

## Accreditation of Diagnostic Services Q&A:

### What are the key drivers to undertaking the Accreditation Process?

- Improved patient safety
- High quality service delivery
- Reducing Serious Untoward Incidents (SUI's)
- Robust governance – Accreditation provides the opportunity to develop and maintain robust governance processes and documentation, with clear owners, providing assurance to the organisation about the quality and safety of its Diagnostic Services.
- The identification, management and reduction of risk and errors
- Recruitment & Retention: Trusts that provide Accredited services offer a commitment to CPD and providing specialist training to its staff – a good tool for recruiting and retaining staff
- Accreditation helps to address issues systematically and highlight areas for quality improvement and can be used to shine a light on areas that need investment

### What are the benefits of an Accredited service?

- A large percentage of the standards and criteria, within each scheme are related to patient safety and/or experience. This patient-focused approach provides assurance to patients that the diagnostic services are of the highest quality, with their experience at the forefront of the clinical process.
- Improved patient engagement through information and feedback processes
- Patients are able to identify which organisations are operating at a high standard
- Enabling greater transparency between organisations diagnostic services and patients
- Improved patient experience, thereby improving the overall patient experience across the clinical pathway

### What is the Accreditation of Diagnostic Services?

Accreditation is a clinician-led assessment of the quality of diagnostic services with a patient and safety focus. It provides independent assurance that the diagnostic services, equipment and processes are of the highest quality, with staff adequately trained in them. Further information can be found on the Health Quality Improvement Partnership (HQIP) website.

### How much will Accreditation of Diagnostic Services cost?

The costs are dependent on the complexity of scope of accreditation being sought, and the size of the operation in terms of the number of service delivery locations, the range of disciplines and activities to be assessed, and the number of technical assessors required to conduct the assessments) of the provider organisation. Costs typically include pre and post assessment activities.

Further information related to fees can be found on the UKAS website.

A process flow can be found in Appendix 1.

### Are there any cost savings from this process?

Financial savings can be made in a number of ways including:

- Splitting diagnostic services into sections that undertake the process of accreditation across years
- Sharing knowledge between schemes as schemes will have some overlap.
- Savings can be made from improvements to service leading to better outcomes and potential reduction in mitigation costs.

### How is the Care Quality Commission involved in monitoring Accreditation of Diagnostic Services?

This evidence from an accreditation process will inform CQC's judgements; both of core services that include diagnostic services and of the quality of leadership overall. The CQC will use a Trust's participation in diagnostic Accreditation schemes to inform and potentially reduce their inspection activity as evidence of the quality of the diagnostic services and of the Trust's commitment to quality improvement.

### Who should I approach within my Trust to collaborate with and drive Accreditation?

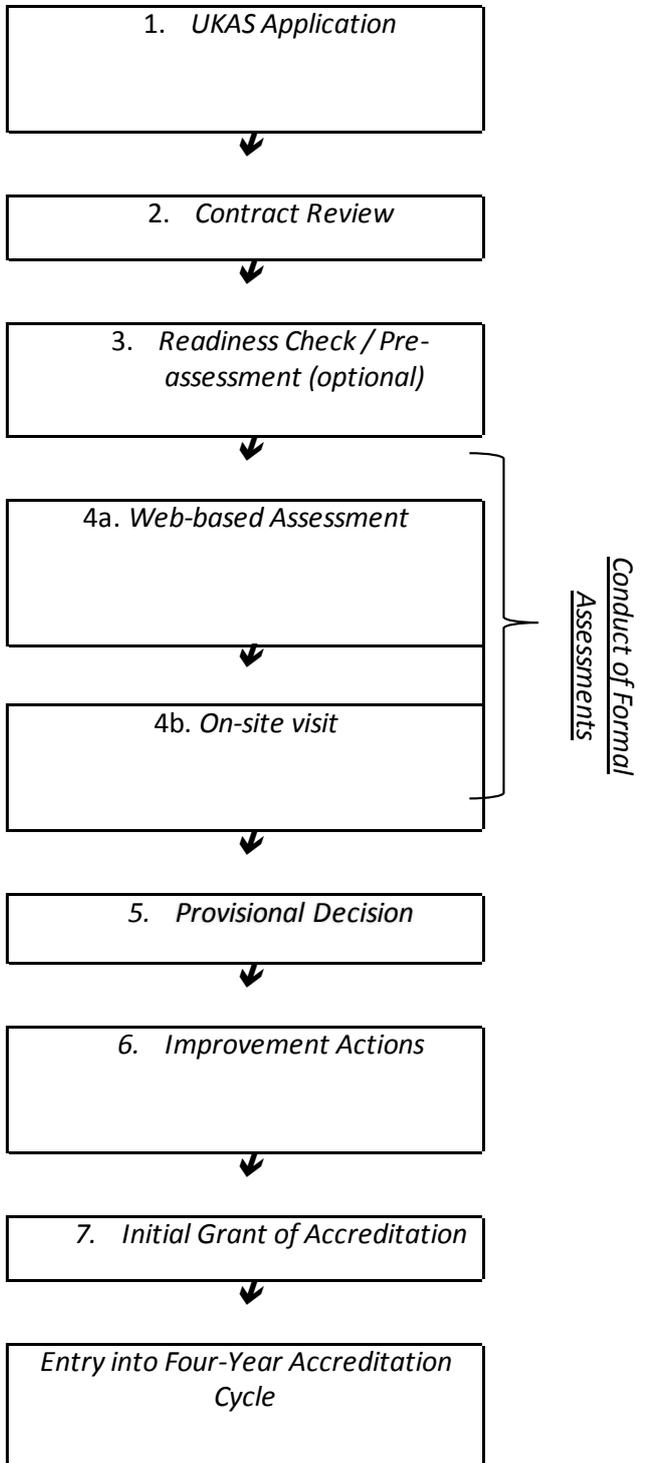
Many Trusts benefit from a Lead Healthcare Scientist. Lead Healthcare Scientists will be important collaborators to drive the Accreditation of diagnostic services within Trusts. Alternatively, contact the relevant Accreditation Scheme contact or the HQIP website.

### What lessons have been learned from organisations that have implemented Accreditation Schemes within their Diagnostic Services?

- There is added efficiency if accreditation is taken up as a Trust wide initiative as there is considerable overlap in the standards between the individual accreditation programmes. Evidencing elements of these standards can be done once within an organisation and shared across all scientific and diagnostic services undergoing accreditation, making this more efficient and effective for the organisation.
- Issues around staff capacity to undertake the process can be mitigated by an emphasis on networking and sharing workload. Accreditation Schemes can share contact details with other departments going through the process, thus providing the opportunity to support each other throughout the process and share ideas. There is overlap between schemes to allow some work to be shared and replicated.

**Appendix 1: Process flow models for IQIPS, ISAS and ISO15189.**

***IQIPS & ISAS Initial Assessment  
Process***



**ISO 15189:2012 Initial Assessment  
Process**

