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The Impact of Hospital Accreditation on Service Quality, Patient Safety, and Organizational Performance

Cezaratania Ayu Septiani[1] Rochana Ruliyandari[2] Muhammad Syamsu Hidayat[3]
Master of Public Health, Faculty of Public Health, Universitas Ahmad Dahlan, Daerah Istimewa Yogyakarta Province, Indonesia[1,2,3]
Email: 2407053020@webmail.uad.ac.id[1] rochana.ruliyandari@ikm.uad.ac.id[2]
syamsu.hidayat@ikm.uad.ac.id[3]

Abstract

Hospital accreditation is widely used to improve healthcare quality and patient safety, although its effectiveness depends on organizational and implementation conditions. This study aimed to synthesize evidence on the contribution of hospital accreditation to service quality, patient safety, and organizational performance. A narrative literature review was conducted using articles retrieved from EBSCO, Neliti, and Google Scholar. Articles published between 2015 and 2025 were screened using predefined inclusion and exclusion criteria, resulting in 20 studies included in the review. The findings showed that hospital accreditation contributed to improvements in service quality, patient safety, and organizational performance. Improvements in service quality included better documentation, adherence to standard operating procedures, healthcare worker competence, and service organization. Patient safety was strengthened through standardized clinical and administrative procedures and improved safety practices. Organizational improvements included governance, risk and complaint management, patient and healthcare worker satisfaction, and continuous quality improvement. However, implementation barriers included increased workload, higher operational costs, limited resources, inadequate staff understanding, and uneven staff participation. Management commitment, staff involvement, training, interprofessional collaboration, effective socialization, and continuous monitoring were important conditions for sustaining accreditation outcomes. Overall, accreditation functions as a multidimensional quality improvement mechanism when integrated into routine organizational processes and continuous improvement practices.

Keywords: Hospital Accreditation, Service Quality, Patient Safety, Organizational Performance, Quality Improvement

Abstrak

Akreditasi rumah sakit secara luas digunakan untuk meningkatkan mutu pelayanan kesehatan dan keselamatan pasien, meskipun efektivitasnya bergantung pada kondisi organisasi dan implementasinya. Penelitian ini bertujuan untuk mensintesis bukti mengenai kontribusi akreditasi rumah sakit terhadap mutu pelayanan, keselamatan pasien, dan kinerja organisasi. Tinjauan literatur naratif dilakukan menggunakan artikel yang diperoleh dari EBSCO, Neliti, dan Google Scholar. Artikel yang diterbitkan antara tahun 2015 dan 2025 diseleksi berdasarkan kriteria inklusi dan eksklusi yang telah ditetapkan, sehingga diperoleh 20 studi yang dimasukkan dalam tinjauan. Hasil menunjukkan bahwa akreditasi rumah sakit berkontribusi terhadap peningkatan mutu pelayanan, keselamatan pasien, dan kinerja organisasi. Peningkatan mutu pelayanan meliputi dokumentasi, kepatuhan terhadap standar operasional prosedur, kompetensi tenaga kesehatan, dan pengorganisasian pelayanan yang lebih baik. Keselamatan pasien diperkuat melalui standardisasi prosedur klinis dan administratif serta peningkatan praktik keselamatan. Perbaikan organisasi meliputi tata kelola, manajemen risiko dan keluhan, kepuasan pasien dan tenaga kesehatan, serta peningkatan mutu berkelanjutan. Namun, hambatan implementasi meliputi peningkatan beban kerja, biaya operasional, keterbatasan sumber daya, pemahaman staf yang belum memadai, dan partisipasi staf yang tidak merata. Komitmen manajemen, keterlibatan staf, pelatihan, kolaborasi interprofesional, sosialisasi yang efektif, dan pemantauan berkelanjutan menjadi kondisi penting dalam mempertahankan hasil akreditasi. Secara keseluruhan, akreditasi berfungsi sebagai mekanisme peningkatan mutu multidimensional apabila terintegrasi dalam proses organisasi dan praktik peningkatan mutu berkelanjutan.

Kata Kunci: *Akreditasi Rumah Sakit, Mutu Pelayanan, Keselamatan Pasien, Kinerja Organisasi, Peningkatan Mutu*

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INTRODUCTION

Hospitals have an important responsibility to provide high-quality and safe healthcare services that meet patients' needs and comply with established healthcare standards (Dian Primasa & Kosasih, 2024) & (Phonna et al., 2021) Service quality is closely related to patients' expectations and satisfaction, while effective hospital management requires continuous efforts to maintain quality and safety standards. Therefore, hospitals require systematic mechanisms to monitor, evaluate, and improve the quality and safety of healthcare services. Hospital accreditation is one of the mechanisms used to assess and improve the quality and safety of hospital services. Accreditation involves an external assessment of whether hospitals meet established standards, including quality improvement, risk management, infection prevention and control, and patient safety (Sundoro et al., 2016). Accreditation can boost organizational procedures and public trust in healthcare services in addition to promoting ongoing quality improvement (Mikraj et al., 2024) Although hospital accreditation is not a new concept, its implementation may have broader implications for how hospitals provide services and manage organizational performance.

Previous research such as studies conducted by (Melo, 2016), (Dainty et al., 2019), (Al-alawy et al., 2021), (Wardhani et al., 2019), and (de Oliveira Lima et al., 2025)has examined the impact of hospital accreditation from various perspectives, including service quality, patient safety, patient and staff satisfaction, organizational culture, quality management, and hospital performance. Qualitative studies have explored experiences, perceptions, implementation processes, and challenges associated with accreditation, while quantitative and mixed-methods studies have investigated the relationships between accreditation and quality, patient safety, satisfaction, and organizational outcomes. However, these findings remain dispersed across different aspects and methodological approaches. Therefore, a comprehensive synthesis is needed to provide an integrated understanding of the impact of hospital accreditation on service quality, patient safety, and organizational performance.

Building on these previous studies, this review provides a broader synthesis of the evidence by integrating multiple dimensions of hospital performance. Although previous studies have extensively examined the relationship between hospital accreditation and hospital quality or performance, few have simultaneously synthesized patient safety, service quality, patient and healthcare worker satisfaction, organizational governance, risk and complaint management, and continuous quality improvement. In addition to examining the reported benefits of accreditation, this review also considers implementation barriers and organizational conditions that may influence its effectiveness and sustainability. This integrated perspective provides a broader understanding of accreditation as a continuous quality improvement mechanism rather than merely an administrative assessment process. Therefore, this study aims to systematically review studies published between 2015 and 2025 that examine the contribution of hospital accreditation to service quality, patient safety, and organizational performance. The review integrates findings from different methodological approaches to identify recurring patterns, patient and healthcare worker outcomes, organizational factors, implementation barriers, and strategies for continuous quality improvement. By synthesizing evidence across these dimensions, this study provides a comprehensive understanding of how hospital accreditation contributes to the quality, safety, and performance of hospital services.

RESEARCH METHODS

This study used a literature review method with a narrative review approach to synthesize findings from qualitative and quantitative studies on hospital accreditation. The review focused on three key domains: service quality, patient safety, and organizational performance. Secondary data were obtained from published scientific articles selected according to predetermined inclusion and exclusion criteria. It provides flexibility in examining hospital accreditation from various perspectives, particularly its impact on service quality, patient safety, and organizational performance. This study used secondary data obtained from published scientific articles selected based on predetermined inclusion and exclusion criteria.

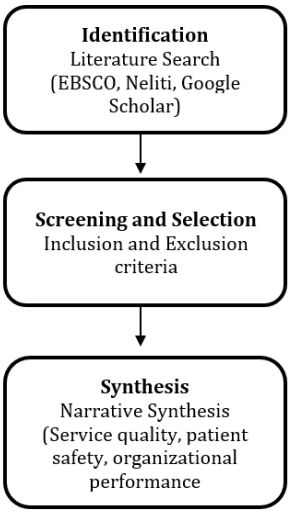


Figure 1. Three Research Steps

In collecting literature, the authors accessed databases such as Ebsco, Neliti, and Google Scholar. In the article search process, the author set inclusion and exclusion criteria. The initial identification stage produced a total of 9,817 articles. An initial screening process was carried out based on the exclusion criteria, including duplicate articles, incomplete or unavailable full-text articles, articles that did not specifically discuss hospital accreditation in relation to service quality, patient safety, or organizational performance, and articles published outside the 2015–2025 period. Following the initial screening, articles were selected based on the inclusion criteria: studies examining hospital accreditation in relation to service quality, patient safety, and organizational performance, available in full text, published in Indonesian or English, and employing qualitative, quantitative, or mixed-methods research designs.

RESULT AND DISCUSSION

Result

The 20 selected articles comprised both qualitative and quantitative studies. The articles were identified through searches of EBSCO, Neliti, and Google Scholar using predefined inclusion and exclusion criteria. The studies examined the impact of hospital accreditation across three main domains: service quality, patient safety, and organizational performance. The findings also covered related aspects, including patient and staff satisfaction, accreditation and quality management systems, implementation challenges, quality improvement strategies, and quality culture.

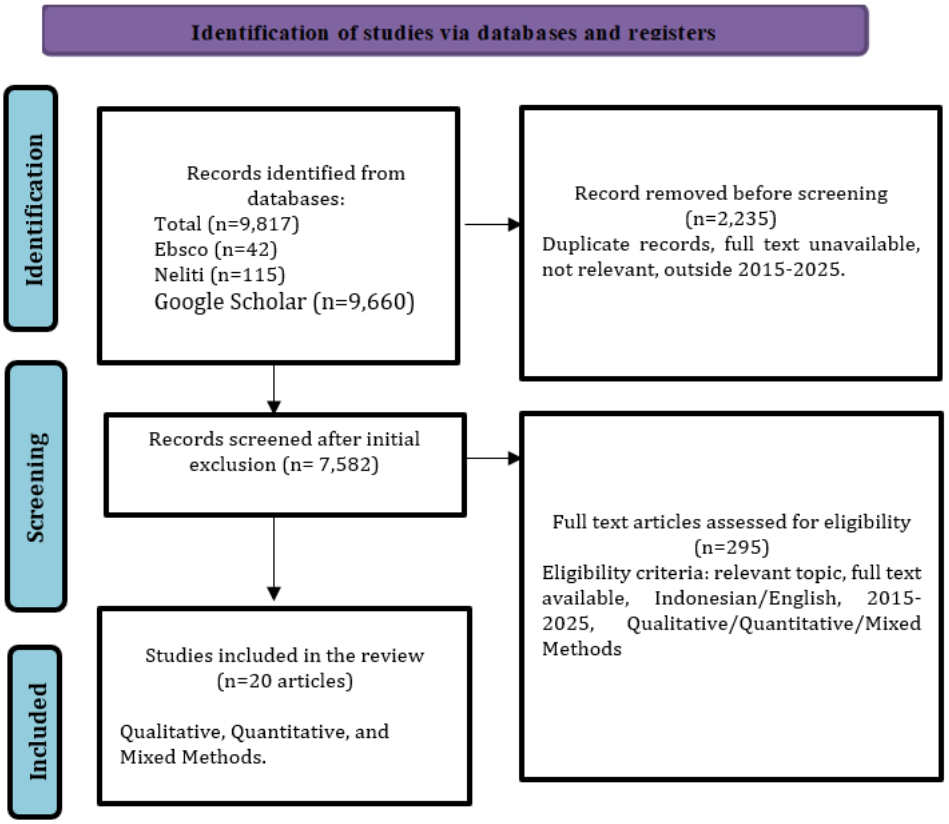


Figure 2. Article Screening Process from Databases

Table 1. Results

No	Researcher/ Year	Title	Research Method	Research Findings	Link
1	(Puspitasari et al., 2024)	Analysis of Hospital Accreditation Status on Health Worker Satisfaction and Patient Satisfaction at Hikmah Masamba Hospital	Qualitative, Phenomenological approach	Based on research findings, the accreditation status of Hikmah Masamba Hospital increased the satisfaction of patients and health workers.	https://doi.org/10.46799/jsa.v5i12.1781
2	(Sundoro et al., 2016)	Evaluation of the Implementation of Patient Safety Goals According to the 2012 Version of Hospital Accreditation at PKU Muhammadiyah Kotagede Yogyakarta Mother and Child Special Hospital	Qualitative research, Case study approach	RSKIA PKU Muhammadiyah Kotagede has not been optimal in implementing the six patient safety goals, with an average achievement of 21.55% of the 80% target. Implementation is still minimal and not yet up to WHO standards. The main obstacles include a lack of understanding, socialization, motivation, and management support. The hospital needs to develop policies and phased strategies for improvement.	https://doi.org/10.18196/jmmr.5105
3	(Ruriyansi & Kosasih, 2024)	Nurses' Perceptions of the Impact of Accreditation and Its Relationship with the Quality of Health Services	Qualitative, Phenomenological approach	Nurses generally assess accreditation as having a positive impact on service quality, clinical governance, and patient safety. However, the administrative burden is felt to reduce focus on patients. Full support from health workers and management improves service quality, patient satisfaction, and team collaboration.	
4	(Phonna et al., 2021)	Nurses' Perceptions of the Impact of Accreditation on the Quality of Health Services	Qualitative, Phenomenological approach	Accreditation has positive and negative impacts. Positive impacts include improvements in facilities, regulations, staff competence, documentation systems, service quality, patient safety, and organizational culture. However, the negative impacts include increased documentation and workload, lack of involvement of all staff, need for large costs, limited facilities, and long implementation times.	https://e-journal.unair.ac.id/JNERS/article/view/17218

				Overall, accreditation still has a positive impact on service quality, patient safety, and patient satisfaction.	
5	(Babakkor & Kattan, 2022)	Accreditation Impact on Quality of Healthcare Organization Services and Culture in a Tertiary Hospital in Saudi Arabia	quantitative, cross-sectional study	The result of the study showed that most of the dimensions associated with quality of care received high ratings. It revealed a significant beneficial association between employees' perceptions of accreditation and quality of care across all these dimensions. The most dominant culture at KAMC was a group type demonstrated KAMC to be a personal environment. It revealed a strong relationship between employees' views of the accreditation effect and a group culture type.	https://doi.org/10.1159/000529643
6	(Anggraini et al., 2021)	Evaluation of the Implementation of Internal Audits Based on ISO 9001:2008 to Improve Quality Management in Hospitals	Descriptive Qualitative	ABC Hospital has implemented the ISO 9001:2008 QMS which supports the Health Office in the process of renovating and maintaining facilities. Limitations are still seen in the physical infrastructure and integration of the hospital information system. Organizationally, most of the quality management principles have been applied, but their implementation is not yet fully consistent. The application of quality standards has begun to show positive results, especially in increasing customer satisfaction, although it is not yet evenly distributed across all units. There are differences in understanding between the Hospital and the Health Office regarding the sustainability of QMS implementation, especially related to the JKN program and hospital accreditation.	https://doi.org/10.32833/majem.v10i1.152
7	(Dian Primasa & Kosasih, 2024)	The Effect of Applying Accreditation Standards on Quality and Patient Safety	Qualitative, Case study approach	he results of the study show that hospital accreditation contributes significantly to improving the quality of services and patient safety. The application of accreditation standards is able to reduce the number of negative incidents and increase patient satisfaction. These findings indicate that the application of accreditation is an effective tool for improving the quality of services in hospitals.	https://doi.org/10.46799/arl.v8i10.2219
8	(Umbarsari & Puspitaningrum, 2022)	Strategy to Improve Hospital Service Quality (A Study at Annisa Mother and Child Hospital, Jambi)	Descriptive Qualitative	he management of RSIA Annisa Jambi has implemented various strategies to improve the quality of services to patients. The first strategy is the preparation of SOPs that are strict, simple, and realistic. Second, cultivating a system of excellent service in all service lines. Third, building supporting units to support hospital operations Fourth, maintaining a balance between the social mission and the economic interests of the hospital Fifth, conducting continuous customer satisfaction surveys as evaluation material. Sixth, following the hospital accreditation process as an effort to systematically improve quality.. All of these strategies are an implementation of various dimensions of sustainable service quality	https://jurnal.umsb.ac.id/index.php/menarailmu/article/view/538
9	(Agung Eka Astriani et al., 2023)	Implementation of Hospital Accreditation Policy at Pucuk Permata Hati Mother and Child Hospital, Denpasar	Descriptive Qualitative	The implementation of the hospital accreditation policy at RSK Ibu Anak Pucuk Permata Hati Denpasar has not been optimal. The dissemination of information (policy transmission) has not been effective, causing differences in understanding among	https://jptam.org/index.php/jptam/article/view/10004/8110

				implementers The competence of human resources is still inadequate in the implementation of accreditation policies. The commitment of some hospital staff and cross-sectors has not fully supported the implementation of the policy. Incentives/rewards have been given to the accreditation team as a form of motivation in policy implementation. The process of documenting activities according to SOPs is still not running optimally.	
10	(Sugiat & Atmawinata, 2023)	Strategy for Improving Service Quality and Patient Safety at the Bandung City Regional General Hospital	Qualitative, Deductive approach	Patients are generally satisfied with the services of Al-Islam Hospital Bandung. Complaints include restrictions on companions, ethics, services, and facilities. Common problems: discharge administration and doctor's visits. The hospital handles complaints through confirmation, follow-up, or improvement. Unresolved complaints are forwarded to the relevant unit. Complaints are facilitated through social media, suggestion boxes, questionnaires, and Google Forms.	https://ejurnalmalahayati.ac.id/index.php/kebidanan/article/view/16118/0
11	(Trenggono & Bachtiar, 2025)	Evaluation of Hospital Management Implementation in an Effort to Increase Google Customer Review Rating at Karisma Cimareme Hospital in 2023: SERVQUAL and Donabedian Theory Approach	Observational Qualitative	Each dimension of SERVQUAL has a significant effect on customer ratings. The implementation of SOPs involves various parties across units, including the PIPP team. The Google Customer Review rating increased by 0.7 points (from 2.9 to 3.6). This shows the effectiveness of a structured approach in improving service quality and customer perception.	https://scholarhub.ui.ac.id/arsi/vol11/iss1/1/
12	(Wardhani et al., 2019)	Hospitals accreditation status in Indonesia: associated with hospital characteristics, market competition intensity, and hospital performance?	Quantitative, Cross Sectional	A total of 217 (62.7%) hospitals were accredited. Hospital size and ownership were significantly associated with of accreditation status. When compared to government-owned, hospital managed by ministry of defense (B = 1.705, p = 0.012) has higher probability to be accredited. Though not statistically significant, accredited hospitals had higher utility and efficiency indicators, as well as higher mortality.	https://doi.org/10.1186/s12913-019-4187-x
13	(Melo, 2016)	The impact of accreditation on healthcare quality improvement: a qualitative case study	Qualitative, Case Study	Interviewees felt that hospital accreditation contributed to the improvement of healthcare quality in general, and more specifically to patient safety, as it fostered staff reflection, a higher standardization of practices, and a greater focus on quality improvement. However, findings also suggest that the positive impact of accreditation resulted from the approach the hospital adopted in its implementation as well as the fact that several of the procedures and practices required by accreditation were already in place at the hospital, albeit often in an informal way.	https://doi.org/10.1108/JHOM-01-2016-0021
14	(Vali et al., 2020)	Challenges of implementing the accreditation model in military and university hospitals in Iran: a qualitative study	Qualitative Study	In this study, 5 major codes and 17 subcodes were identified: (1) perspectives on accreditation model with 5 subcodes: a difficult and time-consuming model, less attention to the patient, accreditation as a way of money acquisition, not being cost-effective, and accreditation means incorrect documentation; (2) absence of appropriate executive policy, with 3 subcodes: lack of financial funds and personnel, disregarding local conditions in implementation and evaluation, and absence of	https://doi.org/10.1186/s12913-020-05536-4

				the principle of unity of command; (3) training problems of the accreditation model, with 2 subcodes: absence of proper training and incoordination of training and evaluation; (4) human resources problems, with 3 subcodes: no profit for nonphysician personnel, heavy workload of the personnel, and physicians' nonparticipation; (5) evaluation problems, with 4 subcodes: no precise and comprehensive evaluation, inconformity of authorities' perspectives on evaluation, considerable change in evaluation criteria, and excessive reliance on certificates.	
15	(Mazzini et al., 2021)	A focused ethnography in the context of a European cancer research hospital accreditation program	Qualitative, Ethnography	Four main categories emerged: a) OECI AP as an opportunity to foster diversity within professional roles; b) OECI AP as a possibility for change; c) perceived barriers; and d) OECI AP-solicited expectations.	https://doi.org/10.1186/s12913-021-06466-5
16	(Ali et al., 2024)	Hospital Accreditation Challenges in Small and Single-Specialty Hospitals: A Qualitative Study	Qualitative Descriptive Study	The accreditation challenges of small hospitals were categorized into four main themes: "accreditation process," "human resources," "structural issues," and "financial constraints." For single-specialty hospitals, challenges were grouped into three themes: "accreditation process," "human resources," and "uniformity of accreditation standards." Common challenges for both hospital types included low staff motivation, insufficient training in accreditation procedures, and issues related to evaluators.	https://link.springer.com/article/10.1186/s12913-020-05536-4
17	(Dainty et al., 2019)	Exploring accreditation from the front lines: A qualitative study of staff experiences & perceptions of hospital accreditation	Qualitative Descriptive Interview Study	We have grouped what we heard from the data into three major groups of findings which we have titled: a) perceptions of the purpose of accreditation; b) the "work" of accreditation; and c) dissemination gaps regarding results. Informative finding from this study include the fact that participants put surprising value on the accreditation process, although mistaken feel it is mandatory; that the "work" of accreditation can be disappointing and feels disconnected from the bigger QI picture, and that the disconnect also exists in terms of their knowledge of and belief in the actual results of the process.	https://doi.org/10.5430/jha.v8n4p24
18	(Al-alawy et al., 2021)	A Mixed-Methods Study to Explore the Impact of Hospital Accreditation	retrospective summative study design with a mixedmethods	We report 27 of 36 private hospitals who responded to the survey. Key reasons for accreditation were to improve quality (n=23), implement evidence-based practice (n=17), continuity of accreditation (n=15), and popularity (n=11). Reported improvements include quality of care (27), patient care (26), organizational processes (21), and patient satisfaction (19) among others. Average stakeholder satisfaction rate was 74%. Participants from the 3 focus group discussions felt that staff hours and stress levels were high during the accreditation process, and some standards were useful while others were deemed non-essential. There was support for a local accreditation body with an emphasis on best practice.	https://doi.org/10.1177/0046958020981463
19	(de Oliveira Lima et al., 2025)	Association between hospital accreditation and healthcare providers' perceptions	quantitative longitudinal observational design	The findings from the study suggest accreditation to have an impact on structure and process measures, but the gains in key areas were short-lived. There is a need to strengthen	https://doi.org/10.1186/s13584-025-

		of patient safety culture: a longitudinal study in a healthcare network in Brazil		governance and develop performance measures to evidence outcome improvement, assure alignment with regulation and the health system objectives.	00690-8
20	(Botje et al., 2016)	Are performance indicators used for hospital quality management: a qualitative interview study amongst health professionals and quality managers in The Netherlands	Qualitative interview study	The hospitals we investigated collect data for performance indicators in different ways. Similarly, these hospitals have different ways of using such data to support their quality management, while some do not seem to use the data for this purpose at all. Factors like 'linking pin champions', pro-active quality managers and engaged medical specialists seem to make a difference. In addition, a comprehensive hospital data infrastructure with electronic patient records and robust data collection software appears to be a prerequisite to produce reliable external performance indicators for internal quality improvement.	https://pmc.ncbi.nlm.nih.gov/articles/PMC5062914/pdf/12913_2016_Article_1826.pdf

Based on the results of the review of the analyzed journals, the findings are classified based on the main indicators in hospital accreditation, in accordance with national accreditation standards such as the National Hospital Accreditation Standards (SNARS). Some of these main indicators include: patient safety, service quality, patient satisfaction, organizational governance, risk management, and continuous improvement. This analysis aims to identify the contribution of accreditation to the achievement of these indicators. The analysis of the journals reviewed shows that hospital accreditation has a significant impact on various indicators of service quality. In the aspect of patient safety, accreditation encourages the application of standard procedures although there are still obstacles in socialization and staff understanding. In terms of service quality, almost all studies reported improvements through improved documentation, health worker competence, and service systems. Patient and health worker satisfaction also increased as a result of more organized and responsive services. From the side of organizational governance, the success of accreditation is highly dependent on management commitment and the involvement of all work units. Risk management and complaint management systems are also strengthened by a more systematic reporting and follow-up mechanism. Finally, accreditation encourages continuous improvement through strategies such as the preparation of SOPs, routine satisfaction surveys, and a culture of excellent service. Overall, accreditation is not only an administrative assessment tool, but a means of transforming hospital service quality that is more structured and oriented towards patient safety and satisfaction.

Discussion

This study examines the impact of hospital accreditation on the performance and quality of services in hospitals. Based on the results of the analysis of the selected articles, a number of studies show that hospital accreditation has an impact on patient satisfaction as well as the satisfaction of the health workers themselves, and has an impact on the quality of services provided. The research conducted by (Puspitasari et al., 2024) at Hikmah Masamba Hospital explained that hospital accreditation has a positive impact on both patients and the health workers themselves. In this study, health workers who worked at the hospital felt that work facilities and safety were better after being upgraded, while patients also felt an improvement in services from the aspects of medical staff friendliness, timeliness of services and doctor's visits, and hospital quality. (Phonna et al., 2021) also asserted that hospital accreditation can improve facilities and infrastructure, hospital regulations that are in accordance with standards, more systematic documentation, as well as improved patient quality and safety. However, on the positive side, they also noted that there was an increased workload, higher

costs required, and also that not all staff were necessarily involved in the accreditation process. Meanwhile, (Ruriyansi & Kosasih, 2024) conveyed that the perception of health workers, especially nurses, shows a close relationship between the success of accreditation and the improvement of service quality, especially if there is active involvement from management collaborating with other staff. This proves that accreditation is not only related to the fulfillment of formal hospital administration, but also has an impact on performance, quality of service, and patient satisfaction.

(Babakkor & Kattan, 2022) The study revealed that most quality-of-care indicators in a Saudi tertiary hospital were rated favorably, with a significant positive correlation between staff perceptions of accreditation and overall care quality across all evaluated domains. Additionally, accreditation was found to be closely linked to a group-oriented organizational culture, characterized by greater collaboration and a supportive work atmosphere. These outcomes imply that accreditation not only elevates service standards but also plays a role in shaping workplace culture, thereby fostering sustained enhancement in healthcare delivery.

When discussing how accreditation and service quality are implemented in the hospital context, (Sundoro et al., 2016) conducted a study that discussed the evaluation of the implementation of the six patient safety goals at RS PKU Muhammadiyah Kotagede Yogyakarta, and the results of the study found that most of the goals had not been implemented optimally due to low staff understanding of the standards, a lack of socialization, and a lack of managerial support. The findings of the study by (Agung Eka Astriani et al., 2023) also noted that the hospital accreditation policy at RSK Ibu Anak Pucuk Permata Hati Denpasar was not running optimally due to poor information transmission and uneven competence of implementers. In this regard, (Ruriyansi & Kosasih, 2024) added that accreditation can improve service quality, though the administrative burden is often seen as disrupting staff focus. (Trenggono & Bachtiar, 2025) explained that structured management with the SERVQUAL and Donabedian models can improve Google reviews, which indicates that the application of quality has been successful overall. Other studies discuss strategies for improving service quality and patient safety. (Umbarsari & Puspitaningrum, 2022) described the strategy of RSIA Annisa Jambi in improving services, ranging from the preparation of appropriate SOPs (Standard Operating Procedures), cultivating excellent service, to routinely conducting continuous satisfaction surveys as a follow-up to the accreditation process. In the research conducted by (Sugiat & Atmawinata, 2023) at RS Al-Islam Bandung, it was stated that they have created a comprehensive patient complaint system that can be followed up quickly. Both of these literature studies show that strategies must be based on patient needs and that an integrated service complaint system is important in improving service quality.

This study underscores the critical role of hospital accreditation in enhancing institutional performance, service quality, and patient safety. Prior research by (Wardhani et al., 2019), (Melo, 2016), and (Al-alawy et al., 2021)consistently reports that accreditation contributes to improved care standards, more structured organizational processes, and stronger patient safety outcomes. These improvements are evident in more effective clinical practices, standardized procedures, and heightened accountability within healthcare institutions. Nevertheless, (de Oliveira Lima et al., 2025) caution that while accreditation initially yields substantial gains, its long-term sustainability is contingent upon ongoing monitoring, evaluation, and sustained organizational commitment. This suggests that accreditation should be viewed not as a one-time achievement, but as a continuous process aimed at maintaining and advancing the quality of healthcare services. This study further identifies various challenges and barriers in the implementation of hospital accreditation. Research by (Vali et al., 2020), (Ali et al., 2024), and (Dainty et al., 2019) indicates that the accreditation process is often

associated with heavy workloads, limited human resources, and insufficient staff training. These conditions may lead to low motivation and limited staff engagement in the accreditation process. Moreover, accreditation is frequently perceived more as an administrative burden than as a tool for quality improvement, making it feel complex and overwhelming for healthcare providers. There is also a notable gap between theoretical accreditation standards and their actual implementation on the ground. This suggests that without adequate support, capacity building, and alignment between policy and practice, the effectiveness of accreditation may remain constrained.

This study further explores healthcare workers' perceptions and experiences regarding hospital accreditation. Research by (Mazzini et al., 2021) and (Dainty et al., 2019) suggests that accreditation is frequently viewed as an opportunity for positive transformation, particularly in enhancing service quality, standardizing clinical procedures, and strengthening organizational systems. Nevertheless, these studies also uncover staff resistance, especially when the accreditation process falls short of their expectations or is perceived as excessively burdensome. The experiences of healthcare workers whether favorable or unfavorable play a pivotal role in determining the success of accreditation implementation. When staff feel engaged, supported, and adequately prepared, accreditation tends to be more effective and sustainable. In contrast, negative experiences may undermine engagement and diminish the overall impact of accreditation efforts. The strength of this research lies in its efficiency in terms of time and cost, as it uses a literature study approach that does not require the collection of primary data directly in the field. This allows researchers to save resources while still obtaining relevant and comprehensive information. In addition, this study reviews twenty scientific articles from various trusted databases such as EBSCO, Neliti, and Google Scholar, with a time coverage between 2015 and 2025. The use of various sources allows researchers to review from various perspectives and contexts in terms of location, type of hospital, and different time settings, thus broadening the analysis and providing a broader picture. This research is also able to identify general patterns and trends related to the implementation of hospital accreditation, service quality, and the relationship between quality management and hospital staff performance. Thus, this study supports the strengthening of the theoretical foundation that can be used to build a more systematic conceptual framework or model regarding the influence of accreditation on the quality of health services.

However, this study also has a number of weaknesses. One of them is that primary data is not used, so the results obtained may not fully examine the current situation directly in the field. In addition, this study only relies on published articles, which has the potential to create a tendency to only show significant or positive research results, while unsuccessful or negative results are not published. Another limitation is the difficulty in accessing some articles from certain databases or constraints in finding literature that is specifically relevant to the local context or the hospital industry being studied. If the articles used as reference sources do not have a strong methodology or have low validity, then the conclusions drawn from this study will also be less solid. In addition, due to its nature as a literature review, this study may only reflect a small part of the complex reality that affects the success of hospital accreditation, especially related to internal factors such as managerial involvement, staff competence, or structural barriers in the hospital work environment.

CONCLUSION

It can be concluded that hospital accreditation has a significant impact on performance and service quality. This accreditation is proven to be able to increase the satisfaction of patients and health workers who work at the hospital. Through improvements in facilities,

documentation systems, and work safety, it can have a positive impact on improving facilities, regulations, patient safety, and the organizational culture that exists in the hospital environment. However, accreditation also presents challenges such as increased workload, increased operational costs, and uneven involvement of hospital staff. Accreditation also depends on management support and staff understanding of hospital accreditation standards, as well as the need for collaboration between units and staff across professions. Evaluation of the implementation of hospital accreditation shows that not all hospitals have been able to implement standards optimally due to several factors such as limited human resources (HR), lack of socialization, and an information system that is not yet integrated. However, various strategies such as the preparation of appropriate SOPs, a culture of excellent service, a more responsive complaint system, and the involvement of hospital management have been implemented to improve service quality. Accreditation is not only a formal administrative form for hospitals, but can also increase patient trust in the hospital.

The novelty of this study lies in its integrated synthesis of hospital accreditation as a multidimensional organizational mechanism that simultaneously influences service quality, patient safety, and organizational performance, rather than examining these outcomes as separate dimensions of healthcare quality. Unlike previous studies that predominantly focus on accreditation compliance or individual quality indicators, this review integrates evidence from 20 studies published between 2015 and 2025 to elucidate the interrelationships between accreditation standards, organizational governance, clinical practices, and continuous quality improvement. Furthermore, it highlights the critical role of organizational readiness, management commitment, healthcare workforce engagement, and resource availability as mediating implementation conditions that determine whether accreditation translates into sustainable improvements or merely formal compliance. By identifying both the organizational benefits and structural barriers associated with accreditation implementation, this study advances a more comprehensive understanding of the mechanisms through which accreditation generates institutional value and provides an evidence-based framework for strengthening sustainable quality improvement in hospital settings, particularly in resource-constrained healthcare systems.

Recommendation

Based on the results of the analysis of the articles reviewed, it is recommended that hospitals strengthen socialization and training on accreditation standards to all staff, both medical and non-medical. The active involvement of all hospital staff, including leadership, is necessary to build a sustainable quality culture. In addition, hospitals need to develop realistic and easy-to-implement Standard Operating Procedures (SOPs), as well as develop a responsive patient complaint system as part of overall service improvement. Hospital management also needs to conduct regular monitoring and evaluation to ensure that accreditation standards are implemented optimally and have a direct impact on service quality and patient safety. To ensure that accreditation standards are applied as optimally as possible and have a direct impact on patient safety and service quality, hospital management also needs to carry out routine monitoring and evaluation. With these strategies, accreditation is not just an administrative formality, but also a real instrument in increasing patient trust and satisfaction.

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