

APC Summary of Changes

Summary of Changes Chapter 1

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
APC.01 KW: Accurate and complete information	APC.03 KW: Accurate and complete information	1) Modified EOCs: <ul style="list-style-type: none"> EOC.02: The hospital reports accurate and complete information to GAHAR in between accreditation visits). EOC.03 The hospital reports within 30 days any structural changes in the hospital's scope of work, such as the addition or deletion of more than 20% of medical services (e.g., beds, specialties, staff), building expansions, or demolitions).
APC.02 KW: Professional standards during surveys	APC.05 KW: Professional standards during surveys	1. Modified EOCs: <ul style="list-style-type: none"> (EOC.01: The hospital maintains the values mentioned from (a) to (e) in the intent during the survey process). (EOC.02: Before survey, the hospital reports any conflict of interest to GAHAR with evidence). 2. Added a new EOC: <ul style="list-style-type: none"> (EOC.05: The accredited hospital can use GAHAR accreditation seal according GAHAR's rules).
APC.03 KW: Sustaining compliance with accreditation standards	APC.01 KW: sustaining registration requirements	1) Modified standard statement: <ul style="list-style-type: none"> (The GAHAR accredited hospital ensures continuous compliance with the standards). 2) Modified EOCs: <ul style="list-style-type: none"> (EOC.01, & EOC.02). 3) Updated EOC <ul style="list-style-type: none"> (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021.

PCC Chapter Summary of Changes

Summary of Changes Chapter 2

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
PCC.01 KW: Multidisciplinary patient-centeredness	PCC.02 KW: Interdisciplinary patient-centeredness PCC.03 KW: Patient centeredness support	1) Updated standard (PCC.01) by merging two standards (PPC.02 and PCC.03) in Hospital edition 2021.
PCC.02 KW: Patient and family rights	PCC.04 KW: Patient and family rights	2) Modified EOC: (EOC.01 : The hospital has an approved policy guiding the process of defining patient and family rights, including items mentioned in the intent from a) through j). 3) Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.03: Patients' rights are posted and visible to patients, families, and staff). • (EOC.05: Patients are informed of their rights in a manner they can understand).
PCC.03 KW: Patient and family responsibilities	PCC.05 KW: Patient and family responsibilities PCC.06 KW: Reporting violations	1) Updated standard (PCC.03) by merging two standards (PPC.05 and PCC.06) in Hospital edition 2021.
PCC.04 KW: Admission consent	PCC.07 KW: Admission consent	1) Rephrasing of EOC: (EOC.02 : The patient's or legal representative's approval and consent to being hospitalized is recorded in the patient record).
PCC.05 KW: Communicate with the healthcare team.	PCC.08 KW: Meeting the healthcare team	1) Rephrasing of standard statement to be: (Patients and families can communicate with healthcare professionals, request information, and ask questions). 2) Updated EOC (EOC.02) by merging two EOCs (EOC.02 and EOC.03) in Hospital edition 2021. 3) Added a new EOC: (EOC.03 : Patients and their families are educated about

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		<p>their rights to ask questions, seek information, and actively participate in their care).</p> <p>4) Rephrasing of EOC: (EOC.04: Patient engagement tools are used to encourage patients to pose questions).</p>
PCC.06 KW: Health education materials	PCC.09 KW: Patient and family education materials	<p>1) Rephrasing of standard statement to be: (Health education materials are available).</p> <p>2) Rephrasing of EOCs: (EOC.02, EOC.03, EOC.04 and EOC.05).</p>
PCC.07 KW: Patient and family education process	PCC.10 KW: Patient and family education process	1) Modified EOC : (EOC.01 : The hospital has an approved policy guiding the process of patient and family education that includes at least the points mentioned in the intent from a) through d).
PCC.08 KW: Informed consent	PCC.11 KW: Informed consent	<p>1) Rephrasing of Standard statement to be: (The hospital has a defined process to obtain informed consent for certain medical processes.)</p> <p>2) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.02 :Informed consent is obtained in a manner and language that the patient understands and does not contain abbreviations.) • (EOC.03: The responsible physician obtaining the informed consent signs the form with the patient).
PCC.09 KW: Informed consent validity	PCC.12 KW: Informed consent validity	No change.
PCC.10 KW: Informed refusal	PCC.13 KW: Informed refusal	1) Added a new EOC : (EOC.05 : The hospital monitors the reported data on informed refusal and takes actions to control or improve the process as appropriate).
PCC.11 KW: Comfortable stay	PCC.15 KW: Waiting spaces PCC.16	2) Updated standard (PCC.11) by merging two standards (PPC.15 and PCC.16) in Hospital edition 2021.

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PCC.12 KW: Patient's needs	PCC.17 KW: Patient's needs	<ol style="list-style-type: none"> 1) Rephrasing of standard statement to be: (The hospital identifies and addresses patient's emotional, religious, spiritual needs, and other preferences). 2) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: Healthcare providers identify patients' emotional, religious, and spiritual needs). • (EOC.04: Cleaning, food, and other services identify patient and family preferences) • Added a new EOC: (EOC.02: Patient needs and preferences are documented in the patient's medical record). 3) Rephrasing of EOC:(EOC.05 Services' schedules are modified in response to patient preferences).
PCC.13 KW: Patient's dignity, privacy, and confidentiality	PCC.18 KW: Patient's dignity, privacy, and confidentiality	1. No change.
PCC.14 KW: Patient's belongings	PCC.19 KW: Patient's belongings	<ol style="list-style-type: none"> 1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.04 The patient's belongings are protected and recorded according to the policy). • (EOC.05 Lost and found items are recorded, protected, and returned when possible).
PCC.15 KW: Patient and family feedback	PCC.20 KW: Patient and family feedback	<ol style="list-style-type: none"> 1) Rephrasing of EOCs: <ul style="list-style-type: none"> • (EOC.02 Feedbacks from patients and families is received, analysed, and interpreted). • (EOC.03The interpreted feedbacks is shared with concerned staff members). 2) Modified EOC: (EOC.04 The hospital monitors the reported data on patients' and families' feedback and takes actions to control or improve the process as appropriate.

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PCC.16 KW: Complaints and suggestions	PCC.21 KW: Complaints and suggestions	<p>1) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy guiding the process of managing patients' complaints and suggestions as mentioned in the intent from a) through e). • (EOC.04: Complaints and suggestions are investigated, analyzed by the hospital. and resolved in an approved timeframe). <p>2) Added a new EOC: (EOC.02: Staff is aware of complaints and suggestion policy.</p>

ACT Chapter Summary of Changes

Summary of Changes Chapter 3

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
ACT.01 KW: Granting access (before patient's registration)	ACT.01 KW: Granting access (before patient's registration) ACT.05 KW: Physical access and comfort	Updated standard (ACT.01) by merging two standards (ACT.01 & ACT.05) in Hospital edition 2021.
ACT.02 KW: Registration process	ACT.02 KW: Registration process	<p>1) Modified standard statement: (The hospital has a process in place guiding patient registration and flow pathways).</p> <p>2) Modified EOC: (EOC.01: The hospital has an approved policy guiding hospital registration that addresses all elements mentioned in the intent from a) through c).</p>
ACT.03 KW: Patient identification	ACT.03 KW: Patient identification	<p>1) Modified EOC: (EOC.03: Patient identification is conducted before performing diagnostic procedures, providing treatments, and performing any procedures).</p> <p>2) Updated EOC (EOC.05) by merging two EOCs (EOC.05 and EOC.06) in Hospital edition 2021.</p>
ACT.04 KW: Hospitalization process	ACT.04 KW: Hospitalization process	<p>1) Rephrasing of standard statement to be: (The hospital has a process in place guiding the hospitalization of patients, including those coming from the outpatient area, emergency areas, and other hospitalization routes.).</p> <p>2) Modified EOC: (EOC.01: The hospital has an approved policy and procedure for hospitalization that addresses all elements mentioned in the intent a) through e).</p> <p>3) Modified EOC: (EOC.03: When a patient bed is unavailable, the hospital supports providing care to patients admitted to temporary inpatient locations or boarded in the emergency room).</p>

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		4) Added a new EOC: (EOC.05 Required information is given to the patient and family at the time of admission).
ACT.05 KW: Wayfinding signage	ACT.06 KW: Wayfinding signage	1) Rephrasing EOC: (EOC.04 Signs are visible and/or lit during all operating times).
ACT.06 KW: Patient's flow risks	ACT.07 KW: Patient's flow risks	1) Modified standard statement (There is a process in place to manage patient flow through the hospital).
ACT.07 KW Patient's care responsibility	ACT.08 KW: Patient's care responsibility	1) Rephrasing of standard statement to be: (The hospital has a process guiding the assignment of patient care responsibility). 2) Added a new EOC: (EOC.02: The medical staff are aware of the contents of the policy.
ACT.08 KW: Handover communication	ACT.09 KW: Handover communication	1) Added a new EOC: (EOC.03: Handover communication conducted between different shifts and between different levels of care (different departments/ services). 2) Modified EOC: (EOC.04: Handover communications are documented using an established tool or format and are accessible as needed). 3) Updated EOC (EOC.05) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021.
ACT.09 KW: Second opinion	ACT.10 KW: Second opinion	1) Rephrasing of Standard statement to be: (The hospital has a process in place guiding the provision of second opinion).
ACT.10 KW: Consultation process	ACT.11 KW: Consultation process	1) Modified standard statement: (The consultation process is available, and provided based on the patient's needs and within a predefined time frame.) 2) Rephrasing of EOC: (EOC.05 Information exchange between consultation requestor and responder to consultation requests is comprehensive and recorded in the patient's medical record).
ACT.11	ACT.12	1) Rephrasing of standard statement to be: (Multidisciplinary management process is

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KW: Multidisciplinary Management	KW: Multidisciplinary Management	accessible and provided according to the patient's condition and needs).
ACT.12 KW: Patient's Transportation	ACT.13 KW: Patient's Transportation	3) Rephrasing of standard statement to be: (Transportation of patients is coordinated and provided in an approved timeframe).
ACT.13 KW: Special care units' access	ACT.14 KW: Special care units' access	1) Modified EOC: (EOC.01 The hospital has approved admission and discharge criteria for intensive care and specialized units.).
ACT.14 KW: Patient's referral, transfer, temporary discharge and discharge.	ACT.15 KW: Patient's flow out (transfer, referral, temporary discharge and discharge). ACT.17 KW: Referral/transfer sheet	Updated standard (ACT.14) by merging two standards (ACT.15 and ACT.17) in Hospital edition 2021.
ACT.15 KW: Discharge summary	ACT.16 KW: Discharge summary	1) Rephrasing of EOC: (EOC.01: Staff members involved in the process of patient discharge are aware of the mechanism to obtain a discharge summary). 2) Added a new EOC: (EOC.04: A copy of discharge summary is given to the patient).
ACT.16 KW: Telemedicine		1) A new standard

ICD Chapter Summary of Changes

Summary of Changes Chapter 4

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
ICD.01 KW: Uniform Care	ICD.01 KW: Uniform Care	1) Added new EOCs: <ol style="list-style-type: none"> (EOC.01: The hospital has a policy to ensure its commitment to providing uniform care to all patients when a similar service is needed). (EOC.02: All staff members involved in patient care are aware of the hospital 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). 2) Modified EOC: (EOC.03 Department heads collaboratively define clinical guidelines/protocols and other professional practice guidelines, to guide the uniform standards of care all over the hospital).
ICD.02 KW: Prehospital care, ambulance care, emergency medical care during disasters	ICD.03 KW: Prehospital care, ambulance care, emergency medical care during disasters	1) Modified EOC: (EOC.01: The hospital has an approved policy that covers all elements mentioned in the intent from a) through f).
ICD.03 KW: Emergency Services	ICD.04 KW: Emergency Services ICD.06 KW: Emergency care recording	3) Updated standard (ICD.03) by merging two standards (ICD.04 and ICD.06) in Hospital edition 2021.
ICD.04 KW: Emergency Care Guidelines	ICD.05 KW: Emergency Care Guidelines	1) Modified standard statement: (Clinical practice guidelines for emergency care are adopted and/or adapted as deemed appropriate for hospital scope of service). 2) Modified EOC: (EOC.01 Emergency care guidelines/protocols are adopted and/or adapted for common emergencies as mentioned in the intent from a) through g) as per the hospital scope.

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		3) Added a new EOC: (EOC.04 Emergency equipment, supplies, medications, and antidotes are readily available to facilitate the implementation of the guidelines/protocols as per the hospital scope).
ICD.05 KW: Outpatient Services	ICD.07 KW: Outpatient Services	2) Rephrasing of standard statement: (Outpatient services are available and provided to patients). 3) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy that guides outpatient care; it addresses all the elements mentioned in the intent from a) through g). • (EOC.04: The assessment and reassessment are recorded in the patient's medical records). • (EOC.05: The plans of care and follow-up instructions are recorded in the patient's medical records).
ICD.06 KW: Medical patient assessments	ICD.08 KW: Medical patient assessments	1. Modified EOC (EOC:03 Initial medical assessments are performed within 24 hours of hospitalization or more frequently as per patient needs and recorded in the patient's medical record).
ICD.07 KW: Nursing patient assessments	ICD.09 KW: Nursing patient assessments	3) Modified EOCs: <ul style="list-style-type: none"> • (EOC.03: Initial nursing assessments are performed upon admission within the timeframe identified in the policy as per patient needs). • (EOC.04: Nursing reassessments are performed as the frequency identified in the hospital policy and according to patient needs). • (EOC.05: Nurses' assessment and reassessment are timely recorded in the medical records).
ICD.08 KW: Screening for further assessment needs	ICD.10 KW: Screening of healthcare needs	1) Rephrasing of standard statement to be: (Patient's needs for further assessment are identified based on defined screening processes). 2) Modified EOC: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy to guide screening for patient's

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		<p>needs for further assessments including elements from a) through e) in the intent).</p> <ul style="list-style-type: none"> • (EOC.02: Qualified individuals identify the criteria for screening patients for each healthcare need from i) to v). <p>3) Added a new EOC: (EOC.05: Patient's needs are assessed and managed by the specific service and care is recorded in the medical record).</p>
ICD.09 KW: Pain screening, assessment, reassessment, and management	ICD.19 KW: Pain screening, assessment, reassessment, and management	<p>3) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy to guide pain management processes that addresses all elements mentioned in the intent from a) through e). • (EOC.05: Pain screening, assessment, pain management plan, and reassessment are documented in the patient records). <p>4) Rephrasing of EOC: (EOC.03: All inpatients and outpatients are screened for pain using a valid and approved tool suitable for the patient population).</p> <p>5) Added a new EOC: (EOC.04: A comprehensive pain assessment is performed when pain is identified from the screening).</p>
ICD.10 KW: Fall assessment and prevention.	ICD.11 KW: Fall screening and prevention	<p>1) Modified standard statement: (Patient's risk of falling is assessed, periodically reassessed, and managed).</p> <p>2) Modified EOCs: (EOC.01, EOC.02 & EOC.05).</p> <p>3) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.03: The hospital assesses and reassesses all inpatients for risk of fall using appropriate tools suitable for the patient population and documented in patient medical record). • (EOC.04: Outpatients with certain conditions, situations or locations will be screened for risk of fall).

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ICD.11 KW: Pressure Ulcers Prevention	ICD.12 KW: Pressure Ulcers Prevention	<p>1) Modified standard statement: (The Patient's risk of developing pressure ulcers is assessed, periodically reassessed, and managed).</p> <p>2) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy to guide pressure ulcer risk assessment that addresses all elements mentioned in the intent from a) through f). • (EOC.02: Healthcare professionals are aware of the elements of the pressure ulcer risk assessment and of prevention measures). • (EOC.04: The families of patients at higher risk of pressure ulceration are aware of and involved in prevention measures). <p>3) Added a new EOC: (EOC.03: The hospital assesses upon admission and reassesses each patient's risk for developing a pressure ulcer using appropriate tools suitable for the patient population).</p>
ICD.12 KW: Venous Thromboembolism Prophylaxis	ICD.13 KW: Venous Thromboembolism Prophylaxis	<p>1) Modified standard statement: (Patient's risk of developing venous thromboembolism (deep venous thrombosis and pulmonary embolism) is assessed, periodically reassessed, and managed).</p> <p>2) Modified EOCs (EOC.01, EOC.02, EOC.03, EOC.04).</p> <p>3) Added a new EOC: (EOC.05: Tailored care plans based on individual patient VTE risk assessments are conducted and recorded in the patient file).</p>
ICD.13 KW: Patient nutritional needs	ICD.20 KW: Patient nutritional needs	<p>1) Modified EOC: (EOC.02: Medical and nursing staff are aware of the hospital policy).</p> <p>2) Added a new EOC: (EOC.06: The hospital implements a process to ensures safety of food brought by families).</p>
ICD.14	ICD.23	3) Rephrasing of Standard statement to be: (The hospital develops and implements

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KW: Special-needs patient populations	KW: Special-needs patient populations	a process to guide the provision of care for special patient populations).
ICD.15 KW: Plan of Care	ICD.14 KW: Plan of Care	<p>1. Added a new EOC: (EOC.02: The plan of care addresses all the elements mentioned in the intent from a) to g) and is documented in the patient medical record).</p> <p>3) Rephrasing of EOCs: (EOC.03 and EOC.04).</p>
ICD.16 KW: Clinical practice guidelines adaptation and adoption	ICD.15 KW: Clinical practice guidelines adaptation and adoption	<p>1) Rephrasing of standard statement to be: (The process of adopting and adapting clinical practice guidelines is defined).</p> <p>2) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy that guides all the elements mentioned in the intent from a) through e). • (EOC.03: At least three clinical guidelines for the most common/high risk three diagnoses managed in the hospital are adopted/adapted in the hospital annually).
ICD.17 KW: Orders and requests	ICD.17 KW: Orders and requests DAS.14 KW: Minimal retesting intervals	Updated Standard by merging two standards (ICD.17 and DAS.14) in Hospital edition 2021.
ICD.18 KW: Verbal and telephone orders	ICD.18 KW: Verbal and telephone orders	<p>1) Modified standard statement: (Verbal or telephone orders are communicated and documented according to the defined process).</p> <p>2) Modified EOC: (EOC.01: The hospital has an approved policy guiding the communication of verbal and telephone orders that addresses at least all elements mentioned in the intent from a) through e).</p> <p>3) Added a new EOC: (EOC.03: All verbal and telephone orders are documented then read back by the receiver and confirmed by the ordering physician).</p>

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		4) Updated EOC (EOC.05) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021.
ICD.19 KW: Critical results	ICD.30 KW: Critical results	<p>1) Modified standard statement: (Critical results are communicated in time and documented according to the defined process).</p> <p>2) Updated EOC (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021.</p>
ICD.20 KW: Ordering of blood and blood products	DAS.31 KW: Ordering of blood and blood products	<p>1) Rephrasing of standard statement to be: (The hospital has a process for requesting blood and/or blood component).</p> <p>2) Modified EOC: (EOC.02: The involved staff members are aware of the hospital policy).</p>
ICD.21 KW: transfusion of blood and blood products	DAS.33 KW: transfusion of blood and blood products	1) Modified standard statement: (Blood and/or blood components are transfused according to professional practice guidelines).
ICD.22 KW: Recognition and response to clinical deterioration	ICD.37 KW: Recognition and response to clinical deterioration	<p>1) Rephrasing of standard statement: (The hospital has a hospital-wide process for recognition of and response to clinical deterioration).</p> <p>2) Modified EOC: (EOC.02: All staff members involved in direct patient care are trained on recognition of and response to clinical deterioration.)</p> <p>3) Rephrasing of EOC: (EOC.03: Recognition and response to clinical deterioration are done as per the hospital policy, using age specific criteria.)</p>

CSS Chapter Summary of Changes

Summary of Changes Chapter 5

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
CSS.01 KW: Critical care	ICD.33 KW: Critical care	<p>3) Modified EOC:</p> <ul style="list-style-type: none"> (EOC.01 The hospital has a clinical care program for critical care units that addresses all the elements mentioned in the intent from a) through h). (EOC.04: Management and use of critical care services is done according to clinical guidelines. <p>4) Rephrased EOCs: (EOC.02, & EOC.05).</p> <p>5) Added a new EOC: (EOC.03 At least one physician, in each shift, is trained in advanced cardiac life support).</p>
CSS.02 KW: Critical alarms	ICD.34 KW: Critical alarms	<p>1) Modified standard statement: (The hospital has an approved policy and procedures for managing critical medical alarms).</p> <p>2) Modified EOC: (EOC.01 The hospital has an approved policy that addresses all the elements mentioned in the intent from a) through g).</p> <p>3) Rephrased EOC :(EOC.03 Management and the use of critical alarms are done according to the approved policy).</p> <p>4) Added a new EOC: (EOC.05 Alarm events and malfunctions are reported, and actions are taken to maintain the safety of clinical alarms).</p>
CSS.03 KW: Catheter and tube misconnections	ICD.35 KW: Catheter and tube misconnections	<p>1) Modified EOC: (EOC.01 The hospital has an approved policy that addresses all the elements mentioned in the intent from a) through e).</p>

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		2) Rephrased EOC: (EOC.03 Management and use of tubes and catheters are done as per the hospital policy).
CSS.04 KW: Terminally ill patients	ICD.26 KW: Terminally ill patients	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01 The hospital has an approved policy that addresses all the elements mentioned in the intent from a) through f). • (EOC.05: Terminally ill patients' assessment, reassessment, and management are recorded in the patient's medical record). 2) Rephrasing of EOC: (EOC.03 Terminally ill patients are assessed and receive the appropriate management of symptoms, including pain and depression).
CSS.05 KW: Cardiopulmonary resuscitation	ICD.36 KW: emergency equipment and supplies ICD.38 KW: Cardiopulmonary resuscitation and medical emergencies	Updated standard (CSS.05) by merging two standards (ICD.36 and ICD.38) in Hospital edition 2021.
CSS.06 KW: Dialysis services	ICD.32 KW: Dialysis services	1) Modified standard statement: (Dialysis service is provided and managed according to laws, regulations, and clinical guidelines). 2) Modified EOC: (EOC.01 The hospital has a clinical care program for dialysis service that addresses all the elements mentioned in the intent from a) through f). 3) Added a new EOC: (EOC.02 Staff involved in dialysis service are competent at handling the program). 4) Rephrasing of EOCs: (EOC.03, EOC.04 & EOC.05)

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CSS.07 KW: Chemotherapy	ICD.31 KW: Chemotherapy and Radiotherapy	<p>4) Modified standard statement: (Chemotherapy service is provided according to laws, regulations, and clinical guidelines/protocols.).</p> <p>5) Modified EOCs: (EOC.01, EOC.02 & EOC.05).</p> <p>6) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.03 The chemotherapy preparation area is designed and equipped to meet the professional guidelines of safe compounding of high-risk medications, including appropriate ventilation and adherence to aseptic techniques). • (EOC.04 Patients and/or their families are educated on the treatment plan).
CSS.08 KW: Radiotherapy		New standard.
CSS.09 KW: Childbirth	ICD.24 KW: Safe childbirth process	<p>6) Modified standard statement to be: (Childbirth services are provided according to clinical guidelines).</p> <p>7) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01 The hospital has a childbirth care program addresses all the elements mentioned in the intent from a) through f). • (EOC.05 Assessment, reassessment, plan of care, CTG (cardiotocography), Partogram, pain management, and delivery summary are documented in the patient medical record). <p>8) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.02: The healthcare professionals involved in the childbirth are competent in handling the program).

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		<ul style="list-style-type: none"> (EOC.03: Pain in women during labor is managed according to pain management protocol).
CSS.10 KW: Rehabilitation.	ICD.22 KW: patient's functional needs	<ul style="list-style-type: none"> New standard.
CSS.11 KW: Psychiatric disorders	ICD.27 KW: Psychiatric patients	<p>4) Modified standard statement: (Care for patients who are suffering from mental illness is provided according to applicable laws and regulations).</p> <p>5) Modified EOCs:</p> <ul style="list-style-type: none"> (EOC.01: The hospital has a clinical care program for mental health that addresses all the elements mentioned in the intent from a) through n). (EOC.03: Mental health patients are assessed and managed according to clinical guidelines/protocols). <p>6) Rephrase EOC: (EOC.04: Psychiatric assessment and care plans for outpatients and inpatients are documented in patient medical record).</p>
CSS.12 KW: Restraint and seclusion	ICD.28 KW: Restraint and seclusion	<p>4) Modified standard statement to be: (Restraint and seclusion are used according to defined criteria, laws, and regulations and in a manner that respect patient's rights).</p> <p>5) Modified of (EOC.04).</p>
CSS.13 KW: Drug abuse	ICD.29 KW: victims of drug abuse and addiction	<p>1) Modified standard statement: (Care for patients who are suffering from substance use disorders is provided according to applicable laws and regulations).</p> <p>2) Modified EOC:</p> <ul style="list-style-type: none"> (EOC.01: The hospital has a clinical care program that addresses all the

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		<p>elements mentioned in the intent from a) through i).</p> <ul style="list-style-type: none"> • (EOC.04: Assessment, plan of care, and monitoring of progress are documented in the patient's medical record). <p>3) Rephrasing of EOC: (EOC.03)</p>
<p>CSS.14 KW: Organ/Tissue transplantation</p>	<p>ADD.08 KW: Organ/Tissue donation choice</p> <p>ADD.09 KW: Organ and Tissue Transplantation services</p>	<p>1) Updated standard (CSS.15) by merging two standards (ADD.08 & ADD.09) in Hospital edition 2021.</p>

DAS chapter Summary of changes

Summary of Changes Chapter 6

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
DAS.01 KW: Planning medical imaging services	DAS.01 KW: Planning medical imaging services	<ol style="list-style-type: none"> 1) Modified standard statement (Medical Imaging and ancillary services are planned, operated, and provided according to laws and regulations). 2) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: Medical Imaging or ancillary services provided either onsite or through accredited outside source meet laws, regulations, and applicable guidelines). • (EOC.03: The hospital ensures the quality and safety of outsourced medical imaging and ancillary services). • (EOC.04: Medical imaging and ancillary services provided are evaluated annually).
DAS.02 KW: Provision of medical imaging service	DAS.02 KW: Provision of medical imaging service	<ol style="list-style-type: none"> 1) Modified standard statement: (Medical imaging and ancillary services are performed by competent healthcare professionals according to applicable laws and regulations). 2) Added a new EOC: (EOC.02: Licensed healthcare professionals are providing medical image services). 3) Modified EOC: (EOC.03: Privileges are granted for performing each intervention medical imaging service based on assessed competencies).
DAS.03 KW: Technical standards (Practice Parameters)	DAS.03 KW: Technical standards (Practice Parameters)	<ol style="list-style-type: none"> 1) Modified standard statement: (Performance of medical imaging studies and procedures and ancillary services is standardized).
DAS.04 KW: Pre-examination process	DAS.04 KW: Pre-examination process	<ol style="list-style-type: none"> 1) Modified standard statement: (There is a process in place for medical imaging and ancillary services' pre-examination). 2) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy and procedures to guide the medical imaging and

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<p>ancillary services pre-examination process that includes elements from a) to e) in the intent.</p> <ul style="list-style-type: none"> • (EOC.03 & EOC.04).
DAS.05 KW: Medical imaging quality assurance and control	DAS.05 KW: Medical imaging quality assurance and control	4) Updated (EOC.03) by merging two EOCs (EOC.03 & EOC.04) in Hospital edition 2021.
DAS.06 KW: Medical imaging examination protocols	DAS.06 KW: Medical imaging examination protocols	<p>1) Modified standard statement: (Medical imaging and ancillary services examination protocols are available and followed).</p> <p>2) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: Medical imaging protocols are available and address element from a) to d) in the intent). • (EOC.02: Medical imaging staff members are trained on medical imaging protocols). • (EOC.04: Imaging protocols for pediatric patients are optimized to obtain the required imaging data while delivering the lowest radiation dose possible).
DAS.07 KW: Medical imaging reports	DAS.07 KW: Medical imaging reports	<p>1) Modified EOC: (EOC.01: The hospital has an approved policy that addresses all elements mentioned in the intent from a) through e).</p> <p>2) Updated (EOC.04) by merging two EOCs (EOC.04 & EOC.05) in Hospital edition 2021.</p>
DAS.08 KW: Medical imaging results	DAS.08 KW: Medical imaging results	<p>1) Modified standard statement: (Copies of medical imaging or ancillary results are recorded in the patient's medical record).</p> <p>2) Modified EOCs: (EOC.01, EOC.02 & EOC.03).</p>
DAS.09 KW: Radiation Safety Program.	DAS.09 KW: Radiation Safety Program	<p>1) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has a written, updated, and approved radiation safety program that addresses all elements mentioned in the intent from a) through h).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<ul style="list-style-type: none"> • (EOC.03: The hospital ensures that exposed patients do not exceed the approved maximum level). <p>2) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.04: Environmental radiation safety measures, personal monitoring devices results, and the regular CBC results are available and documented). • (EOC.05: Nuclear medicine safety measures are implemented by addressing the elements from i) through v) in the intent). • (EOC.06: Laser safety measures are implemented by addressing the elements from I) to III) in the intent).
DAS.10 KW: Laboratory services planning and management.	DAS.10 KW: Laboratory services planning and management.	<p>1) Modified EOC: (EOC.04: The scope of service is periodically reviewed and modified whenever a clinical service is added, modified, or deleted).</p> <p>2) Updated (EOC.05) by merging two EOCs (EOC.05 & EOC.06) in Hospital edition 2021.</p>
DAS.11 KW: Laboratory Staff	DAS.11 KW: Laboratory Staff	<p>1) Modified EOC: (EOC.03: Laboratory work is scheduled and processed based upon the competencies assessed).</p>
DAS.12 KW: Reagent Management	DAS.12 KW: Reagent Management	<p>1) Rephrasing of standard statement to be: (The hospital has a process to manage reagents and other laboratory supplies).</p> <p>2) Modified EOC: (EOC.01 The hospital has an approved policy that addresses all the mentioned elements from a) through e) in the intent).</p> <p>3) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.02: The laboratory staff is aware of hospital policy). • (EOC.05 :Reagents and supplies utilization are accurately monitored).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
DAS.13 KW: Outsourced laboratory services	DAS.13 KW: referral laboratory	6) Rephrasing of standard statement to be: (The hospital has a process to select and monitor outsourced laboratory services).
DAS.14 KW: Pre-examination process	DAS.15 KW: Pre-examination process	4) Rephrasing of standard statement to be: (The hospital has a process for laboratory pre-examination.) 5) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy to guide the pre-examination process that includes elements from a) to i) in the intent). • (EOC.03: All staff involved in requesting laboratory tests and collection of samples are aware of the pre-examination policy).
DAS.15 KW: Specimen reception, tracking and storage.	DAS.16 KW: Specimen reception, tracking and storage.	1) Rephrasing of standard statement to be: (The hospital has a process for specimen reception, tracking, and storage). 2) Modified EOC (EOC.06: Samples are stored in appropriate conditions during all examination activities).
DAS.16 KW: Verified / Validated test methods.	DAS.17 KW: Verified / Validated test methods.	1) Modified EOC (EOC.01: The laboratory has an approved policy that describe the process for verification/validation of examination methods for all laboratory tests). 2) Added a new EOC (EOC.02: The involved laboratory staff is aware of hospital policy).
DAS.17 KW: Examination procedures	DAS.18 KW: Examination procedures	1) Rephrasing of standard statement to be: (Instructions for performing test methods and procedures are followed). 2) Modified EOC (EOC.01: the laboratory has a written updated procedure for each analytical test method).
DAS.18 KW: Laboratory Internal quality assessment	DAS.19 KW: Laboratory Internal quality assessment	1) Modified standard statement: (An internal quality control process is developed and implemented for all tests). 2) Modified EOC (EOC.01: The hospital has an approved procedure describing the internal quality

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		control process of all laboratory tests addressing all elements in the intent from a) through g). 3) Updated (EOC.05) by merging two EOCs (EOC.05 & EOC.06) in Hospital edition 2021.
DAS.19 KW: Laboratory external quality assessment	DAS.20 KW: Laboratory external quality assessment	1) Rephrasing of EOC: (EOC.01: The laboratory subscribes to an external proficiency-testing program that consider the scope and complexity of tests performed by the laboratory).
DAS.20 KW: Post examination process	DAS.21 KW: Post examination process	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy to guide the post-examination process that include all elements mentioned in the intent from a) through f). • (EOC.05: The procedure of specimen storage, retention and disposal is implemented). 2) Added a new EOC (EOC.02: The laboratory staff is aware of hospital policy).
DAS.21 KW: Laboratory turnaround time	DAS.22 KW: Laboratory turnaround time	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has a process defining each laboratory test's total turnaround time and means of measuring it.) • (EOC.04: Delays in turnaround time are notified to requestors/end-user.) 2) Updated (EOC.03) by merging two EOCs (EOC.04 & EOC.05) in Hospital edition 2021.
DAS.22 KW: STAT results	DAS.23 KW: STAT results	1) Rephrasing of standard statement to be: (STAT results are reported within the defined timeframe). 2) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has a process to guide ordering, collection, testing, and results reporting of urgent tests). • (EOC.04: The hospital monitors the reported data on STAT turnaround time and takes actions to control or improve the process as appropriate).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
DAS.23 KW: Laboratory Safety Program.	DAS.24 KW: Laboratory Safety Program.	1) Modified EOC (EOC.01: A written updated program that describes safety measures for laboratory services and facilities is documented and includes the items in the intent from a) to j). 2) Rephrasing of EOC (EOC.06: The hospital monitors the reported data on laboratory safety program and takes actions to control or improve the process as appropriate).
DAS.24 KW: Point of care testing	DAS.25 KW: Point of care testing	1) Rephrasing of (EOC.02). 2) Added a new EOC (EOC.03: The hospital identifies all POCT sites, and the testing performed).
DAS.25 KW: Blood Transfusion services management	DAS.26 KW: Blood Transfusion services management	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: There is an approved manual that addresses all elements mentioned in the intent from a) through k). • (EOC.02: All blood bank staff members are aware of the contents of the manual).
DAS.26 KW: Safe blood donation	DAS.27 KW: Safe blood donation	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy that describes all elements mentioned in the intent from a) through e). • (EOC.03: Blood donors are selected according to the hospital policy).
DAS.27 KW: Blood Procurement	DAS.28 KW: Blood Procurement	1) Modified standard statements: (Processes of collection, handling, testing of blood, and blood components are performed according to national/international requirements).
DAS.28 KW Blood Storage	DAS.29 KW: Blood Storage	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.04: Blood and/or blood components are stored under access-controlled and recorded temperature-controlled conditions). • (EOC.06: Expired blood or blood components are managed according to guidelines).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
DAS.29 KW: Contracted blood banks	DAS.30 KW: Contracted blood banks	1) Modified standard statement: (The hospital has a process to select and inspect outsourced blood and blood components).
DAS.30 KW: Blood Transfusion services management	DAS.32 KW: Blood Transfusion services management	1) Rephrasing of standard statement to be: (The hospital has a process to ensure safe distribution of blood and/or blood components). 2) Added a new EOC (EOC.03: Blood sample label and blood transfusion request are completed with all required data and cross-checked before issuing blood or blood components).

SAS Chapter Summary of Changes

Summary of Changes Chapter 7

2025 Edition standard number	2021 Edition standard number	Changes description
SAS.01 KW: Surgery and Invasive Procedure Services	SAS.01 KW: Surgery and Invasive Procedure Services	<ol style="list-style-type: none"> 1- Rephrasing of Standard statement to be: (Provision of surgical and invasive procedure services follows applicable laws, regulations, and professional practice guidelines). 2- Added new EOC (EOC.04 There are professional practice guidelines in place to guide the proper provision of surgical and invasive procedures).
SAS.02 KW: Booking of surgeries and invasive procedures	SAS.02 KW: Booking of surgeries and invasive procedures	<ol style="list-style-type: none"> 1- Rephrasing of standard statement to be: (The hospital has a process in place for booking surgical and invasive procedures). 2- Rephrasing of (EOC.01 & EOC.05) in Hospital 2025. 3- Modified EOCs: (EOC.02: There is an ongoing process to ensure that booked procedures match the clinical privileges of the booking physicians). 4- Modified EOC: (EOC.04: There is a process for analyzing postponed and cancelled procedures and action is taken to improve them).
SAS.03 KW: Assessment before surgery and invasive procedures	SAS.03 KW: Assessment before surgery and invasive procedures	<ol style="list-style-type: none"> 1- Rephrasing of standard statement:(Comprehensive medical and nursing assessment is performed before surgical and invasive procedures). 2- Rephrasing of (EOC.01 & EOC.02).
SAS.04 KW: Brief assessments	SAS.04 KW: Brief assessments	<ol style="list-style-type: none"> 1- Rephrasing of standard statement: (In life-threatening emergencies, a brief medical assessment and planning are performed). 2- Modified EOC: (EOC.02: Anesthesia risk assessment of the patient's condition is determined before surgery).

2025 Edition standard number	2021 Edition standard number	Changes description
SAS.05. KW: Surgical Site Marking	SAS.05 KW: Surgical Site Marking	<p>1- 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.).</p> <p>2- Modified EOC.02: (Involved staff are aware of the implementation of site marking).</p> <p>1. Modified EOC.01: (The hospital has an approved policy guiding the site marking process that includes at least elements from a) through g) mentioned in the intent).</p> <p>2. Modified EOC.04: (Site marking is performed before sending the patient to the operating room, involving the patient and the patient's family).</p> <p>3- Updated EOC: (EOC.05) by Merging two EOCs: (EOC.05 & EOC.06) in Hospital edition 2021.</p>
SAS.06 KW: Pre-Operative Checklist	SAS.06 KW: Pre-Operative Checklist	<p>1. Modified EOC.01: (The hospital has a process for preoperative verification of all needed documents and equipment).</p> <p>1- Added a new EOC: (EOC.02: The Staff involved are trained on the hospital process for preoperative verification).</p> <p>2- Modified EOC.03: (A recorded evidence of preoperative verification, of all items mentioned in the intent before each surgery or invasive procedure exists).</p> <p>2. Updated EOC: (EOC.04) by merging two EOCs: (EOC.03 & EOC.04) in Hospital edition 2021.</p>
SAS.07 KW: Time-out / sign-out	SAS.07 KW: Timeout	<p>1- Modification of standard statement to be: (Time-out is conducted before starting surgical and invasive procedure and sign-out is done before leaving the procedure location).</p> <p>2- Rephrasing of (EOC.01 – EOC.02).</p>

2025 Edition standard number	2021 Edition standard number	Changes description
		<p>3- Added a new EOC.03: (Sign-out is conducted at the end of all surgical and invasive procedures and before leaving the operating location).</p> <p>1. Updated EOC: (EOC.04) by merging two EOCs: (EOC.04 & EOC.05) in Hospital edition 2021.</p>
SAS.08 KW: Operative report	SAS.08 KW: Operative report	<p>1- Modified standard statement to be (Surgical or invasive procedure details are recorded immediately after the procedure).</p> <p>2- Modified EOC: (EOC.02: The report includes at least items from a) to i) in the intent).</p>
SAS.09 KW: Instrument Retention Prevention	SAS.09 KW: Instrument Retention Prevention	<p>1. Added a new EOCs:</p> <ul style="list-style-type: none"> • EOC.01 (The hospital has a process to manage surgical counts). • EOC.04 There is a process to manage and deal with miscounts once identified). <p>2. Updated EOC (EOC.03) by merging two EOCs: (EOC.02 & EOC.03) in Hospital edition 2021.</p> <p>3. Updated EOC (EOC.05) by merging two EOCs (EOC.04 & EOC.05) in Hospital edition 2021.</p>
SAS.10 KW: Pathological Examination	SAS. 10 KW: Pathological Examination	<p>1- Rephrasing of standard statement (Surgically removed tissue is sent for pathological examination unless present in the list of exempted tissues from the pathological examination).</p> <p>2- Modified of (EOC.03 and EOC.04).</p>
SAS. 11 KW: Implantable Device	SAS. 11 KW: Implantable Device	<p>1- Rephrasing of standard statement (The hospital has a system for managing implantable devices including recall).</p>

2025 Edition standard number	2021 Edition standard number	Changes description
		2- Added a new EOC: EOC.01 (The hospital has an approved policy for managing implantable devices that include items from a) through h) in the intent)
SAS.12 KW: Post-operative care	SAS.12 KW: Post-operative care	1- Rephrasing of EOC1. 2- Added a new EOC: (EOC.02: Postoperative care plans are developed based on identified postoperative needs). 3- Modified EOC.04: (The postoperative care plan is implemented and updated based on changes in clinical conditions).
SAS.13 KW: Anaesthesia Services	SAS.13 KW: Anaesthesia Services SAS.14 KW: Qualified Anesthesiologist	1- Updated standard (SAS.13) by Merging two standards (SAS.13 & SAS.14) in Hospital edition 2021.
SAS. 14 KW: Uniform anaesthesia care	SAS. 15 KW: Uniform anaesthesia care	No change
SAS. 15 KW: Anaesthesia protocol	SAS. 16 KW: Anaesthesia protocol	No change
SAS. 16 KW: Anaesthesia plan	SAS. 17 KW: Anaesthesia plan	1- Modification of standard statement (A qualified anaesthesiologist performs pre-anaesthesia and pre-induction assessment and plans for anaesthesia care). 1. Modified EOC.02: (After performing the pre-anesthesia assessment, a detailed anesthesia plan is developed for each patient, including items from a) through f) in the intent). 2- Modified EOC.05: (Immediate pre-induction assessment is performed by the anaesthesiologist and recorded in the patient's medical record)

2025 Edition standard number	2021 Edition standard number	Changes description
SAS. 17 KW: Physiological assessment by anaesthesia	SAS. 18 KW: Physiological assessment by anaesthesia	<p>1. Modification of EOC.01 (The patient's physiologic status is monitored during anaesthesia based on hospital-approved professional practice guidelines).</p> <p>1- Rephrasing of EOC.03 (The results of the monitoring are recorded in the patient's medical record regularly according to the approved professional practice guidelines/protocols).</p>
SAS. 18 KW: Patient care during anaesthesia	SAS. 19 KW: Patient care during anaesthesia	Rephrasing of standard statement (The hospital has an established process for patient care during anaesthesia).
SAS. 19 KW: anaesthesia Care Unit Equipment	SAS. 20 KW: Post anaesthesia Care Unit Equipment	<p>1- Rephrasing of standard statement (post-anaesthesia care unit is equipped according to applicable laws, regulations, and professional practice guidelines).</p> <p>2- Rephrasing of (EOC.02).</p> <p>3- Modified EOC.03 (All needed supplies and medications are identified, available and checked properly).</p>
SAS. 20 KW: anaesthesia Post care Monitoring	SAS. 21 KW: Post anaesthesia care Monitoring	<p>1- Modification of standard statement (Patient's monitoring in post-anaesthesia care unit and the decision of the discharge/transfer from the unit are performed according to laws and regulations and professional practice guidelines).</p> <p>2- Rephrasing of EOC.01.</p> <p>3- Updated EOC: (EOC.02) by merging two EOCs (EOC.02 & EOC.03) in Hospital edition 2021.</p> <p>4- Added a new EOC.03: (There is a process in place to manage the monitoring of cases transferred directly from the OR to critical care units).</p>

2025 Edition standard number	2021 Edition standard number	Changes description
SAS. 21 KW: Sedation protocol	SAS. 22 KW: Sedation protocol	<p>1- Rephrasing of standard statement (Procedural sedation techniques and management of related complications are guided by clinical protocols).</p> <p>2- Added new EOCS:</p> <ul style="list-style-type: none"> • EOC.02: (There is an approved policy guiding the management of procedural sedation that covers from a) to e) in the intent). • EOC.03: (The involved staff are aware about the policy requirements for procedural sedation). • EOC.05: (The staff's competency in performing and monitoring procedural sedation is ensured).
SAS. 22 KW: Sedation plan	SAS. 23 KW: Sedation plan	1- Rephrasing of standard statement (pre-procedural sedation assessment and procedural sedation plan are performed by competent physicians).
SAS. 23 KW: Procedural sedation physiological status monitoring, Care during procedural sedation	SAS. 24 KW: Sedation physiological status monitoring SAS. 25 KW: Care during Sedation	1- Updated standard (SAS.23) by merging two standards (SAS.24 & SAS.25) in Hospital 2021.
SAS.24 KW: Post-procedural sedation care, Post sedation monitoring	SAS. 26 KW: Post-procedural sedation care. SAS.27 KW: Post sedation monitoring	1- Updated standard (SAS.24), by merging two standards (SAS.26 & SAS.27) in Hospital edition 2021.

MMS chapter Summary of Changes

Summary of Changes Chapter 8

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
MMS.01 KW: Medication management	MMS.01 KW: Medication management	1- Rephrasing of EOC (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	1- Rephrasing of standard statement to be: (Antimicrobial stewardship program is developed and implemented to enhance rational use of antimicrobials. 1- Modified EOC: (EOC.02: The hospital has an approved multidisciplinary antimicrobial stewardship program based on national and/or international core elements, and guidelines.) 2- Updated EOC (EOC.05) by merging two EOCs (EOC.05 and EOC.06) in Hospital edition 2021.
MMS.03 KW: Medication Procurement, Formulary	MMS.03 KW: Medication Procurement, Formulary	1. Rephrasing of EOCs: <ul style="list-style-type: none"> (EOC.01: The hospital has a defined process for appropriate selection and procurement of medications according to the applicable laws and regulations, hospital mission, patient needs, and services provided.) (EOC.05: The hospital has a defined process to guide the addition/deletion of medication to/from the medication list (formulary). (EOC.04: There is a process for overseeing medication use in the hospital to monitor, maintain, and update the medication list). 2. Modified EOCs: <ul style="list-style-type: none"> (EOC.02: The hospital has an approved list of medications (formulary), which includes at least items from a) to e) in the intent).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
MMS.04 KW: Medication storage and labelling	MMS.04 KW: Medication storage and labelling	1) Rephrasing of standard statement to be: (Medications are stored in a manner that maintains the security and quality of the medications and according to the applicable laws and regulations.).
MMS.05 KW: Emergency Medications	MMS.05 KW: Emergency Medications	No changes
MMS.06 KW: High alert medications and concentrated electrolytes	MMS.06 KW: High alert medications and concentrated electrolytes	1) Modified EOC: (EOC.02: The hospital has an approved and annually updated list(s) of high-alert medications and concentrated electrolytes.) 2) Rephrasing of EOC: (EOC.05: The hospital monitors the reported data on management of high alert medications and concentrated electrolytes and take actions to control or improve the process as appropriate.)
MMS.07 KW: Look alike and Sound alike medications.	MMS.07 KW: Look alike and Sound alike medications.	1) Rephrasing of EOC: (EOC.05: The hospital monitors the reported data on management of LASA and take actions to control or improve the process as appropriate).
MMS.08 KW Medication recall, expired, and outdated medication. .	MMS.08 KW: Drug recall, expired, and outdated medication.	3) Rephrasing of Standard statement to be: (The hospital has a system in place for medication recall.) 4) Modified EOC: (EOC.01: The hospital has an approved policy to guide the medication recall process that includes all elements from a) through d) in the intent.) 5) Updated EOC (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021.

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
MMS.09 KW: Radioactive medications, contrast, narcotics, medication brought by patients.	MMS.09 KW: Radioactive medications, contrast, breast milk, medication brought by patients MMS.15 KW: Medication dispensing, distribution system, Patient education, and counseling MMS.16 KW: Medication administration, order verification, medication-self administration.	2) Rephrasing of Standard statement to be: (Medications require special considerations to ensure that risk is minimized.) 3) Modified EOC: (EOC.01: The hospital has an approved policy to guide the use of medications with special consideration that addresses all elements mentioned in the intent from a) through d). 4) Added a new EOC: (EOC.04: Narcotics and psychotropic agents are procured, stored, prescribed, dispensed, administered, and monitored according to law and regulations).
MMS.10 KW: Medication Reconciliation, best possible medication history (BPMH)	MMS.10 KW: Medication Reconciliation, best possible medication history (BPMH)	9) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved policy for medication reconciliation that includes all elements mentioned in the intent from a) through d). • (EOC.03: Medication reconciliation occurs on situations mentioned in the intent from i) to iv) within a defined timeframe.)
MMS.11 KW: Ordering, prescribing, transcribing.	MMS.11 KW: Ordering, prescribing, transcribing, abbreviations, and symbols MMS.12 KW: Complete medication order, narcotic medications, special types of medication orders	3) Updated standard (MMS.11) by merging two standards (MMS.11 and MMS.12) in Hospital edition 2021.

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
MMS.12 KW: Medication appropriateness review, competent pharmacist	MMS.13 KW: Medication appropriateness review, competent pharmacist	4) Rephrasing of EOC.01 : (The patient-specific information, required for an effective review process, and its sources are always available and accessible,). 5) Modified EOC: (EOC.03 : Each prescription is reviewed for appropriateness before dispensing including elements a) through h) in the intent).
MMS.13 KW: Medication preparation, medication preparation area, labeling of medications	MMS.14 KW: Medication preparation, medication preparation area, labeling of medications	1) Rephrasing of standard statement to be: (The hospital has a process to ensure safe medications' preparation).
MMS.14 KW: Medication dispensing, distribution system, patient education, and counseling.	MMS.15 KW: Medication dispensing, distribution system, patient education, and counseling.	2) Rephrasing of standard statement to be: (Medications are dispensed according to laws and regulations).
MMS.15 KW: Medication administration, order verification, medication-self administration.	MMS.16 KW: Medication administration, order verification, medication-self administration.	1) Rephrasing of standard statement to be: (Medications are administered according to laws, and regulations).
MMS.16 KW: Medication Monitoring, first dose of medications, adverse drug reaction	MMS.17 KW: Medication Monitoring, first dose of medications, adverse drug reaction	1. Rephrasing of EOC.02 : (The hospital implements a process for monitoring the response to the first dose (if any) of new medications to the patient, which is expected to show noxious effects while the patient is under the hospital's direct care).
MMS.17 KW: Medication errors, near miss, medication therapy problems	MMS.18 KW: Medication errors, near miss, medication therapy problems	1. Rephrasing of EOC.03 : (The hospital monitors the reported data on medication errors, near misses, and medication therapy problems, and takes actions to

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		control or improve the process as appropriate).

EFS chapter Summary of Changes*Summary of Changes Chapter 9*

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
EFS.01 KW: Hospital environment and facility safety management	EFS.01 KW: Hospital environment and facility safety structure	<p>1) Modified EOC: (EOC.01: The hospital maintains basic requirements for compliance with local laws and regulations and codes with different alternatives).</p> <p>2) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.03: The non-standalone hospital has evidence of maintenance of shared utilities, systems, and different alternatives according to national laws and regulations). • (EOC.04: The hospital ensures that independent entities comply with all aspects of the facility management plans) • (EOC.05: The hospital budgets for maintaining and upgrading hospital environmental safety.) • (EOC.06: The Hospital leadership ensures that all environmental and facility safety plans are evaluated and updated annually with improvement, when required.)
EFS.02 KW: Environment and facility safety monitoring	EFS.01 KW: Hospital environment and facility safety structure EFS.02 Environment and facility safety program monitoring	<ul style="list-style-type: none"> • Updated standard (EFS.02) by merging two Standards (EFS.01 & EFS.02) in Hospital edition 2021.
EFS.03	EFS. 03	1) Modified EOCs:

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
KW: Fire and smoke safety	KW: Fire and smoke safety	<ul style="list-style-type: none"> • EOC.01: The hospital has an approved and updated fire and smoke safety plan that includes all elements from a) through f) in the intent. • EOC.03: (The hospital fire alarm, and smoke containment system are available, accessible, functioning and compliant with civil defence requirements.) • EOC.05: (Evacuation path is clearly marked with exit signs and free from obstructions.)
EFS.04 KW: Fire drills	EFS.05 KW: Fire drills	<ol style="list-style-type: none"> 1) Rephrasing of standard statement to be: (Fire drills are performed in different clinical and non-clinical areas). 2) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01 Fire drills are performed at least quarterly, including one unannounced drill annually). • (EOC.03 Fire drill results are recorded including items from a) through d), that are mentioned in the intent. 3) Updated EOC (EOC.04) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021. 4) Added a new EOC: (EOC.05: The hospital staff guarantee safe evacuation path for patients, staff, and visitors).
EFS.05 KW: Smoking-Free Environment	EFS.04 KW: Smoking-Free Environment	Added a new EOC: (EOC.05: The hospital documents penalties and corrective actions for policy violations).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
EFS.06 KW: Hazardous materials safety and waste management	EFS.06 KW: Hazardous materials safety	<p>1) Rephrasing of standard statement to be: (The hospital plans safe handling, storage, usage and transportation of hazardous materials and waste management).</p> <p>2) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved and updated hazardous material and waste management plan that addresses all elements from a) through k) in the intent). <p>3) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.02: The hospital ensures availability of the hospital SDS). • (EOC.03: Staff is trained on hazards material and waste management plan). • (EOC.05: The hospital ensures that waste handling, storage, and labeling are according to laws and regulations).
EFS.07 KW: Safety Management Plan	EFS.07 KW: Safety Management Plan	<p>1) Modified EOC: (EOC.01: The hospital has an approved and updated plan to ensure a safe work environment including all elements from a) through h) in the intent)</p> <p>2) Added a new EOC: (EOC.04: PPEs are available and used whenever indicated).</p>
EFS.08	EFS.08	<p>1) Rephrasing of EOC.03: (The hospital performs preventive and corrective actions whenever risks are identified).</p>

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
KW Pre-Construction risk assessment	KW: Pre-Construction risk assessment	2) Added a new EOC: (EOC.04: There is a mechanism, such as work permission, to empower risk assessment and recommendations).
EFS.09 KW: Security plan.	EFS.09 KW: security plan	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01 The hospital has an approved updated security plan that includes items a) through k) in the intent.) • (EOC.02: Involved staff members are trained on the plan.) 2) Added a new EOC.06: (Drills for child abduction are conducted at least biannually).
EFS.10 KW: Medical Equipment Plan	EFS.10 KW: Medical Equipment Plan	1) Modified EOC.01: (The hospital has an approved and updated medical equipment management plan that addresses all elements from a) through c) in the intent). 2) Added a new EOC: (EOC.06: Equipment adverse incidents are reported, and actions are taken).
EFS.11 KW: Utilities Management.	EFS.11 KW: Utilities Management	1. Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved and updated plan for utility management that includes items a) through l) in the intent). • (EOC.02: The hospital has a trained staff members to oversee utility management) 2. Added a new EOC: (EOC.03: The hospital utility management plan is implemented).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
EFS.12 KW: Water services	EFS.12 KW: Water services	<p>1) Modified standard statement: (Water services are managed according to laws and regulations).</p> <p>2) Rephrased EOC: (EOC.03: Regular chemical and microbiological analyses are performed and recorded for water services and dialysis water).</p>
EFS.13 KW: Disaster Plan	EFS.13 KW: Disaster Plan	<p>1) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an updated and approved hospital emergency preparedness plan that includes items a) through i) in the intent. • (EOC.02: Staff members are trained on the plan). • (EOC.03: The hospital performs at least one drill biannually, including items from I) to V) in the intent).
EFS.14 KW: Environmental Sustainability, Green Healthcare		New standard

IPC chapter Summary of Changes

Summary of Changes Chapter 10

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
IPC.01 KW: Infection prevention and control (IPC) Team, certification, qualification and training	IPC.01 KW: Infection prevention and control (IPC) Team, certification, IPC qualification and training	1) Rephrasing of EOC: (EOC.03: The IPC team members are qualified and trained).
IPC.02 KW: IPC program, risk assessment, guidelines	IPC.02 KW: IPC program, risk assessment, guidelines	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an infection control program that addresses all the elements mentioned in the intent from a) through i). • (EOC.04: The program is implemented in all hospital areas and covers patients, visitors, and staff). 2) Updated EOC.05 by merging two EOCs (EOC.05: and EOC.06) in Hospital edition 2021.
IPC.03 KW: IPC committee, meetings	IPC.03 KW: IPC committee, meetings	1) Modified EOC: (EOC.01: There are clear terms of reference for the infection control committee that includes at least from a) to g) in the intent).
		2) Rephrasing of EOC: (EOC.04 The committee minutes are recorded).
IPC.04 KW: Hand Hygiene	IPC.05 KW: Hand Hygiene	1) Modified EOC: (EOC.01: The hospital has approved Hand Hygiene policies and procedures based on current professional guidelines that address all the elements mentioned in the intent from a) to g).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<p>2) Added a new EOC: (EOC.03: Hand hygiene is implemented according to the policy).</p> <p>3) Updated (EOC.06) by merging two EOCs (EOC.04 and EOC.05) in Hospital edition 2021</p>
IPC.05 KW: PPE, guidelines, Physical Barriers	IPC.06 KW: PPE, guidelines, Physical Barriers	<p>5) Added a new EOC: (EOC.04: Hospital staff is trained on the proper way and sequence of donning and doffing of various PPE).</p> <p>6) Modified EOC: (EOC.01: The hospital has a personal protective equipment policy that includes items mentioned in the intent from a) through e).</p>
IPC.06 KW: detergents, antiseptics, and disinfectants	IPC.07 KW: detergents, antiseptics, and disinfectants	1) Modified standard statement: (Detergents, antiseptics, and disinfectants are available, selected and used according to current national/international guidelines).
IPC.07 KW Respiratory Hygiene Protocol, cough etiquette	IPC.08 KW: Respiratory Hygiene Protocol, cough etiquette	1) Modified EOC: (EOC.01: Respiratory hygiene/cough etiquette supplies are displayed at appropriate places).
IPC.08 KW: Safe injection practices	IPC.09 KW: Safe injection practices	<p>1) Rephrasing of standard statement to be: (The hospital ensures Safe injection practices).</p> <p>2) Rephrased EOC: (EOC.03: The hospital ensures single use of the fluid's infusion).</p> <p>3) Added a new EOC: (EOC.04: The hospital ensures sterility of any parenteral administration).</p>
IPC.09 KW: Environmental cleaning, evidence-based guidelines	IPC.10 KW: Environmental cleaning, evidence-based guidelines	1) Modified standard statement: (Environmental cleaning and disinfection activities are aligned with

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<p>current national/international guidelines).</p> <p>2) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: Hospital has approved cleaning and disinfection policy, and procedures includes items from a) to e) in the intent). • (EOC.03: The hospital identifies high risk areas with different schedules for each area and includes all elements mentioned in the intent from i) through iii). <p>3) Modified EOC: (EOC.04: The Cleaning technique and disinfectant of choice match the requirements of each cleaned area according to the approved policy).</p>
IPC.10 KW : Sterile technique, Aseptic technique	IPC.11 KW : Sterile technique, Aseptic technique	<p>10) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: Hospital has approved aseptic techniques policy(s) and procedures and include(s) items from a) to c) in the intent). • (EOC.04: Patient preparation is done according to the type of procedures and the hospital policy) <p>11) Modified EOC: (EOC.02: Healthcare professionals are trained and educated on aseptic techniques relevant to their jobs and according to the policy).</p>
IPC.11 KW: Care bundles		2) New standard
IPC.12	IPC.12	1) Modified EOC

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
KW: Transmission based precautions.	KW: isolation precautions	<p>(EOC.03: The hospital has one or more standardized isolation room(s) according to the hospital capacity and at least one AIIR).</p> <p>1. Added a new EOC (EOC.04: Required transmission-based precautions are implemented according to national and international guidelines during hospital stay and during transfer).</p>
IPC.13 KW immunocompromised hosts, protective environment	IPC.13 KW: immunocompromised hosts, protective environment	<p>1)Added new EOC: (EOC.01: The hospital has admission criteria for patients who require a protective environment (PE)).</p> <p>2)Modified EOC: (EOC.02: Involved health care professionals are trained and aware of the required precautions for PE).</p> <p>3)Rephrased EOC: (EOC.05: Precautions during the transfer of patient outside PE are considered).</p>
IPC.14 KW: Sterilization/disinfection	IPC.14 KW: Disinfection, sterilization	<p>1) Added new EOC: (EOC.02: Healthcare professionals involved in sterilization are competent).</p>
IPC.15 KW: Disinfection/Sterilization quality control program	IPC.15 KW: Disinfection/Sterilization quality control program	<p>1) Added a new EOC: (EOC.02: The process of disinfection/sterilization quality control addressing all elements in the intent from i) through vii).</p> <p>2) Updated EOC.04 by merging two EOCs (EOC.02 and EOC.04) in Hospital edition 2021</p> <p>3) Updated EOC.05 by merging two EOCs (EOC.05 and EOC.06) in Hospital edition 2021</p>

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
IPC.16 KW: Laundry service, textile	IPC.16 KW: Laundry service, textile	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: Contaminated textiles are collected, stored and transported according to the policy). • (EOC.03: There is at least one functioning washing machine with specification complying with national/international guidelines).
IPC.17 KW: Surveillance, Healthcare associated infections.	IPC.18 KW: Surveillance, Healthcare associated infections.	1) Rephrasing of standard statement to be: (The hospital has established a healthcare-associated infections surveillance process). 2) Modified EOC: (EOC.03: The IPC committee reviews the surveillance process data at least quarterly). 3) Updated EOC.04 by merging two EOCs (EOC.03 and EOC.05) in Hospital edition 2021
IPC.18 KW: Outbreaks investigation	IPC.19 KW: Outbreaks investigation	1) Rephrasing EOC: (EOC.02: The hospital reports patients with suspected communicable diseases as required by laws and regulations). 2) Updated (EOC.04) by merging two EOCs (EOC.05 and EOC.06) in Hospital edition 2021
IPC.19 KW: Multi-Drug-Resistant Organisms	IPC.20 KW: Multi-Drug-Resistant Organisms	1) Modified EOC: (EOC.01: The hospital has an approved policy for MDRO spread control.) 2) Added a new EOC (EOC.03: The hospital identifies and monitor MDROs).
IPC.20 KW: Food Services	IPC.21 KW: Food Services	1) Rephrasing of standard statement to be: (The hospital has a process to ensure safe food services). 2) Modified EOC (EOC.01: The hospital has an approved policy guiding safe

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<p>food services, that addresses all the elements mentioned in the intent from a) through h), and involved staff members are aware of the approved policy)</p> <p>3) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.04: Expressed breast milk and formula are handled according to guidelines and hospital policy) • (EOC.05: Administration of feeding tube nutritional therapy is performed according to policy and procedure).
IPC.21 KW: Post-mortem care	IPC.22 KW: Post-mortem care	1) Modified standard statement (Post-mortem care is managed according to guidelines, laws, and regulations).

OGM Chapter Summary of Changes*Summary of Changes Chapter 11*

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
OGM.01 KW: Governing body and Structure responsibilities	OGM.01 KW: Governing body structure OGM.03 KW: Governing body responsibility	1) Updated standard (OGM.01) by merging two standards (OGM.01 and OGM.03) in Hospital edition 2021.
OGM.02 KW: Mission Statement	OGM.02 KW: Mission Statement	3) Modified EOC: (EOC.02: The mission statement is reviewed annually).
OGM.03 KW: Effective communication with governing body	OGM.04 KW: Effective communication with governing body	1) Added a new EOC: (EOC.03: The governing body receives reports as regards hospital performance at least quarterly).
OGM.04 KW: Hospital Director	OGM.05 KW: Hospital Director	5) Modified EOC: (EOC.03: There is a job description for the hospital director covering the standard requirements from a) through i) as in the intent). 6) Rephrasing of EOC: (EOC.05)
OGM.05 KW: Committee structure	OGM.06 KW: Committee structure	7) Modified standard statement: (The hospital develops the required committees by laws and regulation). 8) Added a new EOC: (EOC.05: The performance of committees is reviewed annually).
OGM.06 KW: Strategic Planning	OGM.07 KW: Strategic Planning	2) Rephrasing of EOCs: (EOC.01 & EOC.02). 3) Modified EOC: (EOC.03 The strategic plan is reviewed annually).
OGM.07 KW Operational Planning	OGM.08 KW: Operational Planning	1. Modified EOC: (EOC.02 Staff is aware and participates in developing relevant operational plans).
OGM.08 KW: Hospital leaders	OGM.09 KW: Hospital leaders	No change.

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
OGM.09 KW: Departmental management	OGM.10 KW: Departmental management	No change.
OGM.10 KW: Supply Chain Management	OGM.11 KW: Supply Chain Management	12) Added a new EOC: (EOC.02: Involved staff are aware of the contents of the policy). 13) Modified EOC: (EOC.03: The Supply chain process is recorded, monitored, and evaluated).
OGM.11 KW: Stock Management	OGM.12 KW: Stock Management	3) Rephrasing of standard statement to be: (The hospital has defined processes to manage its storage, stock, and inventory).
OGM.12 KW: Billing System	OGM.14 KW: Billing System PCC.14 KW: patient and family education on administrative process	1) Updated standard (OGM.12) by merging two standards (OGM.14 and PCC.14) in Hospital edition 2021.
OGM.13 KW: Contract Management	OGM.15 KW: Contract Management	No change.
OGM.14 KW: Safety Culture	OGM.16 KW: Safety Culture	1) Added new EOCs: <ul style="list-style-type: none"> • (EOC.01: The leaders are aware of the measures to promote patient safety and quality culture). • (EOC.04: Lesson learned from root cause analysis (RCA) of sentinel events are discussed and communicated). • (EOC.05: The hospital addresses resistance to change and follows a documented approach to manage among hospital staff and other stakeholders). 2) Rephrasing of EOC: (EOC.02)

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		3) Modified EOC: (EOC.03: Leaders creates a no blame/just culture to encourage reporting errors and near misses).
OGM.15 KW: Ethical Management	OGM.18 KW: Ethical Management	<p>4) Rephrasing of standard statement to be: (The hospital establishes a framework to ensure ethical management).</p> <p>5) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital has an ethical committee with terms of references that addresses at least a) to f) in the intent). <p>6) Added a new EOC: (EOC.03: The committee meets regularly, and the minutes of meetings are recorded).</p>
OGM.16 KW: Staff rest areas	OGM.19 KW: Staff Working Condition	2) Rephrasing of standard statement to be: (The hospital ensures availability of staff rest areas).
OGM.17 KW: Staff Health program	OGM.20 KW: Staff Health	1) Rephrasing of EOC: (EOC.03 Staff members are aware of the risks within the hospital environment, their specific job-related hazards, and periodic medical examination).

CAI chapter Summary of Changes*Summary of Changes Chapter 12*

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
CAI.01 KW: Community involvement program	CAI.02 KW: planning for community involvement	New standard
CAI.02 KW: Community partners and channels of communication		New standard
CAI.03 KW: Community Health Needs Assessment	CAI.02 KW: planning for community involvement	New standard
CAI.04 KW: Community involvement activities.	CAI.03 KW: Community Education	<p>7) Modified standard statement: (The hospital provides community involvement activities in cooperation with community partner(s)).</p> <p>8) Modified EOCs:</p> <ul style="list-style-type: none"> • (EOC.01: The hospital provides community involvement activities in collaboration with community partners). • (EOC.02: Hospital leaders are aware of their specific community health needs and health educational needs). <p>9) Added a new EOC: (EOC.03: The performed community involvement activities meet the identified community health needs).</p>
CAI.05 KW: Community Initiatives	CAI.01 KW: Community Initiatives	1) Modified standard statement : (The hospital considers international, regional, or national, health initiatives to be engaged with the community and/or improve its services).

		2) Added new EOCs: (EOC.01 , EOC.02 , EOC.03 & EOC.04)
CAI.06 KW: Community Involvement program evaluation	CAI.04 KW: Community Involvement program evaluation	<p>4) Modified standard statement (Outcomes of the community health needs assessment and involvement program are evaluated).</p> <p>5) Added new EOCs:</p> <ul style="list-style-type: none"> • (EOC.01 The hospital reviews the community assessment and involvement program annually). • (EOC.04 The community needs and the related services are updated based on the evaluation).
CAI.07 KW Hospital advertisement	PCC.01 KW: Hospital advertisement	<p>4) Modified EOC: (EOC.01: The hospital has a process to provide clear, updated, and accurate advertisements of its services.)</p> <p>5) Rephrasing of EOC: (EOC.03 Community stakeholders receive clear, updated, and accurate information about the hospital's services, healthcare professionals, and working hours.)</p> <p>6) Added a new EOC: (EOC.04 Violations of advertisements or providing false information to the community are subjected to actions according to the hospital code of ethics).</p>
CAI.08 KW: Promoting accreditation and quality	CAI.06 KW: promoting quality of care	<p>4) Modified standard statement: (The hospital supports accreditation promotion to the community stakeholders and shares experience with other healthcare organizations).</p> <p>5) Added new EOCs: (EOC.01 , EOC.02 , EOC.03 & EOC.04)</p>

WFM Chapter Summary of Changes

Summary of Changes Chapter 13

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
WFM.01 KW: Workforce Laws and regulations	WFM.01 KW: Workforce Laws and regulations	<ol style="list-style-type: none"> Added new EOCs: <ul style="list-style-type: none"> (EOC.01 There is qualified staff to manage and develop workforce). (EOC.02 The hospital identifies all applicable laws, regulations and norms that guide workforce management). (EOC.03 Responsible staff members are aware of laws, regulations and norms that guide workforce management). Modified EOC: (EOC.04 Workforce is managed and developed according to applicable laws and regulations and norms that guide workforce management).
WFM.02 KW: Staffing Plan	WFM.02 KW: Staffing Plan	<ol style="list-style-type: none"> Rephrasing of standard statement to be: (The hospital develops a staffing plan to ensure that the provided services are consistent with patient needs, hospital mission, and professional practice recommendations).
WFM.03 KW: Recruitment process	WFM.03 KW: Recruitment	<ol style="list-style-type: none"> Rephrasing of standard statement to be: (The hospital implements a uniform recruitment process).
WFM.04 KW: Job Description	WFM.04 KW: Job Description	<ol style="list-style-type: none"> Rephrasing EOCs: <ul style="list-style-type: none"> (EOC.02: Job descriptions address each position's responsibilities, required qualifications, and reporting structure). (EOC.04 The job description is signed by the staff and kept in the staff's file). Modified EOC (EOC.03 On assignment, the job description is discussed with staff members, including independent practitioners).
WFM.05 KW: Verifying credentials	WFM.05 KW: Verifying credentials	<ol style="list-style-type: none"> Rephrasing of standard statement to be: (Staff credentials are collected, evaluated, and verified). Rephrasing of EOCs: (EOC.01 & EOC.03) Added a new EOC: (EOC.04 Credible efforts are utilized for the verification from the primary sources either directly or through a third party).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
WFM.06 KW: Staff Files	WFM.06 KW: Staff Files	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.04: Staff files include all the required records from i) through vii), as mentioned in the intent). • (EOC.05: Former staff files are retained for a specific time as per hospital policy and the hospital maintain confidentiality during disposal of files).
WFM.07 KW Orientation Program	WFM.07 KW: Orientation Program	1) Modified EOCs: (EOC.01, EOC.02 & EOC.03). 2) Rephrasing (EOC.05: There is evidence that each staff member has completed the orientation program which is recorded in their file). 3) Rephrasing of EOC: (EOC.04: All New staff members, including contracted and outsourced staff, attend the orientation program regardless of employment terms).
WFM.08 KW Continuous Education Program	WFM.08 KW: Continuous Education Program	1) Rephrasing of EOC: (EOC.03 The educational program is based on the training needs assessment of the staff). 2) Added a new EOC: (EOC.04 Department heads approve the departmental education activities necessary to maintain departmental care delivery).
WFM.09 KW: Staff Performance Evaluation	WFM.09 KW: Staff Performance Evaluation WFM.04 KW: Job Description	1) Modified EOCs: <ul style="list-style-type: none"> • (EOC.02: The employee's department carries out performance and competency evaluations). • (EOC.03: Performance and competency evaluation is based on the job description),
WFM.10 KW: Medical Staff Structure	WFM.10 KW: Medical Staff Structure WFM.11 KW: Medical Staff bylaws	14) Updated standard (WFM.10) by merging two standards (WFM.10. & WFM.11) in Hospital edition 2021.

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
WFM.11 KW: Medical Staff Appointment	WFM.12 KW: Medical Staff Appointment	<p>4) Updated EOC (EOC.02) by merging two EOCs (EOC.02& EOC.04) in Hospital edition 2021.</p> <p>5) Added a new EOC: (EOC.04: The appointment decisions and recommendations are approved by a relevant council/committee and/or by the medical director).</p>
WFM.12 KW: Clinical Privileges	WFM.13 KW: Clinical Privileges	<p>1. Modified EOCs:</p> <ul style="list-style-type: none"> • EOC.01: The hospital has an approved policy that addresses at least all elements from a) through g) in the intent.
WFM.13 KW: Medical Staff Performance Evaluation	WFM.14 KW: Medical Staff Performance Evaluation	<p>1) Added new EOCs:</p> <ul style="list-style-type: none"> • EOC.01: Ongoing professional practice evaluation (OPPE) of the medical staff is performed at least annually. • EOC.05: The results will be used to help decisions related to re-privileging and re-credentialing and reappointment. <p>2) Modified EOC:</p> <ul style="list-style-type: none"> • EOC.03: The evaluation utilizes objective data to measure achievement in clinical care provision, clinical outcome, and attitude and behavior.
WFM.14 KW: Peer Review process.	WFM.15 KW: Peer Review	<p>1. Added new EOC: (EOC.04: The results of the peer review are confidentially communicated to the concerned staff and to the medical director to take corrective actions and improve performance).</p>
WFM.15 KW: Nursing laws and regulations	<p>WFM.16 KW: Nursing laws and regulations</p> <p>WFM.17 KW: Nursing structure</p>	<p>1) Updated standard (WFM.15) by merging two standards (WFM.16 & WFM.17) in Hospital edition 2021.</p>
WFM.16 KW: Other healthcare	WFM.18 KW: Other health care practitioners' job	<p>Rephrasing of standard statement to be: (Legal requirements governing the professional</p>

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
practitioners' job responsibilities	responsibilities	regulation of other healthcare practitioners are followed).
WFM.17 KW: Working Hours	WFM.19 KW: Working Hours	No change.

IMT chapter Summary of Changes*Summary of Changes Chapter 14*

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
IMT.01 KW: Information Management Processes	IMT.01 KW: Information Management Processes	4) No changes
IMT.02 KW: Information management plan	IMT.02 KW: Information management plan	1) Modified EOCs: (EOC.02: The hospital has an approved and effective information management plan that includes items from a) through f) in the intent). 2) Added new EOCs <ul style="list-style-type: none"> • (EOC.04: The health information system is overseen by a qualified individual). • (EOC.05: The clinical codes match those provided by health authorities and/or third-party payers.)
IMT.03 KW: Document control system.	IMT.03 KW: Quality Management System Documents	3) Rephrasing of standard statement to be: (The hospital establishes a document control system for its key functions). 4) Modified EOCs: <ul style="list-style-type: none"> • (EOC.01: The hospital has an approved document control policy that addresses at least elements from a) to f) in the intent). • (EOC.05: Policies and procedures are revised at least every three years, and each document type has defined validity). 5) Rephrasing of EOC: (EOC.03 & EOC.04).
IMT.04 KW: ٤ Abbreviations	IMT.04 KW: ٤ Abbreviations	1) Modified standard statement (The hospital defines standardized symbols and abbreviations).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<p>2) Modified EOC: (EOC.03: Symbols and abbreviations, including the approved list, are used according to the policy).</p> <p>3) Added a new EOC: (EOC.04: Violation of the list of not-to-use symbols/abbreviations is monitored, and corrective actions are taken).</p>
IMT.05 KW: Confidentiality and Security of data and information	IMT.05 KW: Confidentiality and Security of data and information	<p>9) Modified standard statement (The hospital maintains data and information confidentiality and security).</p> <p>10) Modified EOC (EOC.01: The hospital has an approved policy that includes all the points in the intent from a) through g).</p>
IMT.06 KW: Integrity of Data and Information	IMT.06 KW: Integrity of Data and Information	2) No changes
IMT.07 KW Retention of Data and Information	IMT.07 KW Retention of Data and Information	1) Modified EOC: (EOC.02: All involved staff are aware of the policy requirements).
IMT.08 KW: Patient's Medical record Management	IMT.08 KW: Patient's Medical record Management	4) Rephrasing of standard statement to be: (The Patient's medical record is managed to ensure effectiveness).
IMT.09 KW: Medical Record Review	IMT.09 KW: Medical Record Review	<p>1) Rephrasing of standard statement to be: (The hospital establishes the patient's medical record review process).</p> <p>2) Rephrasing of EOC (EOC.03: The hospital leaders are reported on the medical record review's findings).</p>
IMT.10 KW: Health information	IMT.10 KW: Health information technology evaluation	1) Modified standard statement (Health information technology

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
technology evaluation		systems are assessed and tested before implementation). 2) Added a new 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	6) No changes
IMT.12 KW: Data Back-up	IMT.12 KW: Data Back-up	1) No changes

QPI chapter Summary of Changes*Summary of Changes Chapter 15*

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
QPI.01 KW: Quality Committee (s)	QPI.01 KW: Quality Committee (s)	1) Added a new EOC (EOC.04 : Committees' minutes of meetings are recorded and communicated to involved staff members.)
QPI.02 KW: Quality improvement Plan(s)	QPI.02 KW: Quality improvement Plan(s)	3) Rephrasing of Standard statement to be: (There is/are hospital-wide quality improvement and patient safety plan(s). 4) Modified EOC.01 (The hospital has an updated and approved quality improvement, and patient safety plan(s) that defines at least items from a) through j) in the intent.
QPI.03 KW: Quality management Team	QPI.03 KW: Quality management Team	1) Added a new EOC: (EOC.01: A qualified and experienced quality director supervises the quality management and improvement activities.) 2) Rephrasing:(EOC.02: Quality management functions have individual(s) with knowledge, skills, and experience in quality-related activities with clear job descriptions and appropriate numbers.) 3) Added a new EOC: (EOC.04: The top management supports the implementation of hospital-wide improvement activities with all the resources needed).
QPI.04 KW: Staff Participation in Quality Management Activities	QPI.04 KW: Staff Participation in Quality Management Activities	2) Rephrasing of all EOCs in this standard.
QPI.05 KW: Performance Measures	QPI.05 KW: Performance Measures	1) Rephrasing of Standard statement to be: (The hospital develops a process for performance measures selection and monitoring that is consistent with significant processes).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<ol style="list-style-type: none"> 1) Added a new EOC: (EOC.01: There is an identified and approved list of performance measures consistent with significant processes). 2) Rephrasing of all EOCs (EOC.02/EOC.03/EOC.04/EOC.05).
QPI.06 KW: Clinical Performance Measures	QPI.06 KW: Clinical Performance Measures	<ol style="list-style-type: none"> 1) Modified EOC: (EOC.01: The hospital selects appropriate clinical care performance measures consistent with its scope of services and relevant care areas mentioned from a) through j) in the intent. 2) Rephrasing of all EOCs: (EOC.02, EOC.03, EOC.04).
QPI.07 KW: Managerial Performance Measures	QPI.07 KW: Managerial Performance Measures	<ol style="list-style-type: none"> 1) Modified EOC: (EOC.01: The hospital selects appropriate managerial performance measures consistent with its scope of services and relevant care areas mentioned from a) through h) in the intent). 2) Rephrasing of all EOCs: (EOC.02, EOC.03, EOC.04).
QPI.08 KW: Data aggregation, analysis and validation.	QPI.08 KW: Data aggregation, analysis and validation. QPI.09 KW: Data Validation	<ol style="list-style-type: none"> 1) Updated standard (QPI.08) by merging two standards (QPI.08 & QPI.09) in Hospital edition 2021.
QPI.9 KW: Risk Management Program	QPI.10 KW: Risk Management Program	<ol style="list-style-type: none"> 1) Rephrasing of Standard statement to be: (The hospital develops a risk management program and/or plan). 2) Modified EOC: (EOC.01: The hospital has a risk management program and/or plan that includes all the elements from a) to i) in the intent). 3) Rephrasing of (EOC.02/EOC.04). 4) Added a new EOCs:

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<ul style="list-style-type: none"> • (EOC.03: Risk mitigation processes are developed based on identified risks). • (EOC.05: Results of risk management activities are communicated at least quarterly to the governing body.)
QPI.10 KW: Incident Reporting System	QPI.11 KW: Incident Reporting System	<ol style="list-style-type: none"> 1) Rephrasing of standard statement to be: (The hospital has an incident-reporting system). 2) Modified EOC: (EOC.01: The hospital has an approved incident-reporting system that includes items from a) through f) in the intent). 3) Added a new EOCs: <ul style="list-style-type: none"> • (EOC.02: All staff are aware of the incident-reporting system, including contracted and outsourced services). • (EOC.03: All reported incidents are investigated, and service gaps are identified). • (EOC.04: Corrective and/or preventive actions are taken to close gaps in services in a timely manner). • (EOC.05: The hospital communicates with patients/service users about adverse events they are affected by and provides both immediate and ongoing assistance).
QPI.11 KW: Sentinel events	QPI.13 KW: Sentinel events	<ol style="list-style-type: none"> 4) Rephrasing of standard statement to be: (The hospital defines, reports, investigates sentinel events, and takes corrective and preventive actions.) 5) Modified EOC: <ul style="list-style-type: none"> • (EOC.01: The hospital has a sentinel events management policy that includes items in the intent from a) through g), and leaders are aware of the policy requirements).

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
		<ul style="list-style-type: none"> (EOC.03 to be: (All sentinel events from i) through xi) in the intent are communicated to GAHAR within 2 working days of the event or becoming aware of the event.) <p>6) Rephrasing of (EOC.04 : Leaders take corrective and preventive action based on identified root cause analysis.)</p> <p>7) Added a new EOC: (EOC.05: Results of root cause analysis with related actions are reported to the hospital governing body and GAHAR.)</p>
QPI.12 KW: Sustaining Improvement	QPI.14 KW: Sustaining Improvement	<p>1) Rephrasing of standard statement to be: (Sustained improvement activities are performed within the approved time frame).</p> <p>2) Rephrasing of EOCs: (EOC.01/EOC.02).</p> <p>3) Added a new EOC: (EOC.05: The hospital conducts at least one utilization improvement project annually).</p>

ATH Chapter Summary of Changes

Summary of Changes Chapter 16

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
ATH.01 KW: Mission of Academic hospital.		8) New standard
ATH.02 KW: Educational Governance	ADD.01 KW: Educational Governance	4) Added new EOCs: <ul style="list-style-type: none"> • (EOC.02: The hospital establishes minimum qualifications and credentials for faculty members involved in teaching and research activities). • (EOC.03 The hospital establishes mentorship programs to support the professional development and career progression of students, residents, and early-career faculty members, with clearly defined goals and measurable outcomes). • (EOC.04 The hospital provide access to educational resources, including libraries, journals, and online databases, to support teaching activities for faculty and students.
ATH.03 KW: Curriculum development		New standard
ATH.04 KW: Patient rights during bedside teaching		New standard
ATH.05 KW: Patient safety and clinical teaching	ADD.02 KW: Safe Clinical Education Culture	3) Modified standard statement: (Patient safety is ensured and upheld during clinical teaching activities). 4) Added new EOC: (EOC.01 The hospital integrates structured patient safety education into their programs) . 5) Modified EOC: (EOC.02, EOC.04, EOC.5).
ATH.06 KW: Activities of house officers and residents	ADD.04 KW: Activities of house officers and residents	1) Modified standard statement: (house officers, residences and other trainees are oriented, working within their scope of work and involved in an educational program). 2) Modified EOC: 1. (EOC.01. The hospital has an approved orientation program to prepare trainees for their roles that includes all the points in the intent from a) through g)).
ATH.07 KW: Training of Medical Students	ADD.05 KW: Training of Speciality Medical Trainees	1. Rephrasing EOC: (EOC.04: Educators are trained to use objective assessment tools for evaluating the trainees.)

GAHAR hospital standards 2025	GAHAR hospital standards 2021	Details of changes
ATH.08 KW: Research Ethical Framework	ADD.06 KW: Research Ethical Framework	1) No changes
ATH.09 KW: Research Patient Rights	ADD.07 KW: Research Patient Rights	1) No changes