

About NABH

National Accreditation Board for Hospitals and Healthcare Providers (NABH) is a constituent board of Quality Council of India (QCI), set up to establish and operate accreditation programme for healthcare organizations. NABH has been established with the objective of enhancing health system & promoting continuous quality improvement and patient safety. The board while being supported by all stakeholders, including industry, consumers, government, has full functional autonomy in its operation.

International Society for Quality in Healthcare (ISQua) has accredited NABH as an Organization. The hospitals accredited by NABH have international recognition. This provide boost to medical tourism in country.

NABH is an Institutional Member as well as a member of the Accreditation Council of the International Society for Quality in HealthCare (ISQua). NABH is one of the founder member of Asian Society for Quality in Healthcare (ASQua).

There has been demand from SAARC/ASIAN countries for NABH accreditation and to meet this requirement, NABH has launched NABH International and to begin with Philippines is the first overseas destination for extending NABH accreditation services.



About NABH

NABH provides accreditation to Healthcare organisations in a non-discriminatory manner regardless of their ownership, legal status, size and degree of independence.

The objective of NABH standards is to improve healthcare quality and patient safety.

NABH currently operates the following accreditation, certification and empanelment programs

Accreditation programs:

1. Hospitals
2. Small Healthcare Organizations
3. Blood Banks
4. Medical Imaging Services
5. Dental Facilities/Dental Clinics
6. Allopathic Clinics
7. AYUSH Hospitals
8. Primary Health Centre
9. Clinical Trial (Ethics Committee)
10. Panchakarma Clinics
11. Eye Care Organization

Certification programs:

1. Entry Level Hospital
2. Entry Level Small Healthcare Organizations
3. Entry Level AYUSH Centre
4. Entry Level AYUSH Hospital
5. Nursing Excellence
6. Medical Laboratory Programme
7. Emergency Department
8. MVTF Empanelment Certification

Empanelment programs:

NABH is the nodal body representing Quality Council of India for conducting assessments of healthcare organizations for empanelment under Central Government Health Scheme (CGHS) and Ex-Servicemen Contributory Health Scheme (ECHS).

Introduction to Accreditation

In India, Health System currently operates within an environment of rapid social, economical and technical changes. Such changes raise the concern for the quality of health care. Unani Hospitals are an integral part of health care system. Accreditation would be the single most important approach for improving the quality of hospitals. Accreditation is an incentive to improve capacity of national Unani hospitals to provide quality of care. National accreditation system for Unani hospitals ensure that hospitals, whether public or private, national or expatriate, play their expected roles in national health system.

According to ISQua "A self-assessment and external peer review process used by health and social care organisations to accurately assess their level of performance in relation to established standards and to implement ways to continuously improve the health or social care system."

Confidence in accreditation is obtained by a transparent system of control over the accredited hospital and an assurance given by the accreditation body that the accredited hospital constantly fulfils the accreditation criteria.

The AYUSH standards were released in the year 2009 in association with MOHFW, Department of AYUSH, Government of India which later became Ministry of AYUSH. It encompasses relevant and comprehensive quality assurance standards. These are in natural alignment to the hospital standards with a community focus.

Benefits of Accreditation

Benefits for Patients

- Patients are the biggest beneficiary among all the stakeholders.
- Accreditation results in high quality of care and patient safety.
- The patients are serviced by credentialed medical staff.
- Rights of patients are respected and protected. Patient's satisfaction is regularly evaluated.

Benefits for Unani Hospitals

- Accreditation to an Unani Hospital stimulates continuous improvement.
- It enables the Unani Hospital in demonstrating commitment to quality care and patient safety thereby ensures best clinical outcomes.
- It raises community confidence in the services provided by the Unani Hospital as services provided by credentialed medical staff.
- It also provides opportunity to Unani Hospital unit to benchmark with the best.
- An accreditation status also provides marketing advantage in a competitive health care.
- Finally, accreditation provides an objective system of empanelment by insurance and other third parties.

Benefits for Staff

- The staff in an accredited Unani Hospital is satisfied lot as it provides for continuous learning, good working environment and leadership.
- Efficiencies and competencies of staff also gets improved in an accredited Unani Hospital.
- It improves overall professional development, knowledge and competencies in systematic ways with defined ownership and accountability of all the staff including Medical and Para Medical Staff.

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 Standards for Unani Hospital

The Unani Hospital accreditation programme assesses the quality and operational systems which are in place within the facility. The accreditation includes compliance with the NABH standards, applicable laws and regulations.

NABH Standards for Unani hospitals prepared by technical committee contains complete set of standards for evaluation of Unani hospitals for grant of accreditation. The standards provide framework for quality of care for patients and quality improvement for Unani hospitals. The standards help to build a quality culture at all level and across all the function of Unani hospital.

A minimum bed strength of 10 beds is essential for an Unani hospital to be considered for the Accreditation Program.

Ten chapters of Unani Hospital Standards are:

1. Access, Assessment and Continuity of Care (AAC)
2. Care of Patient (COP)
3. Management of Medication (MOM)
4. Patient Right and Education (PRE)
5. Hospital Infection Control (HIC)
6. Continuous Quality Improvement (CQI)
7. Responsibility of Management (ROM)
8. Facility Management and Safety (FMS)
9. Human Resource Management (HRM)
10. Information Management System (IMS)



Methodology for Accreditation

An Unani hospital willing to be accredited by NABH must ensure the implementation of NABH standards in its organization.

The assessment team look for the evidences of implementation of NABH Standards in organization. The Unani Hospital shall be able to demonstrate to NABH assessment team that all NABH standards, as applicable, are followed.

Eligibility to apply for Unani Hospital accreditation

Unani Hospital that fulfils the following requirements:

- Currently in operation as Unani Hospital
- Unani Hospital should have been implemented NABH standards in the Unani Hospital for a minimum of three months.
- The organization that commits to comply with NABH standards and applicable legal/statutory/ regulatory requirements.

These standards are to be used by the whole organisation and not for a specific service within the organisation. Organisations may have different services and it is equally applicable to all services and both public and private Unani hospitals.

Methodology for Accreditation

The Management shall first decide about getting accreditation for its Unani hospital from NABH. It is important for an Unani hospital to make a definite plan of action for obtaining accreditation and nominate a responsible person to co-ordinate all activities related to seeking accreditation. An official nominated should be familiar with existing Unani hospital quality assurance system.

Unani Hospitals need to procure a copy of the standard. It is available at NABH website in freely downloadable format. One can purchase the guidebook on standards by making the payment at the website <https://www.nabh.co/NABHStandards.aspx>

The Unani hospital looking for accreditation shall understand the NABH assessment procedure. The Unani hospitals shall ensure that the standards are implemented in the organization.

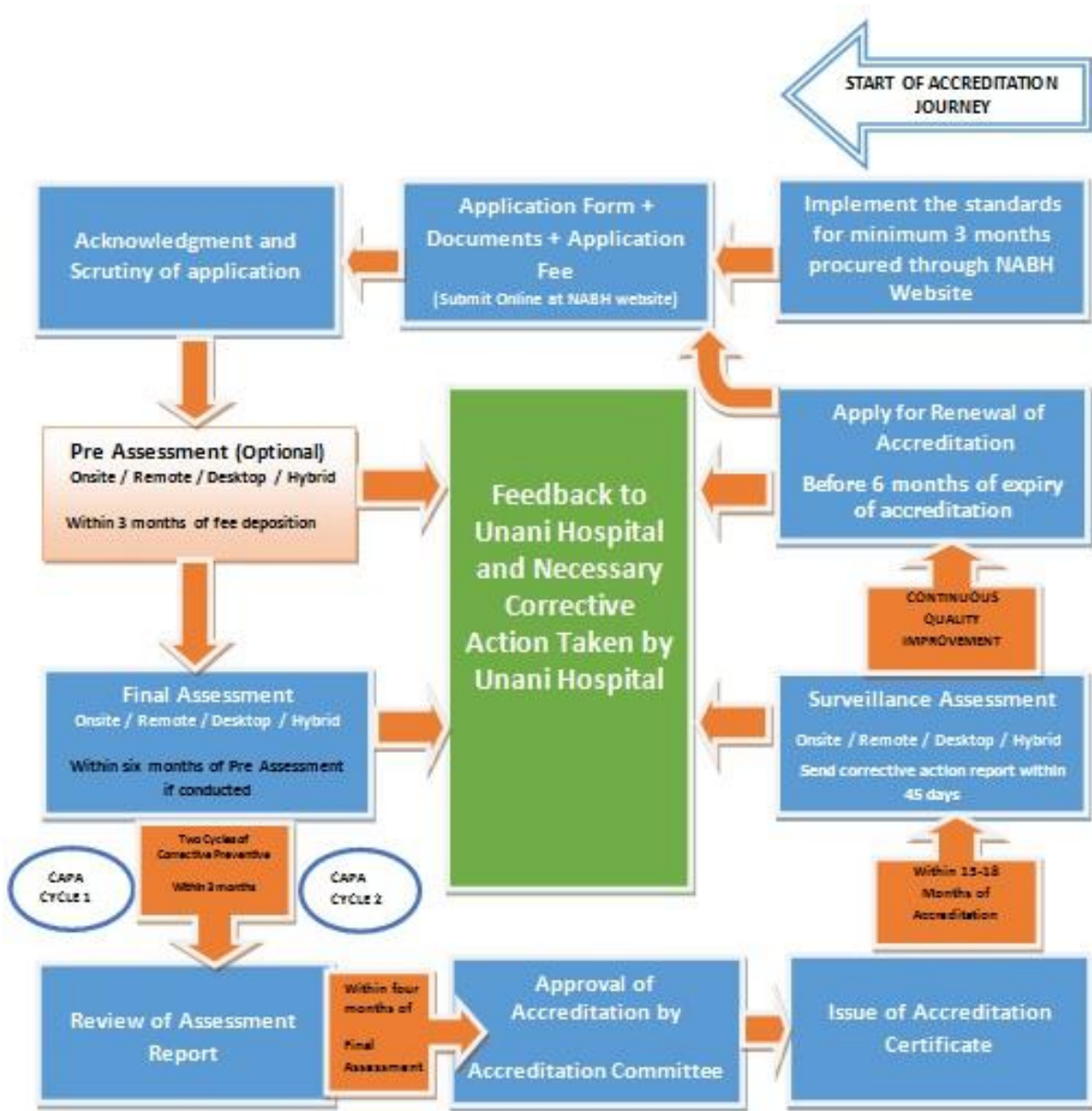
How to apply?

Once the standards are implemented in the Unani hospital, the organization can apply for accreditation online from the website www.nabh.co

- (a) Use a new email id for registration
- (b) Choose 'Unani' as Application Type
- (c) NABH shall activate the email id and provide you the login and password

Using the above login and password – you can fill the application form and pay the application fees. Reference Number is generated once application fees are paid.

Accreditation Process



NABH Accreditation Procedure

Preparation of Policies and Manuals:

The Unani Hospital shall prepare the Quality Manual, Policies and Procedures and other Manuals required as per the NABH standard.

Application for accreditation:

The Unani hospitals shall apply to NABH as per the instructions given in the online application portal. Hospitals should fill the application and provide the information details very carefully as this is relevant to determine the scope of services and to take the process further.

Scrutiny of application:

Reference ID for the application is generated once the Unani Hospital pays the application fees from 'Make Payment' option of the online application form. NABH officer shall scrutinize the application form for its completeness. Unani Hospital may correspond to NABH via writing in 'Remarks column' of online portal of the Unani hospital.

Notification of Principal Assessor and Assessment Team:

NABH shall appoint Principal Assessor who shall have the overall responsibility of conducting the assessment for the Unani Hospital and a team of other assessors. He/ She will evaluate the adequacy of all the documents including the quality manual, policies and procedures and other departmental manuals as mandated by the standards.

Types of Assessment conducted by NABH

NABH in coordination with the Unani Hospital may choose to follow one of the following methods for conduct of the assessments based on environmental factors prevailing in the region in order to ensure business continuity in its operations without compromising on quality.

Onsite assessment: In onsite assessment, the assessors nominated by NABH makes a visit to the Unani Hospital for a predefined man days based on the bed strength of the hospital, the assessors verifies the documents, facilities and conducts interviews in person at the Unani Hospital. The Unani Hospital needs to bear the cost of the assessor's travel and stay.

Desktop assessment: In this type of assessment the Unani Hospital will submit information & documents as per the checklist which is based on applicable standards for Unani Hospitals & the same shall be reviewed by NABH assessor. The decision on continuation of accreditation shall be based on the recommendations made by the assessor.

Remote assessment: In this type of assessment, the assessor (s) does not go to the Unani Hospital in person, but conducts the entire assessment from a remote location through the use of virtual platforms. Unani Hospital need to provide the online platform, there are nominal overhead charges for hospitals which they need to pay.

Hybrid assessment: In this type of assessment, one assessor may be physically present in the Unani Hospital during the audit, and the other assessor(s) will be doing the audit from a remote location through the use of virtual platform.

Communication Channel

All applicant and accredited Ayurveda Hospital are strongly advised to use the "Remarks column" at the online portal for all communication. Hospitals are strongly discouraged to communicate through telephone or emails to secretariat members as this communication cannot be saved as part of particular Ayurveda Hospital record and may not be available for future references. The matrix for communication is available at NABH website.

<https://www.nabh.co/Announcement/NABH%20Communication%20Matrix.pdf>

NABH Accreditation Procedure

Pre-Assessment (Optional):

NABH has made pre-assessment optional. Those Unani Hospital which does not want to undergo pre-assessment shall provide in writing in the remark column of online application form.

However, NABH shall conduct the pre-assessment for those Unani Hospital which are desirous for the same.

The Principal Assessor and other assessors (as applicable) are assigned the job of pre-assessment. Principal assessor shall submit the pre-assessment report online.

The Unani Hospital shall take corrective actions on the non-conformities raised by the Principal Assessor/ team.

The Unani Hospital shall in any case be required to pay the requisite Annual fee before the final assessment.

NABH Accreditation Procedure

Final Assessment:

After the Unani Hospital has taken necessary corrective action to the non-conformities raised during the pre-assessment (which is optional), NABH shall propose to constitute an assessment team for the final assessment. However as mentioned earlier HCO's can directly go for final assessment without opting for pre assessment. The total number of assessors appointed shall depend on the size of the hospital and scope of services provided. The date of final assessment shall be agreed upon by the Unani Hospital management and assessors. Assessment shall be conducted on all the facilities covered under accreditation. The assessment team reviews the Unani hospital's documented management system and verifies its compliance to the NABH standards. The documented quality system, policies and procedures, other manuals etc. shall be assessed for their implementation and effectiveness.

Based on the assessment by the assessors, the assessment report is prepared and uploaded by the Principal assessor in the online portal.

The details non-conformity(ies) observed during the assessment is visible to the Unani hospital team in the online portal once the Principal Assessor submits the report.

NABH Accreditation Procedure

Scrutiny of assessment report:

The Unani hospital shall take necessary corrective action on the non-conformity (ies) and upload the requisite document as evidence for corrective action for each non-conformities. On successful submission of the corrective action by the Unani hospital, the same shall be reviewed by the Principal Assessor.

Unani hospital are allowed to avail only two cycles of review of corrective action taken

After satisfactory corrective action is taken by the Unani hospital, the accreditation committee examines the assessment report, additional information received from the Unani hospital and consequent verifications. The accreditation committee shall make appropriate recommendations regarding accreditation of the Unani hospital to NABH.

In case the accreditation committee finds deficiencies in the assessment report to arrive at the decision, the Secretariat obtains clarification from the Principal assessor/assessors/ Unani hospital concerned.

Issue of Accreditation Certificate:

NABH shall issue an accreditation certificate to the Unani hospital with a validity of three years. The certificate has a unique number and date of validity. The certificate is accompanied by the scope of accreditation.

The applicant Unani hospital must make all payment due if any to NABH, before the issue of certificate.

NABH Accreditation Procedure

Surveillance and Re assessment:

Accreditation to the Unani hospital shall be valid for a period of three years. NABH shall conduct surveillance before completion of 15-18 months since the date of accreditation of the accredited Unani hospital.

The Unani hospital shall pay the annual fees every year. The first annual fees is paid before the final assessment and is valid till the end of first year from the date of accreditation. Since then, the annual fees shall be due on the same date/ month every year.

The Unani hospital need to apply online for renewal of accreditation at least six months before the expiry of validity of accreditation for which reassessment shall be conducted.

NABH may call for un-announced visit, based on any concern or any serious incident reported upon by an individual or an organization or media.

Focus Assessment:

Focus assessments are done in Unani hospital when there are any significant changes with regard to the Unani Hospital's activities and operations, such as change in scope of accreditation, change of address/ location, change in environment, key technical personnel etc. Unani Hospitals are requested to view policy and procedure related to Focus visit to an accredited Unani Hospital by visiting the following link.

https://www.nabh.co/Policy_for_Focus_Assessment.aspx

NABH National Accreditation Board for Hospitals & Healthcare Providers
Accreditation & Certification Body (NABH) (2010-2014)



**POLICY & PROCEDURE FOR
FOCUS ASSESSMENT OF AN
ACCREDITED/CERTIFIED
HEALTHCARE ORGANISATION
(HCO)**

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NABH Accreditation Procedure

Surprise Assessment:

NABH may conduct surprise assessments at accredited Unani Hospital periodically to evaluate the compliance to the accreditation standards, as Unani Hospital are expected to adhere to the NABH accreditation standards at any given point of time once Unani Hospital is accredited. Surprise visit can also happen in response to adverse media report. Unani Hospitals are requested to view policy and procedure related to Surprise visit to an accredited Unani Hospital by visiting the following link.

<https://www.nabh.co/SURPRISE-VISIT.aspx>



NABH Accreditation Procedure

Guidelines for using the accreditation mark:

Accredited Unani Hospitals should ensure the guidelines related to display NABH Logo / accreditation mark are adhered. Any misuse of the logo / accreditation mark can lead to adverse action being taken against the Unani Hospital by NABH besides legal action. Unani Hospital are requested to view guidelines related to use NABH logo / accreditation mark by visiting the following link.

https://www.nabh.co/Images/pdf/Policy_and_Guidelines_for_use_of_NABH_Accreditation_Certification_Mark.pdf



Standard Agreement:

Unani Hospitals accredited by NABH has to enter into an agreement with NABH from the date of accreditation. The certificate of accreditation will be dispatched to the hospital only after this agreement has been received by NABH secretariat. Unani Hospitals are requested to view standard agreement by visiting the following link.

https://www.nabh.co/Images/PDF/Agreement_hos.pdf



NABH Accreditation Procedure

Disclaimer & Indemnity:

NABH reserves the right to take action or even cancel the accreditation awarded to a hospital in following conditions:

1. If the required fee is not paid on time
2. Any adverse actions taken by any regulatory bodies against the Unani Hospital,
3. Serious patient safety issues, etc.
4. Failure to comply with the standards at any given point of time etc.

Unani Hospitals are also advised to check the NABH portal time to time for any important announcements, change in standards etc. which needs to be adhered by accredited hospitals

Training

The journey of Accreditation/Certification i.e. from applying to grant of Accreditation/Certification involves the awareness & training of all the members of the healthcare organizations about the various Chapters, Standards & Objective Elements of NABH Standards booklet. The staff needs to imbibe the culture of NABH by getting trained in the standards, understanding the applicable standards in a right way so that the same can be implemented, measured and monitored in the right manner by the healthcare organization.

NABH Secretariat organizes training sessions on understanding of NABH standards and implementing them in the organizations in form of Programme on Implementation (POI), for healthcare organizations desirous of taking their organizations for accreditation. These sessions are taken by faculty from NABH who are senior assessors. The details of these trainings, dates, venue and fee information are available in the NABH website

NABH has taken a new initiative to conduct free master classes on various topics under the rubric "NABH Quality Connect-Learning with NABH". The master classes are conducted every month. The topics include: Key Performance Indicators (KPI), Hospital Infection Control, Management of Medication, Document Control, Clinical Audits, Continual Quality improvement, Hospital infection prevention etc

Apart from this guidance material is available at "Resource" page of NABH web portal

Kindly visit the below link to attend training programmes being conducted by NABH.

<https://www.nabh.co/EducationTraining.aspx>

Fee Structure

General information brochure : Free of cost

NABH Accreditation Standards and NABH Structural
Standards for Unani hospital accreditation : Free of cost

Application fee and NABH Accreditation charges:

Size of Hospitals	Assessment Criteria			Accreditation Fee (Rs.)	
	Pre-assessment	Assessment	Surveillance	Application Fee	Annual Accreditation Fee
10-49	Two man-days (2X1)	Four man days(2x2)	Two man days(2x1)	20,000	60,000
50-99	Two man-days (2X1)	Six man days(3x2)	Two man days(2x1)	30,000	1,00,000
100-200	Four man-days (2X2)	Nine man days(3x3)	Four man days(2x2)	40,000	1,30,000
>200	Four man-days (2X2)	Twelve man days(4x3)	Four man days(2x2)	60,000	1,60,000

***The fee structure is nominal and is based on the number of man days required for assessment. In case the scope of services is more than the above, then proportionately higher man days and fee structure may be charged.**

GST: w.e.f. 01.06.2016 a GST of 18% or as applicable will be charged on all the above fees. You are requested to please include the service tax in the fees accordingly while sending to NABH.

CONTACT DETAILS

NATIONAL ACCREDITATION BOARD FOR HOSPITALS AND HEALTH CARE PROVIDERS

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