

विशाल चौहान, भा.प्र.से.  
संयुक्त सचिव

**VISHAL CHAUHAN, IAS**  
Joint Secretary

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At the outset, I congratulate you and your state team for taking up two (02) public health facilities of Punjab for Quality certification under NQAS program. The facilities underwent External Assessment by the empanelled NQAS external assessors. The assessment details are as follows:

S. No	Name of Facility	Date of Assessment	Packages	Certification Criteria	Overall Score	Certification Status
a).	HWC Kattu Barnala	12 <sup>th</sup> June 2023	7 Service packages	Met all criteria	91%	Quality Certified
b).	HWC Gill Patti Bhatinda	13 <sup>th</sup> June 2023	7 Service packages	Met all criteria	94%	Quality Certified

Hence, above mentioned facilities in the State of Punjab are granted "Quality Certification" under NQAS program.

The certified health facilities should strive to work on recommended Areas of Improvements and submit the action plan to the State Quality Assurance Unit. The State Quality assurance unit is expected to verify the improvement in the surveillance audits and submit the status to Certification Unit NHSRC along with the surveillance reports.

Summary of the Assessment Report of the aforementioned facilities is enclosed as **Appendices-A & B** respectively.

*with regards*

Yours Sincerely,

  
(Vishal Chauhan)

**Sh. Vivek Pratap Singh**

Principal Secretary (H&FW) Department of H&FW,  
Government of Punjab, Room No. 314 3<sup>rd</sup> Floor,  
Mini Secretariate Sector-9 Chandigarh-160009

**Copy to:**

1. The Mission Director – NHM, Department of Health & Family Welfare, Government of Punjab, Room No. 1, 5<sup>th</sup> Floor, Prayas Building, Dakshin Marg, Sector 38-B, Chandigarh.
2. State Quality Assurance Unit, National health Mission, Punjab Health Systems Corporation, Phase VI, Mohali (SAS Nagar), Punjab.
3. The Community Health Officer, HWC Kattu Barnala, Punjab.
4. The Community Health Officer, HWC Gill Patti Bhatinda, Punjab.



## Summary Report of External Assessment

Name of the facility: Health &amp; Wellness Centre Kattu Barnala, Punjab.

Date of Assessment: 12<sup>th</sup> June 2023

Overall Score: 91%

## 1. Compliance to Certification Criteria:

Criterion No.	Certification Criteria	Status
I.	Overall score of the department shall be $\geq 70\%$	<b>Criteria met</b> (Overall Score- 91%)
II.	Score for each service packages of facility (Minimum 7 packages) $\geq 70\%$	<b>Criteria met</b>
III.	Segregated Score of each area of concern shall be $\geq 60\%$	<b>Criteria met</b>
IV.	Score of Standard A1, D3, D4, D5 and G2 is $\geq 60\%$	<b>Criteria met</b> Standard A1 (84%) Standard D3 (91%) Standard D4 (93%) Standard D5 (85%) Standard G2 (100%)
V.	Individual Standard wise score is $\geq 50\%$	<b>Criteria met</b>
VI.	Patient/Client satisfaction Score $\geq 60\%$ or 3.0 on Likert Scale	<b>Criteria met</b> PSS- 4.8

## 2. Area of Concern Wise Score:

S. No.	Area of Concern	Score
A	Service Provision	83%
B	Patient Rights	87%
C	Inputs	90%
D	Support Services	89%
E	Clinical Services	93%
F	Infection Control	95%
G	Quality Management	95%
H	Outcome	93%

### 3. Theme Wise Score:

S. No.	Service Packages	Score
1	Care in pregnancy & Childbirth	99%
2	Neonatal & Infant Health Services	99%
3	Childhood & adolescent Health Services	89%
4	Family Planning	92%
5	Management of Communicable diseases	89%
6	Management of Non-Communicable Diseases	92%
7	Drugs & Diagnostics	87%

### 4. Score against each Standard:

Reference No.	Standard	Score
Standard A1	The facility provides Comprehensive Primary Healthcare Services	84%
Standard A2	The facility provides drugs and diagnostic services as mandated	75%
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	93%
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	72%
Standard B3	Services are delivered in a manner that are sensitive to gender, religious & cultural needs and there is no discrimination on account of economic or social reasons	88%
Standard B4	The facility maintains privacy, confidentiality & dignity of patient	92%
Standard B5	The facility ensures all services are provided free of cost to its users	90%
Standard C1	The facility has adequate and safe infrastructure for delivery of assured services as per prevalent norms and it provides optimal care and comfort to users	88%
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	79%
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	100%
Standard C4	The facility provides drugs and consumables required for assured services	90%
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	100%
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	88%

Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	89%
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	91%
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	93%
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	85%
Standards D6	The facility is compliant with statutory and regulatory requirement	100%
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	86%
Standard E2	The facility has defined and established procedures for continuity of care through two-way referral	86%
Standard E3	The facility has defined and established procedures of diagnostic services.	63%
Standard E4	The facility has defined procedures for safe drug administration.	81%
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	100%
Standard E6	The facility has defined and established procedures for nursing care.	81%
Standard E7	The facility has defined and established procedures for Emergency care	80%
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	NA
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	NA
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	87%
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	97%
Standard E12	Elderly & palliative health care services are provided as per guidelines	NA
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	100%

Standard E14	The facility has established procedures for family planning as per government guidelines and law.	100%
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	75%
Standard E16	The facility has established procedures for Antenatal care as per guidelines	100%
Standard E17	The facility has established procedure for intranatal care as per guidelines	NA
Standard E18	The facility has established procedure for postnatal Care	100%
Standard F1	The facility has established program for infection prevention and control	100%
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	88%
Standard F3	The facility ensures standard practices and equipment for Personal protection	100%
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	100%
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	93%
Standard G1	The facility has established organizational framework for quality improvement.	100%
Standard G2	The facility has established system for patient and employee satisfaction	100%
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	100%
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	94%
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	100%
Standard H1	The facility measures Productivity Indicators	93%
Standard H2	The facility measures efficiency Indicators.	93%
Standard H3	The facility measures Clinical Care Indicators.	90%
Standard H4	The facility measures Service Quality Indicators	100%

## 5. Areas of improvement

S. No	Recommended areas of improvement
1.	First aid, referral & follow up services for high risk pregnancies should be provided
2.	Outreach sessions should be conducted.

**Summary Report of External Assessment**

Name of the facility: Health & Wellness Centre Gill Patti Bhatinda, Punjab.

Date of Assessment: 13<sup>th</sup> June 2023

Overall Score: 94%

**1. Compliance to Certification Criteria:**

Criterion No.	Certification Criteria	Status
I.	Overall score of the department shall be $\geq 70\%$	<b>Criteria met</b> (Overall Score- 94%)
II.	Score for each service packages of facility (Minimum 7 packages) $\geq 70\%$	<b>Criteria met</b>
III.	Segregated Score of each area of concern shall be $\geq 60\%$	<b>Criteria met</b>
IV.	Score of Standard A1, D3, D4, D5 and G2 is $\geq 60\%$	<b>Criteria met</b> Standard A1 (87%) Standard D3 (97%) Standard D4 (100%) Standard D5 (89%) Standard G2 (100%)
V.	Individual Standard wise score is $\geq 50\%$	<b>Criteria met</b>
VI.	Patient/Client satisfaction Score $\geq 60\%$ or 3.0 on Likert Scale	<b>Criteria met</b> PSS- 4.8

**2. Area of Concern Wise Score:**

S. No.	Area of Concern	Score
A	Service Provision	87%
B	Patient Rights	96%
C	Inputs	90%
D	Support Services	94%
E	Clinical Services	97%
F	Infection Control	100%
G	Quality Management	98%
H	Outcome	87%



### 3. Theme Wise Score:

S. No.	Service Packages	Score
1	Care in pregnancy & Childbirth	99%
2	Neonatal & Infant Health Services	86%
3	Childhood & adolescent Health Services	100%
4	Family Planning	88%
5	Management of Communicable diseases	99%
6	Management of Non-Communicable Diseases	87%
7	Drugs & Diagnostics	88%

### 4. Score against each Standard:

Reference No.	Standard	Score
Standard A1	The facility provides Comprehensive Primary Healthcare Services	87%
Standard A2	The facility provides drugs and diagnostic services as mandated	88%
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	100%
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	94%
Standard B3	Services are delivered in a manner that are sensitive to gender, religious & cultural needs and there is no discrimination on account of economic or social reasons	88%
Standard B4	The facility maintains privacy, confidentiality & dignity of patient	100%
Standard B5	The facility ensures all services are provided free of cost to its users	100%
Standard C1	The facility has adequate and safe infrastructure for delivery of assured services as per prevalent norms and it provides optimal care and comfort to users	94%
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	93%
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	100%
Standard C4	The facility provides drugs and consumables required for assured services	85%
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	83%
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	100%

Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	89%
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	97%
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	100%
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	89%
Standards D6	The facility is compliant with statutory and regulatory requirement	100%
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	100%
Standard E2	The facility has defined and established procedures for continuity of care through two-way referral	100%
Standard E3	The facility has defined and established procedures of diagnostic services.	100%
Standard E4	The facility has defined procedures for safe drug administration.	100%
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	100%
Standard E6	The facility has defined and established procedures for nursing care.	100%
Standard E7	The facility has defined and established procedures for Emergency care	100%
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	NA
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	NA
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	100%
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	97%
Standard E12	Elderly & palliative health care services are provided as per guidelines	NA
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	88%

Standard E14	The facility has established procedures for family planning as per government guidelines and law.	90%
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	100%
Standard E16	The facility has established procedures for Antenatal care as per guidelines	100%
Standard E17	The facility has established procedure for intranatal care as per guidelines	NA
Standard E18	The facility has established procedure for postnatal Care	100%
Standard F1	The facility has established program for infection prevention and control	100%
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	100%
Standard F3	The facility ensures standard practices and equipment for Personal protection	100%
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	100%
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	100%
Standard G1	The facility has established organizational framework for quality improvement.	100%
Standard G2	The facility has established system for patient and employee satisfaction	100%
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	100%
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	100%
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	100%
Standard H1	The facility measures Productivity Indicators	100%
Standard H2	The facility measures efficiency Indicators.	79%
Standard H3	The facility measures Clinical Care Indicators.	90%
Standard H4	The facility measures Service Quality Indicators	67%

## 5. Areas of improvement

S. No	Recommended areas of improvement
1.	Refferal for pregnant women should be available.
2.	Case detection, treatment, referral & follow up of cases under NVHCP should be improved.
3.	Ayush services should be available.