

Collaborative Quality Improvement Methodology for Accreditation: A Strategy for Continuity, Consistency, and Team Engagement

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INTRODUCTION

Accreditation is an effective way to **standardize processes, reduce waste, and improve the quality of care and patient safety**. The institution where this study was conducted holds **25 certifications** for **different services**, with the main one being the Joint Commission International (JCI), first obtained in 1999. The **cycles** between audit visits require ongoing **monitoring and continuous improvement to maintain accreditation**. One of the challenges is to keep the **team engaged and compliant** with quality standards.

AIM

The **objective** of the intervention was to develop a **continuous preparation model, translating accreditation standards** into accessible language and **encouraging employee engagement**.

METHOD

The **Collaborative Quality methodology** was developed in a **healthcare service** based in **São Paulo**, consisting of **one large hospital and six external units**. It was built on **two theoretical-methodological frameworks**: the Institute for Healthcare Improvement's improvement model and the applied Agile Scrum Methodology. The methodology involved the following **strategies**: definition the **work team**; structuring and training the **driver diagram** by chapter of the accreditation manual; **mapping opportunities and diagnostics** by standard and measurement element; **structuring results** with compliance percentages, scores by chapter and standard; distributing findings in the **JCI Safer® Matrix** according to scope and probability of harm; **structuring action plans by prioritization**; **virtual learning sessions** with educational books; team engagement strategies through **educational quizzes**, onsite **tracer checklists**, quiz and **tracer compliance dashboards**, **gamification**, and **recognition of employees** with top ratings; and **periodic communication and celebrations** with Quality Team.

RESULTS

The **Collaborative Quality Methodology** was developed as part of the **institutional preparation** for the 8th JCI **Reaccreditation cycle** in 2021 and was applied again in the 9th cycle in 2024.

Monitoring the evolution of the results, we had an **increase of 52%** in the working time devoted to **collaborative efforts**.

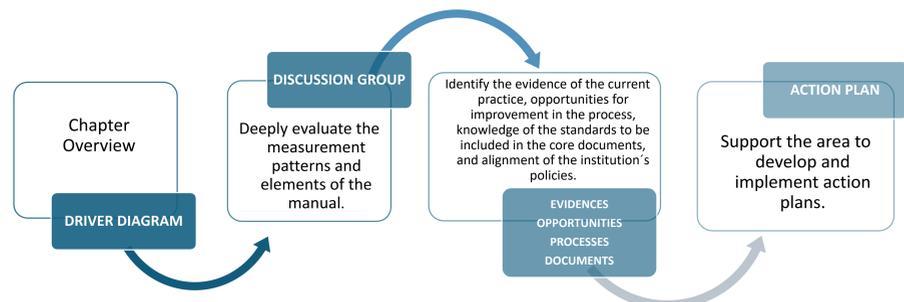
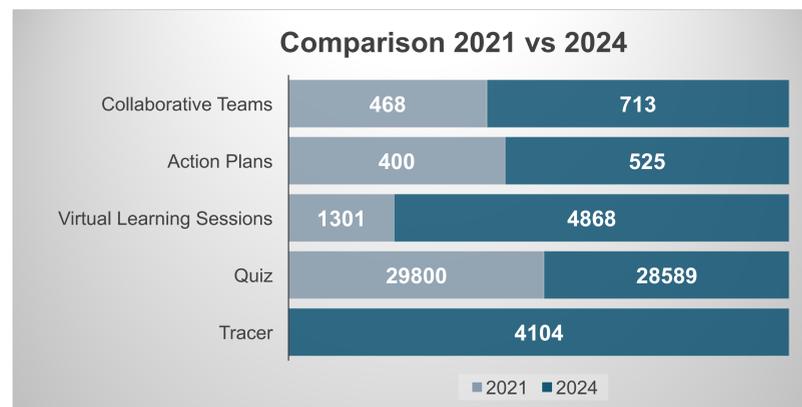
We maintained **stability** with a slight improvement in the development of **action plans**. During the mapping of the **1,250 measurement elements**, we recorded **226 partially** compliant and **32 non-compliant** elements in **2021**. In **2024**, **305 partially** compliant and **33 non-compliant** elements were identified. A total of 400 action plans were developed in 2021, and 525 in 2024.

The **learning sessions**, have **grown significantly**, nearly **quadrupling**. The **recordings** were made available on the institutional website, **expanding the reach of the content**.

Participation in the **quizzes** was also significant, with a **high level of engagement**.

In 2024, **two new engagement strategies** were introduced with very **successful results**: **onsite leadership conducted** a significant number of **4,104 audits**, and **interactive games** were held with the participation of **1,671 employees**.

These results reinforce the **institution's commitment to excellence**, showing that the **collaborative quality methodology drives sustainable improvements in quality across accreditation cycles**.



CONCLUSIONS

The collaborative quality improvement methodology, used as the foundation for **preparing for the reaccreditation visit**, promoted greater **involvement of leaders in identifying opportunities and creating improvement plans**. **Employees demonstrated preparation and confidence** when responding to auditors, making the visit process smoother, with **engaged and participative teams** showing comprehensive knowledge of the accreditation requirements. This **strategy** contributed significantly to the **success** of the accreditation in 2021 and 2024. In **both cycles**, there were no **"non-compliance"** findings, with 23 and 28 items recorded as "partially compliant," respectively. Additionally, we maintained the **absence of findings** in the **critical zone** of the JCI Safer® Matrix and were **reaccredited with merit by the JCI**.

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