

विशाल चौहान, भा.प्र.से.
संयुक्त सचिव

VISHAL CHAUHAN, IAS
Joint Secretary

NHSRC/CU/23-24/PB
27th July 2023

Sir,

At the outset, I congratulate you and your state team for taking up three (03) public health facilities of Punjab for Quality Certification under NQAS program. The facilities underwent assessment by empanelled NQAS external assessors. The assessment details are as follows:

S. No	Name of Facility	Date of Assessment	Departments	Certification Criteria	Overall Score	Certification Status
a).	Health & Wellness Centre Ghawaddi, Ludhiana	17 th July 2023	7 service packages	Met all Criteria	91%	Quality Certified
b).	Health & Wellness Centre Gehlewal, Ludhiana	18 th July 2023	7 service packages	Met all Criteria	94%	Quality Certified
c).	Health & Wellness Centre Isru, Ludhiana	19 th July 2023	7 service packages	Met 5 out of 6 Criteria	92%	Quality Certified with Conditionality

Hence, HWC Ghawaddi (Ludhiana) and HWC Gehlewal (Ludhiana) in the state of Punjab are granted "Quality Certification" under the NQAS program.

Whereas, HWC Isru (Ludhiana) in the state of Punjab is granted "Quality Certification with Conditionality" under the NQAS program for a period of one (01) year from the date of issue of this letter.

The certified health facilities should strive to work on recommended Areas of Improvement 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 to C** 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 3rd Floor,
Mini Secretariat Sector-9 Chandigarh-160009

Copy to:

1. The Mission Director – NHM, Department of Health & Family Welfare, Government of Punjab, Room No.1, 5th Floor, Prayas Building, Dakshin Marg, Sector 38-B, Chandigarh -160036, Punjab
2. State Quality Assurance Unit, Punjab Health System Corporation, Phase VI, Mohali, Punjab.
3. Community Health Officer, Health & Wellness Centre Ghawaddi, Ludhiana, Punjab.
4. Community Health Officer, Health & Wellness Centre Gehlewal, Ludhiana, Punjab.
5. Community Health Officer, Health & Wellness Centre Isru, Ludhiana, Punjab.

Summary Report of External Assessment

Name of the facility : Health and Wellness Centre Ghawaddi, Ludhiana

Date of Assessment : 17th July 2023

Overall Score : 91%

1. Compliance to Certification Criteria:

Criterion No.	Certification Criteria	Status
I.	Overall score of the facility $\geq 70\%$	Criteria met Overall Score - 91%
II.	Score for each service package of the facility (Minimum 7 packages) $\geq 70\%$	Criteria met
III.	Segregated Score of each area of concern shall be $\geq 60\%$	Criteria met
IV.	Score of Standard A1, D3, D4, D5 and G2 is $\geq 60\%$	Criteria met Standard A1 - 98% Standard D3 - 81% Standard D4 - 100% Standard D5 - 96% Standard G2 - 83%
V.	Individual Standard wise score is $\geq 50\%$	Criteria met
VI.	Patient/Client satisfaction Score $\geq 60\%$ or 3.0 on Likert Scale	Criteria met PSS - 3.7

2. Area of Concern Wise Score:

S. No.	Area of Concern	Score
A	Service Provision	99%
B	Patient Rights	98%
C	Inputs	78%
D	Support Services	94%
E	Clinical Services	92%
F	Infection Control	92%
G	Quality Management	91%
H	Outcome	89%

3. Theme Wise Score:

S. No.	Service Packages	Score
1	Care in Pregnancy & Childbirth	94%
2	Neonatal & Infant Health Services	97%
3	Childhood & Adolescent Health Services	82%
4	Family Planning	96%
5	Management of Communicable diseases	98%
6	Management of Non-Communicable Diseases	91%
7	Drugs & Diagnostics	79%

4. Score against each Standard:

Reference No.	Standard	Score
Standard A1	The facility provides Comprehensive Primary Healthcare Services	98%
Standard A2	The facility provides drugs and diagnostic services as mandated	100%
Standard B1	The facility provides information to care seekers, attendants & community about available services & their modalities	93%
Standard B2	The facility ensures services are accessible to care seekers and visitors including those who required some affirmative action	100%
Standard B3	Services are delivered in a manner that is sensitive to gender, religious & cultural needs and there is no discrimination on account of economic or social reasons	100%
Standard B4	The facility maintains the privacy, confidentiality & dignity of the 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 the delivery of assured services as per prevalent norms and it provides optimal care and comfort to users	84%
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per the current caseload	79%
Standard C3	The facility has a defined and established procedure for effective utilization, evaluation, and augmentation of competence and performance of staff	88%
Standard C4	The facility provides drugs and consumables required for assured services	70%
Standard C5	The facility has adequate functional equipment and instruments for an assured list of services	100%
Standard D1	The facility has established a program for maintenance and upkeep of the facility	100%
Standard D2	The facility has defined procedures for the storage, inventory management, and dispensing of drugs	89%
Standard D3	The facility has defined and established procedures for clinical records and data management with the progressive use of digital technology	81%
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	96%
Standard D6	The facility is compliant with statutory and regulatory requirements	100%
Standard E1	The facility has defined procedures for registration, consultation, clinical	96%

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 for diagnostic services.	75%
Standard E4	The facility has defined procedures for safe drug administration.	75%
Standard E5	The facility follows standard treatment guidelines and ensures the rational use of drugs	81%
Standard E6	The facility has defined and established procedures for nursing care.	94%
Standard E7	The facility has defined and established procedures for Emergency care	100%
Standard E10	The facility has defined & established procedures for the management of communicable diseases as per operational/ clinical guidelines	96%
Standard E11	The facility has defined & established procedures for the management of non-communicable diseases as per operational/ clinical guidelines	91%
Standard E13	The facility has established procedures for the care of newborn, infant, and child as per guidelines	93%
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	94%
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 the guidelines	96%
Standard E18	The facility has established procedures for postnatal Care	100%
Standard F1	The facility has established a 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.	83%
Standard F5	The facility has defined and established procedures for the segregation, collection, treatment, and disposal of Bio Medical and Hazardous Waste.	90%
Standard G1	The facility has established an organizational framework for quality improvement.	79%
Standard G2	The facility has established a system for patient and employee satisfaction	83%
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 a system of periodic reviews of clinical, support, and quality management processes	94%
Standard G5	The facility has defined its Mission, Values, Quality policy, and Objectives, and approved a plan to achieve them.	83%
Standard H1	The facility measures Productivity Indicators	100%
Standard H2	The facility measures efficiency Indicators.	86%
Standard H3	The facility measures Clinical Care Indicators.	80%
Standard H4	The facility measures Service Quality Indicators	100%

5. Areas of Improvement

S. No	Recommended areas of improvement
1.	Facility maintenance records needs to be improved
2.	Lack awareness on food safety and fortication
3.	Training required on management of ARI, Diarrhoea

Summary Report of External Assessment

Name of the facility : Health and Wellness Centre Gehlewal, Ludhiana

Date of Assessment : 18th July 2023

Overall Score : 94%

1. Compliance to Certification Criteria:

Criterion No.	Certification Criteria	Status
I.	Overall score of the facility $\geq 70\%$	Criteria met Overall Score - 94%
II.	Score for each service package of the facility (Minimum 7 packages) $\geq 70\%$	Criteria met
III.	Segregated Score of each area of concern shall be $\geq 60\%$	Criteria met
IV.	Score of Standard A1, D3, D4, D5 and G2 is $\geq 60\%$	Criteria met Standard A1 - 100% Standard D3 - 100% Standard D4 - 100% Standard D5 - 96% Standard G2 - 100%
V.	Individual Standard wise score is $\geq 50\%$	Criteria met
VI.	Patient/Client satisfaction Score $\geq 60\%$ or 3.0 on Likert Scale	Criteria met PSS - 4.1

2. Area of Concern Wise Score:

S. No.	Area of Concern	Score
A	Service Provision	99%
B	Patient Rights	99%
C	Inputs	82%
D	Support Services	99%
E	Clinical Services	93%
F	Infection Control	97%
G	Quality Management	100%
H	Outcome	100%

3. Theme Wise Score:

S. No.	Service Packages	Score
1	Care in Pregnancy & Childbirth	97%
2	Neonatal & Infant Health Services	99%
3	Childhood & Adolescent Health Services	82%
4	Family Planning	96%
5	Management of Communicable diseases	98%
6	Management of Non-Communicable Diseases	95%
7	Drugs & Diagnostics	82%

4. Score against each Standard:

Reference No.	Standard	Score
Standard A1	The facility provides Comprehensive Primary Healthcare Services	100%
Standard A2	The facility provides drugs and diagnostic services as mandated	88%
Standard B1	The facility provides information to care seekers, attendants & community about available services & their modalities	100%
Standard B2	The facility ensures services are accessible to care seekers and visitors including those who required some affirmative action	94%
Standard B3	Services are delivered in a manner that is sensitive to gender, religious & cultural needs and there is no discrimination on account of economic or social reasons	100%
Standard B4	The facility maintains the privacy, confidentiality & dignity of the 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 the 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 the current caseload	93%
Standard C3	The facility has a defined and established procedure for effective utilization, evaluation, and augmentation of competence and performance of staff	94%
Standard C4	The facility provides drugs and consumables required for assured services	72%
Standard C5	The facility has adequate functional equipment and instruments for an assured list of services	83%
Standard D1	The facility has established a program for maintenance and upkeep of the facility	100%
Standard D2	The facility has defined procedures for the storage, inventory management, and dispensing of drugs	100%
Standard D3	The facility has defined and established procedures for clinical records and data management with the progressive use of digital technology	100%
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	96%
Standard D6	The facility is compliant with statutory and regulatory requirements	100%
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment, and reassessment of the patients	96%

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 for diagnostic services.	75%
Standard E4	The facility has defined procedures for safe drug administration.	94%
Standard E5	The facility follows standard treatment guidelines and ensures the rational use of drugs	81%
Standard E6	The facility has defined and established procedures for nursing care.	94%
Standard E7	The facility has defined and established procedures for Emergency care	100%
Standard E10	The facility has defined & established procedures for the management of communicable diseases as per operational/ clinical guidelines	96%
Standard E11	The facility has defined & established procedures for the management of non-communicable diseases as per operational/ clinical guidelines	91%
Standard E13	The facility has established procedures for the care of newborn, infant, and child as per guidelines	93%
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	94%
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 the guidelines	96%
Standard E18	The facility has established procedures for postnatal Care	100%
Standard F1	The facility has established a 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.	83%
Standard F5	The facility has defined and established procedures for the segregation, collection, treatment, and disposal of Bio Medical and Hazardous Waste.	100%
Standard G1	The facility has established an organizational framework for quality improvement.	100%
Standard G2	The facility has established a 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 a system of periodic reviews of clinical, support, and quality management processes	100%
Standard G5	The facility has defined its Mission, Values, Quality policy, and Objectives, and approved a plan to achieve them.	100%
Standard H1	The facility measures Productivity Indicators	100%
Standard H2	The facility measures efficiency Indicators.	100%
Standard H3	The facility measures Clinical Care Indicators.	100%
Standard H4	The facility measures Service Quality Indicators	100%

5. Areas of Improvement

S. No	Recommended areas of improvement
1.	Medicines to be made available
2.	Records on Facility maintenance needs to be improved

Summary Report of External Assessment

Name of the facility : Health and Wellness Centre Isru, Ludhiana, Punjab
 Date of Assessment : 19th July 2023
 Overall Score : 92%

1. Compliance to Certification Criteria:

Criterion No.	Certification Criteria	Status
I.	Overall score of the facility $\geq 70\%$	Criteria met Overall Score – 92%
II.	Score for each service package of the facility (Minimum 7 packages) $\geq 70\%$	Criteria met
III.	Segregated Score of each area of concern shall be $\geq 60\%$	Criteria met
IV.	Score of Standard A1, D3, D4, D5 and G2 is $\geq 60\%$	Criteria met Standard A1 – 94% Standard D3 – 69% Standard D4 – 100% Standard D5 – 100% Standard G2 – 100%
V.	Individual Standard wise score is $\geq 50\%$	Criteria not met Refer Table No 4
VI.	Patient/Client satisfaction Score $\geq 60\%$ or 3.0 on Likert Scale	Criteria met PSS – 3.5

2. Area of Concern Wise Score:

S. No.	Area of Concern	Score
A	Service Provision	93%
B	Patient Rights	94%
C	Inputs	97%
D	Support Services	89%
E	Clinical Services	87%
F	Infection Control	98%
G	Quality Management	97%
H	Outcome	100%

3. Theme Wise Score:

S. No.	Service Packages	Score
1	Care in Pregnancy & Childbirth	100%
2	Neonatal & Infant Health Services	100%
3	Childhood & Adolescent Health Services	96%
4	Family Planning	77%
5	Management of Communicable diseases	93%
6	Management of Non-Communicable Diseases	98%
7	Drugs & Diagnostics	84%

4. Score against each Standard:

Reference No.	Standard	Score
Standard A1	The facility provides Comprehensive Primary Healthcare Services	94%
Standard A2	The facility provides drugs and diagnostic services as mandated	88%
Standard B1	The facility provides information to care seekers, attendants & community about available services & their modalities	93%
Standard B2	The facility ensures services are accessible to care seekers and visitors including those who required some affirmative action	94%
Standard B3	Services are delivered in a manner that is sensitive to gender, religious & cultural needs and there is no discrimination on account of economic or social reasons	94%
Standard B4	The facility maintains the privacy, confidentiality & dignity of the patient	100%
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 the 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 the current caseload	100%
Standard C3	The 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	97%
Standard C5	The facility has adequate functional equipment and instruments for an assured list of services	100%
Standard D1	The facility has established a program for maintenance and upkeep of the facility	96%
Standard D2	The facility has defined procedures for the storage, inventory management, and dispensing of drugs	71%
Standard D3	The facility has defined and established procedures for clinical records and data management with the progressive use of digital technology	69%
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	100%
Standard D6	The facility is compliant with statutory and regulatory requirements	100%
Standard E1	The facility has defined procedures for registration, consultation, clinical	79%

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 for diagnostic services.	25%
Standard E4	The facility has defined procedures for safe drug administration.	88%
Standard E5	The facility follows standard treatment guidelines and ensures the rational use of drugs	44%
Standard E6	The facility has defined and established procedures for nursing care.	25%
Standard E7	The facility has defined and established procedures for Emergency care	90%
Standard E10	The facility has defined & established procedures for the management of communicable diseases as per operational/ clinical guidelines	91%
Standard E11	The facility has defined & established procedures for the management of non-communicable diseases as per operational/ clinical guidelines	100%
Standard E13	The facility has established procedures for the care of newborn, infant, and child as per guidelines	99%
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	70%
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 the guidelines	100%
Standard E18	The facility has established procedures for postnatal Care	100%
Standard F1	The facility has established a 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 the segregation, collection, treatment, and disposal of Bio Medical and Hazardous Waste.	97%
Standard G1	The facility has established an organizational framework for quality improvement.	100%
Standard G2	The facility has established a 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.	93%
Standard G4	The facility has established a system of periodic reviews of clinical, support, and quality management processes	100%
Standard G5	The facility has defined its Mission, Values, Quality policy, and Objectives, and approved a plan to achieve them.	100%
Standard H1	The facility measures Productivity Indicators	100%
Standard H2	The facility measures efficiency Indicators.	100%
Standard H3	The facility measures Clinical Care Indicators.	100%
Standard H4	The facility measures Service Quality Indicators	100%

5. Areas of Improvement

S. No	Recommended areas of improvement
1.	Provision of promotion, prevention and treatment of communicable disease under national health program needs to be improved
2.	Staff to be trained for inventory management techniques
3.	Staff to be made aware about state's condemnation policy