

Experiential learnings from Accreditations

Dr A. Malathi

Group Chief Medical Officer & Group Chief Quality Officer

Aster DM Healthcare (India & GCC)

“Accreditation Programs”

Agenda from the Eyes and Mind of an Assessor

01

Criteria as core or compulsory, usually based on safety and risk.



02

Mandate organizations to monitor performance indicators to include management, safety, and clinical outcomes.



03

Including complaints, patient/client satisfaction, staff satisfaction, staff turnover, adverse events, accidents & IPSP



04

Generate and analyse performance data as part of an internal quality improvement program for CQI



Accreditation, Quality, Excellence in Healthcare Ecosystem

All accreditation programs have standards that can be grouped around quality dimensions to demonstrate their relationship to quality



Accreditation as longest established model of external evaluation

Leadership, governance, and management perspective

• TOP-DOWN APPROACH

- Robust systems & procedures that **enhance operational effectiveness** and advance positive health outcomes.
- Well-defined vision for **sustainable quality improvement initiatives**;
- Demonstrates **credibility and a commitment** to quality and patient safety.

From an organizational performance perspective

- **Increases compliance** with quality and safety standards and improved health outcomes
- **Sustainable, consistent quality improvement** initiatives, policies and processes
- **Decreases variances** in practice among healthcare providers and decision-makers
- Highlights good **evidence-based practices**.
- Promotes the **sharing of policies**, procedures and best practices among healthcare organizations

“From the eyes of an Assessor”



1

Eye for Detail

2

Eye for Best Processes/Unique practices

3

Evidences of Leadership involvement

Globally
standardised



TIME in preparation

Use time wisely



“Era of digitalization – ONLINE AUDITS”

Prepare for a disaster, mitigate all possible risks for a smooth audit



“People Focus” : Need of the hour



Employee

Culture of Safety !

Employees who trust they work in an organization which takes care of patient and staff safety



Inclusive Leaders

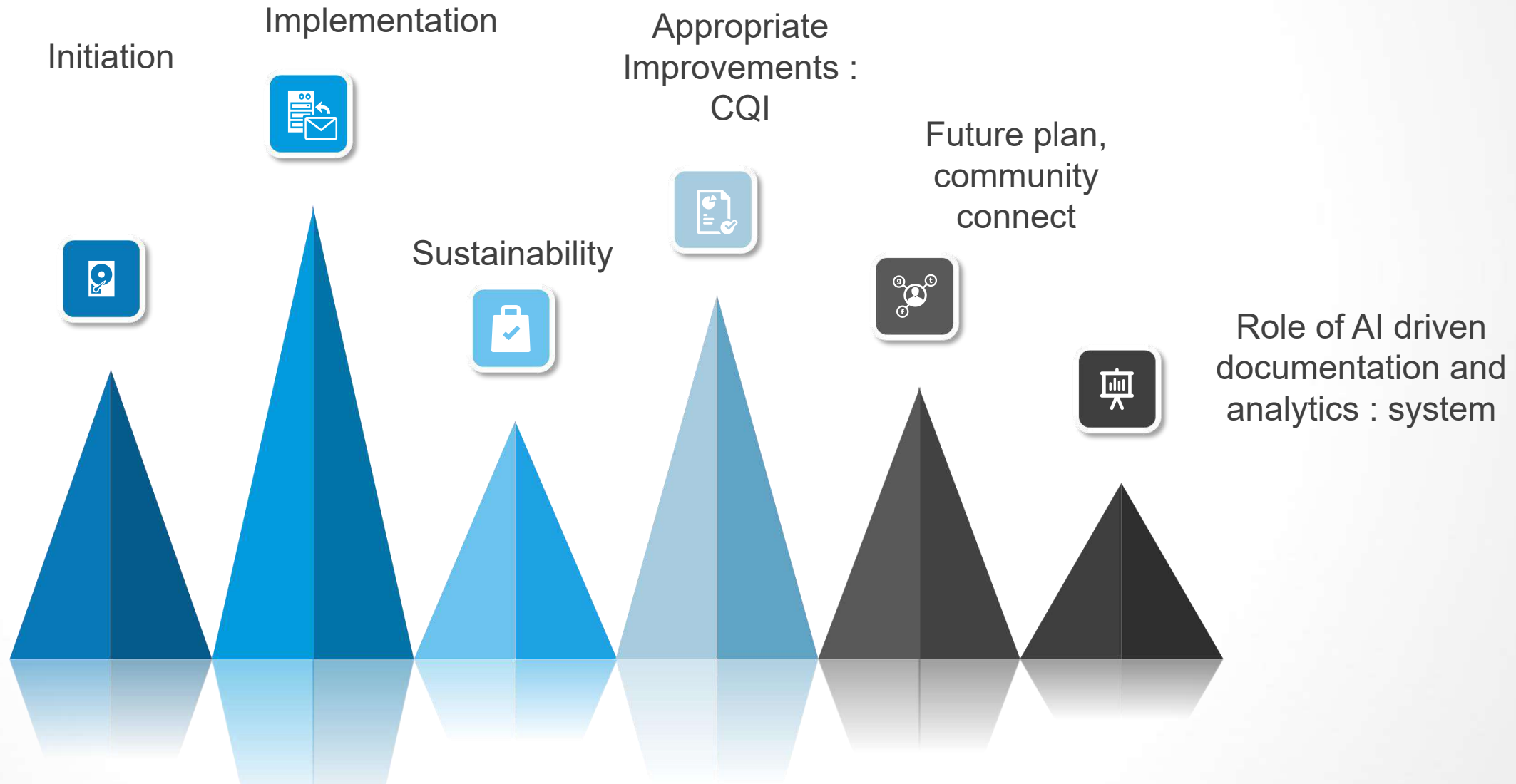
Leaders and employees speak a language of Patient Safety



Patients

Patient safety measures and education to patient and their families
(Participative decision making)

Organization Evolution : transformational change



“An organization stands tall on its concrete base of documentation”

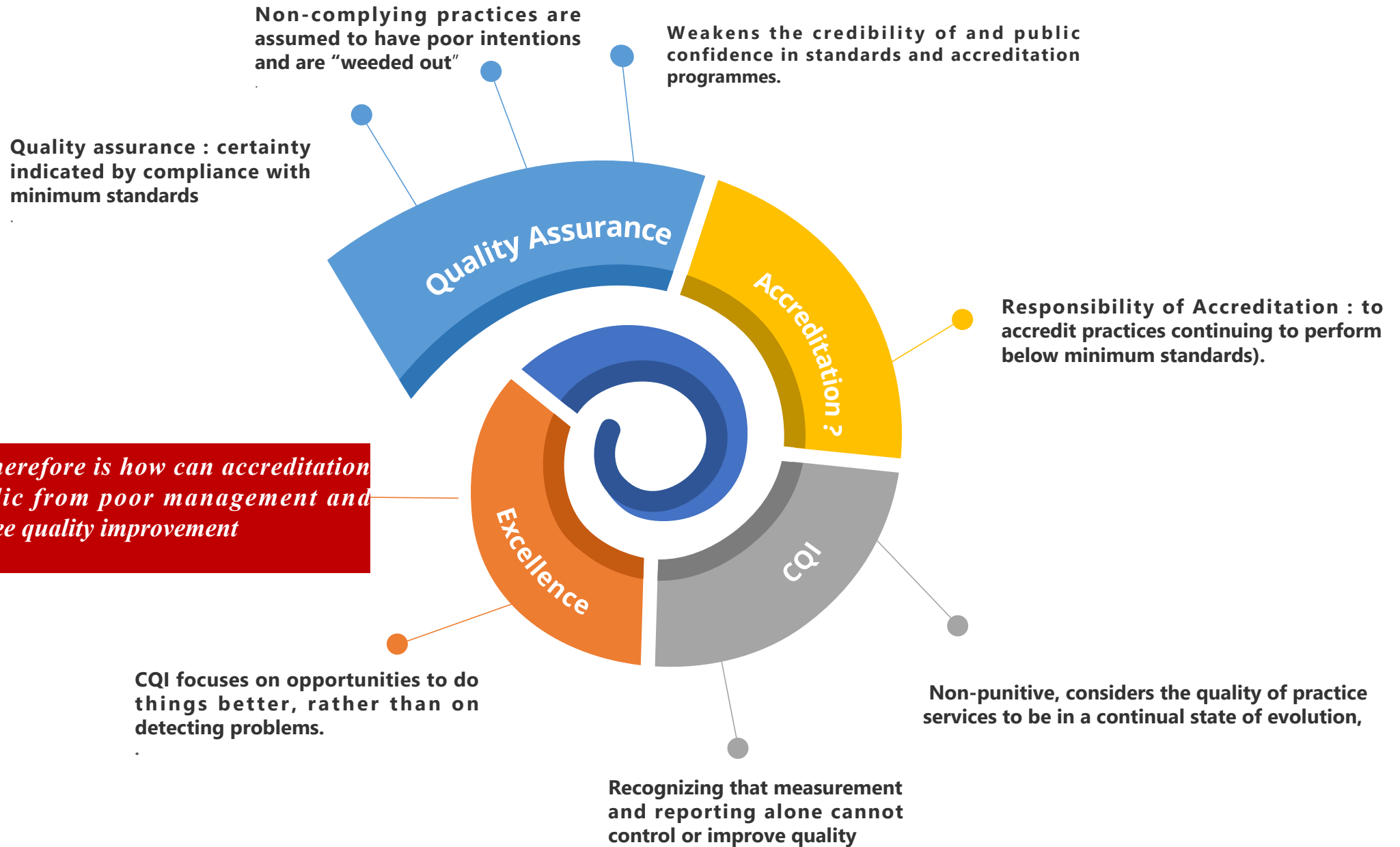
Indexed policies, charts, legal documents, transport records, patient and family education material

Dates and Editions

Must include relevant information that is reflected in practices
With appropriate dates and revision information



QA and CQI – Conflicting philosophies ?



A key question therefore is how can accreditation protect the public from poor management and promote blame-free quality improvement

“Cost Benefit Analysis”

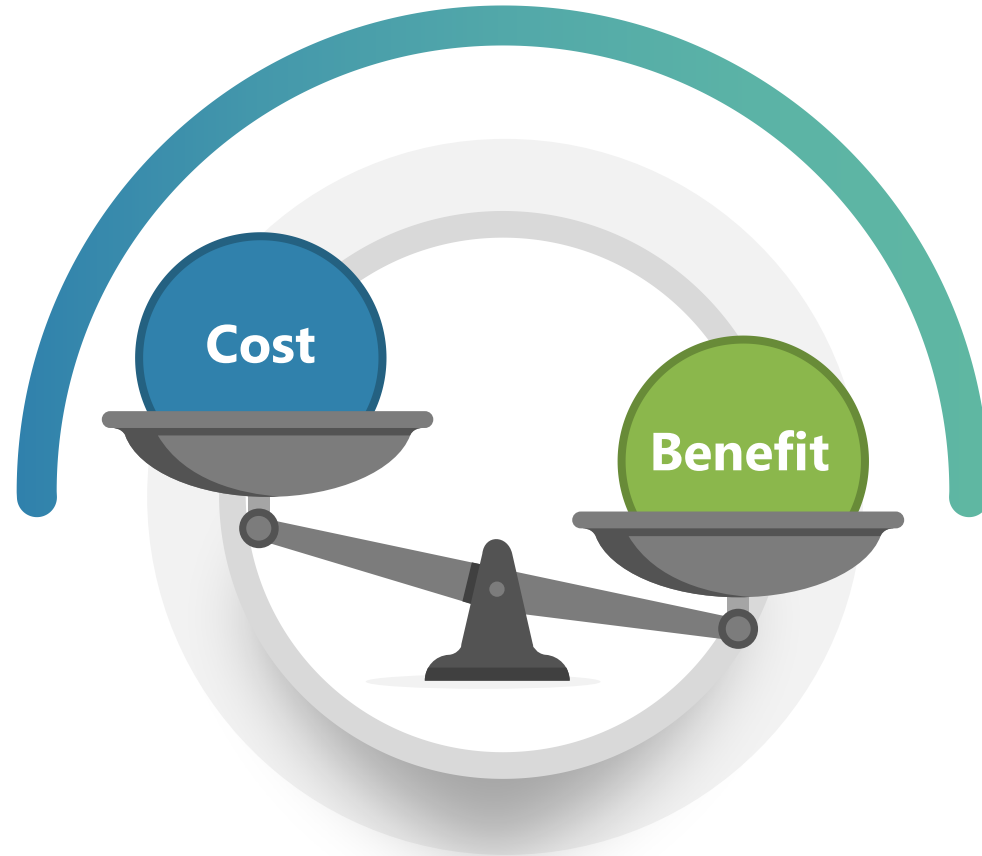
Time consuming



Monetary



Effort



Long Term Benefits

Higher ROI with best practices



Patient Safety

Build Trust of Patients thereby ensuring patient retention



Risk Mitigation

Proactive barriers reduce high medicolegal expenses where adversities are avoided

“Wins”

Did the Organization ACHIEVE ?

Organizational responsibility

Identifying and showcasing KPI's that define organizations policy on patient safety
Promotes team learning which in turn promotes organizational learning

1

01

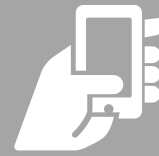


2

Responsibility to community

Helps in declaring to the world that the units provide safe and effective care validated by an external agency.

02



04



4

Quality

Adopting some of the best standard evidenced practice guidelines from around the world to improve quality of care

3

Operational Efficiency

Standardization of policies and protocols ensuring operational efficiency and processes

03



“Key Messages”

01

Challenges include the need for accreditation to demonstrate effectiveness, cost effectiveness and appropriateness



02

Acknowledge cultural diversity in the standards, and separate quality control from quality improvement within a systems-based framework



03

Accreditation will not benefit patients unless it is accountable, contributes to improved quality of care, and patients have access to information about which practices are accredited

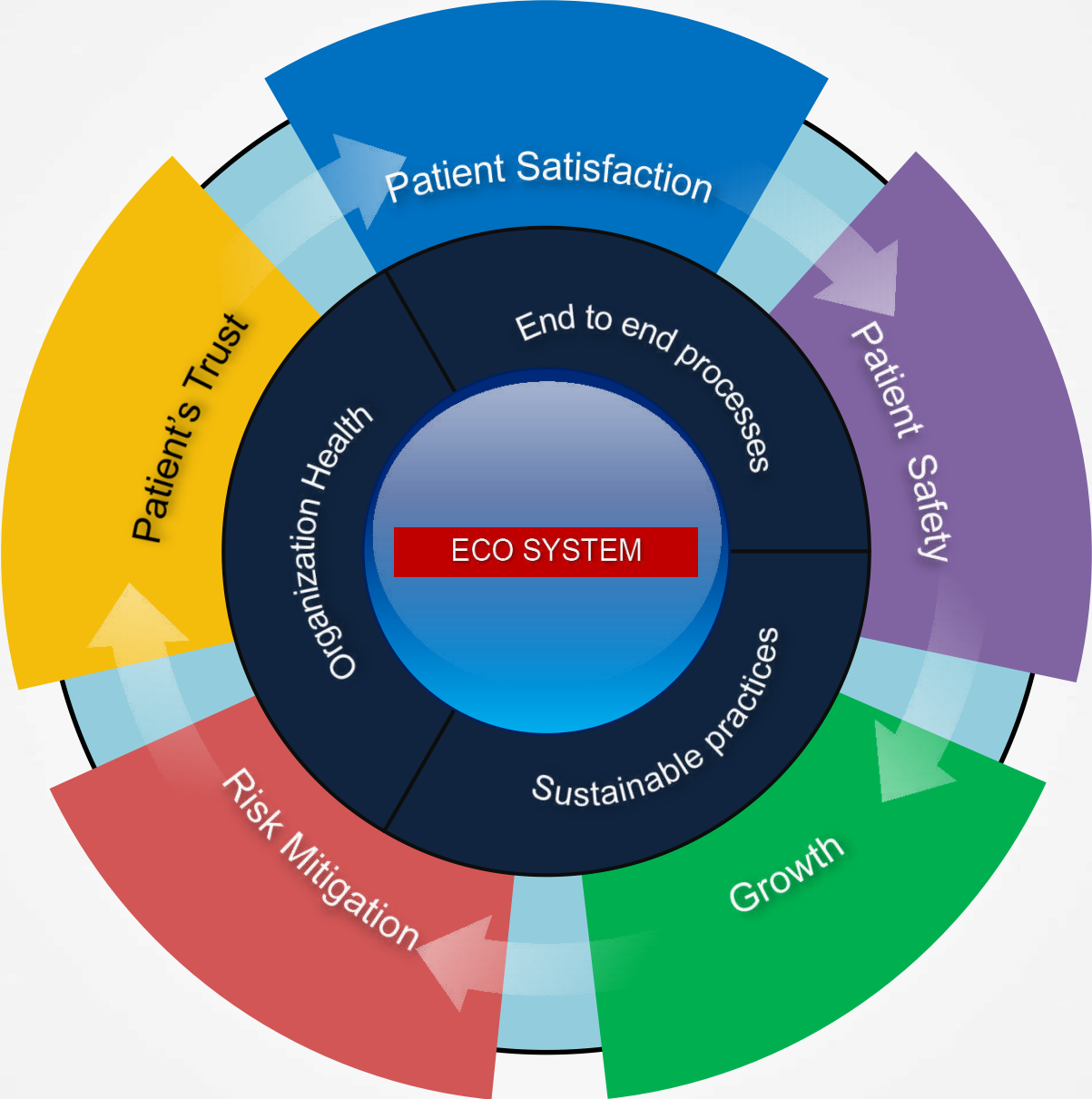


04

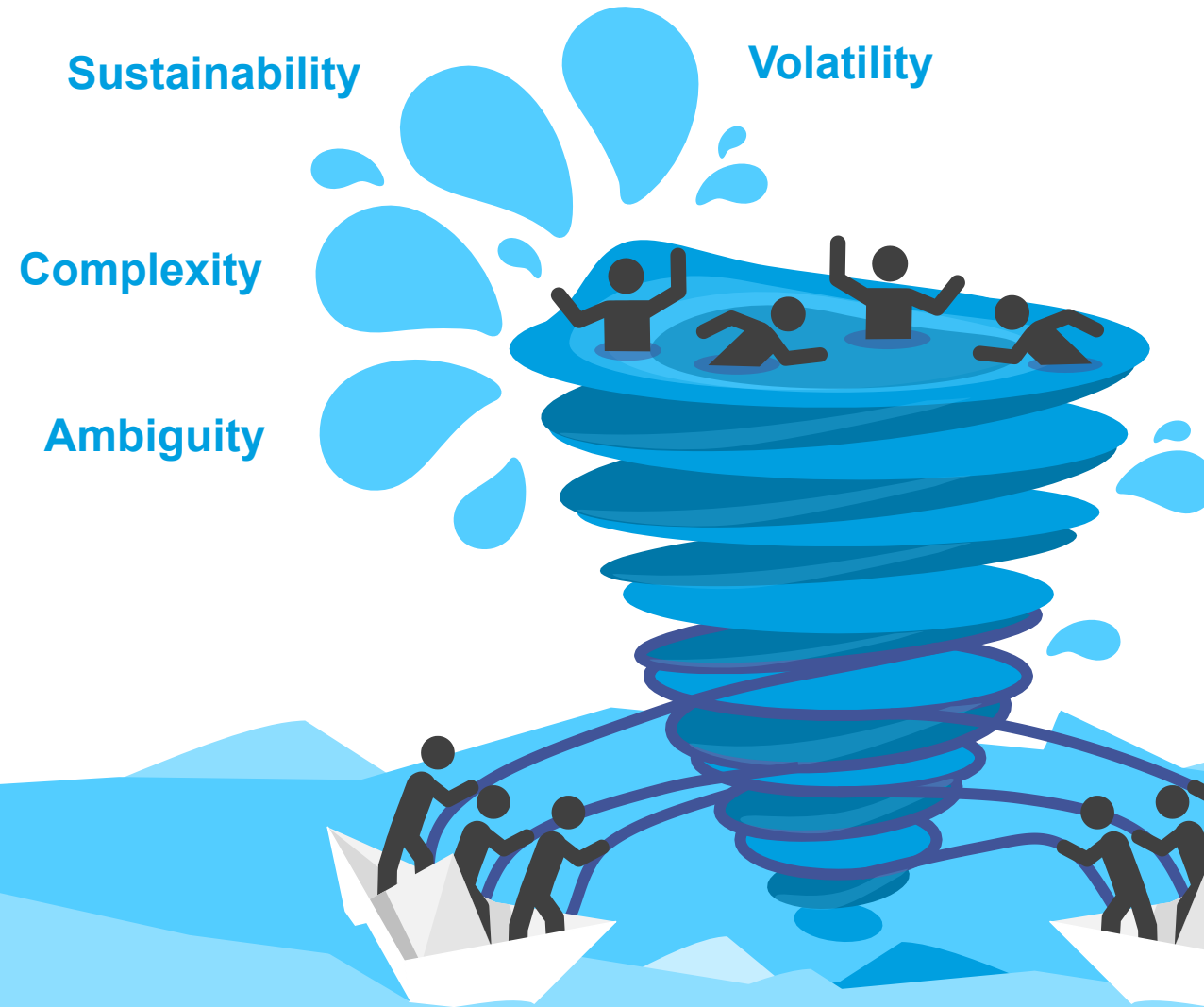
Clinical governance requires effective leadership



Accreditation & Healthcare Ecosystem



“Accreditation as Team Building”



Develops Leadership Practices to Mitigate VSCA

- ✓ Interdisciplinary team effectiveness
- ✓ Capacity building,
- ✓ Professional development,
- ✓ Organizational learning

Highlights



- The standards : core, commitment, achievement
- Focus on CQI
- Risk management approaches such as FMEA, HIRA, HVA, etc.
- Patient safety : PSO, CSO, GSO (JD and responsibilities)
- Direct reporting of safety officers to top management is encouraged
- PROM & PREM – patient centric approach
- Clinical audits – at least one in every department
- Surveillance - preparedness
- Standardized Mortality Rate – SMR monitoring (new indicator)

JCI

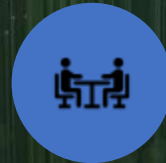
- 6 months to 1 year look back period which makes us sure that we carry on with the required documentation
- Brings in innovation and technologies in the survey process (Halo lens, virtual surveys)
- Structured Patient tracers : end to end
- Insights on the updated and best practices around the world
- Facility, IPSP, SQE (C & P)
- The survey guide
- SAFER Evaluation Score Card



ACI



Looks at current processes on patient safety



Emphasis on patient client interviews and their feedback on the services offered.



Chapter wise emphasis



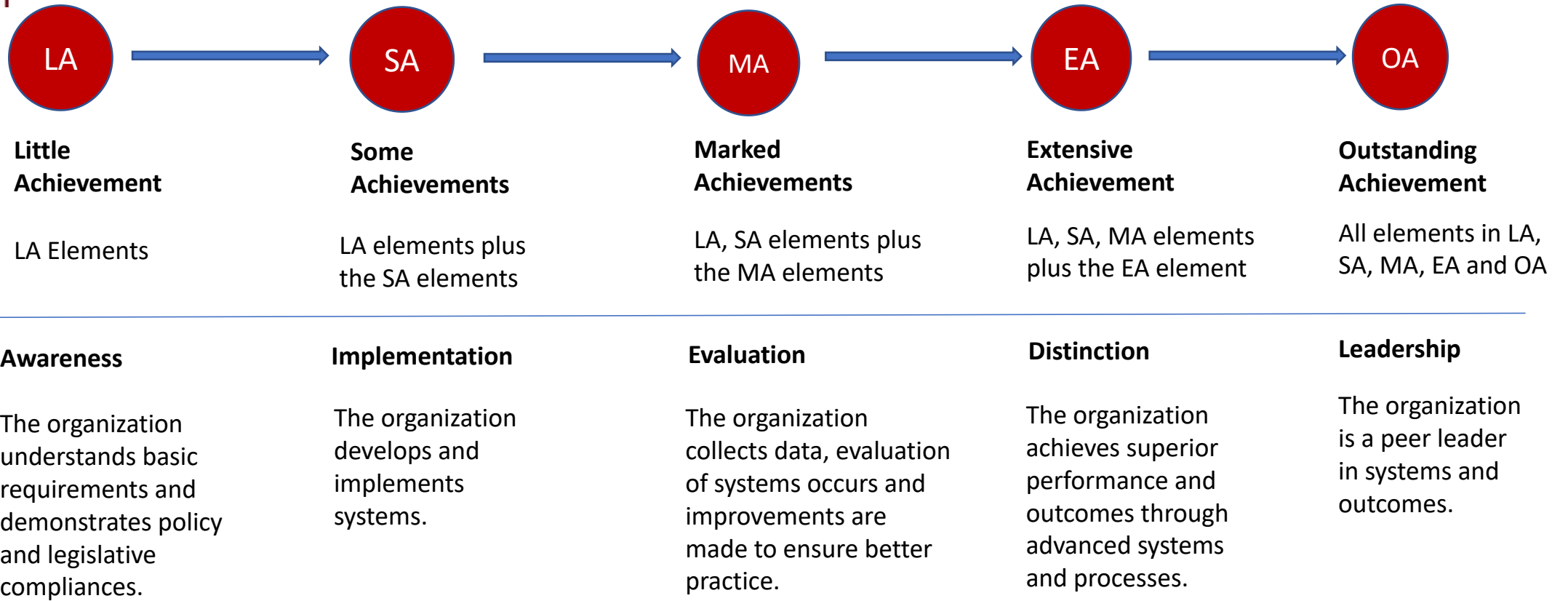
Focus on employees and work life balance.



Looks at each department as a separate entity with all applicable standards

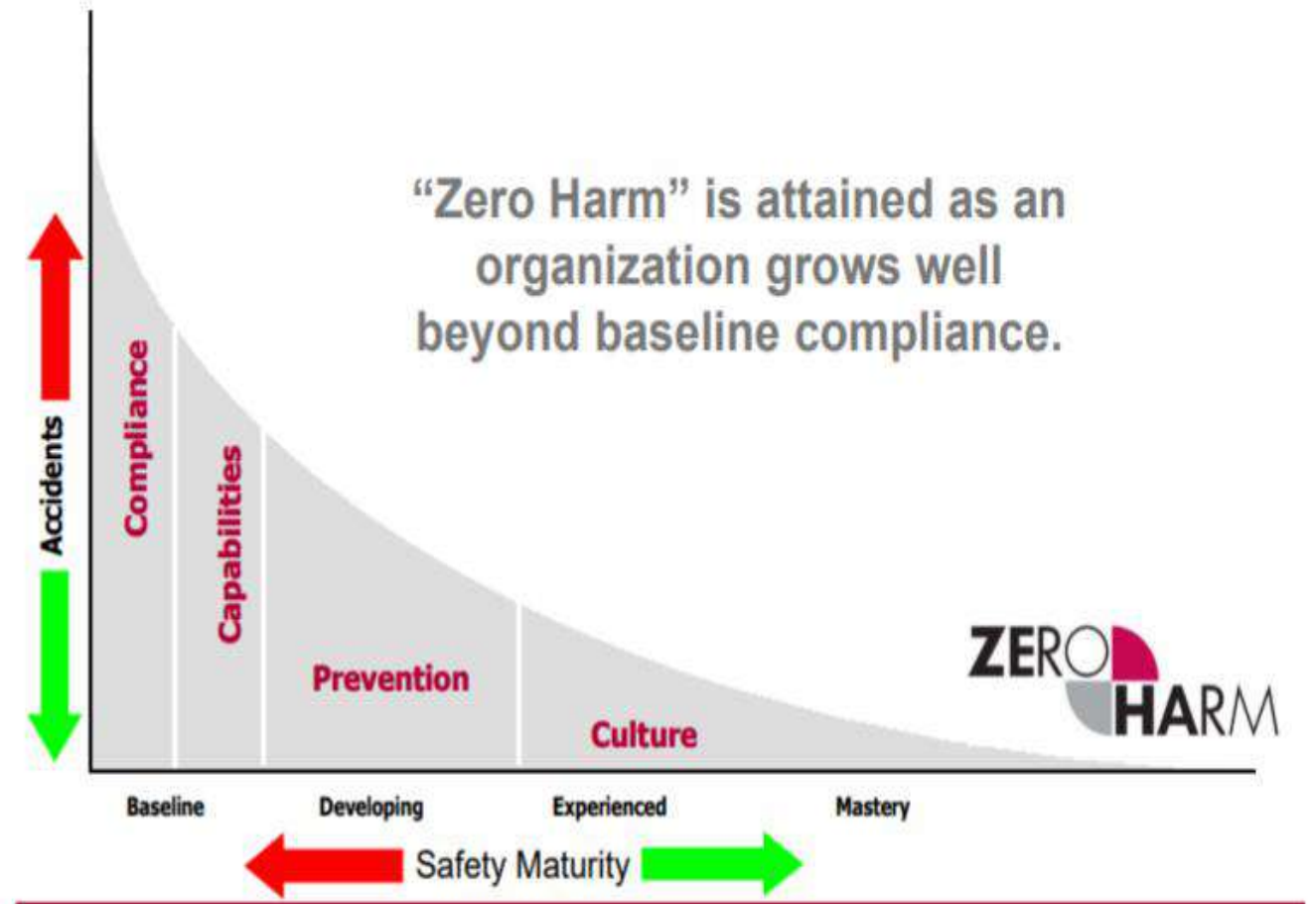
Standalone department can go for accreditation like a dental service or ambulatory Service etc along with organizational standards

Evaluation & Quality Improvement Program - EQuIP



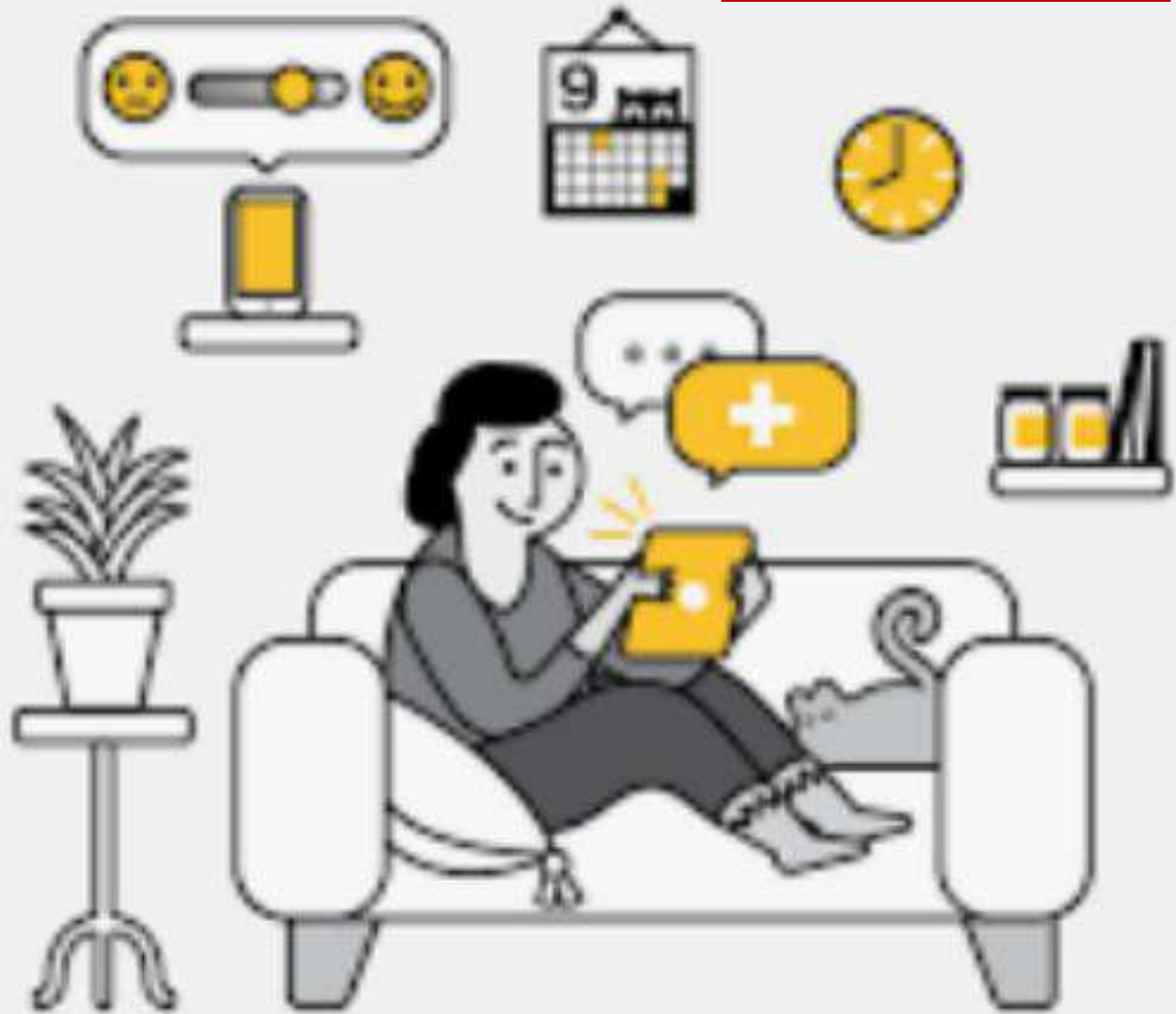
The criterion rating format will assist organizations to better understand how the elements can support continuous improvement.

Creating a Zero harm safety culture



Patient Reported Outcome measures (PROM) & Patient Reported Experience Measures (PREM)
Empowering patients and involving them in their health care decisions

- **Patient centered care**
- **Value based payment approaches**
- **PROMs &PREMs play a more prominent role**





Hospital accreditation

Thank YOU

