

Accreditation in Healthcare (Part II)

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MHA623
Healthcare Quality

Lecture 10



Our Roadmap

Quality improvement
methodologies Overview

1

Common
planning tools

3

Six-Sigma
methodology

5

Planning
phase
orientation

2

PDCA cycle

4

Accreditation
overview

6



Intended Objectives

1. Define the purpose and structure of JCI accreditation.
2. List key benefits of JCI for healthcare facilities.
3. Recognize main components of JCI standards.
4. Relate standards to patient care and safety.
5. Understand leadership and ethics in accreditation.

Overview

- **JCI:** Joint Commission International – a global leader in healthcare accreditation.
- **Aim:** Improve patient safety and quality of care worldwide.
- **Manual:** Structured into chapters covering care functions, eligibility, and accreditation processes.

Value of JCI Accreditation

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- Recognized Gold Seal of Approval®.
- Boosts hospital's competitive edge and credibility.
- Required by many insurers and agencies.
- Drives performance improvement and high reliability.
- Enhances staff education and leadership in safety.
- Provides expert support and continuous learning.



Standards Development Process

- Involves focus groups, literature reviews, expert input.
- Guided by global trends and evidence-based practices.
- Reviewed by Technical Advisory Panel.
- Public feedback via online field review.
- Revisions based on feedback, legal/regulatory needs, and evolving practices.



Organization of the Hospital Accreditation Manual

- **Section I:** Accreditation Participation Requirements (APRs).
- **Section II:** Patient-Centered Standards.
- **Section III:** Health Care Organization Management Standards.
- **Section IV:** Global Health Impact Standards.
- **Section V:** Academic Medical Center Standards.
- **Appendices include:** Patient Safety Systems, Sentinel Event Policy, etc.

Key Elements in Each Standards Chapter

- **Overview:** purpose of the chapter.
- **Standards List:** detailed structure.
- **Intent:** explains rationale behind the standard.
- **Measurable Elements (MEs):** scoring criteria for compliance.
- **Examples & Notes:** help clarify expectations



Documentation Requirements

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- Marked with icon **D** when required.
- Focus on implementation, not just paperwork.
- Documents may include **policies, reports, licenses**, etc.
- Can be electronic or paper-based.

Chapter

Section I

Accreditation Participation Requirements (APRs)



1. Accreditation Participation Requirements (APR)

- Submit accurate information to JCI and report changes (e.g., services, leadership).
- Grant JCI surveys and access to external evaluation reports.
- Use quality measures for continuous improvement.
- Only accredited hospitals can display the Gold Seal.
- Protect staff reporting safety concerns from retaliation and notify the public on how to report concerns.
- Ensure no "Immediate Threat to Health or Safety" exists.

Chapter

Section II

Patient-Centered Standards



1. Access to Care and Continuity of Care (ACC)

➤ Overview :

- Focuses on matching patient needs with services and ensuring smooth transitions.

➤ Key Standards :

- **Admission:** Prioritize urgent cases; inform patients of delays.
- **Patient Flow:** Educate patients/families on care plans and costs at admission.
- **Discharge/Transfer:** Plan for continuing care; provide summaries for transfers.
- **Transportation:** Ensure safe, compliant transport services.

2. Assessment of Patients (AOP)

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➤ Overview :

- Identifies patient needs through history, physical, and ongoing reassessment.

➤ Key Standards :

- **Initial Assessment:** Includes physical, psychological, social, and pain screening.
- **Falls Prevention:** Implement processes to reduce fall risks.
- **Lab/Imaging Services:** Ensure quality, timely results, and equipment safety.
- **Blood Transfusion:** Follow guidelines for safe handling and administration.

3. Anesthesia and Surgical Care (ASC)

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➤ Overview :

- Covers sedation, anesthesia, and surgical care with a focus on safety.

➤ Key Standards :

- **Sedation:** Standardize practices; qualify practitioners; document risks/benefits.
- **Anesthesia:** Conduct pre-anesthesia assessments; monitor physiological status.
- **Surgery:** Plan care pre/post-op; discuss risks/alternatives; document procedures.

4. Care of Patients (COP)

➤ Overview :

- Ensures individualized, coordinated care for all patients, including high-risk groups.

➤ Key Standards :

- **Care Plans:** Develop and modify based on patient needs.
- **High-Risk Services:** Follow guidelines for resuscitation, suicide prevention, and pain management.
- **Transplant Programs:** Oversee donor/recipient processes; ensure informed consent.
- **End-of-Life Care:** Address comfort, dignity, and family needs.

5. International Patient Safety Goals (IPSG)

Chapter

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➤ Overview :

- Mandatory goals to address critical safety areas.

➤ Key Goals :

- **Correct Identification:** Prevent errors with standardized patient ID processes.
- **Communication:** Report critical test results; standardize handovers.
- **Medication Safety:** Manage high-alert and look-alike/sound-alike medications.
- **Safe Surgery:** Verify procedures with time-outs and site marking.
- **Infection Prevention:** Implement hand hygiene guidelines.

6. Medication Management and Use (MMU)

➤ Overview :

- Medications are vital for diagnosis, treatment, and prevention.
- Medication errors are a leading cause of preventable harm globally.
- **Errors can occur at all stages:** prescribing, dispensing, administration, and monitoring. we must do our best to prevent them.

6. Medication Management and Use (MMU)

➤ Key Standards :

- **Organization:** Manage medication processes, antimicrobial stewardship, and recall systems.
- **Storage:** Ensure safe storage, especially for emergency medications.
- **Prescribing:** Define qualified prescribers and safe practices (e.g., reconciliation).
- **Dispensing/Administering:** Ensure right dose, patient, and time.
- **Monitoring:** Track adverse drug events and errors.

7. Patient-Centered Care (PCC)

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➤ Overview :

- Care must respect patient/family needs, values, and cultural beliefs.
- Education and informed consent are critical for decision-making.

➤ Key Standards :

- **Rights:** Protect privacy, confidentiality, and access to information.
- **Engagement:** Involve patients/families in care decisions (e.g., treatment refusal).
- **Education:** Assess and document patient learning needs.
- **Complaints:** Provide a process for reporting concerns/errors.

Chapter

Section III

Health Care Organization Management Standards



1. Facility Management and Safety (FMS)

➤ Overview :

- Ensure safe, functional facilities by managing risks (e.g., fire, utilities, hazards).

➤ Key Standards :

- **Safety/Security:** Comply with laws; inspect facilities regularly.
- **Hazardous Materials:** Proper handling and disposal.
- **Emergency Preparedness:** Plan for disasters/epidemics.
- **Medical Equipment:** Maintain and monitor for recalls.
- **Utilities:** Ensure water/energy availability and quality.

2. Governance, Leadership, and Direction (GLD)

Level I: GLD.01.00			
Governance			
Level II: GLD.02.00			
Chief Executive			
Level III: GLD.03.00 – GLD.05.03			
Hospital Leaders			
Medicine	Nursing	Administration	Others
Level IV: GLD.06.00 – GLD.06.02			
Department/Service Leaders			
Clinical Departments	Diagnostic Services	Pharmacy	Ancillary Service
Managers of Clinical and Nonclinical Services			
GLD.07.00 – GLD.09.00			
Organization and Clinical Ethics Health Professional Education Human Subjects Research			

2. Governance, Leadership, and Direction (GLD)

➤ Overview :

- Effective leadership is essential for quality/safety culture.

➤ Key Standards :

- **Structure:** Define roles of governance, executives, and departments.
- **Quality/Safety:** Prioritize improvement initiatives and measure outcomes.
- **Ethics:** Promote ethical decision-making and patient rights.
- **Contracts:** Ensure qualified staff and safe supply chains.

3. Health Care Technology (HCT)

➤ Overview :

- Technology (EHRs, AI, telehealth) enhances care but requires oversight.

➤ Key Standards :

- **IT Management:** Protect data privacy and cybersecurity.
- **Telehealth/AI:** Ensure guidelines for safe use.
- **Downtime Plans:** Prepare for system failures.

4. Management of Information (MOI)

➤ Overview :

- Effective information management prevents communication errors.

➤ Key Standards :

- **Confidentiality:** Secure patient data against breaches.
- **Standardization:** Use uniform codes/abbreviations.
- **Medical Records:** Maintain accurate, accessible records.

5. Prevention and Control of Infections (PCI)

➤ Overview :

- Healthcare Associated Infections (HAIs) are a major risk; prevention requires hospital-wide efforts.

➤ Key Standards :

- **Program Oversight:** Assign qualified leaders for infection control.
- **Equipment/Sterilization:** Proper cleaning and disposal.
- **Transmission Prevention:** Protect staff/patients from outbreaks.
- **Education:** Train staff on hygiene and protocols.

6. Quality and Patient Safety (QPS)

➤ Overview :

- Data-driven improvements enhance care outcomes.

➤ Key Standards :

- **Measurement:** Collect/analyze data to identify trends.
- **Improvement:** Prioritize and sustain changes.
- **Risk Management:** Proactively reduce adverse events.

7. Staff Qualifications and Education (SQE)

➤ Overview :

- Qualified staff are critical for safe care.

➤ Key Standards :

- **Credentials:** Verify licenses and competencies.
- **Training:** Provide orientation and ongoing education.
- **Health/Safety:** Vaccinate staff and prevent workplace violence.

Chapter

Section IV

Global Health Impact

Standards



Global Health Impact (GHI)

Chapter

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➤ Overview :

- Hospitals must address climate risks and sustainability.

➤ Key Standards :

- **Governance:** Integrate environmental strategies.
- **Resource Use:** Reduce energy/water waste.
- **Supply Chain:** Minimize environmental impact.

Chapter

Section V

Academic Medical Center Standards



1. Human Subjects Research (HRP)

➤ Overview :

- Protect participants in clinical research.

➤ Key Standards :

- **Ethics Review:** Institutional Review Board (**IRB**) oversight for all studies.
- **Safety:** Manage conflicts of interest and adverse events.

2. Medical Professional Education (MPE)

➤ Overview :

- Ensure quality/safety in teaching settings.

➤ Key Standards :

- **Supervision:** Trainees must be overseen by qualified staff.
- **Compliance:** Align education with hospital policies.

Wrap Up

1. JCI promotes global patient safety and quality.
2. Manual covers clinical and management standards.
3. Standards include intent, measures, and docs.
4. Patient-centered care is a core focus.

Wrap Up

5. Safe medication use is essential.
6. Infection control requires system-wide effort.
7. Leadership ensures safety culture and improvement.
8. IRB ensures ethical research practices.



Thank You