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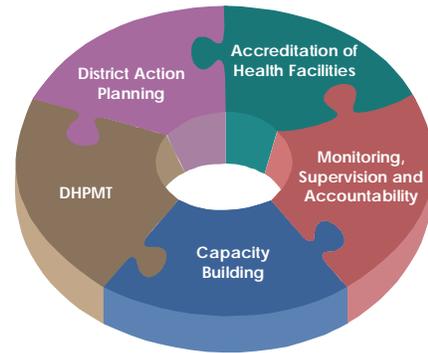
# Accreditation: A Tool to Assess the Level of Performance and Quality of Care

## Rationale

Accreditation is a voluntary process, usually conducted by an independent non-governmental organization, to accurately assess the level of performance in relation to established standards and to implement ways and means to continuously improve the services. Accreditation addresses organizational, rather than individual capability or performance. Accreditation is not just about standard-setting; there are analytical, counseling and self-improvement dimensions to the process. Well-established accreditation process assures evidence-based medical practice, quality assurance, medical ethics and the reduction of medical errors which is a key role of the accreditation process.

Accreditation of health services is, therefore, one component of patient safety. Health facilities should be places of safety, not only for patients but also for the staff and for the general public. Quality of health care services is also of great interest to many other bodies, including governments, civil society organizations, professional organizations representing doctors, patient organizations, etc. However, it is critical to distinguish between accreditation and government-controlled initiatives set up to assess health care providers or health care services. Ideally, the functioning and finance of health services accreditation schemes should be independent of governmental control. After devolution, it is now the responsibility of the provincial and district governments to provide risk free environment and quality health care services to the community. Accreditation will create an environment of healthy competition among various health facilities which can easily be rewarded in a devolved set up.

Figure 1: Components of strengthening district health management



## Methodology and Approach

Accreditation will be performed by a multidisciplinary independent team of health professionals and will be assessed against pre-defined standards for optimal quality clinical care and services. The standards will be adopted through a participatory approach involving all stakeholders and will be derived from an amalgamation of national statutes, government policy, overseas accreditation standards, and biomedical and health service research.

Accreditation will be based on the principal of safety and quality of health care delivery. Consumers will participate at all stages of accreditation, from setting standards, and assisting health services to implementing the standards. This includes developing, implementing, assessing, reporting and evaluating accreditation at provincial, district and individual health facility levels. This will encourage collaboration, transparency and objective public reporting across the health sector. To ensure accreditation standards are implemented, health professionals and health managers will be trained and supported with ongoing education to understand the standards and implement them on a daily basis. Following three sets of standards will be selected through a participatory approach: Checklists for each category of the health facilities (RHCs, THQ and DHQ Hospitals) will be prepared through a participatory process. These checklists will be based on indicators identified and finalized under each of the three sets of standards. Finally, assessment formats and frequency will be finalized involving all stakeholders. A scoring mechanism for each category of the health facility will be the integral part of the assessment formats.

### Box 1: Hierarchy of Health Care Standards

- **Structure standards** will provide information about inputs such as human resource, availability of personal protective material for health workers, such as soap, gloves, and masks, and availability of equipment and supplies, such as microscopes and laboratory reagents, etc.
- **Process standards** will address the activities or interventions carried out within the health facility in the care of patients or in the management of the organization or its staff.
- **Outcome standards** will look at the effect of the interventions carried out at a specific health facility and whether the expected purpose of the activity was achieved.

## Expected Results

Accreditation of the primary and secondary health care facilities is usually determined by the type of national health system and national health policy. The most important outcome includes improving health systems, promoting continuous quality improvement, informed decision-making and accountability. Accreditation is expected to bring the following to the system:

- Improved quality of health care through establishing optimal achievement goals in meeting standards for health care facilities;
- Stimulate and improve the integration and management of health services;
- Establish a comparative database of health care facilities able to meet selected structure, process, and outcome standards or criteria;
- Reduce health care costs by focusing on increased efficiency and effectiveness of services;
- Provide education and consultation to health care facility, managers, and health professionals on quality improvement strategies and “best practices” in health care;
- Strengthen public’s confidence in the quality of health care; and
- Reduce risks associated with injury and infections for patients and staff.

## Illustrative Indicator

Service delivery: number and percent of health facilities (DHQs, THQs, and RHCs) that meet service capacity standards (Accreditation Report submitted).

## Next Steps

- Finalization and approval of the standards for the optimal quality clinical care and services.
- Preparation and approval of checklists based on standards through a participatory approach.
- Training of staff of health facilities on accreditation.
- Technical assistance to conduct accreditation of health facilities through an independent agency.

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