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Review

Comparison of Joint Commission International (JCI) and National Accreditation of Kazakhstan: A Literature Review

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Abstract

The Joint Commission International (JCI) is a widespread practice for healthcare organizations to prove the quality within the operating procedures, patient centeredness and safety, and continuous improvement of service quality. On the other hand, there are governmental initiatives of quality control in organizations where healthcare services provided. Those programs predominantly compliance oriented and focus on regulation adherence rather than on quality of services.

The aim of this study is to conduct a comparative analysis of hospital accreditation practices in Kazakhstan and international experience based on research and other publicly available data.

Research literature was sought in PubMed, Scopus and Google Scholar databases. Non-research evidence was found in governmental websites, JCI alliance and other stakeholder websites. After finding the evidence, a content analysis and institutional analysis were used to examine structural design, evaluation approaches, governance mechanisms, staff involvement, patient safety frameworks, and outcome measurement.

The findings demonstrate that there is a principal differences between Kazakhstan's national accreditation and JCI in the approach to dimensions. If national accreditation boosts over compliance, strict documentation rules, and formal audits with fewer interaction with clinical practices. JCI in contrast, provides more patient and quality oriented management basis for hospitals. Literature and other evidences suggest that JCI accreditation helps to improve communication within departments and promotes outcome based goals with proactive risk management and continuous improvement.

Keywords: healthcare accreditation, Kazakhstan, Joint Commission International (JCI), patient safety, quality management, clinical outcomes, healthcare reform.

1. Introduction

Accreditation of healthcare organizations is one of the methods to prove the sustainability of processes in the organization. Considering that the healthcare is a sensitive topic, patients look for the best and proven options when choosing the hospital. The practice of healthcare accreditation originated in the 20th century in the United States and has since been widely adopted across various healthcare systems worldwide. Currently, the Joint Commission International (JCI) is considered to be one of the best accrediting bodies in the world, as it has the longstanding history and more and more hospitals choose JCI to prove the quality of services and attract patients [1-3].

Nowadays, healthcare reforms are being implemented by the government of Kazakhstan in order to modernize the system in terms of patient safety and service quality. The accreditation of healthcare organizations is one of the methods within this initiative. Accreditation is viewed as fundamental mechanism for assessing the quality of medical services, internal processes, and overall work performance of the organization [4]. It gives hospitals and clinics the chance to prove their level of compliance with world standards.

Kazakhstan's national accreditation system was introduced on the initiative of the Ministry of Health and has been gradually improved within the framework of state programs targeting public health development. The system is based on nationally defined standards that reflect domestic institutional and regulatory characteristics. Nevertheless, international experience suggests that the effectiveness of accreditation systems largely depend on their alignment with globally recognized standards [5]. In this context, particular attention has been directed toward JCI – one of the most authoritative international accreditation models.

The JCI accreditation provides internationally recognized status and leading hospitals worldwide strive to get one. JCI is famous for its special focus on improvement of the workflow processes and protocols in order to enhance patient safety, quality service, continuous education and collaboration [6-9]. Additionally, it provides the framework for evidence-based medicine, risk management, and the development of work culture [10,11].

Currently, there is a need to analyze and compare Kazakhstan's national accreditation system and the JCI accreditation model, examining their similarities and differences in terms of effectiveness, structure, and areas of impact. Such comparison enables the identification of key directions for reforming the national accreditation system and promoting closer alignment of Kazakhstan's healthcare system with international quality standards.

Therefore, the aim of this review is to conduct a review of existing research literature and policy documentations in order to analyze and compare the differences of national healthcare accreditation system of the Republic of Kazakhstan and JCI accreditation model.

2. Materials and methods

This narrative review is based on the analysis of scientific, policy document, international reports related to healthcare accreditation systems. The search for literature published between 2000 and 2025 was conducted using PubMed, Scopus and Google Scholar.

The following keywords were used in the literature search: ''JCI'' OR ''Joint Commission International'', ''Healthcare accreditation'', ''Kazakhstan healthcare accreditation system'', ''Quality management'', ''Hospital accreditation''. The search was conducted using combinations of keywords and relevant MeSH terms.

Both international and national publications in English and Russian were analyzed. Official reports and policy documents from international healthcare organizations and the Ministry of Health of the Republic of Kazakhstan were also reviewed.

The collected materials were analyzed using qualitative content analysis, with a particular focus on the accreditation framework, patient safety, quality management, staff development, transparency and impact on the organization.

3. Results

The comparative data presented in Table 1 demonstrate that the differences between Kazakhstan's national accreditation system and the JCI accreditation model extend beyond technical or procedural variations and reflect fundamentally different conceptual approaches to quality assurance in healthcare. While both systems formally pursue quality improvement, their underlying logic, evaluation mechanisms, and systemic impacts diverge significantly.

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Table 1 - Comparative characteristics of Kazakhstan's national accreditation system and the JCI accreditation model

Analytical dimension	Kazakhstan's national accreditation system	Joint Commission International (JCI)
Primary purpose	Compliance with national regulatory and administrative requirements	Continuous improvement of clinical quality and patient safety
Conceptual orientation	Compliance-oriented, certification-focused	Improvement-oriented, patient-centered
Focus of evaluation	Organizational structure, documentation, management procedures	Clinical processes, patient outcomes, safety practices
Nature of standards	Predominantly structural and procedural standards	Outcome-oriented standards integrating structure, process, and results
Assessment methodology	Formal audit and document review	Direct observation, staff interviews, tracer methodology
Patient-centeredness	Limited; indirectly reflected in standards	Central principle guiding all accreditation domains
Risk management approach	Formal presence of policies and procedures	Active identification, analysis, and mitigation of clinical risks
Staff involvement	Limited; accreditation perceived as administrative obligation	High; staff actively engaged in quality and safety initiatives
Professional development requirements	Not systematically integrated into accreditation	Mandatory continuous education and competency development
Independence of evaluation	Conducted within national institutional framework	Performed by independent international surveyors
Transparency of procedures	Limited public disclosure of assessment	High transparency and standardized global procedures
Post-accreditation monitoring	Weak linkage between accreditation and long-term performance	Continuous monitoring and periodic reassessment
Impact on organizational culture	Limited influence on everyday clinical practice	Strong influence on safety culture and organizational learning
Demonstrated impact on patient safety	Insufficient empirical evidence	Documented reduction in errors and adverse events
Strategic role of accreditation	Formal certification mechanism	Strategic management tool for quality improvement

National accreditation of Kazakhstan is primarily constructed on the regulatory compliance, with a focus on documentation, administrative power [13-15]. The Table 1 presents comparative characteristics of Kazakhstan's national accreditation system and the JCI accreditation model based on the materials analyzed. Main differences are listed stratified by dimensions.

Purposive and evaluation approach

A fundamental distinction lies in the purpose and evaluative approach of the two systems.

National accreditation is oriented towards procedural compliance with the focus on legal conformity of the organizations. This was found in every decision-making step, including service delivery, structural readiness, and managerial decisions. In contrast, JCI adopts flexible model emphasizing the importance of clinical outcomes, patient safety, and better communication between the departments.

Independence and transparency of procedures

There was a significant difference in the independence and transparency of procedures. JCI observed to operate under the international standard protocols, which promoted objectivity and transparency. Conversely, national accreditation being under the close watch of governmental bodies, encountered challenges in keeping procedures transparent, and in most cases stayed neutral.

Staff involvement and professional development

The level of staff involvement and professional development requirements differs significantly. The JCI model mandates comprehensive training of healthcare personnel in quality management, patient safety, communication, and continuous professional development. Within Kazakhstan's system, these components are still being institutionalized. Accreditation is often perceived by healthcare

professionals as a formal compliance exercise rather than a mechanism for organizational learning and development, resulting in lower engagement and limited awareness of its practical implications [16].

Systemic impact and outcome measurement

Finally, differences are evident in the systemic impact of accreditation outcomes. International evidence indicates that JCI-accredited healthcare organizations demonstrate lower rates of clinical errors, higher levels of patient safety, and increased patient satisfaction [3,4]. In contrast, in Kazakhstan, there is a weak linkage between accreditation outcomes and their practical impact. The national system lacks a comprehensive system for systematically monitoring and evaluating the long-term effects of accreditation on clinical outcomes and service quality, limiting the ability to assess its true effectiveness and transformative potential [8,10].

International experience within research field

Existing literature highlights that JCI significantly enhances clinical performance, patient safety rules, managerial risk prevention, and sustainable work culture with strong communication skills. JCI standards are easy to understand and implement, principles are very clear for explaining to staff.

Core elements of JCI are communication clarity between various team members. This enables quick information share in critical times.

In Kazakhstan, the national accreditation system has undergone substantial development over the past decade, resulting in the establishment of its institutional framework. Regulated by the Ministry of Health of the Republic of Kazakhstan, this system is designed to assess the performance of domestic healthcare organizations based on national standards. These standards predominantly focus on administrative procedures, documentation, and management systems [14,15]. However, numerous studies indicate that the influence of national accreditation on clinical outcomes remains limited.

Another paper from Kazakhstan highlights that nationally accredited hospitals have developed overly compliance oriented formal conformity, where hospitals submit to Health ministry and all the orders are done with immediate effect. International evidence also confirms the positive impact of JCI accreditation on organizational performance and the overall effectiveness of healthcare service delivery [13-15, 17-19]. Current literature also indicates that national system needs implementation of JCI's best practices that would mark the transition from formal based monitoring to sophisticated system with institutional support for healthcare organizations [20-24].

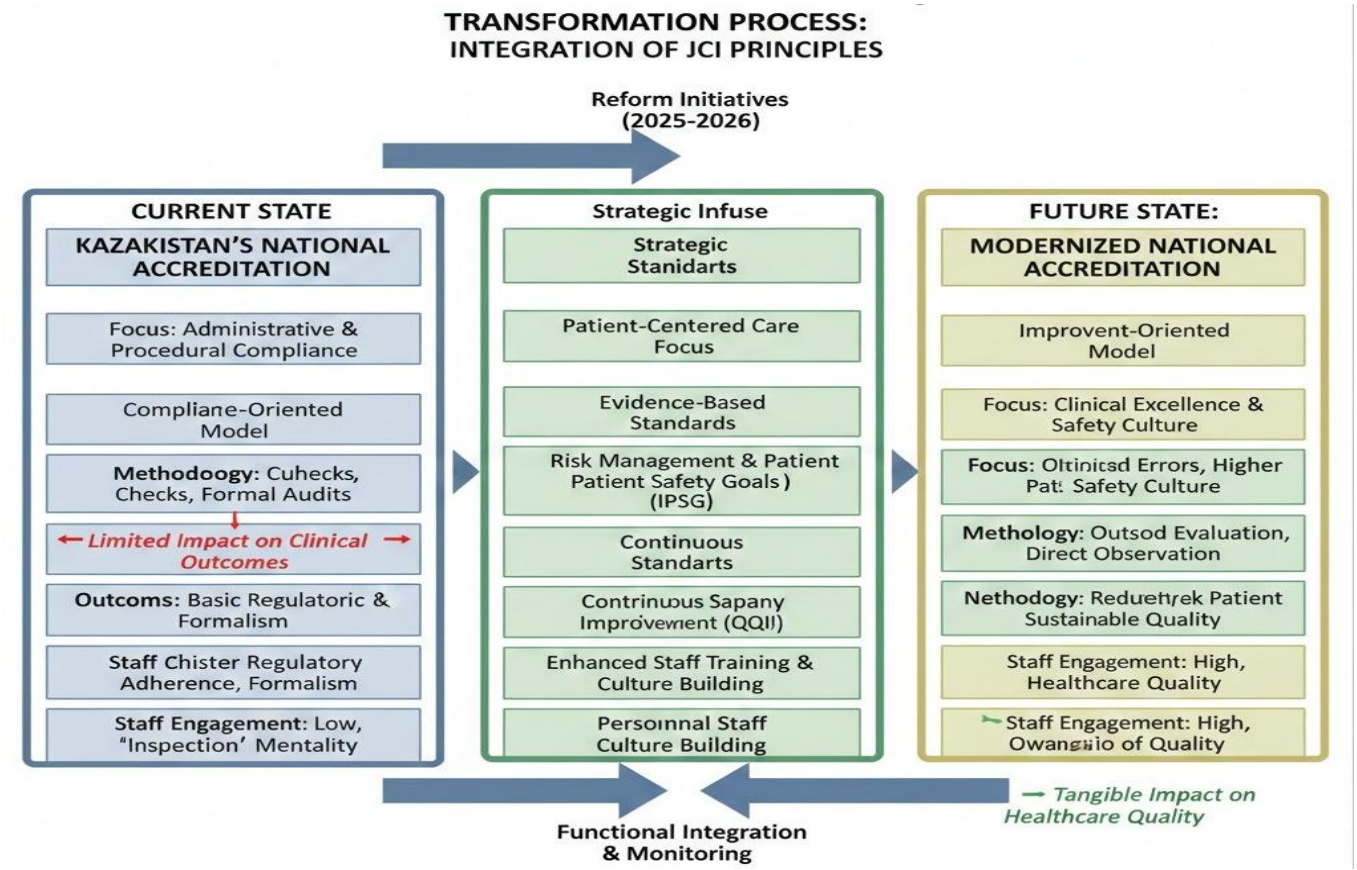

Figure 1 - Framework for Modernizing the National Accreditation System

Figure 1 illustrates the proposed transition of Kazakhstan's healthcare accreditation from a static, regulatory process to a dynamic, quality-driven system. The model is structured into three strategic phases:

- Compliance oriented model (current) which represents national accreditation model;
- Transformation period is explained by integration of all JCI core elements into existing national accreditation model;
- Development of strong monitoring of implemented elements, with dedication to continuous improvement and education based on mistakes.

The above mentioned model clearly draws the steps needed for the improvement of national accreditation model, which can become a powerful tool for healthcare transformation.

4. Discussion

The comparison demonstrates that Kazakhstan's national accreditation system is predominantly oriented toward compliance with procedural, administrative, and documentation requirements. It has likely stemmed from its origins as a state-regulated mechanism within a reforming healthcare system. While effective for establishing baseline order, this orientation fosters a formalistic or compliance-oriented character [16]. As evidenced in other contexts, when accreditation is perceived primarily as an obligatory regulatory requirement, it risks becoming a formal compliance exercise, rather than a catalyst for substantive internal transformation [16,17].

The study further demonstrates that the JCI model has a clear advantage in the area of human resource development. Medical staff are proactively take part in the preparation for JCI model. This emphasizes adherence to continuous learning, clinical protocol, better communication, and patient safety. The positive impact of JCI on clinical performance and patient safety noted in the literature [21-23] supports the findings that its strength lies in evaluating actual processes and outcomes, not just their documentation. This model successfully promotes a robust culture of patient safety and data-driven decision-making, elements still nascent in the Kazakhstani context.

The implementation of JCI in Kazakhstani environment has already taken place. Leading hospitals such as National cardio surgery center, National center for mother and child, Republican diagnostic center are part of Corporate Fund «University Medical Center», and these organizations adopted JCI standards a decade ago. In these organizations, accreditation transcended a mere 'audit' and evolved into a sustainable safety culture. Key outcomes included the implementation of transparent medical error reporting systems and the strict alignment of clinical workflows with evidence-based international protocols. This transformation not only improved clinical safety but also enhanced «medical tourism» potential and increased patient trust [17].

Conversely, during the implementation of JCI standards, some regional clinics have encountered significant resistance, often referred to as «bureaucratic friction». In these instances, instead of improving clinical care, the focus shifted towards an excessive documentation burden, leading to staff burnout.

One of the key findings from Kazakhstan's national accreditation system is that it has incorporated partially the principles of JCI, however, the implementation has been fragmented. In particular, core elements like risk management, continuous quality monitoring, performance review have been partially implemented, but not followed up [17]. Therefore, future reform must focus on functional integration, ensuring standards translate into everyday clinical practice and staff behavior. This requires moving beyond assessing if a policy exists to evaluating how effectively it is implemented and its impact on care delivery.

Limitations and Recommendations

One of the limitations could be the design of this study. This study utilized literature review style with the combination of research evidence and policy documentation of various organizations. This design was used to maximize the results of search and fully discover the issues of the topic.

Based on the abovementioned following recommendations could be made:

1. Aligning standards with international best practice, incorporating clear outcome indicators for patient safety and clinical effectiveness.
2. Strengthening the transparency and objectivity, potentially through greater independence of evaluation procedures.
3. Promoting the enforcement of quality and safety-oriented culture from management to field work.
4. Developing a system of strong monitoring on implementation of JCI and follow up checks after the implementation.

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5. Conclusions

1. This review tried to explore the difference of national accreditation and JCI in Kazakhstani settings. The study confirms that the difference, after studying the literature and other evidences, is fundamental in all aspects. The findings demonstrate that Kazakhstan's national accreditation system by prioritizing procedural adherence, has developed a formalistic or compliance-oriented character.

On the contrary, the JCI's framework provides effectiveness in its principle of patient-centered approach and patient safety culture. By highlighting the measurable clinical outcomes as a result of the work, and promoting proactive risk management and continuous improvement, JCI accreditation aligns the current processes with the goal of providing safer environment for patients. There is a need to study this topic furthermore with more appropriate research designs to fully discover the impact of JCI on the healthcare performance of Kazakhstan.

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All authors have read, agreed to release version of a manuscript and signed the Author's right transfer form.

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Халықаралық аккредитация (JCI) мен Қазақстанның ұлттық аккредитациясын салыстыру: Әдебиеттерге шолу

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Түйіндеме

JCI аккредитациясы денсаулық сақтау ұйымдары үшін кеңінен қабылданған тәжірибе болып табылады. Ол операциялық процедуралардың сапасын, науқасқа бағдарлануды және қауіпсіздікті, сондай-ақ қызмет көрсету сапасын үнемі жақсарту саясатын растайды. Дегенмен, денсаулық сақтау бойынша қызмет көрсететін ұйымдардағы сапаны бақылау бойынша мемлекеттік бастамалар да бар. Бұл бағдарламалар негізінен нормативтік талаптарға сәйкестікке бағытталған және қызмет көрсету сапасына емес, ережелерді сақтауға баса назар аударады.

Бұл зерттеудің мақсаты Қазақстандағы ауруханаларды аккредитациялау тәжірибесін халықаралық аккредитация жүйесімен зерттеулер мен басқа да қолжетімді деректерге сүйене отырып салыстыра талдау болды.

PubMed, Scopus және Google Scholar көздеріндегі әдебиеттерді іздеу жүргізілді. Зерттеуге жатпайтын деректер үкіметтік веб-сайттарда, JCI альянсының веб-сайттарында және басқа да мүдделі тараптардың көздерінен табылды. Деректерді іздеуден кейін құрылымдық дизайнды, бағалау тәсілдерін, басқару механизмдерін, қызметкерлердің қатысуын, науқастардың қауіпсіздігі шеңберлерін және нәтижелерді өлшеуді зерттеу үшін мазмұнды және институционалдық талдау жүргізілді.

Нәтижелер Қазақстанның ұлттық аккредитациялау жүйесі мен JCI арасында әртүрлі аспектілерге қатысты тәсілдерінде түбегейлі айырмашылықтар бар екенін көрсетеді. Ұлттық аккредитациялау нормативтік талаптарға сәйкестікке, қатаң құжаттама ережелеріне және ресми аудиттерге бағытталғанымен, клиникалық тәжірибемен өзара әрекеттесу айтарлықтай аз. Керісінше, JCI ауруханаңы басқару үшін науқас пен сапаға бағытталған құрылымды ұсынады. Әдебиеттер мен басқа да деректер JCI аккредитациясы ұйым ішіндегі коммуникацияны жақсартатынын және проактивті тәуекелдерді басқару және үздіксіз жетілдіру арқылы нәтижеге бағытталған мақсаттарға қол жеткізетінін көрсетеді.

Түйін сөздер: денсаулық сақтау аккредитациясы, Қазақстан, JCI, науқастардың қауіпсіздігі, сапаны басқару, клиникалық нәтижелер, денсаулық сақтау реформасы.

Сравнение международной (JCI) и национальной аккредитации Казахстана: Обзор литературы

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Резюме

Аккредитация JCI — это широко распространенная практика для медицинских организаций, позволяющая подтвердить качество операционных процедур, пациентоориентированность и безопасность, а также постоянное улучшение качества обслуживания. С другой стороны, существуют государственные инициативы по контролю качества в организациях, предоставляющих медицинские услуги. Эти программы

преимущественно ориентированы на соблюдение нормативных требований и сосредоточены на соблюдении правил, а не на качестве услуг.

Цель данного исследования: провести сравнительный анализ практики аккредитации больниц в Казахстане и международного опыта на основе исследований и других общедоступных данных.

Поиск литературы проводился в базах данных PubMed, Scopus и Google Scholar. Неисследовательские данные были найдены на правительственных веб-сайтах, веб-сайтах альянса JCI и других заинтересованных сторон. После поиска данных был проведен контент-анализ и институциональный анализ для изучения структурного проектирования, подходов к оценке, механизмов управления, вовлеченности персонала, рамок безопасности пациентов и измерения результатов.

Результаты показывают, что существуют принципиальные различия между национальной аккредитацией Казахстана и JCI в подходах к различным аспектам. Если национальная аккредитация ориентирована на соблюдение нормативных требований, строгие правила документирования и формальные аудиты, то взаимодействие с клинической практикой значительно меньше. В отличие от этого, JCI обеспечивает более ориентированную на пациента и качество основу управления стационарами. Литература и другие данные свидетельствуют о том, что аккредитация JCI способствует улучшению коммуникации внутри организации и продвигает цели, ориентированные на результат, с проактивным управлением рисками и непрерывным совершенствованием.

Ключевые слова: аккредитация в сфере здравоохранения, Казахстан, JCI, безопасность пациентов, управление качеством, клинические результаты, реформа здравоохранения.

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