



POLICY AND PROCEDURE FOR DEALING WITH ADVERSE AND OTHER DECISIONS

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1.0 OBJECTIVE

This document describes policies and procedures of NABH for dealing with adverse decisions against applicants and accredited/certified/recommended for empanelment Health Care Organizations (HCOs). An HCO is defined as any health care organization for which an accreditation/certification/empanelment programme is available with NABH.

2.0 SCOPE

NABH Secretariat shall monitor the HCOs for compliance with the accreditation/certification standards and their requirements applicable from time to time. The issues that fall under the scope of this document are related to situations wherein applicants or accredited/certified HCOs have not complied with one or more terms and conditions of accreditation/certification process as well as any of the applicable requirement of accreditation/certification process and standards.

The provisions of this document shall apply to HCOs under all NABH accreditation, certification and empanelment programmes.

3.0 POLICIES AND PROCEDURES FOR DEALING WITH ADVERSE AND OTHER DECISIONS AGAINST HCOs

NABH Secretariat shall monitor the HCOs of any information that casts doubt on the suitability of awarding or maintaining accreditation/certification/recommended for empanelment to them. NABH may consider appropriate action in each case, considering the objective evidence and facts available and comparing them with the related clauses as mentioned in this document.

Various categories of decisions that will be taken under this policy are as follows:

A. Adverse decisions against applicant HCO:

An application will be considered under applicant stage from the time of applying to NABH i.e. generation of the reference number of the HCO till

the time of recommendation of accreditation/certification/ recommendation of empanelment

A.1 Inactive

A.2 Closure of application

A.3 Not recommended for accreditation/certification

B. Adverse decisions against accredited/certified HCO

B.1 Abeyance

B.2 Suspension

B.3 Forced Withdrawal

B.4 Not recommended for Not Recommended for renewal of accreditation/certification

C. Other decisions against accredited/certified HCO

C.1 Voluntary Withdrawal

D. Extension of Validity of Accreditation/Certification Cycle

4. POLICY AND PROCEDURE FOR DEALING WITH ADVERSE DECISIONS AGAINST APPLICANT HCO

4.1 Inactive

Condition

1. When the HCO has not addressed the inadequacies of document review (Application, legal/statutory compliances and other documents) done by NABH secretariat within 30 days from the date of communication of inadequacies to the HCO.
2. When HCO fails to accept the date of Pre-assessment (in case opted for) within 15 days of completion of desktop review/document review.
3. When the Pre-assessment (If undertaken by HCO, as it is optional) of the HCO has been conducted for which the non-conformities have been communicated by the assessment team at the time of Pre-assessment and the HCO has not submitted the satisfactory corrective actions to close the non-conformities within specified timelines.

4. When the HCO fails to accept the date of final assessment within 15 days from the successful completion of desktop review/document review (when the HCO has not opted for pre-assessment) and / or date of closure of non-conformities raised during pre-assessment, if conducted.

Actions by NABH

1. The 'Inactive' status is updated on NABH portal.
2. The HCO is notified.

Restoration to 'Active' status

1. The status of the HCO is changed to 'Active' if the HCO has satisfactorily resolved the issues raised by NABH within 30 days from the date of imposition of 'Inactive' status.
2. The effective date of application shall be considered the date of restoration to 'Active' status.

4.2 Closure of application

Conditions:

1. When a HCO has not adhered to the timelines for completion of application, payment of fees, desktop assessment, onsite assessment. (HCO has not responded even after 2 reminders (with a gap of 15 days) from NABH Secretariat)
2. When a HCO wishes to voluntarily withdraw the application at any stage during the accreditation/certification process.
3. When a HCO indulges in unethical practices such as but not limited to involvement of people not belonging to hospital during the assessment process, offering any kind of inducement to the assessment team during the conduct of the assessment/inspections, unprofessional behavior with the assessment team and NABH Secretariat.
4. When the name of the HCO is such that it may mislead the public/stakeholders regarding the scope of services being provided by the hospital.
5. When a HCO falsely claims accreditation/certification or recommendation for empanelment including submission of fake NABH accreditation/certification

certificates/scope certificates to various empaneling/regulatory agencies and use of accreditation/certification mark.

6. When a HCO submits tampered/misleading/forged documents, information or forged Licenses to NABH for the purpose of obtaining accreditation, certification or empanelment or indulges in other unethical practices bringing disrepute to NABH.

Action by NABH

A show cause notice shall be issued, and the HCO shall be provided 7 days to submit the explanation. If the explanation is not found to be satisfactory, a communication shall be sent to the HCO that the Application is Closed. Against the name of the HCO, “application closed” status shall be mentioned under applicant category on NABH website and the HCO portal shall be closed. The fees paid shall be non-refundable.

The HCO may reapply again as a new applicant and a new reference number shall be generated.

If the HCO is found to be involved in activities as mentioned at point no 3, 4, 5 or 6 above, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH policy and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

4.3 Not Recommended for accreditation/certification

Conditions:

1. When the assessment of the HCO has been conducted and HCO has not taken appropriate corrective actions against non-conformities within three months or as per defined timelines. In this, the case shall be presented to the Accreditation/certification committee by NABH Secretariat for necessary further action.
2. When a HCO submits tampered/misleading/forged documents, information or forged Licenses to NABH for the purpose of obtaining accreditation, certification or empanelment or indulges in other unethical practices bringing disrepute to NABH.
3. When during the assessment gross system failure is observed.

Action by NABH

A show cause notice shall be issued, and the HCO shall be provided 7 days to submit the explanation. If the explanation is not found to be satisfactory, a communication shall be sent to the HCO that the HCO is not recommended for accreditation/certification. Against the name of the HCO, “Not recommended for accreditation/certification” status shall be mentioned under applicant category on NABH website and the HCO portal shall be closed. The fees paid shall be non-refundable.

The HCO may reapply again as a new applicant and a new reference number shall be generated.

If the HCO is found to be involved in activities as mentioned at point no 2 above, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH policy and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

5.0 POLICY AND PROCEDURE FOR DEALING WITH ADVERSE DECISIONS AGAINST ACCREDITED/CERTIFIED HCO

5.1 Abeyance

Condition

1. When an HCO had not undergone assessment as per accreditation/certification process such as surveillance (post 24 months (for 4 years cycle) & post 18 months (for 3 years cycle) from the date of grant accreditation), verification, assessment even after two reminders (at a gap of 15 days) from NABH.
2. When a HCO does not submit the corrective actions within the defined timelines even after two reminders (at a gap of 15 days) from NABH.
3. When the name of the HCO is such that it may mislead the public/stakeholders regarding the scope of services being provided by the hospital.
4. When during the surveillance/surprise/renewal assessment, gross system failure is observed.
5. When an HCO does not fulfil the following criteria of maintaining accreditation/certification such as, but not limited to:

- a. Not informing NABH within 30 days about any changes in operations for example addition of building, change in location, change in legal identity/ownership, change in scope of accreditation/certification, change in bed strength etc.

Action by NABH

1. A show cause notice shall be issued, and the HCO shall be provided 7 days to submit the explanation.
2. If no explanation is received or the explanation provided by the HCO is not found satisfactory, the HCO shall be notified in writing about its change in accreditation status as abeyance.
3. The abeyance status shall be given to a HCO for no longer than one month.
4. The HCO in abeyance status shall not be published on NABH website, however if inquiries are made the HCO is referred to as under abeyance and working towards restoration of accredited/certified status.
5. To regain accreditation status, the HCO in abeyance status must submit to NABH a) its readiness for scheduled assessment, b) the corrective actions taken or as the case may be.
6. After the assessment scheduled, if any, the assessment report to be placed to accreditation/certification committee for further recommendation.
7. If the HCO does not proceed further or respond or notify NABH about its consent to undergo onsite assessment or take necessary action to restore accredited/certified status after one month of the abeyance status, action shall be initiated to suspend the accreditation/certification of the HCO.
8. Abeyance status shall continue till verification/onsite assessment is completed and a decision is taken.
9. The certificate date shall remain unchanged, after accreditation/certification is restored.

5.2 Suspension

Condition

1. When an HCO continues to be in 'Abeyance' status for one month and does not express its intent or work towards the restoration the accreditation/certification status.

2. When an HCO does not fulfil the following criteria of maintaining accreditation/certification such as, but not limited to:
 - 2.1 non-co-operation with NABH such as but not limited to submission of required documents, information etc.
 - i) refusal to allow examination of documents & records to NABH assessors during surveillance, renewal, surprise, focus or verification assessment.
 - ii) denial of access to NABH assessor to its services and patient care areas during surveillance, renewal, surprise, focus or verification assessment.
 - 2.2 result of a surprise assessment or complaint analysis or any other information, which indicates that the HCO no longer complies with requirements of NABH accreditation/certification standards.
3. When a HCO has not paid the Accreditation/Certification fees beyond 3 months from issue date of the invoice.
4. The decision of suspension of accreditation/certification shall be taken by the accreditation/certification committee except in cases as mentioned at point 3 above, where the decision can be taken by NABH Secretariat.

Action by NABH

When a HCO fails to pay the fee within 3 months from issue date of the invoice will result in suspension of accreditation/certification status. Restoration of accreditation/certification status thereafter shall be subject to clearance of all outstanding dues. Upon restoration, the period of suspension will be reflected as a break in accreditation and will be mentioned in the accreditation certificate.

In all other cases:

1. The HCO is issued a show cause notice and shall be provided 7 days to respond to the same as to why suspension of accreditation/Certification should not be initiated.
2. If the response provided by the HCO is not satisfactory as per point no 1 above, a suspension letter is issued to the HCO and the following action shall be taken by NABH
 - a. The suspension status of HCO shall be published on NABH website.
 - b. NABH shall inform the competent authorities e.g. ECHS, CGHS, respective state and other authorities, etc about the status of HCO.

- c. The HCO can remain in suspension status for a maximum period of three month from the date of issue of letter for suspension.
 - d. The HCO should submit the documents/information/corrective actions and/or express its readiness to undergo an onsite assessment as required within the time period as specified by the accreditation/certification committee to restore the accreditation status.
 - e. Suspension status shall continue till a decision is taken by accreditation/certification committee.
 - f. The HCO should submit the original hard copies of issued certificate of accreditation/certification as well as scope of accreditation/certification to NABH secretariat within 15 days of communication of the decision.
 - g. Upon restoration, the period of suspension will be reflected as a break in accreditation and will be mentioned in the accreditation certificate.
3. If the HCO does not meet or refuses the conditions to lift the suspension, 'Forced Withdrawal' action is initiated.
 4. During the period of 'Suspension' the HCO cannot claim accredited/certified status or use NABH accreditation/certification mark. If HCO continues to claim accredited/certified status or uses NABH mark, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH policy and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

5.3 Forced Withdrawal

Condition

1. When a HCO remains in 'Suspended status' for three months and has not met the condition for lifting the suspension even after three months.
2. When a HCO submits tampered/misleading/ forged documents / forged Licenses or information to NABH for the purpose of continuing accreditation, certification and empanelment.
3. When a HCO submitted manipulated or forged Accreditation & Scope Certificate issued by NABH to Empaneling agencies/Regulatory bodies

4. When a HCO is found engaged in unethical and/or unlawful activities or any other action that undermines the integrity of the accreditation/certification process and compromise the trust that stakeholders place in NABH
5. When a total system failure or gross negligence in technical aspects is identified at the time of Surveillance, Renewal assessment, Verification, Surprise, Focus assessment or any other assessment.
6. When an HCO is found to misuse the accreditation/certification mark despite receiving caution notice from NABH
7. When an HCO is found bring disrepute to NABH in any manner

Action by NABH

1. The HCO is issued a show cause notice and shall be provided 7 days to respond to the same.
2. In case, the clarification provided by the HCO as stated at point no 1 above is not found satisfactory following actions shall be done:
 - a) A communication shall be sent to the HCO that the accreditation/certification has been withdrawn.
 - b) The status of the Forced Withdrawal shall appear in the remark's column of the application in NABH portal and the application shall be closed.
 - c) NABH website shall announce the forced withdrawal status of accreditation/certification.
 - d) In the case of forced withdrawal, the HCO cannot claim accredited/certified status or use NABH accreditation/certification mark.
 - e) The HCO should submit the original hard copies of issued certificate of accreditation/certification as well as scope of accreditation/certification to NABH secretariat within 15 days of communication of the decision.
 - f) In case of point no.5, the HCO has been withdrawn from the programme and it is debarred to participate in any NABH programme for a period of 6 months. The HCO can be re-enrolled in the applicable programme by applying as a new HCO and paying full fees and assessment charges, as applicable at that time.
 - g) If the HCO is found to be involved in activities as mentioned at point no 2, 3, 4, 6 or 7 above, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH

policy and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

5.4 Not Recommended for renewal of accreditation/certification

Conditions:

1. When the assessment of the HCO has been conducted and HCO has not taken appropriate corrective actions against non-conformities within three months or as per defined timelines. In this, the case shall be presented to the Accreditation/certification committee by NABH Secretariat for necessary further action.
2. When a HCO submits tampered/misleading/forged documents, information or forged Licenses to NABH for the purpose of obtaining accreditation, certification or empanelment or indulges in other unethical practices bringing disrepute to NABH.
3. When during the assessment gross system failure is observed.

Action by NABH

A show cause notice shall be issued, and the HCO shall be provided 7 days to submit the explanation. If the explanation is not found to be satisfactory, a communication shall be sent to the HCO that the HCO is not recommended for renewal of accreditation/certification. Against the name of the HCO, “Not recommended for renewal of accreditation/certification” status shall be mentioned on NABH website and the HCO portal shall be closed. The fees paid shall be non-refundable.

The HCO may reapply again as a new applicant and a new reference number shall be generated.

If the HCO is found to be involved in activities as mentioned at point no 2 above, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH policy and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

6. POLICY AND PROCEDURE FOR DEALING WITH OTHER DECISIONS AGAINST ACCREDITED/CERTIFIED HCO

6.1 Voluntary Withdrawal

Condition

1. When an HCO does not wish to continue their accreditation/certification and voluntarily request in writing (on HCO letterhead duly signed by the Head of the Institution) that their accreditation/certification be terminated

Action by NABH

1. Program officer shall check the Accreditation/Certification Status of the HCO, i.e. Validity of the Certificate
2. The program officer shall ensure that the fees due are received from the HCO.
3. The HCO shall be required to clear pending fees, if any, failing which the request for Voluntary Withdrawal shall not be accepted.
4. Program officer shall ensure that NABH Accreditation/Certification certificate along with Scope of Accreditation/Certification is received in original.
5. Concerned Program Officer to take approval through reporting officer from CEO, NABH
5. Once the approval has been received by CEO-NABH, the Program Officer shall accept the same and maintain the record under 'Voluntary Withdrawal Category'.
6. A communication shall be sent to the HCO that the accreditation/certification status has been put under Voluntary Withdrawal category.
7. The status of the Voluntary Withdrawal shall appear in the remark's column of the application in NABH portal and the application shall be closed.
8. The Voluntary withdrawal status shall be published on NABH website.
9. If HCO decides to regain the accreditation status, after it has sought voluntary withdrawal, it is treated as a new applicant and has to pay all fees, as applicable at that time. A new reference number for the application will be generated.
10. A new certificate with current date and number shall be issued based on a new assessment.
11. Between voluntary withdrawal and new accreditation/certification if HCO continues to claim accredited/certified status or uses NABH mark, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH policy

and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

7. Extension of Validity of Accreditation/certification Certificate

Condition

1. If a HCO has applied for renewal of accreditation/certification six months before expiry of accreditation/certification, paid the renewal application fees and submitted all the required documents and no fees is due, an extension of validity of accreditation/certification certificate may be granted for any of the following reasons:
 - a. Where there is delay in conducting renewal assessment for reasons beyond the control of NABH.
 - b. Where the HCO has completed the renewal process but the Accreditation/Certification Committee meeting is yet to take place.
 - c. When the Accreditation/Certification Committee has recommended clarification from Principal Assessor/ Assessor/ Expert/ HCO leading to delay in the decision, beyond the control of NABH.
 - d. Any HCO shifting from one programme to another programme shall not be granted any extension of validity.
2. If an HCO has not applied 6 months prior to the expiry of accreditation/certification cycle, the request for extension of validity of certification/accreditation certificate will not be entertained.

Action by NABH

An extension to accreditation/certification validity for a period of not more than 3 months is granted to the HCO and a letter is sent allowing the HCO to claim NABH Accreditation/Certification status and use of NABH Accreditation/Certification Mark till a final decision on renewal of accreditation/certification is taken.

In the event of accreditation/certification to the HCO is not renewed, the HCO to stop claiming NABH accreditation/certification status & use of NABH Accreditation/Certification Mark. The website will also be updated to show the expired

status. If HCO continues to claim accredited/certified status or uses NABH mark, HCO shall be debarred to apply under any of the NABH accreditation/certification/empanelment programme as per NABH policy and/or appropriate legal action shall be initiated. There shall be no provision for appeal in this case.

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