



Centrum
Monitorowania
Jakości w Ochronie Zdrowia



WHO Collaborating Centre for Development
of Quality and Safety in Health Systems

Hospital accreditation in Poland

INTERNATIONAL
CONFERENCE & WORKSHOPS

Building a Quality and Patient Safety Culture in Health
Services: Experience and Prospects

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National Center for Quality Assessment in Healthcare (NCQA), WHO CC

- First quality center in Central-Eastern Europe
- National Agency of the Ministry of Health
- Established by the Minister's decree in 1994, based in Krakow;
- The only agency dealing with healthcare quality
- Since 2006 NCQA is also WHO Collaborating Center for Development of Quality and Safety in Health Systems



WHAT WE DO

■ Accreditation

- Patient safety programs: Surgical checklist; Clean Care is Safer Care
- Quality indicators (PATH system, OECD HCQI)
- Patient opinion surveys (PASAT)
- Staff surveys (SAPER)
- Decubitus register
- Emergency Departments' assessment
- Evaluation of high specialty procedures
- National ranking of hospitals „Safe Hospital”
- Partnership in EU projects (Marquis, Handover, Joint Action on Patient Safety and Quality of Care)

- Annual conference „Quality in Healthcare” since 1995
- Education and training in quality for healthcare professionals, managers and teams



ACCREDITATION IN POLAND

- Started **in 1998**
- Developed by **the Accreditation Center** at NCQA with the support of USAID and based upon the JCAHO and Canadian models and on the healthcare professionals agreement.
- **Hospital Accreditation Program – 1998**
- **Primary Care Accreditation Program - 2004**
- **Addiction Centers Accreditation Program – 07.2013**



ACCREDITATION IN POLAND

legal setting

- A Law of 6 November, 2008 on accreditation in healthcare (Dz.U. z 2009 r. Nr 52, poz. 418 i Nr 76, poz. 641)
- Decree of the Minister of Health of August 6, 2009 regarding the Accreditation Council (Dz.U. z 2009 r., Nr 130, Poz.1074)
- Decree of the Minister of Health of August 31, 2009 regarding the assessment procedure of complying to accreditation standards and the scheme of payment for conducting accreditation survey (Dz.U. z 2009 r., Nr 150, Poz.1216)



PRINCIPLES OF ACCREDITATION SYSTEM

- Voluntary
- Standards' based assessment
- A peer review
- Focused on education and exchange of experience in improvement
- Autonomous
- Based on cyclic accreditation assessments
- Recently includes self-assessment



ACCREDITATION COUNCIL

12 members appointed by the Minister of Health,
including:

- 8 representatives of healthcare professional bodies and NGOs (doctors; nurses and midwives; pharmacists; medical labs, Polish Society for Quality Promotion, College of Family Physicians, Association of Healthcare Managers)
- 2 representatives of the Ministry of Health
- 1 representative of the Ministry of Defense
- 1 representative of the Ministry of Internal Affairs and Administration



ACCREDITATION STANDARDS

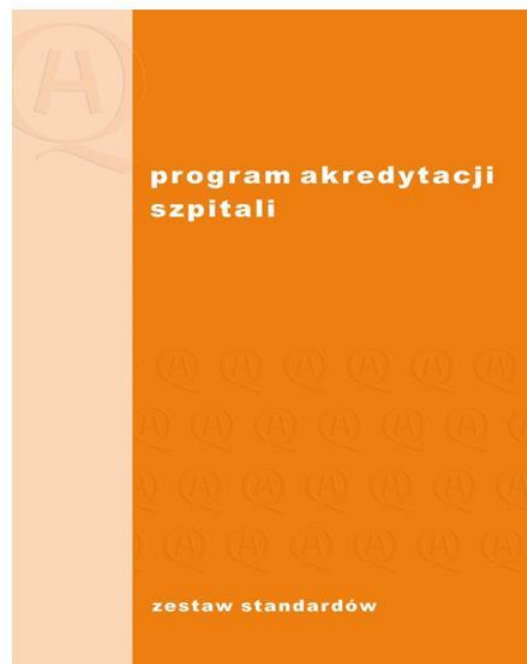
- **Have the legal status:** are approved by the Minister of Health
- **Simple and clear**
- **Useful tool** for management and professionals for creating a different hospital culture.



Hospital Accreditation Program

1998 (15 chapters, 210 standards)

2009 (15 chapters, 221 standards)



Acronim	Chapter
CC	Continuity of Care
PR	Patient Rights
AP	Assessment of Patients
CP	Care of Patients
IC	Infection Control
SA	Surgery and Anesthesia
PH	Pharmacotherapy
LA	Laboratory
IM	Imaging
N	Nutrition
QPS	Quality Improvement and Patient Safety
GM	General Management
HR	Human Resources
MOI	Management of Information
MOE	Management of the Environment of Care



WHAT'S IN A SURVEY

- Meeting with Hospital Board, Management and Teams
- Survey of hospital departments.
interviews with leaders; professionals, patients and families, direct observation
- Review of hospital records and docs.
patient and medical records/procedures/programes/instructions/good practicers and their evaluation/ implementation procedures, analyses and reports.



MEDICAL RECORDS REVIEW

- Review based on closed patient records including the fatalities
- First survey: medical records within the 6 months prior to accreditation survey.
- 34 standards (15% of all standards assessed)
- Quite difficult compliance!!!
- Accreditation includes management of documenting good patient care!!!



ACCREDITATION REWARD

- Guided by the recommendation of Accreditation Council, based upon the documents provided by the NCQA Accreditation Center, the **Minister of Health may:**
 - **grant accreditation for 3 years (compliance 75% or above)**
 - **deny accreditation (compliance below 75%)**

- Recognition on NCQA website – only the accredited hospitals; survey reports not yet in public domain.



WHAT DOES ACCREDITATION DO TO A HOSPITAL?

**Beaurocratic, useless
burden if the only
goal is to receive a
certificate.**



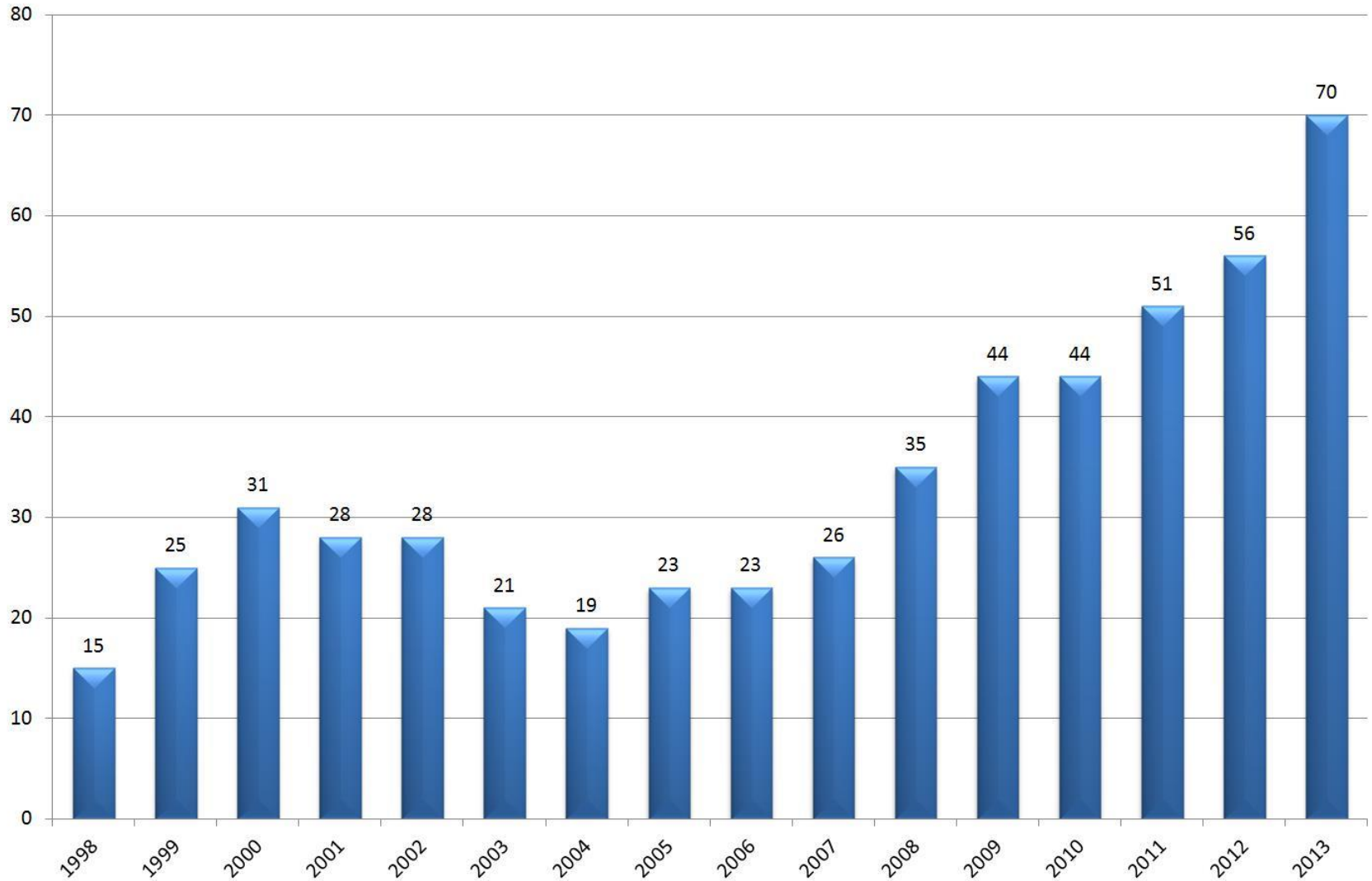
WHAT CONTRIBUTES TO BEING ACCREDITED

■ Leadership

- Clinical leaders involvement
- Staff & teams effort

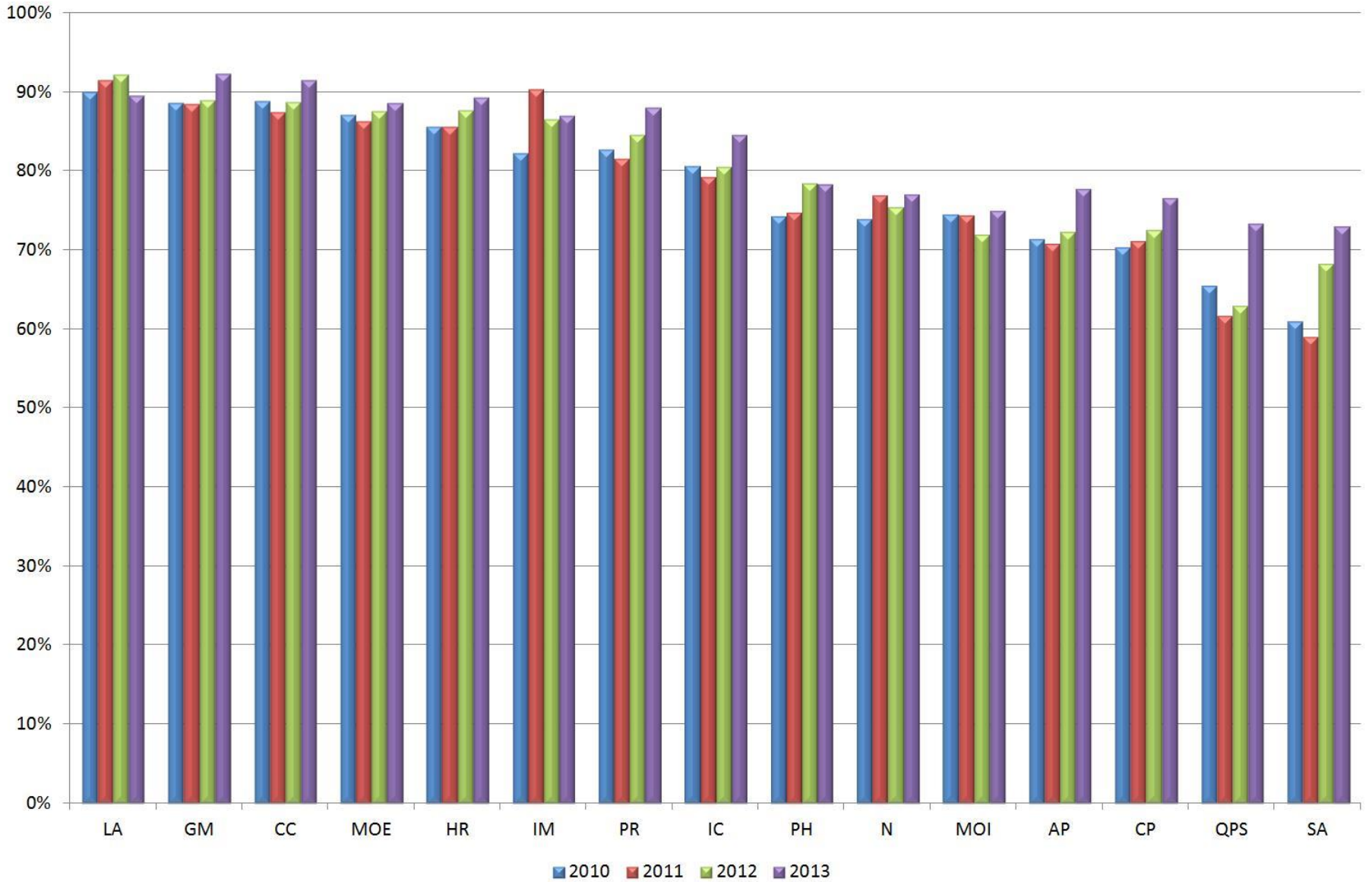
Source: Report „Process of hospital accreditation – hospital management survey”, NCQA, Kraków 2008

Number of accreditation surveys 1998 - 2013



539 surveys: 427 accreditation decisions; 45 conditional accreditations (in force till 2009); 67 denials.

Average compliance of accreditations standards





WORST COMPLIANCE

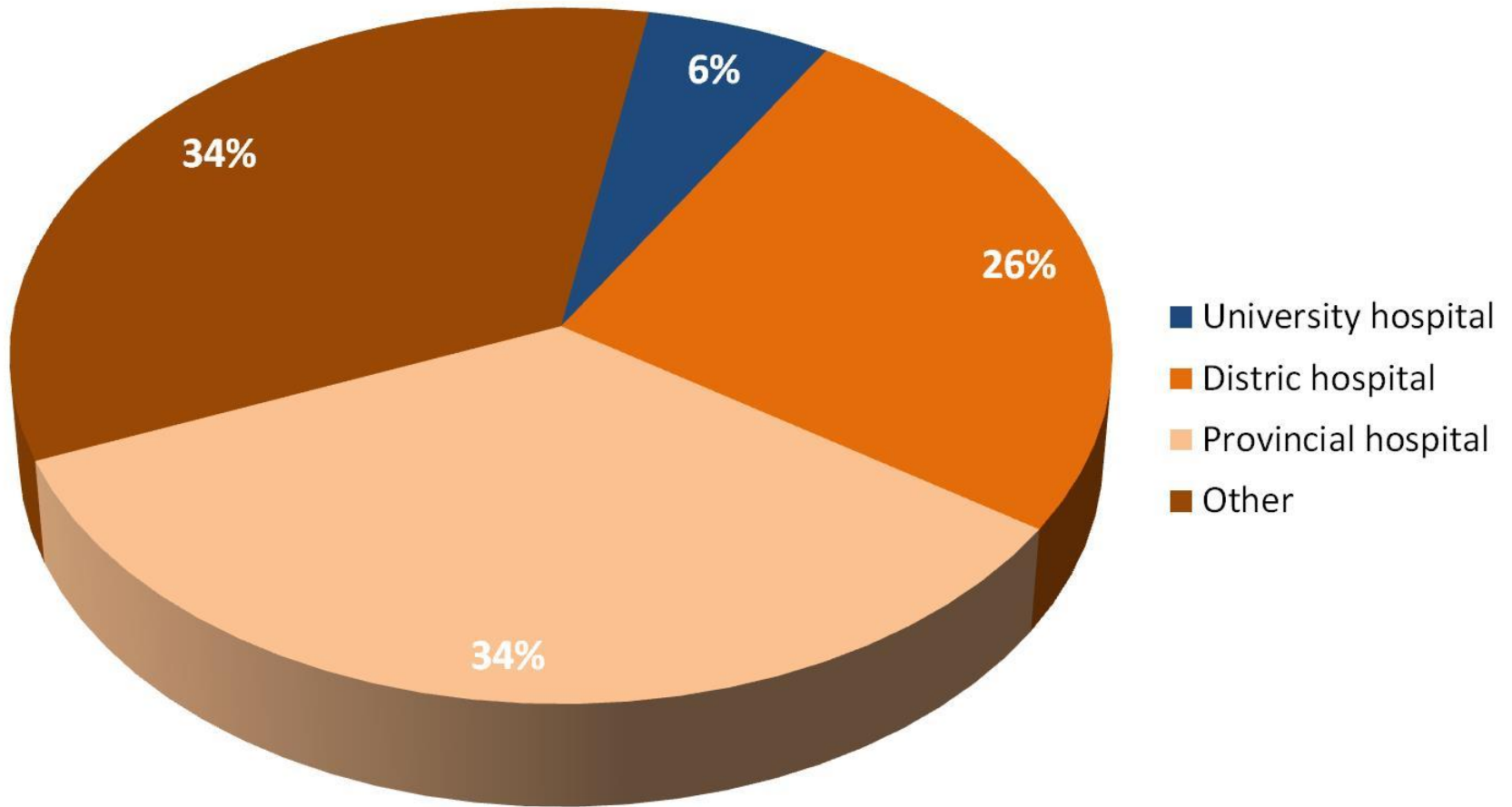
- N5 – „Patients receive dietary guidance upon discharge” (noncompliance in 96% of surveys)
- AP5.7 – „Patient records include the assessment of nutrition and dietary needs” (noncompliance in 96% of surveys)
- MOI4 – „Patient records are legible, complete and authorised” (noncompliance in 96% of surveys)
- CP1.1 – „Plan of care is modified as needed” (noncompliance in 84% of surveys)
- SA12.3 – „Long term outcomes of medical procedures are analyzed” (noncompliance in 84% of surveys)



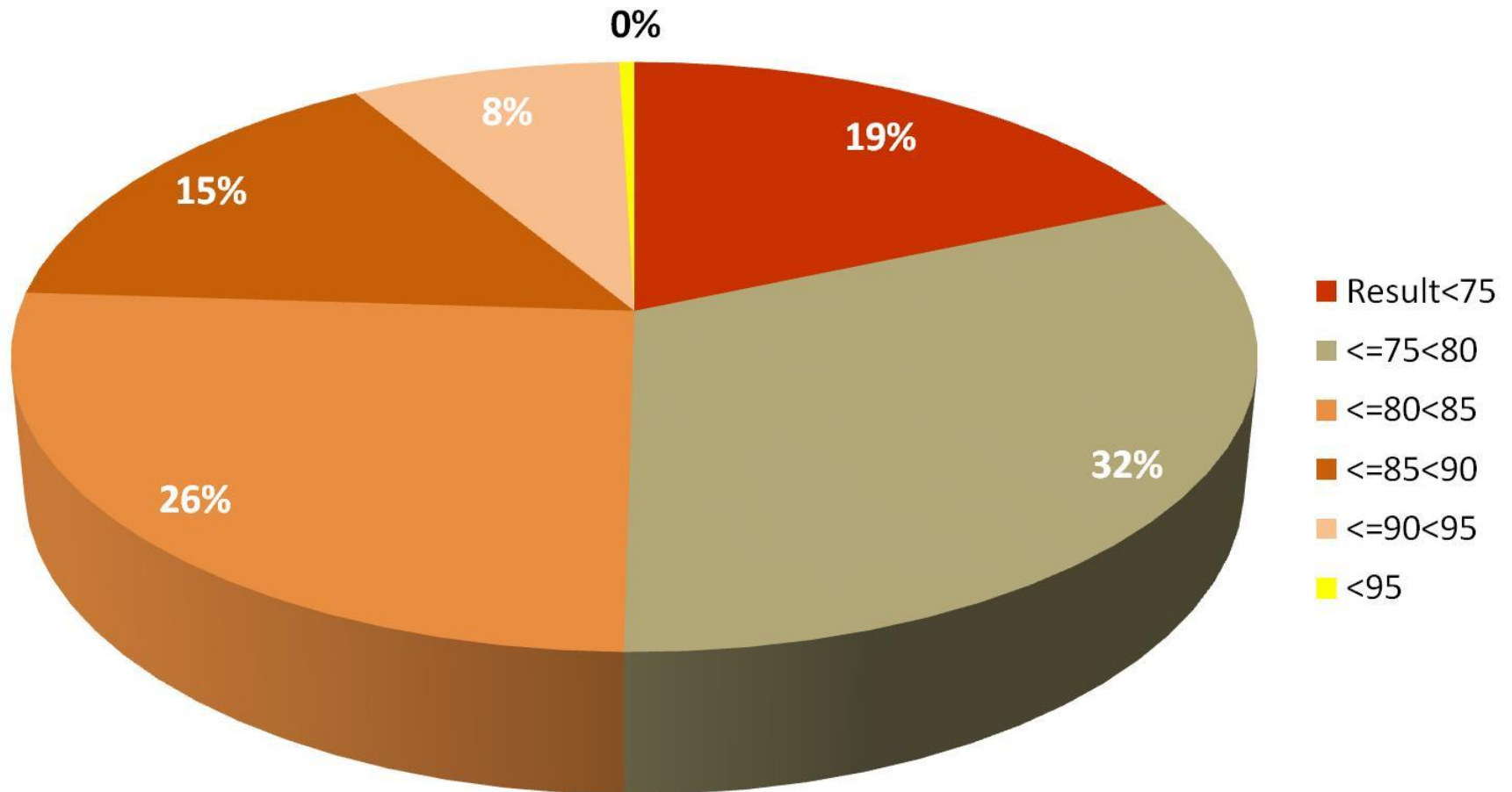
MAJOR AREAS OF CHANGE IN THE ACCREDITED HOSPITAL

- **Teamwork**
- **Improved information flow among the professionals' groups**
- **Improved communication with patients**
- **Patient treatment based on clinical guidelines**
- **Risk reduction**

Hospital type 2010 - 2013



Level of compliance 2010 - 2013



81% of hospitals that applied were accredited; 8% of hospitals got above 90% of compliance.



THANK YOU FOR LISTENING

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