

About accreditation

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Definition

"Accreditation" is a formal process by which an authorized body assesses and recognizes, as complying with established requirements (expressed as "standards"), a system (or network), an institution (or group), a (trans-institutional) program, or a component of an institution or facility, such as a blood bank. Because it is often conducted by an industry body, accreditation is sometimes referred to as "self-regulation." For institutions, "certification" may be synonymous with accreditation, but today the term is most commonly used in connection with individuals such as health care practitioners. "Certification" involves an authorized body granting recognition to individuals who have demonstrated specialized competence, knowledge or skills, often through formal examination in relation to specified learning requirements. Certification and accreditation can work hand-in-glove in that accreditation standards may require the employment of appropriately qualified individuals and needed qualifications may include appropriate certification.

Characteristics of accreditation

As understood currently, accreditation has the following characteristics:

- Voluntary (although it may be mandatory); the institution wishing to be accredited pays a fee to the accrediting organization.
- Principal goal is institutional development or improvement of its performance; preferably, with a focus on patients (including research subjects).
- Authorized body (usually a non-government organization) that performs the accreditation process; authority stems from the legitimacy of the accrediting organization's founders or sponsors and/or its charter
- Written/Published standards (preferably, available at no or nominal cost); transparent standard-setting process, including the opportunity for public comment.
- Criteria/Standards (requirements), which should encompass processes and their results, that are achievable by institutions to be accredited and are consistent with generally accepted notions of adequate performance, and, preferably, are based on evidence or otherwise validated by and harmonized with applicable regulations; standards may exceed minima embodied in regulations but generally fall short of the maximum possible or ideal performance but may be ratcheted up over time.
- Non-threatening "peer review" process (ie, systematic assessment by qualified assessors, who may comprise a "multi-disciplinary" team, of compliance with published standards) that emphasizes education, consultation, and technical assistance; including disclosure of interests, especially those that may be perceived as a potential conflict between the accrediting organization or its assessors and the institution being accredited and/or procedures for minimizing the potential for occurrence of such conflict.
- Publication of accreditation status (and, preferably, assessors' detailed findings).

Accreditation process

The process of accreditation generally involves:

- Application by the institution (applicant) that wants to be accredited.
- Performance and submission by the applicant of a "self-assessment."

- Desk review of the applicant's submission, often including its self-assessment.
- Site visit to the applicant (often called a "survey") by certified assessors (often called "surveyors") in which assessors may inspect premises, documents, etc, interview staff, observe processes, review (samples of) records (and may conduct "compliance tests"); generally accrediting organizations train and certify their own assessors, who are mostly volunteers (and are often peers or colleagues of people in the institutions being accredited).
- Exit de-briefing in which assessors may provide initial feedback to the applicant's management team, in part to test the validity of conclusions and to ensure there are no surprises in the accreditation report.
- Quality assurance of assessors' findings.
- Formal notification of results to the applicant, including feedback on how well the institution is meeting standards, including any deficiencies, and, sometimes, commendations on exceptional performance relative to some or all standards.
- Publication of accreditation status (and perhaps details of accreditation results).
- Monitoring of the applicant's performance regarding compliance with requirements, such as conditions of accreditation and standards.
- Periodic re-accreditation (that repeats the above steps in the process, usually using revised published standards that account for changes in the operational environment and that are more stringent than those used in the previous cycle intended to effect continuous improvement in performance).

Advantages of accreditation

The claimed advantages of accreditation include:

- For the accredited institution:
 - Achievable standards against which to gauge performance.
 - Information on competitors' quality; benchmarking scores to show where the institution's performance ranks, absolutely and in comparison to peers, and what the best performers are achieving.
 - Supportive consultation to assist the institution to improve quality and to achieve standards (by assessors, and firms owned or allied with, or themselves accredited by, the accrediting organization for this purpose).
 - The right to participate in certain programs, receive payment, etc; including approved supplier status, higher payments, or, in some instances, licensure.
 - Increased reputation among end-users, eg, patients and research subjects.
 - Reduced premiums for liability insurance when accreditation involves areas of high-risk.
- For the public
 - Publication of information on quality to which members of the public would otherwise not have access and cannot themselves make required assessments; competition can only work if there is reliable information on the quality of suppliers' performance.
 - If a sufficient percentage of institutions active in a field participate in accreditation, provides some measure of quality assurance and promotes continuous improvement in that field (assuming that accreditation standards and processes are meaningful).

Disadvantages of accreditation

Detractors often mention the following drawbacks of accreditation:

- For the institution (to be) accredited
 - Additional work and stress for management and staff, both with respect to the accreditation process (for reasons given below) and their production jobs within the institution (because of engendered competition and the need to strive to improve performance).
 - Changes to systems, processes, etc needed to meet standards and to improve performance; including required additions to and (re)training of staff.
 - Increased strictures and more constraints on professionals, from explicit institutional processes and greater vigilance in their implementation.
 - Cost, which is often disproportionately large for smaller, poorer institutions.
 - Risk to morale, reputation, and/or revenue if not accredited (especially if this status becomes known widely).
- For the public
 - Accreditation is not, and its precepts may conflict with, public accountability of institutions' and practitioners' performance.
 - Lack of evidence regarding its cost-effectiveness (or that of any type of EQA) [1]. Few programs have been evaluated, and the few evaluations that have been completed often find fault with accreditation. There is ample evidence of increased compliance with published standards (at least in the period immediately prior to surveys) [2]; less evidence of a convincing link between accreditation and performance [3]. At best, there may be some improvement in a limited number of participating institutions.
 - Its voluntary nature; institutions that participate are generally larger, wealthier, and cater to the best-off clients; those that need external quality review the most don't necessarily participate.
 - The accrediting organization is a captive of its industry.
 - Standards that are set low so that virtually all institutions can pass muster without meaningful improvement; at worst, that are tailored to an institution's capabilities or are "flexible," thereby resulting in the same end.
 - Process that may be without time limits so that no institution fails; accreditation is pending while the institution works on rectifying deficiencies or may never complete the process.
 - Lack of quality assurance and improvement on the part of the accrediting organization, resulting in variability (and hence lack of validity) of assessments and thus accreditation; including lack of sufficient ratcheting up of standards to ensure institutions' continuous improvement in performance.
 - Lack of transparency of the process and/or in not disclosing accreditation status or enough information about scores and deficiencies.
 - Lack of meaningful oversight of the accrediting organization and/or accreditation process, and, consequently, its failure to meet international standards, produce reliable assessments, and/or reveal serious deficiencies (as evidenced by constant scandals regarding their discovery at "accredited" institutions [4,5,6]).
 - Form over substance; including accredited institutions shining during the time of assessors' site visit, but not complying with standards at other times.

Incentives for accreditation

Before accreditation can gain widespread acceptance, it has to overcome a number of obstacles, including denial that there are any real problem (and the view that any reported incidents are merely the result of unstoppable evil people or "bad apples" in the institutional barrel), apathy, and cost. Incentives that might promote or accelerate accreditation include:

- Mandating it (in which it becomes a form of regulation except that the governing body may be somewhat independent of government, at least according to its charter).
- Permitting government funds to be dispersed only to accredited institutions.
- Contracting only with accredited institutions (on the part of government or private entities).
- Paying a premium for services rendered by an accredited institution (either directly or through vouchers used by clients).
- Subsidizing the cost of accreditation, especially for smaller institutions.
- Providing strong government support, eg, in the form of public statements (and, possibly, public education campaigns by government regulators that they favor accreditation as a means of improving compliance with applicable regulations).
- Mandating that institutions disclose by whom they are accredited in all publications, advertisements, etc (and, in the case of human research, in informed consent documents); including, if applicable, a statement that it has chosen not to be accredited by the applicable accrediting organization.
- Providing legal protection to quality improvement information, assessors' opinions, etc.

References

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2. Shaw CD. External assessment of health care. *BMJ* 2001; 322: 851-854.
3. Montagu D. Accreditation and other external quality assessment systems for healthcare. London, UK: Health Systems Resource Centre, May 2003.
4. Office of the Inspector General. The external review of hospital quality: The role of accreditation. Washington, DC: Department of Health and Human Services, July 1999 (OEI-01-97-00051), page 2.
5. Adams D. Government report finds fault with Joint Commission. *American Medical News* 2004; August 16.
6. Roche WF jr. Lab mistakes threaten credibility, spur lawsuits. *Los Angeles Times* 2005; December 2.