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Development of accreditation modules based on hospital types in Iran: Protocol for a mixed methods study

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Abstract:

BACKGROUND: Among different tools, accreditation is widely used worldwide to improve the quality and safety of hospital services. In Iran, as in many other countries, the same accreditation standards apply to all hospitals, regardless of their size and type of activity. This has given rise to many problems for hospitals.

MATERIALS AND METHODS: We will conduct this study in three phases: In the first phase, relevant individuals are interviewed to identify challenges caused to hospitals by applying the same standards for all types of hospitals and clarify issues that could be removed or changed in small hospitals. In the second phase, a scoping review is conducted on the literature about accreditation models worldwide. The first and second phases are conducted simultaneously, and a new accreditation model for Iran hospitals is derived by combining their results. In the final phase, using the Delphi technique, the obtained model and accreditation modules are verified during Delphi rounds.

DISCUSSION: A more appropriate accreditation model that matches the characteristics of the target hospitals could be the output of this study. It is expected that the model could improve the process of evaluating the quality of hospital services through the accreditation tool.

Keywords:

Accreditation, hospital bed capacity, special hospital, under 100

Introduction

A significant goal of a health system is to promote the quality and safety of hospital services.^[1] Health-care quality is a broad concept that can be defined as “the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge”.^[2] However, accurately assessing health-care quality is not easy because there needs to be more formal systems to monitor and ensure stability in health-care. Therefore, hospital accreditation has been frequently adopted worldwide to assess and improve health-care service quality.^[3]

Hospital accreditation is a standard compliance assessment process that is conducted by an independent institution from within or outside the country.^[4] The primary objective of accreditation is to ensure and stimulate high-quality and safe care.^[5] It is also defined as the “systematic assessment of hospitals against accepted standards” conducted by independent bodies external to the hospital structure, usually comprising nongovernmental and nonprofit organizations. The process includes staff training, the establishment of a team project, the selection of standards to be followed, and the implementation of specified requirements. It also comprises survey visits by a multidisciplinary health-care team, leading to a detailed report of identified areas of improvement and the next cycle of follow-up visits.^[2]

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Hospital accreditation was first initiated in the United States of America more than a hundred years ago by the College of Surgeons. In 1951, the Independent Joint Hospital Accreditation Group was established and later changed its name to its current one: Joint Commission on Accreditation of Healthcare Organizations.^[6]

The accreditation program in Iran was announced to hospitals in 2010 by the Ministry of Health. It is done periodically and every two years.^[7]

Accreditation has faced challenges during this time.^[8-10] One of the most severe challenges of the current accreditation program is the use of the same set of standards for the accreditation of all types of hospitals, regardless of their size and type of activity.^[9,11] This is one of the reasons why small hospitals deviate from the right path of development. Sometimes, small hospitals have to bear many side costs. For example, purchasing hospital waste disposal equipment with the autoclave method for a small hospital costs almost the same as that for a medium or large hospital; this cost cannot be easily justified.^[11]

Similarly, the accreditation of general and special hospitals with the same standards has led to problems. Some of these standards and issues are not used in special hospitals. On the other hand, some of the specific standards of these types of hospitals do not exist in Iran's generic hospital accreditation standards. Special hospitals have special conditions that lead to their correct evaluation and require specific standards and issues. In effect, work processes, equipment, and personnel differ in special hospitals and general hospitals.^[12] The same accreditation standards ignore the inherent difference between hospitals in size and general or specialized nature. In Iran, accreditation is a mandatory process that the Ministry of Health carries out, and the hospital's grade directly impacts the amount paid by insurance organizations. Like any other organization, the hospital's survival depends on financial resources. Accreditation—one of the most essential factors determining these resources—is essential for the country's health system and hospitals.^[1,7]

Some studies have been conducted on developing accreditation standards based on hospital types in worldwide level.

Khodaei *et al.*^[13] initially conducted a systematic search and reviewed databases to identify the best models for sampling. After that, the Delphi technique was used in three phases to present the appropriate model. Finally, the proposed leadership and management model was determined in nine fields and 49 standards.

Galukande *et al.*, in a study to develop hospital accreditation standards in Uganda, converted these standards into 485 standards in seven areas and reviewed them through a self-assessment in 40 hospitals. This research showed that self-assessment for low-income countries is a low-cost approach and can be used as an excellent precursor to creating a national accreditation institution.^[14]

Our study endeavors to facilitate the accreditation process and reduce the number of existing standards and metrics for small and special hospitals separately. Besides, we compile the main modules of accreditation for special hospitals. All of these are presented in the form of a model.

Materials and Methods

This mixed methods study will be conducted in three phases in 2023.

Phase I

In the first phase, semi-structured interviews (with open-ended questions) are used to identify the challenges caused by applying the same accreditation standards in small and special hospitals and to clarify the standards and issues in the latest version of Iran's accreditation (5th edition) that can be excluded or changed for target hospitals. Given the nature of the required data and the study's objectives, a purposeful sampling method with maximum variation will be employed. The study population is the relevant people in hospital accreditation, including accreditation experts of the Ministry of Health and quality improvement managers and experts from the selected hospitals in Isfahan, Tehran, and Mashhad. Interviews are continued until data saturation is achieved.

The directed content analysis method is used to analyze qualitative data. This content analysis methodology uses a theory as a guide to explore a phenomenon of interest.^[15] Finally, the main themes are specified by examining overlapping and semantic relationships of the categories. Guba and Lincoln's criteria^[16] of credibility, confirmability, dependability, and transformability are adapted to enhance the accuracy of research. In this regard, the results are presented to the interviewees during the interviews, after their completion, and following their analysis; feedback is received, and then they are modified if there are contradictions. The coding procedure is performed separately by two researchers. Participation in interviews are fulfilled with prior coordination, agreement on time and place, and rights to interrupt the interviews with the interviewees. Data are analyzed using MAXQDA 20. This step is qualitative, and its strategy is content analysis.

Phase II

In the second phase, a scoping review is conducted on literature about international accreditation models. The following electronic databases have been searched from inception to the present: PubMed, Scopus, Web of Sciences, Embase, and ProQuest. We also search the gray literature and the reference lists of included articles to help identify what has been done worldwide to improve the accreditation of small and special hospitals. For this purpose, the search is carried out on websites of relevant international institutions, databases, and websites of health ministries in selected countries. The criterion for selecting the given countries and models of accreditation is accessibility to information. In the case of countries, pioneers in small hospitals, special hospital accreditation, and regional countries similar to Iran are selected. The models of relevant international institutions are extracted as well. The first and second phases are conducted simultaneously, and a new accreditation model for Iran hospitals is derived by combining their results.

Phase III

In the third phase, the Delphi technique is used to verify the proposed initial model. The members of the Delphi panel should have in-depth knowledge of and differing perspectives on the issue under study and be highly credible in relevant scientific communities. During the Delphi sessions, the initial model and accreditation modules will be weighted using a questionnaire (nine-point Likert scale). This step is quantitative, and its strategy to analyze data is Delphi. Finally, the average scores of each module is measured

with the IBM SPSS Statistics, and the modules that receive an average score are selected.

The schematic design of the three phases are presented in Figure 1.

Discussion

The starting point of this study was the shared understanding that the researchers had achieved through their work experience, as well as the findings of previous studies that show applying the same standards to all types of hospitals creates challenges. This shared understanding is related to the challenges faced by small and special hospitals. These challenges are caused by applying the same accreditation standards for all types of hospitals, regardless of their size and type of activity. The output of this study will be a developed accreditation model that fits the characteristics of the target hospitals. The model could improve the process of evaluating the quality of hospital services through the accreditation tool. The findings of this study will be published in an open-access peer-reviewed journal to make the results widely available to those working in hospital accreditation and to policymakers. The results will be presented at relevant national and international research meetings.

Ethics approval and consent to participate

Ethical approval of the study was obtained from the research ethics committee of the Isfahan University of Medical (Ethics code: IR.MUI.NUREMA.REC.1401.082). The main ethical issues involved in this study are

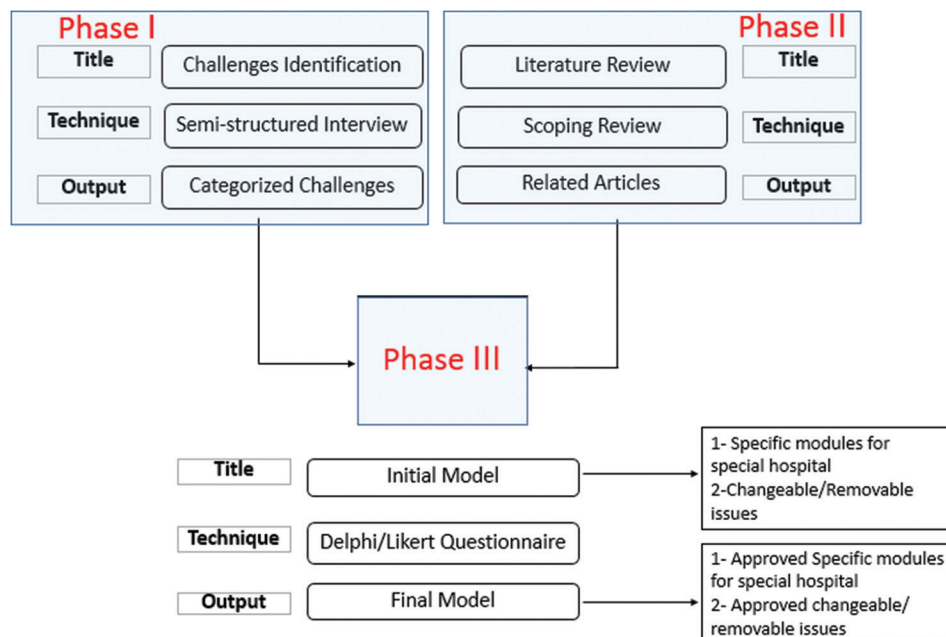


Figure 1: Schematic design of materials and methods

respondents' rights to self-determination, anonymity, and confidentiality. Respondents will be given complete information on the purpose and design of the study. Participation will be voluntary, and participants can withdraw from the study at any point. Written and verbal informed consent will be obtained from all participants. Relevant guidelines and regulations will carry out all methods.

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Conflicts of interest

There are no conflicts of interest.

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