



# **ANNUAL REPORT**

## **2020 - 2021**



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# EXECUTIVE SUMMARY

This annual report details the activities undertaken by the International Society for Quality in Health Care (ISQua) from October 2020 to September 2021.

ISQua's vision is to be the leader of a transformation in health and healthcare worldwide. Our presence has continued to expand over the past year, and we are proud to have contacts in over 70 countries.

We highlight the key achievements, challenges, changes, and updates from the past year for each department and programme.

## Key highlights from the past 12 months include:

- ▶ The response from the ISQua Staff to the ongoing changes due to the COVID-19 pandemic. The staff ensured the continuation of all programmes while dealing with new ways of working and maintained consistent contact with our Members.
- ▶ An excellent virtual conference in July 2021 with over 1,000 attendees. 90% of attendees surveyed said they would recommend to their colleagues.
- ▶ A record number of active Fellows on the Fellowship Programme, with a growth of 66% since September 2020
- ▶ 82 scholarships were awarded to recipients in Low and Lower-Middle-income countries and Latin America to attend ISQua's Virtual Conference and complete the Fellowship Programme
- ▶ 53 scholarships were awarded to patients and patient representatives to attend ISQua's Virtual Conference and complete the Principles of Person-Centred Care Specialist Certificate.
- ▶ A successful launch of our new Journal –IJQHC Communications
- ▶ Supporting and promoting the 3<sup>rd</sup> World Patient Safety Day with a showcase webpage and resources

# FOREWORD BY THE PRESIDENT – JEFFREY BRAITHWAITE



During my first year as President of ISQua, we experienced a profoundly changed world. An ongoing global pandemic, climate-induced pressures on populations, increasing gaps in equity come to mind immediately – and as a result, there is the constant reality of economic and personal hardship for many. Despite the extraordinary challenges of the previous 12 months, our Society has remained operational, highly productive, and full of values-driven advice and support for our stakeholders. This is a testament to the enormous dedication of our members, the Board and especially the staff who support us.

Collectively, ISQua stakeholders have been working to improve the safety and quality of health care worldwide for more than three decades. While the COVID-19 pandemic still dominates life in every country, with highly varying infection levels, vaccination and resolve, our mission continues. Many times this past year, I have witnessed stakeholders of ISQua coming together at meetings, educational events, external evaluations, and many other activities, even under the most difficult of circumstances, as a powerful group to recognize each other's challenges and deliver evidence-based and practical support to members.

They say that when the going gets tough, the tough get going. With the disruptions of a worldwide pandemic, we drew on our reserves of creativity, agility and grit to continue developing and delivering programmes and resources to inspire and drive improvement in health and the safety and quality of health care everywhere. A highlight was the 37<sup>th</sup> annual conference delivered in a virtual format, one year delayed, attracting more than 1,000 registrations. We sadly never made it to Florence, Italy, the original location of the conference. Still, registrants zoomed in over three days to vibrant and stimulating presentations and discussions with exposure to exciting research, many new ideas, and fresh strategies for creating safer, high-quality care. A noted example of our ingenuity

was the successful planning and delivery of several virtual mini-conferences in the lead-up to the 37<sup>th</sup> conference.

Please be sure to mark Brisbane 2022 in your calendar for ISQua's 38<sup>th</sup> conference. Save the date: **17<sup>th</sup> - 20<sup>th</sup> October 2022**.

In partnership with our publisher, Oxford University Press (OUP), we were pleased to launch another initiative - the International Journal for Quality in Health Care Communications (IJQHC Communications). This open-access journal meets the need for high-quality, peer-reviewed articles related to quality and safety, emphasising implementation science. We welcomed Dr Emma Sacks as inaugural Editor-in-Chief. Dr Sacks is Associate Faculty in the Department of International Health at Johns Hopkins University School of Public Health and serves as a consultant for UNICEF and the World Health Organization on perinatal and paediatric quality of care.

We have extended our commitment to strengthening engagement in lower- and middle-income settings. We continue to support staff and colleagues in many countries, and we intend to accelerate our involvement wherever possible such as through tendered contracts in developing settings. This is the rationale for ISQua's existence – to share learning and support countries in need during normal times and especially when a crisis hits – in this case, the pandemic.

In more innovation, we bedded down our Person-Centred Care Community of Practice. This grew out of the Advisory Forum and Advisory Committee on Partnerships with Patients. The Community brings together patient representatives, advocates and practitioners with interest in person-centred care. Our two new Honorary Advisors in Person-Centred Care, Anna Edwards and Isabela Castro, have settled into their Board roles and provide excellent advice on patient perspectives.

The ISQua Education programme has continued to deliver courses and develop new opportunities. The Principles of Person-Centre Care is an increasingly important part of the education programme, attracting a Specialist Certificate in Person-Centre Care.

The ongoing work behind the scenes to run the company continued apace with a significant overhaul of ISQua's many policies and procedures.

None of this would be possible without our team of dedicated staff in the Dublin office. These past 12 months, they navigated the personal challenge of a pandemic and hybrid working arrangements while maintaining very high workloads and the highest professional standards for our Society.

After five years of sterling, dedicated and innovative contributions, we wished farewell to our CEO, Dr Peter Lachman. We welcomed new Chief Executive Officer Dr Carsten Engel in May 2021, and we look forward to his fresh perspectives and guidance at the helm.

Dr Engel's passion for quality and safety in health care internationally is very well known. Dr Engel has been a member of ISQua's/ISQua EEA's Accreditation Council since 2010 and Deputy Chair, 2016-2021; he has been recognized as an ISQua Expert since 2013 and was elected to the International Academy of Quality and Safety in 2019. He has contributed a great deal to the development of ISQua's International Accreditation Programme (IAP) and has been an ISQua EEA surveyor since 2010.

The Office said goodbye to highly respected colleagues Aoife Dowling, Eleanor Keegan, and Heather Wilson during the year. Thank you, and best wishes from all of us.

As to collaborations, we are also focused on the continued growth and development of our Strategic Partnership programme with key allies: amongst others, we have fruitful relationships with the World Health Organization (WHO); International Hospital Federation (IHF); Patient Safety Movement Foundation (PSMF); National Association for Healthcare Quality (NAHQ); International Ergonomics Association (IEA); and The Centre for Patient Safety and Clinical Risk Management (CRM).

Dr Ezequiel Garcia Elorrio has expertly filled his new role as President-Elect. And of course, my close colleague and predecessor as President, Wendy Nicklin, provides truly remarkable leadership as Immediate Past President and has done so in other roles with ISQua over many years. I thank Ezequiel and Wendy for their wise counsel to me and their dedicated service to the whole ISQua community.

All-in-all, on behalf of the whole ISQua community, I look back on 2020-2021 with mixed emotions. It has been a year of mighty challenges and pandemic-induced

setbacks for many of us, but there is hope on the horizon. We have achieved much despite the headwinds. For the future, ISQua has a critical role in guiding health systems through the roller coaster they face, providing leadership in developing safe, quality health care that is equitable and sustainable. Together, let's celebrate our successes and look forwards to further improving our knowledge, building our networks and making our voices heard wherever and whenever we can.

**Professor Jeffrey Braithwaite, BA, DipLR&theLaw, MIR (Hons), MBA, PhD, FIML, FCHSM, FFPHRCP, FAcSS, Hon FRACMA, FAHMS**  
**President of ISQua**

# FOREWORD BY THE PRESIDENT-ELECT – EZEQUIEL GARCIA ELORRIO



I had the honour of joining ISQua's board one month before one of the most extensive worldwide tragedies of my life began – the COVID-19 pandemic. Since then, there have been tremendous changes in every community worldwide, particularly for healthcare systems. Indeed, we live in a new reality.

During those first months, working closely with the staff and fellow board members, I felt tremendous energy and willingness to help. As well, I feel proud of belonging to our society. During 2020 and 2021, despite the challenges of the pandemic, ISQua has become a beacon for the cause of health systems quality and its impact on how countries dealt with the pressure of satisfying needs related to the primary and extended provision of health services.

The pandemic has revealed more significant inequalities than first presumed, especially in less-resourced settings. There are great difficulties in providing care, accessing and using vaccines, and supporting those affected by this terrible condition and others neglected during this event.

When at the end of 2020, I had the privilege of being designated president-elect by my peers, I saw it as one of the greatest honours I have ever received. I stood for that position since I have a great desire to contribute and impact the global quality community in a more active role and join with the collaborative efforts of other stakeholders. I have been participating in our society's activities for the last 20 years, and I feel at home working with colleagues that share the same aspirations.

So far, the experience of working with Wendy Nicklin, past president, and Jeffrey Braithwaite, current president, has been extraordinary since I have learnt a lot from their wisdom and decision-making model. As well, I have had the opportunity to

contribute fully and provide my insights. Jointly discussing the challenges we face and will face with my fellow board members and staff has been a most enjoyable learning journey. I see myself as part of a team that wants to improve and impact our members and stakeholders' different environments and realities.

A particular note should be made about the transition of CEOs where after five years of a vibrant and energetic performance, Peter Lachman was succeeded by Carsten Engel. During Peter's tenure, ISQua has extended its presence in different regions of the world. This has been shown in the diversity of new members and the current composition of our board. Peter's efforts to maintain our society and keep its momentum going, along with the staff and board members during a period of tremendous hardship, was very much appreciated. Thanks, Peter, for so much. I wish you the best and would like to thank Carsten, who stood up to fill this position during tumultuous times. For what he has done already, I feel that the office is in excellent hands.

The last year has proved that we could all make joint efforts to sustain our programs, adapting to new realities and needs. The successful virtual conference is proof of that. With the support of our Italian colleagues and vital planning and commitment from staff, we deployed a world-class event with high rates of participation and satisfaction from attendees. Lots of lessons were learnt, to help us reflect on how conference content and networking will be experienced in the post-covid world. Other programs like accreditation, education, the ISQua Journal and communities of practice keep functioning seamlessly, thanks to the strong efforts of all our stakeholders.

Quality of care has been an aspiration for health systems for decades, but now we have an international mandate to reduce inequalities and support our members and other stakeholders during the post-pandemic period. We must have a strong voice to keep influencing policies to prevent harm, suffering and waste.

We need to keep reinventing ourselves to adapt and address the needs of this new environment, and we are moving in the right direction for that. Our mission is solid, and we constitute a valuable group of people who want to transform healthcare delivery. Altruism and collaboration will be critical for this new phase. We need to succeed for patients, families, providers, and communities who deserve better.

Finally, my utmost desire is to give back to ISQua during these difficult times, bringing people together. To contribute to the expansion and sustainability and, along with my fellow members and staff, deliver evidence-based, impactful and culturally sensitive interventions and make all voices heard. I count on you for that too.

I wish every one of you and your loved ones the best for times to come.

**Ezequiel García-Elorrio MD MSc MBA PhD**

# NOTE OF APPRECIATION FROM WENDY NICKLIN, IMMEDIATE PAST PRESIDENT



This I have been honoured to serve on the ISQua Board for over ten years. Due to my role as Chair of the Accreditation Council, and then several successful elections as an Institution Member, then election as President-elect resulted in my tenure that has been longer than usual. I have experienced ISQua adjust to the move from Australia to Ireland and witnessed the profile grow from an organization known by a cherished few people in the quality and safety world to an organization known and respected globally by colleagues and partner organizations in the quality and safety arenas. One of my key goals as President was to strengthen the governance model. Many by-laws and other changes were implemented, and the Board has become increasingly effective.

The greatest memory of ISQua Board involvement has been the people I have worked with and who I will call colleagues and friends forever. We all learn something from those we have the privilege to know, and thus I have learned so much from all of you. Thank you for the privilege of serving on the ISQua Board, trusting in my leadership, and guiding and supporting me along the way. None of us does this alone – it is all about the people with whom we work.

My sincerest thanks are extended to all of the ISQua Staff. This team is second-to-none, and their commitment and expertise are major factors in our success. The CEOs I have worked with include the late Roisin Boland, Peter Carter, Peter Lachman, and now Carsten Engel. Each CEO adds their stroke of paint to the ISQua picture. I do not doubt that the picture will continue to become more vibrant and powerful. Thank you to my fellow Board members, past and present. Each and every one of you makes a difference and strengthen the ISQua impact. It is impossible to identify all I have had the privilege

to be associated with, such as colleagues in our partner organizations. For those not mentioned, please forgive me and know that I am appreciative.

While I am leaving the Board, I am not leaving ISQua. I look forward to continuing as a surveyor with ISQua's EEA and contributing in other ways to the many activities that are underway. In my capacity as an Expert and as a member of the Academy, other opportunities to provide input and assist in future directions may present themselves.

**Wendy Nicklin**

# FOREWORD BY THE CEO – CARSTEN ENGEL



On the 1<sup>st</sup> of May, I had the honour and pleasure of taking up the position as CEO of ISQua after the inspiring leadership of Dr Peter Lachman. I came to an organisation that had adapted remarkably well to the challenges faced during the pandemic. I came to a Board with high ambitions and a willingness to turn ambitions into action. And last but not least, I came to a staff full of energy and enthusiasm, a really wonderful team to join.

One of the odd things about the new normal is that I could not meet staff in person before September but as you will all have experienced, working virtually is possible in a way we would hardly have imagined two years ago. Nevertheless, I welcome the prospect of a gradual return of more regular face to face presence without renouncing the flexibility that working at a distance offers in many situations.

ISQua's engagement in accreditation was well known to me from my former position. I have enjoyed getting closer acquainted with the many other activities that ISQua engages in.

The networks of ISQua, our Members, Fellows, Experts, Academy and Partners are the greatest asset of ISQua. Herein rest the energy, passion and knowledge, and through the networks, knowledge achieves a voice and is accessible to those who need it. Noticeable, in the networks, flow is not one-way; all can both contribute and benefit. It is also significant that patients and families are now seen as sources of knowledge, members of networks, and persons with a voice that has something important to say. I have marked more than 1400 assignments written by participants in the Fellowship Programme. It has been a pleasure to see how the students in this programme, most of whom come from low and lower-middle-income countries, have engaged themselves in the learning journeys offered; the idea behind the programme is not just being able to

reproduce a curriculum, but also to reflect on it, based on one's own experience and practice, thus enabling the translation of knowledge to improvement. From the assignments I have read, it is clear to see that this is indeed happening. I am confident that the organisations that have encouraged and supported staff to join the Fellowship Programme will find that they receive a good return on their investment.

Joint regional programmes offer an opportunity to combine international content with content adapted to regional contexts and needs. The South-East Asia Joint Fellowship Programme, developed in cooperation with CAHO (Consortium of Accredited Healthcare Organizations), will be launched in early 2022 as the latest addition to this family of programmes.

The ISQua conference has been an annual reference point for me since I first attended the 2005 conference in Vancouver. It was a significant loss that the conference was unable to be held in 2020. We have in July 2021 proved that it is possible to deliver and attract attendance for a high-quality conference virtually. There can be no doubt that virtual events will continue to be an important part of our portfolio. They offer the opportunity for more continuous and affordable interaction with all members of our networks. Nevertheless, I greatly look forward to meeting the ISQua Community in real life in Brisbane in October 2022.

It is a great satisfaction that the time-honoured *International Journal for Quality in Health Care* has now been joined by an open access partner, the *International Journal for Quality in Health Care Communications*.

Accreditation has been at the heart of ISQua since the very beginning. The International Accreditation Programme attracts new clients every year. Yet this is not the time to rest on the laurels. The world changes, and so must accreditation. We plan to launch new programmes in 2022, and the tried and tested International Accreditation Programme will also move forward and remain the benchmark for healthcare accreditation.

I have met with our Partners, presented in the foreword by the President; much has been accomplished with them, and many opportunities lie ahead of us. It is a special pleasure to announce that we have updated our Cooperation Plan with WHO for 2022-2024. Among the contributions from ISQua is the group of Experts on National Quality

Policy and Strategy that provide technical advice to countries when requested by the WHO.

ISQua can and will play an essential role in what is shaping up to be a decade of transformation across the 2020s. The reaction to the Covid-19 pandemic has demonstrated that healthcare can move quickly in response to a crisis. So this is a pivotal moment for ISQua to deploy Knowledge-Network-Voice when the new normal is defined, and the knowledge needed to implement it must be generated and spread to all who need it.

All the fantastic members of the staff at the ISQua office, and I hope to help ISQua make a tangible difference as a catalyst for the challenges to come. With the engagement and participation from Board, Members and Partners, we will succeed.

**Dr Carsten Engel**

# CONFERENCE AND EVENTS

Over the past year, the events team aimed to provide leading international networking and educational events for all those involved in improving health and social care worldwide. All of this was conducted in a virtual and online setting.

## Virtual Conference 2021 (in place of Florence face-to-face)

Given the progression of the COVID-19 pandemic in 2021, it was decided to pivot the Florence conference to a virtual format. ISQua's 37th International Conference was held from 8th – 11<sup>th</sup> July 2021, with 1,050 delegates from 83 countries.

## Key Findings

Of the delegates surveyed:

- Over 85% of delegates found the virtual experience to be value for money.
- Over 90% of delegates would recommend the virtual conference to their colleague.
- 55% would attend another ISQua Virtual Conference this year.
- 40% would definitely attend ISQua 2022 in Brisbane, Australia.

## What the conference delegates had to say about #ISQua2021

Positive feedback from some of the delegates included:

*"In the virtual world, it's all too easy to feel disconnected - I think the mix of live and pre-recorded presentations helped to lessen the isolation somewhat."*

*"The recorded sessions allowed me to view more of the conference than would've been possible if only watching live, partly due to the time zone but also family and work commitments."*

*"Virtual session from global experts would be possible probably only when it's in this format - thoroughly enjoyed the sessions I attended."*

*"Superb speakers discussing cutting edge aspects of quality and safety. It was wonderful to see sustainability and climate highlighted. It would also have been good to have more balance with plenary speakers from low- and middle-income countries. ISQua must lead*

*in providing these leaders with an equitable opportunity to join the discussion at the top table.”*

## Summary

In summary, this was a very successful conference from the viewpoint of the programme, academic content, and the feedback received.

Considering this was ISQua’s first international virtual conference, there was a reputational risk, but this was reassured with the positive feedback received from our delegates. It proves that ISQua can successfully run an online event, with a caveat that this current way of providing knowledge, network and voice may only be a short to a medium-term solution.

## Virtual Events

Following the success of smaller virtual conferences in June and September 2020, the events team have held multiple virtual conferences.

Since last year's Annual Report, two virtual conferences have been held; the first was on 25<sup>th</sup> November 2020. The second was a joint conference with the International Hospital Federation (IHF) on 23<sup>rd</sup> February 2021.

### November Virtual Event

The November virtual conference, “Leading for Quality” was marketed as a promotion for the then Florence conference. It included speakers that would be taking part in the International programme. There were five speakers in total from Australia, Ireland, the UK, Tunisia, and Brazil. Over 100 delegates attended the conference. 80% of delegates surveyed stated that they were likely to attend the international virtual conference after the virtual conference.

### February Virtual Event

The theme for the February virtual conference was ‘Hospital Workers’ Wellbeing Matters’. There were ten speakers for this conference from the USA, Brussels, India, Hong Kong,

Ethiopia, Colombia, and Ireland. Over 100 delegates attended the conference. 95% of delegates surveyed said they would attend future events held by ISQua and IHF.

## 2022 and Beyond

### Brisbane 2022

Planning is beginning for the Brisbane conference in 2022. The first PPC meeting took place in August 2021, where the committee began discussing possible themes and tracks for the conference.

The call for abstracts will open in the last quarter of 2021, with registration planned to open shortly afterwards.

As a result of the ongoing COVID-19 pandemic, it was recommended to postpone the Brisbane conference to the end of 2022 as Australia has stringent rules on entry requirements for international delegates. The new dates for the Brisbane conference are 17<sup>th</sup> – 20<sup>th</sup> October 2022. The ISQua team is hopeful that there will be a relaxing of government guidelines by this time, and a full face-to-face conference will take place safely.

Following the postponement of the 2020 conference, it had a knock-on effect for future international conferences. With the local partner's approval, ISQua has rearranged our future conferences to:

- ▶ 2022 – Brisbane, Australia (17<sup>th</sup> – 20<sup>th</sup> October)
- ▶ 2023 – Seoul, South Korea (27<sup>th</sup> – 30<sup>th</sup> August)
- ▶ 2024 – Istanbul, Turkey
- ▶ 2025 – Sao Paulo, Brazil

# EDUCATION

## Strategy

The continuing backdrop of the pandemic throughout 2021 and undertaking a large-scale project to develop a new website and learning platform from January-July 2021 has led to a busy and challenging year. As the pandemic has peaked at different times across the world, our focus has been to provide learners, many of whom are frontline workers, with much needed additional support and flexibility over the last year, and this is ongoing.

Regarding the new website and learning platform, a series of significant challenging events resulted in an essential executive decision to discontinue the implementation of the new platform and revert to the previous system. This decision was not taken lightly given the size and scale of the project and inherent risks, but the correct choice was made. Fortunately, it was possible to recuperate the previous system with relative ease. Alongside the extensive work involved in building a new website and platform, the curriculum of the Fellowship Programme was also updated in early 2021, and new Learning Journeys were added in Patient Safety, Person-Centred Care, Quality Improvement, Advances in Healthcare, Leadership, and Measurement and Evaluation. The Learning Journey in Critical Crisis Thinking (launched in June 2020) proved to be particularly beneficial and prescient.

The number of participants on the Fellowship Programme has increased significantly. It is very positive to see a 66% growth rate of active learners over the last 12 months especially given the challenging circumstances of the global pandemic and system changes.

## Key achievements

The most significant achievement for the education team has been overcoming the challenges presented during the year to ensure the continuity and growth of programmes and delivery of a quality service.

We are also proud to have collaborated with CAHO India on a new International Webinar Series, which commenced in January 2020. These live webinars are proving very popular, with 7,019 registrations and 2,904 people in attendance across the nine sessions hosted to date on key topics in healthcare quality and safety; the series will run until December 2021. In addition, a broader collaborative agreement has been agreed with CAHO, which includes the development of Fellowship modules tailored to the needs of healthcare professionals in the South-East Asia Region (SEARO).

### Key achievements include:

- ▶ 66% increase in the number of Fellows since September 2020.
- ▶ Nine new Learning Journeys were created, including Patient Safety, Person-Centred Care, Quality Improvement, Advances in Healthcare, Leadership, and Measurement and Evaluation.
- ▶ 7,019 registrations and 2,904 attendees across nine live webinars in the ISQua/CAHO International Webinar Series.
- ▶ 82 scholarships were awarded to recipients in Low and Lower-Middle-income countries and Latin America for the Fellowship Programme.
- ▶ 53 scholarships were awarded to patients and patient representatives for the Principles of Person-Centred Care Specialist Certificate.
- ▶ Ten new graduates on the JCT Fellowship Programme (in Chinese).
- ▶ 34 people enrolled in partner courses with Medvarsity India.
- ▶ Record number of groups joining the Fellowship showing the importance of building knowledge and expertise in healthcare quality and safety in organisations.

### Challenges

The main challenges have been the ongoing disruption caused by the COVID-19 pandemic and the repercussions of a now-defunct website and learning platform. With only two education team members, the time and effort required to complete the extensive work to deliver a new website and entirely new learning platform significantly impacted other aspects of the education programmes. These challenges were addressed with positivity and a can-do attitude, and thankfully the number of participants in the programmes has remained robust.

## Changes

As noted previously, the main changes have been the disruption of working practices caused by COVID-19 and the discontinuation of a new website and learning platform project. Despite the unprecedented challenges, the education programmes have continued to grow steadily over the last 12 months.

## Programme Updates – Fellowship Programme

The Fellowship Programme currently has 1,147 active Fellows, which is a record high for the programme. This represents a growth of 66% since September 2020.



Nine new Learning Journeys were added to the Fellowship Programme in the first half of 2021. Learning Journeys are a structured set of Fellowship modules that help guide learners on their improvement journey.

There are currently 14 Learning Journeys available to all participants. It is also possible to customise a Learning Journey for Fellows based on specific backgrounds and areas of interest. They are extremely popular with organisations that wish for learners to undertake a shared learning experience to achieve organisation-wide objectives.

The format of Learning Journeys ensures that all participants contextualise and share their Fellowship experiences with the group and discuss lessons learned.

## Programme Updates – Joint Programmes

The Joint Programmes are the Latin American Fellowship Programme and the JCT (Joint Commission of Taiwan) Fellowship Programme. Each programme has been based on a new structure since 2020, ensuring that our partners are highly involved in developing the content and marketing of these programmes.

## Programme Updates – Specialist Certificates

ISQua Specialist Certificates are specifically designed for dedicated healthcare professionals. They provide ultimate focus in personal learning and in implementing healthcare improvement. The Specialist Certificate courses continue to experience steady growth, with 335 individuals currently enrolled across the five offerings. This represents an increase of 130 enrolments in the past year.

Specialist Certificate	No. of learners
Principles of Person-Centred Care	55
Clinical Applications in Person-Centred Care	27
Fundamentals of External Evaluation Surveying	71
Medication Safety	15
Introduction to QI & Patient Safety	167
Total	335

## Webinars

The below is a list of live webinars hosted by ISQua from October 2020 to October 2021. The majority of these have been added to our educational programmes.

Date	Topic	Presenter
<b>15-Oct-20</b>	Coproducing Healthcare Service and its improvement: understanding the “as is” system and the experience of its navigation	Professor Paul Batalden, Professor Tina C. Foster, and Mia

<b>20-Oct-20</b>	Critical Crisis Thinking Webinar 4: As the crisis develops – Sustaining the capability to respond	Professor Erik Hollnagel
<b>06-Nov-20</b>	A systems approach and reflections from Cambodia's effective COVID-19 response	Dr. Hok Kim Cheng, Dr Ly Sovann, Dr Premprey Suos, Dr Laurent Ferradini, and Dr Nilufar Rakhmanova
<b>01-Dec-20</b>	Critical Crisis Thinking 5 - After-the-Shock: Reconfiguration & Renewal or Retreat & Retrenchment?	Professor David Woods
<b>09-Dec-20</b>	WHO GLL & ISQua Webinar - From theory to practice: national approaches adopted in Namibia and Mozambique to improve the quality of health services	Dr Shams Syed, Dr Apollo Basenero, Ms Francina Tjituka, Mr Jeremia Nghipundjwa, Dr Bertur Alface, and Dr David Weakliam
<b>17-Dec-20</b>	Coproducing Healthcare Service and its improvement: Exploring the relevant science-informed practice	Professor Paul Batalden, Professor Tina C. Foster, and Martin Owusu Boamah
<b>21-Dec-20</b>	Critical Crisis Thinking 6: Systemic potentials management	Professor Erik Hollnagel
<b>28-Jan-21</b>	Critical Crisis Thinking – Final Live webinar	Prof Erik Hollnagel, Prof David Woods, Prof David

		Mendonca, Prof Jeffrey Braithwaite, Prof Erik Lofquist, Prof Marcos Borges
<b>18-Feb-21</b>	Coproducing Healthcare Service and its improvement: understanding the “lived reality of those we sometimes known as professionals” and the experience of its use	Professor Paul Batalden, Professor Tina C. Foster, and John Ballatt
<b>14-Apr-21</b>	Prioritization in Quality Management and Continuous Improvement	Dr Richard G. Greenhill
<b>15-Apr-21</b>	Coproducing Healthcare Service and its improvement - integrating and applying what we have learned	Professor Tina C Foster, Professor Paul Batalden, Dr. John Brennan, Dr. Julie K Johnson, Dr. Nilufar Rakhmanova, and Aricca Van Citters
<b>25-May-21</b>	Accreditation in 2030	Dr Carsten Engel, Wendy Nicklin, and Jacqui Stewart

# SCHOLARSHIPS

## Goals and Objectives

ISQua's goal was to increase the amount of patient and Lower Middle-Income participation at the 2021 virtual conference.

## Patient Scholars:

Looking at health from a patient perspective is imperative to achieving quality, safe, patient-centred care. The patient voice is acknowledged to improve outcomes at all levels of healthcare, for the patients themselves, other patients, the micro system and the macro system. Yet, while the value of patient engagement in healthcare outcomes is widely recognised, there are few practical strategies to optimise these interactions. ISQua hoped to redress this imbalance.

Because ISQua moved from an in-person to a virtual conference experience, ISQua did not pursue Patient Included status at this year's conference, as it did at 2019's conference in Cape Town. (The Patients Included charter shows an event is committed to incorporating patients' experience, who are experts in living with their condition while ensuring they are neither excluded nor exploited). ISQua would like to revisit this in future years.

## LMIC Scholars:

Over the last three years, ISQua launched several initiatives to address the problem faced by Low and Lower-Middle Income Countries, who the advances in quality and safety have left behind. Through ISQua's efforts, we see the improvements that our members' interventions have made, and we are very proud of our contributions.

The New Venture Fund helped ISQua continue to assist people who are unable to fund their continuous Quality Improvement education and put them in contact with experts who are willing to donate their time for the betterment of resource-challenged healthcare systems.

ISQua believes it is essential to find out what matters to patients and LMICs, and how their lived experience of the healthcare system can inform how we make it better. Relationships built between patients, LMIC and other industry delegates in the past have led to dynamic partnerships, and scholars remain involved in ISQua activities, sitting on the Board and Governance Committees.

The ISQua Virtual Conference provided an opportunity for patients and LMIC scholars to meet and build relationships with the people who make decisions. Ultimately, this is an opportunity for the system to learn from patients and LMIC participants, understand what matters to them, and bring all stakeholders into the centre of work practice.

## **Result**

We were delighted to be able to significantly increase the number of WHO/ISQua Scholarships this year. Conference registration and ISQua Fellowship & Membership enrolment were awarded to 82 recipients from 29 Low and Lower Middle-Income countries.

For the third year, ISQua also offered patient scholarships. Scholarships included Conference registration plus enrolment in the Specialist Certificate: Principles of Person-Centred Care. Again, the number of scholarships available significantly increased from 7 in Cape Town 2019 to 53 in 2021. This resulted from the removal of travel and expenses associated with an in-person Conference.

# LUCIAN LEAPE PATIENT SAFETY FELLOWSHIP

The Lucian Leape Patient Safety Fellowship Award was established in 2018 and announced at ISQua's 35th International Conference in Kuala Lumpur, Malaysia. This programme aims to fund physicians and health care leaders in developing countries to advance and expand their expertise in patient safety, with the resultant improvement of the safety of patients in their local country/jurisdiction/area.

This project comes under strategic objective 6 – Regions and LMIC and extends to strategic objective 3 – Education and Knowledge Sharing.

We received many excellent applications for the 2020 award. A panel comprising of Prof Lucian Leape, Prof David W. Bates, Dr Uma Kotagal, Dr Tricia Woodhead and Dr Emmanuel Aiyenigba was convened to shortlist, interview and select the best applicant.

The standard of applicants was so high that the panel was able to choose the 2020 recipient, Dr Rhoda Kalondu Kyalo (Kenya), and also the 2021 Fellow.



We are delighted to announce that **Dr Stephen Taiye Balogun (Nigeria) MBBS, MPH, CSSGB, FISQua, SMC®, PMP®**, is our ISQua Lucian Leape Patient Safety Fellow for 2021.

*"The Lucian Leape Fellowship programme will further develop my knowledge, skills and experience on patient safety, and support me to apply global best practices in my local context. The network that it creates will further improve the environment for partnership and high-level stakeholder engagement in my country and beyond so that I can share what I learn and, in turn, share lessons from Nigeria with the wider ISQua community. Nigeria is the most populous country in Africa yet with poor health indices. Safety and quality stand at the centre of improving these health indices; therefore, the*

*Fellowship will strengthen the leadership role I have assumed in improving safety and quality across all levels of care.”* **Dr Stephen Taiye Balogun**

Rhoda and Stephen have both begun their Masters in Quality and Safety in Healthcare Managements from the RCSI Graduate School of Healthcare Managements, Dublin, Ireland, as part of their Fellowship.

We look forward to supporting them to achieve their goals over the next year and beyond.

Applications for the 2022 Lucian Leape Patient Safety Fellow will open in early 2022.

# MEMBERSHIP

Our key aim for Membership is to retain members and to recruit new members

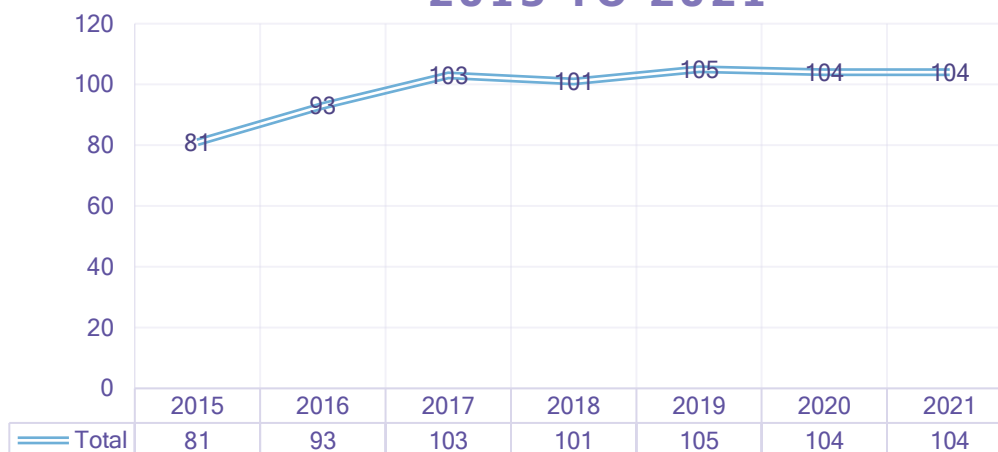
## Increase of members 2015-2021

We are delighted with the continued steady growth of Membership year on year. In 2017 we reduced the fee for an applicant to join the Fellowship Programme, with Membership to €450 (usually €500 for the Fellowship Programme & €150 for Members). This helped increase the number of participants on the Fellowship Programme and the membership number overall. In 2020 we removed the option for applicants to apply for the Fellowship without Membership.

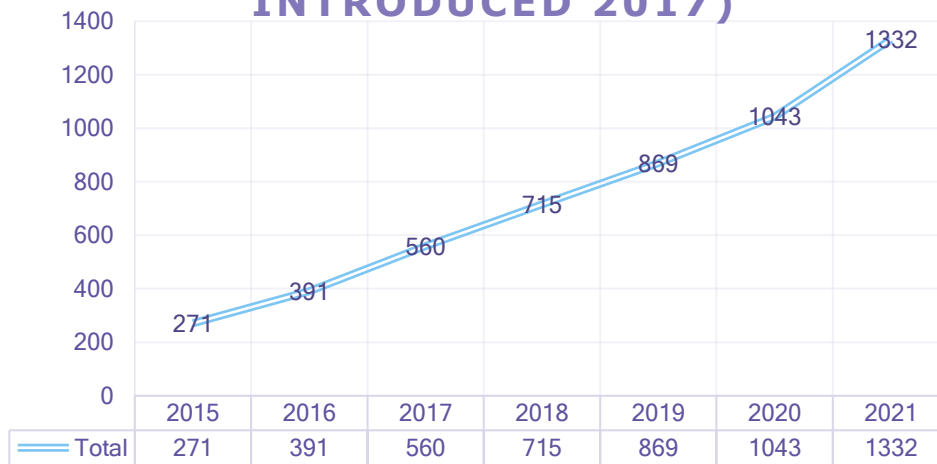
In late 2019, we introduced a fourth-tier membership fee for both Individual and Institutional Members, which falls in line with the four categories of the World Bank ratings for country economies. A reduced rate was added for Members from Low-Income Countries.

Due to the ongoing COVID pandemic, we expected to see a downturn in renewals and new signups; however, we were delighted to see that this was not the case, and we would like to sincerely thank our members who have remained with us.

### INSTITUTIONAL MEMBERS - 2015 TO 2021



### INDIVIDUAL MEMBERS - 2015 TO 2021 (INCLUDING MEMBER FELLOWS INTRODUCED 2017)



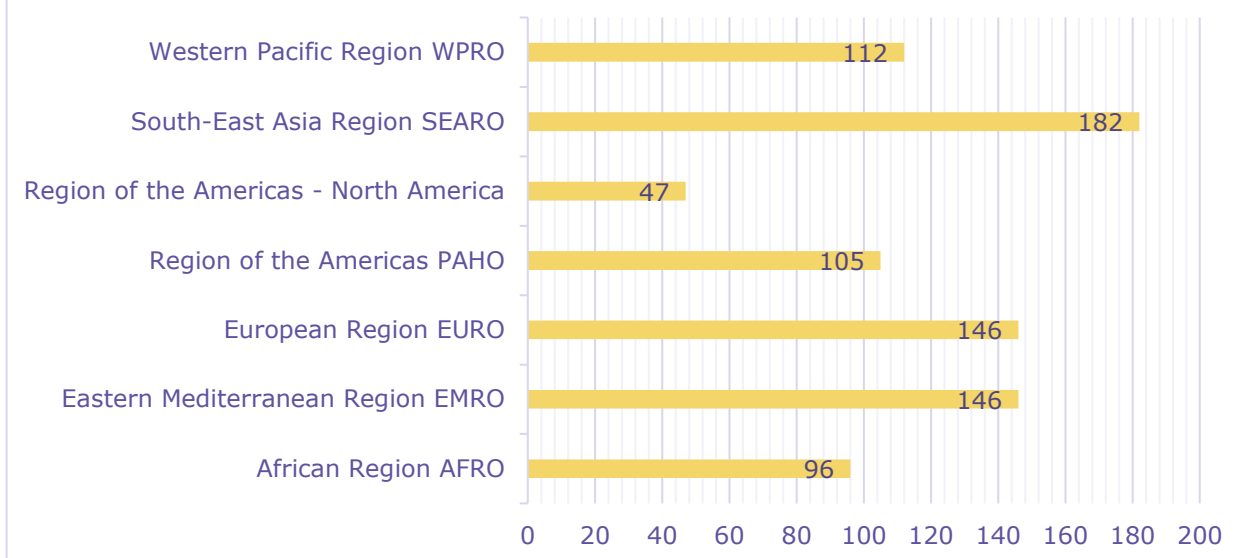
## ISQua Guest

In 2019 we introduced our ISQua Guest membership type. ISQua Guest is a free membership type, open to anyone to see what ISQua has to offer.

ISQua Guests can access a sample Education Course featuring a range of educational content from various ISQua Fellowship modules, such as Leading for Quality and Safety, Person-Centred Care, Patient Safety and Quality Improvement.

They also receive limited access to our recorded webinars, podcasts, reports and presentations.

## ISQua Guest 2021



# INTERNATIONAL JOURNAL FOR QUALITY IN HEALTH CARE (IJQHC)

## Strategic Priorities

The *International Journal for Quality in Health Care* (IJQHC) is a leading international peer-reviewed scholarly journal addressing research, policy and implementation related to the quality and safety of health care and health outcomes for populations and patients worldwide.

Strategic priorities over the past year have been to:

- Expand the team of Deputy Editors
- Improve the consistency and efficiency of editorial decision-making processes
- Improve handling time for submissions
- Move to an online-only and continuous publication model
- Ensure that foundations are laid for a competitive Journal Impact Factor (JIF)
- Deliver on existing commitments for Supplements
- Recruit an Editor-in-Chief and Deputy Editors for IJQHC Communications
- Launch IJQHC Communications and establish a close working relationship with its parent journal, IJQHC
- Begin the process of nurturing the next generation of editors.

## Major Developments

Despite the challenges resulting from the COVID-19 pandemic, there has been considerable progress against the above objectives. Key highlights are summarised below:

### Expansion of the team of Deputy Editors and role demarcation

- ▶ Three new Deputy Editors were appointed, namely Assistant Professor Sonali Desai (Harvard Medical School, US), Dr Paul O’Conner (National University of Ireland, Galway, Republic of Ireland) and Professor Nick Rich (Swansea University, Wales), and inducted into all aspects of the Journal’s processes.

- ▶ This now brings the number of Deputy Editors to eight plus a Statistical Editor (Professor Gopal Netuveli).
- ▶ Two Deputy Editors are now jointly responsible for each of the non-research sections of the Journal, i.e. Editorials (Professors David Greenfield and Gopal Netuveli), Perspectives (Professors Nick Rich and Rosa Sunol), Frontiers for Improvement (Assistant Professor Sonali Desai and Dr Ezequiel Garcia Elorrio) and Letters (Dr Usman Iqbal and Dr Paul O'Connor), which is important to drive additional value for readers over-and-above the original contributions.

## **Improving consistency and efficiency of editorial decision-making processes**

- ▶ The monthly Editorial Board meetings provide an opportunity to understand and, where appropriate, address variations in practice.
- ▶ Key decisions taken and processes implemented include:
  - Only sending papers for peer-review if they have a reasonable chance of being accepted
  - Using peer-review to improve the quality of papers we are likely to publish
  - In-house statistical review whenever this is felt indicated by the Deputy Editors
  - Having a threshold on the number of reviewers invited before turning down a paper because of an inability to find suitable reviewers
  - Asking Deputy Editors and Reviewers if they think a paper warrants an accompanying editorial and, if so, whether they would be willing to write this.

## **Improving handling time for submissions**

- ▶ The Journal's turnaround time for papers was uncompetitive – this has now improved from Spring 2020 when it was 57 days for time to first and final decision respectively to the current 52 days, respectively

## **Move to online only and continuous publication model**

- ▶ The last print edition was published in August 2020.
- ▶ All papers are now published as soon as they are ready; this has resulted in an improvement in the time from submission to publication compared with Spring 2020.

## **Ensure foundations are laid for a competitive Journal Impact Factor**

- ▶ The above-described rationalisation of article types was instituted in January 2021; this should pay dividends by enabling more careful control and demarcation of the denominator of original articles
- ▶ The added value content of the Journal should also help with increasing numerator considerations
- ▶ This will take some time to manifest in the Journal Impact Factor as there is an in-built lag in this metric
- ▶ The Journal Impact Factor increased from 1.957 in 2019 to 2.038 in 2020.

## **Deliver on existing commitments for Supplements**

- ▶ In January 2021, we published a supplement on 'Human Factors and Ergonomics in Health Care', guest-edited by Pascale Carayon, Sue Hignett and Sara Albolino.
- ▶ The supplement on 'Coproduction of Health', guest-edited by Paul Batalden, Eugene Nelson and Tina Foster, should be ready for publication shortly.
- ▶ The supplement on 'Patient-Reported Outcomes (PROMs) in Mental Health Care', guest-edited by David Roe and Jan Mainz, will be published in early 2022.

## **Recruit an Editor-in-Chief and Deputy Editors for IJQHC Communications**

- ▶ As per the plan communicated in my last report, we progressed plans to launch a waterfall Journal to address the challenges authors face from low- and middle-income countries in getting their work published in peer-reviewed journals.
- ▶ After a competitive process, Professor Emma Sacks from Johns Hopkins School of Public Health, US, was appointed. She took up the role in January 2021.
- ▶ We also appointed Assistant Professor Richard Greenhill (Texas Tech University) and Dr Patrick Palmieri (Regional Director for Evidence-Based Health Care South America) as Deputy Editors in January 2021.

## **Launch IJQHC Communications and establish a close working relationship with its parent journal, IJQHC**

- ▶ IJQHC has successfully launched with its first publications in July 2021: <https://academic.oup.com/ijcoms/issue>
- ▶ A waterfall has been successfully created to pass on papers from IJQHC that are deemed more suitable for IJQHC Communications for their consideration
- ▶ The Editor, Deputy Editor and Editorial Apprentices of IJQHC Communications attend IJQHC Editorial Board Meetings to, where appropriate, ensure alignment of processes and procedures.

## **Begin the process of nurturing the next generation of editors**

- ▶ It is important to identify, train and nurture the next generation of editors of IJQHC and IJQHC Communications
- ▶ After a competitive process, we successfully recruited four outstanding future leaders to a 1-year Editorial Apprentices, which began in March 2021.
- ▶ The Editorial Apprentices are: David Crosby and Emily O'Dowd (IJQHC); and Erica Barbazza and Elom Otchi (IJQHC Communications)

- ▶ David Crosby and Emily O'Dowd have been successfully inducted into IJQHC, trained in using Scholar One, attended Editorial Board meetings, worked with Deputy Editors to handle papers, and are now managing their papers under the direction of Deputy Editors.

Furthermore, they are now undertaking a series of strategic projects to develop IJQHC further, focused on:

- Maximising diversity of contributors
- Targeting leading experts in quality and safety
- Developing the Journal's social media strategy.

## Additional achievements and activities

- ▶ The Journal is now ranked 77/150 in Health Care Sciences and Services, and 63/112 in Health Policy and Services
- ▶ Two journal-specific collections have been promoted ("Best of 2020", "Safe Maternal and Newborn Care"); and content from the IJQHC has been featured in cross-journals collections ("Public Health Highly Cited", "Early Career Researchers")
- ▶ Active email registrants at the end of 2020 were 5,259
- ▶ Full-text downloads in 2020 numbered over 1.4m.

## Challenges

- ▶ Database of reviewers: Despite numerous complaints from Deputy Editors, there appears to have been little progress in cleaning up the reviewers' database. This needs to be resolved.
- ▶ Supplements and Supplements Editor: The process of soliciting and progressing Supplements is opaque and sub-optimally managed. We attempted to appoint a Supplements Editor but failed to fill the position. Unless of strategic advantage to ISQua, Supplements should be abandoned. If these are to be continued, these must at minimum be agreed with the Editor-in-Chief. A dedicated Supplements

Editor/Deputy Editor needs to be identified to manage the process of bringing the Supplement into fruition.

- ▶ Social media strategy: The Journal's social media strategy is poorly developed. There are considerable opportunities to expand the reach and impact of the work published in IJQHC. However, this will need additional investment and considerable effort over the next 2-3 years at a minimum.

**Aziz Sheikh**

**IJQHC Editor-in-Chief**

# REIZENSTEIN AWARD 2019 & 2020

The Reizenstein Award is awarded to the Best Paper Published in the International Journal for Quality in Health Care (IJQHC).

This award is given annually in honour of Prof Peter Reizenstein, IJQHC's Founding Editor.

The papers were selected through a rigorous nomination and voting process using the below criteria:

- ▶ Importance of the paper to the field of health care quality
- ▶ Originality
- ▶ Methodological rigour
- ▶ Appropriateness of conclusions
- ▶ Clarity of writing

This award was customarily announced during ISQua's International Conference; however, due to the COVID-19 pandemic, we could not host our conference in 2020. Instead, both awards were announced at this year's conference in July 2021.

We would like to offer our sincere congratulations to our winning authors.

**The winner of the 2019 Reizenstein Prize for best original research article, published in the International Journal for Quality in Health Care (IJQHC), was:**

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***'Quality of care in six sub-Saharan Africa countries: a provider-based study on adherence to WHO's antenatal care guideline'*** by *Patrick Opiyo Owili, Miriam Adoyo Muga, Bomar Rojas Mendez and Bradley Chen.*

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<https://academic.oup.com/intqhc/article/31/1/43/5182877>

This paper was published in the February 2019 issue of the International Journal for Quality in Health Care (IJQHC).

**The winner of the 2020 Reizenstein Prize for best original research article, published in the International Journal for Quality in Health Care (IJQHC), was:**

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***'The 40 health systems, COVID-19 (40HS, C-19) study'*** by *Jeffrey Braithwaite, Yvonne Tran, Louise A Ellis, and Johanna Westbrook*

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<https://academic.oup.com/intqhc/article/33/1/mzaa113/5912967>

This paper was published in the November 2020 issue of the International Journal for Quality in Health Care (IJQHC).

# IJQHC EDITORIAL BOARD

## Editor-In-Chief

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Aziz Sheikh

## Editorial Assistant

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Shirley Letts

## Deputy Editors

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Sonali Parekh Desai, USA

Ezequiel Garcia Elorio, Argentina

David Greenfield, Australia

Usman Iqbal, Taiwan

Paul O'Connor, Ireland

Nick Rich, UK

Anthony Staines, Switzerland

Rosa Suñol, Spain

## Editorial Apprentices

---

David Crosby, Ireland

Emily O'Dowd, Ireland

## Special project editors

---

Carola Orrego, Spanish Abstracts

Paulo Sousa, Portuguese Abstracts

Yi-Hsin (Elsa) Hsu, Chinese Abstracts

Yuichi Imanaka, Japanese Abstracts

Catherine Grenier, French Abstracts

*We would like to thank Rosa Suñol for providing the Spanish translations for over 25 years.*

## Editorial Committee

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H Edrees, Saudi Arabia

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S-I Lee, South Korea

J Mainz, Denmark

Margareth Portela, Brazil

J Reed, UK

P Saturno, Spain

H Singh, USA

S Sodzi-Tettey, Ghana

P Sousa, Portugal

S Staniszewska, UK

K Walshe, UK

G Westert, The Netherlands

# IJQHC COMMUNICATIONS (IJCOMS)

## Strategy

IJQHC Communications is an online, open-access, international, editorially independent, peer-reviewed journal that welcomes direct submissions and manuscripts transferred from our parent journal, International Journal for Quality in Health Care (IJQHC). The journal is a joint publication venture between Oxford University Press and ISQua. All papers published in IJQHC Communications are made freely available online under an open-access licence.

IJQHC Communications will make activities and research related to quality, safety, satisfaction, affordability, and effectiveness in health care available to a worldwide readership. The journal publishes papers in all disciplines related to the quality and safety of health care, including health services research, health care evaluation, technology assessment, health economics, utilisation review, cost containment, and nursing care research, as well as clinical research, methodologic approaches, translational research, and implementation research projects related to the quality of care. In addition to receiving content cascaded from the parent journal, IJQHC Communications will also publish its own de novo content.

The journal is genuinely interdisciplinary and will include contributions from all health professionals such as doctors, nurses, quality assurance professionals, managers, politicians, social workers, therapists, and researchers from health-related backgrounds. The journal also contains news of ISQua, including announcements of upcoming courses, symposia, and congresses.

Dr Emma Sacks was appointed as the inaugural Editor-in-Chief at the beginning of 2021, along with Deputy Editors Dr Richard Greenhill and Dr Patrick Palmieri. An editorial committee was established with 11 exceptional scholars and practitioners representing various countries and experiences, including an in-house statistical editor. Each editorial committee member has committed to reviewing manuscripts for the journal, and many have contributed to important discussions about the journal's future.

## Key successes of the first year include:

- ▶ Launching a website and video and opening the call for papers and submission site
- ▶ Designing a logo, colours, layout, and reviewing proofs of each new article before publication
- ▶ Creating additional categories for submission to allow a broader range of authors and lessons from the field to be included and finalizing a style guide
- ▶ Publication of the first issue, with a set of opening editorials and invited commentaries
- ▶ Engagement with the ISQua Academy, including a set of publications of updates on the impact of COVID on health care quality from ISQua academy members based in various WHO regions, and support to a session at the ISQua conference
- ▶ Signing on the medical journal editors initiative to jointly publish a commentary on the urgency of climate change for health and simultaneously published in over 200 journals
- ▶ Successful transferring in of approximately five high-quality research papers from IJQHC, which are currently under review
- ▶ Receipt of the first two de novo research papers, which are currently under review
- ▶ The vast majority of publications in the first issue have been authored by scholars in low- and middle-income countries, with good gender parity, and contributions from junior scholars
- ▶ Bringing on two editorial apprentices to support the journal who will gain editorial experience and ideally be invited to join the editorial committee
- ▶ Editorial team participation in podcasts and social media for dissemination

Our focus was to successfully launch the journal, engage a large number of knowledgeable and diverse contributors, and set the bar for high-quality publications going forward. Our goal is to apply for inclusion in MEDLINE and a Journal Impact Factor

(IF) within 1-2 years. We were able to promote the new journal at the ISQua conference. We will continue to encourage submission and develop webinars to support authors who wish to submit.

## Key achievements

- ▶ Fully launched in July 2021
- ▶ 2568 full-text downloads to date
- ▶ The year 2021 YTD: Papers 34
- ▶ Final Decisions: Accept - 11; Reject - 2
- ▶ Average Days between Original Submission and Original Decision: 28
- ▶ Journal session for promotion at ISQua
- ▶ New reviewers recruited via the ISQua Members

## Challenges

There have been some challenges with launching a new journal amidst a pandemic. Like many journals, we struggle to find reviewers for every manuscript, although we are fortunate to have the editorial team and committee step up. We have had a turnover with the CEO of ISQua and our two main (editorial and publishing) contacts at OUP. However, we are enthusiastic about new staff who have joined to support (we are still pending an editorial contact at OUP).

We recognize that the cost to publish in OA journals is passed to authors, and we are grateful to have waivers for LMIC authors, for short commentaries and submissions, in addition to some discretionary waivers. We will continue to discuss ways to keep publishing affordable (for example, allowing waivers for students).

We have had more submissions than anticipated, both cascaded from IJQHC and de novo. Therefore, our response time has slowed, and we are discussing options for

improving turnaround time starting next year. This includes growing our editorial committee, creating an on-demand pool of potential reviewers by topic, and conducting preliminary reviews to ask for revisions from authors prior to peer review. One of our main challenges is that most of the submitted papers are written by authors whose first language is not English; therefore, much of our editorial team's time is spent copyediting. We are exploring options to improve the quality of writing (such as holding webinars for potential authors) and considering if resources may be available in the future for in-house copyediting. We will also continue exploring with OUP the option of publishing in Spanish, French, or other languages in the future.

While we have begun working with the editorial apprentices, because of the limited number of full research papers in the first six months of the journal, we have not had enough opportunities for them to review, edit, and participate in a complete cycle in many papers. We are discussing various arrangements which will allow them to get more experience and contribute to the editorial side of the journal more.

Many editorial committee members felt strongly that our journal should establish a mentorship programme for first-time authors, especially from LMICs. We plan to establish a small working group within the editorial committee to discuss ways to set this up, ways to compensate participants, and timelines.

We are planning an increase in social media activities over the next year, including creating a Twitter account, LinkedIn page, and Wikipedia entry. We aim to promote published papers through these channels, as well as through content-specific webinars. We may begin planning special issues over the next few years. We are also very eager about the possibilities of panels and promotion at the next in-person ISQua conference.

**Emma Sacks**

**Editor-in-Chief IJCOMS**

# IJCOMS EDITORIAL BOARD

## Editor-In-Chief

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Emma Sacks

## Editorial Assistant

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Steve Cavanaugh

## Deputy Editors

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Richard Greenhill, USA

Patrick Palmieri, Peru

## Editorial Apprentices

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Elom Otchi, Ghana

Erica Barbazza, The Netherlands

## Editorial Committee

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Peter Lachman, Ireland

Pierre Barker, USA

Sodzi Sodzi Tetty, Ghana

Vikram Datta, India

Viviana Rodriguez, Argentina

Nana Twum-Danso, USA

Abdulelah Alhasawi, Saudi Arabia

Rohit Ramaswamy, USA

Sylvia Sax, Germany

John Pearson, USA

Karen Dominguez-Cancino (statistician), Peru

# COMMUNITIES OF PRACTICE

## Strategy

Our strategy for the Communities of Practice (CoP) is to increase collaboration between countries, encouraging them to share best practices and lessons learned through regular meetings of healthcare professionals. ISQua has devoted resources to establishing and maintaining Communities of Practice in a number of ways over the past four years. Some of these come to their natural conclusion, and others grow in popularity year on year.

## Programme Update

We currently have two Communities of Practice meetings at various intervals;

### Francophone Community of Practice (FrCOP)

This group is chaired and coordinated by Denis Herbaux (PAQS ASBL, Belgium). There were three webinars held in the past year:

<b>March 2021</b>	L'impact de la crise Covid sur l'évolution des concepts et pratiques en gestion des risques dans les établissements de santé
<b>June 2021</b>	La gestion des événements indésirables au travers de systèmes régionaux/nationaux de déclaration
<b>September 2021</b>	De la culture organisationnelle à la « Just Culture » (WPSD)

## Latin American and Caribbean Community of Practice (COPLAC)

This group is held in association with Consorcio Latinoamericana de Innovacion, Calidad y Seguridad en la Salud (CLICSS) and chaired by Ezequiel Garcia Elorrio (IECS Argentina and CLICSS). There were six webinars held in the past year:

<b>October 2020</b>	Gobierno Clínico y Pandemia: Experiencia de Bupa Chile
<b>November 2020</b>	Evolución de las iniciativas de Calidad y Seguridad en América Latina
<b>December 2020</b>	La pandemia en América Latina desde la perspectiva de la calidad: lo que aprendimos
<b>April 2021</b>	Paciente experto... De pasajeros a copilotos
<b>May 2021</b>	Mejorando en la pandemia... ¿Oxímoron u oportunidad?
<b>June 2021</b>	Importancia de la Ergonomía y Factores Humanos para la seguridad y la calidad en los sistemas de salud
<b>July 2021</b>	Certificación de procesos asistenciales en el Centro Medico Imbanaco

## Person-Centred Care Community of Practice

Additionally, we have a Community of individuals with a special interest in Person-Centred Care who are working on developing an ISQua White Paper and possibly an e-book on Definitions of PCC.

This group will soon begin a targeted consultation on their work before a final draft is completed.

We would like to thank this global working group who have been working diligently for almost two years, led by Gro Rosvold Bernsten.

- ▶ Gro Rosvold Bernsten (Norway)
- ▶ Morgan Chetty (South Africa)

- ▶ Sara Yaron (Israel)
- ▶ Isabela Castro (Brasil)
- ▶ Phan Thanh Phuc (Viet Nam / Taiwan)
- ▶ Louis Ako-Egbe (Cameroon / Liberia)
- ▶ Carolyn Canfield (Canada)

## Challenges

Due to increased demand on resources, we decided to pause some of our previous Communities of Practice in 2020. In 2022 we hope to restart the African Community of Practice and explore the possibility of developing new groups.

# WORLD PATIENT SAFETY DAY 2020



The third World Patient Safety Day was held on 17th September 2021 with the theme 'Safe Maternal and Newborn Care'.

The objectives of World Patient Safety Day are to increase public awareness and engagement, enhance global understanding, and spur global solidarity and action to promote patient safety. Each year, a new theme is selected to shed light on a priority patient safety area where action is needed to reduce avoidable harm in health care and achieve universal health coverage.

Considering the significant burden of harm women and newborns are exposed to due to unsafe care, this year's World Patient Safety Day is dedicated to the need to prioritize and address safety in maternal and newborn care, particularly around the time of childbirth, when most harm occurs. This is especially important in the context of the disruption of health services due to the COVID-19 pandemic, which has further compounded the situation.

Since women's experiences during childbirth are also affected by gender equity and violence issues, World Patient Safety Day highlights the important notion of respectful care and its linkages with safety.

WHO OFFICIAL WEBPAGE - <https://www.who.int/campaigns/world-patient-safety-day/2021>

To support and promote World Patient Safety Day, we created a web page to showcase blog posts, opinion pieces, activities, events, webinars and more from across the ISQua Community.

This included selecting Maternal and Newborn health-related Articles from the International Journal for Quality in Health Care. These articles have been made freely available until December 2021. <https://academic.oup.com/intqhc/pages/world-patient-safety-day>.

Isabela Castro, ISQua's Honorary Patient Advisor to the Board, shared her thoughts in a blog post.

All of these activities and articles can be found on - <https://isqua.org/events/world-patient-safety-day-2021.html>

# QUALITY IMPROVEMENT ADVISORY SERVICE PROGRAMME

ISQua's Quality Improvement Advisory Service Programme has now been running for one year.

In this time, we have tendered for eight projects. Of the eight projects, one was won and is currently in progress; four were unsuccessful; and three are on hold, waiting for next steps.

We have also provided a standards review service for an organisation interested in ISQua EEA accreditation.

Project Name	Partner Organisation	Status
<p>Quality standards for primary care and ambulatory care in Romania</p> <p>Commissioned by the EUROPEAN COMMISSION Directorate-General for Structural Reform Support</p>	<p>Ernst &amp; Young (Romania)</p>	<p><b>On-going</b></p> <p>Awarded on 1st April 2020. The contract was signed on 14th May 2020.</p> <p><b>Deliverable 1</b> (Inception Report) completed June 2020</p> <p><b>Deliverable 2</b> (Status Quo Report), completed September 2020</p> <p><b>Deliverable 3</b> (Survey of Healthcare Professionals and Patients), February 2021</p> <p><b>Deliverable 4</b> (Conference) was held on 20th May 2021 as a virtual conference. Speakers included Carsten Engel and Bruno Lucet.</p>

		<p><b>Deliverable 5</b> (Manuals &amp; Guidelines for Quality Management Standards), completed September 2021</p> <p><b>Deliverable 6</b> (Training Programme Guidelines), ongoing</p> <p><b>Deliverable 7</b> (Training), ongoing</p> <p><b>Deliverable 8</b> (Final Report), due December 2021.</p> <p><b>Project close date: January 2022</b></p>
CHAFEA	IDOM (Spain)	<p><b>Tender Unsuccessful</b></p> <p>Tender submitted on 12th June 2020.</p> <p>Confirmation of result received in December 2020.</p>
Health and Wellness in Saint Lucia Commissioned by the Government of Saint Lucia and financed by the World Bank	IDOM (Spain)	<p><b>On Hold</b></p> <p>Expression of Interest submitted on 24th July 2020.</p> <p>No feedback received to date, so tender unsuccessful, or project cancelled.</p>
Consultancy Services for the Design and Implementation of Continuous Quality Improvement System	IDOM (Spain)	<p><b>On Hold</b></p> <p>Expression of Interest submitted on 20th August 2020.</p> <p>No feedback received to date, so tender unsuccessful, or project cancelled.</p>

International Consortium for Quality Assurance Agencies for drug use disorder treatment (ICQAA)	ICQAA (USA)	<p><b>On Hold</b></p> <p>The first contact was made in July 2020.</p> <p>Discussions were held between July 2020 – July 2021.</p> <p>The contact received in July 2021 – ICQAA is awaiting instruction from the US State Department. The delay is due to a hold up in the publication of the QA Toolkits and a subset of international consensus standards (by UNODC/WHO).</p>
FAST TRACK TO INNOVATION (FTI) (H2020-EIC-FTI-2018-2020) European Commission Horizon 2020 Framework Programme	CISTEC (Spain)	<p><b>Tender Unsuccessful</b></p> <p>Tender submitted on 27<sup>th</sup> October 2020.</p> <p>Confirmation of result received in December 2020.</p>
Strengthening Systems to Improve HIV Service Delivery and Other Public Health Interventions Through Continuous Quality Improvement, Monitoring and Evaluation, Surveillance, Health Informatics and Laboratory	Center for Global Health Practice and Impact, Georgetown University (USA)	<p><b>Tender Unsuccessful</b></p> <p>Tender submitted on 19th April 2021</p> <p>Official communication was received from Georgetown on 24th August 2021 that we were not successful with our application.</p>

Quality Management in Nigeria under PEPFAR Department of Health and Human Services Centers for Disease Control - CGH		
Quality Improvement Solutions for Sustained Epidemic Control Project (QISSEC)	Center for Global Health Practice and Impact, Georgetown University (USA)	<b>Tender Unsuccessful</b> Tender submitted on 7th May 2021 <b>Official communication was received from Georgetown on 12<sup>th</sup> October 2021 that we were not successful with our application.</b>
Review of International Hospital Quality Accreditation Standards	SHARC – China	Request received through IEEA in June 2021 for an expert review of the standard before submissions for IAP accreditation. Request for Service sent to Experts on 11/06/2021. A review of the standards took place between 7th – 21st July 2021. <b>Project Complete</b>

Our approach for new projects, at present, is to partner with organisations experienced in implementing health projects, and to provide the required expertise in external evaluation and quality improvement.

We have built a strong relationship with our existing partners, and our Experts are an excellent resource. Our Business Development Officer liaises between our partners and our Experts for each of the projects.

# ISQUA BOARD

## Officers

Jeffrey Braithwaite, President, Australia

Ezequiel Garcia Elorrio, President-Elect, Argentina

Wendy Nicklin, Past President, Canada (stepping down from the Board in October 2021)

Stephen Clark, Honorary Treasurer, Australia

## Board Members

Shin Ushiro, Japan

Bruno Lucet, France

Tricia Woodhead, UK

Ellen Joan van Vliet, Netherlands

Salma Jaouni, Jordan

Philip Crowley, Ireland

Sodzi Sodzi Tettey, Ghana

Fabio Leite Gastal, Brazil

John Brennan, Ireland

## Honorary Advisors

Duncan Inverarity, Ireland

Anna Edwards, UK

Isabela Castro, Brazil

# STAFF

Carsten Engel, CEO

Eadin Murphy, Head of Events and Corporate Affairs

Elaine O'Connor, Head of International Accreditation and Strategic Partnerships

Nicola McCauley-Conlan, Accreditation Manager

Jan Mackereth-Hill, Accreditation Manager

Rachel Simpson, Accreditation Manager

Simon Donohoe, Office Manager & Events Development Officer

Sinead McArdle, Business Development Officer

Caroline Usher, Education Coordinator

Caitriona Curran, Community Engagement Coordinator

Orla Corcoran, Corporate Support Officer

Catriona Kelly, Corporate Support Officer (Joined July 2021)

Sarah Caldwell-Kenny, Corporate Support Officer (Joined October 2021)

Peter Lachman, CEO (Resigned May 2021)

Aoife Dowling, Corporate Services Officer (Resigned June 2021)

Eleanor Keegan, Events Officer (Resigned September 2021)

Heather Wilson, Accreditation Manager (Resigned October 2021)

# TRAVEL/SPEAKING EVENTS

## ISQua Board and Expert Travel from September 2020 to October 2021

### September 2020

- ▶ Irish Aid – Ethiopian Learning Set
- ▶ NAHQ 'Patient Safety Recommendations for COVID-19 in a Time of Crisis'
- ▶ China National Health Association 'Quality first, Patient safety' - "Patient Safety: the Best Medical Practice for Global Epidemic Prevention and Control."
- ▶ NHSRC 'Patient Safety'
- ▶ CAHO 'Global Perspective on Patient Safety'
- ▶ IAPO 'Holistic Patient and Health Worker Safety: Hospital, Care Facility and Self-Care'
- ▶ WHO 'One World: Global Solidarity for Health Worker Safety and Patient Safety'
- ▶ PSMF 'PSMF #uniteforsafecare Virtual Event.'
- ▶ IECS 'Patient Safety Perspective'
- ▶ ITAES webinar 'Beyond Patient Safety: Making safety a reality.'
- ▶ Caitakropolis/ Prima TV 'New technologies to make a difference in the COVID era, making safety a reality.'
- ▶ OLCHC Virtual Workshop – 'Quality Showcase'

## October 2020

- ▶ Special Session of the Executive Board on the implementation of resolution WHA73.1 COVID-19 response – Bruno Lucet
- ▶ Healthcare Leadership Forum 2020, Oulu, Finland 'Leading for Quality and Safety during and after a pandemic.'
- ▶ Irish Aid Ethiopian Learning Set
- ▶ RCSI Virtual Workshop 'Cost and Value of Healthcare Quality Improvement in Ireland: Results from a Scoping Review - Research interpretation & reflection – where to from here?'
- ▶ L'ATTIVITÀ DI RICERCA DEI SOCI INSH DURANTE COVID-19 'The role of ISQua during COVID'
- ▶ FORO (Latinoamericano Colaborativo en Calidad y Seguridad en Salud) 'Quality of care in a new normal'
- ▶ Qilu Hospital of Shandong University, China – 'Beyond Patient Safety: Making Safety a Reality'

## November 2020

- ▶ Review Committee on the Functioning of the International Health Regulations (2005) during the COVID-19 Response – Bruno Lucet
- ▶ IHF Learnings from COVID-19 in a time of crisis 'Patient safety recommendations.'
- ▶ Seventy-third World Health Assembly – Bruno Lucet & Peter Lachman
- ▶ BMJ Leadership FMLM
- ▶ OES Virtual Conference 'Innovation and learnings from the pandemic.'
- ▶ Foreign Policy Centre and Aston Centre for Europe: 'COVID-19 in Southern Europe: lessons from Italy and Spain'

- ▶ Irish Aid Ethiopian Learning Set
- ▶ 29th International Forum on Health Quality in alliance with Fundación Santa Fe de Bogotá and the Kingdom of the Netherlands, 'Working in collaboratives'

## December 2020

- ▶ WHO webinar 'Maintaining Quality Care During COVID-19: Learning from country experiences.'
- ▶ Philippine Society for Quality in Healthcare, 25<sup>th</sup> Annual Convention: 'Navigating Transformative Force in Quality Healthcare - Patient experience personalized care, data privacy and how the patient is navigated through the new normal.'
- ▶ Informa Global Health Exhibition: 'The Virtual Edition – Getting digitally connected to transform quality management - Leveraging digital technology to improve safety culture, collaboration, competency and leadership.'
- ▶ Chinese Federation for Hospital Quality Management (CFHQM)

## January 2021

- ▶ Irish Aid Ethiopian Learning Set

## March 2021

- ▶ Riccardo Tartaglia INSH: 'COVID-19 in Nursing Home - A first assessment of what happened and improvement actions'
- ▶ 4 Seminario Internacional de Seguridad do Paciente e Acreditacao em Saude – 'How to generate organizational culture change in the digital age'

## April 2021

- ▶ Clinica Imbanco 11th International Symposium on 'Patient Quality and Safety, Safety a vital action' – Peter Lachman & Ezequiel Garcia Elorrio

- ▶ GS1 Healthcare Online Summit – ‘Global Standards for Global Health’

## May 2021

- ▶ Quality Management in Primary and Ambulatory Care Conference (ANMCS, Romania) – The International Experience – Carsten Engel & Bruno Lucet
- ▶ Accreditation in 2030

## June 2021

- ▶ Award ceremony TMU Fellowship Students
- ▶ WHO Webinar on ‘Patient Safety in the Context of COVID-19 in African Region’

## September 2021:

- ▶ CISS DIGITAL (Brazil), 8<sup>th</sup> Sept – Title: Accreditation and patient safety – lessons from the pandemic
- ▶ Medvarsity (India), 27<sup>th</sup> Sept – Title: Accreditation as a driver of improvement and knowledge transfer

# COMMITTEES

## Corporate Governance Committee (CGC)

Committee Member	Country
<b>Patricia Woodhead (Chair)</b>	United Kingdom
<b>Jeffrey Braithwaite</b>	Australia
<b>Duncan Inverarity</b>	Ireland
<b>Ellen Joan van Vliet</b>	Netherlands
<b>Ezequiel Garcia Elorrio</b>	Argentina (joined Dec 2020)
<b>John Brennan</b>	Ireland (joined Dec 2020)
<b>Sodzi Sodzi Tettey</b>	Ghana (joined Dec 2020)
<b>Anna Edwards</b>	United Kingdom (Honorary Advisor Dec 2020)
<b>Isabela Castro</b>	Brazil (Honorary Advisor Dec 2020)

The purpose of the Corporate Governance Committee is to assist the Board of Directors in setting and evaluating the principles of good governance by which ISQua is controlled. The committee ensures that ISQua is conducting business with integrity and fairness whilst ensuring that processes are transparent. The committee ensures that all the necessary disclosures and decisions comply with the relevant Irish laws.

The Corporate Governance Committee meet at least two weeks before every Board meeting, and standing items on the agenda include risk management and compliance. Throughout 2020 and 2021, the committee met six times and reviewed policies, including new policies, to ensure compliance with the requirements of the Charities Regulator. The committee is also part of the Strategic Planning task force to look at ISQua's strategy for the next five years.

## Finance and Audit Committee (F&AC)

Committee Member	Country
<b>Stephen Clark (Chair until Nov 2020)</b>	Australia
<b>Jeffrey Braithwaite</b>	Australia (Ex Officio Dec 2020)
<b>Ezequiel Garcia Elorrio (Chair from Dec 2020)</b>	Argentina
<b>Bruno Lucet</b>	France
<b>Wendy Nicklin</b>	Canada (Resigned Nov 2020)
<b>David Vaughan</b>	Ireland (Resigned Nov 2020)
<b>Philip Crowley</b>	Ireland (joined Dec 2020)
<b>Fabio Gastal Leite</b>	Brazil (joined Dec 2020)

The purpose of the Finance and Audit Committee is to assist the Board in all financial affair matters encompassing the areas of strategic financial planning, resource management and policy-related issues and provide timely advice to the Board on areas within its remit. The committee meets before each Board meeting.

Throughout 2020 and 2021, the committee met six (6) times. At each meeting, the committee reviews the monthly management accounts and discusses the management of the accounts with the Financial Controller. During the year, the committee reviewed the budget, the revised reserves policy and oversaw financial forecasting for 2021 due to the pandemic.

## Remuneration Committee (RC)

Committee Member	Country
<b>Wendy Nicklin (Chair until Nov 2020)</b>	Canada (Resigned Nov 2020)
<b>Cliff Hughes</b>	Australia (Resigned Nov 2020)
<b>Duncan Inverarity</b>	Ireland
<b>Jeffrey Braithwaite (Chair from Dec 2020)</b>	Australia
<b>Ezequiel Garcia Elorrio</b>	Argentina (joined Dec 2020)

The Remuneration Committee is responsible for setting the guiding principles for the remuneration for all staff. The objective of such policy is to attract, retain, and motivate the company's staff and advise on remuneration where indicated. The CEO sets the staff

salaries within the agreed budget. The committee sets the CEO salary. The committee did not meet in 2020-2021.

## Advisory Committees

### Networks, Communities of Practice and Knowledge Management Advisory Committee

Committee Member	Country
<b>Patricia Woodhead (Chair until Nov 2020)</b>	United Kingdom
<b>Philip Crowley</b>	Ireland (Resigned Nov 2020)
<b>Shin Ushiro</b>	Japan
<b>Sara Yaron</b>	Israel (Resigned Nov 2020)
<b>John Brennan (Chair from Dec 2020)</b>	Ireland
<b>Bruno Lucet</b>	France (joined Dec 2020)
<b>Fabio Gastal Leite</b>	Brazil (joined Dec 2020)
<b>Isabela Castro</b>	Brazil (joined Dec 2020)
<b>Jeffrey Braithwaite</b>	Australia (Ex Officio)

The Networks, Communities of Practice and Knowledge Management Advisory Committee is responsible for managing the knowledge related functions of ISQua; and assisting the Board and CEO in managing the information associated with all activities of ISQua including, conferences, communities of practice, networks, education, Journal, publications and research.

The committee's main aim is to create value, leverage, and refine ISQua's knowledge assets to meet organisational goals. The committee met twice in 2021.

### Strategic Partnerships, Regions & LMIC Advisory Committee

Committee Member	Country
<b>Ezequiel Garcia Elorrio (Chair until Nov 2020)</b>	Argentina
<b>Christopher Cornue</b>	United States
<b>Salma Jaouni (Chair from Dec 2020)</b>	Jordan
<b>Bhupendra Kumar Rana</b>	India (Resigned Nov 2020)

<b>Jacqui Stewart</b>	South Africa (Resigned Nov 2020)
<b>Shin Ushiro</b>	Japan
<b>Ellen Joan van Vliet</b>	Netherlands
<b>Philip Crowley</b>	Ireland (joined Dec 2020)
<b>Sodzi Sodzi Tettey</b>	Ghana (joined Dec 2020)
<b>Anna Edwards</b>	United Kingdom (joined Dec 2020)
<b>Jeffrey Braithwaite</b>	Australia (Ex Officio)

Strategic Partnerships, Regions & LMIC Advisory Committee is responsible for advising on developing, maintaining, and fostering strategic partnerships with a special emphasis on lower-middle-income countries (LMICs). The committee assesses all programmes and activities to identify where new partnerships can be developed while ensuring membership of ISQua is at the core of each partnership.

The committee met twice in 2020 - 2021. During the year, each committee member commenced work on their regional strategy.

### Person and Family Centred Care Advisory Council (PFCAC)

<b>Council Member</b>	<b>Country</b>
<b>Anna Edwards</b>	United Kingdom
<b>Isabela Castro</b>	Brazil
<b>Angela Hamson</b>	Canada
<b>Allison Koojiman</b>	Canada
<b>Lisa Freeman</b>	United States
<b>Sara Yaron</b>	Israel
<b>Orly Herman</b>	Israel
<b>Hussain Jafri</b>	Pakistan
<b>Amina Hussein Mohamud</b>	United Arab Emirates

# INTERNATIONAL ACADEMY FOR QUALITY AND SAFETY (IAQS)

In 2018 ISQua's International Academy for Quality and Safety (IAQS) was established to recognise distinguished individuals who have made a significant contribution to quality and safety in healthcare.

Members are elected to the IAQS in recognition of their distinguished contribution in these areas. Membership is recognition and a mark of their excellence of leadership within research, academia or service delivery in quality and safety.

Following the inaugural election of twenty-five members, a further twenty members were elected in early 2019. This was followed in 2020 with a further twenty-five members, and in 2021 a further nineteen were elected to the academy.

The following are the current members of the Academy (new members are highlighted in red). We want to thank David Bates, Chief of General Internal Medicine at Brigham and Women's Hospital, for leading this initiative.

## The names in red are the new IAQS members elected in June 2021

**Rajesh Aggarwal**, Professor of Surgery and Senior Vice President for Strategic Business Development and Innovation, Thomas Jefferson University, USA

**Emmanuel Aiyenigba**, Improvement Advisor, Institute for Healthcare Improvement, IHI

**Abdulelah Alhawsawi**, Vice President for International Affairs of Global Sepsis Alliance; MOH Advisor on Patient Safety, Saudi Arabia

**Ahmed Salim Al-Mandhari**, WHO Regional Director, Regional Office Eastern Mediterranean, Oman

**René Amalberti**, Senior Advisor, Haute Autorité de Santé (HAS), France

**Hugo Eduardo Arce**, Physician, University of Buenos Aires, Argentina

**G Ross Baker**, Professor and Program Lead, University of Toronto Master of Science in Quality Improvement and Patient Safety, Canada

**Bruce Barraclough AO**, Chair, Clinical Risk, Safety and Quality Sub-Committee, MQ Health Board, Sydney. Associate Dean (Clinical Strategy) University of Western Sydney Medical School, Australia

**Paul Batalden**, Emeritus Professor, Dartmouth Institute for Health Policy and Clinical Practice, Geisel School of Medicine, USA

**David Bates**, Medical Director of Clinical and Quality Analysis, Information Systems, Partners HealthCare System, Inc., Chief Division of General Internal Medicine, Brigham and Women's Hospital, USA

**Donald Berwick**, President Emeritus and Senior Fellow, Institute for Healthcare Improvement, USA

**Asaf Bitton**, Executive Director, Ariadne Labs, USA

**Jeffrey Braithwaite**, Founding Director, Australian Institute of Health Innovation, Australia

**Mark William Brandon**, Chief Quality Officer and Chief Policy and Regulatory Officer, Estia Health, Australia

**Gilbert Benjamin Buckle**, Public Health Physician/Consultant Health Systems Strengthening, Ghana

**Lydia Cairncross**, Associate Professor of Surgery at the University of Cape Town and Head of the Endocrine and Breast Surgical Unit, Groote Schuur Hospital / University of Cape Town, South Africa

**Pascale Carayon**, Procter & Gamble Bascom Professor in Total Quality, Director of the Center for Quality and Productivity Improvement, Department of Industrial and Systems Engineering, University of Wisconsin-Madison, USA

**Mohambry Nadasen Chetty**, Chair, Independent Practitioners Association Foundation, South Africa

**Stephen Clark**, Group Chief Executive, AGPAL Group of Companies, Australia

**Enrico Coiera**, Professor and Director of the Centre for Health Informatics, Australian Institute of Health Innovation, Macquarie University, Australia

**Christine Dennis**, Chief Executive Officer, Australian Council on Healthcare Standards (ACHS), Australia

**Mary Dixon-Woods**, Director, THIS Institute, UK

**Sir Liam Donaldson**, Professor of Public Health, London School of Hygiene and Tropical Medicine, UK

**Michael Anthony Durkin**, Senior Advisor on Patient Safety and Leadership, Institute of Global Health Innovation, Imperial College, London, UK

**Ezequiel Garcia Elorrio**, Director of Quality in Health Care and Patient Safety, Institute for Clinical Effectiveness and Health Policy (IECS), Argentina

**Glyn Elwyn**, Dartmouth Institute for Health Policy & Clinical Practice, USA

**Carsten Engel**, Deputy Chief Executive, IKAS (Danish Institute for Quality and Accreditation in Healthcare), Denmark

**Arnold Epstein**, Chair, Health Policy and Management, Harvard T. H. Chan School of Public Health, Department of Health Policy and Management, USA

**Susan Frampton**, President, Planetree International, USA

**Tejal Gandhi**, Chief Safety and Transformation Officer, Press Ganey Associates, USA

**Boel Andersson Gäre**, Jönköping Academy for Improvement of Health and Welfare, Jönköping University, Sweden

**Atul Gawande**, Cynthia and John F. Fish Distinguished Chair in Surgery, Brigham and Women's Hospital, USA

**Carlos Hiran Goes De Souza**, MD, MPH, MBA; VP, CEO AACI Portugal & Brazil

**Michael William Gorton AM**, Principal, Russell Kennedy Lawyers, Australia

**David Greenfield**, Director, Australian Institute of Health Service Management, Australia

**Trish Greenhalgh**, Professor of Primary Care Health Services, Nuffield Department of Primary Care Health Sciences, University of Oxford, UK

**Elma Heidemann**, Healthcare Consultant, Former CEO of Accreditation Canada, Canada

**John Helfrick**, Senior Consultant for Partners Healthcare International, USA

**Pilar Hilarion**, Director for the area of Social Care, Mental Health, Elderly, Dependency and Integrated Care, Avedis Donabedian Research Institute (FAD), Spain

**Clifford Frederick Hughes**, Professor of Patient Safety and Clinical Quality, Macquarie University, Australia

**Yuichi Imanaka**, Professor and Head, Department of Healthcare Economics and Quality Management, Kyoto University, Japan

**Salma Jaouni**, Chief Executive Officer, Health Care Accreditation Council (HCAC), Jordan

**Brian William Johnston**, Health and Social Care Services Consultant, Australia

**Allen Kachalia**, Senior Vice President, Patient Safety and Quality, Johns Hopkins Medicine, USA

**Hirobumi Kawakita**, Chair of the Japan Council for Quality Health Care; Chair of the Kawakita Healthcare Foundation, Japan

**Vahé A Kazandjian**, Advisor and Lecturer in Quality and Safety of Care, The American University of Armenia, Yerevan, Armenia

**Niek Klazinga**, Senior Policy Advisor and Lead of Work on Quality of Care, Organisation for Economic Co-operation and Development (OECD), Netherlands

**Janne Lehmann Knudsen**, Danish Safety Authority, Denmark

**Uma Kotagal**, Professor of Pediatrics, Cincinnati Children's Hospital Medical Center, USA

**Basia Kutryba**, Senior Advisor, National Centre for Quality Assessment in Healthcare, Ministry of Health, Poland

**Peter Lachman**, International Lead Faculty, Leadership Quality Improvement and Patient Safety, Royal College of Physicians of Ireland (RCPI), Ireland

**Lucian Leape**, Adjunct Professor of Health Policy, Harvard School of Public Health, USA

**Sheila Leatherman**, Professor, University of North Carolina, Gillings School of Global Public Health, USA

**Mondher Letaief**, Regional Adviser for UHS/QPS, WHO/EMRO, Egypt

**Weimin Li**, President, West China Hospital, Sichuan University, China

**Andrew Likaka**, Director, Quality Management and Digital Health, Ministry of Health, Malawi

**Tingfang Liu**, Professor, Institute for Hospital Management, Tsinghua University, China

**Ana Marie Malik**, Professor, Escola de Administração de Empresas de São Paulo da Fundação Getulio Vargas, Brazil

**Peter Margolis**, Professor of Pediatrics, Co-Director James. M. Anderson Center for Health Systems Excellence, Cincinnati Children's Hospital, USA

**M. Rashad Massoud**, Chief Medical and Quality Officer/ Senior Vice President University Research Co., LLC's Quality and Performance Institute, Director, USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project

**David Mayer**, Executive Director, MedStar Institute for Quality and Safety, CEO, Patient Safety Movement, USA

**Takeshi Morimoto**, Professor of Medicine, Department of Clinical Epidemiology, Hyogo College of Medicine, Vice-Director, Center for Clinical Research and Education, Japan

**Fiona Moss**, Dean, Royal Society of Medicine, UK

**Stephen Muething**, Professor and Co-Director, James M. Anderson Center for Health Systems Excellence, Cincinnati Children's Hospital Medical Center, USA

**David Nash**, Dean, Jefferson College of Population Health, Thomas Jefferson University, USA

**Eugene Nelson**, Professor, Dartmouth Institute for Health Policy and Clinical Practice, Geisel School of Medicine, USA

**Wendy Nicklin**, President / Board Chair, ISQua; Board Member Hospice Care Ottawa; Board Member Salus Global; Healthcare Consultant; Former President & CEO Accreditation Canada, Canada.

**Kim Oates**, Emeritus Professor, University of Sydney School of Medicine, Australia

**Pat O'Connor**, Executive Director, QI Discovery, UK

**John Ovretveit**, Professor of Health Care Improvement Implementation and Evaluation, The Karolinska Institute, Sweden

**Ajibike Oyewumi**, Director, Quality and Clinical Programs, Lagoon Hospitals, Nigeria

**Rocco Perla**, Co-founder, the Health Initiative, President of Health Leads, USA

**Chris Power**, Chief Executive Officer, Canadian Patient Safety Institute, Canada

**Lloyd Provost**, Improvement Advisor, Associates in Process Improvement (API), USA

**Bhupendra K Rana**, Founding CEO, Quality and Accreditation Institute (QAI), India

**Laetitia Rispel**, Professor of Public Health, University of the Witwatersrand, South Africa

**Axel Ros**, Chief Medical Officer/Patient Safety Lead and Adjunct lecturer, Region Jönköping County and Jönköping Academy for Improvement of Health and Welfare, School of Health and Welfare, Jönköping University, Sweden.

**Ronen Rozenblum**, Director, Unit for Innovative Healthcare Practice & Technology, Brigham and Women's Hospital & Harvard Medical School, USA

**Enrique Ruelas**, President and CEO, Qualimed, Mexico

**William Ben Runciman**, Chief Investigator, NH&MRC Program, Centre for Research Excellence Grants, Australia

**Odet Sarabia González**, Chief of Quality at Petroleos Mexicanos Health Services and, Vice President of the Mexican Society of Quality in Health Care

**Eric Schneider**, Senior Vice President for Policy and Research, The Commonwealth Fund, USA

**Charles Shaw**, Independent consultant, UK

**Aziz Sheikh**, Professor of Primary Care R&D, Usher Institute of Population Health Sciences and Informatics, University of Edinburgh, UK

**Sodzi Sodzi-Tettey**, Executive Director and Head, Institute for Healthcare Improvement, Africa Region, Ghana

**Paulo Sousa**, Professor, National School of Public Health, Universidade Nova de Lisboa (NSPH-UNL), Portugal

**Jacqui Stewart**, Chief Executive Officer, The Council for Health Service Accreditation of Southern Africa NPC, South Africa

**Rosa Sunol**, Professor Doctor, President of the Board of Trustees Avedis Donabedian Institute (FAD) – Universitat Autònoma de Barcelona, Spain

**Kathleen Sutcliffe**, Bloomberg Distinguished Professor, USA

**Nana A Y Twum-Danso**, Managing Director, Health, The Rockefeller Foundation, USA

**Shin Ushiro**, Professor, Kyushu University Hospital, Japan Council for Quality Health Care, Japan

**Arati Verma**, Senior Vice President, Medical Quality, Max Healthcare, India

**Charles Vincent**, NIHR Senior Investigator, Emeritus Professor Clinical Research, Imperial College London, United Kingdom

**Pa-Chun Wang**, Chief Executive Officer, Joint Commission of Taiwan (JCT), Taiwan

**Johanna Westbrook**, Director, Centre for Health Systems and Safety Research, Australian Institute of Health Innovation, Australia

**Siri Wiig**, Full Professor of Quality and Safety in Healthcare Systems and Centre Director of SHARE, Faculty of Health Sciences, University of Stavanger, Norway

**Albert Wu**, Professor and Director, Center for Health Services Outcomes and Research, Johns Hopkins Bloomberg School of Public Health, USA

**Jennifer Zelmer**, President, Azimuth Health Group, Canada

**Eyal Zimlichman**, Deputy Director-General, Chief Medical Officer and Chief Innovation Officer, Sheba Medical Center, Israel

# ISQUA EXPERTS

In 2012 we organised, formalised, and expanded our existing ad-hoc network of contributors to better resource our long-standing activities and initiatives. This global network of world leaders is spread across a range of healthcare-related disciplines.

This resource bank of highly skilled and well-informed healthcare leaders has become our 'ISQua Experts'.

Nominations for new Experts will open in early 2022.

Full Name	Work Country
Hugo E. Arce	Argentina
Ezequiel Garcia Elorrio	Argentina
Marcelo Pellizzari	Argentina
Viviana Rodriguez	Argentina
Bruce Barraclough	Australia
Jeffrey Braithwaite	Australia
Mark Brandon OAM	Australia
Peter Carter	Australia
Stephen Clark	Australia
Martin Fletcher	Australia
Michael Gorton	Australia
David Greenfield	Australia
Peter Hibbert	Australia
David Hillis	Australia
Anne Hogden	Australia
Clifford Hughes	Australia
Brian Johnston	Australia
Karen Linegar	Australia
Lena Low	Australia
Karen Luxford	Australia
Guy Maddern	Australia

Russell McGowan	Australia
Kim Oates	Australia
Charles Pain	Australia
Karen Patterson	Australia
William (Bill) Runciman	Australia
Tim Shaw	Australia
Gary Smith	Australia
Jonny Taitz	Australia
John Wakefield	Australia
Johanna Westbrook	Australia
David Wright	Australia
Denis Herbaux	Belgium
Tilly Postelmans	Belgium
Kris Vanhaecht	Belgium
Tarcisio Abreu Saurim	Brazil
Fabio Gastal	Brazil
Camila Lajolo	Brazil
Jose Noronha	Brazil
Elenara Oliveira Ribas	Brazil
Camila Sardenberg	Brazil
Bonnie Adamson	Canada
Donna Anderson	Canada
Ross Baker	Canada
Ben Chan	Canada
Danielle Dorschner	Canada
Barbara Farlow	Canada
Alan Forster	Canada
Philip Hassen	Canada
Helen Healey	Canada
Elma Heidemann	Canada
Denice Klavano	Canada
Christina Krause	Canada
Hugh MacLeod	Canada
Wendy Nicklin	Canada

James Robblee	Canada
Mark Walker	Canada
Jennifer Zelmer	Canada
Rodrigo Poblete Umanzor	Chile
BIN CAI	China
Hong Chen	China
Binchun Hu	China
Tingfang Liu	China
Liping Ma	China
Sun Niuyun	China
Bo Wang	China
Jishan Wang	China
Yuan Xiangdong	China
Astolfo L. Franco	Colombia
Carlos Kerguelen	Colombia
Francisco R. Restrepo P.	Colombia
Teresa Tono Ramirez	Colombia
Carsten Engel	Denmark
Janne Knudsen	Denmark
Jorge Hermida	Ecuador
Rene Amalberti	France
Laurent Degos	France
Bruno Lucet	France
Philippe Michel	France
Oliver Groene	Germany
Irmgard Marx	Germany
Michael Marx	Germany
Sylvia Sax	Germany
Elom Otchi	Ghana
Sodzi Sodzi-Tetty	Ghana
William Adu-Krow	Guyana
Lawrence Lai	Hong Kong
Hong Fung	Hong Kong SAR, China
Minnie Bodhanwala	India

Vikram Datta	India
Clive Fernandes	India
Girdhar Gyani	India
Pawan Kapoor	India
Arti Maria	India
M.C. Misra	India
Anuradha Pichumani	India
Bhupendra Rana	India
Dr Sonia Trikha	India
Thuppil Venkatesh	India
ARATI VERMA	India
John Browne	Ireland
Philip Crowley	Ireland
Eva Doherty	Ireland
Luke Feeney	Ireland
John Fitzsimons	Ireland
Triona Fortune	Ireland
Duncan Inverarity	Ireland
John Sweeney	Ireland
David Vaughan	Ireland
David Weakliam	Ireland
Yael Appelbaum	Israel
Eyal Zimlichman	Israel
Amitai Ziv	Israel
Sara Albolino	Italy
Riccardo Tartaglia	Italy
Yuichi Imanaka	Japan
Hirobumi Kawakita	Japan
Yukihiro Matsuyama	Japan
Shin Ushiro	Japan
Ibrahim Aqel	Jordan
Muntaha Gharaibeh	Jordan
Salma Jaouni	Jordan
Mohammed Rasoul Tarawneh	Jordan

Fadi El-Jardali	Lebanon
Moses Enock	Malawi
Mercy Jere Makwakwa	Malawi
Andrew Likaka	Malawi
Edward Moses	Malawi
Martin Msukwa	Malawi
Ravindran Jegasothy	Malaysia
Ravindran Jegasothy	Malaysia
Kadar Marikar	Malaysia
J Ravichandran R Jeganathan	Malaysia
Enrique Ruelas	Mexico
Odet Sarabia	Mexico
Apollo Basenero	Namibia
Roland Bal	Netherlands
Richard Grol	Netherlands
Kees van Dun	Netherlands
Barbara Donaldson	New Zealand
David Galler	New Zealand
Alan Merry	New Zealand
Maina Boucar Amsagana	Niger
Emmanuel Aiyenigba	Nigeria
Stephen Balogun	Nigeria
Ajibike Oyewumi	Nigeria
Gro K Rosvold Bernsten	Norway
Samir Al-Adawi	Oman
Chen Xiaohong	P.R. China
Juan Limo	Peru
Hugo Siu	Peru
Carlos Hiran Goes de Souza	Portugal
Paulo Sousa	Portugal
Jamal Al-Khanji	Qatar
Salem AlWahabi	Saudi Arabia
Mohambry Chetty	South Africa
Laura Mobisson-Etuk	South Africa

Jacqui Stewart	South Africa
Stuart Whittaker	South Africa
Rosa Sunol	Spain
John Ovretveit	Sweden
Pierre Chopard	Switzerland
Eric De Roodenbeke	Switzerland
Edward Kelley	Switzerland
Anthony Staines	Switzerland
Jack Li	Taiwan
Pa-Chun Wang	Taiwan
Lee Wui-Chiang	Taiwan
Claudine Richardson-Sheppard	Trinidad and Tobago
Esther Karamagi	Uganda
Tonny Tumwesigye	Uganda
Samer Ellahham	United Arab Emirates
Andrew Carson- Stevens	United Kingdom
Harry Cayton	United Kingdom
Daniel Cohen	United Kingdom
Tracey Cooper	United Kingdom
Helen Crisp	United Kingdom
Lord Ara Darzi	United Kingdom
Sir Liam Donaldson	United Kingdom
Mike Durkin	United Kingdom
Neil Houston	United Kingdom
Sir Bruce Keogh	United Kingdom
Jason Leitch	United Kingdom
Jan Mackereth-Hill	United Kingdom
Russell Mannion	United Kingdom
Martin Marshall	United Kingdom
Patricia O'Connor	United Kingdom
Sir John Oldham	United Kingdom
Julie Reed	United Kingdom
Charles Shaw	United Kingdom
Aziz Sheikh	United Kingdom

Charles Vincent	United Kingdom
Patricia Woodhead	United Kingdom
Rajesh Aggarwal	United States
Bruce D Agins	United States
Azhar Ali	United States
David Ballard	United States
David Bates	United States
Robert Brook	United States
Pascale Carayon	United States
Edward Chappy	United States
Christopher Cornue	United States
Susan Edgman-Levitan	United States
John F Helfrick	United States
Susan Frampton	United States
Ashish Jha	United States
Rainu Kaushal	United States
Aileen Killen	United States
Uma Kotagal	United States
Margaret Kruk	United States
Sheila Leatherman CBE	United States
Nigel Livesley	United States
M. Rashad Massoud	United States
David Mayer	United States
Kathleen Mosier	United States
Stephen Muething	United States
Eugene Nelson	United States
Gail Nielsen	United States
Mary Patterson	United States
Ronen Rozenblum	United States
Eric Schneider	United States
Ulfat Shaikh	United States
Paul Sharek	United States
Paul Shekelle	United States
Paul van Ostenberg	United States

Albert Wu	United States
Paulinus Sikosana	Zimbabwe

# WORLD HEALTH ORGANIZATION

## (WHO)

ISQua is a non-state actor in official relations with the World Health Organization (WHO) and supports the WHO quality and patient safety programmes. As a non-state actor in official relations, ISQua develops a collaboration plan for three years with its designated Technical Officer in the WHO, setting out how ISQua will support the WHO over the three years. ISQua then reports annually to the WHO on its progress in achieving the identified objectives. The current collaboration plan for the period 2019-2021 will end this year, and at the request of the WHO, ISQua has already provided its 2021 progress update. In association with ISQua's designated Technical Officer in WHO (Shams Syed) and his team ISQua has drafted its collaboration plan for 2022-2024. This has now been submitted to the Due Diligence and Non-State Actors Unit in the WHO for approval.

In 2020 the WHO launched the COVID-19: Health Services Learning Hub (HLH) in response to the urgent demand from member states for technical support in maintaining essential health services during the COVID-19 pandemic response. The goal of the HLH is to drive activated learning to maintain essential health services in the context of COVID-19 and to transform health services for the future. ISQua shared details of all the webinars delivered on the topic of COVID-19 from March 2020 onwards and all collated resources with the WHO for use on its knowledge hub. The COVID-19 Health Services Learning Hub (HLH) website was formally launched in early 2021. ISQua has actively promoted the COVID-19: Health Services Learning Hub (HLH) and the associated calls for country action briefs among our members and broader network throughout 2020 and 2021 through our ezines and social media channels.

The COVID-19: HLH has also established a "Network of Networks" comprised of various international organisations and technical partners of the WHO. This network aims to facilitate coordinated learning, maximise the comparative advantages of various networks, and avoid duplication and fragmentation. ISQua joined the "Network of Networks" in July 2020 at the request of the WHO and has attended all meetings organised since then.

ISQua also supported the WHO by attending and contributing to relevant webinars and learning events such as a webinar in December 2020 jointly organised by the WHO COVID-19 Health Services Learning Hub (HLH) and the WHO Global Learning Laboratory (GLL) for Quality UHC, which explored the critical role of quality in maintaining essential health services during the COVID-19 pandemic.

In 2019, the WHO trained a cohort of ISQua Experts on the National Quality Policy and Strategy (NQPS) who act as a resource for the WHO to assist with any member state requests relating to NQPS. As countries focused on COVID-19 in 2020, the number of member state requests received by the WHO was significantly reduced. However, ISQua continued to facilitate meetings between the ISQua NQPS Experts and WHO throughout 2020 and 2021 to share the learning of any relevant developments in relation to NQPS.

In December 2020, ISQua hosted a joint webinar with the WHO Global Learning Laboratory (GLL) for Quality UHC entitled 'From theory to practice: national approaches adopted in Namibia and Mozambique to improve the quality of health services.' Two of the ISQua NQPS Experts, Apollo Basenero, Namibia and David Weakliam, Ireland, presented the approaches adopted in Namibia and Mozambique to systematically improve health services.

ISQua NQPS Expert Bruno Lucet, France, has worked with the WHO to assist with member state requests from French-speaking African member states. Another expert Paulo Sousa, Portugal, has assisted with translating relevant documents such as the WHO Handbook for national quality policy and strategy into Portuguese. It is anticipated that the number of member state requests will increase as countries start to emerge from the COVID-19 pandemic so that the ISQua NQPS Experts will be a valuable resource for the WHO.

ISQua CEO Carsten Engel and Board member Sodzi Sodzi Tettey also contributed to a WHO webinar in September 2021 organised by the AFRO regional office on Building Capacity within the African Region for National Quality Policy and Strategy.

In August 2020, ISQua attended the launch of the WHO Global Patient Safety Action Plan 2021 – 2030 and contributed to a global consultation organised by the WHO Patient Safety Flagship with partners in action on engaging stakeholders for implementing the

Global Patient Safety Action Plan 2021-2030. The global action plan provides strategic direction and a list of suggested actions for all stakeholders to eliminate avoidable harm in health care and improve patient safety in different practice domains through policy actions and implementation of recommendations at the point of care.

ISQua has promoted the Global Patient Safety Action Plan among our members and the more comprehensive network and is committed to supporting the implementation of this important initiative in the coming years.

# STRATEGIC PARTNERS



**Consortium of Accredited  
Healthcare Organizations (CAHO)**

<https://www.caho.in>



**GS1**

<https://www.gs1.org>



**International Hospital Federation  
(IHF)**

<https://www.ihf-fih.org>



**Norwegian Centre for  
E-health Research**

**Norwegian Centre for EHealth  
Research**

<https://ehealthresearch.no/en/>



**臺北醫學大學**  
TAIPEI MEDICAL UNIVERSITY

**Taipei Medical University (TMU)**

<http://eng.tmu.edu.tw/>



International Ergonomics Association

**International Ergonomics  
Association (IEA)**

<https://iea.cc/>



**AfiHQSA**

<http://www.afihqsa.com>



**Patient Safety Movement (PSMF)**

<https://patientsafetymovement.org/>



**Medvarsity**

<http://www.medvarsity.com/>



**Healthysimulation.com**

<https://www.healthysimulation.com/>



**AHB**

AFRICA HEALTH BUSINESS

**Africa Health Business (AHB)**

<https://ahb.co.ke/>

# OFFICIAL STATEMENTS

Over the past year, ISQua has published many statements in support of activities, programmes and movements that align with our mission, vision and goals.

## 18th November 2020

### **JOINT STATEMENT ON WORLD ANTIMICROBIAL AWARENESS WEEK**

Joint statement with the International Hospital Federation (IHF), the International Alliance of Patients' Organizations (IAPO) and the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA), in support of this awareness week.

<https://isqua.org/latest-blog/united-to-preserve-antimicrobials.html>

## 15th December 2020

### **Endorsement of the IHF Statement - Supporting Hospitals in a Time of Crisis**

<https://isqua.org/blog/covid-19/covid19-resources/ihf-statement-endorsement-supporting-hospitals-in-a-time-of-crisis.html>

## 19th January 2021

### **Announcing Dr Carsten Engel as the next CEO of ISQua and ISQua EEA**

<https://isqua.org/latest-blog/announcing-dr-carsten-engel-as-the-next-ceo-of-isqua-and-isqua-eea.html>

## 26th April 2021

### **Launch of new ISQua Journal – IJQHC Communications**

<https://isqua.org/resources-blog/blog/launch-of-new-isqua-journal-%E2%80%93-ijqhc-communications-470.html>

## 26th May 2021

**Endorsement of Planetree International New Tool to Help Decision-Makers Implement Visitation Policies that Keep People Safe and Together with Essential Family Caregivers**

<https://isqua.org/resources-blog/blog/new-tool-helps-decision-makers-implement-visitation-policies-that-keep-people-safe-and-together-with-essential-family-caregivers.html>

**7th July 2021**

**ISQua EEA White Paper: Clarifying the concept of external evaluation**

<https://isqua.org/resources-blog/blog/white-paper-clarifying-the-concept-of-external-evaluation.html>

# FINANCIALS

## Turnover

An analysis of turnover derived in Ireland and the rest of the world by class of business is as follows:

	2020	2019
	€	€
Sponsorship and grants	191,164	317,514
Education, Subscription and membership	368,976	325,837
Conference, accreditation and journal	633,650	1,493,813
	1,193,790	2,137,164

## Tangible fixed assets

	S/Term Leasehold Property	Office equipment	Computer equipment	Total
	€	€	€	€
<b>Cost or valuation</b>				
At 1 January 2020	30,128	25,925	-	56,053
Additions	-	9,583	-	9,583
Disposals	-	-	(21,337)	(21,337)
At 31 December 2020	30,128	35,508	(21,337)	44,299
<b>Depreciation</b>				
At 1 January 2020	9,038	25,221	-	34,259
Charge for the year on owned assets	3,013	1,956	-	4,969
Disposals	-	-	(21,337)	(21,337)
At 31 December 2020	12,051	27,177		

			(21,337)	17,891
<b>Netbook value</b>				
At 31 December 2020	<b>18,077</b>	<b>8,331</b>	-	<b>26,408</b>
<i>At 31 December 2019</i>	<i>21,090</i>	<i>704</i>	-	<i>21,794</i>

## Intangible Assets

		<b>Computer software €</b>
<b>Cost</b>		
At 1 January 2020		<b>191,057</b>
Additions		<b>20,119</b>
Disposals		<b>(35,159)</b>
At 31 December 2020		<b>176,017</b>
<b>Amortisation</b>		
At 1 January 2020		<b>95,655</b>
Charge for the year		<b>67,338</b>
On disposals		<b>(35,159)</b>
At 31 December 2020		<b>127,834</b>
<b>Netbook value</b>		
At 31 December 2020		<b>48,183</b>
<i>At 31 December 2019</i>		<i>95,402</i>

**Debtors**

	<b>2020</b>	<b>2019</b>
	<b>€</b>	<b>€</b>
Trade debtors	-	18,880
Other debtors	<b>552</b>	-
Prepayments	<b>44,077</b>	44,817
Accrued income	<b>173,997</b>	261,700
	<b>218,626</b>	<u>325,397</u>

**Current asset investments**

	<b>2020</b>	<b>2019</b>
	<b>€</b>	<b>€</b>
Other current asset investments	<b>773,387</b>	672,712
	<u><b>773,387</b></u>	<u>672,712</u>

**Investments at market value**

	<b>2020</b>	<b>2019</b>
	<b>€</b>	<b>€</b>
Opening balance	<b>672,712</b>	651,422
Movement in cash balances	<b>55,571</b>	(68,453)
Realised gains/(losses)	<b>15,001</b>	(3,272)
Unrealised gains	<b>36,353</b>	97,994
Investment income	<b>2,900</b>	2,722
Fees and other investment charges	<b>(9,150)</b>	(7,701)
	<u><b>773,387</b></u>	<u>672,712</u>

Investments are stated at market value and are invested in a combination of bonds, equity, absolute return, property, commodities and other alternatives.

## Analysis of investments

	<b>2020</b>	<b>2019</b>
	<b>€</b>	<b>€</b>
Unrestricted investments	<b>569,357</b>	500,000
Restricted investments	<b>204,030</b>	172,712
	<b>773,387</b>	672,712

The restricted funds are monies set aside for a particular purpose and cannot be used for other expenses of the organisation.

	<b>2020</b>	<b>2019</b>
	<b>€</b>	<b>€</b>
Cash at bank and in hand	<b>713,768</b>	312,024
	<b>713,768</b>	312,024

## Creditors: Amounts falling due within one year

	<b>2020</b>	<b>2019</b>
	<b>€</b>	<b>€</b>
Payments received on account		
Trade creditors	<b>155,665</b>	161,523
Taxation and social insurance	<b>11,105</b>	7,419
Other creditors	<b>14,712</b>	25,329
Accruals	<b>8,095</b>	3,677
Deferred income	<b>205,979</b>	177,060
	<b>378,932</b>	171,177

## Reserves

Profit & loss account

The reserve comprises accumulated surpluses and deficits. Included within the reserves an amount of €205,960 (2019: €172,212) arising donations are restricted for specific purposes.

## Company Status

The company is limited by guarantee and consequently does not have share capital. Each of the members is liable to contribute an amount not exceeding €1 towards the company's assets in the event of liquidation.

## Pension Commitments

The Company operates a defined contributions pension scheme. The assets of the scheme are held separately from those of the Company in an independently administered fund. The pension cost charge represents the company's contributions to the fund and amounted to €25,644 (2019: €20,058). Contributions totalling €8,095 (2019: €3,223) were payable to the fund at the balance sheet date and are included in creditors.

## Rental commitments under operating leases

At 31 December 2020, the Company had future minimum lease payments under non-cancellable operating leases as follows:

	<b>2020</b>	<i>2019</i>
	<b>€</b>	<b>€</b>
Not later than 1 year	<b>124,445</b>	<i>124,445</i>
Later than 1 year and not later than 5 years	<b>497,781</b>	<i>497,781</i>
Expiring later than 5 years	<b>124,445</b>	<i>248,891</i>
	<b><u>746,671</u></b>	<i><u>871,117</u></i>

## Related party transactions

The International Society for Quality in Health Care External Evaluation Association (IEEA) was established by the International Society for Quality in Health Care to deliver

its external evaluation services. The IEEA is a separate legal entity which is based in Geneva, Switzerland.

Intercompany income recharged from IEEA during the year amounted to €433,044.

**Approval of financial statements**

The board of directors approved these financial statements for issue on 8th September 2021

# DÓCHAS CODE OF CONDUCT

The International Society for Quality in Healthcare (ISQua) endorses the principles of the Dóchas Code of Conduct on Images and Messages. ISQua has been added to the list of signatories on the Code website ([www.dochas.ie/code](http://www.dochas.ie/code)).

As a signatory to the Code of Conduct on Images and Messages, we have committed to supporting all the principles of the Code and to meet the eight adherence criteria:

- ▶ Make reference to the Code on your main website by displaying the Code logo either on your “Homepage” or in your “About us” section;
- ▶ Make reference to the Code in your annual report;
- ▶ The Board of your organisation to send an Adherence Confirmation Letter to Dóchas on an annual basis;
- ▶ Appoint a Code Champion;
- ▶ Put in place a training plan for staff, management and volunteers;
- ▶ Provide explicit information on feedback mechanisms on your website;
- ▶ The Board of your organisation discusses Code compliance at least once during the 12 month review period;
- ▶ Develop a Code implementation plan.

# LEGALITIES

The International Society for Quality in Health Care Company, Limited by Guarantee trading as The International Society for Quality in Health Care (ISQua).

**Charity Number: CHY 18724**

**Company Number: 461093**

**Registered Address: 4th Floor, Huguenot House, 35 – 38 St Stephens Green,  
Dublin 2, D02 NY63, Ireland**

ISQua is an independent not-for-profit organisation and as such does not endorse, promote or support any particular products or services provided by third parties.

