



CHKS

Insight for better healthcare

Part of the Advt Group



Assurance and
accreditation

HELPING ORGANISATIONS TO APPLY QUALITY STANDARDS TO IMPROVE PATIENT CARE.

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WE ARE PASSIONATE ABOUT
IMPROVING PATIENT CARE
AROUND THE WORLD.

About us

CHKS has been a leading healthcare accreditation service for over 25 years and is the only provider of both healthcare accreditation and ISO certification.

We have unrivalled experience in assisting healthcare organisations to apply quality standards to improve patient care, while addressing key challenges such as risk management, clinical effectiveness and continuous improvement.

Our accreditation programmes are tailored to all aspects of healthcare provision from acute hospitals, addiction treatment centres and hospices to specific services such as radiotherapy and maternity. They are flexible and supported by dedicated client managers – healthcare quality experts who will provide advice at every stage of your quality improvement journey.

Having worked with clients in 15 countries, we understand the cultural differences and complexities of various healthcare systems and economies.

Quality assured

Our standards and services/operations are accredited by ISQua External Evaluation Authority (IEEA). Our services are accredited by the UK Accreditation Service (UKAS) to award the internationally-recognised certificate of ISO 9001 for quality management systems to healthcare organisations.

WE ARE THE ONLY ORGANISATION
TO HAVE 'TRANSLATED' THE ISO 9001
STANDARD, USING HEALTHCARE-
SPECIFIC TERMS, TO MAKE IT
APPLICABLE TO HEALTH AND
SOCIAL CARE SERVICES

Our healthcare quality standards

Our standards bring together international guidance and best practice to ensure that your organisation is working towards the highest international quality standards.

We are at the forefront of developing and implementing accreditation programmes for health and care facilities and our standards are mapped to the requirements of the Care Quality Commission, HIQA and ISO9001:2015.

The CHKS library of standards cover the core principles of healthcare delivery and include:

- Leadership and management
- Risk and safety
- Patient focused care
- Facilities and site services
- Service governance
- Specialist and clinical services
- Support and rehabilitation services

We can develop bespoke packages of standards that reflect the individual services provided by your organisation. See page 33 for a detailed list of our general standards.

Case study



We have seen increased awareness among staff to report incidents and accidents as well as an increased focus on risk management at all levels of the organisation.

Antonio Leuschner, Chairman of the Board of Administration – Hospital Magalhaes de Lemos, Portugal

Who is accreditation for?

If your health or care organisation or service is committed to delivering the highest quality health and care services then accreditation could be right for you.

An accreditation programme offers a framework for continuous quality improvement. It also provides independent assurance to patients, staff and stakeholders that you are providing safe and affective services built around the patient.

We have programmes applicable to the following; acute hospital services, care homes, hospice care, maternity and specialist neonatal care, addiction treatment and psychosocial rehabilitation centres, oncology, cruise ships medicine, primary health care and ambulance services.

We are developing standards for pharmacies and telehealth services.



Accreditation has continued to motivate our staff to work consistently as a team and has focused on implementing best practice in all areas. From the beginning staff were eager to take on board the changes in behaviour and thought processes that were essential to meeting the requirements of accreditation. Their commitment and enthusiasm has been the driving force at all times.

Sister Agnes Fitzgerald, Director, Cuan Mhuire Bruree
Hospital Magalhaes de Lemos, Portugal

How does our accreditation programme work?

1. We provide you with a bespoke set of standards for your organisation
2. You self-assess your organisation against our standards
3. We work with you to support the change, providing advice, support and access to other healthcare organisations that have done it before
4. Areas for improvement are identified
5. An external peer review team assesses your compliance against the standards
6. We provide a final action plan to meet outstanding requirements
7. Once implemented a final report is submitted to our panel for consideration of an accreditation award



From the Trust's perspective accreditation has meant that we were able to help meet the challenge of NHSLA compliance and CQC requirements as the evidence was already in place. Documentation control has ensured easy access to appropriate evidence when required.

Diana Williams, Governance Manager, The Royal Wolverhampton NHS Trust

Benefits of our accreditation programme

- Creates a framework for delivering high quality care consistently across the whole organisation
- Provides a mechanism for continuous improvement
- Ensures compliance with regulation and guidance
- Involves all members of staff on a quality improvement journey
- Offers independent recognition of your commitment to quality
- Provides assurance for the management team
- Provides an evidence-base of best practice for new policy development and implementation
- Improves communication and dissemination of information
- Formalises the audit and quality improvement process



Supported by accreditation online

Our accreditation programmes are supported by an online resource that helps you manage your programme.

Accreditation Online will:

- Help you implement and manage your accreditation programme across the organisation
- Improve staff involvement by allowing online access to the standards framework for any of your employees
- Allow you to monitor compliance and progress towards completion at the touch of a button, highlighting areas for improvement
- Enable you to identify national regulations and guidance including NHS Reconciliation, HIQA Care Quality Commission, National Service Frameworks and NICE
- Provide a central and accessible repository of information for all inspection and assessment organisations



Our ISO certification programmes

ISO certification provides credible and independent recognition of your commitment to quality improvement for your patients, board and external regulators.

As a leading health and social care certification service, we have unrivalled experience in developing and applying quality standards to improve patient care, while addressing key challenges such as risk management and clinical effectiveness.

We are accredited by the United Kingdom Accreditation Service (UKAS) to ISO17021-1:2015 and therefore clients who work with our standards can achieve ISO 9001 certification.



Our assurance programmes

Our unique healthcare assurance services combine data analysis with an independent on-site review of standards and processes.

We will benchmark your performance on a range of key service performance indicators and compare to similar organisations around the country. We will also assess care standards against national quality standards to identify areas of good practice and potential risks.

Our team of healthcare quality experts will then help you to create and implement a robust quality framework that delivers improvements and builds a culture of continuous improvement.

Programmes:

- Assurance in Dementia Care
- Assurance in Maternity and Specialist Neonatal Care



Each time we had meetings with surveyors they always contributed something new to the business. On one occasion there was a focus on the patient experience and the suggestions that were made helped us to evolve our services.

Ellen Leacy, Quality and Process Manager, Alliance Medical – Ireland

Our team

Our 125-strong assurance and accreditation team is made up of experienced healthcare professionals with a passion for raising healthcare quality standards.

We are the only healthcare accreditation company that provides dedicated client managers. They support you through your quality improvement journey, providing guidance, interpretation and advice on standards and on the survey process.

Our surveyor team is a voluntary group of 100+ senior healthcare professionals, who are either clinicians or managers within a clinical area.

They provide expert opinion through a peer review approach when we visit your organisation as part of the assessment process.

The CHKS Accreditation Council and Awards Panel approve the accreditation awards and play a vital role in assuring the highest levels of quality and impartiality in the accreditation process.

Case study



Above all it demonstrates that we are a quality-focussed organisation and that we adhere to our values. We would definitely go for accreditation again and I'm convinced that it has been pivotal in keeping our company on track. Although there was a lot of work involved, there are absolutely no regrets.

Centric Health



Case study – Primary care: Centric Health

Centric Health is a diversified international healthcare services company providing medical recruitment, primary care and diagnostic imaging services in Ireland, the UK and Australia. It aims to provide a range of innovative and accessible healthcare services in local communities and currently employs over 300 staff within Ireland.

Centric Health decided to go for accreditation with CHKS and started working with a dedicated client services manager to look at the standards required, using guidance documents to establish what was needed.

They found that becoming accredited started the company on an improvement journey which has seen it become an expert in standards. The company is now sharing this expertise with its GP practices and business partners.

The managing director of Centric Health counsels new staff at induction that accreditation is not just about risk management and processes, but is also congruent with the company's five values, both enhancing the service to patients and improving the quality of working life for the staff.

Case study



A staff survey revealed that 100 per cent of staff believe that the patient comes first. People go out of their way to achieve excellent customer service. They have a strong sense of commitment and loyalty to the organisation.

Kath Dobson, Quality Manager, New Victoria Hospital



Case study: The New Victoria Hospital

The New Victoria Hospital in Kingston, an independent organisation with 240 staff, prioritises quality accreditation and management in its commitment to improving and maintaining healthcare standards. With the expansion to a new day surgery unit, the hospital was determined to uphold or enhance existing standards. Through sharing this experience, the service were recognised through the CHKS quality improvement award.

Staff dedication to patient focused values is evident, with a 100% survey result affirming that patients come first. Feedback mechanisms include redesigned questionnaires and Friends and Family Tests, ensuring continuous monitoring and quick responses to concerns. The hospital's robust data collection involves independent validation, red-alert systems for poor ratings, and efforts to increase survey return rates, including post-discharge phone calls and electronic accessibility.

Embracing technology, the hospital uses iPads for outpatient surveys. Staff wellbeing is a key focus, with over 40% working for more than ten years. Training, particularly in dementia care, is proactive, contributing to a positive review by the Care Quality Commission (CQC). An annual staff survey and governance reviews foster continuous improvement, culminating in the hospital's Quality Improvement award, reinforcing its dedication to delivering the highest standard of care.

Case study



We have no doubt but that accreditation has helped us to drive quality and safety and we have no doubt but that it has helped us with the future planning of our organisation.

Sister Agnes Fitzgerald, Founder – Cuan Mhuire



Addiction treatment: Cuan Mhuire

Cuan Mhuire is Ireland's largest voluntary provider of treatment and rehabilitation for people who have a dependence on drugs, alcohol or gambling.

Accreditation has motivated staff to work consistently as a team and focused on implementing best practice in all areas. From the beginning staff were eager to take on board the changes in behaviour and thought processes that were essential to meeting the requirements of accreditation.

Accreditation has brought a new sense of purpose, team spirit and cohesion to the organisation and its centres. The commitment and enthusiasm of staff has been the driving force at all times.

Committees, such as the Risk Management Committee and Infection Control Committee, ensure areas for improvement are identified and progress is tracked. The organisation has also put structures in place that enable it to preserve, develop and pass on its ethos and fundamental values.



The whole process of accreditation is about making changes that will improve quality, and this is achieved by improving processes and standards along the way. CHKS was a supportive partner in this process and I think any hospice in a similar situation will regret not having embarked on the accreditation journey sooner.

Galway Hospice Foundation



Hospice: Galway Hospice Foundation

Galway Hospice Foundation is fully multidisciplinary, consultant-led, providing services across all of County Galway and the adjoining islands.

The management team wanted to review the entire business to ensure the service was meeting international best practice standards and providing the best possible service.

An initial gap analysis showed which quality standards were being met in full, in part and not at all. Four working groups were set up for inpatient care, home care, day care and corporate governance. Every single person within the organisation was involved in the process of mapping against standards. In documenting these processes they started to discuss whether there was a better way of doing things.

This discussion with staff was an important part of the improvement process. The management team recognised that if policies and procedures were to be implemented successfully, they had to take into account the views of those putting them into action.

Within a few months of starting the accreditation process, staff began to see the value of having clearly written standards. A number of new committees were set up and everyone was able and encouraged to have a say.

Case study



Accreditation has given us a framework for structuring the business and for improvement. In order to grow and develop we needed greater accountability and we also needed to have these structures in place.

Michelle Quill, Accreditation Compliance Supervisor – Lifeline Ambulance



Ambulance: Lifeline Ambulance

Lifeline Ambulance is the largest private ambulance operator in Ireland. It provides ambulance transfers between medical facilities nationwide, routine and emergency transport for organ retrieval teams and overseas repatriation service.

When Lifeline Ambulance started the accreditation journey there were policies and procedures in place but some inconsistencies across the company.

Accreditation has helped to ensure that day-to-day processes are all covered by relevant policies. The team has also made sure that policies match what is happening in practice and formal reviews take place.

As a growing company with most staff not based in an office environment, accreditation has helped to support the HR function as it has become more complex. There has been a change in mindset about how the company approaches policies and procedures, which is seen as a cultural shift. Having written policies that are clearly defined and relevant has also given distributed staff confidence in what they are doing.

One important factor throughout the accreditation process has been management support and recognition of the need for senior-level buy in.

OUR STANDARDS INCLUDE:



General CHKS healthcare standards

Leadership and management

- 1: Leadership and management
- 2: Quality and governance
- 3: Human resources
- 4: Education, training and development of staff

Risk and safety

- 5: Risk management
- 6: Health and safety
- 7: Fire safety
- 8: Waste management
- 9: Clinical risk management and patient safety
- 10: Resuscitation
- 11: Management of medicines
- 12: Medical devices, equipment and decontamination
- 13: Infection prevention and control
- 14: Information management and governance

Person centred care

- 15: Patient pathway
- 16: Person centred care
- 17: Patient rights and needs
- 18: Information for patients
- 19: Clinical records

Facilities and site services

- 20: Environment, equipment (non medical) and facilities management
- 21: Security
- 22: Catering
- 23: Housekeeping
- 24: Reception and telecommunications

Service governance

- 25: Service governance

Sample standards



Standard 1 Leadership and Service Management

1.15 The organisation has documented business objectives and a formal action plan detailing timeframes and outcome measures through which achievement can be monitored.

1.16 The objectives have been risk massessed and key controls to manage the achievement of the objectives are identified and implemented.

1.21 Feedback and comments from patients, and other stakeholders are used to inform the development of the business/service plan.



Standard 2 Quality and Governance

2.3 There is an overarching integrated governance strategy with a focus on organisational learning.

2.13 The organisation demonstrates improvement through change, innovation or refreshing practice.

2.42 A summary of how the organisation has responded to complaints and patient, family/carer feedback is produced regularly. This is made available to patients, staff and stakeholders.



Standard 4 Education, training and development

4.6 There is an organisation-wide education, training and development plan accessible to all employees.



Standard 5 Risk Management

5.8 There is a system in place for the proactive identification, assessment and prioritisation, communication and management of risk.



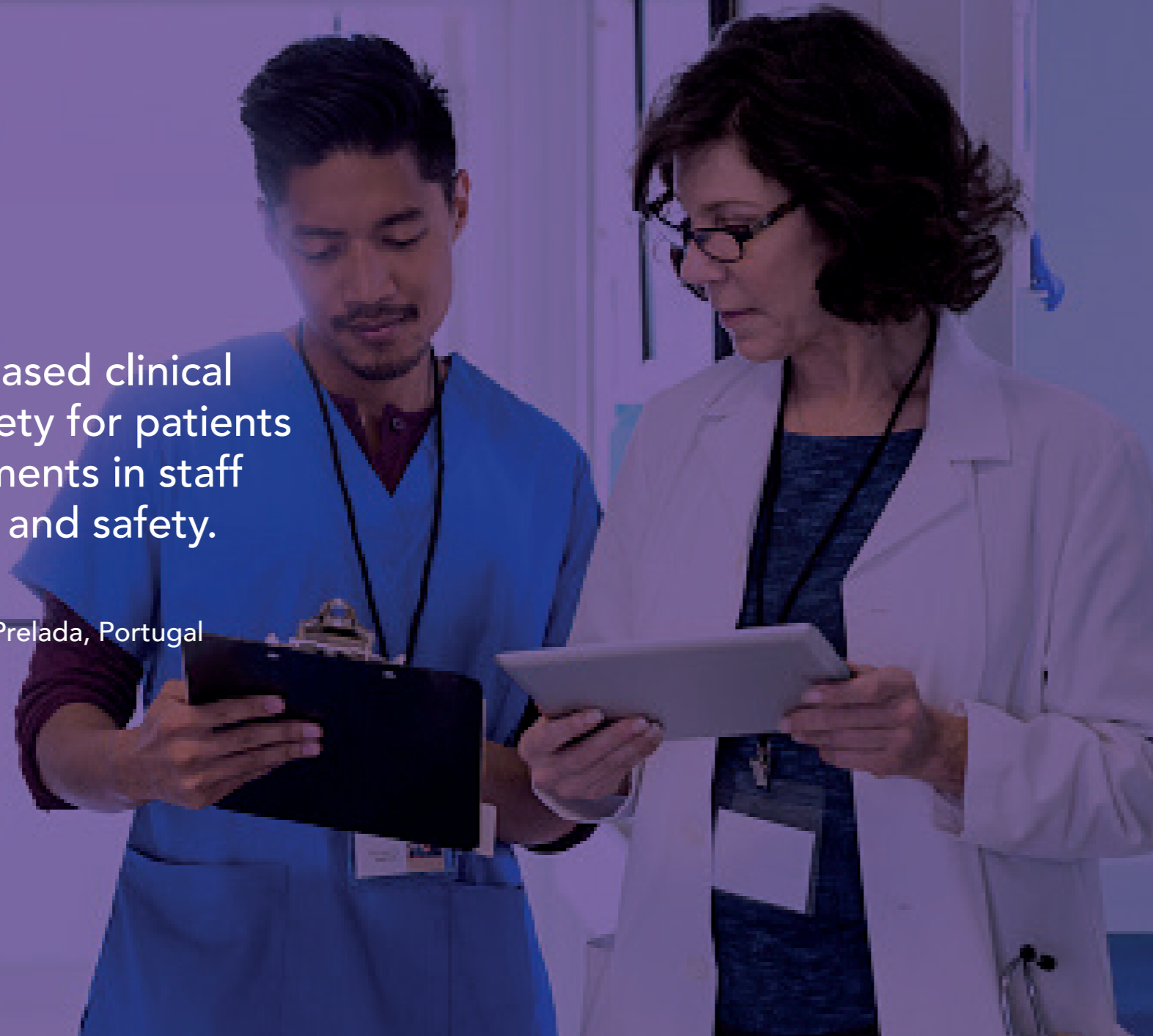
Standard 25 Service Governance

25.13 There is a system in place to ensure that information and data from all sources of incidents, quality evaluations and complaints are collated, reviewed and analysed to improve service delivery where identified.



We have seen increased clinical and non-clinical safety for patients as well as improvements in staff working conditions and safety.

Claudia Franco,
Quality Manager Hospital de Prelada, Portugal



Tips for implementing an accreditation programme

1. Commit a dedicated resource to the accreditation process

In most cases this means having a nominated manager or lead clinician dedicated to ensuring processes and standards are in place. This person works to involve the whole team since quality improvement should be embedded in everyday processes and procedures.

2. Ensure senior team backing

The accreditation process is made a great deal easier with the backing and support of managers and clinicians.

3. Have a clear action plan

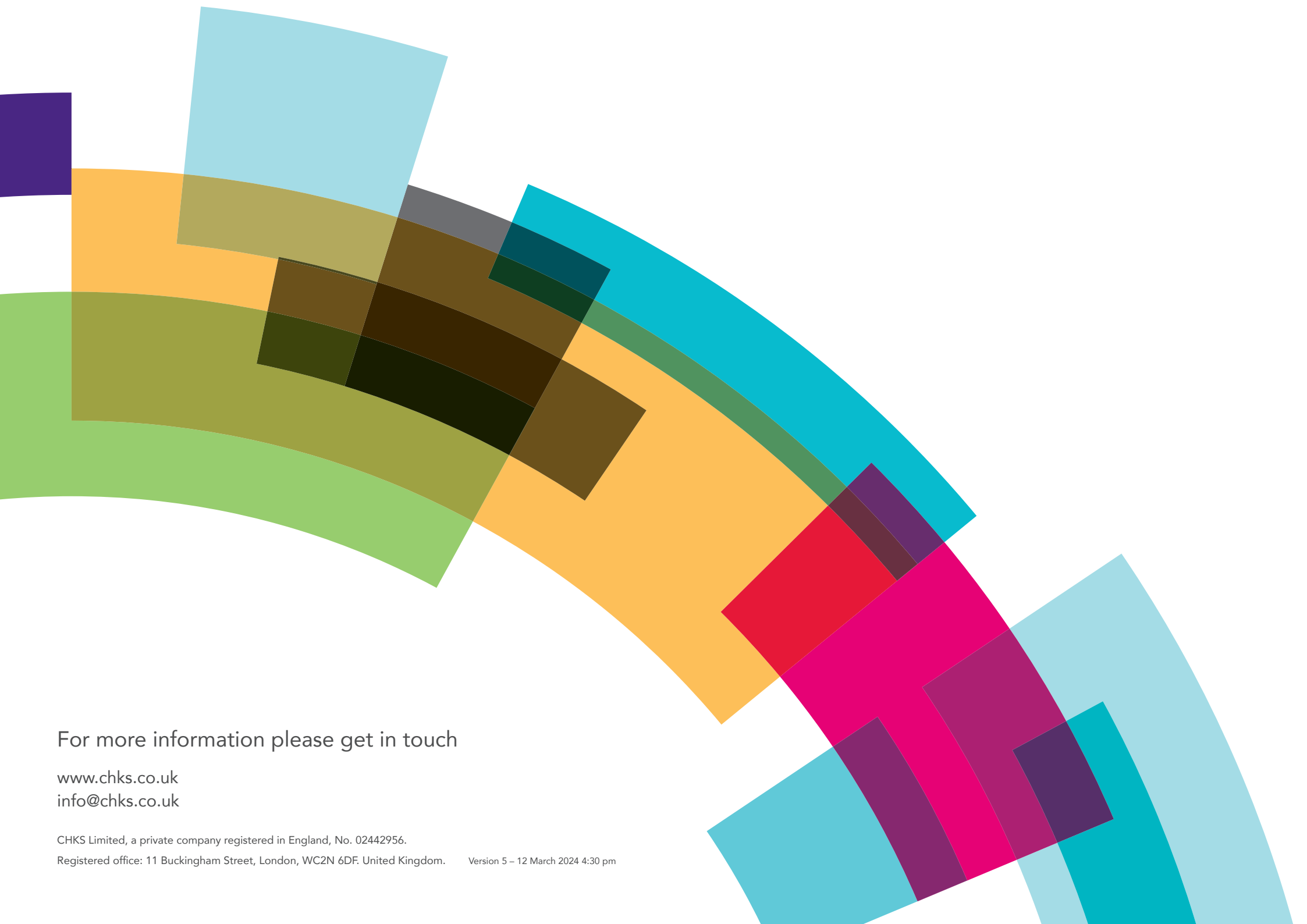
Create a detailed plan with owners and timelines. A dedicated steering group should regularly review and track progress against the timeframe in readiness for your survey and to maintain continuous improvement.

4. Communicate the accreditation process to all relevant staff

Organisations that have been successfully accredited always make sure every member of staff is aware of the accreditation process, what is required of them and their role. Some have held workshops, drop-in sessions and send regular updates to all staff.

5. Involve staff at the frontline

Frontline members of staff see processes at work first hand and in order for them to comply with standards, it is a good idea to get them involved early on. This means the process becomes bottom up as opposed to be imposed from the top down.



For more information please get in touch

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