



**National Accreditation Board for Hospitals
and Healthcare Providers**

Hinduja Healthcare Management Series

4 Dec 2015, Mumbai

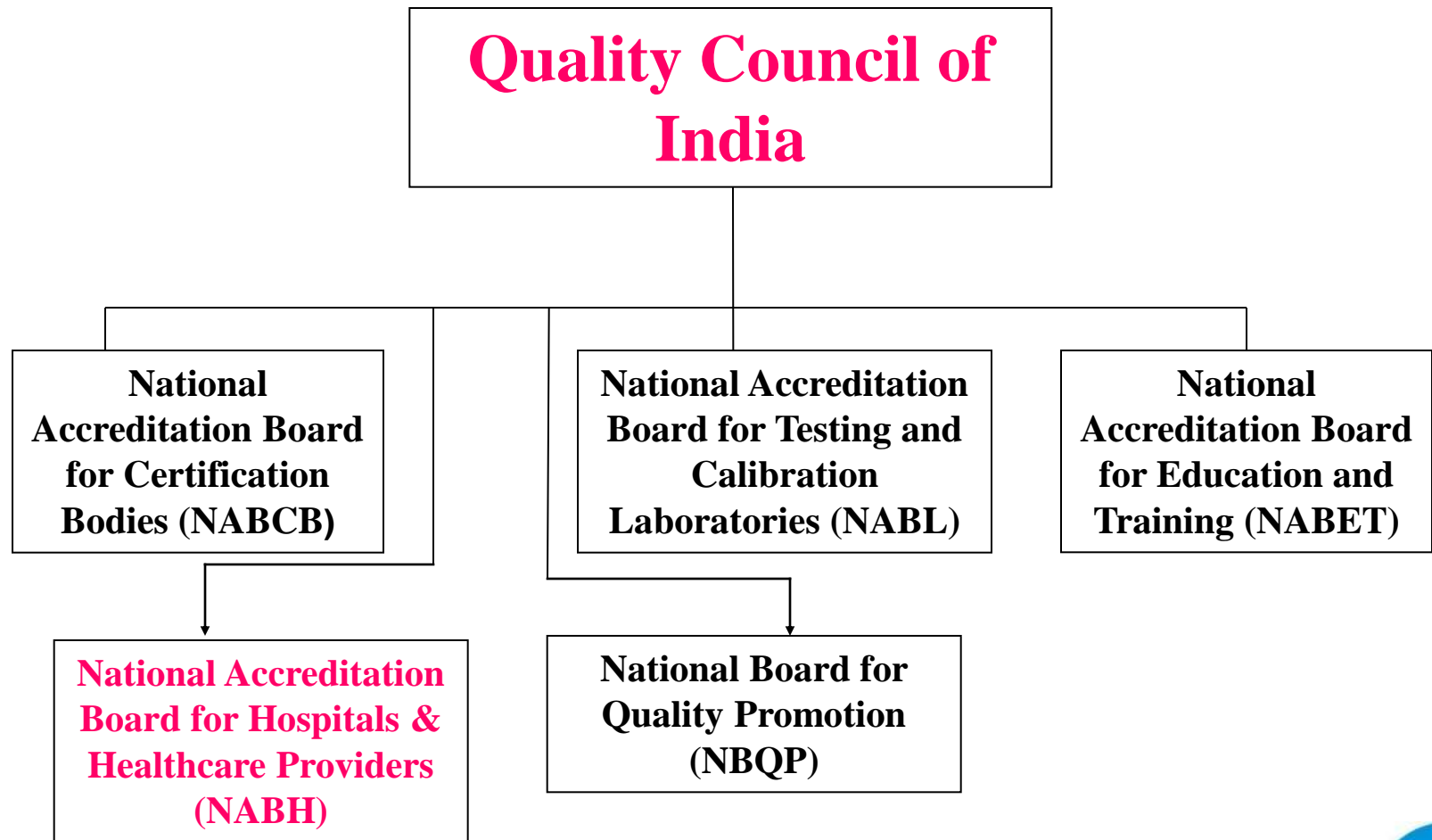
National Conference on “Redefining Healthcare – Value based delivery”

QCI is an autonomous body under
Department of Industrial Policy &
Promotion, Ministry of Commerce and
Industry

NABH is a constituent board of Quality
Council of India, set up to establish and
operate accreditation programme for
healthcare Organizations.



Structure of QCI



Vision

To be apex national healthcare accreditation and quality improvement body, functioning at par with global benchmarks.

Mission

To operate accreditation and allied programs in collaboration with stakeholders focusing on patient safety and quality of healthcare based upon national/international standards, through process of self and external evaluation.



Scope

- Accreditation of healthcare facilities
- Quality promotion initiatives like Safe-I, Nursing Excellence, Laboratory certification programs (not limited to these).. Certification
- Education and Training for Quality & Patient Safety
- Endorsement of various healthcare quality courses/ workshops



NABH Global Recognition

NABH is an institutional member as well as a Board member of the International Society for Quality in Health Care (ISQua).



NABH is a member of the Accreditation Council of International Society for Quality in Health Care (ISQua)

NABH is on board of Asian Society for Quality care (ASQua)



NABH Global Recognition

International Society for Quality in Healthcare (ISQua) has accredited “Standards for Hospitals”, 3rd Edition, November 2011 developed by National Accreditation Board for Hospitals & Healthcare Providers (NABH, India) under its International Accreditation Program for a cycle of 4 years (April 2012 to March 2016). The approval of ISQua authenticates that NABH standards are in consonance with the global benchmarks set by ISQua



NABH Global Recognition

NABH has been granted accreditation as an organization by ISQua under its International Accreditation Program (IAP) from September 2012 upto August 2016



Patient safety

- Patient safety is a subset of health care quality
- The avoidance or prevention of adverse outcomes or injuries stemming from the processes of health care.
 - Safety emerges from the interaction of the components of the system; it does not reside in a person, device, or department.



Benefits for patients

Although accreditation benefits all stakeholders, patients are the biggest beneficiary. Accreditation results in high quality of care & patient safety.

- The patient gets services by credentialed medical staff.
- Rights of patients are respected and protected.
- Patient satisfaction is regularly evaluated.
- Defined and Displayed scope of services leads to clarity to the patients on the services being provided by the hospital
- Bilingual Signages, Informed Consents, Patient Education material facilitating correct understanding and involvement of patient in decision making



Benefits for hospital

Accreditation to a hospital stimulates continuous improvement. It enables hospital in demonstrating commitment to quality care. It raises community confidence in the services provided by the hospital. It also provides opportunity to healthcare unit to benchmark with the best.



Benefits for hospital

- Hospitals benefit by providing Registration, Assessment and Delivery of care in a timely manner
- Standardized approach for all referrals and transfer of patients in a safe manner reduces risks & errors
- Ensure Trained and Experienced staff availability to meet the needs of the patients and community it served thereby ensuring continuity of clinical care of patients.

Benefits for Hospital Staff

The staff in a accredited hospital are a satisfied lot as it provides for continuous learning, good working environment, leadership and above all ownership of clinical processes. It improves overall professional development of clinicians and para medical staff and provides leadership for quality improvement within medicine and nursing .



Benefits to paying and regulatory bodies

Finally, accreditation provides an objective system of empanelment by insurance and other third parties. Accreditation Provides access to reliable and certified information on facilities, infrastructure and level of care.



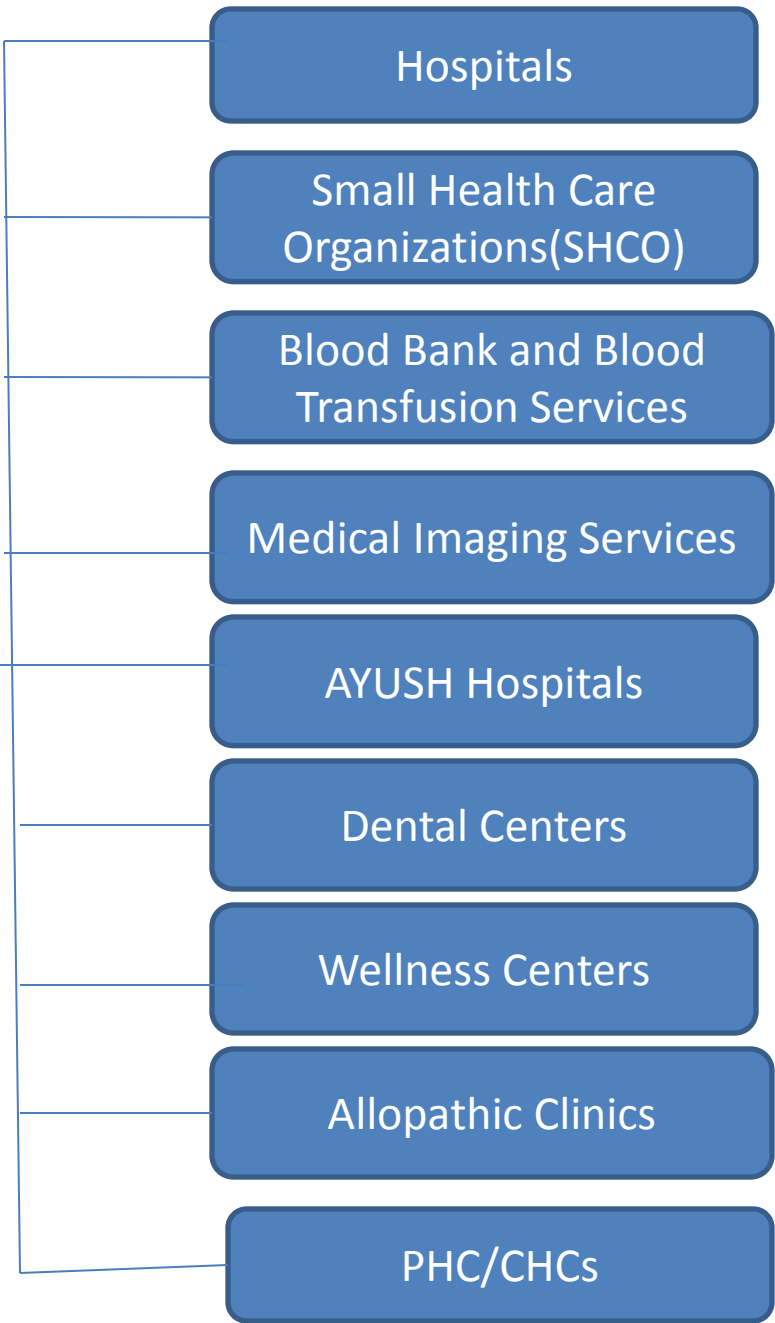
NABH Programs & Activities

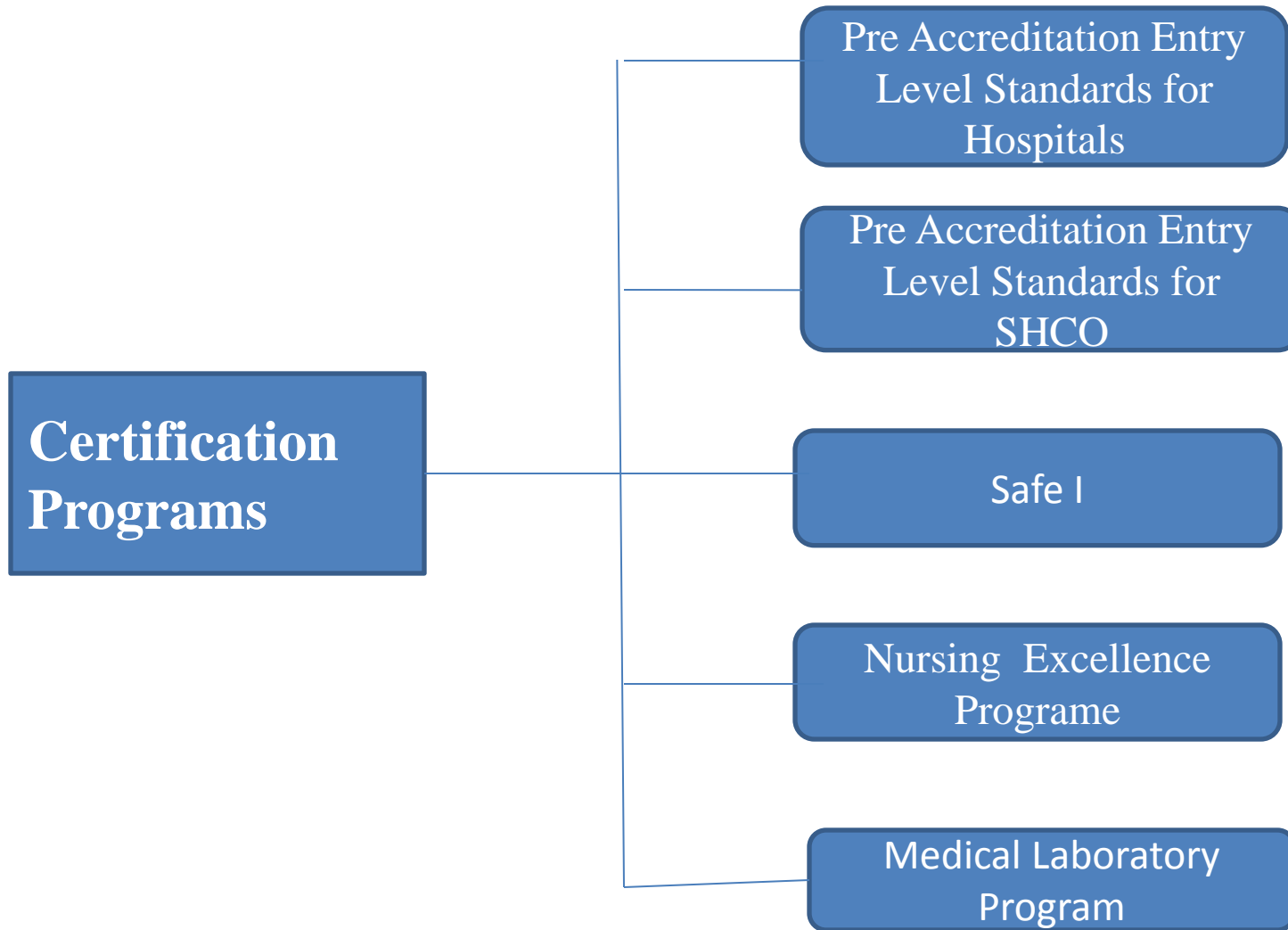
NABH operates the following programs:

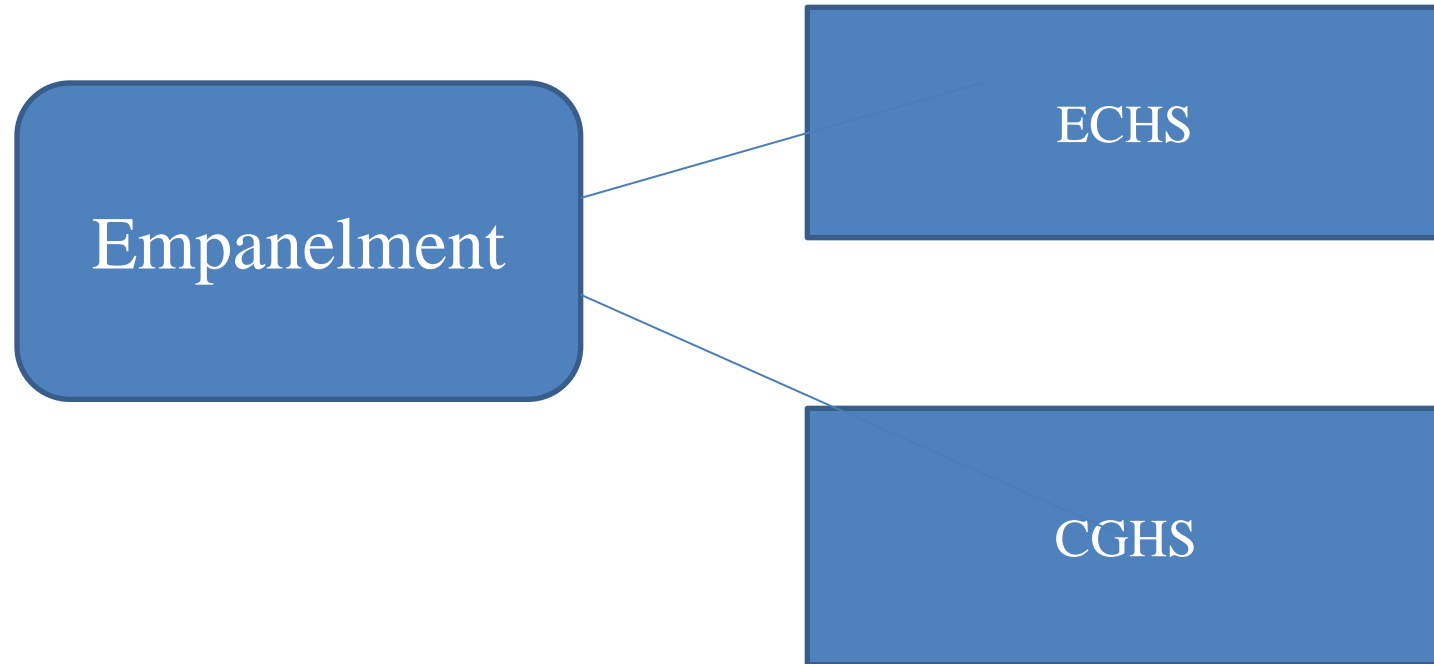
- 1. Accreditation**
- 2. Certification**
- 3. Empanelment**
- 4. Training & Education**



Accreditation Programmes







Details of Accredited HCOs (Since 2006)

S.No	Name of State	Hospital	SHCO	Blood Bank	MIS	Allopathic Clinic	PHC	CHC	Dental	Ayush	Wellness	Safe I	Medical Lab	Nursing Excellence	Pre Entry Hospital	Pre Entry SHCO	Progressive Level	Total
1	ASSAM	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3
2	ANDHRA PRADESH	47	3	2	0	1	0	0	0	0	0	0	1	0	3	0	0	57
3	BIHAR	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	CHATTISGARH	3	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	4
5	DELHI	44	12	9	10	11	0	0	4	1	1	0	2	0	0	0	1	95
6	GUJARAT	25	6	13	1	3	7	1	0	0	0	0	1	0	0	0	3	60
	HIMACHAL PRADESH	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
7	HARYANA	15	3	3	0	1	2	0	1	0	1	0	0	0	0	1	0	27
8	JHARKHAND	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
9	KARNATAKA	28	5	4	0	2	1	0	1	5	0	6	3	0	2	3	0	60
10	KERALA	25	5	2	2	0	0	1	0	6	0	17	21	2	2	0	0	83
11	MADHYA PRADESH	4	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	6
12	MAHARASHTRA	33	8	20	4	0	0	0	0	0	1	1	1	0	0	1	0	69
13	MANIPUR	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
14	ORISSA	5	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	7
15	PUNJAB	24	6	2	0	0	0	0	0	0	0	10	1	2	0	0	0	45
16	RAJASTHAN	10	0	2	0	0	0	0	0	0	0	0	2	0	0	0	0	14
17	TAMIL NADU	27	6	3	3	1	0	0	1	0	1	0	3	2	13	2	8	70
	UTTARAKHAND	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3
18	UTTAR PRADESH	20	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	23
19	WEST BENGAL	9	0	3	0	0	0	0	0	0	1	0	1	0	0	0	0	14
	TOTAL	324	58	66	21	19	10	2	9	12	6	34	36	6	21	7	13	644

Accreditation Is An External Review Of Quality With Four Principal Components

- It is based on written and published standards
- Reviews are conducted by professional peers
- The accreditation process is evaluated by an independent body
- The aim of accreditation is to encourage safety culture

How Accreditation Brings Safety

- The word safety in its purest sense means freedom from injury, risk & harm.
- Safety management is a very important aspect of planning in every process.
- Outcomes are measured not only clinical safety (eg. Prevention of hospital infection, medication errors etc), but also for fire safety, security measures in terms of safety from encounters like thefts, pilferages, extortion, riots and natural calamities.



A **standard** is an explicit statement describing the quality of care to be achieved, which is definable and measurable.

Objective element is a measurable component of a standard

- Objective elements are required to be met in order to meet the requirement of a particular Standard. Similarly, standards are required to be met in order to meet the requirement of a particular Chapter. Finally, all chapters are deciding factor to say whether a hospital is meeting the requirements of the Accreditation Standard.



Regulation Vs Accreditation

- Regulation is mandatory
- Accreditation is voluntary
- Accreditation is promoted by way of incentives and market forces
- In order to achieve best of both worlds, regulation in time to come can simply rely on accreditation!!



First Five Chapters are Patient-Centered Standards

1. Access, Assessment and Continuity of Care (AAC)
2. Care of Patients (COP)
3. Management of Medications (MOM)
4. Patients Rights and Education (PRE)
5. Hospital Infection Control (HIC)



Next Five Chapters are HealthCare Management Standards

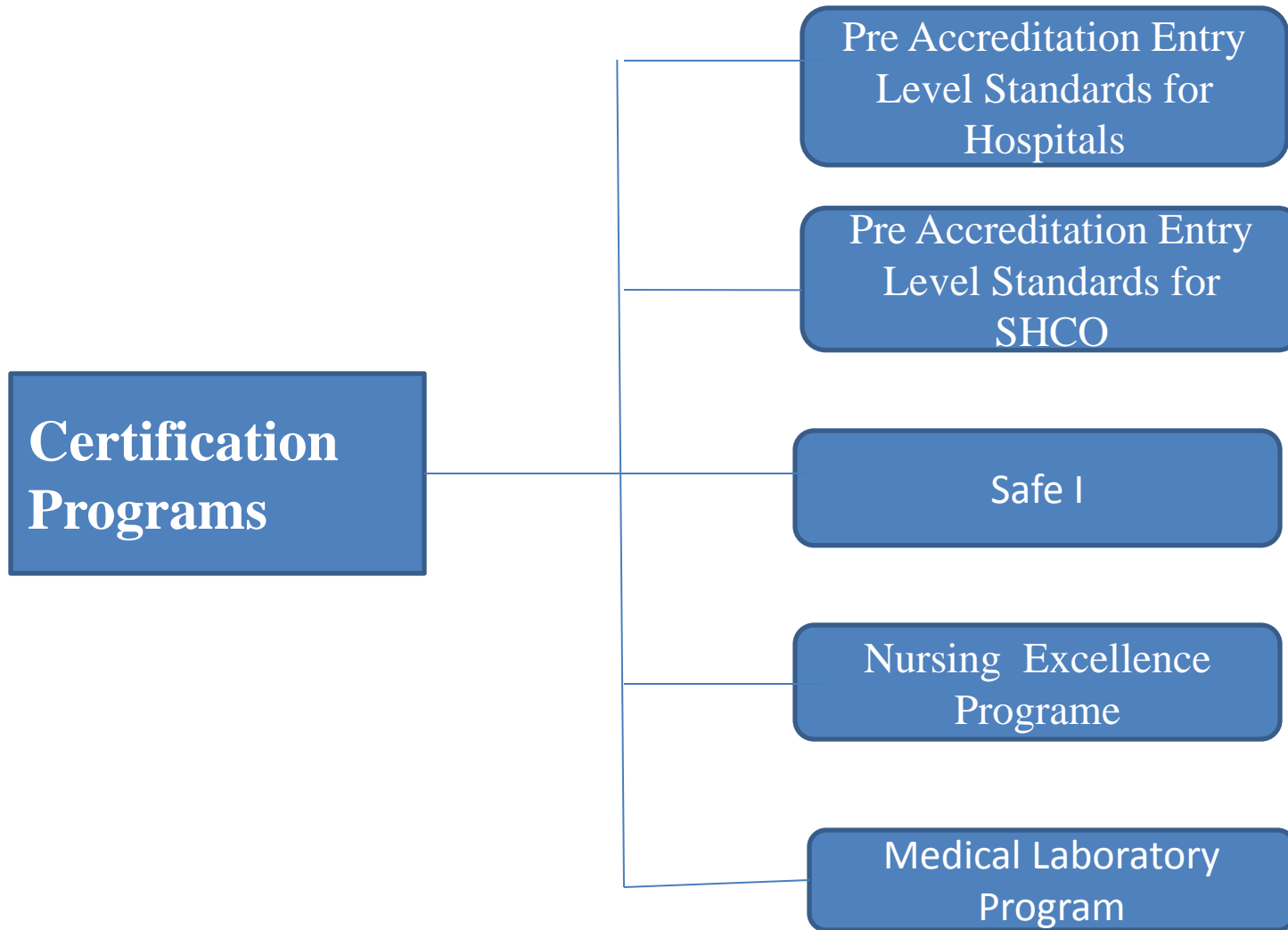
6. Continual Quality Improvement (CQI)
7. Responsibilities of Management (ROM)
8. Facility Management & Safety (FMS)
9. Human Resource Management (HRM)
10. Information Management Systems (IMS)



Certification

Is a process by which an authorized body, either a governmental or non-governmental organization, evaluates and recognizes either an individual or an organization as meeting pre-determined requirements or criteria.





Stages of Accreditation



Pre Accreditation (Entry Level)



Pre Accreditation (Progressive Level)



Full Accreditation



How were these standards developed?

As large number of hospitals & SHCOs face challenges and difficulties in implementing the complete NABH Accreditation standards due to Infrastructural, manpower, monetary constraints etc

With increasing demand from hospitals & to encourage HCOs to join quality journey, NABH developed Pre Accreditation Entry Level certification standards, in consultation with various stake holders in the country, as a stepping stone for enhancing the quality of patient care and safety.

Objective of these Standards

- To introduce quality and accreditation to the HCOs as their first step towards awareness and capacity building.
- Set **basic standards** that all organizations must achieve
- Provide a framework as a stepping stone for enhancing the quality of patient care and safety
- Once Pre Accreditation Entry Level Certification is achieved, the HCO can then prepare and move to the next stage - “Progressive” Level and finally to “Full Accreditation” status.



Hospital Standard v/s Entry Level Standards

- Regulatory compliances are few
- Infrastructure requirements not very stringent
- Quality Indicators not pre-defined. Left to the hospitals to define
- Formal credentialing/privileging & audits (clinical/medical records) not required in Entry Level
- Reduced fee structure & man-days of assessment
- Documentation is reduced



Assessment Process

A hospital willing to apply for Pre Accreditation Entry Level must ensure the implementation of standards in its organization, Submission of application, program fee, necessary documents.



Qualifying Criteria

Pre Accreditation Entry Level Certification Program has the following qualifying criteria:

- Overall score of minimum 50% in all standards
- Overall score of minimum 50% in each chapter



Assessment Cycle

- Assessment cycle: 2 years
- No Surveillance Assessment
- Periodic document review done wherein hospitals will be required to send self assessment report every year to NABH Secretariat



Regulatory Requirements

- Bio-medical Waste Management and Handling Authorization
- Registration Under Clinical Establishment Act (or similar)/ Registration With Local Authorities, if applicable
- Atomic Energy Regulatory Board (AERB) approval for Radiological Equipment
- Registration for PNDT



GENERAL INDICATORS (Suggestive)

- Average Length of Stay
- Monthly Workload (OPD & IPD)
- C-Section Rate
- Mortality
- No. of Falls



- is a certification program on infection control practices and protocols. This program is being viewed as stepping stone towards NABH Accreditation
- This program is based on chapter 5 of NABH Hospital Standards “HIC”

Safe-I hospitals would ensure

- Injection safety
- Infusion Safety
- Infection Prevention
- Healthcare Workers Safety
- Bio Medical Waste Management
- Disinfection and Sterilization



Nursing Excellence

1. Nursing Resource Management (NRM)
2. Nursing Care of Patient (NCP)
3. Management of Medication (MOM)
4. Education, Communication and Guidance (ECG)
5. Infection Control Practices (ICP)
6. Empowerment and Governance (EG)
7. Nursing Quality Indicators (NQI)



Thank You



COMPARISON AT A GLANCE

Type	Chapters	Standards	Objective elements
Hospital Accreditation Standard	10	102	636
<i>Entry Level Hospital Accreditation Standard</i>	10	45	167
Small Health Care Organization (<50 beds) Standard	10	61	286
<i>Entry Level SHCO Standard</i>	10	41	149

	Chapters	Standards	Objective Elements
Hospital Accreditation	10	102	636
SHCO	10	61	289
Clinics	9	30	139
PEHCO	9	45	167
PESHCO	9	41	149
PHC	9	39	189
CHC	9	42	227
PEPHC	9	32	129
PECHC	9	38	166

CHAPTERS	Hosp		SHCO		Clinics		PEHCO		PESHCO		PHC		CHC		PE PHC		PE CHC	
	S.	OE.	S.	OE.	S.	OE.	S.	OE.	S.	OE.	S.	OE.	S.	OE.	S.	OE.	S.	OE.
Access, Assessment and Continuity of Care (AAC)	14	86	7	35	7	33	7	29	7	26	4	20	5	31	4	14	5	20
Care of Patients (COP)	20	136	10	45	6	27	8	38	8	31	6	29	7	34	3	14	5	23
Management of Medications (MOM)	13	73	6	27			7	22	5	18	4	18	4	20	3	12	4	17
Patients Rights and Education (PRE)	7	46	5	28	5	26	2	9	2	9	3	21	3	21	3	17	3	18
Hospital Infection Control (HIC)	9	51	6	30	2	8	3	13	3	13	4	20	4	23	4	19	4	22
Continuous Quality Improvement (CQI)	8	57	5	25	2	8	2	5	2	5	2	10	2	17	1	5	2	11
Responsibilities of Management (ROM)	6	38	3	14	4	20	3	9	2	7	4	19	4	19	4	12	4	11
Facility Management & Safety (FMS)	8	54	4	19	3	12	4	14	4	14	4	18	4	20	4	15	4	15
Human Resource Management (HRM)	10	52	9	30			5	12	4	10	5	18	5	21	3	8	4	12
Information Management Systems (IMS)	7	43	6	35			4	16	4	16	3	16	4	21	3	13	3	17
Community Participation & Integrity					1	5												
Total	102	636	61	289	30	139	45	167	41	149	3	189	42	227	32	129	38	166

Fees for accreditation

- **Hospital Standard**
 - Application fees 40000 to 1.5 lakh
 - Annual fees 1.5 lakhs to 4 lakhs
- **SHCO Standard**
 - Application fees 25000
 - Annual fees 1 lakh
- **Entry Level Hospital Standard**
 - Application fees 2000
 - Certification fees 25000
- **Entry Level SHCO Standard**
 - Application fee 1000
 - Certification fee 10,000