Site Visit One Briefing

Questions:

|  |  |  |  |
| --- | --- | --- | --- |
| Hospital | Provider | Administration | Patients |
| HPH | * There training/understanding school and hours
* Brain drain
* Problems most frequently seen
* How many referrals do they give
* Referral rates as a result of high preventative care
* Division or labor (nurse v doctor in providing care)
* Thoughts on UCS
* Patients plan influences recommendations
* How religious views affect end of life care options
* Role of politics/protests
* Quality access cost
* Ask about masks
* Cultural barriers
* Status of volunteers
* Motivation of voluteers
 | * How many patients seen
* Improvements in disease rate (honesty)
* What types of services offered
* What services used
* Record keeping paper/electronic
* Demographics
* Thoughts on UCS
* Difficulty in obtaining providers and RETAINING
* Roles of politics/protests
* Quality access cost
* Impact of volunteers
* Future plans growth improvements
 | * How much attention getting
* Wait times
* View of doctors status
* Perceived quality of care
* What services used/ why
* Privacy
* How often visit hospital
* Thoughts on UCS
* How choose end of life care tailored to religion
* Roles of poliics/protest
* Disparities in ethnicity care
 |
| District | * Training
* Hours working and patient load
* How many referrals do they give
* Increase or decrease of referrals
* Decision to enter field
* Division of labor (nurse v. doctor)
* Thoughts on UCS
* Patients plan influences recommendations
* How religious views affect end of life care options
* Roles of politics/protests
* Quality access cost
 | * Interact with gov officials
* What services provided and what used
* Record keeping paper/electronic
* Demographics of patients
* Issue of infection control/enforce hand washing
* Thoughts on UCS
* Pharmaceuticals role
* Social hierarchy affects triage
* Resource allocation
* Roles of politics/protests
* Readmittance rates and patient adherence
* Public health campaigns have they been promoting and how its helped
* Quality access cost
 | * Wait time
* Preference for traditional medicine
* Perceived quality of care
* Privacy
* How often visit hospital
* What has changed from them since UCS
* How choose end of life care tailored to religion
* Patient adherence
* Roles of politics/protests
* Disparities in ethnicities care
 |

Goals:

* A realistic understanding of care and services offered by each hospital.
* Comparing access etc. to US system
* Understanding of community services (how different communities are affected).
* Dig for information into what isn’t going well. Acquire a more honest review.
* Be polite guests and adhere to cultural norms.
* Disparities between communities
* Stay on track
* Follow Thai customs and represent Americans and ciee well
* Show respect not too loud