

# From Disruption to Direction:

## A Manifesto for the Future of Healthcare Accreditation

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### A Shared Declaration

The world of healthcare stands at a crossroads. We face profound disruptions — unprecedented complexity, rising demands, exhausted workforces, and inequalities that transcend borders. At the same time, we are presented with opportunities of equal magnitude: digital innovation, new models of collaboration, and a renewed commitment to human dignity and trust.

In such a landscape, accreditation is not a relic of the past nor a rigid instrument of control. It is a compass — guiding us through turbulence, illuminating shared values, and anchoring safety, quality, and equity as universal principles.

This manifesto is born from dialogue and collective reflection. It is a call for transformation, a declaration of convictions, and an invitation to all who care about the future of health.

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### Why this Manifesto, and why now?

Healthcare accreditation has travelled a long journey. For decades, it has shaped cultures of safety, supported learning, and built trust in care systems. Yet the world around us has changed — and accreditation must change as well.

We live in a time of profound transformation in health systems. Rising care complexity, demographic and epidemiological shifts, accelerated technology, workforce shortages, and financial pressures are putting institutions under strain worldwide.

At the same time, expectations are growing for transparency, social participation, and results that truly matter to people. In this dynamic and challenging context, accreditation reaffirms itself as a guiding light — a strategic instrument to ensure quality, safety, and value in healthcare.

We need accreditation models that are more agile, inclusive, and responsive — models that integrate the voice of patients, promote health equity, embrace digital innovation, and strengthen cultures of learning and continuous improvement at every level.

This manifesto emerges from this recognition: accreditation must evolve from disruption to direction, from compliance to transformation, from checklists to shared purpose.

## **Our Convictions**

### **Is accreditation still relevant?**

Yes. Accreditation is more relevant than ever. As healthcare becomes increasingly complex, accreditation evolves alongside it — not as a static standard but as a dynamic force that helps systems navigate uncertainty. It grounds organizations in safety and ethics while enabling innovation and adaptation.

### **Is accreditation perceived as adding real value?**

Its value does not lie in certificates or external recognition. Its true worth is expressed in daily practice: in safer care, stronger teams, and greater trust from patients and families. Accreditation creates value when it fosters cultures of trust, transparency, and continuous learning. Its meaning lives in people — not on paper.

### **Is the accreditation process overly burdensome?**

The criticism must be heard. Accreditation becomes burdensome when it loses connection to the reality of care. Bureaucracy without purpose weakens its potential. Our conviction is clear: accreditation must become leaner, smarter, and aligned with frontline priorities. Digital integration and technology must be leveraged to reduce burden and increase meaning.

### **How does accreditation support the development of High Reliability Organizations?**

Accreditation is a catalyst for high reliability. It embeds resilience, anticipation, and collective vigilance into the DNA of organizations. It enables healthcare systems not only to provide care, but to deliver it consistently, safely, and equitably, even under pressure. Accreditation is not about compliance alone — it is about shaping cultures where reliability becomes a shared instinct.

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## **Beyond Standards: Anchors for the Future**

### **Patient and family engagement**

Accreditation must give voice to those at the center of care. True value lies in listening to patients and families, honoring their experiences, and embedding their perspectives into every stage of the process. Accreditation must amplify the human story of care, not silence it.

### **Equity and sustainability**

Accreditation must be a tool for justice. It must expose inequalities, promote equity, and ensure that quality and safety are accessible to all, regardless of geography, identity, or circumstance. Sustainability — both environmental and social — must also be recognized as a dimension of quality, for the health of people cannot be separated from the health of the planet.

### **Digital health and innovation**

The digital revolution is transforming care. Accreditation must not resist, but embrace innovation, guiding its safe and ethical adoption. From telehealth to artificial intelligence, digital solutions can expand access, strengthen safety, and connect systems. Accreditation must act both as a guardrail and as a bridge — enabling progress while protecting human dignity.

### **Integrated care and workforce resilience**

Quality cannot exist in silos. Accreditation must foster integration across disciplines, organizations, and communities. Equally, it must stand beside the healthcare workforce: valuing resilience, supporting well-being, and reaffirming that safe care depends on cared-for professionals.

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## **Call to Action – A Collective Commitment**

Accreditation is not an endpoint. It is not a certificate framed on a wall. It is a living commitment — to patients, families, professionals, and societies. In the face of disruption, we choose direction. We choose to see accreditation not as a burden, but as a path. Not as a restriction, but as a compass.

We invite governments, healthcare leaders, professionals, and patients across the globe to join this vision. Together, we can transform accreditation into a global movement for reliability, resilience, and renewal.

By 2030, accreditation will be:

### **Patients and Families**

Co-producers of care, actively participating in decisions, processes, and evaluations. Their voices will be heard and valued, and their experiences, expectations, and outcomes will become central measures of quality. Accreditation will reflect systems that treat each person with dignity, empathy, and respect — recognizing care as a fundamental human right.

### **Healthcare Workers and Professionals**

Agents of change and leaders of a culture of safety and quality, working in environments that value continuous learning, collaboration, and well-being. Accreditation will be a tool for professional and organizational development, strengthening competencies and enabling each professional to practice with purpose, excellence, and impact.

### **Payers and Funders**

Recognizing accreditation as a guarantee of value in healthcare, supporting models of care based on clinical outcomes, patient experience, resource efficiency, and sustainability. Accreditation will serve as a strategic instrument for decision-making and resource allocation, strengthening trust between funders, providers, and users.

### **Communities and Society**

Recognizing accreditation as a public commitment to collective health, equity, and social responsibility. It will be embedded in health policies and social dialogue, helping to reduce inequalities, expand access, strengthen networks of care, and build systems that respond ethically and sustainably to the needs of populations.

For the future of healthcare, for the dignity of all people, for the trust that binds communities to their systems of care — let this manifesto be our shared promise.