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<tbody>
<tr>
<td>Title</td>
<td>Accreditation of Hospitals – Organizational Standards</td>
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<td>Approval</td>
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<td>AEMH Member Delegations</td>
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<td>Date</td>
<td>2009</td>
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</tbody>
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ACCREDITATION OF HOSPITALS

Approach to quality focus on structure, processes and results.

Personalized, sensitive, effective and quality health care rely not only on health technologies, good facilities, well designed health programs and adequate resources. Quality in health care is based on solid doctor-patient relationship. The human element of confidence and trust in the relationship between patient and doctor is necessary to improve health gains and medical outcome.

This specific reality needs to be taken into account when designing quality programmes. Hospital accreditation is a on-going activity to improve quality by an external and independent evaluation, assessing it’s capacity and degree of complying with international organizational standards. It sets analysis about staff and equipment (structure), work standards (processes) and some outcomes (results).

There are specific needs to take into consideration in order that accreditation will promote quality improvement:

- Focus on patients’ rights
- Measure patients’ satisfaction
- Provide clinical and non-clinical comprehensive information to patients

- Raising professionals satisfaction
- Reinforce the health professionals roles
- Enhance performance evaluation

- Clinical and non-clinical risk management
  - Development of a “quality culture” inside hospitals;
  - Clear policies on clinical and non clinical matters

Involvement of hospitals in quality improvements needs permanent scrutiny and dynamic adjustments in order to promote patient satisfaction, professional commitments and health gains. Hospital doctors guidance needs to be reinforced in all quality policies - development, designing, implementation and evaluation.

- AEMH advocates doctors’ involvement and leadership in quality-related activities
- AEMH stresses out that accreditation activities should be focussed on solid doctor-patient relationship for greater quality achievements

João de Deus