



Development of a Healthcare Service Accreditation Model in Latin America: The CLACS Method



ISQUA2024-30c055b

Author: *Viviane Franco*
Co-authors: *Rubens Covello, Camilla Covello, Melissa Morais, Raquel Leuenroth, Regina Cardia, Fernanda Hernandes*

INTRODUCTION

Accreditation is an evaluation method that seeks, through well-established standards and requirements, to promote quality and consolidate a Culture of Safety. Conducted by an independent and voluntary organization, it is the most effective way for organizations to regularly assess and improve the quality of their services.

With this purpose, the Quality Global Alliance (QGA) developed the CLACS (Latin American Council of Health Quality) model, an accreditation method for application in Latin American countries. QGA is internationally accredited by ISQUA - International Society for Quality in Healthcare.

The CLACS method stands out for its use of tools that allow the assessment and restructuring of processes across healthcare delivery. The evaluation focuses on person-centered care, guiding all aspects of service planning, delivery, and assessment, as well as organizational management direction.

This study aims to present the results obtained through the execution of a pilot for the implementation of a new accreditation method designed for Latin American countries.

METHODOLOGY

The development of the CLACS method was carried out by the Quality Global Alliance (QGA) in partnership with the Latin American Council of Health Quality. The journey to construct and implement it is divided into stages: Construction, review, and pilot implementation of the evaluation tool.

The standard construction was led by a group consisting of 14 experts in health accreditation, quality, and patient safety, who have expertise in various healthcare areas. The standard is divided into three sections: Organizational management, Clinical care, and Diagnostic services, which group the standards and requirements to be worked on throughout the methodology implementation process. The standards are divided into 3 levels:

- Level 1 - Safety: Implementation of basic safety structures and processes that form the foundation for quality improvement.
- Level 2 - Patient-Centered Care and Process Interactions.
- Level 3 - Continuous Improvement and Performance.

For the standard review, discussion groups were held to thoroughly discuss each worked standard, as well as to discuss relevant legislation and the healthcare context in Latin America.

For the pilot implementation of the CLACS method, an assessment tool was developed to analyze compliance with the criteria. Three hospitals in Mexico were selected for the application and assessment of the method's feasibility.

RESULT

After the conclusion of the pilot, it was evident that the method fits the needs of the hospitals selected for the pilot project in Mexico. This model proved to be an effective tool for guiding institutional management, placing the patient at the center of care, and providing a standard for continuous improvement. It stands out as the first model capable of achieving this level of standardization in the country, providing a solid foundation to drive healthcare institutions toward excellence.

CONCLUSION

The CLACS method allowed for the direction of process structuring, training, and development of its staff, learning through continuous improvement efforts, patient involvement as the primary stakeholder, and achieving the best results.

Therefore, this model is not only an efficient response to immediate demands but also a catalyst for long-term positive transformation in the healthcare sector. Its implementation promises not only to elevate care standards but also to serve as an inspiring beacon for other institutions seeking to improve their practices and provide truly exemplary healthcare.

The benefits extend beyond public recognition. The CLACS method can promote internal transformations in individuals, patients, and the healthcare system where it is implemented. As opportunities, the need for expansion to other countries and the training of evaluators in countries adopting the method has been observed.

