

**WEBSITE PAGE**

**RASHTRIYA AYURVEDA VIDYAPEETH QUALITY ENHANCEMENT INITIATIVE  
FOR AYURVEDA TRAINING COURSES**

“Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Training Courses” is an innovative move by Rashtriya Ayurveda Vidyapeeth(National Academy of Ayurveda) on behalf of Ministry of AYUSH for bringing Quality Enhancement to those training courses, which are not covered by under IMCC Act, 1970 or any other regulatory body/ provisions of the country and abroad too . It aims to bring standardization to the Ayurveda courses by accrediting of such Ayurveda courses globally.

This is to follow the notification issued by Ministry of AYUSH, Govt. of India dated 24 December, 2019 which notifies RAV as the Accrediting agency for various Ayurveda professional courses being run in different countries. [\(Hyperlink\)](#)

The Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Training Courses provides following options to Ayurveda Training course provider.

- Listing of Ayurveda Training Courses on RAV website
- Self-Declaration of Conformity to Basic Accreditation standard
- Formal Accreditation of training courses will be into two levels

Initially Basic Accreditation

[Next Level](#) (To be developed- work in progress)

In Course of time RAV will develop standardized courses on various topics/subjects of Ayurveda for which the training providers will be free to adopt for their Accreditation.

For More Information visit General Information Document.

1. General Information [\(Hyperlink\)](#)
2. Listing of Ayurveda Training Courses on RAV website
  - Process of Listing [\(Hyperlink\)](#)
  - Proforma for Listing [\(Hyperlink\)](#)
3. Self-Declaration of Conformity to Basic Accreditation standard
  - Process of Self Declaration of Conformity [\(Hyperlink\)](#)
  - Self-Assessment Check List [\(Hyperlink\)](#)
  - Proforma for Self-Declaration of Conformity [\(Hyperlink\)](#)

4. Formal Accreditation of training courses under Basic Accreditation standards

Process of Basic Accreditation [\(Hyperlink\)](#)

Application Form [\(Hyperlink\)](#)

Basic Accreditation standard [\(Hyperlink\)](#)

Self-Assessment Check List [\(Hyperlink\)](#)

5. Formal Accreditation of training courses under Next Level- The Process of next level is in process and will be available shortly.

6. Policy and guidelines for use of RAV Accreditation marks [\(Hyperlink\)](#)

7. Procedure for Handling of Complaints, Grievances and Appeals [\(Hyperlink\)](#)

8. Policies and Procedures for dealing with Adverse and other Decisions [\(Hyperlink\)](#)

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# **GENERAL INFORMATION**



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# RASHTRIYA AYURVEDA VIDYAPEETH

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# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **INTRODUCTION**

Ayurveda in recent years has gained importance not only in India but worldwide because of its monumental healing effects. Ayurveda a science, with its unique perpetual principles, is now even taken into notice and are being utilized /incorporated in tailor made measures in their Healthcare Delivery System. There are various educational courses which are running worldwide at different levels, but a standard and uniformity in these courses yet to be established. The courses need a basic quality of education, competence and credibility worldwide.

Rashtriya Ayurveda Vidyapeeth (RAV) as an Institution under the aegis of Ministry of AYUSH, Govt. of India has been notified as the Accreditation agency dated 24 December 2019 for Ayurveda courses which are not covered under IMCC Act, 1970 or any other regulatory body([Hyperlink](#)). The accreditation process involves careful assessment of these courses and the training providers which gives creditability to these courses and their acceptance worldwide.

RAV as the Accreditation agency has framed “**Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Courses**” which helps the stake holders to have uniform and systematic delivery of courses and encourage them to opt for Accreditation process.

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **BENEFITS OF ACCREDITATION**

### **Benefits to the Training Providers**

The training providers opting for “Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Courses” helps them to come under the ambit of Accreditation for all those courses which are not regulated by any regulatory body globally. This will add a merit to their credential being acknowledged by an external agency.

### **Benefits to the Students**

It would help the students to know about training providers offering quality education and about various Ayurveda courses which are running worldwide in different subjects which could be beneficial for their professional acumen.

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **ABOUT RAV**

RAV, National Academy of Ayurveda as an autonomous body under Ministry of AYUSH mainly dealing with CRAV (Using unique Guru Shishya methodology of teaching in Ayurveda) Continuing Medical Education (CME) scheme which are flagship of RAV and in addition RAV does numerous training programs both physical and as well as in digital mode and brings out various publications in Ayurveda. As a recent development, RAV has been notified as an Accrediting Agency by Ministry of AYUSH for short term Ayurveda courses which do not fall under the domain of CCIM. The accreditation of courses is for both at domestic as well as international level.

**CRAV scheme** of RAV under the Guru-Shishya Parampara facilitate students to have adequate knowledge of Samhitas, as well as gives them opportunity to learn the skills of Ayurvedic clinical practice.

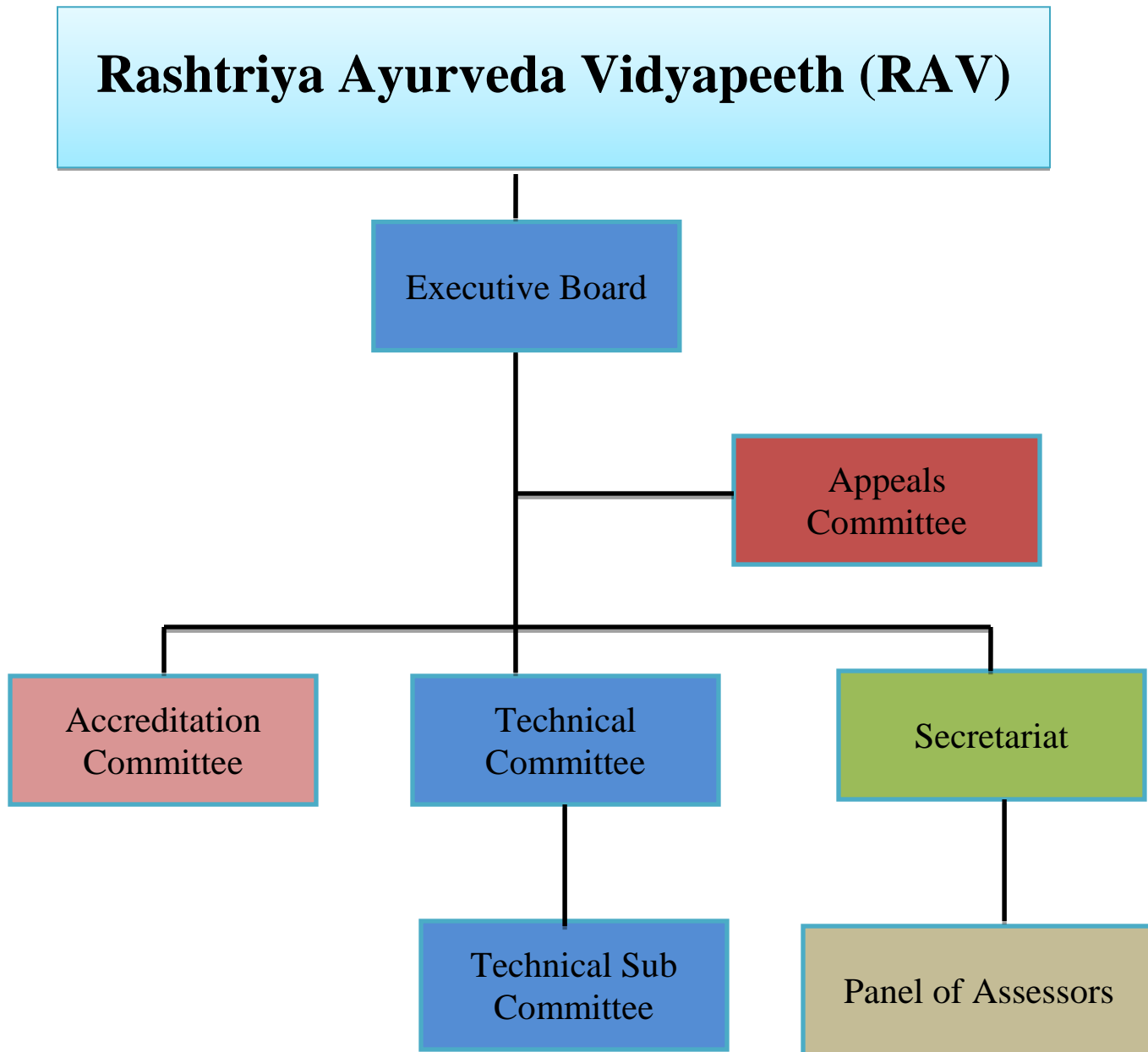
**CME Scheme** of Ministry of AYUSH is providing training to AYUSH personnel for upgrading their professional competence & skills and their capacity building. Almost 50 CME programs have been running every year in multiple disciplines of AYUSH. Till date, a huge collection of quality lectures delivered at these CME's is available at RAV premises.

**Accreditation Scheme** - RAV is notified as the accreditation agency for short term and long term courses in various principles globally which are not covered under IMCC Act, 1970. These courses are not approved by any organization in India and globally so there is no standard and systemic education which imparted in this courses globally.



# RASHTRIYA AYURVEDA VIDYAPEETH

## ORGANIZATION STRUCTURE



# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **ORGANIZATION STRUCTURE**

### **Executive board**

The functions of the Executive Board is to plan, organize and implement the Scheme of Accreditation, prescribe fee, rates, charges honorarium etc. and has the power to revalidate/ extend accreditation

### **Accreditation Committee**

The functions of Accreditation Committee are to grant of accreditation based on assessment reports received to RAV. It also looks into the extension and deletion of Scope of Accreditation depending on the reports.

### **Technical Committee**

The technical committee looks into drafting of Accreditation standard and guidance for the process of Accreditation. It also looks into the periodic review and updating of the standard and documents.

### **Technical Sub Committee**

The technical Sub-committee looks into drafting of standard curriculum for various Ayurveda Courses and its periodic revision.

### **Appeals Committee**

The appeals committee looks into appeals made by the training providers in relation to any adverse decision regarding accreditation. The decision can be on refusal and acceptance of application, any changes in accreditation scope, decision on deny, suspend and withdraw of accreditation or any other action related to the grant of accreditation.

### **Panel of Assessors**

The assessors are the group of people who conduct assessment and submit the report to secretariat

### **Secretariat**

The Secretariat coordinates the entire activities related to Accreditation

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **QUALITY ENHANCEMENT INITIATIVE PROCESS**

The “Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Courses” is basically divided into four stages.

1. Listing of Training Courses.
2. Self-Declaration of Conformity to Basic Accreditation Standard
3. Assessment Process to Basic Accreditation Standard of Ayurveda Courses/Training Providers
4. Assessment Process to next level – (To be developed- work in progress)

**Listing of Training Courses-** The list of training courses is to create an inventory of training courses available globally in Ayurveda. The details of the same are provided in Document.....

**Self-Declaration of Conformity to Basic Accreditation Standard-** It is an opportunity to the training providers to assess themselves against the prescribed Accreditation standard and declare conformity based on self-assessment. The details of the same are provided in Document.....

**Assessment Process to Basic Accreditation Standard of Ayurveda Courses/Training Providers-** It is an opportunity for the training provider to have an assessment process opting for the accreditation of their courses under basic accreditation standard developed by RAV. The details of the same are provided in Document.....

**Assessment Process to next level–** (To be developed- work in progress)

The training providers opting of “Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Courses” is free to opt to any level mentioned above having the basic requirements of the same.

# RASHTRIYA AYURVEDA VIDYAPEETH

## ACCREDITATION STANDARD

RAV standards for Ayurveda courses is prepared by the technical committee which contains a set of standards for evaluation of training providers. The standards provide framework for quality education globally.

Formal Accreditation of training courses will be into two levels

Initially Basic Accreditation

**Next Level** (To be developed- work in progress)

**Basic Accreditation standard** are set of Accreditation standard which evaluates the training providers related to set of basic accreditation standard. In this type of standard RAV also looks into the already running curriculum of the training providers and evaluates them on the same.

The Basic Accreditation Standard developed for various courses are divided into 10 main chapters. Consisting of 43 Objective criteria which focuses on quality of education and minimum standard, which are required to accredit courses. Considering these points, chapters of the Accreditation Standard are divided into main sub-types. The first 5 chapters are focused on Institution whereas last 5 chapters are on delivery of education.

The chapters are as follows:

Chapter 1-(VMO) Vision, Mission and Objectives

Chapter 2- (OGA) Organization, Governance and Administration

Chapter 3- (FR) Financial Resources

Chapter 4- (HR) Human Resources

Chapter 5- (IR) –Infrastructure Resources

Chapter 6- (SS) Student Services

Chapter 7- (CC) Course Curriculum

Chapter 8- (EA) Evaluation and Assessment

Chapter 9- (LR)-Learning Resources

Chapter 10 – (QI) Quality Improvement

**Next level** are set of Accreditation standard which will be in accordance with the international standard and will be available shortly.

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **PREPARING FOR QUALITY ENHANCEMENT**

### **INITIATIVE PROCESS**

A training providers opting for Accreditation under “**Rashtriya Ayurveda Vidyapeeth Quality Enhancement Initiative for Ayurveda Courses**” should ensure the implementation of Accreditation standard in the institution.

The training providers management shall first decide about getting accredited under the above scheme. It shall then download or purchase the accreditation standard from RAV website.

It is important that the management shall make a definite plan while opting for Accreditation. In the process the management nominates a responsible person from the institution who is aware about the scheme and coordinates with RAV office. The nominated person shall be well aware about the scheme.

The nominated person can download the following from the RAV website.

- Process and Proforma for Listing of Ayurveda Training Courses on RAV website
- Process, Self-Assessment Check List and Proforma for Self-Declaration of Conformity to Basic Accreditation standard
- Process, Application Form, Basic Accreditation standard and Self-Assessment Check List for Basic Accreditation standard

The nominated staff shall fill the documents related to the level of quality initiative process and submit it to RAV office by **email id.....**or post to RAV or enter on RAV website.

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **FINANCIAL TERMS AND CONDITION**

Listing of Training Courses	Rs. ....
Listfor Self-Declaration of Conformity	Rs. ....
Application fees:	Rs.....
Annual fees:	Rs.....
Extension of scope fees:	Rs.....
Note: The fees could be market driven	

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# RASHTRIYA AYURVEDA VIDYAPEETH

## PROCESS FOR LISTING OF TRAINING COURSES



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# RASHTRIYA AYURVEDA VIDYAPEETH

## 0. OBJECTIVE

The objective is to create an inventory of training courses available globally in Ayurveda with the ultimate aim of bringing them under the framework of formal accreditation.

## 1. SCOPE

The document covers requirements for listing of training providers for Ayurveda Training Courses on RAV website as prescribed from time to time.

## 2. AUTHORITY

The Quality Enhancement Scheme owner i.e. RAV shall have the complete authority for listing the training providers.

## 3. REQUIREMENT

**3.1** The training provider desirous of listing should only be running Ayurveda Courses as defined in the introduction.

**3.2** The listed training providers can make a claim limited to that its courses are listed on RAV website [Hyperlink](#) and not make any improper or misleading claim related to listing of its courses.

## 4. PROCESS

**4.1** The training provider shall fill in the format for listing of training courses and send to email id.....or post to RAV. The format is available in Proforma for RAV Scheme of listing of Training providers Document No: 3 [Hyperlink](#)

**4.2** RAV shall arrange to display the information on its website. [Hyperlink](#)

**4.3** RAV reserves the right to seek more information or visit the training providers at any stage of process should a need arise.

## 5. DELISTING OF THE TRAINING PROVIDER

**5.1** RAV may delist the training provider because of any of the following reasons.

- a) Providing wrong or insufficient or misleading information.
- b) Improper or misleading claim of listing
- c) Any other conduct considered inappropriate.
- d) Listing Non Ayurveda Courses

**5.2** RAV shall provide the training provider an opportunity to be heard before delisting

# **RASHTRIYA AYURVEDA VIDYAPEETH**

**5.3** Any aggrieved Training provider can appeal following the process laid down in the document Procedure for Handling of Complaints, Grievances and Appeals Document No: 12 [Hyperlink](#)

## **6. DISCLAIMER**

**6.1** Listing of training providers on RAV website is only for information of stakeholders and for encouraging the training providers to seek accreditation of their courses in due time.

**6.2** The listing does not in any way imply endorsement or accreditation or any recognition by RAV of the training providers or training courses.

**6.3** The listed training providers can make a claim limited to that its courses are listed on RAV website [Hyperlink](#)

-----End of the document-----

# RASHTRIYA AYURVEDA VIDYAPEETH

## PROFORMA FOR LIST OF TRAINING PROVIDERS



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# RASHTRIYA AYURVEDA VIDYAPEETH

## PROFORMA FOR RAV SCHEME OF LIST OF TRAINING PROVIDERS

Sl. No	Name	Address	City	State/ Province	Country	Name of the Course (Separate for each)	Duration of the Course (Separate for each)	Eligibility	Mode of Course (Physical or distance or online or any other mode or a combination of any modes)	Contact details	Email	Website	Date of applying
1													
2													

### Disclaimer

1. Listing of training providers on RAV website is only for information of stake holders and for encouraging the training providers to gets accreditation of their courses in due time.
2. The listing does not in any way imply endorsement or accreditation or any recognition by RAV of the training providers or training courses.
3. The listed training providers can make a claim limited to that its courses are listed on RAV website [Hyperlink](#)

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# RASHTRIYA AYURVEDA VIDYAPEETH

## PROCESS FOR SELF- DECLARATION OF CONFORMITY



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# RASHTRIYA AYURVEDA VIDYAPEETH

## 0. OBJECTIVE

The objective is to provide an opportunity to the training providers to assess themselves against the prescribed Basic Accreditation Standard and declare conformity to it based on self assessment without any external intervention by RAV or any 3<sup>rd</sup> party.

## 1. SCOPE

The document covers requirements for self-declaration of conformity by the training providers of the training courses operated by them as per the Basic Accreditation Standard revised from time to time. For Basic Accreditation Standard Document No: 9 [Hyperlink](#)

## 2. AUTHORITY

The Quality Enhancement Scheme owner i.e. RAV shall have the complete authority for accepting/ rejecting the self-declaration of conformity of the training providers.

## 3. REQUIREMENT

3.1 The training provider desirous of being listed under the self declaration of conformity option should only be running Ayurveda Courses as defined in the introduction.

3.2 The training providers under self declaration of conformity can make a claim limited to that they have self declared themselves to the Basic Accreditation Standard of RAV.

## 4. PROCESS

4.1 The training provider shall complete the self assessment check list for Self Declaration of Conformity Document No: 5 [Hyperlink](#) and send to email id.....or post to RAV.

4.2 While completing the check list, the training providers shall satisfy himself that he conforms to the all the requirements of the Basic Accreditation Standard and make a suitable declaration in the check list.

4.3 The training provider shall send the supporting documents demonstrating conformity along with the self assessment check list.

4.4 RAV shall undertake a completeness check to ensure that the self assessment check list is completely filled in and supporting documents provided.

4.5 The system is based on self declaration; however, RAV shall undertake random checks of the information submitted by the training providers and evidence provided to verify the declarations.



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4.6 RAV reserves the right to seek more information or visit the training providers at any stage of process should a need arise.

## 5. DELISTING OF THE TRAINING PROVIDER UNDER SELF-DECLARATION OF CONFORMITY

5.1 RAV may delist the training provider if the declaration is found not in order because of any of the following reasons.

- a) Providing wrong or insufficient or misleading information.
- b) Improper claim of listing
- c) Any other conduct considered inappropriate.
- d) Non Ayurveda Courses

5.2 The self declaration of conformity is valid only for one year by which the training provider shall seek accreditation of its courses under the accreditation scheme of RAV.

5.3 RAV shall provide the training provider an opportunity to be heard before delisting

5.4 Any aggrieved Training provider can appeal following the process laid down in the document Procedure for Handling of Complaints, Grievances and Appeals Document No: 12 [Hyperlink](#)

## 6. DISCLAIMER

6.1 The self declaration of conformity is purely a declaration by the training provider based on self assessment and in no way implies that are RAV has endorsed/ recognized/accredited these courses.

6.2 The training providers under self declaration of conformity can make a claim limited to that they have self declared themselves to be compliant with the Basic Accreditation Standard of RAV.

6.3 The training providers in no way should claim that they are accredited by RAV.

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**RASHTRIYA AYURVEDA VIDYAPEETH**

**SELF-ASSESSMENT CHECK LIST-  
SELF DECLARATION OF  
CONFORMITY**



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## SELF-ASSESSMENT CHECK LIST- SELF DECLARATION OF CONFORMITY

The training providers who have implemented the Basic Accreditation Standards should indicate as “Yes” or “No” in relation to the Objective criteria of each chapter of the Basic Accreditation standards.

<b>CHAPTER 1- (VMO) VISION MISSION AND OBJECTIVES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
VMO.1	The Institution shall have a clearly defined and documented mission and vision.		
VMO.2.	The Institution shall have defined objectives and measure them periodically.		
VMO 3.	The Institution shall have mentioned activities that are taken to achieve these objectives.		
VMO 4.	The Institution shall define its Quality policy.		
VMO 5.	The Institution shall have a policy for evaluation of human resources engaged in training.		
VMO.6.	The Institution shall have policy for evaluation of the students		
<b>CHAPTER 2(OGA) ORGANIZATION, GOVERNANCE AND ADMINISTRATION</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
OGA.1.	The Institution shall declare its ownership and legal status and details of ownership		
OGA.2.	The institution shall define its organizational structure or organogram.		
OGA.3.	The Institution shall define the roles and responsibilities of all personnel's.		
OGA.4.	The Institution shall define rules applicable to all personnel's.		
OGA 5.	The Institution shall have a policy and procedure for outsourcing, if any. The policy shall ensure that the outsourced entity complies with applicable parts of the standards and part of the assessment the accredited training providers must witness the delivery of the outsourced entity at least once annually.		

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<b>CHAPTER 3- (FA) FINANCIAL RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
FA.1.	The Institution shall have suitable mechanism to monitor its financial resources.		
<b>CHAPTER 4- (HR) HUMAN RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
HR.1.	The Institution shall have sufficient resources to operate the training program.		
HR.2.	The Institution shall have standard operating procedure for engaging personnel.		
HR.3.	The Institution shall have a mechanism to identify training needs of its personnel. The feedback of the training is to be collected, analyzed and used for improvement.		
HR.4.	The organization shall have appraisal system for its personnel.		
HR.5.	The organization shall follow a grievance handling mechanism.		
HR.6.	The Institution shall adopt measures to prevent the spread of infectious diseases.		
HR.7.	The Institution shall have a record of the personnel details like name, age, sex, qualification, designation experience, training etc.		
<b>CHAPTER 5- (IR) INFRASTRUCTURE RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
IR.1.	The Institution shall determine and provide infrastructure needed to operate training courses.		
IR.2.	The Institution shall organize for periodic maintenance of infrastructure.		
IR.3.	The Institution shall ensure for periodic calibration of equipment's, if required.		
<b>CHAPTER 6- (SS) STUDENT SERVICES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
SS.1.	The Institution shall define the eligibility requirements for each training course, including prior knowledge needed, if any and make it publically available without		

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	request.		
SS.2.	The Institution shall have the code of conduct for trainees and shall have a system for addressing any breach of code of conduct.		
SS3.	The institution shall have a system to address any issues related to the trainees.		
<b>CHAPTER 7- (CC) COURSE CURRICULUM</b>			
Sl. No	Objective criteria	Yes/ No	Cross reference to supporting evidence provided
CC.1.	The Institution shall identify the courses it wishes to operate, including courses developed by others.		
CC.2.	The institution shall have procedure to decide on course content, duration, eligibility etc. for each course that it operates, unless these are decided by an external course provider.		
CC.3.	The Institution shall define the competence of those who develop the courses and if needed take external help to develop courses.		
CC.4.	The Institution shall define its mode of delivery of training (physical or distance or online or any other mode or a combination of any modes).		
CC.5.	The Institution shall define the learning outcome of its training courses.		
CC.6.	The Institution shall ensure the course are delivered as designed.		
<b>CHAPTER 8- (EA) EVALUATION AND ASSESSMENT</b>			
Sl. No	Objective criteria	Yes/ No	Cross reference to supporting evidence provided
EA.1.	The Institution shall have evaluation at the end of training/year for each course.		
EA.2.	The Institution shall define the criteria of evaluation for each training course.		
EA.3.	The Institution shall define the process of evaluation for each training course.		
EA.4.	The Institution shall define if the student is not successful in evaluation and if student can appear again without training if yes, how many times.		
EA.5.	The Institution defines conditions under which, students may required to repeat the training, to be reevaluated.		
EA.6.	The Institution shall have an independent process for appeal against the decision on evaluation.		

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<b>CHAPTER 9- (LR)- LEARNING RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
LR.1.	The Institution shall provide information on learning resources for self-learning.		
LR.2.	The Institution shall encourage research, publication, article writing or dissertation work.		
<b>CHAPTER 10- (QI)- QUALITY IMPROVEMENT</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
QI.1.	The Institution shall establish a monitoring system for quality improvement.		
QI.2.	The Institution shall define its quality indicators/ learning outcome indicators to promote quality in training.		
QI.3.	The Institution shall collect feedback from each student, stakeholders and analyze it. for improvement of quality.		
QI.4.	The institution shall have a system of internal audit annually and address the findings for improvement.		

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **DISCLAIMER**

1. The self declaration of conformity is purely a declaration by the training provider based on self assessment and in no way implies that RAV has endorsed/ recognized/accredited these courses.
2. The training providers under self declaration of conformity can make a claim limited to that they have self declared themselves to be compliant with the Basic Accreditation Standard of RAV.
3. The training providers in no way should claim that they are accredited by RAV

## **SELF DECLARATION**

I as the head of the Organization hereby declare that to the best of knowledge that the information provided above is correct, complete and updated. Any false information if provided will lead to delisting of the training provider under self-declaration of conformity.

**Name of the Head of the Institution:**

**Designation of the Head of the Institution:**

**Signature of the Head of the Institution:**

**Date**

**Time:**

**Place:**

-----End of the document-----



**RASHTRIYA AYURVEDA VIDYAPEETH**

**PROFORMA FOR LIST OF  
TRAINING PROVIDERS BASED ON  
SELF DECLARATION OF  
CONFORMITY**



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## PROFORMA FOR LISTING OF TRAINING PROVIDERS BASED ON SELF DECLARATION OF CONFORMITY

Sl. No	Name	Address	City	State/ Province	Country	Name of the Course (Separate entry for each)	Duration of the Course (Separate entry for each)	Eligibility prescribed, if any	Mode of Course (Physical or distance or online or any other mode or a combination of any modes)	Contact details (Name of the person, Tel no)	Email	Website	Date of uploading declaration	Valid from	Valid upto
1															
2															

### DISCLAIMER

1. The self declaration of conformity is purely a declaration by the training provider based on self assessment and in no way implies that are RAV has endorsed/ recognized/accredited these courses.
2. The training providers under self declaration of conformity can make a claim limited to that they have self declared themselves to be compliant with the Basic Accreditation Standard of RAV.
3. The training providers in no way should claim that they are accredited by RAV

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**RASHTRIYA AYURVEDA VIDYAPEETH**

**ASSESSMENT PROCESS FOR BASIC  
ACCREDITATION STANDARD FOR  
AYURVEDA TRAINING COURSES**



2021

# **RASHTRIYA AYURVEDA VIDYAPEETH**

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# RASHTRIYA AYURVEDA VIDYAPEETH

## 0. OBJECTIVE

The objective is to describe the assessment process for the training providers opting for the accreditation of their courses under the Basic Accreditation Standard developed by RAV.

## 1. SCOPE

The document covers the assessment process for the training providers of the training courses operated by them for verifying compliance as per the Basic Accreditation Standard revised from time to time. For Basic Accreditation Standard Document No: 9 [Hyperlink](#)

## 2. AUTHORITY

The Quality Enhancement Scheme owner i.e. RAV shall have the complete authority for accepting / rejecting the application of the training providers at any stage of the process.

## 3. PROCESS

### Initial assessment

#### 3.1 Document Review (DR)

**3.1.1** On receiving the application, self-assessment through the prescribed check list duly completed, supporting documents related to the Basic Accreditation Standard and training material (curriculum) from the applicant training provider, RAV shall designate a team for document review. The designated team shall examine the curriculum is related to Ayurveda and sufficiency of the course content provided by the training provider. After the review of the above by the team, the written comments, if any, shall be forwarded to the Training Provider for addressing these.

**3.1.2** If curriculum is related to Ayurveda and sufficient; the team further reviews the self assessment check list and supporting documents, to assess conformity of documented system to the Basic Accreditation Standard, as revised from time to time, and provides its written comments, if any, to the training provider for addressing them.

**3.1.3** If the document is largely satisfactory, based on the recommendation of the team, RAV shall proceed to onsite assessment.

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## **Onsite assessment**

### **3.2 Office Assessment (OA)**

**3.2.1** On the completion of the DR, RAV shall inform the Training provider about the OA schedule to verify evidence of compliance to the documented system. The RAV shall nominate a team to conduct the OA through virtual platform or onsite or hybrid mode as suitable.

**3.2.2** If the training provider is having multiple branches from where the same/different training courses are delivered, the OA will be carried out at a sampling of the locations based on the key activities performed in any of the branch and using risk based approach. In case outsourcing is resorted to, RAV may assess outsourced entity depending on activities outsourced.

**3.2.3** The assessment programme and any changes to it shall be shared with the training provider well in advance.

### **3.3 Witness Assessment (WA)**

**3.3.1** Following DR and OA, RAV shall undertake witness assessment of the actual training being delivered either completely or partially either using virtual or onsite or hybrid assessment techniques.

**3.3.2** RAV shall designate a suitable team for the purpose.

**3.3.3** RAV reserves the right to seek witness of a specific trainer or training course.

**3.3.4** Each course shall be evaluated/witnessed unless it can be established that the competence of faculty for delivering one course covers the competence for delivery of any or some other courses.

**3.3.5** Minimum of one witness is to be done for grant of accreditation; for other courses applied for the accreditation can be granted based on competence established in office assessment subject to condition that the first course conducted shall be offered for witnessing.

**3.3.6** Depending on the duration of the course, the designated team of RAV shall witness the course for minimum of 1 man day to maximum of 5 man days.

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**3.3.7** The training providers shall pay the fees in advance to the RAV before each assessment.

## **3.4 Grant of accreditation**

**3.4.1** Based on reports of DR/OA/WA(s), the team leader shall prepare a consolidated report for consideration for grant of accreditation.

**3.4.2** The final report shall be reviewed and considered for grant of accreditation by RAV.

**3.4.3** The Basic Accreditation shall be granted for a period of 3 years to a training provider for specific training courses, subject to conduct of the surveillance assessments and continued compliance to the accreditation requirements.

## **3.5 Surveillance Assessment**

**3.5.1** The training providers shall undergo surveillance assessment each year.

**3.5.2** RAV shall witness at least one course for minimum of 1 man day to a maximum of 5 man days depending on the number of courses and spread of courses covered in the scope of accreditation.

**3.5.3** In case of any complaints or feedback against the delivery of courses, a short notice assessment may be planned by RAV.

**3.5.4** RAV reserves the right to carry out risk based assessment at any point of time.

**3.5.5** Surprise assessment may also be conducted at the office of the training provider.

**3.5.6** The cost of all assessments shall be borne by the training providers.

## **3.6 Findings of the assessment**

**3.6.1** The team may classify its findings as

- a) Non Conformities (NCs)
- b) Concerns
- c) Opportunity for improvement (OFI).

**3.6.2** The Training provider shall be informed about the non-conformities and concerns at the end of the assessment and has to respond satisfactorily before accreditation can be considered.



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**3.6.3** The training provider shall submit the root cause analysis and proposed correction/corrective action for the non-conformities and address the concerns to the assessment team within 30 days.

**3.6.4** On the acceptance of the corrective actions, the training providers shall provide the evidence of their implementation within next 15 days.

**3.6.5** If required an additional or partial assessment can be planned for verification of corrective actions by RAV.

**3.6.6** The findings of the assessment as above apply to all assessments.

## **4. EXTENSION OF SCOPE**

a. Any Training provider whose courses are accredited can also apply for extension of the scope to cover additional courses (if any) by a written request to RAV and by paying scope extension fees as prescribed from time to time.

b. The training provider has to undergo the process described at 3.1.1 for extension of scope. RAV shall have the discretion to decide the need for further assessment depending upon the competence needed to deliver the course.

## **5. SUSPENSION OR CANCELLATION OF ACCREDITATION.**

**5.1** RAV may suspend or withdraw the accreditation of one or some or all courses of any Training provider because of any of the following reasons.

- a) Non-compliance or violation of the Scheme criteria & any other requirement/s.
- b) Providing wrong or insufficient or misleading information.
- c) Improper claim / misuse of accreditation or Accreditation Logo
- d) Changes in the Certificate format without approval of RAV
- e) Unable to apply for next level.
- f) Any other conduct deemed inappropriate by RAV
- g) Non payment of fees

**5.2** The Training provider shall be served a show cause notice giving 15 days time to respond. The training providers shall be provided with a hearing (in person or virtual as agreed upon) before a decision is made.

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## 9. EXPIRY OF ACCREDITATION

6.1 The basic accreditation expires automatically at the end of the expiry of three years from the date of issue or due to inability to progress to the next stage of Accreditation.

## 10. APPEALS

7.1 Any training provider aggrieved by the decision of RAV may appeal within 30 days of the decision.

7.2 The details of the appeals procedure are provided in the Appeals document. Procedure for Handling of Complaints, Grievances and Appeals Document No: 12 [Hyperlink](#)

### SCHEDULE OF FEES

Application fees:	Rs.....
Annual fees:	Rs.....
Extension of scope fees:	Rs.....
Manday fee	

Note: The fees could be market driven

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# RASHTRIYA AYURVEDA VIDYAPEETH

## APPLICATION FORM FOR BASIC ACCREDITATION STANDARD



2021

# **RASHTRIYA AYURVEDA VIDYAPEETH**

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# RASHTRIYA AYURVEDA VIDYAPEETH

## APPLICATION FORM- SEPARATE FOR EACH COURSE

<b>INSTITUTION ON DETAILS</b>	<b>NAME OF THE INSTITUTION</b> <b>ADDRESS:</b>  City/Province State: Country: Pin code: Website (If present): <b>OWNERSHIP</b> <b>YEAR OF ESTABLISHMENT:</b>
<b>CONTACT DETAILS</b>	<b>Name of the Senior Manager</b> Designation: Tel No: Mobile Number: Email:  <b>Name of Course Coordinator:</b> Designation: Tel No: Mobile Number: Email:
<b>NAME OF THE COURSE</b>	
<b>DURATION OF THE COURSE</b>	
<b>ELIGIBILI TY PRESCRIB ED, IF ANY</b>	
<b>MODE OF COURSE (PHYSICA L OR DISTANCE OR ONLINE OR ANY OTHER MODE OR A COMBINA TION OF ANY</b>	

# RASHTRIYA AYURVEDA VIDYAPEETH

<b>MODES)</b>										
<b>STAFF INFORMATION</b>	<b>Group</b>		<b>Sl. No</b>	<b>Name</b>	<b>Age</b>	<b>Sex</b>	<b>Qualification</b>	<b>Experience</b>		
	Managerial		1							
			2							
			3							
	Trainers-Full Time		1							
			2							
			3							
	Trainers – Part time		1							
			2							
			3							
Support Staff (Only Number)										
<p><b>Note: There are three Sl. No provided under each sub heading. The institution can add more numbers according to the institution staff.</b>  <b>Support staff includes maintenance , clinical, security etc.</b></p>										
<b>PAYMENT DETAILS:</b>	<b>Sl. No</b>	<b>Payment (Application fees)</b>	<b>Payment (Annual Fees)</b>	<b>Payment (Extension of Scope)</b>	<b>Amount</b>	<b>Transaction details</b>	<b>Payment Mode</b>	<b>Date</b>	<b>Status of Payment</b>	<b>Attachments</b>
<b>APPLICATION COMPLETION DATE:</b>										

# **RASHTRIYA AYURVEDA VIDYAPEETH**

**DECLARATION** : I as the head of the Organization hereby declare that to the best of knowledge that the information provided above is correct, complete and updated and I hereby agree to abide by the terms and conditions of Accreditation prescribed by Rashtriya Ayurveda Vidyapeeth (RAV)

**NAME OF THE HEAD OF THE INSTITUTION:**

**DESIGNATION OF THE HEAD OF THE INSTITUTION:**

**SIGNATURE OF THE HEAD OF THE INSTITUTION:**

**DATE|**

**TIME:**

**PLACE:**

-----End of the document-----

# RASHTRIYA AYURVEDA VIDYAPEETH

## BASIC ACCREDITATION STANDARD



2021



# **RASHTRIYA AYURVEDA VIDYAPEETH**

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# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **INTRODUCTION**

Ayurveda in recent years has gained importance not only in India but worldwide because of its monumental healing effects. Ayurveda a science, with its unique perpetual principles, is now even studied worldwide. There are various educational courses which are running worldwide at various levels, but a standard and uniformity in these courses are lacking. The courses need a basic quality of education, competence and credibility worldwide.

Rashtriya Ayurveda Vidyapeeth (RAV) as an Institution under the guidance of Ministry of AYUSH, Govt. of India has framed the accreditation process and basic course protocol for various courses held in various disciplines globally and are not covered under IMCC Act, 1970. The accreditation process involves careful assessment of these courses at Institution and education level. The accreditation process will give creditability to these courses and acceptance worldwide.

The Accreditation Standards developed for various courses are basically divided into 10 main chapters. Consisting of 42 objective elements which focus on quality of education and minimum standards, which are required to accredit these courses. Considering these points, chapters of the Accreditation Standards are divided into main sub-types. The first 5 chapters are being Institution focused and last 5 chapters are being education focused.

The chapters are as follows:

Chapter 1-(VMO) Vision, Mission and Objectives

Chapter 2- (OGA) Organization, Governance and Administration

Chapter 3- (FR) Financial Resources

Chapter 4- (HR) Human Resources

Chapter 5- (IR) –Infrastructure Resources

Chapter 6- (SS) Student Services

Chapter 7- (CC) Course Curriculum

Chapter 8- (EA) Evaluation and Assessment

Chapter 9- (LR)-Learning Resources

Chapter 10 – (QI) Quality Improvement

## **CHAPTER 1- (VMO) VISION MISSION AND OBJECTIVES**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **Aim of the chapter**

The Chapter focuses on the **Vision, Mission and Objectives** of the Organization. It helps to understand the short term and long term courses. It provides vision as well as motives of the organization in a better way. Achievements and accolades that the students bring to an organization depict the strong commitment of the Institutions towards the mission. This is an amalgamation of continuous and systematic evaluation and implementation of needs required to improve the quality of their educational programs and services.

**VMO.1- The Institution shall have a clearly defined and documented mission and vision.**

**VMO.2. The Institution shall have defined objectives and measure them periodically.**

**VMO 3. The Institution shall have mentioned activities that are taken to achieve these objectives.**

**VMO 4. The Institution shall define its Quality policy.**

**VMO 5. The Institution shall have a policy for evaluation of human resources engaged in training.**

**VMO.6. The Institution shall have policy for evaluation of the students**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 2(OGA) ORGANIZATION, GOVERNANCE AND ADMINISTRATION**

### **Aim of the chapter**

The chapter focuses on knowing the organizational ownership. It is important to have standards of education provided through a legal organization. The governance pattern helps the student to know who he/she has to approach in case of emergency or problems. It also provides directions for the smooth running of the Institution.

**OGA.1. The Institution shall declare its ownership and legal status and details of ownership**

**OGA.2 The institution shall define its organizational structure or organogram.**

**OGA.3. The Institution shall define the roles and responsibilities of all personnel's.**

**OGA.4. The Institution shall define rules applicable to all personnel's.**

**OGA 5 The Institution shall have a policy and procedure for outsourcing, if any. The policy shall ensure that the outsourced entity complies with applicable parts of the standards and part of the assessment the accredited training providers must witness the delivery of the outsourced entity at least once annually.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 3- (FA) FINANCIAL RESOURCES**

### **Aim of the chapter**

The chapter focuses on financial resources, by the organization requires running a particular course.

**FR.1 The Institution shall have suitable mechanism to monitor its financial resources.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 4- (HR) HUMAN RESOURCES**

### **Aim of the chapter**

The chapter focuses on human resources which the organization may have. The good human resources ensure the integrity and quality of its functions. The institution may use its human resources with financial and technical support to achieve its mission and improve academic quality as well as institutional effectiveness.

**HR.1. The Institution shall have sufficient resources to operate the training program.**

**HR.2. The Institution shall have standard operating procedure for engaging personnel.**

**HR.3. The Institution shall have a mechanism to identify training needs of its personnel. The feedback of the training is to be collected, analyzed and used for improvement.**

**HR.4. The organization shall have appraisal system for its personnel.**

**HR.5. The organization shall follow a grievance handling mechanism.**

**HR.6. The Institution shall adopt measures to prevent the spread of infectious diseases.**

**HR.7 The Institution shall have a record of the personnel details like name, age, sex, qualification, designation experience, training etc.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 5- (IR) INFRASTRUCTURE RESOURCES**

### **Aim of the chapter**

The chapter focuses on infrastructure resources by which the organization shall have for the proper and systematic functioning. These resources are important to have quality of education and proper learning.

**IR.1. The Institution shall determine and provide infrastructure needed to operate training courses.**

**IR.2. The Institution shall organize for periodic maintenance of infrastructure.**

**IR.3. The Institution shall ensure for periodic calibration of equipments, if required.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 6- (SS) STUDENT SERVICES**

### **Aim of the chapter**

The chapter focuses on the services that the student has to perform during the curriculum of his education. It should provide the quality education to the student. The services which, student is supposed to follow during the study course.

**SS.1-The Institution shall define the eligibility requirements for each training course, including prior knowledge needed, if any and make it publically available without request.**

**SS.2- The Institution shall have the code of conduct for trainees and shall have a system for addressing any breach of code of conduct.**

**SS3. The institution shall have a system to address any issues related to the trainees**

Note: Issues can be financial issues, health issues, family issues or personal issues.



# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 7- (CC) COURSE CURRICULUM**

### **Aim of the chapter**

The chapter focuses on the program of the study which student is to follow during the course of his/her study. The predefined standard curriculum provides uniformity to the course and quality of education.

**CC.1. The Institution shall identify the courses it wishes to operate, including courses developed by others.**

**CC.2- The institution shall have procedure to decide on course content, duration, eligibility etc. for each course that it operates, unless these are decided by an external course provider.**

**CC.3. The Institution shall define the competence of those who develop the courses and if needed take external help to develop courses.**

**CC.4 The Institution shall define its mode of delivery of training (physical or distance or online or any other mode or a combination of any modes).**

**CC.5 The Institution shall define the learning outcome of its training courses.**

**CC.6. The Institution shall ensure the course are delivered as designed.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 8- (EA) EVALUATION AND ASSESSMENT**

### **Aim of the chapter**

The chapter focuses on the standard evaluation and assessment of the student enrolled under the course. This chapter also includes the criteria of self evaluation by the Institution to promote quality of education, which is imparted by the Institute.

**EA.1. The Institution shall have evaluation at the end of training/year for each course.**

**EA.2. The Institution shall define the criteria of evaluation for each training course.**

**EA.3. The Institution shall define the process of evaluation for each training course.**

**EA.4. The Institution shall define if the student is not successful in evaluation and if student can appear again without training if yes, how many times.**

**EA.5 The Institution defines conditions under which, students may be required to repeat the training, to be reevaluated.**

**EA6. The Institution shall have an independent process for appeal against the decision on evaluation.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 9- (LR)- LEARNING RESOURCES**

### **Aim of the chapter**

The chapter focuses on various learning resources which the Institution shall have for running the courses at various levels. Resources of learning are very important for imparting knowledge and also for self learning for the students.

**LR.1. The Institution shall provide information on learning resources for self-learning.**

**LR.2. The Institution shall encourage research, publication, article writing or dissertation work.**

# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **CHAPTER 10- (QI)- QUALITY IMPROVEMENT**

### **Aim of the chapter**

The chapter focuses on various policies laid down by the Institution for promoting quality and to emphasize on Quality Improvement.

**QI.1. The Institution shall establish a monitoring system for quality improvement.**

**QI.2. The Institution shall define its quality indicators/ learning outcome indicators to promote quality in training.**

**QI.3 The Institution shall collect feedback from each student, stakeholders and analyze it. for improvement of quality.**

**QI.4 The institution shall have a system of internal audit annually and address the findings for improvement.**

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**RASHTRIYA AYURVEDA VIDYAPEETH**

**SELF-ASSESSMENT CHECK LIST-  
BASIC ACCREDITATION  
STANDARD**



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# **RASHTRIYA AYURVEDA VIDYAPEETH**

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# RASHTRIYA AYURVEDA VIDYAPEETH

## SELF ASSESSMENT CHECK LIST

The training providers who have implemented the Basic Accreditation Standards should indicate as “Yes” or “No” in relation to the Objective criteria of each chapter of the Basic Accreditation standards.

<b>CHAPTER 1- (VMO) VISION MISSION AND OBJECTIVES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
VMO.1	The Institution shall have a clearly defined and documented mission and vision.		
VMO.2.	The Institution shall have defined objectives and measure them periodically.		
VMO 3.	The Institution shall have mentioned activities that are taken to achieve these objectives.		
VMO 4.	The Institution shall define its Quality policy.		
VMO 5.	The Institution shall have a policy for evaluation of human resources engaged in training.		
VMO.6.	The Institution shall have policy for evaluation of the students		
<b>CHAPTER 2(OGA) ORGANIZATION, GOVERNANCE AND ADMINISTRATION</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
OGA.1.	The Institution shall declare its ownership and legal status and details of ownership		
OGA.2.	The institution shall define its organizational structure or organogram.		
OGA.3.	The Institution shall define the roles and responsibilities of all personnel's.		
OGA.4.	The Institution shall define rules applicable to all personnel's.		
OGA 5.	The Institution shall have a policy and procedure for outsourcing, if any. The policy shall ensure that the outsourced entity complies with applicable parts of the standards and part of the assessment the accredited training providers must witness the delivery of the outsourced entity at least once annually.		

# RASHTRIYA AYURVEDA VIDYAPEETH

<b>CHAPTER 3- (FA) FINANCIAL RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
FA.1.	The Institution shall have suitable mechanism to monitor its financial resources.		
<b>CHAPTER 4- (HR) HUMAN RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
HR.1.	The Institution shall have sufficient resources to operate the training program.		
HR.2.	The Institution shall have standard operating procedure for engaging personnel.		
HR.3.	The Institution shall have a mechanism to identify training needs of its personnel. The feedback of the training is to be collected, analyzed and used for improvement.		
HR.4.	The organization shall have appraisal system for its personnel.		
HR.5.	The organization shall follow a grievance handling mechanism.		
HR.6.	The Institution shall adopt measures to prevent the spread of infectious diseases.		
HR.7.	The Institution shall have a record of the personnel details like name, age, sex, qualification, designation experience, training etc.		
<b>CHAPTER 5- (IR) INFRASTRUCTURE RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
IR.1.	The Institution shall determine and provide infrastructure needed to operate training courses.		
IR.2.	The Institution shall organize for periodic maintenance of infrastructure.		
IR.3.	The Institution shall ensure for periodic calibration of equipment's, if required.		
<b>CHAPTER 6- (SS) STUDENT SERVICES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
SS.1.	The Institution shall define the eligibility requirements for each training course, including prior knowledge needed, if any and make it publically available without		



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	request.		
SS.2.	The Institution shall have the code of conduct for trainees and shall have a system for addressing any breach of code of conduct.		
SS3.	The institution shall have a system to address any issues related to the trainees.		
<b>CHAPTER 7- (CC) COURSE CURRICULUM</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
CC.1.	The Institution shall identify the courses it wishes to operate, including courses developed by others.		
CC.2.	The institution shall have procedure to decide on course content, duration, eligibility etc. for each course that it operates, unless these are decided by an external course provider.		
CC.3.	The Institution shall define the competence of those who develop the courses and if needed take external help to develop courses.		
CC.4.	The Institution shall define its mode of delivery of training (physical or distance or online or any other mode or a combination of any modes).		
CC.5.	The Institution shall define the learning outcome of its training courses.		
CC.6.	The Institution shall ensure the course are delivered as designed.		
<b>CHAPTER 8- (EA) EVALUATION AND ASSESSMENT</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
EA.1.	The Institution shall have evaluation at the end of training/year for each course.		
EA.2.	The Institution shall define the criteria of evaluation for each training course.		
EA.3.	The Institution shall define the process of evaluation for each training course.		
EA.4.	The Institution shall define if the student is not successful in evaluation and if student can appear again without training if yes, how many times.		
EA.5.	The Institution defines conditions under which, students may requiredto repeat the training, to be reevaluated.		
EA.6.	The Institution shall have an independent process for appeal against the decision on evaluation.		

# RASHTRIYA AYURVEDA VIDYAPEETH

<b>CHAPTER 9- (LR)- LEARNING RESOURCES</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
LR.1.	The Institution shall provide information on learning resources for self-learning.		
LR.2.	The Institution shall encourage research, publication, article writing or dissertation work.		
<b>CHAPTER 10- (QI)- QUALITY IMPROVEMENT</b>			
<b>Sl. No</b>	<b>Objective criteria</b>	<b>Yes/ No</b>	<b>Cross reference to supporting evidence provided</b>
QI.1.	The Institution shall establish a monitoring system for quality improvement.		
QI.2.	The Institution shall define its quality indicators/ learning outcome indicators to promote quality in training.		
QI.3.	The Institution shall collect feedback from each student, stakeholders and analyze it. for improvement of quality.		
QI.4.	The institution shall have a system of internal audit annually and address the findings for improvement.		

**DECLARATION** : I as the head of the Organization hereby declare that to the best of knowledge that the information provided above is correct, complete and updated and I hereby agree to abide by the terms and conditions of Accreditation prescribed by Rashtriya Ayurveda Vidyapeeth (RAV)

**NAME OF THE HEAD OF THE INSTITUTION:**

**DESIGNATION OF THE HEAD OF THE INSTITUTION:**

**SIGNATURE OF THE HEAD OF THE INSTITUTION:**

**DATE**

**TIME:**

**PLACE:**

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**POLICY AND GUIDELINES  
FOR  
USE OF RAV ACCREDITATION  
MARKS**



**2021**

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# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **1. Objective**

To define the policy and guidelines for the use of RAV Accreditation Mark by an accredited training provider.

## **2. Scope**

This policy and guidelines are applicable for the use of Accreditation Mark of RAV by an accredited training provider.

## **3. Responsibility**

Executive board is responsible to establish, implement, and amend this document. The accredited training providers are responsible to comply with the requirements of this document.

## **4. Policy and Guidelines**

**4.1** The accreditation Mark provided is for the use by accredited training provider. However, it remains the property of RAV.

**4.2** The use of this Mark by the training provider will be under the control of RAV. Compliance with the following guidelines is required when using the RAV accreditation mark.

4.2.1 The Mark shall be reproduced in the proportions and the colors indicated in the appendix 'A'. The Mark must remain in the same format. It may be printed as a colored image or in black and white as given at appendix 'A'. These are provided by RAV.

4.2.2 The Mark may be resized to suit the facility's needs but no amendments will be permitted to its design or the relationship of the items within the design.

4.2.3 The accredited training provider can only use the accreditation Mark for services training that are specifically included in the accreditation. The Mark may not be used by the facility to advertise any products and services of the facility or in connection with any commercial purpose other than the permitted uses without the prior written agreement of RAV, and must not be used to suggest any approval by or sponsorship of RAV of the facility, its activities, products or services other than those that have been assessed by RAV.

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- 4.2.4 The Mark shall not be used in any way that it misleads the reader about the accredited status of the training provider.
- 4.2.5 The Mark is not transferable and to be used only by the accredited training provider.
- 4.2.6 The accredited training provider upon suspension or withdrawal or expiry of its accreditation (however determined), shall discontinue use of RAV accreditation Mark.
- 4.3** RAV reserves the right to terminate use of the Mark by giving notice in writing if the facility breaches any of the above mentioned terms and shall take appropriate actions as per laid down policy of RAV. Kindly refer to RAV document ‘Policies and Procedure for Dealing with Adverse and Other Decision’.
- 4.4** These guidelines for printing the Mark apply for use on all print and electronic materials and promotional items such as facility’s letterhead, newsletters, brochures, annual reports, business cards, and advertising.
- 4.5** If any training provider is found using mark of sustained quality (either not entitled for or after the written intimation for not to use by RAV), financial and non- financial penalty may be imposed to training provider. Decision shall be taken on case to case basis by RAV.

# RASHTRIYA AYURVEDA VIDYAPEETH

## Appendix A



**PROCEDURE FOR HANDLING  
OF COMPLAINTS,  
GRIEVANCES AND APPEALS**



2021



# **RASHTRIYA AYURVEDA VIDYAPEETH**

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# RASHTRIYA AYURVEDA VIDYAPEETH

## 1. Definitions

For the purposes of this document, defined terms in the ISQua document ‘Guidelines and Standards for External Evaluation Organisations, Ed. 5 and ISO/IEC 17011 shall be used:

- **Complaint:** Expression of dissatisfaction, other than an appeal, by any person or organisation, against RAV or an accredited or applicant organisation.
- **Complainant:** Any individual/ organisation/ body that is making a complaint.
- **Grievance:** Expression of a real or imagined cause for complaint.
- **Appeal:** A formal written request by an accredited or applicant organisation for reconsideration of any adverse decision made by Rashtriya Ayurveda Vidyapeeth (RAV) related to the organisation’s accreditation status.
- **Appellant:** An accredited or applicant organisation filing an appeal.
- **Hearing:** The process where the Appeal Panel hears oral arguments on an appeal presented by an appellant.
- **Training providers:** Any entity providing Ayurveda training to trainers for which an accreditation programme is available with RAV.

## 2. Objectives

The document describes the procedures for dealing with:

- Complaints/ Grievances from various sources
- Appeals from training providers for reversal of decisions taken by RAV

## 3. Scope

The procedure described in this document is to be followed in RAV for dealing with different types of complaints/ grievances and appeals by training providers. Complaints may be related to ethical concerns linked to staff, assessors, committee members and clients. Appeal can be made by training providers against a decision taken by RAV in respect of refusal to accept an application; refusal to proceed with an assessment; action plan requests; changes in accreditation scope; denial of accreditation; putting in abeyance, suspension, withdrawal of accreditation or any other action that impedes the attainment of accreditation.

## 4. Responsibility

Responsibility of handling of complaints/ grievances and appeals rests on the Complaints and Appeals officer. However, the Executive board is responsible for monitoring of complaints/ grievances and appeals and final decision on closure of the complaint/ grievances and appeals.

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## 5. Procedure for Handling of Complaints and Grievances

### • Receipt of Complaints

- RAV is open to receiving complaints/ grievances from any sources. The complaints/ grievances can be against applicant/ accredited training provider or RAV itself for the quality of service provided by them. The complaint/ grievance can be against personnel involved in accreditation process. The complaint/ grievance must be made in writing to RAV with complete details of complainant (name, address, organisation etc.). If the complaint/ grievance has no details of the complainant or the description is not adequate, the RAV will reserve the right of dealing with the complaint/ grievance as deemed fit. We can investigate the reports appearing in media, if relevant.
- Once the complaint/ grievance is received at RAV, it shall mark the complaint/ grievance to the Complaints and Appeals Officer. Immediately on its receipt the same shall be acknowledged with the assurance of thorough investigation in a time bound period.
- The Complaints and Appeals officer shall maintain a record for the complaints/ grievance that are received by RAV. He/she assigns the appropriate registration number to the complaint. The important dates viz. date of receipt of complaint/ grievance, date of acknowledgement and date of disposal including date of final closure shall be recorded in 'Complaints Register'.
- Initial scrutiny of the complaint/ grievance is done by the Complaints and Appeals officer. This is to determine that the complaint/ grievance falls within the ambit of RAV activities and whether the complaint/ grievance prima facie holds ground.
- If it is found that the complaint/ grievance does not fall within the ambit of RAV, the complaint/ grievance is considered closed and the complainant is informed accordingly.
- If the complaint/ grievance falls within the ambit of RAV and the initial information provided in the complaint/ grievance is sufficient the complaint/ grievance is investigated further as deemed fit.
- The entire handling process of the complaint should respect and maintain confidentiality, avoid conflict of interest and maintain complete impartiality.

### • Investigation of Complaints/ Grievances

The Complaints/ Grievances received by RAV can be classified into three categories:

- Complaints/ Grievances against Applicant/ Accredited Training provider

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- Complaints/ Grievances against Assessors/Experts/ Committee members.
- Complaints/ Grievances against RAV officials

- **Procedure for dealing with each category is given below:**

- On receipt of complaint/ grievance, Complaints and Appeals officer shall discuss with the concerned officer dealing with that training provider and the case is investigated accordingly.
- If required, a hearing with the complainant or clarification from the concerned may be taken.
- The complainant shall be informed about the action taken by RAV.
- If the complaint/ grievance is found invalid, the complainant as well as the Training Provider or against whom the complaint is made, is informed accordingly.
- The complaint is disposed within a two month of its receipt.

## 6. Terms of Reference of Appeals Panel:

- **Structure of the Panel:**

- **Appeal Panel:** A panel composed of three individuals, independent experts not involved in the assessment or activity in question amounting to appeal and preferably knowledgeable in matters of accreditation, appointed by the RAV to deal with appeal(s) for a defined tenure as prescribed. One of the members of the appeal panel would be a Board member and shall chair the appeal panel. This panel may be augmented by additional subject matter experts as invitee as deemed appropriate by the RAV.
- The terms of the panel would be the time till the appeal in question is disposed of.

- **Function of the Panel**

The Appeal Panel will consider appeals against decisions made by the RAV and will deal with them appropriately to recommend decisions to resolve/ close the appeal.

- **Membership**

Appeals Panel members, including the Chair, must wholly satisfy these criteria.

- They must not have participated in or influenced the original Accreditation Committee that took the decision now subject to appeal.

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- They must be free from any conflict of interest concerning the appellant or matter under appeal.
- They must be conversant with the Accreditation Process and RAV functioning.
- Before progressing to consider any application for appeal, all members of the Panel must satisfy the above criteria and sign a disclaimer to officially record that they detected no conflict(s) of interest regarding the matters at hand. In the event of not sure of disclaimer such member may reclude himself/ herself from consideration of the particular appeal. Should they be unable to do so, the RAV must appoint a substitute member(s) with no such conflict(s) of interest.
- The appeals panel may co-opt expertise if the need arises. A cop-opted person will not have right to vote but will have the prerogative of recording his/her opinion in light off the reason for invite.
- Decisions are made on a majority voting basis.

## **• Receipt of Appeals**

- The appeal process is an independent review and evaluation of a decision made by RAV that affects the accreditation status of the Accredited Organisation or applicant.
- The appeals should be addressed to the RAV within 28 days of the decision.
- Appeals and Complaint Officer/RAV on reviewing the appeal shall look for completeness of the supporting documents and shall ask the appellant for requisite missing document, if any.
- When a decision on suspension has been made against which appeal is made by the Training providers, the decision shall be put on hold until the Appeal process is completed and a final decision has been rendered.
- RAVshall acknowledge the receipt of appeals from the Training Provider. A record pertaining to all appeals including important details like date of receipt, name and address of the training provider, details of appeals and outcome of appeals shall be maintained in the 'Appeals Register'.

## **• Deliberation of Appeal Panel and Recommendations**

- Appeal Panel may meet as and when needed.

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- After examination of the appeal, the Panel shall seek clarification/documents from all appropriate sources. The Panel, if finds necessary, can depute RAV official/ an assessor or an expert to investigate the matter.
- Appeals Panel may recommend a hearing with the appellant, if required.
- Any delay or lapse in submission of clarification or relevant documents or hearing process by the appellant, the responsibility/onus of delay will be considered on the appellant himself.
- The Appeals Panel may recommend an assessment by a new team.
- The detailed report containing the recommendation by the Panel shall be submitted to the Chairman for his decision within 45 days of having received the appeal.

## **• Decision on Appeal**

- RAV shall take a decision based on the recommendations submitted by the Appeal Panel within 15 days of having received the recommendations of the Panel.
- The decision of the RAV shall be final and Training provider shall be informed accordingly.

## **• Costs for the Appeal Process**

- If the resolution of appeal is done without undertaking any travel or additional assessment, no financing will be needed for such resolutions.
- If the resolution calls for undertaking travel and assessment, the cost will be borne by the defaulting party.

## **• Records**

Complaints and Appeals officer shall maintain Complaints and Appeals Register. The register has the following:

- The decision of the RAV shall be final and training provider shall be informed accordingly.
- Unique registration number given to each complaint/ appeal.
- Date of receipt of complaint/ appeal.
- Name & address of the complainant/ appellant.
- Date of acknowledging of the complaint/ appeal.
- Details of action/ investigation.
- Date of closure.

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The complaints & appeals register is maintained by Complaints and Appeals officer. All correspondence in respect to complaints/ appeals, investigation reports and decisions by RAV are filed in order.

-----End of the document-----

**RASHTRIYA AYURVEDA VIDYAPEETH**

**POLICIES AND PROCEDURES  
FOR DEALING WITH ADVERSE  
AND OTHER DECISIONS**



2021



# **RASHTRIYA AYURVEDA VIDYAPEETH**

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# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **1. Objective**

This document describes various policies and procedures of RAV as an Accreditation agency for dealing with adverse decisions against applicant and accredited Training Provider (TP)

## **2. Scope**

RAV Secretariat shall monitor the TP for compliance with the requirements applicable from time to time. The issues that fall under the scope of this document are related to situations wherein applicant or accredited TP has not complied with one or more terms and condition as well as any of the applicable requirement.

## **3. Policies and Procedures for Dealing with Adverse and Other Decisions Against TP**

RAV Secretariat shall monitor the TP of any information that casts doubt on the suitability of awarding or maintaining accreditation of TP. RAV may consider an appropriate action in each case, taking into account the objective evidence against and facts available and comparing them with the related clauses as mentioned in this document.

Various categories of decisions are as follows:

### **Adverse decisions against applicant TP**

- Inactive and Closed

### **Adverse decisions against accredited TP**

- Shifting of Renewal Date
- Expiry of Accreditation
- Abeyance
- Suspension
- Forced Withdrawal

### **Other decisions against accredited TP**

- Voluntary Withdrawal
- Extension of Validity of Accreditation Certificate

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## 4. Policy and Procedure for Dealing with Adverse Decisions Against Applicant TP

### 4.1 Inactive and Closed

- **Conditions:**

- When a TP has submitted incomplete application and has not submitted required information, application fee etc. within three months even after a reminder is sent.
- When TP has not undergone witness assessment within 1 year of application.
- When the assessment of the TP has been conducted and TP has not submitted action plan, if required for non-conformities within three months.
- When an applicant TP does not adhere to terms and conditions including misrepresentation of facts like use of RAV logo or accreditation mark.

- **Action by RAV**

- A communication will be sent by RAV to TP that it has been put under “Inactive” category and application will be closed. Against the name of the Training provider, “application closed” status shall appear under applicant category on RAV website. Fee paid once are non-refundable. In case the TP is replying it would be treated as a fresh applicant and has to pay all fees, as applicable at that time. A unique registration number will be provided.
- In relation to the condition mentioned above a warning letter shall be issued to comply to the requirement within 30 days failing which application will be closed.

## 5. Policy and Procedure for Dealing with Adverse Decisions Against Accredited training provider

### 5.1 Shifting of Renewal Date

- **Condition:**

- If a training provider has not applied 6 months prior to the expiry of accreditation and is unable to complete formalities for re-accreditation before the expiry of accreditation.

- **Action by RAV**

- The training provider will not remain in accredited category and cannot use RAV Accreditation Mark. If training provider continues to use the RAV accreditation mark and claim accreditation status, it will be debarred from RAV accreditation process for six months. Training provider will be treated as a

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forced withdrawal case. There will be no provision for appeal in this case. Training provider has to apply afresh and it is treated as a new training provider and has to pay all fees, as applicable at that time. A unique registration number will be provided.

- Accreditation status will be granted when the training provider undergoes the re-assessment; is able to complete the corrective actions on the non-conformances after Re-assessment and the Accreditation Committee recommends renewal of accreditation. The renewal date of Accreditation certificate, in case it is after the expiry of accreditation certificate, shall be the date on which the approving authority approves it. The certificate shall be valid for a period of three years.

## 5.2 Expiry of Accreditation

- **Condition:**

- When the training provider has not submitted the application for renewal before expiry of accreditation.

- **Action by RAV**

- When the training provider has not submitted the application for reassessment, RAV shall inform the training provider at least one month before expiry of accreditation. The TP shall not claim accreditation status after expiry of accreditation.
- Training provider shall not use RAV Accreditation Mark in letterheads, publicity matters, other documents etc. once the accreditation cycle is over.
- After the date of expiry of accreditation, RAV website will be updated to show the expired status.
- The Training provider shall have to apply afresh depositing application fees and other outstanding charges and undergo fresh assessment, as a new applicant Training provider.
- The unique Registration number will remain same, for the purpose of identification and tracking of earlier records.
- The Training provider will have a new certificate date, if successfully get accredited.
- The status shall be published on RAV website, thereafter.

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- If Training provider continues to use the RAV accreditation mark and claim accreditation status, it will be debarred from RAV accreditation process for one year. Training provider will be treated as a forced withdrawal case. There will be no provision for appeal in this case. Training provider has to apply afresh and it is treated as a new Training provider and has to pay all fees, as applicable at that time. However, unique registration number will remain same.

## 5.3 Abeyance

### • Conditions:

- When a Training provider had undergone a Surveillance or Re-assessment visit and has not submitted a valid action plan to RAV within one month of Surveillance/ Re-assessment visit.
- When an Training provider has not paid the Accreditation fees and the accreditation expenses, beyond three months of the due date.
- When an Training provider does not appropriately respond to the queries as desired by RAV, even after two reminders.
- When a total system failure or gross negligence in technical aspects is identified at the time of Surveillance or Re-assessment visit.
- If the Training provider is not maintaining the terms and conditions of accreditation or has breached the provision of the standard agreement between Training provider and RAV.
- When the Training provider fails to submit corrective actions as per accepted and committed action plan for addressing the non-compliances.

### • Action by RAV

- The Training provider is notified in writing about its change in accreditation status as abeyance.
- The abeyance status is given to an Training provider for no longer than three months.
- The Training provider in abeyance status is not published, however if inquires are made the Training provider is referred to as under abeyance and working towards restoration of accredited status.
- To regain accreditation status, the Training provider in abeyance status must inform to RAV of its desire and lift the conditions for which it was put into abeyance (agree to undergo verification assessment, paying the assessment

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charges and other outstanding payments etc.). Abeyance status will continue till verification assessment is completed and a decision is taken. Restoration of accredited status must happen before three months from the date Training provider has been put under abeyance.

- After verification assessment, assessment report to be placed to accreditation committee for further recommendation.
- The certificate date remains unchanged, after accreditation is restored.
- If the Training provider does not proceed further or respond or inform RAV about its inability to undergo verification assessment and restore accredited status within three months of the abeyance status, action shall be initiated to suspend the accreditation of the Training provider.
- In case of total system failure and gross negligence in technical aspects, observed during surveillance or re-assessment, RAV will immediately put the Training provider under 'Abeyance' category and instruct the Training provider to stop claiming accreditation status. (If this is applicable, report may be directly placed to Executive Board for further action).

## 5.4 Suspension

### • Conditions:

- When an Training provider continues to be in 'Abeyance' status for three months.
- When an Training provider violates the standard agreement conditions of maintaining accreditation such as, but not limited to:
  - non co-operation with RAV
  - refusal to allow examination of documents & records
  - denial of access to RAV & its assessor to its services.
  - wrong representation of scope of accreditation
  - misuse of accreditation mark
  - misleading reporting of facts
  - brings RAV into disrepute in any manner
  - result of complaint analysis or any other information, which indicates that the Training provider no longer complies with requirements of RAV.

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- **Action by RAV**

- The Training provider is informed in writing, about the concerns and asked to reply with evidences.
- After 30 days, of the above information if issues are not resolved, a suspension letter is issued.
- The suspension status of Training provider is published.
- An Training provider can remain in suspension status for a maximum period of three months.
- If the Training provider does not respond to the suspension letter or refuses to meet the conditions to lift the suspension, 'Forced Withdrawal' action is initiated.
- If Training provider continues to use the RAV accreditation mark and claim accreditation status, it will be debarred from RAV accreditation process for minimum one year. Training provider will be treated as a forced withdrawal case. There will be no provision for appeal in this case. After 1 year training provider has to apply afresh and it is treated as a new Training provider and has to pay all fees, as applicable at that time. A unique registration number will be provided.
- To regain accreditation status, the Training provider in suspension status must inform to RAV of its desire and agree to undergo verification assessment, paying the assessment charges and other outstanding payments. Suspension status will continue till verification assessment is completed and a decision is taken. Restoration of accredited status must happen before three months from the date Training provider has been put under suspension.
- After verification assessment, assessment report to be placed to accreditation committee or further recommendation.
- The Training provider, during the period of suspension cannot use RAV accreditation mark and claim accreditation.
- RAV website will announce the suspension of accreditation.

## 5.5 Forced Withdrawal

- **Condition**

- When an Training provider remains in 'Suspended status' for three months and have not met the condition for lifting the suspension even after three months.

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- **Action by RAV**

- The Training provider is notified in writing.
- RAV website will announce the withdrawal status of accreditation.
- RAV shall inform to the relevant competent authorities about the status of Training provider.
- In case the Training provider has been withdrawn from the accreditation programme it is debarred to participate in the accreditation programme for at least one year. After the period of 1 year the Training provider can be re-enrolled in the programme by applying as a new Training provider and paying full fees and assessment charges, applicable at time.
- After the Training provider accreditation status is withdrawn, the Training provider shall not use accreditation mark or claim accreditation.
- If Training provider continues to claim accredited status or uses RAV mark, financial and non-financial penalty may be imposed to Training provider. Decision shall be taken on case to case basis by the Board.

## **6. Policy and Procedure for Dealing with Other Decisions Against Accredited Training provider**

### **6.1 Voluntary Withdrawal**

- **Condition:**

- When an Training provider does not wish to continue their accreditation and voluntarily request in writing that their accreditation be terminated.

- **Action by RAV**

- RAV will accept the same and maintain the record under 'Voluntary Withdrawal Category'.
- A communication is sent to the Training provider that it has been put under Voluntary Withdrawal category.
- The Voluntary withdrawal status is published on RAV website.
- If an Training provider decides to regain the accreditation status, after it has sought voluntary withdrawal, it is treated as a new Training provider and has to pay all fees, as applicable at that time. A unique registration number will be provided.
- A new certificate with current date and number is issued based on fresh assessment.



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- Between voluntary withdrawal and fresh accreditation if any, Training provider cannot claim accredited status or use RAV accreditation mark. If Training provider continues to claim accredited status or uses RAV mark, financial and non-financial penalty may be imposed to Training provider. Decision shall be taken on case to case basis by Board.

## 6.2 Extension of Validity of Accreditation Certificate

- **Conditions:**

If an Training provider has applied for renewal of accreditation six months before expiry of accreditation, extension of validity of accreditation may be granted for any of the following reasons:

- Where re-assessment has been completed, but the decision could not be taken for a reason beyond the control of RAV.
- Where there is delay in conducting re-assessment for reasons beyond the control of RAV.

- **Action by RAV**

- An extension to accreditation validity period is granted to the Training provider and a letter is sent allowing the Training provider to claim RAV Accreditation status and use of RAV Accreditation Mark till a final decision on renewal of accreditation is taken. In the event of accreditation to the Training provider is not renewed, the Training provider shall be informed, immediately, to stop claiming RAV accreditation status & use of RAV Accreditation Mark. The website will also be updated to show the expired status.

**Note:** Whenever an adverse decision is likely to be taken on an Training provider, the communication may be made verbally by RAV to training provider, explaining them the consequences and then follow it up with a letter.

The final letter of adverse decision shall be sent by Executive Board.

-----End of the document-----

**RASHTRIYA AYURVEDA VIDYAPEETH**

**SYSTEM FOR PROVISIONAL  
APPROVAL OF AUDIT &  
CERTIFICATION BODIES**



**2021**

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# **RASHTRIYA AYURVEDA VIDYAPEETH**

## **0. INTRODUCTION**

**0.1** The Rashtriya Ayurveda Vidyapeeth (RAV) Quality Enhancement Initiative for Ayurveda Training Courses, hereinafter referred to as the Scheme, envisages that independent, competent Audit & Certification Bodies (ACBs) shall ultimately evaluate and issue certificate of compliance against the accreditation standards set under the Scheme based on which RAV will grant accreditation for the training courses.

**0.2** The ACBs, in order to operate under the Scheme, shall need to primarily comply with the requirements specified in ISO/IEC 17065:2012 and the additional requirements prescribed by RAV.

**0.3** The ACBs would not get an applicant and would not be able to offer their process for witnessing as part of the accreditation process to the accreditation body to get accreditation or to get the relevant scope added in their accreditation if already accredited unless they are approved under the Scheme.

**0.4** Further, to launch the Scheme, it is necessary that some ACBs are available at the beginning.

**0.5** Therefore, it is necessary to establish a procedure for provisional approval of ACBs under the Scheme till such time they can get the scope added in their accreditation or get formally accredited from the National Accreditation Board for Certification Bodies (NABCB) or any other agency recognized by RAV as per ISO/IEC 17065:2012 and get approved by RAV.

**0.6** This document sets out the requirements to be fulfilled by ACBs desirous of operating under the Scheme pending formal accreditation and approval.

## **1. SCOPE**

**1.1** This document defines the criteria and process for ACBs to obtain provisional approval to operate under the RAV Accreditation Scheme, pending formal accreditation for the Scheme by NABCB or any other agency recognized by RAV as per the prescribed international standard(s) and approval by RAV.

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**1.2** This approval shall be valid for 2 years within which the approved ACBs would have to obtain formal accreditation from NABCB or any other agency recognized by RAV and approval of RAV.

## **2. CRITERIA FOR APPROVAL**

The ACBs desirous of certifying ayurvedic courses under this Scheme shall meet the criteria as prescribed in clauses 3 and 4 of this document.

## **3. ADMINISTRATIVE REQUIREMENTS**

**3.1 Legal entity:** The ACB shall be a legal entity in the economy in which it is located, or shall be a defined part of a legal entity, such that it can be held legally responsible for all its assessment and certification activities. A governmental certification body is deemed to be a legal entity based on its governmental status. An ACB, that is part of an organization involved in functions other than certification, shall be separate and identifiable within that organization.

**3.2 Organizational structure:** The ACB shall define and document the duties, responsibilities and reporting structure of its personnel and any committee(s) and its place within the organization. When the ACB is a defined part of a legal entity, the documentation of the organizational structure shall include the line of authority and the relationship with other parts within the same legal entity.

**3.3 Integrity:** The ACB and its personnel shall maintain integrity at all times. The ACB shall implement adequate measures to ensure integrity.

### **3.4 Impartiality:**

**3.4.1** The ACB shall be impartial.

**3.4.2** The ACB shall be so structured and managed as to safeguard impartiality.

**3.4.3** The ACB and its staff shall not engage in any activities that may conflict with its impartiality.

**3.4.4** The ACB shall act impartially in relation to its applicants, candidates and certified GCP professionals.

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**3.4.5** The ACB shall have a process to identify, analyze, evaluate, monitor and document the threats to impartiality arising from its activities including any conflicts arising from its relationships on an ongoing basis.

a) This shall include those threats that may arise from its activities or its relationships or the relationships of its personnel. Where there are any threats to impartiality, the ACB shall document and demonstrate how it eliminates or minimizes such threats and document any residual risk. The demonstration shall cover all potential threats that are identified, whether they arise from within the ACB or from the activities of other persons, bodies or organizations.

b) Top management of the ACB shall review any residual risk to determine if it is within the level of acceptable risk. When a relationship poses an unacceptable threat to impartiality, then certification shall not be provided.

c) The risk assessment process shall include identification of and consultation with appropriate interested parties to advice on matters affecting impartiality including openness and public perception.

**NOTE 1** Sources of threats to the impartiality of the ACB can be based on ownership, governance, management, personnel, shared resources, finances, contracts, training, marketing and payment of a sales commission or other inducement for the referral of new clients, etc.

**NOTE 2** One way of fulfilling the consultation with the interested parties is by the use of an impartiality committee set up by the ACB.

**3.4.6** The ACB shall not impart education and/or training on ayurveda within the same legal entity.

**3.4.7** The ACB shall have a process to eliminate or minimize risk to impartiality if training/education in Ayurveda is carried out in a related body which is linked to the ACB by common ownership etc.

**3.4.8** The ACB shall have a process to ensure that the assessors are free of any conflict of interest with the training providers assessed by being a teacher or trainer in the recent past. A separation of minimum 2 years is considered acceptable for the purpose.

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**3.5 Confidentiality:** The ACB shall ensure the confidentiality of information obtained in the course of its certification activities by having a suitable system. Information gathered would not be used for any commercial or other purposes other than that to support certification of candidates.

## **3.7 Liability and financing :**

**3.7.1** The ACB shall be able to demonstrate that it has evaluated the risks arising from its assessment and certification activities and that it has adequate arrangements (e.g. insurance or reserves) to cover liabilities arising from its operations in each of its fields of activities and the geographic areas in which it operates.

**3.7.2** The ACB shall evaluate its finances and sources of income and demonstrate that initially, and on an ongoing basis, commercial, financial or other pressures do not compromise its impartiality.

## **4. TECHNICAL REQUIREMENTS**

### **4.1 Personnel :**

**4.1.1** The ACB shall have, as part of its organization, personnel, either employed or on contract, having sufficient competence for managing the process of assessment and certification of Ayurveda training providers.

**4.1.2** The ACB shall have defined processes for selecting, training, and formally authorizing assessors and for selecting technical experts, if needed, used in this activity.

### **4.2 Competence**

**4.2.1** The assessors used by the ACBs shall have the following qualification, training and experience:

**Qualification** – MD in Ayurveda

**Training** –preferably having prior knowledge of Accreditation

**Experience** – 15 years after MD for Principal assessor and

10 years after MD for assessor

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**4.2.4** Personnel records: The ACBs shall maintain up-to-date personnel records, as per requirements of the Scheme, for each of its personnel involved in its assessment and certification activities.

## **4.3 Assessment and Certification process :**

**4.3.1** The ACB shall manage the process of assessment/certification of Ayurveda training courses as per the documented ‘Assessment Process for Basic Accreditation Standard for Ayurveda Training Courses’ [Hyperlink](#) prescribed under the Scheme.

**4.3.2** The ACB shall maintain records to demonstrate that the assessment/certification process is effectively implemented.

**4.3.3** The ACB shall ensure the requirements of the Scheme are met with at any point in time.

**4.3.4** The ACB shall certify Ayurveda training courses only under the Scheme and shall issue a certificate of compliance to the Ayurveda training provider assessed for specific courses evaluated following the rules prescribed under the Scheme.

**4.3.5** The ACB shall have written agreement with the ayurveda training providers for the use of the certificate issued to them.

**4.3.6** The ACB shall have a process to handle appeals by the training providers against any of its decisions.

**4.3.7** The ACB shall have a process to handle complaints from any stakeholder.

**4.4 Certification agreement:** The ACBs shall have a legally enforceable agreement for the provision of assessment/certification activities with the training providers. Besides, the ACBs shall ensure its certification agreement requires that the training provider comply at least, with the specific requirements in the Scheme document.

## **4.5 RESPONSIBILITY FOR DECISION ON CERTIFICATE OF COMPLIANCE**

**4.5.1** The ACBs shall be responsible for, shall retain authority for, and shall not delegate, decisions relating to issue of certificate of compliance, including the granting, maintaining,



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recertifying, expanding and reducing the scope of the certificate, and suspending or withdrawing the certificate.

## **4.6 PUBLICLY AVAILABLE INFORMATION**

**4.6.1** The ACB shall maintain a website for providing information about the Scheme and its assessment/certification activities under the Scheme.

**4.6.2** The ACB shall maintain and make publicly available information describing its assessment/certification processes for granting, maintaining, extending, renewing, reducing, suspending or withdrawing certificate of compliance and about the certification activities and geographical areas in which it operates.

**4.6.3** The ACB shall make publicly available information about applications registered and certificates issued, suspended or withdrawn.

**4.6.4** The ACB shall make publicly available its processes for handling appeals and complaints.

**4.6.5** It is mandatory for ACB to share the information to RAV time to time regarding the status of certificate.

## **5. APPROVAL PROCESS**

### **5.1 Application :**

**5.1.1** Any organization interested in approval as a ACB for the Scheme may apply to RAV in the prescribed application format along with the prescribed application fee. The applicant shall also enclose the required information and documents as specified in the application form.

**5.1.2** The filled in application form for approval shall be duly signed by the CEO/authorized representative/s of the organization seeking approval.

**5.1.3** On receipt of the application form, it will be scrutinized by the secretariat at RAV and if found complete in all respects will be processed further.

### **5.2 Assessment process :**

**5.2.1** On review of the application for completeness, an assessment team comprising a team leader and member(s)/technical expert(s) will be nominated by RAV for assessment at

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applicant's office and other locations, if required. Under normal circumstances, the assessment at head office will be for a total of two man-days. In case the ACB is already accredited to ISO/IEC 17065:2012, the man-days may be reduced.

**5.2.2** The names of the members of the assessment team along with their CVs will be communicated to the applicant giving it adequate time to raise any objection against the appointment of any of the team members, which will be dealt with by RAV on merits. All assessors/experts nominated by RAV shall have signed undertakings regarding confidentiality, impartiality and conflict of interest.

**5.2.3** If necessary, RAV may decide based on the report of office assessment or otherwise, to undertake witness assessment(s) of actual evaluation or any part of the assessment/certification process by the applicant.

**5.2.4** The assessment team leader shall provide an assessment plan to the applicant in advance of the assessment.

**5.2.5** The date(s) of assessment shall be mutually agreed to between the applicant and RAV/assessment team.

**5.2.6** The Office assessment will begin with an opening meeting for explaining the purpose and scope of assessment and the methodology of the assessment. The actual assessment process shall cover a review of the documented system of the organization to assess its adequacy in line with the criteria as specified in this document. It will also involve verification of the implementation of the system including scrutiny of the records of evaluators' competence and other relevant records and demonstration of evaluators' competence through means like interviews, etc. In short, it will be an assessment for verifying technical competence of the applicant for operating under the Scheme.

**5.2.7** At the end of the office assessment, through a formal closing meeting, all the nonconformities and concerns observed in the applicant's system as per the assessment criteria and the assessment team's recommendation to RAV shall be conveyed to the applicant.

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**5.2.8** Based on the report of the assessment, and the action taken by the applicant on the nonconformities/ concerns if any, RAV shall decide on granting provisional approval to the applicant as ACB under the Scheme.

## **6. VALIDITY OF APPROVAL**

**6.1** The approval shall be valid for 2 years.

**6.2** The ACB shall obtain formal accreditation as per ISO 17065 from NABCB or any other agency recognized by RAV within 2 years of provisional approval by RAV to formalize its approval.

**6.3** The provisional approval shall be subject to suspension/withdrawal with due notice of 15 days in the event of any noncompliance to the requirements of the Scheme.

**6.4** The approved ACB shall inform RAV without delay about any changes relevant to its approval, in any aspect of its status or operation relating to:

- a) Its legal, commercial, ownership or organizational status;
- b) The organization, top management and key personnel;
- c) Main policies, resources, premises and scope of approval;

**d)** Other such matters that may affect the ability of the ACB to fulfil requirements for approval.

RAV shall examine such information and decide on the issue on merits with or without an on-site verification.

**6.5** The ACB shall send data of the courses assessed/certified/rejected immediately within one week after the issue of the certificate/conclusion of evaluation to RAV. The data shall be submitted in the specified format for maintaining the registry of the training courses.

**6.6** RAV shall witness the process of evaluation/certification by an approved ACB at least once annually within the period of validity.

**6.7** Any extension of validity of provisional approval shall be based on a written request for justifiable reasons and shall involve office or witness assessment or both as decided by RAV.

## **7. FEE**

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7.1 The following fee structure shall apply:

a) Application fee **INR**

b) Manday Charges **INR**

c) Annual fee **INR**

7.2 In addition, the ACB shall pay to RAV an amount of INR ..... per certificate issued by the ACB.

7.3 RAV at its discretion may revise/ levy any other fee necessary with due notice to the ACBs

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