

Editorial

Dave Pariseema

Deputy Director, The Gujarat Cancer & Research Institute, Asarwa, Ahmedabad, Gujarat, India.

pariseema.dave@gcriindia.org

Accreditation, Quality, Challenges, and Making Hospital Care Better

Healthcare system has witnessed marked social, economic and technological change in the past few years and has undergone transformation from physician centered approach to patient centered approach. Demand for quality in healthcare services has risen due to various forces such as medical tourism, insurance, corporate growth and competition.^{1,2} Such changes are expected to continue for foreseeable future because of restructured economic and social policies, globalization of markets and enhanced worldwide communication. National health systems are coming under increasing scrutiny with a view to cost containment and quality improvement.¹ Many of the health systems in India have neglected evaluation of the quality of individual and systematic institutional care, giving rise to an unnecessary increase in costs, poor patient care, negligence, and inadequate resources with inefficient facilities, lack of information and unwanted medical interventions, complications and patient morbidity.

Such being the case, assuring quality in healthcare services becomes a mandate and receiving an accreditation is the only answer to it. It is the single most approach for improving the current standards of the hospitals.

Accreditation is a process of review that allows healthcare organizations to demonstrate their ability to meet regulatory requirements and standards established by a recognized accreditation organization. It assesses the quality and operational systems in place within the facility. To further define, it is a “self-assessment and external peer assessment process used by health care organizations to accurately assess their level of performance in relation to established standards and to implement ways to continuously improve”.³ The various standards of accreditation are based on the principles of quality assurance, evidence based practice, medical ethics and prevention of medical error. The various objectives of accreditation are³:

1. Enhanced health systems: integrating and involving hospitals as an active component of the health care network.
2. Continuous quality improvement: using the

accreditation process to bring about changes in practice that will improve the quality of care for patients.

3. Informed decision-making: providing data on the quality of health care that various stakeholders, policy-makers, managers, clinicians and the public can use to guide their decisions.
4. Improved accountability and regulation: making health care organizations accountable to statutory or other agencies, such as professional bodies, government, patient groups and society at large

Health care accreditation can be done both by national and international agencies.³

International Healthcare Accreditation Bodies:

1. **ISQua (International Society for Quality in Health Care):** an umbrella organization for organizations seeking international healthcare accreditation ISQua is a small non-profit limited company with members in over 70 countries. India becomes 12th nation to join ISQua.
2. **ISO (International Organization for Standardization) 9001 – 2015 (applicable to healthcare organizations):** It does not prescribe any standards of its own. The organizations having an effective quality management system and infrastructure for providing quality services as well as for continuous quality improvement, are issued ISO certification.
3. **Joint Commission on Accreditation of Healthcare Organizations (JCAHO):** It is the oldest and pioneer organization who started the hospital accreditation program in USA.
4. **Joint Commission International (JCI):** JCI accreditation of hospitals was started by JCAHO in the year 2002 with the purpose of accreditation of hospitals across the globe.

Healthcare Accreditation Bodies in India:

- 1. CRISIL RATING of Hospitals / Nursing Homes (Credit Rating Information Services of India Ltd.):** provides ratings, research and risk and policy advisory services. It's grading of healthcare institutions is an opinion on the relative quality of healthcare delivered by the institutions to its patients. The grading scale has two components –The Hospital classification and the hospital's service quality grading within that classification on a four-point scale (Grade A – Good quality, Grade B – Good but lower than Grade A quality, Grade C – Average quality, Grade D – Poor quality).
- 2. ICHA (Indian Confederation for Healthcare Accreditation)** is the mechanism created in 2002 and established as a not for profit organization of the companies act in 2004. ICHA is an autonomous body, globally recognized most optimal and credible platform.
- 3. Quality Council of India, an autonomous body, and its constituent National Accreditation Board for Hospitals and Healthcare providers (NABH)** is the leading accreditation body in India. QCI works under the guidance of Ministry of Commerce. NABH as a constituent of QCI was established in 2006.⁴ NABH is an institutional member of the ISQua and the approval of ISQua authenticates that NABH standards are in consonance with the global benchmarks set by ISQua. The first edition of standards was released in 2006 and after that the standards has been revised every 3 years. Currently the 4th edition of NABH standards, released in December 2015 is in use.⁵ Regardless of ownership, legal status, size and degree of independence it provides accreditation to hospitals in a non-discriminatory manner. The applicant facility must have conducted internal audit against NABH standards after implementing for at least 3 months.⁴

**NABH is structured such that:**

1. It catersto much desired needs of the consumers and to set benchmarks for progress of health industry.
2. To be apex national healthcare accreditation and quality improvement body, functioning at par with global benchmarks.
3. To operate accreditation and allied programs in collaboration with stakeholders focusing on patient safety and quality of healthcare based up

on national/international standards, through process of self and external evaluation.

**National Accreditation Board for Testing & Calibration Laboratories (NABL)**

Similar to the hospitals, laboratories, blood banks/ blood centers are an integral part of health care system. NABL is an accreditation body for Laboratories in India working under the parent body of Quality Council of India to recognize, provide technical skills and reference material so as to have uniform International standards. In the field of Medical Testing laboratories accreditation is granted in Clinical Biochemistry, Clinical Pathology, Haematology & Immunohaematology, Microbiology & Serology, Histopathology, Cytopathology, Genetics, Nuclear Medicine (In-vitro tests only) disciplines.⁶ Accreditation of Blood banks/ Blood centres and Blood Transfusion services through NABH strives to improve the quality and safety of collecting, processing, testing, transfusion and distribution of blood and blood products including guidelines set by National AIDS Control Organization (NACO)⁴.

Ensuring quality is a critical component of high-performing health systems. Having access to health care is not enough: patients who enter the health care system—whether a clinic, a hospital, or another venue need to be confident that they will receive care that is safe, effective, and consistent with the latest clinical evidence. The primary goal of the accreditation is to ensure that the hospitals not only perform evidence based practices but also give importance to access, affordability, efficiency, quality and effectiveness of healthcare.⁷ Accreditation fills the gaps or removes the areas of deficiency and ultimately establishes optimum standards, professional accountability and clinical excellence. Even the Government has acknowledged that accreditation should be performed by a way of independent assessment programmes and with incentives both for secondary and tertiary level of hospitals to ensure patient safety and quality of care. Variety of benefits can be availed by the healthcare organization on being certified by NABH. The biggest beneficiaries are the patients, since it ensures that the accredited healthcare organization practices and delivers continuous quality services by the credential medical staff and also functions in the best interests of all patient's. As accreditation ensures continuous learning, leadership, good working environment and ownership of clinical process, the hospital staff feels more satisfied and contented at work. It provides an opportunity to get empanelled by various insurance

companies and other third parties. Lastly, it provides access to reliable and certified information on facilities, infrastructure and level of care.

Over the past few decades, accreditation has been gaining traction around the world. As global health care leaders increasingly focus on improving quality of health systems, accreditation has been considered a valuable tool. However, implementation of accreditation country-wide in India has not been possible. It is quite evident that many regulations made by the government are not followed in most states and hence the quality of healthcare remains poor and unattended.⁸

Challenges in Implementing Hospital Accreditation:

A. Program Challenges: related to outside of a healthcare organization

- i. Need for a legal framework regarding accreditation bodies - Since accreditation is voluntary, it challenges the medical regulations laid down by the government both at state and central level.
- ii. financial cost of sustainable accreditation programs
- iii. need of health care professional

B. Organizational Challenges: related inside healthcare organization

I. **Human Resource:** Management and Organization, Knowledge, skills and commitment of hospital managers. Institutionalizing improved quality of care through accreditation requires more than a technical approach Failure to change the behavior and attitudes of people and organizations is the commonest cause of ineffective quality initiatives.

II. **Financial and Facilities Resources**

Sustained improvements often require a change in attitude and acquisition of a sense of ownership with regard to the quality of services

Conclusion

Accreditation is essential in transforming the healthcare scenario and helps healthcare organizations to establish objective systems aimed at patient safety and quality care. It is a transparent system of control over the accredited hospital which assures that the hospital will constantly fulfill the accreditation criteria. The on-site survey of the hospital and staff by the experienced accreditation assessment team encourages them to establish educational and performance improvement goals. The best part is that it gives the opportunity to the patients to give a feedback on the services they availed during their stay in the hospital and also to complain if they were dissatisfied. Finally it ensures that hospitals, whether public or private, national or expatriate, play their expected roles in national health system. Establishment and implementation of accreditation programs need empowerment of hospitals in terms of resources and knowledge along with development and growth in determinants of quality in terms of structure, process and outcome of the services.

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" Do the best you can until you know better.

Then when you know better, do better. "

Maya Angelou