

Quality and Accreditation Institute

Centre for Accreditation of Health & Social Care



Change Adapt Improve

INFORMATION BROCHURE FOR CERTIFICATION OF HOSPITALS (ENTRY LEVEL)

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1. About Quality and Accreditation Institute (QAI)

Quality and Accreditation Institute Pvt. Ltd. is incorporated by Registrar of Companies under the Companies Act 1956. QAI was set up to create an ecosystem of accreditation/ certification, education, training and quality improvement. We aim to provide a platform to stakeholders including professionals and organisations, associated with quality in any way, to share their wisdom and knowledge in order to make healthcare services delivering better outcomes. This will further provide tremendous opportunities to all concerned to learn and contribute in improving organisations. Different activities would be initiated under different verticals in a manner that they remain independent of each other. QAI aims to operate globally. One of the verticals set up within QAI is the Centre for Accreditation of Health and Social Care (CAHSC). It is responsible to run various accreditation/ certification activities in health and social care.

QAI endeavours to operate various accreditation programmes in the space of health and social care. We are aiming to provide value addition to such organisations through a unique process of self-assessment and peer review. We would assist organisations in moving forward on a self-regulated improvement journey.

Vision

Nurturing the largest global pool of organisations and people through quality and accreditation framework.

Mission

To conceive and deliver education, training, accreditation and related programmes in partnership with stakeholders using an approach of co-design and co-creation.

Values

Listener: Seek continuous feedback from stakeholders to address their concerns

Competitive: Look for viable options to benefit users of our services

Transparency: Clearly defined policies made available in public domain

Innovation: Continuously evolve using co-design and co-creation

International Affiliations

QAI is an institutional member of the International Society for Quality in Health Care (ISQua) (www.isqua.org).



QAI is a Board Member of the International Society for Telemedicine and eHealth (ISfTeH) (www.isfteh.org).



International Society for
Telemedicine & eHealth

2. Benefits of Certification

For Patients

- In a certified hospital, patient receives higher quality of care
- Safety of patient is given a priority
- Patients receive services by credentialed medical and nursing staff
- Rights of patients are respected and protected
- Patient satisfaction is regularly evaluated which provides an opportunity to patients to express about their experience
- Patients get an opportunity to be part of their own care

For Hospitals

- Certification enables the hospital in demonstrating commitment to deliver quality and safe patient care.
- Certification assures community about the quality of services and better health outcomes.
- Certification helps demonstrating that hospital functions in transparent and ethical manner.
- It also acts as a potential mechanism of risk management to safeguard provider from potential legal liability.
- It is a process to stimulate continual improvement.
- Act as a mechanism of self-regulation.
- It may provide opportunity for benchmarking by comparing their outcomes with other certified organisations.

For Staff of Healthcare Facility

- Certification process provides opportunity to staff at all levels for their professional development
- It may help in building higher staff satisfaction because of good working environment, leadership opportunities and ownership of processes
- Being robust documentation and procedures in place, it also supports staff in building their confidence to deliver proper care

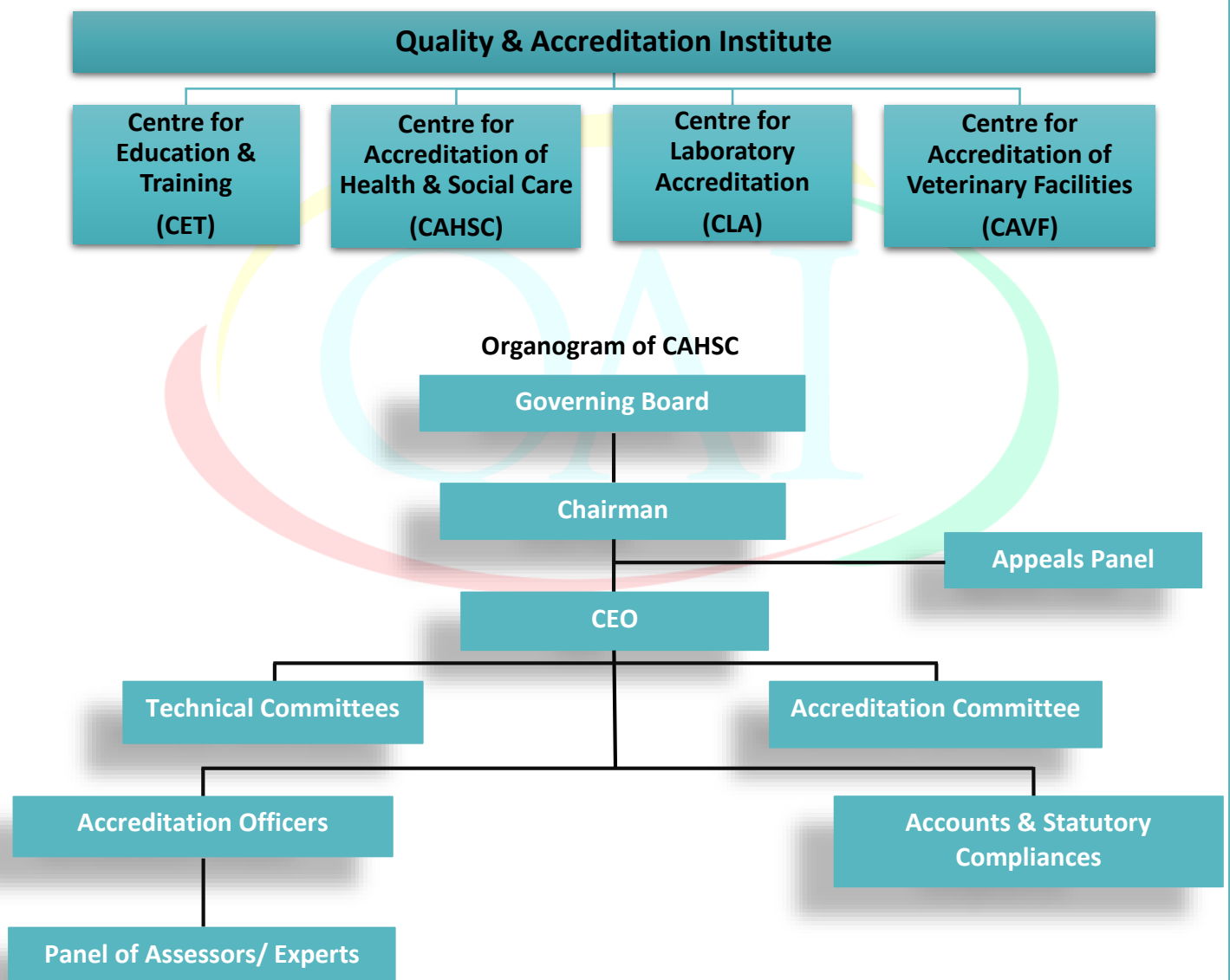
For Third Parties

- Certification provides an objective system of evaluation and empanelment by third parties like insurance companies, other payers, government etc.
- Certification helps in access to reliable and documented information on facilities, infrastructure, services and level of care.

3. Organisation Structure

The organisation structure of QAI’s Centre for Accreditation of Health and Social Care has been designed to meet the requirements of an effective and efficient accreditation system. The Centre is governed by a Board. The Board frames and approve policies and provide direction. CEO is the Member Secretary of the Board.

CAHSC operates its accreditation/Certification process through a structured framework of competent staff, pool of empanelled Lead Assessors and Assessors covering specified expertise, technical committees and accreditation committee. Membership of various committees is drawn from reputed organisations, experts in the field, experienced assessors, academic institutions, important professional bodies, regulatory agencies/ bodies etc.



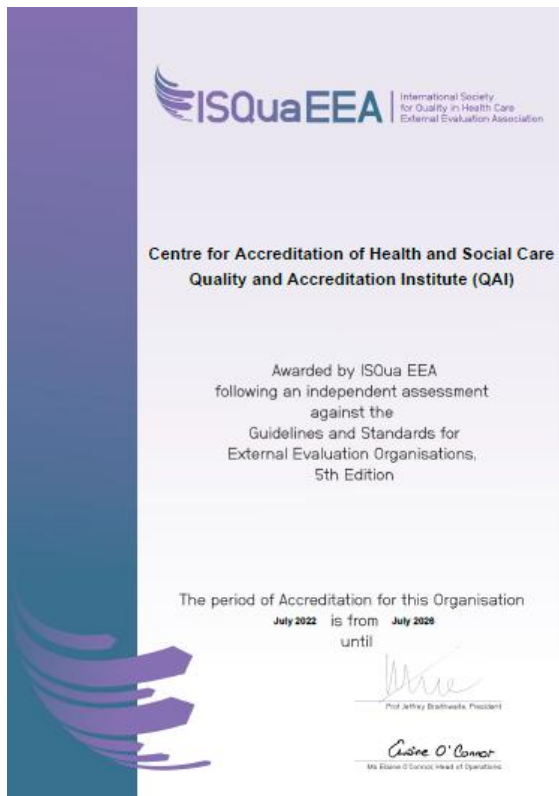
4. QAI's Centre for Accreditation of Health and Social Care (CAHSC)

It was set up to operate accreditation/ certification programmes in health and social care sector. Initially, it was targeted to launch those programmes which were not existing in India and there was a need felt by stakeholders to start such programmes. Currently, following accreditation/ certification/ recognition programmes are operational:

- Accreditation Programme for Hospitals
- Accreditation Programme for Small Hospitals
- Accreditation Programme for Assisted Reproductive Technology (ART)/ IVF Centres
- Accreditation Programme for Home Health Care
- Accreditation Programme for Dialysis Centres
- Accreditation Programme for Green Health Care Facility
- Accreditation Programme for Clinics
- Accreditation Programme for Ambulatory Care Facility (Dental/Eye/Imaging/Day Care Surgery Centres etc.)
- Accreditation Programme for Telehealth
- Recognition Programme for Telemedicine Practitioners
- Accreditation Programme for Hotels and Home Stays
- Accreditation Programme for Emergency Department
- Accreditation Programme for Transition Care/ Inpatient Rehabilitation Centre
- Certification Programme for Hospitals (Entry Level)
- WHO Patient Safety Friendly Hospital Standards Certification Programme
- Accreditation Programme for Primary and Advanced Stroke Centre

QAI becomes the first accreditation body in India to achieve ISQuaEEA Accreditation in less than five years of operations. QAI is the ONLY accreditation body in India having ISQua Accreditation as an Organisation and Two Sets of Standards.





QAI Accreditation is recognised by the Ministry of Health's Central Government Health Scheme (CGHS) for empanelment of Private Hospitals, Eye Centres, Dental Centres & Imaging Centres.

5. Special Features of Certification Programme

- Comprehensive Assessment Management System to allow quick turnaround time for the accreditation/ certification process as each step is linked to a defined period.
- Endorsement of a documented quality and improvement programme as per the intent of the standard.
- Based on comprehensive self-assessment and document review process providing opportunity to hospital for a thorough review of their own documentation and implementation of requirements of standards.
- Rigorous Assessor Management System including a transparent monitoring and evaluation process.
- 'Client First' approach
- Harmonising local, national, regional and global framework
- Hospital in SAARC nations enjoy same fee structure as for hospitals in India
- Blend of global strategy, experience and leadership
- Economic yet global benchmarking

6. Scope of Certification

Scope of Certification – Broad Specialities in the hospital:

Anaesthesiology	Ophthalmology
Dermatology and Venereology	Orthopaedic Surgery*
Emergency Medicine	Otorhinolaryngology
Family Medicine	Paediatrics
General Medicine	Psychiatry
Geriatrics	Respiratory Medicine
General Surgery	Sports Medicine
Obstetrics and Gynaecology	Day Care Services

Scope of Certification - Super Specialities in the hospital:

Cardiac Anaesthesia	Neurosurgery
Cardiology	Nuclear Medicine
Cardiothoracic Surgery	➤ Medical Oncology
Clinical Haematology	➤ Radiation Oncology
Critical Care	➤ Surgical Oncology
Endocrinology	Paediatric Gastroenterology
Hepatology	Paediatric Cardiology
Hepato-Pancreato-Biliary Surgery	Paediatric Surgery
Immunology	Plastic and Reconstructive Surgery
Medical Gastroenterology	Rheumatology
Neonatology	Surgical Gastroenterology
Nephrology	Urology
Neurology	Vascular Surgery
Neuro-Radiology	Transplantation Services

Scope of Certification - Clinical Support departments/ services in the hospital:

Ambulance
Blood Bank / Transfusion Services
Dietetics
Psychology
Rehabilitation
➤ Occupational Therapy
➤ Physiotherapy
➤ Speech and Language Therapy

Scope of Certification - Diagnostic Services in the hospital

Diagnostic Service:	
Diagnostic Imaging:	
➤ Bone Densitometry	➤ MRI
➤ CT Scanning	➤ PET
➤ DSA Lab	➤ Ultrasound
➤ Gamma Camera	➤ X-Ray
➤ Mammography	
Laboratory Services:	
➤ Clinical Bio-chemistry	➤ Haematology
➤ Clinical Microbiology and Serology	➤ Histopathology
➤ Clinical Pathology	➤ Molecular Biology
➤ Cytopathology	➤ Toxicology
➤ Genetics	
Other Diagnostic Services:	
➤ 2D Echo	➤ Spirometry
➤ Audiometry	➤ Tread Mill Testing
➤ EEG	➤ Urodynamic Studies
➤ EMG/EP	➤ <i>Any Other Diagnostic Service (s)</i>
➤ Holter Monitoring	

7. Eligibility and Preparation for Certification

7.1 Eligibility for Certification

The applicant hospital must check whether they are eligible to apply by looking at their size and scope of services. These standards are applicable to whole hospital and not a specific service/department of a hospital. Hospital should be operating with a minimum of 30% occupancy and have implemented standards for at least two months before applying for Certification to have sufficient data and records to verify during the assessment.

7.2 Preparing for Certification

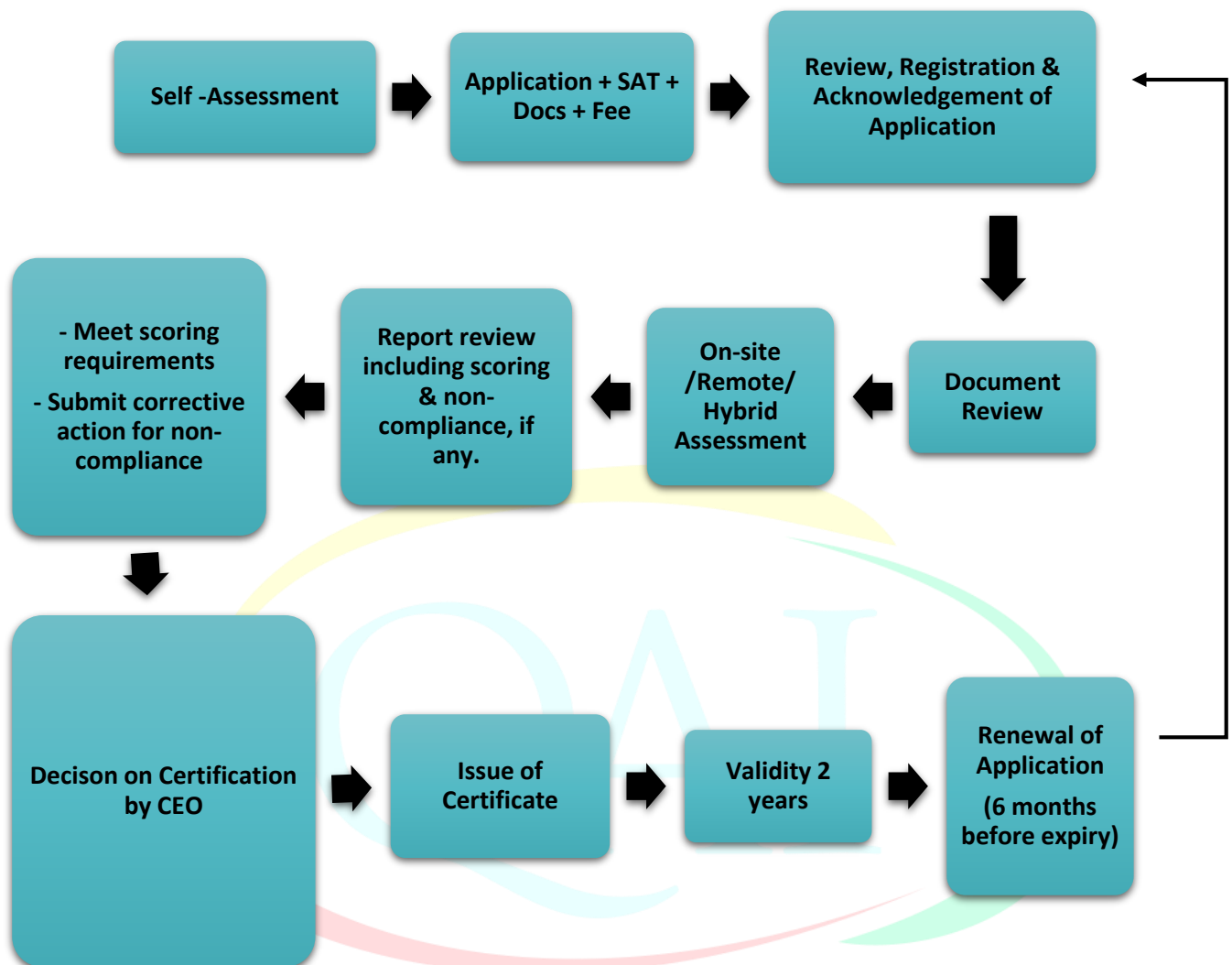
Management of the hospital shall first decide about getting Certification from QAI. It is important for the hospital to make a definite plan of action for obtaining Certification and nominate a person to co-ordinate all activities related to seeking Certification. The nominated official should be familiar with existing policies, procedures and documents of the hospital.

Hospital must procure a copy of the relevant QAI Certification standards. A self-assessment tool can also be requested from the Secretariat. The hospital seeking Certification shall understand the QAI assessment process. The hospital shall ensure that all the requirements of the standard are implemented. The hospital may get its personnel trained in understanding and implementation of Certification standards. Such training programmes are conducted by QAI from time to time.



8. Certification Process

Certification process is shown below:



8.1 Self-Assessment

Hospital first carries out self-assessment using self-assessment tool which is based on the requirements of the Certification standards. It gives an opportunity to the hospital to examine all its documentation and their implementation. It will also give a comprehensive view of its documentation to the Assessment Team. A self-assessment tool can be requested from the Secretariat.

8.2 Application

Applicant is requested to submit the following:

- Soft copy of completed application form (available on website)
- Soft copy of Self-assessment tool along with referenced documents
- Prescribed application fees
- Soft copy of signed QAI-CAHSC 003 'Terms and Conditions for Obtaining and Maintaining Accreditation/ Certification' (available on website)

8.3 Review, Registration and Acknowledgement of Application

CAHSC Secretariat on receipt of application form, self-assessment tool, referenced documents and the fees reviews the application for its completeness, and a unique ID number is allocated which is used for correspondence with the hospital. Secretariat may ask for additional information/ clarification(s) at this stage, if found necessary.

8.4 Document Review

Secretariat appoints an assessment team and share application form, self-assessment tool and any other relevant document provided by the hospital. CAHSC seeks hospital's acceptance for the proposed assessment team. The hospital can refuse any member of the proposed assessment team by giving specific reason(s) for their non-acceptance. Once the team and dates are finalised, lead assessor takes over to initiate the further process. The assessment team carry out document review by going through the application form, self-assessment tool and referenced documents, and provide feedback to the Secretariat. This feedback is shared with the hospital for taking necessary corrective actions.

8.5 Assessment

Appointed assessment team conducts the assessment (remote/ hybrid/ on-site). CAHSC may also nominate an observer which is either an assessor-in-training or a Secretariat staff. The assessment team keeps the secretariat in loop for any communication with the hospital. During assessment, the assessment team validate the scoring of self-assessment by reviewing documents, records, observation, interaction with staff and patients. The assessment report containing the findings of the assessment is prepared by the team. The non-compliances (a criterion receiving a score of 0 & 5), if identified are reported in the assessment report. The report is endorsed by the authorised signatory of the hospital. The report prepared by the assessment team is sent to CAHSC Secretariat. A copy of summary of assessment report and non-compliances, if any, are provided to the hospital at the end of the assessment.

8.6 Review of Assessment Report and Decision Making

The assessment report is reviewed by the Secretariat for its completeness, scoring and non-compliances, if any. However, if there were non-compliances, the Hospital continues working to address those non-compliances within the time period of 60 days.

8.7 Issue of Certificate

Based on the scoring, QAI-Secretariat processes for issue of certificate after approval of the CEO. Certificate has a unique number, name of certification standard, and period of certification i.e., dates of validity. The certificate is valid for two years. The certificate is issued under the signatures of the CEO.

Certification Mark

Certified Hospital is authorised to use following certification mark subject to requirements specified in QAI CAHSC 019-Policy and guidelines for use of QAI certification mark.



8.8 Maintaining Certification

Compliance to applicable standards and other requirements

The certified Hospital at all times shall comply with the requirements of the standards as well as any other laid down requirements.

Terms and Conditions

The certified Hospital is required to comply at all times with the terms and conditions given in CAHSC 003 'Terms & Conditions for Obtaining and Maintaining Accreditation/Certification'. The Hospital is required to submit a signed soft copy of the same before issue of the certificate.

Adverse Decision against the Healthcare Facility

If the Hospital at any point of time does not comply with the applicable standards and/ or does not maintain the terms and conditions; or is not able to align itself to the modified criteria, CAHSC may take adverse decision against the HOSPITAL like abeyance, denial of certification, suspension or forced withdrawal as per laid down policy.

8.9 Reassessment

The certified Hospital is subjected to re-assessment every 2 years for renewal of certification. The Hospital has to apply six months before the expiry of certification in order to complete all formalities for renewal of certification before the expiry of the current certification so that continuity of the certification is maintained. The renewal application is submitted in the prescribed form along with required documents as mentioned in the application form. Rest of the process is same as for initial assessment.

Applicant hospital is requested to submit the application to info@qai.org.in

9. Assessment Criteria and Fee Structure

A uniform fee structure is maintained for all hospitals and the charges are maintained at a reasonable level so that hospitals are not denied participation in the Certification process because of unreasonable financial conditions. The fee structure is kept simple and economical to facilitate maximum number of participations, less invoices and bank transactions. The information about the fee structure is given on the website.

10. QAI-CAHSC Publications

All relevant publications are available on our website www.qai.org.in.





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