



Assess and promote the development of accreditation in Italy and its association with hospital performance

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DESCRIPTION

In the Italian decentralized healthcare system a National Program for the accreditation of healthcare organizations has been launched in 2012. A Working Group has developed national standards and a Program for assessing the Regional Accrediting Bodies. Within this framework the National Agency for Regional Healthcare Services (Agenas) is carrying out, for the first time in Italy, a research project financed by the Ministry of Health aimed at promoting the implementation of national standards, designing a monitoring system of regional accreditation programs and evaluating the impact of accreditation on hospital performance.



AIM

Foster quality, safety and patient centeredness in Italian healthcare organizations through action and research .

8 Standards	
1 Management system implementation for healthcare organizations 6 criteria 25 evidence	Management of a healthcare organization that governs the dimensions most strongly connected to the specific activities of care and assistance – in the pursuance of continuous improvement – is a guarantee of good quality of social and health care.
2 Services 5 criteria 27 evidence	It is good practice for the organization to describe the type and characteristics of services delivered and to identify the working methods to be adopted, as routine parts of clinical governance on which to base performance evaluations and communications with patients and citizens.
3 Structural aspects 2 criteria 10 evidence	The organization assures the suitability of health care facilities and the punctual application of rules concerning their maintenance; it is good practice to highlight staff contributions to the management of these structures.
4 Staff skills 2 criteria 10 evidence	The organization should assure that the staff has/will acquire and will maintain the necessary knowledge and skills to achieve certain levels of quality and safety of specific activities they carry out.
5 Communication 5 criteria 23 evidence	Good communication and relationships between professionals and with patients ensure that expectations of professional behaviour will be met and that safety in the delivery of care and patient involvement in treatment choice will increase.
6 Clinical appropriateness and safety 4 criteria 18 evidence	Effectiveness, appropriateness and safety are essential elements of the quality of care and must be monitored.
7 Improvement processes and innovation 3 criteria 6 evidence	The governance of continuous improvement, adoption of technological and organizational innovations, together with facilitation of clinical research, demonstrate the organization's ability to adapt to new contexts by assuming ethically-based, professionally adequate, socially acceptable and sustainable behaviours.
8 Patient Centeredness 1 criteria 4 evidence	"Making treatment centers and diagnostic and therapeutic pathways oriented as much as possible to the entire person – including physical, social and psychological aspects – should be a commitment common to all facilities.

ACTION TAKEN

Three hospital standard setting experts groups have been established, to analyzed international and national accreditation regulations on safety and patient centeredness, to design a system for monitoring the uptake of national standards at local level and to carry out a study to evaluate the association between accreditation and hospitals performance.

SUMMARY OF RESULTS

Procedures and tools for implementation of monitoring system of regional accreditation programs have been set up. Guidelines for hospital managers and professionals to implement national safety and patient centeredness standards have been developed. A pilot study to evaluate the association between accreditation and hospital clinical and organizational performance is underway.

