

Original Research Article

Impact of Hospital Accreditation Program (CBAHI) on Patient Safety: Nurses Perspective in Secondary Care Hospital, Najran

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Abstract: Background: Accreditation has been regarded as a crucial element in assessing and raising the quality of healthcare services. Accreditation helps to improve patient safety and minimize the risk of near misses, adverse outcomes, and medical errors. Nurses, are the front line in dealing with patients, are expected to continue raising awareness about the patient safety culture in order to limit the number of unexpected accidents and deaths caused by negligence. The study aimed to determine impact of the Hospital Accreditation Program (CBAHI) on patient safety: the perspectives of nurses in a secondary care hospital in Najran. **Methods:** A cross sectional survey was carried out among nurses working in Khobash General Hospital, Khoabsh, Najran Region, Kingdom of Saudi Arabia. A purposive sample of 110 nurses were participated in this study. The tool used for the study was a self-administered questionnaire. The questions were divided into four basic categories, with patient safety being the primary focus. The first section comprised of 11 items for assessing patient safety concerns and the second area, which dealt with medication management, contained 9 questionnaires with a primary focus on the safety of the drugs. The third section which was made up of 9 questionnaires to evaluate the infection prevention control standards and the fourth domain included four components to assess the quality of nursing documentation. Five points rating Likert scale (5= strongly agree, 4= Agree, 3=Neutral, 2=Disagree, 1=Strongly Disagree) were used to assess nurses' perceptions of the impact of hospital accreditation on patient safety. Descriptive statistics were used to measure the study variables, such as frequency and percentage distribution. **Results:** The study findings indicated that, the hospital accreditation program had a positive influence on nurses' perceptions of patient safety programs, a majority of the nurses 47(42.7%) strongly supported with the culture of both professional accountability and reporting of adverse events and near misses. Notably, around 35 (31.8%) participants concurred that the patient safety program has been directed and overseen by the Hospital Accreditation Program. A large number of nurses, 41(37.3%), strongly agreed that the accreditation program had improved patients' current medication processes, and 38(34.5%) agreed that accreditation program has provided insight into how to put policies in place to decrease medication error. The accreditation program has insight to application of infection prevention and control standards was supported by 30 (27.3%) nurses. 19 (17.3%) of the participants, on the other hand, stated that they were neutrally in agreement with awareness of basic precautions. Most of the nurses reported that accreditation procedure has significant impact on clinical nursing documentation. **Conclusion:** Nurses play a vital role in the Hospital Accreditation process and it is essential for achieving the desired out come by implementing the required standards. The study concluded that, the hospital accreditation program had a positive influence on nurses' perceptions on patient safety programs. As a result, the study suggests that MOH hospitals compare their nursing care, medical care, quality care, patient safety, and infection control to other hospitals' nursing perceptions of the accrediting impact on the quality of care offered in each domain.

Keywords: Hospital Accreditation Program (CBAHI), Patient Safety, Nurses Perspective, Secondary Care Hospital.

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INTRODUCTION

Accreditation has been regarded as a crucial element in assessing and raising the quality of healthcare services (1). Healthcare organization that is accredited has satisfied the highest international healthcare standards and regulations and provides global

recognition and a seal of approval for the organization's high quality of patient care (2). Accrediting systems have grown and extended throughout the world over the last three decades, from industrialized to developing countries, and there are now various accrediting schemes for healthcare institutions (3).

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The Saudi Central Board for Accreditation of Healthcare Institution (CBAHI) is the official institution in charge of granting healthcare accreditation to all governmental and private healthcare facilities in the Kingdom of Saudi Arabia (4). Ensuring patient safety through risk management and risk reduction is at the core of all accreditation standards and is the ultimate goal of the self-assessment and survey activities. Accreditation helps to improve patient safety and minimize the risk of near misses, adverse outcomes, and medical errors (5).

Patient safety is a significant consideration in healthcare. As a result, healthcare facilities participate in a variety of programs to monitor their services, including patient safety protocols (6). The patient safety network defines patient safety as the absence of unintentional or preventable harm as a result of medical care (7). In recent decades, patient safety has been a high-priority health system concern due to the increased risk of adverse events occurring in health facilities. As a result of the difficulty of a weak patient safety culture, particularly in educational hospitals. As a result, the issue has been integrated as the top priority in the health-care domain (8). The Accreditation program has improved the patient safety domain by emphasizing the patient safety programs, patient safety-related policies, and procedures on correct patient identification and importance to prevent the wrong patient, wrong site, and wrong surgery or procedure, patient care equipment alarm systems are also made safe, and effective communication of patient care information during patient handovers.

Nurses, as the hospital's frontliners in dealing with patients are expected to continue raising awareness about the patient safety culture in order to limit the number of unexpected accidents and deaths caused by negligence. The nurse to patient ratio is critical in ensuring high-quality services. According to Won and Lee (2017), recognized hospitals have a significant improvement in nurses' perceptions of patient safety culture, and this type of accreditation encourages nurses to improve their patient-handling practices. As a result, reduce medication error, improve clinical documentation, and patient safety measures (9).

Many studies have been undertaken to investigate the impact of accreditation on hospital services. Alawa *et al.*, (2011) conducted a cross-sectional study to assess the quality indicators before and after accreditation in the university hospital in Jeddah, KSA and reported that a significant perceived improvement was observed in safety and quality standards (10). According to the findings of the AlShammari respondents believed that accreditation has a good impact on patient safety, particularly healthcare-associated infections, nursing documentation, and patient medication information (11). Nurses play a vital role in the hospital accreditation process and it is essential for achieving the desired outcome by implementing the required standards. With this

background, the study aimed to determine impact of the Hospital Accreditation Program (CBAHI) on patient safety: the perspectives of nurses in a secondary care hospital in Najran.

MATERIALS AND METHODS

Study Design

Descriptive cross sectional survey was carried out among nurses working in Khobash General hospital, Khoabsh, in Najran Region, Kingdom of Saudi Arabia to assess the nurse's perception about the impact of Hospital Accreditation Program (CBAHI) on patient safety.

Setting

The study was carried at Khoabsh General Hospital. The general hospital provides secondary-level care, run by the Saudi Arabian Ministry of Health, located in the South Zone. Through the Emergency department, it provides inpatient and outpatient treatment to people of all ages, races, and nationalities as well as 24-hour round-the-clock care. Given the significance of high-quality medical care, the hospital has met the criteria for Accreditation in accordance with CBAHI standards.

Sample, Sample size and Sampling Procedure

All the nursing staff working in the Khoabsh General Hospital considered to be the study population. Only nurses who have worked in the hospital for at least two years were allowed to participate in the study. Sample, which was chosen using a purposive sampling technique. Those nurses who participated in the CBAHI Accreditation survey were given special consideration. Additionally, various nursing specialties were chosen. Using a sample calculation formula from Raosoft (www.raosoft.com), the sample size was determined. With a margin of error of 5%, an estimated population size of 150, and an expected outcome level standard of care domains of 50% and 95%, the estimated sample came to 109 participants. In order to round things off, the sample size was increased to 110 and the study includes staff nurses of all Nationalities, including Saudis, as well as Non- Saudis, Head nurses and staff nurses. The study eliminated nurses who were resigned and employed outside of the nursing department.

Research Instrument

Part I: The first part consists of socio demographic information of the nursing staff, such as age, gender, civil status, nationality, educational level, job experience, position within the hospital, and length of employment.

Part II: The second part consists of self-administered surveys on the impact of Accreditation on patient safety from the perspective of the nursing staff. The study's tool was created in accordance with Saudi Arabia's Hospital Standards Central Board for Accreditation of Healthcare Institutions CBAHI, 2016(4). The questions were divided into four basic categories, with patient safety being the primary focus. The first section comprised of 11 items

for assessing patient safety concerns, reporting adverse events or near-misses, patient safety programs, policies and procedures related to patient safety, ensuring proper patient identification, preventing wrong patient, wrong site, and wrong surgery or procedure, infusion pump safety, alarm system safety, communicating patient care information, and identifying, assessing, and intervening for patients who are at risk. The second area, which dealt with medication management, contained 9 questionnaires with a primary focus on the safety of the drugs. existing medication processes, reporting standards for medication errors, knowledge of floor stock pharmaceuticals, LASA, High Alert medication reconciliation, and on-call medications. The third section which was made up of 9 questionnaires to evaluate the infection prevention control standards, hand hygiene practices. standard precautions, expanded precautions, hospital nosocomial infections, incidents (like needle stick injuries), and monitoring care bundles of health care associated infections were all covered in this section. The fourth domain included four components to assess the quality of nursing documentation, hospital clinical forms, clinical information, clinical documentation policy and process, and information correctness. Five points (5= strongly agree, 4= Agree, 3=Neutral, 2=Disagree, 1=Strongly Disagree) rating Likert scale was used for measure nurse's perception toward impact of hospital accreditation on patient's safety. Questionnaire validity was created by reverent studies and its validity was examined by experts in the field of nursing. Additionally, a pilot study was conducted on number of nursing's staff to assure validity of the questionnaire.

Data Collection procedure

The permission was obtained from the hospital authority to conduct the research study. The researcher collaborated with the nursing staff at Khoabsh General Hospital. The investigator distributed the self-administered questionnaires to the nurses, to the nurses and subsequently provided their responses seven days later. Nurses answered the questionnaires on a specific research day to eliminate response bias. Respondents were encouraged to provide correct information. The responses were only to be used for study reasons, and the researcher was never to expose the respondents' identity. Throughout the research period, ethical principles were followed.

Ethical Considerations

Ethical approval was obtained from the Institutional Review Board (IRB) with registration number KACST, KSA: H-11-N-081, at the General Directorate of Health Affairs in the Najran region. Each participant expressed their consent before beginning the research project. The execution of the study received administrative approval. Data privacy and the importance of informed consent were both assured. Only the researchers had access to the data. The details were maintained in confidential manner.

STATISTICAL ANALYSIS

Data entry and statistical analysis were done using the SPSS21 statistical software package. Descriptive statistics were used to measure the study variables, such as frequency and percentage distribution. The statistical analyses, a p-value ≤ 0.05 was considered to be significant.

RESULTS

Table 1: Description of nurses' responses to the impact of the Hospital Accreditation program (CBAHI) on patient safety Domain

S. No	Variables related Patient safety Domain	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
1	Hospital Accreditation Program has prompted the culture of both professional accountability and reporting of adverse events/near misses.	47(42.7%)	35(31.8%)	14(12.7%)	08(7.3%)	06(5.5%)
2	Hospital Accreditation Program has provided direction and oversight of the patient safety program.	45(40.8%)	35(31.8%)	17(15.5%)	07(6.4%)	06(5.5%)
3	Hospital Accreditation Program has created and implemented policies, procedures, protocols, and guidelines for implementation of the patient safety practices.	46(41.8%)	33(30%)	18(16.4%)	8(7.3%)	5(4.5%)
4	Hospital Accreditation Program has ensured correct identification of patients. At least two patient identifiers (e.g., patient full name and medical record number) are required.	51(46.4%)	40(36.4%)	10(9.1%)	5(4.5%)	4(3.6%)
5	Hospital Accreditation Program has prevented wrong patient, wrong site, and wrong surgery/procedure	48(43.6%)	37(33.6%)	14(12.7%)	6(5.6%)	5(4.5%)

	during all invasive interventions performed in operating rooms or other locations					
6	Hospital Accreditation Program has ensured availability and safety of infusion pumps and "free-flow" protection	44(40%)	31(28.2%)	19(17.3%)	12(10.9%)	04(3.6%)
7	Hospital Accreditation Program has ensured the safety of the alarm systems of patient care equipment.	47(42.7%)	34(30.9%)	16(14.5%)	7(6.4%)	6(5.5%)
8	Hospital Accreditation Program has improved appropriate communication of patient care information during patient handovers. (e.g., Situation, Background, Assessment, Recommendation-SBAR),	51(46.4%)	41(37.3%)	8(7.3%)	6(5.5%)	4(3.5%)
9	Hospital Accreditation Program has improved process for effective identification, assessment, and intervention for patients who are at risk for pressure ulcers.	52(47.4%)	37(33.6%)	12(10.9%)	5(4.5%)	4(3.6%)
10	Hospital Accreditation Program has enhanced the evidence-based interventions to prevent catheter and tubing misconnections.	47(42.7%)	35(31.8%)	14(12.7%)	6(5.5%)	8(7.3%)
11	Hospital Accreditation Program has improved the written policy on verbal or telephone orders and telephone reporting of critical test results.	45(40.9%)	34(30.9%)	16(14.5%)	8(7.3%)	7(6.4%)

Table: 1 Describes the nurses' responses to the impact of the Hospital Accreditation program (CBAHI) on patient safety Domain. A majority of the nurses 47(42.7%) strongly supported with the culture of both professional accountability and reporting of adverse events and near misses. Notably, around 35 (31.8%) participants concurred that the patient safety program has been directed and overseen by the Hospital Accreditation Program. Regarding the development and execution of patient safety-related policies and procedures, 46 (41.8%) nurses firmly supported them. About 51 (46.4%) of the participants indicated that they highly agreed with correct patient identification. According to respondents 37 (33.6%), reported that it is important to prevent the wrong patient, wrong site, and wrong surgery or procedure. Only nurses 19(17.3%) neutrally agreed with the aforementioned statement on the accessibility, safety, and "free-flow" protection of infusion pumps. A majority

of nurses, 47 (42.7%), strongly agreed that patient care equipment alarm systems are safe. The majority of participants 51 (46.4%) stated that among the health care techniques, the Hospital Accreditation Program has increased effective communication of patient care information during patient handovers. (For instance, SBAR: Situation, Background, Assessment, and Recommendation). A modest number of participants responded that 12 (10.9%) were neutrally in favor of identifying, assessing, and helping patients who were at risk for developing pressure ulcers. The Hospital Accreditation Program greatly influenced evidence-based measures to avoid catheter and tubing misconnections, a large majority of nurses 47 (42.7%) strongly agreed. The statement that the accreditation program has enhanced the written policy on verbal or telephone orders and telephone reporting of critical test results is accepted by 34 (30.9%) of the nurses.

Table 2: Description of nurses' responses to the impact of the Hospital Accreditation Program (CBAHI) on Patients Medication Safety Information Domain

S. No	Variables related Patients Medication Safety Domain	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
1	Hospital Accreditation Program has positive impact on patient 'current medication processes.	41(37.3%)	28(25.5%)	24(21.8%)	09(8.2%)	08(7.2%)
2	Hospital Accreditation Program has given insight to implement guidelines to reduce medication error.	38(34.5%)	34(30.9%)	21(19.1%)	11(10%)	06(5.5%)
3	Hospital Accreditation Program has enhanced procedures to be followed for reporting medication errors.	43(39.1%)	28(25.4%)	23(20.9%)	09(8.2%)	07(6.4%)
4	Hospital Accreditation Program has improved the knowledge on floor stock medication.	43(39%)	30(27.3%)	24(21.8%)	07(6.4%)	06(5.5%)
5	Hospital Accreditation Program has provided awareness on LASA medications.	42(38.2%)	28(25.4%)	22(20%)	11(10%)	07(6.4%)
6	Hospital Accreditation Program has improved the knowledge on High Alert Medications.	44(40%)	31(28.2%)	19(17.3%)	12(10.9%)	04(3.6%)

7	Hospital Accreditation Program has provided guidelines for medication reconciliation.	39(35.4%)	31(28.1%)	25(22.7%)	09(8.3%)	06(5.5%)
8	Hospital Accreditation Program has given guidelines for on call medication	36(32.7%)	30(27.3%)	23(20.9%)	13(11.8%)	08(7.3%)
9	Hospital Accreditation Program reduced the overall medication errors.	46(41.8%)	34(30.9%)	16(14.5%)	08(7.3%)	06(5.5%)

Table 2: Explains the nurse’s responses to the impact of the Hospital Accreditation Program (CBAHI) on Patients Medication Safety Information. The majority of nurses, 41(37.3%), strongly agreed that the Hospital Accreditation Program has improved patients' current medication processes, and 38(34.5%) agreed that accreditation program has provided insight into how to put policies in place to decrease medication error. About 43 participants (39.1%) firmly concur that the Accreditation Program has improved the steps to take when reporting pharmaceutical errors. On the other hand,

28 (25.4%) of the nurses reported having knowledge of LASA drugs, whereas 24 (21.8%) of the nurses expressed neutral agreement with this information. The knowledge of high-alert medications has reportedly improved, about 44 (40%) of the nurses. 39 (35.4%) of the participants were in agreement that there were recommendations for medication reconciliation. Only 36 (32.7%) people said that the hospital Accreditation Program has provided recommendations for on-call medication.

Table 3: Description of nurses’ responses to the impact of the Hospital Accreditation program (CBAHI) on patient’s infection prevention and control Domain

S.No	Variables related Patients patient’s infection prevention and control measures.	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
1	Hospital Accreditation Program has positive impact on hand hygiene practices.	45(40.8%)	35(31.8%)	17(15.5%)	07(6.4%)	06(5.5%)
2	Hospital Accreditation Program has given insight to implementation of infection prevention and control standards.	42(38.2%)	30(27.3%)	22(20.0%)	09(8.2%)	07(6.3%)
3	Hospital Accreditation Program has improved the knowledge on standard precautions	44(40%)	31(28.2%)	19(17.3%)	12(10.9%)	04(3.6%)
4	Hospital Accreditation Program has improved the knowledge on Expanded precautions.	43(39%)	30(27.3%)	24(21.8%)	07(6.4%)	06(5.5%)
5	Hospital Accreditation Program has an effect in lowering the rate of hospital nosocomial infections.	45(40.8%)	35(31.8%)	17(15.5%)	07(6.4%)	06(5.5%)
6	Hospital Accreditation Program has improved culture of reporting Incident (such as needle stick injury).	46(41.8%)	33(30.0%)	18(16.4%)	8(7.3%)	5(4.5%)
7	Hospital Accreditation Program has improved the knowledge on monitoring care bundles of health care associated infections.	44(40%)	36(32.7%)	21(19.2%)	5(4.5%)	4(3.6%)

Table 3: Describes the effect the Hospital Accreditation Program (CBAHI) has had positive impact on the infection prevention and control practices of the patients. 45 (40.8%) of the participants firmly believed that the hospital accreditation program has a good influence on hand hygiene practices. The accreditation program on insight to application of infection prevention and control standards was supported by 30 (27.3%) nurses. 19 (17.3%) of the participants, on the other hand, stated that they were neutrally in agreement with

awareness of basic precautions. Likewise, 24 (21.8%) of the replies indicated that they were indifferently in agreement with the understanding of extended precautions. The accreditation program’s ability to minimize hospital nosocomial infections rates and to encourage 46 (41.8%) reporting of incidents (such needle stick injuries) was strongly agreed upon by 45 (40.8%) and 44 (40%) of the nurses reported having knowledge about monitoring care bundles of healthcare-associated infections.

Table 4: Description of nurses' responses to the impact of the Hospital Accreditation Program (CBAHI) on Clinical Nursing Documentation

S. No	Variables related Clinical Nursing Documentation	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
1	Hospital Accreditation Program has given insight to implement policy and procedure regarding clinical documentation and standard of using clinical abbreviations.	42(38.2%)	28(25.4%)	22(20%)	11(10%)	07(6.4%)
2	Hospital Accreditation Program has positive impact on all hospital clinical forms.	36(32.7%)	30 (27.3%)	23(20.9%)	13 (11.8%)	08(7.3%)
3	Hospital Accreditation Program improves integration of clinical information among health care providers.	38(34.5%)	34(30.9%)	21(19.1%)	11(10%)	06(5.5%)
4	Hospital Accreditation Program improves information accuracy.	44(40%)	31(28.2%)	19(17.3%)	12(10.9%)	04(3.6%)

Table 4: Designates how nurses felt about how the Hospital Accreditation procedure improved their clinical nursing documentation. 42, (38.2%) of the participants received insight on how to adopt policy and procedure for clinical recording and the accepted practices for utilizing clinical abbreviations. The majority of participants nearly 30 (27.3%) agreed that the accrediting program has a beneficial influence on all hospital clinical forms. Similar to this, 34 respondents (30.9%) stated that it enhances the integration of clinical information among healthcare professionals. On the other side, 19 (17.3%) of the participants disagreed in a neutral way that hospital accreditation programs increase the accuracy of the information.

DISCUSSION

Hospital Accreditation Program (CBAHI) is intended to improve the high quality and safety of patient treatment. By implementing standards for infection prevention and control, risk management, and clinical nursing documentation. Accreditation helps to ensure patient safety by lowering the likelihood of near-misses, unfavorable outcomes, and medical errors. The goal of the research is to assess the impact of Hospital Accreditation Program (CBAHI) on Patient Safety: nurse's perspective in secondary care hospital in Najran. According to the study findings, the majority of nurses firmly believed that hospital accreditation program has a considerable positive impact on issues related to patient safety, medication administration, infection prevention and control, and nursing clinical documentation. This was in line with a Saudi Arabian study on the effect of Hospital Accreditation on patient safety in Hail City, the findings of which showed that accreditation has a highly beneficial impact on the environment, procedures, and outcomes of healthcare as well as patient satisfaction (2).

The current study findings reported that participants felt that Hospital Accreditation had enhanced patient safety as well as other contributing variables such as patient safety programs, patient safety-related policies and procedures, with correct patient identification and importance to prevent the wrong patient, wrong site, and wrong surgery or procedure,

patient care equipment safe alarm systems, and effective communication of patient care information during patient handovers (Example: Situation, Background, Assessment, and Recommendation, or SBAR) are all strongly supported by the majority of nurses. The aforementioned assertion regarding the use, safety, and "free-flow" protection of infusion pumps was only partially agreed with by nurses. However, only a small percentage of participants replied that they had no opinion on any of the following: the written policy on verbal or telephone orders; the evidence-based measures to prevent catheter and tubing misconnections; and the identification, assessment, and assistance of patients who were at risk for developing pressure ulcers. The study results were supported by Khaled Al-Surimi et al conducted a study and reported that significant impact of accreditation was found for teamwork within hospital units, feedback and communication about errors, and hospital handoffs and transitions ($p = 0.002, 0.009, \text{ and } 0.010$, respectively) and demonstrated that the accreditation program significantly affected staff awareness of the patient safety culture (OR [0.02-0.70] and reporting behavior (OR 0.10 [0.03-0.37]) and overall perceptions of safety (OR [1.42-13.56], $p = 0.010$), frequency of event reporting (OR [0.91-7.96], $p = 0.073$), and some patient safety culture dimensions and outcomes (2). Similar to this study, another one looked into Jordanian hospitals' awareness of the event reporting system and results revealed that accredited hospitals reported occurrences at a significantly higher incidence than non-accredited hospitals (13). Two dimensions—hospital management support for patient safety (80%) and supervisor/manager expectations and actions promoting patient safety (79%), according to research by Top and Tekingu in Turkish Public Hospital, which 200 nurses were surveyed and the response rate was 66.6% of the population. Hospital hands-off and transition are the four characteristics that connect to the nurse's impression of the patient safety culture, along with management support and promotion (14).

The current study indicated that the hospital accreditation program had a good, significant influence on patient medication safety information. According to

the study's findings, the majority of nurses firmly agreed that the hospital accreditation program had improved patients' current medication processes, given insight into how to implement policies to reduce medication error, and increased their awareness of high-alert medications. On the other hand, a small percentage of the nurses claimed to be familiar with LASA medications, exhibited ambivalent agreement with this information, and only a small percentage of participants agreed that there were guidelines for on-call medication and recommendations for medication reconciliation. This study results were consistent with a prior study by AbdulAziz Alsaedi *et al.* reported that during the pre-accreditation period, the mean (SD) of medication errors was 201.9 (12.8). The mean was lower than the reaccreditation period during the accreditation period 189.6 (70.6), and considerably lower during the post-accreditation period 93.4 (11.8), as a result of the CBAHI accreditation program's implementation. As a result, the CBAHI considerably improved the safety aspect of MOH hospitals (15). Similar study findings revealed that the rate of medication errors dropped from the pre-to the post-accreditation periods according to arithmetic averages implementing CBAHI accreditation requirements in Madinah's MOH hospitals(14) Another study conducted by, Al Awa B, Jacquery *et al* reported that the CBAHI accreditation supported the development of pertinent solutions to improve patient safety in healthcare organizations and lower medication error and the medication management improved post-accreditation compared to pre-accreditation, in a teaching hospital in Saudi Arabia. (16)

The present study found that the methods for infection prevention and control have benefited from the Hospital Accreditation program. The present study results reported that the majority of participants were strongly agreed that the hospital accreditation program had a positive impact on hand hygiene practices, implementation on infection prevention and control standards, the measures to reduce hospital nosocomial infection rates, reporting of incidents (such as needle stick injuries), and knowledge of monitoring care bundles for healthcare-associated infections. On the other side, few nurses stated that they were adamantly in favor of being aware of both fundamental and additional measures. The findings of the current study were consistent with a study by Abdullah Saud Alahmadi *et al* (2020) published in Medina, which found that CBAHI accreditation found that both groups of CBAHI-accredited and CBAHI-non-accredited Health Care Workers showed a considerably high compliance to the use of Infection Control standard precautions. With the exception of compliance with the practice of hand hygiene, where no significant difference was seen between the groups, Health Care workers in the CBAHI accredited group demonstrated considerably higher overall compliance to the practice of IC standard precautions for most of the items. (17)

In our study, we discovered that clinical nursing documentation had a highly substantial impact on hospital accreditation procedures. A large number of the participants learned how to implement policies and procedures for clinical recording as well as the standard methods for using clinical abbreviations, hospital clinical forms, and integration of clinical information among healthcare providers. On the other hand, a few participants made neutral statements to the effect that hospital accreditation systems improve the veracity of the data. The study results were agreement with the study by, Alshammari, *et al.* (2015) examined the impact of hospital accreditation on patient safety in Hail city, Saudi Arabia. According to nurses' perspective, respondents concurred that accreditation benefits patient safety, particularly in terms of healthcare-associated infections, nursing documentation, and patient medication information (10). Similar to our study findings another study also reported that impact of accreditation on patient safety and quality of care as perceived by nursing staff in a Cardiac Care Centre in the Eastern Province, Kingdom of Saudi Arabia and the results revealed that implementing accreditation positively influenced the clinical documentation, clinical forms and information correctness (18).

Limitations of the study

The present study has a number of drawbacks. Firstly, the study was carried out in one single setting. Secondly, the samples size were limited to 110 samples. Finally, the study focused on patient safety domain. Therefore, the findings cannot be generalized to other hospitals or the private sector. The impact of accreditation on quality of care provided in each domain, nursing care, medical care, quality care, patient safety and infection control can be compared by MOH hospitals with other hospitals in a future study.

CONCLUSION

Nurses play a vital role in the Hospital Accreditation process and it is essential for achieving the desired outcome by implementing the required standards. The findings of the study concluded that the Hospital Accreditation Program had a positive influence on nurses' perceptions of patient safety programs, patient safety-related policies and procedures, proper patient identification and medication management includes, including improved patients' current medication processes, reduced medication errors, and increased patients' awareness of high-alert medications. The hand hygiene standards, knowledge of nosocomial infection rates, reporting of incidents (such as needle stick injuries), and awareness of monitoring care bundles for healthcare-associated infections all contribute to infection prevention and control having a greater impact due to the Hospital Accreditation Program. In addition, many participants learned how to use clinical abbreviations, hospital clinical forms, and integrate clinical information among healthcare providers, which had an impact on clinical nursing documentation.

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