

The International Society for Quality in Health Care

ANNUAL REPORT



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Executive Summary

This annual report details the activities undertaken by the International Society for Quality in Health Care (ISQua) from October 2017 to September 2018.

ISQua's vision is to be the global leader of transformation in healthcare quality and safety. 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 has provided their key achievements, challenges faced, changes and updates from the past year.

Key highlights from the past 12 months include:

- There was a 43% increase in the number of Individual Members in 2018
- The annual ISQua conference which took place in October 2017 was a success with over 1,500 delegates attending from 80 countries
- A new interactive e-learning Undergraduate Programme for Chinese medical students, in Patient Safety and Quality Improvement, was launched in May 2018

- The IAP published the 5th Editions of the Guidelines and Principles for the Development of Health and Social Care Standards (Principles) and the Guidelines and Standards for External Evaluation Organisations (Standards) and these will be formally launched at the annual ISQua conference in Malaysia in September 2018
- In March 2018, ISQua joined the International #QiComms Group and was one of the first organisations to sign the #QiComms Charter when it was published in June 2018
- Since the African Community of Practice (AfCoP) was established in 2017, a further two Communities have also been set up; these are the Latin American and Caribbean Community of Practice (LACCoP) and the Person-Centred Care Community of Practice (PCCOP)
- A new and improved website was developed and will be formally launched at the annual ISQua conference in Malaysia
- A record number of applications were received for the Emerging Leader Programme in 2017 with 27 complete applications received

- ISQua established The International Academy of Quality & Safety (IAQS) to recognise distinguished individuals who have made a significant contribution in the field of Quality and Safety in Healthcare
- A new Patient Inclusion Scholarship was launched to offer patients/patient advocates/caregivers the opportunity to attend the annual ISQua conference
- The ISQua Past Presidents Network was established with the first meeting due to take place at the annual ISQua conference in Malaysia

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 has personcentred 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.

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

Vision:

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

Values:

Transparency, Integrity, Diversity, Ethical, Excellence, Evidence-based.

Tag Line:

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

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.

To achieve this we will be bold, focus on our customers and Members, develop new business models and cultivate existing and new partnerships.

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, IAPO 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 Alliance of Patients' Organizations (IAPO)
- International Hospital Federation (IHF)
- New partnerships to further the aims of ISQua
- Other partnerships

International Society for Quality in Health Care Strategy 2018-2020

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.

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

Values: Transparency, Integrity, Diversity, Ethical, Excellence, Evidence-Based.

Strategic Aims

BuildBuild on our foundation

Develop interventions for improving quality & safety – Networks

Develop

Expand

Develop programmes in regions & expand impact in LMIC

Maintain

Maintain develop & foster strategic partnerships

How?

• Knowledge Management

programmes & their

successes

- External Evaluation
- Members
- Patients
- nent QI networks
 - Advisory services to develop and promote quality and patient safety
 - Communities of Practice Regions, Safety, Patients
- Communities of PracticeSupport Universal Health
- Coverage
- NQPS

• WHO

- World BankIHI
- IAPO
- IHF
- New Partnerships

Strategic Priorities

- a vibrant sustainable membership organisation that provides benefits and services for its members
- oglobal leader in supporting the development & improvement of health & social care to external evaluation organisations
- be the leading international networking, research & educational event for all involved in improving health and social care worldwide
- be a leader for enabling access to and/or providing healthcare quality and patient safety education
- develop innovative solutions working with our Members, partners and patients
- offer the opportunity for organic growth of ISQua and of the spreading of skills, knowledge and shared learning
- Facilitate researchPolicy Development
- 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
- build sustainable knowledge sharing through Communities of Practice and supporting local programmes and meetings
- support QI networks and offer advice and support to local organisations
- work with stakeholders and partners to help deliver and enhance programmes to improve the quality of care for people worldwide
- continue to strengthen relationships with partners

To achieve this we will be bold, focus on our customers and members, develop new business models and cultivate existing and new partnerships.

Foreword by the **CEO**



Peter LachmanChief Executive Officer

"The past year has been the year of change and change is exciting...and brings its own challenges. I am pleased to report that despite the challenges, ISQua is going places as we transform your organisation to serve you, our members better."

Be Bold

Change requires a vision and a vision requires courage to go to new places. Our vision is to be the leader in our field and to place patients at our core. We want to be truly international and to empower those in the less advantaged countries to make a real difference. We are expanding into new regions through our networking channels and education programmes. We have gained new members of staff and lost others. We have developed a motivating strategic plan; and we have concentrated more on patients and patient goals than ever before.

Build

Change is all about building strong foundations on which the new ventures will rest.

- Networking has always been central to what ISQua is. We have been responsible, over the years, for starting many key professional relationships between people. This year we looked to build and formalise this by setting up two new Communities of Practice (COP), the Latin American and Caribbean Community of Practice, and the Person-Centred Care Community of Practice, to follow the success of our African COP.
- We looked to build on the success of the inclusion of the patient at our London conference with the creation of a Patient Inclusion Scholarship. This scholarship was open to any patient, patient advocate, or caregiver who is engaged in their community, would benefit from attending the conference, and are willing to apply and share what they learn.

The interest was overwhelming, and we have been so impressed with our ten recipients that they have been asked to present a 90-minute session at our Kuala Lumpur conference. Soon we will have two patients on all our advisory committees and will be translating journal articles into patient friendly language.

Develop

- As a membership organisation we need to look after our Members in new ways. We have developed, and continue to develop, new significant benefits for our Members. Members can now register for our Specialist Certificates on the Principles of Person-Centred Care, the Practical Approaches for Person-Centred Care, and the Fundamentals of External Evaluation Surveying, at a great discounted rate. And our membership numbers are exceeding all-time highs.
- With the introduction of our new website, Members will soon be able to communicate privately with other members of the ISQua Community; start discussions within our forums, access member-only online webinars; and more easily access all of ISQua's resource documents and files.
- In July 2018 ISQua published its updated Terminology Principles to help define the different terms, language and wording used in the field of external evaluation. This publication sets out the definitions of selected key terms in the domain of external evaluation in health and social care to promote understanding and consistent use of terms among providers and researchers in the domain of external evaluation.

Expand

- ISQua made its first foray into China when we were invited to speak at several of their major national healthcare conferences. This led to discussions with Chinese healthcare leaders, the China Federation for Hospital Quality Management (CFHQM), and Blood and Bone Marrow China (or BBCn) to create a new Undergraduate Programme on quality and safety in health care. This course provides education in the areas of Quality Improvement and Patient Safety for undergraduate students of BBCn in Nanfang hospital and Southern Medical University.
- ISQua joined the International #QiComms
 Group and was one of the first organisations
 to sign the #QIComms Charter when it
 was lauched in July 2018. #QiComms is the
 strategic communications part of quality
 and safety improvement that builds the will
 and momentum for achieving improvement
 goals. The Charter invites all quality
 improvement leaders to recognise the
 strategic place that communications plays in
 improvement and integrate it into their work.
- We have started to coordinate our work in Latin America to ensure we have the maximum impact.
- And we are building stronger partnerships with strategic allies such as WHO, IHF, IHI and IAPO.

Maintain

- ISQua continues to maintain our high standards in accreditation. Over the past year the IAP team, along with the help and support of our Accreditation Council, have redesigned and updated our Guidelines Principles for the Development of Health and Social Care Standards, and our Guidelines and Standards for External Evaluation Organisations (now in their 5th Edition), and version 3.1 of the Guidelines and Standards for Surveyor Training Programmes.
- ISQua is committed to its strategic partnership with WHO. In May 2018, we published our Declaration on Patient Safety, in support of the Tokyo Declaration on Patient Safety proposed at the 3rd Global Ministerial Summit on Patient Safety. ISQua is fully committed to improving patient safety and healthcare quality worldwide. This permeates and guides all our deliberations and work. ISQua respects and values our partnerships which ultimately enable our mission to be accomplished.

In conclusion, we will not be resting on our laurels for the next year. Our aim is to continue our expansion into new regions and to strengthen our ties with our Members and partners. Our cause is quality and safety within a person-centred environment. We need your help to achieve this. Join us on the next stage of our journey.

As we say in our strategic plan - 'To do this we will be bold, we will focus on our customers and members, develop new business models and cultivate existing and new partnerships'

Peter Lachman, September 2018

Foreword by the **President Elect**



Prof Jeffrey Braithwaite *President Elect*

"It is a great honour and privilege to be the President Elect of the International Society for Quality in Health Care, in this, its 33rd year."

The pace at which the world is changing is speeding up; global demographics are in flux, technology comes at us at a rapid rate and politics remains a constant source of unpredictability. These changes are reflected in the medical and health services world—on the clinical front-lines, in policymakers' offices. in research institutions, everywhere. There has been a rapid acceleration in the field of genomic medicine, new innovative models of care are frequently published and the shift towards patient-centred care is picking up steam. Yet, in this fluctuating environment, ISQua remains true to its purpose. Its mission is: 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.

Holding firm to its values, ISQua is, at its heart, a global community. Over 33 years it has evolved and adapted to its circumstances. It continues to inspire and drive improvement. This is achieved not only through its extensive, vibrant and diverse community of experts but through its initiatives—including educational programs, multiple networks, events and innovative activities. As a result, ISQua has built an internationally-enviable fount of knowledge, expertise and tools with which to handle the constant moving targets of health care.

ISQua has continually fostered my own passion over the years. I have been a part of the ISQua community since the early 2000s, giving talks at conferences at first, then as an International Member of the ISQua Accreditation Programme's Research Working Group.

Since 2012, I have been an International ISQua Expert, and been part of the ISQua Innovation Committee. I have been an ISQua Board member since 2015. As an active researcher, I am an avid publisher in the International Journal for Quality in Health Care, ISQua's flagship journal.

In these various roles, I have seen ISQua from multiple viewpoints. As such, I understand that support of others and leadership are essential elements to the success of ISQua. The ISQua Fellowship Programme and the Emerging Leader Programme are exemplary initiatives that underpin this success. The latter encourages future leaders in quality and safety in health care to apply from all countries, rich and poor alike for a tailored educational program. ISQua's various networks and stakeholders similarly contribute to its success, such as our multiple partnerships with the World Health Organization (WHO), IHI, IHF and other international and national bodies.

I want to take this opportunity to thank my fellow Board members, especially our President, Wendy Nicklin, and Immediate Past President, Cliff Hughes. Wendy is an internationally recognised health care expert, and a global leader in accreditation, quality and safety. Cliff has been a surgeon, researcher, policymaker, CEO and mentor to many of us across the world for many years. Both have made influential, innovative and significant contributions to ISQua. Their strong commitment and leadership qualities are an amazing asset to our organisation, and I have great respect and admiration for everything that they have done for ISQua.

I also pay tribute to Peter Lachman, CEO, and the staff of ISQua for their unstinting support of the Society—and all the efforts they make on our collective behalf.

My own goal is to strive to encourage and support the diverse ISQua community, including people and institutions in low-, middle- and high-income countries. As we move into the new year, we will face all sorts of new challenges; and together we will support international efforts to promote quality and safety in health care in whatever form that takes.

Prof Jeffrey Braithwaite August 2018

Foreword by the **President**



Wendy Nicklin
President

From all perspectives, over the past 12 months ISQua has demonstrated progress, improvement, and addressed challenges in a positive way. ISQua is truly an organisation that is making an escalating global impact on enabling quality and safety! My commitment to you as President is to ensure that the governance of ISQua is sound, progressive and effectively enables ISQua to move forward, achieving our mission and vision.

In May 2018, the Board approved our Strategy for 2018-2020. This strategy will guide us forward for the next 3 years. The strategy builds on our foundations and successes to continue as a vibrant sustainable membership organisation. We aim to further develop interventions and networks to improve quality and safety; we plan to expand and develop our programmes' impact regionally; and finally, we aim to maintain, develop and foster strategic partnerships. Partnerships are critical and fundamental to our success and overall impact.

Concurrent with the development and adoption of the new strategy we examined our governance processes and structure. Was the Board organised for optimum effectiveness and keeping pace with the new strategy? The Board had a productive retreat in March which led to the formation of four Board working groups. Each group was given the task to examine an important area of governance: 1) operations of the Board, 2) the governance model and election process. 3) developing a Board compact and 4) reviewing our approach to strategic partnerships. A comprehensive Board evaluation process was also developed. Each working group had a minimum of three meetings during April and May, and the Board approved their recommendations in July. The results will be shared at the AGM in Kuala Lumpur.

Your Board is strong. Individually and collectively the Board is focused on enabling the increasing global depth and breadth of ISQua and truly contributing more extensively to improving the quality and safety of health and social care.

In January of this year, we welcomed Sara Yaron to our Board, as Honorary Advisory for Person-Centred Care, replacing Russell McGowan. Our sincerest thanks are extended to Russell for his valuable contribution. We are committed to patients being at the centre of everything we do. Every committee is currently being reviewed for determination of a patient representative member. Our Person-Centred Care Community of Practice, chaired by Sara, will play an important role helping us realise our strategy of patients at the centre.

As outlined in this report you will see that many new and enhanced initiatives were accomplished in the past year – including the beginning of the International Academy of Quality and Safety, which will be capably led by Prof David Bates. The first 35 Academy members were elected by ISQua's Experts in July 2018.

We are closely examining our regional and national presence around the world and strategizing to strengthen our regional presence, particularly in the LMIC. Indeed, progress is being made.

While the Board and the staff are at the core of ISQua, our effectiveness is realized thanks to all of those who participate with us in our work - Members, both Institutional and Individual, Fellows, Experts, International Accreditation Programme Surveyors, QI Network and

Community of Practice members, and our strategic partners. There is continual growth in each of those pivotal groups. It is through all of those connected with our extensive network and committed to the mission of ISQua that our work is conducted, and positive results obtained.

I am personally grateful to our CEO, Dr Peter Lachman, whose leadership, energy, commitment, knowledge and expertise are exceptional. He is leading our internal team and the entire strategy with great effectiveness. It is this team that truly deserves the gratitude of the Board, and all those associated with ISQua. Thank you, Peter and the staff.

Thanks to all the Members and Honorary Advisors on our Board. This Board is comprised of a well-qualified and committed group of professionals that are working diligently to oversee and guide this organisation. It is truly a pleasure to work with this team and know that, in partnership with the CEO, we are positively impacting on ISQua's success.

Finally, my thanks to all of you for being loyal to ISQua and participating in our activities and initiatives. Your involvement is critical to our continuing and growing success. Thanks to you and all that you do, our membership and global visibility continue to grow. You are all part of our team. We look forward to continuing to actively advance ISQua over the next 12 months and continue making a global difference to the quality and safety of health and social care.

Wendy Nicklin

August 2018

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 London conference took place in October 2017, with over 1,500 delegates attending from 80 countries. Of the delegates surveyed 92% would recommend the conference to their colleagues. There was a 117% increase from 2016 on the number of people tweeting and it topped the @symplur hashtag healthcare project as the highest trending conference. The International Journal for Quality in Health Care included a supplement of the 2017 abstracts and there was a record amount of delegate blogs.

The 2018 conference is scheduled for Kuala Lumpur and as of 28th August over 1124 delegates have registered from over 66 countries.

Both the 2016 and 2017 Conferences were accredited by the European Accreditation Council for Continuing Medical Education (EACCME®).

We have applied and received EACCME Accreditation for the Kuala Lumpur Conference, making this three years in a row. The London 2017 and Malaysia 2018 Conferences also achieved Patients Included status. This status signifies that the event has satisfied all five criteria as identified in the Patients Included charter.

Challenges

The main challenge, like all years, is maintaining a high standard and innovative conference, whilst keeping within budget. This was especially difficult in London due to the high costs of the venue and the lower than usual uptake on sponsorship opportunities. Each year brings a new venue and a new challenge. Each venue has its own positives and negatives and we endeavour to keep breakout rooms as close as possible and give enough space to the poster display area.

Having found the e-poster displays were very popular last year, with some minor changes we will include this in the programme again for the Kuala Lumpur Conference.

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 more patient involvement is needed in the programme. A conscious effort was made to involve more patients in the Malaysia programme, both in designing it and participating in the sessions. For the first year we have provided patient scholarships. There were over 100 applications which shows a great interest in the conference from patients and caregivers. Ten scholarships were awarded with 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.

We are in our second year of the formal speaker request service and to date in 2018 we have placed ISQua experts in over 25 meetings.

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

Programme update

As you can see from the below chart, 2016 and 2017 have been positive years for ISQua with impressive numbers of abstract submissions and attendance at the conference. The conference locations have been planned for Kuala Lumper. Malaysia for 2018 and Cape Town, South Africa for 2019. The 2020 conference will take place in Florence, Italy and 2021 will be in Brisbane, Australia.





■ Conference Registration

International Accreditation Programme (IAP)

Strategy

In line with ISQua's strategic objective of building on its foundation programmes and their success, the focus over the past year has been on revising the 4th Editions of the Guidelines and Principles for the Development of Health and Social Care Standards and the Guidelines and Standards for External Evaluation Organisations and on consolidating, developing and growing the existing external evaluation programme.

Key achievement

The 5th Editions of the Guidelines and Principles for the Development of Health and Social Care Standards (Principles) and the Guidelines and Standards for External Evaluation Organisations (Standards) will be launched at the annual ISQua conference in Malaysia in September 2018 following a comprehensive revision process. This included consultation with all relevant stakeholders and testing with client organisations and surveyors. All organisations will be assessed against the 5th Edition of the Standards from June 2019 while all sets of standards will be assessed against the 5th Edition of the Principles from August 2019.

Challenges

EU 765 / 2018 continued to be the primary challenge facing the IAP over the past year. In 2017, Switzerland was identified as a potential iurisdiction to operate the IAP from, ISQua liaised with the Swiss authorities to establish if it could open an association in Geneva to run the IAP. Once this clarification was received. ISQua sought legal and tax advice in both Ireland and Switzerland about what was required to establish and run an association in Switzerland. ISQua also contacted the Irish Charities Regulator about the planned association in Switzerland and sought their advice in relation to this. A final proposal for the new structure of ISQua was presented to the ISQua Board for approval at their July 2018 meeting. Changes were then made to ISQua's Memorandum and Articles of Association to reflect the planned change to the structure of ISQua. This will be presented to the ISQua members for approval at the Annual General Meeting (AGM) in September 2018. If approval is obtained it is planned that the Swiss association will be operational by the end of 2018.

Changes

Following the 2016 review of survey report turnaround times a 1-person Validation Review was piloted in 2017 to improve report turnaround times at this stage of the process. This change was evaluated in October 2017. and the majority of respondents reported that they were satisfied with the 1-person Validation Review and felt that the two-week timeframe was appropriate. However, it highlighted that there may be circumstances where a twoperson Validation Panel is required. Therefore. it was decided that the 2-person Validation Panels will be used only when the survey team's decision is to award with considerations, defer award, or no award. This was rolled out from the end of 2017 and is proving successful.

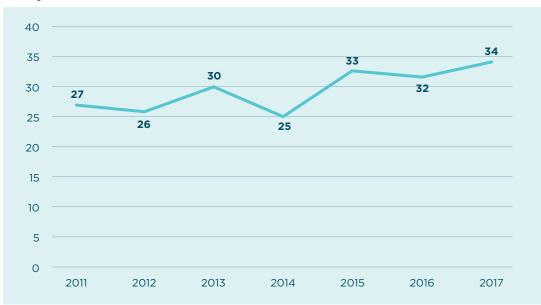
In April 2018, we bid a fond farewell to one of our Accreditation Managers Gillian Conway who moved on to a new training role in industry and in July 2018 we welcomed a new Accreditation Manager Heather Wilson to the team.

Programme updates

A total of 27 surveys were undertaken between October 2017 and August 2018. This includes 7 onsite organisational surveys, 14 standards surveys and 6 surveyor training programme surveys. As of the 31st of August 2018, a total of 303 surveys will have been undertaken by ISQua comprising 179 standards surveys, 83 organisational onsite surveys, 35 surveyor training programme surveys and 6 combined onsite organisational and surveyor training programme surveys.

ISQua Programmes	No. of surveys
Standards (Principles)	179
Onsite Organisation	83
Surveyor Training Programme	35
Combined Onsite Organisation and Surveyor Training Programme	6
Grand Total	303

Surveys 2011-2017



The International Accreditation Programme Activity Report 2017 provides further insight into the work undertaken by the IAP in 2017. This report is available on the ISQua website: https://isqua.org/accreditation-iap/reference-materials

Annual Review **Education**

Strategy

As the demand for ISQua educational resources continues to grow, this year the Education team has been concentrating not only on enhancing the Fellowship Programme, but also on developing other education programmes: Specialist Certificates, Undergraduate Programme and several Joint Programmes with our partners.

Key achievements

The two main areas of the Education team focus have been the development of a new interactive e-learning Undergraduate Programme for medical students in Patient Safety and Quality Improvement which was launched in May 2018, and finalising curricula for the two additional Specialist Certificates in Medication Safety and Using Health Information Technology to Improve Patient Safety which are due to be introduced by the end of 2018. Concurrently, new curricula for each track of the ISQua Fellowship Programme have been developed with the view to refining and improving this flagship programme.

Challenges

Diversification of the educational products, aimed at reducing the chances of financial risk, caused by over-relying on one programme, presented its own challenges this year.

Balancing human and company's resources to maintain the current level of service and infrastructure for the existing offerings with allowing sufficient resources for new courses development within the agreed timeframes was particularly difficult.

The matter of graduate retention was still an ongoing issue for the Fellowship Programme despite conscientious efforts to address the problem at a departmental level. Following extensive consultations with stakeholders, in February 2018, the Board approved the proposal to address the retention rate. The agreed solution is due to be implemented during the second stage of a new website development and envisages the progression of ISQua Fellows based on loyalty to the Fellowship Programme (i.e. years of continuous Fellowship maintenance without lapsing), supplemented by increased tangible benefits.

Changes

The following changes took place during the last year:

- Phasing out of the Associate Fellowship and the Certificate of Achievement levels and offering the Fellowship Programme only at the Fellowship level.
- Implementation of plagiarism policies.
- Introduction of simulated online webinars and more user-friendly times for the synchronous online activities.
- Building a new partnership with the Institute for Professionalism and Ethical Practice at Boston Children's Hospital.
- Launch of new Joint Programmes with Thomas Jefferson University in October, 2018 and Blood & Bone marrow China in May, 2018.

Programme Updates

The number of enrolments for the Fellowship Programme was consistent with the previous year's figures and a total of 202 new learners joined between October 2017 and July 2018, bringing the total number of active Fellowship Programme participants to 465 from 62 countries.

Efforts to support participants from low and lower middle-income countries continued with 10 scholarship places for the Fellowship Programme offered this year and in collaboration with HealthCareCAN, five complimentary subscriptions for a selection of HealthCareCAN online courses were also proposed.

The Fellowship programme was further enhanced by a doubling of the number of internship places provided by the AGPAL Group of Companies comprised of Australian General Practice Accreditation Limited (AGPAL), Quality Innovation Performance Limited (QIP) and Quality Innovation Performance Consulting Pty Ltd (QIP Consulting).

Work also commenced on developing Spanish content for a new Joint Programme in collaboration with The Institute of Clinical Effectiveness and Health Policy (IECS) which is affiliated with the University of Buenos Aires and Organización para la Excelencia de la Salud (OES). Additionally, work on expanding Portuguese resources in conjunction with Associação Brasileira de Acreditação de Sistemas e Serviços de Saúde (CBA) was undertaken.

Fellowship Programme 2012-2018



Membership

Strategy

The strategy to increase the accessibility of membership for all regions had a positive effect with an increase in Members in regions such as Africa and South America. Membership numbers, particularly Individual members, saw a 43% increase compared to 2016. The value of membership to our Members was a priority area of the Board and the project to develop a new website has provided an opportunity to increase the value of membership.

Key achievements

- Increase individual membership numbers
- Increase in regional spread of members
- Increase in members standing in Board election (40% Institutional Member candidates and 63% increase in Individual Member candidates compared to 2015 election).

Challenges

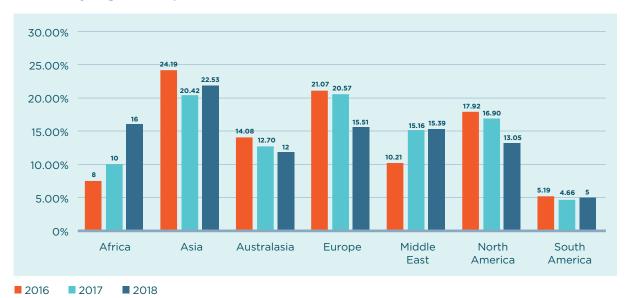
Retaining and attracting new members is an annual challenge. In particular, Institutional Member numbers are decreasing. There are particular regions where membership has seen a slight downturn such as Europe and North

America. A number of our existing members in North America participated in focus groups to brainstorm the reason for the decrease in members in this region and the staff will work on their recommendations. Reaching out to those that are just starting their career in safety and quality in health care is a continuing challenge.

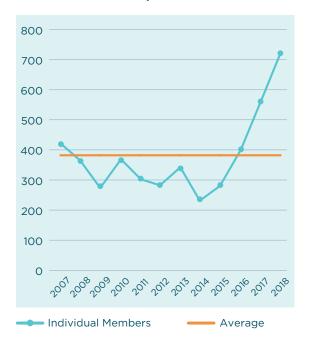
Changes

The Board introduced a change in the membership year from a calendar year to an anniversary year. Therefore, any members renewing or joining are members for a full twelve months. The opportunity of planning for the new website means that we can offer new benefits to our members which will include discounts on new programmes, the means whereby members will be able to communicate with each other privately as well participating in forums and member-only webinars.

Members by Region (2016, 2017 and 2018)



Individual Membership 2007-2018



Institutional Membership 2007-2018



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, Layman summaries of the Editor's Choice articles have been published in ISQua's Membership Bulletin.

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 endeavor to promote the ISQua Journal at other related conferences. As per previous years, to help promote the IJQHC, a Journal session will be held at the ISQua Conference in Kuala Lumpur.

Key achievements

- The impact factor is stable (2015: 2.545; 2016: 2.342; 2017; 2.554)
- Increase in the number of issues: 8 in 2017.
- ISQua London Conference 2017 Abstract Supplement published
- Salzburg Global Seminar 565 Supplement published - Better Health Care: How do we learn about improvement published.
- 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.
- Number of submissions increased: Year 2015: Papers 537,
 Year 2016: Papers 691,
 Year 2017: 800, Year 2018: 491 (from 01.01.2018 to 31.07.2018).
- Turnaround time (First submission to final decision) 2014-2015 (3 months decreased) (Average months: 8 to 5) (Maintained for 2015-2016) - Maintained for 2017.
- 2017 Ranking in Health Care Sciences & Services (26 out of 94).

- 2017 Ranking in Health Policy & Services (14 out of 79).
- Journal session for promotion at ISQua conferences 2015, 2016, 2017 and will be in 2018
- New reviewers recruited via the ISQua Members

Challenges

There have been a number of challenges this past year. The need to secure more citations across different journals. Improvements will be made to ISQua's marketing strategies as well as the approach to maintain the journals reputation 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 Report

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

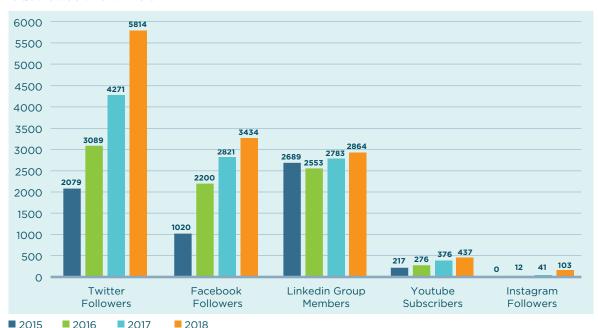
Over the past 12 months we have continued to increase our social media presence. ISQua is active on Twitter (5,814 followers), Facebook (3,434 followers), LinkedIn (2,864 group members & 2,115 followers), and Instagram (103 followers). ISQua also utilises YouTube (437 subscribers, 923 videos) and Vimeo (40 videos).

We saw a major jump in the use of twitter at the 2017 conference in London with attendees actively tweeting and retweeting content. This was helped using Symplur Live on the plasma screens at our stand, which shows real-time data of tweets, tweeters, and discussion points in a user-friendly manner; and by the use of our app 'Social Wall' which we used to great effect in the meeting rooms to show the current tweets, before and after each session. These activities helped keep the momentum going and pushed more delegates to take part.

During the four days of the Conference:

- #ISQua2017 topped the @symplur hashtag healthcare project as the top trending conference
- Over 13,000 tweets were sent by 2,250 users - one thousand more than was actually attending the conference!
- The #ISQua2017 hashtag gained 33 million impressions over the four days over double the amount for #ISQua2016 (14 million).
- Photos and videos were shared at a much higher rate than any previous conference.

In March 2018, ISQua joined the International #QiComms Group and was one of the first organisations to sign the #QiComms Charter when it was published in June 2018.



ISQua's Social Channels

#QiComms is the strategic communications part of quality and safety improvement that builds the will and momentum for achieving improvement goals. It uses communications in a planned way to support and underpin work that inspires, motivates and informs all those involved to deliver better, safer treatment and care for individuals.

Representatives from the International #QiComms Group have been invited to speak at the Kuala Lumpur conference and we will be encouraging as many organisations as possible to sign up to the Charter.

Challenges

The General Data Protection Regulation (GDPR) came into force in May 2018, replacing the existing data protection framework under the EU Data Protection Directive. The GDPR emphasises transparency, security and accountability by data controllers and processors, while at the same time standardising and strengthening the right of European citizens to data privacy.

As part of our work to be GDPR compliant, a review of our contact database was completed and over 13,000 associates where contacted to ensure that they wished to continue to receive information from ISQua.

Of these, over 9,000 agreed to remain on our contact list.

Issues with our existing website have continued to hinder our social media expansion. The main aim of having social media channels is to make the public and our members aware of what we can offer – by directing them back to our website. Over 80% of all social media activity takes place on mobiles or tablets for which our website is not enabled. This issue will be resolved with the implementation of our new website in September 2018.

Changes

When the ISQua logo was redesigned in 2012, sub-logos for each of our departments were also created. Due to confusion over the years on when and where these logos should be used, a decision was made this year to revert back to just the single ISQua logo.

We believe that this will help increase the awareness of our brand and organisation. As a result of this, our ISQua Member, Fellow & Expert badges have been redesigned and will be distributed at the Kuala Lumpur conference. Institutional Members and ISQua Accredited organisations will also receive updated logos for their own websites.

Annual Report

Communities of Practice

Strategy

To increase collaboration between countries and foster information sharing through regular meetings of healthcare professionals, ISQua has devoted resources to establishing communities of practice.

Key Achievements

Since the African Community of Practice (AfCoP) was established in 2017, a further two Communities have also been set up. These are the Latin American and Caribbean Community of Practice (LACCoP) and the Person-Centred Care Community of Practice (PCCCoP). Membership of the African Community of Practice has grown from 40 members to 150 members, and a Steering Committee has been convened to oversee the scheduling and participation of AfCoP meetings.

Attendance at the LACCoP has been strong, with at least 30 members attending each webinar. The overall membership of the Community is 58. Attendees are highly motivated and engaged, with meetings often lasting for more than one hour.

The PCCCoP has brought together the Advisory Forum on Partnerships with Patients and the Advisory Committee on Partnerships with Patients - both of which had become less visible and active in the past 2 years. The CoP is equally engaged and eager to work on projects together.

Challenges

An ongoing challenge for these groups is in maintaining a high level of engagement and attendance at meetings. Advance planning is essential in order to do this, but due to conflicting timetables and the workload of scheduled presenters, meetings have been cancelled or changed at the last minute.

It is also imperative that a long term, detailed plan for the PCCCoP and their role is communicated to members so they do not begin to feel that their role is tokenistic, which it isn't.

Changes

A new format for AfCoP meetings was adopted in June and proved to be quite successful. Four prevailing topics were identified by a survey of members in late 2017 and will now form the basis for upcoming meetings. The Steering Committee will source multiple panellists to speak on these topics from their contrasting regional experiences.

Programme Updates

In their first month, the 47 members of the PCCCoP worked together to draft a Terms of Reference and are currently working on a Principles document to further scrutinise their remit.

We have had interest in establishing a Community of Practice for Dentists and also a regional Indian Community of Practice, and further investigation is needed to see how these might work in practice.

To date, five AfCoP meetings and three LACCoP have been edited and uploaded onto the ISQua website and are available to view on https://isqua.org/interest-groups/communities-of-practice.

Four Topics:

Measuring Quality	Leadership and Governance	The Patient	Access to quality healthcare
 Measuring Quality QI Initiatives Accreditation Performance monitoring Implementing Improvement 	 Securing buy-in from Government Engaging frontline staff and management Influencing National Policy 	 Infection, Prevention and Control Patient centred care The Patient Voice/Patient Experience Tackling NCD's Maternal and Child Health 	 Overcoming limited resources Advocating for patients Motivating Healthcare workers Equity of care Regional and rural disparity

Website

History

This project began in January 2017 with an indepth look at what our website currently offers and what we required to move ISQua and our programmes forward. A request for proposal was prepared and circulated to vendors in May 2017.

After a robust vetting system, we agreed, in July 2017, to do a discovery process with Ireland Website Design (IWD) to further understand our needs. The discovery took place over 2 months with numerous consultations, workshops and research. The Board gave approval for the redesign project with IWD in October 2017 and the finalised contract was signed in December 2017.

Project Overview

Work began on this project in December 2017 and over the past 9 months IWD have designed a new website and created a new user login platform, that integrates all of ISQua's core programmes in one system, for our Members, Fellows and other users. This new system will allow ISQua to easily expand to new activities (i.e. specialist certificates, undergraduate programme, communities of practice) while remaining user-friendly for both staff and customers.

Members and users can now easily check their renewal dates, register for our educational activities, network with others in our forums, view exclusive discounts, easily access all our resource documents and videos, and so much more.

Summary

The new website will have a soft-launch in mid-September, with an official launch at our annual conference in Kuala Lumpur.

We hope that you will be pleased with the new look and welcome your feedback.



Emerging Leader Programme

Strategy

The Emerging Leader Programme aims to provide motivated and skilled upcoming leaders from LMIC regions with the opportunity to upskill through a tailored educational programme. This is financially supported by ISQua in partnership with the World Health Organization. The project comes under strategic objective 6 – Regions and LMIC, but also extends to strategic objective 3 – Education and Knowledge Sharing.

Key Achievements

A record number of applications were received for the Emerging Leader Programme in 2017, with 27 complete applications received. Very little separated the two highest scoring candidates, and as the competition was not held in 2016, it was decided to award the programme to both, Louis Ako-Egbe from Cameroon and Wafa Allouche from Tunisia. The 2017 Emerging Leaders will both complete a three month internship with the WHO in Geneva, and will also be supported to achieve their learning outcomes through participation in ancillary professional development programmes also.

Challenges

With a strict budget allocation for this programme, a key challenge is finding affordable accommodation in Geneva for the leaders. This is the first year that has involved a WHO internship, and if the partnership continues, the team will be better equipped to make accurate financial projections for the programme in future years.

Changes

As mentioned, the biggest change from previous years is the partnership with the WHO, which will offer the leaders access to a range of areas of work within the WHO Department of Service Delivery and Safety (SDS).

Programme Updates

The two ISQua Emerging Leaders will start their internships in October and November 2018. The 2018 – 2019 Emerging leader Programme is now open to applications. Only one leader will be chosen. Both leaders have also been invited to share their experience of the Programme at the 2019 ISQua Conference in Cape Town.

New Activities

ISQua International Academy of Quality and Safety (IAQS)

ISQua has established The International Academy of Quality & Safety (IAQS) to recognise distinguished individuals who have made a significant contribution in the field of Quality and Safety in Healthcare. The Academy recognises excellence of leadership within research, academia or service delivery in quality and safety in healthcare. Membership of the Academy is one of the highest honours that an individual working in this area can receive.

The 35 founding members of IAQS were nominated and then elected by ISQua Experts and the Board in June 2018. Membership of the Academy is for life. Further details of the Academy members will be posted on our website when available.

Prof David Bates, President of ISQua from 2013-2015, will lead the Academy.

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

René Amalberti, Senior Advisor, Haute Authorité 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 **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

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 Practioners Association Foundation, South Africa

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

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 Department, Institute for Clinical Effectiveness and Health Policy (IECS), Director, Department of Health Care Quality and Patient Safety, Argentina

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

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

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

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

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

Fiona Moss, Dean, Royal Society of Medicine, UK

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

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

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

Jennifer Zelmer, President, Azimuth Health Group, Canada

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

Annual Review

New Activities

Past Presidents Network

Cliff Hughes, Immediate Past
President approached the ISQua Officers and
CEO in October 2017 with a view of establishing
a Past President Network.

The Officers thought it would be a great idea to form an informal cohort of all Past Presidents to improve communications and to recognise their expertise, wisdom and experience and to generally build fellowship amongst all the Past Presidents. Cliff, in his capacity as Immediate Past President will be the link person between the Network, Officers, Board, CEO and ISQua staff.

Cliff set about contacting each Past President in November 2017. In the Spring of 2018, once communication had been established, Cliff has scheduled a meeting of the Past Presidents at this year's annual conference in Kuala Lumpur for those Past Presidents who are attending the conference.

It is intended that the Network will be in regular contact and meet online three times a year with a face-to-face meeting during the annual conference. The Past President Network is a rather lengthy extension of the camaraderie, wisdom and friendship which lead to the foundation of ISQua.

The Presidents legacy is one of inspiration, innovation, interest and involvement.

Annual Review

New Activities

Patient Inclusion Scholarship

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

It is our aim to bring together delegates and speakers from across the world to learn from each other, and to test ideas, research findings and insights. It is our 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 launched a new scholarship programme in June 2018 to offer ten patients/patient advocates/caregivers free registration (pre- & Main) to ISQua 2018 and a stipend of €500 to cover travel and/or accommodation costs.

This Scholarship was open to any Patient, Patient Advocate or Caregiver who are engaged in their community and willing to apply and share what they learn from the Conference. We experienced an exciting and successful programme launch, with over 100 applications received in only two weeks.

Applications were received from Australia, Burundi, Canada, Egypt, Ethiopia, Gambia, Ghana, India, Indonesia, Italy, Jamaica, Kenya, Lebanon, Malawi, Malaysia, Nigeria, Pakistan, Rwanda, Saudi Arabia, South Africa, Ukraine, UAE, UK, Vietnam and Zambia.

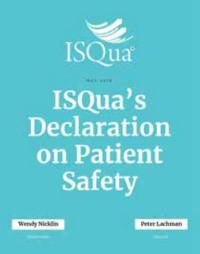
An independent Selection Committee selected our ten 2018 Patient Inclusion Recipients:

Name	Country
Prosper Mandela Amaltinga Awuni	Ghana
Dominic Dormenyo Gadeka	Ghana
Jumoke Patrick	Jamaica
Teri Price	Canada
Katharina Kovacs Burns	Canada
Maureen Williams	Australia
Helen Karagiozakis	Australia
Mark Cantor	Australia
Yvonne Quadros	Australia
Sandrasagary Jayacodi	United Kingdom

Publications

- Terminology Principles
- ISQua's Declaration on Patient Safety
- Improving Quality Through a Better Patient Experience and Patient-Centred Care (Conference Report, from ISQua's 34th International Conference, London 2017)







Each of these publications can be freely downloaded from the ISQua website.

Annual Review

ISQua Board and Expert Travel from September 2017 to September 2018

SEPTEMBER 2017

National Quality, and Clinical and Safety
 Conference, Dublin, Ireland - Peter Lachman

OCTOBER 2017

- Quality and safety day in Florence, Italy -Peter Lachman
- Quality and safety day in Rome, Italy Peter Lachman
- National Convention of clinical risk managers in Venice, Italy - Peter Lachman
- Korean Society for Laboratory Medicine Symposium, Korea - Helen Healey, Cliff Hughes
- Mexico Quality Forum, Mexico Wendy Nicklin, Chris Cornue
- 2017 International Green Healthcare Forum,
 Hong Kong, China Cliff Hughes
- Leaders in Healthcare conference, Liverpool,
 UK Peter Lachman

NOVEMBER 2017

- 41st World Hospital Congress, Taipei, Taiwan
 Peter Lachman, Cliff Hughes
- ANZ Prevocational Medical Education
 Forum, Brisbane, Australia Cliff Hughes
- COSA Annual Scientific Meeting (ASM),
 Sydney, Australia Cliff Hughes
- Crossroads- Working Together for a Better World, Istanbul, Turkey - Helen Crisp

DECEMBER 2017

- VII International Congress on Patient Safety,
 Mumbai, India Peter Lachman, Cliff Hughes,
 BK Rana, Leslee Thompson
- Global Service Delivery Network participation in UHC Forum 2017, Tokyo, Japan - Yuichi Imanaka
- The Agency for Healthcare Quality and Accreditation, Sarajevo, Bosnia and Herzegovina - Carlos Goes de Souza
- HealthAchieve, Toronto, Canada Wendy Nicklin

JANUARY 2018

 7th International Quality and Performance in Healthcare Congress, Antalya, Turkey -Susan Frampton, Mike Durkin

FEBRUARY 2018

- AFRIQHER Inaugural Conference and Foundation Training Workshops, Accra, Ghana - Peter Lachman
- Africa Forum, Durban, South Africa Peter Lachman, Jacqui Stewart

MARCH 2018

 5th Tunisian Health Congress, Tunisia - Bruno Lucet

APRIL 2018

- Academy for Emerging Leaders in Patient Safety (AELPS18) - The Sydney Experience, Sydney - Cliff Hughes
- WHO Global Ministerial Meeting, Tokyo,
 Japan Jeffrey Braithwaite, Shin Ushiro
- Meeting of Taiwan Patient Safety Culture Club, Taichung, Taiwan - Shin Ushiro
- Sociedad Internacional de Calidad en Salud. Experienca como Accreditadora de Aceditadores, La Habana, Cuba - Teresa Tono

- CN-Healthcare Summit, Bo'ao, China Peter Lachman, Wendy Nicklin, David Vaughan, David Greenfield, B.K. Rana, Yuichi Imanaka, Ezequiel Garcia Elorrio, Shin Ushiro (ISQua Regional Conference)
- Advisory Board of Medstar Institute of Quality and Safety, Arizona, USA - Cliff Hughes
- Leadership Matters A Focus on Risk and Safety, Toronto - Wendy Nicklin

MAY 2018

- 8th International Health Tourism Congress, Turkey - BK Rana
- RACS Annual Meeting, Australia Cliff Hughes
- OBHC 11th OBHC Co-ordinating care across boundaries and borders, Canada - Jeffrey Braithwaite
- Chinese Hospital Quality Congress, China -Peter Lachman
- CISS International Congress of Health Services, Brazil - Peter Lachman
- Quality Workshop, Ghana Jacqui Stewart
- Quality Management Conference, Africa Health Congress, South Africa - Jacqui Stewart

JUNE 2018

- Review Panel for Public Health, GermanyJeffrey Braithwaite
- ASPH QI Event 2018 "Keep Improving, Keep Learning", UK - Peter Lachman
- European Network for Safer Healthcare on Improving the prevention, diagnosis and clinical management of Sepsis
 David Vaughan

AUGUST 2018

- 7th Resilient Health Care Meeting 2018, Denmark - Jeffrey Braithwaite
- IECS Conference 2018 & ISQua's 2nd Latin American Regional Meeting, Buenos Aires, Argentina - Peter Lachman and Paulo Sousa (ISQua Regional Meeting)
- 20th Congress International Ergonomic Association, Italy - Jeffrey Braithwaite
 & Peter Lachman

SEPTEMBER 2018

- NCHD Evening, Ireland Peter Lachman
- Cancer Care Commission, Oxford, UK
 Tricia Woodhead
- ISQua's 35th International Conference, Malaysia - All Board

Staff



Dr Peter Lachman CEO



Eadin Murphy Head of Events



Elaine O'Connor Head of International Accreditation and Strategic Partnerships



Yulianna Susla Head of Education



Nicola McCauley-Conlan Accreditation Manager



Heather WilsonAccreditation
Manager



Deirdre BurkeCorporate Services
Coordinator



Sinead McArdleCommunications
Officer



Simon Donohoe Executive Assistant to the CEO



Eleanor KeeganEvent Coordinator



Brian Cahill
Programme
Development
E-Learning Officer



Caroline UsherEducation
Administrator



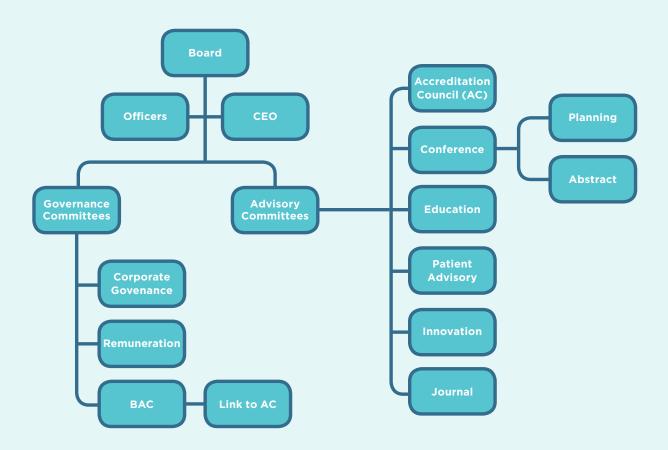
Caitriona Curran Network Programme and Corporate Support Officer



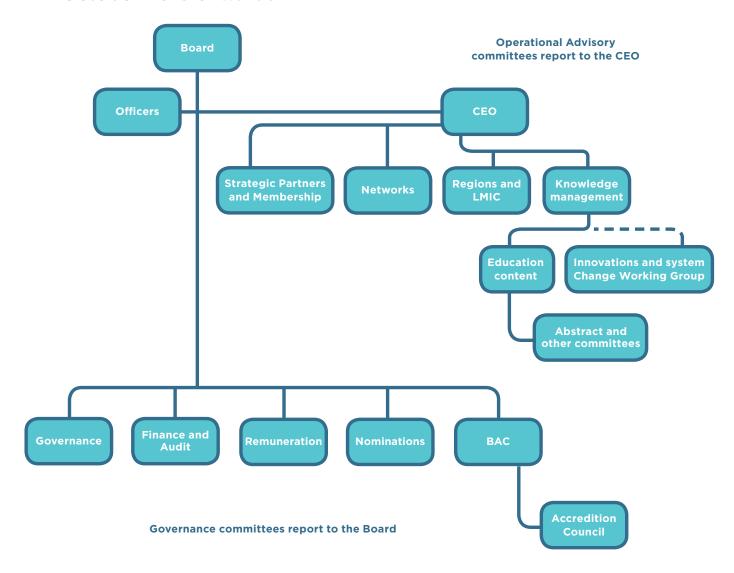
Orla Corcoran Administrative Assistant

Annual Review

Organisational Structure 2017 - 2018



October 2018 onwards



Committees

Corporate Governance and Audit Committee

Committee Member	Country
Jeffrey Braithwaite, Chair	Australia
Bruno Lucet	France
Duncan Inverarity	Ireland

The purpose of the Corporate Governance and Audit Committee (CG&AC) is to assist the Board of Directors in setting and evaluating the principles of good governance by which ISQua is controlled.

These principles include but are not limited to: conducting the business with integrity and fairness, being transparent with regard to all transactions, making all the necessary disclosures, decisions, and complying with all the relevant Irish laws. The CG&AC meets at least two weeks before every Board meeting and regular items on the agenda include: reviewing the finances such as the budget, assessing risks and ensuring that the organisation is complying with Irish Company Law, Irish Revenue and the Irish Charities Regulator, Throughout 2017 and 2018 the CG&AC met seven times and reviewed the budget, the Memorandum and Articles of Association, oversaw the project to develop the new website, reviewed monthly management accounts and reviewed policy such as the Plagiarism Policy and Reserves Policy.

Remuneration Committee

Committee Member	Country
Wendy Nicklin	Canada
Cliff Hughes	Australia
Duncan Inverarity	Ireland
Peter Lachman	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 to 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 shall report to the Corporate Governance and Audit Committee (Finance and Audit Committee from October 2018) on all matters within its duties and responsibilities. The committee proposes recommendations to the Board, via Corporate Governance and Audit Committee (Finance and Audit Committee from October 2018) it deems appropriate on any area within its remit where action or improvement is needed. The Remuneration Committee met twice in 2017 and 2018.

Board Accreditation Committee

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

The Board Accreditation Committee (BAC) is a subcommittee of the Board with the responsibility for the governance and policy development of the external evaluation programmes of ISQua in accordance with ISQua's strategic plan. The BAC is responsible to the Board for all external evaluation activities, this includes; overseeing the coordination and integration of IAP activities, articulating objectives, milestones and risk management plan for IAP, establishing a process for evaluation, the efficacy of proposed activities, represent views and interests of the Accreditation Council (AC) and of the external evaluation community's to the Board, and ensuring the AC and all products adhere to best practice ethical principles. They have specific responsibility for approving external evaluation awards, programme standards and assessment methodologies. The BAC met eight times over the past year and have ratified 29 awards in this timeframe.

Accreditation Council

Committee Member	Organisation	Country
Stephen Clark (Chair)	Australian General Practice Accreditation Limited	Australia
Carsten Engel	Danish institute for Quality and Accreditation in Healthcare	Denmark
Harish Nadkarni	National Board for Hospitals and Healthcare Providers	India
Ann Wunsch	Australian Aged Care Quality Agency	Australia
Bruno Lucet	Haute Autorité De Santé	France
Catherine Grenier	Haute Autorité De Santé	France
Asmita Gillani	HSO / Accreditation Canada	Canada
Kadar Marikar	Malaysian Society for Quality in Health Care	Malaysia
Paul Chang	Joint Commission International	United States of America
Pa-Chung Wang	Joint Commission Taiwan	Taiwan
Jacqui Stewart	Council for Health Service Accreditation of Southern Africa (COHSASA)	South Africa
Michael Murray	Diagnostic Accreditation Program, College of Physicians and Surgeons	Canada
Ellen Joan van Vliet	Netherlands Institute for Accreditation of Hospitals	The Netherlands
Lena Low	Australian Council on Healthcare Standards	Australia
Moyra Amess	CHKS	United Kingdom
Yuichi Imanaka	Japan Council for Quality in Health Care	Japan
Salma Jaouni	Health Care Accreditation Council	Jordan
Rubens Covello	IQG - Health Services Accreditation	Brazil
Observers		
Eric de Roodenbeke	International Hospital Federation	Switzerland
David Greenfield	Australian Institute of Health Service Management, University of Tasmania	Australia
Shams Syed	World Health Organization	Switzerland

The Accreditation Council (the Council) convened three times over the past year. There were two face-to-face meetings including the annual ISQua conference in London last September and the February 2018 meeting in Dublin. The arrival of Storm Emma led to plenty of networking opportunities with many Council members having a longer than anticipated stay in Dublin! The Council met via video conference in June 2018 and another video conference call will take place in December 2018. The following new members joined the Council over the past year:

Name	Organisation	Country	1st meeting
Kawaldip Sehmi	The International Alliance of Patients' Organizations	United Kingdom	February 2018
Fabio Leite Gastal	Organização Nacional de Acreditação	Brazil	June 2018
Christian Hart	Instituto Brazileiro para Excelencia en Saude	Brazil	September 2018

ISQua would like to thank the following Council sub-groups who have worked closely with the International Accreditation Programme (IAP) team over the past year to revise the 4th Editions of the ISQua 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).

Principles for the Development of Health and Social Care Standards Working Group

Committee Member	Organisation	Country
Linda O' Connor representing Lena Low	Australian Council on Healthcare Standards	Australia
Carsten Engel	Danish institute for Quality and Accreditation in Healthcare	Denmark
Bruno Lucet	Haute Autorité de Santé	France

Standards for External Evaluation Organisations Working Group

Committee Member	Organisation	Country
Lena Low	Australian Council on Healthcare Standards	Australia
Moyra Amess	CHKS	United Kingdom
Salma Jaouni	Health Care Accreditation Council	Jordan

ISQua would like to thank the following individuals who stepped down from the Council over the past year for their work on and commitment to the Council:

- BK Rana, National Board for Hospitals and Healthcare Providers
- Helen Healey, Diagnostic Accreditation
 Program, College of Physicians and Surgeons
- Danielle Dorschner, Accreditation Canada
- Nancy Yamauchi, Consórcio Brasileiro de Acreditação
- Kees van Dun, Netherlands Institute for Accreditation of Hospitals

Conference Programme and Planning Committee

Committee Member	Orgnisation	Country
Wendy Nicklin	ISQua President	Canada
Suraiya Hussein	Deputy President, MSQH	Malaysia
Peter Lachman	ISQua CEO	Ireland
Nor'Aishah Abu Bakar	Patient Safety Unit, MOH Malaysia	Malaysia
M.A. Kadar Marikar	MSQH	Malaysia
Jacqui Stewart	COHSASA	South Africa
David Greenfield	Australian Institute of Health Service Management; University of Tasmania	Australia
Helen Crisp	Independent Consultant for Quality Improvement in Healthcare	UK
Manvir Jesudasan	MSQH	Malaysia
John Brennan	RCPI & ISQua	Ireland
Julie Reed	NIHR CLAHRC Northwest London	UK
Eugene Nelson	The Dartmouth Institute for Health Policy and Clinical Practice	USA

ISQua's 35th International Conference is scheduled to take place in Kuala Lumpur from 23rd to 26th September 2018. The Conference programme will offer plenary presentations, selected oral and poster papers, expert panels, invited workshops and other opportunities to maximise delegate exchange and involvement. The Programme and Planning Committee was established to oversee the development of the scientific programme and is responsible for ensuring the quality of the content of the conference.

Abstract Committee

Committee Member	Orgnisation	Country
Helen Crisp (Chair	Independent Consultant for Quality Improvement in Healthcare	UK
Jacqui Stewart	COHSASA	South Africa
Triona Fortune	Fortune Quality Accreditation Services	Ireland
Mike Durkin	Imperial College	UK
Jim Robblee	University of Ottawa Heart Institution	Canada
Bruce Agins	Health QUAL	USA
Joseph Murungu	Ministry of Health Zimbabwe	Zimbabwe
Neil Houston	General Practitioner	Scotland
Chris Cornue	Navicent Health	USA
Ronen Rozenblum	Harvard Medical School	USA
Shin Ushiro	Japan Council for Quality in Health Care (JQ)	Japan
David Vaughan	Children's Hospital Quality Group	Ireland

The Abstract Committee is responsible for scheduling all conference programmes, including presentations, selected oral and poster papers, expert panels, invited workshops and any other method that will maximise delegate exchange and involvement.

Education Committee

Committee Member	Country
Shin Ushiro (Chair)	Japan
Christopher Cornue	USA
Ezequiel Garcia Elorrio	Argentina
Jacqui Stewart	South Africa
Jeffrey Braithwaite	Australia
Luke Feeney	Ireland
David Greenfield	Australia
Sinead McGlacken Byrne (Resident Scholar)	Ireland
Wui-Chiang Lee	Taiwan

The Education Committee (EC) assists the Board of Directors in setting the governance and policy development of the education and professional development activities as well as regulating these activities. The EC advises on the development of the curricula for the education and professional development activities in accordance with the strategic plan. The Education Committee met six times between the end of 2017 and 2018. The committee reviewed a number of items including the Undergraduate Programme, Fellowship Scholarship Programme, issue of retaining fellows, Plagiarism Policy and Fellowship programme evaluation.

Innovations and Systems Change Working Group

Committee Member	Organisation	Country
Rene Amalberti (Chair)	Haute Autorité de santé (HAS)	France
Jeffrey Braithwaite	Australian Institute of Health Innovation	Australia
Wendy Nicklin	President Elect	Canada
Charles Vincent	Imperial College London	United Kingdom
Christopher Cornue	Slainte Global Partners (SGP)	USA
Ed Chappy	Healthcare Quality and Accreditation Consultant	USA
Ramadhan Kirunda	FHI 360	Uganda
Kirstyn James	RCPI	Ireland

The Board has identified healthcare innovation as one of its strategic priorities, to this end the Innovations and Systems Change Working Group (I&SCWG) was established. The main aim of the 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. With such a broad remit the I&SCWG focused on the impending global issue of ageing populations.

Updated 7th September:

The I&SCWG have had the opportunity to use the Conference workshops as a consultation exercise, garnering opinion and learning of regional experiences of care for ageing populations. In London during ISQua's 34th International Conference, the workshop built on previous workshops held in Qatar and Japan following which ISQua's first White Paper was published: Health Systems and their Sustainability; Dealing with the impending issues of global ageing, chronic and complex technologies and resource constraints.

Currently, the I&SCWG are working on two further papers and a possible larger publication in the future. These papers are entitled:

- i) Coping with more people with more illness
 Part 1: The scope of the challenge and what to do about it
- ii) Coping with more people with more illness Part 2: Implementation issues

It is hoped to publish both papers in consecutive editions of the ISQua Journal before the end of 2018.

Editorial Committee

The Editorial Committee ensures that the International Journal for Quality in Health Care (IJQHC) is edited and published in a manner which supports the ISQua Members' pursuit of quality improvement and is in line with the overall objectives of ISQua. The Deputy Editors and Editors are responsible to the Board for overseeing the governance and any risks associated with the Journal, advising on key trends and areas requiring consideration for the content of the IJQCH, defining the workplan for publication, reviewing content and ensuring processes are in line with best practice and identifying areas of key interest for special publications.

Committee Member	Organisation	Country
Yu-Chuan (Jack) Li, Editor-in-Chief	Taipei Medical University	Taiwan
David Greenfield, Deputy Editor	Australian Institute of Health Service Management	Australia
Rosa Sunol, Deputy Editor	Avedis Donabedian Research Institute	Spain
Wen Chen, Deputy Editor	Fudan School of Public Health	China
Anthony Staines, Deputy Editor	Federation of Hospital of Canton Vaud	Switzerland
Oliver Groene, Deputy Editor	OptiMedis AG	United Kingdom
Ezequiel Garcia Elorrio, Deputy Editor	Institute for Clinical Effectiveness and Health Policy	Argentina
Sophie Staniszewksa, Editor	University of Warwick	United Kingdom
Giovanni Apolone, Editor	Ministry of Health	Italy
Yuichi Imanaka, Editor	Japan Council for Quality in Health Care	Japan
Sang II-Lee, Editor	Korean Society for Quality in Health Care	South Korea
Gert Westert, Editor	Radboud University Medical Center	The Netherlands
Jan Mainz, Editor	Region Nordjylland	Denmark
Pedro Saturno, Editor	Universidad de Murcia	Spain
Kieran Walshe, Editor	University of Manchester,	United Kingdom
Jennifer Zelmer, Editor	Azimuth Health Group	Canada
Usman Iqbal, Editor	Taipei Medical University	Taiwan
Julie Reed, Editor	Imperial College London	United Kingdom
Hanan Edrees, Editor	Ministry of National Guard - Health Affairs	Saudi Arabia
Hardeep Singh, Editor	Baylor College of Medicine	USA
Sodzi Sodzi-Tettey, Editor	Institute for Healthcare Improvement	Ghana
Paulo Sousa, Editor	National School of Public Health	Portugal
Margareth Portela	Oswaldo Cruz Foundation	Brazil

Volunteers

ISQua Experts

Full Name	Work Country
Bonnie Jean Adamson	Canada
William Adu-Krow	Guyana
Rajesh Aggarwal	United States
Bruce D Agins	United States
Emmanuel Ayodeji Aiyenigba	Nigeria
Samir Al-Adawi	Oman
Jamal Rashid Al-Khanji	Qatar
Salem Abdullah AlWahabi	Saudi Arabia
Rene Amalberti	France
Maina Boucar Amsagana	Niger
Donna Anderson	Canada
Yael Appelbaum	Israel
Hugo Eduardo Arce	Argentina
Ross Baker	Canada
Roland Bal	Netherlands
David Joseph Ballard	United States
Bruce Barraclough	Australia
Apollo Basenero	Namibia
David W Bates	United States
Gro K Rosvold Rosvold Bernsten	Norway
Jeffrey Braithwaite	Australia
Mark Brandon OAM	Australia

Full Name	Work Country
Robert Brook	United States
John Browne	Ireland
Andrew Carson- Stevens	United Kingdom
Peter Carter	Australia
Harry Cayton	United Kingdom
Ben Chan	Canada
Edward P Chappy	United States
Mohambry Nadasen Chetty	South Africa
Pierre Chopard	Switzerland
Stephen Clark	Australia
Daniel Cohen	United Kingdom
Tracey Cooper	United Kingdom
Christopher Cornue	United States
Helen Crisp	United Kingdom
Lord Ara Darzi	United Kingdom
Eric De Roodenbeke	Switzerland
Laurent Degos	France
Barbara Helen Donaldson	New Zealand
Sir Liam Donaldson	United Kingdom
Danielle Dorschner	Canada
Mike Durkin	United Kingdom
Susan Margaret Edgman-Levitan	United States
Carsten Engel	Denmark
Moses Enock	Malawi
Barbara Farlow	Canada
Luke Feeney	Ireland

Full Name	Work Country
Clive Fernandes	India
Martin Fletcher	Australia
Alan Forster	Canada
Triona Fortune	Ireland
Susan B Frampton	United States
Astolfo Leon Franco	Colombia
Hong Fung	Hong Kong
David Galler	New Zealand
Ezequiel Garcia Elorrio	Argentina
Carlos Hiran Goes de Souza	United Kingdom
Michael William Gorton	Australia
David Greenfield	Australia
Oliver Groene	Germany
Richard Grol	Netherlands
Girdhar Jessaram Gyani	India
Philip charles Hassen	Canada
Helen Margaret Healey	Canada
Elma Heidemann	Canada
John F F Helfrick	United States
Jorge Hermida	Ecuador
Peter Damian Hibbert	Australia
David Hillis	Australia
Ken Hillman	Australia
Anne Hogden	Australia
Neil Houston	United Kingdom
Clifford Frederick Hughes	Australia
Yuichi Imanaka	Taiwan
Duncan Inverarity	Ireland

Full Name	Work Country
Salma Jaouni	Jordan
Ravindran Jegasothy	Malaysia
Mercy Jere Makwakwa	Malawi
Ashish Jha	USA
Brian Johnston	Australia
Pawan Kapoor	India
Esther Karamagi	Uganda
Rainu Kaushal	United States
Hirobumi Kawakita	Japan
Edward Kelley	Switzerland
Sir Bruce Keogh	United Kingdom
Denice Klavano	Canada
Janne Lehmann Knudsen	Denmark
Uma Kotagal	United States
Christina Krause	Canada
Lawrence Lai	Hong Kong
Chor-Chiu Lau	HONG KONG
Sheila Leatherman CBE	United States
Jason Leitch	United Kingdom
Pak Yin Leung	Hong Kong
Jack Li	Taiwan
Andrew Likaka	Malawi
Juan F. Limo	Peru
Karen Jane Linegar	Australia
Tingfang Liu	China
Nigel John Livesley	United States
Lena Low	Australia
Karen A Luxford	Australia
Hugh MacLeod	Canada

Full Name	Work Country
Guy Maddern	Australia
Russell Mannion	United Kingdom
arti Maria	India
Kadar Marikar	Malaysia
Martin Marshall	United Kingdom
Michael Marx	Germany
M. Rashad Massoud	United States
Yukihiro Matsuyama	Japan
David Mayer	United States
Russell James McGowan	Australia
Alan Merry	New Zealand
Philippe Michel	France
Laura Nneka Mobisson- Etuk	South Africa
Nnkea Mobissson-Etuk	South Africa
Edward Moses	Malawi
Martin Msukwa	Malawi
Stephen E Muething	United States
Eugene C Nelson	United States
Wendy Nicklin	Canada
Gail A Nielsen	United States
Sun Niuyun	China
Jose C Noronha	Brazil
Kim Oates	Australia
Patricia O'Connor	United Kingdom
Sir John Oldham	United Kingdom
Elom Hillary Otchi	Ghana
John Ovretveit	Sweden
Charles Hawkhurst Pain	Australia

Full Name	Work Country
Rodrigo Poblete Umanzor	Chile
J Ravichandran R Jeganathan	Malaysia
Bhupendra Kumar Rana	India
Julie E Reed	United Kingdom
Elenara Oliveira oliveira Ribas	Brazil
Claudine Petronella Richardson-Sheppard	Trinidad and Tobago
Ben Ridout	Canada
James Robblee	Canada
Viviana Elizabeth Rodriguez	Argentina
Ronen Rozenblum	United States
Enrique Ruelas	Mexico
William (Bill) Ben Runciman	Australia
Odet Sarabia	Mexico
Camila Sardenberg	Brazil
Sylvia Sax	Germany
Eric C Schneider	United States
Ulfat Shaikh	United States
Paul Sharek	United States
Charles Shaw	United Kingdom
Tim Shaw	Australia
Aziz Sheikh	Scotland
Paul Shekelle	United States
Paulinus Sikosana	Zimbabwe
Gary Smith	Australia
Sodzi Sodzi-Tettey	Ghana

Full Name	Work Country
Paulo Sousa	Portugal
Anthony Staines	Switzerland
Jacqui Stewart	South Africa
Rosa Sunol	Spain
John Sweeney	Ireland
Riccardo Tartaglia	Italy
Teresa Margarita Tono Ramirez	Colombia
Tonny Tumwesigye	Uganda
Shin Ushiro	Japan
Paul van Ostenberg	United States
Ellen Joan van Vliet	Netherlands
Kris Vanhaecht	Belgium
Charles Anthony Vincent	United Kingdom
Bo Wang	China
Pa-Chun Wang	Taiwan
Jishan Wang	China
Stuart Whittaker	South Africa
Patricia Jane Woodhead	United Kingdom
David John Wright	Australia
Albert Wu	United States
Chen Xiaohong	P.R. China
Jennifer Zelmer	Canada
Eyal Zimlichman	Israel
Amitai Ziv	Israel

ISQua Accreditation Surveyors

Full Name	Work Country
Conny Adam Menger	Canada
Parvez Ahmad	India
Syed Sajid Ahmed	Qatar
Assaf F Al-Assaf	USA
Donna Anderson	Canada
Hugo Eduardo Arce	Argentina
Ricardo Armando Otero	Argentina
Martin Beaumont	Canada
Maria Grazia Centoni	Canada
Paul Chang	United States
Edward P Chappy	United States
Anne Chenoweth	United States
Lisa Cochrane	New Zealand
Catherine Cummings	New Zealand
Rabab Diab	Jordan
Barbara Helen Donaldson	New Zealand
Tricia Dore	New Zealand
Danielle Dorschner	Canada
Jim DuRose	New Zealand
Carsten Engel	Denmark
Triona Fortune	Ireland
Peter Frendin	Australia
Carlos Hiran Goes de Souza	United Kingdom
Girdhar Jessaram Gyani	India
David Hamer	Australia
Anita Harris	Canada
Helen Margaret Healey	Canada

Eull Name	Marile Country
Full Name	Work Country
Elma Heidemann	Canada
Freek van der Heijden	Netherlands
Yuichi Imanaka	Japan
Ravindran Jegasothy	Malaysia
Brian Johnston	Australia
Deborah Jones	Australia
Claudia Jorgenson	United States
Pawan Kapoor	India
Ulla Knudsen	Denmark
Neeraj Lal	India
Gilles Lanteigne	Canada
Lena Low	Australia
Bruno Lucet	France
Bernadette MacDonald	Canada
Jan Mackereth-Hill	United Kingdom
Thaira Madi	Jordan
Kadar Marikar	Malaysia
Margarida Madalena Martins Franca	Portugal
Virginia Matthews	Australia
Fabienne Menot	France
Philomena Mitolo	Australia

Full Name	Work Country
Maria Carolina de Toledo Sivieri Moreno	Brazil
Hein Muller	Netherlands
Linda O'Connor	Australia
Elaine O'Connor	Ireland
Kirsten Peddie	Australia
Randy V Penney	Canada
Elizabeth Mary Pringle	Australia
Anand R	India
Bhupendra Kumar Rana	India
James Robblee	Canada
Sanjeev Singh	India
Dawn Skidmore	Australia
Gary Smith	Australia
Judith Ann Sullivan	United States
Rosa Sunol	Spain
Paul van Ostenberg	United States
Steven Wilson	United Kingdom
Ann Dominica Wunsch	Australia
Loretta Yin Chun Yam	Hong Kong
Susan Yates	Canada

Partners



ISQua is a non-state actor in official relations with the World Health Organization. Official relations is a privilege that the WHO Executive Board may grant 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 organization. ISQua is proud to be in official relations with the WHO:

http://www.who.int/about/collaborations/non-state-actors/non-state-actors-list.pdf?ua=1

Over the past year, ISQua have supported the WHO in their work on National Quality Policy and Strategy and patient safety. ISQua has participated in capacity building workshops, expert consultations and has also attended the World Health Assembly. This year, for the first time, as part of its Emerging Leader Programme ISQua will support two Emerging Leaders, Louis Ako-Egbe from Cameroon and Wafa Allouche from Tunisia to undertake three-month internships with the WHO.



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 familycentred care and build improvement capability for professionals and students around the world through education, strategic guidance and dissemination of knowledge and best practices. The partnership entails knowledge sharing, corporation, collaboration and operational agreements for specific work in areas including education and science.



International Alliance of Patient's Organizations (IAPO)

The International Alliance of Patients' Organizations (IAPO) is a unique global alliance representing patients of all nations across all disease areas. IAPO work to promote patientcentred healthcare around the world. They have 276 member organizations from 71 countries representing 50 disease areas. Their vision is to see patients placed at the centre of healthcare. Their mission is to help build patient-centred healthcare worldwide. IAPO joined ISQua's Accreditation Council in March 2018 to ensure that the patient voice is reflected in ISQua's external evaluation programmes including the International Accreditation Programme (IAP). The Accreditation Council (AC) advises the Board Accreditation Committee (BAC) in carrying out its responsibilities.



International Hospital Federation (IHF)

The International Hospital Federation is a global association of healthcare organisations, which includes, hospital associations and representative bodies as well as their members and other health care related organisations with a vision of a world of healthy communities served by well managed hospitals and health services where all individuals reach their highest potential for health. The 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.



Malaysian Society for Quality in Health

The Malaysian Society for Quality in Health (MSQH) is a non-governmental and not for profit organization who is an internationally recognised accreditation organisation for the promotion and improvement of quality and safety in healthcare. Their mission is to Advocate, educate and monitor continuous quality improvement and patient safety in healthcare. ISQua have partnered with MSQH to deliver its 35th International Conference, Kuala Lumpur. Malaysia 23rd -26th September 2018.

Organisations with which we have Memorandums of Understanding (MOU) or Letters of Agreement (LOA)

- Royal Australasian College of Surgeons
- Institute of Clinical Effectiveness and Health Policy, University of Buenos Aires (IECS)
- Jefferson College of Population Health
- China Federation for Hospital Quality Management (CFHQM)
- Blood & Bone marrow China (BBCn)
- Royal College of Surgeons Institute of Leadership
- National Patient Safety Foundation
- Cognitive Institute
- Boston Children's Hospital
- GS1
- Asian Society for Quality in Health Care and Joint Commission (JCT)
- Health Improvement Scotland
- HealthCareCan
- Clinical Excellence Commission
- ▶ The Office of Biobank Education and Research
- Japan Council for Quality Health Care
- Canadian Patient Safety Institute (CPSI)
- New Zealand Ministry of Health

Financials 2017

Legal Information for Annual Report

Company Secretary: Byrne Wallace Corporate Secretaries Limited

Registered Number: 461093

Registered Office: Huguenot House 35-38 Stephens Green Dublin D02 NY63

Registered charity number: 20072445

STATEMENT OF COMPREHENSIVE INCOME

FOR THE YEAR ENDED 31 DECEMBER 2017

Note	2017	2016
	€	€
	2,270,003	2,049,535
	2,270,003	2,049,535
	(2,435,443)	(1,969,364)
	(165,440)	80,171
	1,401	(2,729)
	(164,039)	77,442
	(164,039)	77,442
	Note	€ 2,270,003 2,270,003 (2,435,443) (165,440) 1,401 (164,039)

BALANCE SHEET

AS AT 31 DECEMBER 2017

	Note		2017 €		2016 €
Fixed assets					
Intangible assets			33,070		-
Tangible assets	7		43,240		11,495
			76,310		11,495
Current assets					
Debtors: amounts falling due within one year	8	575,263		757,947	
Cash at bank and in hand	9	1,440,797		1,623,430	
		2,016,060		2,381,377	
Creditors: amounts falling due within one year	10	(637,960)		(774,423)	
Net current assets			1,378,100		1,606,954
Total assets less current liabilities			1,454,410		1,618,449
Net assets			1,454,410		1,618,449
Capital and reserves					
Profit and loss account	12		1,454,410		1,618,449
Shareholders' funds			1,454,410	_	1,618,449

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 DECEMBER 2017

	2017 €	2016 €				
Cash flows from operating activities						
(Loss)/profit for the financial year	(164,039)	(35,654)				
Adjustments for:						
Depreciation of tangible assets	19,722	16,903				
Interest received	(1,401)	(85)				
Decrease in debtors	182,684	184,569				
(Decrease)/increase in creditors	(136,463)	179,684				
Net cash generated from operating activities	(99,497)	345,417				
Cash flows from investing activities						
Purchase of intangible fixed assets	(33,070)	-				
Purchase of tangible fixed assets	(51,467)	(5,701)				
Interest received	1,401	85				
Net cash from investing activities	(83,136)	(5,616)				
Net (decrease)/increase in cash and cash equivalents	(182,633)	339,801				
Cash and cash equivalents at beginning of year	1,623,430	1,283,629				
Cash and cash equivalents at the end of year	1,440,797	1,623,430				
Cash and cash equivalents at the end of year comprise:						
Cash at bank and in hand	1,440,797	1,623,430				
	1,440,797	1,623,430				

Fixed assets of the company have increased by €64,815 this is related to the capital outlay on the website going live in 2018.

The net current assets and liabilities reduced by €228,845 this was due to working capital required to finance the website upgrade, redundancy payments and the move to the new premises. The result of this is a reduction in the overall net assets for the organisation of €164,039.



International Society for Quality in Health Care
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