



STANDARDS FOR NURSING EXCELLENCE

**First Edition
February 2014**



**NATIONAL ACCREDITATION BOARD FOR HOSPITALS
AND HEALTHCARE PROVIDERS (NABH)**



N A B H

QUALITY : SAFETY : WELLNESS



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NABH PLEDGES

Taking Quality to the Last Man in the Line

HAPPY INDEPENDENCE DAY

15th August 2020



PREFACE TO THE RE-PRINT

National Accreditation Board for Hospitals and Healthcare Providers (NABH), a constituent board of Quality Council of India, established in 2005, is in its 15th year of creating an ecosystem of quality in healthcare in India. NABH standards focus on patient safety and quality of the delivery of services by the hospitals in the changing healthcare environment. Without being prescriptive, the objective elements remain informative and guide the organisation in conducting its operations with a focus on patient safety.

All NABH standards have been developed in consultation with various stakeholders in the healthcare industry and if implemented help the healthcare organizations in stepwise progression to mature quality systems covering the entire spectrum of patient safety and healthcare delivery.

The NABH organization & the hospital accreditation standards are internationally recognized and benchmarked. NABH is an Institutional as well as a Board member of the International Society for Quality in Health Care (ISQua) and Asian Society for Quality in Health Care (ASQua) and a member of the Accreditation Council of International Society for Quality in Health Care (ISQua).

Over the years, successive NABH standards have brought about not only paradigm shifts in the hospitals' approach towards delivering the healthcare services to the patients but have equally sensitised the healthcare workers and patients towards their rights and responsibilities.

In celebration of our 74th Independence Day, on 15th of August, 2020, we are pleased to announce, that starting today, in an enhanced effort to connect with people, all NABH standards, across programmes, will be available free of charge as downloadable documents in PDF format on the NABH website www.nabh.co. (The Printed copies of Standards and Guidebooks will continue to remain available for purchase at a nominal price).

NABH also announces the enriched continuation of its **"NABH Quality Connect-Learning with NABH"** initiative, connecting free monthly training classes, webinars and seminars. The various topics that will be taken up will cover all aspects of patient safety, including: Key Performance Indicators, Hospital Infection Control, Management of Medication, Document Control etc.

Recently introduced communication initiatives like **Dynamic Website Resource Center** and **NABH Newsletter Quality Connect** (focusing on sharing the best quality practices, news and views) will also be bettered.

It is sincerely hoped that all stakeholders will certainly benefit from the collective efforts of the Board and practical suggestions of thousands of Quality Champions from India and abroad

NABH remains committed to ensuring healthy lives and promote wellbeing for all at all ages (SDG-3-Target 2030), creating a culture of quality in healthcare and taking Quality, Safety and Wellness to the Last Man in the Line.

Jai Hind

(Dr. Atul Mohan Kochhar)
CEO-NABH

15th August 2020



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FOREWORD

Nursing services are an integral part of the clinical services of any health care organization. The aim of nursing services is to provide comprehensive nursing care in terms of health promotion, prevention of diseases and therapeutic nursing care to the patients in a HCO as well as to the community. The objective of the nursing professional is to provide safe, competent and ethical nursing care with compassion, comfort and collaboration with the patients, the family, the community and the clinical care team. The Nursing professionals are the cornerstone of any quality related programme in a health care organization since most of the delivery and monitoring of health care is carried out by them. The nursing professionals are the frontline staff with whom the patients, their families and the visitors interact first hand. Their knowledge, clinical judgement, skills, attitude, communication and other soft skills thus make all the difference in the ultimate delivery of health care to the patients.

Standards are pre requisite for the promotion of safe, effective, competent and ethical nursing care. They help the individual nursing practitioner to evaluate the services being provided by them and also act as a catalyst for self regulation and improvement. Nursing excellence standards have been framed with a view to lay down the guidelines for evaluating the nursing services being provided by a Health Care Organization, thereby providing a platform for continual improvement. These standards are applicable to all the Health care organizations irrespective of their size, role and complexity. They will help in regulating, guiding and promoting professional nursing practice. They will serve as guidelines to nurse administrators and supervisors for supporting and facilitating safe, competent and ethical nursing practices within their Health Care Organizations.

Apart from serving as a frame work for evaluation of the quality of nursing services rendered, these standards will also provide guidelines to assist nurses in decision-making and will support the nursing efforts by outlining the professional expectations from the nursing services. The Standards are on the same framework as has been for the NABH Standards for Health Care Organizations.

The 1st edition of nursing excellence standards is divided into 07 chapters, focusing on various professional, administrative and governance aspects of nursing. Seven chapters are further divided into 48 standards. Put together there are 216 objective elements incorporated within these standards. Objective elements are required to be complied with in order to meet the requirement of a particular standard. Similarly, standards are required to be complied with, in order to meet the requirement of a particular chapter. Finally all chapters are deciding factor to say whether a hospital is meeting the requirements of the certification program. In the beginning of each chapter, intent is given to highlight the summary of the chapter. For most of the objective elements, interpretation is provided just to further elaborate on how that objective element can be met.

Standards are dynamic and would be under constant review process. Comments and suggestions for improvement are appreciated. We seek your support in keeping these standards adequate to the need of industry.

Dr. K. K. Kalra
CEO-NABH

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CHAPTER 1

NURSING RESOURCE MANAGEMENT

Intent of the Chapter:

Nursing staff is the most important resource of a hospital and healthcare system. The goal of nursing resource management is to acquire, provide, retain and maintain competent nursing personnel in right numbers to meet the needs of the patients and community served by the organization.

Training and development of the nursing staff must be in consonance with the expected performance in the present and future anticipated jobs. The nursing professionals shall be provided with opportunities for professional advancement. The organization shall lay down the job description and procedures for credentialing and privileging of the nursing staff.

There shall be an established procedure for addressing grievances.

Summary of Standard

NRM.1.	The organization has a documented system of nursing resource planning.
NRM.2.	The organization has structures and processes for induction and for enhancing the transition of novices to competent nursing professionals.
NRM.3.	The organization has processes in place for induction training, In-service education and Continuous Nursing Education (CNE) programmes and for documentation of the same in the personal files.
NRM.4.	There is a process for credentialing and privileging of nursing professionals, permitted to provide patient care without supervision.
NRM.5.	An appraisal system for evaluating the performance of nursing staff exists as an integral part of the nursing resource management process.
NRM.6.	There is a provision for acknowledging outstanding performances/ contributions of nursing professionals.
NRM.7.	There is an established process in place to identify and manage problems related to incompetent, unsafe or unprofessional conduct.
NRM.8.	The organization demonstrates workplace safety for nursing professionals and protection of their rights.
NRM.9.	The organization has a documented and established grievance handling system.

Standards and Objective Elements

Standard

NRM.1.	The organization has a documented system of nursing resource planning.
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Objective Elements

- Nursing resource planning supports the organization's current and future ability to meet the care, treatment and service needs of the patient.
- The organization maintains an adequate number and mix of nursing staff to meet the care, treatment and service needs of the patient.
- The person heading the nursing service has requisite and appropriate qualifications.
- The person heading the nursing service has requisite and appropriate experience.
- The required job specification and job description are defined for each category of nursing staff.

Standard

NRM.2.	The organization has structures and processes for induction and for enhancing the transition of novices to competent nursing professionals.
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Objective Elements

- Nursing shift plans based upon timings of shift, day or week shall identify and depute nursing professionals to various areas based on their skills and competencies.
- Training need shall be identified on a continual basis by the senior nursing professionals as well as the Clinical Heads as appropriate.
- Required competency parameters shall be evaluated by such senior nursing professionals and the clinical and support service Heads and shall be recorded in the training records as in **NRM 2**.

Standard

NRM.3.	The organization has processes in place for induction training, In-service education and Continuous Nursing Education (CNE) programmes and for documentation of the same in the personal files.
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Objective Elements

- Every nurse entering the organization is provided induction training.
- A documented training and development policy exists for the staff.
- The organization maintains records of training.

- d. Nursing professionals shall receive adequate training when there is a change in job responsibilities or when new equipment is introduced.
- e. All nursing staff shall be trained to provide BLS. Nursing professionals working in intensive care/high dependency units shall undergo training in ACLS or PALS or NALS as applicable.

Standard

NRM.4.	There is a process for credentialing and privileging of nursing professionals, permitted to provide patient care without supervision.
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Objective Elements

- a. The education, registration, training and experience of nursing staff is recorded and updated periodically.
- b. Nursing staff permitted by law, regulation and the organization to provide patient care without supervision are identified.
- c. All such information pertaining to the nursing staff is appropriately verified when possible.
- d. Nursing staff are granted privileges in consonance with their qualification, training, experience and registration.
- e. The requisite services to be provided by the nursing staff are known to them as well as the various departments/units of the organization.
- f. Nursing professionals care for patients as per their privileging.

Standard

NRM.5.	An appraisal system for evaluating the performance of nursing staff exists as an integral part of the nursing resource management process.
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Objective Elements

- a. A recorded performance appraisal system exists in the organization for nursing professionals.
- b. The nursing professionals are made aware of the system of appraisal at the time of induction.
- c. Performance is evaluated based on the pre-determined criteria.
- d. Performance appraisal is carried out at pre-defined intervals and is recorded.

Standard

NRM.6.	There is a provision for acknowledging outstanding performances/ contributions of nursing professionals.
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Objective Elements:

- a. Patients, families and staff shall be encouraged to report positive feedback about nursing care delivered in relevant areas.
- b. Nursing staff with managerial responsibilities shall ensure that soft skills in nursing, qualities of leadership and professional competence are duly reported to higher authorities. This shall be recorded (see **NRM 4 c** also).

Standard

NRM.7.	There is an established process in place to identify and manage problems related to incompetent, unsafe or unprofessional conduct.
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Objective Elements:

- a. The process shall include daily monitoring of appearance and ability to impart nursing care.
- b. The process shall include analysis of all complaints pertaining to nursing services specifically addressing individual nursing staff.
- c. The disciplinary policy and procedure is based on the principles of natural justice.

Standard

NRM.8.	The organization demonstrates workplace safety for nursing professionals (including change rooms, washrooms & dining facilities).
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Objective Elements:

- a. Management provides resources related to workplace safety for nursing professionals.
- b. Management shall ensure that there is a mechanism whereby any safety related issues are duly reported.
- c. Management shall endeavour to promote a culture of reporting of safety related issues such that there is no victimization.
- d. A record of corrective and preventive actions shall be maintained wherever appropriate, with due consideration given to anonymity.

Standard

NRM.9.	The organization has a documented and established grievance handling system.
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Objective Elements

- a. The organization has a well-defined process for handling nurse (s) grievances.
- b. The nursing professionals are educated about the mechanisms available for addressing grievances.
- c. The head of the nursing service protects nurse (s) rights.
- d. The nursing professionals are educated about their rights.

CHAPTER: 2

NURSING CARE OF PATIENT

Intent of the Chapter:

The standard aims to guide and encourage patient safety and quality care as the overall principle for providing nursing care to patients.

The organization supports nursing service to provide systematic method of nursing care with specific emphasis on Assessment, Planning, Implementation and Evaluation. Nursing care is preventive, promotive, curative and rehabilitative in nature. Patient-centered care supports active involvement of patients and their families in the design of new care models and in decision-making about individual options for treatment.

The registered nurse, in collaboration with the patient, family and other team members assesses, makes decisions, plans, implements, evaluates, and documents nursing care based on reflection, current knowledge, and best practices.

Policies and procedures in concurrence with the laws and regulation guide the nursing services in all functional units applicable in the organization.

Patient safety and nursing professionals safety is intertwined in every aspect of the care. Nursing professionals practice in accordance with the Code of Ethics for Registered Nursing professionals, establishes professional therapeutic relationships with patients and advocates for and with patients throughout their interactions with the health system.

Nursing services promote and initiate measures to create a learning environment that supports patient advocacy and ethical practice.

Uniform nursing care is provided to all patients in different settings that include care provided in outpatient units, various categories of wards, intensive care units, procedure rooms, operation theatre, etc.

A designated senior nursing professional controls the care of vulnerable patients (elderly, physically and/or mentally-challenged and children), patients undergoing moderate sedation, patients under restraints, and end of life care.

Pain management is also addressed with a view to providing comprehensive health care.

Empowered Nursing professionals embrace the concepts of managing patient and nursing care situations with dignity and mutual respect which produces strong and efficient nursing leaders within the organization thereby ensuring safe and quality nursing care.

Summary of Standard

NCP.1.	Nursing manual shall be established and reviewed periodically as defined by the HCO.
NCP.2.	The initial assessment shall be done by the nursing professionals in predetermined format at prescribed time and/or as per the needs of the patients.
NCP.3.	The reassessment shall be done by the nursing professionals in predetermined format at prescribed time.
NCP.4.	For provision of nursing care, appropriate number of nursing professionals shall be maintained as per workload.
NCP.5.	The nursing care planned and provided by the nursing professionals is recorded.
NCP.6.	The nursing care is individualized to address the needs of patient and family.
NCP.7.	Information is exchanged and documented during each staffing shift, between shifts, and during transfers between units/departments.
NCP.8.	There shall be established policies and protocols for vascular access devices. (VADs)
NCP.9.	The nursing care of inpatients shall be supervised by senior nursing professionals.
NCP.10.	The nursing care of vulnerable patients (elderly, children, physically and/or mentally challenged) shall be supervised by senior nursing professionals.
NCP.11.	The nursing care of patients under restraints (physical and/or chemical) shall be supervised by senior nursing professionals.
NCP.12.	Appropriate pain management practices shall be supervised by senior nursing professionals.
NCP.13.	Appropriate end of life care shall be provided to patients needing the same by the nursing professionals.

Standards and Objective Elements

Standard

NCP.1.	A Nursing Manual shall be established and reviewed periodically as defined by HCO
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Objective Elements

- a. Nursing manual shall include standard operating procedures and guidelines for nursing care in all settings.
- b. Nursing manual shall also include policy on nursing station management.
- c. Nursing manual shall contain a master list of various forms and formats used by nursing professionals.
- d. Nursing manual shall be available for and followed by the nursing professionals uniformly.
- e. Nursing manual shall be reviewed and updated regularly at least once in annually.

Standard

NCP.2.	The initial assessment shall be done by the nursing professionals in predetermined format at prescribed time and/or as per the needs of the patients.
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Objective Elements

- a. Initial assessment of in-patients includes nursing assessment done and documented at the time of admission.
- b. Initial assessment includes assessment of actual and potential needs & problems.
- c. The initial nursing assessment results in a documented nursing care plan.
- d. The care documentation must include preventive aspects of the care where appropriate.

Standard

NCP.3.	The reassessment shall be done by the nursing professionals in a predetermined format at prescribed time.
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Objective Elements

- a. Patients are reassessed at appropriate intervals.
- b. Patients are reassessed at the time of receiving and transferring from one unit to another.
- c. Patients are also reassessed before and after shifting for investigations.
- d. Nursing care plan is modified when emergency situations arise.

- e. Nursing professionals evaluate outcomes using reassessment and revise action plans as needed.

Standard

NCP.4.	For provision of nursing care, appropriate number of nursing professionals shall be maintained as per workload.
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Objective Elements

- a. Nurse patient ratio is planned and provided based on the scope of the unit.
- b. Nurse patient ratio is monitored in every shift by the designated senior nursing professionals.
- c. Patient condition and nurse's competency shall be considered while assigning nursing professionals to patient care in each shift.

Standard

NCP.5.	The nursing care planned and provided by the nursing professionals is recorded.
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Objective Elements

- a. Nursing professionals document assessment, nursing activities, and care outcomes in accurate and timely, manner.
- b. Documented information shall be checked and supervised by the senior nursing professionals wherever appropriate.
- c. There shall be a consistent pattern adopted by the nursing service for documentation of nursing care.
- d. Adequate supervision is ensured for the junior staff after delegating the responsibilities.

Standard

NCP.6.	The nursing care is individualized to address the needs of patient and family.
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Objective Elements

- a. Nursing protocols are developed by nursing professionals based on current best practices and shall focus on patient safety.
- b. Assignment of patients for nursing care is based on patient needs to maximize the outcome.
- c. Nurse use patient specific sensitive communication and interactive techniques to individualize the care.

- d. Care of patients is coordinated in all care settings within the organization.

Standard

NCP.7.	Information is exchanged and documented during each staffing shift, between shifts, and during transfers between units/departments.
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Objective Elements

- a. Documented information shall be clearly dated, timed and signed by the assigned nurse and endorsed by the senior nursing staff at every shift.
- b. Transfers between departments/ units are done in a safe manner.

Standard

NCP.8.	There shall be established policies and protocols for vascular access devices. (VADs).
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Objective Elements

- a. There shall be established policies and protocols for vascular access devices.
- b. The nurse shall select the appropriate type of catheter (peripheral or central) to meet the patient's vascular access needs.
- c. The catheter selected shall be of the appropriate gauge and length with the fewest number of lumen and shall be the least invasive device needed to accommodate and manage the prescribed therapy.
- d. The nurse shall not alter the vascular device outside the manufacturer's direction for use.
- e. Vascular access bundle care (for prevention of complications) should be followed.

Standard

NCP.9.	The nursing care of inpatients shall be supervised by senior nursing professionals.
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Objective Elements

- a. A senior suitably experienced nursing professional should guide and supervise the nursing professionals in each shift in each department.
- b. Senior nursing professionals are responsible for the implementation of the policy, protocol and procedures of the respective areas.
- c. The scope of services for senior nursing professionals includes supervision and monitoring of all nursing activities related to patient safety, quality of nursing care rendered and turnaround time.

- d. The nursing professionals should ensure availability of patients reports in their respective records.
- e. Nursing professionals seek additional knowledge and assistance as needed, in a timely manner.
- f. Nursing professionals recognize any limitations to safe, competent, and ethical care and report concerns and consult and/or initiate appropriate changes as necessary.
- g. Nursing professionals evaluate, disseminate, and support the integration of evidence based practice findings into practice.

Standard

NCP.10.	The nursing care of vulnerable patients (elderly, children, physically and/or mentally challenged) shall be supervised by senior nursing professionals.
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Objective Elements

- a. There are protocols governing care of vulnerable patient.
- b. The nursing staffs are trained to care for vulnerable patient.
- c. All vulnerable patients are identified as per HCO policy and then assessed and reassessed more frequently at periodic intervals.
- d. Nursing professionals monitor vulnerable patients' closely participating with the family whenever required.

Standard

NCP.11.	The nursing care of patients under restraints (physical and/or chemical) shall be supervised by senior nursing professionals.
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Objective Elements

- a. These include both physical and chemical restraint measures.
- b. These patients are more frequently monitored.
- c. Staff receives training and periodic updating in control and management of restraint techniques.

Standard

NCP.12.	Appropriate pain management practices shall be supervised by senior nursing professionals.
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Objective Elements

- a. All patients screened for pain at the time of admission and reassessment of pain is done for those patients who require pain management.

- b. Nursing professionals are trained to identify level of pain in various categories of patients and document the same.
- c. Nursing professionals shall provide care both pharmacological and non-pharmacological care based on the hospital policy.
- d. The organization respects and supports nursing management of pain for such patients.
- e. The nursing professionals educate the patient and their family on various pain management techniques wherever appropriate.

Standard

NCP.13.	Appropriate end of life care shall be provided to patients needing the same by the nursing professionals.
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Objective Elements

- a. Nursing professionals are aware of end of life care policy of the organization.
- b. Nursing professionals shall provide care to meet the unique end of life care needs of the patient and family.
- c. Symptomatic treatment is provided by the nursing professionals for all end of life care patients with special emphasis on alleviating pain and helping them to cope psychologically.
- d. Nursing professionals are educated and periodically trained on end of life care.

CHAPTER: 3

MANAGEMENT OF MEDICATION

Intent of the Chapter:

Designated nursing personnel shall be consulted during policy formulation pertaining to pharmacy and management of medication. The nursing staff will ensure availability, safe storage, administration of medications and monitoring the effects of medication.

The nursing personnel should have an oversight of all medications stocked in the ward and other clinical areas and should ensure good inventory control practices including correct storage (as regards to temperature, look-alike, sound-alike etc.), monitoring expiry dates and maintenance of documentation in the clinical areas.

The availability of emergency medication is stressed upon. The organization should have a mechanism to ensure that the emergency medications are standardized throughout the organization, readily available and replenished in a timely manner. There should be a monitoring mechanism to ensure that the required medications are always stocked and well within expiry dates. Appropriate nursing authorities should monitor these parameters in areas under their control where drugs and consumables are stored or utilized.

Every high-risk medication order should be verified by an appropriate person so as to ensure accuracy of the dose, frequency and route of administration. The “appropriate person” could be another doctor, trained nurse or preferably, a clinical pharmacist. Such a person would also look for drug-drug interactions, food-drug interactions, renal or hepatic dosing etc. There should be a mechanism by which this person could verify the order with prescriber in case of doubts or clarifications. The verification should occur before the medication is administered but preferably, prior to dispensing of the medication. There should be a protocol by way of which, in case of continued conflict, the person can approach higher authority to ensure patient safety.

The process also includes monitoring of patients after administration and procedures for reporting and analyzing medication errors. Process should include duration of monitoring after administration of high alert medication and medication used for managing pain.

Safe use of high-risk medication like narcotics, chemotherapeutic agents and radioactive isotopes are guided by policies and procedures.

Patients and family members are educated about safe medication. Medications also include blood, chemotherapy and self-administered medication.

There shall be a policy on verbal orders which would enable nursing professionals to accurately capture all verbal orders affecting care of patients. Nursing professionals will report and closely monitor the occurrence of adverse events including adverse drug event.

Summary of standards

MOM.1.	Indenting of required medication and stores will be done and supervised by nursing staff made responsible for this function. Storage of medication in the wards and other therapeutic areas shall be supervised by responsible nursing professionals.
MOM.2.	The dispensing, administration and accounting of medicines shall be carried out by the concerned personnel and should be appropriately supervised by senior nursing staff.
MOM.3.	The monitoring of patients after medication administration is supervised by responsible personnel.
MOM.4.	The nursing professionals must report near misses, medication errors and adverse drug events as per the policy of the HCO for analysis by the appropriate staff predefined and identified by the HCO. Feedback is provided to staff which includes the results of analysis and recommended preventive measures for implementation by the nursing staff wherever appropriate.
MOM.5.	The organization shall ensure that it has a policy on verbal orders which will be applicable to doctors, nursing professionals and technicians uniformly.

Standards and Objective Elements

Standard

MOM.1.	Indenting of required medication and stores will be done and supervised by nursing staff made responsible for this function. Storage of medication in the wards and other therapeutic areas shall be supervised by responsible nursing professionals.
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Objective Elements

- Medication will be indented as per HCO policy on indenting medicines.
- Medications are stored in a clean, safe and secure environment; and incorporating manufacturer's recommendation(s).
- Sound inventory control practices guide storage of the medications.
- Sound-alike and look-alike medications are identified and stored separately.
- The list of emergency medications is defined and is stored in a uniform manner.
- Emergency medications are available all the time.
- Emergency medications are replenished in a timely manner when used.

Standard

MOM.2.	The dispensing, administration and accounting of medicines shall be carried out by the concerned personnel and should be appropriately supervised by senior nursing staff.
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Objective Elements

- Nursing professionals are familiar with the medications being used for their patients.
- Prepared medication is labelled prior to preparation of a second drug.
- Patient is identified prior to administration.
- Medication is verified from the order prior to administration.
- Dosage is verified from the order prior to administration.
- Route is verified from the order prior to administration.
- Timing is verified from the order prior to administration.
- Patient is monitored during the administration of blood and blood products, chemotherapy and other invasive procedure.
- Medication administration is recorded.

Standard

MOM.3.	The monitoring of patients after medication administration is supervised by responsible personnel.
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Objective Elements

- Monitoring of patients shall be done after medication administration.
- Monitoring of patients shall be done after transfusion of blood and blood products.
- Monitoring of patients shall be done after chemotherapy.
- Monitoring of patients shall be done in all post-operative cases or where invasive procedures are carried out.

Standard

MOM.4.	The nursing professionals must report near misses, medication errors and adverse drug events as per the policy of the HCO for analysis by the appropriate staff predefined and identified by the HCO. Feedback is provided to staff which includes the results of analysis and recommended preventive measures for implementation by the nursing staff wherever appropriate.
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Objective Elements

- A system shall exist to capture near miss, medication error and adverse drug reactions including blood transfusion reactions.
- These are reported within a specified time frame.
- They are collected and analysed by appropriately trained personnel.
- Corrective and/or preventive action(s) are taken based on the analysis where appropriate.

Standard

MOM.5.	The organization shall ensure that it has a policy on verbal orders which will be applicable to doctors, nursing professionals and technicians uniformly.
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Objective Elements

- The organization shall have a policy to address verbal orders.
- The policy shall address who can give verbal orders and how these orders will be validated.
- Organization should have approved list of drugs which can be ordered verbally.
- No verbal orders shall be followed except in case of emergency, or as defined by organization.
- Where verbal orders are given, ratification shall be done at the earliest and not later than 24 hrs.

CHAPTER: 4

EDUCATION COMMUNICATION AND GUIDANCE

Intent of the Chapter:

The organization shall ensure that nursing professionals are trained in communication skills. Patients are informed of their rights and educated about their responsibilities at the time of admission. They are informed about the disease, the possible outcomes and are involved in decision making. The patients are educated about the mechanisms available for addressing grievances.

Patient and families have a right to information and education about their healthcare needs in a language and manner that is understood by them and proper timely guidance shall be given by the nursing staff.

Summary of standard

ECG.1.	The organization shall ensure that nursing professionals are trained in communication skills.
ECG.2.	Nursing professionals shall maintain confidentiality of all patient information.
ECG.3.	Nursing professionals communicate with patient, family and relevant team members to reflect continuity of care as and when required.
ECG.4.	Patient and family are educated where essential and in case of any change in nursing care plan.

Standards and Objective Elements

Standard

ECG.1.	The organization shall ensure that nursing professionals are trained in communication skills.
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Objective Elements

- There is documented evidence of communication skills training to nursing staff to meet the patient's specific needs.
- The communication needs of patients who speak different language than the care givers is addressed.
- Training is imparted to address the patient's needs with impaired communication.
- Communication skill shall be improved periodically.

Standard

ECG.2.	Nursing professionals are aware of their responsibility in protecting patient rights.
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Objective Elements

- The nursing professionals are aware of patient rights.
- Nursing professionals maintain the confidentiality of patient's information.
- Nursing professionals maintain privacy of the patients during care.
- The nursing professionals support individual patient and family beliefs, values and customs and involve the patient and family in decision making processes.

Standard

ECG.3.	Nursing professionals communicate as and when required with relevant team members to achieve continuity of care.
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Objective Elements

- There is a handover mechanism among the care team across shifts regarding patient's status.
- Nursing professionals communicate with staff in other departments when required to ensure that care plan is implemented.
- HCO uses predetermined formats for such communication wherever required.

Standard

ECG.4.	Patient and family are educated where essential and in case of any change in nursing care plan.
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Objective Elements

- a. Patient and family education includes aspects of care plan.
- b. The education shall cover the medical condition, pre and post-operative education, special procedures, preventing healthcare associated infections, when to seek urgent medical attention and home care wherever applicable.
- c. Nursing professionals explain to patient/ family before any procedures are performed on patients.
- d. Nursing professionals ensure written informed consent wherever essential.
- e. Patient and/or family are educated in a language and format that they can understand.

CHAPTER: 5

INFECTION CONTROL PRACTICES

Intent of the Chapter:

The standards guide the provision of an effective infection control programme in the organization. There shall be a designated Infection control nurse.

The organization provides proper facilities and adequate resources to support the Infection Control Practices.

The practices includes an action plan to minimize hospital acquired infections, control outbreaks, disinfection/ sterilization activities and their monitoring, biomedical waste (BMW) management, employee health and training of nursing staff.

Summary of Standard

ICP.1.	Infection control nurse (s) shall be designated by the organization.
ICP.2.	Nursing professionals shall adhere to standard precautions and hand hygiene guidelines at all times.
ICP.3.	The nursing professionals shall adhere to handling, storage and disposal of bio medical waste as per the bio medical waste management Act, 1998.
ICP.4.	The designated nursing staff shall perform surveillance activities to capture and monitor infection control and prevention data.
ICP.5.	Isolation (barrier and reverse barrier nursing) practices shall be supervised by senior nursing professionals.
ICP.6.	Infection Control Nurse maintains records of all occupational injuries and pre- and post-exposure prophylaxis.

Standards and Objective Elements

Standard

ICP.1.	Infection control nurse (s) shall be designated by the organization
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Objective Elements

- a. The criteria for designating ICN shall be based on qualification or training.
- b. Infection control nurse (s) shall have specialized training (internal or external) in hospital infection control.
- c. Infection control nurse (s) shall have documented role and responsibilities.

Standard

ICP.2.	Nursing professionals shall adhere to standard precautions and hand hygiene guidelines at all times.
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Objective Elements

- a. Nursing professionals are trained in standard precautions and hand hygiene guidelines.
- b. Nursing professionals shall be conversant with Personal protective equipment (PPE) and their use.
- c. The organization audits compliance to standard precautions and hand hygiene practices.
- d. The nursing staff adheres to cleaning, disinfection and sterilization practices.
- e. The nursing staff adheres to safe linen management practices.
- f. The nursing staff adheres to the safe injection practices.
- g. The senior nursing professionals along with other professionals identified by the HCO monitor safe linen management practices.

Standard

ICP.3.	The nursing professionals shall adhere to handling, storage and disposal of bio medical waste as per the bio medical waste management Act, 1998.
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Objective Elements

- a. The organization ensures provision for appropriate biomedical waste management practices.
- b. Where applicable municipal waste (General waste) rules shall be complied with by the nursing personnel.

- c. Nursing professionals shall be conversant with disposal of Personal protective equipment (PPE).

Standard

ICP.4.	The designated nursing staff shall perform surveillance activities to capture and monitor infection control and prevention data.
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Objective Elements

- a. Surveillance activities are appropriately directed towards the identified high-risk areas and procedures.
- b. Appropriate feedback regarding HAI rates are provided on a regular basis to appropriate personnel.
- c. The surveillance activities include monitoring of environment and infection control indicators.
- d. The organization provides appropriate resources for isolation practices.

Standard

ICP.5.	Isolation (barrier and reverse barrier nursing) practices shall be supervised by senior nursing professionals.
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Objective Elements

- a. The organization provides appropriate resources for isolation practices.
- b. The Nursing professionals are familiar with the type of isolation (barrier and reverse barrier) facilities provided by the HCO.
- c. Senior Nursing Professionals monitor the nursing activities provided in isolation facilities.

Standard

ICP.6.	Infection Control Nurse maintains records of all occupational injuries and pre- and post-exposure prophylaxis.
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Objective Elements

- a. Hazardous materials specific to the settings and locations that they work in are identified by the nursing professionals. (as applicable).
- b. The nursing professionals implement processes for sorting, labeling, handling, storage, transporting and disposal of hazardous materials.
- c. The Nursing professionals are aware of the HCOs plan for managing the spills of hazardous materials and are able to supervise and adequately implement the same in their specific locations of work.
- d. Appropriate pre- and post-exposure prophylaxis is provided to all staff members concerned.

CHAPTER: 6

EMPOWERMENT AND GOVERNANCE

Intent of the Chapter:

The standards encourage the governance of the organization in a professional and ethical manner. The responsibilities of all the Nursing professionals performing management functions are defined.

The Nursing Service is led by qualified professionals with desired experience. Nursing professionals are involved in decision making processes. They are encouraged to participate in organization decision making groups and committees. There is a commitment to support and reward nursing staff from time to time.

Nursing professionals at the bedside are empowered to take decision to meet the needs of patients in collaboration with the care provider team. Nursing professionals at the bed side participate in plan of treatment and discharge plan by the medical team.

Leaders ensure that patient-safety and risk-management issues are an integral part of patient care and hospital management.

Summary of Standards

EG.1.	The responsibilities of those responsible for nursing management are defined.
EG.2.	The Head of the Nursing service ensures that suitable mechanisms exist to govern the nursing Service.
EG.3.	Nursing professionals are involved and participate in decision making related to organization and nursing services.
EG.4.	The Management empowers nursing staff
EG.5.	The organization has an established process for proactive risk assessment and error management.
EG.6.	The infection control programme is supported by the management and includes training of staff.

Standards and Objective Elements

Standard

EG.1.	The responsibilities of those responsible for nursing management are defined.
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Objective Elements

- a. Those responsible for nursing management lay down the nursing department vision.
- b. Those responsible for nursing management lay down the nursing department mission.
- c. Those responsible for nursing management lay down the nursing department values.
- d. Those responsible for nursing management establish the nursing department organogram.

Standard

EG.2.	The Head of the Nursing service ensures that suitable mechanisms exist to govern the nursing Service.
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Objective Elements

- a. There is an established head of the nursing services.
- b. The scope of Nursing services is defined in the nursing manual.
- c. The Nursing administrative policy and procedure is defined in the manual and implemented.
- d. The department manual shall govern the nursing functions and activities within the department.
- e. Nursing administrative policy and procedure is defined and implemented.
- f. Structured program exists for enhancing clinical competency and leadership skills of nursing professionals.
- g. The Nursing leaders are involved in quality improvement projects and program.

Standard

EG.3.	Nursing professionals are involved and participate in decision making related to organization and nursing services.
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Objective Elements

- a. A Nursing Management committee is established and it meets periodically to oversee Nursing related issues.
- b. Nursing professionals have membership in various committees as appropriate.

- c. Nursing professionals providing direct care are involved in action plan development and evaluation is based on evidence based data.
- d. The organization has a mechanism to seek feedback from nursing professionals and other staff regarding the quality of nursing care and for evaluating nursing satisfaction.

Standard

EG.4.	The Management empowers nursing staff.
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Objective Elements

- a. There is a policy on nursing empowerment to ensure timely nursing care of patients.
- b. Management empowers nursing staff by involving them in decision making.
- c. Management empowers nursing staff by appraisal and Job incentives, encouraging innovation.
- d. Management empowers nursing staff by supporting education.
- e. Management empowers nursing staff by promoting interpersonal relationships.

Standard

EG.5.	The organization has an established process for proactive risk assessment and error management.
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Objective Elements

- a. The Nursing service has clearly defined error prevention, error reporting and error addressing mechanisms and the same are documented.
- b. The Nursing professionals are provided with adequate resources including materials and equipment for providing safe and efficient nursing services.
- c. The nursing structure and processes support a culture of patient safety.
- d. The Nursing professionals are made aware of and are trained in code blue drills, disaster management and emergency situations including fire and non-fire emergencies.
- e. The standards of personal health and safety of the nursing professionals are maintained such that ability to practice is not compromised.
- f. There is an escalation process for nursing professionals when emergency and life threatening situations arise.

Standard

EG.6.	The infection control programme is supported by the management and includes training of staff.
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Objective Elements

- a. The management makes available resources required for the infection control practices.
- b. The organization conducts induction training for all staff.
- c. The organization conducts appropriate “in-service” training sessions for all staff at least once in a year.

CHAPTER: 7

NURSING QUALITY INDICATORS

Intent of the Chapter:

Nursing care quality improvement programme should be documented and involve all areas of the organization and all essential nursing staff members. The organization should collect data on structures, processes and outcomes, in nursing care areas. The collected data should be collated, analysed and used for further improvements. The improvements should be sustained.

Excellent nursing practice is a reflection of sound ethical standards. The registered nurse systematically enhances the quality and effectiveness of nursing practice by demonstrating quality, by documenting the application of the nursing process in a responsible, accountable and ethical manner and by using quality improvement activities to initiate changes in nursing practice and health care delivery system.

A system for monitoring and measurement of nursing quality parameters shall be established by the organization. Statistical review and analyses of trends shall be reviewed by the Organization in order to use these as tools to aim for excellence in nursing care delivery and satisfaction with nursing care amongst patients, thereby contributing to overall improvement in quality of care that every patient receives.

Summary of Standard

NQI.1.	There is a structured quality improvement and continuous monitoring program for nursing service.
NQI.2.	The organization identifies key indicators to monitor the structures, processes and outcomes, which are used as tools for continual improvement for nursing service.
NQI.3.	The nursing quality improvement programme is supported by the management.
NQI.4.	There is an established system for nursing audit.
NQI.5.	Incidents, complaints and feedback from nursing professionals are collected and analysed to ensure continual quality improvement.

Standards and Objective Elements

Standard

NQI.1.	There is a structured quality improvement and continuous monitoring program for nursing service.
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Objective Elements

- The quality improvement programme is developed, implemented and maintained by a committee with a representative from nursing personnel.
- There is a designated individual for coordinating and implementing the nursing quality-improvement programme.
- The quality improvement programme shall be reviewed at periodic intervals.

Standard

NQI.2.	The organization identifies key indicators to monitor the structures, processes and outcomes, which are used as tools for continual improvement for nursing service.
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Objective Elements

- The patient falls are monitored and the incident of patient falls is documented by the appropriate nursing professionals.
- The hospital acquired decubitus / pressure ulcers in various departments are monitored and recorded as per laid down protocols by the HCO.
- The medication errors during provisioning of care are monitored and recorded on occurrence by the concerned nursing staff in forms as laid down by the HCO.
- Monitoring of accidental delirium (if applicable).
- All extravasations are recorded and monitored as per the laid down protocols.
- All needle stick injuries are documented and monitored as per the policy laid down by the HCO that should be in consonance with the national and International guidelines.
- All restraint related incidents including strangulation are monitored and documented.
- The hand hygiene compliance is monitored and recorded by the nursing professionals responsible for the same.
- The compliance with pain assessment and management is monitored by the senior nursing professional while undertaking their professional rounds and the same is documented.
- The satisfaction of patients with the nursing care is monitored by the senior nursing professionals and the same is documented.

Standard

NQI.3.	The nursing quality improvement programme is supported by the management.
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Objective Elements

- a. The management makes available adequate resources required for quality improvement programme.
- b. The management supports and implements use of appropriate quality improvement, statistical and management tools in its quality improvement programme.
- c. The senior nursing professionals as delineated by the HCO also monitor the nursing satisfaction based on pre-determined criteria in consultation with the human resource department of the HCO.
- d. The attrition rate and frequency of attrition of the nursing professionals is monitored and documented by the head of the nursing in consultation with the human resource department of the HCO.

Standard

NQI.4.	There is an established system for nursing audit.
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Objective Elements

- a. Nursing staff participates in the audit.
- b. The parameters to be audited are defined by the organization.
- c. Patient and staff anonymity is maintained.
- d. All audits are recorded and reviewed.
- e. Implementation is recorded and reviewed.

Standard

NQI.5.	Incidents, complaints and feedback from nursing professionals are collected and analysed to ensure continual quality improvement.
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Objective Elements

- a. The organization has an incident reporting system.
- b. The organization has a process to collect feedback and receive complaints.
- c. The organization has established processes for analysis of incidents, feedbacks and complaints.
- d. Corrective and preventive actions are taken based on the findings of such analysis.
- e. Feedback about care and service is communicated to staff.

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