



# **Quality & Accreditation Institute**



**Centre for Accreditation of Health and Social Care**

# Introduction of QAI

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- Function as an **Accreditation Body** in August 2017
- **Vision:** Nurturing the largest global pool of organisations and people through quality improvement 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.

# Introduction of QAI

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## 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

# Accreditation/ Certification Programmes

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1. Assisted Reproductive Technology (ART)/ IVF Centre
2. Home Health Care
3. Dialysis Centre
4. Green Health Care Facility
5. Healthcare Facility/ Hospital Certification
6. WHO Patient Safety Friendly Hospital Standards Certification Programme
7. Primary Care Clinic
8. Ambulatory Care Facility (Dental/ Eye/ Imaging etc.)
9. Telemedicine/ Digital Health (Work in Progress)

# International Approval: ISQua Accreditation

**QAI is the first and only accreditation body in India having 2 standards accredited by ISQua.**



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

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Dr. B.K. Rana, CEO is a member of the Board of  
Directors (2014 - 2016, 2017-2020)

# QAI Journal for Healthcare Quality & Patient Safety ([www.qaij.org](http://www.qaij.org))

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# Global Operations

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- Nepal
- Bhutan
- Bangladesh
- Philippines
- Maldives
- Oman
- Ghana
- Nigeria
- Mexico

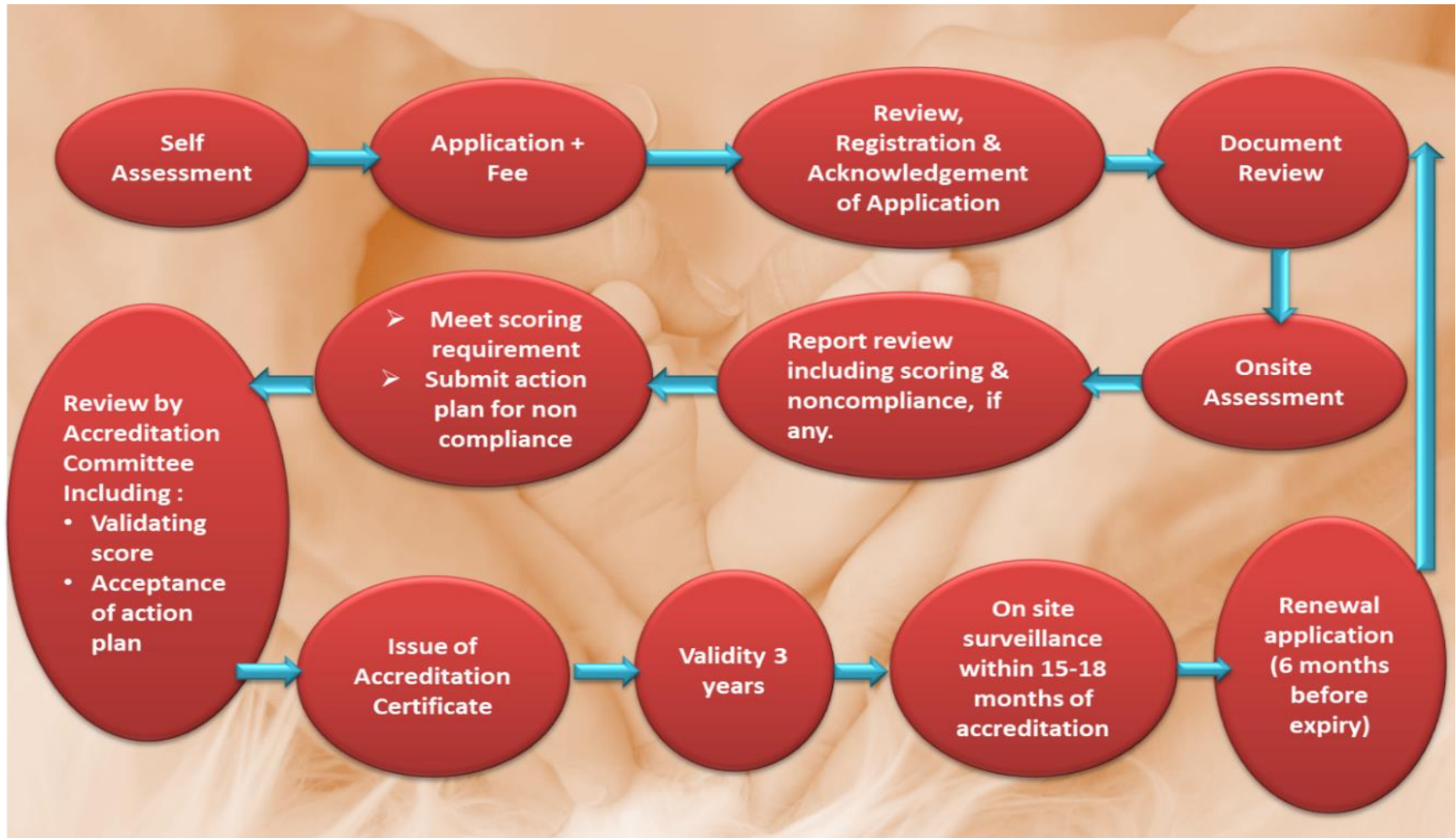


# Accreditation Mark

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# Accreditation Process



# Accreditation

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- Public recognition of the achievement of accreditation standards by a healthcare organisation, demonstrated through an independent external assessment of that organisation's level of performance in relation to the standard.

***(ISQua)***

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# Benefits of Accreditation

# Benefits

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## **To create climate smart and low carbon healthcare which offers the following benefits:**

- ❑ Health system design and models of care based on appropriate technology, coordinated care, emphasis on local providers, and driven by public health needs
- ❑ Building design and construction based on low carbon approaches.
- ❑ Investment programmes in renewable energy and energy efficiency.
- ❑ Waste minimisation and sustainable healthcare waste management.

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- ❑ Sustainable transport and water consumption policies.
  - ❑ Low-carbon procurement policies for pharmaceuticals, medical devices, food, and other products.
  - ❑ Resilience strategies to withstand extreme weather events (World Bank 2017).
  - ❑ Safe environment for patients
  - ❑ Safe environment for staff

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## **These low-carbon approaches also provide numerous co-benefits, these include:**

- ❑ Improved health status by reduction in environmental pollution and Climate change.
- ❑ Improved health system efficiency and cost savings.
- ❑ Decreased escalation of costs through molding technology and models of care to the environment and disease burden.
- ❑ Stimulated and anchored local economies.

# Framework of Standards

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1. Governance and Leadership (GAL)
2. Site Selection (SS)
3. Indoor Air Quality (IAQ)
4. Energy and Ambience (EA)
5. Water Use (WU)
6. Bio-Medical Waste Management (BMWWM)
7. Green Housekeeping (GHK)
8. Procurement of Materials and Resources (PMR)



Sl. No.	Name of Chapter	No. of Standards	No. of Criteria
1	Governance and Leadership (GAL)	3	7
2	Site Selection (SS)	5	15
3	Indoor Air Quality (IAQ)	4	14
4	Energy and Ambience (EA)	4	18
5	Water Use (WU)	5	19
6	Bio-Medical Waste Management (BMWM)	4	21
7	Green Housekeeping (GHK)	6	20
8	Procurement of Materials and Resources (PMR)	2	9
	Total	33	123

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# CHAPTER 1:

# Governance and Leadership

# (GAL)

# STANDARDS

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- ❑ GAL.1: The management of the hospital is committed to implement the concept of green healthcare.
- ❑ GAL.2: The management is accountable for consistent compliance of applicable regulatory/ statutory/ legal requirements.
- ❑ GAL.3: The management receives reports on the compliance with the requirements of this standard on a scheduled basis.

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# CHAPTER 2:

## Site Selection

### (SS)

# STANDARDS

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- ❑ SS.1: Hospital shall have a defined criterion for construction requirement.
- ❑ SS.2: Hospital shall ensure conservation and preservation of available natural resources and resilience to flooding and other impacts of climate change.
- ❑ SS.3: Hospital shall have a plan & monitoring mechanism during construction to reduce noise pollution, air pollution, soil erosion and airborne dust generation.

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- ❑ SS.4: Hospital shall adhere to applicable norms to ensure patient, visitor and staff safety in all areas.
  - ❑ SS.5: Hospital adopts best practices to reduce harm to environment and community.

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# CHAPTER 3:

## Indoor Air Quality (IAQ)

# STANDARDS

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- ❑ IAQ.1: The organization has a documented process for maintaining the indoor air quality standards according to National / International Health Standards.
- ❑ IAQ.2: Conduct indoor air quality testing on a monthly basis in critical zones to determine the level of pollutants.



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- ❑ IAQ.3: Ensure all occupied spaces including administrative and recreational areas have proper ventilation, thereby improving health and well-being of all patients, visitors and hospital staff.
  - ❑ IAQ.4: Avoid the use of fossil fuel in artificial power generation.

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# CHAPTER 4:

## Energy and Ambience

### (EA)

# STANDARDS

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- EA.1: Requirements for new health facilities.
  - Maximize the access to daylight in patient and staff areas.
  - New electrical appliances shall have a minimum 3-star rating from Bureau of Energy Efficiency or equivalent recognized organization to minimize the energy input
  - Demonstrate that refrigerants used in Heating, Ventilation & Air-conditioning (HVAC) equipment are CFC (Chloro Fluoro Carbon) free, with a low Greenhouse Warming Potential (GWP) when available.
  - Hospital shall have a plan for installation of energy system compliant to statutory norms.
  - Demonstrate that refrigerants used in cooling equipment have the lower GHP (greenhouse power) or GWP available in the market.

# STANDARDS

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- ❑ EA.2: Incorporate optimized energy consumption devices.
- ❑ EA.3: Ensure the hospital has a strategy for optimization of energy usage and saving.
- ❑ EA.4: Ensure regularly occupied spaces are adequately ventilated, thereby improving health and well-being of the occupants.

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# CHAPTER 5: Water Use (WU)

# STANDARDS

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- ❑ WU.1: Enhance efficiency of plumbing fixtures by design.
- ❑ WU.2: Hospital treats waste water generated on-site, so as to avoid polluting the receiving streams by safe disposal.
- ❑ WU.3: Hospital demonstrates efficient management of water saving.

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- ❑ WU.4: Hospital use sub-metering to improve water performance of the hospitals, and thereby save potable water.
  - ❑ WU.5: Hospital works on action items for new buildings and construction.
    - Use recycled grey water for irrigation and toilet flushing
    - Installation of water efficient faucets and toilet equipment

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# CHAPTER 6: Bio-Medical Waste Management (BMWWM)



# STANDARDS

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- ❑ BMW.1: Hospital demonstrates segregation of general waste generated at source.
- ❑ BMW.2: Hospital demonstrates proper segregation of bio-medical waste at source of generation.
- ❑ BMW.3: Establishment of Bio-medical waste management system.
- ❑ BMW.4: A documented policy exists to address health and safety needs of staff.

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# CHAPTER 7: Green Housekeeping (GHK)

# STANDARDS

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- GHK.1: Hospital shall ensure use of certified low-VOC emitting and least toxic emitting chemicals and materials.
- GHK.2: Hospital shall have a protocol for procuring of Products, Materials and Equipment used for house-keeping (Environmental Friendly Preferable).

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- ❑ GHK.3: Provide appropriate infection control parameters & systems in hospitals, thereby reducing the nosocomial infection.
  - ❑ GHK.4: Hospital has properly identified critical and noncritical disinfection areas in the hospital in order to assure appropriate levels of cleaning in each area.

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- ❑ GHK.5: Hospital shall have a policy for correctly labelling and properly storing all chemicals as per manufacturers' recommendations.
  - ❑ GHK.6: Organization shall have a process for housekeeping and cleaning agents with defined criteria considering performance/ people/ planet and pricing.

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# CHAPTER 8:

# Procurement of Materials and Resources (PMR)

# STANDARDS

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- ❑ PMR.1: The organization shall have a process for the purchase and procurement of more sustainable materials.
- ❑ PMR.2: Use certified green building materials, products, and equipment, so as to reduce dependence on materials that have associated negative environmental impacts.

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# Thank you

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