

INTRODUCTION OF SAFETY AND QUALITY STANDARDS AMONG PRIVATE HEALTHCARE PROVIDERS IN THE REPUBLIC OF SRPSKA (BOSNIA AND HERZEGOVINA)

RESULTS AND RECOMMENDATIONS OF THE SECOND PHASE OF THE RESEARCH (NOVEMBER 2016)

RATIONALE FOR THE RESEARCH: The intervention studied under the research is the implementation of regulation (mandatory safety and quality standards) for private healthcare providers in the Republic of Srpska. The regulation has been in place since 2012, but not all private healthcare providers have adopted it yet. Adoption rates have differed among three different types of private healthcare providers (pharmacies, specialist practices and dental practices). All pharmacies and majority of specialist practices are contracted by the Health Insurance Fund of the Republic of Srpska, while private dental practices do not have contracts with the Fund for provision of dental services.

RESEARCH QUESTION: Why does the rate of adoption of mandatory safety and quality standards vary among private pharmacies, dental practices and specialist practices in the Republic of Srpska?

METHODOLOGY: The research began with in-depth interviews with the private healthcare provider (completed during the period November–December 2015), which provided insight into the perspectives of both adopters and non-adopters. In the second phase of the research, data was collected through a self-administered anonymous postal survey of the providers. The main purpose of this was to gather quantitative data on the experiences and attitudes of the providers, in order to allow for the assessment of the relative importance of different factors for the providers' adoption of standards.

Table 1: Response rates and structure of the sample

Type of provider	Providers in the sample (n)	Response rate (%)	Certification status of respondents (%)		
			Certified	Certification ongoing	Non-certified
Pharmacies	382	27,1	42,7	30,1	27,2
Specialist practices	83	53,0	27,9	37,2	34,9
Dental practices	188	40,9	0	22,1	77,9



KEY FINDINGS

Pharmacies	Specialist practices	Dental practices
ATTITUDE TOWARDS CERTIFICATION		
Positive attitude: <ul style="list-style-type: none"> • Facilitation of management in pharmacies • Improved organization of work • Improvement of safety and quality of services 	Moderately negative attitude: <ul style="list-style-type: none"> • Possible facilitation of practice management • Possible improvement of safety and quality of service 	Negative attitude
EXPECTATIONS FROM CERTIFICATION		
<ul style="list-style-type: none"> • Patient satisfaction • Staff satisfaction • Priority in contracting services with the Health Insurance Fund • Reduced risk of harming the patients • Reduced risk of losing contract with the Health Insurance Fund 	<ul style="list-style-type: none"> • Gain in professional status • Patient satisfaction • Staff satisfaction • Attracting additional patients • Reduced risk of harming the patients • Reduced risk of professional diseases and injuries 	<ul style="list-style-type: none"> • Staff satisfaction • Ability to contract services with the Health Insurance Fund • Reduced risk of paying fines during the inspections • Reduced risk of having court processes initiated by patients
DISADVANTAGES OF CERTIFICATION		
<ul style="list-style-type: none"> • Financial burden • Administrative burden 	<ul style="list-style-type: none"> • Financial burden • Administrative burden • Time taken away from examining patients 	<ul style="list-style-type: none"> • Financial burden • Administrative burden • Time-consuming education of practice staff
SOURCES OF INFORMATION		
<ul style="list-style-type: none"> • Agency for Certification, Accreditation and Health Care Quality Improvement, • Peers (certified pharmacies), • Pharmaceutical Society, • Pharmaceutical Chamber 	<ul style="list-style-type: none"> • Peers (certified providers), • Public Health Institute 	<ul style="list-style-type: none"> • Peers, • Chamber of Dentists, • Public Health Institute
INFLUENCE OF CHAMBERS AND PROFESSIONAL ASSOCIATIONS		
<ul style="list-style-type: none"> • More positive opinion than other respondents • Clear positive attitude towards and interest in certification (both chamber and professional association) 	<ul style="list-style-type: none"> • Less important than for other respondents • No clear attitude towards certification • No support provided • Not sufficient information provided 	<ul style="list-style-type: none"> • Minor influence of professional associations • Diverse influences by the Chamber of Dentists
OBSERVABILITY OF CERTIFICATION RESULTS		
<ul style="list-style-type: none"> • Health inspection, • Health Insurance Fund, • Patients 	<ul style="list-style-type: none"> • Health inspection, • General public 	<ul style="list-style-type: none"> • Health inspection, • Ministry of Health and Social Welfare

Agency for
Certification,
Accreditation and
Health Care Quality
Improvement

- Provide information and education to private healthcare providers
- Explore alternative approaches to covering assessment costs
- Organize events to present results of the certification process and to share experience of certified providers
- Publicly promote certified providers
- Explain purpose and importance of the certification process to general public

Ministry of Health and
Social Welfare

- Explore alternative approaches to covering assessment costs
- Generate public support for certification process
- Make more direct announcements and communicate with the private healthcare providers on certification
- Define time needed for issuing decision on certification

Health Insurance Fund

- Certification status should be one of the criteria for contracting
- Promote use of certified providers' services

Inspectorate

- Check on the certification status during inspections

Medical chambers

- Publicly state official position on certification
- Incorporate healthcare quality and safety in continuous education programs

Professional
associations

- Support providers in complying with requirements of standards

Public Health Institute

- Provide training on management of risks in infection control
- Provide assistance to private healthcare providers in the development of internal procedures

CONCLUSION

Findings of the survey partially confirmed the conclusions of the first phase:

1. Perceived gains in professional status have some positive but not crucial influence on adoption of safety and quality standards by private healthcare providers.
2. Fear of negative financial consequences (inspection fines and risk of losing contract with the Health Insurance Fund of the Republic of Srpska) significantly increases adoption of safety and quality standards. Financial disincentives related with non-adoption of standards are lowest for dental practices (leading non-adopter among private providers), whose services are not contracted by the Fund.
3. Availability of information on safety and quality standards increased their adoption.
4. Opinions conveyed to private healthcare providers by peers generally have a negative influence on adoption of safety and quality standards.
5. Perceived attitude of chambers has a limited influence on adoption of safety and quality standards.
6. Level of support of professional associations to private healthcare providers in implementation of the certification does not have significant influence on the level of adoption of safety and quality standards.

The second phase of the research confirmed that rate of adoption of mandatory safety and quality standards continued to vary between different groups of private healthcare providers mainly due to (1) different level of fear of negative financial consequences and (2) different level of availability of information on safety and quality standards and certification process.



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The research protocol was approved by the World Health Organization’s Research Ethics Review Committee and the Ethical Board of the Public Health Institute of the Republic of Srpska. Further information on results of the second phase of the research is available at:

<http://www.phi.rs.ba/index.php?view=clanak&id=159&lang=EN>

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