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### The Evaluation of Hospital Quality in Europe – Towards a European System of Accreditation ?

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On the occasion of the general assembly of the EAHM that will take place on 16 November during Medica in Düsseldorf, the EAHM is organising a seminar on the theme of the evaluation of quality, and more precisely, accreditation, an external procedure for evaluation as a potential quality measurement instrument.

This encounter was prepared by the scientific committee of our association. It will give us an insight into the existing systems of quality evaluation in different European countries and the experiences they have undergone. This is important for us. We have noticed that certain systems have been altered and others abandoned because they are deficient or too complicated.

Based on this, we hope to arrive at a European model of accreditation, which our associations can recommend adopting. Since, according to the structure of the European union, healthcare is the responsibility of the member state, this is the only possibility to act on a pan-European basis in this area. The EAHM has appealed to the EU to actively support this initiative, in particular in relation to the European Commission in this domain, which should be known shortly.

The conclusions of a workshop organised by the European Commission on advancing the evolution of the single market have already clearly announced that the evaluation of quality, as well as the comparisons and improvements that ensue, must be considered as very important. From now on, it is necessary 'to arrive at, as a matter of priority, a definition, a measure and an evaluation of quality'.

The initiative launched by the EAHM has numerous advantages. Throughout Europe, hospitals are subject to transformation. Patients demanding higher quality, legal demands, greater financial demands by hospitals in the midst of stagnating, even regressive, public means, the modification of professional agreements for numerous healthcare collaborators, and competition between healthcare providers are just some of the examples of changes that face us. The experiences and the comparison of performance indicators between hospitals appear as a means to avoid possible therapeutic failures by looking for the cause of bad decisions.

Acertain number of these counter-performances are not necessarily attributable to the groups of professionals concerned, but are guided by the directives specific to each country. For example, the Dutch Volkskrant published the results of a study carried out by a well-known market research company, according to which the merging of hospitals carried out in the Netherlands would be counter-productive. The financial savings and the efficiency of planning expected from these large commercial entities would not be achieved. On the contrary, more bureaucracy and more management levels would result. This will increase the gap between patient and doctor, and, in consequence, provoke a clear loss of quality. This example shows that it is worth learning lessons from different situations, especially national.

Considering the importance of the question, we are delighted to welcome numerous colleagues to Düsseldorf and to establish this essential foundation for the improvement in the quality of services at a European level.

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