

# MANAGING QUALITY IN HEALTH CARE: PROCESS OF ACCREDITATION IN HEALTHCARE INSTITUTIONS IN REPUBLIC OF NORTH MACEDONIA

Sasho Stefanoski<sup>1\*</sup>, Tanja Stefanoska<sup>2</sup>

<sup>1</sup>European center for peace and development-University for peace est. by United Nations-Belgrade, Republic of Serbia, e-mail: [sasostefanoski@yahoo.com](mailto:sasostefanoski@yahoo.com)

<sup>2</sup>PHI Health Center-Polyclinic Idadija (Mlin Balkan), Skopje, Republic of North Macedonia, e-mail: [tanja2s@yahoo.com](mailto:tanja2s@yahoo.com)



**Abstract:** The quality of health care is a system of measures and activities that, in accordance with the modern achievements of medical, dental, and pharmaceutical science and practice, as well as the knowledge and skills of health professionals, increase the opportunities for the most favorable outcome of the medical treatment and reducing the risk of adverse effects on the health and well-being of the individual and the community. Improving the quality and safety of patients is an integral part of the daily activities of healthcare professionals, healthcare providers and all stakeholders in the healthcare system. Accreditation is the oldest and most widespread independent mechanism for external evaluation of the quality of work of healthcare institutions. The general understanding of the accreditation of healthcare institutions is defined as a procedure for assessing the quality of the work of a healthcare institution, based on the application of the optimal level of the established standards for work of a healthcare institution in a certain area of health care. In response to these challenges, several approaches, activities, measures, and programs have been developed to improve the quality of health care. In the Republic of North Macedonia, the quality of health care is recognized as one of the most important features of the healthcare system, both in the state sector and in the private sector. Continuous improvement of the quality of work and patient safety are an integral part of the daily activities of healthcare professionals and all other employees in the healthcare system. From a formal aspect, accreditation in the Republic of North Macedonia is mandatory and is performed at the request of a healthcare institution. Therefore, a separate institution has been established for this purpose, namely the Agency for Quality and Accreditation of Healthcare Institutions in the Republic of North Macedonia. The accreditation process includes five characteristic stages: 1. Preparation of the healthcare institution 2. Self-evaluation 3. Evaluation made by external evaluators of the adaptation of the institution work with the accreditation standards 4. Preparation of the final report and the decision for granting accreditation by the Agency for Quality and Accreditation of Healthcare Institutions 5. Continuous evaluation and monitoring of the execution of the quality improvement plan. Improving the health care is based on the values that are embedded in the concept of quality of work and the following adopted daily practice of healthcare institutions: patient orientation, safety, effectiveness, timeliness, efficiency, fairness. To achieve and implement each of the principles, it is necessary clearly to define objective, measurable and evidence-based standards, and indicators for the three basic aspects of health care: structure, process, and outcome/result. The standards, which are clustered in six chapters, may be divided into three categories: management standards, patient care standards and support service standards. According to the Law on Health Care, the Agency for Quality and Accreditation of Healthcare Institutions in the Republic of North Macedonia determines the standards for accreditation of healthcare institutions and evaluates the quality of the provided health care. The agency issues a certificate for a certain period, but not longer than five years. Until and including the third quarter of 2022, in the Republic of North Macedonia, a total of 20 healthcare institutions were accredited.

Keywords: *Care standards, Accreditation, Quality healthcare, Primary healthcare*

Field: *Medical Science and Research*

## INTRODUCTION

The efforts to provide quality treatment and care for patients, as well as to achieve better results for the health of patients are as old as the medicine. However, the organized efforts to assess and improve the quality of work in the health care system are more recent. The quality of health care is a system of measures and activities which, in accordance with the modern achievements of medical, dental, and pharmaceutical science and practice, as well as the knowledge and skills of healthcare professionals, increase the opportunities for the most favorable outcome of the medical treatment and reduce the risks of adverse effects on the health and well-being of the individual and the community (Carrasco-Peralta,

\*Corresponding author: [sasostefanoski@yahoo.com](mailto:sasostefanoski@yahoo.com)



2019). The continuous quality improvement is a constant process aimed at achieving a higher level of efficiency and success in the operation, as well as greater satisfaction of the users of health services and the healthcare providers. Continuous improvement of the quality of health care is based on the values that are embedded in the concept of quality of work and they are: customer/patient orientation, safety, effectiveness, timeliness, efficiency, and fairness. In response, various approaches have been employed globally to regulate healthcare quality internally and externally (Hussein, 2021). Therefore, improving the quality and safety of patients is an integral part of the daily activities of healthcare professionals, healthcare providers and all stakeholders in the healthcare system. Accreditation is the oldest and most widespread independent mechanism for external evaluation of the quality of work of healthcare institutions (Tabrizi, 2019). External healthcare regulation bodies have been promoting, reviewing, and implementing accreditation programs which promote compliance and improvement against organizational and care standards (Greenfield, 2021). The care for the patient, the desire to improve his/her health and to ensure a positive outcome of the treatment and appropriate care conditions has been present since the first days of the medical profession. Accordingly, at the same time with the emergence of the first forms of organized health care services, the interest in quality of health care appears, and the way to provide, to improve, assess, measure, and compare such service. A very important factor that makes this topic relevant is the growing pressure of the public opinion, which insists on evidence that the funds invested in improving the healthcare system bring benefits to patients. Decision-makers and even healthcare professionals face the challenge of demonstrating that the changes that are taking place have a positive effect on improving the health care and documenting their claim. Research shows that, even in cases where human, financial and other material capacities are high, there are differences in the quality of health care delivery, as well as variations in outcomes, for the same and similar patients (Mosadeghrad, 2021). These factors clearly imply that “mechanisms must be incorporated into the healthcare system to enable quality improvement, as well as its monitoring and control, and there must be corrective mechanisms to ensure improvement of quality of health care in cases where quality falls below pre-determined standards”. Hence, this paper will elaborate the quality management, the promotion of the health care, as well as the process of accreditation of the healthcare institutions in the Republic of North Macedonia.

## MATERIALS AND METHODS

The Agency for Quality and Accreditation of Healthcare Institutions in the Republic of North Macedonia (AQAHIM) has been established for accreditation of healthcare institutions. AQAHIM determines the standards for accreditation of healthcare institutions and evaluates the quality of the provided health care. Accreditation programs have performed an important, but often unrecognized, networking and knowledge distribution and unification within, and across, professions and organizations. The study aim was to investigate the current profile of external evaluation agency (AQAHIM) identifying their program features and significant changes and challenges in order to review improving of the quality of health care in Republic of North Macedonia.

## RESULTS

In the Republic of North Macedonia, the quality of health care is recognized as one of the most important features of the healthcare system, both in the state sector and in the private sector. Continuous improvement of the quality of work and safety of patients are an integral part of the daily activities of healthcare professionals and all other employees in the healthcare system. Continuous quality improvement is a constant process aimed at achieving a higher level of efficiency and success in the operation, as well as greater satisfaction of users of health care services and the healthcare providers. The strategy of AQAHIM for improvement of the quality of health care and safety of patients whose purpose is reaching a higher level of quality in the operation and safety of the patients, and the same are defined based on the following strategic goals: creating conditions that will enable the patient to be at the center of the health care system, improving the professional work of health care professionals based on the development of specific knowledge and skills, and in order to raise awareness of the importance of improving the quality of health care, creating conditions that will promote a culture for improving the quality of health care and safety of patients within the healthcare institutions, ensuring the safety, security and cost-effectiveness of healthcare technologies, providing financial incentives for improving the quality of health care and safety of patients. Improving the health care is based on the values that are embedded in the concept of quality of work and the following adopted daily practice of healthcare institutions: patient orientation,

safety, effectiveness, timeliness, efficiency, fairness. To achieve and implement each of the principles, it is necessary to define standards and indicators (Araujo, 2020) for the three basic aspects of health care, namely: structure, process and outcome/result. According to the Law on Health Care, the Agency for Quality and Accreditation of Healthcare Institutions in the Republic of North Macedonia determines the standards for accreditation of healthcare institutions and evaluates the quality of the provided health care.

### **Practical approaches for continuous improvement of the quality of health care**

Practical approaches for continuous improvement of the quality of health care is in several ways tailored within the healthcare system. One of those approaches is the cycle FOCUS – PDCA. It is important before all the FOCUS for a respective subject: (i) Find a process to improve, (ii) Organize to improve a process, (iii) Clarify what it is, (iv) Understand variation, (v) Select a process improvement. Afterwards it is necessary to approach the plan for improvement of the process (PDCA) that covers Plan - through which the deadlines for the funds, activities, trainings, and target deadlines are determined. Plans are determined for data collection, means for measuring the outcome and deadlines for meeting the objectives. Do - through which interventions and data collection are carried out. Check – through which the results from the data and the evaluation of the reasons for variations are analyzed. Act - through which measures are taken based on the obtained knowledge and the next steps are determined. The PDCA cycle is a checklist of the four stages that must be performed in order to walk the path from facing the problem to solving it. The four phases are: planning, implementation, verification, and action.

### **Accreditation process in Republic of North Macedonia**

The general understanding of the accreditation of healthcare institutions is defined as a procedure for assessing the quality of work of the healthcare institution, based on the application of the optimal level of the established standards for work of a healthcare institution in a certain area of health care (Oglesby, 2021). In the Republic of Macedonia, the accreditation is defined and it represent a procedure for assessing the quality of work of healthcare institutions based on the application of the optimal level of determined standards for operation of the healthcare institutions in a particular area of health care, i.e. particular branch of the medicine (Rulebook, 2020). The accreditation process includes five characteristic stages: 1. Preparation of the healthcare institution 2. Self-evaluation 3. Evaluation made by external evaluators of the adaptation of the institution work with the accreditation standards 4. Preparation of the final report and the decision for granting accreditation by the Agency for Quality and Accreditation of Healthcare Institutions. 5. Continuous assessment and monitoring of the execution of the quality improvement plan. From a formal aspect, accreditation in the Republic of Macedonia is mandatory and is performed at the request of the healthcare institution. A healthcare institution is accredited if the Agency determines that the established standards for a certain area of the health activity are fulfilled. Once the decision is made, the Agency issues an accreditation certificate to the healthcare institution. The manner of performing the accreditation process and the assessment of the compliance with the accreditation standards, as well as the necessary documentation for obtaining accreditation, are adopted by the Minister of Health at the proposal of the Agency. The certificate may be issued for: a certain area of the health activity that is performed in the healthcare institutions or the entire activity of the healthcare institution. The certificate is issued for a certain period, but no longer than five years. After the expiry of such period, the accreditation procedure can be repeated at the request of the healthcare institution. The certificate for accreditation of the healthcare institution is published on the website of the Agency and the Ministry of Health. The healthcare institution that has been accredited is obliged to report any changes related to accreditation to the Agency.

### **Standards**

Standards must be clearly defined, objective, measurable and evidence based. They may refer to the structure, the process, or the outcome of the work. The standards are regularly reviewed in accordance with the latest experience and achievements (Hussein, 2022). The standards, which are clustered in six chapters (management and administration, human resources, information management, risk management and safety of patients, treatment of patients and specific clinical services) may be divided in three categories: management standards, patient care standards and support services standards. Management standards refer to the management and administration of the healthcare institution. Based on development priorities, these standards cover only separate areas. Patient care standards are designed to monitor the patient's treatment process from the moment of admission to the healthcare institution, through assessment, planning and implementation of the treatment, to the patient's discharge from the institution. Support services standards refer to the supporting services which are such organizational

forms that assist (i.e. monitor) the treatment process. Three chapters have been prepared regarding the supporting services: risk management (including infection control, medical waste management, mass accidents, central sterilization and safe use of equipment, materials, medical devices, and premises), management with information and human resources. These standards cover only individual, priority areas.

### **Self-evaluation**

The self-evaluation is conducted by the institution for the purpose of evaluating the level of compliance of its work with the set accreditation standards. The self-evaluation provides possibility for the organization to review its work and evaluate it in accordance with the accreditation standards. Self-evaluation teams are formed based on the standards that cover the clinical and non-clinical areas in the institution. It is recommended for each of the teams to be composed of 3-5 members. The self-evaluation procedure is carried out by the teams for a maximum period of 6 months once it is concluded that the hospital is sufficiently prepared. During the operation, the teams should try to find out the extent to which the institution's operation is harmonized with the individual criteria. The fulfillment of the criteria is used to show the level of compliance that the healthcare institution has achieved for each criterion of the standards. The scale has scores from 1-5 (from not been introduced criteria to best application of the criterion).

### **External evaluation**

The external evaluation (Zisovska, 2015) represents an evaluation of the quality of the work of healthcare institutions based on the established standards for different areas of health care, by trained independent and external evaluators by the AQAH. AQAH forms a team for external evaluation from the list of external evaluators. The external evaluation that is conducted in the healthcare institution is conducted on the basis of: review of the prepared organizational and health documentation, informative talk with the management bodies of the healthcare institution, informative talk with the employees who participated in the self-evaluation procedure, tour around the healthcare institution and overview of spatial facilities, overview on the medical equipment of the healthcare institution, informative talk with the employees and the patients (interview), monitoring the work process by adhering to the written procedures. The Agency issues an accreditation certificate to the healthcare institution that meets the established standards. The accreditation certificate is issued for a period of 1, 3 or 5 years.

### **Conditions for acquiring accreditation**

The healthcare institution acquires accreditation for a period of one year, if it reached 40-50 % of the scores 4 and 5, not more than 20% of the scores 1 and 2 and the criteria that refers to the safety of patients in the process of treatment are not graded less than 4. The healthcare institution acquires accreditation for a period of three years, if it reached 51-70 % of the scores 4 and 5, not more than 15% of the scores 1 and 2 and the criteria that refers to the safety of patients in the process of treatment are not graded less than 4. The healthcare institution acquires accreditation for a period of five years, if it reached 71-100 % of the scores 4 and 5, not more than 10% of the scores 1 and 2 and the criteria that refers to the safety of patients in the process of treatment are not graded less than 4.

### **Costs for accreditation**

The costs for accreditation in Republic of North Macedonia are borne by the healthcare institution that requested the accreditation. The amount of the costs, based on the real material costs related to the accreditation procedure and the fees for the work of the external evaluators, is determined with an act adopted by the AQAH, which is approved by the Government.

## **DISCUSSIONS**

Accreditation, as the oldest and most well-known form of external evaluation of the work of healthcare institutions in the world, applies certain quality standards (Amaral,2022). Accreditation of health care facilities and organizations is often used to assess, assure, and improve quality of care. However, the evidence base related to the effectiveness of accreditation is unclear, as are the potential wider implications of this intervention on the health system (World Health Organization, 2022).

Accreditation means the systematic evaluation of healthcare centers. In this process, the opinions of a group of experts for evaluating healthcare organizations are noted and a decision is made on the fulfillment of the conditions for granting qualifications. (Ghadami, 2021).

The accreditation helps healthcare institutions to discover their own strengths and opportunities for promotion, while also better understanding of the goals and complexity of their work. When they realize this, institutions will be able to commit to short-term and long-term plans to improve its performance and start using available resources in the most efficient way possible. The accreditation process is conceived in a way to provide a framework that will enable healthcare institutions to define and implement the necessary changes and to set priorities for continuous improvement of the health care services they provide.

What remains unclear at this point is how accreditation achieves improved outcomes (Bracewell, 2021).

## CONCLUSIONS

Until and including the end of 2019, in the Republic of Macedonia, a total of 15 healthcare institutions were accredited, out of which 4 are institutions out of the scope of the state system, i.e. they are private healthcare institutions at the secondary and tertiary level. An interesting fact is that 3 out of 4 private hospitals have acquired an accreditation certificate for a period of five years, unlike the state hospitals where no public healthcare institution has acquired a certificate of the greatest importance. 7 healthcare institutions have acquired accreditation in a period of 3 years while 4 healthcare institutions have acquired accreditation in a period of one year. Out of the total number of granted accreditations, currently only 7 healthcare institutions, of which 3 are private, have active accreditation certificates, while for the remaining 8 healthcare institutions the accreditation has expired. From the above it can be concluded that the accreditation process organized in the Republic of Macedonia is a fairly new process and quite unknown to the managers of healthcare institutions, but does not play a major role among the citizens, because the accreditation process and benefits from this process do not have significant importance for the ordinary citizens due to the fact that this process is not known to them. According to the regulations and the theory, Macedonia is beginning to create a written academic literature regarding accreditation, but the written documents as well as the legislation are a good and solid basis for implementing accreditation in practice. It is important to mention that in the Republic of Macedonia all documents, legal provisions and accreditation procedures refer exclusively to institutions of the secondary and tertiary health care system. Written procedures, regulations and the possibility of obtaining accreditation is still not adopted for the primary healthcare system, which in the Republic of Macedonia is 100% privately owned and operates on the principle of capitation, including general practitioners, dentists, gynecologists and pediatricians.

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