



# National Health Systems Resource Centre

Technical Support Institution with National Health Mission  
Ministry of Health & Family Welfare, Government of India



J N Srivastava  
Officiating ED, NHSRC

D.O. No. NHSRC/CU/23-24/PB  
Date 12-Jul-2024

**Subject: National Quality Certification of Five (05) Public Health Facility of Punjab under NQAS**

Dear Sir,

At the outset, I congratulate you and your state team for taking up five (05) 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	Departments/ Packages	Certification Criteria	Overall Score	Certification Status
1	AAM-SHC, Kalanaur, Gurdaspur	13-Mar-2024	7 Mandatory Service Packages	Met all Criteria	90.45%	Quality Certified
2	AAM-SHC, Ramgarh, Patiala	12-Jun-2024	7 Mandatory Service Packages	Met all Criteria	94.31%	Quality Certified
3	AAM-SHC Allowal, Patiala	11-Jun-2024	7 Mandatory Service Packages	Met all Criteria	92.28%	Quality Certified
4	AAM-SHC, Khanoura, Patiala	13-Jun-2024	7 Mandatory Service Packages	Met all Criteria	92.07%	Quality Certified
5	AAM-SHC, Chowke, Bathinda	28-Jun-2024	7 Mandatory Service Packages	Met all Criteria	87.09%	Quality Certified

Hence, above mentioned **Ayushman Arogya Mandir – Sub Health Centres** in the State of Punjab are granted 'Quality Certified' under NQAS

The certified health facilities should 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.

The summary of the Assessment Reports of aforementioned facilities is enclosed as Appendices A to E

With regards

Yours Sincerely,

**Sh. Varinder Kumar Sharma**

Mission Director (NHM),  
State Quality Assurance Unit,  
O/O Punjab Health Systems Corporation  
2nd Floor, Block E, PSEB Building, Phase 8,  
S.A.S Nagar, Punjab 160062

**Copy to:**

1. State Quality Assurance Unit, O/o Punjab Health Systems Corporation 2nd Floor, Block E, PSEB Building, Phase 8, S.A.S Nagar, Punjab 160062
2. Community Health Officer, AAM-SHC, Kalanaur, Gurdaspur
3. Community Health Officer, AAM-SHC, Ramgarh, Patiala
4. Community Health Officer, AAM-SHC, Allowal, Patiala
5. Community Health Officer, AAM-SHC, Khanoura, Patiala
6. Community Health Officer, AAM-SHC, Chowke, Bhatinda



### Summary of External Assessment Report (Appendix A)

Name of the facility: AAM-SHC, Kalanaur, Gurdaspur, Punjab

Date of External Assessment: 13-Mar-2024 to 13-Mar-2024

Overall Score of Health facility: 90.45 %

#### 1. Compliance to certification criteria

Sl.No.	Criteria Name	Score Required	Meets Criteria
1	Aggregate score of the health facility	≥ 70 %	Criteria Met 90.45 %
2	Score of each Service Package of the health facility	≥ 70 %	Criteria Met
3	Aggregated score in each Area of Concern	≥ 60 %	Criteria Met <b>Refer Table - 3</b>
4	Score of Standard of A1,D3,D4,D5,G2	≥ 60 %	Criteria Met Standard A1 - <b>88.24 %</b> Standard D3 - <b>96.88 %</b> Standard D4 - <b>90.0 %</b> Standard D5 - <b>92.59 %</b> Standard G2 - <b>100.0 %</b>
5	Individual Standard wise score	≥ 50 %	Criteria Met <b>Refer Table - 4</b>
6	Patient Satisfaction Score in the preceding quarter or more (Satisfied or Highly satisfied on Mera-Aspataal)	PSS ≥ 60 %	Criteria Met (PSS Score - 91.0%)

#### 2. Departmental Score :

S.No.	Department	Score(%)
1	Care in pregnancy & Childbirth	100.00
2	Childhood & adolescent Health Services	100.00
3	Drugs & Diagnostics	81.48
4	Family Planning	92.31
5	Management of Communicable diseases	91.46
6	Management of Non Communicable Diseases	90.82
7	Neonatal & Infant Health Services	100.00

#### 3. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	86.84
B	Patients Right	88.1
C	Inputs	85.94
D	Support Services	89.77
E	Wellness & Clinical Services	94.83
F	Infection Control	72.58
G	Quality Management	94.64
H	Outcome	100.0

#### 4. Score against each Standard :

Reference No.	Area of Concern & Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	88.24
Standard A2	The facility provides drugs and diagnostic services as mandated	75.00
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	78.57
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	83.33
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	93.75
Standard B4	The facility maintains privacy, confidentiality & dignity of patient	100.00
Standard B5	The facility ensures all services are provided free of cost to its users	100.00
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	93.75
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	92.86
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	87.50
Standard C4	The facility provides drugs and consumables required for assured services	81.67
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	66.67
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	79.17
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	82.14
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	96.88
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	90.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	92.59
Standard D6	The facility is compliant with statutory and regulatory requirement	100.00
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	100.00
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	85.71
Standard E3	The facility has defined and established procedures of diagnostic services.	75.00
Standard E4	The facility has defined procedures for safe drug administration.	100.00

Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	88.89
Standard E6	The facility has defined and established procedures for nursing care.	87.50
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	87.50
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	94.83
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	100.00
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	95.00
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	100.00
Standard E16	The facility has established procedures for Antenatal care as per guidelines	100.00
Standard F1	The facility has established program for infection prevention and control	83.33
Standard F2	The facility has defined and implemented procedures for ensuring hand hygiene practices	87.50
Standard F3	The facility ensures standard practices and equipment for personal protection	66.67
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	50.00
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	76.67
Standard G1	The facility has established organizational framework for quality improvement.	100.00
Standard G2	The facility has established system for patient and employee satisfaction	100.00
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	100.00
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	81.25
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	100.00
Standard H1	The facility measures productivity indicators	100.00
Standard H2	The facility measures efficiency indicators.	100.00
Standard H3	The facility measures clinical care indicators.	100.00
Standard H4	The facility measures service quality indicators	100.00

**Summary of External Assessment Report (Appendix B)**

Name of the facility: *AAM-SHC Ramgarh , Patiala , Punjab*

Date of External Assessment: **12-Jun024 to 12-Jun-2024**

Overall Score of Health facility: **94.31 %**

**1. Compliance to certification criteria**

Sl.No.	Criteria Name	Score Required	Meets Criteria
1	Aggregate score of the health facility	≥ 70 %	Criteria Met 94.31 %
2	Score of each Service Package of the health facility	≥ 70 %	Criteria Met
3	Aggregated score in each Area of Concern	≥ 60 %	Criteria Met <b>Refer Table - 3</b>
4	Score of Standard of A1,D3,D4,D5,G2	≥ 60 %	Criteria Met Standard A1 - <b>86.76 %</b> Standard D3 - <b>93.75 %</b> Standard D4 - <b>100.0 %</b> Standard D5 - <b>100.0 %</b> Standard G2 - <b>100.0 %</b>
5	Individual Standard wise score	≥ 50 %	Criteria Met <b>Refer Table - 4</b>
6	Patient Satisfaction Score in the preceding quarter or more (Satisfied or Highly satisfied on Mera-Aspataal)	PSS ≥ 60 %	Criteria Met (PSS Score - 85.6%)

**2. Departmental Score :**

S.No.	Department	Score(%)
1	Care in pregnancy & Childbirth	100.00
2	Childhood & adolescent Health Services	100.00
3	Drugs & Diagnostics	91.67
4	Family Planning	100.00
5	Management of Communicable diseases	89.02
6	Management of Non Communicable Diseases	94.90
7	Neonatal & Infant Health Services	98.57

### 3. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	86.84
B	Patients Right	89.29
C	Inputs	94.53
D	Support Services	93.75
E	Wellness & Clinical Services	97.41
F	Infection Control	91.94
G	Quality Management	91.07
H	Outcome	100.0

### 4. Score against each Standard :

Reference No.	Area of Concern & Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	86.76
Standard A2	The facility provides drugs and diagnostic services as mandated	87.50
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	92.86
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	83.33
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	93.75
Standard B4	The facility maintains privacy, confidentiality & dignity of patient	83.33
Standard B5	The facility ensures all services are provided free of cost to its users	90.00
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	87.50
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	100.00
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	100.00



Standard C4	The facility provides drugs and consumables required for assured services	95.00
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	100.00
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	79.17
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	85.71
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	93.75
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	100.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	100.00
Standard D6	The facility is compliant with statutory and regulatory requirement	100.00
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	96.43
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	92.86
Standard E3	The facility has defined and established procedures of diagnostic services.	87.50
Standard E4	The facility has defined procedures for safe drug administration.	100.00
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	100.00
Standard E6	The facility has defined and established procedures for nursing care.	100.00



Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	89.58
Standard E11	The facility has defined & established procedures for management of non- communicable diseases as per operational/ clinical guidelines	100.00
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	98.53
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	100.00
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	100.00
Standard E16	The facility has established procedures for Antenatal care as per guidelines	100.00
Standard F1	The facility has established program for infection prevention and control	100.00
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	87.50
Standard F3	The facility ensures standard practices and equipment for personal protection	83.33
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	91.67
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	93.33
Standard G1	The facility has established organizational framework for quality improvement.	85.71
Standard G2	The facility has established system for patient and employee satisfaction	100.00
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	92.86
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	87.50

Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	100.00
Standard H1	The facility measures productivity indicators	100.00
Standard H2	The facility measures efficiency indicators.	100.00
Standard H3	The facility measures clinical care indicators.	100.00
Standard H4	The facility measures service quality indicators	100.00

Summary of External Assessment Report (Appendix )

Name of the facility : AAM-SHC Allowal , Patiala , Punjab  
Date of External Assessment : 11-Jun-2024to 11Jun-2024  
Overall Score of Health facility : 92.28 %

1. Compliance to certification criteria

Sl.No.	Criteria Name	Score Required	Meets Criteria
1	Aggregate score of the health facility	≥ 70 %	Criteria Met 92.28 %
2	Score of each Service Package of the health facility	≥ 70 %	Criteria Met
3	Aggregated score in each Area of Concern	≥ 60 %	Criteria Met Refer Table - 3
4	Score of Standard of A1,D3,D4,D5,G2	≥ 60 %	Criteria Met Standard A1 - 88.24% Standard D3 - 93.75% Standard D4 - 96.67% Standard D5 - 96.3% Standard G2 - 83.33%
5	Individual Standard wise score	≥ 50 %	Criteria Met Refer Table - 4
6	Patient Satisfaction Score in the preceding quarter or more (Satisfied or Highly satisfied on Mera-Aspataal)	PSS ≥ 60 %	Criteria Met (PSS Score - 85.8%)

## 2. Department Score

S.No.	Department	Score (%)
1	Care in pregnancy & Childbirth	90.32
2	Childhood & adolescent Health Services	100.00
3	Drugs & Diagnostics	92.59
4	Family Planning	92.31
5	Management of Communicable diseases	87.80
6	Management of Non Communicable Diseases	95.92
7	Neonatal & Infant Health Services	97.14

## 3. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	89.47
B	Patients Right	90.48
C	Inputs	93.75
D	Support Services	92.05
E	Wellness & Clinical Services	93.68
F	Infection Control	88.71
G	Quality Management	85.71
H	Outcome	98.15

## 4. Score against each Standard :

Reference No.	Area of Concern & Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	88.24
Standard A2	The facility provides drugs and diagnostic services as mandated	100.00
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	89.29
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	88.89

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	87.50
Standard B4	The facility maintains privacy, confidentiality & dignity of patient	91.67
Standard B5	The facility ensures all services are provided free of cost to its users	100.00
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	90.63
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	92.86
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	93.75
Standard C4	The facility provides drugs and consumables required for assured services	95.00
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	100.00
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	79.17
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	85.71
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	93.75
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	96.67
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	96.30

Standard D6	The facility is compliant with statutory and regulatory requirement	100.00
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	96.43
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	92.86
Standard E3	The facility has defined and established procedures of diagnostic services.	87.50
Standard E4	The facility has defined procedures for safe drug administration.	87.50
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	88.89
Standard E6	The facility has defined and established procedures for nursing care.	100.00
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	89.58
Standard E11	The facility has defined & established procedures for management of non- communicable diseases as per operational/ clinical guidelines	98.28
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	98.53
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	90.00
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	100.00
Standard E16	The facility has established procedures for Antenatal care as per guidelines	88.00
Standard F1	The facility has established program for infection prevention and control	83.33
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	87.50
Standard F3	The facility ensures standard practices and equipment for personal protection	83.33

Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	83.33
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	93.33
Standard G1	The facility has established organizational framework for quality improvement.	78.57
Standard G2	The facility has established system for patient and employee satisfaction	83.33
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	100.00
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	81.25
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	83.33
Standard H1	The facility measures productivity indicators	100.00
Standard H2	The facility measures efficiency indicators.	100.00
Standard H3	The facility measures clinical care indicators.	100.00
Standard H4	The facility measures service quality indicators	83.33



**Summary of External Assessment Report (Appendix D)**

Name of the facility : AAM-SHC Khanoura , Patiala , Punjab  
Date of External Assessment : 13-Jun-2024 to 13-Jun-2024  
Overall Score of Health facility : 92.07 %

**1. Compliance to certification criteria**

Sl.No.	Criteria Name	Score Required	Meets Criteria
1	Aggregate score of the health facility	≥ 70 %	Criteria Met 92.07 %
2	Score of each Service Package of the health facility	≥ 70 %	Criteria Met
3	Aggregated score in each Area of Concern	≥ 60 %	Criteria Met <b>Refer Table - 3</b>
4	Score of Standard of A1,D3,D4,D5,G2	≥ 60 %	Criteria Met Standard A1 - <b>88.24%</b> Standard D3 - <b>96.88%</b> Standard D4 - <b>90.0%</b> Standard D5 - <b>96.3%</b> Standard G2 - <b>100.0%</b>
5	Individual Standard wise score	≥ 50 %	Criteria Met <b>Refer Table - 4</b>
6	Patient Satisfaction Score in the preceding quarter or more (Satisfied or Highly satisfied on Mera-Aspataal)	PSS ≥ 60 %	Criteria Met (PSS Score - 88.0%)

**2. Departmental Score :**

S.No.	Department	Score(%)
1	Care in pregnancy & Childbirth	93.55
2	Childhood & adolescent Health Services	100.00
3	Drugs & Diagnostics	83.33
4	Family Planning	92.31
5	Management of Communicable diseases	86.59
6	Management of Non Communicable Diseases	91.84
7	Neonatal & Infant Health Services	100.00

**3. Area of Concern wise Score :**

<b>S.No.</b>	<b>Area of Concern</b>	<b>Scores(%)</b>
A	Service Provision	89.47
B	Patients Right	94.05
C	Inputs	89.84
D	Support Services	92.61
E	Wellness & Clinical Services	91.38
F	Infection Control	91.94
G	Quality Management	92.86
H	Outcome	100.0

**4. Score against each Standard :**

<b>Reference No.</b>	<b>Area of Concern &amp; Standards</b>	<b>Score(%)</b>
Standard A1	The facility provides Comprehensive Primary Healthcare Services	88.24
Standard A2	The facility provides drugs and diagnostic services as mandated	100.00
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	85.71
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	94.44
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	100.00
Standard B4	The facility maintains privacy, confidentiality & dignity of patient	100.00
Standard B5	The facility ensures all services are provided free of cost to its users	100.00
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	100.00
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	100.00
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	87.50
Standard C4	The facility provides drugs and consumables required for assured services	83.33
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	83.33

Standard D1	The facility has established Programme for maintenance and upkeep of the facility	100.00
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	75.00
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	96.88
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	90.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	96.30
Standard D6	The facility is compliant with statutory and regulatory requirement	100.00
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	82.14
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	78.57
Standard E3	The facility has defined and established procedures of diagnostic services.	87.50
Standard E4	The facility has defined procedures for safe drug administration.	93.75
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	88.89
Standard E6	The facility has defined and established procedures for nursing care.	93.75
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	81.25
Standard E11	The facility has defined & established procedures for management of non- communicable diseases as per operational/ clinical guidelines	96.55

Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	100.00
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	90.00
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	100.00
Standard E16	The facility has established procedures for Antenatal care as per guidelines	92.00
Standard F1	The facility has established program for infection prevention and control	100.00
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	100.00
Standard F3	The facility ensures standard practices and equipment for personal protection	66.67
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	91.67
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	93.33
Standard G1	The facility has established organizational framework for quality improvement.	100.00
Standard G2	The facility has established system for patient and employee satisfaction	100.00
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	85.71
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	87.50
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	100.00
Standard H1	The facility measures productivity indicators	100.00
Standard H2	The facility measures efficiency indicators.	100.00
Standard H3	The facility measures clinical care indicators.	100.00
Standard H4	The facility measures service quality indicators	100.00

### Summary of External Assessment Report (Appendix A)

Name of the facility : AAM-SHC, Chowke , Bathinda , Punjab  
Date of External Assessment : 28-Jun-2024 to 28-Jun-2024 Overall  
Score of Health facility : 87.09 %

#### 1. Compliance to certification criteria

Sl.No.	Criteria Name	Score Required	Meets Criteria
1	Aggregate score of the health facility	≥ 70 %	Criteria Met 87.09 %
2	Score of each Service Package of the health facility	≥ 70 %	Criteria Met
3	Aggregated score in each Area of Concern	≥ 60 %	Criteria Met <b>Refer Table - 3</b>
4	Score of Standard of A1,D3,D4,D5,G2	≥ 60 %	Criteria Met Standard A1 - <b>73.53</b> % Standard D3 - <b>93.75</b> % Standard D4 - <b>90.0</b> % Standard D5 - <b>68.52</b> % Standard G2 - <b>66.67</b> %
5	Individual Standard wise score	≥ 50 %	Criteria Met <b>Refer Table - 4</b>
6	Patient Satisfaction Score in the preceding quarter or more (Satisfied or Highly satisfied on Mera-Aspataal)	PSS ≥ 60 %	Criteria Met (PSS Score - 90.0%)

## 2. Departmental Score :

S.No.	Department	Score(%)
1	Care in pregnancy & Childbirth	98.39
2	Childhood & adolescent Health Services	92.86
3	Drugs & Diagnostics	84.26
4	Family Planning	92.31
5	Management of Communicable diseases	89.02
6	Management of Non Communicable Diseases	83.67
7	Neonatal & Infant Health Services	95.71

## 3. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	75.0
B	Patients Right	82.14
C	Inputs	85.16
D	Support Services	84.09
E	Wellness & Clinical Services	93.68
F	Infection Control	87.1
G	Quality Management	80.36
H	Outcome	90.74

## 4. Score against each Standard :

Reference No.	Area of Concern & Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	73.53
Standard A2	The facility provides drugs and diagnostic services as mandated	87.50
Standard B1	The facility provides information to care seeker, attendants & community about available services & their modalities	71.43
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	66.67
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	100.00



Standard B4	The facility maintains privacy, confidentiality & dignity of patient	91.67
Standard B5	The facility ensures all services are provided free of cost to its users	100.00
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	87.50
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	100.00
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	81.25
Standard C4	The facility provides drugs and consumables required for assured services	81.67
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	83.33
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	95.83
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	85.71
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	93.75
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	90.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	68.52
Standard D6	The facility is compliant with statutory and regulatory requirement	87.50
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	96.43

Standard E2	The facility has defined and established procedures for continuity of care through two way referral	78.57
Standard E3	The facility has defined and established procedures of diagnostic services.	87.50
Standard E4	The facility has defined procedures for safe drug administration.	87.50
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	94.44
Standard E6	The facility has defined and established procedures for nursing care.	87.50
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	91.67
Standard E11	The facility has defined & established procedures for management of non- communicable diseases as per operational/ clinical guidelines	89.66
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	98.53
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	95.00
Standard E15	The facility provides Adolescent Reproductive and Sexual Health services as per guidelines.	100.00
Standard E16	The facility has established procedures for Antenatal care as per guidelines	100.00
Standard F1	The facility has established program for infection prevention and control	100.00
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	100.00
Standard F3	The facility ensures standard practices and equipment for personal protection	100.00
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	75.00

Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	83.33
Standard G1	The facility has established organizational framework for quality improvement.	71.43
Standard G2	The facility has established system for patient and employee satisfaction	66.67
Standard G3	The facility has established, documented, implemented and updated Standard Operating Procedures for all key processes and support services.	92.86
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	87.50
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	66.67
Standard H1	The facility measures productivity indicators	100.00
Standard H2	The facility measures efficiency indicators.	100.00
Standard H3	The facility measures clinical care indicators.	80.00
Standard H4	The facility measures service quality indicators	83.33

