



STANDARDS DEVELOPMENT PROCESS FOR SQHN SECOND EDITION STANDARDS

Overview

To ensure that its accreditation standards remain current, evidence-based, and responsive to both international best practices and the evolving Nigerian healthcare landscape, the Society for Quality in Healthcare in Nigeria (SQHN) has established a structured and inclusive standards revision process. This process draws on methodologies used by global accreditation bodies while remaining firmly grounded in SQHN's unique operational context and stakeholder realities.

Revision Cycle

SQHN conducts a comprehensive review of its accreditation standards every three years. However, interim revisions may be triggered earlier in response to significant regulatory, clinical, or contextual changes.

Stages of the Revision Process

1. Preliminary Scoping & Gap Identification

- An internal review of the current standards was initiated to identify gaps and areas for improvement.
- Recent changes in national health policies, regulatory frameworks, and international benchmarks were reviewed

2. Evidence Review & Benchmarking

- Literature review to identify global best practices in healthcare quality and patient safety was conducted
- Benchmarked SQHN standards against those of international accrediting organizations, ensuring relevance to the Nigerian context.

- Conducted a gap analysis to map similarities, differences, and required adaptations.
- Aligned proposed revisions with existing Nigerian healthcare laws and regulatory expectations (e.g., FMOH directives).

3. Drafting the Revised Standards

- The Technical Sub-Committee synthesized results and evidence to develop new standards and revise existing ones.
- Draft standards were written to be practical, context-appropriate, and clearly articulated—complete with intents and requirements.

4. Accreditation Committee Review

- The SQHN Accreditation Committee reviewed the draft for consistency, clarity, and technical robustness.

5. Public Consultation & Stakeholder Engagement

- The revised standards are posted on the SQHN website for a six week period for public comments
- Stakeholder sessions were held with healthcare professionals and SQHN surveyors to discuss and gather feedback.
- All feedback was logged, categorized, and prepared for formal response.

7. Revision & Technical Validation

- The Technical Sub-Committee incorporated stakeholder input and finalized revisions to the draft standards.

8. Pilot Testing in Selected Facilities

- The updated standards were implemented in 2 enrolled healthcare facilities to assess clarity, feasibility, and documentation demands.
- Structured feedback was obtained from surveyors and facility personnel.

9. Final Refinement & Approval

- Adjustments were made based on pilot findings.
- The final version was reviewed and approved by the Accreditation Committee and formally signed off by the Committee Chair.