



Methods and Practices on Assessing Highly Specialized Providers of Health Care Within the European Union

A Literature Review

Introduction

1.1 Context of the Review

The European Commission created an agreement with the PACE-ERN consortium in order to develop some technical proposals involving an Assessment Toolbox and Manual according to the delegated decisions for evaluating and establishing ERNs. The purpose of the review for the project is to determine some published proof that are related to the evaluation, particularly relevant to services and networks for low prevalence, rare, or complex diseases.

1.2 Evaluation in perspective

Accreditation is viewed broadly as being advantageous to various stakeholders. Also important is the fact the benefits outnumber the drawbacks that is being imposed (Vivel et al., 2014). Accreditation has also been several times suggested as creating a firm association with the outcomes of patients across a wide range of areas and contexts. For instance, accreditation has been shown to be effective when it comes to reducing variation, as well as in maximizing the overall quality in colonoscopic performance in the United Kingdom. Grain et al (2015) has also suggested a similar idea, presenting that the implementation of the Guidelines regarding the actual certification of Hemophilia Centers widely contribute to the decrease of some health inequalities by means of standardizing care. For a lot of health services options available, the process of accreditation is often viewed as a positive motivation in order to attain best practice, which is an event in which credibility on a current practice, including future direction may be achieved.

Bason et al (2012) also reported that a specific factor, namely service accreditation, was a predictor of organizational and clinical performance during their study of the field of acute

care in Australia. It was discovered that accreditation performance is actually an accurate reflection of different factors which are important when it comes to the influencing of the quality of care, as well as continuous improvement. It was also found during the same study that even though the performance standards involving the national public health of the USA has raised some concerns regarding overall achievability, there were actually solid performance measures.

However, the overall effective presentation of different accreditation systems is quite complex. They become most effective when certain medical institutions become an active agent when it comes to the accreditation instead as a passive recipient of some compulsory evaluation. Such type of accreditation is best viewed as a phase which involves a continuous business improvement instead of a simple snapshot of various activities. As such, effective accreditation needs constant communication from the parties involved, including the medical institutions, accreditation and government agency. All of the accreditation systems also come with **their own assets and liabilities, placing specific demands on the appropriate and sensitive ways in which they are applied and developed** (Bowe, 2003). It cannot be assumed, however, that high quality improvement materials in a single setting are generally applicable to others, as the appropriateness and rationale of the accreditation outcomes may result to confusion regarding the ultimate endpoints of the process, particularly for programs mandated by the government where accreditation is used more often for public accountability and regulations instead of being viewed as a very effective tool in voluntary quality improvement and self-assessment.

1.3 Methods

This literature review is primarily based on a standard framework on methodology. It also involved using a rapid review approach, informed using an adapted systematic review design. Initial screening of the paper title possibly relating to the evaluation of services or networks has reduced the number involved. Abstract screening and reviewing has resulted to 66 papers which address aspects regarding methods in assessing networks or services and some papers with a wider relevance which were felt, turning to become useful in informing the development of the assessment program.



1.4 Gathering and Collating the Results

Different categories surfaced during the paper reading and were used in structuring the review findings. For the purpose of gathering the data, the papers were allocated to either one of the different categories, particularly the one which connected well to it. The process was only performed with the purpose of classifying and organizing data. Texts were used in contributing to whichever portion they offer useful information. On the other hand, the methodological papers were also further categorized to the particular methods being used, even though mixed method approaches were also the most common.

1.5 Summarizing and Synthesizing the Evidence

The approach used in summarizing and synthesizing evidences was developed in order to make sure that this review highlights the optimum evidence in informing the development of the assessment program. It mainly focuses on attracting together vital information regarding the methods and models used for evaluation.

There were few instances of where the papers offered an evaluation on methods that are used in order to assess different health care centers, processes or networks. There were some examples showing methods that are specific towards low prevalence, rare, or complex disease. It was quite typical for papers to properly describe the assessment of methods that are used, and then presenting the findings of evaluation along with a brief explanation of the approach limitations. It also became very evident after an overview that at its best, this review would not just be capable of describing the methods that are used in different contexts, highlighting perceived benefits and drawbacks, issues or comments with those methods.

Conclusion

The leadership quality comes with a positive influence on the quality, often mediated through different terms of quality improvement programs. A very important marker of leadership quality is the introduction of directors who are equipped with master's degrees.

Increasing the specialist volume is a certain factor which is not always associated clearly with enhanced outcomes. However, it is generally measured easily, with evidence for optimum levels in order to maintain competence.

References

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