

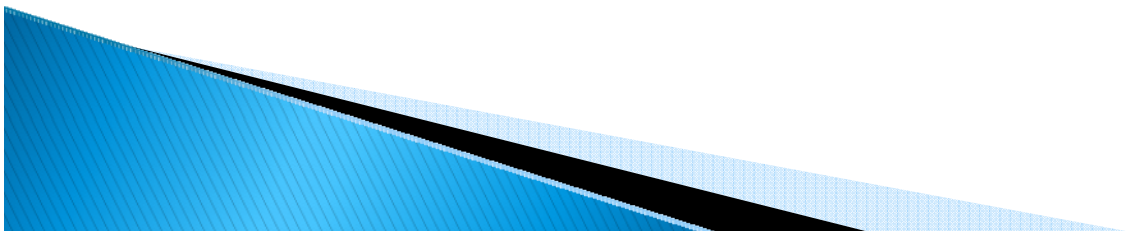
# Nurturing Quality: Accreditation as a Tool

Dr Parag R Rindani MD MBA  
Corporate Head – Medical Services & Quality,  
Sterling Hospitals, Gujarat

**"It may seem a strange principle to enunciate as the very first requirement in a hospital that it should do the sick no harm"**



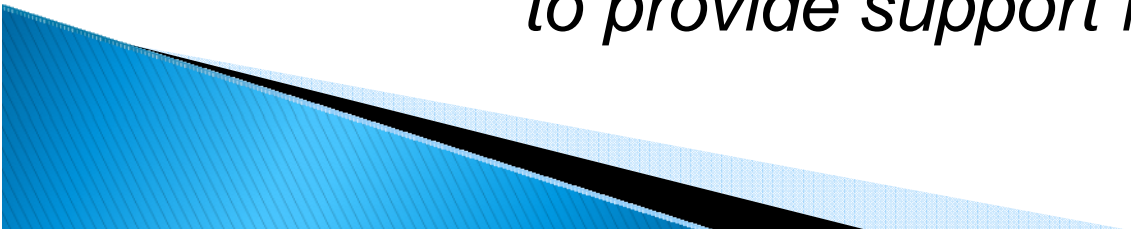
**Florence Nightingale 1820-1910**

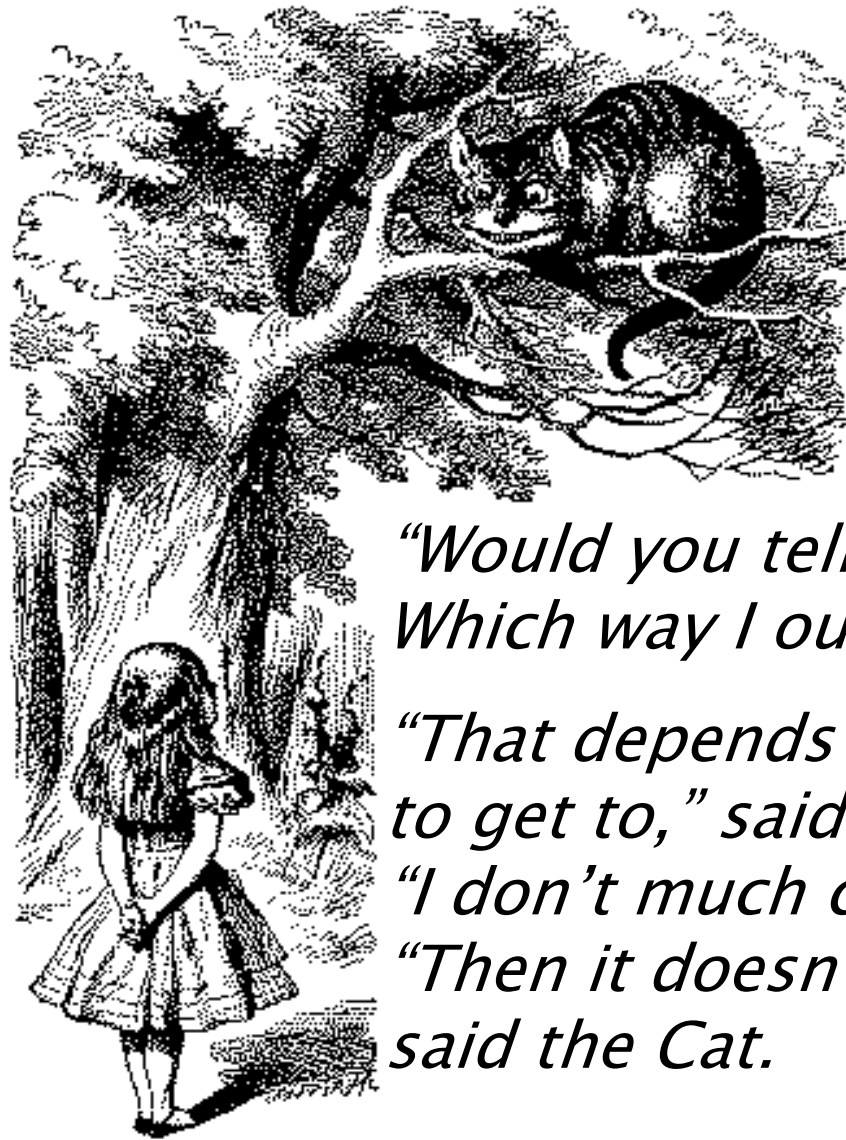


# What is needed for quality health care?

- ▶ Safety
- ▶ Appropriateness
- ▶ Access
- ▶ Consumer centeredness
- ▶ Effectiveness
- ▶ Efficiency

*Health professionals with competencies  
to provide support for this agenda*





## *Strategy*

*“Would you tell me, please, – asked Alice,  
Which way I ought to Walk from here?”*

*“That depends a good deal on where you want  
to get to,” said the Cat.*

*“I don’t much care where...” said Alice*

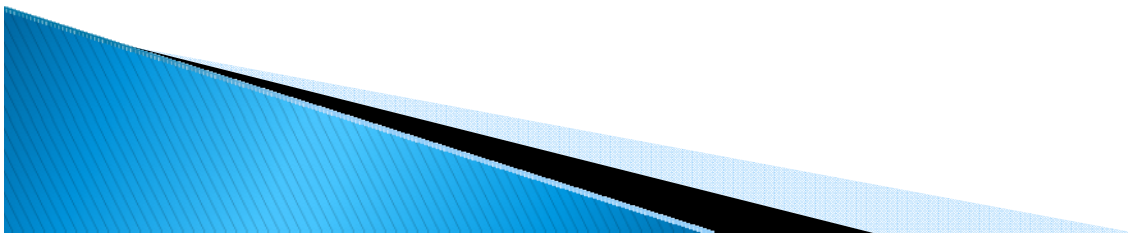
*“Then it doesn’t matter which way you walk,”  
said the Cat.*

*– From 'Alice in Wonderland' – Lewis Carroll*

# Accreditation

Public recognition of the achievement of accreditation standards by a healthcare organization, demonstrated through an independent external assessment of that organization's level of performance in relation to the standard.

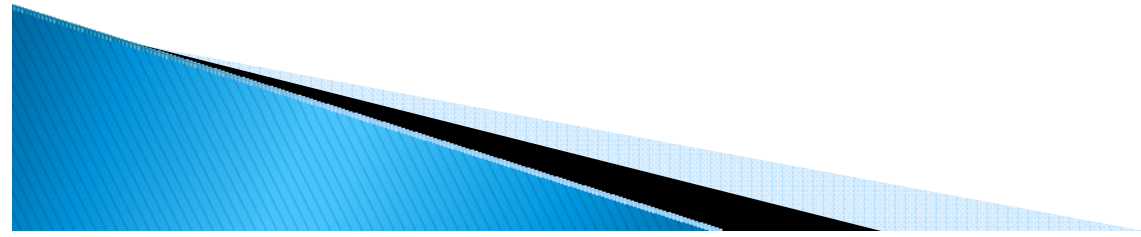
*(ISQua)*



# Accreditation



ACCREDITATION CANADA  
AGRÉMENT CANADA





# Accreditation



- ▶ Accreditation relies on establishing technical competence of healthcare organization
- ▶ It focuses on learning, self development, improved performance and reducing risk.
- ▶ Accreditation is based on optimum standards, professional accountability and encourages the pursuit of continual excellence.

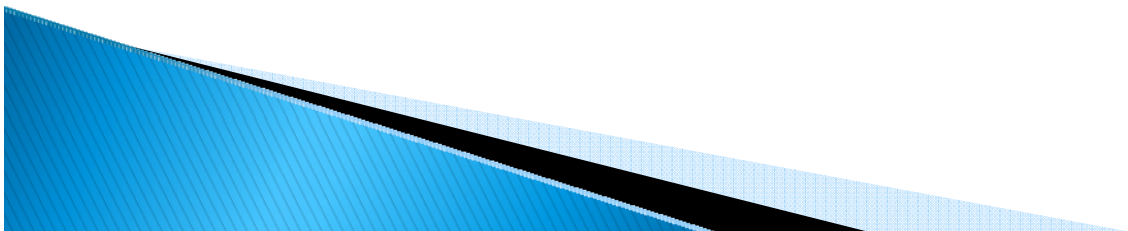




# Accreditation



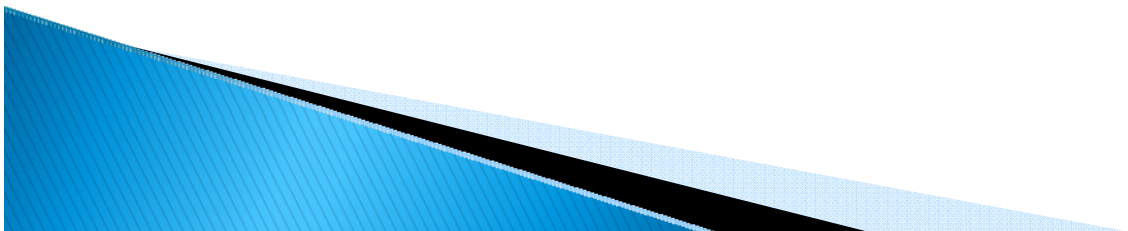
- ▶ provides a visible commitment by an organization
  - ▶ to improve the quality of patient care,
  - ▶ to ensure safe environment and
  - ▶ to continually reduce risks to patients and staff
- ▶ has gained worldwide attention as an effective quality evaluation and management tool
- ▶ is usually voluntary and is based on standards usually regarded as optimal and achievable





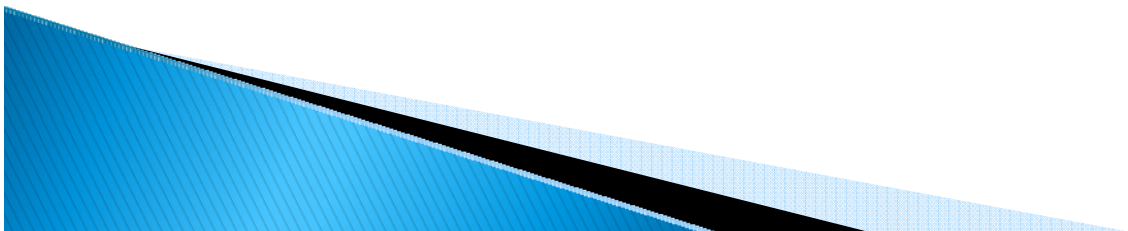
# Benefits to Patients

- ▶ Accreditation results in high quality of care and patient safety.
- ▶ The patients get services by credentialed medical staff.
- ▶ Rights of patients are respected and protected.
- ▶ Patient satisfaction is regularly evaluated.



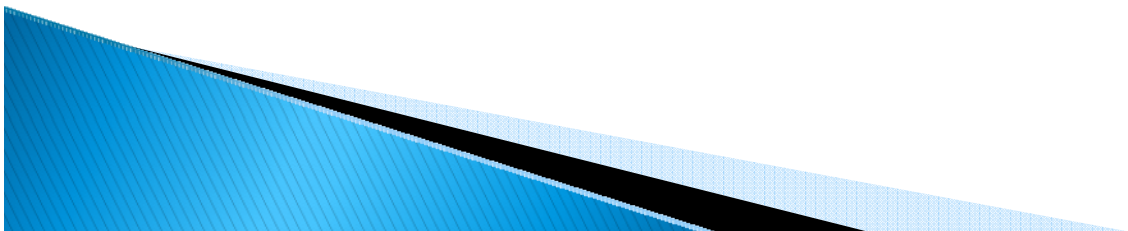
# Benefits to HCOs

- ▶ Stimulates continuous improvement.
- ▶ Enables the HCO in demonstrating commitment to quality care.
- ▶ Raises community confidence in the services provided by the HCO.
- ▶ Provides opportunity to HCO to benchmark with the best.



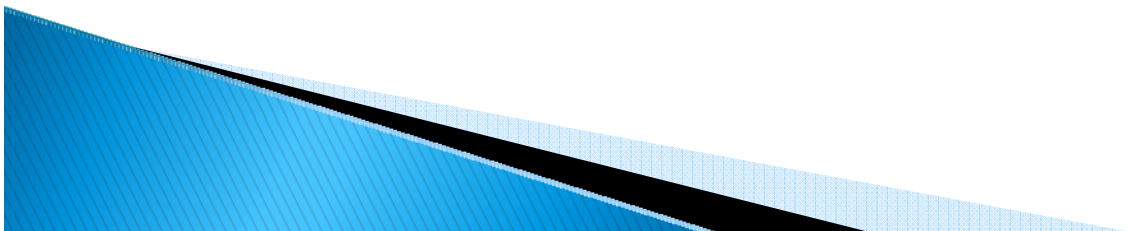
# Benefits to HCW

- ▶ Satisfied staff as it provides for continuous learning, good working environment, leadership and above all ownership of clinical processes.
- ▶ Improves overall professional development of clinicians and paramedical staff and provides leadership for quality improvement within medical and nursing staff.



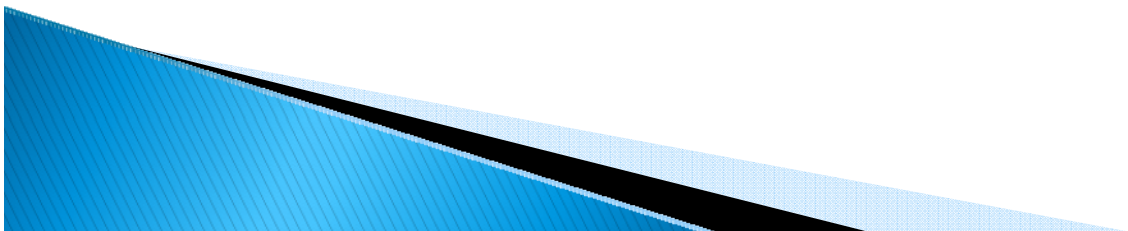
# Driving Factors

- ▶ Consumer Protection Act
- ▶ Clinical Establishment Act
- ▶ Insurance Companies regulation
- ▶ Empanelment – CGHS, ECHS, Corporates, etc.
- ▶ Community Awareness & Response
- ▶ Health Tourism



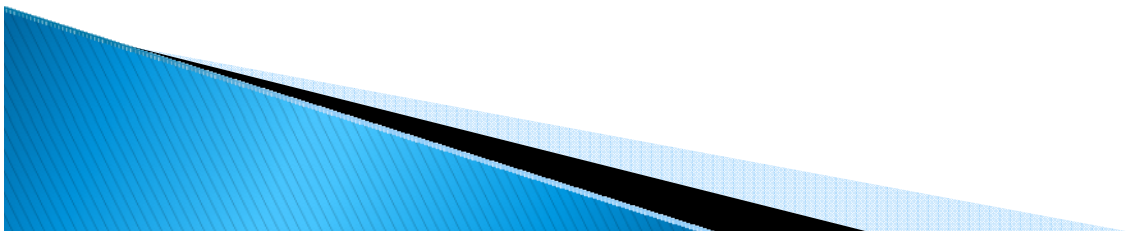
# Challenges & Opportunities

- ▶ Awareness on Accreditation
  - ▶ Health industry
  - ▶ Consumers
  - ▶ Regulators
- ▶ Creating enabling mechanism to assist hospitals on accreditation
- ▶ Value addition to accredited hospitals
  - ▶ Clinical indicator programme
  - ▶ Quality tools, Six Sigma, Lean Six Sigma, QIPs, etc.
  - ▶ Education Programmes



# Challenges & Opportunities

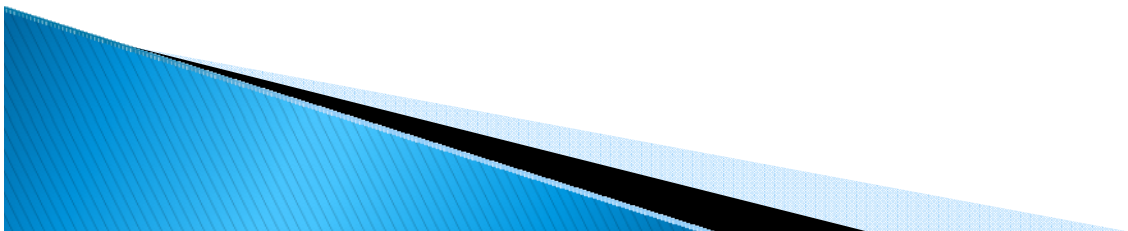
- ▶ Knowledge sharing
  - ▶ ACHS, JCI and other accreditation bodies
  - ▶ ISQua
- ▶ Ownership of accreditation program by Health industry
- ▶ Acceptance of accreditation program by Consumers



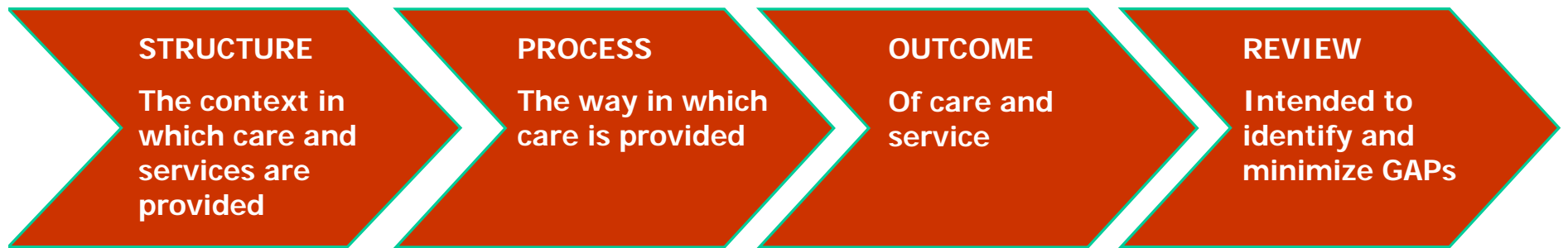
# QI through Accreditation



- ▶ Maintenance of Processes – outcomes & review
- ▶ Important step of review – Correction, Corrective Action and Preventive Action
- ▶ Improvement through Quality Improvement Projects and Continuous Quality Improvement
- ▶ Benchmarking
- ▶ Best Practices
- ▶ Peer Review – Audits

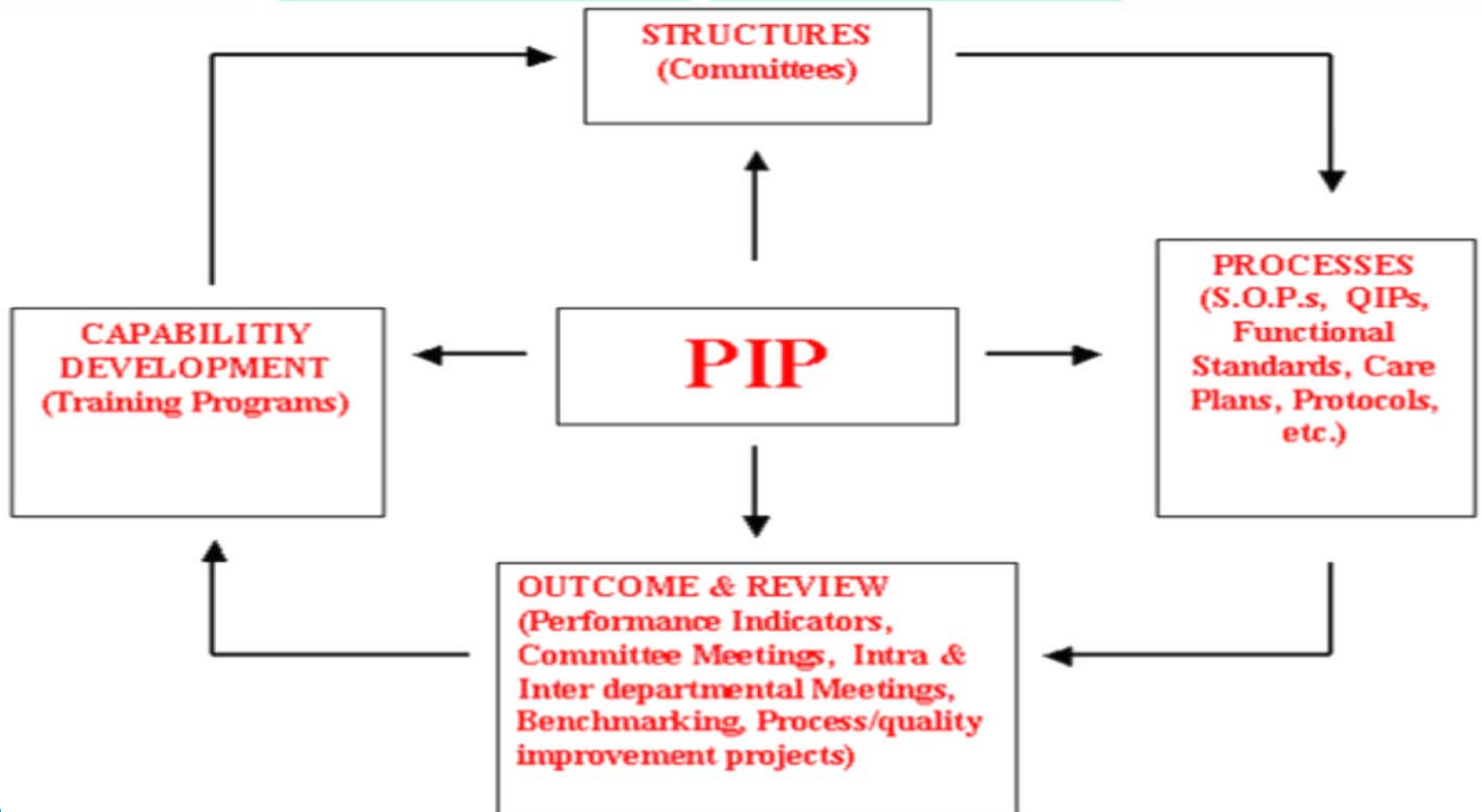


# The Donabedian Concept



Avedis Donabedian  
(1910–2000)





# NABH Standards for Small Health Care Organisations (SHCO)

FIRST EDITION ; MARCH 2008

## **ACCREDITATION** STANDARDS FOR SMALL HEALTH CARE ORGANISATIONS

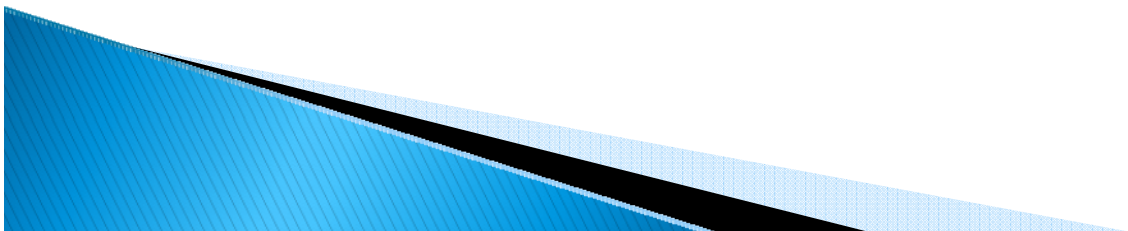


National Accreditation Board for Hospitals  
and Healthcare Providers

# NABH Standards for SHCO



- ▶ 90% of hospitals are with beds less than 100 – demand to have specific guidelines on how to apply hospital accreditation standards for small healthcare organizations.
- ▶ Present standard is a compilation of all applicable standards from hospital accreditation programme – relevant for small healthcare organizations.



# What is SHCO?

- ▶ Those healthcare organisations having bed strength between 20 to 50 beds and are in possession of supportive and utility facilities that are appropriate and relevant to the services being provided by organization.

- ▶ *Exclusions*

  - Polyclinics

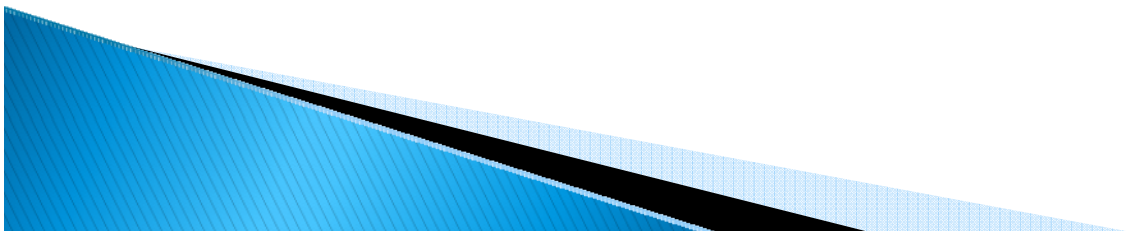
  - Diagnostic Centres

  - Superspeciality centres (single/multiple)

- ▶ *Exceptions*

  - Speciality Day Care Centres

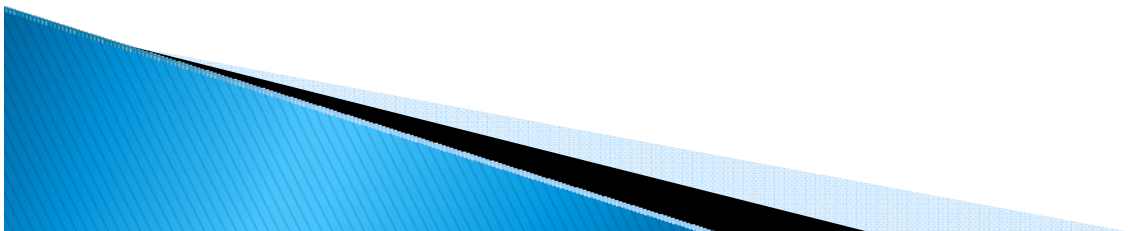
  - (minimum bed strength not mandatory)



# NABH Standards for SHCO

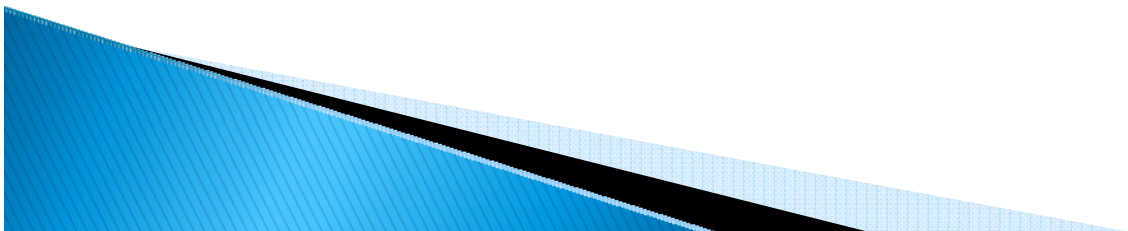


- ▶ 10 chapters
- ▶ 63 standards
- ▶ 294 objective elements



# Standards & Objective Elements

- ▶ A standard is a statement that defines the structures and processes that must be substantially in place in an organization to enhance the quality of care.
- ▶ Objective element is a measurable component of a standard.
- ▶ Acceptable compliance with objective elements determines the overall compliance with a standard.



# Patient Centered Standards



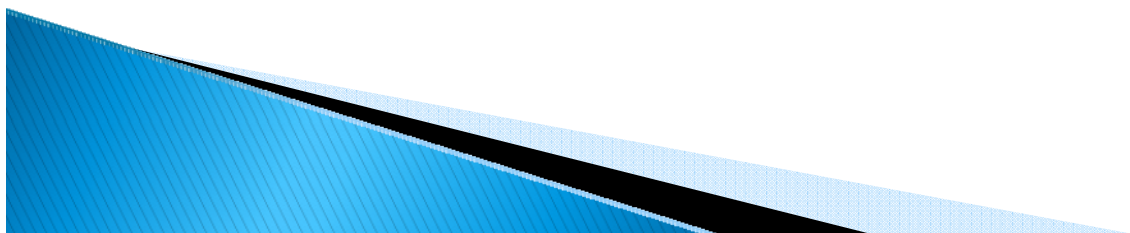
Access, Assessment and Continuity of Care **(AAC)**

Care of Patients **(COP)**

Management of Medications **(MOM)**

Patients Rights and Education **(PRE)**

Hospital Infection Control **(HIC)**



# Management Centered Standards



Continuous Quality Improvement

**(CQI)**

Responsibilities of Management

**(ROM)**

Facility Management & Safety

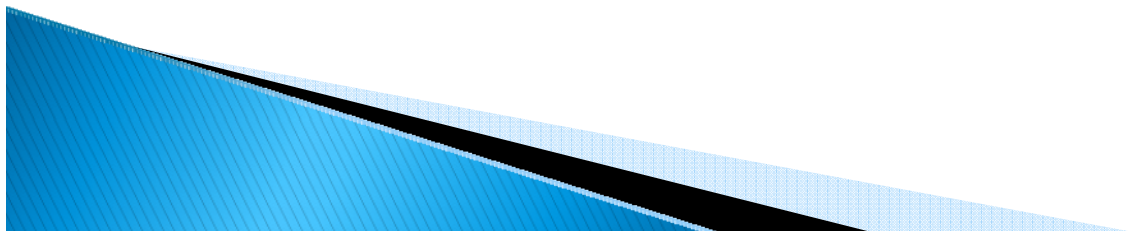
**(FMS)**

Human Resource Management

**(HRM)**

Information Management Systems

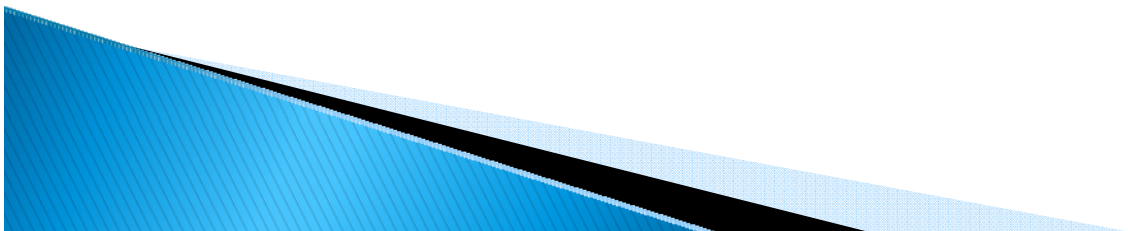
**(IMS)**





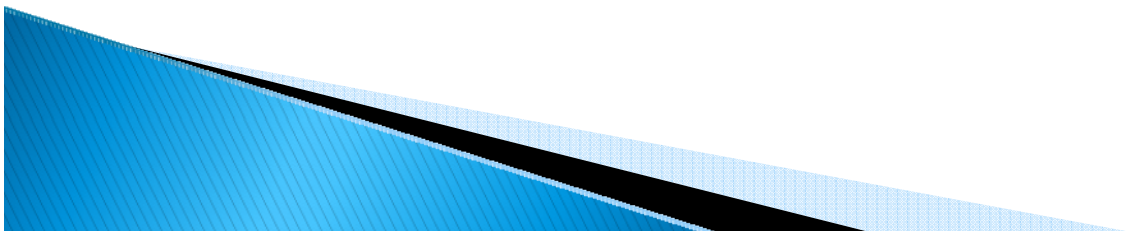
# How to go about it?

- ▶ Top management commitment
- ▶ Form a multidisciplinary team & committees
  - Pharmacy & Therapeutics
  - Infection control
  - Disaster Management
  - Credentialing & Privileging
  - Quality improvement
  - Safety
  - Ethics
  - Grievance Redressal
  - CPR analysis
  - Audits
    - Clinical
    - Medical record
    - Internal



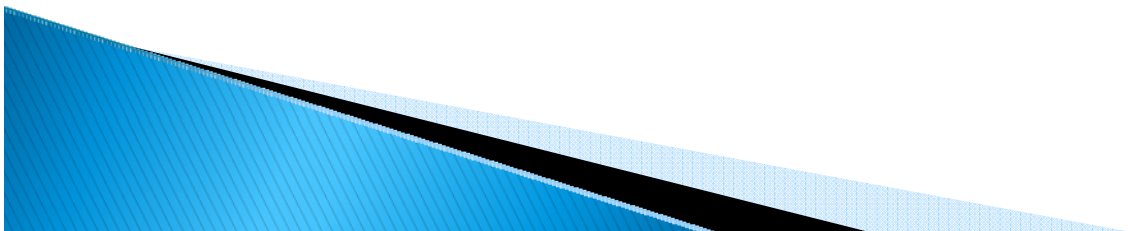
# Committees Functioning

- ▶ Objective
- ▶ Composition including Chairman and Secretary/Convenor
- ▶ Quorum required
- ▶ Agenda points
- ▶ Minutes of the meeting

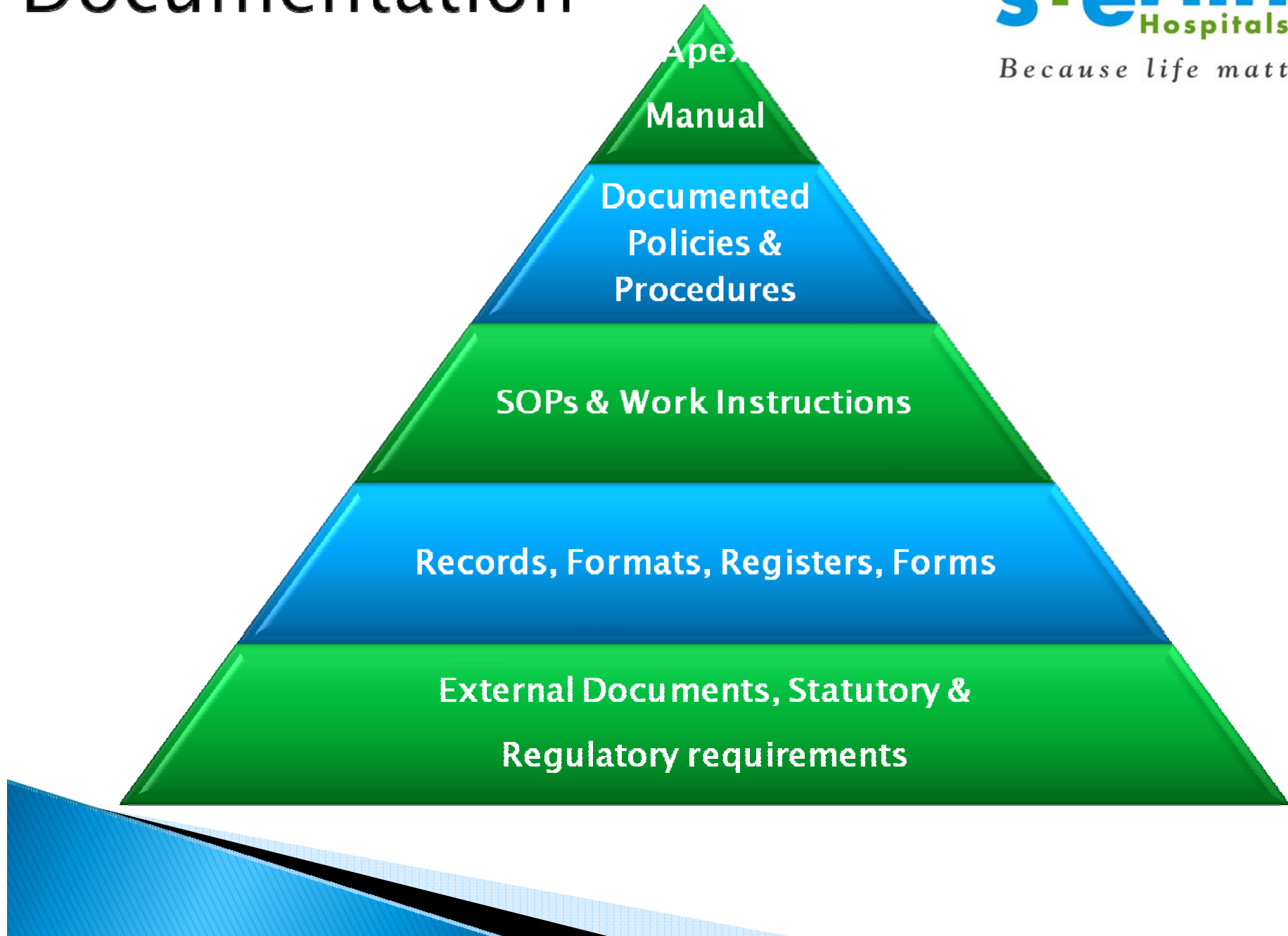


# How to go about?

- ▶ Understand the standards
- ▶ Educate the end users
- ▶ Identify & address all requirements
  - ▶ infrastructure
  - ▶ statutory and legal
- ▶ Identify gaps from the existing practices
- ▶ Initiate documentation
- ▶ Preparation of compliant policies & procedures

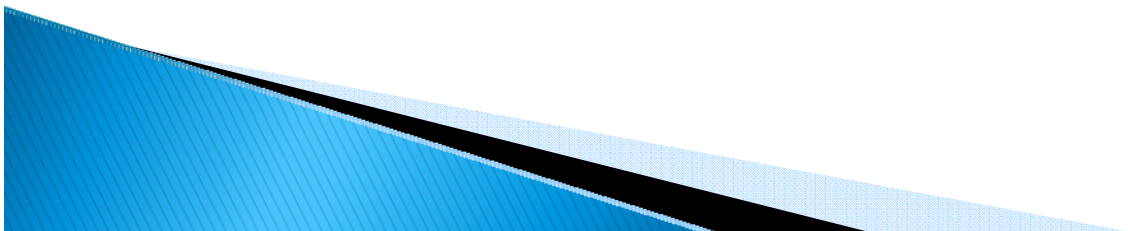


# Documentation



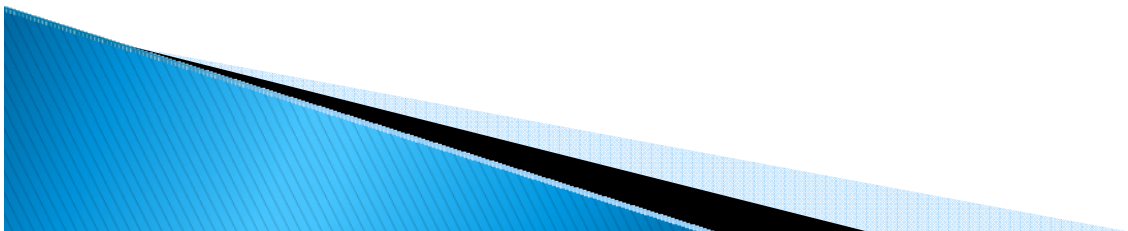
# Apex Manual

- ▶ Introduction of the HCO
- ▶ Management including ownership, vision, mission, ethical management etc.
- ▶ Quality policy and objectives including service standards
- ▶ Scope of services provided by the HCO and the details of departmental services
- ▶ Composition and role of various committees
- ▶ Organogram
- ▶ Statutory and regulatory requirements



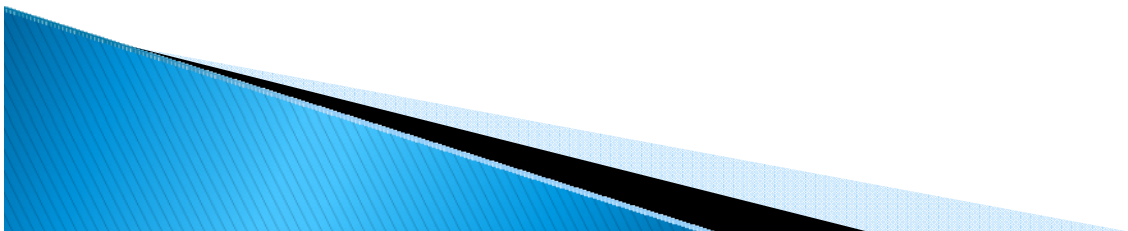
# Essential Documentation

- ▶ Infection Control Manual
  
- ▶ Quality Improvement Manual including
  - ▶ Laboratory services
  - ▶ Imaging services
  - ▶ Intensive care services &
  - ▶ Surgical services
  
- ▶ Safety manual which also incorporates
  - ▶ Laboratory safety &
  - ▶ Radiation safety



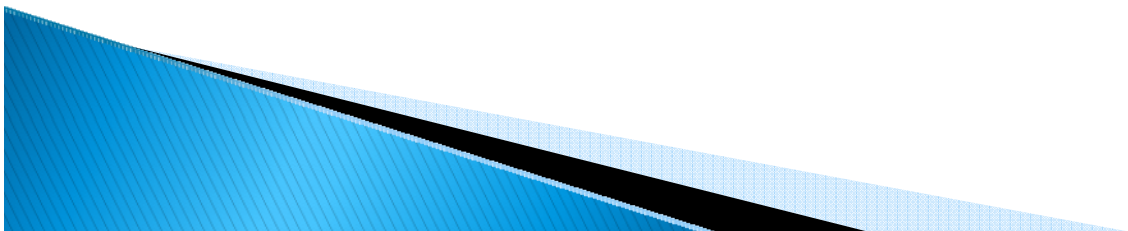
# How to go about it?

- ▶ Get it approved by the authorised person(s)
- ▶ Ensure NABH standards are implemented and integrated in the hospital functioning
- ▶ Identify and implement training requirements
- ▶ Do an internal assessment
- ▶ Submit application to NABH



# How to go about it?

- ▶ Call for pre-assessment
- ▶ Close the deficiencies
- ▶ At least another round of internal assessment
- ▶ Final Assessment
- ▶ Close the deficiencies





And finally.....



Thank you !!

