



National Health Systems Resource Centre

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



NHSRC/CU/23-24/CG
26-Nov-2024

To,
Mission Director,
Department of (H&FW) Government of Chhattisgarh
Housing Board Commercial Complex 4th Floor Sector-27,
North-East Corner,
Atal Nagar Chhattisgarh-492015

Subject: Virtual Quality Certification of (07) Public Health Facilities of Chhattisgarh under NQAS Programme

Dear Sir/Madam

At the outset, I congratulate you and your state team for taking up (07) Public Health Facilities in the state of Chhattisgarh for virtual certification under NQAS Certification, as listed in the table. The facilities underwent External Assessment by the empanelled external assessors. The assessment details are given below:

S. No.	Name of Facility	Date of Assessment	Mode of Assessment	Departments/Packages	Overall Score	Certification Status
1	AAM-SHC Khairpur, Raigarh	12-Nov-2024	Virtual	7 Mandatory Service Packages	89.99 %	Quality Certified
2	AAM-SHC Bhatgaon. Bemetara	09-Nov-2024	Virtual	12 Service Packages	87.46 %	Quality Certified
3	AAM-SHC Khopali, Mahasamund	11-Nov-2024	Virtual	12 Service Packages	92.69 %	Quality Certified
4	AAM-SHC Baldar Siwni, Raipur)	16-Nov-2024	Virtual	12 Service Packages	90.99 %	Quality Certified
5	AAM-SHC Bhatbera, Baloda Bazar	18-Nov-2024	Virtual	12 Service Packages	84.00 %	Quality Certified
6	AAM-SHC Kendudhar, Mahasamund	18-Nov-2024	Virtual	12 Service Packages	90.48 %	Quality Certified
7	AAM-SHC Seoni-kala, Mahasamund	13-Nov-2024	Virtual	12 Service Packages	94.42 %	Quality Certified

Hence, above mentioned public health facility in state of Chhattisgarh are granted 'Quality Certified' 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 Reports of aforementioned facilities is enclosed as Appendices A-G respectively.

Thanking You

Yours Sincerely,



J N Srivastava
Advisor, QPS (CU)

Copy to:

- 1.** State Nodal Officer, Quality Assurance, Department of (H&FW) Government of Chhattisgarh
Housing Board Commercial Complex 4th Floor Sector-27, North-East Corner, Atal Nagar
Chhattisgarh-492015
- 2.** Community Health Officer, AAM-SHC Kairpur, Raigarh, Chhattisgarh
- 3.** Community Health Officer, AAM-SHC Bhatgaon, Bemetara, Chhattisgarh
- 4.** Community Health Officer, AAM-SHC Khopali, Mahasamund, Chhattisgarh
- 5.** Community Health Officer, AAM-SHC Baldar Siwani, Raipur, Chhattisgarh
- 6.** Community Health Officer, AAM-SHC Bhatbera, Baloda Bazar, Chhattisgarh
- 7.** Community Health Officer, AAM-SHC Kendudhar, Mahasamund, Chhattisgarh
- 8.** Community Health Officer, AAM-SHC Seoni Kala, Mahasamund, Chhattisgarh

Summary of External Assessment Report (Appendix A)

Name of the facility: AAM-SHC Khairpur, Raigarh, Chhattisgarh

Date of External Assessment: 12-Nov-2024 to 12-Nov-2024

Overall Score of Health facility: 89.99 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	82.00	25.00	20.50
2	Virtual assessment score of the facility	93.47	40.00	37.39
3	Patient Satisfaction Score	86.00	5.00	4.30
4	Service Availability	91.89	10.00	9.19
5	Drugs Availability (Standard C4)	98.15	10.00	9.81
6	Diagnostic Availability (Standard C5)	83.33	5.00	4.17
7	Outcome Indicators	92.59	5.00	4.63
Total				89.99

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	91.89
B	Patients Right	98.08
C	Inputs	93.27
D	Support Services	90.91
E	Wellness & Clinical Services	94.48
F	Infection Control	88.46
G	Quality Management	97.62
H	Outcome	92.59

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	92.42
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	93.75
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	100.00

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	85.00
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	91.67
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	91.67
Standard C4	The facility provides drugs and consumables required for assured services	98.15
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	94.44
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	88.89
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	90.91
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	88.46
Standard D6	The facility is compliant with statutory and regulatory requirement	66.67
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	100.00
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.	75.00

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 E7	The facility has defined and established procedures for Emergency care	90.00
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	93.75
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	96.43
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	98.15
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	81.25
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	92.86
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	100.00
Standard F3	The facility ensures standard practices and equipment for personal protection	75.00
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.	91.67
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	100.00
Standard G5	Facility has defined Mission, Values, Quality policy and Objectives, and approved plan to achieve them.	75.00
Standard H1	The facility measures productivity indicators	100.00
Standard H2	The facility measures efficiency indicators.	71.43
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 Bhatgaon , Bemetara , Chhattisgarh

Date of External Assessment: 09-Nov-2024 to 09-Nov-2024

Overall Score of Health facility: 87.46 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	85.00	25.00	21.25
2	Virtual assessment score of the facility	89.67	40.00	35.87
3	Patient Satisfaction Score	96.00	5.00	4.80
4	Service Availability	93.40	10.00	9.34
5	Drugs Availability (Standard C4)	89.39	10.00	8.94
6	Diagnostic Availability (Standard C5)	66.67	5.00	3.33
7	Outcome Indicators	78.57	5.00	3.93
Total				87.46

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	93.40
B	Patients Right	94.23
C	Inputs	85.48
D	Support Services	93.64
E	Wellness & Clinical Services	90.00
F	Infection Control	84.62
G	Quality Management	93.10
H	Outcome	78.57

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	92.86
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	87.50
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	100.00
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	90.00
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	81.82
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	83.33
Standard C3	Facility has a defined and established procedure for effective utilization, evaluation and augmentation of competence and performance of staff	91.67
Standard C4	The facility provides drugs and consumables required for assured services	89.39
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	88.89
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	88.89
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	95.45
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	96.15
Standard D6	The facility is compliant with statutory and regulatory requirement	83.33
Standard E1	The facility has defined procedures for registration, consultation, clinical assessment and reassessment of the patients	88.89
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	91.67
Standard E3	The facility has defined and established procedures of diagnostic services.	100.00
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	100.00
Standard E6	The facility has defined and established procedures for nursing care.	78.57

Standard E7	The facility has defined and established procedures for Emergency care	60.00
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	83.33
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	70.00
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	92.86
Standard E12	Elderly & palliative health care services are provided as per guidelines	77.78
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	87.04
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	93.75
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 E17	The facility has established procedure for intranatal care as per guidelines	95.83
Standard E18	The facility has established procedure for post natal Care	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	50.00
Standard F4	The facility has standard procedures for disinfection and sterilization of equipment and instruments.	66.67
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	91.67

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.	88.46
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	93.75
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	62.50
Standard H2	The facility measures efficiency indicators.	100.00
Standard H3	The facility measures clinical care indicators.	70.00
Standard H4	The facility measures service quality indicators	100.00

Summary of External Assessment Report (Appendix C)

Name of the facility: AAM-SHC Khopali, Mahasamund, Chhattisgarh

Date of External Assessment: 11-Nov-2024 to 11-Nov-2024

Overall Score of Health facility: 92.69 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	91.00	25.00	22.75
2	Virtual assessment score of the facility	95.09	40.00	38.04
3	Patient Satisfaction Score	94.00	5.00	4.70
4	Service Availability	93.40	10.00	9.34
5	Drugs Availability (Standard C4)	87.88	10.00	8.79
6	Diagnostic Availability (Standard C5)	83.33	5.00	4.17
7	Outcome Indicators	98.21	5.00	4.91
Total				92.69

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	93.40
B	Patients Right	100.00
C	Inputs	91.13
D	Support Services	95.45
E	Wellness & Clinical Services	96.25
F	Infection Control	90.38
G	Quality Management	94.83
H	Outcome	98.21

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	92.86
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	100.00
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	100.00
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	91.67
Standard C4	The facility provides drugs and consumables required for assured services	87.88
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	94.44
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	100.00
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	90.91
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	92.31
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	94.44
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	100.00
Standard E3	The facility has defined and established procedures of diagnostic services.	100.00
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	92.86
Standard E6	The facility has defined and established procedures for nursing care.	92.86

Standard E7	The facility has defined and established procedures for Emergency care	90.00
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	94.44
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	90.00
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	95.83
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	96.43
Standard E12	Elderly & palliative health care services are provided as per guidelines	100.00
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	92.59
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 E17	The facility has established procedure for intranatal care as per guidelines	100.00
Standard E18	The facility has established procedure for post natal Care	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.	83.33
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	87.50

Standard G1	The facility has established organizational framework for quality improvement.	87.50
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.	96.15
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	93.75
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.	95.00
Standard H4	The facility measures service quality indicators	100.00

Summary of External Assessment Report (Appendix D)

Name of the facility: SHC Baldar Siwni , Raipur , Chhattisgarh

Date of External Assessment: 16-Nov-2024 to 16-Nov-2024

Overall Score of Health facility: 90.99 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	87.00	25.00	21.75
2	Virtual assessment score of the facility	93.63	40.00	37.45
3	Patient Satisfaction Score	93.00	5.00	4.65
4	Service Availability	94.34	10.00	9.43
5	Drugs Availability (Standard C4)	95.45	10.00	9.55
6	Diagnostic Availability (Standard C5)	66.67	5.00	3.33
7	Outcome Indicators	96.43	5.00	4.82
Total				90.99

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	94.34
B	Patients Right	92.31
C	Inputs	91.94
D	Support Services	90.91
E	Wellness & Clinical Services	95.75
F	Infection Control	86.54
G	Quality Management	91.38
H	Outcome	96.43

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	94.90
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	81.25
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	91.67

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	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	95.45
Standard C2	The facility has adequate qualified and trained staff required for providing the assured services as per current case load	83.33
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	95.45
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	100.00
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	94.44
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.	80.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	84.62
Standard D6	The facility is compliant with statutory and regulatory requirement	83.33
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	91.67
Standard E3	The facility has defined and established procedures of diagnostic services.	100.00
Standard E4	The facility has defined procedures for safe drug administration.	83.33

Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	85.71
Standard E6	The facility has defined and established procedures for nursing care.	92.86
Standard E7	The facility has defined and established procedures for Emergency care.	100.00
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	100.00
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	60.00
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	100.00
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	100.00
Standard E12	Elderly & palliative health care services are provided as per guidelines	83.33
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	92.59
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 E17	The facility has established procedure for intranatal care as per guidelines	100.00
Standard E18	The facility has established procedure for post natal Care	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.	83.33

Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	79.17
Standard G1	The facility has established organizational framework for quality improvement.	75.00
Standard G2	The facility has established system for patient and employee satisfaction	75.00
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	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	66.67

Summary of External Assessment Report (Appendix E)

Name of the facility: AAM-SHC Bhatbera , Baloda Bazar , Chhattisgarh

Date of External Assessment: 18-Nov-2024 to 18-Nov-2024

Overall Score of Health facility: 84.00 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	71.00	25.00	17.75
2	Virtual assessment score of the facility	87.27	40.00	34.91
3	Patient Satisfaction Score	88.67	5.00	4.43
4	Service Availability	90.57	10.00	9.06
5	Drugs Availability (Standard C4)	96.97	10.00	9.70
6	Diagnostic Availability (Standard C5)	66.67	5.00	3.33
7	Outcome Indicators	96.43	5.00	4.82
Total				84.00

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	90.57
B	Patients Right	96.15
C	Inputs	91.13
D	Support Services	78.18
E	Wellness & Clinical Services	86.50
F	Infection Control	67.31
G	Quality Management	96.55
H	Outcome	96.43

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	91.84
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	100.00
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	100.00
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	75.00

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	90.91
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	75.00
Standard C4	The facility provides drugs and consumables required for assured services	96.97
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	72.22
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	55.56
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	86.36
Standard D4	The facility has defined and established procedures for hospital transparency and accountability.	80.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	84.62
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	83.33
Standard E2	The facility has defined and established procedures for continuity of care through two way referral	75.00
Standard E3	The facility has defined and established procedures of diagnostic services.	100.00
Standard E4	The facility has defined procedures for safe drug administration.	75.00
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	78.57
Standard E6	The facility has defined and established procedures for nursing care.	85.71

Standard E7	The facility has defined and established procedures for Emergency care	90.00
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	80.56
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	70.00
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	93.75
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	92.86
Standard E12	Elderly & palliative health care services are provided as per guidelines	55.56
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	88.89
Standard E14	The facility has established procedures for family planning as per government guidelines and law.	81.25
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	88.10
Standard E17	The facility has established procedure for intranatal care as per guidelines	100.00
Standard E18	The facility has established procedure for post natal Care	100.00
Standard F1	The facility has established program for infection prevention and control	66.67
Standard F2	The facility has defined and Implemented procedures for ensuring hand hygiene practices	50.00
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.	83.33
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	58.33

Standard G1	The facility has established organizational framework for quality improvement.	87.50
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.	96.15
Standard G4	The facility has established system of periodic review of clinical, support and quality management processes	100.00
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.	90.00
Standard H4	The facility measures service quality indicators	100.00

Summary of External Assessment Report (Appendix F)

Name of the facility: AAM-SHC Kendudhar, Mahasamund , Chhattisgarh

Date of External Assessment: 18-Nov-2024 to 18-Nov-2024

Overall Score of Health facility: 90.48 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	92.00	25.00	23.00
2	Virtual assessment score of the facility	91.44	40.00	36.58
3	Patient Satisfaction Score	91.00	5.00	4.55
4	Service Availability	88.68	10.00	8.87
5	Drugs Availability (Standard C4)	90.91	10.00	9.09
6	Diagnostic Availability (Standard C5)	75.00	5.00	3.75
7	Outcome Indicators	92.86	5.00	4.64
Total				90.48

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	88.68
B	Patients Right	100.00
C	Inputs	87.90
D	Support Services	90.00
E	Wellness & Clinical Services	91.50
F	Infection Control	90.38
G	Quality Management	98.28
H	Outcome	92.86

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	88.78
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	100.00
Standard B2	Facility ensures services are accessible to care seekers and visitors including those required some affirmative action	100.00
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	77.27
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	91.67
Standard C4	The facility provides drugs and consumables required for assured services	90.91
Standard C5	Facility has adequate functional equipment and instruments for assured list of services	75.00
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	66.67
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.	95.00
Standard D5	The facility ensures health promotion and disease prevention activities through community mobilization	84.62
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	75.00
Standard E3	The facility has defined and established procedures of diagnostic services.	100.00
Standard E4	The facility has defined procedures for safe drug administration.	91.67
Standard E5	The facility follows standard treatment guidelines and ensures rational use of drugs	85.71
Standard E6	The facility has defined and established procedures for nursing care.	100.00

Standard E7	The facility has defined and established procedures for Emergency care	80.00
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	80.56
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	80.00
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	96.43
Standard E12	Elderly & palliative health care services are provided as per guidelines	100.00
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	90.74
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	85.71
Standard E17	The facility has established procedure for intranatal care as per guidelines	100.00
Standard E18	The facility has established procedure for post natal Care	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.	83.33
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	87.50

Standard G1	The facility has established organizational framework for quality improvement.	87.50
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	100.00
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.	80.00
Standard H4	The facility measures service quality indicators	100.00

Summary of External Assessment Report (Appendix H)

Name of the facility: AAM-SHC Seoni-kala , Mahasamund , Chhattisgarh

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

Overall Score of Health facility: 94.42 %

1. Compliance to certification criteria

Criterion No.	Certification Criteria	Score (%)	Weightage (%)	Marks obtained
1	State certification score of the facility	94.00	25.00	23.50
2	Virtual assessment score of the facility	95.62	40.00	38.25
3	Patient Satisfaction Score	94.00	5.00	4.70
4	Service Availability	97.17	10.00	9.72
5	Drugs Availability (Standard C4)	90.91	10.00	9.09
6	Diagnostic Availability (Standard C5)	83.33	5.00	4.17
7	Outcome Indicators	100.00	5.00	5.00
Total				94.42

2. Area of Concern wise Score :

S.No.	Area of Concern	Scores(%)
A	Service Provision	97.17
B	Patients Right	88.46
C	Inputs	90.32
D	Support Services	91.82
E	Wellness & Clinical Services	97.50
F	Infection Control	98.08
G	Quality Management	98.28
H	Outcome	100.00

3. Score against each Standard :

Reference No	Standards	Score(%)
Standard A1	The facility provides Comprehensive Primary Healthcare Services	96.94
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	81.25
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	90.00
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	86.36
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	91.67
Standard C4	The facility provides drugs and consumables required for assured services	90.91
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	94.44
Standard D2	The facility has defined procedures for storage, inventory management and dispensing of drugs	94.44
Standard D3	The facility has defined and established procedure for clinical records and data management with progressive use of digital technology	95.45
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	76.92
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	100.00
Standard E3	The facility has defined and established procedures of diagnostic services.	100.00

Standard E4	The facility has defined procedures for safe drug administration.	91.67
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 E7	The facility has defined and established procedures for Emergency care	100.00
Standard E8	The facility has defined & established procedures for management of ophthalmic, ENT and Oral ailments as per operational/ clinical guidelines	100.00
Standard E9	The facility has defined & established procedure for screening & basic management of Mental Health ailments as per Operational/ clinical guidelines	90.00
Standard E10	The facility has defined & established procedures for management of communicable diseases as per operational/ clinical guidelines	100.00
Standard E11	The facility has defined & established procedures for management of non-communicable diseases as per operational/ clinical guidelines	92.86
Standard E12	Elderly & palliative health care services are provided as per guidelines	83.33
Standard E13	The facility has established procedures for care of new born, infant and child as per guidelines	98.15
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 E17	The facility has established procedure for intranatal care as per guidelines	100.00
Standard E18	The facility has established procedure for post natal Care	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.	100.00
Standard F5	The facility has defined and established procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste.	95.83
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	93.75
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