COMPLIANCE TO CORE OBJECTIVE ELEMENTS OF NABH STANDARDS AT JEEVAN RAKSHA HOSPITAL, BIKANER

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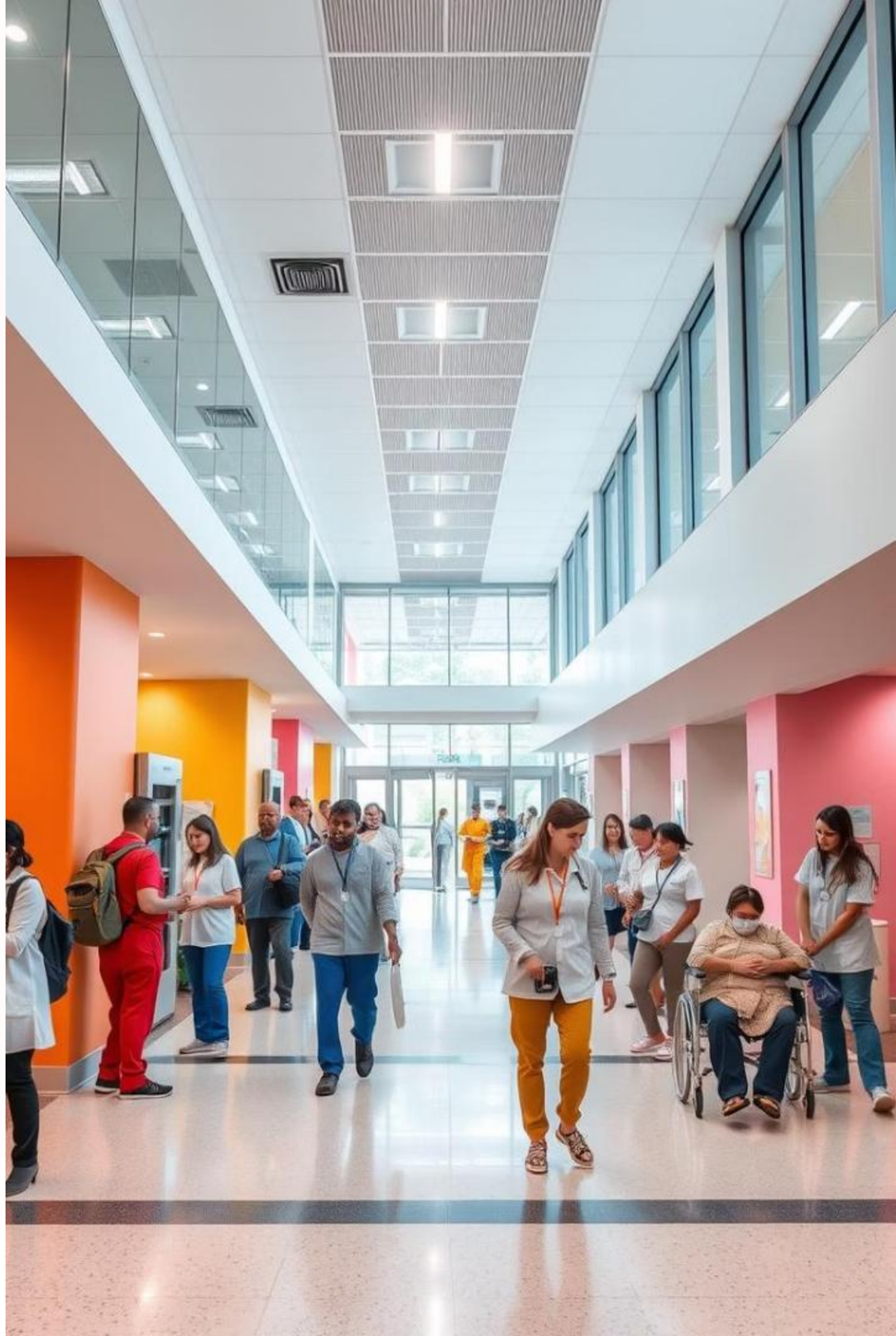
NABH 6th Edition: Elevating Healthcare in India

- The National Accreditation Board for Hospitals & Healthcare Providers (NABH), a member of the Quality Council of India (QCI), sets criteria that Jeevan Raksha Hospital in Bikaner adheres to in its quest for excellence. Through the implementation of NABH criteria, the hospital guarantees the provision of high-quality, patient-centered, and safe healthcare services. By bringing Jeevan Raksha Hospital's procedures up to strict national standards, this dedication strengthens confidence and improves the region's overall healthcare service.



NABH 6th Edition: Key Innovations

Clinical Quality

It encompasses several key aspects of healthcare delivery, focusing on patient safety, evidence-based practices, and continuous improvement.

Process-Driven Systems

It involves structuring healthcare operations around established workflows and protocols to ensure consistent quality and patient safety.

Patient-Centric Care

An legal and ethical approach that prioritizes the patient's individual needs, preferences, and values throughout their healthcare journey.

Corporate Governance

the mechanisms and processes by which NABH ensures accountability, transparency, and ethical conduct in its operations and in the healthcare organizations it accredits.

NABH 6TH EDITION INTRODUCTION

- Implemented in JAN 2025, the NABH 6th Edition.
- Standards are organised into chapters.
- Objective Elements Devided into levels - Core
  - Commitment
  - Achievement
  - Excellence

- **AIM and OBJECTIVE**
- 1.To assess the hospital's adherence to core NABH 6th edition standards across departments.

2.To identify areas of full, partial, and non-compliance in processes related to patient care, safety, and quality improvement.

3.To analyze existing practices and documentation against the NABH benchmarks.

4.To identify gaps and challenges in meeting the required compliance levels.

5.To suggest actionable recommendations for enhancing compliance and ensuring sustained quality in healthcare delivery.

Chapter Code & Name	No. of Standards	Total Objective Elements	Core	Commitment	Achievement	Excellence
AAC - Access, Assessment & Continuity of Care	13	87	6	68	9	4
COP - Care of Patients	20	135	13	107	12	4
MOM - Management of Medication	11	68	13	48	6	1
PRE - Patient Rights and Education	8	52	12	32	7	1
IPC - Infection prevention and control	8	49	13	33	3	0
PSQ -Patient safety and Quality Improvement	7	46	8	28	7	3
ROM - Responsibility of Management	6	37	4	23	8	2
FMS - Facility Management and Safety	7	43	11	29	2	1
HRM - Human Resource Management	13	76	16	56	4	0
IMS - Information Management System	7	45	9	33	2	1
Total	**100**	**639**	105	**457**	**60**	**17**

Compliance Assessment: Ensuring Standard Implementation

Documentation Reviews

Systematic analysis of records and policies.

Facility Inspections

On-site checks of infrastructure and environment.

Employee Interviews

Assessing staff understanding and adherence.

Performance Indicator Analysis

Measuring outcomes against benchmarks.

A compliance assessment systematically analyses a healthcare facility's adherence to NABH standards. This includes documentation reviews, facility inspections, employee interviews, patient record audits, and performance indicator analysis. A well-structured mechanism helps identify gaps, measure performance, and implement corrective actions, fostering a culture of continuous quality improvement.

NABH and the Future of Quality Healthcare in India

Transparent Communication

Fosters clear and open dialogue within the institution.

Reduced Infections

Minimises hospital-acquired infections through strict protocols.

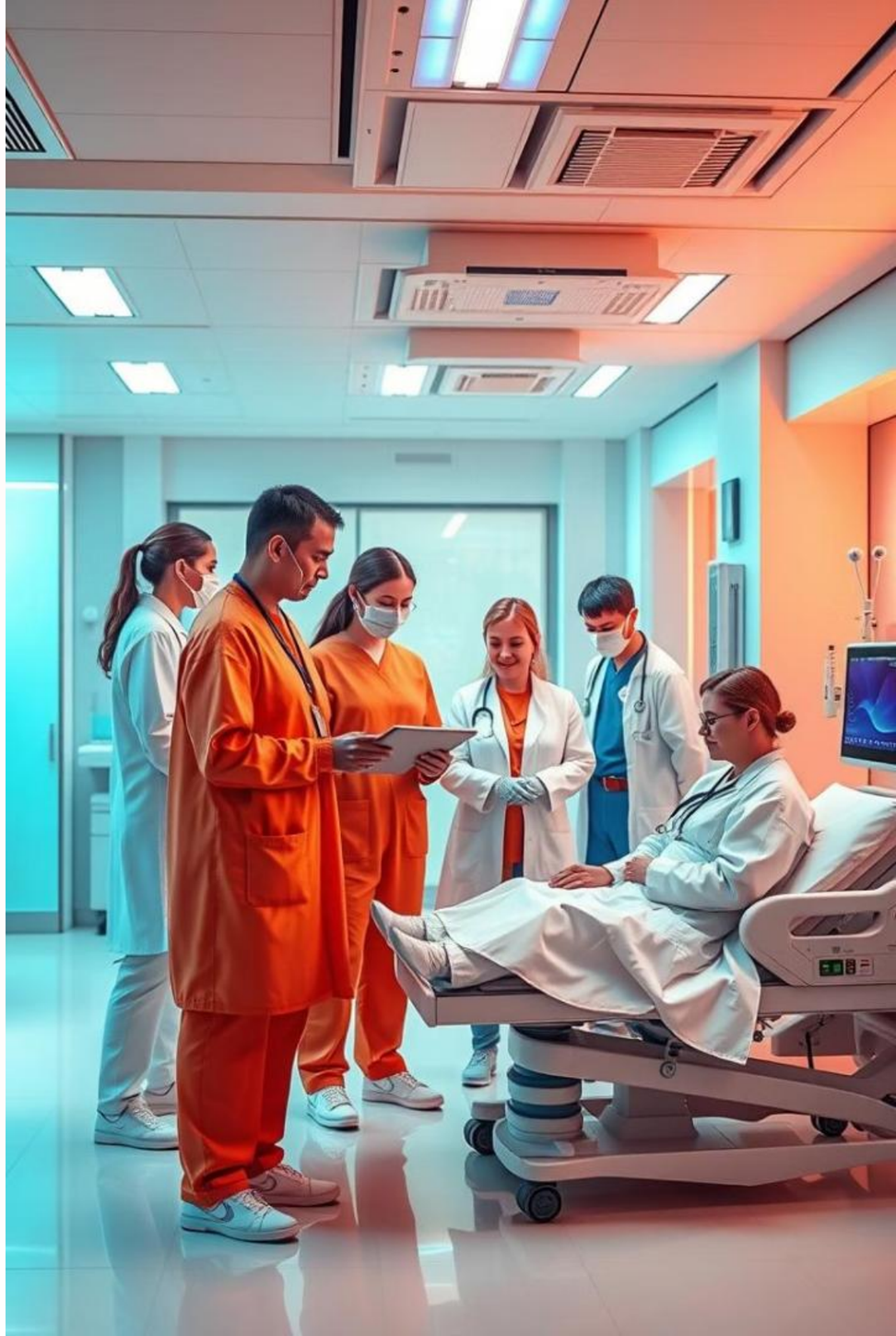
Better Clinical Outcomes

Leads to improved patient health and recovery rates.

Improved Patient Satisfaction

Enhances overall patient experience and trust.

NABH 6th Edition standards guide hospitals in delivering quality, safe, ethical, and accountable care amidst increasing healthcare demands. Hospitals must view accreditation as an ongoing journey towards patient-centric care and clinical excellence. Compliance fosters transparent communication, reduces hospital-acquired infections, improves clinical outcomes, and enhances patient satisfaction, crucial as India moves towards universal access and digital health.



Review of Literature: NABH Standards

This presentation provides a comprehensive review of literature concerning the National Accreditation Board for Hospitals and Healthcare Providers (NABH) standards in India. We will explore various studies focusing on methodology, results, conclusions, and references related to NABH accreditation, its impact on healthcare quality, and associated challenges.

Impact and Compliance of NABH Standards

First Study: NABH 5th Edition Analysis

This study conducts a critical review of the NABH 5th Edition standards, analyzing their components and progress through qualitative analysis. It compiles information from official documents and healthcare reports, evaluating different editions to emphasize patient safety and quality improvement.

The NABH 5th Edition, with ten chapters, 100 standards, and 651 objective components, ensures Indian hospitals maintain high patient safety and quality. It fosters continuous improvement and aligns with global best practices, improving patient safety and healthcare delivery.

Second Study: Impact on Healthcare Workers

Deepika Kanyal and Babaji Ghewade's 2023 study explores the impact of NABH standards on healthcare workers in a tertiary care hospital in India. It uses a cross-sectional approach to assess understanding of quality measures and staff adherence to NABH principles.

Results show over 80% of healthcare personnel felt NABH certification improved hospital services and operational procedures. Post-accreditation, 85% reported higher job satisfaction and more uniform procedures, improving clinical outcomes.

Challenges and Improvements in NABH Accreditation

Third Study: Gap Analysis

Dr. Jasmeen Bawa and Dr. Susmit Jain's 2017 study performed a gap analysis in a 200-bedded super specialty hospital. It found high compliance (>90%) in areas like preoperative tests but lower compliance in documentation (e.g., informed consent, progress notes) and staff training.

Fourth Study: Compliance Levels

Surendra Kumar and Rajesh Kumar Grover's 2019 study on a non-accredited specialty hospital found only 37% compliance with NABH paperwork criteria. While compliance was high (96%) where policies existed, it dropped to 15% without them. Staff felt overburdened and lacked consistent safety training.

Fifth Study: Barriers in Public Hospitals

Narinder Kumar et al.'s 2025 review identifies unique hurdles for public hospitals in achieving NABH accreditation, including financial constraints, staff shortages, and outdated infrastructure. It proposes solutions to guide policymakers and administrators in improving accreditation readiness.

Evaluating NABH 6th Edition Compliance at Jeevan Raksha Hospital

This presentation outlines a descriptive cross-sectional study conducted at Jeevan Raksha Hospital, Bikaner. The study aimed to assess the current adherence to the Core Elements of NABH 6th Edition standards, providing a comprehensive evaluation of quality standards implementation and identifying areas for improvement.

Study Design and Setting

Study Design

A descriptive cross-sectional approach was used to assess NABH 6th Edition compliance at Jeevan Raksha Hospital. This design allowed for a thorough evaluation of quality standards implementation by gathering data at a specific moment, offering insights into current procedures, strengths, and weaknesses.

Study Setting

The study was conducted at Jeevan Raksha Hospital, a 100-bed multispecialty secondary care facility in Bikaner, Rajasthan. The hospital is actively working towards implementing quality assurance programmes and preparing for NABH accreditation using the 6th edition requirements.

Methodology: Data Collection and Sampling

Study Duration

The study spanned three months, from 10 March to 31 May 2025.

Sample Size & Technique

50 patients and staff members were selected using a purposive sampling technique, ensuring direct involvement in NABH implementation, minimum 6 months experience, and prior exposure to NABH training or audits.

Data Collection

A mixed-methods approach combined quantitative (structured compliance checklist based on NABH 6th Edition Core Elements) and qualitative (semi-structured interviews and direct observations) methods for a holistic assessment.

Data Collection Methods

Quantitative Data Collection

A structured compliance checklist, based on NABH 6th Edition Core Elements, was used. It included measurable indicators across key functional areas like AAC, COP, MOM, PRE,IPC,PSQ, FMS, HRM, and IMS.

Qualitative Data Collection

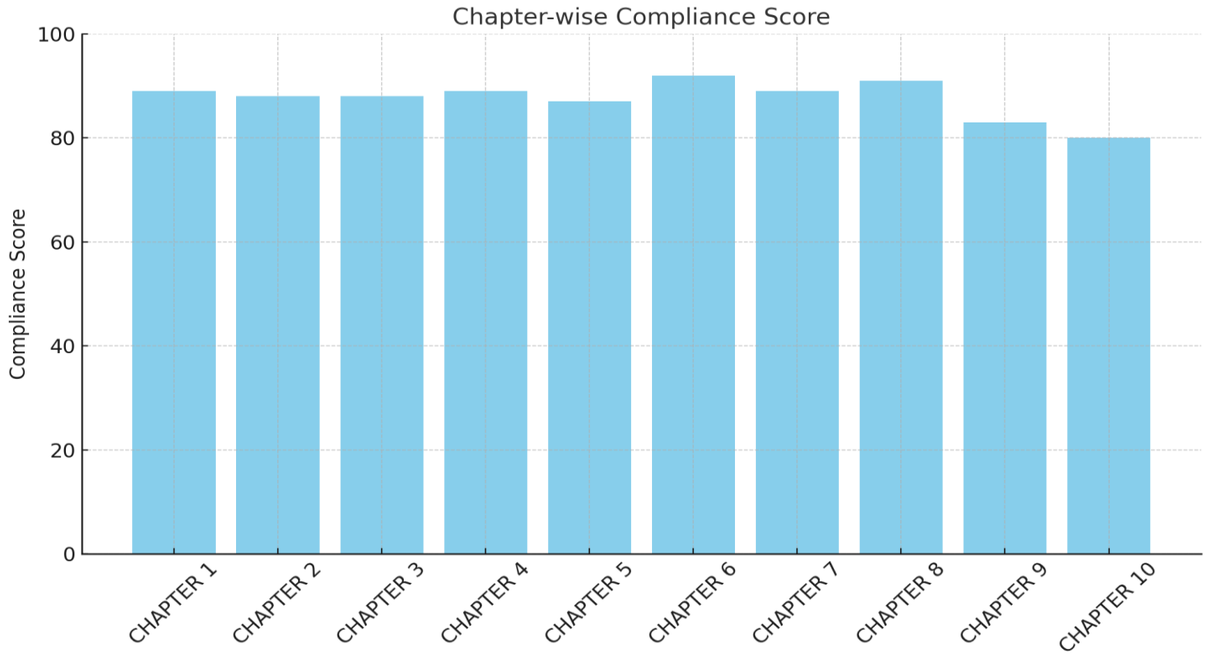
Open-ended questions and semi-structured interviews were conducted with selected staff. Direct, non-participant observations were also carried out during clinical handovers, staff meetings, and facility rounds to confirm procedures and gain behavioural insights.

Compliance Assessment and Analysis

Quantitative data was analysed using Microsoft Excel, scoring each compliance item from 1 (No Compliance) to 5 (Full Compliance). Qualitative analysis of interview transcripts and observation notes identified challenges, staff perceptions, and feedback, categorising themes to support quantitative trends. Objectivity was ensured through data triangulation and validation of compliance claims.

1	No Compliance	No systems in place; ≤20% compliance
2	Poor Compliance	Elementary systems; 21–40% compliance
3	Partial Compliance	Systems partially in place; 41–60% compliance
4	Good Compliance	Most systems in place; 61–80% compliance
5	Full Compliance	Systems fully implemented; 81–100% compliance

Key Findings and Conclusion



Chapter	Compliance Rate (%)
CHAPTER 1	90.00%
CHAPTER 2	89.23%
CHAPTER 3	89.23%
CHAPTER 4	90.00%
CHAPTER 5	89.23%
CHAPTER 6	95.00%
CHAPTER 7	90.00%
CHAPTER 8	92.73%
CHAPTER 9	82.50%
CHAPTER 10	79.09%

Compliance Rate Formula:

Compliance Rate (%) = (Total Score Obtained / Maximum Possible Score) × 100

The overall compliance rate across all chapters is **87.29%**

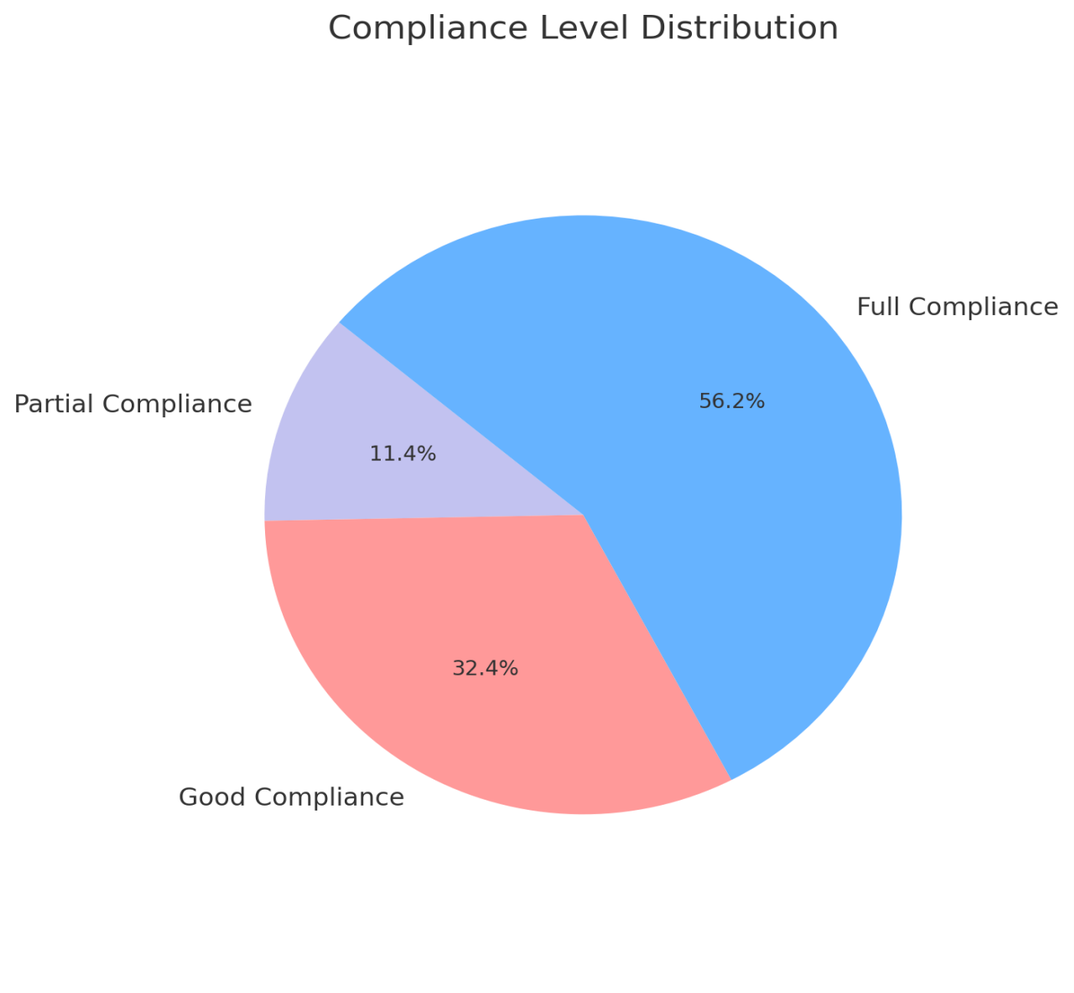
NABH Accreditation Standards: A Comprehensive overview

This presentation provides a comprehensive overview of the National Accreditation Board for Hospitals & Healthcare Providers (NABH) standards.

Jeevan Raksha Hospital demonstrated impressive compliance with NABH 6th Edition Core Objective Elements, with **55.34% full compliance** and **33.01% good compliance**. While **no poor or non-compliance cases** were found, **11.65% partial compliance** indicates areas for immediate improvement, particularly in documentation and human resource procedures. The hospital's strong commitment to patient safety and quality care provides a solid foundation for future advancements.

COMPLIANCE DISTRIBUTION AMONG 10 CHAPTERS

Compliance Level	Count
No Compliance	0
Poor Compliance	0
Partial Compliance	12
Good Compliance	34
Full Compliance	59



Key Recommendations

1

Target Areas

Identify root causes for "Poor" and "Partial" compliance standards.

2

Documentation

Strengthen protocols for consistent and timely record-keeping.

3

Internal Audits

Increase frequency to track compliance and apply corrective actions.

4

Capacity Building

Develop programs focusing on NABH standards and quality champions.

Continuous Improvement

Review SOPs

Update Standard Operating Procedures to NABH 6th edition.

Leadership Involvement

Engage top management in quality review meetings.

Plan for Full Compliance

Set quarterly targets to achieve optimal implementation.

References

1.National Accreditation Board for Hospitals & Healthcare Providers (NABH). “NABH Accreditation Standards for Hospitals, 6th Edition.” Quality Council of India, 2020. https://nabh.co

2.Quality Council of India (QCI). “Introduction to NABH Accreditation: Guidelines and Process.” Quality Council of India Publications, 2020.

3.Ghosh, S., & Aggarwal, R. (2019). “Impact of NABH Accreditation on Healthcare Quality: A Review.” International Journal of Health Systems and Implementation Research, 3(1), 15–22.

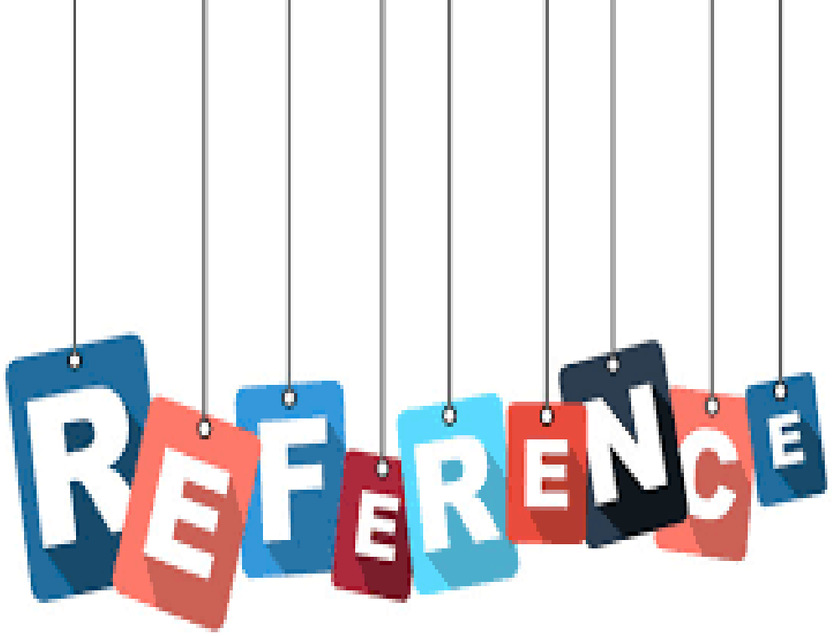
4.Rao, S. K., & Nair, A. (2021). “Implementation Challenges of NABH in Mid-Sized Hospitals: A Case-Based Review.” Journal of Hospital Administration, 8(4), 34–41. https://jha.sciedupress.com

5.Ministry of Health and Family Welfare, Government of India. “National Quality Assurance Standards (NQAS) for Public Health Facilities.” MoHFW, 2016. https://nhsrcindia.org

6.Rajesh, R., & Thomas, A. (2020). “Accreditation in Indian Healthcare: A Strategic Tool for Quality Improvement.” Journal of Healthcare Management, 12(2), 51–60.

7.NABH Self-Assessment Toolkit. Available through NABH portal to assist hospitals in internal audit.

8.Jeevan Raksha Hospital, Bikaner – Internal Documentation and Audit Reports (2025).

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