Accreditation and Licensing
Objectives

At the end of this session, participants will be able to:

- Identify key regulatory mechanisms for improving quality of health services
- Discuss the main features of accreditation and licensing as instruments of quality regulation in the health sector
- Describe experiences applying various forms of licensing and accreditation in the LAC Region and key challenges
Steering through Regulation: Mechanisms for Assuring Quality

- Defining standards of care, scopes of practice, requirements for entry
- Patients’ rights legislation
- Regulation of insurance companies and private providers
- External evaluation: Licensing of providers and facilities, accreditation, and certification
Quality Assurance

Defining Quality

Improving Quality

Measuring Quality

QA
Licensing and Accreditation as Mechanisms for Quality Assurance

- Widespread use in North America and Western Europe
- Limited experience with accreditation and quality regulation in LAC Region
- In context of increased interest in Steering Role, useful to consider as instruments for achieving quality goals of Health Sector Reform
Assuring Quality through External Evaluation

- Licensing of Professionals
- Licensing of Facilities
- Certification of Professionals
- Accreditation:
  - Voluntary Hospital Accreditation
  - Facilitated
  - “Service-specific” or Focused Accreditation
Licensing of Professionals

- Governmental authority grants permission to an individual practitioner to engage in a profession.
- Ensure that the individual meets minimum standards to protect health and safety.
Mechanisms of Professional Licensure

- Proof of education
- Examination
- Fee
- Proof of continuing education
- Periodic renewal
Licensing of Facilities

- Government grants permission for a health care organization to operate
- Minimum standards to protect health and safety
- On-site inspection
- Maintenance of licensure is required
Recent Experiences with Facility Licensing Schemes in LAC

Honduras: Licensing of PHC Facilities by Ministry of Health

- Minimum requirements for human resources, existence of norms, infrastructure, equipment and supplies, and service delivery
- Some standards would be classified as “indispensable” while others “convenient”; license granted for compliance with 100% of indispensable and 80% of convenient standards
Recent Experiences with Facility Licensing Schemes in LAC

- Honduras: Licensing of PHC Facilities by Ministry of Health
  - Baseline study (2002) revealed needs to strengthen supervision and identified facilities requiring further investment to meet minimum requirements
  - Preliminary results used to allocate resources to strengthen deficient facilities
  - Obstacles to implementation: legal approval, limited funding, limited human resources
Recent Experiences with Facility Licensing Schemes in LAC

- Dominican Republic: Registration of Public and Private Health Care Facilities
  - Laws 42-01 and 87-01 (2001) gave Secretariat of Health authority to approve private and public health facilities based on periodic review and regulation
  - Established “Registration” by which facilities must comply with standards set by the Consejo Nacional de Salud, based on level of care provided
Recent Experiences with Facility Licensing Schemes in LAC

- Dominican Republic: Registration of Public and Private Health Care Facilities
  - Standards cover physical infrastructure, qualifications of personnel, documentation, information, security and hygiene, and management/technical and administrative procedures
Recent Experiences with Facility Licensing Schemes in LAC

- Dominican Republic: Registration of Public and Private Health Care Facilities
  - Enforcement and verification mechanisms defined
  - Registration/permission to operate can be revoked
  - Implementation process only recently begun
Certification of Professionals

- Governmental or non-governmental body evaluates and recognizes the individual for meeting pre-determined requirements.

- Usually the practitioner has received additional education and training and demonstrated competence in a specialty area.
Examples of Professional Certification

- Medical specialties, e.g., obstetrics & gynecology
- Nursing specialties, e.g., critical care nursing
- Specific skills, e.g., cardio-pulmonary resuscitation (CPR)
Accreditation

A recognized body assesses and acknowledges that a health care organization meets pre-determined and published standards.
Characteristics of Accreditation

- Optimal standards
- Encourages continuous improvement
- Peer reviewers
- Periodic evaluation
- Often voluntary
Why Accredit?

- Maintain & improve quality
- Stimulate & improve the integration & management of services
- Establish a comparative data base
- Reduce health care costs
- Provide education & consultation
- Strengthen the public’s confidence in health care
Accreditation program requirements

- Relevant and achievable performance standards
- Survey and decision process is objective and transparent
- Knowledgeable and credible surveyors
- Education and support to facilities in meeting standards
Components of an Accreditation System

- Mission and Philosophy
- Published Performance Standards
- Infrastructure and Authority Accreditation
- Field Operations
- Program Sustainability and Funding
- Accreditation Database
- Decision Methodology and Rules

Healthcare Accreditation System
Mission and Philosophy

- Government or nongovernmental?
- Voluntary or regulated by law?
- Facilitated or not?
Infrastructure and Authority

- Who will be key decision-makers?
- Will there be a special committee?
Management of Field Operations

- Selection and training of surveyors
- Supervision and ongoing education of surveyors
- Education and consultation to health care organizations
- Pre-survey processes
Management of Field Operations (cont’d.)

- Field operations
- Standardized evaluation methodology
- On-site surveys
- Processes for documenting and scoring findings
- Post-survey analysis
Framework for Accreditation Decision-making

- Published thresholds of performance
- Levels or types of accreditation awards
- Rules regarding follow-up or corrective actions
- Format and distribution of report
- Policies regarding public disclosure
Accreditation Database

- Aggregate data
- Opportunities for improvement
- Benchmarking
Program Sustainability

- Financial viability
- Continuous improvement
- Revision and updating of standards
Voluntary Accreditation Among Private Hospitals in LAC

- Regional Accreditation Manual for Hospitals (PAHO & LAFH)
- Argentina: ITAES voluntary accreditation of 22 private hospitals
- Colombia: MOH adopted voluntary Unified Accreditation System for Hospitals (2002); accreditation standards and instruments developed; system still in design
Voluntary Accreditation Among Private Hospitals in LAC

- Brazil: Two major voluntary hospital accreditation initiatives developed (1998)
  - CBA (Joint Commission model) for private hospitals
  - ONA (applying PAHO standards) focused on public facilities; step-wise accreditation; accreditation surveys delegated to other organizations that follow ONA regulations
Focused Accreditation in LAC

- Brazil: PROQUALI Accreditation Model for Improving Reproductive Health in Primary Care Facilities
  - Infrastructure Support
  - Clinic-based accreditation process
  - Performance and quality improvement
  - Accreditation conducted by State Commissions (made up of Secretariat of Health, NGOs, Universities)
PROQUALI: Performance and Quality Improvement Model

CLIENT FOCUSED STRATEGIC PLANNING

CONTINUOUS LEARNING AND IMPROVEMENT

QUALITY AND CHANGE MANAGEMENT

- Desired Performance
- Actual Performance
- Gap
- Cause Analysis
- Intervention Identification and Design
- Intervention Implementation
- Evaluation
Focused Accreditation in LAC

- UNICEF Baby Friendly Hospital Initiative (BFHI)
  - An award/designation for hospitals with maternity services and birth centers
  - A process for implementing the WHO/UNICEF Ten Steps for Successful Breastfeeding
The BFHI Process

- Hospital/birth center self-appraisal of practices vis-à-vis the *Ten Steps*
- On-site evaluation when facility indicates readiness
- External review of the on-site evaluation
- International award upon successful completion of the above steps
Strengths of the BFHI

- Positive health implications of breastfeeding for mother and baby - connection to other MCH initiatives (nutrition, child spacing, etc.)
- Strong breastfeeding advocacy community
- Simplicity of the *Ten Steps*
- Strong evidence base of the *Ten Steps*
- Low cost implementation
- Replicable in diverse settings
Weaknesses of the BFHI

- Remedial training of health care providers
- Financial support varies
- Possible dilution with local implementation strategies
- Lack of forethought regarding maintenance of institutional standards
Youth-Friendly Services

Jamaica and South Africa
What are Youth-Friendly Services?

- Youth-friendly services have been designed to improve the quality of adolescent health services at primary care level & to strengthen the public sector's ability to respond appropriately to adolescent sexual reproductive health needs.
Key Objectives of Youth-Friendly Services

- To make health care services more accessible and acceptable to adolescents
- To establish national standards and criteria for adolescent health care in clinics
- To build the capacity of health care providers to improve service performance for the delivery of youth-friendly services
Research Study Results in South Africa

- Average overall clinic score of all the youth-friendly clinics (79.89%) was significantly better (p= .001) than overall score the control group clinics (60.93%).
Comparison of Standards: Control and Youth-friendly Clinics
Challenges in Implementing Accreditation and Licensing

- Limited evaluation of impact
- Assuring adequate funding to sustain process
- Establishing authority of accrediting/licensing bodies
- Shortage of personnel to implement and coordinate quality regulation
- Lack of resources to facilitate achievement of standards