DRAFT INTERNATIONAL STANDARD

ISO/FDIS 7101

ISO/TC 304

Date: 2023-08-05

Secretariat: ANSI

Date: 2023-06-16

<u>Healthcare organization management — Management systems for quality in healthcare organizations — Requirements</u>

iTeh Standards

FDIS stage

ISO 7101

https://standards.iteh.ai/catalog/standards/sist/81dd9417-hdf8-4111-830d-68060561de81/iso-7101

© ISO 2022 2023

All rights reserved. Unless otherwise specified, or required in the context of its implementation, no part of this publication may be reproduced or utilized otherwise in any form or by any means, electronic or mechanical, including photocopying, or posting on the internet or an intranet, without prior written permission. Permission can be requested from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office CP 401 • Ch. de Blandonnet 8 CH-1214 Vernier, Geneva Phone: + 41 22 749 01 11

Fax: +41 22 749 09 47

Email E-mail: copyright@iso.org

Website: www.iso.org

Published in Switzerland

iTeh Standards (https://standards.iteh.ai) Document Preview

ISO 7101

https://standards.iteh.ai/catalog/standards/sist/81dd9417-bdf8-4111-830d-68060561de81/iso-7101

Contents

Forew	vord	viii
Introd	luction	ix
1	Scope	1
2	Normative references	1
3	Terms and definitions	1
4	Context of the organization	8
4.1	Understanding the organization and its context	8
4.2	Understanding the needs and expectations of stakeholders	8
4.3	Determining the scope of the management system for quality in healthcare organizations	9
4.4	Management system for quality in healthcare organizations	9
5	Leadership	9
5.1	Leadership and commitment	9
5.2	Healthcare quality policy	10
5.3	Roles, responsibilities and authorities	11
5.4	Service user focus	11
5.5	Access to care	12
6	Planning	12
6.1	Actions to address risks and opportunities	
6.1.1	General Decument Province	12
6.1.2	Risk culture	
6.1.3	Risk management processes	13
6.2 htt	Healthcare quality objectives and planning to achieve them8300-8806056 de8	13
6.3	Planning of changes	14
7	Support	14
7.1	Resources	14
7.2	Competence	14
7.3	Awareness	15
7.4	Communication	15
7.4.1	General	15
7.4.2	Service user communication	15
7.4.3	Clinical communication	16
7.4.4	External communications	16
7.5	Documented information	16
7.5.1	General	16

ISO/FDIS 7101:20222023(E)

7.5.2	Creating and updating documented information	16
7.5.3	Control of documented information	17
7.5.4	Information management systems	17
7.5.5	Control and management of electronic information	18
7.5.6	Audit of records	18
8	Operation	19
8.1	Operational planning and control	19
8.2	Healthcare facilities management and maintenance	19
8.2.1	General	19
8.2.2	Contingency planning for facilities and services	20
8.2.3	Equipment	21
8.3	Waste management	21
8.3.1	General	21
8.3.2	Waste reduction	21
8.3.3	Environmental responsibility	21
8.4	Handling and storage of materials	22
8.5	Service user belongings	22
8.6	Emerging technologies	22
8.7	Service design in healthcare	23
8.8	Supplies and services from external providers	
8.9	Provision of services	24
8.10	People-centred care	25
8.11	Ethics	27
8.12	Patient safety	
8.12.1	General	27
8.12.2	Knowledge and learning in safety	28
8.12.3	Patient identification	28
8.12.4	Medication safety	28
8.12.5	Surgical safety	28
8.12.6	Infection prevention and control (IPC)	29
8.12.7	Prevention of falls, pressure ulcers and thromboembolism	29
8.12.8	Diagnostic safety	30
8.12.9	Blood transfusions	30
9	Performance evaluation	31
9.1	Monitoring, measurement, analysis, and evaluation	31
9.1.1	General	31

iv

ISO/FDIS 7101:20222023(E)

9.1.2	Healthcare quality indicators	31
9.1.3	Methods	32
9.1.4	Results	32
9.2	Internal audit	32
9.2.1	General	32
9.2.2	Internal audit programme	32
9.3	Management review	33
9.3.1	General	33
9.3.2	Management review inputs	33
9.3.3	Management review results	34
10	Improvement	34
Biblio	graphygraphy	36
Forew	vord	
Introc	luction	
1	— Scope	
2	Normative references iTeh Standards	
4	Terms and definitions Context of the organization Context of the organization	
4.1	Understanding the organization and its context	
	Understanding the needs and expectations of stakeholders	
4.3	Determining the scope of the healthcare quality management system	
4.4 htt	Healthcare quality management system \$1dd9417-bdf8-4111-830d-68060561de81/iso-7101	
5	Leadership	
5.1	Leadership and commitment	
5.2	Healthcare quality policy	
5.3	Roles, responsibilities, and authorities	
5.4	Service user focus	
5.5	— Access to care	
6	— Planning	
6.1	Actions to address risks and opportunities	
6.1.1	Risk Culture	
6.1.2	Risk management processes	
6.2	Healthcare quality objectives and planning to achieve them	
6.3	Planning of changes	

© ISO 2023 – All rights reserved

ISO/FDIS 7101:20222023(E)

7	Support
7.1	Resources
7.2	Competence
7.3	-Awareness
7.4	Communication
7.4.1	Service user communication
7.4.2	-Clinical communication
7.4.3	External communications
7.5	-Documented information
7.5.1	-General
7.5.2	Creating and updating documented information
7.5.3	Control of documented information
7.5.4	Information management systems
7.5.5	Control and management of electronic information
7.5.6	-Audit of records
88	-Operation
8.1	Operational planning and control Standards
8.2	Healthcare facilities management and maintenance
8.2.1	Contingency planning for facilities and services 10 S 11 e n . 21
8.3	Waste management Document Preview
8.3.1	Waste reduction Document I Teview
8.3.2	Environmental Responsibility ISO 7101
8.4 http	Handling and storage of materials Sist/81dd9417-bdf8-4111-830d-68060561de81/iso-7101
8.5	Service user belongings
8.6	-Emerging technologies
8.7	Service design in healthcare
8.8	Supplies and services from external providers
8.9	-Provision of services
8.10	People centred care
8.10.1	-General
8.10.2	Service user experience
8.10.3	-Compassionate care
8.10.4	Inclusivity and diversity
8.10.5	-Health literacy
8.10.6	-Co-production
8.10.7	-Workforce Wellbeing

vi

8.11 Ethics
8.12 Patient safety
8.12.1 Knowledge and learning in safety
8.12.2 Patient identification
8.12.3 Medication safety
8.12.4 Surgical safety
8.12.5 Infection prevention and control (IPC)
8.12.6 Prevention of falls, pressure ulcers and thromboembolism
8.12.7 Diagnostic safety
8.12.8 Blood transfusions
9 Performance evaluation
9.1 Monitoring, measurement, analysis, and evaluation
9.1.1 General
9.1.2 Healthcare quality indicators
9.1.3 Methods
9.1.4 Results
9.2 Internal audit iTeh Standards
9.2.1 General
9.2.2 Internal audit programme S://Standards.iteh.ai
9.3 Management review Document Preview
9.3.1 General
9.3.2 Management review inputs ISO 7101
9.3.3 Management review results https://www.new.edu.com/numbers/sist/81dd9417-bdf8-4111-830d-68060561de81/iso-7101
10 Improvement
10.1 Continual improvement
10.2 Nonconformity and corrective action
- 10.2.1 General
— 10.2.2 — Management of nonconformances and corrective action
Bibliography

Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO <u>documents_document</u> should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

Attention is drawnISO draws attention to the possibility that some of the elements implementation of this document may be involve the subjectuse of (a) patent(s). ISO takes no position concerning the evidence, validity or applicability of any claimed patent rights in respect thereof. As of the date of publication of this document, ISO had not received notice of (a) patent(s) which may be required to implement this document. However, implementers are cautioned that this may not represent the latest information, which may be obtained from the patent database available at www.iso.org/patents-. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT). see www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 304, Healthcare organization management.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

viii

Introduction

0.1 General

Healthcare systems and organizations of all sizes and structures embrace a culture of quality and continual improvement with the objective of providing timely, safe, effective, efficient, equitable and people-centred care. Given the current and future challenges in healthcare, more than ever it is vital to improve service user experience, quality of care, and provide sustainable solutions.

Healthcare organizations around the world have been facing significant threats such as decreasing financial resources, workforce shortages, increase in the number of people needing care as a result of ageing populations, increasing rates of chronic disease, lack of shared data for decision making, scarcity or inadequacy of medical equipment and medications, and an absence of clear healthcare system governance. Many countries have embarked on universal health coverage, while others struggle with rising healthcare costs. To compound this, a global pandemic has highlighted the importance of virtual healthcare, new technologies, and the need to create and adapt approaches to healthcare management and delivery. These health and organizational challenges require bold and innovative steps to improve healthcare quality around the world.

This document provides requirements for healthcare organizations. As such, its target audience is broad, including any healthcare system, organization, or entity that aims to increase the quality of its healthcare delivery and care outcomes. This includes ministries of health, public and private healthcare systems, hospitals, clinics, non-governmental organizations and agencies that provide healthcare services, and more.

This document conforms to ISO's requirements for management system standards. These requirements include a harmonized structure, identical core text, and common terms with core definitions, designed to benefit users implementing multiple ISO management system standards.

This document contains the requirements used to assess conformity. An organization that wishes to demonstrate conformity with this document can do so by:

- making a self-determination and self-declaration;
- seeking confirmation of its <u>conformance</u>conformity by parties having an interest in the healthcare organization, such as service users;
- seeking confirmation of its self-declaration by a party external to the organization; or
- seeking certification/registration of its healthcare quality management system for quality in the healthcare organization by an external organization.

In this document, the following verbal forms are used:

- "shall" indicates a requirement;
- — "should" indicates a recommendation;
- "may" indicates a permission;
- — "can" indicates a possibility or a capability.

Information marked as "NOTE" is intended to assist the understanding or use of this document

© ISO 2023 – All rights reserved

ix

9

0.2 Aim of a healthcare quality management system for quality in healthcare organizations

The aims of a <u>management system for quality in</u> healthcare quality management systems<u>organizations</u> include the following:

- create a culture of quality starting with strong top management;
- embrace a healthcare system based on people-centred care, respect, compassion, co-production, equity and dignity;
- —identify and address risks;
- ensure patient and workforce safety and wellbeing;
- control service delivery through documented processes and documented information;
- monitor and evaluate clinical and non-clinical performance;
- —continually improve its processes and results.

0.3 Success factors

The success of a healthcare quality management system for quality in a healthcare organization depends on the commitment from all levels and functions of the organization, led by top management. The top management structure of the organization can create a culture of quality by including quality principles in the organization's strategic direction, decision making, and aligning them with other operational priorities. Successful implementation of this document can demonstrate to stakeholders that an effective healthcare quality management system for quality in the healthcare organization is in place.

The level of detail and complexity of a healthcare quality management system for quality in the healthcare organization varies depending on the context of the organization, the scope of its work, its regional, national, and international conformance conformity obligations, the nature of its activities, services provided, and resources available.

0.4 | **Plan-Do-Study-Act model**₀/standards/sist/81dd9417-bdf8-4111-830d-68060561de81/iso-7101

The approach underlying a healthcare quality management system for quality in healthcare organizations is based on the concept of Plan-Do-Study Act (PDSA) (see Figure 1 Figure 1). The PDSA model provides an iterative process used by organizations to achieve continual improvement through cycles of ongoing measurement of performance and assessment of changes. It can be applied to a healthcare quality management system for quality in healthcare organizations and is briefly described as follows.

- Plan: establish healthcare quality objectives and processes necessary to deliver results in accordance with the organization's healthcare quality policy (Clause 6).
- Do: implement the processes as planned (Clauses 7 (Clauses 7 and 88).).
- ——Study: monitor, measure and assess processes against the organization's policies, including its commitments, objectives and operating criteria and report the results (Clause 9(Clause 9).).
- Act: take actions to continually improve (Clause 10 (Clause 10).).

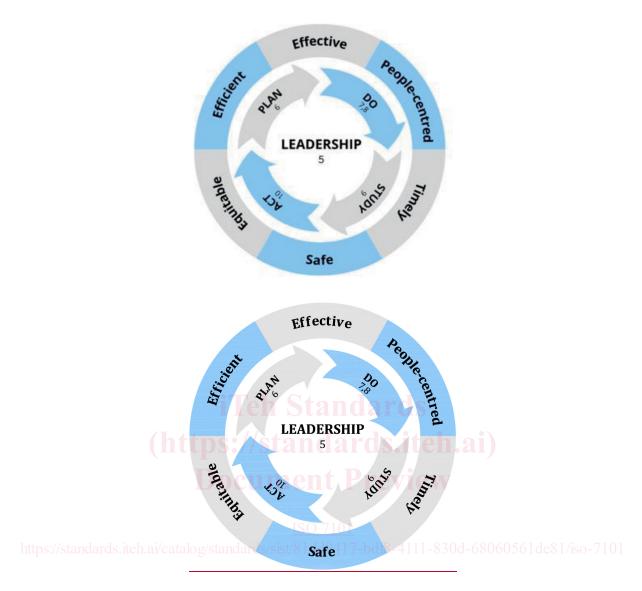


Figure 1 — Elements of a healthcare quality management system for quality in healthcare organizations

iTeh Standards (https://standards.iteh.ai) Document Preview

ISO 7101

https://standards.iteh.ai/catalog/standards/sist/81dd9417-bdf8-4111-830d-68060561de81/iso-7101