

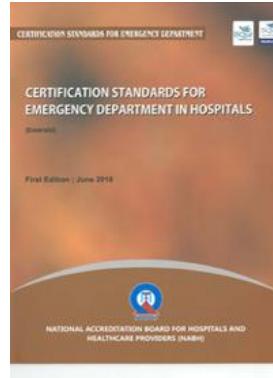
**NATIONAL ACCREDITATION BOARD FOR HOSPITALS  
& HEALTHCARE PROVIDERS (NABH)**



**Emergency Department**

**Certification Programme**

**General Information Brochure**



**August 2020**

## **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 provides boost to medical tourism in the 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 organizations 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 Certification**

The scenario of Healthcare across the world is changing with the advent of newer healthcare delivery models. Development of the Faculty of Emergency Medicine is one such development in India. Today hospitals across India have recognized that they need to focus on the development of state-of-the-art Emergency Medicine Departments (ED) because the quality of care provided in the ED reflects the ethos of care for the hospital and this goes a long way in the reputation of the hospital. Providing quality Emergency Medical care is crucial. Getting quality and safe acute care is the right of every patient who comes in through the door of the ED.

The Emergency certification program by NABH was started in the year 2016. This program was started basically to help those hospitals which cannot go for full accreditation due to lack of infrastructure or monetary issues. The main objective of the program was to standardise the protocols in the Emergency Department as there were no standards or protocols to guide and govern the functionality of the Emergency department. The Emergency department becomes the place of overcrowding, not only for emotions, and patient disease conditions, but also for a cluster of opportunities to make medical errors. Certification of Emergency department in the hospital is an opportunity to ensure that patient gets acute quality care without compromising on patient safety.

Today the Indian healthcare recognizes the need for new specialty of Emergency Medicine, but there are very few trained experts in Emergency Medicine and there are no standards or processes to guide and govern the functionality of the Emergency Department.

The above is an opportunity to defeat the challenges and create standards and processes to make sure the patients in EDs get the quality acute care he or she deserves.

## Benefits of Certification

### Benefits for Patients

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

### Benefits for Hospitals

- Certification to a hospital stimulates continuous improvement.
- It enables the organization in demonstrating commitment to quality care and patient safety thereby ensures best clinical outcomes.
- It raises community confidence in the services provided by the hospital as services provided by credentialed medical staffs.
- It also provides opportunity to healthcare unit to benchmark with the best.
- Certification status also provides marketing advantage in a competitive health care.

### Benefits for Staff

- The staff in an Emergency Certified 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 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 Staffs.

## NABH Emergency Department in Hospitals Standards

The Emergency Department certification programme assesses the quality and operational systems in place within the facility. The Certification includes compliance with the NABH standards, applicable laws and regulations.

NABH Certification Standards for Emergency Department in Hospitals prepared by the technical committee contains complete set of standards for evaluation of Emergency department for grant of certification. The standards provide framework for quality of care for patients and quality improvement for Emergency department within hospital. The standards will help to build a quality culture at all level and across all the functions of hospital. NABH Certification Standards for Emergency Department in Hospitals has 8 chapters.

Eight chapters of NABH Emergency Department in Hospital Standards are

1. Access, Assessment and Information (AAI)
2. Patient Care and Rights (PCR)
3. Management of Medication (MOM)
4. Hospital Infection Control (HIC)
5. Continuous Quality Improvement (CQI)
6. Responsibility of Management (ROM)
7. Facility Management and Safety (FMS)
8. Human Resource Management (HRM)

## Methodology for Certification

A hospital willing to apply for emergency certification program must ensure the implementation of standards in its organization for a minimum of three months.

The assessment team will check the implementation of emergency certification standards for hospitals in emergency department. The hospital shall be able to demonstrate to NABH assessment team that all emergency certification standards as applicable are followed.

### Eligibility to apply for Emergency Certification

Emergency Department that fulfills the following requirements:

- Currently in operation as Emergency Department
- Hospital should have been implemented NABH standards in the 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 organization and not for a specific service within the organization. Organizations may have different services and it is equally applicable to all services and both public and private hospitals.

Hospitals having minimum of 25 operational beds, in addition to emergency beds.

Number of beds in the emergency department should be as per following criteria:

Total Number of Operational Hospital Beds	Minimum Beds required in the Emergency Department
Up to 50 Beds	02 Beds
51-100 Beds	04 Beds
101-200 Beds	06 Beds
201-350 Beds	08 Beds
More than 350 Beds	10 Beds

## Methodology for Certification

Hospital management shall first decide about getting Emergency Certification for its hospital from NABH. It is important for a hospital to make a definite plan of action for obtaining certification and nominate a responsible person to co-ordinate all activities related to seeking certification. An official nominated should be familiar with existing hospital quality assurance program.

Hospital need to procure a copy of the standard. One can purchase the standards by making the payment at the website <https://www.nabh.co/NABHStandards.aspx>

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

The hospital can fill the application form for NABH Emergency certification online ([www.nabh.co](http://www.nabh.co)) through the website. The applicant hospital must have conducted self-assessment against NABH emergency Standards for hospitals at least 3 months before submission of application and must ensure that it complies with it.

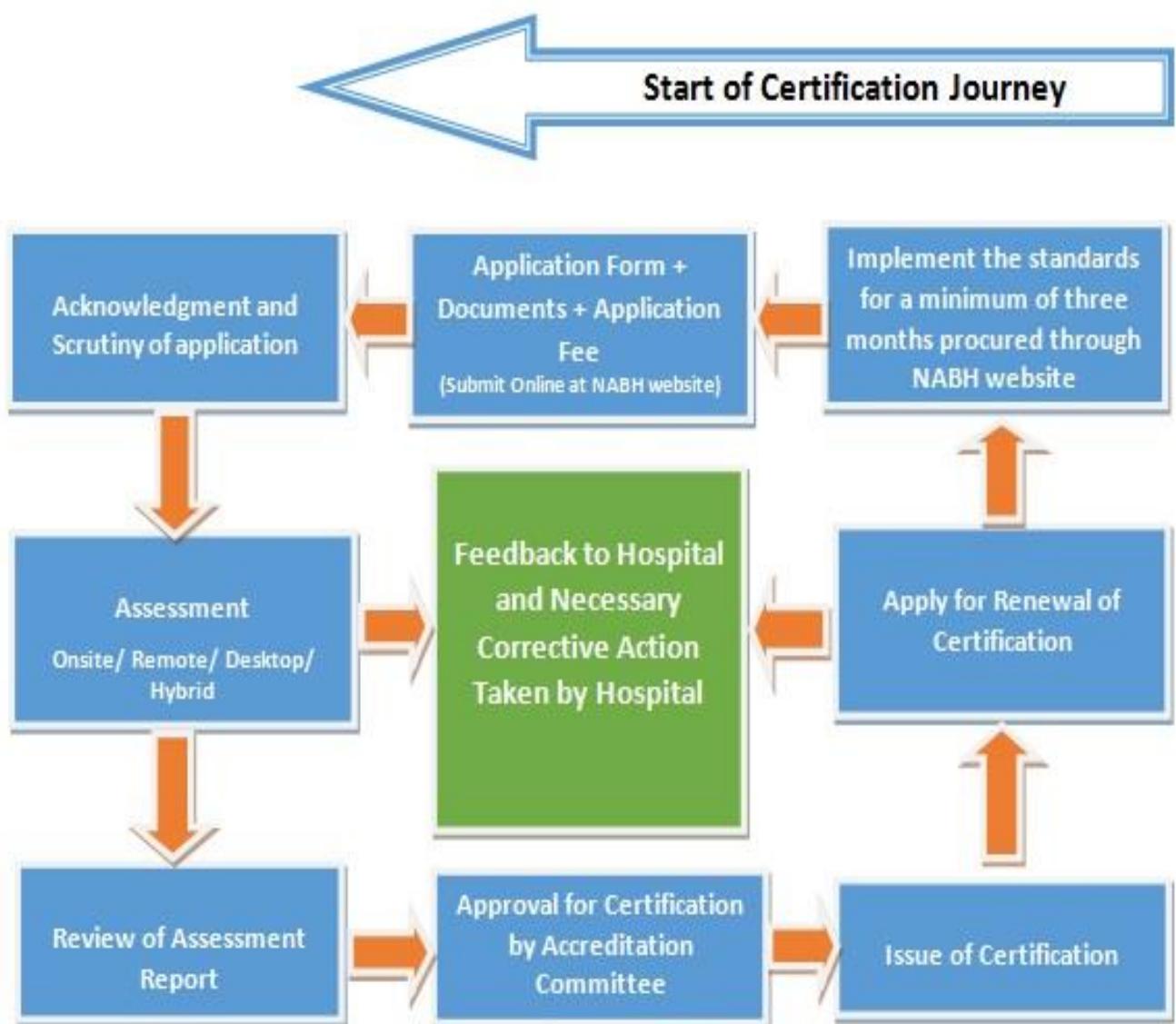
### How to apply?

Once the standards are implemented in the hospital, the organization can apply for Certification online from the website [www.nabh.co](http://www.nabh.co)

- (a) Use a new email id for registration
- (b) Choose 'Emergency Department' 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.

## Preparing for Emergency Certification



## NABH Emergency Certification Procedure

### **Preparation of Policies and Manuals:**

The Emergency Department shall prepare the SOPs, Policies and Procedures and other Manuals required as per the NABH standard.

### **Application for Certification:**

The hospital shall apply to NABH as per the instructions given in the online application. hospital should fill the application and provide the information details very carefully as this are relevant to determine the scope of services.

### **Scrutiny of application:**

Reference ID for the application is generated once the hospital pays the application fees from 'Make Payment' option of the online application form. NABH officer shall scrutinize the application form for its completeness. Hospital may correspond to NABH via writing in 'Remarks column' of online portal of the 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 Hospital and a team of other assessors. He/ She will evaluate the adequacy of the documents including SOPs, policies and procedures and other manuals as mandated by the standards.

### **Types of Assessment conducted by NABH**

NABH in coordination with the 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 the NABH Secretariat makes a visit to the Hospital for a predefined man day based on the bed strength of the hospital, the assessors verifies the documents, facilities and conducts interviews in person at the Hospital. The hospital needs to bear the expenses for the assessor's travel and stay.

**Desktop assessment:** In this type of assessment the Hospital requests for documentation based on certain predefined parameters as per the standards, which is reviewed by the Assessment team to take the process forward.

**Remote assessment:** In this type of assessment, the assessor (ors) does not go to the Hospital in person, but conducts the entire assessment from a remote location through the use of virtual platforms. There are nominal overhead charges for this.

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

### Communication Channel

All applicant and accredited 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 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 Emergency Certification Procedure

### **Final Assessment:**

The final assessment involves comprehensive review of emergency department functions and services. NABH shall appoint an assessment team. The date of final assessment shall be agreed upon by the hospital management and NABH.

Based on the assessment by the Assessment team, the assessment report is submitted by the assessor online at NABH website.

The details of non-conformity (ies) observed during the assessment are handed over to the hospital by the Assessment team and detailed assessment report is uploaded at NABH portal using assessor login account.

### **Review of assessment report:**

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

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

### **Issue of Certification:**

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

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

**Renewal assessment:**

Certification to an emergency department of the hospital shall be valid for a period of two years. The hospitals may apply for renewal of certification at least six months before the expiry of validity of certification for which reassessment shall be conducted.



## NABH Emergency Certification Procedure

### Focus Assessment:

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

[https://www.nabh.co/Policy\\_for\\_Focus\\_Assessment.aspx](https://www.nabh.co/Policy_for_Focus_Assessment.aspx)



### Surprise Assessment:

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

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



## NABH Emergency Certification Procedure

### Guidelines for using the certification mark:

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

[https://www.nabh.co/Images/pdf/Policy\\_and\\_Guidelines\\_for\\_use\\_of\\_NABH\\_Accreditation\\_Certification\\_Mark.pdf](https://www.nabh.co/Images/pdf/Policy_and_Guidelines_for_use_of_NABH_Accreditation_Certification_Mark.pdf)



### Standard Agreement:

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

[https://www.nabh.co/Images/PDF/Agreement\\_hos.pdf](https://www.nabh.co/Images/PDF/Agreement_hos.pdf)



## NABH Emergency Certification Procedure

### **Disclaimer & Indemnity:**

NABH reserves the right to take action or even cancel the certification 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 hospital, Serious patient safety issues, etc.
3. Failure to comply with the standards at any given point of time etc.

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 certified 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 Emergency Certification Standards for hospital : Rs. 1500/-

Size of Hospitals	Assessment Criteria	Certification Fee	
		Assessment	Application Fee
25 - 200 beds*	One Man-days (1X1)	Rs 2000	Rs 25,000
201 beds and above*	Two Man-days** (2x1)	Rs 2000	Rs 50,000

\*Sanctioned Beds

**\*The fee structure is based on the number of man days required for assessment. HCOs having more than one emergency department may require additional man days.**

**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

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