




**26<sup>th</sup> International Conference**  
 Dublin, Ireland  
 11<sup>th</sup> – 14<sup>th</sup> October 2009



Netherlands Institute for Accreditation in  
 Healthcare (NIAZ)  
 The journey to accreditation  
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[www.niaz.nl](http://www.niaz.nl)

**Content of my presentation**

1. NIAZ in short
2. Why did we start the journey to ISQua accreditation of the NIAZ- organization?
3. How did we go about it?
4. What are the experiences and results?



**NIAZ in short**

- 1998: Netherlands Institute for Accreditation of Hospitals
- 2009: Netherlands Institute for Accreditation of Healthcare



**How is NIAZ doing?**

- NIAZ is now working for all healthcare institutions in the Dutch-speaking countries in the World.
- 80 % of the Dutch hospitals are involved also a number of nursing homes, mental institutes, institutes for radiotherapy et all.
- 245 surveyors: medical specialists, managers et al.





**National Recognition**

- The NIAZ accreditation program has become a basis on which the government may rely for its own surveillance by the Inspectorate of Healthcare
- The Inspectorate of Healthcare builds upon NIAZ-assessment to prevent extra pressure on the organisations



## Slide 2

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**HB2**

Hélène Beaud, 05/10/2009

## Why ISQua- accreditation? (1)

- The NIAZ needed to develop in depth, further professionalize
- The program to further professionalize has been combined with receiving an ISQua accreditation status



## Why ISQua- accreditation? (2)

Immediate cause: our first adverse event

**NIAZ has to be a confidential Institute:**

If the NIAZ delivers its appraisal it is absolutely out of the question there be structural flaws



## What does a NIAZ-accreditation stand for?

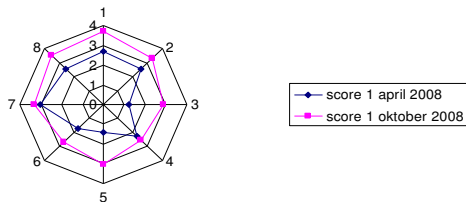


## Process of preparation

- Self assessment
- Plan of improvement and implementation
- Monitoring the progress
- Internal audit



## Monitoring progress



## Internal audit

- Audit is carried out by two NIAZ-surveyors during two days
- Audit based on the ISQua self-evaluation report
- Recommendations performed before external ISQua audit when possible



## Experiences

- A tough job
- A blueprint of the organization
- Self-evaluation by whole staff, involvement of governing body
- Feed back team leaders and NIAZ surveyors
- Support for improvement and implementation



## Results

- NIAZ has met international Standards
- ISQua accreditation is a tool to improvement and accountability
- International recognition offers a strong position
- Recommendations and improvement points are clear and useful to further professionalize



## Results



ISQua accreditations 2009



Partner in accountability and improvement




## The Journey to Accreditation

Pre Conference Symposium  
26<sup>th</sup> ISQua Conference  
October 11-14, 2009, Dublin

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Deputy Director

National Accreditation Board for Hospitals & Healthcare Providers (NABH)  
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## National Accreditation Board for Hospitals & Healthcare Providers (NABH)

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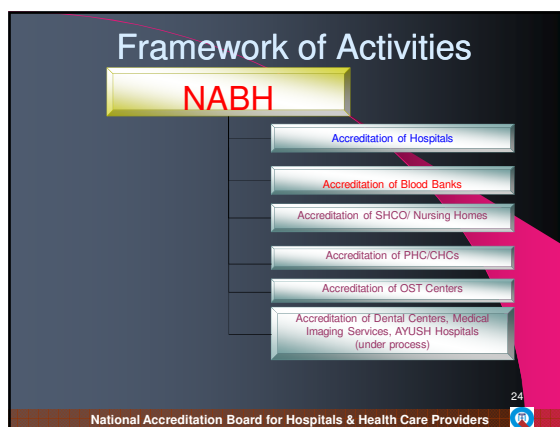
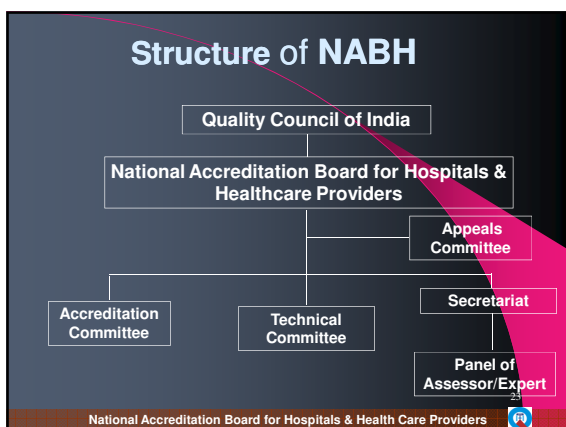
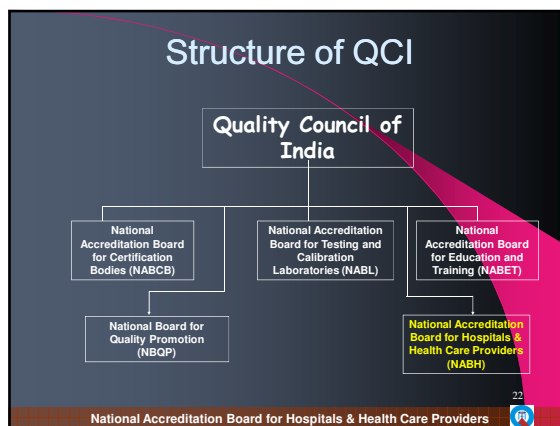
## A constituent board of Quality Council of India (QCI)

### Set up in 2005

To provide accreditation services to hospitals and healthcare providers

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## Hospital Accreditation Program

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### June 2005

- ✓ Technical Committee
- ✓ Briefing the committee and initial workshop for outline the framework, priorities and timeframe.
- ✓ Defining the Terms of Reference including principles and resources.

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### July 2005

- ✓ Review of available literature
  - Scientific literature
  - JCI Standards
  - UK Healthcare Quality Standards
  - Thailand Standards
  - Apollo Draft Standards
  - Academy of Hospital Administration Draft Standards
  - JCI Survey compliance data
  - Research Findings
  - Individual input from field experts and key stakeholders
  - ISO 9001-2000

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### July 2005

- ✓ Workshop for deciding the methodology of drafting the standards.
- ✓ Discussion on incorporating national regulatory requirements

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### August - November 2005

- ✓ Drafting of standards.

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### December 2005

- ✓ Editing and formatting

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### December 2005

- ✓ Review of the standards by a panel of 35 healthcare leaders (stakeholders) and incorporating changes.

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### January 2006

- ✓ Pilot testing
- ✓ Board approval and release of 1<sup>st</sup> ed., 2005
- ✓ Program launch

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### February 2006

- ✓ Sensitization workshops for hospitals
- ✓ Assessor training course

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NABH become an institutional member of the International Society for Quality in Health Care (ISQua) in 2006.



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### Why ISQua Recognition?

- ✓ India being already late in developing such program need to compete with the available standards having international recognition
- ✓ Challenges of acceptability by potential applicants
- ✓ Establishing credibility
- ✓ International benchmarking
- ✓ Medical tourism

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### July 2006

- ✓ Contacted ISQua for the procedure of accreditation
- ✓ Requested ISQua for a preliminary review of the Standards

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### September 2006

- ✓ Hospital Standards, 1<sup>st</sup> ed, 2005 submitted to ISQua for preliminary review.

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### November 2006

- ✓ Feedback from ISQua received and started working on to fill the gaps (on Principles 1-3).
- ✓ Technical Committee informed of the feedback and requested to work further.

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### February 2007

- ✓ Several rounds of TC meeting
- ✓ Tried to address the gaps and re-submitted the response to ISQua

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### June 2007

- ✓ Attempted the Self-Assessment against all 5 Principles.
- ✓ Compiled the evidences for Principles 4 & 5.

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### July 2007

- ✓ Formal request to ISQua made

### September 2007

- ✓ Application Form and organizational profile submitted, fees paid

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### July- December 2007

- ✓ Review was also due as per the policy to review standards every two year
- ✓ Standards revised to meet the ISQua Principles as well as consider the inputs gathered during assessments, assessor training program and feedback by TC

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### December 2007

- ✓ Revised standards 2<sup>nd</sup> ed., 2007 released.
- ✓ Self-assessment carried out against ISQua Principles
- ✓ Document submitted to ISQua for review.

### January 2008

- ✓ Revised standards 2<sup>nd</sup> ed. 2007, SAT and evidences to support requirements submitted to ISQua for assessment.

### March 2008

- ✓ Draft report on the assessment received from ISQua saying all principles rated as MET, of course there were certain recommendations and points for improvement.

### April 2008

- ✓ Voting panel recommended accreditation to NABH standards
- ✓ Endorsed by ISQua Executive Board in May 2008 for 4 years (April 2008 – March 2012)



- ✓ Action plan submitted in July 2008.

- ✓ Journey continues.....

## Thank You

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## Journey to accreditation

**Assessor Training Program**

**ISQua Accreditation Symposium  
Dublin 2009**

**Elizabeth Pringle**


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## Overview of key steps

- Importance of ISQua accreditation
- Project methodology
- Assessing compliance
- Accreditation process
- Outcomes
- Lessons learnt
- Post accreditation


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## Importance of ISQua

- International recognition
- Independent review
- Competitive advantage
- Fit for purpose for an accrediting body
- Promotes excellence and best practice
- Creates value
- Subjecting ourselves to same process as clients
- Provides reassurance to stakeholders


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## Project methodology

- Established corporate commitment
- Selected and appointed a team
- Determined objectives
- Identify dependencies and risks
- Developed timeframes
- Allocated tasks
- Defined expectations and responsibilities
- Regularly met to monitor and evaluate progress


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## Assessing compliance

- Understanding the accreditation standards
- Conducting a self-assessment
- Auditing documentation against practice
- Addressing gaps
- Articulating progress and improvements
- Providing supporting evidence


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## Lessons learnt

- Corporate commitment
- Leadership and management
- Organisational alignment
- Change management
- Surveyors perspective

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 **Outcomes**

- Improved product
- Managers perspectives
- Assessor perspectives
- Industry perspectives
- Competitive advantage
- Measures of success

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 **Post accreditation**

- Action plan reporting
- Framework for good practice
- Avoiding compliance complacency
- Continued monitoring and evaluation
- Planned improvements

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