
**Healthcare organization
management — Vocabulary**

Gestion de l'organisation des soins de santé — Vocabulaire

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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 documents 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).

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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.

Introduction

This document has been developed to help facilitate a common understanding of and maintain consistency in fundamental vocabulary in healthcare organization management standards.

This document is intended to be used by:

- healthcare management practitioners;
- academic professionals and students;
- developers of related standards;
- stakeholders in organizations, regardless of organizational size and type;
- others interested in the management of healthcare organizations.

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Healthcare organization management — Vocabulary

1 Scope

This document defines terms used in healthcare organization management.

2 Normative references

There are no normative references in this document.

3 Terms and definitions

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- ISO Online browsing platform: available at <https://www.iso.org/obp>
- IEC Electropedia: available at <http://www.electropedia.org/>

3.1 Terms related to people

3.1.1

top management

person or group of people who directs and controls an *organization* (3.2.1) at the highest level

Note 1 to entry: Top management has the power to delegate authority and provide resources within the organization.

Note 2 to entry: If the scope of the management system covers only part of an organization, then top management refers to those who direct and control that part of the organization.

3.1.2

involvement

taking part in an activity, event or situation

3.1.3

engagement

involvement (3.1.2) in, and contribution to, activities to achieve shared *objectives* (3.5.13)

3.1.4

patient

person seeking to receive or receiving *healthcare* (3.11.2)

Note 1 to entry: A patient is a healthcare customer.

3.1.5

inpatient

patient (3.1.4) admitted to a hospital

3.1.6

outpatient

patient (3.1.4) not admitted to a hospital

Note 1 to entry: to entry. This definition also includes patients attending an outpatient clinic.

3.1.7

patient need

essential element of *patient* (3.1.4) care resulting from the condition of the patient, requiring medical attention

3.1.8

patient expectation

belief of what will happen before, during and after a *healthcare* (3.11.2) experience

3.1.9

patient perception

patient (3.1.4) belief or opinion

3.1.10

clinician

person providing *clinical* (3.11.6) care

Note 1 to entry: Providers can be authorized or unauthorized.

3.1.11

human factor

physical or cognitive characteristics, or social behaviour, of a person

3.1.12

staff

persons who work for and within an *organization* (3.2.1)

Note 1 to entry: Representatives can include family members, friends, mental health advocate, guardian, etc.

3.1.13

interested party

stakeholder

person or *organization* (3.2.1) that can affect, be affected by, or perceive itself to be affected by a decision or activity

3.1.14

customer

person or *organization* (3.2.1) that could or does receive a *product* (3.5.14) or a *service* (3.5.15) that is intended for or required by this person or organization

Note 1 to entry: A customer can be internal or external to the organization

3.1.15

provider

supplier

organization (3.2.1) that provides a *product* (3.5.14) or a *service* (3.5.15)

Note 1 to entry: A provider can be internal or external to the organization.

Note 2 to entry: In a contractual situation, a provider is sometimes called “contractor.”

3.2 Terms related to organization

3.2.1

organization

person or group of people that has its own functions with responsibilities, authorities and relationships to achieve its *objectives* (3.5.13)

Note 1 to entry: The concept of organization includes, but is not limited to, sole-trader, company, corporation, firm, enterprise, authority, partnership, association, charity or institution, or part or combination thereof, whether incorporated or not, public or private.

3.2.2**healthcare organization**

organization (3.2.1) involved in the direct or indirect provision of *healthcare* (3.11.2)

3.3 Terms related to activity**3.3.1****improvement**

activity to enhance performance

Note 1 to entry: The activity can be recurring or singular.

3.3.2**project**

unique *process* (3.4.1), consisting of a set of coordinated and controlled activities with start and finish dates, undertaken to achieve an *objective* (3.5.13) conforming to specific *requirements* (3.6.1), including the constraints of time, cost and resources

3.3.3**procedure**

specified way to carry out an activity or a *process* (3.4.1)

3.3.4**outsource** (verb)

make an arrangement where an external *organization* (3.2.1) performs part of an organization's function or *process* (3.4.1)

3.4 Terms related to process**3.4.1****process**

set of interrelated or interacting activities that use inputs to deliver an intended result

Note 1 to entry: Process to deliver healthcare service to, or on behalf of, a patient based on evidence of effectiveness.

3.4.2**object****entity****item**

anything perceivable or conceivable

Note 1 to entry: an object can be a service, a thing, a person or anything else.

3.4.3**quality**

degree to which a set of inherent characteristics of an *object* (3.4.2) fulfils *requirements* (3.6.1)

Note 1 to entry: The term "quality" can be used with adjectives such as poor, good or excellent.

Note 2 to entry: "Inherent", as opposed to "assigned", means existing in the object.

Note 3 to entry: Quality healthcare is the fulfilment of indicated healthcare requirements and the achievement of intended results.

3.4.5**grade**

category or rank given to different *requirements* (3.6.1)

3.4.6

good practice in healthcare

method that has proven to be effective and produce satisfactory results

3.4.7

staffing

process (3.4.1) that assigns people to fulfil necessary tasks and *services* (3.5.15) related to the provision of *healthcare* (3.11.2)

3.4.8

patient-centred approach

approach to ensure that the people selected to provide services can meet the needs of the *patient* (3.1.4) and the patient's representatives

3.4.9

outcome-based approach

approach to ensure that *healthcare* (3.11.2) *services* (3.5.15) are focused on achieving the intended results

3.5 Terms related to system

3.5.1

system

set of interrelated or interacting elements

3.5.2

healthcare system

set of interrelated or interacting *healthcare* (3.11.2) *providers* (3.1.15)

3.5.3

infrastructure

system (3.5.1) of facilities, equipment and *services* (3.5.15) needed for the operation of an *organization* (3.2.1)

3.5.4

management system

set of interrelated or interacting elements of an *organization* (3.2.1) to establish *policies* (3.5.9) and *objectives* (3.5.13) and *processes* (3.4.1) to achieve those objectives

3.5.6

quality management system

part of a *management system* (3.5.4) with regard to *quality* (3.4.3)

3.5.7

information management system

system (3.5.1) designed to manage, store and retrieve *information* (3.8.1)

3.5.8

work environment

set of conditions under which work is performed

Note 1 to entry: Conditions can include physical, social, psychological and environmental factors (such as temperature, lighting, recognition schemes, occupational stress, ergonomics and atmospheric composition).

3.5.9

policy

intentions and direction of an *organization* (3.2.1) as formally expressed by its *top management* (3.1.1)

3.5.10

vision

aspiration of what an *organization* (3.2.1) would like to become as expressed by *top management* (3.1.1)

3.5.11**mission**

organization's (3.2.1) purpose for existing as expressed by *top management* (3.1.1)

3.5.12**strategy**

method used to achieve a long-term or overall *objective* (3.5.13)

3.5.13**objective**

result to be achieved

Note 1 to entry: An objective can be strategic, tactical, or operational.

Note 2 to entry: Objectives can relate to different disciplines (such as financial, health and safety, and environmental objectives) and can apply at different levels (such as strategic, organization-wide, project, product and process).

Note 3 to entry: An objective can be expressed in other ways, e.g. as an intended outcome, a purpose, an operational criterion, as a quality objective or by the use of other words with similar meaning (e.g. aim, goal, or target).

3.5.14**product**

output of an *organization* (3.2.1)

3.5.15**service**

activity performed on behalf of others

3.5.16**performance**

measurable result

Note 1 to entry: Performance can relate either to quantitative or qualitative findings

3.5.17**risk**

effect of uncertainty

Note 1 to entry: An effect is a deviation from the expected — positive or negative.

Note 2 to entry: Uncertainty is the state, even partial, of deficiency of information related to, understanding or knowledge of, an event, its consequence, or likelihood.

Note 3 to entry: Risk is often characterized by reference to potential events (as defined in ISO Guide 73:2009, 3.5.1.3) and consequences (as defined in ISO Guide 73:2009, 3.6.1.3), or a combination of these.

Note 4 to entry: Risk is often expressed in terms of a combination of the consequences of an event (including changes in circumstances) and the associated likelihood (as defined in ISO Guide 73:2009, 3.6.1.1) of occurrence.

Note 5 to entry: In healthcare the word "risk" is often used when there is the possibility of only negative consequences.

3.5.18**efficiency**

relationship between the result achieved and the resources used

3.5.19

effectiveness

extent to which planned activities are realized and planned results are achieved

Note 1 to entry: Effectiveness in healthcare is the extent to which planned activities achieve the planned results for the patient.

3.6 Terms related to requirement

3.6.1

requirement

need or expectation that is stated, generally implied or obligatory

3.6.2

nonconformity

non-fulfilment of a *requirement* ([3.6.1](#))

3.6.3

conformity

fulfilment of a *requirement* ([3.6.1](#))

3.6.4

compliance

fulfilment of a legal *requirement* ([3.6.1](#))

3.6.5

capability

ability to do something

3.6.6

competence

ability to apply knowledge and skill to achieve intended results

3.6.7

traceability

ability to trace the history, application or location of an *object* ([3.4.2](#)) or activity

3.6.8

dependability

ability to perform as and when required

3.6.9

innovation

search for and the discovery, experimentation, development, implementation and adoption of new *products* ([3.5.14](#)) and *services* ([3.5.15](#))

3.6.10

contract

formal and legally binding agreement

3.7 Terms related to result

3.7.1

feedback

opinions, comments and expressions of interest in a *product* ([3.5.14](#)), *service* ([3.5.15](#)), activity or *process* ([3.4.1](#))

3.7.2

customer satisfaction

customer's ([3.1.14](#)) perception of the degree to which the customer's expectations have been fulfilled

3.7.3**complaint**

expression of dissatisfaction

3.7.4**customer service**

interaction of an *organization* (3.2.1) with the *customer* (3.1.14) throughout the phases of *service* (3.5.15) provision

3.7.5**dispute**

disagreement, arising from a *complaint* (3.7.3) that the *customer* (3.1.14) believes is unresolved

3.8 Terms related to information**3.8.1****information**

meaningful data provided or learned about something or someone

Note 1 to entry: Healthcare information can include medical/clinical records.

3.8.2**objective evidence**

data supporting the existence or verity of something

Note 1 to entry: Objective evidence can be obtained through observation, measurement, test, or by other means.

3.8.3**information system**

network of communication channels

3.8.4**documented information**

information (3.8.1) required to be controlled and maintained by an *organization* (3.2.1) and the medium on which it is contained

Note 1 to entry: Documented information can be in any format and media and from any source.

Note 2 to entry: Documented information can refer to:

- the management system, including related processes;
- information created in order for the organization to operate (documentation);
- evidence of results achieved.

3.8.5**specification**

document stating *requirements* (3.6.1)

Note 1 to entry: A specification can be related to activities (e.g. procedure document, clinical guidelines or protocols, process specification and test specification), or products (e.g. product specification, performance specification and drawing).

Note 2 to entry: It can be that, by stating requirements, a specification additionally is stating results achieved by design and development and thus in some cases can be used as a record.

3.9 Terms related to management

3.9.1

management

coordinated activities to direct and control an *organization* (3.2.1)

Note 1 to entry: Management can include establishing policies and objectives, and processes to achieve these objectives.

Note 2 to entry: The word “management” sometimes refers to people, i.e. a person or group of people with authority and responsibility for the conduct and control of an organization. When “management” is used in this sense, it should always be used with some form of qualifier to avoid confusion with the concept of “management” as a set of activities defined above. For example, “management shall...” is deprecated whereas “top management shall...” is acceptable. Otherwise different words should be adopted to convey the concept when related to people, e.g. managerial or managers.

3.9.2

quality management

management (3.9.1) with regard to *quality* (3.4.3)

Note 1 to entry: Quality management can include establishing quality policies and quality objectives, and processes to achieve these quality objectives through quality planning, quality assurance, quality control, and quality improvement.

3.9.3

quality planning

part of *quality management* (3.9.2) focused on setting *quality* (3.4.3) *objectives* (3.5.13) and specifying necessary operational *processes* (3.4.1), and related resources to achieve the quality objectives

Note 1 to entry: Establishing quality plans can be part of quality planning.

3.9.4

quality assurance

part of *quality management* (3.9.2) focused on providing confidence that *quality* (3.4.3) *requirements* (3.6.1) will be fulfilled

Note 1 to entry: It can be related to healthcare management services, including medical services.

3.9.5

quality control

part of *quality management* (3.9.2) focused on fulfilling *quality* (3.4.3) *requirements* (3.6.1)

3.9.6

quality improvement

part of *quality management* (3.9.2) focused on increasing the ability to fulfil *quality* (3.4.3) *requirements* (3.6.1)

Note 1 to entry: The quality requirements can be related to any aspect such as effectiveness, efficiency or traceability.

3.9.7

project management

planning, organizing, monitoring, controlling and reporting of all aspects of a project, and the motivation of all those involved in it to achieve the *project* (3.3.2) *objectives* (3.5.13)

3.10 Terms related to monitoring, evaluation and review

3.10.1

monitoring

determining the status of a *system* (3.5.1), a *process* (3.4.1), a *product* (3.5.14), a *service* (3.5.15), or an activity