

Strategies for Implementing National Standards of Hospital Accreditation to Create Quality Improvement of Patient-Centered Care Services

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ABSTRACT

Hospital accreditation is a form of recognition given by the government to hospitals because it has met the required standards. The general aim of accreditation is to get an overview of the implementation of standards set by the hospital, so that the quality of health services provided by the hospital can be accounted for. Hospitals in Indonesia face an important managerial challenge to change the strategy to improve health services while maintaining quality in accordance with established standards. Hospitals are expected to experience improved quality of health services if they are able to provide health services in accordance with the National Standards for Hospital Accreditation (SNARS). Hospital management's momentum can be utilized well by hospital management because in the SNARS instrument there are significant changes in standards that originally focused on changing health care providers directed towards being patient-focused. Patient-Centered Care (PCC) is a new paradigm that put patients as the center of health services. The application of PCC is not an easy thing to do in these change of paradigm. This article aims to give a better understanding about the strategy of implementing national accreditation standards on improving the quality of health services that focus on patients in hospitals.

Keywords: Accreditation, Hospital, Quality improvement, Health services, Patient-centered care.

1. INTRODUCTION

Hospital accreditation was first developed in the United States by the American College of Surgeons almost 100 years ago. The accreditation activities then spread to other countries in the 1980s to 1990s, especially in developed countries. Recently, hospital accreditation activities have finally been adopted in a number of low and middle income countries as a strategy to improve the quality of health services. The initiative to improve the quality of health services has become one of the aspects in the Joint Learning Network (JLN) to be able to realize overall health service guarantees. Countries that are members of JLN expressed interest in learning more about the accreditation system. A workshop held in Bangkok in April 2013 was attended by ten JLN member countries, namely Ghana, India, Indonesia, Kenya, Malaysia, Mali, Nigeria, the Philippines, Thailand and Vietnam. The ten countries already have or are developing accreditation

schemes according to the standards in their respective countries [1]. Hospital accreditation is a form of recognition given by the government to hospitals because it has met the required standards [2]. One of the government's efforts to be able to encourage hospitals to prioritize services, safety and protection for the public is by requiring hospitals to carry out accreditation. An independent institution tasked with accrediting hospitals in Indonesia is the Hospital Accreditation Commission (KARS). Hospitals are expected to experience improved quality of health services if they are able to provide health services in accordance with the National Standards for Hospital Accreditation (SNARS). However, sometimes the results of the accreditation assessment will not automatically improve the quality of health services held by the hospital. This is because the health service accreditation standard has not been fully capable of assessing clinical indicators of health services carried out in hospitals [3]. The quality management system is an order that guarantees the

achievement of planned goals and quality objectives. The hospital quality management system is needed to direct and control the quality of health services carried out. Factors that influence service quality include (1) elements of input which include energy, funds, and facilities, (2) environmental elements which include policy, organization and management, and (3) process elements including medical actions and non medical actions. The quality of poor health services can cause various impacts such as decreasing the level of public trust, decreasing the number of patient visits, decreasing income, and what must be wary of is the occurrence of bankruptcy in the hospital [4].

Patient Centered Care (PCC) is a new paradigm that positions patients as the center of health services carried out. The concept of PCC is service that is centered on the clients served, both patients and their families. The implementation of health service activities based on the PCC concept is carried out according to the needs of each individual. The Institute of Medicine (IOM) defines PCC as care that respects and responsive to choices, needs, and values that ensure patients become the guidance for all clinical decisions on themselves. The concept of PCC is also referred to as one of the key dimensions of the quality of health services because it is expected to increase patient satisfaction, improve the quality of health services and health status, and able to produce greater job satisfaction for professionals and reduce the level of medical errors. The application of PCC is not an easy thing to do. The implementation of the PCC requires the competence of health workers in terms of communication and assessment, counseling and strategies for changes in behavior, and coordination between health personnel with one another [5]. Every profession that provides health care has responsibility and authority in accordance with their respective portions, such as the profession of nurses as health care providers in hospitals. Nurses have the same roles and responsibilities as other professions. Without the role of nurses, integrated patient care will be lame and not optimal. Just as nurses without other professions, patient care will not run optimally, effectively, and efficiently. One of the things that influences the implementation of hospital accreditation standards is the integration of all health-focused services to patients. Files of integrated patient medical record documents in them. there is a record of patient progress and also educational material delivered by doctors must be accessible and also known by other care professionals [6].

A literature reviews are needed to ensure that the application of accreditation standards is truly useful to improve the final results in the implementation of health services [7]. Accreditation activities are one of the efforts to realize professional health services. The quality of health services carried out in accordance with the standards is one form of professionalism that can lead to efficiency and will also foster the competitive

ability of hospitals in realizing improved quality of health services. This article aims to give a better understanding about the strategy of implementing national accreditation standards on improving the quality of health services that focus on patients in hospitals.

2. METHOD

The method used in this research was a literature review. We reviewed articles about hospital accreditation and quality improvement of patient-centered care services published in national and international journals. We also reviewed the same topic published in books. Articles are collected by searching for those in electronic databases, such as google scholar, ProQuest, PubMed, and science direct. The result of a comprehensive search obtained 445 articles from national and international journals. After considering the inclusion and exclusion criteria, only 23 articles and 5 books that were relevant to this study.

3. RESULTS AND DISCUSSION

Hospital accreditation is one way to assess the quality of health services carried out in hospitals. The general aim of accreditation is to get an overview of the application of standards set by the hospital, so that the quality of health services provided by the hospital can be accounted for. Improvement in health services quality are very important, because the safety of the patients is the aim in health management carried out by the hospital. Hospital accreditation that has been implemented since 1995 in Indonesia used accreditation standards based on what year the standard began to be used for assessment [8]. SNARS is a hospital accreditation standard that being used from January 2018 until present.

Hospitals in Indonesia face an important managerial challenge to change the strategy of improving health services while maintaining quality according to the standards set [9]. Efforts to improve the quality of health services should be carried out, directed, integrated, comprehensive, and sustainable. One way to improve the quality of services in hospitals by following hospital accreditation. Accreditation provides assurance of quality, satisfaction, and protection to the community and at the same time gives recognition to hospitals that have implemented established standards and created an internal environment conducive to healing according to standard of structures and processes [10].

Patient safety and the creation of improved quality of health services are the ultimate goals that are always expected by hospitals, health service providers, health insurance providers, patients, families and communities. Policies in the field of patient safety require simultaneous and guided implementation, as well as

more appropriate monitoring and reporting flow system. Efforts to strengthen patient safety culture, regulations to support patient safety and quality of health services, and the development of hospital data monitoring systems are factors to be prioritized. The hospital accreditation program which initially tended to focus on managerial processes rather than clinical services, is expected to gradually develop into an accreditation program that is beneficial for improving the quality of clinical services, for patients and the wider community. The application of SNARS in accreditation programs will accelerate the creation of a more positive atmosphere to encourage efforts to realize patient safety and improve the quality of health services organized by hospitals [11].

The existence of hospitals today needs to continue to strive to increase productivity in responding to competition [12]. The momentum of the implementation of SNARS can be utilized properly by hospital management. In implementing the accreditation standard, the management of the hospital that acts as a leader must become a role model for every staff in the hospital. The implementation of the accreditation standard must involve all staff in the accreditation process, so the hospital management needs to have skills to mobilize staffs to contribute so that they can find new effective and efficient strategies. Standards that initially focused on changing health care providers were directed towards being patient-focused. There are several strategic approaches that can be developed by hospital management so that the application of accreditation standards can improved quality of health services that focus on patients.

3.1.Strategic Approach to Establish Perception Regarding the Benefits of Accreditation

Perceptions as a process for someone to select, organize, and interpret the information he receives, so that a picture that has meaning is then created [13]. Every human being since childhood has experienced interaction processes with his environment. Many events experienced by humans will form perceptions as an effort to adapt to their environment. A person can behave according to the perceptions he has, so that it is possible for one object had different perceptions [14]. An organization formed by more than two people certainly will also have various perceptions. The most dominant factor in

influencing organizational behavior is the perception that each member of the organization has. Strategic approaches to shape perceptions of the benefits of accreditation can be carried out by hospital management. If a employee who has the perception that accreditation will bring benefits to the development of the hospital where he works, it will increase his desire to actively participate in applying accreditation

standards in the implementation of health services in hospitals [12]. Benefit in applying accreditation hospitals standards include creating a sense of safety because the facilities and infrastructure are in accordance with the standards. In addition, and with the self assessment as the application of accreditation standards, it will be useful to increase employee awareness of the importance of meeting standards and improving the quality of health services. The application of accreditation standards also provides benefits to hospital owners because it will be used as a way to evaluate that management has conducted hospital management efficiently and effectively [2].

3.2.Strategic Approach to Mobilize Participants in the Implementation of Accreditation Standards

Employee participation is an integral part of working life. If employee participation is managed well, it will increase effectiveness, achievement, productivity, and job satisfaction [15]. Participation is a comprehensive mental and emotional involvement in a person [16]. Participation can be one way to motivate because it is more psychological, in the sense that involving someone will make it more responsible because employees are involved in the decision making process [14]. Through their participation, employees will be able to express their feelings, improve the quality of the process, and increase commitment to the final decision. Employees who have a high level of participation will try to recognize and pay attention to the type of work they do. This can be developed by hospital management through a strategy to form an accreditation team, training and comparative studies. At this time, accreditation is a challenge for the hospital to create a culture of mutual assistance, mutual encouragement, and mutual motivation so that the goal of being able to provide quality health services will be achieved [9]. In this case, considering the role of service providers is very dominant to improve the quality of health services, the efforts to implement accreditation standards can be used as an instrument to guide and evaluate implementers of health services in their participation when working according to standards that have been set in accreditation assessment elements [12].

3.3.Strategic Approach Through Organizational Commitment to Implement Accreditation Standards

Organizational commitment is a condition when a member sits with a particular organization and its goals and desires in order to maintain the membership status in the organization [17]. There are several components of organizational commitment held by employees, and each of these components has a different basis. Employees with a high affective component still join the organization because they are driven by their desire to

remain become members of the organization. Meanwhile employees with high continuance components will continue to join the organization because they are based on a sense of need for the organization. Employees with high normative components are committed to becoming members of the organization because they feel they have to do so [12].

The first step in building organizational performance is by shaping commitment and concern for all members in the organization [17]. Decrease in organizational commitment will cause poor performance and failure to achieve goals. High commitment raises loyalty to the organization through the acceptance of goals, values, and willingness to be part of the organization and has the desire to survive. Strong organizational commitment will generate encouragement, and desire in a person to do their work with all the effort they have based on the internalization of the values and goals of the organization into themselves.

Employee involvement is one of the important things in hospital quality management principles. Without the commitment of all employees, the accreditation standard set as a goal will be difficult to achieve. The attitude of health employee in implementing SNARS will affect the process and the result of applying the accreditation standard. Some obstacles that may occur in the process of applying accreditation standards include lack of commitment, lack of resources, lack of participation, limited time, lack of understanding, lack of monitoring, and various restrictions from external parties [18].

Accreditation standards as instruments for improving the quality of health services have a complex and complementary focus. One of the keys to success in implementing SNARS lies in the commitment of all parties, both from the owner and management to all hospital employees. Employees who are committed to the organization will work with dedication [17]. SNARS is not a magic instrument that can change everything without struggle. No matter how good an accreditation standard as an instrument that aims to realize quality improvement will not mean anything if there is no commitment from all parties to run it as a culture optimally [18].

3.4.Strategic Approach to Realizing Job Satisfaction by Implementing Accreditation Standards

Job satisfaction is not a single concept because job satisfaction is manifested as an affective or emotional response to various aspects of one's work. Therefore it can be understood if someone can be relatively satisfied with one aspect of the work, but not satisfied with one or more other aspects. Job satisfaction is shown in the attitudes that employees have about their work because it is a result of their perception of work. There are

several main factors that can affect one's job satisfaction [19], namely:

3.4.1. The work itself

The types of jobs that can provide satisfaction include work that is interesting and challenging, work that is not boring, and work with status that is valuable to employees.

3.4.2. Salary or wages

Salary or wages become complex and multidimensional factors in job satisfaction while also being a significant thing in influencing one's job satisfaction.

3.4.3. Promotion

Opportunities to be promoted have varying influences on one's job satisfaction, because promotion can be in a variety in forms of rewards.

3.4.4. Supervision

Supervision is one factor that is a source of job satisfaction that is quite important for certain employee characteristics.

3.4.5. Workgroup

Working groups will also have an effect on job satisfaction, because cooperative colleagues can be a source of job satisfaction for employees.

3.4.6. Working condition or environment

A good working environment because of maintained hygiene and an attractive atmosphere will be able to make employees feel more eager to do their jobs. Conversely, if the work environment is uncomfortable due to heat and noise, employees will feel more difficult in completing their work.

In addition to the factors mentioned above, it turns out that in the work environment in the hospital, job satisfaction in administering health services can also be influenced by doctor patient relationship, hospital facilities, and a sense of safety in doing work. The factors described above are components of the important assessment elements in the application of SNARS [20]. Thus, if the accreditation standard is applied in the implementation of health services carried out in hospitals, it can lead to job satisfaction for health service implementers because they can show that the work they have done can improve the quality of health services and fulfilled a service process that focused on patient-centered healthcare.

3.5.Strategic Approach to Improve Performance Through Application of Accreditation Standards

The hospital as an organization that organizes health services based on accreditation standards requires a lot of resources in its operational activities. The

resources needed consist of physical resources (man, money, method, material) and conceptual resources in the form of information or data. Humans are one of the resources reflected through employee performance that has an important role in determining the success of all activities in the hospital. Performance is something very complex and always needs to be improved both in terms of individuals, groups, and organizations [21]. Employee performance is shown in the form of quantity and quality of work results in individuals or groups that are in accordance with the standards or criteria set in the organization [22]. Employee performance measurements can be carried out by using certain methods that include the quantity, quality, timeliness, attendance, and ability of cooperation that are required in a particular job [23]. Managing and preparing employees to work outside their regular work becomes a challenge for management [9]. It is also in accordance with the organizing function because a manager has the responsibility to determine the tasks that will be done, who works, how the tasks are grouped, how the flow of reporting must be done, and how the mechanism of a decision must be made. Forming employees to work in teams and implementing accreditation standards needs to be done with the aim of increasing motivation for employees. Thus, it is expected that employees will be able to provide results of their performance and contribution more effectively in carrying out health services according to SNARS.

Efforts to improve the quality of health services need to be designed in such a way that includes a range of quality planning activities, quality control, and quality improvement. Efforts to improve the quality of health services in the long term and sustainably consist of four stages which one follows the other repeatedly, namely through planning (plan), implementation (do), evaluation (study), and follow up (act). Planning activities, implementation, evaluation, and follow-up carried out in each work unit will affect the quality of hospital health services. The implementation of a quality management system that is in line with the implementation of SNARS aims to realize the quality improvement of patient-centered health services [4].

4. CONCLUSION

The strategic approach that can be taken by hospital management in facing accreditation is by forming perceptions about the benefits of accreditation, mobilizing participation, maintaining organizational commitment, realizing job satisfaction, and improving employee performance. The strategic approach is build a good system in administering health services to patients so that in the end the hospital will continue to grow and able to improve the quality of patient centered health services through the implementation of various standards set according to SNARS. The study of

strategies to realize improved quality of health services that focus on patients through the application of SNARS by involving many hospitals or certain groups of hospitals is very much needed in the future. National scale studies in various hospitals also have the potential to be carried out through research conducted by KARS and the Ministry of Health of the Republic of Indonesia.

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