

**Table 1 Description of study measures selected for the study and their relationship to Joint Commission International (JCI) standards and quality of care**

Measure (type)	JCI standard	Definition of measure	Relationship to quality of care
Rate of completeness of medical records (S)	MOI.12	Average percentage of requirements completed in a systematically selected sample of records ( $n = 400$ ) in selected hospital in specified study year	Medical record is a source of communication between health-care workers, supports continuity of care and detects possible adverse events
Rate of readmission within 30 days of discharge (O)	ACC.4	Number of patients readmitted to study hospital within 30 days of discharge in specified study year divided by total number of admissions to selected hospital in specified study year	Unplanned readmission within 30 days of discharge increases hospital days per capita and may lead to waste of resources, medical complications and patient dissatisfaction
Rate of return to surgery within 24 hours (O)	ASC.7	Number of surgery cases returning within 24 hours to study hospital in specified study year divided by number of surgeries conducted in study hospital in specified study year	Unplanned return to surgery within 24 hours can be due to complications related to inadequate treatment or medical error, and may increase length of stay, waste of resources, medical complications and patient dissatisfaction
Rate of readmissions to ICU within 24 hours of discharge (O)	AOP.2	Number of patients readmitted to ICU within 24 hours of discharge in study hospital in specified study year divided by number of admissions to ICU in study hospital in specified study year	Unplanned return to ICU within 24 hours of discharge may be due to a complication related to inadequate treatment or medical errors, and may increase length of stay, waste of resources and patient dissatisfaction
Rate of staff turnover (S)	GLD.5 & GLD.11	Number of employees who resigned or were laid off during a specified year divided by number of staff employed at study hospital at midpoint of specified study year	Accreditation is a recognition of high quality of care, adds lustre to an institution's image and may be a source of professional pride for employees; it may also routinize staff procedures, thereby increasing staff morale
Quality improvement index (I)	n/a	Average ratio of improvement in quality	Individual quality measures may be unstable due to random variations in rates of events due to small numbers and changing incentives over the years around accreditation. Combining these measures in one index creates a more stable measure for estimating the improvement in quality of care associated with accreditation.

S= structural; O = outcome; I= index; n/a = not applicable.