

# Examining the Impact of Accreditation on a Primary Healthcare Organization in Qatar

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## Abstract

While a modest body of literature exists on accreditation, little research has been conducted on the impact of accreditation on primary care in the Middle East. This descriptive correlational study assessed the changes resulting from the integration of Accreditation Canada International's (ACI) program at Primary Health Care Corporation (PHCC) in the State of Qatar.

## Problem

The specific problem addressed in this research involved the lack of understanding about the value of obtaining accreditation in a primary care setting in the Middle East. As the first study on accreditation in primary care in the State of Qatar, the researcher aimed to set the blue print for future research to evaluate and explore the resulting *quality improvement* and *organization learning* happening in primary care organizations going through accreditation.

## Purpose

The purpose of this study was to examine the changes resulting from the implementation of an accreditation program in a primary care organization by studying the impact of applying ACI standards on quality improvement, and organizational *learning*.

## Research Questions

To what extent does the introduction of ACI accreditation program at PHCC bring *quality improvement* changes at the institutional level?

To what extent does the introduction of ACI accreditation program at PHCC foster *organizational learning* at the institutional level?

## Relevant Literature

El Jardali et al. (2014) stated that accreditation did show improvements in quality of health services in a recent study conducted in Lebanon in the primary care HCs in the country.

Alkhenizan and Shaw (2011) encouraged health professionals and organizations to pursue accreditation since accreditation proved to be a motivation tool.

Greenfield et al. (2011) considered Accreditation as an effective *quality improvement* tool that reinforced transparency and team work.

Sack et al. (2011) found that patients saw that successful accreditation was not associated with better quality.

Taber and Eccles (2011) & Touati and Pomey (2009) stated that accreditation was a tool that aimed at both the acquisition of knowledge and the enhancement of the quality of services.

Lantaigne's (2009) showed the effect of accreditation on causing changes that influence relational and strategic changes in organizations.

## Procedures

The quantitative data in this study were collected using Pomey's (2003) questionnaire which was adapted from Shortell's. The techniques consisted of an individual questionnaire, which was used to measure the effect of ACI accreditation on the perceived quality performance and *organizational learning*.

500 questionnaires were sent out, with a response rate of approximately 57%.

Employees were from both frontline and management levels and included clinical and non-clinical teams.

## Data Analysis

Spearman correlations were used to evaluate the associations between the impact of accreditation and different questionnaires sections means.

ANOVA test was also used to compare different questionnaire sections' means based on gender, age groups, work duration, type of job contract work location, job position and involvement in accreditation.

## Findings

### Impact of Accreditation on Quality Improvement

- A *positive* correlation between staff perception of accreditation and their perception of *quality improvement*.
- Employees who were involved in accreditation had more favorable perception of *quality improvement*.

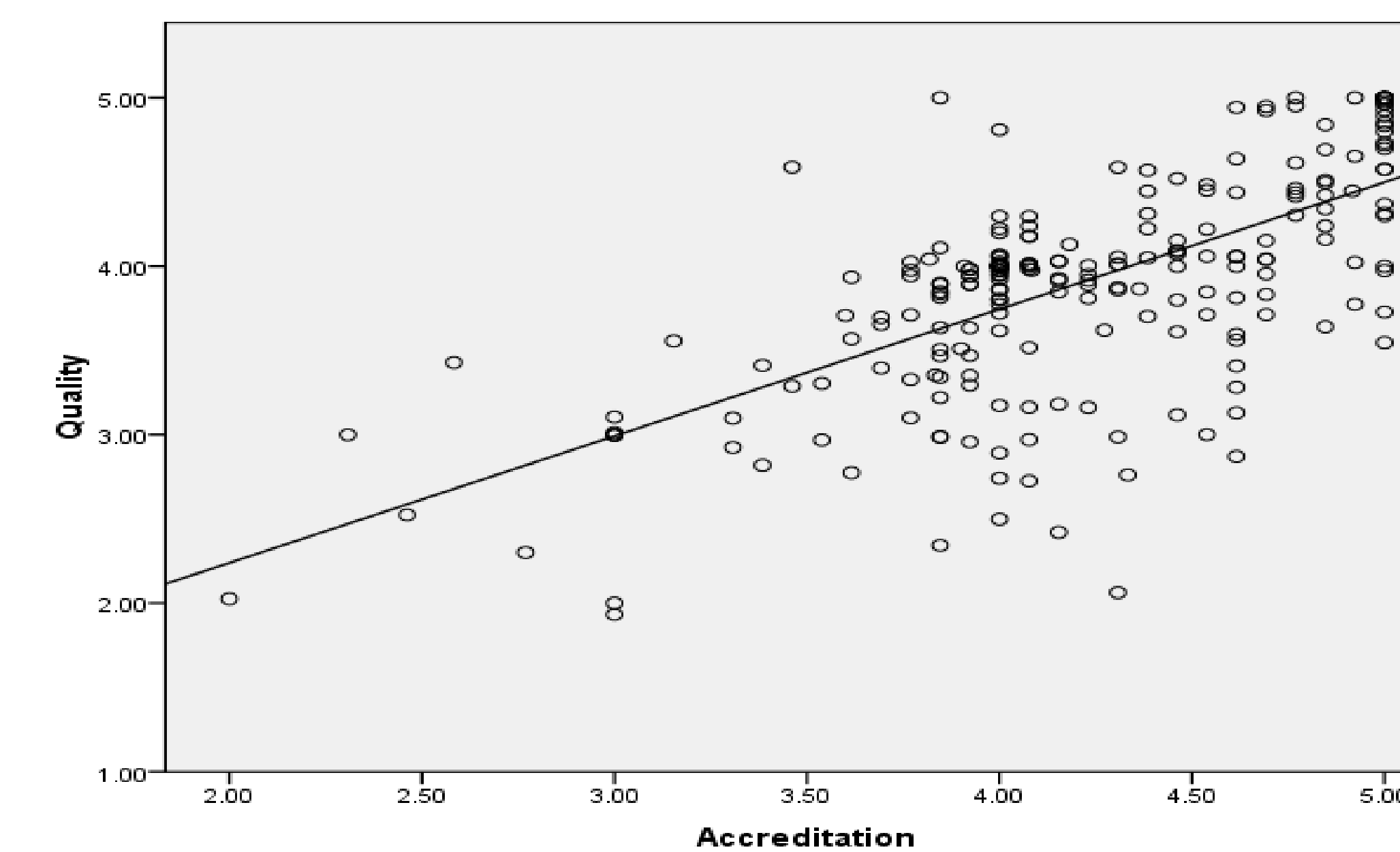


Figure 1 Correlation between Accreditation and Quality

### Impact of Accreditation on Organizational Learning

- A *slightly positive* correlation between staff perception of accreditation and their perception of **Group** culture type and a *negative* correlation between staff perception of accreditation and their perception of **Hierarchical** culture type.
- Employees who were involved in accreditation had a higher score for **Group** culture.

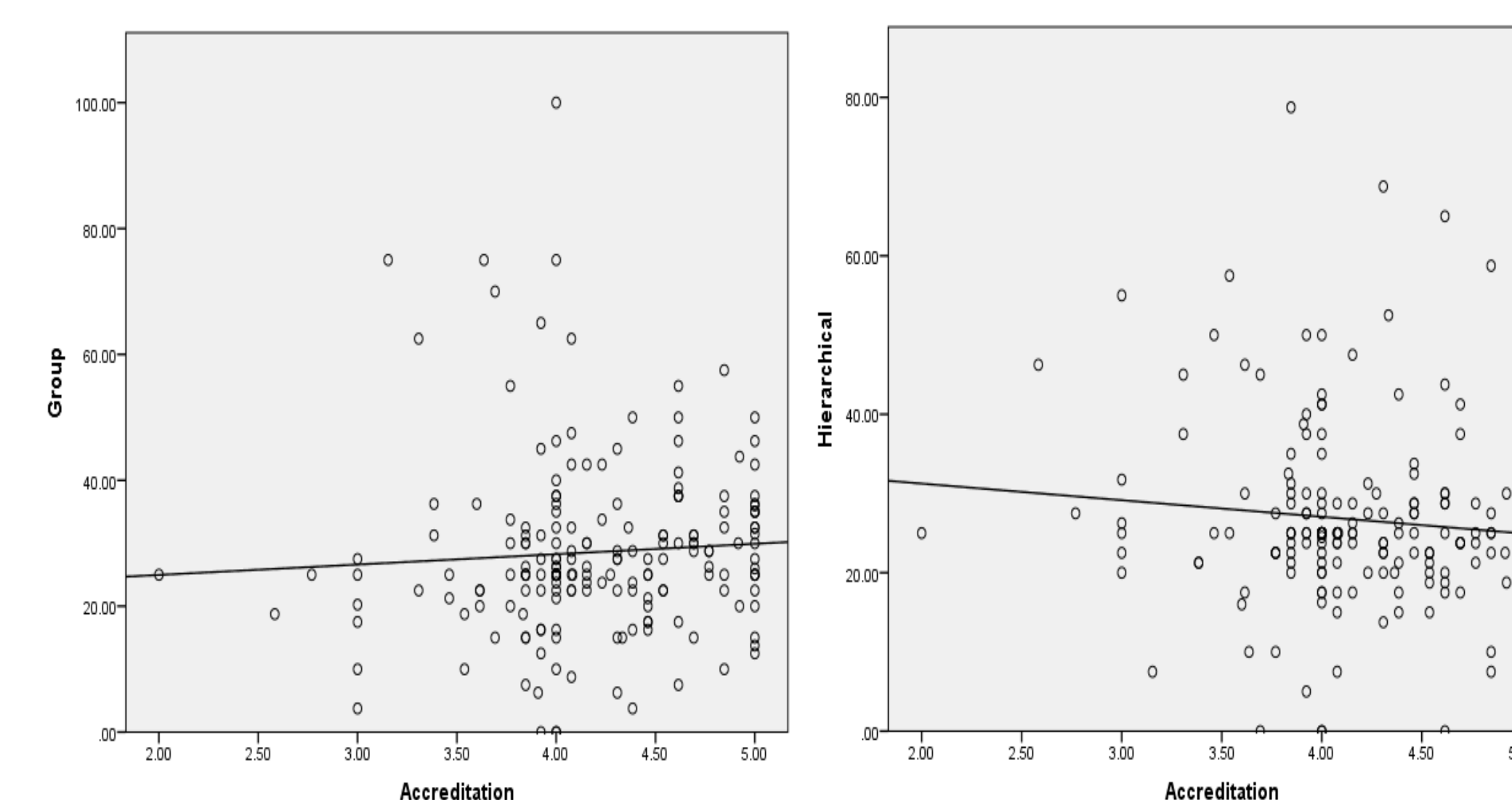


Figure 2 Correlation between Accreditation and Group Culture and Accreditation and Hierarchical culture

## Limitations

Psychological freedom.

Researcher bias and social desirability bias - the researcher being the accreditation manager. English language competency because the participants were not English primary speakers.

Quality and organizational change assessed based on employees perception rather on measures of performance.

Technical problems during the survey completion.

## Conclusions

Accreditation has a **positive impact** on the quality of care, and is as well a drive for *organizational learning*.

Accreditation can be a viable **tool** to provide guidance and support as organizations work on *quality improvement*.

In order for health organizations to succeed in accreditation, they should value the importance of having a culture that supports *quality improvement* and employee involvement.

## Social Change Implications

Accreditation affects improvements at the level of provision of care, which eventually results in a healthier society.

Accreditation helps organizations to gain a better status in the community. The country itself would gain status for raising the level of the quality of care.

Healthcare leaders and legislators in the Middle East region should be motivated to devote the needed budget for *quality improvement* and accreditation.