

**MAT 03/SK/9/1**  
**Building Quality Development**  
**Programme in Slovakia**

sender 13 november 2003

## Introduction

- Consortium: IAH/PHC, UVA-AMC Social Medicine, Agis health insurance, HMS Bratislava; Trnava University
- Added value: expert consultants network; up to date on European, Slovak and Netherlands developments; building sustainable relations
- Expertise: quality development and assurance; health reforms; health policy in Slovakia; EU health policy; pre accession acquis
- A strong blend in state of the art, implementation and policy requirements for quality development in health

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## Programme context

- Health reforms in progress.
- Changing role of Ministry of Health
- 8-point quality development programme in progress
- Decentralisation / privatisation of health services
- Lack of accountability and quality monitoring in health
- Need for compliance with mainstream EU policies and instrument development
- Need for building broad commitment of stakeholders

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## Programme results

- Inventory and analysis of current situation in health quality
- Development of process and institutional indicators
- Development of guidelines and clinical indicators
- Advice to MoH on implementation of quality monitoring in the Slovak Republic

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## Approach of the Consortium

- Formation of integrated multi-disciplinary taskforce of consultants, beneficiary and stakeholders
- Development of sustainable learning approach through case studies: building “better practices”
- Participatory advisory process with focus on technical appropriateness, stakeholder commitment, sustainable development, match with EU policies, legal and regulatory framework

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## Inception phase

- Task force formed
- Methodology determined
- Resources identified
- Stakeholder network negotiated
- Related initiatives included

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## Phase I

- Inventory of experiences and practices
- National reference center formed
- Reference manual established
- Initial set of process and institutional indicators
- Case study areas identified
- ToR for case studies made

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## Phase II

- Process and institutional indicators tested and revised
- Guidelines and clinical indicators defined, prioritised, fieldtested
- Strengthening stakeholder network on quality monitoring
- Maintain outcomes in reference manual / training modules
- Framework for implementation presented

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## Phase III

- Integrated advice on quality monitoring
- Sustainable network of stakeholders
- Endorsed lists of indicators and guidelines
- Endorsed implementation modality
- System design workshops; presentation forum

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## Project management

- Trnava University and Health Management School as well embedded national partners
- National, young consultant for day to day liaison and logistics - supervision Dr. Rusnak
- Quarterly Consortium meetings in Netherlands / Slovakia
- Heidelberg (IAH) projectmanager and contactperson for Sender

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## Assumptions and risks

- Sufficient staff and competence with beneficiary gets full attention
- Progress in overall quality development programme (legal and regulatory framework) will be monitored
- Stakeholder commitment is on the agenda from day 1
- Integration and coherence of related initiatives is negotiated

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## Conclusion

- The Consortium has experience in all aspects of the programme and a strong presence and monitoring in European policies and practices (Rusnak, Klazinga)
- Presence of Slovak partners and consultants allows for well informed management decisions and flexibility to adapt to changing conditions and opportunities

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