

Is Accreditation of Health Care Facilities: A Boon or A Bane?

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Whenever a patient enters a health care facility of any level to undergo a surgical procedure or selects a pediatrician for their newborn or wants management of his or her diabetes or seeks any sort of clinical treatment or advice, choice of the health care facility matters. In Pakistan there is a clear divide between those patients who are educated and know about healthcare and standards i.e the educated class and those who are unaware and have faith in the name doctor more than the credentials of the person advertising the word doctor; but with time the awareness of people is increasing and the internet has played a vital role in this. Now the patient and their families feel empowered to ask the treating doctor or specialist questions, not only about his or her personal credentials and training, but also about the practice as a whole and expect the highest possible care.

So how does the healthcare facility ensure that it is able to provide the best possible care? It constructs the required structure as per given specifications, equips it with the essential equipment, hires well trained competent personnel and then starts working. But even in the best of situations sometimes the standard of care given can vary from one situation to another and patients feel certain person or teams are better equipped to deal with a problem than others. This is reflected in the volume of patients being dealt. Also the administration needs to provide a level field for all so that the full potential of every individual is developed without stifling the individual's intellect.

One approach to create an atmosphere conducive to achieving these objectives that has been adopted by health care organization is to go through the process of accreditation. This brings us to the question what

is accreditation and how does it help in achieving the ends. Contrary to regulations which are statutory for organizations accreditation is a voluntary process through which a health care organization is able to measure the quality of services it provides and looks at its performance against nationally or international recognized standards. The evolution of accreditation system worldwide can be traced to process World Health Organization (WHO) outlined in its document in 1993.

Critically, accreditation is not just about standard-setting within an organization which an external body reviews on a periodic basis to evaluate if the standards have been met or not. The process of accreditation involves a multitude of analytical, counseling and self-improvement dimensions. There are parallel issues around evidence-based medicine, quality assurance, medical ethics and the reduction of medical error is a key role of the accreditation process. Hospital accreditation is therefore one component in the maintenance of patient safety, although some experts may debate this. International Accreditation standards for teaching institutes have gone a step further The Joint Commission International (JCI) an independent, not-for-profit organization which has accredited and certified more than 19,000 health care organizations and programs in the United States alone and multiple institutions in the Middle East in recently released new standards for accrediting foreign academic medical centers that will involve human-subject research and integrated professional medical education programs.

The new standards will be folded into hospital evaluations and has gone into effect January 2013. This includes an evaluation of:

- How medical trainees contribute to patient care;
- How research protocols are integrated into patient care; and
- Quality-monitoring processes.

The new standards are meant to "recognize the unique resource such teaching hospitals represent" to medical education and to their communities, JCI Vice President Paul vanOstenberg says, noting that unless they are

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"deliberately included in the quality framework, education and research activities often are the unnoticed partners in patient-care quality monitoring and improvement"

If we indulge in reviewing the depths of an accreditation process the organization has to be judged on its consideration of patient rights, the governance of the organization specially to avert adverse incidents, its management setup in maintaining an appropriate and secure health information system, quality of care and also how it reviews and enhances its policies specially infection control to provide better care. Also under review are its strategies to improve professional development, its environmental facilities, surgical and anaesthesia services which look at not only personnel but also the equipment provided and the way it is used and maintained and its ancillary support areas. These all are measured using tools which have been formulated keeping in view international standards but also have stood the test of time.

Now what benefits does accreditation bring to any health care organization? The answer partly has probably been already given but every question needs to be reviewed from different perspectives. Patient care is the ultimate beneficiary of the whole process which gives members of community and society in general the confidence to undergo treatment at the accredited facility. From an academic point of view professional growth is a leading component of this process. It will also allow the government to provide an acceptable system of health care for its citizens and justify its budgetary allocation.

It has been the experience of many health care organizations specially in developing countries that the process is labour intensive, time consuming, resource sapping and above all cost consuming. To initiate such a process needs meticulous planning at all levels and external consulting appears to be an integral part of the process. In 1998 the budget of the Department of Health for operation of Taiwan's hospital accreditation program was US\$300,000 while the additional costs and expenses for each hospital's preparation for completing the accreditation survey remained unknown. The experience was reiterated in India when Nandraj and colleagues reviewed the hospital accreditation processes in 2001 and concluded it to be the biggest obstacle to introducing accreditation

in a poorly resourced setting. This alone can be a daunting prospect for hospital within Pakistan who sometimes with all the resources do not factor in this issue in their budgetary allocations. This is probably the case both in the public as well as private sector in our country. It is essential to clarify the perception that accreditations like quality are expensive things to venture into and even more expensive to achieve and maintain. The cost of quality and accreditations is by far less than the savings achieved post accreditation process. Nonetheless it has been pointed out by many experts that all stakeholders were aware of the potential pitfall as well as potential advantages before plunging into the process.

Looking at the major pros and cons surrounding this issue most authors certainly agree that the benefits in the long term can outweigh the difficulties involved in the process, if careful planning is undertaken. It is for the stakeholders to decide if due to our own biases and management cuts, the light at the end of the tunnel is now to be switched off.

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