

Agency for Quality and Accreditation in Healthcare in the FBiH



AKAZ
The Culture of Quality

Dear readers!

When the idea to create an Agency for Quality and Accreditation in Healthcare in Bosnia and Herzegovina was first mooted and the first discussions held about whether founding and developing such an organization was desirable or even possible, it was regarded as something quite new, but also as a much-needed step forward in quality for the healthcare sector and the community as a whole. Nearly 15 years later, many of the goals sketched out by its conceptual initiators and founders have been achieved. The agency has taken root and become a necessary, constructive, constituent part of the system.

All of us in AKAZ, our many associates and partners, and all the people doing the day to day work in healthcare have made great efforts to promote a culture of quality and safety in the healthcare environment through our commitment and by applying good practice. This has contributed to raising the profile of the agency, what it does and what it stands for amongst the public and the professional community.

We want to spread the word about the expanding scale of our activities. As well as using the official AKAZ Internet and Facebook pages, we think there is a need for printed material that provides a relatively simple introduction for both professionals and the general public.

This is not just for AKAZ, but for everybody who comes into contact with us or the problems we work on – for all those working in healthcare as medical professionals or in the management of healthcare institutions and establishments, and, last but not least, for everyone with healthcare insurance, as patients and end users of the healthcare services in the Federation of Bosnia and Herzegovina.

For all these reasons, we have drawn on the thoughts and proposals about the final look of this brochure and the outlines, plans, and summaries of thematic sections that you – our partners, friends of the agency, and everyone committed to the theme of quality in healthcare generally – have given us during the preparation phase. We feel that we have succeeded in distilling the essence of our work into this brochure. We decided it should not be too long or overly technical, full of incomprehensible jargon and terms only trained professionals feel at home with. On the other hand, we didn't want it to be purely for the general public either.



Our search for the right approach to form and content is this brochure entitled "AKAZ – a culture of quality". We have followed the format of short illustrated descriptions of basic concepts associated with the agency, safety, quality and certification and accreditation procedures in healthcare. Our mission, vision, and structure, the scope of our operations and our approach, as well as the forms of cooperation that we apply in our work, are all presented pithily and concisely. We hope that everyone who reads this brochure will gain a clear idea of who we are, what we do, what our aims are, and what we hope to achieve.

We also hope that the brochure we are placing before you will prove to be informative and inspirational, a useful tool for your work, in future contacts with AKAZ, and in dealing with themes associated with safety and quality improvement. It is, in the final analysis, through them that we are attempting to bring about comprehensive improvement in healthcare services in our community.

Associate Prof. Ahmed Novo, M.D.
Director of the Agency for Quality and Accreditation in Healthcare
in the FBiH

AKAZ

The culture of quality

AKAZ is the Agency for Quality and Accreditation in Healthcare in the Federation of Bosnia and Herzegovina, headquartered in Sarajevo. It was founded in 2005 to develop quality and safety in healthcare under a joint project of the World Bank's "Basic Health Project" and the Federal Ministry of Health, under the Law on the System for the Improvement of Quality, Safety, and for Accreditation in Healthcare (Official Gazette of the FBiH, nos. 59/05, 52/11 and 6/17). AKAZ's official founder is therefore the Federation of Bosnia and Herzegovina. The founder's rights and duties are exercised by the government of the Federation of Bosnia and Herzegovina.

AKAZ's PRIMARY FUNCTIONS are to carry out expert, professional and associated managerial tasks related to improving the quality and safety of healthcare services, defining the quality parameters for them, coordinating, gathering, developing, and adopting optimal organisational and clinical standards, defining and disseminating evidence-based guidelines for effective



clinical practice, cooperating with the international accreditation bodies in healthcare responsible for applying such standards, and establishing continuous education and training programs for those working in healthcare and associated fields.

AKAZ's MISSION is to regulate the area of safety and quality in healthcare; to promote and affirm the importance of safety and quality in the area of healthcare; to stipulate standards for certification and accreditation of health centres, hospitals, pharmacies, and other healthcare organizations, including support for the development and application of clinical guidelines, with a view to continuously improving healthcare services; carrying out training and education programs for healthcare staff to help healthcare establishments prepare for certification and accreditation; establishing performance indicators to measure the achievements of health centres, hospitals, pharmacies, and other healthcare institutions; organise the sharing and exchange of good practice

between healthcare institutions, with a view to improving clinical practice and benchmarking; cooperate with similar agencies at home and abroad.

THE PRINCIPLES AND VALUES of reform enshrined in the Ljubljana charter provide the foundation of AKAZ's mission, as may clearly be seen from the Agency's services and activities:



- Value-driven: human dignity, equity, healthcare protection for all, professional ethics, voluntary participation, independence, and confidentiality;
- Motivated to improve healthcare protection: the application of standards, self-assessment, and peer review to improve healthcare protection for the population as a whole;
- Focused on client protection: the rights and needs of individual service-users must take centre-stage in the processes of certification and accreditation;
- Focused on quality: ensuring that the Agency's internal and external activities are oriented towards promoting better quality on a continuous basis;
- Value for money: the Agency will adopt approaches that either have or are likely to prove effective and efficient;
- Transparency and relevance: standards, measurement, and support activities must reflect the needs of healthcare service providers, participants, and clients.



THE AGENCY'S VISION is to be the main federal centre for defining, measuring, and improving standards in clinical practice and management services in the Federation of Bosnia and Herzegovina; to secure the support required for all institutions offering healthcare to take part in the quality assurance, accreditation, and certification process; to ensure continuous, visible and measurable improvement of quality in clinical practice and the organisation of healthcare; to create an environment in which the patient experience is key to the



organisation and provision of healthcare in the Federation of Bosnia and Herzegovina; to contribute through its work to improving quality and safety in the provision of healthcare services on the territory of the Federation of Bosnia and Herzegovina; to establish cooperation with agencies carrying out similar activities in the region and throughout Europe and to exchange experiences of positive practices with other agencies; that its activities and operations

ultimately contribute to improving healthcare services and increasing the satisfaction of patients, healthcare workers, and the public; to create a consensus amongst the professional public through outreach to and education of health care professionals regarding the significance of AKAZ's role; membership in ISQua (the International Society for Quality in Healthcare) and to apply accreditation in accordance with the ISQua accreditation programs.

HEALTHCARE USERS are the focus of AKAZ's work and their rights and needs must take centre stage in the processes of accreditation and quality assurance. AKAZ's mission is to ensure that its internal and external activities are directed towards promoting quality improvement on a continuous basis.

QUALITY IN HEALTHCARE is a vital component of healthcare provision and a feature of every activity undertaken in healthcare or medicine. The other two components are the scope of activities and

the costs associated with them. Quality healthcare is every patient or healthcare client and community's right. This is particularly important when resources for healthcare provision and budgetary funding are limited.



International Society for Quality in Health Care

**This is to confirm that the
Agency for Quality Improvement
and Accreditation in Healthcare in
Federation of BiH**

**is an Institutional Member of
the Society in**

2017

A handwritten signature in black ink, appearing to read "P. Lachman".

**Peter Lachman
Chief Executive Officer**

THE QUALITY OF AKAZ itself is vouched for by the ISQua certificate which extends its membership in this international organization, whose sphere of operations encompasses primarily the safety and quality of healthcare provision around the world. AKAZ is currently part of the ISQua network, through which it is developing partnerships that assist greatly in extending healthcare provision to patients and introducing safety and quality standards into healthcare institutions. The exchange of ideas and solutions through ISQua's global network has been of considerable assistance to AKAZ in our efforts to introduce safety and quality assurance in the Federation of Bosnia and Herzegovina.

THE BENEFITS of establishing a quality assurance system are felt primarily by patients, but also by healthcare professionals in the health centres, hospitals, pharmacies, and other healthcare establishments working in a well-ordered system with satisfied patients. Completion of



the first phase and so of a quality assurance cycle is followed by a process of revising standards and raising the ladder to the next level. This results in a continuous, upward spiral of improving quality and safety in healthcare provision.

AKAZ IS TASKED WITH THE RESPONSIBILITY for satisfying or at least mollifying the expectations of patients, healthcare professionals, and management within the health care provision system, the healthcare insurance funds, public healthcare, political

decision-makers, and other key stakeholders in the healthcare provision system.

THE FIGHT AGAINST CORRUPTION is an important aspect. In full compliance with the “Government action plan for the implementation of the strategy to fight corruption, 2009-2014”, we have built in recommendations so that the standards for family medicine include the following mandatory criterion: “Each family medicine team will have a system for reporting corruption (paper forms, software), set out both in informative leaflets and brochures.” Patients and staff can report corruption. Healthcare institutions are required to have in place systems to deal with patient complaints. This system is not just a box for patients’ allegations. Authorized AKAZ assessors check how such complaints are handled and what actions are taken to ensure that bad situations do not repeat themselves.

All the standards incorporate guidelines

from the state-level “Strategy to fight corruption, 2015-2019” and the “Action plan for the implementation of the strategy to fight corruption, 2015-2019”.



THE “Q” STICKER is a logo that acts as an easily recognisable sign of quality. It is put up by healthcare institutions that have successfully passed the qualification phase in establishing a safety and quality assurance system. Its presence at health centres,

hospitals, pharmacies, and other healthcare institutions lets service users know that institutions displaying the sign have passed

inspection and put in place a safety and quality assurance system that is in line with current regulations.





THE CERTIFICATION or establishment of a system of safety standards is a procedure for assessing and confirming that healthcare establishments meet predefined and public optimal standards for safety in the provision of healthcare. It involves issuing a certificate.

The **CERTIFICATE** is a statement of certification issued by the Agency for Quality and Accreditation in Healthcare in the Federation of Bosnia and Herzegovina (AKAZ) to health centres, hospitals, pharmacies, and other healthcare establishments after successful conclusion

of the certification procedure, which is based upon external assessment.

CERTIFICATION STANDARDS are optimal safety standards that ensure safe systems at work and a safe work environment in healthcare establishments, so that the appropriate procedures and protocols are applied while providing healthcare services to patients and other clients. It relates particularly to the safety of health centres, hospitals, pharmacies, and other healthcare establishments, those visiting them, and of the environment. Certification standards are stipulated in detail and made public.



broj rješenja: 02-37-525/17

vrijedi do: 12.01.2021.

AKAZ - Agencija za kvalitet i akreditaciju u zdravstvu u Federaciji Bosne i Hercegovine

ASSESSMENT is carried out for compliance with the current certification standards for the type of healthcare establishment being certified. Each criterion is subject to processes of both self- and external assessment that review the evidence for the criterion. The evidence allows the assessors to give a precise grade as to how well the criterion has been met.

The **ASSESSOR** evaluates how far each criterion has been met on the basis of evidence of having satisfied the criteria and how far standards have been met on the basis of the number of criteria satisfied. In order to meet the criteria, healthcare establishments have to follow the appropriate guidelines and the legal basis given for the criteria in question.



The external assessor' REPORT and all the documentation received from the healthcare organization are forwarded by AKAZ to the Commission for Certification/Accreditation of Healthcare Organizations within 15 days of receiving them.

CHECKING THE APPLICATION of certifiable safety standards in healthcare organization for certification is entrusted to AKAZ committees, which review the assessment reports for healthcare institutions with due respect for certain basic principles: the level of satisfaction of safety standards/criteria; the nature of the risks encountered and measures being taken to eliminate them and reduce both the magnitude and range of the potential impact of residual risk on patients, staff, visitors, and the public.

Authorised quality assessors nominated by AKAZ from a list of external assessors and chosen in accordance with the indicators for nominating authorised assessors then conduct checks of how well certification and safety standards are being met in healthcare



organization with a view to certification.

Healthcare organization have finished the certification process when they receive their **STATEMENT OF CERTIFICATION**.

Once the Committee for Certification report that the external assessment procedure has been carried out, the AKAZ director forwards the authorised quality assessors' report and a summary of the Committee's report, along with a recommendation, to the AKAZ board,

who issue a statement of certification of the healthcare establishment in question, once it has: met any conditions for issuance of the certificate or of a provisional certificate and settled all the costs of certification.

AKAZ is obliged to carry out inspection visits regularly during the period of validity of certification. These visits may be with prior notice or without.



ACCREDITATION is the model for external evaluation of healthcare organization through peer review. It is a formal process under which the Agency defines, assesses, and monitors whether quality standards are being met, comparing an institution's performance against standards, issuing recognition and/or suggesting measure to improve quality. If a healthcare organization meets the required standards, it is accredited. Otherwise, measures to improve safety and quality are proposed and a new quality assessment visit scheduled. In the Federation of Bosnia and Herzegovina, accreditation is voluntary, covers a limited period of time, and requires periodic reassessment. This applies to both the public and the private healthcare sector. Accreditation in healthcare involves more than simply the dissemination of standards and learning about them. After considerable support from the Agency and peer review, the accreditation program assesses the implementation of standards for improving the quality of healthcare for patients.



HEALTHCARE ORGANIZATION cannot enter the demanding process of accreditation without the Agency's assistance. Naturally enough, a system for quality improvement must already be in place. To that end, when entering into agreement, the Agency accepts the obligation to offer every assistance, including the engagement of one or more experienced healthcare professionals to act as facilitators. Facilitation can take from 6 to 12 months or even longer, depending on the establishment entering the accreditation program.

ACCREDITATION STANDARDS form the backbone of organisational quality. Standards express the expectations or values used to describe the target level for service provision, taking adequate account of the need for them to be meaningful, objective, intelligible, desirable, realistic, quantifiable, achievable, flexible, acceptable, adaptable, professional and based on consensus. Accreditation standards thus express the expectations of patients,

healthcare professionals, managers, and other stakeholders and allow healthcare establishments to carry out self-assessment, with a view to improving the quality and safety of their services and work towards accreditation and recognition on the basis of external peer review. Standards are used to define not just the resources and organisational agreements required, but also various criteria, policies, and procedures, including the qualifications of clinical and



ancillary staff and acceptable levels of performance for a given procedure, as well as guidelines on the conditions of execution.

Standards can be categorised into standards for the structure, process, and outcomes of care. Structural standards define the resources required, whether human, financial, or physical. Standards of process define the activities involved in the processes in a healthcare institution. Standards of outcome relate to the results of those activities.

POLICIES based on the agreed accreditation standards provide a more detailed definition for each establishment that allows the range of services on offer to be determined, as well as where and when services will be provided and who qualifies to offer and who to receive given services; operational procedures and protocols which orient and govern daily routines, with a detailed description of procedures, of who is providing the service and to which users; forms and other ancillary documentation.



The primary **GOALS OF ACCREDITATION** are the assessment of quality and safety of healthcare provision and the assessment of the capacity of healthcare institutions continuously to improve the quality of their healthcare provision, the formulation of direct recommendations and suggestions for improving at the organisational level, and the impact on the professional development of healthcare professionals, leading to better training programs, attracting a higher quality of doctor and nurse to accredited institutions, and improving the management of health services. Accreditation results in

better management of the health system, serving the healthcare ministries' interest in more successful implementation of their policies. Rationalising and simplifying payment for services is certainly in the interest of the health insurance funds, as is the continuous strengthening of public confidence in the healthcare system.

ACCREDITATION is available to healthcare establishments that can prove they meet the standards and criteria set out by the Agency, in accordance with the Law on the System for Improving Quality and Safety and on Accreditation in Healthcare in the Federation of Bosnia and Herzegovina, as well as in the regulations issued pursuant to the law. Healthcare establishments can apply to initiate the accreditation procedure for the entire establishment or for its organisational and functional units.

AKAZ exercises its supervision over accredited healthcare establishments by SUPERVISORY VISITS to determine their compliance with the standards and the

quality of their services. These visits can be regular and pre-scheduled (annual) or unannounced (as decided by the Accreditation Committee). An accredited healthcare establishment's accreditation may be suspended, if a supervisory inspection records irregularities that require measures whose implementation would need more than one, but less than four months. Healthcare establishment whose accreditation has been suspended cannot claim accreditation or use the accreditation symbol until corrective measures have been taken.



Facilitation

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FACILITATORS may include doctors, medical technicians, lawyers, and other healthcare professionals or employees in healthcare establishments who have received training from AKAZ in the areas of quality assurance and accreditation in healthcare. It is their role to facilitate and provide expert assistance to various healthcare establishments with the introduction of standardisation and quality systems, processes to improve quality, and in preparing for accreditation. In doing so, they may use the books of standards collated and published by AKAZ for the purpose, which have been accepted by consensus by our healthcare professionals. Facilitators should be experts with extensive experience in working in healthcare establishments and a positive approach to the task in hand, capable of passing on their enthusiasm to colleagues and associates. They must demonstrate to employees in healthcare the benefits that arise from introducing a quality system: for patients, for the establishment, and for those working in it.



Every facilitator is TASKED, on the basis of the contract between AKAZ and the healthcare organization in question, with ensuring the introduction and application of standards into a given health centre, hospital, pharmacy, or other healthcare institution, within the agreed upon timescale, according to the plan and program set out by AKAZ. The facilitator's activities unfurl in phases, gradually, usually in monthly

intervals. After each visit, a written report is drawn up on work done, which is then forwarded to the Agency. If there are multiple facilitators concurrently assisting various healthcare institutions, AKAZ may decide to organise joint meetings between facilitators to allow comparison of the results of their work and what they have achieved in improving quality in healthcare establishments.

The **FACILITATOR** introduces the members

of the establishment's Quality Committee to the self-assessment forms and explains how to fill them out, as well as how to draft policies, procedures, and protocols. The facilitator should be available to explain, as required, by telephone or email, every unfamiliar circumstance or unclear aspect that may crop up.

The **STANDARDISATION PROCESS** represents a novelty in the area of healthcare, which first has to be





introduced to the management and staff of the establishments introducing quality assurance systems. Any potential resistance and obstruction have to be removed at the outset and people won over to the new task. Determining what works best to improve operational organization takes time, noting down all the relevant data and grounding work on procedures, guidelines, and protocols. Experience in countries around the world where quality assurance systems and accreditation are already being applied is encouraging. Our

own experience indicates that regular and frequent meetings of the Committee for Quality and Accreditation are a precondition for successful and continuous work on standardisation. A good division of tasks, with clearly determined deadlines, results in good work dynamic and good results. Cooperation with the heads of department and services and their full support for work on improving quality are very important.

Having embarked upon standardization, there follow a number of **PROCEDURAL PHASES**, involving most of the people employed in the establishment and assisted by facilitators. The first phase in this task is the establishment's self-assessment with regard to the various standards. This is carried out by the employees to determine the level of standard the healthcare institution is already meeting. The second phase follows from the first: the allocation of tasks and concrete responsibilities to employees in accordance with the areas of medicine in which they have expertise. Doctors, medical technicians, lawyers, economists, pharmacists, and other

employees of the most relevant expertise in the area participate in drafting the missing policies, procedures, protocols, and other documents, and it is recommended that they use the most up-to-date references and literature in the task. Once a quality assurance system has been introduced into the institution, with the help of the facilitator, the next phase is preparation for internal assessment of the job done so far, which is carried out by internal quality

assessors. The final phase is external assessment, carried out by external assessors who are healthcare professionals of various profiles and backgrounds, who have undergone training in this area with AKAZ, and come from other healthcare establishments. Following the external assessment, the external assessors send their reports to AKAZ. This is the basis on which the healthcare institutions are issued certification or accreditation.



INTERNAL ASSESSORS are healthcare professionals of various profiles who have received prior training at AKAZ and work in healthcare organizations which have already been certified or accredited. They check whether everything has been done properly and whether the institution is ready for external assessment. The internal assessors carry out quality checks within their own organizations and provide written

confirmation on special forms, in which they also write down their self-assessment, so that the results may be compared. They make suggestions as to what needs to be improved or done before final external inspection.

PERFORMANCE INDICATORS provide a powerful tool for insight into the adequacy of healthcare provision and the identification of problematic areas. They are an integral part of good management and professional practice. In their effort to assess and improve the quality of healthcare provision, management must first translate the quality goals into measurable quality indicators for the performance of staff and the organisation overall. A range of indicators should be used, each measuring a different form of quality, thus giving the management further information. By using the Donabedian trilogy, one can measure structural, process, and outcome indicators.

OUTCOME INDICATORS measure the short-term impact of treatment on





individual health and its long-term impact on the health of the population (morbidity, mortality, et cetera). Connecting process and outcome indicators, researchers and managers can show the changes in service provision required to improve care outcomes.

DEFINING good indicators (clinical performance) is a demanding task, given that indicators must be reliable, objective, and meaningful forms of information on

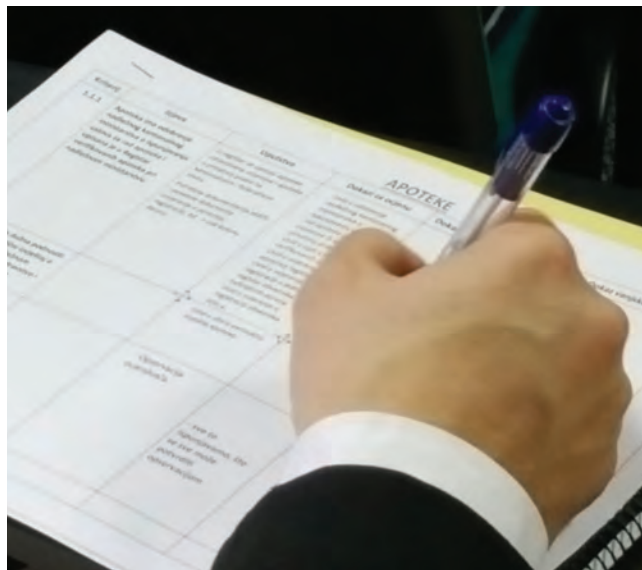
significant issues (and consequently must be evidence-based). They must be sensitive to changes in performance, specific to the analytical situation, and simple to calculate from available data. Nor can they ignore the costs of gathering, aggregating, analysing, and publishing the data. Indicators should be designed to measure the degree of attainment of the organisational goals set. In practice, however, they tend to be chosen on the basis of what data happens to be routinely available from hospital records, organisational protocols, on-call logbooks, patient release forms, outpatient check-up logbooks... Where existing data are not reliable or meaningful, managers should set of new systems for data collection.

THE USE and definition of performance indicators are considered to be of the highest priority in the area of healthcare services, not just because they are needed to measure and assess the quality of the services being provided, but also because it is through them that the establishment's goals for improving health care provision

are realized and reviewed and that the indicators offer proof of the effectiveness and cost-effectiveness of particular medical procedures. It is also important to stress that performance indicators do not measure quality directly. They draw attention to problematic areas that merit additional investigation into the causes, scope and prevalence of substandard performance.

ASSESSMENT of how well standards are being met allows the accreditation body to focus on the question of whether the establishment is capable of offering services of sufficient quality. Answers are sought as to what the establishment core processes are and what its outcomes are. Using indicators to measure performance is just one way of following and assessing the quality of care and services provided, since quality is multi-dimensional. This is why healthcare establishments need indicators to measure safety, the competence of their staff, the suitability of their procedures, and the effectiveness, efficiency and continuity of care...

The KEY ELEMENTS of implementing a system of performance indicators include the establishment of an appropriate data gathering system, team work, and defining the target individuals and teams to use the indicators, as well as how they are to be used, given that healthcare professionals can feel vulnerable when being supervised and measured. The aim is not to assess particular, individual performance, even though that does require attention, but to measure the processes and outcomes of care after aggregation and anonymization



of data. Management must agree with department or service heads and the teams gathering the data on which indicators will be used routinely for the whole establishment.

After processing of the data and information received, MANAGERS can compile the figures for each month and calculate simple rates. With the help of summaries from reports and graphs, they can analyse trends and compare their establishment with other similar organisations, in particular with the leaders in area of quality service provision



(benchmarking). Managers can also prepare analyses of costs related to quality, with reference to excessive, insufficient, or incorrect use of medical technologies.

The SET OF PERFORMANCE INDICATORS

developed by AKAZ is applicable to all the health centres, hospitals, pharmacies, and other healthcare institutions in the Federation of Bosnia and Herzegovina. The healthcare establishments are tasked with providing AKAZ with reliably gathered data. According to Art. 25 of the Rulebook on the method and procedure for allocating, revoking and restoring accreditation in healthcare, accredited healthcare organizations are required to report to AKAZ annually on confirmed incidents and unfortunate events involving patients, other healthcare service users, healthcare professionals, and associates during the process of healthcare provision. Through this regulation, AKAZ has stipulated what incidents and events are subject to mandatory reporting and under what deadlines.

TRAINING FOR QUALITY COORDINATORS, ASSESSORS, AND FACILITATORS,

In line with its annual Training Calendar, AKAZ organizes regular training for healthcare professionals, AKAZ lecturers, quality coordinators, facilitators, and authorized quality assessors. In line with the Rulebook on training for continuous education of quality coordinators and other professionals from the area of quality assurance, safety, and accreditation in

healthcare, there is a mandatory training program on confirming knowledge and the exchange of experiences between healthcare organizations in the Federation of Bosnia and Herzegovina.

Mandatory training for quality coordinators lasts a total of 16 weeks during which all the educational modules are presented, capped off by a test of knowledge. Given the importance of the coordinator's role in the overall process of establishing





safety and quality systems for healthcare establishments, with the inclusion of those who have not had an opportunity to complete AKAZ's basic training, there is an insistence on those who have completed it engaging in continuous refresher courses and furthering their knowledge. There are also regular annual training programs for external assessors, as well as advanced training for facilitators. Such meetings, training and educational programs have proved very useful, particularly because

of the exchange of experiences and the useful suggestions and proposals for further work. In addition to these regular training programs with healthcare establishments, there is a focus on periodic gatherings of AKAZ lecturers, who have now been passing on their knowledge and skills for years to healthcare professionals in the FBiH in the area of establishing safety and quality assurance systems within healthcare establishments, in order to share experiences and improve operations.

WEB SITE

The www.akaz.ba website attracted many visitors over the years. In 2016 alone, there were more than 100,000 visitors from 103 countries around the world. The reason for such interest is the large number of events in which AKAZ plays a role and the many useful documents to be found on the website, not least our published quality and safety standards, a number of handbooks, operational guidelines, reports and examples, all of which are potentially very helpful for all sorts of healthcare institutions

and professionals with regard to establishing safety and quality systems.

There is little doubt about the need of service users and visitors to the official webpages of institutions and firms for authoritative and precise information, particularly in today's world. A certain level of good communication and open channels for data flow are required. The intention is to maintain a certain level of operational performance and up-to-dateness, along with constant improvement.

The collage displays a variety of documents and logos. At the top center is the ISQua logo with the tagline "Leading the transformation of healthcare quality and safety globally". To the left, there are logos for "akaz sertifikacija" and "akaz akreditacija". The documents include:

- "Akreditacijski standardi za bolnice"
- "Akreditacijski standardi za dom zdravlja"
- "REGISTAR AKREDITIRANIH / SERTEFICIRANIH ZDRAVSTVENIH USTANOVA"
- "Klinički putevi razvijeni u zdravstvenim ustanovama kroz projekte SZO i HSEF"
- "Priručnik za razvoj i primjenu kliničkih puteva"
- "NABAVKE"
- "Obrazac prijave kandidata za obuku koordinatora kvaliteta 2017."
- "Osnovni podaci o zdravstvenim ustanovama za pokretanje akreditacijskog programa"
- "Osnovni podaci o bolnici za pokretanje akreditacijskog programa"
- "Osnovni podaci o domu zdravlja za pokretanje akreditacijskog programa"
- "Osnovni podaci o biru porodične i obiteljske medicine za pokretanje akreditacijskog programa"
- "Obrazac za prijavu apoteke za proces uspostave sistema sigurnosti i kvaliteta u zdravstvu FBiH"
- "Ukoliko kontinuirane..."
- "Zadovoljstvo pacijenata kao..."
- "poljednih standarda, nego i obučav..."
- "iskustva direktno primjenjuju u praksi. Supro..."
- "kvalitativne promjene koje se uvode, ružno se smat..."

CELEBRATING QUALITY IN HEALTHCARE

Healthcare Quality Week is a traditional annual reflection on conditions of quality and safety in healthcare establishments in the Federation of Bosnia and Herzegovina, as well as offering an opportunity for awarding recognition and praise to deserving establishments and individuals for the past year.



The meetings held to mark Healthcare Quality Week in the Federation of Bosnia and Herzegovina every year are always one of the most important gatherings of healthcare professionals in the country. Sheer numbers, the expert content, international panels, award ceremonies, and the broad range of themes dealt with simultaneously around the margins of the meeting combine to ensure strong interest from the local public and media. A report from the Fourth Healthcare Quality Week, held in 2016, which involved a regional roundtable on “Improving the Quality of Healthcare Services in the Region,” was included in the ISQua bulletin.


AKAZ - Agencija za kvalitet i akreditaciju
u zdravstvu u Federaciji Bosne i Hercegovine
organizuje:

IV stručni seminar za koordinateure kvaliteta i zdravstvene
profesionalce u Federaciji Bosne i Hercegovine



The Healthcare Quality Week offers an opportunity for meeting and mingling that strengthens professional relationships and partnerships and it provides an opportunity for getting to know each other even better and sharing experiences related to quality and safety in healthcare. It strengthens

and reinforces the communication of quality coordinators with the Agency and encourages proposals for even better communication and cooperation between colleagues from across the region, with a view to strengthening the agencies and their integration within the healthcare systems.



AKAZ was established under the “Basic Health Project”, a World Bank project in 2003 and 2004 to establish an Agency for Quality and Accreditation in Healthcare in the Federation of Bosnia-Herzegovina, with assistance from the Health Quality Service of Great Britain. Thanks to a commitment from the very beginning to joining global and European currents, AKAZ has received considerable recognition from international

organisations, with which it has partnered in numerous projects.

We have cooperated with the following organisations: the World Bank, UNICEF, the World Health Organisation, the UNDP, UNFPA, CIDA, SDC, SOFRECO, the European commission, Asocijacija XY, the Partnership for Health, the Partnership for Public Health, Margina, MyRight and many others.



Demand Your Healthcare Institution meet Safety and Quality Standards!



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Photography:	Almir Panjeta i Arhiva AKAZ-a
DTP:	Ljubomir Kravec
Publisher:	AKAZ - Agency for Quality and Accreditation in Healthcare in the FBiH
Broj primjeraka:	300



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