



# Home Sleep Apnea Testing – bringing quality to unregulated health care

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# Background and overview of the accreditation programme

The Diagnostic Accreditation Program (DAP), a program of the College of Physicians and Surgeons of British Columbia (BC), has the mandate and authority derived from the College Bylaws, under the Health Professions Act, that every diagnostic facility must be accredited before it can render a diagnostic service. This includes both public and private facilities regardless of the source of funding (public or private pay).



*Home Sleep Apnea Testing. Source:  
<https://dreamsleeptesting.com/hsat.html>*

Specifically, Home Sleep Apnea Testing (HSAT) in BC was predominantly provided by private, unregulated and unaccredited individuals. There was growing concern from the sleep medicine community about inappropriate diagnoses and management which prompted the Ministry of Health to launch a comprehensive review of the sleep medicine service delivery environment.

A key recommendation was to develop a formal accreditation process for HSAT facilities to ensure consistent quality of practice and patient care. Accreditation plays a significant role in improving the quality of health services by providing a framework and criteria for evaluating facilities and their practices.

In January 2021, the DAP Committee approved accreditation standards for home sleep apnea testing. These are evidence-based, outcome-focused mandatory requirements and best practices that are aligned with the principles of quality of care. The DAP's accreditation standards were developed through a collaborative, consultative and consensus building process involving health professionals and organizations, academics, experts, consumers, health authorities, colleges and the Ministry of Health\*. The standards are available [here](#).

\*Ref: Diagnostic Accreditation Program - Accreditation standards: Home Sleep Apnea Testing 2023 - Diagnostic Accreditation Program and the College of Physicians and Surgeons of British Columbia – Vancouver, Canada

The initial enrolment process resulted in 240 applications and to date there are over 170 HSAT facilities currently accredited by the DAP. Public facilities had their accreditation fees covered by the government. Private facilities must pay their own accreditation fees. As a result of accreditation, the Ministry of Health agreed to pay for the HSAT in these private facilities that received accreditation. The annual cost of accreditation for facilities was CAN \$3000, which was more than covered by the government funding of the testing.

## **How was accreditation used to improve the quality of health services?**

The accreditation process established standards of practice were that facilities must meet in order to deliver services. In addition, accreditation has been used to promote best practices and quality improvement initiatives such as medical peer review.

## **What were the results of this activity?**

Accreditation brought standardization to facilities providing HSAT while fostering patient-centred care. This has promoted consistency and confidence in healthcare practices, ensuring that patients receive consistent quality care, regardless of the location of the facility.

Specifically, confidence ensured that the right test was conducted, on the right patient, with an accurate medical interpretation, thus supporting the appropriate medical oversight/intervention for the patient.

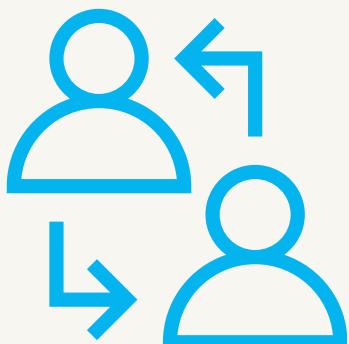
In addition, accreditation fosters a culture of continuous quality improvement, requiring regular assessments and performance measurement to identify areas for improvement, resulting in sustained quality improvement efforts by the facility.



*At Home Sleep Apnea Test. Source: <https://comprehensivesleepcare.com/our-services/sleep-services-overview/in-home-sleep-study-services/>*

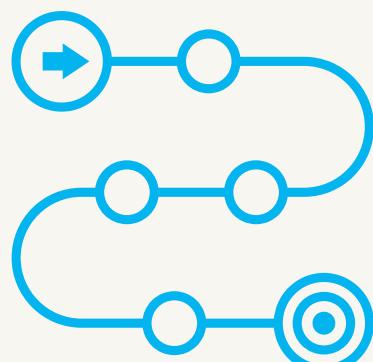
# What were the key challenges involved? How were these challenges overcome?

**One main challenge was to develop comprehensive and relevant standards** that ensure quality and safety of care are maintained, but are also adaptable to the community-based service model. This was achieved by using an advisory panel made up of subject matter experts who provided evidence-based guidance that was relevant to the HSAT scope of service.



**Stakeholder engagement and acceptance** was critical for the success of the accreditation. Building consensus, addressing concerns, and fostering acceptance can be challenging. Transparent communication and ongoing engagement with stakeholders throughout the accreditation process were necessary to gain support and buy-in. One example of engagement was hosting webinars to provide updates on accreditation activities and to discuss/receive ongoing feedback.

**A staged approach** to achieving accreditation was required to onboard and enrol those facilities that expressed an interest in seeking accreditation. It was recognised that facilities were new to the concept of accreditation and needed time and support to implement the requirements as laid out by the DAP. This was achieved by allocating staff resources to support facilities. In addition, a progressive accreditation process (enrolment, attestation agreement, desktop audit, onsite assessment) was used to manage the time required for facilities to adopt DAP HSAT requirements and achieve full accreditation.



# Key learning points

Some key learning points that can help enhance the effectiveness of planning and delivering a successful accreditation programme include:

1

## COLLABORATION AND STAKEHOLDER ENGAGEMENT

Identifying all stakeholders is the first step in engagement. This engagement must occur as often as possible and requires the accrediting body to actively seek feedback.

2

## CLEAR AND COMPREHENSIVE STANDARDS

Evidence-based standards that are clear and directive. Avoid prescriptive criteria/language unless quality or safety is an issue.

3

## PROJECT CHARTER WITH TIMELINES

A documented overview of the accreditation plan, focusing on specific activities, resources, and timelines. This helps keep the project's focus on key deliverables while ensuring that specific milestones are continuously checked off.

4

## RESOURCE ALLOCATION AND SUPPORT

Accreditation activities can be resource-intensive especially in the early stages of implementation, but also during the facility adoption stage. In addition, a project lead must be designated to ensure that the integrity of the accreditation process is maintained.

5

## EFFECTIVE COMMUNICATION AND TRANSPARENCY

Open and transparent communication is important throughout the accreditation process. Clearly communicate the purpose and benefits of the task(s) at hand. Address concerns promptly and ensure that stakeholders can provide feedback in an open and receptive manner.

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Related links:

<https://www.cpsbc.ca/accredited-facilities/dap>