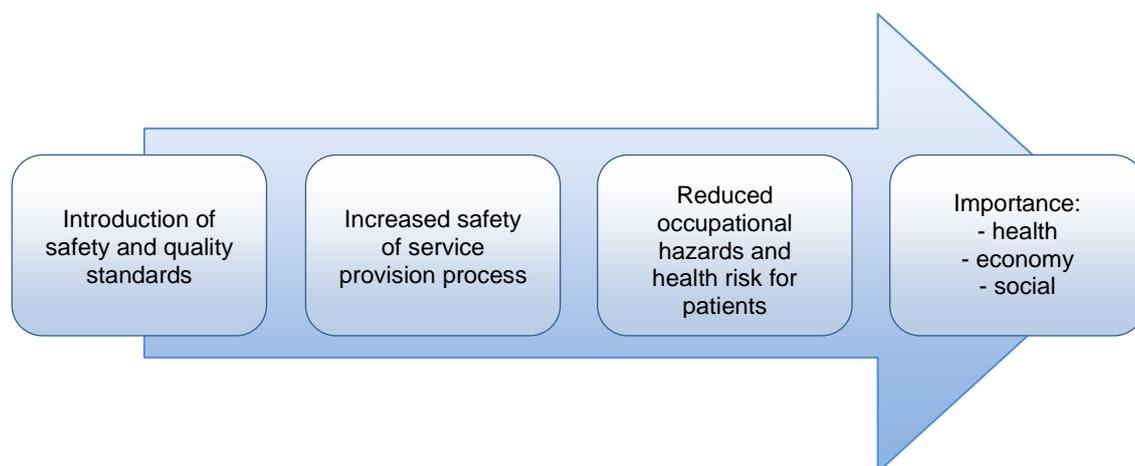


INTRODUCTION OF SAFETY AND QUALITY STANDARDS AMONG PRIVATE HEALTH CARE PROVIDERS IN THE REPUBLIC OF SRPSKA

RESULTS AND RECOMMENDATIONS OF THE FIRST PHASE OF THE RESEARCH (MAY 2016)

Rationale for the research: Introduction of safety and quality standards (certification) in private and public healthcare organizations in the Republic of Srpska has been mandatory since 2012. It was noted in period 2012-2015 that adoption and implementation of the quality and safety standards varied among different types of private healthcare providers (pharmacies, specialist practices and dental practices). The variations also exist among the providers of the same type. By investigating barriers and facilitators for adoption of quality and safety standards among private healthcare providers in the Republic of Srpska, the research will support identification of necessary changes in implementation approaches.

Figure 1: Why are safety and quality standards important in healthcare provider organisations?



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?

Figure 2: Advantages and disadvantages of certification

ADVANTAGES OF CERTIFICATION

- Improved organisation of work and practice management
- Improved staff competencies
- Improved satisfaction of service users
- Better management of medical waste
- General and specific hygiene improvements
- Reduced occupational hazards and health risks for patients

DISADVANTAGES OF CERTIFICATION

- Costs related to certification
- Administrative burden
- Time required for meeting requirements of standards
- Safety and quality standards not being tailored to needs and limitations of small practices



CONCLUSIONS

The first phase of the research resulted in the following findings that need to be confirmed or dismissed through the next stages:

1. Perceived gains in the professional status did have some positive but not crucial influence on the adoption of safety and quality standards by private healthcare providers.

3. Availability of information on safety and quality standards increased their adoption.

Figure 3: Sources of information on certification

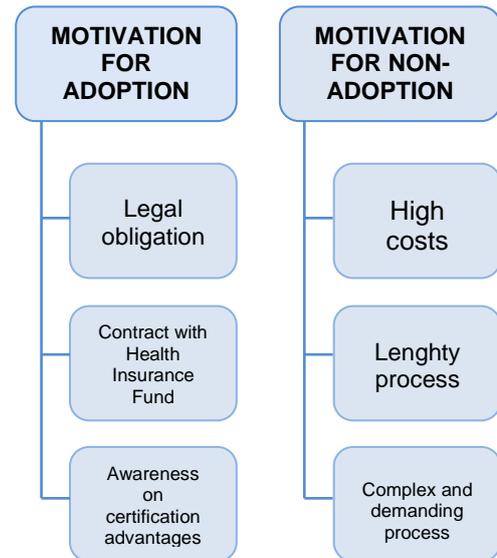
SOURCES OF INFORMATION	COMMUNICATION CHANNELS
<ul style="list-style-type: none"> Agency for Certification, Accreditation and Health Care Quality Improvement in the Republic of Srpska (ASKVA) Chamber of Dentists of the Republic of Srpska (source for the private dental practices) Public Health Institute Ministry of Health and Social Welfare Republic of Srpska Pharmaceutical Society of the Republic of Srpska 	<ul style="list-style-type: none"> ASKVA – direct contacts Websites of certified public healthcare providers organisations Communication with peers from private practice Communication with peers from certified public healthcare providers organisations Thematic meetings organised by professional associations

5. Perceived attitudes of chambers had limited influence on the adoption of safety and quality standards.

2. Fear of negative financial consequences did significantly increase the adoption of safety and quality standards.

4. Opinions conveyed to private healthcare providers by peers had negative influence on the adoption of safety and quality standards at early adoption stages.

Figure 4: Motivation for adoption of safety standards



6. The level of support of professional associations to private health care providers in the implementation of certification had significant influence on the level of adoption of the safety and quality standards.

Figure 5: Influences from the social system

INFLUENCE OF PEERS	INFLUENCE OF CHAMBERS	INFLUENCE OF PROFESSIONAL ASSOCIATIONS
<ul style="list-style-type: none"> IMPORTANT: Specialist practices that decided to postpone the certification process NOT IMPORTANT: Pharmacies Certificies specialist practices Dental practices 	<ul style="list-style-type: none"> CHAMBER OF DENTISTS OF THE REPUBLIC OF SRPSKA INFLUENCED THE PROCESS BY: Participation in development of the certification standards Organisation of training required for certification Key source of information Perceived as platform for organising active resistance NO SIGNIFICANT INFLUENCE: Chamber of Medical Doctors of the Republic of Srpska Pharmaceutical Chambers of the Republic of Srpska 	<ul style="list-style-type: none"> PHARMACEUTICAL SOCIETY OF THE REPUBLIC OF SRPSKA HAD SIGNIFICANT INFLUENCE ON ADOPTION NO SIGNIFICANT INFLUENCE: Association of Private Dentists of Republic of Srpska Dental Specialists Society of Republic of Srpska Different professional association of medical doctors

RECOMMENDATIONS

Agency for Certification, Accreditation and Health Care Quality Improvement in the Republic of Srpska:

- Put more efforts in the information and education of private healthcare providers.
- Review and improve standards for certification of private healthcare providers, to facilitate acceptability of standards among the private healthcare providers.
- Improve transparency of approach for scheduling certification assessments: regularly provide list of planned assessments through its web site.
- Broaden the list of trained assessors, coming from the private dental practices. In broadening the list, select assessors with high expertise and experience.
- Consider alternative approaches to covering assessment costs by the private healthcare providers (e.g. payment in instalments).
- Organise events to present results of the certification process and to share experience of certified private healthcare providers with other providers.
- Put more focus on public promotion of the providers who successfully completed the certification process.
- Put more focus on the explanation of the purpose and importance of the certification process to general public (e.g. current and future patients).

Inspectorate of the Republic of Srpska:

- Consider the possibility of routinely checking the certification status during all health inspectors' visits to private healthcare

Medical chambers:

- Come up with an official position regarding certification and announce it publicly to the members.
- Consider possible approaches for making examples of internal procedures available to dental practices by the Chamber of Dentists of the Republic of Srpska.
- Consider the possibility of including healthcare quality and safety related issues in the programs of healthcare professionals' continuous education.

Public Health Institute:

- Continue supporting the certification process through provision of training on the management of risks in infection control and assistance to the private healthcare providers with the development of internal procedures.
- Take a more active role in advocating control of sterilisation with biological indicators and provide support to the private health care providers in establishing the control system.

Ministry of Health and Social Welfare in the Republic of Srpska Government:

- Consider the possibility of amending bylaws, in order to allow the ASKVA to also issue certificates for completion of the certification process (or a specific mark, recognisable by patients) that could improve certification's observability among the patients.
- Consider the possibility of more clearly providing public support to the certification processes among the private healthcare providers.
- Consider the need to make more direct announcements about the certification of private health care providers and explicitly demand from the providers to enter the certification process.
- Consider the possibility of shifting some of the certification costs away from private healthcare providers (to other sources of financing).
- Consider alternative approaches to tackling the problem of illegal provision of dental services – the approaches that would look beyond mandate of Inspectorate of the Republic of Srpska.
- Consider the need to precisely define time needed for issuing decision on certification, after submission of certification assessment report by the ASKVA.

Health Insurance Fund of the Republic of Srpska:

- Consider the possibility of specifying completion of the certification process as one of the mandatory criteria for contracting.
- Consider the possibility of implementing selective contracting with the healthcare providers, on the bases of certification status.
- Consider the possibility of the Fund's participation in promoting the use of certified providers' services (as safer for the insured population).

Professional associations:

- Consider how the experiences of the Pharmaceutical Society of the Republic of Srpska could be useful in adjusting the approached used for the provision of support to members of the associations (other professional associations).
- Continue the provision of support to individual pharmacies in complying with requirements of the certification standards (the Pharmaceutical Society of the Republic of Srpska).

OBSTACLES

Time and money

Lengthy implementation of standards:

„The time, the training, and the whole certification process take too long.”
(*interview with a specialist practice*)

Certification costs:

“It was not just the problem to pay the certification, but all the contracts that you have to have in order to meet the standards.” (*interview with a pharmacy*)

Staff and knowledge

“The biggest obstacle were the staff; to convince them that standards are beneficial, to see benefit from record keeping; everybody tends to avoid writing and record keeping, which eventually could be important; in principle, staff is accustomed to other system of work.” (*interview with a pharmacy*)

Lack of knowledge on standards implementation:

“Problem was to how write the procedures. It was difficult to get information, so were not sure how to do it.” (*interview with a pharmacy*)

Complexity of process and lack of support

Standards not being tailored to needs and limitations of small practices:

“Dental practices are not big generators of medical waste, but they need to have full waste management system implemented.”
(*interview with a dental practice*)

“Biological indicators come in packages that are too big and too expensive for a single practice.”
(*interview with a dental practice*)

Complexity of implementation and dependency on companies that provide specific services:

“The certified dental practices need to use services related to occupational health training, occupational risk assessment, maintenance of fire-protection equipment and management of fire-protection system.” (*interview with a dental practice*)

Lack of support during the preparation process:

“The Chamber did not arranged for a first aid/dental emergency training. The available training course is too lengthy, too expensive and too broad (not really focusing on dental emergencies).” (*interview with a dental practice*)

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