



Diagnostic Accreditation Program

MANUAL

Accreditation Standards

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Diagnostic Accreditation Program

Established in 1971, the Diagnostic Accreditation Program (DAP) has a mandate to assess the quality of diagnostic services in the province of British Columbia through accreditation activities. As a program of the College of Physicians and Surgeons of British Columbia (the College), the DAP has its mandate and authority derived from section 5 of the College Bylaws under the *Health Professions Act*, RSBC 1996, c.183.

The DAP is committed to promoting excellence in diagnostic health care through the following activities:

- establishing performance standards that are consistent with professional knowledge to ensure the delivery of safe, high-quality diagnostic service
- evaluating a diagnostic service's level of actual performance to achieve the performance standards
- establishing a comparative database of health-care organizations, and their performance to selected structure, process, and outcome standards or criteria
- monitoring the performance of organizations through the establishment of external proficiency testing programs and other robust quality indicators of performance
- providing education to health-care organizations, managers, and health professionals on quality improvement strategies and best practices in diagnostic health care
- ensuring information learned from accreditation processes is used for system wide improvement
- reporting to government, stakeholders and the public on the performance of the diagnostic health-care system as assessed through accreditation
- strengthening the public's confidence in the quality of diagnostic health care
- assisting organizations to reduce risks and increase safety for patients and staff
- assisting organizations to reduce health-care costs by promoting quality practices that increase efficiency and effectiveness of services
- serving and safeguarding the public

Accredited services

Medical imaging

- radiology (CR and DR)
- fluoroscopy
- diagnostic mammography
- ultrasound
- echocardiography
- computed tomography
- magnetic resonance imaging
- nuclear medicine – single photon emission
- nuclear medicine – positron emission
- bone densitometry

Laboratory medicine

- anatomic pathology
- chemistry
- cytogenetics
- cytology
- hematology
- microbiology
- molecular genetics
- point-of-care testing
- transfusion medicine

Pulmonary function

- spirometry
- flow volume loops
- diffusing capacity
- lung volumes
- respiratory muscle testing
- conductance/resistance
- reactive airways (methacholine challenge testing)
- exercise induced asthma testing
- cardiopulmonary exercise testing
- pulse oximetry/overnight oximetry
- exercise testing: duration test or six minute walk test category

Community spirometry

- spirometry
- flow volume loops

Neurodiagnostic services

- electroencephalography
- evoked potentials
- electromyography and nerve conduction studies

Community neurodiagnostics

- electromyography and nerve conduction studies

Polysomnography (level I)

- adult polysomnography
- pediatric polysomnography
- PAP titration and adjunct therapies
- daytime testing
- ambulatory testing
- home sleep apnea testing (level 3)
- PAP therapeutics

Home sleep apnea testing (level III)

- home sleep apnea testing
- remote services

Accreditation standards

The foundation of the accreditation programs are the standards set by the Diagnostic Accreditation Program.

Standards and associated requirements are:

- evidence-based
- outcome-focused
- directive in nature yet allow the service flexibility in how they approach and address each element
- aligned to principles of quality and safety
- validated by expert groups, beta testing, community consultation
- continuously quality improved

Standard requirements are either

- mandatory (M) – facilities must demonstrate conformance), or
- best practice (B) – it is recommended that facilities demonstrate conformance.

DAP accreditation standards and associated requirements are periodically revised to ensure criteria reflects best available evidence.

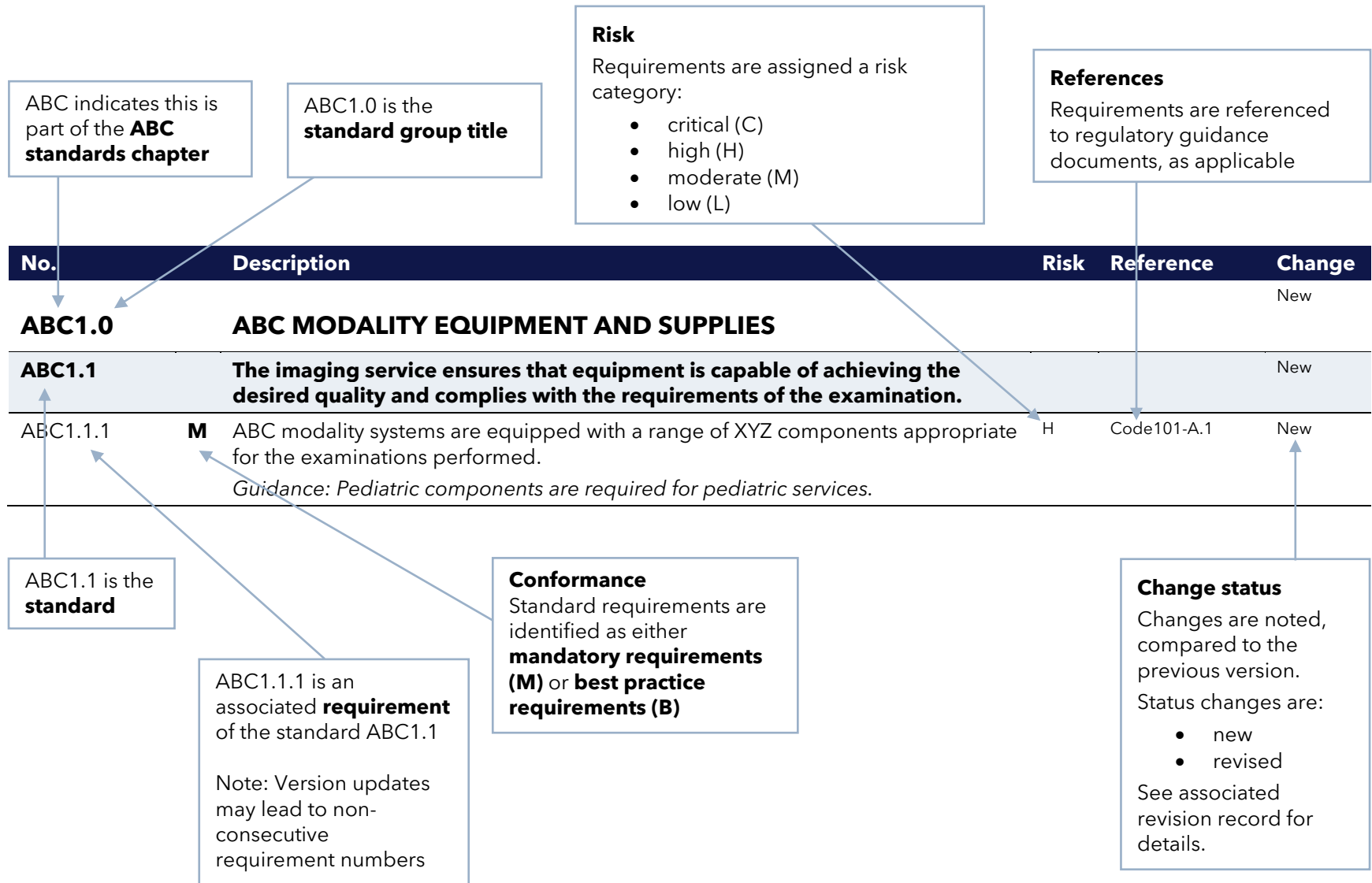
DAP accreditation standards and associated requirements are reviewed by internal processes, advisory committees, external organizations and the public to ensure standards meet RUMBA principles – relevant, understandable, measurable, beneficial, achievable.

DAP accreditation standards and associated requirements are applicable to both public and private service settings, unless otherwise noted.

More Information

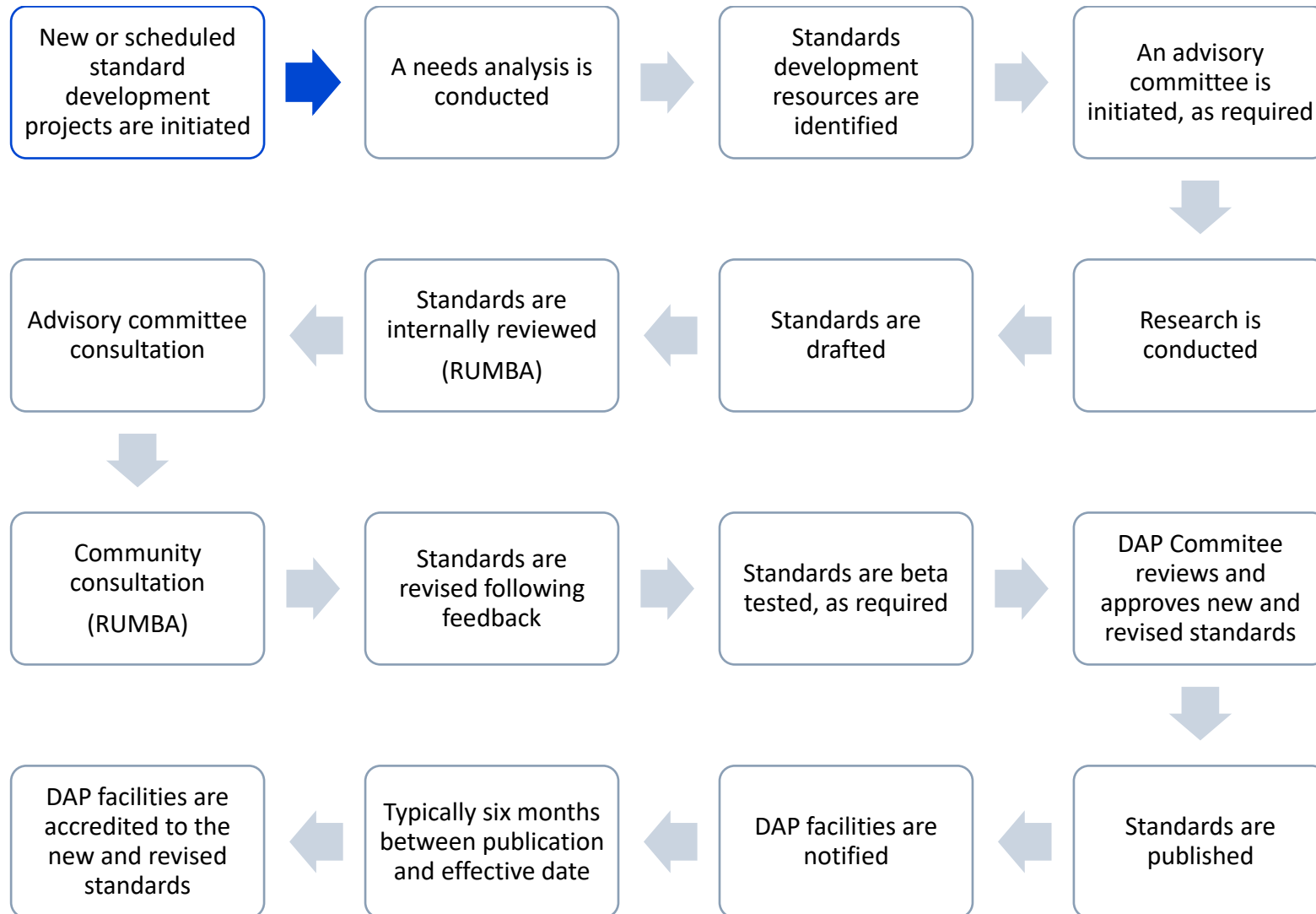
For questions or feedback regarding standards, please contact dap@cpsbc.ca.

Accreditation standard nomenclature



Standards development

Accreditation standards are developed by DAP standard developers, in collaboration with internal DAP experts and or advisory committees. Accreditation standards are continuously revised to ensure best available evidence is incorporated.



Standards navigation

Facilities are accredited to all applicable accreditation standards and requirements associated with the discipline and scope of services they provide. The standards chapters are either general, which apply to **all disciplines** for the DAP program specified unless otherwise noted, or discipline-specific, which apply to a specific discipline (e.g. service, modality, test, examination, etc.).

General standard chapters

General standards address topics such as governance, management, operations, human resources, quality improvement, general safety, patient care, infection prevention and control, information management, etc.

Review all general standard chapters.

Discipline-specific standard chapters

Discipline-specific standards address specific technical topics such as quality assurance of equipment, reporting, protocols, patient screening, etc.

Review the discipline-specific standard chapters associated with the service, modality, test and or examination provided.

More information

For inquiries or feedback regarding accreditation standards, contact dap@cpsbc.ca.

Standards and accreditation assessment activities

In the lifecycle of DAP accreditation all applicable standards and associated requirements will be assessed at a facility. Depending on the accreditation assessment activity, different standards are applied.

Facilities will be assigned to a self-assessment activity, which includes all applicable standards and associated requirements, prior to any on-site accreditation assessment activity.

More information

For more information regarding the DAP accreditation process, refer to the [DAP Accreditation Process Manual](#).

Advisory committees

The DAP accreditation standards are developed through a collaborative, consultative and consensus building process that involves health professionals and organizations, academics, subject matter experts, consumers, health authorities, colleges and the Ministry of Health. The process for standards development and review allows for considerable input from the services that will be using the standards.

The DAP will periodically initiate advisory committees to support standards development activities.

Role

The purpose of advisory committees is to advise the DAP staff and the DAP Committee on the medical, technical, and management issues related to the subject of standards development.

Specific activities include:

- providing advice on and assisting in the review and development of accreditation standards
- recommending adoption of new or revised accreditation standards to the DAP Committee
- acting as a resource to the DAP staff and the DAP Committee on specific issues
- reviewing diagnostic trends and changes (developments), and providing advice and direction to:
 - revisions/additions/deletions of accreditation standards
 - development of new accreditation programs
 - further activities the DAP should pursue (e.g. education)
 - further analysis of accreditation data

Membership

Advisory committees are comprised of medical and technical professionals with expertise in the subject of standards development.

Individuals interested in membership to a DAP advisory committee are encouraged to respond to applicable advisory committee nomination surveys, other nomination communications or contact dap@cpsbc.ca.

The DAP is founded on the principle of participation and welcome all applications for committee membership. Membership in advisory committees is an opportunity to help shape and influence the standards and requirements that diagnostic services in BC are accredited to.

Selection criteria for membership includes, but is not limited to:

- representation of geographic service area or service sector
 - public health authorities and private providers
 - academic institutions
 - colleges and/or professional associations
- area of expertise
 - medical
 - technical
 - scientific
 - research
- knowledge and experience
- impartiality and conflicts of interest

Appointments to advisory committees are approved by the DAP Committee. The term of appointment to of advisory committee membership is four years, unless otherwise specified.

Frequency of meetings

Advisory committees will convene at the call of the chair to a maximum of twice per year. Members of advisory committees may be contacted outside of regularly scheduled meetings to provide advice to the DAP staff or DAP committee.

More information

For more information regarding advisory committees, contact dap@cpsbc.ca.