

QAI CAHSC 401

Quality and Accreditation Institute
Centre for Accreditation of Health & Social Care



Change Adapt Improve

INFORMATION BROCHURE
FOR
CERTIFICATION OF HEALTH CARE FACILITY

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CONTENTS

Sl. No.	Title	Page No.
1	About Quality and Accreditation Institute (QAI)	3
2	Benefits of Certification	4
3	QAI's Centre for Accreditation for Health and Social Care	4
4	Organisation Structure	5
5	Special Features of Certification Programme	6
6	Scope of CAHSC Certification	6
7	Eligibility and Preparation for Certification	8
8	Certification Process	9
9	Assessment Criteria and Fee Structure	11
10	QAI-CAHSC Publications	12

1. About Quality and Accreditation Institute (QAI)

Quality and Accreditation Institute is a private limited company incorporated by Registrar of Companies under the Companies Act 1956. QAI was set up to create an ecosystem of education, training, quality improvement and accreditation/ certification. It is believed that this organisation would 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 its Vision realised. This will further provide tremendous opportunities to all concerned to learn and contribute in improving organisations engaged with QAI. 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 vertical 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

Membership

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



2. Benefits of Certification

- It stimulates continual improvement.
- Enables the organisation in demonstrating commitment to quality and safe care.
- Assure community about the quality of services provided.
- Provides opportunity for benchmarking.
- Rights of patients/customers are respected and protected.
- Patients/Customer satisfaction is regularly evaluated.
- Improves overall professional development of staff and leadership opportunity at all levels.
- Provides an objective system of evaluation and empanelment by third parties.
- Transparency in its operations
- Function in ethical manner

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

It is set up to operate accreditation/ certification programmes in health and social care sector. Primarily, it is targeted to launch those programmes which do not exist in India and there is a need felt by stakeholders to start such programmes. Currently, following accreditation/certification programmes have been developed: -

- Assisted Reproductive Technology (ART) including IVF Centres Accreditation Programme
- Home Health Care Accreditation Programme
- Dialysis Centres Accreditation Programme
- Green Health Care Facility Accreditation Programme
- Healthcare Facility Certification Programme
- WHO Patient Safety Friendly Hospital Standards Certification Programme
- Primary Care Clinic Accreditation Programme
- Ambulatory Care Facility Accreditation Programme (work in-progress)

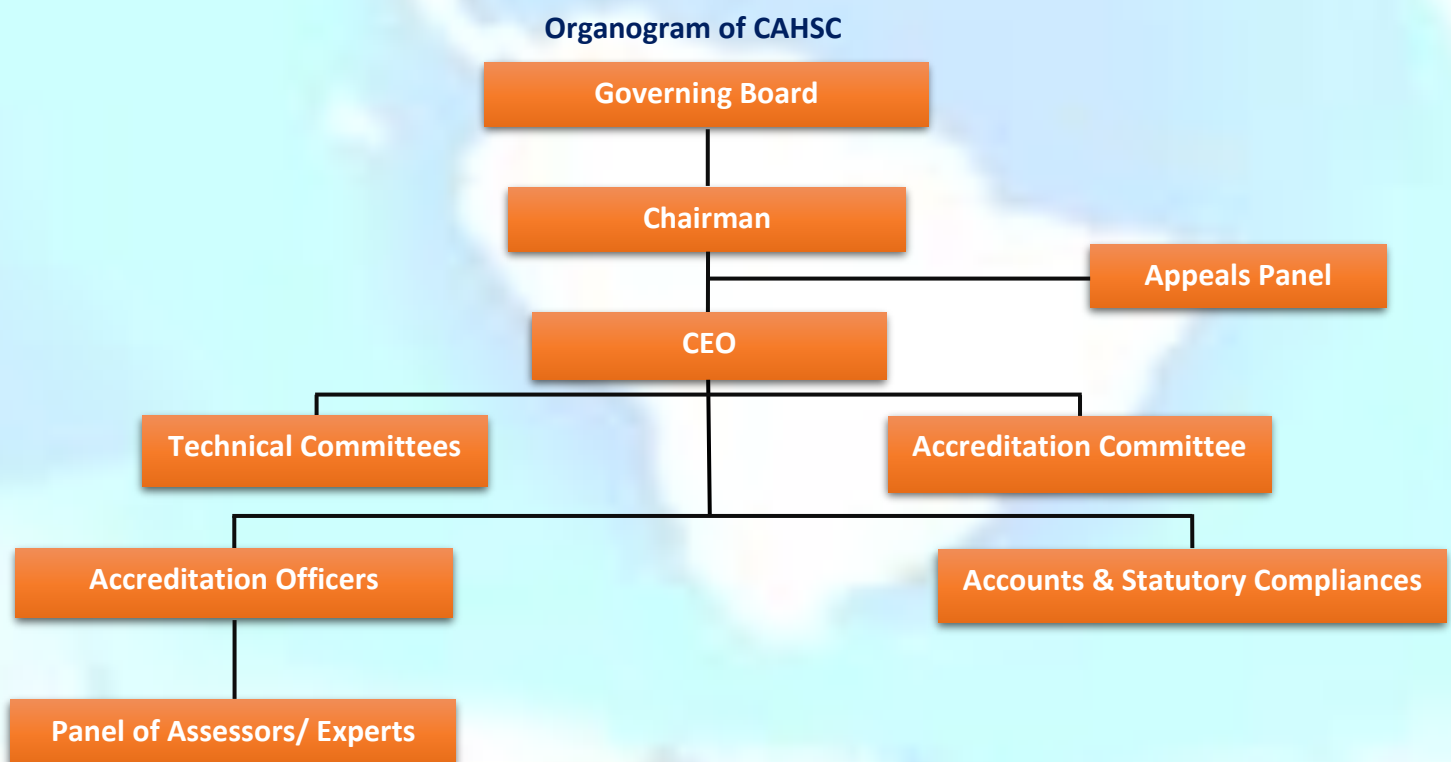
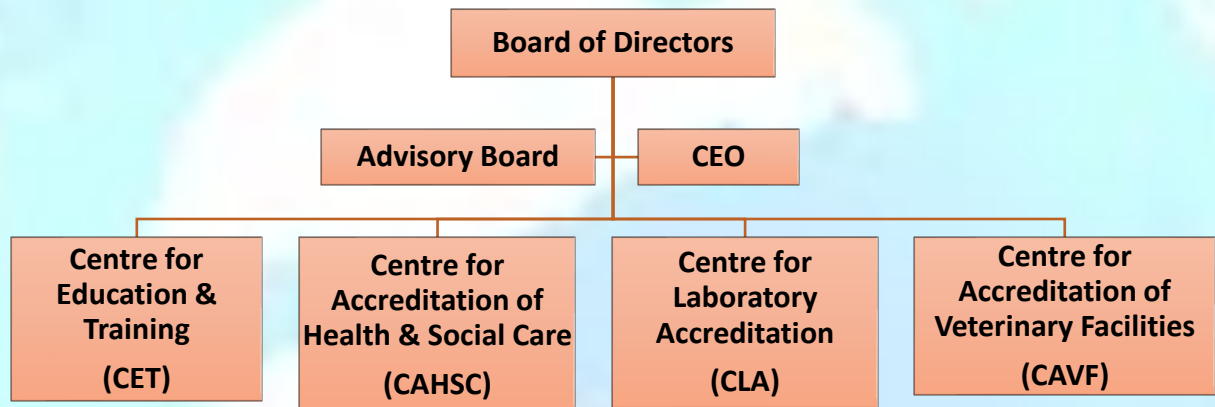
Following standards have achieved ISQua accreditation, making QAI the first and only accreditation body in India to get such recognition.



4. 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/ certification 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 and 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.



5. Special Features of Certification Programme

- Comprehensive Assessment Management System to allow quick turnaround time for the accreditation 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.
- No pre-assessment to reduce turn-around time, making it more cost effective and efficient.
- Based on comprehensive self-assessment and document review process providing opportunity to organisations for a thorough review of their documentation and implementation of requirements of standards.
- Rigorous Assessor Management System including a transparent monitoring and evaluation mechanism.
- Hear the voice of all keeping 'Client First'
- Harmonising local, national, regional and global framework
- Health care facilities in SAARC nations enjoy same fee structure as for health care facilities in India
- Blend of global strategy, experience and leadership
- Economic yet global model

6. Scope of HCF Certification

Certification is currently available for the following:

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 organisation must check whether they are eligible to apply. This can be done by looking at their scope of services and the certification standards available. The applicant organisation is advised to implement standards for at least two months before applying for certification.

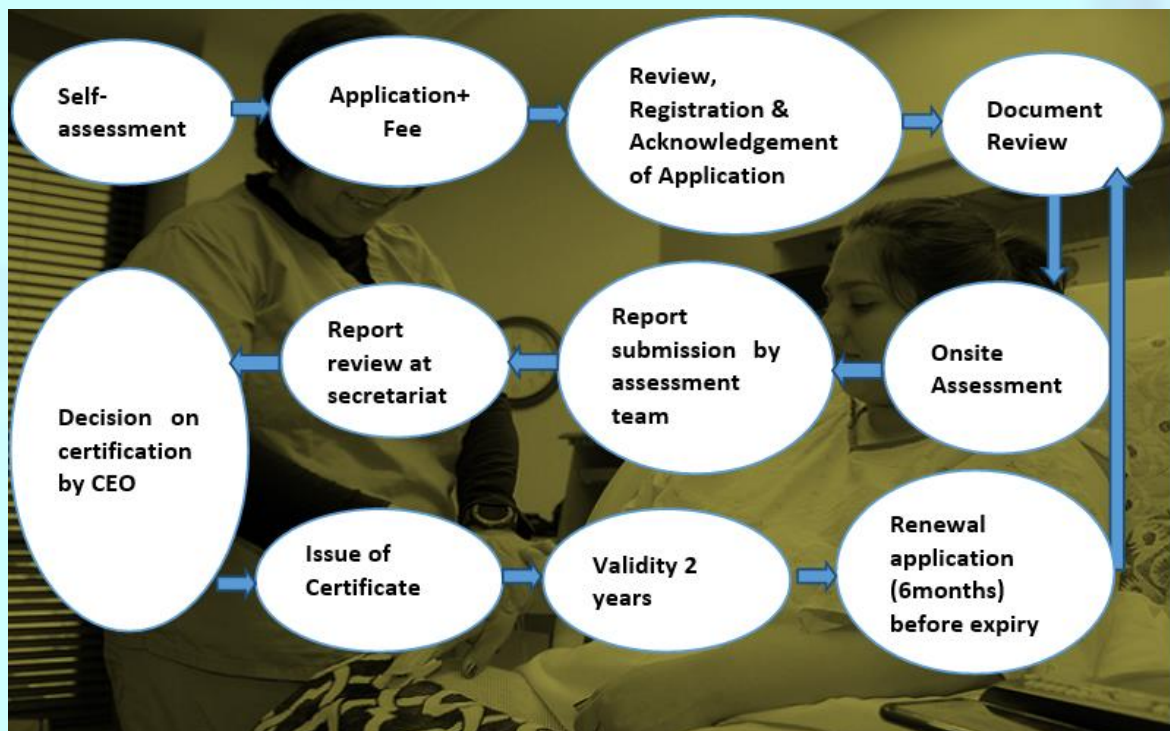
7.2 Preparing for Certification

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

Organisation must procure a copy of the relevant QAI Certification standards. A self-assessment tool kit can also be requested from the Secretariat. The organisation seeking certification shall understand the QAI assessment process. The organisation shall ensure that all the requirements of the standard are implemented. The Organisation 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

Conceptualised Certification process which is simple and efficient as shown below:



8.1 Self-Assessment

Organisation first carry out self-assessment using self-assessment tool which is based on the requirements of the certification standards. It gives an opportunity to the organisation 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 organisation 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 organisation. 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 HCF. The assessment team carries out document review by going through the self-assessment tool and referenced documents, and provide feedback to the HCF during on-site assessment.

8.5 Final on-site Assessment

Appointed assessment team conducts the on-site assessment. CAHSC may also nominate an observer which is either an assessor-in-training or a Secretariat staff. CAHSC seeks organisation's acceptance for the proposed assessment team and dates for assessment. The organisation 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 keeps the secretariat in loop for any communication with the organisation.** During on-site visit, the assessment team validate the scoring of self-assessment by reviewing documents, records, observation, interaction with staff and patients. The assessment report contains the findings of the assessment. The non-compliances, if identified are reported in the assessment report. The report is endorsed by the authorised signatory of the organisation. The report prepared by the assessment team is sent to CAHSC Secretariat. A copy of summary of assessment report and copies of non-compliances, if any, are provided to the organisation at the end of the assessment visit.

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 organisation continues working to address those non-compliances.

8.7 Issue of Certificate

When the scoring results in the grant of certification, 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 HCF is authorised to use following certification mark subject to requirements specified in QAI CAHSC 019-Policy and guidelines for use of QAI accreditation/ certification mark.



8.8 Maintaining Certification

Compliance to applicable standards and other requirements

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

Terms and Conditions

The certified organisation 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 Organisation is required to submit a signed soft copy of the same before issue of the certificate.

Adverse Decision against the Healthcare Facility

If the organisation 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 organisation like abeyance, denial of certification, suspension or forced withdrawal as per laid down policy.

8.9 Reassessment

The certified organisation is subjected to re-assessment every 2 years for renewal of certification. The organisation 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 on-site assessment.

9. Assessment Criteria and Fee Structure

A uniform fee structure is maintained for all organisations and the charges are maintained at a reasonable level so that organisations 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 for Certification Programme is given below:

Assessment criteria and fee structure for Health Care Facilities

Size of the health care facility	Assessment Criteria	Certification Fee		
	Final Assessment/ Renewal Assessment	Application Fee (Rs.)	Two Years Fee (Rs.)	Total Fee (Rs.)
Up to 50 beds	One man day (1x1)	2000	20000	22000
51-250 beds	One man day (1x1)/ Two man days (2x1)/(1x2)	5000	50000	55000
251-500 beds	Two man days (2x1)/(1x2) Four man days (2x2)	10000	80000	90000

NOTE: The man-days given above for assessment and re-assessment are indicative and may change depending on the size of the health care facility.

In addition to the above-mentioned fee, GST @18.0 % or as applicable from time to time to be paid.

Assessment Charges: In addition to the above fee, organisation shall bear the cost of following:

- a. Travel of the assessment team
- b. Accommodation and meals

Guidelines for Travel and Lodging:

- a. Travel to be made by Air in economy class (Apex fare) or by train in 2nd AC Class or by AC Bus/ Taxi.
- b. The organisation will provide the tickets for travel as per above guidelines. If the journey is made by own car, the re-imburement will be as per company's rules or restricted to 2nd AC Class fare by train.
- c. The organisation shall also make arrangements for travel & lodging for the Assessment team. A single occupancy AC accommodation may be provided for each Assessor/ Observer in a reasonably good hotel/ guesthouse and arrangement for local transportation from temporary residence to the Organisation site and airport/ railway station/ bus stand.

Fee Payment:

All payments through Demand Draft/ Check/ Bank Transfer shall be made in favour of '**Quality and Accreditation Institute Pvt. Ltd.**' payable at Noida/New Delhi.

Bank Transfer details are:

Beneficiary name: Quality and Accreditation Institute Pvt. Ltd.

Beneficiary Address: 416, Krishna Apra Plaza, Sector 18, Noida-201301, India

Bank Account number: 003105031612

Bank Details: ICICI Bank Limited, K-1, Senior Mall, Sector 18, Noida-201301, India

Bank IFSC Code: ICIC0000031

Bank Swift Code: ICICINBBNRI

PAN No.: AADCI3230L

GSTIN: 08AADCI3230L1ZM

State Code: 08 State Name: Rajasthan

Note: Any bank charges for transfer of fee is to be paid by the Centre.

10. QAI-CAHSC Publications

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



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Centre for Accreditation of Health & Social Care

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