

immediately take actions within maximum of (30) days to refrain from using the CBAHI logo, accreditation certificate and seal. Failure to comply with the specified time frame might subject the hospital to the appropriate decision according to the policy on accreditation suspension and revocation.

## Release of Accreditation-Related Confidential Information

CBAHI acknowledges that hospitals undergoing its accreditation survey are expected to provide access to information related to the evaluation of their conformance to the CBAHI standards.

As a guiding policy, CBAHI commits to healthcare facilities engaged in its different accreditation programs that all information obtained or received during the accreditation process will be kept confidential, including all survey data and information that surveyors come across during the survey process.

For a hospital that is a participating member of the CBAHI accreditation program, some information is subject to public release, which includes:

- The hospital accreditation status being posted on CBAHI website.
- The areas of the hospital which were included in the accreditation survey.
- The standards under which the accreditation survey was conducted.

Other accreditation-related information is not subject to public release except to the hospital in question. The exception to this rule is when CBAHI receives an official request for clarification from relevant health authorities or public health agencies. Information includes:

- The mock and final accreditation survey reports.
- Accreditation Committee minutes and agenda materials.
- The notification letter of the survey report to the hospital director.
- The accreditation certificate.
- The post-survey requirements including any CAPs or SPRs.
- The result of investigations related to a sentinel event including the root cause analysis prepared in response to that event.
- The result of investigations involving any falsified information provided to CBAHI by the hospital.
- Any other information related to compliance with CBAHI standards that is obtained from the hospital before, during, or following the accreditation survey.

## Complaints against Accredited Hospital

CBAHI is interested to collect information from a variety of sources to improve the quality and safety in all accredited hospitals. One of these sources is complaints from patients, their families, the hospital staff, government agencies, media and the public. In particular, staff members at any given hospital accredited by CBAHI must be informed that they may make a complaint directly to CBAHI without fear of retaliatory actions from their hospital.

CBAHI addresses all complaints that would help identify possible noncompliance with its accreditation standards, and consequently, a possible threat to the safety of patients, staff, or public. To be more precise, CBAHI can only evaluate complaint information in terms of its relevance to compliance with its standards. Issues of personal nature or individual disputes should be dealt with by the concerned facility or the regional health authority. CBAHI also cannot follow up on complaints about hospitals that it does not accredit.