"As we are inching towards the Indian Government’s target of universal healthcare, the subsequent zeal is to sustain and ensure quality improvement”. National Accreditation Board for Hospitals and Healthcare Providers (NABH) accreditations and accreditation standards have been playing a significant role in improving the quality of healthcare by assessing Hospital performance and setting benchmarks for Quality since 2005.

It is with great pleasure that we release the 5th Edition of Hospital Accreditation Standards of National Accreditation Board for Hospitals and Healthcare Providers (NABH). The previous editions of Hospital Accreditation Standards of NABH have been well received and we hope the 5th Edition continues this trend. It is important to ensure that even the smallest healthcare providers meet the minimum basic standards and NABH is striving to make that happen by simplifying the accreditation process. Since the latest NABH standards are easy to implement, it will incentivise more healthcare providers to get accredited by NABH, thus raising the overall quality of healthcare in India. I would like to congratulate the team at NABH for developing the 5th edition of Hospital Accreditation Standards which are holistic and futuristic in their approach after incorporating suggestions from stakeholders in the value chain. We believe NABH's consistent efforts will improve the quality of healthcare services and move us closer towards the ultimate goal of "Quality Healthcare for All in India."

Mr. Adil Zainulbhai
Chairman, QCI

"Universal Health Coverage (UHC) is an explicit target under Sustainable Development Goal (SDG) 3 reflecting SDG’s strong focus on equity and the importance of addressing the needs of poor and disadvantaged groups. Hence, the Indian government in achieving its Vision of New India is giving due importance to Healthcare and its universal coverage in line with the SDGs. The quantitative target needs to be accompanied by continuous improvement in the quality of hospitals to realize the vision of a healthy India. Over the years, NABH standards have been instrumental in ensuring the delivery of good quality healthcare by accrediting hospitals. Thus, it is with immense pride that we release the 5th Edition of Hospital Accreditation Standards of National Accreditation Board for Hospitals and Healthcare Providers (NABH).

NABH standards have evolved over time, incorporating suggestions from various stakeholders, ascertaining the primary goal of delivery of good quality health care services. I thank all the stakeholders for their valuable suggestions in creation of this 5th Edition. It also features the novel addition of core objective elements related to Patient Safety Goals that require mandatory compliance irrespective of the compliance with other elements. The new graded scoring methodology notes and recognises progressive efforts made in the direction of delivery of quality healthcare by healthcare providers.

I would like to congratulate the team at NABH for developing the 5th edition of Hospital Accreditation Standards which are comprehensive, pragmatic and easy to adopt. Easier implementation of latest NABH standards will incentivise more healthcare providers to get accredited by NABH, thus improving the quality of healthcare nationwide. I believe, the final assessments as per the 5th edition of Hospital Accreditation Standards of NABH will meet the objective of raising standards of hospital accreditation at par with other global norms and positively contribute towards building a healthy nation."

Dr. R. P. Singh
Secretary General, QCI
Dear friends and colleagues,

We are living in a time of unprecedented opportunities and challenges in healthcare. Keeping pace with the technological advancements, healthcare is touching newer frontiers of disease management in some premium institutes. Yet, we struggle with the access, affordability and quality in a vast majority of other healthcare provider institutions.

Quality Council of India plays a pivotal role in promoting a system of quality in our country. National Accreditation Board for Hospitals & Healthcare Providers (NABH) is a constituent board of Quality Council of India, set up to establish and operate accreditation program for healthcare organizations.

Since inception, NABH has made great strides in the domain of quality, safety and accreditation in healthcare. The board caters to the much desired needs of the consumers and also sets benchmarks for progress of healthcare industry. It operates 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. NABH standards for hospital accreditation and entire organization is internationally recognized.

Lot is happening at NABH and we wish to share the NABH developments and experiences with the public, healthcare providers and industry. For this NABH is coming out with its first Newsletter “Quality Connect”. Besides other things, this newsletter will help to disseminate the best quality and safety practices in patient care.

I hope that the best quality and safety practices shared with you through this newsletter will be helpful in implementing these practices in your organizations & work.

Dr. BK Rao
Chairman, NABH

NABH founded in 2005 is currently a teenager
A restless teen, looking for a shakedown
Hankering after a change.
Change which is the norm.
Rushing to embrace Technology
Objectivity, Traceability, Transparency.
Minimal Human Interface; Digitization
Artificial Intelligence; Patient safety;
Continual Quality Improvement
All to aspire to. All to strive for;
But
In all our hurry, for all our ambitions
Amongst all our Policies, Goals, Targets
We must not forget...
We need to touch more lives.
We need to make a difference
Most of all to the weakest of the weak;
Most of all to the poorest of the poor;
Most of all ........
.............to the last man in the line.

Dr. Atul Mohan Kochhar
CEO, NABH
Dr. P.K. Dave  
Chairman, Advisory Board 
Medeor Hospital 
Ex. Director - AIIMS

"The art of communication is the language of leadership”

In the modern world, organizations that do not communicate perish; leaders who do not engage and communicate are consigned to the dustbins.

Communicating NABH’s views, informations, deeds, achievements and indeed, failures is essential for the wellbeing of the organization and its continuing arc of influence and success.

Dr. Narottam Puri  
Ex Chairman, NABH 
Advisor – Medical Operations 
Chairman, Fortis Medical Council 
Fortis Healthcare Limited 
Escorts Heart Institute & Research Centre

Dr. Girdhar Gyani  
Ex SG, QCI & CEO, NABH 
Quality Council of India

NABH came in to being based on requirement from Ministry of Tourism, which wanted to have benchmark by which overseas patients could have assurance that they were choosing right kind of hospital with respect to quality. Once launched in year 2005-06, NABH has become symbol of quality and patient safety in our country, not limited to medical tourism but for all our population. It is indeed heartening to see that it has been accepted by all stakeholders including government, providers, payers and above all community at large.

Accreditation is framework for Quality Governance of hospitals. Quality in healthcare is vastly different as compared to quality in other sectors. It has two components; one is service quality which is more like quality in other sectors. The other component is clinical quality, which is about patient safety, medical errors and wellbeing of human beings. This component is aimed at saving precious life and that is where accreditation...
comes in to play. Patient Safety starts with clinicians and closely supported by nursing staff. The other categories like diagnostics, facility, equipment, housekeeping and above all management play important supportive role. Clinicians however have to take bulk of responsibility in taking leadership role in driving clinical quality. It is here that we need to emphasize on clinicians undertaking clinical audits on regular basis and make sure that CAPA is in place to minimize medical errors and monitor key clinical indicators on continuous basis.

NABH secretariat has huge responsibility on its shoulders. It has to maintain the trust factor among stakeholders. While it is accrediting healthcare providers for QUALITY, it is important that it demonstrate highest level of quality and customer focus within. The e-newsletter is step in right direction as it would connect secretariat with its stakeholders including assessors, who are otherwise extended arm of NABH.

I wish the newsletter all the success.

Dr. K K Kalra
Ex CEO, NABH
Quality Council of India

It gives me immense pleasure to know that NABH is releasing newsletter which will provides comprehensive information related to NABH activities and updates about Healthcare quality.

I am certain this newsletter will greatly appeal and benefit all stakeholders specially healthcare providers. This publication will act an amazing and powerful tool to engage various stakeholders working in healthcare sector in India. I am sure, quality and contents of the newsletter shall continue to meet the expectations of stakeholders under guidance of present leadership. I take this opportunity to congratulate team involved, for their sincere efforts to bring out this long awaited initiative.

Wish all the success in achieving the very purpose of bringing out this newsletter.

Dr Harish Nadkarni
Ex CEO, NABH
Quality Council of India

It is indeed heartening to know about the eNewsletter that NABH is bringing out. NABH as the apex body in our country in quality in healthcare is the most apt organization to start such initiative. I sincerely congratulation to NABH for this. I am sure this newsletter will form the most important and internationally acclaimed journal in this field in the times to come. i urge all quality professionals to contribute to this with excellent and well researched articles.
NITI AAYOG:
DISTRICT HOSPITAL
RANKING PROJECT

NITI Aayog was mandated by the Government of India to create a comprehensive framework for tracking the performance of district hospitals in the country.

NABH, was on-board with NITI Aayog for the primary objective of conducting an independent review and validation of the 16 Key Performance Indicators for the ranking of 731 District Hospitals. For the purpose of implementation of this project, NABH-QCI designed a set of 66 questions which were made based on the HMIS data items mapped to the 16 KPIs. Subsequently, more than 400 assessors were trained specifically for this project across 17 different cities in the country. Assessors conducted onsite review of primary records of District Hospitals and validated the observed data with the corresponding HMIS data. Robust quality checks were executed at various levels including live monitoring of the assessment which lead to an extremely insignificant error rate in the data collected. After the completion of the validation exercise, data collected was cleaned to identify and analyse the variation between assessor observed data and the HMIS data. This exercise is first of its kind which comprehensively highlights the status of Health Management Information System of MoHFW at the district level.

LAUNCH OF 2ND EDITION OF MEDICAL IMAGING STANDARDS

Standard – 2nd Edition were internally released on 14th December 2019 in NABH Secretariat, Board Room during MIS - Refresher course by CEO- NABH.

For awareness of the program amongst Radiology fraternity, MIS Accreditation Standards – 2nd Edition were launched during 73rd Annual Conference, Indian Radiological & Imaging Association (IRIA), Gandhinagar on 25th January 2020 by CEO- NABH.
NABH INTERNATIONAL

NABH with Health minister of Nepal Mr. Bhanubhakta Dhakal during Medical Tourism Summit, Kathmandu in December 2019.

NABH participation at annual ISQUA conference at Cape Town, South Africa in Oct 2019.

Awareness program in Sultanate of Oman, Muscat in Dec 2018.

Annual Conference of ISQua 2018 at Kuala Lumpur: Conference was attended by more than 1000 participants across the globe.

TRAININGS CONDUCTED BY NABH

NABH conducts various training programs like Assessor Courses, POIs, Education Workshops, Awareness Programs, Webinars, Assessors’ Conclaves, and Refresher Courses etc for the capacity building of the people interested in the NABH standards. Staff is also actively involved in the various trainings.

RECREATIONAL ACTIVITIES AT NABH


Rangoli Competition: NABH won first prize at Diwali Competition.
AYUSH

Dr. Vandana Siroha
Deputy Director, NABH

AYUSH in INDIA

AYUSH is a common word derived from Sanskrit which means ‘life’. AYUSH system of medicine is considered as the Alternative system of Medicine or Traditional System of Medicine that includes Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homeopathy. These systems are based on definite medical philosophies and represent a way of healthy living with established concepts on prevention of diseases and promotion of health. Each discipline of AYUSH has its own unique identity and principles for prevention, cure and promotion/maintenance of health.

Ayurveda is a system of medicine with historical roots in Indian Subcontinent. Ayurveda defines three body humours as Vata, Pitta and Kapha, the equilibrium of which is health and in-equilibrium is disease. It seeks to treat and integrate body, mind, and spirit using a comprehensive holistic approach especially by emphasizing diet, herbal remedies, exercise, meditation, breathing, and physical therapy.

Yoga is derived from the Sanskrit term "yuj" which means to connect, join or balance. It is not just a mode of exercise but a way of living. At physical level, it helps harmonise the functions of different organs, muscles and nerves and at mental level balance and peace.

Naturopathy is an art and science of a drugless system of healing based on concepts of morbid matter theory and concept of vital force. It imparts treatment with natural elements and self-healing capacity of the body as well as the principles of healthy living.

Unani is an Arabian medicine or Islamic medicine, practiced popularly in South Asia. Treatment in this system entails the establishment of a regimen to normalize and balance external factors involved in the disease. If it proves inadequate, treatment with natural medicines may be recommended.

Siddha is a traditional system of healing that originated in South India and is considered to be one of India’s oldest systems of medicine. It’s based on a combination of ancient medicinal practices and spiritual disciplines as well as alchemy and mysticism. Treatment includes breathing/pranayama along with medicines prepared from a conjunctive use of plants, animal and mineral products.

Homeopathy is derived from the Greek word "Homoios" means similar and "pathos" means suffering. It is a system of medicine that treats diseases by applying those medicines which is capable of producing similar symptoms as that of disease, principle known as “like cures like”. The treatment is done through medicines made from plant, animal, mineral, sarcoodes, nosodes and imponderabilia sources and given in very low quantitative doses.

Need for Accreditation in AYUSH

Accreditation as we say is basically a framework, which help healthcare organization to establish objective systems aimed at patient safety and quality of care. This is a public recognition of the achievements of organization, demonstrated through an independent external peer review assessment in relation to the standards. It raises community confidence in the services provided by the health care organization. It also provides opportunity to healthcare unit to benchmark with the best.

Finally, accreditation provides an objective system of empanelment by insurance and other third parties. The need for quality control and quality monitoring in healthcare is enhanced with Pradhan Mantri Jan Arogya Yojana (PMJAY) or National Health Protection Scheme Ayushman Bharat.

NABH Accreditation standards are endorsed by Ministry of AYUSH and are freely downloadable at the following web links:

For Ayurveda Hospitals
http://nabh.co/AyurvedaStandard.aspx

For Yoga and Naturopathy centers
http://nabh.co/YogaStandards.aspx

For Unani Hospitals
http://nabh.co/UnaniStandards.aspx

For Siddha Hospitals
http://nabh.co/SiddhaStandards.aspx

For Homeopathy Hospitals
http://nabh.co/HomeopathyStandards.aspx

For Panchakarma Clinic
http://nabh.co/PanchkarmaStandards.aspx

For Entry Level Standards for AYUSH Hospitals
https://www.nabh.co/Images/PDF/AYUSH_Hospital_Entry_Level_for_print.pdf

For Entry Level Standards for AYUSH Centers
https://www.nabh.co/images/PDF/AYUSH_Centre_Entry_Level_for_print.pdf
11th February- World Unani Day: This day is celebrated on the birthday of great Unani scholar and social reformer “Hakim Ajmal Khan”. Hakim Ajmal Khan took great interest in the expansion and development of the native system of Unani medicine. In recognition of the contribution of Hakim Ajmal Khan, the Ministry of AYUSH adopted 11th February as Unani Day in 2017.

8th March-International Women’s Day: It is a focal point in the movement for woman’s rights. After the Socialist Party of America organized a Women’s Day in New York City on February 28, 1909, German revolutionary Clara Zetkin proposed at the 1910 International Socialist Woman’s Conference that 8th March be honoured as a day annually in memory of working women.

24th March- World TB Day: It commemorates the day in 1882 when Dr Robert Koch astounded the scientific community by announcing that he had discovered the cause of tuberculosis, the TB bacillus. World TB Day is a day to educate the public about the impact of TB around the world and to bring awareness that tuberculosis today remains an epidemic in much of the world, causing the deaths of nearly one-and-a-half million.

7th April- World Health Day: From its inception at the First Health Assembly in 1948 and since taking effect in 1950, the celebration has aimed to create awareness of a specific health theme to highlight a priority area of concern for the World Health Organization. The celebration is marked by activities which extend beyond the day itself and serves as an opportunity to focus worldwide attention on these important aspects of global health.

12th May-International Nurses Day: It is traditionally held on the anniversary of Florence Nightingale’s birth. It demonstrates how nurses are central to addressing a wide range of health challenges. It also provides information and resources that will help to raise the profile of the profession throughout the year and attract a new generation into the nursing family.

28th May-International Women’s Health Day: In year 1987, May 28th was declared as International day of action for Women’s health day. The main objective of this day is to raise awareness on the issues related to women’s health and wellbeing such as sexual and reproductive health and rights.

9th June-World Accreditation Day: A global initiative, jointly established by the International Accreditation Forum (IAF) and the International Laboratory Accreditation Cooperation (ILAC), to raise awareness of the importance of accreditation.

21st June-International Day of Yoga: This day is celebrated on 21st June in order to raise awareness worldwide of the many benefits of practising yoga. The idea of International Day of Yoga was first proposed by the current Prime Minister of India, Narendra Modi, during his speech at the United Nations General Assembly (UNGA), on 27 September 2014.

1st July-National Doctor’s Day: This day is observed to thank physicians and doctors for their dedicated services to patients. After all, they have looked after us in our worst times. National Doctor’s Day is an opportunity to the people to express their gratitude towards Doctors. This day is dedicated to all medical professionals who work and serve patients round the clock to save lives.

17th September- World Patient Safety Day: A global health priority to promote open communication for learning from errors and to emphasize the importance of patient safety. World Patient Safety Day calls for global solidarity and concerted action by all countries and international partners. Furthermore, the Day brings together patients, families, caregivers, communities, health workers, health care leaders and policy-makers to show their commitment to patient safety.

12th December-Universal Health Coverage Day: It ensures all people, everywhere, can get the quality health services they need without facing financial hardship. It is a fundamentally political goal, rooted in the right to health. It is also one of the smartest investments any country can make. Every year on 12th December, advocates worldwide mobilize on International Universal Health Coverage Day to call for strong, equitable health systems that leave no one behind.

15th October-Global Handwashing Day: Is an annual global advocacy day dedicated to advocating for handwashing with soap as an easy, effective, and affordable way to prevent diseases and save lives. Global Handwashing Day was founded by the Global Handwashing Partnership, and is an opportunity to design, test, and replicate creative ways to encourage people to wash their hands with soap at critical times.
We have been providing health care for the past 30 years. But for a long time, there was no structured format that our hospitals followed. Every clinician prescribed according to his or her own understanding. Nursing staff took cue from their own education and training in different institutions. In short, everyone followed their own hunch.

So we thought of getting accreditation for our hospitals, so that we could live up to a higher standard of health care delivery. The biggest challenge was that there was no awareness of quality and standardization in health care. So I started reading NABH guide books. The knowledge I gathered was shared with various Departments and professionals who were encouraged to internalise the guidelines and rigorously implement them. The guidelines became as sacred as the Holy Books like the Gita, the Koran or the Bible for us.

Our dedication paid off. We are the first hospital in our area to receive NABH accreditation and 53rd accredited hospital of the NABH. I found the guide book of NABH very clear and helpful. I made sure that the entire staff read the guide book and understood their respective responsibilities and act considering it to be the guiding light. That was the turning point of my institution and my own life.

Today, Yashoda Hospital is known for its quality health care and patient safety even in international forums. By strictly following NABH guidelines and instructions, we can save our patients from avoidable harm. Our patients are our brand ambassadors. Through strict infection control, we have drastically reduced the period of hospital stay for the patients. Whenever we detect any loophole we immediately plug it. If there is any slip-up it is corrected without delay. Thus we achieved impressive higher standards of health care in a short span of nine years.

Once both our hospitals received NABH accreditation I thought it would be a good idea to encourage nearby smaller hospitals to maintain quality and try to come up to NABH standards. I organized a talk in which mostly owners and senior management of nearby smaller hospitals participated. I exhorted them to see the benefits of maintaining standards for patient safety. Infection control, patient fall or medical records—all these would be systematically documented and kept.

I distributed among the participants literature and posters of how to dispose of biomedical waste and hand washing procedures. Simply by adopting these positive attitude, we could save so many patients of unnecessary problems. Enthused by the new information and practices, several of them applied for and received NABH accreditation.

I realised that the tremendous growth of our hospitals and my own personal growth is mostly attributable to the NABH. Now when I encourage other institutions to get NABH accreditation, I point out that one should not aim for the stamp of approval alone. NABH guidelines should percolate down the whole system in the hospital and every department should take responsibility for them. It must become a reigning culture in the hospital. Now in Yashoda each department takes pride in following the NABH system.

Our motto is to create a safe atmosphere for patients and staff alike. When St. Xavier’s College and Myrill company invited to share my success mantra, I simply told them that behind our success is the strict adherence to NABH because it shows us how to maintain uniformity in the entire institution. So when personnel are shifted around, they carry the culture and maintain the uniformity of the processes.

As Director of our hospital I can safely say that it is also financially wise to follow the guidelines, because they plug wastages, reduce unnecessary hospital stay and increase patient satisfaction through right decision at the right time. For example, we routinely save lives because by promptly declaring code blue and other codes. By holding regular committee meetings, we remain well-informed about all aspects of the hospital functioning, including fire safety rules and procedures.

Ultimately, the senior staff and management should be very well aware of their respective responsibilities and duties, leading of saving precious lives. In all this, I remain grateful to NABH both for the growth of our hospital and my own growth. May NABH forge ahead to brighter future.
NABH & NURSING EMPOWERMENT

NABH brought Quality and Patients safety in Healthcare. Today everyone including the general public is aware that it is their right to have safety and it is the responsibility of each individual HCO to ensure patients' safety.

NABH uplifted Nursing community also. It gives equal importance to Nurses along with clinicians. The founders of NABH especially Dr. Giridhar Gyani left no stone unturned to elevate nurses along with the clinicians. The development of Nursing excellence standards and implementation of the same by many hospitals ultimately empowered nurses.

1. Empowering nurses ensure:
   a. Job Satisfaction
   b. Sense of Responsibility
   c. Dedication
   d. Loyalty
   e. Improved patient care and patient safety
   f. Reduction in turnover thus stability of service

2. Nursing Empowerment is ensured by:
   a. Developing a culture of ownership and commitment.
   b. Involving in decision making process in patient care.
   c. Performing Nursing assessment of patients.
   d. Formulating care plan based on the assessment findings and desired goals.
   e. Providing care as per the care plan.
   f. Evaluating the outcomes and modify care as required.
   g. Maintaining confidentiality of patient records and reports.
   h. Maintaining privacy of patients.
   i. Taking informed consent before performing any procedures.
   j. Educating patient and family on various aspects of care.
   k. Implementing pain management protocol.
   l. Initiating Basic life support in case of emergencies.
   m. Taking decisions for continuous timely care of patients.
   n. Stopping infusions, transfusions or medications in case of a reaction.
   o. Initiating care for prevention of pressure sores, patient falls etc.
   p. Ensuring adequate resources are available for safe and competent practice.
   q. Collaborating and Coordinating with other departments involved in patient care as well as support services.
   r. Being a patient safety advocate.
   s. Reporting any deviation from protocols.
   t. Reporting any incidents coming to their notice without fear of victimization.
   u. Initiating various emergency Codes when necessary, including Code BLUE, RED, PINK or any other as per the HCO policy.
   v. Escalating problems or difficulties if any.
   w. Providing care to patients as per privileges.

3. Nurses hold Membership in different committees like HIC committee, Safety committee, Quality Committee, Internal Complaints Committee, Grievance Handling Committee, Pharmacy Committee, CPR Committee etc. where they participate in decision making and bring changes for the overall quality improvement of the hospital services.

4. Nurses actively involved in developing processes and protocols for their departments and help in other department too with their expertise skill and knowledge.

5. Being trained and developed as internal auditors.

6. Encouraging career growth by various on the job trainings, class room teachings, interactive sessions etc.

7. Delegating authority in respect to designations.

8. Nurses made aware of their rights and responsibilities.

9. Nurses are given power to use escalation matrix during their course of action while performing their responsibilities as a health team member of the organization.

10. Organization can have a policy to protect nurses so that they feel more empowered.

We can ensure better patients care and patients safety where the nurses are empowered.
I would like to introduce myself as colleague and fellow traveller on path of healthcare quality improvement. I belong to 1977 batch entrance SMS Medical College at Jaipur, Rajasthan. When I was student, I was mesmerised by, that time emerging and developing cardiac surgery speciality so did my post-graduation from CTVS and went to AIIMS with dream of becoming Cardiac Surgeon. But because of certain circumstanc- es had to abandon that dream. That was the time when my dreams were shattering but there was light at end of tunnel. And concept of managed care in healthcare had just started. I got myself enrolled in first batch i.e. 1992-93 in M.Phil. at Healthcare Management at BITS Pilani. Since then worked as Medical Superintendent / Medical Director at few places including Sitaram Bhartia Hosp, Delhi, Mahaveer Cancer Hospital, Jaipur, Moolchand Hospital, Delhi. While working at Moolchand hospital as General Manager, Clinical Operations, came to know about “Accreditation standards in Healthcare”. It was 2005 and words like accreditation and quality were alien in healthcare. Me and one of my colleagues were lucky enough to be asked to go for one of initial NABH programs. And it was really eye opener. We had found Bhagavad-Gita or a work manual for hospital operations!! I was entrusted with the responsibility to implement the first edition hospital standards. It was major challenge in a fifty-year-old trust hospital where most of clinicians were among the most renowned in city. This was the experience filled with lots of sweet and sour memories. We got the award and we were among the first group of hospitals who have achieved accreditation award. Next year I implemented JCI also in same hospital and believe me that it was real cake walk after NABH! I got the opportunity to join as Director, NABH Quality Council of India in January 2011. I am proud to be associated with the organisation which is synonymous of quality in healthcare i.e. prevention of un- tended harm! It is heartening to see that now healthcare fraternity is openly discussing about post-operative infection rate, hand hygiene compliance or medication error incidences. All these were unimaginable things for our senior generation in medical schools. This is biggest achievement for NABH. When I had joined the accreditation committee used to meet once in two to three months, number of cases present used to be 5 to 6! At present there are more than one accreditation committees and in main accreditation committee the number of cases discussed are 550 to 600 on an average. That is the scale of operations growth in last 9 years I have witnessed. My sincere wishes for further manifold increase in quantity and quality.

Journey of Assessor at Present

Dr Margeyi M Mehta
Asst. Professor, Medical College, Baroda

The age old adage of Quality being the Continuous journey is a fact which can never be challenged. Add to it the passion and the purpose and I find myself living life to the fullest as a NABH Assessor.

It has been a roller coaster ride in pursuit of delivering excellence as we join hands to play a vital role in promoting, hand holding and establishing quality standards across the various hospitals. The objectives of NABH had to be implemented in true sense and spirit, few of the days it was testing times as hospitals were eagerly pushing for the implementation and wanted to achieve the goal and we had to share facts as auditors. I recollect from my early days of audits where the observations ran aplenty and had to be explained in details, now there has been a sweet turn around wherein the partner hospitals understand the essence of the objectives and have a much better understanding of the standards.

There has been a huge amount of learning and I see myself grow not only as a trainee Assessor to a Principal Assessor but also as a human being. The respect one earns as an Assessor has to be justified.
and so is the trust of the NABH secretariat to help hospitals achieve the standards as defined in their pursuit of excellence.

Sometimes the schedule are pretty grueling with evening submissions and the hectic travel involved as I live in a two tier city called Vadodara but in the end it only taught me time management, prioritizing things and made me a much better planner.

The best moments as Assessor have been witnessed in the CQI presentation wherein huge amount of trust and confidence is seen in the best sense of team spirit and camaraderie. Whether it is the medication errors or the mortality review, the hospitals come forward and share the data with phenomenal volume of trust and faith in the system of NABH.

My immense respect and regards, especially to the HCOs in two tier and three tier cities for raising up to the challenge to sustain the quality review and validations.

One thing is sure NABH has evolved over the years including adopting to the latest technology and so has quality movement across the country as we now find that the objectives of quality run in parallel with the basic working of the hospital.

As PETER DRUCKER rightly said:
"WHAT GETS MEASURED, GETS MANAGED"

Thank you NABH for making health care safer and adding value to life.

was a step towards making the certification process user-friendly, and accessible while ensuring that the evidences are captured in a real-time basis. The system now is so strong that the hospital can easily trace themselves without the help of any third-party, get assistance on a click of a button by calling at our dedicated call center and refer to our knowledge bank for directions in case of any query. The ecosystem of the assessments being done has been reformed.

Taking the learnings from this approach, we at NABH, now wants to do assessments for all other programmes in a similar way so that there is better record keeping with minimum human intervention and maximum productivity. The assessments will be digital in addition with having objective questionnaires, facility to connect with call center, and reduction in the certification cycle. Our comprehensive online platform will ensure that a smooth and secure registration is done by the hospitals to fill up the form. Later, the on ground assessment will be carried out on a specially developed technology application where the data is captured as well as validated on a real-time by creating a non-intrusive process to capture data from the hospitals digitally. The data bank being developed from these assessments will also help to trace the hospitals with time in case they move from certification to full accreditation. The future of assessments at NABH thus is all about adapting to better approaches and upgrading in order to cater to a wider set of hospitals that wants to be a part of change in creating a quality movement in the Indian healthcare industry.
QUALITY CONNECT

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NABH FROM THE ARCHIVES

1st National Healthcare Quality Conclave March 2018

1st Healthcare Quality Conclave Dec 2011

NABH 1st Strategic Meet 18-21 May 15

NABH Assessors Concave 2014

1st ISQua Assessment of NABH in 2012

Pledge for Swachh Bharat by NABH Team 2nd Oct 2014

Safe I launch Feb 2013

2nd ISQua Survey May 2016

Team NABH April 2015

Team NABH Dec 2016

Team NABH March 2018

2nd Healthcare Quality Conclave Nov 2012

Team NABH May 2017

AYUSH (MDIYN) Accreditation Oct 2018

QUALITY | SAFETY | WELLNESS

NATIONAL ACCREDITATION BOARD FOR HOSPITALS & HEALTHCARE PROVIDERS (NABH)
ABOUT NABH STANDARDS:

- **STANDARDS FOR ACCREDITATION:**

- **STANDARDS FOR CERTIFICATION**

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