

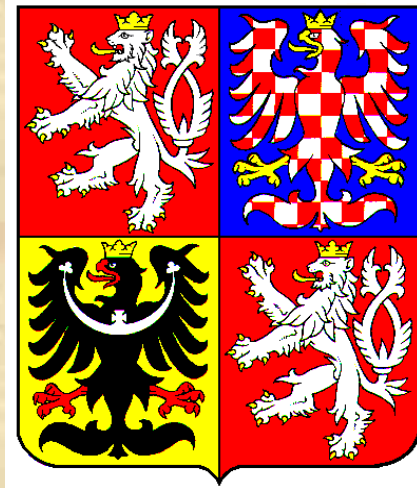
# CZECH REPUBLIC

## Quality Improvement Systems Development - 10 years after

*Dr. David Marx*

*Senate - Czech Republic*

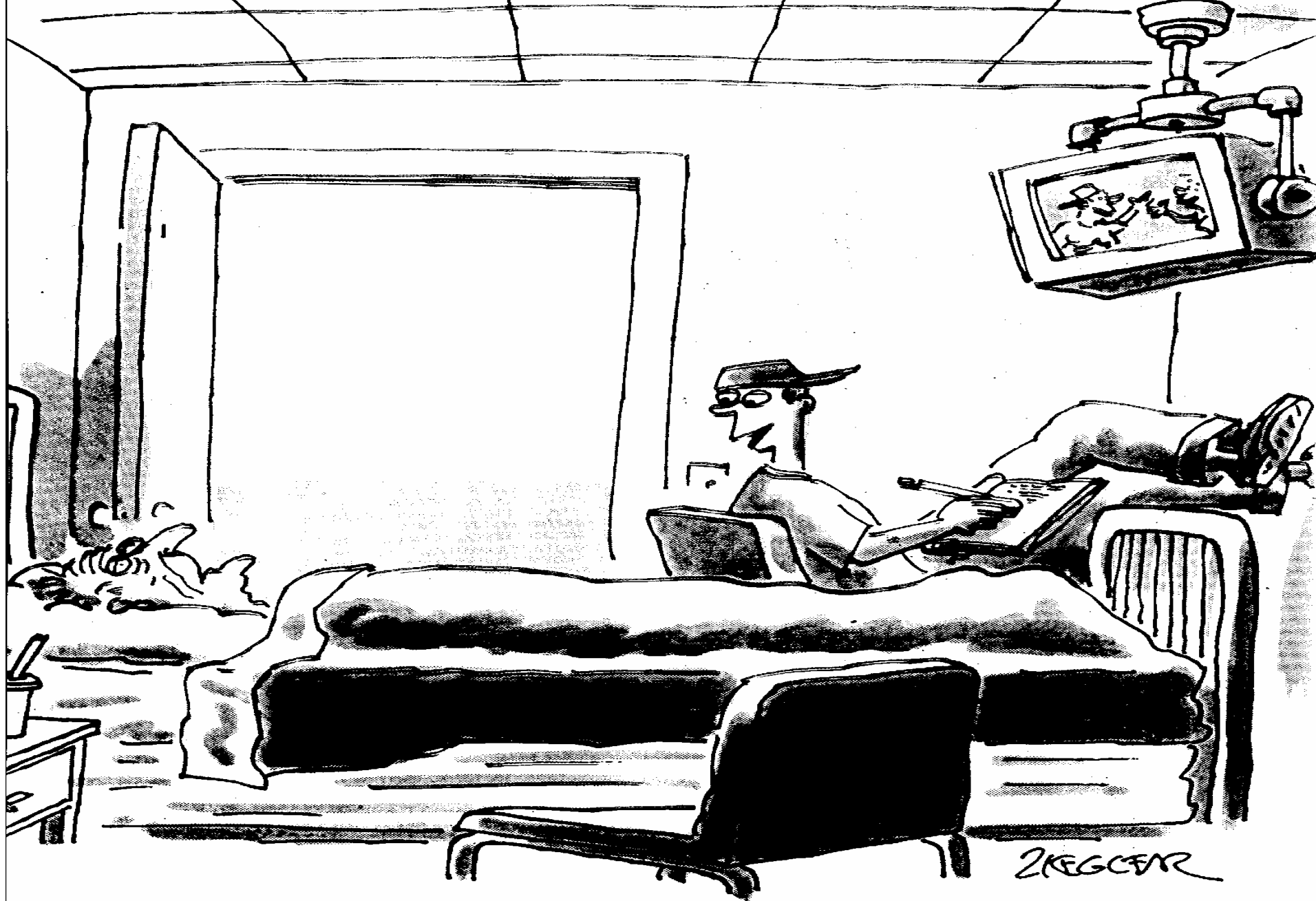
*Charles University, Prague*



# Pre-reform situation

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- 📄 Socialist totally nationalized system
- 📄 Centrally funded, centrally planned
- 📄 No quality control ( marginal in clinical laboratories)
- 📄 Very low status of patients



*Hey, Gramps, is 'deathbed' one word or two?"*

# Machiavelli: The Prince

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The innovator makes enemies of all those who prospered under the old order, and only lukewarm support is forthcoming from those who would prosper under the new.

Their support is lukewarm....because men are generally incredulous, never trusting new things, unless they have tested them by experience.

# Reform objectives

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📄 Funding mechanism change


📄 Privatisation

📄 **Quality control**

# QA projects

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 Hospital QA systems

 Nursing care quality

 Patient satisfaction studies

 Hospital accreditation project

# Stakeholders

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☞ Medical and nursing professional bodies

- Medical Chamber
- Specialist Organizations

☞ Hospital Associations

☞ Health Insurance Agency

☞ Ministry of Health

# Hospital accreditation project

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- Free travel  $\Rightarrow$  international experience
- 1994 - USAID information tour requested by Czech Hospital Association
- Project Objectives:
  - National (Hospital) Accreditation Standards
  - National Healthcare Accreditation Body
  - „Bottom-up“ approach



# Project team

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📄 Medical Chamber

📄 Hospital Associations

📄 MOH

📄 Health Insurance Offices

📄 GP Association

📄 JCAHO expert support ( CEE project )

# National (Hospital) Accreditation Standards

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- 📄 50 standards based on JCAHO experience
- 📄 extensive modification to Czech actuality
- 📄 focus on acceptability to medical and nursing staff
- 📄 VOLUNTARY accreditation
- 📄 presentation - national and regional seminars
- 📄 publication MOH bulletin

# National Healthcare Accreditation Body

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☞ Czech Hospital Accreditation Committee

– public-service independent corporation

☞ Status declared by MOH bulletin

☞ Accreditation

– 35 hospitals

☞ Consultation and education

# Accreditation project obstacles

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- ☞ Lack of incentives for healthcare institutions
- ☞ Hospital accreditation only
- ☞ No legislative background
- ☞ General economic situation - limited resources to invest into quality improvement

# Accreditation project assets

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☞ Quality improvement notion

☞ Hospital CQI policy **not only** in accredited hospitals - managerial tool

☞ Position of patients reinforced