



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 09-Jul-2024

Subject: National Quality Certification of one (01) Public Health facility of Punjab under NQAS

Dear Sir,

At the outset, I congratulate you and your state team for taking up one (01) public Health Facility 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 Naranwali (Gurdaspur)	12-Mar-2024	7 Mandatory Service Packages	Met 6 out of 6 Criteria	88.82 %	Quality Certified

Hence, AAM SHC Naranwali (Gurdaspur) in the State of Punjab are granted 'Quality Certified' under NQAS Program.

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.

Summary of the Assessment Reports of aforementioned facility is enclosed as Annexure A

With regards

Yours Sincerely,

Sh. Varinder Kumar Sharma

The Mission Director (NHM),
State Quality Assurance Unit,
O/O Punjab Health Systems Corporation 2nd Floor,
Block E, PSEB Building, Phase 8,
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Copy to:

1. Mission Director (NHM), Department of (H&FW), Government of Punjab, O/o Punjab Health Systems Corporation 2nd Floor, Block E, PSEB Building, Phase 8, S.A.S Nagar, Punjab 160062
2. State Quality Assurance Unit, Department of Health & Family Welfare, Government of Punjab
3. Community Health Officer, AAM- SHC Naranwali Block Kalanaur

Summary of External Assessment Report (Annexure A)

Name of the facility : AAM-SHC, Naranwali , Gurdaspur , Punjab
 Date of External Assessment : 12-Mar-2024 to 12-Mar-2024
 Overall Score of Health facility : 88.82 %

1. Compliance to certification criteria

Sl.No.	Criteria Name	Score Required	Meets Criteria
1	Aggregate score of the health facility	≥ 70 %	Criteria Met 88.82 %
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 - 89.71 % Standard D3 - 100.0 % Standard D4 - 100.0 % Standard D5 - 100.0 % Standard G2 - 66.67 %
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 - 92.0%)

2. Departmental Score :

S.No.	Department	Score(%)
1	Care in pregnancy & Childbirth	96.77
2	Childhood & adolescent Health Services	85.71
3	Drugs & Diagnostics	87.96
4	Family Planning	73.08
5	Management of Communicable diseases	86.59
6	Management of Non Communicable Diseases	88.78
7	Neonatal & Infant Health Services	92.86

3. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	89.47
B	Patients Right	95.24
C	Inputs	89.06
D	Support Services	97.73
E	Wellness & Clinical Services	84.2
F	Infection Control	90.32
G	Quality Management	66.07
H	Outcome	100.0

4. Score against each Standard :

Reference No.	Area of Concern & Standards	Score(%)
Service Provision		
Standard A1	The facility provides Comprehensive Primary Healthcare Services	89.71
Standard A2	The facility provides drugs and diagnostic services as mandated	87.50
Patients Right		
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	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	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
Inputs		
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	96.88
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	100.00
Standard C4	The facility provides drugs and consumables required for assured services	85.00
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	50.00
Support Services		
Standard D1	The facility has established Programme for maintenance and upkeep of the facility	91.67
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	92.86

Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	100.00
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
Wellness & Clinical Services		
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	71.43
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	71.43
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.	81.25
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	77.78
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	77.08
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	91.38
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	88.24
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	65.00
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	96.00
Infection Control		

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.	100.00
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	80.00
Quality Management		
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.	71.43
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	62.50
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	50.00
Outcome		
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