A STUDY ON THE IMPACT OF ACCREDITATION ON QUALITY OF HEALTHCARE SERVICES

Dissertation Submitted to

The IIHMR University, Jaipur

for the partial fulfillment for the award of the degree of

Master of Business Administration (MBA)

In

Hospital and Health Management

By

Ms. Zovaria Rahman

Under the guidance of

Dr Neetu Purohit

2022

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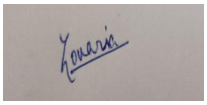
DECLARATION BY STUDENT

I hereby declare that this dissertation titled **A Study on The Impact of Accreditation on Quality of Healthcare Services** is the Bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.



(Signature)

Name of student- Zovaria Rahman

Date- 7th July 2022

CERTIFICATE

This is to certify that dissertation titled **A Study on The Impact of Accreditation on Quality of Healthcare Services** is a record of the research work undertaken by Zovaria Rahman in partial fulfillment of the requirements for the award of the degree of MBA Hospital and Health Management from the IIHMR University, Jaipur under my guidance and supervision and her approach to the research study has been sincere, scientific, and analytical.

Dr Neetu Purohit
Faculty Guide
IIHMR University, Jaipur

Date- 7th July 2022

Dr (Col) Mahender Kumar
School Dean
IIHMR University, Jaipur

Date- 7th July 2022

ACKNOWLEDGEMENTS

This dissertation report titled "**A Study on The Impact of Accreditation on Quality of Healthcare Services**" is the product of sleepless nights and tiring days. In accordance with my organizations' data privacy & confidentiality agreements, I am unable to reproduce any work I have participated in during my tenure as a ZS employee. Therefore, it is only fit that I undergo secondary descriptive research to complete my dissertation, with giving due credit to the original authors and contributors to this topic whose works are available in the public domain.

I am grateful for all the support I received from my core project team at ZS, without whose support and guidance I would not have been able to spare time for this dissertation. Thank you so much for your understanding; Sherin, Priyanka, Darshni, Katyayni, Neekita and Sumedha, you are the best team ever.

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Last but the most important, I am really grateful for all the love and support I received from my family, not just for this dissertation but in every aspect of my life. You are the wind beneath my wings.

While I would have loved to prepare a more detailed research project, I have put in a lot of hard work into this project, and hope that my efforts will be fruitful.

TABLE OF CONTENTS

LIST OF FIGURES

LIST OF TABLES

ABBREVIATIONS

HCP- Health Care Personnel

NABH- National Accreditation Board for Hospitals and Healthcare Providers

NABL- National Accreditation Board for Testing and Calibration Laboratories

QCI- Quality Council of India

JCI- Joint Commission International

KOL- Key Opinion Leader

SOP- Standard Operating Procedures

SME- Subject Matter Expert

ABSTRACT

Quality of healthcare services is a very sensitive and relevant issue these days, especially in light of the ongoing COVID-19 pandemic which has forced us to pause and assess the areas in which our healthcare sector, not just in India but globally, is lacking. It is the right of every human being to get quick and quality healthcare service, though there are a lot of factors which ultimately decide who is able to get access to the best services and who is not. To maximize the reach of better healthcare, accreditations are believed to play an important role.

In order to conduct a study on the impact of accreditation on quality of healthcare services one must ask the question- How does accreditation help in ensuring the quality of services in the healthcare industry? The objectives for this project were: To understand the process & prerequisites for NABH accreditation; To examine the relationship between accreditation and quality; To gather perception on the quality of services pre and post accreditation at some hospitals.

This study has been conducted in such a manner that both existing literature on the impact of accreditation, as well as the market sentiment regarding it in various Indian cities is captured to provide a holistic view. The following study is based on review of secondary literature like journals, research papers and other sources available publicly on the internet after doing a review. Apart from literature review, this study also encapsulates the findings from healthcare providers and community interviews.

Many high-income countries, as well as some low- and middle-income ones, have created the accreditation of healthcare institutions as a measure to raise the standard of care. Surveys have demonstrated that by enhancing the structure, framework, and organization of healthcare departments, accreditation programs considerably improve the process of care delivered by healthcare services. Additionally, there is strong evidence that accrediting programs improve the clinical results of a wide range of diseases. As a result, accreditation programs ought to be encouraged as a means of advancing the caliber of healthcare services.

1. INTRODUCTION

According to the definition of hospital accreditation, it is a self-evaluation and external peer assessment process used by healthcare organizations to accurately measure their level of performance in respect to specified criteria and to adopt ways to continuously improve. Many high-income countries, as well as some low- and middle-income ones, have adopted the accreditation of healthcare institutions as a measure to raise the standard of care. Critically, accreditation is not just about standard-setting: there are analytical, counseling and self-improvement dimensions to the process. There are parallel issues in evidence-based medicine, quality assurance and medical ethics, and the reduction of medical error is a key role of the accreditation process. Hospital accreditation is therefore one component in the maintenance of patient safety. However, there is limited and contested evidence supporting the effectiveness of accreditation programs. Another study found strong evidence that general accreditation programs enhance the quality of care delivered by healthcare services. The effectiveness of universal accreditation programs in enhancing therapeutic outcomes for a variety of clinical problems is supported by a large body of research.

This study aims to understand if getting an accreditation improves patient outcomes or makes no difference. We will seek to understand this through the perception of the HCP as well as the patients.

Quality in healthcare services

The degree to which health services increase the desired healthcare outcomes for a community as well as individuals is known as quality.

Accreditation

Quality improvement and accreditation have become an integral part of the healthcare service delivery globally. The process which assesses an organization on a fixed set of standards is known as accreditation. As part of accreditation, qualified outside evaluators assess a healthcare organization's performance and compare it to benchmarks that have already been set. Important regulatory modifications happen quickly and regularly in a

healthcare environment that is constantly changing. The certification process has raised the standard for healthcare institutions and encourages them to make ongoing improvements.

Overview of accreditation bodies

Nowadays, various international and national accreditations like NABH, JCI, NABL etc. are considered a matter of prestige and reputation within the healthcare industry. They are believed to substantially improve healthcare outcomes by improving quality of care and safety provided for large, small and medium healthcare organizations. The basis of the evaluation of processes in these healthcare organizations is formed by quality standards which help to assess, measure and improve the overall performance; and these need to be implemented specially at the grassroot level.

1.1 JCI

Joint Commission International, also known as JCI is an accreditation organization that is independent and not-for-profit. It has certified more than 20,000 hospitals and healthcare programs in the US, and many others elsewhere. A symbol of quality of an organization's commitment to upholding performance standards, the JCI accreditation is quite sought after, but relatively difficult to achieve. JCI was established in 1994with the aim to meet healthcare quality accreditation requirements in ex-US countries. Each country has its unique challenges and cultural nuances, but JCI has become recognized as a relevant accreditation body and has a global footprint in over 90 countries.

To promote top-notch standards of care and help in achieving best performance, JCI collaborates with all kinds of international advocates, governmental bodies and health care providers. The accreditation process aims to assist organizations in identifying and finding optimum solutions along with improving safety and overall quality of care. The JCI process focuses on critical systems which will most impact the quality of care, treatment and services. These standards are developed with close collaboration with HCPs, providers, consumers, SMEs, KOLs, government and employers, and backed by science and approved by the Board of Commissioners.

1.2 NABL

The National Accreditation Board for Testing & Calibration laboratories, also known as NABL, is quite similar to NABH with the slight difference in its scope as it is not relevant for the whole hospital, but the laboratories. Like NABH, it is an autonomous body under the Quality Council of India. Its aim is to maintain an accreditation system for laboratories and is developed according to the national and international guides while being suitable in India. It is a formal recognition for technical competencies of a laboratory based on assessment by third parties and is carried out by trained assessors with established expertise in calibration and testing activities.

1.3 NABH

The National Accreditation Board for Hospitals and Healthcare providers, also known as NABH, is a body which comes under the Quality Council of India (QCI). The need to set up a body like NABH arose to operate and establish accreditation for wellness and healthcare centers in India. Nowadays, having a NABH accreditation is considered a benchmark for quality in India, and it gives a positive image.

The Quality Council of India developed NABH on the lines of other international accreditation bodies like JCI, the Canadian Hospital Accreditation Standards and ACHS. There are two types of NABH, the Entry level NABH and the Full NABH. The Full NABH has evolved over time into 5 major revisions and the latest revision came in August 2020. It has 10 chapters, 100 standards and 651 objective elements, that are customized for the Indian healthcare landscape. NABH is accepted by the International Society for Quality Assurance or ISQUa as an international accreditation which is at par with the world's most reliable accreditation bodies.

As the full NABH was a difficult accreditation to achieve for many hospitals in its initial days, the Entry level NABH was launched 8 years after the launch of the Full NABH. It was specifically aimed at smaller hospitals with not enough infrastructure and facilities to meet the Full NABH requirements, as they are quite stringent.

Together with the Full NABH, the Entry level NABH is enough to cover all kinds of hospitals and help them achieve the best standards of quality in healthcare. The NABH standards are thus sufficient to cover the entire range of services and operations available at hospitals, ranging from initial registration, initial assessment, pharmacy services,

housekeeping, nutrition, patient education, surgical safety, infection control, facility management & safety, management information system and human resources management, to name a few. It is applicable even to the services that are outsourced but delivered at the hospital premises. Accreditation process stimulates continuous improvement and enables the hospital to demonstrate its commitment to quality care and increases the community confidence in the services provided by them.

Benefits of NABH

Both Full and Entry-level NABH accreditation offers a lot of benefits to the organization, and some of these benefits are listed below:

- Optimized usage of resources and materials leading to improved inventory management and avoiding stock-outs.
- Improvement in operational efficiencies, thus reducing costs.
- Decrease in incidents of HAIs, medical errors and accidents, thus reducing length of stay at the hospital.
- Improvement in personnel management and upskilling of staff by providing latest trainings and clarification in roles and responsibilities.
- Reduction of equipment malfunctions like breakdowns and down time, thus improving equipment utilization.

The biggest beneficiaries of any form of accreditation, irrespective of full or entry level, are the patients. It is believed that getting accredited results in a high quality of care and patient safety. There are many benefits to the patients as listed below:

- High quality of care
- Patient safety
- Well-trained and capable medical staff
- Respect of patient rights and protection against fraud, data leak etcetera
- Regular evaluation of patient satisfaction through feedback

Quality accreditations and certification are not just a plus point for patients, but also for the hospital staff. Below are some benefits that the staff derive from this process:

- Opportunity for continuous learning and upskilling
- Improvement in work environment
- Improvement in hospital safety measures
- Opportunity to develop leadership skills
- Opportunity to gain ownership of the clinical process

2. REVIEW OF LITERATURE

Authors and Year	Study Location	Sample Size & Sampling technique	Salient features
Hussein, M., Pavlova, M., Ghalwash, M. *et al* (2021)[1]	Not mentioned	76, selective	The findings show that hospital accreditation consistently has a positive impact on safety culture, process-related performance measures, efficiency, and the length of stay for patients. However, employee satisfaction, patient satisfaction and experience, and the 30-day hospital readmission rate were found to be unrelated to accreditation.
Lam MB, Figueroa JF, Feyman Y, Reimold KE, Orav JE, Jha AK (2018) [2]	USA	4400, selective	On measures of readmissions for medical conditions but not for surgical conditions, accredited hospitals performed marginally better. No variation in death or readmission rates according to the accrediting body. The patient experience ratings for accredited hospitals were much lower, with the areas of communication, staff response, hospital silence, and cleanliness performing particularly poorly. Accredited hospitals do not appear to be offering better care, according to the data.
Petrović GM, Vuković M, Vraneš AJ (2018)[3]	Serbia	2, selective	The study was carried out in two tertiary level facilities for medical care, one of which was accredited and the other not. Seven quality indicators that assess health care quality, patient safety, institution efficiency, and productivity were compared over the period prior to, during, and

			immediately following the conclusion of accreditation. The accreditation process had a positive impact on the first scheduled health check at the institution, the first scheduled surgical check, the rate of patients with decubitus, and the average number of days spent in the hospital per patient with acute myocardial infarction, among the seven quality indicators that were being monitored. There was no difference in mortality due to accreditation.
Salim FM, Rahman MH (2017)[4]	Dubai	1, selective	Based on secondary data of the KPIs throughout this time period and semi-structured interviews with top health authorities, a longitudinal case study encompassing the years 2007 to 2013 was done to investigate this influence. The study shows that healthcare accreditation serves as a catalyst for putting improvements into place and keeping track of them, but it also highlights certain difficulties.
Desveaux L, Mitchell JI, Shaw J, Ivers NM (2017)[5]	Canada	22, selective	Coherence, organizational buy-in, and collective quality improvement action are three methods via which the accreditation process has the potential to affect quality.
Brubakk K, Vist GE, Bukholm G, Barach P, Tjomsland O (2015)[6]	NA	3, selective	According to the information analyzed, there is no proof that hospital accreditation and certification lead to appreciable improvements in the standard of treatment as determined by quality metrics and standards. Most studies failed to mention the context, method, or cost of the

			interventions.
Alkhenizan, A., & Shaw, C (2011)[7]	Saudi Arabia	26, selective	This study was a follow up on another study which contained incredibly old data and much progress had been made since then. This study specifically focused on health service accreditation unlike the previous work.
Pomey MP, Lemieux-Charles L, Champagne F, Angus D, Shabah A, Contandriopoulos AP (2010)[8]	Canada	5, selective	We come to the conclusion that the certification process, while being a useful leitmotiv for bringing about change, is nonetheless subject to a learning cycle and a learning curve. Institutions make significant investments to meet the initial accreditation visit's requirements, and they gain considerably in the next three accreditation cycles, after which, institutions begin to find accreditation less challenging. HCOs and accrediting bodies must look for ways to fully utilize each stage of the accreditation process throughout time in order to maximize the benefits of the process.

After going through many published studies, we found out that there is a gap when it comes to the impact of accreditation on quality of services in India, and no recent study has been conducted on it. Among the studies discussed above, a few of them were uncertain whether accreditation really makes a remarkable difference in the quality of services, while many concluded that it was indeed a step in the right direction.

In order to try and understand whether the sentiment towards accreditation was positive or not in India, there was a need for this study.

3. RESEARCH QUESTION

How does accreditation help in ensuring quality of services in healthcare?

4. OBJECTIVES

- To understand the process & prerequisites for NABH accreditation.
- To examine the relationship between accreditation and quality
- To gather perception on the quality of services pre and post accreditation at some hospitals

5. METHODOLOGY

Study design: The study design used is observational descriptive. For objective 1, secondary research has been conducted. For objectives 2 and 3, interviews have been conducted to capture the perception and sentiment for accreditation among healthcare providers (doctors, hospital administrators, managers) as well as among the community (people who have experienced accredited hospitals).

Sample size: we had aimed for 36 interviews with healthcare providers and 47 with the community (target: 50 for both).

Sampling technique: we have used convenience sampling.

Data collection method: For this dissertation, we have used the data collected by analyzing published articles and journals, as well as conducted telephonic interview to understand the latest perceptions regarding the effect of accreditation on quality of healthcare services. The respondents were approached via email and phone calls first, then a suitable time for interview was set up during which a telephonic interview was conducted using a set of questions.

6. ANALYSIS

To understand the real-world impact of accreditation in healthcare facilities across India, we conducted telephonic interviews with 36 HCPs and 47 community respondents which were selected from my network as well as through mutual contacts. A detailed questionnaire was prepared, and the sentiments were captured. There will be no mention of identifiable information like name or facility name to maintain the privacy of the interviewees. Based on the primary and secondary research, we can seek answers for the following objectives:

7. FINDINGS

Process & prerequisites for NABH accreditation-

In order to get a NABH accreditation in India, the following steps are required:

8. Understand NABH : Go through the NABH standards book thoroughly.
9. Self-Assessment : conduct a self-assessment and check the status of compliance with the NABH standards and ensure its implementation in the hospital.
10. Self-Gap Analysis & Action Plan : After doing the self-assessment, there is a need to identify the gaps discovered and action plan must be prepared to fill the gap by implementing the relevant NABH standards.
11. Submit NABH Application : After filling the gaps discovered during self-assessment, the hospital needs to apply for a NABH assessment.
12. NABH accreditation fee must be paid.
13. NABH assessment needs to be scheduled with details of assessors and their date of assessment.
14. Assist in the accreditation process and get recommendations from the assessors for better implementation.
15. Become NABH certified.
16. Continuously manage and monitor the quality control system till next cycle.

The relationship between accreditation and quality & perception on the quality of services pre and post accreditation at some hospitals-

7.1 HCP interviews:

All questions were mandatory, so the number of respondents for each question remains 36. Based on the 36 HCP interviews (23% quality managers and 77% hospital administrators from various hospitals in Ranchi, Vishakhapatnam, Gurugram, Kolkata, Jaipur, Chennai and Patna) we get the following insights-

Accreditation status of your facility n=36

Out of 36, 69% worked at accredited facilities, and 31% worked at not yet accredited facilities.

If no, future plans for accreditation n=11

Figure 1 depicts future plans for accreditation for not yet accredited facilities.

Out of 36, 69% had previously marked as already accredited. In the remaining 11, 75% are planning an accreditation and 25% is not yet planning it.

If yes, type of accreditation at your facility n=25

Figure2 depicts the type of accreditation at their facility

Out of 36, 25 had said that they are having accreditation. Among them, 48% have NABH, 28% have NABH+NABL, 16% have NABL, and 8% have JCI.

Presence of positive changes post accreditation n=25

Out of 36, 25 had previously mentioned that they are having accreditation. Among them, 76% have said that they are noticing positive change, while 24% have said they are not yet noticing any positive changes.

Key areas that have improved in your facility if any n=25

Figure 3 depicts key areas that have shown improvement if any

Out of 36, 11 had mentioned that they are not having accreditation. In the remaining 25, 24% said that they have not noticed any positive changes yet. Among the remaining, 28%

marked overall management, 20% marked other related services, 16% marked safety measure and 12% marked training of staff.

Possible reasons for no positive change n=6

No. of Respondents	Likely reasons for no improvement
2	Efforts are discontinued post accreditation
4	Staff is overburdened; absence of regular audits

Table 1 depicts reasons for no positive changes if any

Out of 36, 11 had mentioned that they are not having accreditation, while 6 said that they have not noticed any positive changes yet. Among these six, 67% felt that their staff is overburdened, while 33% felt that improvement efforts are usually discontinued post accreditation.

Biggest problems your facility faces in its day-to-day operations, and if they can be overcome by implementing accreditation n=36

Figure 4 depicts the biggest problems in the day-to-day operations of the facilities

Out of 36, 39% marked overall management, 28% marked other related services, 19% marked training of staff and 13% marked safety measures as the biggest problem their facility faces in its day-to-day operations.

Is accreditation enough to improve safety and quality in a facility and why n=36

No. of Respondents	Yes/No	Reason
25	Yes	It could pave the way for continuous improvement automatically
11	No	Accreditation is a part of the quality process, but other factors like regular audits, trainings and continuous effort from the staff should be factored in as well

Table 2 depicts whether accreditation is enough to improve safety and quality in a facility with reasons

Out of 36, 69% felt that it could pave the way for continuous improvement so it is enough, while 21% felt that it is a part of the quality process, but its presence cannot undermine the importance of other factors, so it is not enough.

Degree of importance of accreditation for a country like India n=36

No. of Respondents	Category
16	Very important
11	Moderately important
3	Neutral
6	Less important than other factors
0	Not important at all

Table 3 depicts how important accreditation is for India according to the respondents

Out of 36, 44% found accreditations to be very important, 31% found them moderately important, 8% were neutral on this topic, 17% found them less important than other factors, and none of them found them not important.

Accreditation can really improve the service quality and overall safety in a healthcare facility n=36

Out of 36, 88% felt that accreditations have the potential of improving the service quality, while 12% felt that it was still not enough to achieve that.

7.2 Community Interviews:

All questions were mandatory, so respondents for each remain 47. The community participants were chosen on the basis of their awareness about accreditation and having some experience of such facilities. Based on the 47 community interviews (community respondents were taken from the same hospitals as the HCPs) we get the following information-

Areas of change observed in a healthcare facility post accreditation n=47

No. of Respondents	Change observed in the facility
21	Overall management (patient, facility, staff and emergency management)
10	Safety measures (HAIs, internal threats, external threats, emergency response system etcetera)
9	Training of staff (emergency response, better hygiene, surgical safety, patient education etcetera)
7	Other related services quality (pharmacy, diagnostics, food, maintenance, housekeeping, mortuary etcetera)

Table 1 depicts the areas of change observed post accreditation

Out of 47 respondents, 52% marked overall management, 8% marked safety measures, 22% marked training of staff and 18% marked other related services as the areas which have changed post accreditation.

Problems you face as a patient in a hospital n=47

Figure 1 depicts the problems faced by respondents in a hospital

Out of 47, 47% marked mismanagement, 28% marked safety concern, 21% marked poor quality of services and 4% marked lack of patient education/ insufficient counselling as the biggest problems they face in a hospital.

Accreditation can resolve the above problems n=47

Out of 47, 74% felt that accreditation could resolve the existing problems while 26% felt that accreditation alone will not be sufficient.

Type of facility you would prefer to visit n=47

Figure 2 depicts what kind of facilities respondents prefer to visit

Out of 47, 47% marked accredited facility, 10% marked other reputed facility and 44% marked no preference.

Importance of accreditation for a country like India n=47

Figure 3 depicts the respondent's opinion of importance of accreditation for India

Out of 47, 28 found accreditations to be very important, 10 found them moderately important, 6 were neutral on this topic, 3 found them less important than other factors, and none of them found them not important.

Getting accredited increases the safety and quality of service in a healthcare facility n=47

Out of 47, 79% felt that accreditation increases the safety and quality of service in a healthcare facility, while 21% felt it was not enough.

8. RESULTS & DISCUSSION

From the interview analysis, we get the information that indeed, accreditation is favored among both HCPs as well as the community. Most HCPs and community respondents also feel that accreditation is very to moderately important in India. Most HCPs and community respondents also believe that accreditation improves the safety and quality of services, along with aiding in overall management and training staff in a healthcare facility. There is considerably less impact felt in areas like other related services quality, and since this was an opinion-based interview, we do not have data to back these claims.

Healthcare facilities are benefitting from the increased footfall that accreditation brings as a lot of people prefer to get treated at an accredited hospital because of their confidence in its superior quality of services. The community is benefitting from the improved infrastructure, state-of-the-art facilities, more experienced medical practitioners, cleanliness and safety that are a result of accreditation. NABH is the most popular type of accreditation, and among the facilities which are not already accredited, most are planning for accreditation.

The findings of this study is in line with the general sentiment captured from literature reviews of other international studies, as management and safety, along with improved footfall were a common feature in those studies as well as this study. The impact of hospital accreditation on the quality of healthcare: a systematic literature review [1], and The impact of accreditation on health care quality in hospitals [3] are two studies which

yielded similar results as my study for the Indian context.

This implies that there are some aspects which are considerably less impacted by the accreditation process or need more targeted and in-depth research to determine how much exactly is the impact of accreditation on them, or what could be the possible reasons for little or no impact, along with changes that could be introduced into the accreditation framework for more holistic growth and improvement.

9. CONCLUSION

More hospitals are showing inclination towards getting an accreditation due to the many benefits it offers to the patients, staff as well as the organization. The challenge is to maintain the same level of quality after getting the accreditation, and this is something that requires continuous effort and commitment towards providing the best services at all times. In a country like India, accreditations like NABH are a blessing, as the healthcare landscape in India is infamous for its quality of care and safety measures. Hospitals can gain the trust of their patients if they are certified to be of a better quality than their competitors, and this could give them an edge over the other players.

Based on the existing research on this topic, it can be assumed that regular accreditation exercises can have a positive effect on the overall quality of healthcare services as these accreditations are very stringent and do not tolerate any shortcomings. This, however, cannot eliminate all adverse events or is a fool-proof measure, and is not at all a replacement of continued improvement efforts.

In future, additional research could be done to answer the question of whether the quality of services is better at an accredited hospital, or another hospital without an accreditation but better qualified HCPs.

Finally, there is ample evidence to suggest that if more hospitals and healthcare facilities would be standardized with the help of accreditations, a lot many precious lives could be saved which would otherwise be lost due to poor hygiene, greater distance to good facilities, lack of trained staff and a lot more reasons which could be minimized with increased accreditation count in every district.

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