

# NABH Gap Analysis Report

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## Executive Summary

Total Clauses	10
Compliant	1
Partial	5
Non-Compliant	4

## Clause-wise Analysis

### IMS3 — PARTIAL (score: 0.25)

Decision: Mandatory blocks with no exact evidence: access\_control\_procedure  
Mandatory failures: access\_control\_procedure

Evidence Block	Score	Matched Signals
policy_statement	0.5	confidentiality
access_control_procedure	0.0	—
security_controls	0.25	electronic medical records

#### Exact Evidence Snippets

- policy\_statement:**
- “Information Management and Confidentiality”
  - “Patient health information is maintained with strict confidentiality”
- security\_controls:**
- “periodic access reviews, are implemented to safeguard electronic medical records”

### IMS4 — COMPLIANT (score: 0.4583)

Decision: All mandatory blocks have signal matches (weak matches in: destruction\_process)

Evidence Block	Score	Matched Signals
retention_policy	0.67	retention period, record retention
destruction_process	0.25	shredding

#### Exact Evidence Snippets

- retention\_policy:**
- “Records exceeding the retention period are disposed of securely through shredding in”
  - “Record Retention and Disposal”
- destruction\_process:**
- “Records exceeding the retention period are disposed of securely through shredding in”

### CQ11 — PARTIAL (score: 0.3333)

Decision: Mandatory blocks with no exact evidence: data\_collection  
Mandatory failures: data\_collection

Evidence Block	Score	Matched Signals
indicator_defined	0.33	indicator

data_collection	0.0	—
analysis	0.33	review
corrective_action	0.67	preventive action, improvement

#### Exact Evidence Snippets

##### *indicator\_defined:*

- “Key performance indicators are identified”

##### *analysis:*

- “reviewed to ensure readiness”
- “periodic access reviews, are implemented to safeguard electronic medical records”
- “and discussed during review meetings”

##### *corrective\_action:*

- “Corrective and preventive actions are initiated where”
- “Continuous Quality Improvement”
- “A formal Quality Improvement Program is operational”

### HRM2a — **NON\_COMPLIANT** (score: 0.4293)

Decision: Mandatory blocks lack sufficient exact evidence (semantic evidence detected)

Mandatory failures: **job\_descriptions**, **employee\_records**

Evidence Block	Score	Matched Signals
job_descriptions	0.49	—
employee_records	0.25	—
grievance_mechanism	0.67	grievance, disciplinary

#### Exact Evidence Snippets

##### *grievance\_mechanism:*

- “A grievance redressal mechanism is in place, and disciplinary procedures are”

#### Semantic Evidence (semantic-only: **job\_descriptions**, **employee\_records**)

##### *job\_descriptions:*

- “Roles and responsibilities are formally documented for all categories of staff”

##### *employee\_records:*

- “Roles and responsibilities are formally documented for all categories of staff”

### AAC2 — **PARTIAL** (score: 0.1333)

Decision: Mandatory blocks with no exact evidence: registration\_process (weak but present: two\_identifiers)

Mandatory failures: **registration\_process**

Evidence Block	Score	Matched Signals
registration_process	0.0	—
two_identifiers	0.33	two identifiers
admission_time_defined	0.0	—

#### Exact Evidence Snippets

##### *two\_identifiers:*

- “At the time of registration, patient identity is verified using at least two identifiers, such as full”

### COP2 — **NON\_COMPLIANT** (score: 0.1666)

Decision: Mandatory blocks lack sufficient exact evidence

Mandatory failures: **emergency\_procedure**

Evidence Block	Score	Matched Signals
emergency_procedure	0.0	—
mlc_handling	0.33	medico legal case
ambulance_procedure	0.33	ambulance services

#### Exact Evidence Snippets

**ambulance\_procedure:**

- “Ambulance services are available, and vehicle maintenance records are periodically”

### **COP3 — *NON\_COMPLIANT* (score: 0.1667)**

Decision: Mandatory blocks lack sufficient exact evidence

Mandatory failures: indication\_defined, consent\_obtained, monitoring\_documented

Evidence Block	Score	Matched Signals
indication_defined	0.0	—
consent_obtained	0.0	—
monitoring_documented	0.0	—
reaction_reporting	0.67	adverse transfusion reaction

#### **Exact Evidence Snippets**

**reaction\_reporting:**

- “Any adverse transfusion reactions are recorded and reported as per”

#### **Semantic Evidence**

**reaction\_reporting:**

- “established reporting mechanisms”

### **MOM1 — *NON\_COMPLIANT* (score: 0.2892)**

Decision: Mandatory blocks lack sufficient exact evidence (semantic evidence detected)

Mandatory failures: procurement, storage, prescription

Evidence Block	Score	Matched Signals
procurement	0.0	—
storage	0.0	—
prescription	0.49	—
dispensing	0.67	dispensing of medication

#### **Exact Evidence Snippets**

**dispensing:**

- “prescription, and dispensing of medications”

#### **Semantic Evidence (semantic-only: prescription)**

**prescription:**

- “prescription, and dispensing of medications”

**dispensing:**

- “prescription, and dispensing of medications”

### **HIC1 — *PARTIAL* (score: 0.5)**

Decision: Mandatory blocks below threshold: universal\_precautions, bmw\_management

Mandatory failures: bmw\_management

Evidence Block	Score	Matched Signals
infection_control_manual	1.0	infection control manual
universal_precautions	0.33	hand hygiene
bmw_management	0.0	—

#### **Exact Evidence Snippets**

**infection\_control\_manual:**

- “A comprehensive infection control manual outlines sterilization”

**universal\_precautions:**

- “practices, hand hygiene protocols, and standard precautions”

#### **Semantic Evidence**

**infection\_control\_manual:**

- “Infection Prevention and Control”

## FMS1 — **PARTIAL** (score: 0.7048)

Decision: Mandatory blocks below threshold: fire\_safety\_plan (semantic evidence detected)

Mandatory failures: fire\_safety\_plan

Evidence Block	Score	Matched Signals
fire_safety_plan	0.49	—
emergency_plan	0.67	emergency response plan, emergency preparedness
equipment_maintenance	1.0	breakdown maintenance

### Exact Evidence Snippets

**emergency\_plan:**

- “Emergency response plans, including”

**equipment\_maintenance:**

- “Preventive and breakdown maintenance schedules”

### Semantic Evidence (semantic-only: fire\_safety\_plan)

**fire\_safety\_plan:**

- “Fire detection and alarm systems are installed, and”

**equipment\_maintenance:**

- “preparedness, and equipment maintenance”

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## Consultant Recommendations

The following actionable improvements are suggested based on the gaps identified above.

### IMS3 Improvement Plan

Improve access control procedures to ensure confidentiality, security, and authorized access to patient records.

*Required Documents:*

- Access Control Policy
- Access Control Procedure

*Operational Controls:*

- Implement access control software
- Define roles and permissions

**Audit Tip:** Verify access logs and audit trails to ensure compliance.

### CQI1 Improvement Plan

Enhance quality indicator collection and analysis to implement corrective actions.

*Required Documents:*

- Quality Indicator Policy
- Data Collection Procedure

*Operational Controls:*

- Define quality indicators
- Establish data collection schedule

**Audit Tip:** Verify data collection and analysis reports to ensure compliance.

### HRM2a Improvement Plan

Develop and maintain job descriptions and employee records to ensure clear roles and secure employee information.

*Required Documents:*

- Job Description Policy
- Employee Record Policy

*Operational Controls:*

- Create job descriptions
- Maintain employee records

**Audit Tip:** Verify job descriptions and employee records to ensure compliance.

### **AAC2 Improvement Plan**

Implement a defined patient registration process with at least two unique identifiers.

*Required Documents:*

- • Patient Registration Policy
- • Registration Procedure

*Operational Controls:*

- Define registration process
- Implement two-identifier system

**Audit Tip:** Verify patient registration records to ensure compliance.

### **COP2 Improvement Plan**

Develop and maintain procedures for handling emergencies and medico-legal cases.

*Required Documents:*

- • Emergency Procedure Policy
- • Medico-Legal Case Handling Procedure

*Operational Controls:*

- Develop emergency procedures
- Establish medico-legal case handling process

**Audit Tip:** Verify emergency and medico-legal case handling records to ensure compliance.

### **COP3 Improvement Plan**

Develop and maintain procedures for blood transfusions, including indications, consent, monitoring, and reaction reporting.

*Required Documents:*

- • Blood Transfusion Policy
- • Blood Transfusion Procedure

*Operational Controls:*

- Develop blood transfusion procedures
- Establish monitoring and reporting processes

**Audit Tip:** Verify blood transfusion records to ensure compliance.

### **MOM1 Improvement Plan**

Develop and maintain procedures for medication procurement, storage, and prescription.

*Required Documents:*

- • Medication Procurement Policy
- • Medication Storage Procedure
- • Prescription Policy

*Operational Controls:*

- Develop medication procurement and storage procedures
- Establish prescription process

**Audit Tip:** Verify medication procurement, storage, and prescription records to ensure compliance.

### **HIC1 Improvement Plan**

Implement infection control practices, universal precautions, and biomedical waste management.

*Required Documents:*

- • Infection Control Policy
- • Universal Precautions Procedure
- • Biomedical Waste Management Procedure

*Operational Controls:*

- Implement infection control practices
- Establish universal precautions
- Develop biomedical waste management plan

**Audit Tip:** Verify infection control, universal precautions, and biomedical waste management records to ensure compliance.

### ***FMS1 Improvement Plan***

Develop and maintain plans for fire safety, emergencies, and equipment maintenance.

*Required Documents:*

- • Fire Safety Plan Policy
- • Emergency Procedure Policy
- • Equipment Maintenance Procedure

*Operational Controls:*

- Develop fire safety plan
- Establish emergency procedures
- Establish equipment maintenance schedule

**Audit Tip:** Verify fire safety, emergency, and equipment maintenance records to ensure compliance.