Factors Affecting Implementation of Accreditation Program at Oncology center, Mansoura University.

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Abstract

Background: In developing countries, accreditation is increasingly being used as a tool for government regulation to ensure achievement of quality of care. So, the study aimed to identify factors affecting implementation of accreditation program at oncology center, Mansoura University through assessing nursing staff perception about accreditation and identifying factors affecting the implementation of accreditation program.

Subjects and Methods: A descriptive design was used and the study was conducted on 250 nursing staff working at oncology center, Mansoura University by using two tools as: accreditation related concepts questionnaire and factors affecting implementation of accreditation program questionnaire.

Results: The results indicated that more than half of nursing staff had fair perception about hospital accreditation program. Nursing staff had high perception of accreditation requirements followed by quality concept, accreditation end results and accreditation concept. Also more than half of nursing staff had high agreement score about factors affecting implementation of hospital accreditation program. Reward and recognition factor was found the highest and ranked first whereas hospital culture factor was significantly the lowest and ranked last one.

Recommendation: Establish systems, protocols, policies and strategy to enhance nursing staff perception about quality and accreditation. Increase cooperation and coordination with the relevant local quality committees reported by the ministry of health in order to exchange experiences and expertise.

Keywords: Accreditation program, Factors, Implementation.

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I. Introduction

Healthcare has long been a potency for social change by concentrating on health requirements and discrepancies in community. Quality improvement in healthcare is a constant and continuing effort to achieve measurable enhancements in the productivity, efficiency, effectiveness, responsibility, performance and extents of services and processes which appreciate justice and enhance the society health ^[1].Quality enhancement has a positive effect on management and clinical results ^[2–5].

Establishment of an accreditation process for health facilities is a possible method of promoting continued facility-level enhancements and larger system-level. Accreditation is an official process of appraising to which degree health organizations meet predetermined quality standards including accessibility of services and patient safety. Evaluation is usually carried out by an independent organization such as a non-governmental organization (NGO). Accreditation process helps health care organizations to achieve desired enhancement related to quality also it facilitates the observation of services provided and appraisal of health organizations ^[6].

Accreditation of a health care organization is an external appraisal of the level of compliance against a set of standards. The accreditation process includes all areas of the healthcare organization's operation and practice. It aims to ensure that the healthcare organizations are concerned with the quality and safety of patient care through appraising quality and safety of care, providing external appreciation of the quality of care and enhancing public confidence in healthcare services provided by hospitals [7].

An accreditation program is an effective approach for enhancing the quality of care and patient safety and results in better organizational performance [8]. Accreditation programs adopt standards that are considered optimal and achievable to support constant quality enhancement. Accreditation programs employ external peer reviewers to regularly appraise facility compliance with predetermined standards and provide feedback to inform quality enhancement [9].

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Applicants for accreditation programs are usually worried about quality issues prior to the development of any official accreditation efforts since quality plays an important role in meeting customer demands, helps organizations to remain competitive in their particular fields and contributing to enhanced profits [10].

Accreditation has a lot of benefits for hospital as it enhances the delivery of medical care, enhances the image of the hospital and facilitates constant enhancement in delivery of medical care [11-12], benefits for employees as it helps in education, coaching and development of professional staff, provides leadership for quality enhancement within medical profession and nursing, increases employees satisfaction with working conditions, enhances employee safety and security, and promotes team work [13-15] and benefits forpatients as it provides access to organizations, provides quality medical care so that people can make informed decisions, respects patient's rights, enhances family-centered care, and enhances patient safety [16-18]. These advantages can be attained if there is careful planning, organizational commitment, and strong government support [19].

It is important for quality improvement of health care organizations to have quality indicators and go through accreditation. Oncology center is one of two hospitals in Mansoura that has got ISO 9001 so the next step of this hospital is reaching accreditation. When organizations are accredited, a reliable level of performance should be assured to the public, therefore accreditation indirectly informs people's decisions about what services and/or organizations they choose ^[20].

II. Significant of the study

In the current era of heightened fiscal responsibility, transparency, accountability, and escalating health care complexity and risk, accreditation contributes to ensuring that care meets the highest standards of health care decision-making and provision. Accreditation can serve as a risk mitigation strategy, and it can also measure performance; it provides key stakeholders with an unbiased, objective, and third-party review. It can constitute a management tool for diagnosing strengths and areas for improvement, as well as for facilitating the merger of health care organizations by stimulating the emergence of common organizational identity, culture, and practices[21].

Aim of the study

The aim of this study was to identify factors affecting implementation of accreditation program at oncology center, Mansoura Universitythrough assessing nursing staff perception about accreditation and identifying factors affecting the implementation of accreditation program.

Research questions:-

RQ1: What is the level of nursing staff perception about hospital accreditation program?

RQ2: What are factors affecting implementation of accreditation program?

III. Subjects and Methods

Research design:

A descriptive design was utilized in the study.

The study setting:

This study was performed at oncology center, Mansoura university located at delta region which serving patients with cancer disease. Oncology center occupied with (500) beds.

Study subject:

The subjects of the study included all nursing staff (nurse managers/ staff nurses) available at time of data collection. Their total numbers were 250 nursing staff classified as the following: (229) staff nurse, (17) head nurses, (3) supervisors and (1) nurse director.

Tools of data collection:

Tools of data collection consisted of two tools:

Tool I: -Accreditation related concepts questionnaire:

Thequestionnaire consists of two parts as follows:

Part 1: personal data: It covered items as: qualification, gender, years of experience, age, marital status as well as attendance of training courses regarding accreditation.

part 2: Accreditation related concepts questionnaire: developed by researchers based on literature review ^[22-23] and aimed to assess nursing staff perception about hospital accreditation program. It consisted of (26) statements under (4) dimensions. Their responses were on 3 point scale ranged from (1-3) as (disagree =1, uncertain =2, agree =3).

The total scores of perception was categorized into three levels based on cut of point 50% as the following:

- -Poor perception < 50%
- -Fair perception 50-75%
- -Good perception > 75%

Tool II : - Factors affecting implementation of accreditation program questionnaire:

Developed by researchers based on literature review ^[24-26]and aimed to identify factors affecting implementation of accreditation program. It consisted of (61) statements under (10) main factors as following: Hospital planning, hospital culture, hospital staff, leadership commitment and involvement, coaching and exercise work out, medical records, continuous quality improvement, empowerment, reward and recognition, communication and motivational factor.

Their responses were on 3 point scale ranged from (1-3) as (disagree =1, uncertain =2, agree =3).

The total scores of agreement about factors affecting implementation of hospital accreditation program was categorized into three levels based on cut of point 50% as the following:

- -Low agreement < 50%
- -Moderate agreement 50-75%
- -High agreement > 75%

Each statement response will be measured on a five point likert scales that ranged from 1=poor to 5=excellent.

IV. Methods of data collection

Validity and reliability:

It was done via five experts; three from faculty of nursing and two nurse directors who reviewed the tools for clarity as well relevancy and modifications were applied based on their opinions. To assess reliability, the study tools were tested by the pilot subjects at first session and retested after 2 weeks as test-retest reliability and Cronbach's Alpha was 0.879 for accreditation related concepts questionnaire and 0.899 for factors affecting implementation of accreditation program questionnaire.

Pilot study:

A pilot study was performed on (25) nursing staff at Oncology Center, Mansoura University consider as 10% of the study sample.

Field work:

The researchers met subjects to explain the study purpose and ask for their participation. The researchers met the respondents either individually or groups during all shifts to distribute the questionnaire during these meetings. The respondents filled in the tools individually at once and some respondents read the questionnaires and fixed another time to fill it, filling the questionnaire sheet acquired from 20–30 minutes. The data collection process started from November to April, 2017.

Ethical consideration:-Ethical approval was obtained from the research ethics committee of the Faculty of nursing — MansouraUniversity. An official permission to conduct the study was obtained from hospital authorities. Prior to the initial interview, the researchers explained the study aim also the nature of the study to all nursing staff included in this study. Also, all participants were asked to give an informed consent before participation in this study. The participants' rights to withdraw from or refuse to participate in the study without any consequences have been considered. The researchers reassured participants about the privacy as well as confidentiality of the information taken and the information are used only for the scientific purposes.

Statistical design:

The collected data were arranged, tabulated as well statistically analyzed via SPSS software (Statistical Package for the Social Sciences, version 21, SPSS Inc. Chicago, IL, USA). For quantitative data, the mean, range, as well standard deviation were calculated. Comparison among the two groups as well more was performed by using Chi-square test (x^2) for qualitative data.

V. Results:

Table (1): illustrated socio demographic characteristics of nursing staff at Oncology center, Mansoura University. According to the table, total studied nursing staffwas225. This table showed that majority of nursing staff (98.2%) was female. More than half of them (64.4%) aged from 25-<35years. Almost of them have diplom and married. Concerning years of experience, a percentage of (64.9%) have experience of (5-<15) years while(28.4%) of them have (<1-<5) years .The table also showed that the majority of them (90.7%) are staff nurses and majority of them (90.2%) not attending accreditation courses.

Figure (1):demonstrated mean scores and ranking of perception sub items of accreditation program by studied nursing staff at Oncology Center, Mansoura University. This figure revealed that perception sub items were compared and significantly different to mean scores. As ensure accreditation requirements was found the

highest (mean = 2.66 ± 0.40) and ranked first. Whereas accreditation concept as sub item of perception about hospital accreditation program was the lowest (mean= 1.86 ± 0.56) and ranked last one.

Figure (2): demonstrated levels of perception sub items of accreditation program by studied nursing staff at Oncology center, Mansoura University. This figure showed that more than half off nursing staff (74.7%) had fair perception regarding accreditation requirements as sub item of perception about hospital accreditation program. While (47.6%) of them had poor perception regarding the sub item accreditation concept. Regarding total scores, (9.3%) of nursing staff had poor perception and (50.7%) of them had fair perception while (40.0%) of them had good perception.

Figure (3): demonstrated levels of total perception of accreditation program by studied nursing staff at Oncology center, Mansoura University. This figure showed that (50.7%) of them had fair perception and (40.0%) of them had good perception while (9.3%) of nursing staff had poor perception.

Figure(4):demonstrated mean scores and ranking of agreement scores of factors affecting the implementation of hospital accreditation program by studied nursing staff at Oncology center, Mansoura University. This figure showed that agreement about factors sub items affecting implementation of hospital accreditation program were compared and significantly different to mean scores. As ensure empowerment, reward and recognition factor was found the highest (mean $=2.72\pm0.34$) and ranked first. Whereas hospital culture factor as sub item of agreement about factors affecting implementation of hospital accreditation program was significantly the lowest (mean $=2.32\pm0.35$) and ranked last one.

Table (2):described levels of agreement of factors affecting implementation of hospital accreditation program by studied nursing staff at Oncology center, Mansoura University. This table showed that more than half off nursing staff (75.1%)in high level of agreement regarding empowerment, reward and recognition as a factor affecting implementation of hospital accreditation program. While (23. 1%) of them in low level of agreement regarding leadership commitment and involvement factor. Regarding total scores, (1.3%) of nursing staff in low level and (48.4%) of the studied sample in moderate level while (50.2%) of them in high level.

Figure(5):described levels of total agreement of factors affecting implementation of hospital accreditation program by studied nursing staff at Oncology center, Mansoura University. This figure showed that (1.3%) of nursing staff were in low level and (48.4%) of the studied sample in moderate level while (50.2%) of them in high level.

Table (1): Sociodemographic data of the studied nursing staff(n=225).

Variables	The studied nursing staff(n=225)				
	n	%			
Sex:					
Female	221	98.2			
Male	4	1.8			
Age years:					
18-<25	62	27.6			
25-<35	145	64.4			
35-59	18	8.0			
Range	18-59				
Mean±SD	28.25±6.98				
Marital status:					
Single	42	18.7			
Married	175	77.8			
Widow	5	2.2			
Divorced	3	1.3			
Education level:					
Diplom	109	48.4			
Technical nursing Institute	74	32.9			
Bachelor	42	18.7			
Experience years:					
<1-<5	64	28.4			
5-<15	146	64.9			
15-<43	15	6.7			
Range	< 1-43				
Mean±SD	8.97±7.27				
Job:					
Staff nurse	204	90.7			
Head nurse	17	7.6			
Supervisor	3	1.3			
Nursing director	1	0.4			
Attending accreditation courses:					
No	203	90.2			
Yes	22	9.8			

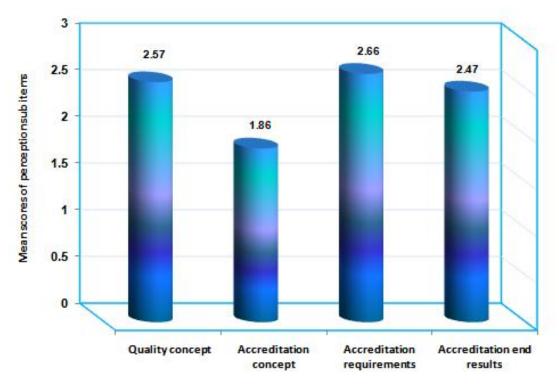


Figure (1): Mean scores and ranking of perception sub items of accreditation program by studied nursing staff (n=225).

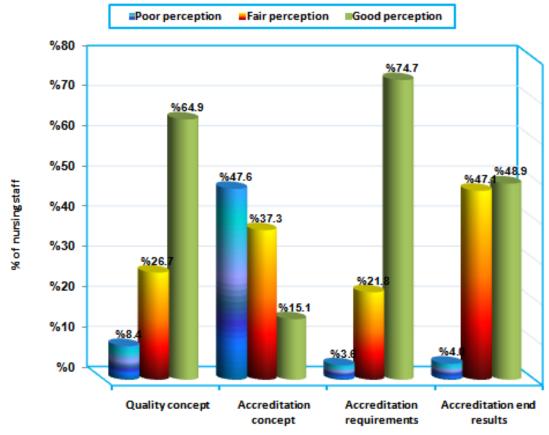


Figure (2): Levels of perception sub items of accreditation program by studied nursing staff (n=225).

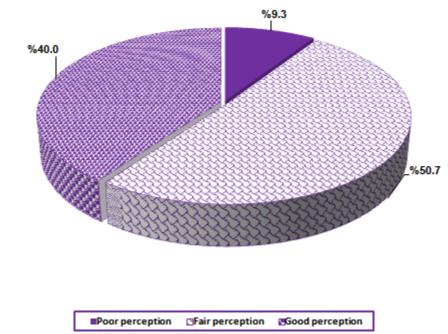


Figure (3): Levels of total perception of accreditation program by studied nursing staff (n=225).

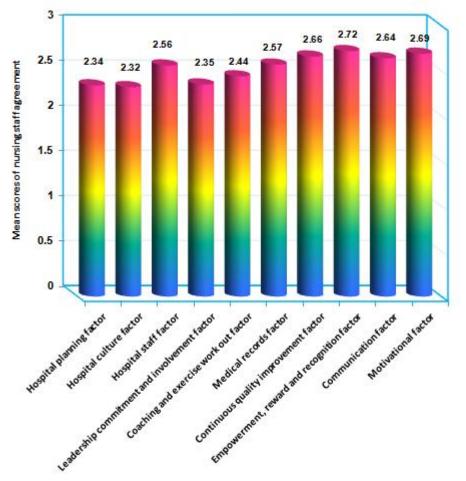


Figure (4): Mean scores and ranking of agreement scores of factors affecting the implementation of hospital accreditation program by studied nursing staff (n=225).

Table (2): Levels of agreement of factors affecting the implementation of hospital accreditation program by studied nursing staff (n=225).

Factors affecting implementation of hospital accreditation program	Levels of agreement of the studied nursing staff (n=25)						
	Low a	greement	Moderate agreement		High agreement		
	n	%	n	%	n	%	
A-Hospital planning factor	43	19.1	104	46.2	78	34.7	
B-Hospital culture factor	31	13.8	118	52.4	76	33.8	
C-Hospital staff factor	16	7.1	66	29.3	143	53.6	
D-Leadership commitment and involvement factor	52	23.1	91	40.4	82	36.4	
E-Coaching and exercise work out factor	36	16.0	75	33.3	114	50.78	
F-Medical records factor	8	3.6	91	40.4	126	56.0	
G-Continuous quality improvement factor	3	1.3	61	27.1	161	71.6	
H-Empowerment, reward and recognition factor	8	3.6	48	21.3	169	75.1	
I-Communication factor	10	4.4	61	27.1	154	68.4	
J-Motivational factor	5	2.2	65	28.9	155	68.9	
Levels of total agreement	3	1.3	109	48.4	113	50.2	

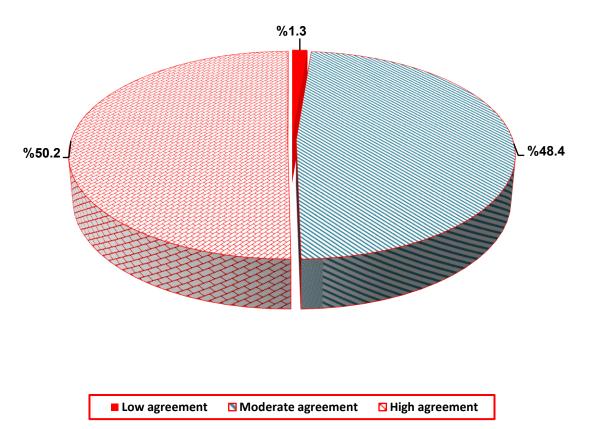


Figure (5): Levels of total agreement of factors affecting the implementation of hospital accreditation program by studied nursing staff (n=225).

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VI. Discussion

Accreditation is a public acknowledgment of the accomplishment of accreditation standards by a healthcare organization, confirmed through an independent external peer appraisal of that organization's level of performance related to the standards ^[27]·Accreditation is a visible system of managing the accredited hospital which assures that the hospital will continuously complete the accreditation criteria. It is a self-appraisal and external peer evaluation process utilized by health care organizations to exactly evaluate their level of performance related to the established standards and to implement ways to continuously improve ^[28].

The study result revealed that nursing staff had high perception of accreditation requirements and ranked first followed by quality concept, accreditation end results and accreditation concept. This may be due to accreditation requirements encourages the hospital leadership to support a positive culture of responsibility instead of a culture of blame. Also, not all the staff had an opportunity to attend the coaching which was carried out by the hospital.

This result agreed with^[29] who reported that coaching of the staff and presence of good environment is the most significant step to implement the accreditation standards in the hospital. Similarly, ^[30] mentioned that accreditation preparation provided hospital staff with a chance to be more familiar with accreditation and to reflect this on the organizational operations.

The result indicated that more than half of nursing staff had fair perception about hospital accreditation program. Low perception among nursing staff and misunderstanding for the concept of quality and accreditation program, and the requirements to implement this program affect implementation of hospital accreditation program.

[26] found that low perception between the staff was one of the challenges to implement the accreditation process and highlighted the importance of staff preparation to promote quality programs and also he mentioned that a poor perception may result in a failure of quality implementation. As well, [31-32] reported that low perception and understanding of quality and accreditation resulted in the failure of the implementation of quality and accreditation programs in developing countries.

Similarly, ^[33]indicated that difficulty in interpreting the quality standards and perceptionamong all hospital staff was one of the most frequent obstacles that hinder the successful implementation of accreditation process. ^[34]reported thatlack of awareness was an important factor inhibiting the start of quality process in Pakistan. As well as, ^[35]found that an incomplete understanding of quality and partial appreciation of its benefits repressed successful implementation.

Moreover, [30,36] reported that hospital staff perception of quality and accreditation standards is an essential for successful implementation of accreditation. They mentioned that gaining hospital staff support for the accreditation process through self-appraisal which is usually carried out by trained qualified staff was one of the essential strategies to enhance such perception.

The result indicated that more than half of nursing staff had high agreement score about factors affecting implementation of hospital accreditation program. Reward and recognition factor was found the highest and ranked first. This is due to employee empowerment makes employees more responsible, enhances their morale and improves the quality of their work life.

These results agreed with ^[37]who reported that presence of recognition system is an essential factor in supporting the proposed change and encouraging employee participation. He found that giving staff rewards helped in achieving quality, stimulated staff commitment and sense of belonging. Also, ^[38]stated that if any organization wants to accomplish its goals, it should implement a human resource development program including employee's compensation and rewarding system.

As well, ^[39]found that unreliable reward scheme and lack of appreciation were obstacles to implementing accreditation program in several organizations. Moreover, he found that appreciation, respect and reward for doing job well were essential factors to ensure successful implementation of quality. As well as, ^[40]found that poor employee's empowerment leads to failure of quality implementation in organizations. Employee empowerment is necessary to increase employee's satisfaction, productivity, morale and responsibility as they feel they have more control over their careers and their lives.

In this respect, ^[41-42]reported that to establish accreditation system, hospitals need to be empowered through accessibility of resources and knowledge. Lack of required resources, knowledge, skills and efficient management in hospitals can make them fatigued, depressed and cause severe dysfunctional consequences. Also, ^[43-44]reported that employee empowerment, coaching and reward are vital factors for implementing quality enhancement activities.

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In the contrast of this result, ^[45]demonstrated that rewards and appreciation was not found to be a predictor of quality results in hospitals. As well, ^[18]found that rewards and recognition had the lowest agreement score.

The finding of the present study indicated that hospital culture factor was significantly the lowest and ranked last one. The finding of this study in contrast with [46] who reported that successful implementation of quality will be not difficult if the organizations encourage the team spirit among staff, quality culture and attitude of participation & involvement of the employees.

In addition, [47-48] found that organization quality culture influences the employee's beliefs in implementation of quality. An organization needs to form organization culture where employees comprehend and are motivated to contribute in quality program. Organizational quality culture affects quality implementation as it communicates quality practices and norms.

As well as, ^[49]found that organizational culture is one of the main causes of failure in a quality program. Also, ^[50]found a positive relationship among good organizational culture and implementation of TQM. They found that, organizations with a culture that is open to change and that holds new ideas and ways of doing things are more likely to succeed in introducing and implementing TQM. This is because such an environment motivates employees and supports innovation.

Moreover, ^[51]revealed that quality culture helps in reducing employee's obstacles, information obstacles and customer related obstacles that are frequently faced in the implementation of TQM. According to ^[52]the absence of appreciable quality culture resulted in delay in the implementation of the accreditation processes. In this respect, ^[53]reported that when all elements of quality including the accessibility of the resources and controlling the organizational culture are implemented effectively, the quality program is more likely to success and this can be achieved by using suitable strategies.

VII. Conclusion

More than half of nursing staff at oncologycenter, Mansoura University had fair perception about hospital accreditation program. Nursing staff had high perception of accreditation requirements followed by quality concept, accreditation end results and accreditation concept. Also, more than half of nursing staff had high agreement score about factors affecting implementation of hospital accreditation program. Reward and recognition factor was found the highest and ranked first. Hospital culture factor was significantly the lowest and ranked last one.

VIII. Recommendations

- Provide training programs to nursing staff to enhance their perception about quality and accreditation.
- Establish systems, protocols, policies and strategy to enhance nursing staff perception about quality and accreditation.
- Regular meetings for all hospital staff with the leadership and quality coordinators in order to promote their involvement and to share with them the performance-related data of each department.
- Regular involvement of all the concerned medical, nursing and administrative staff.
- Continuous follow-up and being persistent in implementing the quality system.
- Continuous evaluation of performance in relation to progress towards implementation of accreditation standards.
- Attract of human resources specialized in the field of quality for standards.
- Increase cooperation and coordination with the relevant local quality committees reported by the ministry of health in order to exchange experiences and expertise.

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