
Volume 11, Issue 4 / 2009 - Management

Accreditation for Ambulatory Facilities Value of International Recognition and Managers Role

Background

Several studies have demonstrated that the role of hospitals is changing; services formerly provided by hospitals are now provided by other kind of facilities, like community healthcare centres or ambulatory settings (also named outpatient clinics, polyclinics, poliambulatory); further it is becoming more and more clear that hospitals are not closed systems but that there are connections with healthcare providers before and after hospital care, outside the hospital.

Hospitals in Europe are facing many different challenges like ageing populations, changing patterns of diseases, mobile healthcare professionals, new technologies and new financing mechanisms. Some recent trends, like a continuous compression of length of stay, efforts to improve quality of care, greater use of ambulatory care and home care, seem confirmed and destined to continue.

On the other hand, the concept of continuity of care is gaining more and more importance; this concept implies the development of policies to counterbalance the tendency towards overspecialisation. Monospecialty healthcare providers (like eye clinics, dialysis centres, endoscopy centres and so forth) may provide very efficient services, but this does not necessarily mean that the whole system will increase its efficiency; questions about patient safety may arise which need to be addressed.

Joint Commission International has developed several accreditation programmes covering different settings of care with the main aim of pursuing and recognising quality and continuity of care, safety of patients, and, at the same time, exploiting professional skills and organisation strengths.

Amongst JCI accreditation programmes there is a significant overlap with the main goal of integrating different phases of care, leveraging cooperation and integration among different providers, focusing on common areas of risk in addition to facility-specific risks.

Ambulatory Care JCI International Accreditation Programme

It is quite difficult finding a definition of ambulatory care that fits with different healthcare systems, different cultures, social values and resources available. In general it can be said that the word can be used to identify a physical location where clinical services are provided to individuals on an outpatient basis. This kind of facility can be a freestanding organisation, or can be physically embedded in a facility for inpatients (hospitals, long term care facilities). And services provided may vary from basic diagnostic centres to very complex surgery or cardiac catheterisation centres. On the other hand, by outpatient JCI means persons who do not need the level of care associated with the more structured environment of an inpatient or residential programme.

Meaning of Accreditation

Accreditation is a process in which an entity, separate and distinct from the healthcare organisation, usually nongovernmental, assesses the healthcare organisation to determine if it meets a set of requirements (standards) designed to improve the safety and quality of care. Accreditation is usually voluntary. Accreditation standards are usually regarded as optimal and achievable. Accreditation provides a visible commitment by an organisation to improve the safety and quality of patient care, ensure a safe care environment, and continually work to reduce risks to patients and staff. Accreditation has gained worldwide attention as an effective quality evaluation and management tool.

Value of Accreditation

The accreditation process is designed to create a culture of safety and quality within an organisation that strives to continually improve patient care processes and results. In doing so, organisations

Improve public trust that the organisation is concerned for patient safety and the quality of care;

Provide a safe and efficient work environment that contributes to worker satisfaction;

Negotiate with sources of payment for care with data on the quality of care;

Listen to patients and their families, respect their rights, and involve them in the care process as partners;

Create a culture that is open to learning from the timely reporting of adverse events and safety concerns;

Establish collaborative leadership that sets priorities for and ensures continuous leadership for quality and patient safety at all levels, and

Grants recognition from third payers internationally and allows improvement of competitive strategies.

Ambulatory Programme Characteristics

JCI accreditation programmes are based on an international framework of standards adaptable to local needs. The programmes are characterised by:

International consensus standards, developed and maintained by an international task force, and approved by an international Board, are the basis of the accreditation programme;

The underlying philosophy of the standards is based on principles of quality management and continuous quality improvement;

The accreditation process is designed to accommodate the legal, religious, and/or cultural factors within a country. Although the standards set uniform, high expectations for the safety and quality of patient care, country-specific considerations related to compliance with those expectations are part of the accreditation process;

The on-site survey team and agenda will vary depending on the organisation's size and type of services provided. For example, a large multi-specialty ambulatory organisation may require a four-day survey by a physician, a nurse, and an administrator, while a smaller dental centre or diagnostic centre may only require a two-day survey by a smaller team, and

JCI accreditation is designed to be valid, reliable and objective. Based on the analysis of the survey findings, final accreditation decisions are made by an international accreditation committee.

How the Standards are Organised

The standards are organised around the important functions common to all healthcare organisations. The functional organisation of standards is now the most widely used around the world and has been validated by scientific study, testing and application.

The standards are grouped by those functions related to providing patient care and those related to providing a safe, effective, and well-managed organisation. These functions apply to the entire organisation as well as to each department, unit, or service within the organisation.

Patient-Centred Standards

International Patient Safety Goals (IPSG)

Patient Access and Assessment (PAA)

Patient Care and Care Continuity (PCC)

Patient Rights and Responsibilities (PRR)

Patient Record and Information Flow (PRI)

Patient Services and Contracts (PSC)

Patient and Family Education (PFE)

Patient Anesthesia and Surgery (PAS)

Healthcare Organisation

Management Standards

Improvement in Quality and Patient Safety (IQS)

Infection Control and Facility Safety (IFS)

Human Resource Management (HRM)

Governance and Leadership (GAL)

The survey process gathers standards compliance information throughout the entire organisation and the accreditation decision is based on the overall level of compliance found throughout the entire organisation.

Managers' Role

Providing excellent clinical services requires effective leadership. That leadership comes from many sources in a healthcare organisation, including governing leaders, and others who hold positions of leadership, responsibility, and trust. Each organisation must identify these individuals and involve them in ensuring that the organisation is an effective, efficient resource for the community and its patients.

In particular, these leaders must identify the organisation's mission and make sure that the resources needed to fulfil this mission are available. For many organisations, this does not mean adding new resources but more efficiently using current resources, even when they are scarce. Also, leaders must work together to coordinate and integrate all of the organisation's activities, including those designed to improve patient care and clinical services. Effective leadership begins with understanding the various responsibilities and authority of individuals in the organisation and how these individuals work together. Those who govern, manage, and lead an organisation have both authority and responsibility. Collectively and individually, they are responsible for complying with law and regulation and for meeting the organisation's responsibility to the patient population served.

Over time, effective leadership helps overcome perceived barriers and communication problems between departments and services in the organisation, and the organisation becomes more efficient and effective. Services become increasingly integrated. In particular, the integration of all quality management and improvement activities throughout the organisation results in improved patient outcomes.

Conclusions

Accreditation programmes for hospitals are quite widespread in Europe and the international programmes are increasing their penetration on the European market; the unrestrainable changes in the hospital sector parallel changes in the other healthcare sectors. The ambulatory sector is one of them and because of its increasing importance, it deserves the same kind of attention as far as quality and safety are concerned.

Author:

Carlo Ramponi, MD MBA

Managing Director JCI Europe Office

Cramponi@jcrinc.com

Published on : Mon, 21 Sep 2009