources are allocated in the healthcare organisation's operational plan and/or contract to implement and monitor the smoke-free policy.				
1.6 All staff <u>understand</u> their responsibility to take action in the implementation and management of the smoke-free policy.				
Standard 2: Communication	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
2.1 All healthcare staff (including teachers, students and transient staff) <u>are</u> informed of the organisations smoke-free policy.				
2.2 All contract and outsourced employees working within or in direct contact with the healthcare organisation are informed of the smoke-free policy.				
2.1 All patients/residents (in and out-patients) are informed of the healthcare organisation's				

- The audit tool was completed by **1173 hospitals / clinics / nursing homes in 9 European Countries across 10 networks.**
 - **All organisations who performed above the European median, were members of the ENSH.**
 - Comparison of audit questionnaire data from 2004 and 2005 for 284 hospitals showed an increase in mean percentage scores for all sections
 - Substantial improvement was demonstrated in the areas of Commitment, Communication, Healthy Workplace and Monitoring.
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From ENSH to ENSH-Global

- Need to ensure the ENSH-Global Standards continue to meet the demands of the changing world of tobacco and global health service reform

Concerns

- Would the update lose the detail that has been deemed invaluable to new members?
 - Is A review would address the repetition but maintain the detail to support new members
 - Amendments should still provide comparable data or information
 - Previously collected data used for comparison purposes: Country to country, health service to health service and year to year basis.
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- Engage as many national & regional networks as possible at the earliest possible stage
- Develop an action plan with timeframe incorporating two levels
 - National (Commitment, participation & consensus)
 - Global
- Use every available media to ensure optimum communication
- Maximise opportunity to engage key national specialists in tobacco, quality & public health
- Develop an easy to use feedback form
- Review, manage & discuss ALL feedback until consensus was reached
- Prepare final draft for translation
- Recruit small competent group to manage any translation/comprehension issues & get final sign-off

Participating National/regional networks

- Australia
 - Austria
 - Catalonia
 - Estonia
 - Finland
 - Germany
 - Ireland
 - Norway
 - Sweden
 - Switzerland
 - Taiwan
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- Governance & Commitment
 - Communication
 - Education and Training
 - Identification, Diagnosis and Tobacco Cessation Support
 - Tobacco-free environment
 - Healthy workplace
 - Community Engagement
 - Monitoring and Evaluation
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Participation and quality

- Great opportunity to engage key experts working on tobacco or quality healthcare in their country
 - Discuss and spread the ENSH-Global concept
 - National feedback to include diversity of health services globally
 - Identify interrelations with national accreditation standards to create synergy for implementation at national level
 - Improve wording and include new aspects
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Thank you

For more detail
contact - enshglobal@gmail.com

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