Supplementary material

Table S1. Descriptive statistics – health professionals' sample.

Variable	Frequency	Variable	Frequency
		Hospital type	
Gender		Chronic diseases	4.8%
Female	83.7% 16.3%	General	54.5%
Male		Specialty	20.7%
		Emergency	19.1%
	Hospital coverage		
Job position		Local	67.6%
Medical doctor	26.2%	County - level	16.8%
Nurse	73.8%	Regional	11.8%
		Unspecified	1.3%
	Hospital rank*		
		I	3.4%
		I M	3.8%
Hospital ownership		II	5.7%
Public	91.3%	II M	6.2%
Private	7.7%	III	12.1%
		IV	49.9%
		V	14.9%
		Unclassified	3.1%

^{*} Hospital rank according to the "Order no. 10/2018 regarding the approval of the classes of accreditation of the healthcare units with beds corresponding to the cycle II of accreditation, Official Gazette no. 95 from January 31st, 2018": I - accredited (a total score of conformity with the Romanian Authority for Quality Assurance in Healthcare henceforth RAQAH standards of at least 90% after the evaluation); II - accredited with recommendations (at least 70% conformity with the standards of the RAQAH); III - accredited with reserves (at least 51% conformity with the standards of the RAQAH + less than 30% from the parameters scored by (-10) applicable to the respective healthcare unit); V - is made for a period of mostly 6 months from the reception of the accreditation report, during which a decision to extend the process of accreditation is released and needs the fulfillment by the healthcare units with beds of the new criteria and cumulative conditions.

 Table S2. Descriptive statistics – patients' sample.

Variable	Frequency	Variable	Frequency	
		Education		
Gender Female	58.9% 41.1%	Maximum 10 years	30.5%	
		High school	27.5%	
		Vocational school	26.7%	
Male		Bachelor	12.8%	
		Master	2.4%	
Civil status				
Married	61.9%	Occupation Sector		
Divorced	5.8%	Public	13.5%	
Unmarried	14.0%	Private	28.2%	
Consensual union	2.1%	Do not work	58.3%	
Other	15.9%			
Social status Hom		Home place (# inhabitants)	ome place (# inhabitants)	
Similar to other families	61.3%	Village	58.7%	
Above average	15.0%	100-200	7.9%	
Among the wealthiest	0.8%	30-100	8.9%	
Among the poorest	3.5%	>200 16.9%		
Under average	16.0%	<30	7.5%	

 Table S3: Questions in the health professionals' sample

No.	Question	Item	Latent construct	
crt.	~			
1.	To what extent do you think	Increased patients'	"Perceived	
	that the following effects	satisfaction with medical	differences in	
	occurred after accreditation?	services	quality" (PDQ).	
		Increased quality of		
	Measurement: 1 – 5; 1 = total	administrative services		
	disagreement; 5 = Total	Increased quality of		
	agreement	medical services		
		Better hospital reputation	"A	
2.	To what extent do you agree	Better resource allocation	"Actions taken	
	that after accreditation the	to improve the quality of medical care	after accreditation"	
	following happened?		(ATAA).	
	Measurement: 1 – 5; 1 = total	Developing a clear strategy		
	disagreement; 5 = Total	to improve quality Support to remedy		
	agreement	improvable aspects		
	ugreement	identified during		
		evaluation		
		Support to improve		
		hospital's reputation		
3.	To what extent the following	Training to identify and	"Actions to	
	type of initiatives have been	implement measures to	improve quality"	
	taken to support the employees	increase quality	(AIQ)	
	after hospital accreditation?	Ongoing monitoring of		
	-	patients' feedback		
	Measurement: 1 – 5; 1 = total	regarding the quality of		
	disagreement; 5 = Total	received medical care		
	agreement	Other concrete actions to		
		improve quality of care		
4.	Do you think that the patients who come for medical services		Not part of a latent	
	knew whether the hospital was accredited or not?		construct	
		\\ \/N		
5.	Measurement	:: Yes/No (a) choose better ranked	Not now of a later	
9.	To what extent do you believe that the results of the	hospitals	Not part of a latent construct	
	accreditation process will	(b) stay with the hospital	Construct	
	determine patients to:	that they choose;		
	patiento to.	(c) ask for alternatives		
	Measurement: 1 – 5; 1 = total	(c) don for diteritutives		
	disagreement; 5 = Total			
	agreement			
6.	To what extent do you believe that family physicians will use		Not part of a latent	
	this signal to direct patients towa	construct		
	services of a be			
	Measurement: 1 – 5; 1 = total			
	agreement			

Table S4: Questions in the patients' sample

Question	Item	Latent construct
Are you aware that the Romanian hospitals pursue		Not part of a latent
accreditation?		construct
Measurement: Yes/No		
To what extent would you	(a) ask the family physician	Not part of a latent
pursue one of the following,	or the specialist for another	construct
if you found that the	option;	
hospital you are sent to does	(b) look for another option	
not comply with the	yourself;	
accreditation standards?	(c) stay with the option	
	because you trust the health	
Measurement: $1 - 5$; $1 = total$	professionals of that hospital	
disagreement; 5 = Total		
agreement		