



**Document 10-046 AEMH Statement on Accreditation of Hospitals in Europa
adopted at the 63rd AEMH Plenary Meeting in Lisbon 8 May 2010**

AEMH- Statement on Accreditation of Hospitals in Europe

Patient safety and treatment qualities are major issues in Europe as in the rest of the World. Migration of patients as well as doctors has increased over the last decade, and is expected to increase further in the future. As a result of this increased migration there is a need to focus on the quality of diagnostic procedures and treatment in a cross border perspective. There is a need for general European recommendations concerning documentation of quality and patient safety.

Accreditation is one of the tools that can be used but in a standardised form all over Europe in order to guarantee quality of treatment and ensure patient safety.

The process should include:

- 1- Hospital management based on quality and safety**
- 2- Hospital development and centres of excellence**
- 3- Hospital organizational standards**

1- Hospital management based on quality and safety must consider:

- Risk management
- Involvement of doctors in Hospital management
- Working conditions of Hospital doctors
- Evaluation of pre-and post graduate education.

2- Hospital development and centres of excellence:

In a world where diagnostic and treatment procedures are under continuous development there is a need for a development policy for hospitals and for individual doctors. There is a constant imperative to incorporate new treatment modalities in hospitals across European countries. This leads to a need for hospitals as well as for individual doctors to document competencies in new treatment modalities to ensure optimal treatment and safety of the procedures used.

3- Hospital organizational standards:

Working processes in the hospitals must be documented. This includes documentation of essential procedures used in diagnostic and treatment modalities as well as the information given to patients. In most accreditation models already put to use, these elements have been incorporated.

Every hospital must be able to document the effect of treatment as well as the safety of procedures used. There is a need to develop generally accepted markers for this, markers that can be used all over Europe by any hospital.

Hospital Management Based on Quality and Safety

- **Changes in multiple organizational components.**
Risk management has to be a primary focus in hospital care. In order to reduce high-hazard risks, hospitals should create a reporting system, notifying: adverse events, no harm incidents, near misses; open to all levels of assistance; typically non-punitive, confidential and anonymous.
- **Larger involvement of doctors in hospital management.**
Physicians' involvement in management and in strategic decisions positively affects hospital performance and quality of care. Support doctors' involvement in hospital management and implement doctors' post-graduate education in management of health care units are aims that all Medical organizations should prosecute.
- **Improvement of working conditions of hospital doctors.**
Labour conditions of hospital doctors play a crucial role in patients' safety. Excessive working time, poor or no rest after a long period of work, understaffing teams, overload work, inadequate or outdated equipment, lack of collaboration and communication among clinical staff, creates an accident opportunity. Hospital doctors should claim for optimized working conditions, limited working hours with obligatory rest time period and team work training throughout lifelong.
- **Health professionals education and training**
Exquisite qualification programmes for junior doctors and Continuing Professional Development will bring less risk in hospital performances. Training of hospital staff should be a priority in quality management, so improving quality of training and working conditions of junior doctors, encouraging European hospital doctors to plan for CPD actions implemented in the framework of the organization and claim for medical careers with a peer evaluation based on technical performances and Continuous Professional Development should be a priority.

Hospitals Evolving Into Centers of Excellence and Reference

Background

How can we define European centers of excellence and reference? By high number of cases? Small complication rate? No waiting times? High productivity? Short admission time? High profit? Despite (the) high pressures of cost – and performance – European hospitals should never turn into health factories. Economical goals are important but only to create the framework for rendering the best service to people. Hospitals are not about industrial services – they are about life. Our respect towards life is being manifested in the devoted care we offer. Hospitals do not have customers – they treat patients, sick people. In dealing with their fears and talking about their anxieties people will maintain their dignity. Staff who is daily confronted with sickness and death will need a different quality in leadership.

Centers of Excellence and Reference

Hospitals will distinguish themselves by their quality and the care-standard they offer, institutions that specialize in treating particular illness or performing particular treatments. The primary challenge lies in achieving the right results.

Centers of Excellence and Reference are institutions which have demonstrated the highest degree or level of standards along the areas of health care, research, education and training. They provide institutional leadership in all aspects of development in specific disciplines to ensure the development in their respective service areas.

To achieve this purpose it's crucial for hospitals to accomplish some criteria in order to reach those goals:

- **The citizen on the health system** – centers of excellence and reference must be a service to the community. The relation patient
 - 1- Satisfaction, participation and rights
 - 2- Accessibility and continuity of care
 - 3- Clinical documentation, improvement of doctor-patient relationship on a trusty basis
- **Organization of the activity** – to promote, plan and co-operate with other Centers of Excellence/ Reference and other institutions.
 - 1- Promotional activities and health programs
 - 2- Management and strategic planning
 - 3- National and international partnerships
- **Professionals** - effective, sustained, high quality professional development.
 - 1- Training, consulting and research
 - 2- Multidisciplinary collaboration
 - 3- Continuous professional development based on peer review
- **Structure** - to serve as "state-of-the-art" centers in a specific area related to the improvement of health care.
 - 1- Structure and equipment supplies
 - 2- Systems and information technology
 - 3- Systems of quality and safety
- **Results** - The process by which it is noted and recognized that the way we pay attention to citizens in health, responds to a model of quality, always with the aim to promote and encourage the continued improvement of our institutions.
 - 1- Key results
 - 2- Accreditation
 - 3- Self-assessment
 - 4- Quality assessment

AEMH states that in future, accreditation and re-accreditation processes (internal and external), promotion of continuous quality improvement, high qualified staff and international partnerships should create a Centers of Excellence network within the European health structure with integrated care.

Organizational Standards

Personalized, sensitive, effective and quality health care rely not only on health technologies, good facilities, well designed health programs and adequate resources. Quality in health care is based on solid doctor-patient relationship. The human element of confidence and trust in the relationship between patient and doctor is necessary to improve health gains and medical outcome.

This specific reality needs to be taken into account when designing quality programmes. Hospital accreditation is a on-going activity to improve quality by an external and independent evaluation, assessing it's capacity and degree of complying with international organizational standards. It sets analysis about staff and equipment (structure), work standards (processes) and some outcomes (results).

There are specific needs to take into consideration in order that accreditation will promote quality improvement:

- Focus on patients' rights
- Measure patients' satisfaction
- Provide clinical and non-clinical comprehensive information to patients

- Raising professionals satisfaction
- Reinforce the health professionals roles
- Enhance performance evaluation

- Clinical and non-clinical risk management
 - Development of a "quality culture" inside hospitals;
 - Clear policies on clinical and non clinical matters

Involvement of hospitals in quality improvements needs permanent scrutiny and dynamic adjustments in order to promote patient satisfaction, professional commitments and health gains. Hospital doctor's guidance needs to be reinforced in all quality policies - development, designing, implementation and evaluation.

- AEMH advocates doctors' involvement and leadership in quality-related activities
- AEMH stresses out that accreditation activities should be focused on solid doctor-patient relationship for greater quality achievements.

The AEMH is a professional association of and for European hospital physicians, who have final responsibility for the patients, with the primary goal to improve all aspects of hospital life in Europe.