

# NABH Gap Analysis Report

Source document: **Sample\_Hospital\_Policy\_and\_Procedures\_Manual.pdf**  
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## Executive Summary

Total Clauses	4
Compliant	0
Partial	3
Non-Compliant	1

## Clause-wise Analysis

### IMS3 — **PARTIAL** (score: 0.3833)

Decision: All mandatory blocks have evidence but clause\_score 0.3833 < 0.7

Evidence Block	Score	Matched Signals
policy_statement	0.5	confidentiality
access_control_procedure	0.33	role based access
security_controls	0.25	electronic medical records

#### Evidence Snippets

- policy\_statement:**
- “1 Confidentiality of Medical Records”
- security\_controls:**
- “Electronic medical records are protected through role-based access controls”

### IMS4 — **NON\_COMPLIANT** (score: 0.0)

Decision: 2 mandatory blocks have zero matches: retention\_policy, destruction\_process  
Mandatory failures: retention\_policy, destruction\_process

Evidence Block	Score	Matched Signals
retention_policy	0.0	—
destruction_process	0.0	—

### CQI1 — **PARTIAL** (score: 0.5)

Decision: Chain incomplete — weak evidence in: data\_collection, analysis (below threshold 0.5)

Evidence Block	Score	Matched Signals
indicator_defined	0.67	quality indicator, indicator
data_collection	0.33	monitoring
analysis	0.33	review
corrective_action	0.67	corrective action, improvement

#### Evidence Snippets

- indicator\_defined:**
- “1 Monitoring of Quality Indicators”
  - “The hospital monitors selected quality indicators to assess service efficiency and patient experience”

- “Key indicators”

**data\_collection:**

- “management, quality monitoring, and human resource practices”
- “Quality Monitoring and Improvement (CQI)”
- “1 Monitoring of Quality Indicators”

**analysis:**

- “Relevant data is periodically reviewed by”
- “Quality-related data is collected and reviewed to identify opportunities for improvement”
- “Note: This document represents internal policy documentation and is subject to periodic review and updates as part”

**corrective\_action:**

- “Corrective actions may be”
- “Quality Monitoring and Improvement (CQI)”
- “Quality-related data is collected and reviewed to identify opportunities for improvement”

## HRM2a — **PARTIAL** (score: 0.4)

Decision: Mandatory blocks with no evidence: job\_descriptions

Mandatory failures: job\_descriptions

Evidence Block	Score	Matched Signals
job_descriptions	0.0	—
employee_records	1.0	employee record, staff file, qualification document, leave record
grievance_mechanism	0.0	—

### Evidence Snippets

**employee\_records:**

- “1 Employee Records”
- “The hospital maintains individual staff files for all employees”
- “Staff leave records are also maintained by the administration”