Evaluation of corporate experiences during the accreditation process in the field of health – A qualitative study

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ABSTRACT

OBJECTIVE: In our study, we attempted to determine the accreditation process experience of hospital senior managers accredited by the Turkish Health Care Quality and Accreditation Institute (TUSKA). Along with the institutions' accomplishments through the accreditation program, the major challenges they faced during the accreditation process were revealed.

METHODS: One of the qualitative research designs used was interpretive phenomenological analysis, which was carried out through semi-structured interviews with hospital senior managers.

RESULTS: In the study conducted with eight participants, 55 sub-themes emerged under 12 main themes. The participants expressed their opinions on a wide range of topics, from the achievements related to the accreditation process to the difficulties they encountered, from their strengths to the dissemination of accreditation throughout the country.

CONCLUSION: It has been understood that the national hospital accreditations carried out in our country provide important gains to the institutions in management and clinical activities, while the expectations on incentives and other similar issues have not yet been met.

Keywords: Experience; hospital accreditation; qualitative research; senior manager; TUSKA.

Accreditation of health services is usually adopted as a tool for service improvement mechanisms or health reform in relatively different environments [1]. Accreditation of the health institutions has an important role in increasing the safety, effectiveness, and efficiency of the health services within the context of quality. Hospital accreditation is the assessment of the structure, processes and results of the institution by an independent accrediting agency within the framework of the predefined standards with the system approach. Today, accreditation programs may be in different statuses depending on the status of volunteering and the association with the government entities.

Consistent evidences, which demonstrate that the accreditation programs have improved the care processes provided by the healthcare services and their clinical results, were determined [2, 3]. These programs have some powers pushing the health institutions to become accredited. Quality improvement and organizational development, which have a significant effect on increasing community prestige, are the primary ones. In addition, there may also be some other advantages such as some benefits related with the insurance system, reducing the burden of legal audit, and creating a market intended for health tourism within the international context [3, 4].

Health institutions must organize various systems and professionals in order to complete the accreditation processes successfully. Leadership of the hospital senior managers is needed in order to achieve this [5]. Senior managers of the health institutions must be able to tackle the possible difficulties that may arise during the implementation of the accreditation standards on one hand, while preparing the institution for the accreditation process with its mission, visions, strategic plans, and policies on the other hand. Organizational resistance against change, increased work load of personnel, lack of awareness on continuous quality improvement, insufficient personnel training, lack of accreditation standards applied for local use, and the problems related with the performance result scales during the implementation of the accreditation programs were listed as the weaknesses in the SWOT analysis conducted by Ng et al. [6]. It was demonstrated also in similar studies that despite the generally accepted potential benefits of health accreditation, there are also challenges for its implementation in hospitals [7].

> **Highlight key points**
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> - Managerial leadership increases the success of quality and accreditation studies in health services.
> - Although various administrative difficulties are encountered in the accreditation process, accreditation provides important institutional gains.
> - It would be beneficial for policy makers to create incentive mechanisms to address the difficulties encountered in accreditation efforts.

The foundations of comprehensive quality studies in health were laid in 2003 in our country within the framework of Transformation in Health Programme's "Quality and Accreditation for Qualified and Efficient Health Services" component. With this programme, primarily Quality Standards in Healthcare have been developed intended for measuring and monitoring the qualities of healthcare services of all public, private, and university-status hospitals and the hospitals have been evaluated subsequently. In 2015 Turkish Institute of Healthcare Services Quality and Accreditation (TUSKA) was established in order to carry out the accreditation activities in healthcare services intended to actualize the accreditation step of the component. The Institute has completed its preparations and carried out the first hospital accreditation in October 2018. 8 hospitals have been accredited by TUSKA until today [8].

In this study, in which it is aimed to evaluate the experiences of the hospitals's senior managers accredited by TUSKA, opinions of the senior managers have been taken on to what extent the expectations of the institutions were met and which achievements were provided, what the standards and requirements that they had difficulties in fulfilling during the process and which solutions were produced for these, what they have experienced intended for the compliance of the employees during the accreditation journey.

MATERIALS AND METHODS

Type of the Research

Interpretative phenomenological analysis, which is one of the qualitative study types, was used in this research. This qualitative research type is a qualitative research approach that is dedicated to investigating how people interpret basic life experiences [9]. In our study, it is aimed to understand the experiences of the senior managers of the hospitals, which were accredited by TUSKA, in relation with the process.

Code	Type of hospitals	Hospital adress
M1	Public hospital	Izmir
M2	Private hospital	Istanbul
M3	Private hospital	Ankara
M4	Public hospital	Izmir
M5	Private hospital	Ankara
M6	Private hospital	Kocaeli
M7	Public hospital	Ankara
M8	Private hospital	Gaziantep

Ethical Principles

This research is conducted in accordance with the principles of Helsinki Declaration. The study was initiated with the approval of the Ankara City Hospital Ethics Committee (dated 10.11.2021, numbered E2-21-1011). Information was given to the hospital senior managers before the interviews and the "Voluntary Consent Form", which includes information about the subject, confidentiality of the research and rights of the participants, was signed mutually. Nicknames were used in our study, thus confidentiality rule was observed.

Place and Time of the Research

Our study was conducted at 8 public and private hospitals entitled to TUSKA accreditation in our country between October 2021 and March 2022.

Population and Sample

Population includes the senior managers of all hospitals accredited by TUSKA until March 2022. Our study was completed with the interviews made with the senior managers (M) of 8 hospitals and all the population was reached. Demographic data of the participants are shown in Table 1.

Data Collection Tools

Research data was collected via in-depth interview technique through face-to-face interviews. Primarily, it was communicated to the participants that the interviews are on a voluntary basis, and then the interviews with the hospital senior managers were organized by creating appointments. Interviews were carried out as online video talks over the Zoom application. Audio and video records of the interviews, which have lasted 15 to 45 minutes, were taken.

Data Analysis

Interpretative phenomenological analysis method was used in the analysis of the data. As the abovementioned study is a qualitative study, reflections of my auditor and academic identity during the accreditation exist in the analysis of the data.

RESULTS

12 main themes were determined as a result of the analysis of data obtained through the semi-structured interviews, where the opinions of the hospital senior managers regarding their experiences in the accreditation process. Main and sub-themes are given in Figure 1 collectively. The results determined within the framework of the main and sub-themes are shown in detail in Appendix 1.

Theme 1: Meeting the Expectations

This theme demonstrates whether the expectations of the hospital senior managers related with the accreditation were met or not. Six of eight senior managers stated that their expectations were met.

Theme 2: Institutional Achievements

In this theme, the effects of accreditation on hospital achievements are assessed. It was stated by the participants that planning, coordination, and following up processes of in-house units became systematic with the accreditation (M1, M4, M7-8). Some of the senior managers interviewed stated that they had achievements at significant levels in following up in-house activities (M2 and M7) and in recording them (M1 and M8).

Theme 3: Challenges in Fulfilling the Standards

In general, all of the participants, except one which is (M2), stated that they had difficulties with the standards and requirements of some parts of SAS. Hospital senior managers stated that they had challenges particularly in the sections of indicators (M1, M6-8), patient care (M4 and M5), risk management (M7-8), documentation management (M7), hotel management (M1), human resources management (M1), social responsibility (M3), undesired incident notification system (M4), and organizational structure (M5) in fulfilling TUSKA's accreditation standards.

Ｆｉｇｕｒｅ 1. Main and sub-themes.

Theme 4: Overcoming the Difficulties

The opinions stated by the participants in terms of overcoming the difficulties are grouped under 6 subthemes. Meetings and trainings were prominent in the process of overcoming difficulties. (M1 and M8). However, M1 and M4 stated that the employees have overcome the difficulties, M2 and M6 stated that they have overcome the difficulties by receiving the support of TUSKA. In addition, the participants specified that experience (M3), notifying the negations on-site (M4) and support of informatics (M5) were also effective in overcoming the difficulties.

Theme 5: Consultancy

"Consultancy" theme defined the need for consultancy support within the accreditation process. In addition to the hospital senior managers stating that professional support was needed for the facilitation of the process within this context (M1-2 and M4), there were also senior managers who did not need support (M6). M2 stated that they did not get service because the consultancy companies were insufficient and deficient, although they

had needed it. Senior managers of the public hospitals mentioned the problem of resource for getting consultancy services in general (M1, M4 and M7). M3 and M8 stated that the experienced quality team facilitated the process. Furthermore, the headings of benefits of leadership and being a digital hospital also found place under the "consultancy" theme.

Theme 6: Compliance of the Employees

Prominence was given to continuous training (M1-4, M6-7) and continuous auditing (M1-4, M7-8), among the five themes under this theme, by the hospital senior managers in the compliance of the employees. On the other side, M5 emphasized the importance of informatics support. M1, M4 and M6 mentioned the role of the experienced team in the compliance of the employees. All participant senior managers (M1-8) specified that there were compliance differences among the occupational groups. In general, it was stated that the occupational group, in which most difficulty has been experienced, was the physicians.

Theme 7: Standard Legislation Relationship

The relationship of the standards with the country legislation consists of four subthemes. The first of them is the aspect of suitability of the standards to the conditions of the public hospital. Within this context, the senior managers of two of three accredited public hospitals (M1 and M7) mentioned that the standards should be re-regulated according to the conditions of the public hospitals. Senior managers of the private hospitals gave prominence to the headings of those licenses previously (M5-6) and positive discrimination (M3 and M8).

Theme 8: Corporate Culture

Seven subthemes emerged for the theme related with causing the standards to become the corporate culture. Some of the senior managers (M3, M5 and M8) stated that personnel turnover was the most important obstacle to the development of corporate culture. M2 specified the effect of training and applicability on creating corporate culture stating. M1 and M6 stated that accreditation has itself a role in the place of corporate culture.

Theme 9: Strengths

Strengths of the institution in the accreditation journey are important to finalize and maintain the process successfully. Some of the participant senior managers (M1-4) emphasized the importance of being a team and some of them (M5-6 and M8) emphasized the importance of experience and faith in the accreditation process. M2, drew attention to the importance of team spirit stating. Another senior manager (M5) gave prominence to the experience and faith stating. Some senior managers stated that strong leadership (M3 and M6), being a digital hospital (M1, M4 and M7) and the fact that the hospital building was new (M5) provided strength in the accreditation process, except the subthemes.

Theme 10: Weaknesses

As in the previous theme, weaknesses of the institution are also important in the accreditation process. In general, some of the participants (M4 and M8) specified the high personnel turnover and particularly the lack of personnel at technical level such as the engineer as the weaknesses of the institution during the accreditation process. M2 emphasized inexperience as the weakness stating. Some of the senior managers (M5-6) defined the facts such as the oldness of the building and the physical deficiencies as the weaknesses.

Theme 11: Re-accreditation

With this theme, it was tried to reveal the opinions of the hospitals, which were entitled to accreditation, about re-accreditation. While private hospital senior managers (M3, M5-6) mainly focused on that being accredited must be made attractive, some other hospital senior managers (M1-2 and M4) emphasized the conditions motivating all shareholders. In addition, some of the senior managers mentioned the necessity of reducing costs and making changes in the legislation.

Theme 12: Extending Accreditation

Opinions of the hospital senior managers regarding the extension of accreditation are grouped under the headings of "raising awareness" (M2-5, M7-8) and "providing incentives" (M1, M3, M5-6 and M8).

DISCUSSION

In line with the main purpose of the study, the themes obtained from the interviews with the participants were to determine the experience of hospital senior managers accredited by TUSKA in the process.

Statement of Principal Findings

Almost all of the hospital senior managers who have participated in our study stated that their expectations were met. It was seen that the participants, who had opinions contrary to this opinion, were complaining that the initial promises had not been fulfilled. Again, it was determined that the opinions revealed on the themes of meeting the expectations and application by the institutions for re-accreditation and extending accreditation country-wide were similar. The participant senior managers of the accredited hospitals stated that they must have privileges in subjects such as exemption from other audits, financial contribution from Social Security Institution, and personnel and training support.

Strengths and Limitations

The strength of our study is that the entire sample was reached. The experience of both public and private hospital senior managers in the accreditation process has been revealed. On the other hand, our study was limited to senior managers. The experiences of other senior managers and practitioners in the process were not consulted.

Interpretation within the Context of the Wider Literature

Participants stated that accreditation had significant effects on the achievements of the hospital. Working systematically, providing good service, recording the activities, and facilitating the control were prominent among these achievements. In literature, the positive effects of accreditation on patient care processes and clinical results have been well-defined [2, 3–10]. The participants we interviewed gave prominence also to the improvements related with the administrative operation, except for patient care and clinical processes.

In general, almost whole of the participants stated that they had difficulties with the standards and requirements of some parts of SAS. The senior managers specified that they had difficulties in fulfilling the standards and requirements particularly in the sections of indicators, risk management, documentation management, and patient care. The prominent methods for overcoming the challenges in fulfilling the standards were training and meetings, and acting as a team. In the study conducted by Manaf [11], it was determined that the training was one of the essential factors in the application of a quality programme. Again, in the same study, it was stated that lack of communication and lack of team work may be an obstacle against the application of accreditation standards. In a compilation study conducted in Iran, some of the themes specified as the difficulties of accreditation process were unsuitable standards, increased work load, lack of team work, insufficient knowledge of the employees, subjective opinions of the evaluators [12]. While the variables of time lag, numerous measures and certifications, which create confusion for employees, and giving excessive importance to documentation were determined as the most important difficulties for applying the standards in another study conducted in Iran, it was emphasized that there are great challenges in the application of hospital accreditation successfully and serious measures should be taken in this field by the senior managers and policymakers [13].

Some of the participant hospital senior managers emphasized the necessity of consultancy service in the process of being accredited. However, senior managers of the public hospitals gave prominence to the budget problem in getting consultancy service. It is considered that the consultancy service shall provide convenience to the hospitals on the way to being accredited, as well as make a contribution to extending the accreditation.

One of the most important stages in the accreditation process is also ensuring the participation of the employees and receiving their support undoubtedly. Participants stated that they used continuous training and auditing methods for ensuring the compliance of the employees. In the study conducted by Alkhenizan and Shaw [2] it was stated that the heavy work load and work stress felt by the hospital staff due to the accreditation may affect their work performances. Again in the same study, emphasis was put on the necessity of providing training on the benefits of accreditation in order to eliminate the doubtful attitudes that the health staff may have against accreditation. Also in our study, it was specified also audit as well as training play an important role in the compliance of the employees. However, hospital senior managers were in agreement on the matter that the profession group which they had compliance problem mostly was the physicians. They have linked this with the busy working environment of the physicians. In the qualitative study, which was conducted for Australian Committee of Health Service Standards, it was reported that the physicians were not aware of the accreditation in general and they approached this doubtfully [14]. Similarly, in a study conducted in Malaysia, it was found that the support provided to the quality management process was at the lowest level among the physicians [11].

The senior managers of the public and private hospitals gave prominence to different subjects regarding the relationship of accreditation standards with the country legislation. While the senior managers of public hospitals requested to make the SAS criteria in conformity with the public conditions, senior managers of private hospitals mostly requested making positive discrimination to the accredited hospitals.

The participant senior managers mentioned the negative effect of personnel turnover and the positive effect of consistent management and being a digital hospital on the contrary in making the accreditation a corporate culture. However, they gave prominence to the challenges regarding the training and applicability in the development of corporate culture. On the other side, it was also stated that accreditation makes a contribution to the development of corporate culture. Positive effects of accreditation on the organizational culture were also demonstrated in the study conducted by Park et al. [10].

The participant senior managers specified their strengths on the way to accreditation journey as strong leadership, being a team, experience and faith, as well as

digitalizing and having a new building. Also, Rahat [15] specified the lack of the commitment of senior management as an organizational challenge in the accreditation process. While Taylor and Wright [16] emphasized the importance of undertaking the responsibility by the senior managers and involving everyone within the institutions in achieving success in quality processes, Manaf [11] stated that teamwork and employee participation were the essential factors.

Emphasis were made by the participant senior managers on the personnel turnover, deficiency, and inexperience regarding the weaknesses of the institution. In the literature, attention was drawn to personnel deficiency, incompetence about accreditation, and low motivation, as well as work intensity in the studies conducted on the challenges experienced by the hospitals in accreditation process. Except for these, it was seen that the resistance of the employees against change, low participation of the personnel, other than the nurses, weak managerial loyalty were prominent [15, 17, 18]. Establishing hospitals' quality management structures and motivating the employees in this matter are among the subjects, that human resources have difficulties to overcome [19]. It was determined that the determinations related with the human resources have parallels both in our study and in the literature.

Opinions of the participants regarding the reaccreditation and extending the accreditation were similar. In both themes, incentives making being accredited attractive were emphasized. However, raising awareness in extending accreditation was highlighted by the participants.

Implications for Policy, Practice and Research

It is important for accreditation organizations to consider the experience of institutions in the accreditation process. It should not be forgotten that receiving stakeholder opinions will contribute to the continuous improvement approach, which is a requirement of the quality philosophy.

In this context, the opinions of the senior managers in the accreditation journey will support the creation of new strategies in revealing the flaws in the process and the aspects that need improvement and in the solution of these. More efforts are needed to expand accreditation in health institutions and make it attractive. It is thought that considering the expectations of institutions from accreditation without compromising standards and targets will contribute to this.

Conclusion

With this study, hospital accreditation processes, which have been applied by TUSKA for the last five years, were evaluated from the point of view of the senior managers. In light of the data obtained, it was revealed that hospital accreditation provided significant internal achievements to the institutions in management and clinical activities, on the contrary still the expectations on incentives and other subjects have not been met. However, participant institutions have completed the accreditation processes by giving prominence to their strengths, on the contrary, it was argued that putting the consultancy service into practice by TUSKA would be beneficial in making the process more understandable and facilitating the compliance of the employees. On the other hand, it was seen that the profession group, which they had compliance problem mostly, was the physicians. It is considered that studying and revealing different adaptation methods intended for the physicians in accreditation processes shall be beneficial. It is considered that it shall be possible to settle and extend the national accreditation programs in the field of health, which is in its infancy in our country, by making changes in the legislation and increasing its attractiveness.

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APPENDIX 1. Main and sub-themes with quotes from admins

Quotation	Sub-themes	Main themes
'Initially we had problems due to those we did not know. TUSKA has been a very great advantage in accreditation, because it shaped our way and showed us our deficiencies' (M2) 'At this point, expectation part must be separated in two. The first one is the positive impacts caused by the accreditation studies for both the employees and the patients and its contributions to creating quality culture in the institution. And the other is the tangible benefits to be brought by having accreditation. In plain words, I cannot say that our expectations regarding this matter were met' (M5)	Meeting expectations from accreditation	Meeting the expectations
'SAS did not meet our expectations. Many of those stated initially was not fulfilled. These may be listed as exemptions from audits, such as SSI (Social Security Institution), personnel support, and SSI advantage' (M8)	Unfulfilled promises	
'The units provided coordination among themselves and worked more systematically' (M1)	Contributing to systematic work	Institutional achievements
'...maybe our most important achievement is causing additional applications and arrangements we made in the fields of patient safety and employees' safety' (M3)	Give good service	
'We had the processes of compliance with the standards and quality, since we have been accredited from different organizations previously. What did we do as new? The new thing is that SAS is more suitable and more understandable for our country when compared with the other accreditations. It has provided great conveniences to us in the implementation of the standards... it has provided awareness in many subjects such as the motivation in team and team work. In our previous accreditations, the standards were not significant in purchasing, and in administrative and managerial matters. SAS standards were clearer and more significant' (M6)	Compliance of SAS with country conditions	
'We had difficulties particularly in the compliance of the physicians with the documentation requirements related with the patient care.' (M5)	Chapter based challenges	Challenges in fulfilling the standards
'In fact, all of the standards were clear... We did not know initially what the articles referred to and what they corresponded to, due to lack of experience.' (M2)	Understandability of standards	
'We held regular meetings with each department, we received their ideas, and determined their needs ...because the staff of the departments know their work better ...' (M1) 'We are carrying out more team work. We are trying to find solutions holding process assessment meetings.' (M8)	Meetings and trainings	Overcoming the difficulties
'...It was not possible to meet some of the requirements only by providing training. In such cases, we have integrated the requirements into the digital solutions.' (M5)	IT support	
'The fact that we had an experienced team regarding the quality management has removed our need to receive consultancy and training services.'	Experienced quality team	Consultancy
'We provided continuously trainings within the framework of department-based studies, ...we repeated them frequently' (M1) 'Our priorities for the compliance of the employees with the standards were providing continuous	Regularly education	Compliance of the employees

Appendix 1 (cont). Main and sub-themes with quotes from admins

Quotation	Sub-themes	Main themes
trainings, holding contact meetings, and ensuring the participation of the employees in the application stage of the standards.' (M3)		
''…It is more difficult to subject the occupational groups, which work busily, to trainings. For example, emergency and the cash desks were those we had most difficulties. But we had difficulties also physicians willy-nilly, because we could provide the least training to them…there was no problem in practice, but it was difficult to bring them to the training. When we saw that we could not clear in taking action, as working was 7/24, we shifted the training system into online, and we reduced the problem. We thought that the worst would be the cleaning staff, but they were the group, which we have trained mostly.' (M2)	Differences in adjustment between occupational groups	
'I will say that the occupational group which complies with most difficult are the physicians. Actually, they do not have significant resistance, if you facilitate the automation for them. They do not like additional workloads among their business. If you facilitate, it does not constitute a problem.' (M6)		
'It is necessary to prepare the standards according to the conditions of the public hospitals. Our country has a standard; we have financial tables, personnel status, education levels. Therefore, I do not find the relationship of the accreditation standards with the country legislation sufficient.' (M1)	Compliance with the conditions of the public hospital	Standard legislation relationship
'… the non-conformity of current licenced structures with the accreditation should definitely be solved. Because, they are those licenced by the ministry. Thus, they are points we do not have the chance to demolish and re-built.' (M5)	Pre-licensed areas	
'We would have exemption from some audits or it would be ensured that they are conducted less frequently with the SAS accreditation.' (M3)	Positive discrimination	
'Unfortunately, staff turnover is seriously challenging… you have to repeat everything all over again in trainings.' (M5)	Negative impact of staff turnover	
'After we learned the process and recognized our deficiencies, again the training was the part we had difficulty in the stage of making it corporate culture mostly. Applicability follows the training.' (M2)	Difficulties; training and applicability	Corporate culture
'The greatest way of making it corporate culture is the recognition of the advantages, which are brought to the institution by being accredited, by the personnel. Both providing sufficient personnel as the working conditions, and presence of additional revenue, if applicable, shall be encouraging.' (M4)	Contribution of accreditation to the employee	
'Frankly, everyone was eager, thus no one said – it is not my work – what will I receive against this – everyone thought that "yes, we are in this institution, we are on the board of same vessel, and rise of the vessel means raise of us.' (M2)	Team spirit	Strengths
'The previous accreditation experiences of the senior managers, the fact that the senior management believes in the subject and considers it as a requirement, are our strengths.' (M2)	Experience and belief	
'…actually, all of us were very inexperienced…lack of experience was out weakness frankly.' (M2)	Inexperience	Weaknesses
'Maintaining the SAS standards at our hospital is our main objective. However, making it more	Making accreditation	Re-accreditation

APPENDIX 1 (CONT). Main and sub-themes with quotes from admins

Quotation	Sub-themes	Main themes
attractive, increasing the recognition of SAS both nationally and internationally, contributing into health tourism, providing ease in some fields for legal audits are the important matters. We consider making application for re-accreditation in due course.' (M3)	attractive	
'You cannot extend this, unless you provide motivating applications ...positive discrimination for accredited institutions ...something motivating the employees for being re-accredited.' (M1)	Conditions that motivate all stakeholders	
'Accreditation is a system which protects the personnel and patient, protects everyone from the hospital senior manager to the hospital owner.' (M2)		
'When the senior managers are not involved in the accreditation process, these works are getting difficult, or problems are encountered in conducting.' (M2)	Awareness raising	Extending accreditation
'We request TUSKA to conduct studies in relation with the recognition of SAS. Anyone does not know, when we mention SAS to the physicians, bureaucrats visiting the hospital.' (M8)		
'Presence of additional return financially in accredited hospitals, ..., giving priority to the accredited hospitals in health tourism and establishing an incentive system for the accredited hospitals.'(M3)	Providing incentives	
'It must have a financial return, exemption from SKS audits, incentive studies must be conducted, personnel and training support must be provided.' (M8)		