



ANNUAL REPORT 2018 - 2019

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EXECUTIVE SUMMARY

This annual report details the activities undertaken by the International Society for Quality in Health Care (ISQua) from September 2018 to September 2019.

ISQua's vision is to transform health and the quality and safety of healthcare, through global communities. Our presence has continued to expand over the past year and we are proud to have contacts in over 70 countries.

Each department and programme have provided their key achievements, challenges faced, changes and updates from the past year.

Key highlights from the past 12 months include:

- We have seen a 13% increase in Individual Membership and a 17% increase in Institutional Membership over the past year. Our number of active members is now the highest it has been since the formation of the organisation.
- The annual ISQua Conference held in Kuala Lumpur, Malaysia in September 2018 was a success with over 1,200 delegates from 70 countries.
- We have the highest number of active Fellows since the inception of the Fellowship programme
- Our Specialist Certificates were launched in January 2019. There are now 5 separate specialist certificates and have been translated into Portuguese for the Brazilian market.
- We successfully launched our new website and learning management platform
- The IJQHC Journal abstracts are now translated in 6 languages: Japanese, Spanish, Simplified Chinese, Traditional Chinese, French and Portuguese.
- We now have five Communities of Practice covering Latin America, Africa, South-East Asia, Quality Improvement and Patient-Centred Care.
- We have had excellent feedback on the changes to the website and have rebranded our logo. We have had over 14,000 more visits to the website since the new site went live compared to the previous period.
- The creation of our new association – the ISQua External Evaluation Association (IEEA)
- Cooperation agreements have been signed with two new organisations – the Paediatric International Patient Safety and Quality Community (PIPSQC) and the Patient Safety Movement Foundation (PSMF).

STRATEGIC GOALS 2018 – 2020

Introduction:

When ISQua's Board met in March 2018, they redesigned and rebuilt our strategy for the next three years. The strategies are inter-dependent with a common purpose and have person-centred care at the core.

As a membership organisation, ISQua aims to increase the network of Members worldwide with a focus on developing benefits for Members so that they are supported in their efforts to innovate, transform, develop and improve safe person-centred care.

Underlying principles for the strategy:

- Placing people, patients and health care providers at the core of all our work.
- Serving all our Members, consumers, customers and stakeholders.
- Being a global organisation in all our activities.
- Developing a financially viable base.
- Effectively enabling networks of people and organisations who want to improve care by different means.
- Facilitating the development of policy and research in Quality Improvement, Patient Safety and External Evaluation.

STRATEGIC AIM 1: BUILD ON OUR FOUNDATION AND OUR SUCCESS

- Knowledge Management
- External Evaluation
- Members
- Patients

STRATEGIC AIM 2: DEVELOP INTERVENTIONS FOR IMPROVING QUALITY AND SAFETY NETWORKS

As an organisation, ISQua is a network of individuals and organisations aiming to improve healthcare and safety. ISQua will develop innovative solutions working with our partners and patients; this will be achieved through the promotion of networks and Communities of Practice. These offer the opportunity for sustainable growth of ISQua and of the spreading of skills, knowledge and shared learning.

- QI networks
- Advisory services to develop and promote quality and patient safety
- Communities of Practice – e.g. Regions, Safety, Patient Engagement.

STRATEGIC AIM 3: DEVELOP PROGRAMMES AND EXPAND IMPACT IN ALL REGIONS

ISQua aims to develop an improvement network of healthcare providers in all regions with a special focus on LMIC and provide support for continual improvement in resource-poor environments with regional networks and Communities of Practice, e.g. in Africa, the Indian subcontinent, Central and South America in the first instance followed by other regions. All our programmes will aim to build sustainable knowledge sharing through Communities of Practice and supporting local programmes and meetings.

We will support QI networks and offer advice and support to local organisations

- Communities of Practice and Networks
- Support Universal Health Coverage
- Focus on WHO Programmes
- NQPS
- Maternal Child Health
- Universal Health Care
- Integrated Care
- World Safety
- Focus on LMIC

STRATEGIC AIM 4: MAINTAIN DEVELOP AND FOSTER STRATEGIC PARTNERSHIPS

As an international society, ISQua will work with Members, stakeholders and partners to help deliver and enhance programmes to improve the quality of care for people worldwide including continuing to strengthen relationships with partners such as the WHO, World Bank, IHI, and the IHF.

ISQua supports specific WHO programmes such as National Quality Policy and Strategy (NQPS), Integrated Care, Universal Health Coverage (UHC) and the WHO Patient Safety Programme.

- World Health Organization (WHO)
- Institute for Healthcare Improvement (IHI)
- International Hospital Federation (IHF)
- New partnerships to further the aims of ISQua
- Other partnerships

MISSION, VISION & TAG LINE - 2019 UPDATE

When the Board met in March 2019, they took on board suggestions, and idea's from the staff to clarify ISQua's purpose.

From this, it was agreed to update the Mission, Vision and Tag Line.

Old Mission:

To inspire and drive improvement in the quality and safety of healthcare worldwide through education and knowledge sharing, external evaluation, supporting health systems and connecting people through global networks

New Mission:

To inspire and empower people to advocate for and facilitate health and improvements in the quality and safety of healthcare worldwide.

Old Vision:

To be the global leader of transformation in healthcare quality and safety.

New Vision:

To transform health and the quality and safety of healthcare, through global communities.

Old Tagline:

Inspiring and driving improvement in the quality and safety of healthcare worldwide

New Tagline:

KNOWLEDGE | NETWORK | VOICE

Join us to improve your Knowledge, build your Network, and make your Voice heard.

LOGO REBRANDING

The original ISQua logo was rebranded in 2013. With the 2013 rebrand, we also created sub-logos for each of our programmes [Membership, Fellowship, Experts, Accreditation & QI Network].

Due to confusion over the years on when and where these logos should be used, a decision was made in 2018 to revert to just the single ISQua logo.

With the creation of ISQua's separate legal entity – The International Society for Quality in Health Care External Evaluation Association (IEEA) – in December 2018, a brand refresh was timely.

The design process for the new logo provided an opportunity to remind ourselves what ISQua stands for and reflect on how we want to be viewed by healthcare organisations and professionals around the world. A logo is a visual representation of an organisation and can form a crucial first impression, so we thought very carefully about what we wanted our new logo to say.

We chose to retain the strongest visual features of our original logo to preserve the recognition that we have developed over the past 34 years while creating a logo that is fit for the future and looks more modern and progressive. The inclusion of the full ISQua title as a tag line strengthens the recognition of the logo and will help ease us into new markets.

New features for ISQua

The colour palette has remained the same, with blue tones, as these colours provide a sense of trust, dependability and strength. The colours have been smoothly graduated to create a more cohesive feel.

The colours graduate to highlight the 'Q' for 'Quality' in Health Care is the main aim of our society.

The arrows now point towards ISQua rather than away, symbolising that we are the destination for improving quality and safety in health care.

The new logo will be used across all ISQua programmes, which we hope will imbue them with the trust and value that ISQua is known for, while strengthening our overall brand.



The IEEA

The IEEA logo uses the same structure and typeface as the updated ISQua logo, to illustrate the connection between the two organisations while identifying them as separate entities.

The IEEA logo grows naturally from the updated ISQua logo.

The colour palette includes purple, which was previously used in the ISQua sub-logo for accreditation and a blended blue from the ISQua palette.

This logo can stand on its own while still retaining the connection to ISQua.



Strengthening the ISQua brand and developing a recognisable IEEA brand are important steps on our journey into new markets and towards achieving our aspiration to become a global leader in healthcare transformation.

FORWARD BY THE CEO



Over the past three years, I have worked closely with our Board and Staff to ensure that ISQua is the leading international body that is working to transform the way we promote health and deliver healthcare. We have defined what our Mission means to us, and we believe, to our Members and the ISQua Community as a whole.

We have moved our attention from our programmes to our Community and look to how we can inspire and empower people to advocate for improved quality of care and patient safety.

We have simplified our tag line without simplifying our message or goal – *Knowledge, Network, Voice*. Or in other words, join us to improve your *Knowledge*, build your *Network*, and make your *Voice* heard.

There are numerous milestones which demonstrate our service to our members, and our growing influence worldwide.

Knowledge

We have expanded and revised our education programme with an improved Fellowship Programme. Over the past year, we have introduced three Introduction specialist certificates, and we are launching two more at the Cape Town conference. We have a new learning platform which enhances learning, and partnerships with Argentina/Brazil to bring our teachings to non-English speaking communities

Network

The ISQua Network is growing.

The foundation network of ISQua is our International Accreditation Programme (IAP) now 20 years old. The IAP, which is now managed by our new association, the ISQua External Evaluation Association (IEEA). The IAP Network has enabled external evaluation organisations to validate their systems, drive continuous quality improvement, demonstrate that they meet international best practice requirements, and benchmark their performance on an international level.

ISQua representatives have spoken at over 30 conferences over the past 12 months covering regional events held in Colombia, Nigeria, Ghana, Argentina.

We have increased the number of ISQua Experts to over 200 from all parts of the world. We have new partnerships with the Paediatric International Patient Safety and Quality Community (PIPSQC) and the Patient Safety Movement Foundation (PSMF).

And the most important measure of success is the number of members, both individual and institutional, which is at the highest level ever.

Voice

As a world leader, ISQua has published statements on Global Action on Patient Safety (February and May 2019), Universal Health Coverage and Patient Safety (March 2019), and a joint statement with IHF on World Patient Day.

On World Patient Safety Day in September 2019, we asked our Experts and Patient Representatives for their thoughts regarding current patient safety conditions in their region and how they, and other caregivers & advocates can speak up for patient safety. We were delighted with the response!

And we have given Voice to our Emerging Leaders, Lucian Leape Scholarship recipient, Patient Inclusion Scholarship recipients, and Conference/Membership and Fellowship scholars.

A new initiative being launched at the conference is our free membership for people living in Low-Income Countries to enable them to be part of the ISQua community. Called *Ubuntu* this programme will be an initiative to help give access to all.

ISQua's 36th International Conference will be held, for the first time, on the African continent, in South Africa, in my adopted home town of Cape Town. I look forward to highlighting Africa's developments and innovations on ISQua's international stage. This fits in with our joint work in Africa with Irish Aid in Mozambique and Ethiopia.

It has been an honour to be CEO, and I want to thank the President, Wendy Nicklin, and the Board for allowing the growth and development of ISQua to its current prominent position.

Dr Peter Lachman
ISQua CEO

FORWARD BY THE PRESIDENT-ELECT



Annual reports are a great time to stop and reflect on achievements. As the International Society for Quality in Health Care (ISQua) marks a third of a century of contributions, I want to express how delighted I am to be President-Elect, and to record a few words to help celebrate the events that helped shape ISQua's 34th year.

There are undoubtedly global and regional challenges for our organisation, which has at its heart the aim to help members, countries and institutions to improve the quality of care provided to patients and keep them safe from harm. A couple of decades ago, there was a prevailing view that this would be relatively easy. If we train staff in quality improvement methods, institute campaigns such as those for hand hygiene, record all incidents, conduct root cause analyses for more serious cases, develop checklists and stick to them, devise new policies, ensure care is delivered in accordance with those policies, guidelines and standard operating procedures, then care would be on an improvement gradient, and safer for all patients.

What we now know is that these types of initiatives are necessary, but not sufficient, to provide safe, effective and high-quality care. To make further gains we need a deeper understanding of the systems and practices that deliver high-quality care, to appreciate how workplace cultures enable and constrain behaviours, to understand much more fully how things go right as well as go wrong, to bring even more stakeholders into the worldwide efforts to improve care, and to emphasise partnerships and collaborations right through health care – at team, organisation, and whole systems levels. We have learned that delivering safe, effective care is not simply the product of a lone clinician, no matter how skilled. Providing care is a team game.

ISQua recognises this fundamental principle, and its mission is deeply reflective of this. Our vision is to *transform health, and the quality and safety of healthcare, through global communities*. We do that through many programmes, meetings, educational events, accreditation visits and other work with our stakeholders. At the bedrock, we provide and support the acquisition of knowledge; facilitate and enable people to network and give people and institutions a voice. As we say on our website: *Join us to improve your Knowledge, build your Network, and make your Voice heard*.

As a Board Member, and someone who has strived to contribute to ISQua in various ways for almost 20 years, I am particularly proud of the shape ISQua is in right now. Alongside traditional programmes in external assessment, we have a multitude of events including the annual conference, communities of practice and networks for people to join and many opportunities for education, most especially via the flagship Fellowship Programme and Specialist Certificates. ISQua's benefits to Members are extensive: access to the fine journal – the International Journal for Quality in Health Care (IJQHC), online webinars for Members, special interest groups, recognition as a quality and safety professional, and the right to vote in ISQua board elections, to mention only a few.

May I take, this year, the opportunity to record my appreciation to fellow Board members, past and present, for their efforts in support of ISQua. I particularly would like to recognise the tireless efforts of my fellow Officers—President, Wendy Nicklin, and Immediate Past President, Cliff Hughes. Many people will know about Wendy's expertise in accreditation, her passion for quality

and safety, and her unselfish mentorship as offered to many. Many people will also know about Cliff's background as a cardiothoracic surgeon, researcher of quality improvement and bureaucrat amongst many other roles that he has played. I know they are both an inspiration to the entire ISQua family, just as they have been to me personally.

Finally, I would like to thank Peter Lachman and the team in Dublin who keep the whole ISQua show on the road. Much of what is in this annual report reflects on their fine efforts to serve, and provide services, to all those who come within ISQua's orbit.

Professor Jeffrey Braithwaite
ISQua President-Elect

FORWARD BY THE PRESIDENT



As President of ISQua, I am proud to provide you with some highlights of the past 12 months and outline the significant progress that continues to be made.

Of primary importance is my commitment to you to ensure that the governance of ISQua is sound and effectively enables ISQua to progress; to achieve our mission (*to inspire and empower people to advocate for, and facilitate health and improvements, in the quality and safety of healthcare worldwide*) and vision (*to transform health, and the quality and safety of healthcare, through global communities*).

To that end, we continued to focus on governance renewal over the past year, and in particular, at the Board retreat in March 2019. The focus was to implement the changes identified in March 2018 and then continue the development of our evaluation strategy.

We conducted our first full Board annual evaluation last fall with results noting that areas of improvement include that of Board orientation and utilisation of the skills & expertise of the Board members. In all other aspects, the Board is functioning well. I conducted 1:1 interviews of the Board and Honorary Advisory Members during January. This provided further valuable input into our retreat and areas to strengthen governance.

We are indebted to the Irish Department of Health (DoH) for their financial contribution to our organisation. This support of ISQua is important to our stability. We are sincerely appreciative of this and committed to maintaining a positive relationship, contributing in several ways to share our knowledge and expertise with the DoH.

We have made significant progress in the quality and number of educational offerings. For example, the new curriculum and activities of the fellowship programme are strengthening as well as continuing development and release of other products such as the Specialist Certificates.

The establishment of the ISQua International External Evaluation Association (IEEA) has been a major undertaking, and our business has evolved such that the International Accreditation Programme (IAP) is now situated within the IEEA. We have focused on developing & implementing a sound governance structure for this organisation.

This year we celebrate the 20th anniversary of the International Accreditation Programme (IAP). Details of the accomplishments of the past 20 years are published in our anniversary booklet, available as a hardcopy or online. We are very proud of the accomplishments and its contribution to the profile and impact of ISQua over this period – truly contributing to improving the quality of healthcare globally.

Membership numbers of both individuals and institutions are on the rise – a testament to the growing profile and visibility of both ISQua and IEEA.

A sincere thank you is extended to David Bates for proposing and becoming the first President/Chair of the International Academy of Quality & Safety (IAQS). The first members of the

Academy were elected in 2018. An additional twenty were elected in March 2019 bringing the total number to 55. We are honoured that individuals such as Dr Don Berwick and Sir Liam Donaldson are among those most recent esteemed colleagues to join the Academy.

The establishment of the Lucian Leape Patient Safety Fellowship, announced at our AGM in 2018, was launched in January 2019. Congratulations to the first fellow, Dr Subhrojyoti Bhowmick, currently working in Kolkata.

In summary, progress is noted in our strengthened external profile and effectiveness (noting escalating membership and demand for our expertise), moving forward with networks, escalating our regional presence in areas such as Argentina, improving our approach to regional conferences, building on partnerships and enhancing our person-centred commitment through all of our work.

On behalf of the Board, we are sincerely grateful to our CEO, Dr Peter Lachman, and to the entire team for their leadership, energy, knowledge and expertise. Thank you all so much.

Thank you to Cliff Hughes, our outgoing Past President. Cliff has made an immense contribution to ISQua for which we are very appreciative. Thank you, Cliff. To Jeffrey Braithwaite, President-Elect, thank you for your expertise and wise counsel.

Thank you to all Board and Honorary Advisor members. ISQua is governed by a well-qualified and committed group of professionals, firm in their resolve to enable this organisation to continue growing and impacting on the quality of healthcare globally.

Finally, my thanks to you, ISQua's Members and partners. Your involvement and support in so many ways are invaluable. Everyone is an important part of our ISQua team.

We look forward to continuing to advance ISQua over the next 12 months and to make a global difference in the quality and safety of health and social care.

Wendy Nicklin
ISQua President

ANNUAL REVIEW –

Conference and Events

Strategy

In the past year, we aimed to provide leading international networking and educational events for all those involved in improving health and social care worldwide.

Key Achievements

The Kuala Lumpur conference took place in October 2018, with over 1,200 delegates attending from 70 countries. Of the delegates surveyed 98% would recommend the conference to their colleagues. The International Journal for Quality in Health Care (IJQHC) included a supplement of the 2018 abstracts, and there was a record amount of delegate blogs.

The 2019 conference is scheduled for Cape Town and as of 4th September over 920 delegates have registered from over 75 countries.

Both the 2017 and 2018 Conferences received accreditation from the European Accreditation Council for Continuing Medical Education (EACCME®). We have applied and received EACCME Accreditation for the Cape Town Conference, making this four years in a row.

The London 2017 and Malaysia 2018 Conferences successfully achieved Patients Included status. This status signifies that the event has demonstrated their commitment to incorporating the experience and insight of patients into their organisations by ensuring that they are neither excluded nor exploited. Unfortunately, Patients Included is no longer an active body; however, we are determined to still meet all the obligations associated with the Patients Included charter.

Challenges

The main challenge, like all years, is maintaining a high standard and innovative conference, while keeping within budget. This was especially difficult in Kuala Lumpur due to the high costs of the venue and a lower than usual uptake on sponsorship opportunities. Each year brings a new venue and a new challenge. Each venue has its positives and negatives, but we endeavour to keep to the high standard our conference is known for.

Having found the e-poster displays were very popular last year, with some minor changes we will include this in the programme again for Cape Town – these have been renamed as Lightning Talks. As September and October are the most popular time of year for conferences, we are working closely with our partners such as IHI and IHF to ensure we do not overlap on our dates and support each other rather than compete.

Patients

The London survey highlighted the fact that we need more patient involvement in the programme. A conscious effort was made to involve more patients for Malaysia and Cape Town, both in designing the programme and participating in the sessions. For the second year, in a row, we have provided scholarships for patients, patient advocates and caregivers to attend the conference.

There were over 100 applications received, from all regions, which highlighted the interest from patients and caregivers be being part of conferences like ours. Ten scholarships were awarded a registration and stipend to assist with travel and accommodation expenses. We plan to integrate the scholars and their stories in a meaningful way within the programme.

Speaker Bureau

We are in the third year of our Speakers Bureau service, and to date, in 2019 we have placed ISQua Experts in over 25 meetings. Going forward, ISQua will only provide expert speakers to its Institutional Members.

Included in these meetings are joint South American regional events in Colombia and Argentina, and ISQua funded regional events in Ghana and Nigeria. This is still a relatively new programme; however, it is significant in helping to expand ISQua's global reach and promoting our programmes to all regions.

Programme Update

As you can see from the below chart, 2018 and 2019 has seen lower numbers of registrations and abstract submissions to 2017, but our averages are still above from previous years.

Our future conference locations are planned for Florence, Italy in 2020, and Brisbane, Australia in 2021. There are four cities currently bidding to host the conference in 2022 and 2023.



ANNUAL REVIEW –

Education

Strategy

The Education Team has transitioned through a major period of change over the past twelve months, which provided an opportunity to reassess, redevelop, and ultimately refresh the educational offerings provided by ISQua. This transition period has enabled us to streamline our educational offerings and refine both our message and value proposition. This in-depth review has resulted in the development of an organisation-wide implementation plan of the Board's strategy, resulting in the community-focused Knowledge, Network, Voice strategy.

Key achievements

The primary achievement for the Education Team has been the extensive review and redesign of the Fellowship Programme. This resulted in the development and implementation of Knowledge, Network, Voice strategy. The review helped identify that ISQua is first and foremost a community, and enabled us to articulate the core values of the programme:

Knowledge	Network	Voice
Learn from a wide range of international experts and peers and start making improvements within your own personal context.	Expand your professional network, make new contacts and become a valued member of our community.	Share your thoughts, ideas and opinions, and showcase your research with international peers. Be confident in implementing improvement.

Other key achievements include:

- There are now a record number of active Fellows on the Fellowship Programme.
- The launching of three Specialist Certificates in January 2019.
- Three Specialist Certificates have been translated into Portuguese and launched with our Brazilian partner CBA.
- The introduction of a Specialist Certificate in Medication Safety at the Cape Town conference.
- The successful redesign of the Fellowship Mentoring Platform

Challenges

The main challenge faced throughout the year has been the balance of human and company resources. Following the departure of the Head of Education, the Education Team reduced down to a team of two, with ongoing support from the CEO. Improving the previous infrastructure and level of service, while also redeveloping the Fellowship Programme, launching four new Specialist Certificates, developing international partner programmes, and increasing enrolments on each educational offering, with a full-time team of two and limited budget, has been challenging. It has

also been a rewarding experience as it has challenged us to be creative in finding workable solutions.

We encountered some teething issues during the transition to the new website, which was to be expected. We have rectified these and the service offered is now greatly improved.

Changes

As noted previously, the Education Team has transitioned through a major period of change over the past twelve months. The main changes that occurred are as follows:

- The Head of Education departed ISQua, reducing the Education Team down to two full-time staff members, with support from the CEO.
- The migration to the new website has resulted in a major change and improvement in the delivery of the education programmes.
- The implementation of the Knowledge, Network, Voice strategy has completely changed the approach and philosophy towards developing and selling the educational programmes.
- The role and expectations of the Education Content Committee are currently being reviewed.

Programme Updates – Fellowship Programme

The Fellowship Programme currently has 483 active Fellows, which is a record high for the programme.



The new and improved Fellowship Programme has been taking shape as follows:

Knowledge

At the start of 2019, we embarked on a major plan to restructure and update all content and develop a new and improved curriculum that responds to the needs of healthcare professionals today. We curate all content into topical themes and underpin all learning with an academic framework that has a practical and person-centred care focus.

The new ISQua Mentoring Programme was launched in August and will offer ISQua Experts and Fellows an invaluable opportunity to share knowledge, wisdom and ideas. This programme aims to connect Experts and Fellows who can benefit from an enriching exchange of knowledge and wisdom based on mutual interests and desired outcomes.

Network

Networking is one of the most important aspects of the Fellowship Community and a key reason why Fellows choose to renew year after year. The new custom-built education platform provides Fellows with the opportunity to connect easily with peers and other experts across the extensive ISQua network.

Our online activities, including live webinars, virtual coffee breaks and Ask the Expert sessions, are a pivotal part of our new community-focused strategy. These dynamic sessions present community members with a great opportunity to learn from international experts, join interactive discussions and meet other healthcare professionals. We also created the new ISQua Podcast intending to find new audiences and allow people to learn from expert guest speakers and sharing inspiring talks with their communities.

Voice

One of the most compelling aspects of the Fellowship Programme is about giving healthcare professionals a voice. This is a vital part of how the programme helps empower learners to be the change they wish to see in healthcare.

We provide as many opportunities as possible for Fellows to showcase their work, share their stories, participate in peer discussions, present their work through our virtual events and speak at our conference. Most importantly, the Fellowship Programme gives healthcare professionals the confidence to implement change within their context.

Programme Updates – Joint Programmes

We have revised the Joint Programmes and introduced a new structure which ensures that our partners are highly involved in the development and marketing of these programmes and that the curricula are tailored to the needs of specific regions.

Programme Updates – Specialist Certificates

The ISQua Specialist Certificates provide ultimate focus in personal learning and in implementing healthcare improvements. Currently, there are three Specialist Certificates available:

- Principles of Person-Centred Care,
- Clinical Applications in Person-Centred Care and
- Fundamentals of External Evaluation Surveying.

We will be launching two new Specialist Certificates at the 36th International Conference in Cape Town – an Introduction to Quality Improvement & Patient Safety; and one on Medication Safety.

ANNUAL REVIEW –

Membership

Strategy

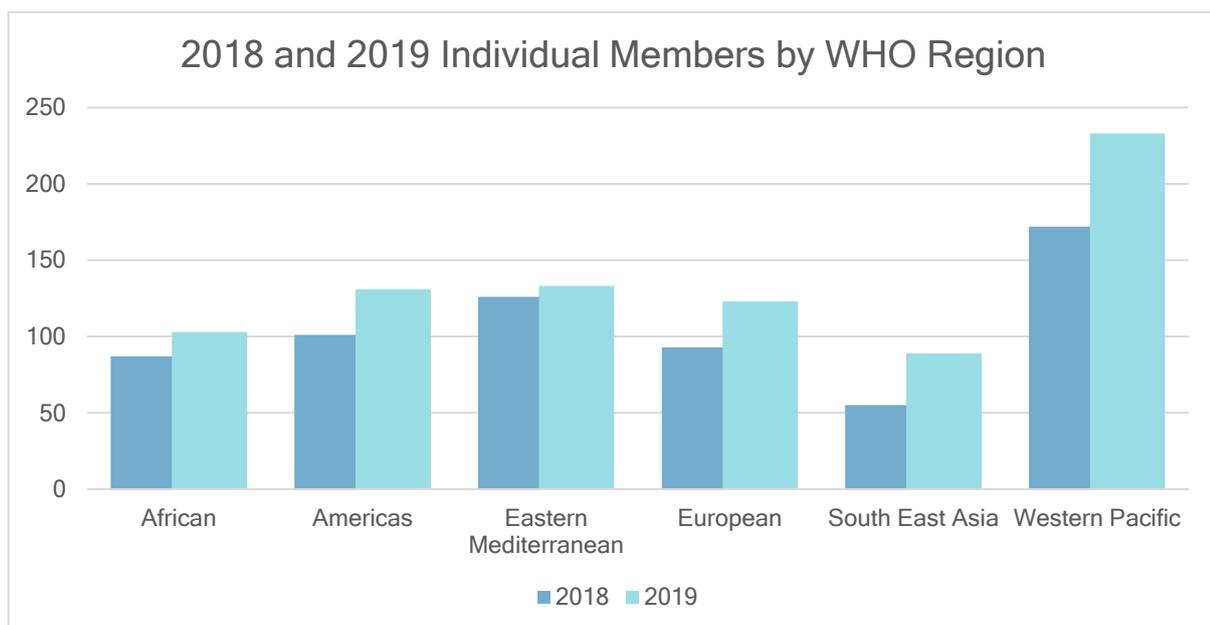
Increasing the value of membership for our Members is always a priority. We aim to increase our network of Members worldwide with a focus on developing benefits to support our Members in their efforts to innovate, transform, develop and improve safe person-centred care. In addition, we wish to increase the geographical spread of our members as well as reaching members in all fields of healthcare.

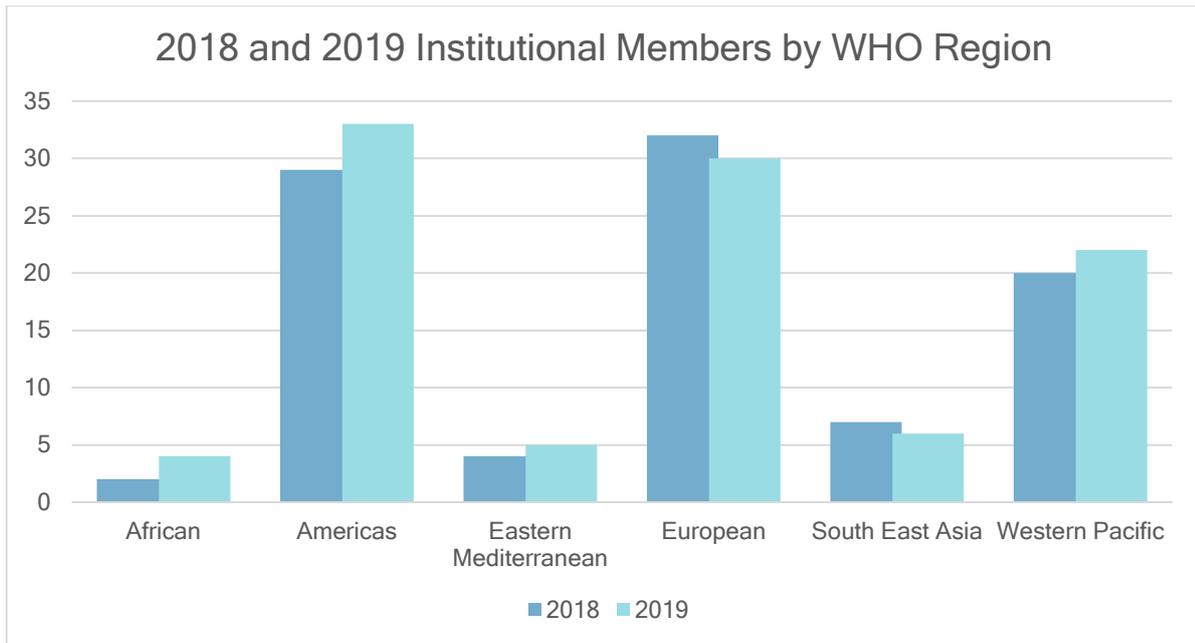
Key Achievements

The launch of the new website in September 2018 has provided increased value to our members allowing them to connect with other Members securely, improved access to resources such as our peer-reviewed Journal (the International Journal for Quality in Health Care) and provided a mobile version of our website for ease of access. The introduction of the three-tiered membership fee, based on World Bank ratings of country economies, for our Institutional Members, were received well.

2019 saw an increase in membership numbers which were the highest since 2010. At the time of writing there are 819 Individual Members and 102 Institutional Members. The geographical spread of our members has increased with Individual Members from 74 countries and Institutional Members from 46 countries.

Regional spread of our 2019 members compared to our 2018 are noted below.





Challenges

We strive to provide value to our Members year after year. We understand that our Members join for several different reasons and identifying benefits to meet the local needs of our Members is always a challenge.

Our aim for 2019 is to attract more healthcare professionals that are at the start of their professional careers to become Members while retaining our current demographic.

ANNUAL REVIEW –

Journal

Strategy

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 of health care and health outcomes for populations and patients worldwide.

The strategy of the Journal is to encourage contributions from ISQua Board Members, IJQHC Editors, ISQua Members and ISQua Experts. The process is carried out by inviting papers from well-known, respected authors, while also encouraging submissions from developing countries.

In the past year, we have published Layman's summaries of the Editor's Choice articles in ISQua's Membership Bulletin. The Layman's summaries have been translated into several languages, and the variety of languages continues to increase.

Our focus for this year was to reduce the turnaround time for publication. To encourage and assist those living and working in Lower- and Middle-Income Countries (LMICs), ISQua held a Webinar outlining the requirements for submission. To raise awareness of the Journal, we endeavour to promote the ISQua Journal at other related conferences. We will focus on short paper categories in the future: Quality in practice, Perspectives on quality and Frontiers of improvement to publish more without influencing the Impact Factor and page budget.

Key achievements

- The impact factor is stable (2015: 2.545; 2016: 2.342; 2017: 2.554; 2018: 1.829)
- Increase in the number of issues: 10 in 2018.
- IJQHC Special Supplements:
 - Salzburg Global Seminar Session 565 - Better Health Care: How do we learn about improvement? (Published)
 - Lean Six Sigma (Accepted)
 - Patient-Reported Outcome Measurements (PROMs) (Accepted)
 - Deepening our Understanding of Quality in Australia (DUQuA) (Accepted)
- ISQua Conference abstracts supplement published (Year 2016 to 2018)
- Editor's choice promotion via OUP social media (Facebook & Twitter) plus press releases by OUP.
- Layman's summaries of editor's choice publishing in ISQua's Bulletin.
- Patient Community of Practice: Layman's summaries translation in Hebrew, Danish, Portuguese and Chinese Mandarin. The translation languages continue to increase.
- Abstracts Translations in 6 languages: Japanese, Spanish, Simplified Chinese, Traditional Chinese, French and Portuguese
- The number of submissions increased:
 - Year 2015: Papers 537,
 - Year 2016: Papers 691,
 - Year 2017: Papers 800,
 - Year 2018: Papers 832,

- Year 2019: Papers 501 (from 01.01.2019 to 31.08.2019).
- The acceptance rate is controlled at about 20% each year.
- Turnaround time (First submission to final decision) 2014-2015 (3 months decreased) (Average months: 8 to 5) (Maintained for 2015-2016) - Maintained for 2017 (Average days: 2017: 81 days; 2018: 67 days)
- 2018 Ranking in Health Care Sciences & Services (58 out of 98).
- 2018 Ranking in Health Policy & Services (44 out of 81).
- Journal session for promotion at ISQua conferences 2015 to 2018
- New reviewers recruited via the ISQua Members

Challenges

There have been many challenges this past year, including the need to secure more citations across different journals. We are making improvements to ISQua's marketing strategies as well as the approach to maintain the reputation of the journal due to new journals in the field. Due to the increase in submissions, the translation of abstracts is an on-going challenge for the abstract translation teams which can impact on the publication of issues.

ANNUAL REVIEW –

QI Network

The Quality Improvement Network was established to enable interested organisations to learn from each other as we improve the quality of care and work on challenges of patient safety. QI Network members meet on a regular basis to share key lessons from their experiences in implementing and developing quality improvement projects in their organisations.

As well as access to the QI Network, members benefit from Institutional Membership and can also choose if they wish to include conference registration places, Fellowship places and a specific number of expert advice days.

Members of the Quality Improvement Network are:

- Associação Congregação de Santa Catarina (ACSC), Brazil
- BC Patient Safety and Quality Council, Canada
- Canadian Foundation for Healthcare Improvement
- Clinical Excellence Commission, New South Wales, Australia
- Commission on Excellence and Innovation in Health, Australia
- Clinical Excellence Division, Queensland Government, Australia

ANNUAL REVIEW –

Community of Practice

Strategy

Our strategy for our Communities of Practice (CoP) is to increase collaboration between countries, encouraging them to share best practice and lessons learned through regular meetings of healthcare professionals. ISQua has devoted resources to establishing communities of practice, and we have scheduled a review of their objectives in the first quarter of 2020.

Programme Update

Since the establishment of the African Community of Practice (AfCoP) in 2017, a further four Communities have been set up.

- The Latin American and Caribbean Community of Practice (LACCoP)
- The Person-Centred Care Community of Practice (PCCCoP),
- The South-East Asia Community of Practice (SEACoP) and
- A Quality Improvement Community of Practice (QIPoC).

We are working on establishing a further CoP for Francophone Countries within Africa. The African CoP will present a workshop at the Cape Town Conference on health innovations within the African Region.

Challenges

An ongoing challenge for these groups is in maintaining a high level of engagement and attendance at meetings. Advance planning is essential to do this but can be difficult due to conflicting timetables and the workload of scheduled presenters.

ANNUAL REVIEW –

Communications

Strategy

As a membership organisation, ISQua aims to increase the network of Members worldwide with a focus on developing benefits for Members so they are supported in their efforts to innovate, transform, develop and improve safe person-centred care.

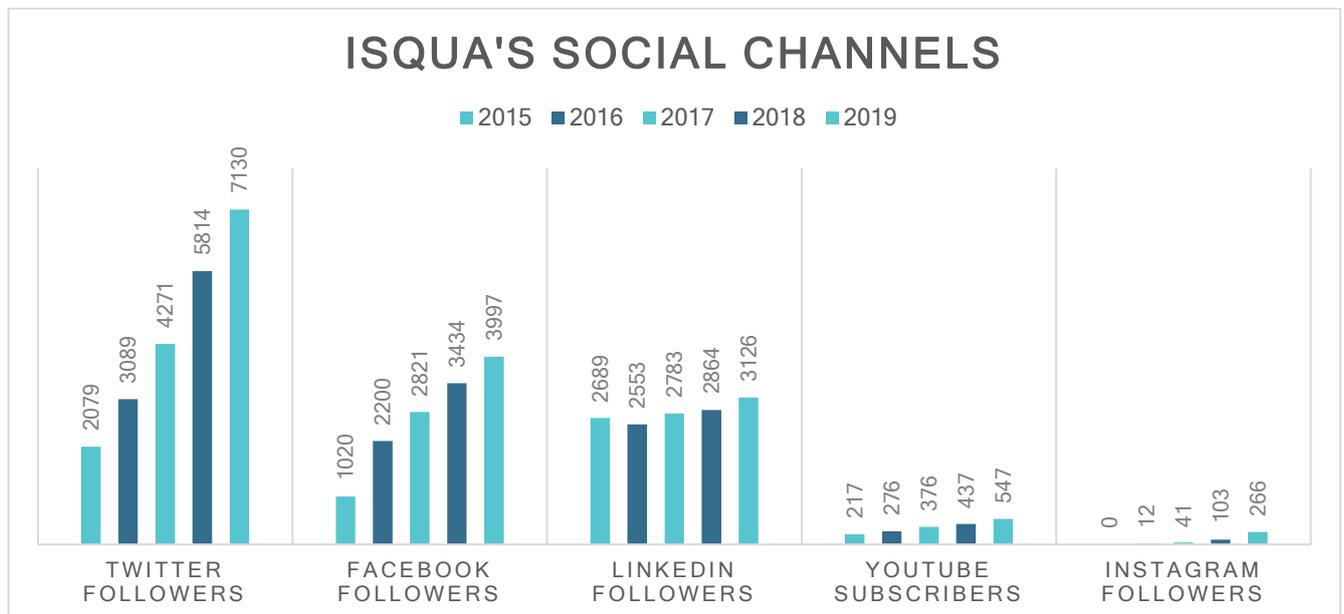
Communication is one of the key components to achieving our strategic aims; with active communication with members & non-members as part of this process.

Key Achievements

Social Media

Over the past 12 months we have continued to increase our social media presence. ISQua is active on Twitter (7,130 followers), Facebook (3,997 followers), LinkedIn (2,927 group members & 3,126 followers), and Instagram (266 followers). ISQua also utilises YouTube (547 subscribers, 148 videos) and Vimeo (92 videos).

We have seen a major jump in the use of Twitter over the past year, and most recently, a jump in our Instagram followers.



World Patient Safety Day



The first World Patient Safety Day took place on 17th September 2019. The event was marked with events around the world to raise awareness of the need to establish patient safety as a global health priority.

In order to help support 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. <https://www.isqua.org/events/world-patient-safety-day-2019.html>

We invited our Experts to record or write a short piece on their thoughts regarding current patient safety conditions in their region and how they, other care givers and advocates can speak up for patient safety. We received an excellent response, and these were published on the ISQua website and shared via ISQua's social media channels.

We also hosted a special Virtual Coffee Break on the day, dedicated to patient safety.

Challenges

The rebranding of the ISQua logo, while a positive and necessary change, also caused some challenges to ensure that everything was converted at the same time. It was necessary to update our website and social media channels; alert our partners and membership logo recipients; and ensure that the old logo was replaced with the rebranded logo, wherever used.

Changes

The ISQua website was updated in September 2018 and is now mobile – enabled. Over 50% of our web traffic takes place on mobiles or tablets.

The new website includes a blog and events area. Activities, events and news updated on the website can now be shared to our social channels. This has greatly increased our social involvement. We now regularly publish blog posts through our website and invite guest bloggers from our Community.

ANNUAL REVIEW –

Website

History

The ISQua website was successfully switched over on Friday, 14th September 2018. This was followed by the introduction of our new integrated content management system (CMS) to our Members on 19th September and to our Fellows on 8th October. There was a positive response from staff, board and users to the new website.

We streamlined menus, simplified navigation, built a responsive layout for all platforms and are now providing more resources and information on our products and services.

The biggest change to the site is the addition of the blog and resources sections, where visitors can access up to date and relevant content such as information on upcoming events, conference presentations, and articles from our newsletters.

Analytics

To determine if things are working positively with the new website/logged-in system, we analysed the data as it covers the immediate 12 months post-launch of the new website.

Overall the results are positive. ISQua has seen an increase in the number of visitor sessions to the website and visitor engagement has increased, with an increase in page views and number of sessions per user.

We have seen a solid increase in traffic, with over 14,000 more visits to the website since the new site went live compared to the previous period.

Our audience location has also changed. We have seen large gains in India who grew by 50%, Australia who grew by 25% and Brazil who grew by 14%. We have however seen traffic fall from the US by 9%, Taiwan by 27%, the UK by 31% and Malaysia by 35%. It is important to note that we now see increased traffic from the Middle East and Africa (e.g. Nigeria up by 164% and SA up by 230%).

Regarding demographics it appears ISQua users are getting older, the age group 65+ showed the biggest growth with 34% more users in this age bracket this year than last year. 55 - 64 years olds were the second biggest improvement with an increase of 9.5% in that user group. Meanwhile, the younger age groups 18 - 44 are seeing the least growth.

However, a younger demographic is appearing on our social media following; for example, our biggest age group on Facebook is the 25 - 44-year-old range.

Summary

It would appear the ISQua website is doing exceptionally well compared to this time last year and is translating into a higher number of conference attendees, members and education users.



ANNUAL REVIEW –

IEEA - International Accreditation Programme (IAP)

Strategy

In line with ISQua's strategic objective of building on its foundation programmes and their success, the focus on the past year has been on delivering training to surveyors on the 5th Editions of the Guidelines and Principles for the Development of Health and Social Care Standards (the Principles) and the Guidelines and Standards for External Evaluation Organisations (the Standards).

Organisations could opt to be assessed against either the 4th or 5th editions of the Principles and Standards for the first half of 2019. However, from August 2019 all organisations must be assessed against the 5th Editions.

Key achievements

The changes to ISQua's Memorandum and Articles of Association which would allow ISQua to establish a separate Association (s) to deliver services were approved by the annual general meeting (AGM) of ISQua members in September 2018. Following the approval of the changes to the Memorandum and Articles of Association, the ISQua Board then decided to establish a separate Association based in Geneva, Switzerland to deliver its external evaluation services including the International Accreditation Programme (IAP).

The Association called the ISQua External Evaluation Association (IEEA) is a separate legal entity and commenced operations on 1st January 2019. The Association has a website [<https://www.ieea.ch>] and logo. New accreditation award logos were developed as all accreditation awards will now be issued by the ISQua External Evaluation Association (the Association).

The creation of the Association in Switzerland means that external evaluation services are no longer delivered by ISQua in Ireland and therefore, Ireland as a member state is no longer in breach of EU 765 / 2008.

The Board of the ISQua External Evaluation Association (IEEA) is also the Board of ISQua and so this ensures that external evaluation services continue to be delivered in line with the overall ISQua mission, vision and values.

This year 2019, marks the twentieth anniversary of the International Accreditation Programme (IAP). Since 1999, the IAP has provided assessment bodies with an independent third-party assessment process to validate existing systems and drive continuous quality improvement.

The anniversary will be formally marked at the annual ISQua conference in October 2019 in Cape Town, South Africa and a special anniversary booklet has been produced to commemorate twenty years of the programme.

Challenges

The establishment and registration of the ISQua External Evaluation Association in Switzerland has been a priority for 2019. The Association now has a registration number and a VAT number in Switzerland and an accountancy firm and auditor have also been employed.

The Association is in the process of registering for not-for-profit status in Switzerland to ensure that it is operated in the same manner as ISQua. The biggest challenge encountered has been opening a bank account in Switzerland which is proving to be a lengthy and time-consuming process. The Association's accountancy firm is now assisting the Association to open a bank account and a decision from the bank is expected in the coming months.

The opening of the bank account delayed the issuing of the 2019 International Accreditation Programme (IAP) invoices until May 2019. As the Association's bank account was not yet open in Switzerland, a bank account was set up in Dublin, Ireland as a temporary measure to facilitate payment of the 2019 IAP fees.

Changes

In 2019, the IEEA Board directed IEEA staff to explore how it could expand the range and type of external evaluation services that it offers. In particular, the IEEA Board recommended that IEEA staff explore the feasibility of developing: a separate programme to assess sets of standards which do not currently fit within the scope of the International Accreditation Programme (IAP); and a programme to assess and accredit quality and patient safety education programmes.

Working groups comprising IEEA Board members, ISQua Experts and representatives from IEEA Accreditation Council member organisations have been established to assist IEEA staff with these feasibility studies. The initial meetings of the working groups have just been held. The final feasibility reports will be provided to the IEEA Board in 2020 and the IEEA Board will make the final decision regarding proceeding with these projects.

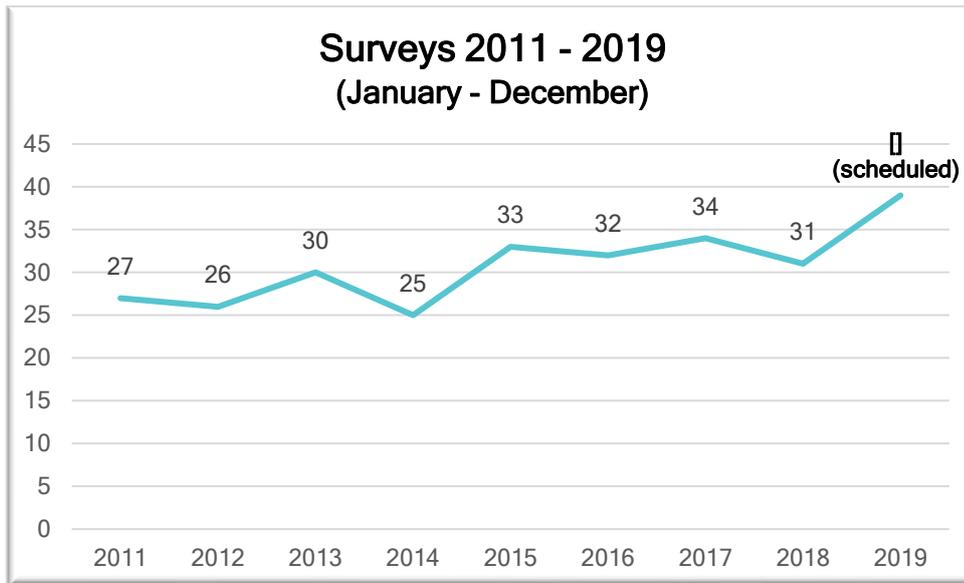
Programme Updates

The survey schedule has been busy and a total of 42 surveys were undertaken between 1st October 2018 and 30th September 2019. This included 11 onsite organisational surveys, 2 combined onsite and surveyor training programme surveys, 26 standards surveys and 3 surveyor training programme surveys.

As of 30th September 2019, a total of 345 surveys will have been undertaken comprising 205 standards surveys, 94 organisational onsite surveys, 38 surveyor training programme surveys and 8 combined onsite and surveyor training programme surveys. Surveyor training against the 5th editions has been ongoing since December 2018 and by the end of September all IEEA surveyors should have received their update training.

IAP Programmes	No. of surveys
Standards Surveys (Principles)	205
Onsite Organisation Surveys	94
Surveyor Training Programme Surveys	38
Combined Onsite Organisation and Surveyor Training Programme Surveys	8
Grand Total	345

Surveys 2011 – 2019



The International Accreditation Programme Activity 2018 report provides further insight into the work undertaken by the IAP in 2018. This report is available on the IEEA website:

<https://ieea.ch/resources.html>

ANNUAL REVIEW –

Emerging Leaders

Strategy

The Emerging Leader Programme aims to provide motivated and skilled upcoming leaders from lower-middle and low-income regions with the opportunity to upskill through a tailored educational programme. The programme is financially supported by ISQua in partnership with the World Health Organization (WHO).

Key Achievements



Wafa Allouche, Tunisia



Louis Ako-Egbe, Cameroon

We appointed two Emerging Leaders for the 2017 – 2018 period: Louis Ako-Egbe, a medical doctor and health system manager serving with the Ministry of Health in Cameroon and Wafa Allouche, a medical doctor working as a Client Relationship Manager with the National Authority for Evaluation and Accreditation in Healthcare (INEAS) in Tunisia.

Both Emerging Leaders completed a three-month internship at the end of 2018 at the World Health Organization (WHO) headquarters in Geneva, Switzerland. Both leaders were based with the Quality Systems and Resilience Unit (QSR) in WHO under the guidance and direction of Dr Shams Syed for the duration of their internships.

While there they contributed to specific technical areas of work on health system resilience; supported the WHO task force on quality in Universal Health Coverage (UHC); and supported field-testing of the Community Engagement Framework for quality, people-centred and resilient health services.

Along with two other interns from the QSR unit in WHO headquarters, the Emerging Leaders designed and organised a leadership workshop entitled The Lifeblood of Leadership for WHO interns and younger WHO staff members. The leaders were mentored by previous ISQua Emerging Leaders Emmanuel Aiyenigba and Roula Gharios Zahar and ISQua Experts Bruce Agins and Salma Jaouni.

As part of his programme, Louis spent a week in June 2019 with the Centre for Clinical Risk Management and Patient Safety, in Tuscany, Italy while Wafa visited the accreditation organisations IKAS in Denmark and HAS in France as part of her programme. She will also visit the South African accreditation organisation COHSASA in October 2019. The leaders' accounts of these visits are available on our website: <https://www.isqua.org/emerging-leader-journal.html>

Both Emerging Leaders will attend this year's ISQua conference in Cape Town, South Africa and will present as part of the Learning, Development and Data for Quality session on Tuesday, 22nd October 2019.

Challenges

With a strict budget allocation for this programme, an ongoing challenge continues to be finding affordable accommodation for the Emerging Leaders for their internship in the WHO headquarters in Switzerland. Careful management of the budget ensures that the Emerging Leaders can undertake a range of activities as part of their programme and not just a three-month internship with the WHO. Visa requirements and particularly changes in visa requirements for entry to different countries around the world also pose a challenge in terms of organising learning visits for the Emerging Leaders.

Changes

In 2018, for the first time, the Emerging Leaders completed a three-month internship at the WHO headquarters as part of the Emerging Leader Programme. This proved to be a very educational and rewarding experience for both leaders, and we will, therefore, continue to offer this as part of the programme for Rita Okonkwo, the 2018 – 2019 Emerging Leader.

Programme Updates



RITA OKONKWO, NIGERIA

The 2018 – 2019 Emerging Leader is Rita Okonkwo from Nigeria. Rita is a Senior Improvement Officer with the Institute of Human Virology, in Nigeria a non-governmental organisation that implements comprehensive treatment programmes in HIV care and drug-resistant tuberculosis.

Rita will also undertake a three-month internship with the WHO in Geneva from September 2019.

As Rita has a specific interest in patient-reported outcome measures (PROMs), she will be mentored throughout her Emerging Leader Programme by Professor Eugene Nelson from Dartmouth Institute in the United States of America (USA) and Professor Albert Wu from Johns Hopkins also in the USA.

Rita is currently implementing some of the PROMs tools within her programme in Nigeria and hopes to present on her experience of implementing these as part of the PROMs pre-conference at this year's ISQua conference in Cape Town, South Africa.

ANNUAL REVIEW –

Lucien Leape Fellowship

The Lucien Leape Patient Safety Fellowship Award was established in 2018 and announced at ISQua's 35th International Conference in Kuala Lumpur, Malaysia. The objective of this programme is 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, but also extends to strategic objective 3 – Education and Knowledge Sharing.



SUBHROJYOTI BHOWMICK, INDIA

We received many applications for this award in 2018. A panel comprising of Prof Lucien Leape, Prof David Bates, Dr Uma Kotagal, Mr Bruno Lucet and Dr Viviana Rodriguez was convened to shortlist, interview and select the 2019 ISQua Lucien Leape Patient Safety Fellow.

Dr Subhrojyoti Bhowmick, from India, was selected by the panel as the first ISQua Lucien Leape Patient Safety Fellow. Dr Bhowmick is a medical doctor currently working as the Clinical Director of Academics, Medical Quality and Clinical Research at Peerless Hospital and B K Roy Research Centre, Kolkata, India. He has completed an M.D. in pharmacology and has over twelve (12) years' experience in clinical research, pharmacovigilance and medication management in hospitals.

Dr Bhowmick has just started a three-month internship with the patient safety and risk management team in WHO headquarters in Geneva, Switzerland under the direction of Dr Neelam Dhingra-Kumar. Professor David Bates and his colleague, Dr Michael Klompas from Brigham and Women's Hospital in the USA, will mentor Subhrojyoti during his term as ISQua Lucien Leape Patient Safety Fellow.

Subhrojyoti has a particular interest in medication safety and hopes that the Fellowship will not only provide him with greater technical knowledge in this area but will also help him to develop his leadership skills so that he can become a patient safety leader in his hospital, his region and nationally in India.

ANNUAL REVIEW –

Scholarships & Awards

ISQua offers a range of scholarship opportunities for participants to join the ISQua Community, such as Membership and Fellowship Programme access, annual conference attendance, and much more.

Conference Scholarship

ISQua, in collaboration with the World Health Organization (WHO), is offering conference scholarships to individuals from low and lower-middle-income countries (as classified by the World Bank) who would benefit from attending ISQua's International Conference in Cape Town, South Africa from 20th - 23rd October 2019.

The scholarship covers:
 Registration fees for the Conference
 ISQua Membership for 12 months

The Conference Scholarship does not cover:
 Travel to the Conference destination
 Accommodation for the duration of the Conference
 Any other costs incurred to access the Conference

Membership & Fellowship Scholarship

ISQua is offering scholarships to individuals who were both born in, and currently working in, low and lower-middle-income countries (as classified by the World Bank) whose work and region can benefit from their participation in ISQua's Membership and ISQua's Fellowship Programme.

We gave priority to healthcare professionals and healthcare academics who are in the early phase of their careers and whose organisations are considered least able to afford such an opportunity.

This year ISQua has merged the conference and fellowship scholarship applications. Applicants can apply for one or both scholarships this way.

Patient Inclusion Scholarship

ISQua's annual conferences bring together key thought leaders and experts in healthcare quality and safety.

We aim to bring together delegates and speakers from across the world to learn from each other, and to test ideas, research findings and insights. We hope that attendees return to their homes to apply new knowledge and skills to the benefit of patients, who are the reason we all do what we do.

ISQua is committed to incorporating the experience of patients, who are experts in living with their condition, within our conference, while ensuring they are neither excluded nor exploited.

To facilitate this ISQua has provided six patients/patient advocates/caregivers with free registration (Pre- & Main) to ISQua's 36th International Conference in Cape Town, South Africa from 20th - 23rd October 2019 and a stipend to cover travel and accommodation costs.

We were delighted with the response received this year, and we would like to thank everyone who applied, and also thank our selection committee. Please join us in congratulating our 2019 Patient Inclusion Scholarship Recipients:

Nkechi Odiachi, Nigeria
Pierre C Dessureault, Canada
Janepher Wabulyu, Uganda
Ramadhan Kirunda, Uganda
Roy Sukdhev, South Africa
Phan Thanh Phuc, Vietnam

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 the field of 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.

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

Rajesh Aggarwal	Professor of Surgery and Senior Vice President for Strategic Business Development and Innovation, Thomas Jefferson University, Americas
Emmanuel Aiyenigba	Improvement Advisor, Institute for Healthcare Improvement, IHI
Ahmed Salim Al-Mandhari	WHO Regional Director, Regional Office Eastern Mediterranean, Oman
Rene 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
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
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

Mohambry Nadasen Chetty	Chair, Independent Practitioners Association Foundation, South Africa
Christine Dennis	Chief Executive Officer, Australian Council on Healthcare Standards (ACHS), Australia
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
Carsten Engel	Deputy Chief Executive, IKAS (Danish Institute for Quality and Accreditation in Healthcare), Denmark
Tejal Gandhi	Chief Clinical and Safety Officer, Institute for Healthcare Improvement, USA
Carlos Hiran Goes De Souza	International Accreditation Manager, CHKS; Founder Accreditation Pathways Institute, United Kingdom
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
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
Brian William Johnston	Health and Social Care Services Consultant, Australia
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
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

Tingfang Liu,	Professor, Institute for Hospital Management, Tsinghua University, China
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
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	Board Member, Health Insurance Reciprocal of Canada
Ronald Kim Oates	Emeritus Professor, University of Sydney School of Medicine, Australia
Bhupendra K Rana	Founding CEO, Quality and Accreditation Institute (QAI), India
Laetitia Rispel	Professor of Public Health, University of the Witwatersrand, South Africa
Enrique Ruelas	President and CEO, Qualimed, Mexico
William Ben Runciman	Chief Investigator, NH&MRC Program, Centre for Research Excellence Grants, Australia
Aziz Sheikh	Professor of Primary Care R&D, Usher Institute of Population Health Sciences and Informatics, University of Edinburgh, UK
Sodzi Sodzi-Tetty	Executive Director and Head, Institute for Healthcare Improvement, Africa Region, Ghana
Jacqui Stewart	Chief Executive Officer, The Council for Health Service Accreditation of Southern Africa NPC, South Africa
Maria Rosa Sunol Sala	Professor Doctor, President of the Board of Trustees Avedis Donabedian Institute (FAD) – Universitat Autònoma de Barcelona, Spain
Shin Ushiro	Professor, Kyushu University Hospital, Japan Council for Quality Health
Charles Vincent	NIHR Senior Investigator, Emeritus Professor Clinical Research, Imperial College London, United Kingdom

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

COMMITTEES

Corporate Governance Committee

Committee Member	Country
Jeffrey Braithwaite, Chair	Australia
Wendy Nicklin	Canada
Duncan Inverarity	Ireland
Jacqui Stewart	South Africa

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 while ensuring that processes are transparent. The Committee ensures that all the necessary disclosures, decisions, and complying with all the relevant Irish laws. Due to the number of items that are reviewed by the Corporate Governance and Audit Committee, the Board agreed at the end of 2018, in the interest of good governance, to separate the Corporate Governance and Audit Committee into two committees with one focused on governance one focused on finance.

The CGC meets at least two weeks before every Board meeting and regular items on the agenda include risk management and compliance. Throughout 2017 and 2018, the CG met seven times and oversaw the project to develop the new website, reviewed policies such as the Plagiarism Policy, Reserves Policy and Awards Policy. The Committee also reviewed the membership benefits, membership fees, the process for appointing Irish Board Members and Honorary Advisors.

Finance and Audit Committee

Committee Member	Country
Jeffrey Braithwaite, Chair	Australia
Stephen Clark	Australia
Yuichi Imanaka	Japan
Bruno Lucet	France
David Vaughan	Ireland

The Finance and Audit Committee held their first meeting in November 2018. The committee's purpose is to assist the Board in all matters relating to financial affairs encompassing the areas of strategic financial planning, resource management, financial planning and policy-related issues and to provide timely advice to the Board on areas within its remit. The committee meets before every Board meeting. 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 as well as financial forecasting.

Remuneration Committee

Committee Member	Country
Wendy Nicklin	Canada
Cliff Hughes	Australia
Duncan Inverarity	Ireland

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 staff of the company. The remuneration policy bears in mind the Company's appetite for risk and is aligned with the Company's long-term strategic goals. The committee reviews the ongoing appropriateness and relevance of the remuneration policy. The committee approves targets set by the CEO for any performance-related pay schemes operated by the Company and approve the total annual payments made under such schemes.

The committee chairperson reports to the Finance and Audit Committee on all matters within its duties and responsibilities. The committee proposes recommendations to the Board, via the Finance and Audit Committee as it deems appropriate on any area within its remit where action or improvement is needed. During 2019, the Remuneration Committee prepared a salary benchmarking report in line with a salary review. The committee also examined an annual leave policy for all members of staff.

Cape Town Conference Programme and Planning Committee

Committee Member	Country
Sharon Slabbert, The Council for Health Service Accreditation of Southern Africa, Co-Chair	South Africa
Wendy Nicklin ISQua President, Co-Chair	Canada
Emmanuel Aiyenigba; ISQua Africa Community of Practice	Nigeria
John Brennan, 2017 Quality Improvement Scholar in Residence with the RCPI & ISQua	Ireland
Helen Crisp, Independent Consultant for Quality Improvement in Healthcare	United Kingdom
Maurice Goodman; Discovery Health	South Africa
M.A. Kadar Marikar; Malaysian Society for Quality Health	Malaysia
Ziyanda Mgugudo-Sello; Medical Student (Registrar)	South Africa
Thato Mosidi; Medical Student (Registrar)	South Africa

Committee Member	Country
Eugene Nelson, Population Health and Measurement at The Dartmouth Institute for Health Policy and Clinical Practice, United States	United States
Yvonne Quadros; Patient Representative	Australia
Sodzi Sodzi-Tettey; Institute for Healthcare Improvement	Ghana
Jacqui Stewart, ISQua Board Member	South Africa
Riccardo Tartaglia; Representative for ISQua 2020 Conference	Italy
David Vaughan, ISQua Board Member	Ireland
Tyson Welzel; Clinical Governance dept., Mediclinic	South Africa

The Conference Programme and Planning Committee for Cape Town oversee the development of the scientific programme and are responsible for ensuring the quality of the content for the 37th International Conference. The Cape Town Programme and Planning Committee agreed and reviewed:

- the overall conference theme and associated tracks
- planning all aspects of the scientific programme, bringing attention to the quality and safety developments both internationally and in the local health care system
- topics and speakers for both the plenary sessions and invited concurrent sessions

The Conference Programme and Planning Committee took all opportunities to ensure the success of the conference by promoting the programme and encouraging delegates to attend.

Cape Town Abstract Committee

Committee Member	Country
Apollo Basenero	Namibia
Christopher Cornue	United States
Helen Crisp	Canada
Triona Fortune	Ireland
David Greenfield	Australia
Rashad Massoud	United States
Jim Robblee	Canada
Ronan Rozenblum	United States

The Conference Abstract Committee oversees the allocation of submitted abstracts for short orals and poster presentations. The Committee reviews the abstracts ratings received from an international review panel and assists in scheduling the abstracts for inclusion into the scientific programme.

Education Content Advisory Panel Committee

Committee Member	Country
Shin Ushiro, Chair	Japan
Emmanuel Aiyenigba	Nigeria
Christopher Cornue	United States
David Crosby	Ireland
Sibylle Erdmann	United Kingdom
Ezequiel Garcia Elorrio	United States
David Greenfield	Australia
Wui-Chiang Lee	Taiwan
David Vaughan	Ireland

The purpose of the Education Content Committee is to review and develop educational content, provide advice and suggest recommendations for the curricula of the education programmes and modes of delivery.

Innovation and Systems Change Working Group

Name	Organisation	Country
Rene Amalberti (Chair)	Public Foundation for Industrial Safety Culture	France
Jeffrey Braithwaite	Australian Institute of Health Innovation	Australia
Wendy Nicklin	President - ISQua	Canada
Charles Vincent	University of Oxford & Oxford Health NHS Foundation Trust	United Kingdom
Peter Carter	Independent Consultant	Australia
Christopher Cornue	Navicent Health	USA
Ramadhan Kirunda	FHI 360	Uganda
Kirstyn James	RCPI	Ireland
Maureen Williams	Patient Representative	Australia

The main aim of the Innovations & Systems Change Working Group (I&SCWG) is to identify current and impending health care issues/challenges, publish on topics of importance and partner with organisations innovating solutions for healthcare challenges. To date, the I&SCWG has focused on the impending global issue of the tsunami of ageing populations. Given that accreditation is a core business of ISQua, the focus of the past year has evolved to that of ensuring the relevance of External Evaluation into the 2030s given the massive health and healthcare changes underway.

In July, the I&SCWG, in collaboration with the ISQua EEA Accreditation Council published an Opinion Paper on the ISQua website titled: *Three challenges for external evaluation: Ensuring*

relevance and preparing for the 2030s. We followed this with an ISQua webinar presented by Rene Amalberti in August.

Rene will be stepping down as the Chair of this committee in October 2019. We are sincerely appreciative of his strong leadership, tenacity, and the papers that have been produced under his leadership. Thank you so much, Rene.

Editorial Board

Committee Member	Country
Yu-Chuan (Jack) Li, Editor-In-Chief	Taiwan
Wen Chen, Deputy Editor	China
Ezequiel Garcia Elorrio, Deputy Editor	Argentina
David Greenfield, Deputy Editor	Australia
Usman Iqbal, Deputy Editor	Taiwan
Anthony Staines, Deputy Editor	Switzerland
Rosa Sunol, Deputy Editor	Spain
Giovanni Apolone	Italy
Yuichi Imanaka	Japan
Hanan Edrees	Saudi Arabia
Sang-II Lee	South Korea
Jan Mainz	Denmark
Margareth Portela	Brazil
Julie Reed	United Kingdom
Paulo Saturno	Spain
Hardeep Singh	United States
Sodzi Sodzi-Tettey	Ghana
Paulo Sousa	Portugal
Sophie Staniszewska	United Kingdom
Kieran Walshe	United Kingdom
Gert Westert	The Netherlands
Special Project Editors	
Rosa Sunol	Spanish Abstracts
Paulo Sousa	Portuguese Abstracts
Yi-Hsin (Elsa) Hsu	Chinese Abstracts
Yuichi Imanaka	Japanese Abstracts
Catherine Grenier	French Abstracts

The Editorial Board ensure that the Journal is managed, edited and published in a manner that supports the ISQua Members pursuit of quality improvement in line with the overall objectives of ISQua. The Editorial Board oversee the review process while ensuring that the Journal is of a high standard. The Editor-in-Chief provides reports to the ISQua Board regularly, defines the work plan for the publication, reviews content and ensures that the process is in line with best practice. The Editorial Board identify key trends and identify areas of key interest of special publications. The Board also participate in the voting process to award the Reizenstein Award which as an award for the best published paper in a given year.

Board Accreditation Committee – now called External Evaluation Award Committee

With the establishment of the International Society for Quality in Health Care External Evaluation Association (IEEA), responsibility for all external evaluation programmes and activities transferred from ISQua to the ISQua External Evaluation Association (IEEA). This meant that the Board Accreditation Committee (BAC) then became a sub-committee of the ISQua External Evaluation Association (IEEA) Board. The BAC was renamed to the External Evaluation Award Committee (EEAC) in 2019. The membership of the Committee has not changed and is as follows:

Committee Member	Country
Cliff Hughes (Chair)	Australia
Stephen Clark	Australia
BK Rana	India
Yuichi Imanaka	Japan
Carsten Engel	Denmark

Its functions remain the same as it continues to be responsible to the IEEA Board for all external evaluation activities, this includes: overseeing the coordination and integration of IAP activities; articulating objectives, milestones and the risk management plan for the IAP; establishing a process for evaluating the efficacy of proposed activities; ensuring the IAP and all products adhere to best practice ethical principles; and representing the views and interests of the Accreditation Council (AC) and of the external evaluation community to the Board.

From September – December 2018, the BAC met three times and ratified 12 awards. The EEAC met 6 times up until the end of September 2019 and ratified 36 awards in this timeframe. A further two EEAC meetings are scheduled to take place in October and December 2019.

Accreditation Council

With the establishment of the ISQua External Evaluation Association (IEEA), the Accreditation Council changed to become an advisory committee of the IEEA Board. The Accreditation Council's remit has not changed and continues to be the provision of advice to the External Evaluation Award Committee (EEAC) on matters relating to the IAP and external evaluation/accreditation related activities and issues. This may include principles, standards, policies, procedures, and practice for existing programmes and new products.

The Accreditation Council met five times over the past year. Face-to-face meetings were held in September 2018 at the ISQua conference in Kuala Lumpur, Malaysia and in April/May 2019 in Geneva, Switzerland. Video conference calls were held in December 2018, January 2019 and July 2019. A face-to-face meeting of the Accreditation Council will also be held at the ISQua conference in Cape Town, South Africa in October 2019. The following new members joined the Council over the past year:

Name	Organisation	Country	Meeting Dates
Salem Al Wahabi	Saudi Central Board for Accreditation of Health Care Facilities	Saudi Arabia	January 2019
John Bell	AACI America LLC	United States of America	July 2019

Members of the Accreditation Council or their nominated representatives have agreed to work with IEEA staff on feasibility studies to explore how the IEEA could expand the range and type of external evaluation services that it offers. We want to thank the following members and nominated representatives who have agreed to work with us on the following feasibility studies:

Feasibility Study: Standards

Committee Member	Organisation	Country
Asmita Gillani	Accreditation Canada / HSO	Canada
Bruno Lucet	Haute Autorité de Santé	France
Carsten Engel	Danish Institute for Quality and Accreditation in Healthcare	Denmark
Lena Low	Australian Council on Healthcare Standards	Australia

Feasibility Study: Accreditation of quality and patient education programmes

Committee Member	Organisation	Country
Bruno Lucet	Haute Autorité de Santé	France
Jorien Soethout (representing Ellen Joan van Vliet)	Netherlands Institute for Healthcare Accreditation (NIAZ)	The Netherlands

We have held the initial meetings of the working groups and anticipate that the groups will provide their reports to the IEEA Board in 2020.

VOLUNTEERS – EXPERTS

Full Name	Country
Hugo E. Arce	Argentina
Ezequiel Garcia Elorrio	Argentina
Marcelo Pellizzari	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
Ken Hillman	Australia
Anne Hogden	Australia
Clifford Hughes	Australia
Brian Johnston	Australia
Karen Linegar	Australia
Lena Low	Australia
Lena Low	Australia
Karen Luxford	Australia
Guy Maddern	Australia
Villis Marshall AC	Australia
Pat J Martin	Australia
Russell McGowan	Australia
Kim Oates	Australia
Charles Pain	Australia
William (Bill) Runciman	Australia
Tim Shaw	Australia
Jonny Taitz	Australia
John Wakefield	Australia
Johanna Westbrook	Australia
David Wright	Australia
Michael Zanco	Australia
Kris Vanhaecht	Belgium
Tarcisio Abreu Saurim	Brazil
Camila Lajolo	Brazil
Jose Noronha	Brazil
Elenara Oliveira Ribas	Brazil
Bonnie Adamson	Canada
Donna Anderson	Canada
Ross Baker	Canada
Ben Chan	Canada
Danielle Dorschner	Canada

Full Name	Country
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
Jishan Wang	China
Bo Wang	China
Yuan Xiangdong	China
Chen Xiaohong	China
Astolfo Franco	Colombia
Carlos Kerguelen	Colombia
Teresa Tono Ramirez	Colombia
Janne Knudsen	Denmark
Jorge Hermida	Ecuador
Rene Amalberti	France
Laurent Degos	France
Bruno Lucet	France
Philippe Michel	France
Oliver Groene	Germany
Michael Marx	Germany
Sylvia Sax	Germany
Elom Otchi	Ghana
William Adu-Krow	Guyana
Hong Fung	Hong Kong SAR, China
Lawrence Lai	Hong Kong SAR, China
Chor-Chiu Lau	Hong Kong SAR, China
Pak Yin Leung	Hong Kong SAR, China
Vikram Datta	India
Clive Fernandes	India
Girdhar Gyani	India
M.C. Misra	India
Bhupendra Rana	India
THUPPIL VENKATESH	India

Full Name	Country
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
Shin Ushiro	Japan
Salma Jaouni	Jordan
Moses Enock	Malawi
Mercy Jere Makwakwa	Malawi
Andrew Likaka	Malawi
Edward Moses	Malawi
Kadar Marikar	Malaysia
J Ravichandran R Jeganathan	Malaysia
Enrique Ruelas	Mexico
Odet Sarabia	Mexico
Roland Bal	Netherlands
Richard Grol	Netherlands
Kees van Dun	Netherlands
David Galler	New Zealand
Alan Merry	New Zealand
Maina Boucar Amsagana	Niger
Samir Al-Adawi	Oman
Juan Limo	Peru
Hugo Siu	Peru
Paulo Sousa	Portugal
Jamal Al-Khanji	Qatar
Salem Al Wahabi	Saudi Arabia
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

Full Name	Country
Anthony Staines	Switzerland
Yuichi Imanaka	Taiwan
Jack Li	Taiwan
Pa-Chun Wang	Taiwan
Claudine Richardson-Sheppard	Trinidad and Tobago
Esther Karamagi	Uganda
Tonny Tumwesigye	Uganda
Dominique Allwood	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
Carlos Hiran Goes de Souza	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
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
Susan Frampton	United States
John F Helfrick	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

Full Name	Country
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

VOLUNTEERS – SURVEYORS

Name	Country
Hugo Arce	Argentina
Ricardo Otero	Argentina
Ann Wunsch	Australia
Brian Johnston	Australia
David Hamer	Australia
Deborah Jones	Australia
Elizabeth Pringle	Australia
Gary Smith	Australia
Ingrid Fairlie	Australia
Kirsten Peddie	Australia
Lena Low	Australia
Linda O'Connor	Australia
Peter Frendin	Australia
Philomena Mitolo	Australia
Virginia Matthews	Australia
Maria Carolina Moreno	Brazil
Anita Harris	Canada
Bernadette MacDonald	Canada
Conny Menger	Canada
Danielle Dorschner	Canada
Elma Heidemann	Canada
Gilles Lanteigne	Canada
James Robblee	Canada
Martin Beaumont	Canada
Susan Yates	Canada
Carsten Engel	Denmark
Bruno Lucet	France
Fabienne Menot	France
Loretta Yam	Hong Kong
Anand R	India
Bhupendra Rana	India
Neeraj Lal	India
Parvez Ahmad	India
Pawan Kapoor	India
Sanjeev Singh	India
Triona Fortune	Ireland
Ed Chappy	Jordan
Rabab Diab	Jordan
Thaira Madi	Jordan
Kadar Marikar	Malaysia
Ravindran Jegasothy	Malaysia
Barbara Donaldson	New Zealand
Cathy Cummings	New Zealand
Jim Du Rose	New Zealand
Tricia Dore	New Zealand

Name	Country
Margarida Franca	Portugal
Sajid Ahmed	Qatar
Rosa Sunol	Spain
Hein Muller	The Netherlands
Carlos goes de Souza	United Kingdom
Jan Mackereth-Hill	United Kingdom
Steven Wilson	United Kingdom
Al Assaf	United States of America
Anne Chenoweth	United States of America
Claudia Jorgenson	United States of America
Judith Sullivan	United States of America
Paul van Ostenberg	United States of America

STRATEGIC PARTNERS

World Health Organization

ISQua is a non-state actor in official relations with the WHO. Official relations is a privilege that the WHO Executive Board grants to non-governmental organisations, international business associations and philanthropic foundations that have and continue to have a sustained and systematic engagement in the interest of the organisation.

Over the past year, ISQua has supported the Quality Systems and Resilience (QSR) team headed up by Dr Shams Syed within the Department of Service Delivery and Safety (SDS) in the WHO on their National Quality Policy and Strategy (NQPS) work. This initiative aims to support countries improve the performance of their health system through focused efforts on the national quality direction. The NQPS work within WHO is centred around five inter-dependent areas:

- NQPS technical foundation, including the WHO Handbook for NQPS and associated tools and resources;
- Country technical support to develop, refine and implement national quality policy and strategy;
- Learning agenda on quality, with a focus on implementation informed policy-making;
- Partner collaboration; and
- Quality in fragile, conflict and vulnerable (FVC) settings.

Further information on this initiative is available on the WHO's website:

<https://www.who.int/servicedeliverysafety/areas/ghc/ngps/en/>

In collaboration with the QSR team in WHO headquarters ISQua identified several ISQua Experts who could support the QSR team in their work in this area by providing support to Ministries of Health on national directions for quality.

As part of their support of this work, ISQua organised a Train the Trainers workshop for the ISQua Experts in collaboration with the WHO in Dublin, Ireland in March 2019 and funded the ISQua Experts to attend this event. ISQua would like to thank the Royal College of Physicians of Ireland (RCPI) for their support of this initiative by providing the venue for the training.

The following ISQua Experts have been trained by the WHO and will act as a resource for them in their support of Ministries of Health in developing national directions for quality:

Name	Organisation	Country
Apollo Basenero	Ministry of Health and Social Services	Namibia
Bruno Lucet	Haute Autorité de Santé (HAS)	France
Emmanuel Aiyenigba	Institute for Healthcare Improvement (IHI)	Nigeria
David Weakliam	Health Service Executive (HSE)	Ireland
Jason Leitch	Scottish Government	Scotland
Philip Crowley	Health Service Executive (HSE)	Ireland

Paulo Sousa	National School of Public Health, Universidade NOVA de Lisboa	Portugal
Uma Kotagal	Cincinnati Children's	USA

2019 World Health Assembly

In May 2019, ISQua was represented at the Seventy-second World Health Assembly by Board member Bruno Lucet. During the meeting, Mr Lucet read out a statement on behalf of ISQua relating to the agenda item – Global action on patient safety on Saturday the 25th of May.

ISQua's WHO related statements are available on our website:

https://www.isqua.org/resources-blog/resources.html?page=1&search=&types%5B15%5D=15&date_range_start=&date_range_end=

African Patient Safety Initiative

The WHO have approached ISQua to be a core member of an initiative they are coordinating called the African Patient Safety Initiative. The provisional aims of this initiative are to:

- Synergise patient safety and activities and projects being implemented in the Africa region
- Pool the expertise and technical teams from all partners for improving patient safety in the region
- Work with countries in Africa in establishing patient safety frameworks and support mechanism at national and sub national level
- Create a repository of technical and operational resources being developed by various agencies and host on a common digital platform
- Collectively implement the mandate of upcoming WHA resolution on 'Global Action on Patient Safety' and develop a regional action plan
- Co-develop the technical guidelines and tools for measurement, improvement and sustainability of patient safety initiative

Other members of the initiative include:

- Institute of Health Improvement (through Africa Hospital Patient Safety Initiative)
- Patient Safety Movement Foundation (PSMF)
- Ministries of Health of member states in Africa

This initiative will be launched in October 2019 in Cape Town, South Africa after the ISQua conference. ISQua Board members and Experts will attend the launch event.

International Hospital Federation (IHF)



The International Hospital Federation (IHF) is an international not for profit, non-governmental membership organization.

Their members are worldwide hospitals and healthcare organizations having a distinct relationship with the provision of healthcare. They provide them with a platform for the exchange of knowledge and strategic experience as well as opportunities for international collaborations with different actors in the health sector.

The IHF recognizes the essential role of hospitals and health care organizations in providing health care, supporting health services and offering education. Their role is to help international hospitals work towards improving the level of the services they deliver to the population with the primary goal of improving the health of society. Find out more at <https://www.ihf-fih.org/>.

Our partnership with IHF is based on management, education and innovation with both parties collaborating and exchanging information on projects and activities to further joint aims and individual aims of ISQua and IHF.

As part of World Patient Safety Day 2019, ISQua & IHF released a joint statement reiterating our commitment to improving patient safety and healthcare quality worldwide. This permeates and guides all our deliberations and work. We make our statement based on five key principles:

- The right of people to safe and high-quality care
- The importance of person-centred care as the foundation for safety
- The essential nature of a safety culture to facilitate safe care
- The need to base all interventions on Patient Safety Theory and Methodologies to improve processes and outcomes
- The importance of learning from what works well

ISQua and IHF endorse the message of the World Health Organization (WHO) to 'Speak up for Patient Safety!' We are confident that all of our members share our principles and are working towards the goal of Zero Harm.

The full statement can be read here: <https://www.isqua.org/media/attachments/2019/09/17/joint-isqua-ihf-statement-for-wpsd1.pdf>

Institute for Healthcare Improvement (IHI)



The Institute for healthcare Improvement (IHI) is a leading innovator in health and health care improvement working to ensure everyone enjoys the best care and health possible.

IHI works to optimise health care delivery systems, drive the triple aim for populations, realise person and family-centred care and build improvement capability for professionals and students around the world through education, strategic guidance and dissemination of knowledge and best practices. Find out more: <http://www.ihf.org/>

ISQua's partnership with IHI entails knowledge sharing, corporation, collaboration and operational agreements for specific work in areas including education and science.

Paediatric International Patient Safety and Quality Community (PIPSQC)



PIPSQC is an informal, international community of professionals who share a passion for patient safety and quality in paediatrics, and who interact together across organisational and geographic boundaries, to advance learning and improvements in these

areas.

This complex adaptive system emerged in 2006 as a result of a pre-symposium invitational gathering before SickKids' Second Annual Paediatric Patient Safety Symposium. Those invited represented four countries on three continents. We recognized that our patient safety concerns were universal. The results of the roundtable discussion can be found in the Paediatric Patient Safety International Collaborative document. At dinner, that night, the Paediatric International Patient Safety and Quality Community was officially formalized and PIPSQC (pip-squeak) was born. <https://www.pipsqc.org/>.

In 2019, PIPSQC and ISQua signed a collaboration agreement to foster closer ties between the two organisations.

A major focus of the agreement is to share information and link the complementary networks of both organisations.

ISQua's network of patient safety individuals, who have, to date, been mostly adult-focused, will now have access to content that is aimed at promoting the health and safety of children and young people.

PIPSQC is passionate about spreading best-practices developed by paediatric patient safety collaboratives that are focused on keeping all children safe from serious harm in hospitals; through this collaboration, their message and work can be disseminated further within the health care community.

Patient Safety Movement Foundation (PSMF)



More than 200,000 people die every year in U.S. hospitals and 4.8 million worldwide in ways that could have been prevented. The Patient Safety Movement Foundation is a global non-profit which creates free tools for patients and hospitals. The Patient

Safety Movement Foundation was established through the support of the Masimo Foundation for Ethics, Innovation, and Competition in Healthcare to reduce that number of preventable deaths to ZERO.

Improving patient safety will require a collaborative effort from all stakeholders, including patients, healthcare providers, medical technology companies, government, employers, and private payers. The Patient Safety Movement Foundation works with all stakeholders to address the problems

with actionable solutions for patient safety. The Foundation also convenes the World Patient Safety, Science & Technology Summit. The Summit brings together some of the world's best minds for thought-provoking discussions and new ideas to challenge the status quo.

By presenting specific, high-impact solutions to meet patient safety challenges, called Actionable Patient Safety Solutions, encouraging medical technology companies to share the data their products are purchased for, and asking hospitals to make commitments to implement Actionable Patient Safety Solutions, the Patient Safety Movement Foundation is working toward ZERO preventable deaths. Visit <https://patientsafetymovement.org/>.

In 2019, ISQua announced our support of the Patient Safety Movement Foundation (PSMF) and their mission to eliminate preventable deaths in hospitals, with a signed cooperation agreement.

ISQua and PSMF will work together to identify common projects in the field of patient safety and promote each other's activities on an ongoing basis. ISQua and PSMF will hold joint sessions at their respective conferences, at ISQua's 36th International Conference (20th – 23rd October 2019) in Cape Town, South Africa; and PSMF's 8th Annual World Patient Safety, Science & Technology Summit in 2020.

The Council for Health Service Accreditation of Southern Africa NPC (COHSASA)



Quality Improvement in Health Care

The Council for Health Service Accreditation of Southern Africa NPC (COHSASA) is the only internationally accredited quality improvement and accreditation body for healthcare facilities in sub-Saharan Africa.

Their mission is to assist healthcare facilities in developing countries to deliver quality healthcare through sustained improvement, using internationally recognized standards, patient safety principles and operational research. Find out more: <http://cohsasa.co.za/>

ISQua was delighted to partner with COHSASA to deliver our 36th International Conference from 20th – 23rd October 2019, which will be held on African soil for the first time.

Special Thanks



We would like to give special thanks to the Department of Health, Ireland for their ongoing support of ISQua.

TRAVEL

ISQua Board and Expert Travel from September 2018 to September 2019

September 2018

- Cancer Care Commission, Keble College, Oxford, UK - Tricia Woodhead

October 2018

- 2nd Consultation of Member States and relevant partners on developing the global development and stewardship framework to combat antimicrobial resistance (WHO), Geneva, Switzerland - Anthony Staines
- 5th International Choosing Wisely Roundtable, Zurich, Switzerland – Anthony Staines
- WHO Regional Office for South-East Asia Regional Committee Meeting, New Delhi, India – BK Rana
- IHF Conference, Brisbane, Australia - Peter Lachman/Cliff Hughes/Jeffrey Braithwaite
- 40th anniversary of the Alma-Ata Declaration, Kazakhstan – Bruno Lucet
- ONA (3rd Seminar of Patient Safety and Health Accreditation), Sao Paulo, Brazil - John Ovretveit

November 2018

- ISQua Regional Meeting HAC - Florida International University Board of Trustees, on behalf of the Robert Stempel College of Public Health and Social Work at Florida International University, Cali, Colombia - Peter Lachman & Uma Kotagal
- LMCE 2018 & KSLM 59th Annual Meeting, Seoul, Korea – Carsten Engel

December 2018

- IHI Conference, Florida, USA – Peter Lachman

January 2019

- Patient Safety Movement - Hospital Leadership Panel, Hyatt Regency Huntington Beach Resort and Spa, California, USA – Peter Lachman
- Jönköping University, Jönköping, Sweden – Peter Lachman

February 2019

- HKUSZH Meeting, Shenzhen, China - Cliff Hughes, Elaine O'Connor, Peter Lachman and Steve Clark
- QF Quality Forum 2019, Vancouver, Canada - Jeffrey Braithwaite

March 2019

- WHO Forum, Saudi Arabia – Shin Ushiro & Jeffrey Braithwaite
- RCPI & ISQua QI Forum, Dublin, Ireland - Jeffrey Braithwaite, Wendy Nicklin, Stephen Clark, Shin Ushiro, Peter Lachman and Cliff Hughes
- First International Health Quality Symposium, Havana, Cuba - Michael Murray

April 2019

- Clinical Audit and Quality Improvement Symposium, Tallaght University Hospital, Dublin, Ireland – Peter Lachman
- The Consortium of Accredited Healthcare Organisations (CAHO), Mumbai, India - Ravindran Jegasothy
- 20th Anniversary JCT, Taipei, Taiwan - Peter Lachman, Wendy Nicklin and Jeffrey Braithwaite

May 2019

- RCPCH conference, Birmingham, UK – Peter Lachman
- Hospitalar Fair/ CISS, Sao Paulo, Brazil - Peter Lachman and Patricia Woodhead
- Northern regional conference hosted by OES, Cartagena, Colombia - Peter Lachman, John Brennan, Odet Sarabia & Gail Nielsen
- Africa Health conference, Johannesburg, South Africa - Jacqui Stewart, Pat O'Connor, Sara Yaron, Gro Berntsen, Gilbert Buckle, Laetitia Rispel, Maurice Goodman

June 2019

- Ghana regional conference, Accra, Ghana - Michael Marx and Jacqui Stewart
- Nigerian regional Conference, Lagos, Nigeria - Michael Marx and Jacqui Stewart
- Workshop on healthcare accreditation in APEC region, Beijing, China – Peter Lachman

July 2019

- Heps Conference, Lisbon, Portugal - Peter Lachman & Charles Vincent
- 2nd Intl Mtg on Patient Safety for New Generations of Healthcare Professionals, Lisbon, Portugal - Peter Lachman
- BHF Annual Southern Africa Conference, Cape Town, South Africa – Jacqui Stewart
- Master in Clinical Risk Management and Patient Safety, Florence and Pisa, Italy – Peter Lachman

August 2019

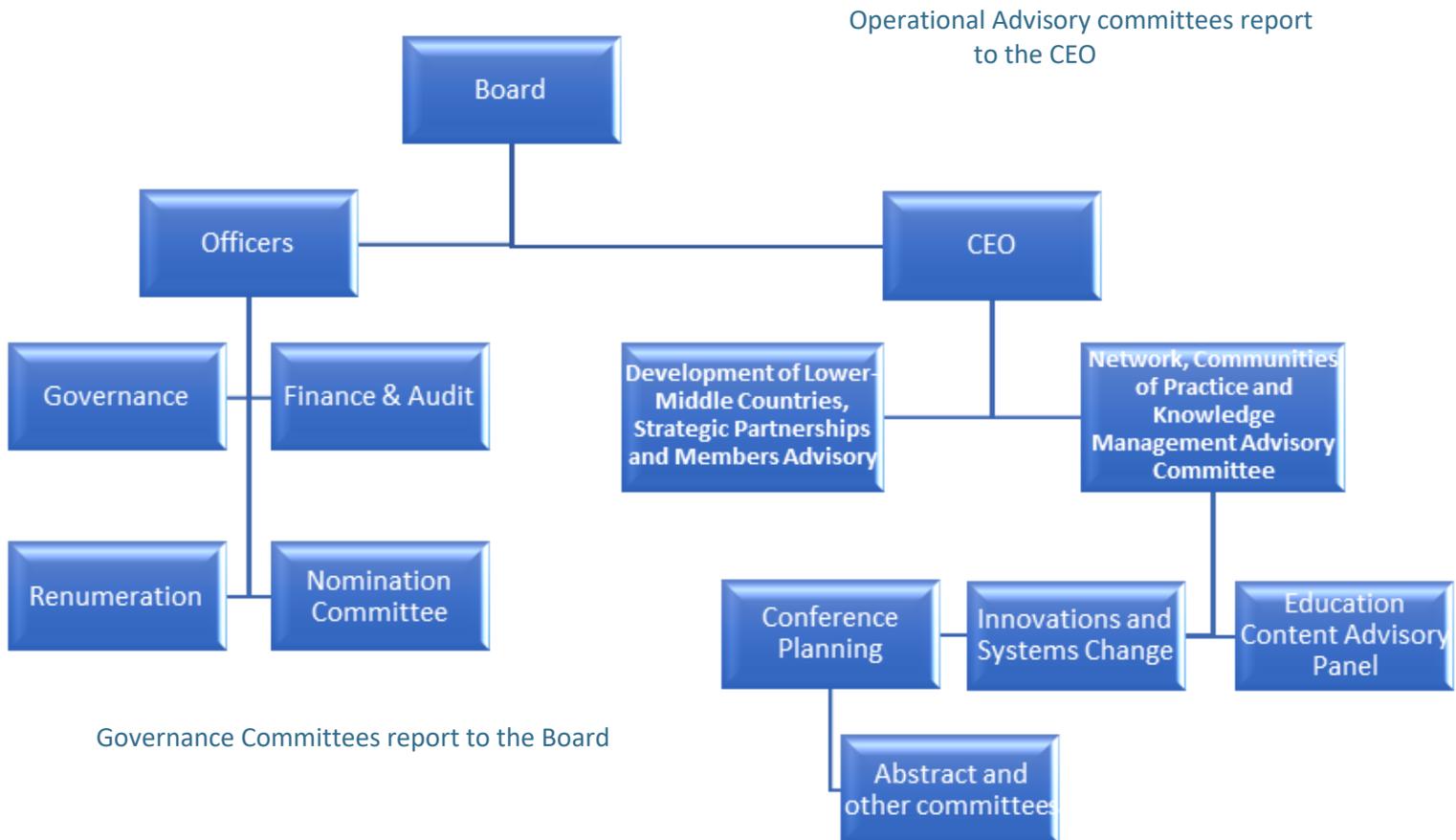
- Annual Scientific Meeting and National Semiloka, Jakarta, Indonesia – Cliff Hughes
- 7th Annual Congress of the Lebanese Society for Quality and Safety in Healthcare – Leading Sustainable Change, Lebanon – Peter Lachman

September 2019

- 10th Collaborative Forum on Quality and Safety, Buenos Aires, Argentina - Peter Lachman & Rashad Massoud

- Clinical Excellence Commission (CEC), New South Wales, Australia – Peter Lachman
- Clinical Excellence Queensland (CEQ), Brisbane, Australia – Peter Lachman
- Commission on Excellence and Innovation in Health, South Australia, Adelaide, Australia – Peter Lachman
- Patient Safety Movement Foundation Midyear planning, University of California, USA – Ulfat Shaikh
- Korea Laboratory Medicine Foundation and the Korean Society of Laboratory Medicine. The LMCE and KSLM Annual Meeting, Busan, South Korea - Lena Low
- Conference on International Accreditation - Key to Quality and Safety, Guangzhou, China - Cliff Hughes, Peter Lachman, Elaine O'Connor

ORGANISATIONAL STRUCTURE



CURRENT BOARD

Officers

Wendy Nicklin, President, Canada

Jeffrey Braithwaite, President-Elect, Australia

Clifford Hughes, Immediate Past President (stepping down from the Board in October 2019), Australia

Board Members

Duncan Inverarity, Ireland

Stephen Clark, Australia

Leslee Thompson, Canada

BK Rana, India

Shin Ushiro, Japan

Jacqui Stewart, South Africa

David Vaughan, Ireland

Bruno Lucet, France

Sara Yaron, Honorary Advisor, Israel

Sheila Leatherman, Honorary Advisor, USA

Yuichi Imanaka (stepping down from the Board in October 2019)

Peter Carter (stepping down from the Board in October 2019)

Jack Li (stepping down from the Board in October 2019)

Ezequiel Garcia Elorrio (commencing their term of office after the Annual General Meeting on Monday 21st October 2019), Argentina

Tricia Woodhead (commencing their term of office after the Annual General Meeting on Monday 21st October 2019), UK

Ellen Joan van Vliet (commencing their term of office after the Annual General Meeting on Monday 21st October 2019), Netherlands

Salma Jaouni (commencing their term of office after the Annual General Meeting on Monday 21st October 2019), Jordan

STAFF

Peter Lachman, CEO

Eadin Murphy, Head of Events and Corporate Affairs

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

Nicola McCauley-Conlan, Accreditation Manager

Heather Wilson, Accreditation Manager

Deirdre Burke, Corporate Services Coordinator

Sinead McArdle, Communications Officer

Brian Cahill, E-Learning Developer

Eleanor Keegan, Event Coordinator

Caroline Usher, Education Programmes Specialist

Simon Donohoe, Executive Assistant to the CEO

Caitriona Curran, Network Programme and Corporate Support Officer

Orla Corcoran, Corporate Support Officer

Aoife Dowling, IAP Coordinator and Corporate Support Officer

FINANCIALS FOR YEAR ENDED 31ST DECEMBER 2018

Turnover

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

	2018	2017
	€	€
Sponsorship and grants	142,000	146,862
Education, Subscription and membership	291,346	309,486
Conference, accreditation and journal	<u>1,857,526</u>	<u>1,813,655</u>
	<u>2,290,872</u>	<u>2,270,003</u>

Intangible assets

	Computer Software € Euro
Cost	
At 1 January 2018	33,070
Additions	<u>109,951</u>
At 31 December 2018	<u>143,021</u>
Amortisation	
Charge for the year	<u>38,845</u>
At 31 December 2018	<u>38,845</u>
Net book value	
As 31 December 2018	<u>104,176</u>
At 31 December 2017	<u>33,070</u>

Tangible fixed assets

	S/Term Leasehold Property €	Office Equipment €	Total €
Cost or valuation	30,128	92,082	122,210
Additions	<u>-</u>	<u>3,884</u>	<u>3,884</u>
At 31 December 2018	<u>30,128</u>	<u>95,966</u>	<u>126,094</u>
Depreciation			
At 1 January 2018	3,013	75,957	78,970
Charge for the year on owned assets	<u>3,013</u>	<u>9,905</u>	<u>12,918</u>
At 31 December 2018	<u>6,026</u>	<u>85,862</u>	<u>91,888</u>
Net book value			
At 31 December 2018	<u>24,102</u>	<u>10,104</u>	<u>34,206</u>
At 31 December 2017	<u>27,115</u>	<u>16,125</u>	<u>43,240</u>

Debtors

	2018 €	2017 €
Trade debtors	822	303,850
Other debtors	2,908	8,441
Prepayments	106,894	30,859
Accrued income	<u>260,553</u>	<u>232,113</u>
	<u>371,177</u>	<u>575,263</u>



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