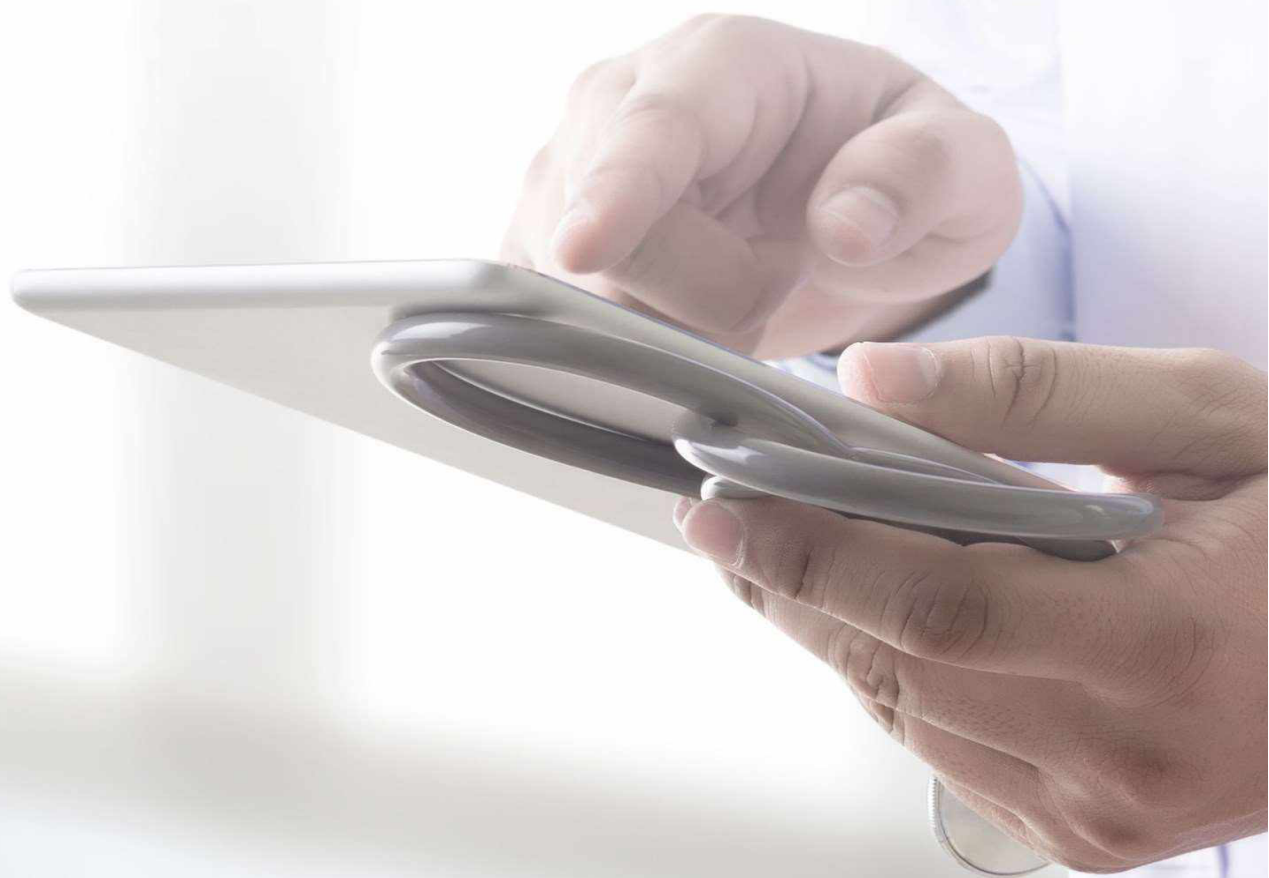




List of Amendments in

GAHAR PRIMARY HEALTHCARE

ACCREDITATION STANDARDS



2025 Edition

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1st June 2025

APC Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
APC.01 KW: Accurate and complete information	APC.03 KW: Accurate and complete information	<ul style="list-style-type: none"> - Modified EOC: (EOC.01: The PHC reports accurate and complete information to GAHAR during the <u>accreditation</u> process). - Modified EOC: (EOC.02: The PHC reports accurate and complete information to GAHAR in between <u>accreditation</u> visits). - Modified EOC: (EOC.03: The PHC reports within 30 days any structural changes in the PHC, scope of work of addition or deletion of medical services by more <u>than 20%</u> of its scope, building expansions, or demolitions).
APC.02 KW: Professional standards during surveys	APC.05 KW: Professional standards during surveys	<ul style="list-style-type: none"> - Modified Standard statement: (The PHC maintains professional standards <u>before and</u> during surveys). - Modified EOC: (EOC.01: The PHC reports any conflict of interest to GAHAR with evidence <u>before or</u> during surveys). - Added new EOC: (EOC.05: The PHC Displays GAHAR Gold Seal prominently (e.g., at facility entrance, website, external official documents, and advertisements).
APC.03 KW: <u>Sustaining compliance with accreditation standards</u>	APC.01 KW: Sustaining registration requirements	<ul style="list-style-type: none"> - Modified Standard statement: (The GAHAR-accredited PHC ensures continuous compliance with the standards). - Modified EOC: (EOC.01: The PHC establishes a process for assessment of compliance with <u>provisional accreditation/accreditation</u> standards at <u>least quarterly</u>). - Modified EOC: (EOC.02: The PHC acts on all feedback and reports received from GAHAR during the <u>provisional accreditation/accreditation</u> period). - Updated EOC: (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in PHC edition 2021.

PCC Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
PCC.01 KW: <u>Multidisciplinary patient-centeredness</u>	PCC.02 KW: interdisciplinary patient-centeredness	<ul style="list-style-type: none"> - Modified Standard statement: (Patient-centered culture is <u>developed and supported</u> by the PHC staff and leaders). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a multidisciplinary committee with clear terms of reference). • (EOC.02: The committee meets at least <u>quarterly</u>, and <u>meeting minutes</u> are <u>recorded</u>). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.03: Responsible staff are aware of patient-centered culture. - Updated EOC: (EOC.05) by merging three EOCs (EOC.02, EOC.03, and EOC.05) in PHC edition 2021.
PCC.02 KW: Patient and family rights	PCC.03 KW: Patient and family rights	<ul style="list-style-type: none"> - Rephrasing EOC: (EOC.05: Patients and families are informed of their rights in a manner they can understand). - Modified EOCs: (EOC.03: Patients' rights are posted and visible to patients, families, and staff). - Added new EOC: (EOC.06: Violations against patients' rights are reported and analyzed, and corrective action is taken).
PCC.03 KW: Patient and family responsibilities	PCC.04 KW: Patient and family responsibilities	<ul style="list-style-type: none"> - Modified EOC: (EOC.03: Patients' responsibilities are posted and visible to patients, families, and staff). - Rephrasing EOC: (EOC.04: Patients are informed of their responsibilities in a manner they can understand). - Added new EOC: (EOC.05: Violations against patients' responsibilities are reported and analyzed, and corrective action is taken).
PCC.04 KW: Patient and family education process	PCC.05 KW: Patient and family education process	<ul style="list-style-type: none"> - Modified Standard statement: (Patient and family education is clearly provided). - Modified EOCs:

		<ul style="list-style-type: none"> • (EOC.01: The PHC has a patient and family education policy guiding the process of patient and family education that includes at least the points mentioned <u>in the intent</u> from <u>a)</u> through <u>d)</u>. • (EOC.02: Responsible staff members are aware of patients' and families' education process and recording). <p>- Rephrasing EOC: (EOC.04: Patient education activities are recorded in the patient's medical record).</p>
PCC.05 KW: Recorded informed consent	PCC.07 KW: Recorded informed consent	<p>- Modified Standard statement: (The PHC has a defined process to obtain informed consent for certain medical processes).</p> <p>- Rephrasing EOC: (EOC.05: Healthcare professional obtaining the informed consent signs the form with the patient).</p> <p>- Modified EOC: (EOC.01: The PHC has an approved informed consent policy guiding the process of obtaining informed consent that includes all elements mentioned in <u>the intent</u> from <u>a)</u> through <u>b)</u>.</p>
PCC.06 KW: Waiting spaces	PCC.08 KW: Waiting spaces	<p>- No change.</p>
PCC.07 KW: Patient's dignity and privacy	PCC.09 KW: Patient's dignity and privacy	<p>- Rephrasing Standard statement: (The patient's dignity and privacy are protected during all medical care processes).</p> <p>- Rephrasing EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: Staff members provide care with respect for the patient's dignity and sense of self-worth). • (EOC.03: Patients are allowed to decide who can attend their screening, assessment, or management processes).
PCC.08 KW: Patient belongings	PCC.10 KW: Patient belongings	<p>- Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy guiding PHC responsibilities for patient belongings as mentioned in <u>the intent</u> from <u>a)</u> to <u>e)</u>.

		<ul style="list-style-type: none"> • (EOC.02: <u>Responsible staff members</u> are aware of the PHC's patient belongings policy). <p>- Added new EOC: (EOC.04: The patient's belongings are <u>protected</u> and <u>recorded</u> according to the policy).</p>
PCC.09 KW: Patient and family feedback	PCC.11 KW: Patient and family feedback	<p>- Rephrasing EOC:</p> <ul style="list-style-type: none"> • (EOC.02: Feedback from patients and families is received, analyzed and interpreted). • (EOC.03: The feedback is shared with the concerned staff members). <p>- Modified EOC: (EOC.04: The PHC monitors the reported data on patients' and families' feedback and takes actions to control or improve the process as appropriate).</p>
PCC.10 KW: Complaints and suggestions	PCC.12 KW: Complaints and suggestions	<p>- Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy guiding the process of managing patients' complaints and suggestions as mentioned in the <u>intent</u> from <u>a)</u> through <u>e)</u>. • (EOC.05: Complaints and suggestions are investigated & analyzed by the PHC and resolved in a <u>defined timeframe</u>). <p>- Added new EOC: (EOC.02: Staff is aware of the complaints policy).</p>
PCC.11 KW: Patient's needs	PCC.13 KW: Patient's needs	<p>- Modified EOC: (EOC.01: Healthcare providers identify patients' emotional, religious, and spiritual needs).</p> <p>- Added new EOC: (EOC.02: Patient needs and preferences are documented in the patient's medical record).</p>

ACT Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
ACT.01 KW: Granting access (before patient registration)	ACT.01 KW: Granting access (before patient registration)	<ul style="list-style-type: none"> - Modified EOC: (EOC.01: The PHC has an approved policy for granting <u>access</u> to patients that addresses all elements mentioned in the <u>intent</u> from <u>a)</u> through <u>d)</u>.
ACT.02 KW: Registration process	ACT.02 KW: Registration process	<ul style="list-style-type: none"> - Modified EOC: (EOC.01: The PHC has an approved policy guiding PHC registration that addresses all elements mentioned in <u>the intent</u> from a) through d).
ACT.03 KW: Patient identification	ACT.03 KW: Patient identification	<ul style="list-style-type: none"> - Rephrasing of standard statement to be: (Accurate patient identification using at least two identifiers to identify the patient). - Updated EOC: (EOC.05) by merging two EOCs (EOC.05 and EOC.06) in PHC 2021.
ACT.04 KW: Patient flow risks	ACT.04 KW: Patient flow risks	<ul style="list-style-type: none"> - Modified standard statement to be: (There is a process in place to manage patient flow through PHC).
ACT.05 KW: Patient care responsibility	ACT.05 KW: Patient care responsibility	<ul style="list-style-type: none"> - Rephrasing of standard statement to be: (The PHC has a process guiding the assignment of patient care responsibility). - Added a new EOC: (EOC.02: The medical staff are aware of the contents of the policy.
ACT.06 KW: Physical access and comfort	ACT.06 KW: Physical access and comfort	<ul style="list-style-type: none"> - No change.
ACT.07 KW: Wayfinding signage	ACT.07 KW: Wayfinding signage	<ul style="list-style-type: none"> - No change.
ACT.08 KW: Patient transportation	ACT.08 KW: Patient transportation	<ul style="list-style-type: none"> - Rephrasing of standard statement to be: (The PHC coordinates and provides patient transportation to meet patients' needs).
ACT.09 KW: Referral process	ACT.09 KW: Referral process	<ul style="list-style-type: none"> - Rephrasing of standard statement to be: (Processes of patient referral is defined). - Rephrasing EOC.04: The referral sheets are complete with all the required elements from i) to viii) in the intent and kept in the medical record).
ACT.10 KW: <u>Telemedicine</u>		<u>New Standard.</u>

ICD Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
ICD.01 KW: Uniform care	ICD.01 KW: Uniform care	<ul style="list-style-type: none"> - Modified Standard Statement: (Care delivery is uniform when similar services are needed based on the <u>clinical guidelines</u>). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a policy to ensure its commitment to providing uniform care to all patients when a similar service is needed). • (EOC.02: Responsible staff members are aware of the PHC policy). • (EOC.04: Patients, based on the acuity of their condition, equally receive the same level of care regardless of any barriers such as patient background, location, or the timing of care). - Modified EOC: (EOC.03: The PHC has clinical guidelines to guide the uniformity of care all over the PHC).
ICD.02 KW: <u>Screening and assessment by qualified staff</u>	ICD.02 KW: Collaborative care	<ul style="list-style-type: none"> - Modified Standard Statement: (The PHC defines who is permitted to screen and assess the patients according to laws and regulations). - Modified EOC: (EOC.02: The scope of screening and <u>assessment</u> for each staff category is defined).
ICD.03 KW: First visit health <u>assessment</u>	ICD.05 KW: First visit health screening	<ul style="list-style-type: none"> - Modified Standard Statement: (First visit health <u>assessment</u> is performed).
ICD.04 KW: Patient medical assessments, <u>family health clinic visit's sheet</u>	ICD.06 KW: Patient medical assessments	<ul style="list-style-type: none"> - Modified Standard Statement: (Medical assessment and care provided in family health clinics are according to national guidelines and protocols). - Added a new EOC: (EOC.02: Responsible Staff is aware of the policy).

		<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a patient medical assessment policy and procedures to define the contents of the family health clinic visit sheet, including items from a) through g). • (EOC.03: Significant findings and investigations are <u>documented</u> in the family health clinic visit sheet). • (EOC.04: The name and signature of the physician are <u>documented</u> in the family health clinic visit sheet).
ICD.05 KW: Patient nursing assessment	ICD.09 KW: Patient nursing assessment	<ul style="list-style-type: none"> - Modified Standard Statement: (Nursing assessments are performed according to the <u>national professional practice guidelines</u>). - Modified EOC: (EOC.03: Nursing assessments are performed <u>within a time frame according to the PHC policy</u>).
ICD.06 KW: Oral healthcare	ICD.08 KW: Oral healthcare	<ul style="list-style-type: none"> - Rephrasing of EOCs:(EOC.01: The PHC has an oral healthcare policy to guide oral healthcare services, <u>addressing the elements from a) through e)</u> in the intent). - Modified EOC: (EOC.03: Oral health services are performed according <u>to the policy</u>).
ICD.07 KW: Fall screening and prevention	ICD.10 KW: Fall screening and prevention	<ul style="list-style-type: none"> - Rephrasing of Standard Statement: (Patient's risk of falling is screened, assessed, and managed). - Rephrasing of EOC: (EOC.02: <u>Responsible staff</u> is aware of the elements of approved policy).
ICD.08 KW: Orders and requests	ICD.11 KW: Orders and requests	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: Medical orders follow all the required

		<p>elements mentioned in <u>the intent</u> from <u>a)</u> through <u>h)</u>.</p> <ul style="list-style-type: none"> • (EOC.03: There is a process to <u>evaluate</u> the completeness and <u>accuracy</u> of orders and requests. <p>- Added a new EOC: (EOC.04: Communication with medical staff members is done when an order or request is not clear, not complete, or needs more information).</p>
ICD.09 KW: Pain screening, assessment, and management	ICD.13 KW: Pain screening, assessment, and management	<p>- Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.02: Responsible staff members are aware of the policy). • (EOC.03: <u>All</u> patients are screened for pain). <p>- Added a new EOC: (EOC.04: A comprehensive pain assessment is performed when pain is identified from the screening).</p>
ICD.10 KW: Plan of Care	ICD.07 KW: Plan of Care	<p>- Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The plan of care is developed by all relevant disciplines based on their assessments). • (EOC.03: <u>The</u> plan of care is developed with the participation of the patient and/or family in decision-making). <p>- Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.02: The plan of care is <u>documented</u> in the <u>patient's medical record</u> and addresses all the elements mentioned in the intent from a) through g). • (EOC.05: The achievement of treatment goals is followed up and evaluated). <p>- Rephrasing of EOC:(EOC.04: <u>The plan of care is changed / updated, as appropriate, based on a</u></p>

		reassessment of the patient's changing condition.)
ICD.11 KW: Verbal and telephone orders	ICD.12 KW: Verbal and telephone orders	<ul style="list-style-type: none"> - Modified Standard Statement: (Verbal or telephone orders are communicated and <u>documented</u> according to a defined process). - Modified EOC: (EOC.01: The PHC has an <u>approved policy</u> for guiding the communication of verbal and telephone orders that addresses at least all elements mentioned in the intent from a) through e). - Updated EOC (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in PHC edition 2021.
ICD.12 KW: Emergency services	ICD.14 KW: Emergency services	<ul style="list-style-type: none"> - Added a new EOC: (EOC.01: The PHC has an <u>approved policy</u> for emergency services as mentioned in the <u>intent</u> from a) to d). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: Trained staff members offer emergency services). • (EOC.05: Medical records of emergency patients include Items from i) to <u>viii)</u> in the <u>intent</u>).
ICD.13 KW: Cardiopulmonary resuscitation	ICD.15 KW: Cardiopulmonary resuscitation and medical emergencies ICD.16 KW: Emergency equipment and supplies	<ul style="list-style-type: none"> - Updated standard by merging two standards (ICD.15 and ICD.16) in PHC edition 2021.
ICD.14 KW: Immunization program	ICD.17 KW: Immunization program	<ul style="list-style-type: none"> - No change.
ICD.15 KW: Pediatric immunization program	ICD.18 KW: Pediatric immunization program	<ul style="list-style-type: none"> - No change.
ICD.16	ICD.19	<ul style="list-style-type: none"> - No change.

KW: Adult immunization program	KW: Adult immunization program	
ICD.17 KW: Child health program	ICD.20 KW: Child health program	<ul style="list-style-type: none"> - Modified Standard Statement: (The child health program is effective and covers all newborns, infants, preschool, and school-age children, according to <u>national guidelines</u>).
ICD.18 KW: Maternity health program	ICD.21 KW: Maternity health program	<ul style="list-style-type: none"> - Modified EOC: (EOC.06: The PHC monitors the reported data of antenatal and postnatal visits and takes actions to control or improve the process, as appropriate).
ICD.19 KW: Reproductive health program	ICD.22 KW: Reproductive health program	<ul style="list-style-type: none"> - Modified EOC: (EOC.04: Reproductive Health education needed messages, material, <u>and tools</u> are available).
ICD.20 KW: Non-communicable diseases	ICD.23 KW: Non-communicable diseases	<ul style="list-style-type: none"> - Modified Standard Statement: (Management of non-communicable diseases is performed according to laws and regulations and <u>clinical guidelines</u>).
ICD.21 KW: Special-needs patient populations	ICD.24 KW: Special-needs patient populations	<ul style="list-style-type: none"> - Added a new EOC: (EOC.02: Responsible staff members are aware of the policy).
ICD.22 KW: Critical results	ICD.25 KW: Critical results	<ul style="list-style-type: none"> - Modified Standard Statement: (Critical results are communicated <u>in time and documented</u> according to the defined process). - Updated EOC (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in PHC edition 2021.

DAS Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
DAS.01 KW: Planning medical imaging services	DAS.01 KW: Planning medical imaging services	- Updated EOC (EOC.01) by merging two EOCs (EOC.01 and EOC.02) in PHC edition 2021.
DAS.02 KW: Technical standards (practice parameters)	DAS.02 KW: Technical standards (practice parameters)	- No change.
DAS.03 KW: Medical imaging results	DAS.03 KW: Medical imaging results	<ul style="list-style-type: none"> - Rephrasing of EOC: (EOC.02: Competent staff members are involved in interpreting and reporting results). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.04: Medical imaging and Ultrasound findings are recorded in the patient's medical record). • (EOC.05: When reports are not complete, there is a process to inform the reporting medical staff member and corrective action taken).
DAS.04 KW: Radiation safety program	DAS.04 KW: Radiation safety program	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a written, updated, and approved radiation safety program that addresses all elements mentioned in the intent from a) through f). • (EOC.04: The PHC ensures that exposed patients do not exceed the approved maximum level according to local laws and regulations. - Added a new EOC: (EOC.05: The PHC monitors the reported data on the radiation safety program, and it takes actions to control or improve the process as appropriate, at least quarterly).
DAS.05 KW: Laboratory services planning and management	DAS.05 KW: Laboratory services planning and management	<ul style="list-style-type: none"> - Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.04: Regular competency assessment of staff is implemented and recorded in their files). • (EOC.05: PHC has a process to ensure the safety and reliability of point-of-care testing results).

DAS.06 KW: Reagent management	DAS.06 KW: Reagent management	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (The PHC has a process to manage reagents and other laboratory supplies). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: An <u>updated</u> list of all reagents and supplies that are used for all testing processes). • (EOC.04: Reagent quality is <u>evaluated to ensure its validity</u> before use).
DAS.07 KW: Technical Procedures	DAS.07 KW: Technical Procedures	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The laboratory has a written procedure available to relevant staff for each analytical test method that addresses all elements mentioned in the intent from a) through e). • (EOC.02: <u>Laboratory staff are trained and updated about the technical laboratory procedure</u>). • (EOC.06: Internal and external quality control measures are performed and periodically reviewed, and appropriate corrective action is taken).
DAS.08 KW: Laboratory turnaround time.	DAS.08 KW: Laboratory turnaround time.	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a process defining each laboratory test's total turnaround time and means of measuring it). • (EOC.03: Reference interval updated in the laboratory report at least annually). - Updated EOC: (EOC:4) by merging two EOCs (EOC.05 and EOC.06) in PHC 2021. - Added a new EOC: (EOC.05: Delays in turnaround time are notified to requestors/end-users).
DAS.09 KW: Laboratory safety program	DAS.09 KW: Laboratory safety program	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: A written updated program that describes safety measures for laboratory and laboratory services includes the items in the intent from a) through i).

		<ul style="list-style-type: none">• (EOC.03: Staff are compliant with safety precautions according to the program).• (EOC.05: The PHC monitors the reported data on the laboratory safety program and takes actions to control or improve the process as appropriate). <p>- Rephrasing of EOC: (EOC.02: Laboratory staff are trained on the laboratory safety program).</p>
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SIP Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
SIP.01 KW: Surgery and invasive procedure services	SIP.01 KW: Surgery and invasive procedure services	<ul style="list-style-type: none"> - Modified EOC: (EOC.01: All units providing surgery and invasive procedure services have appropriate spacing, ventilation, and infrastructure. - Rephrasing of EOC: (EOC.03: All surgical and invasive procedure staff are qualified and competent.
SIP.02 KW: Assessment before surgery and invasive procedures	SIP.02 KW: Assessment before surgery and invasive procedures	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (Complete medical and nursing assessment is performed before surgical and invasive procedures). - Modified EOCS: <ul style="list-style-type: none"> • (EOC.01 A complete medical assessment is performed for all patients going for any surgery or invasive procedure). • (EOC.02 Complete nursing assessment is performed for all patients going for any surgery or invasive procedure). • (EOC.03 Results of investigations are available for healthcare professionals before surgery or invasive procedure).
SIP.03 KW: Surgical site marking	SIP.03 KW: Surgical site marking	<ul style="list-style-type: none"> - Modified Standard statement: (The precise site where surgery or invasive procedure shall be performed is clearly marked by the physician, along with the patient and/or family involvement). - Modified EOCS: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy guiding the site marking process that includes at least elements from <u>a</u>) through <u>g</u>) mentioned in the <u>intent</u>). • (EOC.02: <u>Responsible staff</u> are aware of the implementation of site marking). - Updated EOC (EOC.04) by merging two EOCS (EOC.04 and EOC.05) in PHC edition 2021.
SIP.04 KW: Pre-operative checklist	SIP.04 KW: Pre-operative checklist	<ul style="list-style-type: none"> - Modified EOCS: <ul style="list-style-type: none"> • (EOC.01: The PHC has an <u>approved process</u> for preoperative verification of all needed documents and equipment).

		<ul style="list-style-type: none"> • (EOC.02: <u>Responsible staff</u> are trained on the PHC process for preoperative verification). • (EOC.03: Recorded evidence of preoperative verification of all needed documents and equipment before each <u>surgery</u> or invasive procedure exists. <p>- Updated EOC (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in PHC edition 2021.</p>
SIP.05 KW: Timeout	SIP.05 KW: Timeout	<p>- Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy to ensure the correct patient, procedure, and body part before <u>surgical</u> or invasive procedures). • (EOC.02: Time out is implemented before <u>surgery</u> or invasive procedure starts).

MMS Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
MMS.01 KW: Medication management, Pharmacy and Therapeutic Committee (PTC).	MMS.01 KW: Medication management program	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (Medications are managed and used in a way to meet patient's needs in alignment with the PHC scope of services and according to the applicable laws and regulations). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: A licensed pharmacist supervises all medication management activities according to law and regulations).
MMS.02 KW: Antimicrobial stewardship program	MMS.02 KW: Antimicrobial stewardship program	<ul style="list-style-type: none"> - Modified Standard statement: (Antimicrobial stewardship program is developed and implemented to enhance the rational use of antimicrobial agents). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved <u>multidisciplinary</u> antimicrobial stewardship program based on national and/or international protocols, guidelines, and regulations). • (EOC.03: The antimicrobial stewardship program uses PHC-approved <u>scientifically</u> based protocols). - Updated EOC: (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in PHC edition 2021.
MMS.03 KW: Medication procurement, formulary, <u>medication shortage</u>	MMS.03 KW: Medication procurement, formulary	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an updated list of the approved medications (often referred to as a formulary), which includes at least items from <u>a)</u> to <u>e)</u> in the <u>intent</u>. • (EOC.03: <u>There is a process for overseeing medication use in the PHC to monitor, maintain, and update the medication list at least annually).</u>
MMS.04 KW: <u>Medication storage, medication labelling, multiple dosing medication</u>	MMS.04 KW: Medication labelling	<ul style="list-style-type: none"> - Modified Standard statement: (Medications are stored in <u>a manner to maintain their security and quality</u>). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: <u>The PHC has an approved process for the use and storage of multi-</u>

		<p>dose medications to ensure their stability and safety).</p> <ul style="list-style-type: none"> • (EOC.05: All medications, medication containers, and other solutions in the PHC are clearly <u>labeled</u> (if not clearly shown on the <u>original package/box/container/ampoule/vial</u>) in a standardized manner with at least the elements from <u>a) to f) in the intent</u>).
MMS.05 KW: <u>Life-supporting</u> medications	MMS.05 KW: Emergency medications	<ul style="list-style-type: none"> - Rephrasing of Standard statement to be: (Life-supporting medications are available, accessible, and secured at all times). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy to guide <u>life supporting medications</u> availability that addresses at least all elements mentioned in the intent from a) through c). • (EOC.02: Life-supporting medications are appropriately available and accessible when required. - Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.03: Life-supporting medications are uniformly stored in all locations). • (EOC.04: Life-supporting medications are replaced within a predefined timeframe when used, damaged, or outdated).
MMS.06 KW: High-risk medications	MMS.06 KW: High-risk medications, concentrated electrolytes	<ul style="list-style-type: none"> - Modified Standard statement: (High-risk medications are identified, stored, and dispensed in a way that assures the risk is minimized). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved high-risk medication management policy that addresses elements <u>a) and b) in the intent</u>). • (EOC.02: The PHC provides <u>training</u> to the healthcare professionals involved in the management and use of high-risk medications. • (EOC.03: The PHC has an approved and annually updated list(s) of high-risk medications) .

		<ul style="list-style-type: none"> • (EOC.04: The PHC implements process(es) to prevent inadvertent use of high-risk medications) . • (EOC.05: The PHC monitors the reported data on management of high-risk medications and takes actions to control or improve the process as appropriate) .
MMS 07 KW: Look-alike and sound-alike medication	MMS.07 KW: Look-alike and sound-alike medication	<ul style="list-style-type: none"> - Modified Standard statement: (Look-alike and sound-alike medications are identified, stored, and dispensed in a way that assures that risk is minimized) . - Rephrasing of EOC: (EOC.01: The PHC has an approved policy for managing look-alike and sound-alike medications that addresses all elements in the standard intent from a) through d). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: The PHC has <u>an approved</u> and annually updated list(s) of look-alike and sound-alike medications). • (EOC.03: The PHC provides training to the healthcare professionals involved in the management and use of LASA). • (EOC.04: The PHC implements process(es) to prevent inadvertent use of LASA medications). • (EOC.05: The PHC monitors the reported data on the management of LASA and takes actions to control or improve the process as appropriate).
MMS.08 KW: <u>Medication</u> recall, expired medications, outdated medications.	MMS.08 KW: Drug recall, expired and outdated medication	<ul style="list-style-type: none"> - Modified Standard statement: (The PHC has a system in place for medication recall). - Modified EOC: (EOC.01: The PHC has an approved policy to guide drug recall process that includes all elements from <u>a)</u> through <u>d)</u> in the <u>intent</u>). - Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.03: Recalled medication(s) is/are retrieved, labeled, separated, and disposed of (or removed) according to the policy).

		<ul style="list-style-type: none"> • (EOC.04: Expired, outdated, damaged, and/or contaminated medications are stored separately and disposed or removed safely according to the PHC policy).
MMS.09 KW: <u>Medication reconciliation</u>, best possible medication history (BPMH)	MMS.10 KW: Best possible medication history	<ul style="list-style-type: none"> - Modified Standard statement: (Medications are reconciled across all interfaces of care in the PHC). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy for obtaining best possible medication history that includes all elements mentioned in the <u>intent</u> from <u>a)</u> through <u>d)</u>. • (EOC.02: Staff <u>responsible for reconciling medications</u> are trained to take the best possible medication history (BPMH) and <u>reconcile medications</u>). • (EOC.03: Medication prescriber identified by the PHC compares the list of current medications with the list of medications to be prescribed). - Rephrasing of EOC: (EOC.04: <u>Reconciled medications</u> are clearly recorded, and related information is clearly communicated to healthcare professionals involved in the patient's medication prescribing).
MMS.10 KW: Medication ordering, medication prescribing	MMS.09 KW: Ordering, prescribing, transcribing, abbreviations, and symbols	<ul style="list-style-type: none"> - Modified Standard statement: (PHC Medication ordering and prescribing in the PHC are safe and follow laws and regulation). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy to guide the processes of ordering and prescribing medications that addresses all elements mentioned in the <u>intent</u> from <u>a)</u> through <u>g)</u>. • (EOC.02: The PHC is responsible for identifying those healthcare professionals permitted by law and regulation, qualification, training, experience, and job description to order medications). • (EOC.03: Medication prescriptions are complete <u>and include items from i) to xi) in element d) in the intent</u>. • (EOC.04: Refills of chronic medication occur according to <u>PHC policy</u>).
MMS.11	MMS.11 KW: Medication appropriateness	<ul style="list-style-type: none"> - Rephrasing of EOCs:

KW: Medication appropriateness review	review, competent pharmacist	<ul style="list-style-type: none"> • (EOC.01: The patient-specific information required for an effective review process and the source(s) of this information are always available and accessible). • (EOC.02: Each prescription is reviewed for appropriateness by a licensed pharmacist prior to dispensing and the review process includes elements a) through h) in the intent). • (EOC.03: When an <u>on-site licensed pharmacist</u> is not available, a trained healthcare professional <u>is identified</u> by the PHC to perform a review of critical elements f) through h) in the intent).
MMS.12 KW: Medication preparation, labelling of medications, medication dispensing, medication administration.	MMS.12 KW: Medication preparation, labelling of medications, dispensing, and administration	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (Medications are safely and accurately prepared, dispensed, and administered). - Rephrasing of EOC: (EOC.03: The PHC has a uniform medication dispensing <u>process</u>). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC identifies those healthcare professionals, <u>by law and regulation</u>, qualification, training, experience, and job description, authorized to prepare, dispense, and administer medications and admixtures, with or without supervision). • (EOC.05: Medication administered is verified according to points from <u>a)</u> through <u>j)</u> in the <u>intent</u> and recorded in the patient's medical record. - Added new EOCs: <ul style="list-style-type: none"> • (EOC.04: Dispensed medication(s) is/are clearly labeled (electronically or manually through handwriting) with necessary medication-related use information). • (EOC.06: Patient and/or family are provided with necessary information (verbal and/or written) about the proper use and handling of dispensed medication(s).
MMS.13 KW: Medication errors, near miss, medication therapy	MMS.13 KW: Medication errors, near miss, medication therapy	<ul style="list-style-type: none"> - No change.

problems, adverse
drug effects/events.

problems, adverse
drug reactions

EFS Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
EFS.01 KW: PHC environment and facility safety	EFS.01 KW: PHC environment and facility safety structure	<ul style="list-style-type: none"> - Modified Standard Statement: (PHC facilities comply with laws, regulations, <u>and civil defence requirements</u>). - Modified EOC: <ul style="list-style-type: none"> • (EOC.01: The PHC complies with laws, regulations, and <u>civil defence requirements</u> as required). - Rephrasing of EOC: (EOC.02: The PHC leadership responds to external inspection reports within the required timeframe). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.03: The PHC leadership works with the governing body to maintain the environment of care). • (EOC.04: PHC leadership ensures the availability of current and updated work permits when required). • (EOC.05: PHC leadership ensures that all environmental and facility safety plans are evaluated and updated annually with improvement when required).
EFS.02 KW: <u>Environment and facility safety program monitoring</u>	EFS.01 KW: PHC environment and facility safety structure	<ul style="list-style-type: none"> - New standard statement: (PHC environment and facility safety program is overseen and monitored by a trained staff). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.02: The PHC ensures that multidisciplinary environment and facility surveillance rounds are performed across all PHC areas and services at least quarterly. And corrective actions are taken when indicated.) • (EOC.03: There is a quarterly report submitted to the PHC leadership about the significant observations during the surveillance rounds and the corrective actions taken when needed.)
EFS.03 KW: Fire and smoke safety	EFS.02 KW: Fire and smoke safety	<ul style="list-style-type: none"> - Rephrasing of Standard Statement: (Fire and smoke safety plan addresses prevention, <u>alarm system response</u>, and safe evacuation in case of fire and/or other internal emergencies).

		<ul style="list-style-type: none"> - Modified EOC: (EOC.01: The PHC has an approved, <u>updated</u> fire and smoke safety plan that includes all elements from <u>a)</u> through <u>e)</u> in the intent). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.02: All staff are trained on fire safety plans and can demonstrate their rules during fire or non-fire internal emergencies at least annually). • (EOC.03: Fire risk assessment with risk mitigation measures are in place with corrective action when required). • (EOC.04: The PHC fire alarm system is available, functioning, inspected, tested and maintained on a regular basis). • (EOC.05: The PHC fire suppression system is available, functioning, inspected, tested and maintained on a regular basis). • (EOC.06: Emergency exit doors and corridors are clearly signed and not obstructed).
EFS.04 KW: <u>Fire drills</u>	EFS.02 KW: Fire and smoke safety	<ul style="list-style-type: none"> - New standard statement: (Fire drills are performed in different PHC areas). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: Fire drills are performed at least <u>quarterly</u>, including one unannounced drill.) • (EOC.02: <u>All staff members participate in fire drills</u> at least once annually.) • (EOC.05: The PHC staff guarantee Safe evacuation of patients, staff and visitors.) - Added new EOCs: <ul style="list-style-type: none"> • (EOC.03: Fire drill results are recorded from a) through d) in the intent). • (EOC.04: Fire drill results evaluation is performed after each drill and corrective action plan when indicated.)

EFS.05 KW: Smoking-Free Environment	EFS.03 KW: Smoking-free environment	<ul style="list-style-type: none"> - Rephrasing of Standard Statement: (The PHC clinical and non-clinical areas are smoking-free). - Modified EOC: (EOC.03: Occupants, according to laws and regulations, do not smoke in all areas inside the buildings).
EFS.06 KW: Hazardous materials safety	EFS.04 KW: Hazardous materials and waste management	<ul style="list-style-type: none"> - Modified Standard Statement: (The PHC plans safe handling, storage, usage and transportation of hazardous materials and waste management). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a hazardous material and waste management plan that addresses all elements from <u>a</u>) through <u>k</u>) in the <u>intent</u>). • (EOC.03: The PHC ensures safe usage, handling, storage, <u>availability of SDS</u> and labelling of hazardous materials). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.02: Staff is trained on hazards material and waste management). • (EOC.04: The PHC ensures safe handling, storage, and labelling of waste according to laws and regulations).
EFS.07 KW: Safety Management Plan	EFS.05 KW: Safety management plan	<ul style="list-style-type: none"> - Modified Standard Statement: (<u>A safe work environment plan</u> addresses high-risk areas, procedures, risk mitigation requirements, tools, and responsibilities). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved and updated plan to ensure a safe work environment that includes all elements from <u>a</u>) through <u>g</u>) in <u>the intent</u>). • (EOC.02: Staff are <u>trained on</u> safety measures based on their jobs). • (EOC.04: Safety measures and PPEs are available and used whenever indicated). - Added a new EOC: (EOC.03: Risk mitigation is conducted based on risk assessment).

<p>EFS.08 KW: <u>Pre-Construction risk assessment</u></p>	<p>IPC.09 KW: Demolition, renovation, construction</p>	<ul style="list-style-type: none"> - Modified Standard Statement: (The PHC performs a pre-construction risk assessment when planning for construction or renovation). - Added a new EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC performs a pre-construction risk assessment before any construction or renovation). • (EOC.02: All affected services are involved in the risk assessment). • (EOC.04: If a contractor is used, contractor's compliance is monitored and evaluated by the PHC).
<p>EFS.09 KW: Security Plan</p>	<p>EFS.06 KW: Security plan</p>	<ul style="list-style-type: none"> - Modified Standard Statement: (Security plan addresses the security of all occupants and properties). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved updated security plan that includes items <u>a</u>) through <u>l</u>) in the <u>intent</u>). • (EOC.02: All staff are trained on the security plan). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.03: Risk mitigation is conducted based on risk assessment). • (EOC.04: Staff and vendors/ contractors' identification is implemented). • (EOC.06: Drill for child abduction at least bi-annually). - Rephrasing of EOC: (EOC.05: Occupants are protected from harm at all times).
<p>EFS.10 KW: Medical Equipment Plan</p>	<p>EFS.07 KW: Medical equipment management plan</p>	<ul style="list-style-type: none"> - Rephrasing for Standard Statement: (Medical equipment plan ensures selection, inspection, testing, maintenance, and safe use of medical equipment). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved updated medical equipment management plan that addresses all elements from <u>a</u>) through <u>k</u>) in the <u>intent</u>).

		<ul style="list-style-type: none"> • (EOC.02: The PHC has a qualified individual to oversee medical equipment management). - Added a new EOC: (EOC.06: Equipment adverse incidents are reported, and actions are taken.
EFS.11 KW: Utilities Management Plan	EFS.08 KW: Utilities management plan	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: PHC has an approved updated plan for utility management that includes items <u>a</u>) through <u>j</u>) in the <u>intent</u>). • (EOC.02: Staff are trained to oversee utility management).
EFS.12 KW: Disaster Plan	EFS.09 KW: Disaster plan	<ul style="list-style-type: none"> - Rephrasing of Standard Statement (Emergency preparedness plan addresses responding to disasters that have the potential of occurring within the geographical area of the PHC). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: There is an approved PHC emergency preparedness plan that includes items <u>a</u>) through <u>g</u>) in the <u>intent</u>). • (EOC.02: Staff members are trained on the plan). • (EOC.03: The PHC performs at least one drill <u>biannually</u> that includes items from <u>(i)</u> through <u>(v)</u> in the intent). • (EOC.04: The PHC demonstrates preparedness for identified emergencies based on <u>risk assessment</u>.)
EFS.13 KW: <u>Environmental Sustainability, Green Healthcare</u>		<ul style="list-style-type: none"> - New Standard.

IPC Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
IPC.01 KW: Infection prevention and control (IPC) team	IPC.01 KW: IPC team, IPC committee	<ul style="list-style-type: none"> - Modified Standard Statement: (<u>An Assigned team of healthcare professionals oversees</u> the infection prevention and control activities according to applicable laws and regulations and national and international guidelines). - Modified EOC: (EOC.02: The IPC team leader <u>is a trained</u> healthcare professional). - Added new EOC: (EOC.03: The IPC team members are <u>trained</u>). - Rephrasing of EOC: <ul style="list-style-type: none"> • (EOC.01: There is a responsible IPC team) • (EOC.04: The IPC team member(s) has the ability to communicate with the <u>PHC leaders</u> and all functioning units).
IPC.02 KW: IPC program, risk assessment, guidelines	IPC.02 KW: IPC program, risk assessment, guidelines	<ul style="list-style-type: none"> - Added a new EOC: <ul style="list-style-type: none"> • (EOC.01: PHC has an infection control program that addresses all the elements mentioned in <u>the intent</u> from <u>a)</u> through <u>h)</u>. • (EOC.02: The healthcare professionals involved in infection control are <u>aware</u> of the contents of the program). - Modified EOC: <ul style="list-style-type: none"> • (EOC.04: The program is implemented in all PHC areas and covers patients, visitors, and staff).
IPC.03 KW: IPC committee, meetings	IPC.01 KW: IPC team, IPC committee	<p>Modified Standard Statement: (The PHC establishes a functioning multidisciplinary IPC committee according to laws and regulations).</p> <p>Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: There are clear terms of reference for the infection control committee that includes at least from a) through d) in the intent). • (EOC.03: The committee meets on a regular basis).
IPC.04 KW: Hand hygiene	IPC.03 KW: Hand hygiene	<ul style="list-style-type: none"> - Added a new EOC: (EOC.01: The PHC has a Hand hygiene policy, and procedures based on current guidelines that address all

		<p>the elements mentioned in the <u>intent</u> from a) through f).</p> <ul style="list-style-type: none"> - Modified EOC: <ul style="list-style-type: none"> • (EOC.02: <u>Related staff</u> is trained on the policy and procedures). • (EOC.03: Hand hygiene is implemented according to the policy). - Updated EOC (EOC.06) by merging two EOCs (EOC.05 and EOC.06) in PHC edition 2021.
IPC.05 KW: Standard precaution measures	IPC.04 KW: Standard precaution measures	<ul style="list-style-type: none"> - Added a new EOC: (EOC.06: Related staff receive training on the standard precaution measures).
IPC.06 KW: Suspected communicable disease	IPC.05 KW: Suspected communicable disease	<ul style="list-style-type: none"> - No change.
IPC.07 KW: Disinfection, sterilization	IPC.06 Disinfection, sterilization	<ul style="list-style-type: none"> - Modified EOC: (EOC.02: <u>Responsible</u> staff is trained on approved policy).
IPC.08 KW: Disinfection/sterilization quality control program	IPC.07 KW: Disinfection/sterilization quality control program	<ul style="list-style-type: none"> - No change.
IPC.09 KW: Laundry service, textile	IPC.08 KW: Laundry service, textile	<ul style="list-style-type: none"> - Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.02: Responsible staff is aware of the laundry service policy). • (EOC.03: Contaminated textile is collected, stored, and transported <u>according to</u> the laundry service and healthcare textile management policy).

OGM Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
OGM.01 KW: Governing body structure and responsibilities	OGM.01 KW: Governance structure	<ul style="list-style-type: none"> - Modified Standard statement: (The PHC has a defined governing body structure, <u>responsibilities</u>, and <u>accountabilities</u>). - Modified EOC: (EOC.04The governing body has defined its responsibilities and accountabilities towards the PHC's principal stakeholders <u>as mentioned in the intent from a) to f)</u> and has a process for resource allocation that includes clear criteria for selection and prioritization).
OGM.02 KW: PHC director	OGM.02 KW: PHC management	<ul style="list-style-type: none"> - Modified Standard statement: (A full-time qualified director is appointed by the governing body to manage the PHC according to applicable laws and regulations). - Modified EOC: - (EOC.02: There is a job description for the PHC director covering the standard requirements from <u>a)</u> through <u>i)</u> as in the <u>intent</u>). - (EOC.04: The PHC ensures process of coordination and communication through established committees with defined terms of <u>references, documented minutes, and annual reviews</u>). - Added new EOCs: <ul style="list-style-type: none"> • (EOC.05: The governing body receives a periodic report from the PHC leadership about quality, patient safety, and performance measures at least annually). • (EOC.06: There is evidence of delegation of authority when needed).
OGM.03 KW: Clinical governance program.		<ul style="list-style-type: none"> - <u>New Standard.</u>
OGM.04 KW: PHC leaders	OGM.03 KW: PHC leaders	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: The responsibilities of the PHC leaders include at least <u>a)</u> through <u>d)</u> in the <u>intent</u>). • (EOC.03: PHC leaders are aware of and perform their responsibilities).
OGM.05 KW: Strategic Planning	OGM.04 KW: Strategic Planning	<ul style="list-style-type: none"> - Rephrasing of EOC: <ul style="list-style-type: none"> • (EOC.01: The PHC has a strategic plan with goals and defined objectives).

		<ul style="list-style-type: none"> - Modified EOC: (EOC.03: The strategic plan is reviewed annually).
OGM.06 KW: Operational Planning	OGM.05 KW: Operational Planning	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (Operational plans are developed to achieve the strategic plan goals and objectives). - Rephrasing of EOC: <ul style="list-style-type: none"> • (EOC.02: Staff is involved in developing the related operational plans). • (EOC.04: Leaders evaluate the operational plans annually, with <u>inputs</u> considered for a new cycle of planning. - Modified EOC: (EOC.03: Operational plans progress/analysis reports are <u>done quarterly</u>).
OGM.07 KW: Stock management	OGM.06 KW: Stock management	<ul style="list-style-type: none"> - No change.
OGM.08 KW: Billing system	OGM.07 KW: Billing system	<ul style="list-style-type: none"> - No change.
OGM.09 KW: Contract management	OGM.08 KW: Contract management	<ul style="list-style-type: none"> - Rephrasing of EOC: (EOC.02: There is a list of all contracted services, including provided services.
OGM.10 KW: Ethical management	OGM.09 KW: Ethical management	<ul style="list-style-type: none"> - Modified EOC: <ul style="list-style-type: none"> • (EOC.01: The PHC has an approved policy for ethical management that addresses at least <u>a)</u> to <u>g)</u> in the <u>intent</u>). • (EOC.03: Ethical issues are discussed and managed according to the approved code of ethics and <u>resolved within a defined time frame</u>.
OGM.11 KW: Positive Workplace Culture	OGM.10 KW: Positive Workplace Culture	<ul style="list-style-type: none"> - No change.
OGM.12 KW: Staff rest areas	OGM.11 KW: Staff working conditions	<ul style="list-style-type: none"> - No change.
OGM.13 KW: Staff health	OGM.12 KW: Staff health	<ul style="list-style-type: none"> - Modified EOC: <ul style="list-style-type: none"> • (EOC.01: There is a staff health program according to laws and regulations that cover items <u>a)</u> to <u>k)</u> in the <u>intent</u>). • (EOC.03: Staff members are educated about the risks within the PHC environment, their specific job-related hazards, <u>positive health</u>

		promotion strategies, and periodic medical examinations).
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CAI Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
CAI.01 KW: Community profile	CAI.01 KW: Community profile	- No change.
CAI.02 KW: Planning for community involvement	CAI.02 KW: Planning for community involvement	<ul style="list-style-type: none"> - Modified Standard Statement: (The PHC establishes a community involvement program). - Modified EOC: <ul style="list-style-type: none"> • (EOC.01: There is a program for <u>community involvement</u> that covers all components from <u>a)</u> through <u>g)</u> in the intent). • (EOC.03: There is evidence that <u>health needs assessment</u> and improvement activities are done in collaboration with community members).
CAI.03 KW: PHC advertisement	PCC.01 KW: PHC advertisement	- No change.
CAI.04 KW: Health education	CAI.03 KW: Health education	<ul style="list-style-type: none"> - Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.02: Responsible staff member for providing community health education is competent). • (EOC.05: All activities of <u>health education program</u> are recorded).
CAI.05 KW: Proper nutrition	CAI.04 KW: Proper nutrition	<ul style="list-style-type: none"> - Modified EOC: (EOC.01: The PHC has a structured <u>nutrition promotion</u> program that covers all items mentioned in the intent from <u>a)</u> through <u>g)</u>. - Rephrasing of EOC: (EOC.05: The program outcomes are evaluated).
CAI.06 KW: Surveillance and reporting	CAI.05 KW: Surveillance and reporting	<ul style="list-style-type: none"> - Modified EOC: <ul style="list-style-type: none"> • (EOC.02: <u>Responsible Staff</u> is aware of the list of communicable diseases and trained on their detection). - Rephrasing of EOCs: (EOC.01: The PHC has a policy of surveillance of communicable and endemic diseases that <u>covers all elements in the intent from a) through e)</u>. • (EOC.03: <u>Responsible staff</u> is trained in outbreaks management protocols).

CAI.07 KW: Safe water supply	CAI.06 KW: Safe water supply	- No change.
CAI.08 KW: Community involvement program evaluation	CAI.07 KW: Community involvement program evaluation	- No change.

WFM Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
WFM.01 KW: Staffing plan	WFM.01 KW: Staffing plan	- No change.
WFM.02 KW: Job description	WFM.02 KW: Job description	- No change.
WFM.03 KW: Recruitment	WFM.03 KW: Recruitment	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (The PHC <u>implements</u> a uniform recruitment process with the participation of service/unit leaders). - Rephrasing of EOC: (EOC.02: Staff involved in the recruitment process are aware of the PHC policy).
WFM.04 KW: Staff files	WFM.04 KW: Staff files	- Rephrasing of EOC: (EOC.04: Staff files include all the required records, including from i) through viii), as mentioned in the <u>intent</u>).
WFM.05 KW: Orientation program	WFM.05 KW: Orientation program	<ul style="list-style-type: none"> - Rephrasing of Standard statement: (All PHC staff undergo a formal orientation program). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The general orientation program is performed, and it includes at least the elements from a) through e) in the <u>intent</u>. • (EOC.03: Job specific orientation program is performed, and it includes at least the elements from i) through l) in the <u>intent</u>. • (EOC.04: <u>All new staff members, including contracted and outsourced staff</u>, attend the orientation program regardless of employment terms.
WFM.06 KW: Continuous education program	WFM.06 KW: Continuous education program	- No change.
WFM.07 KW: Staff performance evaluation	WFM.07 KW: Staff performance evaluation	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: <u>Performance and competency evaluation</u> is performed at least annually for each staff member.) • (EOC.02: <u>Performance and competency evaluation</u> is performed based on the job description and kept in staff files.) • (EOC.03: There is evidence of employee feedback on performance and <u>competency evaluation</u>).
WFM.08 KW: Clinical Privileges	WFM.08 KW: Clinical Privileges	- Modified EOCs: (EOC.01: The PHC has an approved policy that addresses at least all elements from a) through g) in the <u>intent</u>).

IMT Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
IMT.01 KW: <u>Information management plan</u>	IMT.01 KW: Information management planning	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC leadership performs information needs assessment). • (EOC.02 The PHC has an approved information management plan that includes items from <u>a)</u> through <u>f)</u> in the <u>intent</u>.
IMT.02 KW: <u>Document control system</u>	IMT.02 KW: Quality management system documents	<ul style="list-style-type: none"> - Rephrasing of standard statement to be: (The PHC establishes a document control system for its key functions). - Modified EOCs: (EOC.01: The PHC has a <u>policy</u> that addresses items from <u>a)</u> through <u>g)</u> in the intent.
IMT.03 KW: <u>Use of symbols, and abbreviations</u>	IMT.03 KW: Use of codes, symbols, and abbreviations	<ul style="list-style-type: none"> - Modified Standard statement: (The PHC defines standardized symbols and abbreviations). - Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: All staff who record in the patient's medical record are <u>trained on</u> the policy requirements). • (EOC.03: Symbols and abbreviations, including the approved list, are used according to the policy. • (EOC.04: Violations of the list of not-to-use symbols/abbreviations are monitored, and corrective actions are taken).
IMT.04 KW: <u>Confidentiality and security of data</u>	IMT.04 KW: Confidentiality and security of data and information	<ul style="list-style-type: none"> - Modified Standard statement: (The PHC maintains data and information confidentiality and security). - Modified EOCs: (EOC.01: The PHC has a confidentiality and security of data and information policy that includes all the points in the <u>intent</u> from <u>a)</u> through <u>f)</u>.
IMT.05 KW: Integrity of data and information	IMT.05 KW: Integrity of data and information	<ul style="list-style-type: none"> - No change.
IMT.06	IMT.06	<ul style="list-style-type: none"> - No change.

KW: Retention of data and information	KW: Retention of data and information	
IMT.07 KW: <u>Medical record management</u>	IMT.07 KW: Patient's medical record management	- Rephrasing of standard statement: (The patient's medical record is managed to ensure effective patient care).
IMT.08 KW: <u>Patient's medical record usage.</u>	IMT.08 KW: Patient's medical usage process	<ul style="list-style-type: none"> - Rephrasing of standard statement: (The PHC ensures effective usage of patients' medical records). - Modified EOCs: (EOC.02: The <u>responsible</u> staff is aware of the <u>policy</u>).
IMT.09 KW: <u>Medical record review process</u>	IMT.09 KW: Patient's medical review process.	- Modified standard statement: (The PHC establishes the patient's medical record review process).
IMT.10 KW: Health information technology evaluation	IMT.10 KW: Health information technology evaluation	<ul style="list-style-type: none"> - Modified standard statement: (Health information technology systems are assessed and tested before implementation). - Modified EOC: (EOC.04: Corrective actions are taken when defective issues are detected).
IMT.11 KW: Downtime of data systems	IMT.11 KW: Downtime of data systems	- No change.
IMT.12 KW: Data back-up	IMT.12 KW: Data back-up	- No change.

QPI Summary of Changes

GAHAR PHC 2025	GAHAR PHC 2021	Details of changes
QPI.01 KW: <u>Quality improvement plan</u>	QPI.01 KW: Quality committee(s) QPI.02 KW: Quality plan QPI.03 KW: Quality management team	<ul style="list-style-type: none"> - Updated Standard (QPI.01) by merging 3 standards (QPI.01, QPI.02 and QPI.03) in PHC edition 2021.
QPI.02 KW: Performance measures	QPI.04 KW: Performance measures	<ul style="list-style-type: none"> - Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.03: PHC leaders make appropriate decisions based on reported performance measures). • <u>EOC.04: Performance measures</u> are reported to external authorities <u>as required</u>. - Updated EOC (EOC.02) by merging two EOCs (EOC.02, EOC.03 in PHC edition 2021). - Modified EOCs: (EOC.01: PHC selects appropriate performance measures according to its scope of services).
QPI.03 KW: Data collection, review, aggregation, and analysis	QPI.05 KW: Data review, aggregation, and analysis	<ul style="list-style-type: none"> - Modified EOC: (EOC.01: There is a written process of data management that includes items from <u>(a) to (c)</u> in <u>the intent</u>). - Rephrasing of EOC:(EOC.02: Staff members <u>assigned</u> for <u>data management</u> are aware of their roles).
QPI.04 KW: Data validation	QPI.06 KW: Data validation	<ul style="list-style-type: none"> - No change.
QPI.05 KW: Risk management program	QPI.07 KW: Risk management program	<ul style="list-style-type: none"> - Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The PHC has a risk management plan/ program that includes the elements from <u>a) to i)</u> in the <u>intent</u>). - Added a new EOCs: <ul style="list-style-type: none"> • (EOC.02: Actions are taken according to the results of risk assessment). • (EOC.03: Results of risk management activities are communicated to the governing body at least quarterly). • (EOC.04: <u>The risk management plan and the risk register are evaluated and</u>

		<u>updated at least annually or when indicated).</u>
QPI.06 KW: Incident reporting system	QPI.08 KW: Incident reporting system	<ul style="list-style-type: none"> - Updated EOC (EOC.03) by merging two EOCs (EOC.03 and EOC.05) in PHC edition 2021. - Modified EOC: (EOC.04: The PHC communicates with patient's/services users <u>on any related</u> adverse events they are affected by and <u>provides both immediate and ongoing assistance</u>). - Added a new EOC: (EOC.05: The PHC provides emotional, psychological, and professional support to staff affected by adverse events).
QPI.07 KW: Sentinel events	QPI.10 KW: Sentinel events	<ul style="list-style-type: none"> - Modified EOC: (EOC.03: All sentinel events are communicated to GAHAR within <u>48 hours</u> of the event or becoming aware of the event).
QPI.08 KW: Sustained improvement activities	QPI.11 KW: Sustained improvement activities	<ul style="list-style-type: none"> - Added a new EOC: (EOC.04: Improvements projects are monitored and sustained).