

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



Change Adapt Improve

GENERAL INFORMATION BROCHURE

Issue No. 02

Issue Date: July 2019

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

Sl. No.	Doc No.	Current Issue No.	Revised Issue No.	Date of Issue	Reasons
1	CAHSC 002	01	02	July 2019 (15.07.2019)	Added Scopes and Fee Structure of Green Hospital, Patient Safety , Healthcare facility and Updated ISQua Logo

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1. Accreditation of Health & Social Care Facilities

QAI endeavours to operate various accreditation programs 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.

2. Benefits of Accreditation

- 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

3. 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. 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.

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 programs 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

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QAI has set up following Centres of Excellence:

3.1 Centre for Education & Training (CET)

There may be different tools/ methods/ mechanisms to achieve Quality. Accreditation is one such tool. It is high time that professionals and organisations must make use of this tool to improve. However, the greatest challenge in moving further in this direction is lack of desired education and training. There is huge gap looking into the numbers of such organisations existing in the country and abroad. To make this a reality and to support its accreditation programs, QAI has established Centre for Education & Training (CET) which will impart education and training on the requirements of various accreditation programs.

3.2 Centre for Accreditation of Health & Social Care (CAHSC)

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

- Assisted Reproductive Technology (ART) including IVF centres
- Home Healthcare
- Dialysis Centres



- WHO Patient Safety Friendly Hospital Standards Certification Program
- Healthcare Facility Certification Program
- Green Hospital

QAI becomes the institutional member of the International Society for Quality in Health Care (ISQua) (www.isqua.org). We aim to achieve ISQua accreditation to our standards and organisation as we move forward.



3.3 Centre for Laboratory Accreditation (CLA)

It is set up to operate Laboratory accreditation for medical as per ISO 15189 and other testing & calibration laboratories as per ISO/IEC 17025. The long term goal is to attain signatory status of Asia Pacific Accreditation Cooperation (APAC) and International Organisation Accreditation Program (ILAC) Mutual Recognition Arrangement (MRA).

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3.4 Centre for Accreditation of Veterinary Facilities (CAVF)

It is being set up to develop accreditation program for Veterinary hospitals and clinics to improve infrastructure and quality in veterinary.

3.5 Centre for Proficiency Testing (CPT)

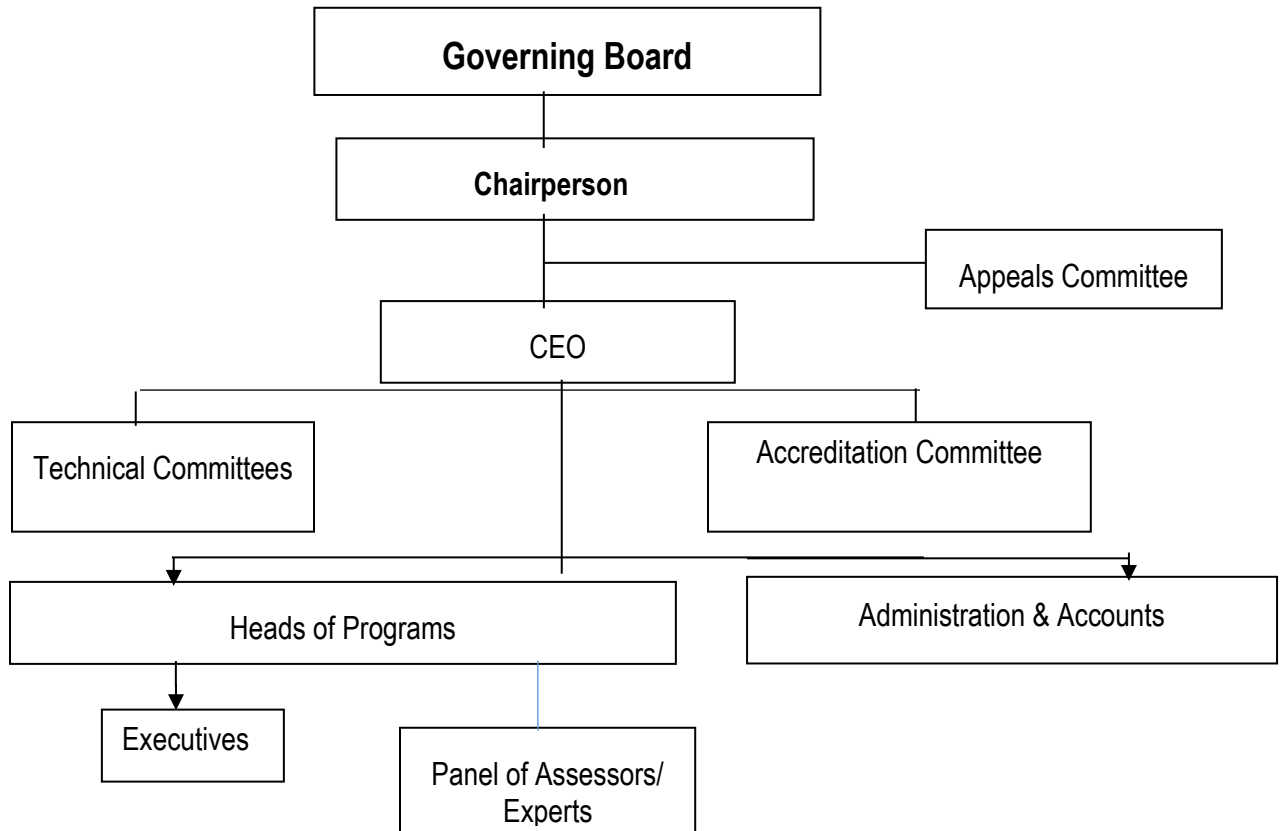
It is being set up to provide laboratories and similar facilities an opportunity to participate in proficiency testing activities relevant to their accreditation activities.

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

Organization Structure

The organization 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 guidelines, and provide direction to QAI's CAHSC. CEO, QAI is the Member Secretary of the Board.

CAHSC operates its accreditation process through a structured framework of competent staff and pool of empanelled Lead Assessors and Assessors covering specified expertise. They are trained by CAHSC as per the relevant international accreditation criteria and subsequently empanelled as assessors/ lead assessors through defined contractual agreements. Membership of various committees is drawn from reputed organisations, experts in the field, experienced assessors, academic institutions, important professional bodies, regulatory agencies/ bodies etc



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5. International Linkages

QAI is an institutional member of ISQua and is also associated with various global associates.

6. Special Features of Accreditation Programs:

- 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 program 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
- Blend of global strategy, experience and leadership
- Economic yet global model

7. Scope of CAHSC Accreditation

Accreditation is currently available for the following:

Assisted Reproductive Technology (ART) including IVF Centres

Counselling	Donor Program
Embryology Organisation	Embryoscopy
Gamete Intra Fallopian Transfer (GIFT)	In Vitro Fertilization (IVF)
Intra Cytoplasmic Sperm Injection (ICSI)	Laparoscopy & Hysteroscopy
Laser Assisted Hatching	Micro Epididymal Sperm Aspiration (MESA)
Oocyte retrieval	Oocyte/Embryo/blastocyst cryopreservation
Operation theatre	Sperm cryopreservation
Percutaneous Epididymal Sperm Aspiration (PESA)	Preimplantation Genetic Diagnosis (PGD)
Reproductive Genetics	Semen Analysis (recognized standards e.g. WHO)
Other procedures involving manipulation of gamete, embryo, and gonadal tissue	Testicular Sperm Extraction (TESE)
Surrogacy	Testicular Sperm Aspiration (TESA)
Sperm preparation (Fresh sample/ frozen sample/MESA/PESA/TESE/ TESA/Open Biopsy)	

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Home Healthcare

Physiotherapy	Nursing (basic, geriatric nursing, post-delivery)
Infusions	Care of elderly
Physician visit	Wound management/dressing care
Medication administration	Nutritional consultation
Sample collection	Tele consultation
Critical care services	Speech therapy
Non-emergency medical transport	Feeding (tube / oral feeding)
Maternity care	Vital monitoring
Post-surgery care	Diabetic care
Counselling	Medication reminder
Diabetic care	Pharmacy
Companion care assistance	Education and counselling
End of life care	Home oncology
Pulmonology Rehabilitation	Neurology Rehabilitation
Post-surgical Rehabilitation	Post organ transplant Rehabilitation
Transfusion services	Equipment supply
Specialist consultation services	Catheterization & catheter care
Ostomy/ colostomy care	Skilled hospice support
Ryle's Tube	Dialysis
Stroke Rehabilitation	Lung Rehabilitation
Special nursing (critical care, palliative, tracheostomy)	
Personal care (Oral Hygiene, Denture Care, Eye Care, Bathing & Hygiene, Continence & Toileting Care, Skin Care, Back Care, Nail Care, Feet Care, Hair Care and Grooming, Hot / Cold Application, Steam Inhalation, Transfer and Posture Positioning)	

Dialysis Centres

Chronic Haemodialysis
Acute Haemodialysis
Peritoneal Dialysis
Haemofiltration and other similar modalities for adult and paediatric patients

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Healthcare Facilities

Specialities (Clinical Specialities	Oncology
Anaesthesiology	Medical Oncology
Cardiac Anaesthesia	Radiation Oncology
Cardiology	Surgical Oncology
Cardiothoracic Surgery	Ophthalmology
Clinical Haematology	Orthopaedic Surgery*
Critical Care	Otorhinolaryngology
Dermatology and Venereology	Paediatrics
Emergency Medicine	Paediatric Gastroenterology
Endocrinology	Paediatric Cardiology
Family Medicine	Paediatric Surgery
General Medicine	Psychiatry
Geriatrics	Plastic and Reconstructive Surgery
General Surgery	Respiratory Medicine
Hepatology	Rheumatology
Hepato-Pancreato-Biliary Surgery	Sports Medicine
Immunology	Surgical Gastroenterology
Medical Gastroenterology	Urology
Neonatology	Vascular Surgery
Nephrology	Transplantation Service
Neurology	Day Care Services
Neuro-Radiology	Any other
Neurosurgery	
Nuclear Medicine	

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8. Eligibility and Preparation for Accreditation

8.1 Eligibility for Accreditation

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

8.2 Preparing for Accreditation

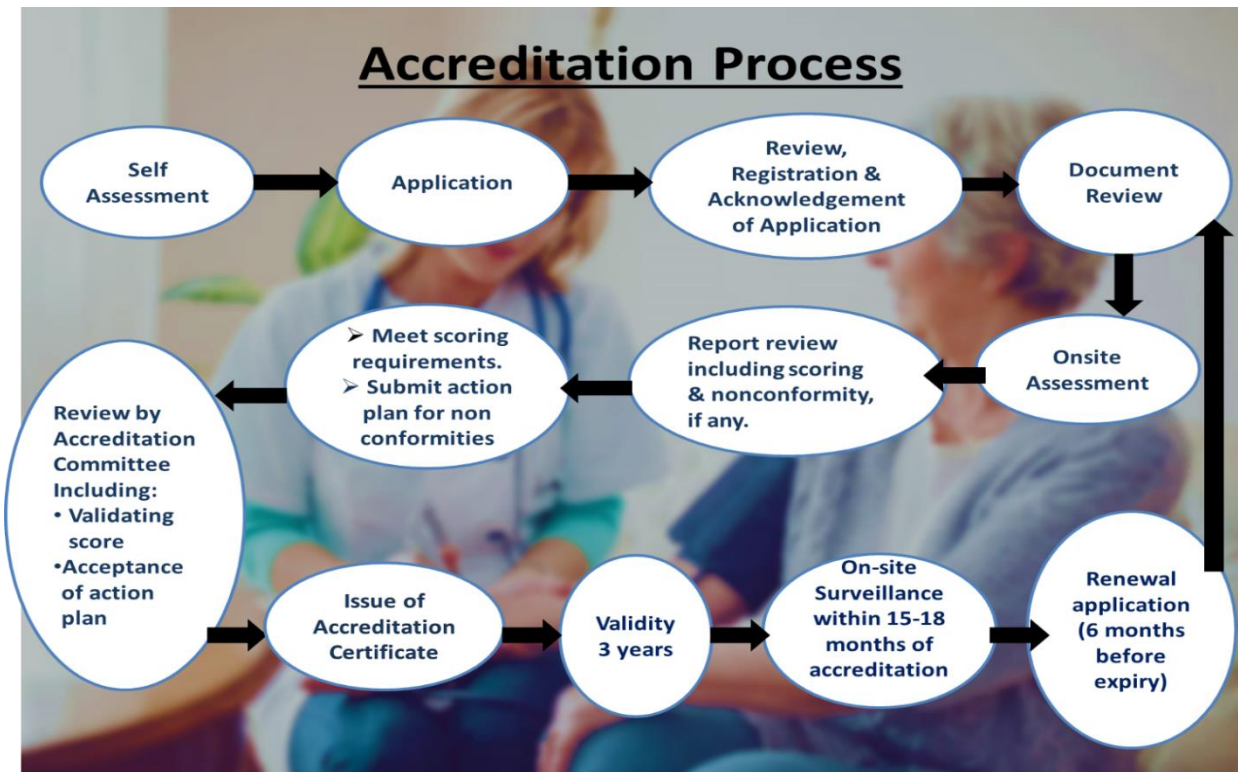
Management of the organisation shall first decide about getting accreditation from QAI. It is important for the organisation to make a definite plan of action for obtaining accreditation and nominate a person to coordinate all activities related to seeking accreditation. An official nominated should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

Organisation must procure a copy of the relevant QAI accreditation standards. A self-assessment tool kit shall also be provided to organisations requesting a copy of accreditation standards. The organisation looking for accreditation 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 accreditation standards. Such training programs are conducted by QAI from time to time.

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9. Accreditation Process

Conceptualised an accreditation process which is simple and efficient as shown below:



9.1 Self-Assessment

Organisation first carry out self-assessment using tool kit which is based on the requirements of the accreditation 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.

9.2 Application

Applicant Organisation is requested to submit the following:

- Three copies of completed application forms (available on website)
- Self-assessment tool kit along with referenced documents (**soft copy**)
- Prescribed application fees
- Signed copy of QAI-CAHSC 003 ‘Terms and Conditions for Obtaining and Maintaining Accreditation’

9.3 Review, Registration and Acknowledgement of Application

CAHSC Secretariat on receipt of application form, self-assessment tool kit, 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.

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9.4 Final on-site Assessment

CAHSC constitutes an assessment team. The team includes the lead assessor (generally same who is already appointed for carrying out document review), the technical assessor(s)/ expert(s) in order to cover the scope of accreditation sought. 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, interaction with staff and patients. The assessment report contains the findings of the assessment. The nonconformities, 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-conformities, if any, are provided to the organisation at the end of the assessment visit.

9.5 Review of Assessment Report and decision making

The assessment report is reviewed by the Secretariat for its completeness, scoring and non-compliances, if any. If the organisation meets the scoring for accreditation, however there are non-compliances, the organisation is asked to submit an action plan having details of addressing those non-compliances and time frame. The organisation shall get a time period of 15 days to provide an Action Plan. Once action plan is received, the report along with all documents is placed before the accreditation committee for its review and recommendation. All decisions taken by CAHSC regarding grant of accreditation are open to appeal by the organisation as per laid down appeal process.

9.6 Issue of Accreditation Certificate

When the recommendation of the accreditation committee results in the grant of accreditation, QAI-CAHSC processes for issues an accreditation certificate after approval of the CEO. Certificate has a unique number, name of accreditation standard, date of validity along with the scope of accreditation. The accreditation certificate is valid for three years. The certificate is issued under the signatures of the CEO and the Chair, CAHSC.

9.7 Maintaining Accreditation

Conformance to applicable standards and other requirements

The accredited organisation at all times shall conform to the requirements of the standards as well as any other laid down requirements.

Terms and Conditions

The accredited organisation is required to comply at all times with the terms and conditions given in CAHSC 003 'Terms & Conditions for Obtaining and Maintaining Accreditation'. The Organisation is required to submit a signed copy of the same before issue of the accreditation certificate.

Adverse decision against the healthcare organisation

If the organisation at any point of time does not conform to 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, scope reduction, denial of accreditation, suspension or forced withdrawal as per laid down policy.

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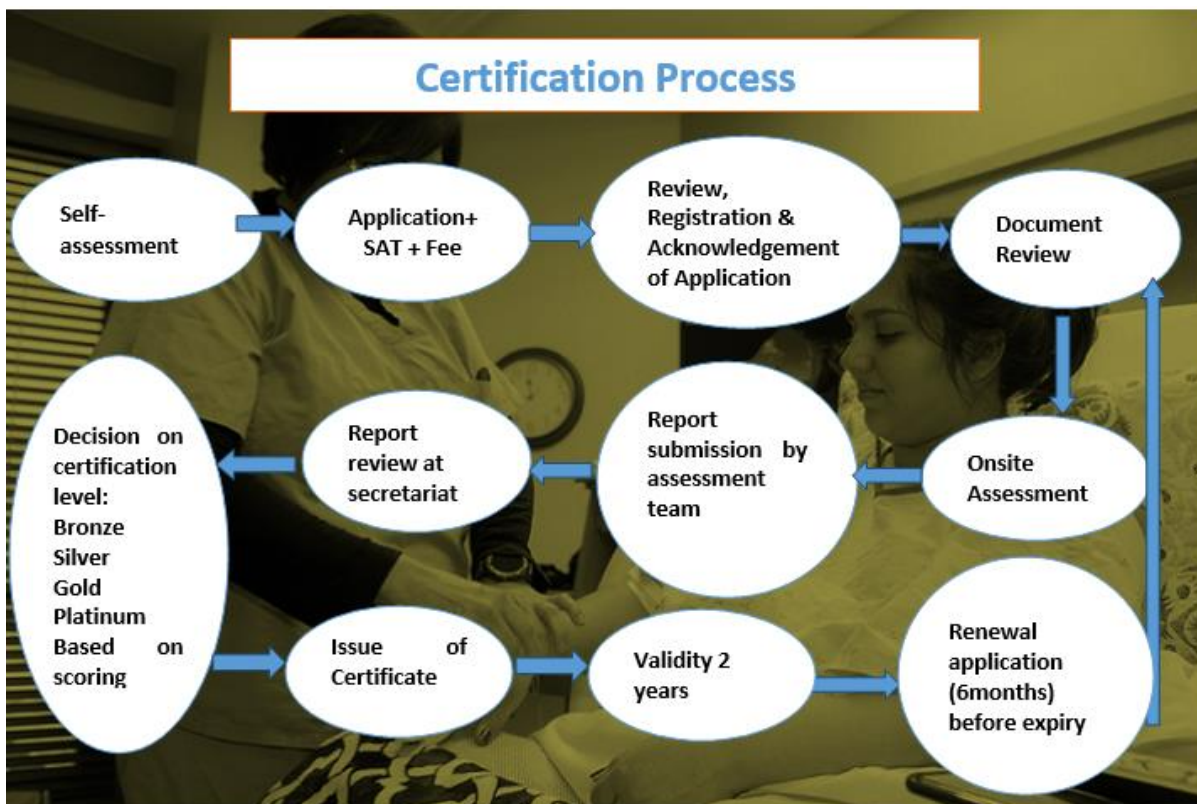
9.8 Surveillance and Re-assessment

The accreditation certificate is valid for a period of three years. CAHSC shall conduct surveillance within 15-18 months of accreditation. It is aimed at evaluating continued compliance with the applicable standards and other requirements stipulated from time to time.

9.9 Reassessment

The accredited organisation is subjected to re-assessment every 3 years for renewal of accreditation. The organisation has to apply six months before the expiry of accreditation in order to complete all formalities for renewal of accreditation before the expiry of the current accreditation so that continuity of the accreditation is maintained. The renewal application is submitted in the prescribed form. Rest of the process is same as for initial on-site assessment.

10. Certification Process



For details of Certification Process Refer Doc No. CAHSC_501

11. 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 accreditation 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 various accreditation programs given below

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Assessment criteria and fee structure for ART Centres

No. of embryos transfer in ART Centre (per year)	Assessment Criteria		Accreditation Fee	
	Assessment	Surveillance	Application Fee (Rs.)	Annual Fee (Rs.)
Up to 300	Two man days (2x1)	One man day (1x1)	25000	125000
Above 300	Four man days (2x2)	Two man days (2x1)	50000	200000

NOTE: The man days given above for assessment and surveillance are indicative and may change depending on the facilities and size of the ART Centre.

Assessment criteria and fee structure for Dialysis Centres

Size of the dialysis centre (Number of dialysis machines)	Assessment Criteria		Accreditation Fee	
	Assessment	Surveillance	Application Fee (Rs.)	Annual Fee (Rs.)
Up to 7	One man day (1x1)	One man day (1x1)	10000	50000
8 to 15	One man day (1x1)/ Two man days (2x1)/	One man day (1x1)	30000	100000
More than 15	Two man days (2x1)/ Four man days (2x2)	One man day (1x1)/ Two man days (2x1)	50000	200000

NOTE: The man days given above for assessment and surveillance are indicative and may change depending on the size of the Dialysis Centre.

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Assessment criteria and fees structure for Home Health Care Organisation

Fees for Head Office Accreditation

Patient Care Episodes* for entire organisation (monthly)(average of last 3 months)**	Assessment Man Days	Surveillance Man Days	Application Fees (Rs.)	Annual Fees (Rs.)
Up to 2000	2x1 day or 2x2 days	1x1 day	75000	150000
2001-5000	2x2 days	2x1 day	100000	200000
5001-10000	2x2 days or 3x2 days	2x1 day	125000	250000
10001-15000	2x3 days or 3x2 days	2x2 days	150000	300000
>15000	2x3 days or 3x2 days	2x2 days	250000	500000

*It means that if a home care organisation with single legal entity is offering services in multiple cities then patient episodes of all those cities together would be counted for this categorisation purpose. The city in which head office is located and most of the services are controlled/ directed would take more time for assessment to review its system. A home care organisation may choose to apply for all its locations or for a select few. In case it chose to apply for multiple city locations then all city locations shall be visited and a sample of homes would be visited for assessment. This would give flexibility to organisation to apply for head office and any other city of choice. Organisation can keep adding as and when they are ready with implementation of standards. The following additional fee structure would be applicable:

Assessment Criteria and fee per City

Patient Care Episodes at each city (monthly) (average of last 3 months)	Assessment Man Days	Surveillance Man Days	Application Fees (Rs.)	Annual Fees (Rs.)
Up to 2000	1 x 1 day	1 x 1 day	10000	25000
2001-3000	1 x 1 day	1 x 1 day	20000	50000
3001-4000	2 x 1 days	1 x 1 day	30000	75000
4001-5000	2 x 2 days	1 x 2 days or 2 x 1 day	40000	100000
>5000	2 x 2 days	1 x 2 days or 2 x 1 day	50000	125000

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Definition of patient care episodes – physical patient visits including visits conducted by doctor, nurse, nursing assistant, physiotherapist, dietician & phlebotomist staff at patient’s home. **Episodes like equipment installation, audit visits, on-site training visits, counselling / disease education to be excluded.**

Notes

-The assessment man days given above for assessment and surveillance are indicative and may change depending on the facilities or patient care episodes.

Assessment criteria and fee structure for Green Hospitals

Size of Hospital	Assessment Criteria	Accreditation Fee	
	Assessment/ Re-assessment	Application Fee (Rs.)	Annual Fee (Rs.)
Up to 50 beds	Two man-days (1x2)	10000	25000
51-250 beds	Two man-days (1x2)/ Four man-days (2x2)	20000	50000
251-500 beds	Four man-days (2x2)/ Six man-days (2x3)	30000	75000
More than 500 beds	Six man days (2x3)/ Six man-days (3x2)	40000	100000

NOTE: The man-days given above are indicative and may change depending on the facilities and size of the hospital.

Assessment criteria and fee structure for Healthcare Facilities

Size of the health care facility	Assessment Criteria	Certification Fee		
	Assessment/ Re-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

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Note: The man days given above for assessment/ re-assessment are indicative and may change depending on the size of the health care facility. Application fee and certification fee for one cycle of two years to be paid in advance in one single payment.

Assessment criteria and fee structure for WHO Patient Safety Friendly Hospital Standards

Size of Hospital	Assessment Criteria	Certification Fee	
	Assessment/ Re-assessment	Application Fee (Rs.)	Annual Fee (Rs.)
Up to 50 beds	Two man-days (1x2)	10000	25000
51-250 beds	Two man-days (1x2)/ Four man-days (2x2)	20000	50000
251-500 beds	Four man-days (2x2)/ Six man-days (2x3)	30000	75000
More than 500 beds	Six man days (2x3)/ Six man-days (3x2)	40000	100000

NOTE: The man-days given above are indicative and may change depending on the facilities and size of the hospital.

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In addition to the above-mentioned fee structures of all the programs –

ART Centres, Dialysis Centres , Home Healthcare , Green Hospitals , Healthcare Facilities , WHO Patient Safety Friendly Hospital Standards , GST @18.0 % or as applicable from time to time to be paid.

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

- a. Travel of the assessment team
- b. Boarding & Lodging

Guidelines for Travel, Boarding 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.
 - b. The centre 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.
- The centre shall also make arrangements for boarding & 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

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

12. QAI-CAHSC Publications

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

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