

QUALITY IN HEALTHCARE AND ACCREDITATION



BY:-

**RASHMI YADAV,
DR.SUMITRA YADAV,
J.JOHN PAUL RAJ.**

What is quality?

- Consistent delivery of a product or service according to expected standards.
- Health care involves three main groups of people ‘customers (patients), employees (service providers) and the managers that interact in the provision of healthcare.
- The customers (clients) satisfaction was made the focus of all operations with managers and employees working together as a team of decision-makers and providers.

Defining Quality:

➤ According to ISO 9000:-

Quality is defined as ‘the degree to which a set of inherent characteristics fulfills requirements’.

- It is both objective and subjective in nature.

➤ According to WHO:-

Quality of care is the level of attainment of health systems’ intrinsic goals for health improvement and responsiveness to legitimate expectations of the population.

Quality of care is:

- Doing the right things (what)
- To the right people (to whom)
- At the right time (when)
- And doing things right first time

Quality Assurance:

Anything you do to measure (assess) or improve quality can be considered as Quality Assurance

Five Approaches to Defining Quality:-

1. The Transcendent Approach.
2. The Product-based Approach.
3. The User-based Approach.
4. The Manufacturing-based Approach
5. The Value-based Approach.

TQM in a hospital and Healthcare Organizations

Doing it right every time requires that every one in the organizations is aware of the need for TQM and is equipped with it. This involves that the personnel are qualified and have necessary knowledge, skills and attitude.

Key concepts for TQM:-

- Defined and specific quality policies and objectives.
- Strong customer orientation.
- All the activities necessary to achieve these quality policies and objectives.

- Organizations wide integration of the activities.
- Clear personnel assignments for quality achievement.
- Specific vendor-control activities through quality equipment identification.
- Defined and effective quality information flow, processing and control.

ISO 9000 Standards and Health Care:-

➤ The ISO 9000 standards approach may be useful to consider in designing quality control systems for certain health care “production” services, such as laboratory, radiology, and food services.

- Over 90 countries.
- Industrial standards to facilitate international coordination and unification of standards.
- The primary ISO standards deal with manufactured products and set basic rules for quality systems

"Hospital Accreditation"

Process in creating collective organizational commitment of
Quality improvement,
Organizational analysis,
Self-assessment,
Strategic formulation of the organizational development planning,
Human resources development,
Team work and **service systems** focusing on patient-oriented
mindedness.

What is Hospital Accreditation?

"The Hospital Accreditation" approach is a concept and practice that yields beneficial results to patients, customers, hospital personnel, the hospital, the Faculty of Medicine, the society and the country as a whole.

History

- In 1917, the American College of Surgeons established a set of minimum standards for hospitals.
- In 1951, the American College of Surgeons joined with several other professional associations to form the Joint Commission on Accreditation of Hospitals.

➤ Thirty years later, this voluntary accrediting body changed its name to the Joint Commission on Accreditation of Healthcare Organizations to more accurately reflect its scope of health services evaluation

➤ In addition to hospitals, the body evaluated long-term care facilities like,

- home health agencies,
- hospices,
- clinics,
- pharmacies,
- managed care organizations and,
- health care networks.

JOINT COMMISSION INTERNATIONAL ACCREDITATION (JCIA)

* Experience in accrediting health care organizations in U.S, the Joint Commission on Accreditation of Healthcare Organizations initiated the development of an international accreditation program in 1998 and was fully implemented in late 1999.

The JCIA standards, organized according to either

patient care functions

or

management functions.

BENEFITS TO ACCREDITATION

1. BENEFITS OF PATIENTS:-

- Continuity of care & Safe transport
- Pain management & Focus on patient safety
- Patient satisfaction is evaluated
- Rights are respected and protected
- Access to a quality focused organization
- Credentialed and privileged medical staff
- High quality of care
- Understandable education and communication

2. BENEFITS FOR THE STAFFS:-

- Improves professional staff development.
- Provides education on consensus standards.
- Provides leadership for quality improvement within medicine and nursing.
- Increases satisfaction with continuous learning, good working environment, leadership and ownership.

3. BENEFITS FOR THE HOSPITAL:-

- Improves care.
- Stimulates continuous improvement.
- Demonstrates commitment to quality care.
- Raises community confidence.
- Opportunity to benchmark with the best.

4. BENEFITS TO THE COMMUNITY:-

- Quality revolution
- Disaster preparedness
- Epidemics
- Access to comparative database

Indian Scenario:-

- NABH is a constituent board of Quality Council of India (QCI), set up to establish and operate accreditation programme for healthcare organizations.
- NABH is an Institutional Member as well as a member of the Accreditation Council of the International Society for Quality in HealthCare (ISQua).
- NABH is the founder member of proposed Asian Society for Quality in Healthcare (ASQua) being registered in Malaysia.
- NABH is a member of International Steering Committee of WHO Collaborating Centre for Patient Safety as a nominee of ISQua Accreditation Council

Objectives of NABH:-

- Enhancing health system & promoting continuous quality improvement and patient safety.
- It provides accreditation to hospitals in a non-discriminatory manner regardless of their ownership, legal status, size and degree of independence.

Emerging healthcare quality scenario in India:

PERIOD	QUALITY MANAGEMENT SYSTEM	ACCREDITATION
1980'S	Healthcare does not need it, more of an industrial requirement	what it is and why?
1990's	A fad of few, let us try, no harm	Yes, but not so relevant to Indian healthcare system
2004'S	A useful tool, must for a well run organization, good for marketing too.	Required urgently RED ALERT SOUNDED

Important questions considering accreditation:-

- What sectors of the health system should be accredited—hospitals, ambulatory and primary care facilities, or both?
- Should both public and private sectors be included?
- To what extent should community representatives participate on accreditation boards or survey teams?
- Should the accrediting bodies be governmental or nongovernmental organizations?
- Should accreditation surveys be scheduled or “surprise visits” or both?

Assessment of the Need for Quality Evaluation:

- Maintain quality
- Improve quality
- Ensure public safety
- Establish entry level requirements and legal recognition
- Verify that design or maintenance specifications are met
- Document special capability as an organization or health care professional

- 
- Risk management
 - Implementation of new delivery settings
 - Address national public health issues
 - Allocation of limited resources
 - Create centers of excellence
 - Formation of new systems or networks of services

Approaches Used in Conducting an Accreditation Survey :

- Leadership interviews
- Clinical and support staff interviews
- Patient and family interviews
- Observation of patient care and services provided
- Building tour and observation of patient care areas, building facilities, equipment management, and diagnostic testing services

- Review of written documents such as policies and procedures, orientation and training plans and documents, budgets, and quality assurance plans
- Evaluation of the organization's achievement of specific outcome measures (e.g., immunization rates, hospital-acquired infection rates, patient satisfaction) through a review and discussion of monitoring and improvement activities.
- Review of patients' medical records.

Conclusion:

- Systems of health care service delivery, political processes of health care reform and methods of quality assurance vary through out the world.
- Proposals for quality improvement should be comprehensive, to include accreditation, licensure, and certification.
- Voluntary accreditation was considered the most reasonable approach such that client participation is stimulated and that standards are promoted and established.

- The accreditation process would be most effective if it were designed by and adapted to the needs and resources of individual countries
- Accreditation would be a valuable quality assurance approach not only in hospitals, but also all health care institutions within the system of services.
- Licensing should remain the responsibility of the state, which is legally authorized
- The focus of certification would be better placed in assuring quality of care, rather than creating competition between professionals.

THANK YOU

Care

