A Nationwide randomised controlled trial evaluating the effect of unannounced periodic hospital surveys

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**Objectives:** To evaluate the effect of announced versus unannounced periodic hospital surveys based on an abbreviated set of the national accreditation standards and performance indicators from The Danish Health Care Quality Programme version 2 (DDKM version 2).

**Methods:** This cluster-randomised, controlled trial (RCT) is the first sub-project of the nationwide research project “Unannounced surveys in public hospitals” designed by the Danish Institute for Quality and Accreditation in Healthcare (IKAS) and the Danish Center for Healthcare Improvements (DCHI).

Twenty-three hospitals (77%) (3 university hospitals, 5 psychiatric hospitals, and 15 general hospitals) agreed to participate in this trial and to be randomised to one of the trial clusters. Eleven hospitals received announced surveys (control group) and 12 hospitals received unannounced surveys (intervention group). We hypothesise that hospitals receiving unannounced surveys will be rated as less successful than hospitals receiving announced surveys, defined as less compliance with accreditation standards. Nine experienced and educated surveyors were responsible for conducting the surveys according to an abbreviated version of DDKM version 2. The outcome is the surveyors’ assessment of the hospitals’ level of compliance with accreditation standards and indicators. Compliance with accreditation standards was analysed using contingency tables and random-intercept logistic regression analysis.

**Results:** Assessment of the compliance with implementation of clinical guidelines was highly overrepresented in this study, why results from this data sample are presented[[1]](#footnote-1). Based on 19 hospital surveys, 12552 compliance ratings were applicable for data analysis, table 1.The risk of observing non-compliance with the implementation of clinical guidelines during unannounced surveys compared to announced surveys was insignificant (OR = 1.105, 95%CI 0.594-2.055; p=0.752). Analysis of eight patient safety critical standards requiring full compliance to gain accreditation revealed no significant difference between unannounced and announced periodic hospital surveys (OR=1.880, 95%CI 0.770-4.590; p=0.165).

Table 1 Compliance with implementation of clinical guidelines

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not impl. | Impl. with major deviations | Impl. with minor deviations | Consistent impl. | Total |
| **Unannounced surveys** | 91 | 108 | 77 | 6424 | 6700 |
| (%) | 1.43% | 1.59% | 1.14% | 95.85% | 100% |
| **Announced surveys** | 58 | 80 | 70 | 5644 | 5852 |
| (%) | 0.96% | 1.32% | 1.21% | 96.15% | 100% |
| **Total** | 149 | 188 | 147 | 12068 | 12552 |

Abbreviation: impl.=implemented

**Conclusion:** This cluster-randomised, controlled trial demonstrated that unannounced periodic hospital surveys did not rate the implementation of clinical guidelines as less successful compared to announced, periodic hospital surveys.

**Conflict of interest:** None declared.

**Abbreviations:** DCHI: Danish Center for Healthcare Improvements; DDKM version 2: The Danish Health Care Quality Programme version 2; IKAS: Institute for Quality and Accreditation in Health Care; RCT: Randomised controlled trial.

1. Other survey assessments include: Firstly, the accessibility to clinical guidelines, secondly, quality monitoring of the hospital structure, processes and treatment, and thirdly, the internal assessment of the monitored quality leading to quality improvement initiatives. [↑](#footnote-ref-1)