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Abbreviations	Terminology
AAC	Access, Assessment, and Continuity of Care
AELC	AYUSH Entry Level Certificate
ASQua	Asian Society for Quality in Healthcare
CGHS	Central Government Health Scheme
СОР	Care of Patients
CQI	Continuous Quality Improvement
DA	Desktop Assessment
DPIIT	Department for Promotion of Industry and Internal Trade
ECHS	Ex-Servicemen Contributory Health Scheme
FMS	Facility Management and Safety
НСО	Healthcare Organisations
HIC	Hospital Infection Control
HRM	Human Resource Management
IMS	Information Management System
IPD	In-Patient Department
ISQua	International Society for Quality in Health Care
MOM	Management of Medication
NABCB	National Accreditation Board for Certification
NABET	National Accreditation Board for Education and Training
NABH	National Accreditation Board for Hospitals and Healthcare
NABL	National Accreditation Board for Testing and Calibration Laboratories
NBQP	National Board for Quality Promotion
NC	Non-Compliance(s)
OPD	Out-Patient Departments
PRE	Patient Rights and Education
QCI	Quality Council of India
ROM	Responsibilities of Management

1. About the Organisation

1.1. Quality Council of India (QCI)

Established in 1997 through a Cabinet decision of the Government of India (GoI) – QCI is an autonomous organisation under the Department for Promotion of Industry and Internal Trade (DPIIT), Ministry of Commerce and Industry. It was established as the national body for accreditation and quality promotion in the country. The Council was established to provide a credible, reliable mechanism for third-party assessment of products, services, and processes which is accepted and recognized globally.

1.2. Accreditation Boards of QCI

- a) National Accreditation Board for Hospitals and Healthcare Providers (NABH)
- b) National Accreditation Board for Certification Bodies (NABCB)
- c) National Accreditation Board for Testing and Calibration Laboratories (NABL)
- d) National Accreditation Board for Education and Training (NABET)
- e) National Board for Quality Promotion (NBQP)

1.3. National Accreditation Board for Hospitals & Healthcare Providers (NABH)

NABH is a constituent board of QCI, set up to establish and operate accreditation and other allied programs for healthcare organisation. The mission of NABH is to operate accreditation and allied programs in collaboration with stakeholders focusing on patient safety and quality of healthcare by adopting various national and international best practices.

<u>Global Recognition:</u> NABH is an Institutional Member as well as a Board member of the International Society for Quality in Health Care (ISQua) and on the board of the Asian Society for Quality in Healthcare (ASQua).

1.3.1. NABH Program and Activities

Accreditation- NABH accreditation is aimed at establishing a common framework for healthcare Organisations to demonstrate and practice compliance with patient safety protocols. NABH is operating various accreditation programs for Hospitals, Small healthcare organisation, Blood Bank, Blood Storage Centre, Medical Imaging Services, Dental Facilities/Dental Clinics, Oral Substitution Therapy Centre, Allopathic Clinic, AYUSH Hospitals, Community Health Care, Primary Health Care, Wellness Centre, Clinical Trial (Ethics Committees), Panchkarma Clinic, Eye Care Organisation and Integrated Rehabilitation Centres for Addicts.

Certification- NABH is operating various certification programs such as Entry-Level Hospitals, Entry-Level SHCO, Entry-Level AYUSH Hospitals, Entry-Level AYUSH Centres, Nursing Excellence, Medical Laboratory Program, and Standards for Emergency Department in Hospitals.

Empanelment- A network of ECHS and CGHS empanelled hospitals can also apply for NABH accreditation to provide Quality Medicare to beneficiaries and their dependents. As per the empanelment protocols, the accreditation helps the hospitals to ensure cashless transactions, as far as possible, for the patients.

Training and Education- NABH conducts various awareness and educational workshops such as Programme on Implementation of NABH Standards for Hospitals, Programme on Implementation of NABH Standards for Blood Bank, Programme on Implementation of NABH Standards for Nursing Excellence Certification, Programme on Implementation of NABH Standards for Entry-Level Hospital, etc.

1.3.2. Why NABH?

It is a national accreditation body aimed to ensure that healthcare Organisations are providing quality care and high-quality services to the patients. An accreditation status through NABH provides a marketing advantage in the competitive healthcare sector by simultaneously strengthening the hospital's functioning. It provides an opportunity for the hospital to benchmark its services with global standards and increase patient footfall and have a share of the growing medical tourism market in India. NABH Accreditation and Certification Program set the highest benchmarks of hospital operations at all levels and across functions as per the globally accepted norms. The standards provide a framework for quality care of patients and necessary improvements in hospitals by systemizing the hospital operations and protocols. It evaluates all the aspects of the hospital with a comprehensive approach before accreditation resulting in continuous improvement and enhanced productivity.

1.3.3. Benefits of NA32BH Certification and Accreditation

Patients - Patients are the biggest beneficiaries among all the stakeholders as certification results in high quality of care and patient safety and ensures the whole system is patient-centric.

Healthcare Organisation- Certification to a healthcare organisation stimulates continuous improvement. It enables the Organisation to demonstrate a commitment to quality care. It raises community confidence in the services provided by the health care Organisation. It provides an opportunity for the healthcare units to benchmark with the best and benefits from financial incentives given under various government schemes to such accredited hospitals.

Healthcare Staff- It improves the overall professional development of the hospital staff and provides leadership for quality improvement in various techniques. It also creates a good working environment where the staff can continuously learn and take ownership of their roles and responsibilities.

Regulatory Bodies- Certification provides access to reliable and certified information on facilities, infrastructure, and level of care, which can be used by insurance Organisations and other third parties, thus, reducing uncertainties while making a public decision and getting assurance about the capabilities of the healthcare Organisation.

2. Accreditation Overview

2.1. What is Accreditation?

It is a process to measure the performance of an Organisation against a set of nationally recognized, practice-focused, and evidence-based standards. The process of validation is a series of steps carried out to measure the quality of the Organisation's functions and services and is valid only for a specified period. The goal is continuous development, quality improvement, and the overall performance of the Organisation.

2.2. About Healthcare Accreditation

National Accreditation System for hospitals ensures that hospitals and healthcare Organisations, whether public or private, play their expected roles in the National Healthcare Ecosystem by complying with the highest standards of the Accreditation Body. It is a mechanism to enhance and maintain the quality of healthcare services across all departments of a healthcare Organisation. In India, Healthcare System operates in an environment of rapid social, economical, and technical developments and raises concerns on the quality of healthcare. Therefore, an assurance by the Accreditation Body helps in creating accountability of healthcare Organisations among its stakeholders and making them more receptive with the trust of improved services.

2.3. Role of Accreditation Bodies

Accreditation bodies, such as NABH, provide quality assurance inpatient and Organisation-centric activities of healthcare institutions. As a result, there has been an interest and willingness to opt for accreditation due to multiple benefits and recognition of quality service in the healthcare sector. Also, various market forces such as medical tourism, insurance services, a growing pool of private healthcare institutions, and rising competition have pushed healthcare Organisations to obtain the highest industrial standards. Thus, it ensures that the investment is put to the best use possible, by creating a differentiating factor in the industry.

3. Entry-Level Certification Program

3.1. Difference between AYUSH NABH Accreditation and Entry-Level Certification

Accreditation

NABH has designed an exhaustive list of healthcare standards for AYUSH hospitals. The AYUSH Hospital Accreditation standard encompasses relevant & comprehensive quality assurance standards for each system i.e., Ayurveda, Yoga and Naturopathy, Unani, Siddha, Homoeopathy Hospitals.

Entry-Level Certification

As numerous hospitals were facing challenges and difficulties in implementing the complete AYUSH Accreditation Standards as per the system provided by them, therefore, NABH has developed an Entry Level Certification program with simplified and comprehended objective elements for all the system of AYUSH, in consultation with various stakeholders in the country, as a stepping stone for enhancing the quality of patient care and safety in AYUSH Systems. It could also be a first step towards AYUSH NABH Accreditation.

3.2. About AELC – AYUSH Entry Level Certification Portal

A combined approach of various individual medical systems existed in India. These combined systems approach involves various medical systems which have followed a non-conventional yet crucial path in Indian Medical ecosystem. AYUSH consisting of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homeopathy is based on definite medical philosophies with holistic approach of health, disease and treatment. In order to widen the strength of these systems in terms of curative, preventive, promotive aspects of health care, there is an urgent need to ensure quality based approach which is not only effective but efficient for AYUSH systems.

QCI has launched a new platform for the AYUSH Entry-Level Certification (AELC) program to bring comprehensive digitalization of entire process. It is a multifarious platform for the certification process of AYUSH Organisations keeping all the systems as an integral approach.

With this portal, AYUSH organisations are distinguished as **Hospitals** or **Centres** both having their unique set of differences.

Hospital- AYUSH Healthcare Organisations with In-Patient Department (IPD) Services

Centre: AYUSH Healthcare Organisations with only Out-Patient Department (OPD) Services or Day Care Clinics.

The complete certification process includes registration, documentation and fee submission followed by Desktop, On-Site Assessment and Committee Review using a technology-based platform that will provide complete information about the simplified certification process, requirements, and compliances. It incorporates a guidebook, presentations and documents.

3.3. Benefits of Portal

The assessment for the certification encompassing desktop and on-site assessment followed by

committee review would be done using this technology platform. Each standard is evaluated based on a series of questions that are verified using relevant documents or geo-tagged and geostamped photographs to measure the compliance status. The use of technology efforts will ensure that the assessment process is transparent and efficient as compared to the traditional ways of manual certification.

4. AELC – AYUSH Entry-Level Certification

4.1. Outline of the Questionnaire

Hospitals

AYUSH Hospital Entry Level Certification Process is based on the NABH standards that comprise of 10 chapters. As part of the AYUSH program, the Entry Level Certification Questionnaire for AYUSH hospitals are formulated to make it simpler and has been drafted based on the objective element given in the aforementioned NABH standards. The standards are detailed below-

Patient centered Standards

Chapter	Description	
Access, Assessment, and Continuity of Care (AAC)	The chapter lays down key safety and process elements that the AYUSH Hospital should meet, in the continuum of the patient care within the hospital and till discharge.	
Care of Patients (COP)	This chapter aims to guide and encourage patient safety as the overall principle for providing care to patients. Patients in the Emergency Department are provided urgent care including ambulance services in consonance with their clinical requirements.	
Management of Medication (MOM)	The hospital has a safe and organized process of administration of medication/intervention. The hospital should have a mechanism to ensure that the emergency medication/intervention is standardized throughout the hospital, readily available, and replenished on time.	
Patient Rights and Education (PRE)	The Hospital should define the patient and family's rights and responsibilities. Also, the staff should be trained to protect patient rights and patients are informed of their rights and educated about their responsibilities at the time of admission.	
Hospital Infection Control (HIC)	The standards guide the provision of an effective infection control program in the Organisation. Their program should be documented and aimed at reducing/eliminating infection risks to patients, visitors, and providers of care while proactively monitoring its adherence.	

Chapter	Description
Continuous Quality Improvement (CQI)	The quality and safety programme should be documented and involve all areas of the hospital and all staff members. The hospital should identify and collect data on Clinical and Managerial structures, processes and outcomes.
Responsibilities of Management (ROM)	The standards encourage the governance of the hospital in a professional and ethical manner. The hospital ensures that patient-safety and risk-management issues are an integral part of patient care and hospital management.
Facility Management and Safety (FMS)	The standards guide the provision of a safe and secure environment for patients, their families, staff and visitors. To ensure this, the Organisation conducts regular facility inspection rounds and takes the appropriate action to ensure safety.
Human Resource Management (HRM)	The goal of human resource management is to acquire, provide, retain and maintain competent people in right numbers to meet the needs of the patients and community served by the Organisation.
Information Management System (IMS)	The chapter emphasizes the requirements of a medical record in the hospital as it is an important aspect of continuity of care and communication between the various care providers. The hospital will lay down policies and procedures to guide the contents, storage, security, issue and retention of medical records.

Centre

AYUSH Centre Entry Level Certification Process is based on the NABH standards that comprise 8 chapters. As part of the AYUSH program, the Entry Level Certification Questionnaire for the AYUSH centre has been formalized to make it simpler and has been drafted based on the objective element given in the aforementioned NABH standards. The standards are detailed below-

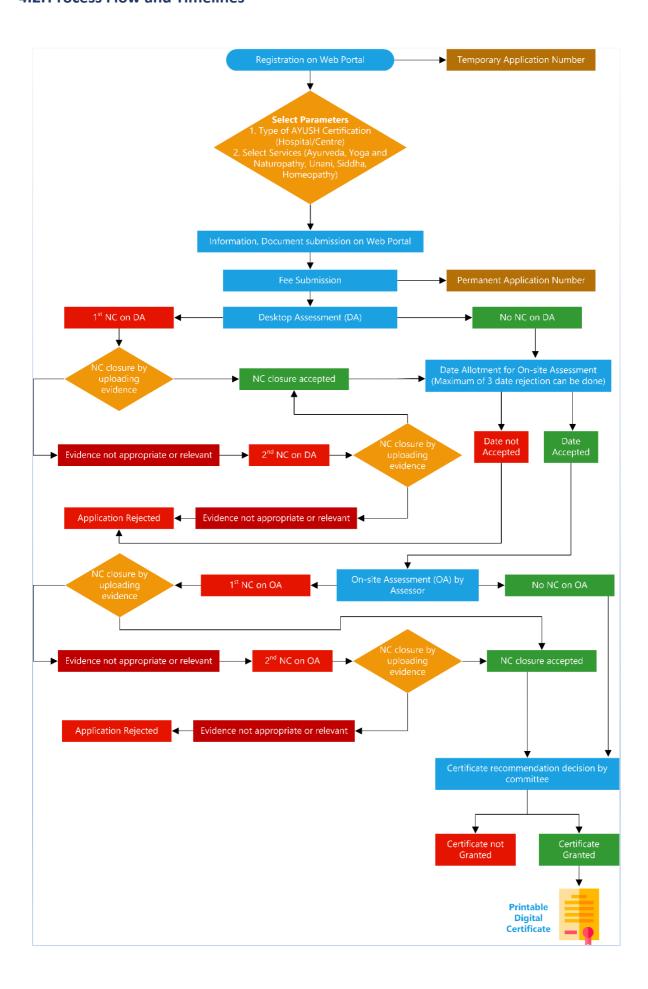
Patient centered standards

Chapter	Description
Access, Assessment and Continuity of Care (AAC)	The chapter lays down key safety and process elements that the AYUSH Centre should meet, in the continuum of the patient care while the OPD consultation process.
Care of Patients (COP)	This chapter aims to guide and encourage patient safety as the overall principle for providing care to patients. Patients requiring emergency services must provide urgent care including in consonance with their clinical requirements.
Infection Control (IC)	The standards guide the provision of an effective infection control programme in the organisation. Their programme should be documented and aimed at reducing/eliminating infection risks to patients, visitors and providers of care while proactively monitoring its adherence.
Patient Rights and Education (PRE) The Centre should define patient and family responsibilities. Also, the staff should be trained patient rights and patients are informed of their educated about their responsibilities at the admission.	

Organisation centered standards

Chapter	Description
Continuous Quality Improvement (CQI)	The quality and safety programme should be documented and involve all areas of the centre and all staff members. The centre should identify and collect data on Clinical & Managerial Structures, Processes and Outcomes.
Responsibilities of Management (ROM)	The standards encourage the governance of the centre in a professional and ethical manner. The centre ensures that patient-safety and risk-management issues are an integral part of patient care and centre management.
Facility Management and Safety (FMS)	The standards guide the provision of a safe and secure environment for patients, their families, staff and visitors. To ensure this, the Organisation conducts regular facility inspection rounds and takes the appropriate action to ensure safety.

4.2. Process Flow and Timelines



#	Stage	Timeline (Days)
1	Registration	
2	Specialties Selection	
3	Application in Progress 30	
4	Fee Submission	
5	Payment Completed	
6	DA NC Reply-1	30
7	DA NC Reply-2	30

4.3. Registration

AYUSH Organisation can register online on www.aelc.nabh.co. It is an OTP based registration process to verify the entered Mobile Number and E-mail ID. An account will be created after filling the user registration form and OTP. User can log in with the username and password received on their registered email ID and has to submit all the required details through a web portal followed by the payment of the fee. The details entered by the applicant for and after the registration on the website cannot be edited once submitted. Applicants must make sure that the details are filled accurately, after submission they will be non-editable.

4.4. Fee Submission

The fee to be submitted by AYUSH Hospitals (Organisations with IPD Facilities) or AYUSH Centres (Organisations with OPD/ Day Care Services only) is as follows:

- Hospitals Entry Level Certification Fee
 - o Less than and equal to 50 beds = Rs 21000 + GST
 - More than and equal to 51 beds =Rs 52000 + GST
- Centres Entry Level Certification Fee =Rs 11000 + GST

4.5. Desktop Assessment

Desktop Assessment of the registered applications will be done online through a web portal by the assessor. Assessor will raise NCs in case of insufficiency, discrepancy or incorrect data uploaded. Applicant will have a specified timeline to respond against all the raised Non-Compliance(s) through the portal by providing satisfactory reasons and evidences of conformity. The Assessor will verify all the replies within a specific period of time.

4.6. On-Site Assessment

After closing all non-compliance(s) generated at the DA stage, HCOs will be moved to the next stage of on-site assessment followed by the assessment planning that includes acceptance of date for Assessment.

*Only 3 chances for selecting the date of assessment shall be provided to the applicant.

Post acceptance of date by the applicant, On-Site Assessment will be done by the assessor. The final quality check of the assessment will be done by the experts and NCs (if any) will be raised for any clarifications, non-conformities or missing pieces. Applicant will be having a defined time to close all the NCs.

4.7. Reply to NCs

Post on-site assessment, the applicant has to reply for all the raised NCs against the nonconformities found during On-Site Assessment. The replies can be submitted by the applicant through the Mobile Application with geo-tagged images. In case the applicant is not able to provide the correct evidences for the closure of NCs than the application will get reject and they will have to reapply with same application for the certification process.

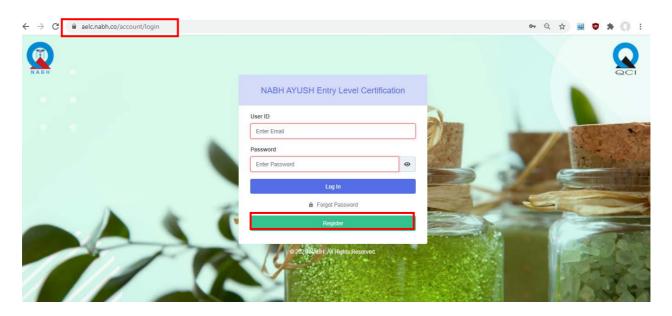
4.8. Certification Committee Review

The application will be sent to the Certification Committee after the closure of all the NCs submitted by the applicant. Committee will review all the parameters related to Scopes provided by the applicant under AYUSH system. The final decision taken by the committee for issue or rejection of certificate will be notified to the applicant. A Digital certificate will be provided after clearing the final stage of assessment.

5. AELC Portal- AYUSH Entry Level Certification Portal Procedure

5.1. Registration steps on the web portal

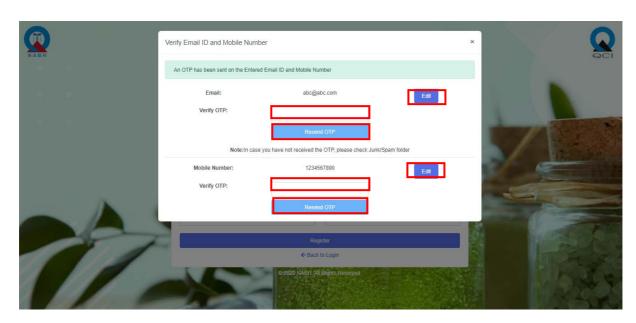
Step 1: Go to www.aelc.nabh.co for AYUSH Entry Level Portal. Click on the "Register" tab.



Step 2: Fill in all the details. Then click the "Register" button.

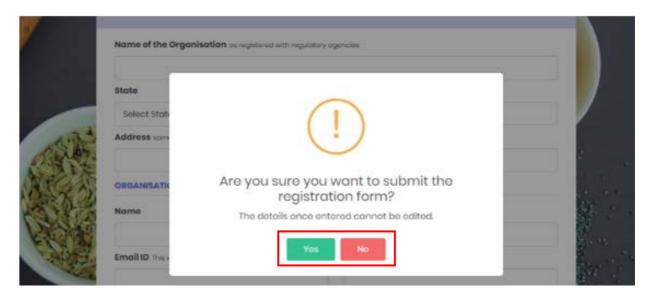


Step 3: Enter the OTP received on registered E-mail and Mobile Number. Applicant can edit the mail id or contact number in case wrong input is put at registration form by clicking at "Edit" Button.



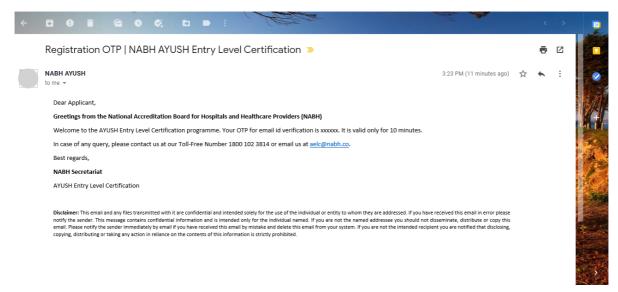
^{*}Kindly check the Spam/Junk Folders of the registered email id. User can also request for new OTP if OTP is not received within 10 minutes by clicking at "Resend OTP" Button.

Step 4: After OTP verification, a message will pop-up asking for confirmation to submit the form, click Yes' if details filled are correct, or Click 'No' to edit details



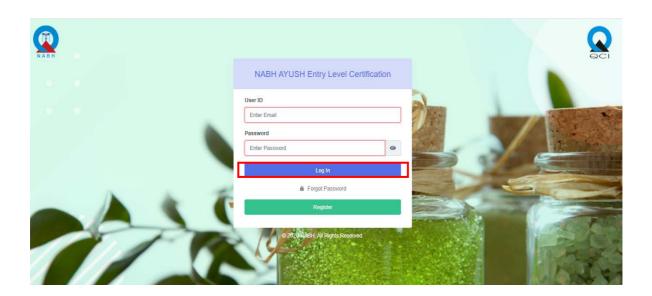
Note: Details cannot be changed once the form is submitted

Step 5: Applicant will receive User ID and Password for Log-in on the registered E-mail ID.

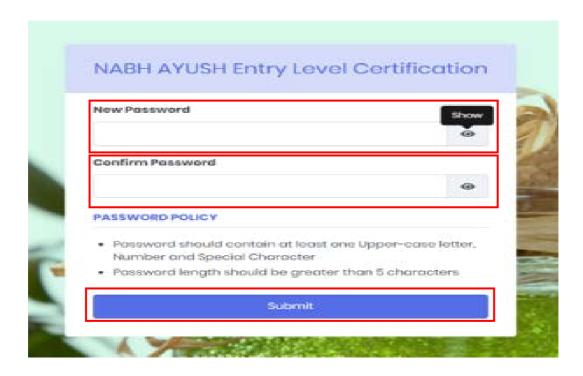


5.2. Specialties Selection Steps

Step 1: Go to www.aelc.nabh.co enter the credentials received on E-mail and click on "Log In" button.



Step 2: The applicant has to change the password after they log in to the portal for the 1st time. Enter and Confirm the desired password as per the password policy mentioned and click on "Submit" button.



Step 3: After changing the password, the page for specialties selection page will be displayed.

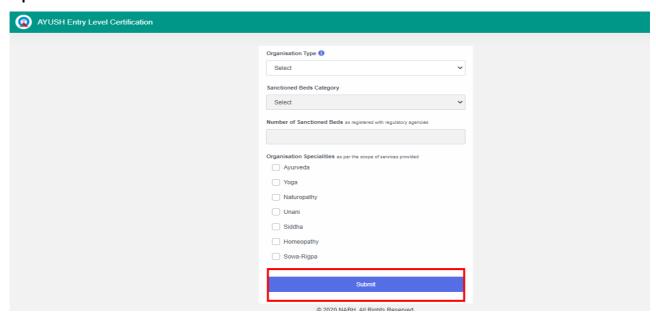
Select the Type of AYUSH Organisation (Hospital/Centre). Refer to the criteria of selection for the type of Organisation:

Hospital- AYUSH Healthcare Organisations with In-Patient Department (IPD) Services Centre: AYUSH Healthcare Organisations with only Out-Patient Department (OPD) Services or Day Care Clinics.

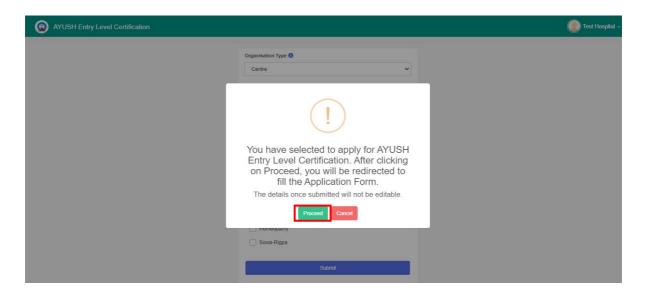
*In Case Organisation has serviced as Hospital, select the Sanctioned beds categories and Number of sanctioned beds in Hospital. Select the specialties offered by the AYUSH Organisation (Hospital/Centre).

Select the Type of AYUSH System provided by the AYUSH organisation (Hospital/Centre) as its specialty/ies.

Step 4: Click on "Submit" button to continue

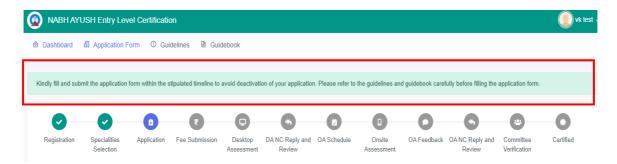


Step 5: At the Screen pop-up, click "Proceed" tab to continue or "Cancel" to edit the details in the "Specialties Selection form". Please note that Post Submission of the form, editing of details could not be done.

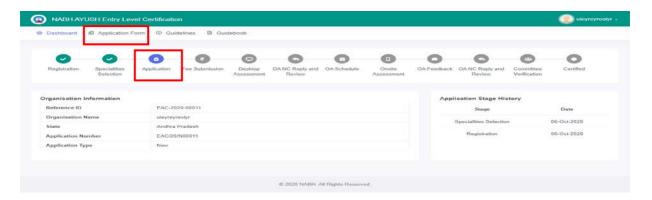


5.3. Application Form Steps

After submitting the Specialties Selection Form, the Applicant will be re-directed to the Dashboard. Where Progress/History of the Applicant can be seen. Applicant must follow the instructions displayed in the message box to proceed further.



Step 1: Click on the "Application Form" Tab in Menu Bar or the "Application" icon on Progress Bar to fill the application form for Desktop Assessment.



Step 2: Fill in the details for all sections.

- Users can select responses and fill in the details from the dropdowns.
- Questions may be of the following type:
 - o Single-Selection Type: Applicant can select a single option form the dropdown as per the applicability of the requirement of the question while filling the Application Form.

Click on the dropdown button while filling the response and select the option.

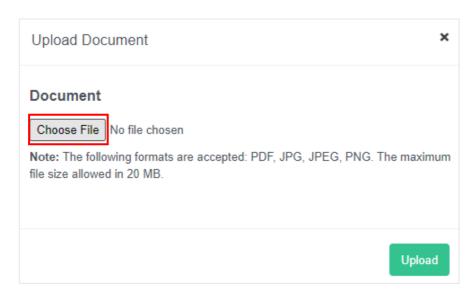


Document Upload: Attach all the relevant documents by clicking on "Upload Document" Icon

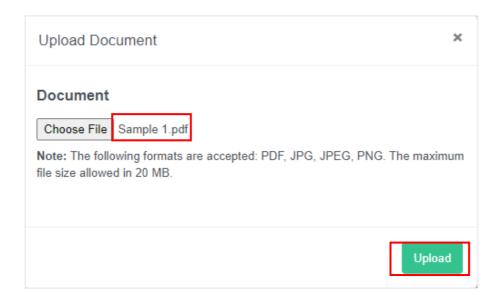


*Refer to the types and size of files that are acceptable.

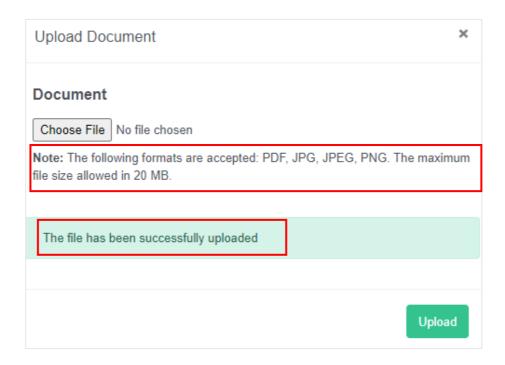
Click on "Choose File" button and select the document to be uploaded. Click on Open after selecting the file.



Selected file name will be displayed. Click on "Upload" to upload the file

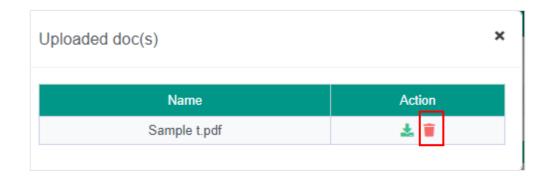


A message will be displayed on successful upload of file. In Case, file is not uploaded, check the size and type of file as per the criteria required

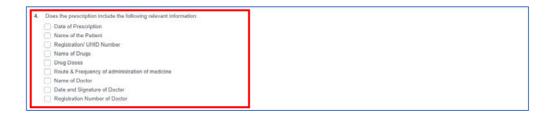


*Applicant can also view or delete the uploaded document by clicking on "View Document" lcon.





 Check Box Type: Applicant can choose multiple options against various requirement of the NABH Standards as per the applicability.
 Click on the check boxes to select the options.

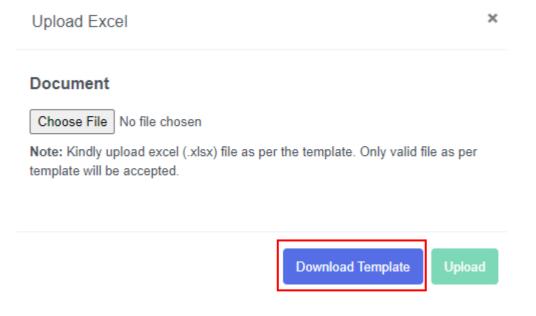


 Excel Upload. The applicant can download the templates to fill the details and upload the same file on respective question. The details for same will be displayed in Table.

Click on the "Upload Excel" Button



Download the template by click on" Download Template"

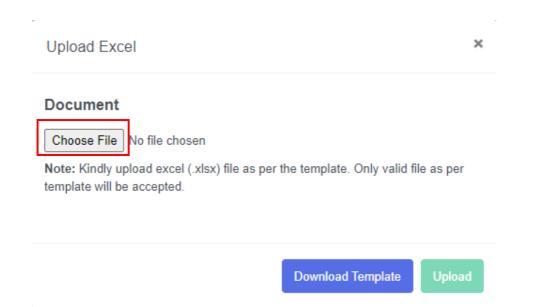


Fill the details in the template as per the headers mentioned.

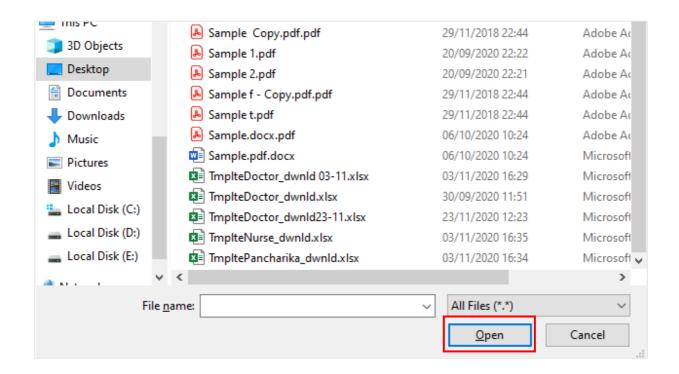
Note: Templates are different for various questions. For every such type of question applicant has to download specific for the question.

Again, click on "Upload Excel"

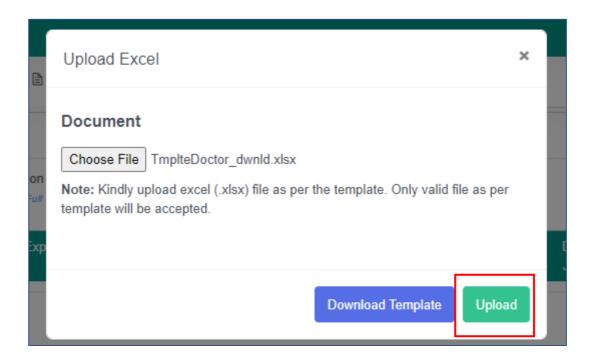
Click on "Choose File" button



Select the template file filled with all details and click on "Open"

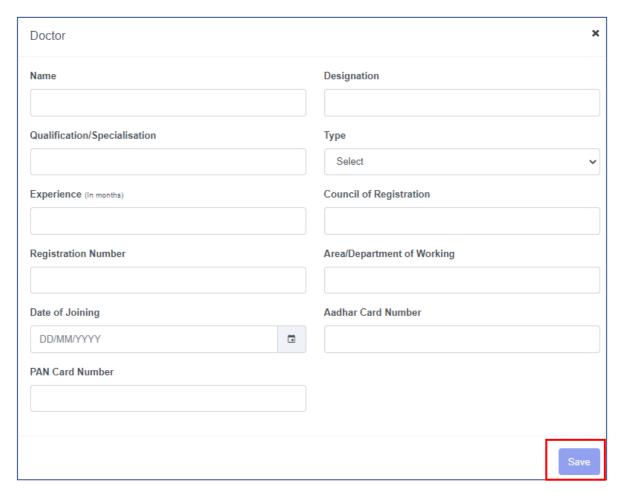


File chosen to be uploaded will be displayed at the module. Click on "Upload" Button



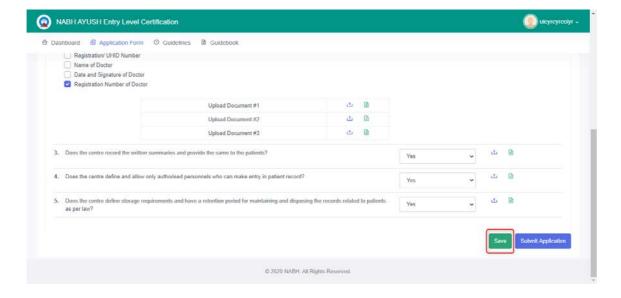
- *The excel details will be showing in the columns itself. Please check the details
 - o Add details Type: Click on "Add" button to fill the details manually. Use this option to add less data only



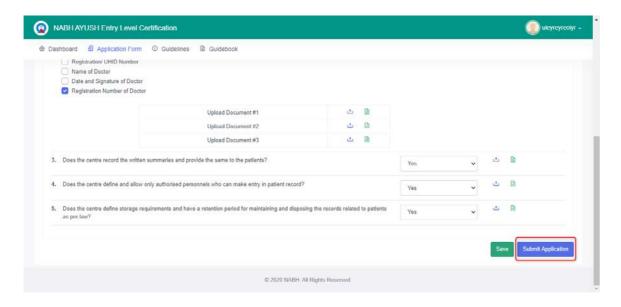


(Please check the respective filled details of excel template or data added fields in respective column of the Table. Applicant can Update the details by uploading/adding new file of same template).

Step 3: Applicant have to save their progress while filling response by clicking on save button from time to time to avoid data loss.



Step 4: After filling all the required details and mandatory documents, applicant can submit the details by clicking on "Submit Application" button.



Step 5: Once all the details for all sections are filled, Click on the "Check" box of the declaration statement at last of the application form.



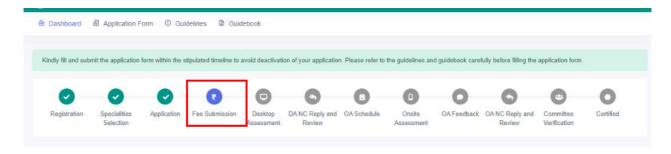
Step 6: Look out for '!' symbol(s), they signify unfilled mandatory fields of particular section.



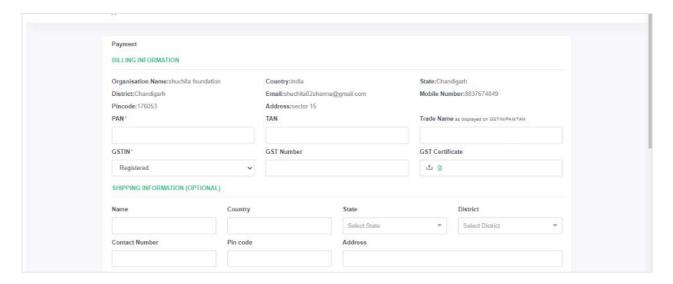
Step 7: On Screen-pop up click "Proceed" button to submit the form or "Cancel" to go back to Application Form.

5.4. Fee Submission Steps

Step 1: After Successful submission of the Application form. Applicant can make payment by clicking on "Fee Submission" Tab in Progress icon at "Progress Bar".



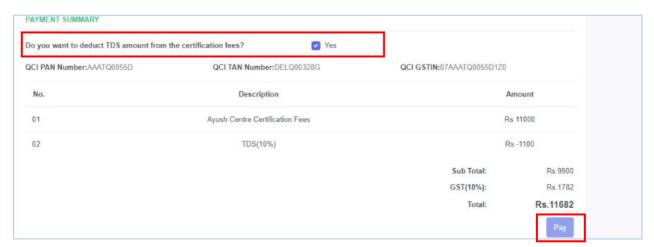
Step 2: Fill the Information at billing page.



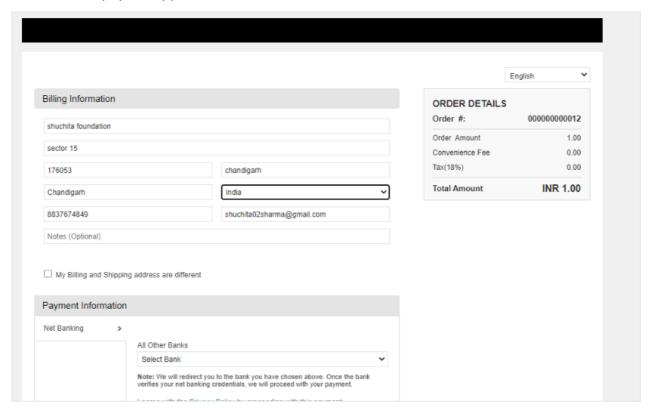
Applicant can also upload GST Certificate if the Organisation is Registered with GSTIN by selecting "Registered" at field "GSTIN"



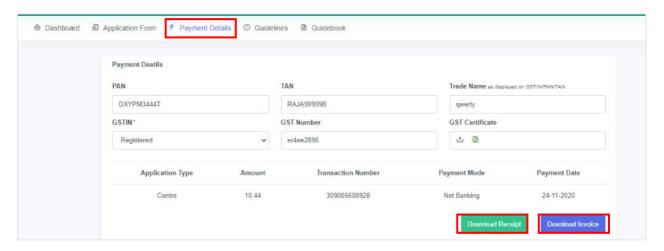
Step 3: In "Payment Summary" Applicant can deduct TDS from the Certification Fee by clicking "Yes" in "Do you want deduct TDS amount from the certification fees?". After filling all the required details, click "Pay" button



Step 4: Applicant will be redirected at Payment Gateway Page, select the type of payment to be used and pay the applicable certification fee



Step 5: After successful fee payment, Applicant can download the "Receipt" and "Invoice" from the "Payment Details" tab on Menu Bar. Applicant can also download Receipt and Invoice post fee submission at this section.

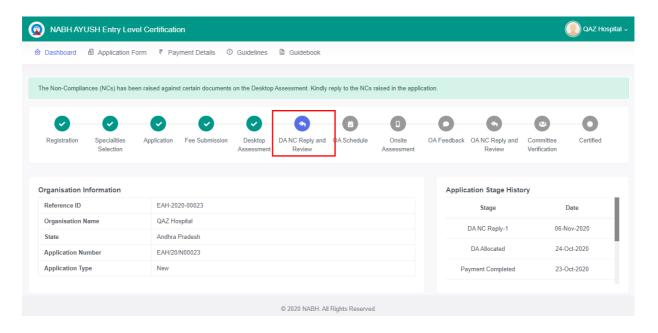


*Note: In Case of NEFT/RTGS challan will be generated which can be used to pay payment via respective bank. (Application's stage will only change when payment is received to NABH, it generally takes 2-3 business days to reflect the status of payment)

5.5. Desktop Assessment NC Reply Steps

The Application from will be scrutinized by the NABH Assessor for Quality check and Non-Compliances (NCs), if any, may be raised. Applicant will be notified via mail after the NCs are raised by the NABH Assessor.

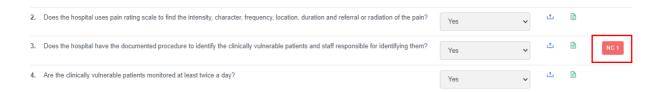
Step 1: In case NC are raised, Applicant can check them by clicking on "DA NC Reply and Review" on Progress Bar or at "Application Form".



Step 2: The Red Text signifies number of NCs raised under the particular section

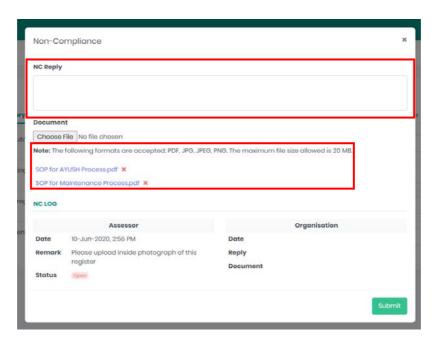


Step 3: The Red color of NC Button shows that there might be an NC waiting for a reply. Click on the NC Button to reply against the NC raised.

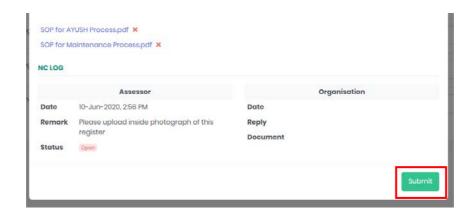


*Button Text as "NC 1" denotes the NCs raised at first round of Desktop Assessment and "NC 2" denotes the NCs that were not closed in 1st round review and carried forward to second round.

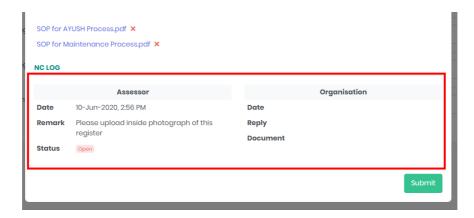
Step 4: Mention the remark/reason for the raised NC at "NC Reply" Text box and upload the evident document by clicking on "Choose File" button.



Step 5: When all the required documents are uploaded and the required reasons are provided, click on the "Submit" button to successfully submit the response for respective NC.



Step 6: Applicant can view the log of NC remarks and response for every round at "NC Log" section.



Step 7: The NC Button will change to Yellow color upon successful response upload.



^{*}Check the NC status post NC Review at the Dashboard after each reply.

Step 8: Desktop Assessment Accepted/Rejected

Red color of stage along with the cross at Progress bar depicts that NC replied by the hospital has been rejected and application cannot be processed further.

6. Keys Points to Remember

- E-mail ID and Contact Number entered during the registration process by the applicant will be used throughout the entire certification process. Enter the respective details correctly.
- Once the payment is made by the applicant, the application will go to the desktop assessment team for verification.
- Upon verification by the team, applicant will receive a mail for any non-compliances raised in the application.
- Applicants have to use the same ID they used while registering to reply to the NC raised.
- After logging in the web portal, applicant will have to check each section in which NC has raised.
- Applicant has to submit a reply to all the NCs before the application can move to the subsequent assessment stage.

7. Post Entry Level Certification – Accreditation & Maintenance of Accreditation

7.1. Levels of Hospital Accreditation

The validity period for Entry Level Certification is for two years. Once it is achieved, the HCO can then consider to prepare and move to the next stage that is to Accreditation. The validity period for NABH full accreditation is of 3 years' subject to terms and conditions applied.

7.2. Ongoing Process of Accreditation

NABH accreditation is not a one-time event, and the accreditation is not permanent. The onus of continuously maintaining standards and continuously monitoring policies and practices falls on the hospital. Once a hospital gets accredited, the accreditation is valid for a defined period and is subject to change based on subsequent surveillance. NABH conducts a regular surveillance of the accredited Organisation (the first such is usually planned during the 2nd year).