UPHC Quality Score Card					
Dressing Room & Emergency	General Clinic	New Born & Child Health			
50.0	50.0 50.0		50.0		
Immunization	UPHC	UPHC Score			
50.0	31113	50.0			
Communicable Disease	50	).0	Non Communicable Disease		
50.0	30		50.0		
Outreach	Pharmacy	Laboratory	General Administration		
50.0	50.0	50.0	0.0		

HOSPITAL QUALITY SCORE CARD					
	AREA OF CONCERN WISE				
Service Provision	Patient Rights	Inputs	Support Services		
50.0%	50.0%	50.0%	50.0%		
	HOSPITA	AL SCORE			
	50.0%				
Clinical Services	Infection Control	Quality Management	Outcome		
50.0%	50.0%	50.0%	50.0%		

Standard A1	Facility provides Promotive, preventive and curative services
Standard A2	The facility provides RMNCHA Services
Standard A3	The Facility provides Diagnostic Services, Para-clinical & support services.
Standard A4	The facility provide services as mandated in National Health Programmes, state scheme and local requirement.

50% 50%

50%

50%

Standard A5	The facility provides services as per local needs / State specific health programmes as per guidelines
Standard B1	The service provided at facility are accessible
Standard B2	The service provided at facility are acceptable
Standard B3	The service provided at facility are affordable
Standard C1	The facility has adequate & Safe infrastructure for delivery of assured services and meets the prevalent norms
Standard C2	The facility has adequate qualified and trained staff, required for providing the assured services to the current case load
Standard C3	The facility provides drugs and consumables required for assured services.
Standard C4	The facility has equipment & instruments required for assured list of services.
Standard D1	The facility has established facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users
Standard D2	Facility has defined procedure for storage, Inventory Management & dispensing of drugs in pharmacy
Standard D3	Facility has defined & established procedure for Community Participation for providing assured services
Standard D4	Facility has defined procedure for Governance & work Management
Standard D5	Facility has procedure for collecting & Reporting of the health facility related information
Standard E1	The facility has defined procedures for registration and consultation of patients.
Standard E2	Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records
Standard E 3	Facility has defined & implemented procedures for Drug administration and standard treatment guideline as mandated by Government
Standard E4	Facility has defined & establish procedure for Diagnostic Services
Standard E5	The facility has establish procedure for Maternal health care as per guideline
Standard E6	Facility has established procedure for care of New born & Child as per guideline
Standard E7	Facility has establish procedure for Family Planning as per Govt guideline
Standard E8	Facility provides Adolescent reproductive & sexual health services as per guideline
Standard E9	Facility provides National Health Programmes as per operational/clinical guidelines of the Government
Standard F1	Facility has defined & implemented procedure for ensuring Hand hygiene practices & asepsis
Standard F2	Facility ensures availability of Personal Protective equipment & follows standard precautions.
Standard F3	Facility has standard procedure for disinfection & sterilization of equipment & instrument
Standard F4	Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste
Standard G.1	Facility has established quality Assurance Program as per state/National guidelines
Standard G.2	Facility has established system for Patients and employees satisfaction
Standard G3	Facility has established ,documented &implemented standard operating procedure system for its all key processes .
Standard H1	The facility measures its productivity, efficiency, clinical care & service Quality indicators
Standard H2	Facility endeavours to improve its performance to meet bench marks

50% 51% 50% 50% 50% 50% 50%

	National Quality A	ssurance Standards for I	U - PHC		1	
		Checklist	t for Genera	al Clinic		
eference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks
		Area of Concern				
tandard A1		Facility provides Promotive	, preventive	and curative se	rvices	
ME A1.1	The facility provides treatment of common ailments	Availability of Consultation services for common illnesses	1	rr/si	Common Cold, Fever, Diarrhoea, Respiratory tract infections, Bronchial Asthma, conjunctivitis, foreign body in conjunctival sac, etc.	
ИЕ A1.3	The facility provides AYUSH Services	Functional & dedicated AYUSH clinic	1	RR/SI	Ayurveda, Unani, Siddha, Homeopathy, Naturopathy as per State Guidelines	
<b>ЛЕ А1.4</b>	Services are available for the time period as mandated	OPD Services are available for at least 8 Hours in a day	1	RR/SI	It may be 12 noon to 8 PM/ it may be morning & evening OPD. Give full compliance if evening OPD is there	
tandard A2		The facility prov			<u> </u>	
ΛΕ A2.5		, ,	1		DELETED	
Standard A5	The facility provide	es services as per local needs	/ State speci	fic health prog	rammes as per guidelines	
WE A5.2	Facility provides services as per local needs/ state specific health programmes as per	Availability of OPD services for diseases, specifically prevalent locally	1	RR/SI		
	guidelines	Area of Concer	n P Dation	<u> </u>		
tandard B1		The service provide				
tundard 51		Patient is informed about the	d at lacinty a	le decessible		
ME B1.7	Information about the treatment is shared with patients or attendants and consent is taken wherever required	diagnosis & Treatment Plan	1	PI/RR		
		A copy of OPD Slip/ Prescription containing Diagnosis & treatment plan, is given to patient	1	RR		
		Method of Administration /taking of the medicines is informed to patient/ their relative as per prescription				
			1	PI/RR		
ИЕ В1.8	Access to facility is provided without any physical barrier	There is no overcrowding in general Clinic	1	ОВ		
tandard B2		The service provide	d at facility a	re acceptable		
VIE B2.1	Services are provided in manner that are sensitive to gender	Availability of female staff / attendant, if a male doctor examines a female patients		0.1		
		Availability of Breast Feeding Corner	1	SI/OB OB		
ИЕ B2.2	Adequate visual privacy is provided at every point of care	Availability of screen/ curtains	1	ОВ	Check examination area & also door & window	
	o. care	One Patient is seen at a time in the clinic	1	OB		
		One clinic is not shared by two doctors at a time	1	ОВ		

		1			1	T
	Confidentiality of	Patient records are kept in			Check Patient records e.g.OPD	
	patients' records and	safe custody in General Clinic			register, OPD slips are kept in	
ME B2.3	· ·				safe custody and are not	
	clinical information is				accessible to unauthorized	
	maintained		1	OB/SI	patients	
					patients	
Standard B3		The service provide	d at facility a	re affordable		
		Check for BPL patients, Daily				
	The facility provide free	wagers, homeless, slum				
	of cost treatment to all	dwellers & migratory				
ME B3.2	patients without	Population etc. are not				
	administrative hassles	charged for any services				
		, , , , , , , , , , , , , , , , , , , ,	1	PI/RR/SI		
		Area of Co	ncern - C In	puts		
	The facility has aden	uate & Safe infrastructure fo			as and meets the provalent	
Standard C1	The facility has adeq		norms	assureu servic	es and meets the prevalent	
	Departments have	Clinics have adequate space	1		Adequate Space in Clinics (120	
ME C1.1	adequate space as per	for consultation and	_		sq ft)	
	patient load	examination		OB/SI	34 1.17	
	Amenities for Patients &	Availability of waiting area	1	05/0.		
ME C1.2	Staff are available as per	andonicy of waiting area	_			
	load			ОВ		
	ioau	Availability of seating	1	OB	1	
			1	ОВ		
		arrangement	1	OB		
		Availability of Fans, Warmers	1			
		facilities as per need		65		
				ОВ		
		Availability of clean drinking	1			
		water facilities		ОВ		
		Availability of clean &	1			
		functional toilets		OB		
	Departments have layout	There is functional	1			
ME C1.3	and demarcated areas as	registration counter, which is				
IVIL CI.S	per functions	manned during OPD hours				
	per runetions			OB/SI		
		Dedicated Clinics for OPD	1			
		Consultation and counselling				
				ОВ		
		Dedicated examination area	1			
		is provided for each clinic				
				OB		
		Dedicated Clinic for AYUSH	1			
		Doctor		ОВ		
	The Court of the C	General clinic does not have	1		Switch Boards all other	
N. C. C.	The facility ensures	temporary connections and			electrical installations are intact	
ME C1.5	safety of electrical	loosely hanging wires			&secure	
	installations			ОВ		
	Physical condition of	Floor of General Clinic is non	1			
ME C1.6	buildings are safe for	slippery and even				
	providing patient care			ОВ		
		wate musikhad and t	- ee ·		Abo assumed somition to all	
Standard C2	The facility has adeq	uate qualified and trained st curre	aff, required nt case load	Tor providing	the assured services to the	
	The facility has adequate	Availability of Doctors for	1		One MO and one Ayush doctor	
	medical officers as per	consultation during OPD			for a minimum of six hours per	
ME C2.1	service provision and	hours			day and for six days in a week	
	work load					
	WUIKIUdu			SI/RR	<u>                                     </u>	
	The Staff has been					
	imparted necessary				Check training is provided for	
A45 02 4	trainings/skill set to				AFHS (to MO & staff nurse),	
ME C2.4	enable them to meet				Standard treatment guideline &	
	their roles &	Training of MO, Staff nurse,			prescription writing (to medical	
	responsibilities	ANM	1	RR	officer)	
		Check competency of the			,	
	The Staff is skilled and	staff to use OPD equipment				
ME C2.5	competent as per job	like BP apparatus, etc.			Check the staff competency for	
	description	D. apparatus, etc.	1	SI	trouble shooting measures	
Standard C4	The fac	ility has equipment & instrur	ments require	d for assured	list of services.	

ME C4.1	Availability of equipment & instruments for examination & monitoring of patients	Availability of functional Equipment & Instruments at OPD clinic	1		BP apparatus, Thermometer, Weighing machine, Torch, Stethoscope, measuring tape, Snellen's chart, X-ray view box, Tongue Depressor, Otoscope, Height chart etc.	
ME C4.5	Availability of patient furniture and fixtures as per load and service	Availability of furniture at clinics	1	OB	Doctors Chair, Patient Stool, Examination Table, Attendant Chair, Table, Footstep, cupboard	
	provision		5.0	OB		
		Area of Concerr	ו - ט Suppoi	t Services		
Standard D1		lished facility management practice to provide safe 8	_			
ME D1.3	Patient care areas are clean and hygienic	Floors, walls, roof , sinks patient care and corridors are Clean	1	ОВ	All area are clean with no dirt,grease,littering and cobwebs	
		Surface of furniture and	1			
		fixtures are clean Toilets are clean with functional flush and running water	1	OB OB		
ME D1.4	Facility infrastructure is adequately maintained	Fixtures and Patient Furniture are intact and maintained in OPD	1	ОВ		
ME D1.5	Facility has policy of removal of condemned junk material	No condemned/Junk material in the OPD	1	ОВ	Check for availability of condemnation policy & its adherence	
Standard D4	Fac	ility has defined procedure	for Governan	ce & work Ma	nagement	
ME D4.8	The facility has a defined protocol for the issue of medical certificates	Check Medical Certificate are issued as per defined criteria	1	RR/SI/PI	Check cycle time to issue medical certificate, check records & also denial policy	
		Area of Concer	n - E Clinica	l Services		
Standard E1	The facili	ty has defined procedures fo	r registration	and consulta	tion of patients.	
	-1 5	Unique identification				
ME E1.1	The facility has established procedure for registration of patients	number is given to each patient during process of registration	1	RR/SI		
		Patient demographic details are recorded in OPD registration records	1	RR/SI	Check for that patient demographics like Name, age, Sex, Address etc.	
ME E1.2	The facility has an established procedure for OPD consultation	There is procedure for systematic calling of patients one by one		,-	Patient is called by Doctor/attendant as per his/her turn on the basis of "first come first examine" basis.	
		Every patient is offered a seat and is examined as per	1	OB	No patient is consulted in standing position	
		clinical condition Clinical staff is not engaged	1	ОВ		
		in administrative work during OPD hrs	1	OR		
Standard E2	Facility has defined prod	in administrative work during OPD hrs cedure for primary managen	1 nent and con	OB	with appropriate maintenance	
Standard E2 ME E2.1	There is established procedure for initial assessment &	in administrative work during OPD hrs cedure for primary managen	nent and con	tinuity of care	with appropriate maintenance	
	There is established procedure for initial	in administrative work during OPD hrs cedure for primary managen of Patient History is taken and	nent and con records		with appropriate maintenance	

					0 16 11 1111	
		There is a system of referring	1		Check for practice, availability	
	appropriate referral	patient from OPD to higher			of referral slip, is there any	
	linkages for transfer to	centre for specialist			information about the specialist	
ME E2.2	other/higher facilities to	consultation			doctors and there timings and	
		00110411411011			-	
	assure the continuity of			DD /C1	day available	
	care.			RR/SI		
		There is system of follow up	1			
ME E2.3	Facility ensures follow up	of the patients referred to				
VIE EZ.3	of patients	higher facilities				
	, , , , , , ,	8		RR/SI		
		Prescription & treatment	1	Tury 51		
	Clinical records are	•	1			
ME E2.7	updated for care provided	plan is documented				
	apaatea for care provided			RR/SI		
			1			
		Check OPD slip, Prescription				
		is updated for follow up visits		RR/SI		
	The facility consumes that	is apaated for follow up visits	- 1	IIII/J		
	The facility ensures that		1			
	standardised forms and					
ME E2.8	formats are used for all					
	purposes including	Check availability of			OPD slip, OPD Register, Lab	
	registers	standardize forms & Register		RR/OB	requisition form, referral slip	
	гевізістэ		4	MIYUB	requisition form, referral stip	
		Records are labelled and	1	l		
		indexed		RR/OB		
	The facility ensures safe	Adequate facility for storage	1			<u></u>
	and adequate storage	of records				
ME E2.9	and retrieval of medical					
				05		
	records			ОВ	<u> </u>	
	Facility has defined & in	nplemented procedures for	Drug adminis	tration and st	andard treatment guideline as	
Standard E 3			by Governm		•	
		mandacco	by Covernin	Cit		
					1	
	Medication orders are	Check every Medical				1
ME 52.4		advice and procedure is				1
ME E3.1	written legibly and	accompanied with date,				1
	adequately		_		000 11	
		time and signature	1	RR/OB	OPD slip	
		Check prescription are				
		written legibly &				
						1
		comprehendible by the				
		comprehendible by the	1	pp/Op		
		clinical staff	1	RR/OB		
	The facility ensures that	clinical staff Check for OPD slip if drugs	1	RR/OB		
ME 52.4	The facility ensures that	clinical staff	1	RR/OB		
ME E3.4	drugs are prescribed in	clinical staff Check for OPD slip if drugs	1	RR/OB		
ME E3.4		clinical staff Check for OPD slip if drugs are prescribed under generic				
ME E3.4	drugs are prescribed in	clinical staff Check for OPD slip if drugs are prescribed under generic name only	1	RR/OB	Ask the eases in which dotter	
ME E3.4	drugs are prescribed in generic name only	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are			Ask the cases in which doctor	
	drugs are prescribed in generic name only  There is procedure of	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of			Ask the cases in which doctor prescribe the antibiotics.	
	drugs are prescribed in generic name only	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are				
	drugs are prescribed in generic name only  There is procedure of	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of				
	drugs are prescribed in generic name only  There is procedure of rational use of drugs	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics	1	RR/OB		
	drugs are prescribed in generic name only  There is procedure of rational use of drugs	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant	1	RR/OB		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant Standard treatment	1	RR/OB		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at	1	RR/OB RR/SI		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant Standard treatment	1	RR/OB		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at	1	RR/OB RR/SI		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the	1	RR/OB RR/SI		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per	1 1	RR/OB RR/SI RR/SI		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG	1	RR/OB RR/SI		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs	1 1	RR/OB RR/SI RR/SI		
ME E3.5	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG	1 1	RR/OB RR/SI RR/SI		
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ME E3.5 ME E3.6	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1 1 1 1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	
ME E3.5 ME E3.6	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only Check for Doctors are sensitized for rational use of drugs especially antibiotics Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs	1 1 1 1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	
VIE E3.5 VIE E3.6 Standard E8	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1 1 1 1 tive & sexual	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
VIE E3.5 VIE E3.6 Standard E8	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  tive & sexual  1	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
VIE E3.5 VIE E3.6 Standard E8	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1 1 1 1 tive & sexual	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
ME E3.5  ME E3.6  Standard E8	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  tive & sexual  1	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
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ME E3.5  ME E3.6  Standard E8	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  tive & sexual  1  1  1  1  1  1  1  1  1  1  1  1  1	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
ME E3.5  ME E3.6  Standard E8	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
ME E3.5  ME E3.6  Standard E8  ME E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  tive & sexual  1  1  1  1  1  1  1  1  1  1  1  1  1	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
ME E3.5  ME E3.6  Standard E8  ME E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/SI RR/SI RR/SI RR/SI	prescribe the antibiotics.	
VIE E3.5  VIE E3.6  Standard E8  VIE E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	
VIE E3.5  VIE E3.6  Standard E8  VIE E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	
VIE E3.5  VIE E3.6  Standard E8  VIE E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	
ME E3.5  ME E3.6  Standard E8  ME E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	
ME E3.4  ME E3.5  ME E3.6  Standard E8  ME E8.1  ME E8.2  ME E8.3	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/SI  RR/SI  RR/SI  RR/SI  health service	prescribe the antibiotics.	
ME E3.5  ME E3.6  Standard E8  ME E8.1	drugs are prescribed in generic name only  There is procedure of rational use of drugs  Drugs are prescribed according to Standard Treatment Guidelines	clinical staff Check for OPD slip if drugs are prescribed under generic name only  Check for Doctors are sensitized for rational use of drugs especially antibiotics  Check for that relevant Standard treatment guideline are available at point of use Check staff is aware of the drug regime and doses as per STG Check OPD ticket that drugs are prescribed as per STG	1  1  1  1  1  1  1  1  1  1  1  1  1	RR/OB  RR/SI  RR/SI  RR/SI  RR/SI	prescribe the antibiotics.	

			1			
		Area of Concern	- F Infection	n Control		
Standard F1	Facility has def	fined & implemented procedu	ure for ensuri	ng Hand hygie	ene practices & asepsis	
	Hand washing facilities	Availability of hand washing			Check for availability of wash	
ME F1.1	are provided at point of	Facility at the Point of Use		00/00	basin near the point of use	
	use	Availability of running Water	1	OB/RR	Ask to Open the tap. Ask Staff	
		Availability of fulfilling water	1	ОВ	water supply is regular	
		Availability of antiseptic soap			Check for availability/ Ask staff	
		with soap dish/ liquid			if the supply is adequate and	
		antiseptic with dispenser.	1	ОВ	uninterrupted	
		Display of Hand washing		OB	Prominently displayed above	
		Instruction at Point of Use			the hand washing facility ,	
					preferably in Local language &	
		Availability of Alcohol based	1	OB	pictorial Check for availability/ Ask staff	
		Hand rub	1	ОВ	for regular supply.	
	Staff is trained and				202 22777	
ME F1.2	adhere to standard hand	Staff adheres to standard			Ask the staff about moment of	
	washing practices	hand washing practices	1	OR/SI	hand washing & Steps of hand	
			1	OB/SI	washing to demonstrate	
Standard F2	Facility ensures	availability of Personal Prote	ective equipm	ent & follow	s standard precautions.	
	Facility ensures adequate					
ME F2.1	personal protection	available at point of use				
	equipment as per requirements		1	ОВ		
	requirements	Availability of Masks	1	OB		
	Staff adheres to	No reuse of disposable				
ME F2.2	standard personal	gloves, Masks, caps and				
	protection practices	aprons.	1	OB/SI		
Standard F3	Facility has s	tandard procedure for disinfe	ection &steril	ization of equ	pment & instrument	
		Decontamination of	1		Ask staff about how they	
	The facility ensures	Procedure surfaces	_		decontaminate the procedure	
	standard practices and materials for				surface like Examination table	
ME F3.1	decontamination and				(Wiping with .5% Chlorine	
	cleaning of instruments				solution	
	and procedures areas			SI		
		Proper Decontamination of	1			
		instruments after use			Ask staff how they	
					decontaminate the instruments like Stethoscope, Examination	
					instruments	
		1				ı
				SI		
	Facility has defined &	establish procedure for segre	gation, collec		nt & disposal of Bio medical &	
Standard F4	Facility has defined & d		gation, collect		nt & disposal of Bio medical &	
Standard F4	·	hazar	•		nt & disposal of Bio medical &	
	Facility has defined & of the facility ensures segregation of Bio		•		nt & disposal of Bio medical &	
Standard F4 ME F4.1	The facility ensures segregation of Bio Medical Waste as per	hazar  Availability of colour coded	•		nt & disposal of Bio medical &	
	The facility ensures segregation of Bio	Availability of colour coded bins at point of waste generation	•		Bins are covered	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded	dous waste	OB	Bins are covered Check Yellow bag is non	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation	dous waste	tion, treatme	Bins are covered	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags	dous waste	OB	Bins are covered Check Yellow bag is non	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines	dous waste	OB	Bins are covered Check Yellow bag is non	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines  Display of work instructions	dous waste  1  1	OB	Bins are covered Check Yellow bag is non	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines  Display of work instructions for segregation and handling	dous waste  1  1	OB	Bins are covered Check Yellow bag is non	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines  Display of work instructions	dous waste  1  1	OB	Bins are covered Check Yellow bag is non	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines  Display of work instructions for segregation and handling	1 1 1	OB OB	Bins are covered Check Yellow bag is non chlorinated	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines  Display of work instructions for segregation and handling of Biomedical waste	1 1 1	OB OB OB	Bins are covered Check Yellow bag is non chlorinated	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines Display of work instructions for segregation and handling of Biomedical waste  There is no mixing of	1 1 1	OB OB	Bins are covered Check Yellow bag is non chlorinated	
	The facility ensures segregation of Bio Medical Waste as per	Availability of colour coded bins at point of waste generation  Availability of colour coded bags  Segregation of different category of waste as per guidelines Display of work instructions for segregation and handling of Biomedical waste  There is no mixing of	1 1 1 1	OB OB OB	Bins are covered Check Yellow bag is non chlorinated  Pictorial & in local language	

Standard G.1	Facility ha	s established quality Assura	nce Program	as per state/Na	tional guidelines	
ME G1.5	The facility has established internal quality assurance programme	Internal Assessment of the General Clinic is done at periodic interval	1	SI/RR		
Standard G3	Facility has established	ed ,documented &implemen pr	ted standard ocesses .	operating proc	edure system for its all key	
ME G3.1	Standard Operating procedures are prepared , distributed and implemented for all key processes	Updated SOP are available at point of use	1	RR		
		SOP adequately cover all relevant processes of the department	1	RR		
		Area of Conc				
Standard H1	The facility n	neasures its productivity, eff	iciency, clinic	al care & servic	e Quality indicators	
ME H1.1	Facility measures Productivity Indicators on monthly basis	OPD Per day	1	RR		
			1	DELETED		
ME H1.2	Facility measures efficiency Indicators on monthly basis	AYUSH OPD per month  OPD per doctor	1	RR RR		
		Percentage of follow up patients	1	RR		
ME H1.3	Facility measures Clinical Care & Safety Indicators on monthly basis	Consultation time in OPD	1	RR		
		Percentage of OPD cases treated with Antibiotic	1			
ME H1.4	Facility measures Service Quality Indicators on monthly basis	Waiting time for Consultation at OPD	1	RR RR		
Standard H2	Fac	cility endeavours to improve	its performa	nce to meet be	nch marks	
ME H2.2	The facility strives to improve indicators from its current performance	Trends analysis of Indicators is done at Periodic Intervals	1	RR		

<b>General Clinic Score</b>					
	General	FO			
	Clinic	50			
	Area of Concern wise Score				
А	Service Provision	50.0			
В	Patient Rights	50.0			
С	Inputs	50.0			
D	Support Services	50.0			
Е	Clinical Services	50.0			
F	Infection Control	50.0			

G	Quality Manangement	50.0
Н	Outcome	50.0

	National Quality	Assurance Standards for U - P	РНС		2	
		Checklist for Maternity H	lealth		1	
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks
		Area of Concern - A S		sion		
Standard A1		Facility provides Promotive, preven	ntive and cura	ative services	I	
ME A1.4	Services are available for the time period as mandated	ANC & PNC services are available during OPD timing	1	RR/SI	Though Fix day for providing ANC services, client will be entertained if she visits any day during OPD hrs	
Standard A2		The facility provides RI	MNCHA Service	es	Ivvo i iii	
ME A2.2	The facility provides Maternal health Services	Availability of Functional ANC Clinic			ANC services are provided through dedicated setup. Check records for ANC being regularly conducted at facility through fix day or all days approach	
		Fault and interesting Q Adiation and A ANC	1	RR/SI		
		Early registration & Minimum 4 ANC Check-up	1	RR/SI	Check ANC register /MCP card	
		Provision of Tetanus Toxoid and IFA				
		Nutritional & Health Counselling	1	RR/SI		
		Identification and management of	1	RR/SI		
		High Risk and Danger signs during pregnancy	1	RR/SI	Check ANC records	
		Area of Concern B - F				
Standard B1		The service provided at fa	cility are acces	sible	D 11: 1 CC 1	
ME B1.2	The facility displays the services and entitlements available	Timings and days of the ANC clinic is displayed	1	ОВ	Day and timing of fix day services like ANC,Immunization etc. (as applicable)	
		Entitlements under JSSK, JSY or any state specific scheme				
			1	ОВ		
		Important information like no. of Ambulances & nearby facilities are displayed				
			1	ОВ		
ME B1.4	Patients & visitors are sensitized and educated through appropriate IEC / BCC approaches	Availability of Booklets / Leaflets/ brochures in the waiting area for Health education and information about early registration, diet & rest during pregnancy, recognizing signs of labour, recognizing danger signs during pregnancy & family planning etc.	٠		IEC corner. Check safe motherhood booklet is given	
		Antenatal mothers are informed of	1	OB	to every pregnant women Interview the Antenatal	
ME B1.7	Information about the treatment is shared with patients or attendants and consent is taken wherever required	confirmation of pregnancy and frequency of visits and danger signs during pregnancy have been communicated to them			mother about the communications, received by them. Co-relate with the notes recorded on the card.	
			1	PI		
		Mother & Child protection card is provided to all clients				
			1	RR		

					T	
		Method of Administration /taking of				
		the IFA & Calcium supplement etc. is				
		informed to patient/ their relative by				
		doctor/ ANM				
			1	PI/RR		
ME B1.8	Access to facility is provided					
	without any physical barrier	There is no overcrowding in ANC				
		clinic	1	ОВ		
Standard B2		The service provided at fac	cility are accep	otable		
		Availability of female staff /				
	Services are provided in	attendant, if a male doctor examines				
ME B2.1	manner that are sensitive to	a female patients				
IVIE DZ.1						
	gender					
			1	SI/OB		
		Dedicated Female OPD for ANC cases				
			1	SI/OB		
	Adagusto visual privacy is			1	Specially for ANC clients	
ME B2.2	Adequate visual privacy is	Availability of screens /curtains in				
	provided at every point of care	Examination area	1	ОВ		
		Patient records are kept in safe			Check Patient records	
	Confidentiality of patients'	custody in ANC clinic			e.gANC register, HIV positive	
ME B2.3	records and clinical information	'			reports etc. are kept in safe	
	is maintained				custody and are not	
			1	OB/SI	accessible to unauthorized	
		Confidentiality of HIV cases are				
		maintained in ANC clinic	1	OB/SI		
Ctondord D2		The service provided at fac				
Standard B3					Chack for there is a -	
	The facility provides cashless	OPD Consultation/ ANC Check up is	1	SI/RR	Check for there is no	
	services to all patients including	provided free of cost		1	consultation fee/ registration	
ME B3.1	pregnant women, mothers and			1	fee for JSSK beneficiaries	
	sick children as per prevalent			]		
	government schemes					
	o .					
NE DO	The facility ensures that the	Charle matients	1			
ME B3.3	drugs prescribed are available	Check patient party has not spend				
	in the pharmacy	on purchasing drugs from outside		PI	+	
	Facility ensure investigation	Check patient party has not spend	1			
ME B3.4	prescribed are available at the	on purchasing consumables from				
	Laboratory	outside		PI		
		Area of Concern	- C Inputs			
Standard C1	The facility has adequat	e & Safe infrastructure for delivery	of assured ser	rvices and me	ets the prevalent norms	
	Departments have adequate	Clinics have adequate space for				
ME C1.1	Departments have adequate space as per patient load	consultation and examination		1		
	space as per patient load		1	OB/SI		
	American S. C. C. C.	Availability of Fans/ Warmers as per				
ME C1.2	Amenities for Patients & Staff	need		1		
	are available as per load		1	ОВ		
		Availability of clean drinking water				
		facilities		1	May be shared common with	
			1	ОВ	General clinic	
		Availability of clean & functional			Dry toilet with running water,	
		toilets			May be shared with General	
			1	ОВ	clinic	
	Departments have layout and	Dedicated Clinics for ANC				
ME C1.3	demarcated areas as per	Consultation and counselling				
	functions		1	OB/SI		
		Dedicated examination area is				
		provided in ANC clinic	1	OB/SI		
	The facility of the Control of the C	ANC clinic does not have temporary			Switch Boards all other	
ME C1.5	The facility ensures safety of	connections and loosely hanging			electrical installations are	
	electrical installations	wires	1	ОВ	intact &secure	
	Physical condition of buildings	Floor of ANC clinic is non slippery				
ME C1.6	are safe for providing patient	and even				
	care		1	ОВ		
					<u></u>	
Standard C2	The facility has adequate que	alified and trained staff, required fo	or providing th	ne assured ser	vices to the current case load	
otanaara CZ	c rushity has adequate que	a Gaine d'ainea stari, Tequirea it	. providing ti	assured ser	to the current case load	

The facility has adequate motion of the protection of the protecti			_	•			
ME C2.2 The facility has selequate numbers aper service projection and work load and work load and work load for possible and work load and wo		The facility has adequate	Availability of Doctors for				
The facility has adequate number of the provision and work load and according to the provision and work load and the provision and work load t	MF C2.1	' '	consultation during OPD hours				
The facility has adequate nursing staff/paramedics as per source for staff nurse/ANM at nurse/ANM at nurse for SNA.  The Staff has been imparted no reset their or meet their order as reported as to relate them to meet their order as reported as to relate them to meet their order as reported as to relate them to meet their order as reported as to relate them to meet their order as the provision and while as to relate them to meet their order as reported as the complete of the staff in skilled and correspon as the staff or order as the staff or order for conducting ANC as per protocol.  The Staff is skilled and correspon or protocol order for the staff or order for conducting ANC as per protocol order for assured services.  Standard G3  The facility provides drugs and consumables required for assured services.  The facility has availability of designation of the staff or order for assured services.  Availability of consument as a consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument as a consument or order for assured the consument order		· ·					
The facility is a solution of the facility of patient furniture and facility and patient furniture and facility		provision and work load		1	RR/SI/PI		
ME C2.4 service grovines and work load 1 88/5		The facility has adequate					
service provision and work load  MC C2.4  The Staff has been imperature recessary transing of Doctor for IMNCI enciessary transing fall set to escape transing fall set to	MF C2.2		ANC clinic				
Training of Doctor for IMNCI  ME C2.4   Me Staff has been imparted excessivy training of Doctor for IMNCI  Training of Doctor for IMNCI  Training of Doctor for IMNCI  Training of Excessive Staff in the Staff has been imparted and conceptency of the Staff in the Staff in skilled and competency of the Staff in the Staff in skilled and competency of the Staff in the Staff in skilled and competency of the Staff in the Staff in skilled and competency of the Staff in the Staff in skilled and competency of ANM/Staff in unser for conducting ANC as per in the protection in the Staff in the St	IVIL CLIL						
ME C2.4 encessary trainings/skill set to enable then to meet their roles & responsibilities  Training of staff nurse for SBA 1		· ·		1	RR/SI		
realize then to meet their role of the competency of the staff to use of February of the staff to use of Po equipment is a P sparatus, and of the competency of the staff to use OFD equipment is a P sparatus, and of the competency of ANM/Staff to use OFD equipment is a P sparatus, and of the competency of ANM/Staff to use OFD equipment is a P sparatus, and of the sparatus of the s			Training of Doctor for IMNCI				
enable them to meet their    Pack   P	MF C2.4						
The Staff is stilled and Check competency of the staff to competent as per job competent as p							
The Staff is skilled and competency of the staff to specify the specific the spec		roles & responsibilities					
ME C3.5 competent as per job government like BP apparatus, etc. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1			
Acception apparatus, etc.  Check the competency of ANM/Staff Inches the competency of And Inches the Competency of Inches the					SI		
Check the competency of ANM/Staff nurse for conducting ANC a per protocols  The facility provides drugs and consumables required for assured services.  The facility has availability of adequate drugs at point of use dequate drugs at point of use instruments for examination & monitoring of patients for examination & monitoring of patients for examination and control and ventilation of service provides and service provides are sea are clean and injugience.  ME C4.1  The facility has equipment & instruments required for assured list of services.  Availability of equipment & instruments and quipment for ANC Check up instruments for examination & monitoring of patients for examination & monitoring of patients for examination and service provision  Availability of patient furniture and fixtures as per load and service provision  Area of Concern - D Support Services  The facility has established facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users  The facility infrastructure is and provides and ordination and and maintained in OPD in OB condemned junk material in CPD i	ME C2.5	' '	' '	_			
Interest of conducting ANC as per protocols  Standard C3  The facility provides drugs and consumables required for assured services.  ME C3.1  The facility has availability of adequate drugs at point of use  The facility has equipment & instruments required for assured list of services.  Availability of equipment & instruments required for assured list of services.  Availability of equipment & instruments required for assured list of services.  Availability of equipment & instruments required for assured list of services.  Availability of patients  Availability of patient furniture and fixtures as per load and service provision  Area of Concern - D Support Services  Area of Concern - D Support Services  The facility has established facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users  The facility ensures confortable environment for patients and service provision  ME D1.2  The facility infrastructure is a patient care areas are clean adequately maintained  Area of Concern - D Support Services  The facility infrastructure is a patient care areas are clean adequately maintained  adequately maintained  Facility infrastructure is floors, walls, roof , sinks, patient are area corridors are clean care and corridors are cl		description		1			
Standard C3   The facility has availability of adequate drugs at point of use   1   SJ/RR/OB   If A Tablets, Calcium Supplement, Albendazole 400 mg & in Teatures Tosoid					SI	•	
The facility has availability of adequate fungs and consumables required for assured services.  The facility has availability of adequate drugs at point of use  The facility has equipment & instruments required for assured list of services.  Availability of equipment & instruments required for assured list of services.  Availability of equipment & instruments and cquipment for ANC Check up  Availability of patient furniture and futures as per load and service provision  Availability of patient furniture at clinics  The facility has established facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users  The facility nearurs confortable environment for patient care areas are clean and major and mygeinc area and corridors are clean and equately maintained and equately maintained and equately maintained and equately maintained and patient care area area are clean and equately maintained and equately maintained and equately maintained and patient care area and corridors are clean and maintained in OPD 1 0 08  The facility has policy of removal of condemned junk material in the opporation of the patients are area and corridors are clean and maintained in OPD 1 0 08  The facility provides appropriate referral linkage appropriate referral linka				1		risk pregnancy	
Availability of project & standard C4  The facility has availability of adequate drugs at point of use  Standard C4  The facility has equipment & instruments required for assured list of services.  Availability of equipment & instruments and Equipment for ANC Check up with a service provision and factures as per load and service provision  Availability of patient furniture and factures are as are clean and hygienic conformable environment for patients and service provision  The facility has established facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users  ME D1.3  Pacility infrastructure is adequately maintained and hygienic and conformable and patient and service provision  ME D1.4  Facility infrastructure is adequately maintained mo DD  Facility has policy of removal of OPD  Area of Concern - E Clinical Services  The facility persures condomened/junk material to OPD  Area of Concern - E Clinical Services  The facility provides and patient furniture and fistures are and corrion and ventilation (or patients and patients) and phygienic and patients			protocois	1			
ME C3.1 The facility has availability of large at point of use dequate drugs at point of use and adequate drugs and	Standard C3	The fa	cility provides drugs and consumal	<mark>bles required f</mark>	or assured ser	vices.	
ME C3.1 The facility has availability of large at point of use dequate drugs at point of use and adequate drugs and			Availability of Drugs for ANC sorvices	1	SI/DD/OD	IEA Tablots Calsium	
Standard C4  The facility has equipment & instruments required for assured list of services.  Availability of equipment & availability of instruments and instruments for examination & in		The facility has availability of	Availability of Drugs for ANC services	1	SI/RR/OB	· ·	
Standard C4  The facility has equipment & instruments required for assured list of services.  Availability of equipment & instruments for examination & equipment for ANC Check up instruments for examination & monitoring of patients  ME C4.1  Availability of patient furniture and fixtures as per load and service provision  The facility has established facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users  ME D1.2  The facility ensures comfortable environment for patients and service providers  ME D1.3  Patient care areas are clean and hygienic  Facility infrastructure is sequent environment and fixtures are clean facility management programme for maintenance & upkeep of equipment & infrastructure to provide safe & secure environment to staff & users  ME D1.3  Patient care areas are clean follow up of patients and service providers  Facility infrastructure is sequented providers and fixtures are clean care and corridors are Clean in and hygienic  ME D1.5  Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records  The facility provides  The facility provides  The facility provides  Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records for tander to other/higher facilities to assure the continuity of care.  The facility ensures follow up of patients of patients of patients assure the continuity of care.  There is system of follow up of the patients referred to higher facilities a size of the patients referred to higher facilities a size of the patients referred to higher facilities a size of the patients referred to higher facilities and size of the patients referred to higher facilities and size of the patients referred to higher facilities and size of the patients referred to higher facilities and size of the patients referred to higher facilities and size of the patients referred to higher facilities and size	ME C3.1	· · · · · · · · · · · · · · · · · · ·				7.7	
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ME E2.3  Pacility ensures follow up of patients  patients  patients referred to higher facilities  1 SI/RR	ME D1.4  ME D1.5  Standard E2	patients and service providers  Patient care areas are clean and hygienic  Facility infrastructure is adequately maintained  Facility has policy of removal of condemned junk material  Facility has defined procedur  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the	Floors, walls, roof , sinks, patient care and corridors are Clean Surface of furniture and fixtures are clean Fixtures and Patient Furniture are intact and maintained in OPD No condemned/Junk material in the OPD  Area of Concern - E Company management and contract to the contract of th	1 1 2 Clinical Servintinuity of car	OB OB OB Ces e with approp	riate maintenance of records	
patients patients referred to higher facilities 1 SI/RR	ME D1.4 ME D1.5 Standard E2	patients and service providers  Patient care areas are clean and hygienic  Facility infrastructure is adequately maintained  Facility has policy of removal of condemned junk material  Facility has defined procedur  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the	Floors, walls, roof , sinks, patient care and corridors are Clean Surface of furniture and fixtures are clean Fixtures and Patient Furniture are intact and maintained in OPD No condemned/Junk material in the OPD  Area of Concern - E Company management and company management	1 1 2 Clinical Servintinuity of car	OB OB OB Ces e with approp	riate maintenance of records	
1 SI/RR	ME D1.4  ME D1.5  Standard E2  ME E2.2	patients and service providers Patient care areas are clean and hygienic  Facility infrastructure is adequately maintained Facility has policy of removal of condemned junk material  Facility has defined procedur  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.	Floors, walls, roof , sinks, patient care and corridors are Clean Surface of furniture and fixtures are clean Fixtures and Patient Furniture are intact and maintained in OPD No condemned/Junk material in the OPD  Area of Concern - E Ce for primary management and co There is a system of referring patient from ANC clink to higher centre for specialist consultation  There is system of follow up of the	1 1 2 Clinical Servintinuity of car	OB OB OB Ces e with approp	riate maintenance of records	
Standard E5 The facility has establish procedure for Maternal health care as per guideline	ME D1.4  ME D1.5  Standard E2  ME E2.2	patients and service providers Patient care areas are clean and hygienic  Facility infrastructure is adequately maintained Facility has policy of removal of condemned junk material  Facility has defined procedur The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.  Facility ensures follow up of	Floors, walls, roof , sinks, patient care and corridors are Clean Surface of furniture and fixtures are clean Fixtures and Patient Furniture are intact and maintained in OPD No condemned/Junk material in the OPD  Area of Concern - E Ce for primary management and co There is a system of referring patient from ANC clink to higher centre for specialist consultation  There is system of follow up of the	1 1 1 Clinical Servi	OB OB OB Ces e with approp	riate maintenance of records	
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	ME D1.4  ME D1.5  Standard E2  ME E2.2	patients and service providers Patient care areas are clean and hygienic  Facility infrastructure is adequately maintained  Facility has policy of removal of condemned junk material  Facility has defined procedur  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.  Facility ensures follow up of patients	Floors, walls, roof , sinks, patient care and corridors are Clean Surface of furniture and fixtures are clean Fixtures and Patient Furniture are intact and maintained in OPD No condemned/Junk material in the OPD  Area of Concern - E Ce for primary management and co There is a system of referring patient from ANC clink to higher centre for specialist consultation  There is system of follow up of the patients referred to higher facilities	1 1 2 Clinical Servintinuity of car	OB OB OB Ces e with approp		

			1			
		Facility provides and updates			Check Mother & Child	
	There is an established	"Mother and Child Protection			Protection cards have been	
ME E5.1	procedure for Registration and	Card"			provided for each pregnant	
	follow up of pregnant women.				women at time of 1st	
					registration/ First ANC	
			1	RR		
		Facility ensures early registration			Check ANC records for	
		of ANC			ensuring that majority of ANC	
					registration is taking place	
					within 12th week of	
			1	RR/SI	Pregnancy in ANC register	
		Records are maintained for ANC		,	Records of each ANC check-	
		registered pregnant women			up is maintained are	
		registered pregnant women			maintained in ANC register	
			1	RR/SI	maintained in Aive register	
		Clinian Information of ANC in Land	1	NN/3I	Charle if the are in a superior of	
		Clinical information of ANC is kept			Check, if there is a system of	
		with ANC clinic			keeping copy of ANC	
					information like LMP, EDD,	
					Lab Investigation Findings ,	
					Examination findings etc. with	
			1	RR/SI	them	
		Staff has knowledge of calculating			Check with staff the expected	
		expected pregnancies in the area			pregnancies in her area / How	
					to calculate it.(Birth Rate X	
					Population/1000 Add 10% as	
					-	
					correction factor (Still Birth)	
				DD /2:		
			1	RR/SI		
		Tracking of Missed and left out ANC			Check with ANM how she	
					tracks missed out ANC. Use of	
					MCTS by generating work	
					plan and follow-up with	
					ASHA, AWW etc.	
					Check if there is practice of	
					recording Mobile no. of	
					clients/next to kin for follow	
			4	DD /CI		
		All LANG L	1	RR/SI	up	
		All pregnant women get ANC check-			Ask staff about schedule of 4	
		up as per recommended schedule			ANC Visits	
					(1st - < 12 Weeks	
					2nd - < 26 weeks	
					3rd - < 34 weeks	
					4th >34 to term)	
					Check ANC register whether	
					all 4 ANC covered for most of	
					the women (sample cases)	
			1	DD/CI	the women (sample cases)	
		At least one ANC visite is setting at 11	1	RR/SI	Droforobly 2nd Vi-it /20 24	
		At least one ANC visit is attended by		DD /C1	Preferably 3rd Visit (28-34	
		Medical Officer	1	RR/SI	Weeks)	
		At ANC clinic, Pregnancy is			Check for ANC record that	
	There is an established	confirmed by performing urine test			pregnancy has been	
	procedure for History taking,				confirmed by using Pregnancy	
ME E5.2	Physical examination, and				test Kit (Nischay Kit)	
	counselling of each antenatal					
	woman, visiting the facility.					
	1 3 44 4,		1	RR/SI		
		Last menstrual period (LMP) is	_	.,	Check how staff confirms	
		recorded and Expected date of			EDD & LMP, (EDD = Date of	
		Delivery (EDD) is calculated on first			LMP+9 Months+7 Days) How	
		, , ,			7.	
		visit			she estimates if Pregnant	
					women is unable to recall first	
					day of last menstrual cycle	
					('Quickening', Fundal Height)	
					.Check ANC records that it	
					has been written	
			1	RR/SI		
		Comprehensive Obstetric History is				
		recorded			History of Pervious	
					pregnancies including	
					complications and procedures	
					done, if any, is taken	
			1	DD/CI	done, ii diiy, is taken	
			1	RR/SI		

		History of Current or past systemic			History of current or past
		illnesses is taken & recorded			systemic illness like
					Hypertension, Diabetes,
					Tuberculosis, Rheumatic
					Heart Disease, Rh
					Incompatibility, malaria, etc.
			1	RR/SI	is taken
		History of Drug intake or allergies &			Allergies to drugs, any
		intake of Habit forming and Harmful			treatment taken for infertility.
		substances like Tobacco, Alcohol,			,
		Passive smoking			
		rassive silloking	4	DD /CI	
			1	RR/SI	
		Physical Examination of Pregnant			Pulse, Respiratory Rate ,
		Women is done on every ANC visit			Pallor, Oedema
			1	RR/SI/OB	
		Weight measurement is measured			Check any 3 ANC records/
		on every ANC Visit			MCP Card randomly to see
		,			that weight has been
					measured and recorded at
				/s: /o	
			1	RR/SI/OB	every ANC visit
		Blood pressure is measured on every			Check any 3 ANC records/
		ANC Visit			MCP Card randomly to see
					that Blood Pressure has been
					measured and recorded at
			1	RR/SI/OB	every ANC visit
		Abdominal Examination is done as		111731700	Measurement of Fundal
		per protocol			Height (ask staff how she
					correspond fundal high with
					Gestational Age)
					Palpation for Foetal lie and
					Presentation Check for
					findings recorded in
				DD /51 /OD	
			1	RR/SI/OB	MCPcard/ANC Records
		Auscultation for foetal heart sound			
			1	RR/SI/OB	
		Breast examination is done			Observation and Correction
					of Flat or Inverted Nipples
					Palpation for any Lumps or
					Tenderness
			4	DD /CI /OD	Tenderness
			1	RR/SI/OB	
		Haemoglobin test is done on every			Check randomly any 3 MCP
	The facility ensures of drugs &	ANC visit			card/ ANC record for
ME E5.3	diagnostics are prescribed as				Haemoglobin test is done at
	per protocol				every ANC visit and values are
	ľ		1	RR	recorded
		Urine test for Sugar and Protein is on	_		Check randomly any 3 MCP
		every ANC visit			card/ ANC record for Urine
		every AINC VISIL			
					for Sugar & Protein is done on
					every ANC visit and findings
			1	RR	are recorded
		Blood Grouping and RH Typing is			Check randomly any 3 MCP
		done for every pregnant woman			card/ ANC record for
		,, ,			confirming that blood
			1	RR	grouping has been done
		Tost for HIV is done at least area.	1	IVIV	
		Test for HIV is done at least once in			Check the ANC records
		ANC period	1	RR	
		Test for Syphilis is done at least once			Check the ANC records
		in ANC period	1	RR	through VDRL/RPR/RDK
		Screening for Malaria is done as per			In Non-endemic area for all
		clinical protocol			clinically suspected cases
					In malaria endemic area all
					pregnant women
			_		bregnant women
			1	RR	
		Testing of PW for Gestational			Testing for GDM twice during
		Diabetes Mellitus (GDM) as per			ANC, 1st testing during first
		protocols			antenatal contact, 2nd testing
					24-28 weeks even if 1st
					testing is negative. There
					should be 4week gap
					between 2 test & if she
					present beyond 28 weeks -1
			1	RR	test

		Tetanus Toxoid (2 Dosages/ Booster)			Check randomly any 3 ANC
		have been during ANC visits			records for confirming that
					TT1 (at the time of
					registration) and TT2 (one
					month after TT1) has been
					, , , , , , , , , , , , , , , , , , ,
					given to Primi gravida &
					Booster dose for women
					getting pregnant within three
					years of previous pregnancy
			1	RR	
		A single dose of 400mg IP of			Albendazole is to be taken
		Albendazole is given after 1st			only once during the 2nd
		trimester of pregnancy			trimester of pregnancy. The
		innester of pregnancy			second dose is needed only in
					case the
			4	D.D.	
		c. cc	1	RR	helminthic load is > 40%.
		Staff can recognize the cases, which			Anaemia, Bad obstetric
		would need referral to Higher			history, CPD, PIH, APH,
	There is an established	Centre(FRU)			Medical Disorder
NAT TE A	procedure for identification of				complicating pregnancy,
ME E5.4	High risk pregnancy and				Malpresentation, foetal
	appropriate & Timely referral.				distress, PROM, obstructed
	1				labour, rupture uterus, & Rh
	1		1	SI/RR	negative
		Staff is competent to identify		JI/ NN	Hypertension & Pre Eclampsia
	1	,			
	1	Hypertension / Pregnancy Induced			(Hypertension - Two
		Hypertension			consecutive reading taken
	1				four hours apart shows
					Systolic BP >140 mmHg
					and/or Diastolic BP > 90
	1				mmHg
			1	SI/RR	
		Staff is competent to identify Pre-	_	-,	Pre - Eclampsia- High BP with
		Eclampsia			Urine Albumin (+2)
		Eciampsia			1
					Imminent eclampsia -BP
					>140/90 with positive
					albumin 2++, severe
					headache, Blurring of vision,
					epigastria pain & oliguria in
			1	SI/RR	Urine
		Staff is competent to identify high			Identification and referral of
		risk cases based on Abdominal			cases with
		examination			Cephalo-pelvicpresentation,
		CACHINI GEORGE			Malrpesentation, medical
					disorder complicating
					, ,
					pregnancy, IUFD, amniotic
	1				fluid abnormalities.
	1				
		<u> </u>	1	SI/RR	
		Staff is competent to classify			>11 gm% -Absence of
	L	anaemia according to Haemoglobin			Anaemia,10 to 11 gm% mild,
	There is an established	Level			7-10 gm% Moderate Anaemia
ME E5.5	procedure for identification				<7 gm% Severe Anaemia
	and management of anaemia				7 Billy Severe Allacilla
	1		4	CI/DD	
		Cheff in account of the least of	1	SI/RR	Deschalastic and ISA : 11 :
	1	Staff is aware of prophylactic &			Prophylactic - one IFA tablet
		Therapeutic dose of IFA			per day for six months during
	1				ANC &PNC. Therapeutic dose-
					double the dose in case of
	1				anaemia.
			1	SI/RR	
		Line listing of pregnant women with			Check the records whether
	1	moderate and sever anaemia			Line-listing of severely
					anaemic women are
	1				
				c./p=	maintained at the UPHC
			1	SI/RR	
		Improvement in haemoglobin label			Check the staff for
	1	is continuously monitored and			intervention & track the
	1	recorded			improvement in Haemoglobin
					level of anaemic woman in
		1			
					ISUDSEQUEIL AINC VISIL.
			1	SI/RR	subsequent ANC visit.

Courselling of pregnant women is counselled protocol and gestational age and and agree and and agree and and agree and and agree agree and agree agree and agree a			T		Г	T	
protected and gestational age  report and an experimental age  report and periational age  report and periational age  report and periational age  report and account and acco		Counselling of pregnant	_			-	
Program women is counselled freedynamic stammelled freedynamic stamm	ME E5.6	women is done as per standard	Planning and preparation for Birth			-	
Pregnant women is counselled to pregnancy and pregnant women is counselled to pregnant women is counselled to pregnancy and pregnant women is counselled to the pregnant women is counselled for p						condition	
Recogniting sign of labour  Progrant women is counselled dentry and arrange for referral parabolatics as communicated whether and arrange for referral parabolations are scored and arrange for referral parabolations are scored and parabolations are available on time availabl		protection and gestational age		1	PI/SI		
Prignant women is counselled dending and arrange for referral transport			=				
Pregnant women is counselled identify and arrange for referral transport  Pregnant women is counselled identify and arrange for referral transport  Pregnant women is counselled recogning danger signs during pregnancy  Pregnant women is counselled in the part of the state of the work of the wor			Recognizing sign of labour			(Show) and regular painful	
Pregnant women is counselled deathy and arrange for referral transport  Pregnant women is counselled a recognizing danger signs during pregnancy  Pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the pregnant women is counselled Diet & Rest of the prediction.  Pregnant women is counselled Diet & Rest of the prediction of the baby to the Diet of the prediction of the baby to the Diet of the Die						uterine contractions	
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Dansport    Pregnant women is counselled poet   1   1   1   1   1   1   1   1   1			Pregnant women is counselled			contact number of the	
Dansport    Pregnant women is counselled poet   1   1   1   1   1   1   1   1   1			Identify and arrange for referral			ambulance is communicated	
wehick of ambulance on to whick of ambulance on the soluble on time.  Pregnant women is counselled recognizing darger signs during pregnancy.  Pregnant women is counselled or the counselled pregnancy women is counselled Diet & Rest.  Pregnant women is counselled breast feeding within an bour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of brith. Do not give any pre-lackal teeds, (Sigar, water, Honey) within an hour of b						arrangement of alternate	
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Pregnant women is counselled controlled recognizing darger signs during pregnancy women is counselled or cognizing darger signs during pregnancy women is counselled Diet 8. Rest    Pregnant women is counselled beat feeding    Pregnant women is counselled for    Family planning    Pregnant women is counselled    Different Options available    including    Incl							
Pregnant women is counselled recognizing danger signs during pregnancy  Pregnant women is counselled Diet & PySI				1	PI/SI	available on time	
recognizing danger signs during pregnancy  recognizing danger signs during pregnancy  Pregnant women is counselled Diet & PVSI  Pregnant women is counselled Diet & Diet rich in proteins, iron, vitamin A, vitamin C, celclum and other extention microunizations and other extention microunizations, has been applied to the part of the baby to the breast feeding expects protein preparated feeds (Supar, water, honey) expected from the baby to the breast extending expects protein p			Pregnant women is counselled	-	1 1/31	Swelling (nedema), bleeding	
pregnancy    Pregnant women is counselled Diet & Rest							
Pregnant women is counselled Diet  Rest  Pregnant women is counselled Diet  Rest  Pregnant women is counselled Diet  Rest  Pregnant women is counselled by the second of t							
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Pregnant women is counselled Diet  & Rest  Rest  Pregnant women is counselled  Pregnant women is counselled for family planning  Pregnant women is counselled for family plannin						Yellow urine	
Rest    PySi   Detrick in proteins, tron, vitamin A, vitamin C, aclicum and other essential micronutrients.				1	PI/SI		
Pregnant women is counselled breast feeding  Pregnant women is counselled breast feeding expecially colostrum feeding within an hour of brith. Do not give any pre-lacted feeds (signature) for the baby to reach the baby for whenever he give demands milk. Follow the practice of the baby to whenever he give demands milk. Follow the practice of coming in.  Pregnant women is counselled for Family planning  Pregnant women is counselled for Family planning in the planning in th			Pregnant women is counselled Diet			Increase Dietary Intake	
Pregnant women is counselled breast feeding  Pregnant women is counselled breast feeding  Pregnant women is counselled breast feeding within an hour of brith. Do not give pure pre-lacteal feeds. (Sugar, water, Honey) Ensure good attachment of the bably to the breast exclusively breastfeed the bably to the breast exclusively breastfeed the bably to she demands milk. Follow the practice of rooming in.  Pregnant women is counselled for Family planning  Pregnant women is counselled for Family planning  There is a established procedures for Postnatal visits & counselling of Mother and Child  Check Mother is educated & counselled about danger signs during puerperium  Check Mother is educated & counselled about danger signs of baby  Check Mother is educated & counselled about danger signs of baby  Check Mother is educated & counselled about danger signs of baby  Check Mother is educated & counselled about danger signs of baby  Check Mother is counselled baby  Check Mother is counselled baby  Check Mother is counselled for play the procedures for Postscharge, yellow discolaration of eye, convulsion, play the eye or cherd discharge, yellow discolaration of eye, convulsion, minumization, hand washing & personal hygiene & appropriate care of cord			& Rest			Diet rich in proteins, iron,	
Pegnant women is counselled breast feeding  Pregnant women is counselled for family planning  Pregnant women is counselled for family planning wheneve he/ste demands milk robust practice of rooming in.  Pregnant women is counselled for family planning whenever he/ste demands milk robust practice of rooming in.  Pregnant women is counselled for family planning in.  Pregnant women is counselled feed to but women in.  Pregnant women is counselled feed to but on on the family planning in.  Pregnant wo						vitamin A, vitamin C, calcium	
Pregnant women is counselled breast feeding when the present feeding which an hour of birth. Do not give my re-lacted feeds. (Sugar, water, Honey) Ensure good attachment of the bally to the breast. Exclusively breastreed the bally for its months. Breastreed the bally fo						and other essential	
Pregnant women is counselled breast feeding when the present feeding which an hour of birth. Do not give my re-lacted feeds. (Sugar, water, Honey) Ensure good attachment of the bally to the breast. Exclusively breastreed the bally for its months. Breastreed the bally fo				1	PI/SI	micronutrients.	
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Educated during postnatal visit 1 PI/SI			Check Mother is counselled/				
			-	1	PI/SI		
Area of Concern - r infection Control							
			Area of Concern - Fil	mection con	1101		

Standard F1	Facility has def	fined & implemented procedure for	ensuring Han	d hygiene prac	ctices & asepsis	
ME F1.1	Hand washing facilities are provided at point of use	Availability of hand washing Facility at the Point of Use			Check for availability of wash basin near the point of use	
	provided at point of asc	Availability of running Water	1	ОВ	Ask to Open the tap. Ask Staff	
			1	ОВ	water supply is regular	
		Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.		OB	Check for availability/ Ask staff if the supply is adequate and uninterrupted	
		'	1	ОВ	·	
		Display of Hand washing Instruction at Point of Use			Prominently displayed above the hand washing facility , preferably in Local language	
	Staff is trained and adhere to		1	ОВ		
ME F1.2	standard hand washing practices	Staff is adhere to standard hand washing practices	1	OB/SI		
Standard F2	Facility ensures	availability of Personal Protective	equipment &	follows standa	ard precautions.	
ME F2.1	Facility ensures adequate personal protection equipment	Disposable gloves are available at the point of use				
	as per requirements		1	ОВ		
ME F2.2	Staff adheres to standard personal protection practices	No reuse of disposable gloves, Masks, caps and aprons.	1	OB/SI		
Standard F3	Facility has st	tandard procedure for disinfection 8		<u> </u>	& instrument	
ME F3.1	The facility ensures standard practices and materials for decontamination and cleaning of instruments and procedures areas	Decontamination of Procedure surfaces	1	SI	Ask staff about how they decontaminate the procedure surface like Examination table (Wiping with .5% Chlorine solution	
		Proper Decontamination of instruments after use	1	SI		
Standard F4	Facility has defined & estab	lish procedure for segregation, colle waste	ection, treatm	ent & disposal	of Bio medical &hazardous	
	The facility ensures segregation	Availability of colour coded bins at				
ME F4.1	of Bio Medical Waste as per guidelines	point of waste generation	1	ОВ	Bins are covered	
		Availability of colour coded bags			Check Yellow bag is non	
		Segregation of different category of waste as per guidelines	1	OB	chlorinated	
			1	ОВ		
		Display of work instructions for segregation and handling of	,	0.5	Distantial 0 : 1	
ME F4.2	The facility ensures management of sharps as per guidelines	Biomedical waste  Availability of functional needle cutters	1	OB OB	Pictorial & in local language See if it has been used or just lying idle	
	guidennes	Availability of puncture proof box		05	Should be available nears the point of generation like nursing station and injection	
		Disinfection of sharp before disposal	1	ОВ	room Disinfection of syringes is not	
		· ·	1	ОВ	done in open buckets	
		Staff is aware of contact time for disinfection of sharps	1	SI		
		Area of Concern - G Qua	lity Manage	ement		
Standard G.1	Facility ha	as established quality Assurance Pro	gram as per s	tate/National	guidelines	
ME G1.5	The facility has established internal quality assurance programme	Internal Assessment of the Maternity Health services is done at periodic interval	1	SI/RR		
		ocumented &implemented standard				

ME G3.1	Standard Operating procedures are prepared , distributed and implemented for all key processes	Updated SOP are available at point of use	1	RR		
		SOP adequately cover all relevant				
		processes of the department	1	RR		
		Availability of protocols for ANC				
		check-up	1	RR		
ME G3.2	Staff is trained as per SOPs	Staff is trained for ANC check-up	1	RR/SI		
ME G3.3	Work instructions are displayed	Work Instruction for Abdominal				
IVIE GS.5	at Point of work	Examination	1	ОВ		
		Work Instruction for Counselling	1	OB		
		Work instruction for identification of high risk pregnancy	1	ОВ		
		Area of Concern -	-	_		
		Alea of Concern -	ii. Outcome	•		
Standard H1	The facility n	neasures its productivity, efficiency	, clinical care 8	& service Qualit	y indicators	
ME H1.1	Facility measures Productivity Indicators on monthly basis	No. of ANC conducted per month	1	RR		
		No. of moderate & severely anaemic				
		cases line listed	1	RR		
	Facility measures efficiency					
ME H1.2	Indicators on monthly basis	Percentage of missed out ANC	1	RR		
	,					
		Percentage of Anaemia cases				
		Percentage of Anaemia cases treated successfully at PHC	1	RR		
	Facility measures Clinical Care	Percentage of Anaemia cases treated successfully at PHC	1	RR		
ME H1.3	Facility measures Clinical Care & Safety Indicators on monthly	_	1	RR		
ME H1.3		treated successfully at PHC	1	RR RR		
ME H1.3 Standard H2	& Safety Indicators on monthly basis	treated successfully at PHC Percentage of high risk pregnancies detected during ANC	1	RR	ks	
	& Safety Indicators on monthly basis	treated successfully at PHC  Percentage of high risk pregnancies	1	RR	ks	
Standard H2	& Safety Indicators on monthly basis  Factor  The facility strives to improve	treated successfully at PHC  Percentage of high risk pregnancies detected during ANC  cility endeavours to improve its per	1	RR	ks	
	& Safety Indicators on monthly basis	treated successfully at PHC Percentage of high risk pregnancies detected during ANC	1	RR	ks	

M	laternity He	alth Score
	Maternity Health Score	50.0
	Area of Con	cern wise Score
A	Service Provision	50.0
В	Patient Rights	50.0
С	Inputs	50.0
D	Support Services	50.0
Е	Clinical Services	50.0
F	Infection Control	50.0
G	Quality Manangement	50.0
Н	Outcome	50.0

	National Quality Assu	urance Standards for U - PHC			3	
	Che	ecklist for New Born & Child I	lealth			
eference No.	Measurable Element	Checkpoint	Complia nce	Assessment Method	Means of Verification	Remarks
		Area of Concern - A Ser				
tandard A1	Fa	icility provides Promotive, preven	tive and c	urative servic	es	
ME A1.1	The facility provides treatment of common ailments	Availability of OPD care for common illness of new born, infant & children	1	RR/SI		
WE A1.4	Services are available for the time period as mandated	OPD Services are available for at least 8 Hours in a day	1	RR/SI		
itandard A2		The facility provides RMI				
			<u> </u>			
ME A2.3	The facility provides New-born health Services	Identification, primary management and prompt referral of sick new-borns	1	RR/SI		
		Routine & Emergency care of	1	NN/3I	Treatment of Diarrhoea ,	
WE A2.4	The facility provides Child health Services	anaemic Children	1	RR/SI	Pneumonia, anaemia etc.	
		Routine & Emergency care of Pneumonia	1	RR/SI		
		Routine & Emergency care of Diarrhoeal disease	1	RR/SI		
		Management of Malnutrition cases	1	RR/SI		
		Identification and referral of Severe Acute Malnutrition cases with complication to NRC				
			1	RR/SI		
		Management of fever & seizures cases among children				
			1	RR/SI		
		Primary Management & referral of paediatric RTA cases				
			1	RR/SI		
		Primary Management & referral of child abuse cases or cases of violence				
			1	RR/SI		
		Counselling on breast-feeding	1	DD/C1/D1	Exclusive for 6 months and adequate complementary feeding from 6 months of age while continuing	
		Area of Concern B - Pa	1 tients' R	RR/SI/PI	breastfeeding	
Standard B1		The service provided at facil				
ME B1.1	The facility has uniform and user-friendly signage system	Directional signage to breast feeding corner is available	1			
ME B1.2	The facility displays the services and entitlements available	Entitlement under the JSSK & RBSK is displayed.				
	, dilatic	Important Contact details like no. of Ambulances & nearby facilities are displayed	1	OB		
			1	ОВ		

		Availability of Booklets / Leaflets/			IEC corner	
		brochures in the waiting area for			120 0011101	
		_				
		Health education and information				
		about ensuring warmth, exculisive				
		breast feeding, proper positioning				
	Patients & visitors are	& attachment for imitating &				
	sensitized and educated	maintaining breast feeding				
ME B1.4	through appropriate IEC / BCC	,providing skin, chord & eye care to				
	approaches	baby, prompting hand washing etc.				
			1	ОВ		
	Information about the	Mother of new born is informed	-	05		
	treatment is shared with	about the new born's condition &				
ME B1.7	patients or attendants and	Treatment Plan				
	consent is taken wherever					
				DI		
	required		1	PI		
		A copy of OPD Slip/ Prescription			1	
		containing Diagnosis & treatment			1	
		plan, is given to mother			1	
		pian, is given to inother			1	
					1	
			,	55	1	
			1	RR		
		Method of Administration /taking			1	Ι Τ
		of the medicines is informed to			1	
					1	
		mother/ Patients relative as per				
		prescription				
			1	RR/PI		
Standard B2		The service provided at facili			1	
Standard BZ			ty are acc	сертавіе	1	
		Availability of Breast Feeding Corner				
	Services are provided in				Chack privacy of mother is	
	· ·				Check privacy of mother is	
MIE B2 1					lengured in bread feeding	
ME B2.1	manner that are sensitive to				ensured in bread feeding	
WIL DZ.1	gender				_	
ME DEIT			1	OB	corner, check availability of	
	gender	hy are efferdable	1	ОВ	_	
Standard B3	gender  The service provided at facilit	ty are affordable	1	ОВ	corner, check availability of	
	gender	ty are affordable	1	ОВ	corner, check availability of	
	gender  The service provided at facilit	ty are affordable  Check patient party has not spend	1	ОВ	corner, check availability of	
Standard B3	gender  The service provided at facilit The facility ensures that the drugs prescribed are available	Check patient party has not spend			corner, check availability of	
Standard B3	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy	Check patient party has not spend on purchasing drugs from outside	1	OB PI	corner, check availability of	
Standard B3 ME B3.3	The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend			corner, check availability of	
Standard B3	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy	Check patient party has not spend on purchasing drugs from outside			corner, check availability of	
Standard B3 ME B3.3	The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from		PI	corner, check availability of	
Standard B3 ME B3.3	The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside	1 1	PI PI	corner, check availability of	
Standard B3 ME B3.3	The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from	1 1	PI PI	corner, check availability of	
Standard B3 ME B3.3	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate &	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4 Standard C1	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate &	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for	1 1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4 Standard C1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate &	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for	1 1 C Inputs	PI PI S services and r	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4 Standard C1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate &	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern - Safe infrastructure for delivery of Clinics have adequate space for consultation and examination	1 C Inputs	PI PI	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4 Standard C1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate &	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for	1 1 C Inputs	PI PI S services and r	corner, check availability of curtains, screens etc.	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate &	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have	1 C Inputs	PI PI S services and r	corner, check availability of curtains, screens etc.  meets the prevalent norms  Switch Boards all other	
Standard B3 ME B3.3 ME B3.4 Standard C1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely	1 C Inputs	PI PI S services and r	meets the prevalent norms  Switch Boards all other electrical installations are	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have	1 C Inputs	PI PI S services and r	corner, check availability of curtains, screens etc.  meets the prevalent norms  Switch Boards all other	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of electrical installations	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires	1 C Inputs assured	PI PI S services and r	meets the prevalent norms  Switch Boards all other electrical installations are	
Standard B3  ME B3.3  ME B3.4  Standard C1  ME C1.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely	1 C Inputs	PI PI S services and r	meets the prevalent norms  Switch Boards all other electrical installations are	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1	gender  The service provided at facilit The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of electrical installations	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires	1 C Inputs assured	PI PI S services and r	meets the prevalent norms  Switch Boards all other electrical installations are	
Standard B3  ME B3.3  ME B3.4  Standard C1  ME C1.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate Space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and	1 C Inputs assured	PI PI S Services and II OB/SI	meets the prevalent norms  Switch Boards all other electrical installations are	
Standard B3  ME B3.3  ME B3.4  Standard C1  ME C1.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate Space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate Space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3  ME B3.3  ME B3.4  Standard C1  ME C1.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate Space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate Space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern - Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate 8  Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate qualety of the facility has adequate qualety.	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate qualete facility has adequate qualeters.	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate 8  Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate qualety of the facility has adequate qualety.	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern - Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate qualete facility has adequate qualeters.	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for	1 C Inputs assured	PI PI S Services and r OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate quality that adequate quality is a safe for providing patient care  The facility has adequate medical officers as per service	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for	1 C Inputs assured 1 1	PI PI S Services and II OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate & Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate quality that adequate quality is a safe for providing patient care  The facility has adequate medical officers as per service	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for	1 C Inputs assured	PI PI S Services and r OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate 8  Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate quality has adequate quality has adequate medical officers as per service provision and work load  The Staff has been imparted	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for consultation during OPD hours  Training of Doctor for IMNCI	1 C Inputs assured	PI PI S Services and r OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate 8  Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate qualenter of the facility has adequate qualenter of the facility has adequate provision and work load  The Staff has been imparted necessary trainings/skill set to	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for consultation during OPD hours	1 C Inputs assured	PI PI S Services and r OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2 ME C2.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate 8  Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate quality has adequate quality has adequate medical officers as per service provision and work load  The Staff has been imparted	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for consultation during OPD hours  Training of Doctor for IMNCI	1 C Inputs assured	PI PI S Services and r OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	
Standard B3 ME B3.3 ME B3.4 Standard C1 ME C1.1 ME C1.5 ME C1.6 Standard C2 ME C2.1	gender  The service provided at facility The facility ensures that the drugs prescribed are available in the pharmacy Facility ensure investigation prescribed are available at the Laboratory  The facility has adequate 8  Departments have adequate space as per patient load  The facility ensures safety of electrical installations  Physical condition of buildings are safe for providing patient care  The facility has adequate qualenter of the facility has adequate qualenter of the facility has adequate provision and work load  The Staff has been imparted necessary trainings/skill set to	Check patient party has not spend on purchasing drugs from outside Check patient party has not spend on prescribed diagnostics from outside  Area of Concern -  Safe infrastructure for delivery of Clinics have adequate space for consultation and examination  General clinic does not have temporary connections and loosely hanging wires  Floor of Clinic is non slippery and even  ualified and trained staff, required case load  Availability of Doctors for consultation during OPD hours  Training of Doctor for IMNCI	1 C Inputs assured	PI PI S Services and r OB/SI OB	neets the prevalent norms  Switch Boards all other electrical installations are intact &secure	

			ı	T		τ
		Training of staff nurse/ ANM NSSK ,RBSK, SBA, DAKSHTA, Skill lab				
		, NBSK, SBA, DAKSHTA, SKIII Idu				
			1	RR		
		Training on BLS/CPR				
			1			
ME C2.5	The Staff is skilled and					
IVIE C2.5	competent as per job description	Staff is skilled for identify &	1	CI		
		managing complication	1	SI		
Standard C3	The facil	ity provides drugs and consumable	s require	ed for assured	services.	
	The facility has availability of	Availability of oral drugs	1	SI/RR/OB	ORS, Ciplox, paediatric	
	adequate drugs at the point of				tablets, syrup, amoxycillin	
	use				tablet, Doxycyclin & Syrup Zn	
					tablets, Chloroquine tablets, Paracetamol, Metrindazol,	
ME C3.1					Albendazol, bronchodilator,	
					inj Gentamicin, inj	
					Dexamethasone,Syrup IFA etc.	
		Availability of Emergency Drugs	1	SI/RR/OB	Adrenaline, Phenobarbiturates,	
					Sodium bicarbonate,	
					10%dextrose	
Standard C4	The facility	has equipment & instruments rec	nuired fo	r assured list o	of services.	
Standard C+	The facility	y has equipment & instruments rec	quireu io		71 SCI VICES.	
	Availability of equipment &			ОВ	Thormometer Stathanner	
ME C4.1	instruments for examination &	Availability of functional equipment			Thermometer, Stethoscope, weighing scale, infantometer,	
	monitoring of patients	for Examination & monitoring	1		Stadiometer	
	Availability of equipment &	Availability of resuscitation		ОВ		
	instruments for treatment	equipment				
	procedures, being undertaken				Otoscope, tongue depressor,	
ME C4.2	in the facility				view box, ambu bag(0-10 years and >10 years)	
IVIE C4.2					0-1 face mask,250 ml bag and	
					mask, 0,1 blade(straight)for	
					largyngoscpe, ET tube	
			1			
		Area of Concern - D Sup	port Se	ervices		
	The facility has establish	ned facility management programn	ne for ma	aintenance &	upkeep of equipment &	
Standard D1		tructure to provide safe & secure				
	The facility ensures	Temperature control and	I	1		
	comfortable environment for	ventilation in OPD			Check for Optimal	
	patients and service providers				temperature and ventilation	
					is maintained in clinics for	
					comfort of staff & Patients .	
ME D1.2					Check for availability of	
					heaters in winters in rooms where neonates and sick	
					children are examined. In	
					case of new-borns avoid free	
			1	OB/SI	draught of air.	
	Patient care areas are clean	Floors, walls, roof , sinks, patient				
ME D1.3	and hygienic	care and corridors are Clean		0.5		
		Surface of furniture and fixtures are	1	ОВ	+	<del>                                     </del>
		clean	1	ОВ		
	Facility infrastructure '-	Fixtures and Patient Furniture are		1		
ME D1.4	Facility infrastructure is adequately maintained	intact and maintained in OPD				
	adequatery maintained		1	OB		ļ
ME D1 E	Facility has policy of removal of	No condemned/Junk material in				
ME D1.5	condemned junk material	the OPD	1	ОВ		
		Area of Concern - E Cli				
	Facility has defined procedu	re for primary management and c			appropriate maintenance of	
Standard E2	Table y las as miles prosedu	records		, ,	The special strained of	
		1000143				

			1		
ME E2.2	The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the	Patient referred with referral slip			
	continuity of care.		1	RR/SI	
		Availability of referral linkages to higher centres.	1	RR/SI	Check contact details of higher centre
		Advance communication is done with higher centre	1	RR/SI	
		Referral out register is maintained	1	RR/SI	
	Facility ensures follow up of	Facility ensure the follow up of		IXIV/31	Check any register is
ME E2.3	patients	referred patients	1	RR/SI	maintained
Standard E6	Facility has	established procedure for care of	New bor	n & Child as p	er guideline
ME E 6.2	Triage, Assessment & Management of new-borns having emergency signs are done as per guidelines	Primary management of emergency signs newborns	1	RR/SI	Check for adherence to clinical protocols . The management of emergency signs consist of –Resuscitation -Management of Hypoglycemia -Management of Hypothermia -Management of shock
		Stablization & referral of sick new born & those with very low birth weight is done as per referral	1		
		criteria		RR/SI	
ME E6.3	Management of children presenting with fever, cough/ breathlessness is done as per guidelines	Primary management of children with fever, cough & breathlessness	1	RR/SI	Check for adherence to clinical protocols .Check facility of nebulization, oxygen & mask
ME E6.4	Management of children with severe Acute Malnutrition is done as per guidelines	Screening of children coming to OPDs using weight for height and/or MUAC	1	RR/SI	
		and/or MOAC	1	KI(J)	
		Check staff is aware of procedure for complimentary feeding & feeding during illness	-		
ME E6.5	Management of children presenting diarrhoea is done per guidelines	Management & Referral of Severe Dehydration as per clinical protocol	1	RR/SI	Check for the dosage and logarithm 100ml/kg of ringer lactate/Normal saline Infants 30ml/kg -1hour + 70ml/perkg 5hr for Child -30ml/kg-30min. + 70 ml/kg 2 1/2 hrs ORS 5ml/kg/hr reassessment
		Management of Moderate Dehydration as per clinical protocol	1	RR/SI	ORS treatment at clinic for 4 hrs ask staff how to determine the volume of ORS given as per age and weight
		Treatment of diarrheal with no dehydration	1	rr/si	Give fluids, zinc supplements and food and advise to continue ORS at home  • Advise mother when to return immediately  • Follow up in 5 days if not improving.

		Treatment of Persistent Diarrheal	1		Single Dose-Vit A	
		as per clinical protocol			Zinc Sulphate 20 mg daily for	
					14 Days	
					Follow up in 5 days &feeding	
					of children	
				DD/CI		
		Treatment of Discourts and a second	1	RR/SI		
		Treatment of Dysentery as per	1	DD /CI		
		protocol	_	RR/SI	With ORG Miller Heaville	
		Availability of ORT corner	1		With ORS, Mixing Utensils	
					and instructions displayed on	
					how to use. Check for records	
					to ensure that ORT is	
					maintained everyday	
				OB		
		Staff aware & Practice ETAT	1		Staff is skilled for basic life	
					support for young, infant &	
					children	
			1			
			1			
	Screening & Referral of					
ME EG G	Screening & Referral of				birth doforts deficient	
ME E6.6	children as per guidelines of	Fault aggregation 8 of Second of			birth defects, deficiency,	
	Rastriya Bal Swasth Karkarm	Early screening & referral of			childhood diseases,	
		children coming to OPD with any		61/22	developmental delays &	
		of 4 Ds under RBSK		SI/RR	disabilities (Birth to 18 yrs)	
		Area of Concern - F Infe	ection Co	ontrol		
Standard F1	Facility has define	d & implemented procedure for e	nsuring H	and hygiene r	ractices & asepsis	
		Availability of hand washing Facility			Check for availability of wash	
ME F1.1	Hand washing facilities are	at Point of Use			basin near the point of use	
	provided at point of use		1	OD		
		Availability of maning Mater	1	OB	Aslata Oraca tha tau Asla Staff	
		Availability of running Water			Ask to Open the tap. Ask Staff	
			1	ОВ	water supply is regular	
		Availability of antiseptic soap with		ОВ	Check for availability/ Ask	
		soap dish/ liquid antiseptic with			staff if the supply is adequate	
		dispenser.	1	OB	and uninterrupted	
		Display of Hand washing Instruction	1	OB	Prominently displayed above	
		at Point of Use			the hand washing facility ,	
		at Follit of Ose			preferably in Local language	
					preferably in Local language	
				0.0		
			1	ОВ		
	Staff is trained and adhere to	Staff is adhere to standard hand				
ME F1.2	standard hand washing	washing practices				
	practices	The second of th	1	OB/SI	Ask to demonstrate	
Standard F2	Encility analyses	pilability of Borgonal Protection			ndard processions	
Standard F2	racility ensures ava	ailability of Personal Protective eq	urpment	& TOHOWS STA	iluaru precautions.	
	Eacility oncurse ada	Disposable gloves are available at	[			
NAC 52 4	Facility ensures adequate	point of use				
		İ	1			
ME F2.1	personal protection equipment					1
WIE FZ.1	as per requirements		1	ОВ		
IVIE FZ.1		No reuse of disposable gloves.	1	ОВ		
IVIE FZ.1	as per requirements	No reuse of disposable gloves, Masks, caps and aprons.	1	ОВ		
ME F2.1	as per requirements Staff adheres to standard		1	ОВ		
	as per requirements		1	OB		
	as per requirements Staff adheres to standard		1	OB OB/SI		
ME F2.2	as per requirements  Staff adheres to standard personal protection practices	Masks, caps and aprons.	1	OB/SI	O in the country	
	as per requirements  Staff adheres to standard personal protection practices		1	OB/SI	ent & instrument	
ME F2.2	as per requirements  Staff adheres to standard personal protection practices	Masks, caps and aprons.	1	OB/SI	ent & instrument  Ask staff about how they	
ME F2.2	as per requirements  Staff adheres to standard personal protection practices  Facility has standard	Masks, caps and aprons.  dard procedure for disinfection & s	1	OB/SI		
ME F2.2	as per requirements  Staff adheres to standard personal protection practices  Facility has standard  The facility ensures standard	Masks, caps and aprons.  dard procedure for disinfection & s  Decontamination of Procedure	1	OB/SI	Ask staff about how they	
ME F2.2 Standard F3	Staff adheres to standard personal protection practices  Facility has standard practices and materials for	Masks, caps and aprons.  dard procedure for disinfection & s  Decontamination of Procedure	1	OB/SI	Ask staff about how they decontaminate the procedure	
ME F2.2	Staff adheres to standard personal protection practices  Facility has standard practices and materials for decontamination and cleaning	Masks, caps and aprons.  dard procedure for disinfection & s  Decontamination of Procedure	1	OB/SI	Ask staff about how they decontaminate the procedure surface like Examination table	
ME F2.2 Standard F3	Staff adheres to standard personal protection practices  Facility has standard practices and materials for decontamination and cleaning of instruments and procedures	Masks, caps and aprons.  dard procedure for disinfection & s  Decontamination of Procedure	1	OB/SI	Ask staff about how they decontaminate the procedure surface like Examination table (Wiping with .5% Chlorine	
ME F2.2 Standard F3	Staff adheres to standard personal protection practices  Facility has standard practices and materials for decontamination and cleaning of instruments and procedures	Masks, caps and aprons.  dard procedure for disinfection & s  Decontamination of Procedure	1	OB/SI <mark>on of equipme</mark>	Ask staff about how they decontaminate the procedure surface like Examination table (Wiping with .5% Chlorine	
ME F2.2 Standard F3	Staff adheres to standard personal protection practices  Facility has standard practices and materials for decontamination and cleaning of instruments and procedures	Masks, caps and aprons.  dard procedure for disinfection & s  Decontamination of Procedure	1	OB/SI	Ask staff about how they decontaminate the procedure surface like Examination table (Wiping with .5% Chlorine	

		I		ı	1	1
		Proper Decontamination of instruments after use	1			
		instruments arter use		61		
			<u> </u>	SI		
Standard F4	Facility has defined & esta	blish procedure for segregation, c		, treatment &	disposal of Bio medical &	
		hazardous wa	ste			
	The facility ensures segregation	Availability of colour coded bins at			Bins are covered	
ME F4.1	of Bio Medical Waste as per	point of waste generation				
	guidelines		1	ОВ		
		Availability of colour coded bags				
					Check Yellow bag is non	
			1	ОВ	chlorinated	
		Segregation of different category of				
		waste as per guidelines				
			1	ОВ		
		Display of work instructions for				
		segregation and handling of				
		Biomedical waste	1	ОВ	Distorial 9 in legal language	
		Area of Concern - G Quali			Pictorial & in local language	
Standard G.1	Facility has es	stablished quality Assurance Progr	am as pe	er state/Nation	al guidelines	
	The facility has established	Internal Assessment of the New				
ME G1.5	internal quality assurance	Born & child Health services is				
	programme	done at periodic interval	1	RR		
Standard G3	Facility has established, o	documented & implemented stand	dard ope	rating procedu	re system for its all key	
	Standard Operating procedures	processes .		I		
	are prepared , distributed and					
ME G3.1	implemented for all key	Updated SOP are available at point				
	processes	of use	1	RR		
		SOP adequately cover all relevant		20		
		processes of the department	1	RR		+
		Treatment guideline for New born				
		& child health	1	RR		
ME G3.2	Staff is trained as per SOPs	Staff is trained to identify sign of				
		dehydration	1	RR/SI		
		Staff is trained to identify sign of				
		malnourishment	1	RR/SI		<del>                                     </del>
		Staff is trained to identify danger				
		sign of New born	1	RR/SI		
		-				
ME G3.3	Work instructions are displayed	Display of method for preparation				
	at Point of work	of ORS	1	ОВ		
						<del>                                     </del>
		Display of protocols for New born				
		assessment for Malnourishment	1	ОВ		<del>                                     </del>
		Display of protocols for				
		identification of danger sign	1	ОВ		
		Area of Concern - H:				
Standard H1	The facility mea	sures its productivity, efficiency, c	linical ca	re & service Q	uality indicators	
	Facility measures Productivity					
ME H1.1	Indicators on monthly basis	No. of children attended the OPD				
	and the state of t	per month	1	RR		<del>                                     </del>
		Percentage of new horn stabilized				
		Percentage of new-born stabilized & referred for treatment for higher				
		facility	1	RR		
					•	

		Percentage of children with Acute malnutrition referred to NRCs	1	RR		
		Percentage of children treated with anaemia	1	RR		
ME H1.2	Facility measures efficiency Indicators on monthly basis	Percentage of new born/children followed up after referral	1	RR		
ME H1.3	Facility measures Clinical Care & Safety Indicators on monthly basis	Percentage of children with diarrhoea treated with ORS and Zn	1	RR		
Standard H2	Facilit	y endeavours to improve its perfor	mance to	meet bench	marks	
ME H2.2	The facility strives to improve indicators from its current performance	Trends analysis of Indicators is done at Periodic Intervals	1	RR		

New Born & C	New Born &Child Health				
New Born &child Heal Score	50.0				
Area of (	Concern wise Score				
A Service Provision	50.0				
B Patient Rights	50.0				
c Inputs	50.0				
D Support Services	50.0				
E Clinical Services	50.0				
F Infection Control	50.0				
Quality Manangement	50.0				
H Outcome	50.0				

	National Qua	ality Assurance Standards for U - F	РНС		4	
		Checklist for Immuniz	ation			
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks
		Area of Concern - A S				
Standard A1		Facility provides Promotive, prev	entive and curat	tive services	I	
ME A1.4	Services are available for the time period as mandated	Immunization services are available during OPD timing	1	rr/Si	Though Fix day for providing ANC services, client will be entertained if visits any day during OPD hrs	
Standard A4	т	he facility provide services as mandate	ed in National H	ealth Programme	s	
ME A4.11	The facility provides services under Universal Immunization Programme (UIP) as per	Functional Immunization Clinic			Fix day immunization	
	guidelines	Immunization of Newborn (Zero Dose)	1	RR/SI	Zero Dose -OPV, HBV & BCG	
		Immunization of Infants	1	RR/SI	OPV 123, DPT 123, /Pentavalent Hepatitis 123, Measles 1& 2	
		Immunization of Children	1	RR/SI	DPT Booster, OPV Booster, JE , DT booster, TT	
			1	RR/SI	,	
		Vitamin A			1st dose at 9 month with measles, 2nd to 9th dose 16 month with DPT/OPV booster, then 1 dose every 6th month up to age of 5 yrs'	
			1	RR/SI		
		Immunization of Pregnant Women			TT1 & 2 TT Booster	
			1	RR/SI	Microplanning, supervision &	
		Management & logistic support for immunization program	1	RR/SI	storage of vaccines & transportation	
Standard B1		Area of Concern B -				
ME B1.2	The facility displays the services and entitlements available	The service provided at fa Timings and days of the ANC clinic s are displayed	1	OB	Day and timing of fix day services like ANC,Immunization etc. (as applicable)	
ME B1.4	Patients & visitors are sensitized and educated through appropriate IEC / BCC approaches	IEC material for immunization services are displayed	1	OB	IEC material regarding benefits of Immunization, service under immunization program & Immunization schedule are displayed prominently at Immunization Clinic	
ME B1.7	Information about the treatment is shared with patients or attendants and consent is taken wherever required	Guardian /Mother of baby is informed about their next visit		PI	Interview the mother about the communication received, Co-relate with the notes recorded on the card.	
		Mother & Child protection (MCP) card is provided to all clients	1	RR		
Standard B2		The service provided at fa				
ME B2.1	Services are provided in manner that are sensitive to gender	Availability of Breast Feeding Corner	1	ОВ		
Standard B3		The service provided at fa				
ME B3.1	The facility provides cashless services to all patients including pregnant women, mothers and sick children as per prevalent government schemes	Immunization services are provided free of cost	1	PI		

	les e mi	1	T	T	T	
*** ***	The facility ensures that the					
ME B3.3	drugs prescribed are available in the pharmacy	Check patient party has not spend on purchasing Consumbles from outside	1	PI		
	the pharmacy	Area of Concerr				
Standard C1	The facility has ade	quate & Safe infrastructure for delivery	of assured serv	vices and meets t	he prevalent norms	
	Departments have adequate	Demarcated area for Immunization clinic				
ME C1.1	space as per patient load	with adequate space for carrying out		00/61		
	Amenities for Patients & Staff are	immunization activities Availability of Fans /Warmers facilities as	1	OB/SI		
ME C1.2	available as per load	per need	1	ОВ		
		Availability of clean drinking water			May be shared common with	
		facilities Immunization area does not have	1	OB	General clinic Switch Boards and all other	
ME C1.5	The facility ensures safety of	temporary connections and loosely			electrical installations are intact	
02.0	electrical installations	hanging wires	1	ОВ	&secure	
	Physical condition of buildings	Floor of immunization clinic is non				
ME C1.6	are safe for providing patient care	slippery and even	1	ОВ		
			1	I OB		
Standard C2	The facility has adequate	e qualified and trained staff, required f	or providing the	e assured services	to the current case load	
	The facility has adequate nursing					
ME C2.2	staff/Paramedics as per service					
	provision and work load	Availability of Staff nurse /ANM	1	SI/RR	<u> </u>	
	The Staff has been imparted	Training of MO on immunization &AEFI				
ME C2.4	necessary trainings/skill set to enable them to meet their roles					
	& responsibilities		1	RR		
		Training of Staff nurse/ANM & LHV on				
		immunization & AEFI	1	RR	Turbitus of deals and the state	
		Training of Cold chain handlers on immunization			Training of designated cold chain handler (ANM, Clerk or	
			1	RR	Pharmacist )	
		Training on safe injection practices	1			
Standard C3	Т	he facility provides drugs and consuma	bles required fo	or assured service	s.	
		Availability of Vaccines at Immunization	1		OPV, BCG, Hepatitis B, DPT,	
ME C3.1	The facility has availability of	Clinic			Measles, Vit A/Pentavalent,	
	adequate drugs at point of use		1	RR/SI/OB	Paracetamol	
		Emergency Drug Tray is maintained at Immunization Room			Drugs for managing anaphylactic reaction - Inj	
					Adrenaline (clearly labelled), Inj	
					Hydrocortisone , Injection	
					Chlorpheniramine, IV Fluid (LR, 0.9% IVSodium	
					chloride),IV Set, Airway, tongue	
					depressor, ET tube, Ambu bag &	
					oxygen, BP apparatus with child cuff & stethoscope	
					curr & stetnoscope	
			1	RR/SI/OB		
	The Facility has availability of	Availability of disposables in				
ME C3.2	adequate consumables at point of use	immunization clinics	1	RR/SI/OB	AD Syringes	
Standard C4		e facility has equipment & instruments	required for as	surea list of servi	es.	
ME C4.4	Availability of equipment for	Availability of Vaccine carrier with ice		CI/OD		
	storage	packs  Area of Concern - D S	1 Sunnort Service	SI/OB		
Standard D1	The facility has established fa	icility management programme for mai	•		nt & infrastructure to provide	
		safe & secure environme	ent to staff & us	ers		
		Temperature control and ventilation in OPD			Chack for Ontimal tarrant	
		OF D			Check for Optimal temperature and ventilation is maintained in	
	The facility ensures comfortable				clinics for comfort of staff &	
ME D1.2	The facility ensures comfortable environment for patients and				Patients . Check for availability	
	service providers				of heaters in winters in rooms where neonates and sick	
					children are examined. In case	
					of newborns avoid free draught	
	Patient care areas are -l	Floors walls roof sinks national and	1	OB/SI	of air.	
ME D1.3	Patient care areas are clean and hygienic	Floors, walls, roof , sinks patient care and corridors are Clean	1	ОВ		
	, 6.5.110	Surface of furniture and fixtures are clean		35		
			1	ОВ		
ME D1.5	Facility has policy of removal of condemned junk material	No condemned/Junk material in the OPD	1	ОВ		
Standard D2	Facility has defi	ined procedure for storage, Inventory	wanagement &	aispensing of dru	igs in pharmacy	

				ı	1	
ME DO 4	The facility has established	Expenditure and left over records of				
ME D2.4	procedure for inventory management techniques	vaccines is maintained at immunization clinic	1	RR/SI		
	·	•				
Standard D5	Facility h	las procedure for collecting & Reporting	g of the health f	acility related in	ormation	
	The facility provides monitoring	Staff Know AEFI cases to be reported			Death , Anaphylaxis, Toxic Shock	
	and reporting services under	immediately to MO/ District			Syndrome, Hospitalization ,	
ME D5.11	Universal Immunization	Immunization Officer			Disablity etc.	
	Programme, as per guidelines		_			
		Formats for First Information Report &	1	SI/RR		
		Preliminary Investigation Report are				
		available at the faclity	1	SI/RR		
		Staff is aware of Cycle time for reporting			24 hrs for FIR	
		FIR/PIR	1	SI/RR	7 Days for PIR	
		Routine Monthly reporting is done to	1	CI/DD	Check for the records	
		District Immunization Officer  Area of Concern - E (		SI/RR		
Standard E9	Facility provide	s National Health Programmes as per o	perational/clini	cal guidelines of	the Government	
	The facility provides services	Availability of diluents for Reconstitution			Match no. of diluents With no.	
ME E9.11	under Universal Immunization	of measles vaccine			of measles	
IVIL LJ.II	Programme as per guidelines					
		December of division in	1	OB/RR	Charle diluanta and least on dan	
		Recommended temperature of diluents is ensured before reconstitution			Check diluents are kept under cold chain at least 24 hours	
		ensured before reconstitution			before reconstitution	
					Diluents are kept in vaccine	
					carrier only at immunization	
			_	00/2:/22	clinic but should not be in direct	
		Reconstituted vaccines are not used after	1	OB/SI/RR	contact of ice pack Check when the vaccine vials	
		recommended time			opened, reconstituted and valid	
		recommended time			for use. Should not be used	
					beyond 4 hours after	
			1	OB/SI/RR	reconstitution	
		Time of opening/ Reconstitution is	4	OD /DD	Check on vial	
		recorded on the vial Staff is aware of the shelf life of Vit A	1	OB/RR	6-8 weeks. Check for if date of	
		once it is opened and ensures it is not			opening has been marked on	
		given after shelf life	1	OB/SI/RR	the bottle.	
		Staff checks VVM level before using			Ask staff how to check VVM	
		vaccines			level and how to identify	
			1	OB/SI	discard point. 4 stages - use up to 3 stage)	
		Staff is aware of how check freeze	1	05/31	Ask staff to demonstrate how to	
		damage for T-Series vaccines			conduct Shake test for DPT, DT	
			1	SI	and TT	
		Discarded vaccines are kept separately			Check for expired, frozen or	
					with VVM beyond the discard point vaccine stored separately	
			1	ОВ	point vaccine stored separately	
		Check for DPT, DT, Hepatitis B, and TT				
		vials are Kept in basket in upper section				
		of ILR  Availability of separate box for open &	1	OB		
		reused vaccines	1	ОВ		
		Check for injection site is not cleaned			cleaning the injection site with a	
		with sprit before administering vaccine			spirit swab before vaccination is	
		dose			not advisable as live	
					components of the vaccine are killed if they come in contact	
			1	ОВ	with spirit	
		AD syringes are available as per		-	Check for 0.1 ml AD syringe for	
		requirement			BCG and 0.5 ml syringe for	
		Vassina vasiniant in anti-	1	OB/RR	others are available	
		Vaccine recipient is asked to stay for half an hour after vaccination to observer any				
		adverse effect following immunization				
			1	OB/SI		
		Antipyretic drugs are available	1	OB/SI		
		Mother & child protection card is				
		available & updated	1	OB/SI/RR		
		Counselling on adverse events and follow up visits done	1	SI/RR		
		Staff has knowledge & skills to recognize	-	/		
		minor and serious adverse events (AEFI)				
			1	SI/RR		
		Staff knows what to do in case of	4	CI/DD	Immediate report to MO	
		anaphylaxis	1	SI/RR	1	

Staff adheres to standard personal protection practices   Caps and agrons.   1							
Area of Concern - Finitection Control  Standard \$1  Pacility has defined & implemented procedure for ensuring Nand Pryleton process & suspensis  Mel \$1.3  Pacility has defined & implemented procedure for ensuring Nand Pryleton process & suspensis  Mel \$1.4  Pacility has defined & implemented procedure for ensuring Nand Pryleton process & suspensis  Mel \$1.5  Pacility and suspension of the control of the cont			•				
Area of Concern — Finifection Control  Concern —			provided to each client				
Area of Concern - Finifection Control  Facility has defined & implemented procedure for ensuring bland hygiene practices & asspecis  Microscoping Control  Facility from the Search of the Principle of Indian Search of the Principle Control  Facility from the Search of the Principle Control  Availability of antiseptic soap with scope with scope search of the Principle Control  Availability of antiseptic soap with scope with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of antiseptic soap with scope search of the Principle Control  Availability of principle							
Area of Concern = Enfection Control  Standard FF  Facility has defined & Implemented procedure for ensuring Mand hygiene practices & stepesis  and washing facilities are provided at point of use  Availability of numery Water  Availability of nume							
Sendand \$1.  Facility has defined & implemented procedure for ensuring Hand hygiene practices & sepsis  Availability of number with point of use  Availability of number with price or a service of a point of use  Availability of number with globy at procedure for ensuring Hand hygiene practices & sepsis  Check for availability of wash  availability of number with globy at a point of use  Availability of number with dispenser.  1				1	OB/RR	illed correctly	
Standard \$2.    Facility has defined & implemented procedure for ensuring Hand hygiene practices & seepesis   Mile Fall   Standard   Provided			Area of Concern - F I	nfection Cont			
Analysis of full control of use considerable and control of use co							
Standard FC Pacific Standard and Availability of Personal Protective apulgment & follows standard processors are applied by a standard plant with processors are with the processors and a standard plant with processors are with processors and a standard plant with processors and processors are proportion for the sport of the standard band washing practices of standard band washing practices of standard band washing practices of standard band washing standard band washing practices of standard band washing of practices are practices of standard practices for maintaining stappes of standard practices of standard practices are practices of standard practices of standard practices are practices of standard practices,	Standard F1	Facility has	defined & implemented procedure for	ensuring Hand	hygiene practices	& asepesis	
Availability of artisectic seap with soup  Availability of artisectic seap with  Availability of colour coeded bras at point  of search search seap with  Availability of colour coeded bras at point  of above of these seap with seap with  Availability of colour coeded bras at point  of above of these seap with  Availability of colour coeded bras at point  of above of these seap with  Availability of puncture proof box  Availability o		Hand washing facilities are				Check for availability of wash	
Availability of natiseptic scap with scap  Availability of antiseptic scap with scap  dish (legal antiseptic with scape)  Availability of antiseptic scap with scap  dish (legal antiseptic with scape)  Staff is stained and althree  staff is stained and althree  staff is stained and althree  staff is active to stained and althree  staff is active to active the stained and althree  staff is active to active the stained and althree  staff is active to active the stained and althree  staff is active to active the stained and althree  staff is active to active the stained and althree  staff is stained and althree  staff is active to active the stained and althree  staff is active to active the stained and althree  staff is active to active the stained and althree to active the stained and althree  stained \$2.  Facility ensures availability of Personal Protective equipment & follows standard precautions.  Proceedings of the stained and althree to stained and agroes.  Standard \$2.  Facility ensures availability of personal Protective equipment & follows standard precautions.  Proceedings of the stained and althree to stained and agroes.  Not \$2.2.  Standard \$4.  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste  The facility ensures suggested in a waisability of closur coded bins at point  of the Medical Waste as per guidelines  Not stained and althree to stained and agroes.  Avaisability of closur coded bins at point  of the stained and althree to stained and agroes.  Avaisability of procedure proof tox  variety of processes and althree to active the stained and agroes.  Avaisability of procedure proof tox  Solid Resources and althree  standard \$4.  The facility has active the stained and agroes and agroes.  Avaisability of procedure proof tox  Solid Resources and althree  standard \$6.  Standard \$6.  Facility has active the stained and ag	ME F1.1		Point of Use			basin near the point of use	
Availability of antiseptic soap with			Availability of running Water	1	ОВ	Ask to Open the tan Ask Staff if	
Availability of entiseptic soap with soap carbon control of the supply is adequate and control of the supply			Availability of fulfilling water				
durily liquid antitorpic with dispersion.  Start is trained and adhere to trained and ad				1	ОВ	The state of the s	
Start is trained and ambre to panded hand washing practices of actives of active of actives of active of a						Check for availability/ Ask staff	
ME F1.2 Staff is trained and adhere to standard hand washing parcitics of the production of the produc			dish/ liquid antiseptic with dispenser.				
Assistance of hand weaking practices of a contraction of practices of maintaining sepsion of Actingarpic Solutions at minutiation clinic of the process of maintaining sepsion of Actingarpic Solutions at minutiation clinic of the process of the pr				1	OB	uninterrupted	
## 1.3 Facility ensures spaced in maintaining asspss for the process of the proce	ME F1.2		_				
Pacity ensures standard   Pacity ensures standard   Pacity ensures availability of personal protective equipment & follows standard precautions.		standard hand washing practices	practices	1	OB/SI		
Standard 72   Facility ensures availability of Personal Protective equipment & follows standard precautions.		Facility ensures standard					
Forger dealing of injection site with a nitespetic site done  Facility ensures adequate expensive properties and appoint of the standard procession of the standard procession of the standard personal protection equipment as per requirements.  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish defined of segregation and segreditor of pixtly my grid for the segregation of segregation and segreditor of segregation and s	ME F1.3		immunization clinic		OB		
Standard F2 Facility ensures availability of Personal Protective equipment & follows standard precautions.    Facility ensures adequate personal protection equipment apersonal protection equipment approach			Proper cleaning of injection site with	1	OB	Before immunization	
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Standard G3  Facility has established ,documented &implemented standard operating procedure system for its all key processes .  Standard Operating procedures are prepared , distributed and implemented for all key processes  Updated SOP are available at point of use 1 RR  SOP adequately cover all relvant processes of the department 1 RR  Work instructions are displayed at Point of work 2 point of work 1 OB  Display of protocols for identification of 2 Display of protocols for identification of	ME G1.5	internal quality assurance					
Standard Operating procedures are prepared, distributed and implemented for all key processes  Updated SOP are available at point of use 1 RR  SOP adequately cover all relvant processes of the department 1 RR  Work instructions are displayed Display of instruction for storage of at Point of work vaccine in ice box 1 OB  Display of protocols for identification of		programme	clinic is done at periodic interval	1	RR/SI		
are prepared , distributed and implemented for all key processes Updated SOP are available at point of use 1 RR  SOP adequately cover all relvant processes of the department 1 RR  Work instructions are displayed at Point of work Display of instruction for storage of vaccine in ice box 1 OB  Display of protocols for identification of	Standard G3	Facility has established	documented &implemented standar	d operating pro	cedure system fo	r its all key processes .	
are prepared , distributed and implemented for all key processes Updated SOP are available at point of use 1 RR  SOP adequately cover all relvant processes of the department 1 RR  Work instructions are displayed at Point of work Display of instruction for storage of vaccine in ice box 1 OB  Display of protocols for identification of		Standard Operating procedures					
implemented for all key processes  Updated SOP are available at point of use  SOP adequately cover all relvant processes of the department  Work instructions are displayed at Point of work  Display of protocols for identification of  Display of protocols for identification of	N45 C2.4						
SOP adequately cover all relvant processes of the department 1 RR  Work instructions are displayed at Point of work Display of protocols for identification of Display of protocols for identification of	IVIE G3.1						
processes of the department 1 RR  ME G3.3 Work instructions are displayed at Point of work Display of instruction for storage of vaccine in ice box 1 OB  Display of protocols for identification of		processes		1	RR		
ME G3.3 Work instructions are displayed at Point of work Display of instruction for storage of vaccine in ice box 1 OB  Display of protocols for identification of				4	P.D.		
at Point of work vaccine in ice box 1 OB  Display of protocols for identification of		Work instructions are displayed		1	KK		
Display of protocols for identification of	ME G3.3			1	ОВ		
sign of AEFI 1 OB			Display of protocols for identification of				
			sign of AEFI	1	OB	]	ļ

		Display of protocol for shake test	1	OB		
		Area of Concern -	H: Outcomes			
Standard H1	The faci	lity measures its productivity, efficience	,, clinical care &	service Quality in	dicators	
ME H1.1	Facility measures Productivity					
INIC HI.I	Indicators on monthly basis	No. of children immunized per month	1	RR		
ME H1.2	Facility measures efficiency					
IVIE H1.2	Indicators on monthly basis	Drop out rate for DPT vaccination	1	RR		
	Facility measures Clinical Care &					
ME H1.3	Safety Indicators on monthly					
	basis	Percentage of AEFI cases reported	1	RR		
		No. of needle stick injuries reported	1	RR		
Standard H2		Facility endeavours to improve its pe	rformance to m	eet bench marks		
	The facility strives to improve					
ME H2.2	indicators from its current	Trends analysis of Indicatrors is done at				
	performance	Periodic Intervals	1	RR		

	Immunization Health					
	Immunization Health Score	50.0				
	Area of Con	cern wise Score				
A	Service Provision	50.0				
В	Patient Rights	50.0				
С	Inputs	50.0				
D	Support Services	50.0				
E	Clinical Services	50.0				
F	Infection Control	50.0				
G	Quality Manangement	50.0				
Н	Outcome	50.0				

	National Quality Assurance Standards for U - PHC			5			
Checklist for Family Planning							
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks	
	Area of Concern - A Service Provision						
Standard A1		Facility provides Promotive, pre	ventive and co	urative service	es		
ME A1.4	Services are available for the time period as mandated	Family Planning services are available during OPD timing	1	RR/SI			
Standard A2		The facility provides	RMNCHA Serv	vices			
ME A2.1	The facility provides Reproductive health Services	Provision of family Counseling services	1	RR/SI	For Family Planning, Abortion & Infertility		
		Provision of Contraceptives	1	RR/SI	Condoms, Oral Pills, Progesterone Only pill (POP), Emergency Contraceptives		
		Availability of Interval IUD Services	1	RR/SI	Insertion , Follow up, Management of Failure and Complication		
		Referral & Follow-up services	1	RR/SI	For Permanent Methods of Family Planning, Abortion & Infertility		
		Safe Abortion Services	1	RR/SI	Primary Management of spontaneous cases of abortion. MTP using Manual Vacuum Aspiration (MVA) technique Medical Method of abortion up to 7 weeks	DISCUSS FOR DELETION	
		Area of Concern B	- Patients' R	ights			
Standard B1		The service provided at					
ME B1.2	The facility displays the services and entitlements available	List of Family Planning services available at facility are displayed	1	ОВ			
ME B1.4	Patients & visitors are sensitized and educated through appropriate IEC / BCC approaches	IEC material regarding benefits of family planning is displayed Education Material for counseling are	1	ОВ	Flip Chart, Models, specimens and Samples of contraceptives		
ME B1.7	Information about the treatment is shared with patients or attendants and consent is taken wherever required	available  Informed Choice of client is ensured during couselling for contraception	1	OB PI	Check couselling staff inform client about all available options of family planning .		
	required	Verbal Consent is taken before IUD	-		in in promise in the second se		
		Insertion Written consent is taken before abortion procedures	1	SI/PI SI/RR	As per MTP Act on Form F		
Standard B2		The service provided at			- F		
ME B2.1	Services are provided in manner that are sensitive to gender	Check reproductive rights of female clients are ensured	1	SI/PI/RR	No stress, pressure , coercion or incentives are being used to divert client towards any specific option		
ME B2.2	Adequate visual privacy is provided at every point of care	Availability of screens/Curtains at IUD insertion area	1	ОВ			
		Privacy is maintained during individual counseling of client	1	OB/SI			
ME B2.4	The facility ensures the behaviors of staff is dignified and respectful, while delivering the services	Confidentiality of records is maintained	1	RR/SI	Specially in cases of abortion		
ME B2.5 Standard B3	Religious and cultural preferences of patients and attendants are taken into consideration while delivering services	Behavior of staff is empathetic and courteous to clients  The service provided at	1 facility are aff	PI ordable			

		1		ı	T	1
	The facility provides					
	cashless services to all					
ME B3.1	patients including pregnant					
	women, mothers and sick	Charlens are additions assured				
	children as per prevalent government schemes	Check no expenditure occurred during availing family planning or				
	government schemes	abortion services	1	PI		
		Area of Conce				
		Area or conce	m - C mputs	<u> </u>		
Standard C1	The facility has adequate & Safe infrastructure for delivery of assured services and meets the prevalent norms					
	Departments have layout				<u> </u>	
ME C1.3	and demarcated areas as	Demarcated room for IUD insertion				
	per functions	services	1	OB/SI		
Standard C2	The facility has adequate	e qualified and trained staff, required	d for providing	the assured s	services to the current case load	
	The Staff has been imparted					
ME C2.4	necessary trainings/skill set					
IVIL C2.4	to enable them to meet				Competency based training on	
	their roles & responsibilities				IUCD for service providers (5 days	
		Training on IUD insertion	1	RR	training)	
		Training on family planning acressing	4	p.n		
		Training on family planning couselling	1	RR		
	TI 0. (C. )	Training on MVA / Medical Abortion	1	RR		
ME C2.5	The Staff is skilled and				Ask about steps for insertion and	
IVIE C2.5	competent as per job description	Staff is skilled for IUD insertion	1	SI	removal asepsis	
	description	Starr is skilled for for insertion	1	31	Ask about different component of	
		Staff is skilled for Family Planning			general and method related	
		Counseling	1	SI	couselling	
Standard C3	Т	he facility provides drugs and consum	nables require	d for assured		
	The facility has availability			1		
ME C3.1	of adequate drugs at point					
	of use	Availability of Oral Contraceptive Pills	1	SI/RR/OB	At least one month stock	
		Availability of Emergency				
		Contraceptive Pills	1	SI/RR/OB	At least one month stock	
		Availability of drugs for Medical				
		Method of abortion	1	SI/RR/OB	Mifepristone & Misoprostol	
	The Facility has availability					
ME C3.2	of adequate consumables at					
	point of use		_	0./55/05		
		Availability of IUD Devices	1	SI/RR/OB		
		Availability condoms  Availability of antiseptic solution	1	SI/RR/OB SI/RR/OB		
		<u> </u>				
Standard C4	The	facility has equipment & instrument	ts required for	assured list o	f services.	
	A ilabilità af a muina a ant O					
	Availability of equipment & instruments for treatment				Stainless steel tray with cover	
ME C4.2	procedures, being				Kidney tray, Bowl, Sim's or Cusco's	
	undertaken in the facility				speculum, anterior vaginal wall	
	aacreaken in the lacinty				retrarctor, Sponge holding forcep,	
					Volsellum forceps, Utrine sound,	
		Availability of Instruments of IUD			Mayo Scissors, Long Artery	
		insertion and removal	1	OB/SI	straight forcep	
					MVA Aspirator, cannula of	
					required size, Strainer for tissues,	
					Blunt and Sharp Curette, Sim's/or	
					Cusco's Speculum , Allis forcep,	
		Availability of Instruments for MVA	1	OB/SI	Bowl for antiseptic solution	DISCUSS FOR DELETION
	Availability of equipment	Availability of almirah / Cupbord for				
ME C4.4	for storage	storing contraceptives , consumables		00/0		
	, i	and records	1	OB/SI		

					1	1
ME C4.5	Availability of patient furniture and fixtures as per load and service provision	Availability for furniture for IUD insertion	1	OB/SI	Examination/ Procedure table with washable surface , Steps for table, Light source	
ME C4.6	Availability of functional equipment and instruments for support & outreach services	Instruments for decontamination and sterilization	1	OB/SI	Plastic Bucket/tub for decontamination, Boiler / Autoclave	
		Area of Concern - D	Support Se	rvices		
Standard D1	The facility has establishe	d facility management programme f provide safe & secure envi			of equipment & infrastructure to	
ME D1.2	The facility ensures comfortable environment for patients and service providers	Procedures and counselling area are well ventilated and comfortable	1	ОВ		
ME D1.3	Patient care areas are clean and hygienic	Procedure area are clean and hygienic	1	ОВ	Check for there is no dirt, dust, stains , cobwebs etc in the IUD insertion room and counselling area	
ME D1.7	The facility provides adequate illumination level at patient care areas	Illumination in IUD section area adequate for condition procedures	1	ОВ		
Standard D2	Facility has defi	ned procedure for storage, Inventor	y Managemen	t & dispensin	g of drugs in pharmacy	
ME D2.1	The facility has established procedures for estimation, indenting and procurement of drugs and consumables	Monthly consumption of Contraceptives is calculated and indented accordingly	1	RR/SI		
ME D2.2	The facility ensures proper storage of drugs and consumables	Contraceptives are stored at stored away from moisture, sources of heat and direct sunlight at secured place	1	ОВ		
ME D2.4	The facility has established procedure for inventory management techniques	No stock out of Contraceptives and other consumables	1	RR/SI		
Standard D4	Facility has defined procedure for Governance & work Management					
ME D4.7	The facility ensures its processes are in compliance with statutory and legal requirement	Compliance to MTP Act for abortion Procedures	1	RR/SI		
		Area of Concern - I	Clinical Ser	vices		
Standard E2	Facility has defined proce	edure for primary management and	continuity of c	are with app	ropriate maintenance of records	
ME E2.1	There is established procedure for initial assessment & Reassessment of patients	Assessment of Client is done	1	RR/SI	History taking, physical examination	
ME E2.8	The facility ensures that standardized forms and formats are used for all purposes including registers	Availability of Records for Family Planning services and abortion	1	RR/SI	IUCD insertion register, removal register , IUD follow up register , Counselling register, abortion records as per MTP act	
Standard E7	Facility has establish procedure for Family Planning as per Govt guideline					
ME E7.1	Family planning counselling services provided as per guidelines	Staff is aware on general principles of counselling	1	SI	Ask staff about the GATHER approach G- Greet A- Ask T- Tell H- Help E- Explain R - return	

			ı	I	I-1	T
		The client is given full information			The importance of timely initiation	
		about optimal pregnancy spacing and			of an FP method after	
		its benefits			Key Messages - Recommended	
					interval before attempting next	
					pregnancy (24 Month)	
					Recommended Interval before	
					attempting next pregnancy after	
					abortion -6 Month	
					Recommended minimum age to	
					conceive - 19 years	
			1	SI		
		The client is informed additional				
		benefits of using condoms, such as				
		prevention of sexually transmitted				
		infections (STIs) & HIV				
			1	SI/PI		
		Staff is aware of case selecting criteria			49-22 years of age ?	
		for family planning			Married	
					Youngest child is at least one year	
					old	
					Spouse has not opted for	
			1	SI	sterilization	
					1. If women exclusively breastfeed	
	Facility provides spacing				her baby including night feeds	
ME E7.2	method of family planning				2. less than six month after	
	as per guideline				delivery	
	, - 0	Staff is aware of eligibility criteria for			3. Women's' menses is not	
		Lactation Amenorrhea method	1	SI	returned	
		activities in the second	_	<u> </u>	retarries	
					Benefits- Promotes breastfeeding,	
					effective immediately, no	
					medicine or side effect.	
					Limitation- All three criteria to be	
			1	Si	met for effectiveness.	
		Pills are given only to those who meet	1	JI	Contraindication of COC in	
		the Medical Eligibility Criteria			Breastfeeding mothers within 6	
		The Miculan Engionity Criteria	1	SI/RR	week and Hypertension	
		The client is given full information		JI/ KIX	Track and Trypertension	
		about the risks, advantages, and				
		possible side effects before OCPs are				
		prescribed for her.				
		p. cochoca for fier.	1	SI/RR		
		Staff has knowledge to counsel if a	-	31/100		
		dose of the contraceptive is missed				
		acceptive is illissed	1	SI		
		Staff is aware of indication and		JI	within 72 hours, second dose 12	
		method of administration of ECP	1	SI	house after first dose	
		method of administration of ECF	1	31	Ask staff about Method, Eligibility	
	The facility provides IUCD				criteria, Limitation, Side Effect and	
ME E7.3	service for family planning				contradictions for OCP method for	
	as per guidelines	IUCD are prescribed as per guidelines	1	RR/SI	Spacing Spacing	
		IUD insertion is done as per standard	1	MAJOI	No touch technique, Speculum	
		protocol			and bimanual examination,	
		protocor			sounding of uterus and placement	
			1	SI/RR	sounding of uterus and placement	
		Client is informed about the adverse	1	JI/NN	Cramping, vaginal discharge,	
					heavier menstruation, checking of	
		effect that can happen and their	1	PI/SI	IUD	
		remedy Follow up services are provided as per	1	F1/31	Beneficiary are advised about	
		protocols			indications for removal of IUD	
		protocols			Facility for removal of IUD are	
			1	SI	available	
ME E7.4			1	31	available	
ME E7.5						
IVIE E/.5						
		1	Infantia	man a l		
		Area of Concern - F	intection Co	ntroi		
Standard F1	Facility ha	s defined & implemented procedure	for ensuring Ha	and hygiene n	ractices & asepsis	
Januari I	racincy fla	- Indiana di Implemente di procedure i	C.ISWIIII III	, 8, circ p	The state of the s	
	Hand washing facilities are					
ME F1.1	provided at point of use	Availability of Hand washing facility				
	p. Straca at point of use	near IUCD insertion area	1	ОВ		

		1		1	1	T
NAT 54 2	Staff is trained and adhere	Staff washes hand before and ofter			Ask about stone and E-mamonts of	
ME F1.2	to standard hand washing practices	Staff washes hand before and after the procedures	1	ОВ	Ask about steps and 5 moments of hand washing	
	practices	the procedures		ОВ	Application of water based	
	Facility ensures standard				antiseptic two or more times to	
ME F1.3	practices for maintaining				the cervix and vagina before	
	asepsis				beginning the procedure of IUCD	
		Use of antiseptic before IUCD insertion	1	SI	insertion	
		Use of aseptic/no touch technique during IUCD insertion	1	SI		
Standard F2	Facility ens	ures availability of Personal Protectiv	e equipment 8	& follows sta	ndard precautions.	
	Staff adheres to standard					
ME F2.2	personal protection	Use of clean or sterile gloves for				
	practices	procedures	1	SI/OB	Check for Disposable gloves	
Standard F3	Facility h	as standard procedure for disinfection	n &sterilizatio	n of equipme	nt & instrument	
	TI 6 111					
	The facility ensures standard practices and					
	materials for					
ME F3.1	decontamination and					
	cleaning of instruments and					
	procedures areas	Procedure surfaces are wiped with				
		0.5% solution after every procedure	1	SI/OB		
					All instruments are fully immersed	
					in open position in a plastic	
		Decontamination of Instruments after			container filled with 0.5 Chlorine	
		use	1	SI	solution for 10%	
		Cleaning of Instruments with water				
		and detergent after decontamination	1	SI		
	The facility ensures				Boiling for 20 Mins	
NAC 52 2	standard practices and				Or Speking in 20/ glutaraldahuda ar	
ME F3.2	materials for disinfection and sterilization of	High level disinfection/ Sterilization of			Soaking in 2% glutaraldehyde or .1% solution for 20 Mins	
	instruments and equipment	instruments with appropriate method			or Sterlization in autoclave at	
		as per availability	1	SI	15lb/sq inch pressure for 20 mins	
					Up to 1 week with tight fitted	
		Chariliand instruments are stored as			cover	
		Sterilized instruments are stored as per specification	1	SI	If lid is open than use with in 24 hours	
	- W. J. J. C. J.O.	1			•	
Standard F4	Facility has defined & es	stablish procedure for segregation, co		ment & dispo	sal of Bio medical &hazardous	
		was	ıe	ı		
	The facility ensures	Availability of color coded bins at				
ME F4.1	segregation of Bio Medical	point of waste generation				
	Waste as per guidelines		1	ОВ	Bins are covered	
		Segregation of different category of				
		waste as per guidelines	1	ОВ		
		Area of Concern - G Q	uality Mana	gement		
Standard G.2		Facility has established system for Pa	atients and em	ployees satis	faction	
	Dationt Catisfactic					
ME G2.1	Patient Satisfaction surveys are conducted at periodic	Client feedback is taken after counselling, IUCD and abortion				
ML GZ.1	intervals	services	1	SI/RR		
Chandond C2		documented &implemented standa			stom for its all key processes	
Standard G3	racinty has established	<u> </u>	ard operating	procedure sy	stem for its all key processes .	
ME G3.1		DELETED				
ME G3.2	Staff is trained as per SOPs	Display of protocols for family	1	ОВ		
		planning counseling	1	OR		
ME G3.3	Work instructions are					
	displayed at Point of work		1	ОВ		
		Display of protocols of IUCD insertion				
		and removal	1	ОВ		
		Area of Concern	- H: Outcom	ies		
Standard H1	The facil	ity measures its productivity, efficien	cy, clinical car	e & service Q	uality indicators	

	Facility measures					
ME H1.1	Productivity Indicators on					
	monthly basis	IUCD inserted per 1000 eligible female	1	RR		
		No. of abortion conducted per Month	1	RR		
		No. of Clients provided Emergency				
		Contraceptive Pills	1	RR		
ME H1.2	Facility measures efficiency Indicators on monthly basis	Percentage of client accepted limiting				
	indicators on monthly basis	method out of total counseled	1	RR		
		Percentage of client returned for				
		follow up	1	RR		
	Facility measures Clinical					
ME H1.3	Care & Safety Indicators on					
111.5	monthly basis					
	monthly busis	IUCD complication rate	1	RR		
Standard H2	Facility endeavors to improve its performance to meet bench marks					
	The facility strives to					
ME H2.2	improve indicators from its	Trends analysis of Indicators is done at				
	current performance	Periodic Intervals	1	RR		

Family Planning Health				
	Family Planning Health	50.0		
	Area of Concern wise Score			
A	Service Provision	50.0		
В	Patient Rights	50.0		
С	Inputs	50.0		
D	Support Services	50.0		
E	Clinical Services	50.0		
F	Infection Control	50.0		
G	Quality Manangement	50.0		
Н	Outcome	50.0		

	National Quality A	Assurance Standards for U - PHC			6	
		Checklist For Communicable Dise	ases			
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks
		Area of Concern - A Service F	Provision			
Standard A1	Fa	cility provides Promotive, preventive an	d curative serv	vices		
ME A1.4	Services are available for the time period as mandated	OPD Services are available for at least 8 Hours in a day				
Standard			1	RR/SI		
A4	The facil	ity provide services as mandated in Nati	ional Health Pr	ogrammes		
ME A4.1	The facility provides services under National Vector Borne Disease Control Programme as per guidelines	Case detection & Early diagnosis of malaria case	1	RR/SI	Microscopy/ Rapid diagnostic kit	
		Management & Chemoprophylaxis of Malarial Cases	1	RR/SI		
		Referral of malaria cases		Mysi	Cerebral Malaria, Septecemia	
			1	RR/SI	etc Distribution of treated	
		Preventive Activites for Malaria control	1	RR/SI	mosquito net, indoor residual spray & larval control Method etc.	
		Diagnosis & treatment for local prevalent vector born Disease			Lymphatic Filariasis, Dengue, Japanese Encephalitis, Chikungunya,	
	The facility provides services under Kevised	Case detection & Early diagnosis of TB	1	RR/SI	Kala Azar (Leishmania osis)	
ME A4.2	National TB Control Programme as per	Availability / Linkage to microscopic	1	RR/SI		
		centre	1	RR/SI		
		Availability of functional DOT Centre	1	RR/SI		
		Treatment & Management of tuberculosis	1	RR/SI	Include Management of Common complication & side effects of treatment	
		Linkage for chest X ray & culture sensitivity of Mycobacterium bacilli for diagnosis of TB	1	RR/SI		
ME A4.3	The facility provides services under National Leprosy Eradication Programme as per guidelines	Early detection of leprosy & its complications			Community empowerment & mobilization of self referral, capacity building	
			1	RR/SI		
		Early referral of disabled cases			Identification of cases having disability their early referral & follow up at village level	
			1	RR/SI		
		Diagnosis & treatment			All reported and referred cases examined following standard procedure, diagnosed based on cardinal signs and treated with MDT & Management of Nerve impairment	
		Defermal Complete for the Complete Comp	1	RR/SI	Difficulty and the second	
		Referral Services for complicated laprosy cases			Difficult to diagnosis cases,lepra reaction difficult to manage,Complicated ulcer,Eye problem,cases of reconstructive surgeries,person needs customized footwear.	
			1	RR/SI		
	!	1		, 5.	1	

The facility provides services under National AIDS Control Programme as per guidelines  Referral linkage with ICTC for confirmation of MV status  Condom Promotion & distribution among high risk groups  I RR/SI  Counseling & guide patient with HICLOSCOPY (Consequence)  I RR/SI  Counseling & guide patient with HICLOSCOPY (Consequence)  I RR/SI  Counseling & guide patient with HICLOSCOPY (Consequence)  I RR/SI  I RR/SI  The facility Provides services under integrated diseases  I RR/SI  The facility Provides services under integrated diseases  Acea of Concern B - Patients' Rights  Availability and Saloplay of IEC material for RNTCP  Availability and Saloplay of IEC material for NYSDCP  Patients & visitors are sensitized and educated from years of the diseases  Availability and Saloplay of IEC material for NYSDCP  Availability and Saloplay of IEC material for NYSDCP  Proventing Maleria in pregnancy where, preventing Maleria in pregnancy where preventing Maleria in pregnancy where, preventing Maleria in pregnancy where preventin							
Referral linkage with NETCE for confirmation of HIV Status 1. RN/N	ME A4.4		Early detection of HIV			cases and cases referred by	
Referral linkage with NETCE for confirmation of HIV Status 1. RN/N				1	RR/SI		
Conformation of the Value of Exercision among high risk groups  Constructing & guide patient with with MOS for recoloning ART for their schematic schematic patients receiving ART for their patients receiving ART for their schematic patients and patients and patients are schematic patients.  Area of Concern 8 – Patients Rights  The service provided at facility are accessible  The schematic patients and concern it is schematic patients and patients are schematic patients and patients in informed about the diagnosis & receiving patients in information and patients are schematic patients and patients in information and patients are schematic patients and patients are schematic patients and patients are schematic patients and patients and consent is schematic patients or attendants and consent is schematic patients or attendants and consent is schematic patients or attendants and consent is schematic patients or attendant patients are schematic patients and patients are schematic patients and patients are schematic patients and patients are schematically patients and patients are schematically patients in maintained patients in maintained and consent is schematic patients of patients are patients.  The schematic patients records and clinical patients in a patient are patients are patients.  The sch			Referral linkage with ICTC for	1	KNJSI		
Condom Promotion & distribution among high risk groups  Counserling & guide patient with WAMADS for receiving ART  Counseling & guide patient with WAMADS for receiving ART  Counseling & guide patient with WAMADS for receiving ART  Counseling & guide patient with WAMADS for receiving ART  Linking with Microprose centre for ART for their atherenes.  Support to galestis seeding ART for their atherenes.  Linking with Microprose centre for ART			I -				
Page				1	RR/SI		
Counselling & guide patients with HIV/AIDS for receiving ART 1 RR/SI Support to patients receiving ART 1 RR/SI Support to patients receiving ART 6 their adherence of the support to patients receiving ART 6 their adherence of the support to patients receiving ART 6 their adherence of the support to patients receiving ART 6 their adherence of the support to patients receiving ART 6 their receivable of the support to patients receiving ART 6 their receivable of the support of the supp			Condom Promotion & distribution among				
Counselling & guide patient with   11/1/105 for receiving ART   1   188/51			high risk groups				
Counselling & guide patient with   11/1/105 for receiving ART   1   188/51				1	RR/SI		
HIV/AUS for receiving ART or their elements of the patients receiving ART for their elements of the patients receiving ART for their elements of the patients receiving ART for their elements of the patients received and received the patients of patients received and received the patients of pa			Counselling & guide patient with		,		
Support to patients receiving ART for their adherence and experience and experien							
April   Advantage   April			-	1	RR/SI		
In large with Microscopic centre for HIV To Coordination  The facility Provides services under integrated because Juried Interface of Conference and Confere							
Ithiage with Microscopic centre for NIV 1 RR/SI			adherence				
The facility Provides services under integrated Disease Surveillance Programme as per Guidelines    Confidence   Confidenc				1	RR/SI		
The Seculity Provides services under integrated of security and securi							
Disease Surveillance Programme as per ciutellines  Area of Concern B - Patients' Rights  The service provided at facility are accessible  Patients & visitors are sensitized and educated through appropriate IEC / BCC approaches  Availability & display of IEC material for RNTCP  Availability & display of IEC material for NNDCP  Proventing Maleria in pregnancy preventing Maleria preventing M				1	RR/SI		
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The service provided at facility are accessible  The service provided at facility are accessible  Availability & display of IEC material for RNTCP  Availability & display of IEC material for RNTCP  Availability & display of IEC material for RNTCP  Availability & display of IEC material for NVBOCP  BE Cactivities to enhance awareness & 1 OB  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  Availability & display of IEC material for NVBOCP  BE Cactivities to enhance awareness & 1 OB  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy  BE Cactivities to enhance awareness & 1 Preventing Maleria in pregnancy of two modes of transmission and reventing for preventing Maleria in pregnancy of two modes of transmission and r	IVIE A4.9		diseases	1	DD/CI		
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Availability & display of IEC material for NVBDCP    Availability & display of IEC material for NVBDCP						meompiete d'eutment	
Availability & display of IEC material for NVBDCP    Availability & display of IEC material for NVBDCP							
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Patient is informed about the diagnosis & reatment plan / Treatment is shared with patients or attendants and consent is taken wherever required   Patient records are kept in safe custody   Patient   Patient records are kept in safe custody   Patient   Patient records are kept in safe custody   Patient			I			· ·	
IEC activities to enhance awareness & 1 OB   Preventing Maleria in pregnancy   Preventing Maleria in pregnancy   Preventing Maleria in pregnancy   Provision of basic information and prevention of basic information and prevention of HIV/AIDS for promoting behavioural change and reducing vulnerability.   OB   Patient is informed about the diagnosis & Treatment Plan   OB   Provision of HIV/AIDS for promoting behavioural change and reducing vulnerability.   OB   Prescription containing Diagnosis & Treatment Plan   OPD Slip/ Prescription containing Diagnosis & taken wherever required   Nethod of Administration / taking of the medicines is informed to patienty relative / DOT provider as per prescription   1 RR/PI   RR/PI   Patient records and clinical information is maintained   Patient records are kept in safe custody   Check Patient records e.g. OPD register, DOT register, HIV postive reports etc. are kept in safe custody information is maintained   Privacy & Confidentiality of patients   1 OB/SI   DB/SI   DB			for NVBDCP			-	
IEC activities to enhance awareness & preventive measures about STI, HIV/AIDS   Provision of basic information on modes of transmission and prevention of HIV/AIDS for promoting behavioural change and reducing vulnerability.      ME B1.7							
IEC activities to enhance awareness & 1 OB   Provision of basic information on modes of transmission and prevention of HIV/AIDS for promoting behavioural change and reducing vulnerability.							
IEC activities to enhance awareness & preventive measures about STI, HIV/AIDS   1   Provision of basic information on modes of transmission and prevention of HIV/AIDS for promoting behavioural change and reducing vulnerability.						pregnancy	
preventive measures about STI, HIV/AIDS			150 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		OB		
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ME B2.3   The service provided at facility are acceptable			Method of Administration /taking of the	1	KK/PI	caru ioi io patient	
DOT provider as per prescription   1   RR/PI			, ,				
Standard B2  The service provided at facility are acceptable  Confidentiality of patients' records and clinical information is maintained  Privacy & Confidentiality of patients having HIV, Leprosy etc  Area of Concern - C Inputs  The facility has adequate medical officers as per service provision and work load.  Availability of Doctors for consultation during OPD hours			I				
The service provided at facility are acceptable  Patient records are kept in safe custody  Confidentiality of patients' records and clinical information is maintained  Privacy & Confidentiality of patients  Privacy & Confidentiality of patients  Privacy & Confidentiality of patients  Area of Concern - C Inputs  Standard C2  The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  Availability of Doctors for consultation during OPD hours			, p. c. de. do per prescription	1	RR/PI		
Description of patients and clinical information is maintained    Patient records are kept in safe custody   Check Patient records e.g. OPD register, DOT register, HIV postive reports etc. are kept in safe custody and are not accessible to unauthorized patients    Privacy & Confidentiality of patients   1	Standard					•	
Confidentiality of patients' records and clinical information is maintained  Privacy & Confidentiality of patients  Privacy & Confident	B2		The service provided at facility are	acceptable			
Confidentiality of patients' records and clinical information is maintained  Privacy & Confidentiality of patients  1 SI/OB  The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  ME C2.1 The facility has adequate medical officers as per service provision and work load  Availability of Doctors for consultation during OPD hours			Patient records are kept in safe custody			Check Patient records e.g. OPD	
information is maintained  information is mainta			<u> </u>				
Information is maintained  Information is accessible to unauthorized  Information is maintained  Infor	ME B2 2	Confidentiality of patients' records and clinical				postive reports etc. are kept in	
Privacy & Confidentiality of patients  Privacy & Confidentiality of patients  1 SI/OB  Area of Concern - C Inputs  Standard C2  The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  ME C2.1  The facility has adequate medical officers as per service provision and work load during OPD hours	WIL DZ.3	information is maintained				safe custody and are not	
Privacy & Confidentiality of patients having HIV, Leprosy etc 1 SI/OB  Area of Concern - C Inputs  Standard C2  The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  Availability of Doctors for consultation during OPD hours						accessible to unauthorized	
having HIV, Leprosy etc 1 SI/OB  Area of Concern - C Inputs  Standard C2  The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  Availability of Doctors for consultation during OPD hours				1	OB/SI	patients	
Area of Concern - C Inputs  Standard C2  The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  ME C2.1  The facility has adequate medical officers as per service provision and work load during OPD hours							
The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  ME C2.1 The facility has adequate medical officers as per service provision and work load during OPD hours					SI/OB		
The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  Availability of Doctors for consultation during OPD hours			Area of Concern - C Inp	uts			
The facility has adequate qualified and trained staff, required for providing the assured services to the current case load  Availability of Doctors for consultation during OPD hours	Standard						
ME C2.1  The facility has adequate medical officers as per service provision and work load during OPD hours  Availability of Doctors for consultation during OPD hours		The facility has adequate qualifie	ed and trained staff, required for provid	ling the assure	d services to t	he current case load	
The facility has adequate medical officers as during OPD hours							
ME C2.1 per service provision and work load		The facility has adequate medical officers as	I				
· 1 RR/PI	ME C2.1		during OPD hours	_	55/5:		
		<u> </u>		1	KR/PI	Ĭ	

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		Availability of Multiple Health worker(				
ME C2.3	The facility has adequate support staff / Health	MPW)/ Community mobiliser/ Public				
	Workers as per service provision and workload	Health Manger as per guideline				
			1	RR/SI		
	The Staff has been imparted necessary	Training of Medical officer for RNTCP			Module 1-4, TB-HIV module	
ME C2.4	trainings/skill set to enable them to meet their					
	roles & responsibilities		1	RR		
		Training for MPW module under			Senior treatment supervisor	
		RNTCP			module, TB Health visitor	
					module & MPW /Health	
					assistant module training as	
					applicable	
			1	RR		
		Training of Aganwadi workers/			DOT provider module on TB,	
		ANM/Community volunteer under			DOT provider module on TB-HIV	
		RNTCP	1	RR		
		Re-training is conducted as per				
		retraining schedules of RNTCP	1	RR		
		Training on NACP	1	RR		
		Training on leprosy	1	RR		
Standard						
C3	The facilit	ty provides drugs and consumables requ	ired for assure	ed services.		
NAT C2 4	The facility has availability of adequate drugs				Category I & Category II. Check	
ME C3.1	at point of use	Availability of Anti tubercu <mark>lo</mark> r drugs under			the availability of Stock & their	
		RNTCP	1	OB/RR/SI	Storage as per guideline	
					Artesunate, Chloroquine	
					phosphate,Primaquine,Pyrimet	
					hamine,Quinine	
					sulphate,Sulfadoxine +	
		Availability of drugs under NVBDCP	1	OB/RR/SI	Pyrimethamine	
		Availability of Drugs for National Leprosy	-	OBJINIOSI	Availability of MDT &	
		Eradication Program	1	OB/RR/SI	Prednisolone	
		Area of Concern - D Support		OD/III()SI	Treumsolone	
Standard		Area of concern - D support	Jei vices			
D5	Facility has proce	dure for collecting & Reporting of the h	ealth facility re	elated informa	tion	
		Reporting is done on Form 01 (MF 2)			For reporting of blood smear.	
		, ,			Reporting format contain	
					information about patient's	
					information about patient's name, age, sex and slum, etc. A	
					name, age, sex and slum, etc. A	
	The facility provides monitoring and reporting				name, age, sex and slum, etc. A code number is given to each	
ME D5.1	The facility provides monitoring and reporting services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of	
ME D5.1	, ,				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical	
ME D5.1	services under National Vector Borne Disease		1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 02 (MF 4)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 02 (MF 4)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 02 (MF 4)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 02 (MF 4)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 02 (MF 4)	1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 02 (MF 4)  Reporting is done on Form 03 (MF 5)			name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC , it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of	
ME D5.1	services under National Vector Borne Disease				name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical	
ME D5.1	services under National Vector Borne Disease		1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 03 (MF 5)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 03 (MF 5)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided	
ME D5.1	services under National Vector Borne Disease	Reporting is done on Form 03 (MF 5)	1	RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
ME D5.1	services under National Vector Borne Disease Control Programme as per guidelines	Reporting is done on Form 03 (MF 5)	1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)	1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
ME D5.1	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New	1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New	1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New	1 1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New and retreatment cases of TB	1 1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New and retreatment cases of TB  Availability of Quarterly report on sputum	1 1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New and retreatment cases of TB  Availability of Quarterly report on sputum conversion of New and retreatment cases	1 1	RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New and retreatment cases of TB  Availability of Quarterly report on sputum conversion of New and retreatment cases	1 1 1	RR RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New and retreatment cases of TB  Availability of Quarterly report on sputum conversion of New and retreatment cases registered 4-6 month earlier	1 1 1	RR RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	
	Services under National Vector Borne Disease Control Programme as per guidelines  The facility provides services monitoring and reporting services under Revised National TB	Reporting is done on Form 03 (MF 5)  Reporting is done on Form 08 (MF 16)  Availability of Quarterly reports on New and retreatment cases of TB  Availability of Quarterly report on sputum conversion of New and retreatment cases registered 4-6 month earlier  Availability of Quarterly report on result	1 1 1	RR RR RR	name, age, sex and slum, etc. A code number is given to each patient in terms of blood smear number for identification of each fever case screened, for tracing out to provide radical treatment and also for follow up  Monthly reporting of malaria program of PHC, it provides details of the worker wise blood smears received and their results.  Monthly epidemiological report of malaria program of PHC, it provides species wise details of the positive cases and radical treatment provided  For reporting drug distribution centre, fever treatment depots	

		Availability of Monthly report on				
		Program Management, Logistics and				
		Microscopy by Peripheral Health				
		Institutions	1	RR		
		Monthly report on programme				
		management, logistics and microscopy				
		filled at all healthcare facilities & sent to				
		CMO/DTO/ concerned TU within defined	4			
		period	1	RR	No. of the land of the land	
	The facility provides monitoring and reporting	Reporting is done on MLF -04 under NLEP			Monthly progress report from	
ME D5.3	services under National Leprosy Eradication				PHC to District regarding different DPMR activities	
	Programme as per guidelines		1	RR	different DPIVIR activities	
		Details of referral from various facilities		IXIX	HIV-TB collaborative activities	
	The facility provides services under National	Details of referral from various facilities			including line listing of cases	
ME D5.4	AIDS Control Programme, as per guidelines				referred from ICTC to RNTCP	
	7 libs control i rogramme, as per gardennes		1	RR	referred from fere to kivier	
		Monthly HIV-TB report	1	RR		
		Check form P is filled for information	1		Form for presumptive	
		required	_		surveillance reporting	
					Form P contain information	
	L				Name of reporting unit, state,	
	The facility provide monitoring and reporting				district, Block,Name of officer	
ME D5.9	service for Integrated Disease Surveillance				incharge along with signature,	
	Programme, as per guidelines				IDSP reporting week, No.of	
					cases under each disease and	
					syndrome	
				RR/SI		
		Reporting format (Form P) are sent to	1	<u></u>	Form P will be filled in	
		DSU as per guidelines			duplicate (two copies),	
					Surveillance officer may place	
					carbon paper in between 2	
					sheets, One copy (blue ) is	
					retained by MO and other	
				/	(Yellow) will be sent to DSU	
				RR/SI		
		Area of Concern - E Clinical	Services			
Standard						
	Facility has defined procedure to	r primary management and continuity	of care with ap	propriate mai	ntenance of records	
E2	Facility has defined procedure to	r primary management and continuity	of care with ap	propriate mai		
E2	Facility has defined procedure to	Availability of Form / Format for testing	of care with ap	propriate mai	Mycobacteriology	
E2	Facility has defined procedure to		of care with ap	propriate mai	Mycobacteriology culture/sensitivity test form	
E2	Facility has defined procedure to  The facility ensures that standardised forms	Availability of Form / Format for testing	of care with ap	propriate mai	Mycobacteriology culture/sensitivity test form Laboratory form for sputum	
E2 ME E2.8		Availability of Form / Format for testing	of care with ap	propriate mai	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination	
	The facility ensures that standardised forms	Availability of Form / Format for testing	of care with ap	propriate mai	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing	of care with ap	propriate mai	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing			Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP	of care with ap	propriate mai	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing			Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form TB laboratory monthly abstract	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP			Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP			Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP			Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP			Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP	1	RR/OB	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1),	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP	1	RR/OB	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra	
	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National	1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National	1	RR/OB	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  al Health Programmes as per operation.	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3) overnment	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  al Health Programmes as per operation.	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to	
ME E2.8	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides Nation:  Facility provides National Vector	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Treatment for confirmed P. Vivax Malaria	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols	1 1	RR/OB RR	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.	
ME E2.8 Standard E9	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols  Patient on malaria treatment (specially on Primaquine) are provided with	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.  Patients should be instructed to report back in case of	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.  Patients should be instructed to report back in case of haematuria or high colored	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols  Patient on malaria treatment (specially on Primaquine) are provided with	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.  Patients should be instructed to report back in case of haematuria or high colored urine / cyanosis or blue	
ME E2.8 Standard	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols  Patient on malaria treatment (specially on Primaquine) are provided with	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	Culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  Divernment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.  Patients should be instructed to report back in case of haematuria or high colored urine / cyanosis or blue coloration of lips and	
ME E2.8 Standard E9	The facility ensures that standardised forms and formats are used for all purposes including registers  Facility provides National Facility provides Service under National Vector Borne Disease Control Program as per	Availability of Form / Format for testing and Diagnosis of TB under RNTCP  Availability of Records for RNTCP  Availability of records for National Leprosy Eradication Program  Al Health Programmes as per operation.  Treatment for confirmed P. Vivax Malaria is done as per protocols  Patient on malaria treatment (specially on Primaquine) are provided with	1  1 al/clinical guide	RR/OB  RR  RR  elines of the G	Mycobacteriology culture/sensitivity test form Laboratory form for sputum examination tuberculosis treatment Card referral treatment form transfer form  TB laboratory monthly abstract Referral/Treatment Register TB Register  Disability register (P1/S1), Record of lepra reactions/Neuritis cases (form P3/S3/T3)  overnment  P.vivax cases should be treated with chloroquine for three days and Primaquine for 14 days. Primaquine is used to prevent relapse but is contraindicated in pregnant women, infants and individuals with G6PD deficiency.  Patients should be instructed to report back in case of haematuria or high colored urine / cyanosis or blue	

	Treatment for Confirmed P. falciparum is			P. falciparum cases are treated	
	done as per protocols			with ACT (Artesunate	
				3days+Sulphadoxine-	
				Pyrimethamine 1 day) This is	
				accompanied by single dose of	
				Pramaquine preferably day 2).	
				However, there is resistance to	
				partner drug SP in NE, it is	
				recommended to use	
				ARTEMETHER( 20 mg) -	
				LUMEFANTRINE (120 mg (ACT-	
				AL) as per age specific dose	
				schedule for the treatment of	
				pf cases in NE (contraindicated	
				in 1st trimester of pregnancy &	
				for children weighting <5 years)	
		4	CI /DD		
	Treatment of uncommissed D foldings upon	1	SI/RR	Dunament warman with	
	Treatment of uncomplicated P. falciparum Malaria in pregnancy is done as per			Pregnant women with	
	protocols			uncomplicated Falciparum should be treated 1st trimester:	
	protocols			Quinine, 2nd &3rd trimester:	
		1	SI/RR	ACT	
	Treatment of mixed infection is done as	1	31/ NN	Mixed infections with P.	
	per protocols			falciparum should be treated as	
	F-5. F- 5.00000			falciparum malaria. However,	
				antirelapse treatment with	
				primaquine can be given for 14	
				days, if indicated.	
		1	SI/RR	• •	
	Algorithm for treatment & diagnosis of			Check for availability of	
	malaria is available with treating physician			Alogrithm	
	0. ,	1	SI/RR	C	
	Identification of drug resistance /failure				
	cases especially falciparum is done as per				
	protocols	1	SI/RR		
	Treatment of falciparum failure cases is			Falciparum malaria should be	
	done as per protocols			given alternative ACT or	
				quinine with Doxycycline.	
				Doxycycline is contraindicated	
				in pregnancy, lactation and in	
				children up to 8 years.	
		1	SI/RR		
	Staff is trained to identify severe cases of			Severe malaria have one or	
	malaria especially severe manifestation of			more of following features:	
	P falciparum			impaired	
				consciousness/coma,Repeated generalized convulsions. Renal	
				failure (Serum Creatinine >3	
				mg/dl), Jaundice (Serum	
				Bilirubin >3 mg/dl), Severe	
				anaemia (Hb <5 g/dl),	
				Pulmonary oedema,	
				Hypoglycaemia (Plasma	
				Glucose <40 mg/dl), Circulatory	
				collapse/shock, DIC,	
				Hyperpyrexia, Hyperparasitaemi	
				a (>5% parasitized RBCs ),	
				Haemoglobinuria etc.	
				-	
		1	SI/RR		
	Different coloured blister packs of ACT+SP		<u></u>	e.g: Pink for 0-1 year, yellow for	
	is available for different age group			1-5 yrs, green for 5-8 yrs, Red	
	especially for field staff			for 9-14 yrs & white for 1 5&	
				above. For NE: pack colour and	
				regimen vary by body weight &	
				age group, Yellow: weight for	
				5to 14 kg and age for> 5 month	
				to <3 years, green: weight 15 to	
				24 kg age >3 to 8yrs, Red:	
				weight 25-34 kg, age 9 to 14	
				yrs, white:weight > 34 kg,and	
				age >14 yrs	
		_	CI /O.S /S.S.		
	i	1	SI/OB/RR		

		Category wise treatment regimen is			Category I- New sputum smear-
		given to patient			positive
					Seriously ill** new sputum
					smear-negative
					Seriously ill** new extra-
					pulmonary- 2H3R3Z3E3+
					4H3R3, Category II- Sputum
ME E9.2	Facility provides services under Revised				smear-positive Relapse
IVIL L3.2	National TB Control Program as per guidelines				·
					Sputum smear-positive Failure
					Sputum smear-positive
					Treatment After Default
					Others***- 2H3R3Z3E3S3 +
					1H3R3Z3E3 +
					5H3R3E3,
			1	SI/RR/OB	
		Patient wise box are colour coded as			Red - Category I, Blue -
		per category	1	SI/RR/OB	Category -II,
		Prior to start of treatment patient			Address of the patient is
		identity card & and treatment card is			verified by Peripheral Health
		-			
		prepared			worker before start of the
					treatment Within 1 week of
					diagnosis
			1	SI/RR	
		Medical officer also discuss about			Easily accessible and
		near by DOT centre with the patient			acceptable by patient, Place
		,			identified for DOT (DOT centre)
					& name and designation of
					DOT provider is written in
					patient treatment card
			1	SI/PI	
		DOT directory is maintained	<u> </u>	31,11	DOT directory For identify
		'			suitable DOT provider & DOT
		&updated at healthcare facility level		c. /p.p.	centre
			1	SI/RR	
		Duplicate treatment card is issued to			Original card is maintained at
		DOT provider/community DOT			healthcare centre where
		provider if DOT provider is situtated			treatment has started
		outside the healthcare centre			
		outside the freditheare centre	1	SI/RR	
		Medical officer issue Patient wise box	-	31/1111	Check for the stock to be
					maintained
		(PWB) for entire duration for			mamameu
		treatment to Peripheral Health			
		worker/DOT provider	1	SI/RR	
		Original treatment card is updated at			Fortnightly Basis
		regular intervals by PHW	1	SI/RR	
		All the doses of intensive phase is			Under supervision of DOT
		taken as per guideline			provider/Community DOT
		taken as per galacime			provider if any dose is missed
					patient must be contacted
					within 1 day and dose is
					·
			_	c: /n=	administrated on following day
			1	SI/RR	
		In continuous phase doses is taken as			First dose in taken under
		per guideline			supervision of DOT
					provider/Community DOT
					provider and for subsequent
					doses for week is self
					administrated. Empty blisters
					are contacted within next
					scheduled visit
			1	SI/RR	
		Check What action taken by DOT	=	-,	Reported to next level
		•			supervisor (PHW/MO- PHI/STS/
		provider if they fail to retrieve such	4	CI/DD	MO-TB)
		patient	1	SI/RR	-
		Check What action is taken if patient			Arrange visit of MO- PHI to
		misses DOT on 2 occasion in Intensive			patient home for counselling
		phase	1	SI/RR	of the patient.
		Side effects of anti TB treatment is			
		identified by DOT provider and			1
		1	1	SI/RR	
		reported to MO	1	3I/NN	+
					Discontinuation of
					Discontinuation of
		Protocols for treatment for TB during			Streptomycin
		pregnancy and Post natal Period is			Chemoprophylaxis of baby in
		adhered	1	SI/RR	case of smear positive mother

		Follow up of smear examination for			First follow up sputum	
		New smear positive patient is done as			examination is done at the end	
		per guidelines			of 2 months of intensive phase.	
		per garacines			Follow up sputum examination	
					is done at the end of 2 month	
					of continution phase and finally	
					at the end of treatment.	
			1	SI/RR		
		Follow up smear examination for re -		,	First follow up sputum	
		treatment patients as per guidelines			examination is done at the end	
		treatment patients as per guidennes			of 3 months of intensive phase.	
					Follow up sputum examination	
					is done at the end of 2 month	
					of continution phase and finally	
					at the end of treatment.	
					at the end of treatment.	
			1	SI/RR		
		Follow up smear examination for smear		31/1111	Two smears are examined	
		negative patients as per guidelines			during the follow-up visit at the	
		inegative patients as per guidennes			-	
					end of 2 months of the	
					intensive phase and again at the end of treatment	
			4	CI/DD	the end of treatment	
		Management of pacdiatric	1	SI/RR		
		Management of paediatric	1	SI/RR		
		tuberculosis as per guidelines Management of Extra pulmonary		SI/NN	Diagnostic algorithm for TB	
		tuberculosis as per guidelines	1	SI/RR	lymphadenitis	
		Management of patient with HIV		SI/NN	-ypriducintis	
		infection and TB	1	SI/RR		
		History taking as per guidelines	1	3I/NK	Includes duration of lesion,	
		mistory taking as per guidelines			duration of disability if any,	
ME E9.3	Facility provides service under National				family history/ contact history	
IVIL LO.S	Leprosy Eradication Program as per guidelines				&previous treatment	
			1	SI/RR	Aprevious treatment	
		Examination of skin as per guidelines		31/100	Include information No. of	
		LXamination of skin as per guidennes			patches, colour of patch,	
					morphology of patch, nodule,	
			1	CI/DD	infiltration, test for loss of	
		Dhysical Evamination as not guidelines	1	SI/RR	sensation in patch	
		Physical Examination as per guidelines			Dryness of hands & feet,	
					swelling & redness of patches	
					and joints, Wasting of muscle,	
					visible deformity in hand, feet,	
					eye,Redness on palm or sole,	
					callous, Blister, ulcer, High	
					stepping gait or any change in	
					gait,Appearance of new lesions	
					or expansion of existing	
					lesion,Absence of blink in the	
					eyes,Redness and watering in	
					the eyes	
			1	SI/RR		
		Examination of eye as per guidelines			Look for any redness of the	
					eye,Note "watering from the	
					eye" from history and	
					observation,Observe for blink –	
					Present or Absent, Look for lid	
					gap or inability to close one or	
					both eyes (Lagophthalmos)	
					and check for normal strength	
					of eye closure,Check the visual	
					acuity of each eye separately,	
					using a Snellen's chart.	
			1	SI/RR		
		Management of disability grade I as per			If the duration of disability	
		guidelines			grade 1 i.e. anaesthesia along	
					the course of trunk nerve is	
					recent (< 6 months), a course of	
					Prednisolone is to be started to	
			,	61/55	treat neuritis.	
	İ		1	SI/RR	i l	

		Standard adult treatment regimen for MB			Rifampicin: 600mg once in	
		leprosy is followed			month, Clofazimine: 300mg	
					once in month & 50mg every	
					day, Dapsone: 100 mg (for 12	
			1	SI/RR	month)	
		Standard adult treatment regimen for PB			Rifampicin: 600 mg once in	
		leprosy is followed			month, Dapsone; 100 mg daily	
		, , , , , , , , , , , , , , , , , , , ,	1	SI/RR	(for 6 month)	
		Standard children (10-14yrs) treatment	_	,	MB: Rifampicin:450mg once in	
		regimen for MB leprosy is followed			month,Clofazimine: 150mg	
		regiment of Wib teprosy is followed			once in month,50 mg daily,	
					Dapsone: 50 mg daily	
					(12month). PB: Rifampicin:	
					450 mg once in month,	
					Dapsone; 50 mg daily (for 6	
			1	SI/RR	month)	
		Staff is aware of adverse reactions to MDT			Like Red urine, anaemia, brown	
		and their management			discoloration of skin, gastro	
					intestinal upset. Management	
					reassurance, given iron and	
					folic acid, counselling & give	
					drug with food	
			1	SI/RR		
		Staff is aware of leprosy reaction and	=	,	2 types of reaction: Type 1-	
		their treatment			Reversal reaction, Type 2-	
					Erthyma Nodosum	
			1	SI/RR	leprosum(ENL)	
		Referral out of Patient as per guideline	1	31/11	Referral of cases where lepra	
		Referral out of Patient as per guideline				
					reaction is difficult to	
					manage,complicated ulcer, eye	
					problem,reconstruction surgery	
					cases, persons needing gradell	
					foot wear,follow up of RCS	
			1	SI/RR		
		Referral in of the patient as per guidelines			Referral of the cases having	
					reaction, disability, neuritis and	
			1	SI/RR	ulcer.	
ME E9.4	Facility provides service under National AIDS	Pre Test Counselling is done as per				
IVIL L3.4	Control program as per guidelines	protocols	1	SI/PI	By MO/ Staff Nurse/ANM	
		Staff is aware of early diagnosis & referral				
		of HIV suspected cases			Rapid Kit test done for	
					suspected cases & if case found	
			1	SI/RR	positive, referred to ICTC	
		Area of Concern - F Infection				
		Area of Concern - F infection	Control			
Standard		Area of Concern - F Infection	Control			
Standard F1	Facility has defined	& implemented procedure for ensuring		practices & a	sepesis	
Standard F1	Facility has defined	& implemented procedure for ensuring		practices & a		
F1	Facility has defined Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at		practices & a	Check for availability of wash	
		& implemented procedure for ensuring	Hand hygiene			
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at  Point of Use		practices & a	Check for availability of wash basin near the point of use	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at	Hand hygiene		Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at  Point of Use	Hand hygiene	ОВ	Check for availability of wash basin near the point of use	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water	Hand hygiene		Check for availability of wash basin near the point of use Ask to Open the tap. Ask Staff water supply is regular	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap	Hand hygiene	ОВ	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water	Hand hygiene	ОВ	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap	t Hand hygiene 1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.	Hand hygiene	ОВ	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at	t Hand hygiene 1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.	t Hand hygiene 1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at	t Hand hygiene 1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above	
F1	Hand washing facilities are provided at point	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at	t Hand hygiene 1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility,	
F1 ME F1.1	Hand washing facilities are provided at point	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at	t Hand hygiene  1  1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility,	
F1	Hand washing facilities are provided at point of use	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use	t Hand hygiene  1  1	OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility,	
F1 ME F1.1	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices	1  1  1  1  1  1	OB OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
F1 ME F1.1	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand	1  1  1  1  1  1	OB OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
F1 ME F1.1 ME F1.2 Standard	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  Ilability of Personal Protective equipme	1  1  1  1  1  1	OB OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
F1 ME F1.1  ME F1.2 Standard F2	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava Facility ensures adequate personal protection	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  ilability of Personal Protective equipme Disposable gloves are available at point of	1  1  1  1  1  1	OB OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
F1 ME F1.1 ME F1.2 Standard	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava	& implemented procedure for ensuring  Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  Ilability of Personal Protective equipme	1  1  1  1  1  1  1  1  1  1  1  1  1	OB OB OB OBSI	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
ME F1.1  ME F1.2  Standard F2  ME F2.1	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava  Facility ensures adequate personal protection equipment as per requirements	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  ilability of Personal Protective equipme Disposable gloves are available at point of use	1  1  1  1  1  1	OB OB OB	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
ME F1.1  ME F1.2  Standard F2	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava  Facility ensures adequate personal protection equipment as per requirements  Staff adheres to standard personal protection	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  ilability of Personal Protective equipme  Disposable gloves are available at point of use  No reuse of disposable gloves, Masks,	1  1  1  1  1  1  1  1  1  1  1  1  1	OB OB OB OB/SI tandard preca	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
ME F1.2 Standard F2 ME F2.1 ME F2.2	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava  Facility ensures adequate personal protection equipment as per requirements	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  ilability of Personal Protective equipme Disposable gloves are available at point of use	1  1  1  1  1  1  1  1  1  1  1  1  1	OB OB OB OBSI	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
ME F1.2 Standard F2 ME F2.1 ME F2.2 Standard	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava  Facility ensures adequate personal protection equipment as per requirements  Staff adheres to standard personal protection practices	& implemented procedure for ensuring Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  ilability of Personal Protective equipme  Disposable gloves are available at point of use  No reuse of disposable gloves, Masks,	1 1 1 1 1 nt & follows s	OB OB OB OB/SI  OB OB/SI	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
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ME F1.2 Standard F2 ME F2.1 ME F2.2 Standard	Hand washing facilities are provided at point of use  Staff is trained and adhere to standard hand washing practices  Facility ensures ava  Facility ensures adequate personal protection equipment as per requirements  Staff adheres to standard personal protection practices  Facility has standard practices and materials for decontamination and cleaning of	Availability of hand washing Facility at Point of Use  Availability of running Water  Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.  Display of Hand washing Instruction at Point of Use  Staff is adheres to standard hand washing practices  ilability of Personal Protective equipme Disposable gloves are available at point of use  No reuse of disposable gloves, Masks, caps and aprons.	t Hand hygiene  1  1  1  1  nt & follows s  1  ation of equipr	OB OB OB OB/SI  OB OB/SI	Check for availability of wash basin near the point of use  Ask to Open the tap. Ask Staff water supply is regular  Check for availability/ Ask staff if the supply is adequate and uninterrupted  Prominently displayed above the hand washing facility , preferably in Local language	
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Ask staff how they decontaminate the instruments after use and use after use			1			1	
Standard Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste  ### F41  The facility ensures segregation of Bio Medical Waste as per guidelines  Availability of colour coded bins at point of waste generation of waste generation  Availability of colour coded bases  The facility has established colour and the standard operating procedure system for its all key processes  The facility has established cotemnal assurance internal Assessment of the General clinic is often as the facility and the standard Operating procedures are prepared, distinct and implemented for all key processes  ### G513  ### G514  ### G513  ### Work instructions are displayed at Point of Clinical protection for To Grar available of Mork instructions are displayed at Point of Clinical protection for To Grar available of Mork instructions are displayed at Point of Clinical protection for To Grar available of Mork instructions are displayed at Point of Clinical protection for To Grar available of Mork instructions are displayed at Point of Clinical protection for To Grar available of Mork instructions are displayed at Point of Clinical protection for To Grar available of Mork instructions are displayed at Point of Clinical protection for treatment of Malaria in a Read of Concern – H: Outcomes  #### April 1			Proper Decontamination of instruments	1			
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Sandard Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste  ### Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste  #### Facility has established and Mariability of colour coded bins at point of waste generation   Availability of colour coded bags   0						decontaminate the instruments	
Sandard Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste  ### Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste  #### Facility has established and Mariability of colour coded bins at point of waste generation   Availability of colour coded bags   0						like Stethoscope, Examination	
Standard Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical & hazardous waste    The facility ensures segregation of Bio Medical						• •	
Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste  The facility ensures segregation of Bio Medical Waste as per guidelines  Availability of colour coded bins at point of waste generation Availability of colour coded bags  Area of Concern - G Quality Management  Area of Concern - G Quality Management  Area of Concern - G Quality Management  Facility has established external assurance internal Assessment of the General Clinic programmes  Facility has established, documented &implemented standard operating procedure system for its all key processes  Facility has established, documented &implemented standard operating procedure system for its all key processes.  Soft adequatly cover all relevant processes  Work instructions are displayed at Point of Unical protocol for POT are available of department of Work instructions are displayed at Point of Unical Protocol for POT are available of displayed  Clinical Protocol for POT are available of Unical protocol for POT are available of Significant of Work instructions are displayed at Point of Unical Protocol for POT are available of Significant of Work instructions are displayed at Point of Work of Significant of Work instructions are displayed at Point of Work of Significant of Work instructions are displayed at Point of Work of Significant of Work instructions are displayed at Point of Work of Significant of Work instructions are displayed at Point of Work of Significant of Work instructions are displayed at Point of Work of Significant of Work instructions are displayed at Point of Work of Significant of Significant of Significant of Work of Significant of Significant of Signif					SI	instruments	
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Waste as per guidelines   Availability of colour coded bags   1		Facility has defined & establish pro	cedure for segregation, collection, treat	ment & dispos	al of Bio medi	cal &hazardous waste	
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ME G3.1   distributed and implemented for all key processes   Updated SOP are available at point of use   1   RR	G3	, , , , , , , , , , , , , , , , , , ,	I	ing procedure	system for its	an key processes .	
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monthly basis population under RNTCP 1 RR  No. of New Registered cases per 1000 population under NVBDCP 1 RR  No. of New Registered cases per 1000 population under NVEDCP 1 RR  Eacility measures efficiency Indicators on monthly basis under RNTCP 1 RR  Facility measures Clinical Care & Safety Indicators on monthly basis referred to HIV 1 RR  MILEP 1 RR  Multidrug treatment completion rate under NVLEP 1 RR  Multidrug treatment on DOTs completing their treatment 1 RR  Standard Facility endeavours to improve its performance to meet bench marks  The facility strives to improve indicators from Trends analysis of Indicators is done at	MF H1 1						
population under NVBDCP 1 RR  No. of New Registered cases per 1000 population under NLEP 1 RR  ME H1.2 Facility measures efficiency Indicators on monthly basis under RNTCP 1 RR  Facility measures Clinical Care & Safety Percentage of suspected TB cases are Indicators on monthly basis referred to HIV 1 RR  Multidrug treatment completion rate under NLEP 1 RR  Proporation of TB patient on DOTs completing their treatment 1 RR  Standard Facility endeavours to improve its performance to meet bench marks  The facility strives to improve indicators from Trends analysis of Indicators is done at	WE HILL	monthly basis	population under RNTCP	1	RR		
No. of New Registered cases per 1000 population under NLEP  Facility measures efficiency Indicators on monthly basis  ME H1.2  Facility measures Clinical Care & Safety Indicators on monthly basis  ME H1.3  Facility measures Clinical Care & Safety Indicators on monthly basis  Multidrug treatment completion rate under NLEP  Proporation of TB patient on DOTs completing their treatment  Facility endeavours to improve its performance to meet bench marks  ME H2.2  The facility strives to improve indicators from  Trends analysis of Indicators is done at			No. of New Registered cases per 1000				
population under NLEP 1 RR  ME H1.2 Facility measures efficiency Indicators on monthly basis under RNTCP 1 RR  ME H1.3 Facility measures Clinical Care & Safety Indicators on monthly basis referred to HIV 1 RR  Multidrug treatment completion rate under NLEP 1 RR  Proporation of TB patient on DOTs completing their treatment 1 RR  Standard H2 Facility endeavours to improve its performance to meet bench marks  The facility strives to improve indicators from Trends analysis of Indicators is done at			population under NVBDCP	1	RR	<u> </u>	
Facility measures efficiency Indicators on monthly basis  ME H1.2 Facility measures Clinical Care & Safety under RNTCP  ME H1.3 Facility measures Clinical Care & Safety Indicators on monthly basis  MI H1 H1 H1 H1 H1 H1 H1 H1 H1 H1 H1 H1 H1			No. of New Registered cases per 1000				
Facility measures efficiency Indicators on monthly basis under RNTCP 1 RR  Facility measures Clinical Care & Safety Indicators on monthly basis Percentage of suspected TB cases are referred to HIV 1 RR  Multidrug treatment completion rate under NLEP 1 RR  Proporation of TB patient on DOTs completing their treatment 1 RR  Standard H2 Facility endeavours to improve its performance to meet bench marks  The facility strives to improve indicators from Trends analysis of Indicators is done at			population under NLEP	1	RR		
ME H1.2 monthly basis under RNTCP 1 RR  ME H1.3 Facility measures Clinical Care & Safety Indicators on monthly basis referred to HIV 1 RR  Multidrug treatment completion rate Under NLEP 1 RR  Proporation of TB patient on DOTs Completing their treatment 1 RR  Standard H2 Facility endeavours to improve its performance to meet bench marks  ME H2.2 The facility strives to improve indicators from Trends analysis of Indicators is done at		Facility measures efficiency Indicators on					
Facility measures Clinical Care & Safety Indicators on monthly basis  Percentage of suspected TB cases are referred to HIV  1 RR  Multidrug treatment completion rate under NLEP  Proporation of TB patient on DOTs completing their treatment  1 RR  Standard  Facility endeavours to improve its performance to meet bench marks  The facility strives to improve indicators from  Trends analysis of Indicators is done at	ME H1.2		_	1	RR		
Indicators on monthly basis referred to HIV 1 RR  Multidrug treatment completion rate under NLEP 1 RR  Proporation of TB patient on DOTs completing their treatment 1 RR  Standard H2 Facility endeavours to improve its performance to meet bench marks  MEH 2.2 The facility strives to improve indicators from Trends analysis of Indicators is done at							
Multidrug treatment completion rate under NLEP 1 RR  Proporation of TB patient on DOTs completing their treatment 1 RR  Standard H2 The facility endeavours to improve its performance to meet bench marks  Trends analysis of Indicators is done at	ME H1.3			1	RR		
under NLEP 1 RR  Proporation of TB patient on DOTs completing their treatment 1 RR  Standard H2  The facility strives to improve indicators from Trends analysis of Indicators is done at		,					
Proporation of TB patient on DOTs completing their treatment 1 RR  Standard H2 The facility strives to improve indicators from Trends analysis of Indicators is done at				1	RR		
Completing their treatment   1   RR							
Standard H2 Facility endeavours to improve its performance to meet bench marks  ME H2 The facility strives to improve indicators from Trends analysis of Indicators is done at			1 .	1	RR		
ME H2 2 The facility strives to improve indicators from Trends analysis of Indicators is done at	Standard	E-sitts		a ta maat kaas	h marks	•	
MERCO CONTRACTOR CONTR	H2	Facility	endeavours to improve its performance	e to meet beno	n marks		
its current performance Periodic Intervals 1 RR	ME H2 2	The facility strives to improve indicators from	Trends analysis of Indicators is done at				
	WIL HZ.Z	its current performance	Periodic Intervals	1	RR	<u> </u>	

Co	mmunicable Di	sease Score
	Communicable	F0 0
	Disease Score	50.0
	Area of Concer	n wise Score
A	Service Provision	50.0
В	Patient Rights	50.0
С	Inputs	50.0
D	Support Services	50.0
E	Clinical Services	50.0
F	Infection Control	50.0
G	Quality Manangement	50.0
Н	Outcome	50.0

	National Qualit	y Assurance Standards for U - PH	С		7	
		Checklist for Non Communica	ble Diseases			
eference Io.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks
		Area of Concern - A Se	ervice Provisi	on		
andard L		Facility provides Promotive, preve	ntive and curat	ive services		
IE A1.4	Services are available for the time period as mandated	OPD Services are available for at least 8 Hours in a day	1	RR/SI		
tandard	Th	e facility provide services as mandated	d in National He	ealth Programn	nes	
4		Medical treatment for prevention	Γ		Conjunctivitis, Night blindness, Stye	
1E A4.5	The facility provides services under National Programme for prevention and control of Blindness as per guidelines	&control of common Eye diseases			etc	
			1	RR/SI		
		Survey for prevalence of various eye diseases & Health Education for prevention of various eye diseases			Nutrition education (prevent vit A deficiency), Water & sanitation education (Trachoma Control) Maternal & child health education (Reduce retinopathy of prematurity), Health education (Prevention of eye trauma, hypertension & diabetic retinopathy)	
			1	RR/SI		
		Referral service for Screening and correction of refractive errors	1	RR/SI	Availabilityof refraction services at PHC /outreach (Schools)	
		Referral services for diagnosis &	1	DD/CI		
	The facility provides services under	treatment of cataract cases  Early identification & treatment of	1	RR/SI	Anxiety Neurosis, Mild depression	
1E A4.6	Mental Health Programme as per guidelines	common mental disorders in OPD	1	DD/CI		
	0	Referral of difficult cases to U CHC/ DH	1	RR/SI	Maniac cases, schizophernia & cases	
<b>ЛЕ А4.7</b>	The facility provides services under National Programme for the health care of the elderly as per guidelines	Geriatric clinic on fixed day for Conducting a routine health assessment & treatment	1	RR/SI	required hospital Every week, Display fixed day & time	
	, , ,		1	RR/SI		
		Sensitization on promotional, preventive and rehabilitative aspects of				
1E A4.8	The facility provides services under National Programme for Prevention and control of Cancer, Diabetes, Cardiovascular diseases & Stroke (NPCDCS) as per guidelines	geriatrics Health Promotion Services to modify individual, group and community behaviour	1	RR/SI	Promotion of Healthy Dietary Habits. Increase physical activity. Avoidance of tobacco and alcohol. Stress Management.	
		Early detection, management and	1	KK/3i		
		referral of Diabetes Mellitus Early detection, management and	1	RR/SI		
		referral of Hypertension	1	RR/SI		
		Early detection & Primary management and referral of Cardiovascular diseases				
		and Stroke Identification and referral, follow up of	1	RR/SI		
		under treatment patient	1	RR/SI		
IE A4.10	The facility provide services under National health Programme for deafness	Early identification & Referral of cases of hearing impairment	1	RR/SI		
		Promotion of quitting of tobacco in the	-	, 5.	Health education and IEC activities	
IE A4.13	The facility provides services under National Tobacco Control Programme as per guidelines	community.	4	pp/c	regarding harmful effects of tobacco use and passive smoke.	
		Counselling service on tobacco	1	RR/SI		
		cessation to all smokers/tobacco users.	1	RR/SI		
ЛЕ A4.14	The facility provides services under National Oral Health Care Program	Diagnosis & referal of common dental problems				
			1	RR/SI		

		Promotion of oral hygiene through				
		counselling & IEC				
		Average Community	1	RR/SI		
Standard		Area of Concern B - P	atients' Right	:S		
B1		The service provided at fac	cility are accessi	ble		
		Availability & display of IEC material			Diabetic retinopathy, cataract,	
	Patients & visitors are sensitized and	under National blindness control			glucoma, refractive error, trochoma,	
ME B1.4	educated through appropriate IEC / BCC approaches	program is available			prevention from corneal blindness.  Also IEC material for eye donation	
	See approaches		1	ОВ	, iso ize material for eye demation	
		Availability of IEC kit for mental health			Poster with 10 feature of mental	
		program	1	ОВ	disorder & flip chart for use of health educator	
		Availability of IEC material for National	-	0.0	For prevention & early detection of	
		Deafness Control Program			hearing impairment & deafness	
			4	OB		
		Availablity of IEC for National program	1	ОВ	IEC for Promotion of healthy life style,	
		for prevention & control of cancer,			healthy dietery habits, Stress	
		diabetis, cardiovascular diseases &			amanagement, Avoidance of	
	Information about the treatment is	stroke Patient is informed about the diagnosis	1	ОВ	substance abuse.	
NAT D4 7	shared with patients or attendants	& Treatment Plan			OPD Slip/ Prescription containing	
ME B1.7	and consent is taken wherever				Diagnosis & treatment plan/	
	required	Mothod of Administration /taking of	1	RR/PI	Treatment card for TB patient	
		Method of Administration /taking of the medicines is informed to patient/				
		relative as per prescription				
Charada ad			1	RR/PI		
Standard B2		The service provided at fac	ility are accepta	able		
		Patient records are kept in safe custody			Check Patient records e.g. OPD	
ME B2.3	Confidentiality of patients' records				register are kept in safe custody and	
	and clinical information is maintained		1	OB/SI	are not accessible to unauthorized patients	
					P	
		Area of Concern	- C Inputs			
Standard	The facility has adequate of			assured servi	ces to the current case load	
Standard C2	The facility has adequate o	Area of Concern		assured servi		
C2	The Staff has been imparted necessary			assured servi	Ces to the current case load  Orientation & refresher training of Medical Officers of community	
	The Staff has been imparted necessary trainings/skill set to enable them to	qualified and trained staff, required for Training of Medical officer under		assured servi	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of	
C2	The Staff has been imparted necessary	qualified and trained staff, required for Training of Medical officer under National Blindness Control Program		<mark>assured servi</mark>	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical officer under National Blindness Control Program Training of MO for mental health	or providing the		Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	qualified and trained staff, required for Training of Medical officer under National Blindness Control Program	or providing the		Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical officer under National Blindness Control Program Training of MO for mental health program	or providing the		Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical officer under National Blindness Control Program Training of MO for mental health	pr providing the	RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical officer under National Blindness Control Program Training of MO for mental health program Training of Health Worker for Mental	pr providing the	RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program	pr providing the	RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National	pr providing the  1	RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program	pr providing the  1	RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National	pr providing the  1	RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National	1 1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National	pr providing the  1	RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of National Deafness Control Program	1 1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program	1 1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of National Deafness Control Program	1 1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of Nedical Officer for National Deafness Control Program	1 1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of nurse/ ANM/ AWW supervisors at PHC on National Deafness Control Program  Training of MO on National Program for	1  1  1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of Nedical Officer for National Deafness Control Program	pr providing the  1  1  1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of nurse/ ANM/ AWW supervisors at PHC on National Deafness Control Program  Training of MO on National Program for Health care of elderly	1  1  1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level  At least 1 MO is trained	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of nurse/ ANM/ AWW supervisors at PHC on National Deafness Control Program  Training of MO on National Program for Health care of elderly Training of Paramedics staff for National Program for Health care of elderly	1  1  1  1  1  1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level  At least 1 MO is trained	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of nurse/ ANM/ AWW supervisors at PHC on National Deafness Control Program  Training of MO on National Program for Health care of elderly Training of Paramedics staff for National Program for Health care of elderly Training under NPCDCS	1  1  1  1  1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level  At least 1 MO is trained	
C2	The Staff has been imparted necessary trainings/skill set to enable them to	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of nurse/ ANM/ AWW supervisors at PHC on National Deafness Control Program  Training of MO on National Program for Health care of elderly Training of Paramedics staff for National Program for Health care of elderly	1  1  1  1  1  1	RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator)  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level  At least 1 MO is trained	
C2	The Staff has been imparted necessary trainings/skill set to enable them to meet their roles & responsibilities	Training of Medical Officer under National Blindness Control Program Training of MO for mental health program  Training of Health Worker for Mental health Program  Training of Medical Officer for National Deafness Control Program  Training of nurse/ ANM/ AWW supervisors at PHC on National Deafness Control Program  Training of MO on National Program for Health care of elderly Training of Paramedics staff for National Program for Health care of elderly  Training under NPCDCS Training under National Tabacco	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	RR RR RR RR RR	Orientation & refresher training of Medical Officers of community ophthalmology & Prevention of Blindness  Training for doctors for early identification, diagnosis and management of common mental disorders  2 days training each year for health workers (All paramedical staff, ANM/ Nursing staff, Health educator )  Sensitization about program, Creating of awareness regarding preventable diseases of ear, reorientation in early diagnosis & treatment of common ear diseases,  Sensitization about program& awareness regarding ear & hearing care, enable them to identify deafness at early stage & motivate them for awareness generation at community level  At least 1 MO is trained	

					1	
ME C4.1	Availability of equipment & instruments for examination & monitoring of patients	Availability of functional Equipment & Instruments			BP apparatus, Weighing machine, Stethoscope, height chart, Snellen's chart.	
			1			
ME C4.3	Availability of equipment & instruments for diagnostic procedures being undertaken in the facility	Availability of diagnostic instruments at clinics / consultation rooms for PAP smear Or VIA (visual inspection with Acetic Acid)			Slides, Lancet, Cusco Spaculum Spatula Fixer (spray) Marker pen	
			1	RR/SI/OB	Light Source	
		Availablity of Glucometer	1	RR/SI/OB		
Standard		Area of Concern - D S	upport Servic	es		
D5	Facility has	procedure for collecting & Reporting	of the health fa	acility related in	nformation	
ME D5.5	The facility provides monitoring and reporting services under National Programme for control of Blindness as per guidelines	Facility monitor & submit the report under NBCP	1	RR		
ME D5.6	The facility provides monitoring and reporting services under Mental Health Programme, as per guideline	Facility monitor & submit the report under MHP	1	RR		
ME D5.7	The facility provides monitoring and reporting services under National Programme for the health care of the elderly as per guidelines	Reporting is done on form 2 for NPHCE	1	RR	Forms contains information on availability of equipments, supporting devices, no. of staff trained, services provided, no. of cases referred etc	
ME D5.8	The facility provide monitoring and reporting service for prevention and control of Cancer, diabetes, cardiovascular disease and stroke as per guidelines	Facility monitor & submit the report under NPCDCS	1	RR		
ME D5.10	The facility provide services under National Programme for prevention and control of deafness, as per guidelines	Facility monitor & submit the report under National Programme for prevention and control of deafness	1	RR		
ME D5.12	The facility provides monitoring and reporting services under National lodine deficiency Programme, as per guidelines	Facility monitor & submit the report under lodine deficiency Program	1	RR		
		Area of Concern - E C	linical Service	es		
Standard	Facility has defined process	lure for primary management and co	atinuity of care	with appropria	te maintenance of records	
E2	racinty has defined proceed		•	With approprie		
ME E2.2	The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.	There is a system of referring patient from OPD to U- CHC/ higher centre for specialist consultation under all NCD program	1	SI/RR	Check for practice, availability of referral slip, is there any information about the specialist doctors and there timings and day available	
ME E2.3	Facility ensures follow up of patients	There is system of follow up of the patients refered to higher facilities	1	SI/RR		
Standard E9	Facility provides I	National Health Programmes as per op	erational/clinic	cal guidelines o	f the Government	
ME E9.5	The facility provides services under National Programme for control of Blindness as per guidelines	Availability of protocols for screening & treatment for common eye disease of children / adult	1	SI/RR	Conjunctivits, night blindness, stye	
ME E9.6	Facility provides service under Mental Health Program as per guidelines	Elementary diagnosis & Referral of Mental disorders as per guidelines	1	SI/RR		
		Availablity of Protocol for treatment of Anxiety Neurosis, Mild depression				
		Epidemiological surveillance of mental disorders as per guideline	1	SI/RR		
		and an per guideline	1	SI/RR		

		<del>,</del>				
		Health assessment for elderly person				
		based on simple clinical examination				
ME E9.7	Facility provides service under National programme for the health	relating to vision, joints, hearing, chest, BP and simple				
IVIL L3.7	care of the elderly as per guidelines	investigations including blood sugar,				
	care or are ciderry as per gardennes	etc. is done				
			1	SI/RR		
		A simple questionnaire will be filled up				
		during the first visit of each Elderly as				
		per guideline and record updated and	1	CI/DD		
	Facility provides service under	maintained Risk assessment & diagnosis of diabetics	1	SI/RR	Staff is aware of high risk condition of	
	National Programme for Prevention	is done as per guideline			diabetic & certeria for diagnosis of	
ME E9.8	and Control of cancer, diabetes,				type II diabetics mellitus	
	cardiovascular diseases & stroke					
	(NPCDCS) as per guidelines		1	SI/RR		
		Medical Management of diabetes is				
		done as per guideline	1	SI/RR		
		Diagnosis of hypertension is done as per			Stage 1 hypertension: Systolic 140/159, diastolic 90/99. Stage 2	
		protocol			hypertension: Sysolic: 160 or higher	
					Diastolic 100 or higher. Based on at	
					least 2 or more properly measured BP	
					reading in sitting position.	
			1	SI/RR		
		Madical Management of hypertension				
		Medical Management of hypertension is done as per guideline	1	SI/RR		
		Risk assessment for cardio vascular	1	51/1111	<del> </del>	
		disease is done as per guideline			Check for awarness of behavioural &	
					psychological risk factor & how	
					medical officer calculate 10 year risk	
					for fatal & non fatal cardio vascular	
			1	SI/RR	event using WHO / ISH risk predication chart	
		Screen women of the age group 30-69	1	SI/KK	predication that	
		years for early detection of cervix				
		cancer and breast cancer.	1	SI/RR		
		Counselling is provided for life style				
		modification as per guideline			Check for awarness regarding	
					modification in diet, physical activity,	
			1	SI/RR	weight control, tabacco cessation & aviodness alcohol intake	
		Screening of chronic supportive otitis		5,1		
ME E9.10	Facility provide services under National program for prevention and	media (CSOM) Safe type/ unsafe type as				
IVIE ESITO	control of deafness	per standard treatment guideline				
		Driver Management Constraint of	1	SI/RR		
		Primary Management & referral of chronic supportive otitis media (CSOM)				
		as per guideline	1	SI/RR		
	=1 6 315 11 1	Linkages with tobacco cessation facility		5,1	Check for doctor aware of nearest	
ME E9.13	The facility provides services under National Tobacco Control Programme				tobacco cessation facility Check how	
.ME-L9.13	as per guidelines				many patients are referred to	
	, 6	Doctor/Staff are skilled for the	1	SI/RR	cessation centre	
		Doctor/ Staff are skilled for tobacco cessation counselling			Ask about 5 As and 5 Rs (Ask, advice, assess, assist & arrange) (relevance,	
					risk, reward, roadblock & repetition)	
			1	SI	. , ,	
		Facility has been declared tobacco free			Restriction on use of tobacco product	
		zone	1	ОВ	by staff or visitors	
		Check for any specific community level activity is done for generating awareness				
		activity is done for generating awareness	1	SI/PI		
		Area of Concern - F In				
Standard Re	Facility I and				os & asonosis	
Standard F1	Facility has d	efined & implemented procedure for e	ensuring Hand I	nygierie practic		
	Hand washing facilities are provided at	Availability of hand washing Facility at			Check for availability of wash basin,	
ME F1.1	point of use	Point of Use	1	ОВ	running water & antiseptic soap near the point of use	
Standard F4	Facility has defined & establ	ish procedure for segregation, collection	on, treatment 8	k disposal of Bi	o medical &hazardous waste	
		Availability of colour coded bins at point				
ME F4.1	The facility ensures segregation of Bio	of waste generation				
	Medical Waste as per guidelines			_		
		Availability of calauranded have	1	OB	Bins are covered	
		Availability of colour coded bags	1	ОВ	Check Yellow bag is non chlorinated	
		Area of Concern - G Qua				
		/ "ca or concern - o Qua	wanager			

Standard						
G.1	Facility	has established quality Assurane Prog	ram as per stat	te/National gui	delines	
ME G1.5	The facility has established internal quality assurance programme	Internal Assessment of the Non Communicable disease is done at periodic interval	1	RR/SI		
Standard G3	Facility has established	documented &implemented standard	operating proc	edure system	for its all key processes .	
ME G3.1	Standard Operating procedures are prepared , distributed and implemented for all key processes	Updated SOP are available at point of use	1	RR		
		SOP adequatly cover all relvant processes of the department	1	RR		
ME G3.3	Work instructions are displayed at Point of work	Clinical protocol for diagnosis & management of diabetic	1	OB/RR		
		Clinical protocol for diagnosis & management of hypertension	1	OB/RR		
		Clinical protocol for diagnosis & management of cardio vascular diaeases	1	OB/RR		
		Clinical protocol for screening of cancer	1	OB/RR		
		Area of Concern - H	1: Outcomes			
Standard H1	The facilit	y measures its productivity, efficiency,	clinical care &	service Quality	indicators	
ME H1.1	Facility measures Productivity Indicators on monthly basis	No. of patient attended OPD for any of NCD Diabetic patient OPD per month	1	RR RR		
		No. of elderly patient attended the OPD	1	RR		
ME H1.2	Facility measures efficiency Indicators on monthly basis	Percentage of cases referred to higher facility for NCD	1	RR		
		No. of diabetic cases identifed	1	RR		
		No. of Hypertensive cases identifed	1	RR		
Standard		No. of Cancer cases identifed	1	RR		
H2		Facility endeavours to improve its perf	ormance to me	et bench marks		
ME H2.2	The facility strives to improve indicators from its current performance	Trends analysis of Indicators is done at Periodic Intervals	1	RR		

	NCD Score Card						
	NCD Score	50.0					
	Area of Concern wise Score						
A	Service Provision	50.0					
В	Patient Rights	50.0					
С	Inputs	50.0					
D	Support Services	50.0					
E	Clinical Services	50.0					
F	Infection Control	50.0					
G	Quality Manangement	50.0					
Н	Outcome	50.0					

	National Qu	ality Assurance Standards for L	J - PHC		8	
		Checklist for Dressing Roo	m & Emergen	су		
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks
		Area of Concern - A	A Service Prov	rision		
Standard A1		Facility provides Promotive, pr	eventive and cu	rative services		
ME A1.2	The facility provides Accident & Emergency Services	Primary Management of wounds & First Aid	1	RR/SI	Incision & drainage, Stitching Dressing	
		Primary Management of trauma &	1	NN/3I	Splints, compression bandage,	
		bone injuries	1	RR/SI	Cervical Collar	
		Emergency Management of Life threatening conditions			Stabilization/ Primary Management of Medical conditions like Shock, Ischemic Heart Disease, CVA, Dyspnoea, Unconscious patients, Status Epilepticus, Management of severe dehydration, respiratory distress	
			1	RR/SI		
		First Aid and Referral of Burn and Injury cases	1	RR/SI		
		Primary Management & stabilization		,	Lavage, Antidotes, Anti-snake	
		of Poisoning / Snake Bite cases	1	RR/SI	venom/ Anti scorpion venom	
		Primary treatment for Dog Bite cases	1	RR/SI	Anti Rabies Vaccines	
ME A1.4	Services are available for the time period as mandated	Emergency Services are functional during OPD hrs		My3i	At least for 8 hrs	
Standard			1	RR/SI		
A3	Т	he Facility provides Diagnostic Servi	ces, Para-clinica	I & support servi	ces.	
ME A3.3						
		Area of Concern B	- Patients' Ri	ghts		
Standard B1		The service provided a	t facility are acc	essible		
ME B1.7	Information about the treatment is shared with patients or attendants and consent is taken wherever required	Patient is informed about treatment plan &Consent is taken for all invasive procedure / where ever applicable	1	RR/PI	Ask the patient what they have been commuicated about treatment plan	
ME B1.8	Access to facility is provided without any physical barrier	There is no overcrowding in the dressing room cum Emergency	1	OB		
		Availability of wheel chair or strecher	1			
		for easy access	1	ОВ		
Standard B2		The service provided at	facility are acco	eptable		
ME B2.2	Adequate visual privacy is provided at every point of care	Availability of screen & curtains in Dressing room	1	ОВ		
		Area of Conc	ern - C Inputs			
Standard C1	The facility has ade	quate & Safe infrastructure for deliv	ery of assured s	ervices and meet	s the prevalent norms	

ME C1.1  Departments have adequate space  Departments have adequate space  Departments have adequate space  Space for couch keeping dressin drug trolley  Availability of Fans & Warmers as per need  Availability of drinking water facilities  Availability of drinking water facilities  May be shared  General clinic	
Space as per patient load space as per patient load space as per patient load space as per patient load space as per patient load space as per patient load space as per patients & Staff are available as per load staff are available as per load space as per load space as per patients & Space for cource keeping dressin drug trolley space as per patients & Space for cource keeping dressin drug trolley space as per patient load space	
space as per patient load  space as per patient load  Availability of Fans & Warmers as per need  Availability of drinking water facilities  Availability of drinking water facilities  keeping dressing dressing drug trolley  Availability of Bans & Warmers as per need  1 OB  May be shared	ı. a table for
ME C1.2 Amenities for Patients & Staff are available as per load Availability of Fans & Warmers as per need 1 OB Availability of drinking water facilities 1 OB May be shared	
Amenities for Patients & Staff are available as per load Availability of Fans & Warmers as per need  Availability of Fans & Warmers as per need  1 OB  Availability of drinking water facilities  May be shared	
ME C1.2 Amenities for Patients & staff are available as per load need  Availability of drinking water facilities Nay be shared	
Staff are available as per load  1 OB  Availability of drinking water facilities  May be shared	
Availability of drinking water facilities May be shared	
May be shared	
· · · · · · · · · · · · · · · · · · ·	common with
	COMMON WITH
Availability of functional toilets Dry toilet with I	running water
May be shared	_
1 OB clinic	with General
Switch Boards a	all other
electrical instal	
The facility ensures safety of intact & secure	
electrical installations Dressing cum emergency room does	
not have temporary connections &	
loose hanging wires 1 OB	
Physical condition of Physical condition of	
ME C1.6 buildings are safe for	
providing patient care	
providing patient care 1 OB	
Standard C2 The facility has adequate qualified and trained staff, required for providing the assured services to the curre	nt case load
The facility has adequate	
nursing staff/Paramedics as	
ME C2.2 per service provision and	
work load Availability of at least one staff in Staff Nurse/ AN	IM/ dressor etc
dressing cum Emergency room 1 OB/RR check duty rost	•
ulessing culti-lifetgency room 1 Object Check duty rose	CI
The Coeff has been instanted	
The Staff has been imparted Primary Manag	
mecessary trainings/skill set stablization of l	•
to enable them to meet their conditions like	
roles & responsibilities Training of staff for handling poisoning, dog	bite, IHD CVA
Emergencies 1 RR etc.	
Training of staff for basic life support	
(BLS) 1 RR Ask staff to den	nonstrate CPR
The Staff is skilled and	
ME C2.5 competent as per job	
description	
Check staff competancy for BLS 1 SI	
Standard C3 The facility provides drugs and consumables required for assured services.	
Statute Communication (Communication Communication Communi	
The facility has a called life and	
The facility has availability of	
ME C3.1 adequate drugs at point of	1
use Availablity of antiseptics for dressing 1 OB/RR	
Availablity of antiseptics for dressing 1 OB/RR	
Availablity of antiseptics for dressing 1 OB/RR	etc
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of the state of the	
Availablity of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of	
Availablity of antiseptics for dressing 1 OB/RR	ging
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Emergency Drug Tray is maintained  Drugs for mana	
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re	action - Inj
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H	action - Inj lydrocortisone
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina	action - Inj lydrocortisone ate, Injection
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami	action - Inj lydrocortisone ate, Injection
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid,	action - Inj lydrocortisone ate, Injection ine,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp	action - Inj lydrocortisone ate, Injection ine,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp Inj. Dopamine	action - Inj lydrocortisone ate, Injection ine,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf	action - Inj lydrocortisone ate, Injection ine,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf I OB/RR/SI IV Set	action - Inj lydrocortisone ate, Injection ine, oray,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp Inj. Dopamine Inj Magsulf Inj Magsulf Availability of disposables in Examination glo	action - Inj lydrocortisone ate, Injection ine, bray, bray,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf IV Set  Availability of disposables in dressing room/ Injection room and dressing room/ Injection room and Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf IV Set	action - Inj lydrocortisone ste, Injection ine, pray,  oves, Syringes, ial, suture
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf IV Set  The Facility has availability of dressing room/ Injection room and alequate consumables at clinics	action - Inj lydrocortisone ste, Injection ine, pray,  oves, Syringes, ial, suture ns -IV sets
Availability of antiseptics for dressing  Availability of injectables  Emergency Drug Tray is maintained  Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf  Inj. Dopamine Inj Magsulf  The Facility has availability of adequate consumables at point of use  Availability of disposables in dressing room/ Injection room and clinics  Availability of disposables in dressing room/ Injection room and clinics	action - Inj lydrocortisone ste, Injection ine, pray,  oves, Syringes, ial, suture ns -IV sets rewborn,
Availability of antiseptics for dressing 1 OB/RR  Availability of injectables 1 OB/RR TT & Painkiller of Drugs for mana anaphylactic re Adrenalin, Inj H Sodium Succina Chlorphenirami IV Fluid, Nitroglycerin sp. Inj. Dopamine Inj Magsulf II OB/RR/SI IV Set  The Facility has availability of adequate consumables at adequate consumables at Availability of adequate consumables at Availability of adequate consumables at Availability of adequate consumables at Availability of anticological analysis of adequate consumables at Availability of adequate consumables at Av	action - Inj lydrocortisone ste, Injection ine, pray,  oves, Syringes, ial, suture ns -IV sets rewborn,

/IE C4.1	Availability of equipment & instruments for examination & monitoring of patients  Availability of equipment & instruments for treatment	e facility has equipment & instrumer  Availability of functional equipment for Examination & monitoring	1 nts required for	OB/RR/SI  assured list of se	Splints, cervical collar, compression bandage	
/IE C4.1	Availability of equipment & instruments for examination & monitoring of patients  Availability of equipment & instruments for treatment	Availability of functional equipment			compression bandage	
/IE C4.1	Availability of equipment & instruments for examination & monitoring of patients  Availability of equipment & instruments for treatment	Availability of functional equipment	nts required for	assured list of se	ervices.	
1E C4.1	instruments for examination & monitoring of patients  Availability of equipment & instruments for treatment					
/IE C4.1	instruments for examination & monitoring of patients  Availability of equipment & instruments for treatment					
1E C4.2	& monitoring of patients  Availability of equipment & instruments for treatment					
ΛΕ C4.2	Availability of equipment & instruments for treatment				BP apperatus, Stethoscope,	
/IE C4.2	instruments for treatment	for Examination & monitoring			thermometer, torch &	
/IE C4.2	instruments for treatment		1	OB/SI	disposable tongue depressor	
/IE C4.2	instruments for treatment	l l				
/IE C4.2					Chittel's forcep, Artery	
	procedures, being				Forceps, Blade, Normal Forcep,	
	undertaken in the facility	A stability of Books and a second stability			Tooth Forcep, Needle Holder,	
		Availability of Dressing Instruments in Dressing Room/ Injection Room	1	OB/SI	Splints, Suture Material, Dressing Drums	
		Dressing Room/ injection Room		05/51	Airway, Ambu's bag, Oxygen	
					Cylinder with key, Nebulizer,	
					Suction Machine, bag & mask	
		Availability of functional Instruments			(adult size & paediateric sizes),	
		Availability of functional Instruments for Resuscitation	1	OB/SI		
		Availability of equipment for		02/0.		
4E C4 4	Availability of equipment for	storage for drugs				
ΛΕ C4.4	storage				Drug/instrumental/dressing	
			1	OB/SI	trolley, cupboard	
		Availability of Fixtures			Spot light, electrical fixtures	
	Availability of patient					
	furniture and fixtures as per load and service provision					
	rodd arid service provision		1	OB/SI		
		Availability of furniture at clinics			Dressing Table, Footstep,	
			1	OB/SI	cupboard	
		Area of Concern - I	D Support Se	rvices		
tandard	The facility has established	ed facility management programme	for maintenan	ce & upkeep of e	quipment & infrastructure to	
1		provide safe & secure env	rironment to st	aff & users		
	Patient care areas are clean	Floors, walls, roof , sinks patient care			All area are clean with no	
ИЕ D1.3	and hygienic	and corridors are Clean	_		dirt,grease,littering and	
	,,,	Surface of furniture and fixtures are	1	OB	cobwebs	
		clean	1	ОВ		
	Encility infrastructure :-	Trolley & cupboard etc are painted &				
/IF D1 4	Facility infrastructure is adequately maintained	in intact condition			Cupboard/ trolley are not	
	ducquatery manieumeu		1	ОВ	rusted, chipped or broken	
tandard 2	Facility has def	ined procedure for storage, Invento	ry Managemen	t & dispensing of	drugs in pharmacy	
	The facility ensures proper					
/IE D2.2	storage of drugs and	Drugs/ Injectables are stored in				
	consumables	container/tray & are labelled	1	ОВ		
	The facility ensures	Expiry dates' are maintained at				
/IE D2.3	management of expiry and	emergency drug tray				
	near expiry drugs		1	OB/RR		
		No expiry drug found at dressing/ Injection Room	1	ОВ		
		Area of Concern -				
		Area of Concern -	L Cillical Ser	vices		
tandard E2	Facility has defined proc	edure for primary management and	continuity of a	are with appropr	riate maintenance of records	
	, J	,,		эрг		

						1
	The facility provides					
	appropriate referral linkages					
ME E2.2	for transfer to other/higher					
	facilities to assure the					
	continuity of care.				Referral Out register is	
		Patient's are referred with referral slip	1	RR/SI	maintained	
		Availability of referral linkages to		pp (a)	Availablity of contact no. of	
		higher centres.	1	RR/SI	higher facility	
		Advance communication is done with higher centre	1	RR/SI		
		ingher centre	1	NN/3I		
		Referral out register is maintained	1	RR/SI		
				, -		
	Facility ensures follow up of					
ME E2.3	patients	Facility ensure the follow up of				
		referred patients	1	RR/SI		
		There is process of sorting the	-	1117 31	As care provider how they	
	Facility has establish	patients in case of mass casualty			triage patient- immediate,	
ME E2.4	procedure for Triage &	·			delayed, expectant, minimal,	
	diaster Management		1	RR/SI	dead	
	Emergency protocols are	Emergency protocols are available at			See for protocols of head	
ME E2.5	defined and implemented	point of use			injury, snake bite, poisoning,	
	actined and implemented		1	RR/SI	drawing etc.	
		There is procedure for CPR	_	"	Ask for Demonstration on BLS	
		71	1	RR/SI	(basic life support)	
		There is procedure for informing			Check for Police Information	
		police			Register , Ask method for	
			1	RR/SI	informing police	
			1	NN/3I		
		Emergency has criteria for defining			Criteria is defined based on	
		medico legal cases			cases and when to do MLC like	
					all the cases not attended by	
					the doctor/ criteria may vary	
					from state to state	
			1	RR/SI		
		Check for how ambulances are called				
	The facility ensures	and patients are shifted				
ME E2.6	adequate and timely					
IVIL LZ.U	availability of ambulances					
	services					
			1	SI/OB		
		All unstable patients are transferred				
		(as decided by the Doctor), with one				
		paramedical staff				
			1	SI/RR		
		The Patient's rights are respected	1	CI.		
		during transport.  Transfer register is maintained to	1	SI		
		record the detail of the referred				
		patient	1	RR		
		Ambulance services are registered to				
		dedicated no.	1	RR/OB		
		Patient Complaint, Examination,				
	Clinical records are updated	treatment given or Procedure				
ME E2.7	for care provided	performed is recorded				
			1	RR/SI	108/102/ any other	
	The facility ensures that					
	standardised forms and				Emergency register, referral	
ME E2.8	formats are used for all				register, referral slip, dressing	
	purposes including registers	Check availablity of standardize forms			room regster, Injection room	
	The parties and registers	& Register	1	RR/OB	register	
		Records are labelled and indexed	1	RR/OB	3	
		Adequate facility for storage of		,		
	=1 6 100	records				
	The facility ensures safe and					
ME E2.9	adequate storage and					
	retrieval of medical records					
			1	ОВ		<u> </u>
					· · · · · · · · · · · · · · · · · · ·	

	Facility, has defined 0 income	demanted anneady was fan Duya adust		******	ut avidalina aa waandatad bu	
Standard E 3	Facility has defined & Imp	plemented procedures for Drug admi Go		tandard treatme	nt guideline as mandated by	
ME E3.1	Medication orders are written legibly and adequately	Check every Medical advice and procedure is accompanied with date, time and signature				
	auequatery		1	RR	OPD slip	
		Check prescription are written legibly & comprehendible by the clinical staff				
		Area of Concern - I	1 Elnfostion Co	RR		
Standard F1	Facility has	defined & implemented procedure	for ensuring Hai	nd hygiene practi		
ME F1.1	Hand washing facilities are provided at point of use	Availability of hand washing Facility at Point of Use	1	ОВ	Check for availability of wash basin near the point of use	
		Availability of running Water	1	OB	Ask to Open the tap. Ask Staff	
			1	ОВ	water supply is regular	
		Availability of antiseptic soap with soap dish/ liquid antiseptic with dispenser.			Check for availability/ Ask staff if the supply is adequate and uninterrupted	
		Disalar of Handrashina Instruction	1	OB	Donasia sakla disalawa daka sa	
		Display of Hand washing Instruction at Point of Use			Prominently displayed above the hand washing facility , preferably in Local language	
			1	ОВ		
ME F1.2	Staff is trained and adhere to standard hand washing practices	Staff adhere to standard hand washing practices	1	SI/OB		
ME F1.3	Facility ensures standard practices for maintaining asepsis	Availability of Antiseptic Solutions at Dressings room, Injection Room	<u>.                                    </u>	31,00		
			1	OB/SI	111 1 5 11 11 11 11	
		Proper cleaning of procedure site with antisepic is done		00/5	like before giving IM/IV injection, drawing blood, putting Intravenous and	
Standard F2	Facility ens	ures availability of Personal Protecti	1 ve equipment 8	OB/SI follows standar	urinary catheter	
	Facility ensures adequate personal protection	Disposable gloves are available at point of use				
ME F2.1	equipment as per					
	requirements		1	ОВ		
ME F2.2	Staff adheres to standard personal protection practices	No reuse of disposable gloves, Masks, caps and aprons.				
			1	OB/SI		
Standard F3	Facility h	as standard procedure for disinfection	on &sterilizatio	n of equipment 8	instrument	
ME F3.1	The facility ensures standard practices and materials for decontamination and cleaning of instruments and procedures areas	Decontamination of Procedure surfaces	1	SI	Ask staff about how they decontaminate the procedure surface like dressing table, Stretcher/Trolleys etc. (Wiping with 0.5% Chlorine solution	
		Proper Decontamination of instruments after use	1	SI	Ask staff how they decontaminate the instruments like Stethoscope, Dressing Instruments.	
		Contact time for decontamination is adequate	1	SI/OB	10 minutes	

Cleaning of instruments after decontamination   Salf la trained for Blood spill   1   Sy/OB							
Staff is trained for Blood spill 1 Sy/08  The facility renures standard practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and materials for Blood spill practices and procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste by a per protocol in dressing room  **ME #4.1**  **Facility has defined & establish procedure for segregation, collection, treatment & disposal of Bio medical &hazardous waste by a per guidelines.  **Pacific premares and point of Waste as per guidelines.**  **Pacific premares and point of Waste as per guidelines.**  **Availability of colour coded bags			Cleaning of instruments after	1	SI	Cleaning is done with	
The facility enumen standard practices and materials for displayments of the process of the facility enuments and and practices and materials for displayments of the process of the proce			decontamination			_	
The facility ensures standard processes and management standard population and management standard processes and management standard population and management standard population and management standard population and processes and management standard population and processes and management standard population and processes and management standard population and processes and management standard population and processes and management standard population and processes and management standard population and processes an						after decontamination	
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		No.of Anti Rabies Vaccines administred per month	1 1	RR		
ME H1.3	Facility measures Clinical Care & Safety Indicators on monthly basis	No. of injection abcess reported per month	1	RR		
		Percentage of Emergency cases referred out	1	RR		
ME H1.4	Facility measures Service Quality Indicators on monthly basis	Proporation of patient referred through free referral transport	1	RR		
Standard H2	Facility endeavours to improve its performance to meet bench marks					
ME H2.2	The facility strives to improve indicators from its current performance	Trends analysis of Indicators is done at Periodic Intervals	1	RR		

	Dressing Room & Emergency Score Card						
	Dressing Room & Emergency Score						
	Area of Cor	ncern wise Score					
A	Service Provision	50.0					
В	Patient Rights	50.0					
С	Inputs	50.0					
D	Support Services	50.0					
E	Clinical Services	50.0					
F	Infection Control	50.0					
G	Quality Manangement	50.0					
Н	U						

	National Qua	ality Assurance Standards for U - PH	IC .		9	
		Checklist for Pharma				
Reference	Measurable Element	Checkpoint	Compliance	Assessment	Means of Verification	Remarks
No.		Area of Concern - A Serv	-	Method		
Standard		Facility provides Promotive, prevent				
A1		Dispensary services are available during	l	l		
ME A1.4	Services are available for the time period as mandated	OPD hours				
Standard			1	RR/SI		
A3	Th	e Facility provides Diagnostic Services, P		upport service		
ME A3.1	The facility provides Pharmacy services	Availability of Drug Dispensing counter	1	RR/SI	For both Allopathic & Alternate medicines	
		Generic Drug Store	1	RR/SI	Functional Jan ayushdhalya in premises or equivalent	
		Cold chain management services	1	RR/SI	Functional refrigerator(s), cool box available	
Standard	Th	le facility provide services as mandated in	n National Heal			
A4		Availability of Drugs under NVBDCP	1		Chloroquine, Primaguine, ACT	
ME A4.1	The facility provides services under National Vector Borne Disease Control Programme as per guidelines	Availability of Brugs under INVESCI			(Artemisinin Combination Therapy)	
		Availability of Drugs under RNTBCP	1	RR/SI	CATI & CATII	
ME A4.2	The facility provides services under Revised National TB Control Programme as per guidelines					
			1	RR/SI		
ME A4.11	The facility provides services under Universal Immunization Programme (UIP) as per guidelines	Availability of Vaccines As per National	1	DD (C)	BCG, DPT, OPV, Hepatitis B, Measles, TT, Japanese	
		Immunization Schedule  Area of Concern B - Pat	tients' Rights	RR/SI	encephalitis (in select districts)	
Standard		The service provided at facili		e		
B1 ME B1.2	The facility displays the services	List of Drugs available displayed & updated daily at Pharmacy	1		Updated daily is too stringent and also sometimes list may also	
	and entitlements available			ОВ	be very long for it to be displayed and change daily. In fact some facilities write and circulate list of drug not available	
ME B1.7	Information about the treatment is shared with patients or attendants and consent is taken wherever required	Method of Administration /taking of the medicines is informed to patient/ their relative by pharmacist as per doctors prescription in OPD Pharmacy				
Standard			1	PI/OB		
B2		The service provided at facility		le	Charles that a three	
ME B2.1	Services are provided in manner that are sensitive to gender	Availability of separate Queue for Male and female at dispensing counter	1	ОВ	Check whether there are separate queues	
Standard B3		The service provided at facili	ty are affordabl	1		
ME B3.1	The facility provides cashless services to all patients including pregnant women, mothers and sick children as per prevalent	Free drugs and consumables for provided to mothers & Children			Check Pregnant women, Mother and Childrens upto 5 years are	
	government schemes		1	PI	prescribed and dispensed all drugs and consumables	

		Check patient has not spent on purchasing			
	The facility ensures that the drugs	drugs & consumbles those are included in			
ME B3.3	prescribed are available in the	essential medicine list			Check for availability of the
	pharmacy				Essential Medicines
			1	PI	List/Formulary
		Area of Concern - 0	C Inputs		
Standard					
C1	The facility has adeq	uate & Safe infrastructure for delivery of	assured service	s and meets	the prevalent norms
	Departments have adequate				
ME C1.1	space as per patient load	A settle bittle of a decrease are a few Down			
	The second secon	Availability of adequate space for Drug store and Dispensing counter	4	00/61	
		store and dispensing counter	1	OB/SI	
ME C1.2	Amenities for Patients & Staff are	Provision of shaded area in front of Drug			
IVIE C1.2	available as per load		1	ОВ	
		Dispensing Counter	1	ОВ	
					Check for trash (empty cartons)
	The facility ensures fire safety				stored in the store; flammables
ME C1.7	measures including fire fighting				are stored separately; no
	equipment				smoking zone; and availability
		Pharmacy has plan for safe storage and			of fire extinguishers and
		handling of potentially flammable materials.	1	ОВ	extinguisher is not time barred
		mananing or potentially naminable materials.	1	OB	exampliance is not affic patter
Standard	The facility has adequate	qualified and trained staff, required for p	providing the ac	sured service	es to the current case load
C2	The facility has aucquate	4	origing the di	Janea Service	S to the current case load
	The facility has adequate nursing				
ME C2.2	staff/Paramedics as per service				
	provision and work load	Availability of one Pharmacist at Drug			Check whether the pharmacy is
		dispensing counter during OPD timings	1	SI/RR	manned during OPD hours
				,	
	The Staff has been imparted				
	necessary trainings/skill set to				
ME C2.4	enable them to meet their roles &				
	responsibilities	Training on Invantory Mangement and Drug			
	·	Storage	1	RR/SI	
ME C2.5	The Staff is skilled and competent	Pharmacist is skilled for good dispensing			
IVIL C2.5	as per job description	practices and inventory management			
		technique	1	SI	Competence Testing
		Pharmacist is skilled for Cold Chain			
Standard		Mangement	1	SI	Competence Testing
C3	Th	e facility provides drugs and consumable	s required for a	ssured service	es.
		Availability of Analgesics/ Antipyretics			
ME C3.1	The facility has availability of	, , , , , , , , , , , , , , , , , , , ,			
IVIL CO.1	adequate drugs at point of use			00/00	As a secretate Bound Vist
		Antiallargies and Dures read in Anaphylaria	1	OB/RR	As per state Drug List
		Antiallergics and Drugs used in Anaphylaxis			
			_	e = 1-	
			1	OB/RR	As per state Drug List
		Antidotes and other substances used in			
		Poisoning	4	00/00	As you state Drive List
		Anticonvulcants / Antionilantics	1	OB/RR	As per state Drug List
		Anticonvulsants/ Antiepileptics			
			1	OB/RR	As per state Drug List
		Antihelmenthics	1	OB/RR	As per state Drug List
		Antibacterial (Beta Lactam)	1	OB/RR	As per state Drug List
		Antibacterial (Others))	1	OB/RR	As per state Drug List
		Antifungal	1	OB/RR	As per state Drug List
		Antianaemia	1	OB/RR	As per state Drug List
		Plasma Substitutes	1	OB/RR	As per state Drug List
		Antianginal medicines	1	OB/RR	As per state Drug List
		Antihypertensive medicines	1	OB/RR	As per state Drug List
		Anti infective & Antifungal (Topical)	1	OB/RR	As per state Drug List
		Antiinfalmatory & Others (Topical) Gastrointestinal Medicines (Antacids &	1	OB/RR	As per state Drug List
		Antemitics)	1	OB/RR	As per state Drug List
		, accomined)		JU/ NN	no per state brag tist
		Gastrointestinal Medicines (Antispasmodic			
		& Laxatives)	1	OB/RR	As per state Drug List
		Medicines used in diarrhorea	1	OB/RR	As per state Drug List
		Hormones	1	OB/RR	As per state Drug List
		Medicines used in Diabetes mellitus	1	OB/RR	As per state Drug List
		Immunologicals	1	OB/RR	As per state Drug List
		Opthalmic Preperations	1	OB/RR	As per state Drug List
	•				· · · ·

		0		OD /DD	As a superior Describer
		Oxytocics  Medicines acting on the respiratory tract	1	OB/RR	As per state Drug List
		intedictines acting on the respiratory tract	1	OB/RR	As per state Drug List
		IV Fluids	1	OB/RR	As per state Drug List
		Vitamin & Minerals	1	OB/RR	As per state Drug List
Standard	The	f: :			
C4	The	facility has equipment & instruments req	uired for assure	ed list of serv	ices.
	A settle billion of a settle sea for	Availability of ILR & Deep freezer for cold			
ME C4.4	Availability of equipment for storage	chain			
	storage		1	ОВ	
		Availability of racks for Storage of drugs			Check for medicines are not
			1	OB	stored on the floor
		Area of Concern - D Sup	port Services		
Standard	The facility has established fac	ility management programme for mainte	nance & upkee	p of equipme	ent & infrastructure to provide
D1	•	safe & secure environment			·
ME D1.1	The facility has system for				
	maintenance of critical Equipment	Cold Storage equipments are under AMC			Check for AMC for ILR, deep
		and temperature log book	1	RR/SI	freezer
		. 3		,	
					Check drugs are stored at
	The facility ensures comfortable				optimum temprature. AC
ME D1.2	environment for patients and				preferably, if not provision
	service providers	Townstative control at Dhawson, 9 woodied			adequate ventilation .
		Temprature control at Pharmacy & medical store	1	RR	Medicines are not stored in corridor or exposed to sunlight
			-	IM	Check for dirt, stains, Dust on
0.45 D4 0	Patient care areas are clean and				wall , floors and
ME D1.3	hygienic	Drug Storage area and Pharmacy Counter			fixtures.Scattered loose
		are clean	1	OB	medicines, empty boxes etc
	Facility has maliay of someways of				
ME D1.5	Facility has policy of removal of condemned junk material	No junk, condemed, unused articles in the			
	condennied junk material	pharmacy	1	ОВ	
ME D1.10	The facility ensures adequate				Check for record of duration of
WIL DI.IO	power backup	Power backup arrangement for cold chain			power outage and duration of
		equipments	1	SI/OB	back -up available.
Standard D2	Facility has defin	ed procedure for storage, Inventory Ma	nagement & dis	pensing of d	rugs in pharmacy
		UPHC has process to consolidate and	1		
	The facility has established	calculate the consumption of all drugs and			
ME D2.1	procedures for estimation,	consumables			
	indenting and procurement of drugs and consumables				
	arago ana consumables			RR/SI	
		Forecasting of drugs and consumables is	1		Check for stock-outs and
		done scientifically based on consumption			wastage (expiry, damaged
				RR/SI	medicines), if any are adjusted while forecasting
		Facility has a established procedures for	1	111/31	The concessing
		local purchase of drugs in emergency			
				RR/SI	
		UPHC has system for timely placing	1		
		requisition to district drug store			
				RR/SI	
		There is specified place to store medicines	1		
	The facility ensures proper	in Pharmacy			Drugs are stored according to
ME D2.2	storage of drugs and consumables				therapeutic
				ОВ	category/alphabetically or according to their dosage form
		All the shelves/racks containing medicines	1	35	according to their dodage form
		are labelled in pharmacy and drug store	_		
				0.5	
		Product of similar name and different	1	OB	Facility has a list of drugs with
		strength are stored separately	1		similar names and different
		sacing and stored separatery			strength and are stored
				ОВ	separately & labelled
		Heavy items are stored at lower	1		
		shelves/racks		ОВ	
		Fragile items are not stored at the edges of	1	0.5	
		the shelves.		OB	

stouched blue and look oils in endering (AUA) in the start of separatory in potient care are and and permanent and plannary.  One page and consumatives are stored anway from water and sources of host, general consumatives are stored anway from water and sources of host, general consumatives are stored anway from water and sources of host, general unique are from water and sources of host, general unique are from water and sources of host, general unique are from water and sources of host, general unique are from the facility oncurses management for water and sources of host, general unique are from the facility oncurses management for prints and source are for in sequence general unique are from the source							
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The facility has established excit formed and support to the facility has established excit from stock and support to the system and support to the stock in handled excit from stock and support to wall expected young and stock to wall expected young and youn			are stored separately in patient care area			stored separately in patient care	
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Drugs and consumbles are shorted away from water and sources of heat, decreasing the etc.  Once are rest studied.  Once are rest studied etc.  Once are rest studied.  Once are rest studied etc.  Once are rest studied.  Once are re			. ,		ОВ		
from water and sources of hoat, direct sonight etc.  Drugs are not aborded incertly on the floor and dispert to well expected wells and adjacent to well expected well and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected wells and adjacent to well expected well and adjacent to well expected well and adjacent to well expected well and adjacent to well expected well and adjacent to well expected well and adjacent to well adjacent to well and adjacent to well adjacent to well adjacent to well and ad			Drugs and consumables are stored away	1		Drugs are not stored in the	
direct sunlight etc.  Diags are not stored directly on the fillor and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well and adjacent to well especially well appropriate the process and identifies near output drugs of the process and identifies near output drugs of the process and identifies near output drugs of the process and identifies near output drugs of the process and identifies near output drugs of the process and identifies near output drugs of the process and identifies near output drugs of the process and other free in process and one of the process and other free in pr				-		_	
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ME 0.23 The facility ensures management.  ME 0.24 The facility ensures management with the process of the proce			Drugs are not stored directly on the floor	1			
he facility ensures management of apply and near epity degs of medicines and defertilities near a coulty drugs of medicines and defertilities near a coulty drugs.  There is a vertical and extracted area for keeping county drugs stored from regular drugs to comply drugs.  There is a vertical and transfer of surplin/ near epity drugs to other nearby facility / mere epity drugs facility / mere epity drugs facility of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of physical verification of ph			and adjacent to wall especially walls				
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Requiring controlled temperature & storage environment  Work instruction for storage of vaccines are displayed at point of use  ILR and deep freezer have functional temperature monitoring devices  There is system in place to maintain temperature chart of deep freezers  There is system in place to maintain temperature chart of deep freezers  There is system in place to maintain temperature chart of deep freezers  There is system in place to maintain temperature by a maintained. Corrective action of any temperature excursion taken.  OB/RR  There is system in place to maintain temperature chart of deep freezers  There is system in place to maintain temperature chart of deep freezers  There is system in place to maintain temperature chart of deep freezers  OB/RR  There is system in place to maintain temperature chart of deep freezers  OB/RR  There is system in place to maintain temperature log are maintained. Corrective action of any temperature log are maintained. Corrective action of any temperature log are maintained. Corrective action of any temperature log are maintained. Corrective action of any temperature excursion taken.  OB/RR  Check thermometer in ILR is in hanging position  OB ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Check if staff is aware of how to condition ice pack (water beads on the surface of ice pack and sound of water is heard on	145 D2 5	vaccines and other drugs,	storage unit and are clearly labeled.			Vaccines are not stored in door.	
& storage environment    Work instruction for storage of vaccines are displayed at point of use   OB	ME D2.5	requiring controlled temperature				Check food/drinking water not	
Work instruction for storage of vaccines are displayed at point of use  ILR and deep freezer have functional temperature monitoring devices  There is system in place to maintain temperature chart of ILR  There is system in place to maintain  There is system in place to maintain  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature geare c. Daily temperature log are maintained between -15 degree  C to -25 degree C.Daily  temperature log are maintained.  Corrective action of any temperature log are maintained.  Corrective action of any temperature excursion taken.  OB/RR  Check thermometer in ILR is in hanging position  OB  ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Check if staff is aware of how to condition ice pack (water beads on the surface of ice pack and sound of water is heard on							
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displayed at point of use  ILR and deep freezer have functional temperature monitoring devices  There is system in place to maintain temperature chart of ILR  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature chart of deep freezers  There is system in place to maintain  temperature excursion taken.  OB/RR  Check thermometer in ILR is in hanging  position  OB  ILR and deep freezer has functional alarm  system  Conditioning of ice packs is done prior to transport  There is system in place to maintain  Check if staff is aware of how to condition ice pack (water beads on the surface of ice pack and sound of water is heard on					UB		
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C to -25 degree C.Daily temperature log are maintained. Corrective action of any temperature excursion taken.  OB/RR  Check thermometer in ILR is in hanging position  ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  Condition ice pack (water beads on the surface of ice pack and sound of water is heard on				_		' '	
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Corrective action of any temperature excursion taken.  OB/RR  Check thermometer in ILR is in hanging position  ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  Check if staff is aware of how to condition ice pack (water beads on the surface of ice pack and sound of water is heard on		1				,	
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Check thermometer in ILR is in hanging position  ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  Conditioning of ice pack is done prior to transport  Condition ice pack (water beads on the surface of ice pack and sound of water is heard on		1				1	
Check thermometer in ILR is in hanging position  ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  Conditioning of ice pack is done prior to transport  Condition ice pack (water beads on the surface of ice pack and sound of water is heard on					OR/RR		
position  ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  Condition ice pack (water beads on the surface of ice pack and sound of water is heard on			Check thermometer in II P is in hanging	1	35/1111		
ILR and deep freezer has functional alarm system  Conditioning of ice packs is done prior to transport  Conditioning of ice packs is done prior to transport  SI  Check if staff is aware of how to condition ice pack (water beads on the surface of ice pack and sound of water is heard on		1		1	65		
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Conditioning of ice packs is done prior to transport 1 Check if staff is aware of how to condition ice pack (water beads on the surface of ice pack and sound of water is heard on			· · · · · · · · · · · · · · · · · · ·	1			
transport condition ice pack (water beads on the surface of ice pack and sound of water is heard on			system		SI		
transport condition ice pack (water beads on the surface of ice pack and sound of water is heard on			Conditioning of ice packs is done prior to	1		Check if staff is aware of how to	
on the surface of ice pack and sound of water is heard on		1				condition ice pack (water beads	
sound of water is heard on							
						ion the surruce of the pack allu	
I I SI Ishaking it)						· ·	
5. prom 8 c/					<u>.</u>	sound of water is heard on	

		<u></u>			-	_
		Staff is aware of Hold over time of cold	1			
		storage equipments		ł		
				1	Hold over time depends on	
				1	Factors - the amount of vaccine	
				1	being stored in the refrigerator,	
				l	the external temperatures and	
				1	the refrigerator will affect the	
				1	duration of time vaccines within	
				1	the refrigerator will be kept	
				1	within +2 °C to +8 °C.Do not	
				ł	allow the vaccine to remain in a	
				ł	non-functioning unit for an	
				SI	extended period of time.	
	The feetly become blicked	Drugs are arranged in demarcated boxes	1			
ME D2.6	The facility has established	/containers /trays		ł		
	procedure for dispensing of drugs			OB		
		Drug boxes/containers are legibly labeled	1	ł	Label is firmly attached to	
				1	container with Generic name	
				ł	and strength of drug is written	
				ОВ		
		Pharmacist check drugs name, strength,	1	ł	Check if pharmacists dispenses	
		dosage form and route of adminstration		l	to identified patients	
		before dispensing		SI/OB		
		Drugs are dispensed in Envelops	1	ОВ		
		List of look alike and sound alike drugs is	1	l		
		displayed at dispensing counter		ОВ		
		Drugs are given for no. of days as prescribed	1	_		
				OB/SI		
		Drugs are not directly dispensed from drug	1			
		storage area		SI/OB	<u></u>	
		Repeat drugs are given only after approval	1	ł	Medicines are dispensed to only	
		from medical officer			authorized patients registered	
				SI/RR/OB	for the day	
		Strip cutting is not done	1	ł		
				SI/OB		
		Dispensing register is updated in real time	1			
		, , ,		61/22/02		
				SI/RR/OB		
		Check Patients having knowledge about	1	ł	Pharmacist providing	
		correct use of medicines.		ł	information about correct use of	
				ł	medicines to the patients- at	
				ł	least purpose, no. of tablets,	
					frequency and duration of	
				PI	treatment.	
		Area of Concern - E Clir	lical Services			
Standard	Facility has defined proces	dure for primary management and conti	nuity of care wi	th appropriat	e maintenance of records	
E2						
	The facility ensures that			ł		
ME E2.8	standardised forms and formats				Starl Basistana Indont Basistana	
	are used for all purposes	Barrada at Bharras an araintair ad			Stock Registers, Indent Registers,	
	including registers	Records at Pharmacy are maintained	1	RR	Expiry drug register etc.	
Standard	Eacility has defined 0 implement	ented procedures for Drug administratio	n and standard	troatmont co	ideline as mandated by Cort	
E 3	racinty has defined & implem	ented procedures for Drug administratio	ii aliu staliuaru	deadment gu	idenine as manualed by GOVI.	
ME E3.3	Patient is counselled for self drug	Patient is explained about drug dosages by		l		
WIL ES.S	medication	pharmacist at dispensing counter	1	PI/SI		
		production of dispersing counter	1	11/51	1	
ME E3.4	The facility ensures that drugs are			l		
13.4	prescribed in generic name only	Drugs are purchased in generic name only	1	RR		
		Facility has a copy of essential drug list as		1.11		
		per state norms	1	RR/SI		
		Area of Concern - F Infe		, 31		
		Area of concern - Fillie	CLION CONTROL			
Standard	Facility has defined & estable	lish procedure for segregation, collection	treatment & d	isposal of Bio	medical &hazardous waste	
F4	racinty has defined & establish	isii procedure for segregation, conection	, treatment & u	isposai oi bio	medical dilazardous waste	
	The facility ensures			l		
ME F4.3	transportation and disposal of			l		
	waste as per guidelines	Expired Drugs and discarded vaccines are		l		
		disposed as per guidelines	1	ОВ		
		Area of Concern - G Qualit				
			,			
Standard						
Standard G.1	Facility	y has established quality Assurane Progra	m as per state/	National guid	lelines	

ME G1.5	The facility has established internal quality assurance programme	Physical verifcation of the inventory by Pharmacist at periodic interval	1	RR/SI		
ME G1.6	The facility has established external assurance programmes	Periodic and random sampling of drugs for monitoring and quality control	1	RR/SI		
ME G1.7	The facility conducts the periodic prescription/ medical audits	Pharmacy I/C coordinate prescription audit	1	RR/SI		
Standard G3	Facility has established	,documented &implemented standard o	perating proced	ure system fo	or its all key processes .	
ME G3.1	Standard Operating procedures are prepared , distributed and implemented for all key processes	Updated SOPs for Pharmacy and cold chain management is available at point of use	1	RR/SI		
ME G3.3	Work instructions are displayed at Point of work	SOPs adequately covers all relevant process of department Work instructions for Storage of drugs available	1	RR/SI OB		
		Work sinstruction for Operating ILR and Deep Freezers	1	ОВ		
		Area of Concern - H:	Outcomes			
Standard						
H1	The facilit	y measures its productivity, efficiency, cl	inical care & se	rvice Quality i	ndicators	
ME H1.1	Facility measures Productivity Indicators on monthly basis	Percentage of drugs available against EDL	1	RR		
ME H1.2	Facility measures efficiency Indicators on monthly basis	No. of stock out drugs	1	RR		
		Percentage of drugs expired during month	1	RR		
ME H1.3	Facility measures Clinical Care & Safety Indicators on monthly basis	Antibiotic prescription rate	1	RR		
Standard H2		Facility endeavours to improve its perfor	mance to meet	bench marks		
ME H2.2	The facility strives to improve indicators from its current performance	Trends analysis of Indicators is done at Periodic Intervals	1	RR		

	Pharmacy	Score Card
	Pharmacy	FO O
	Score	50.0
	Area of Co	ncern wise Score
A	Service Provision	50.0
В	Patient Rights	50.0
С	Inputs	50.0
D	Support Services	50.0
Е	Clinical Services	50.0
F	Infection Control	50.0
G	Quality Manangement	50.0
Н	Outcome	50.0

	National Quality Ass	urance Standards for U -	PHC		10			
		Checklist for Labora	tory					
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks		
Chair danid	Area of Concern - A Service Provision							
Standard A1	Facilit	y provides Promotive, preve	ntive and cur	ative service	s			
ME A1.4	Services are available for the time period as mandated	All lab services are available during OPD hrs	1	RR/SI	In-house or linkage with an out-sourced laboratory for availability of reports for clinical care and/or meeting obligations under the National Health Programme			
Standard		The facility provides RN			16			
A2		DELETED						
ME A2.2	The facility provides Maternal health Services	DELETED						
		Availability of Essential tests for ANC	1	RR/SI	Pregnancy Test, Haemoglobin, Blood Group, HIV Testing , Blood Sugar, HBsAG , Urine for Sugar & Protein, VDRL			
Standard A3	The Facility (	provides Diagnostic Services,	, Para-clinical	& support s	ervices.			
ME A3.2	The facility provides diagnostic services	Availability of clinical Pathology	1	RR/SI	Routine Urine , Blood Sugar			
		Availability of Routine Hemetology Tests	1		Haemoglobin, Platelets Counts,RBC, WBC, Bleeding time ,Clotting Time & Hepatitis B/ Australian antigen			
		Blood Grouping & Rh Typing	1	RR/SI RR/SI				
		Availability of Serology Tests (Rapid)	1	RR/SI	Rapid diagnositic kit for PF Malaria, HIV/AIDS RPR/VDRL for Syphilis	DISCUSS		
		Availability of Microscopy Tests	1	RR/SI	Blood Smear for Malaria Wet Mount and Gram Staining for RTI/STI. AFB (Sputum) for TB			
Standard A4	The facility	provide services as mandate	d in National	Health Progr	ammes			
ME A4.1	The facility provides services under National Vector Borne Disease Control Programme as per guidelines	Tests for Diagnosis of maleria	1	RR/SI	Blood Smear	DISCUSS FOR DELETION		
ME A4.2	The facility provides services under Revised National TB Control Programme as per guidelines	Availability /Linkage of Designated Microscoy Center (AFB)	1	RR/SI		STATE		
ME A4.4	The facility provides services under National AIDS Control Programme as per guidelines	Test for Diagnosis of HIV/AIDS	1	RR/SI	Through Rapid blood Test			
ME A4.8	The facility provides services under National Programme for Prevention and control of Cancer, Diabetes, Cardiovascular diseases & Stroke (NPCDCS) as per guidelines	Availability of test for diabetes	1	RR/SI	Blood /Urine sugar through disposable kits			

		1		1	T	
		Availability of Water Quality	1		Rapid test kit for faecal	
	The facility Provides services under	Tests			contamination of water Estimation of chlorine level of	
ME A4.9	Integrated Disease Surveillance				water using ortho-	
	Programme as per Guidelines				toluidine reagent	
				DD/CI		
Standard A5	The facility provides servi	ces as per local needs / State	e specific hea	RR/SI Ith programr	nes as per guidelines	
	Facility provides services as per	Laboratory provides specific				
ME A5.2	local needs/ state specific health	test for local health				
	programmes as per guidelines	problems/ diseases e.g. Dengue, swine flu etc.	1	RR/SI		
		Area of Concern B - P	2 Patients' Ric			
Standard						
B1		The service provided at fa	cility are acce	ssible		
ME B1.2	The facility displays the services		_			
	available		1	OB OB		
			1	ОВ		
ME B1.7	DELETED					
Standard						
Standard B2		The service provided at fac	ility are acce	ptable		
	Confidentiality of patients' records	Laboratory has system to			Lab registers & Copy of report	
ME B2.3	and clinical information is	ensure the confidentiality of			are kept at secured place	
	maintained	the reports generated	1	SI/OB		
Standard B3		The service provided at fac	cility are affor	rdable		
53		Availability of free diagnostic				
	The facility provides cashless	tests for mother & infant				
	services to all patients including					
ME B3.1	pregnant women, mothers and sick					
	children as per prevalent					
	government schemes		1	PI/SI		
			-	, 0.		
ME B3.2						
						_
ME B3.4	DELETED					
			1			
		Area of Concern	_			
Standard	The facility has adamy to C.C.			muiona arral	noote the prevelent resum	
C1	The facility has adequate & Saf		or assured se	rvices and n	<u> </u>	
		Laboratory space is adequate			Adequate area for sample	
		for carrying out activities			collection, waiting,	
ME C1.1	Departments have adequate space				performing test, keeping equipment and storage of	
61.1	as per patient load				drugs and records	
					J	
			1	OB/SI		
ME C1.3						
			1			
			1			
			1			
			1			
			1			

		1			T	
ME C1.5			1			
ME C1.6			1			
ME C1.7			1			
	The feetiles has adams to small	: - d d + : d - + - 66 : -				
Standard C2	The facility has adequate qualif	case loa		ing the assur	ed services to the current	
	The facility has adequate medical	Availability of one lab			<u> </u>	
ME C2.1	officers as per service provision and					
	work load		1	OB/SI		
	The Staff has been imparted	Training on Diagnostic				
ME C2.4	necessary trainings/skill set to	Equipment				
	enable them to meet their roles &		4	D.D.		
	responsibilities		1	RR		
			1	DELETED		
			_			
			1			
			1			
			1			
e: 1 1			1			
Standard C3	The facility p	rovides drugs and consumat	les required	for assured s	ervices.	
<del></del>	The Facility has availability of		1		Gram's iodine, Crystal Violet	
ME C3.2	adequate consumables at point of		_		stain, Safranine stain, JSB	
	use	Availability of Stains		SI/RR/OB	stains	
			1		Cyan meth -	
					haemoglobin/HCl for Hb	
		Availability of reagents		SI/RR/OB	estimation, ABO & Rh antibodies	
		Availability of reagents	1	31/111/00	antibodies	
			1		Uristix for urine albumin and	
					sugar analysis, PH strip, RPR	
					test kits for syphilis, Whole Blood Finger Prick HIV Rapid	
		Availability of Rapid			Test Kit	
		diagnostic Kits		SI/RR/OB	rese rice	
			1		Smear Glass microslide	
					Lancet/ pricking needle	
					Reflux Condenser	
					Test tubes	
					Glass rods	
					Glass slides Cover slips,	
					Western green, capillary tube	
		Availability of glassware		SI/RR/OB		
		s.ase, or glassware	1	5., 111, 00		
Standard	The facility has	oquinment & instruments		scured list of	Forvices	
C4	i ne racility na	equipment & instruments r	equired for a	ssured list 01		
	A stillability of				Haemoglobino meter,	
	Availability of equipment & instruments for diagnostic				Differential blood cell counter /Naubers's chamber, Sahli's	
ME C4.3	procedures being undertaken in the				Haemoglobinometer,	
	facility				Centrifuge	
		Instruments for Haematology	1	SI/OB		
		Links and C. St. 1	٠	6:10-	Colorimeter	
		Instruments for Bio chemistry	1	SI/OB	Simple/Compound Mirassana	
					Simple/Compound Miroscope for Malaria & Bi-noccular	
					Microscope for RNTCP, Tally	
					counter, Ph balance, Eletronic	
		Instrument for Microscopy	1	SI/OB	balance	
		Availability of Glucometer	1	SI/OB		

		Availability of equipment for		1		1
ME C4.4	Availability of equipment for storage	' ' '				
	rivaliability of equipment for storage	reagents	1	SI/OB	Refrigrator	
		Area of Concern - D St			neg. ato.	
		Area of concern - D 3	apport serv	1003		
Standard D1	The facility has established to infrastruc					
ME D1.1	The facility has system for maintenance of critical Equipment	There is system of timely corrective break down maintenance of the equipments			Ask for the procedure of repair, Check if some equipment is lying idle since long time due to maintenance	
			1	SI/RR		
ME D1.2	The facility ensures comfortable environment for patients and service providers	Adequate ventilation in Laboratory	1	ОВ		
ME D1.3	Patient care areas are clean and hygienic	Floors, walls, roof , sinks in patient care area are Clean	1	OB .	All area are clean with no dirt,grease,littering and cobwebs	
	nygienic		_	0.5		
		Surface of furniture i.e work benches are clean	1	OB		
			1	ОВ		
ME D1.4	Facility infrastructure is adequately maintained	Fixtures and Furniture i.e Work Benches are intact and maintained				
			1	ОВ		
ME D1.5	Facility has policy of removal of condemned junk material	No condemned/Junk material in the Laboratory	_			
ME D1.7	The facility provides adequate illumination level at patient care areas	Adequate illumination at work station	1	OB OB		
		Adequate illumination at	•	OB		
		Collection area	1	OB/Si		
Standard D2	Facility has defined proced	ure for storage, Inventory N	<b>Nanagement</b>	& dispensing	of drugs in pharmacy	
ME D2.1	The facility has established procedures for estimation, indenting and procurement of drugs and consumables	There is established system of timely indenting of consumables and reagents	1	RR		
ME D2.2	The facility ensures proper storage of drugs and consumables	Reagents are labelled appropriately	1	RR/OB	Reagents label contain name, concentration, date of preparation/opening, date of expiry, storage conditions and warning	
ME D2.3	The facility ensures management of expiry and near expiry drugs	No expired reagent found	1	OB	ana warriing	
		Records for expiry and near expiry reagent are maintained	1	RR		
ME D2.4	The facility has established procedure for inventory management techniques	Expenditure & stock register of consumbles are available at laboratory	1	RR		
Standard D5	Facility has procedu	e for collecting & Reporting	of the health	facility rela	ted information	

The facility provides monitoring and reporting promote formation required and per guidelines.  Area of Concern - E Clinical Services are used in large from the facility provides appropriate monitoring and reporting service for integrated Disease Surveillance reportance, as per guidelines.  Area of Concern - E Clinical Services.  Area of Concern - E Clinical Services.  Standard:  Area of Concern - E Clinical Services.  The facility has defined procedure for primary management and continuity of care with appropriate maintenance of records.  The facility provides appropriate referral linkages for transfer to excern the continuity of care.  The facility provides appropriate referral linkages for transfer to excern the continuity of care.  The facility renures that distance to excern the continuity of care with appropriate maintenance of records.  The facility renures that distance are the facility renures that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are linkages for the same that linkages are l						Form for Laboratory	DISCUSS
Reporting forms 1 days to District Surveillance unit (DSU) as per guidelines  Area of Concern - E Clinical Services  Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care with appropriate maintenance of records  The facility ensures that standardised forms and formats are used for all purposes including registers  The facility ensures that standardised forms and formats are used for all purposes including registers  The facility ensures are and indexed  Laboratory has adequate and indexed  Laboratory has adequate and adequate storage and retrieval of medical records  The facility ensures safe and Laboratory has adequate facility of storage of records are labelled and indexed  The facility ensures safe and Laboratory has adequate facility of storage of records and adequate storage and retrieval of medical records  Facility has defined & establish procedure for Diagnostic Services  ME E2.9  There are established procedures for Pre-testing Activities  For Pre-testing Activities  There are established procedures for primary sample, examination and detentification number of pattern, name of authorized requesters, type of primary sample, examination and detentification number of primary sample, examination and detent date and time of primary sample, examination and detentification number of pattern, and of authorized requesters, type of primary sample, examination and detent date and time of primary sample, examination and detent date and time of primary sample, examination and detent date and time of primary sample, examination and detent date and time of primary sample collection and detent date and time of primary sample collection and detent date and time of primary sample collection and detent date and time of primary sample collection and detent date and time of primary sample collection and detent date of the primary sample	ME D5.9	reporting service for Integrated Disease Surveillance Programme, as	information required	1	RR	Form L contain information for Name of Lab, state, district, block, Name & signature of officer incharge along with information about no, of samples tested and no. of sample found positive. Format also include line listing of positive cases except malaria cases along with age	
Area of Concern - E Clinical Services  Standard Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.  The facility ensures that standardised forms and formats are used for all purposes including registers  The facility ensures that standardised forms and formats are used for all purposes including registers  Lab records are labelled and indexed  Records are maintained at laboratory  The facility ensures safe and adequate storage and retrieval of macility for storage of records  The facility ensures safe and adequate storage and retrieval of macility for storage of records  Facility has defined procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  Area of Concern - E Clinical Services  Laboratory on the surface on this primary management and continuity of care with appropriate maintenance of records  The facility provides appropriate maintenance of resords  The facility ensures that standardised for tests not available  Requisition and are printenance of requisition and date and time of primary sample collection and date and time of primary sample collection and date and time of primary sample collection and date and time of receipt			are sent to District Surveillance Unit (DSU) as	1		duplicate (Blue & Yellow), PHC retain blue copy while	
Standard Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records  The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.  The facility ensures that standardised forms and formats are used for all purposes including registers  The facility ensures that standardised forms and formats are used for all purposes including registers  Lab records are labelled and indexed  Records are maintained at laboratory  The facility ensures safe and adequate storage and retrieval of macical records  Facility has defined procedures for Pre-testing Activities  AME E2.9  Requisition of all laboratory  Requisition of all laboratory  test is done in request form  Request form contain information: Name and identification number of patient, name of authorized requester, type of primary sample collection and date and time of primary sample collection and date and time of primary sample collection and date and time of receipt							
Standard   Facility has defined procedure for primary management and continuity of care with appropriate maintenance of records   The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.   1 RR/SI					DELETED		
The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.  The facility ensures that standardised forms and formats are used for all purposes including registers  Lab records are labelled and indexed indexed adequate storage and retrieval of medical records  The facility ensures safe and adequate storage and retrieval of medical records  The facility ensures safe and are storage and retrieval of medical records  The facility ensures safe and are storage and retrieval of medical records  The facility ensures safe and and indexed in the facility of the facility ensures safe and are storage and retrieval of medical records  The facility has defined & establish procedure for Diagnostic Services  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  The facility provides appropriate referst in the facility and adequate and time of receipt in the facility provides appropriate at the facility and adequate storage and retrieval of medical records  There are established procedures for Pre-testing Activities			Area of Concern - E C	linical Servi	ices		
The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.  The facility ensures that standardised forms and formats are used for all purposes including registers  Lab records are labelled and indexed  Records are maintained at laboratory  The facility ensures safe and adequate storage and retrieval of medical records  Facility has defined & establish procedure for Diagnostic Services  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  I inkage for tests not available at the facility at the facility at the facility at the facility at the facility and reporting are available  Printed formats for requisition and reporting are available  RR Test registers, IQAS/EQAS Registers, Expenditure registers, Accession list etc.  RR RR  The facility ensures safe and adequate storage and retrieval of medical records  Facility has defined & establish procedure for Diagnostic Services  Request form contain information: Name and identification number of patient, name of authorized requester, type of primary sample, examination requested, date and time of primary sample collection and date and time of primary sample collection and date and time of primary sample collection and date and time of primary sample collection and date and time of receipt		Facility has defined procedure fo		-	f care with a	ppropriate maintenance of	
The facility ensures that standardised forms and formats are used for all purposes including registers  1 RR  Lab records are labelled and indexed 1 RR  Records are maintained at laboratory 1 RR  The facility ensures safe and adequate storage and retrieval of medical records  Facility has defined & establish procedure for Diagnostic Services  Requisition and reporting are available  1 RR  Test registers, IQAS/EQAS Registers, Expenditure registers, Accession list etc.  1 RR  REE4.1 There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities	ME E2.2	referral linkages for transfer to other/higher facilities to assure the	linkage for tests not available	1	RR/SI		
Lab records are labelled and indexed  Records are maintained at laboratory  Registers, Expenditure registers, Accession list etc.  The facility ensures safe and adequate storage and retrieval of medical records  Taboratory  Teat registers, IQAS/EQAS Registers, Expenditure registers, Accession list etc.  Registers, Accession list etc.  DB/SI  Standard  Facility has defined & establish procedure for Diagnostic Services  Requisition of all laboratory test is done in request form  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  Requester, type of primary sample, examination requested, date and time of primary sample collection and date and time of receipt	ME E2.8	standardised forms and formats are used for all purposes including	Standard Formats available	1	RR	requisition and reporting are	
Records are maintained at laboratory  The facility ensures safe and adequate storage and retrieval of medical records  The facility has defined & establish procedure for Diagnostic Services  Requisition of all laboratory test is done in request form  There are established procedures for Pre-testing Activities  Records are maintained at laboratory has adequate feeding facility for storage of records adequate facility for storage of records facility fac							
The facility ensures safe and adequate storage and retrieval of medical records  Standard E4  Facility has defined & establish procedure for Diagnostic Services  Requisition of all laboratory test is done in request form  There are established procedures for Pre-testing Activities			Records are maintained at			Registers, Expenditure	
Requisition of all laboratory test is done in request form  There are established procedures for Pre-testing Activities  There are established procedures for Pre-testing Activities  Requisition of all laboratory test is done in request form  Request form contain information: Name and identification number of patient, name of authorized requester, type of primary sample, examination requested, date and time of primary sample collection and date and time of receipt	ME E2.9	adequate storage and retrieval of					
There are established procedures for Pre-testing Activities  test is done in request form  information: Name and identification number of patient, name of authorized requester, type of primary sample, examination requested, date and time of primary sample collection and date and time of receipt		Facility h	nas defined & establish proce	edure for Dia	gnostic Servi	ces	
1 RR/OB	MF F4 1	·			RR/OB	information: Name and identification number of patient, name of authorized requester, type of primary sample, examination requested, date and time of primary sample collection	
				1			

			1			
			1	DELETED		
		Tarting and an area of	1	DELETED		
	The second second second second	Testing procedure are readily				
ME E4.2	There are established procedures	available at work station and				
	for testing Activities	staff is aware of it				
			1	OB		
		Laboratory has format for				
ME E4.3	There are established procedures	reporting of results				
IVIL L4.3	for Post-testing Activities	reporting or results	1	RR		
			1	IXIX		
			1	DELETED		
			1	RR/SI		
	There are established procedures	Medical Practioner fills		,	TO DISCUSS	
	for laboratory diagnosis of	standardized laboratory				
ME E4.4	Tuberculosis as per prevalent	form for sputum				
	guidelines	examination	1	RR		
		Laboratory staff follow			Two sample will be collected:	
		guideline for collecting			Early morning-Spot	
		sputum for smear microscopy			,	
			1	RR/SI/PI		
		Laboratory staff/ health		· · ·	Explains steps of collecting	
		worker provide guidence			sputum	
		to patient for sputum				
		collection	1	RR/SI		
		Laboratory staff is aware		, 51	Ziel Neelsen /(1% Carbol	
		of methodology for smear			fuchsion, 25% Sulphuric Acid,	
		preparation & staining			0.1% Methylene blue). If	
		slides			Laboratory is not designated	
		Sildes			DMC, give full compliance	
			1	RR/SI		
		Staff is aware of how to			If Laboratory is not	
		examine and			designated DMC, give full	
		interpretation sputum			compliance	
		smear	1	RR/SI		
		Instruction for Ziel			If Laboratory is not	
		Neelsen Staining			designated DMC, give full	
		procedure &interpretation			compliance	
		chart are displayed at				
		working station				
			1	RR/SI		
		Staff is aware of method of				
		prepartion of blood flims				
		·			Select 2 Or 3 finger, site of	
					puncture is site of ball of	
					finger, hold the slide by its	
					edges, the size of blood drop	
					is controlled better if finger	
					touches the slide, touch the	
					drop of blood with clean	
	There are established procedures				slide, take 3 drops for thick	
ME E4.5	for laboratory diagnosis of Malaria				smear, touch the another	
	as per prevalent guidelines				new drop of blood with edge	
					of clean slide,spread the	
					blood with corner of another	
					slide to make circle, bring	
					edge of slide carryingsecod	
					drop of blood to surface of	
					first slide, wait till blood	
					spread whole edge, holding	
					it an angle of 45 <sup>0</sup> push it	
			1	SI/RR	forward	
		Staining & examination of				
		blood films is done as per		c: /n-		
		protocols	1	SI/RR		
		Staff is aware of mothodeles			For thick smoor staff is assisted	
		Staff is aware of methodolgy			For thick smear staff is aware	
		for estimation of parasite density	1	SI/RR	of parasite per microlitre & pluse sytsem	
	L	испану	1	31/KK	pruse sylseili	

		Area of Concern - F In	fection Con	trol		
Standard	Facility has defined &					
F1	racinty has defined &		ensuring riand	a nygiene pro	<u> </u>	
ME F1.1	Hand washing facilities are	Availability of hand washing Facility at Point of Use			Check for availability of wash basin near the point of use	
	provided at point of use	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	ОВ	·	
		Availability of running Water			Ask to Open the tap. Ask Staff	
			1	ОВ	water supply is regular	
		Availability of antiseptic soap	_		Check for availability/ Ask	
		with soap dish/ liquid			staff if the supply is adequate	
		antiseptic with dispenser.	1	ОВ	and uninterrupted	
		Display of Hand washing	_		Prominently displayed above	
		Instruction at Point of Use			the hand washing facility,	
			1	ОВ	preferably in Local language	
	Staff is trained and adhere to	Staff is adhere to standard	-	- 05		
ME F1.2	standard hand washing practices	hand washing practices		0.5 /5:		
	•	Staff aware of when to hand	1	OB/SI		
		wash	1	OB/SI		
	Fig. 19. And the second of the	Proper cleaning of procedure			like before drawing blood,	
ME F1.3	Facility ensures standard practices for maintaining asepsis	site with antisepsis			and collection of specimen	
	To maintaining asepsis		1	OB/SI		
Standard	Facility ensures availab	pility of Personal Protective e	equipment &	follows stan	dard precautions.	
F2	-	Disposable gloves are				
	Facility ensures adequate personal	available at point of use				
ME F2.1	protection equipment as per					
	requirements		1	ОВ		
		Availability of lab	1	ОВ		
		aprons/coats	1	ОВ		
N4E E2 2	Staff adheres to standard personal	No reuse of disposable gloves and Masks.				
ME F2.2	protection practices	gioves and iviasks.	1	OB/SI		
		No mouth pipetting is done		,	Check for availablity of Micro	
		in the laboratory	1	OB/SI	pipette	
Standard	Facility has standard	procedure for disinfection 8	&sterilization	of equipmer	it & instrument	
F3	•			<u> </u>		
		Decontamination of	1		Ask staff about how they	
	The facility ensures standard	operating & Procedure surfaces			decontaminate work benches (Wiping with .5% Chlorine	
ME F3.1	practices and materials for				solution)	
	decontamination and cleaning of instruments and procedures areas					
	mod unicino and procedures dieds					
		Proper Decontamination of	1	SI	Decontamination of	
		instruments after use	1		instruments and reusable of	
					glassware are done after	
					procedure in 1% chlorine	
				SI	solution/ any other appropriate method	
		Contact time for	1	<del></del>	10 minutes	
		decontamination is adequate		C!		
		Cleaning of instruments after	1	SI	Cleaning is done with	
		decontamination			detergent and running water	
				C!	after decontamination	
		Staff is trained for Blood spill	1	SI		
		management		SI		
	The facility ensures standard	Disinfection of reusable	1		Disinfection by hot air oven	
ME F3.2	practices and materials for disinfection and sterilization of	glassware			at 160 degree Celcius for 1 hour	
	instruments and equipment			SI		
	• •		I			

Standard	Facility has defined & establi	sh procedure for segregation	collection	treatment &	disposal of Rio medical	
Standard F4	racility has defined & establi	&hazardous		treatment &	аізрозаі от віо теаісаі	
		Availability of colour coded				
		bins at point of waste				
ME F4.1	The facility ensures segregation of	generation				
	Bio Medical Waste as per guidelines					
			1	ОВ	Bins are covered	
		Availability of colour coded			Check Yellow bag is non	
		bags	1	OB	chlorinated	
		Segregation of different category of waste as per				
		guidelines	1	ОВ		
		Display of work instructions				
		for segregation and handling				
		of Biomedical waste	1	ОВ	Pictorial & in local language	
		There is no mixing of		ОВ	Fictorial & III local language	
		infectious and general waste				
			1	ОВ		
		Availability of functional	1	ОВ		
		needle cutters  Availability of puncture proof	1	UB	See if it has been used or just	
NAT TA 2	The facility ensures management of	box			lying idle	
ME F4.2	sharps as per guidelines					
			1	ОВ		
		Disinfection of sharp before disposal	1	OP	Should be available near the	
		Staff is aware of contact time	1	ОВ	point of generation Disinfection of syringes is not	
		for disinfection of sharps			done in open buckets	
		·	1	SI	·	
	The facility ensures transportation	Disinfection of liquid waste				
ME F4.3	and disposal of waste as per	before disposal				
	guidelines		1	OR/CI		
		Disposal of sputum	1	OB/SI	Remove the lid from sputum	
		container with specimen &			cup, put sputum cup, left	
		wooden stick as per			over specimen, wooden stick	
		guideline			in foot operated plastic	
					bucket/bin with 5% phenol/phenolic compound	
			1	OB/SI	diluted to 5%	
		Staff is aware of contact			12 hours	
		time for immersion of				
		sputum cups in disinfectant solution	1	SI		
		Disposal of slides are done		31	Put slides in puncture proof	
		as per guideline	1	SI	container	
		Staff is aware of contact			With use of 5%	
		time for immersion of			phenol/phenolic compound	
		slides in disinfectant			(40%) diluted to 5% contact time for slides are 30 min	
		solution	1	SI	and for shads are 50 min	
		Area of Concern - G Qua	lity Manag			
Standard	Facility has estab	l guidelines				
G.1	racinty mas estat		us per 3	Late, Hacione		
ME G1.5	The facility has established internal	Internal Assessment of Laboratory is done at				
	quality assurance programme	periodic Interval	1			
			1	DELETED		
			1			
			1			
			1			
		Cross Validation of Lab tests	=			
ME G1.6	The facility has established external	are done for Haematolgy and				
	assurance programmes	records are maintained	4	DD /CI		
			1	RR/SI		

Coros Validation of lab bets but some done for bottednessing and records are maintained 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1			,
Acad Concern - H: Outcomes  Standard  The facility measures its productivity efficiency, clinical are & service Quality indicators  ME 63.3  Acad Concern - H: Outcomes  A			Cross Validation of Lab tests				
Standard Facility has established documented 8 implemented standard operating procedure system for its all key processes  Standard Operating procedures are procedured and processes of the department of the processes of the department of the depar			· ·				
Standard Standard Departing procedures are prepared, distributed and implemented for all key processes.  Standard Operating procedures are prepared, distributed and implemented for all key processes.  Standard Operating procedures are prepared, distributed and implemented for all key processes.  Standard Operating procedures are prepared, distributed and implemented for all key processes of the department.  Superadequaty cover all elevant processes of the department of the de			and records are maintained	_	4		
Sindard  Sindard  Facility has established, documented & implemented standard operating procedure: system for its all key processes processes.  ME G11  ME G11  Standard Operating procedures are prepared, distributed and upplemented for all key processes of the department of the dep					RR/SI		
Sandard G3  Facility has established, documented & Implemented standard operating procedure system for its all key processes.  ME G3.1  Sandard Operating procedures are prepared, distributed and implemented for all key processes are prepared, distributed and implemented for all key processes.  SIOP adequatry cover all revivant processes of the department.  SIOP adequatry cover all revivant processes of the department.  SIOP adequatry cover all revivant processes of the department.  ME G3.3  Area of Concern - H: Outcomes  Sandard  The facility measures its productivity, efficiency, clinical care & service Quality indicators.  ME H1.1  Accordance of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  ME H1.2  Facility measures efficiency indicators on monthly basis. No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1 RR R.  No of 18 december of the dome per 1000 OPC 1							
Sandard   Sandard Operating procedures are propagated, distributed and implemented standard operating procedure are propagated, distributed and implemented for all key processes					DELETED		
Standard Operating procedures are propased, distributed and implemented for all key processes of use of control use 1 standard Operating processes of the department of the de	Chandand	Eacility has astablished doe	umanted Simplemented star			a system for its all key	
Standard Operating procedures are prepared, distributed and implemented for all key processes point of use protected for all key processes point of use point of use and the processes of the department of the de		Facility has established ,doc			ing procedur	e system for its all key	
Updated SOP are available at point of use  Updated SOP are available at point of use  1 SI/RR  SUPAREJUNITY OF THE PROPERTY OF THE STATE OF THE STAT			,				
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performance Trends analysis of Indicators	ME H2 2						
is done at Periodic Intervals 1 RR			· ·				
			is done at Periodic Intervals	1	RR		

## **Laboartory Score Card**

	Laboratory Score	50.0
	Area of Concerr	n wise Score
A	Service Provision	50.0
В	Patient Rights	50.0
С	Inputs	50.0
D	Support Services	50.0
E	Clinical Services	50.0
F	Infection Control	50.0
G	Quality Manangement	50.0
Н	Outcome	50.0

	National Qu	uality Assurance Standards for U	- PHC		11		
	Checklist for Outreach						
Reference No.	Measurable Element	Checkpoint	Compliance	Assessment Method	Means of Verification	Remarks	
		Area of Concern - A S	ervice Provis	ion			
Standard A1		Facility provides Promotive, preven	entive and cura	tive services			
ME A1.1	The facility provides treatment of common ailments	Availablity of routine & special outreach session	1	RR/SI	Check during session provision for Primary Management and referral of Common Cold, Fever, Diarrhoea, injuries etc		
ME A1.4	Services are available for the time period as mandated	Routine & special outreach sesions are conducted at defined intervals	1	RR/SI	At least one routine outreach session in area each month & At least one special outreach session every week in slum area /vulnerable population by designated ANM		
Standard		The facility provides RI	MNCHA Service	es			
A2		Counseling for family planning during			<u> </u>		
ME A2.1	The facility provides Reproductive health Services	outreach session / Home Visit	1	RR/SI	By ASHA & ANM		
ME A2.2	The facility provides Maternal health Services	Distribution of OCP & Condoms  Antenatal care services	1	RR/SI	Registration, Antenatal Check up, Identification of danger sign during the outreach sessions		
		Counseling & Behavior Promotions			for breast feeding, family planning, Personal hygiene		
ME A2.3	The facility provides New-born health Services	Immunization sessions	1	RR/SI RR/SI	etc		
		Postnatal Visit and counseling for Newborn Care Community based newborn screening	1	RR/SI			
		by ASHA during home visit	1	RR/SI			
ME A2.4	The facility provides Child health Services	Distribution of ORS, Zinc and Pediatrics Ciplox Anganwadi center based screening of	1	RR/SI			
	The facility provides	Children from 6 weeks to 6 years	1	RR/SI	Check MCP card is filled for Growth monitoring of child		
ME A2.5	The facility provides Adolescent health Services	Organization of Adolescent Health Day	1	RR/SI	At least once in a quarter		
Standard	The	e Facility provides Diagnostic Services	, Para-clinical	& support service	es.		
A3 ME A3.2	The facility provides diagnostic services	Availability of Point of Care Diagnostic Services	1	RR/SI	Pregnancy test, Hemoglobin, Urine Albumin, Malaria Slides, glucose strips & Blood Pressure		
Standard A4	Th	e facility provide services as mandate	d in National H		•		
ME A4.1	The facility provides services under National Vector Borne Disease Control Programme as per guidelines	Counseling for practices of Vector Control and Protection	1	RR/SI			
		Preparation of PS for Malaria and testing by Rapid Diagnostic Kits	1	RR/SI			
ME A4.2	The facility provides services under Revised National TB Control Programme as per guidelines	Outreach services for screening and referral of Symptomatic cases					
	<u> </u>	Follow up of confirmed cases for	1	RR/SI			
		ensuring adherence to DOT	1	RR/SI			

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	The facility provides services	Referral and follow up services for				
	under National Leprosy	leprosy cases				
ME A4.3	Eradication Programme as per					
	guidelines			DD (C)		
		5.6 1 1 1 5 1000 11	1	RR/SI		
	The facility provides services	Referral and guidance for HIV testing				
ME A4.4	under National AIDS Control	and availing ART				
	Programme as per guidelines		_	/		
	, ,		1	RR/SI		
		Follow up of confirmed cases for	_	(		
		adherence to ART	1	RR/SI		
		Condom promotion and distribution of				
		condoms in high risk group		DD (C)		
		Detection of come of immediate decision	1	RR/SI		
	The facility provides services	Detection of cases of impaired vision				
ME A4.5	under National Programme	and referral				
IVIE A4.5	for prevention and control of					
	Blindness as per guidelines		1	RR/SI		
		Identification and referral of common	1	NN/3I		
	The facility provides services	mental illness				
ME A4.6	under Mental Health	mental lilless				
	Programme as per guidelines		1	RR/SI		
		Counseling of elderly persons and their		my of		
	The facility provides services	family members for healthy ageing				
ME A4.7	under National Programme	lamily members for healthy ageing				
	for the health care of the					
	elderly as per guidelines		1	RR/SI		
	The facility provides services	Screening, referral, follow up of under	-	myor		
	under National Programme	treatment patients for Non				
	for Prevention and control of	communicable diseases				
ME A4.8	Cancer, Diabetes,					
	Cardiovascular diseases &					
	Stroke (NPCDCS) as per					
	guidelines		1	RR/SI		
		Screening, referral & follow up of		,		
		diabetic cases	1			
		BP measurement, screening, referral				
		and follow up of hypertensive & cardiac				
		patients	1	RR/SI		
	The facility Provides services	Surveillance about abnormal increase				
	· ·	in case of diarrohea, fever etc				
ME A4.9	under Integrated Disease Surveillance Programme as					
	per Guidelines					
	per duidennes		1	RR/SI		
		Immediate reporting of new				
		cluster/outbreak based on syndromic				
		surveillance	1	RR/SI		
	The facility provide services	Detection and referral of cases of				
ME A4.10	under National health	hearing impairment				
	Programme for deafness					
			1	RR/SI		
	The facility provides services	Immunization services at Outreach				
ME A4.11	under Universal Immunization	sessions as per National Schedule				
	Programme (UIP) as per					
	guidelines	T 6 11.6	1	RR/SI		
	The facility provides services	Testing of salt for presence of Iodine				
245 244	under National Iodine	through salt testing kits				
ME A4.12	deficiency Programme as per					
	guidelines		4	nn /cı		
		Motivation for quitting and referrel to	1	RR/SI		
	The facility provides services	Motivation for quitting and referral to				
ME A4.13	under National Tobacco	tobacco cassation centre				
IVIE A4.13	Control Programme as per					
	guidelines		1	pp/ci		
	The facility provides services	Health education on oral health and	1	RR/SI		
ME A4.14	under National Oral Health					
WIL A4.14	Care Program	Hygiene	1	RR/SI		
Standard	Care Frugralli			NN 31		
A5	The facility prov	<mark>rides services as per local needs / State</mark>	specific healt	h programmes as	per guidelines	
^3						

ME A5.1	The facility maps its vulnerable population enabling micro-planning for outreach services	Mapping of vulnerable section has been carried out in all areas served by UPHC	1	RR/SI	Mapping includes rag pickers, destitute, beggars, street children, construction workers, coolies, rickshaw pullers, sex workers, street vendors and other such migratory population	
		Facility keep records of Vulnerable population in there area			Check for if facility has a list of vulnerable population and whether information is available with ANM and	
			1	RR/SI	ASHA of their respective area	
		Facility prepares micro plan for covering the vulnerable population		20 (5)	Check if micro plans has been made in consultation with respective ANM and ASHA to reach out vulnerable and migratory	
		Facility monitors adherence to the	1	RR/SI	population	
		micro plan			Check if there is system of periodic review by UPHC for ensuring that outreach sessions has been carried	
			1	RR/SI	out according to micro plan	
		Facility updates the list of vulnerable population on regular interval			Check if there is system of updating the pockets of Migratory population at periodic interval. At least	
		Specific out reach services are presided	1	RR/SI	once in a quarter	
ME A5.2	Facility provides services as per local needs/ state specific health programmes as per guidelines	Specific out reach services are provided according to the local health problems		DD/CI		
			1	RR/SI		
		Out reach convices are provided for				
		Out reach services are provided for state specific health programs	1	RR/SI		
		· · · · · · · · · · · · · · · · · · ·				
Standard		state specific health programs	atients' Rigi	nts		-
Standard B1 ME B1.2	The facility displays the services and entitlements	state specific health programs  Area of Concern B - F  The service provided at factories provided at outreach sessions are displayed at relevant areas of	Patients' Rigi cility are acces	nts sible		
B1		state specific health programs  Area of Concern B - F  The service provided at factorics provided at outreach sessions	atients' Rigi	nts	Check if there is provision of Posters, Pamphlets etc to be	
B1	services and entitlements available	state specific health programs  Area of Concern B - F  The service provided at factorial services provided at outreach sessions are displayed at relevant areas of served population by UPHC  IEC material is displayed / distributed	'atients' Rigi cility are acces 1	nts ssible RR/SI	Posters, Pamphlets etc to be used during outreach sessions . Check innovative method like Use of Audio-Visual medium, Street Plays , group activities during the	
B1 ME B1.2	services and entitlements available  Patients & visitors are sensitized and educated through appropriate IEC / BCC approaches	state specific health programs  Area of Concern B - F  The service provided at fa  Services provided at outreach sessions are displayed at relevant areas of served population by UPHC  IEC material is displayed / distributed during the outreach session	Patients' Rigi cility are acces	nts sible	Posters, Pamphiets etc to be used during outreach sessions . Check innovative method like Use of Audio- Visual medium, Street Plays ,	
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In Restart is been imparted to enest their roles & responsibilities  Training of ASHA and ANMs on consumpting to counseling of ASHA on community and various aspects of public health in State of ASHA on community and various aspects of public health in State of ASHA on community and various aspects of public health in State of ASHA on community and various aspects of public health in ASHA is stilled of ANC Checkup & counseling of ASHA on community and various aspects of public health in ASHA is stilled of ANC Checkup & counseling of ASHA is stilled of ANC Checkup & counseling of ASHA is stilled of ANC Checkup & counseling of ASHA is stilled of ANC Checkup & counseling of ASHA is stilled for diagnostic services  ANM is stilled for diagnostic services  ANM is stilled for home based new born care & counselling in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA stilled for preparing Malaria in ASHA kits  The facility has availability of Availability of Drugs for Outreach Sessions  Availability of Contraceptives in ASHA kits  Availability of Contraceptives in ASHA kits  Availability of Contraceptives in ASHA kits  Availability of Topical (locally Applied) Availability of Autibiotics ins ASHA kits  Availability of Autibiotics ins ASHA kits  Availability of Autibiotics ins ASHA kits  The Facility has availability of Availability of Mouganestic kits in ASHA kits  Availability of Dressing Material  The Facility has availability of Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of		Workload	Induction training of ANM for Outreach	1	KK/SI	sturn/vulnerable population	
mecessary trainings/skill set to enter their roles & responsibilities  Training of ASHA and ANMs on courseling and seven their roles & responsibilities  Training of ASHA and ANMs on courseling and seven their roles & responsibilities  Training of ASHA and ANMs on courseling and seven their responsibilities and various aspects of public health and spacing between births.  Training of ASHA on community mobilization and various aspects of public health and spacing between births.  Training of ASHA on community and space to the seven their responsibilities and various aspects of public health and competent as per job description.  AMM is skilled of ANC Checkup & courselling and competent asper job description.  AMM is skilled preparing micro plan for immunization.  AMM is skilled for floagnostic services.  AMM is skilled for home based new born care & counselling.  ASHA is skilled for home based new born care & counselling.  ASHA is skilled for preparing Malaria slides.  The facility has availability of progs for Outreach sections.  Availability of Progs for outreach sections.  Availability of vaccines for immunization.  Availability of contraceptives in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole.  Availability of Contraceptives in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole.  Availability of Antipivetic in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole in the policy of contraceptive in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole in the policy of contraceptive in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole in the policy of contraceptive in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole in the policy of contraceptive in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole in the policy of contraceptive in ASHA Kits.  1 RR/SI IFA, OCP, Cotimoxazole in the policy of contraceptive in the policy o		· · · · · · · · · · · · · · · · · · ·	_				
roles & responsibilities  Training of ASHA and ANMs on counseling  Training of ASHA and ANMs on counseling  Training of ASHA on community  ANM is skilled of ANC Checkup & counseling  AMM is skilled for ANC Checkup & counseling  AMM is skilled for diagnostic services  AMM is skilled for diagnostic services  AMM is skilled for for diagnostic services  AMM is skilled for home based new born care & counselling  ASHA skilled for preparing Malaria  Sinded  AVAIlability of Antipyretic in ASHA Kits  AVAIlability of Antipyretic in ASHA Kits  AVAIlability of Antipyretic in ASHA Kits  AVAIlability of Topical (locally Applied)  AVAIlability of Topical (locally Applied)  AVAIlability of Antibiotics ins ASHA Kits  Training on counseling  AVAIlability of Antibiotics ins ASHA Kits  Training on counseling  AVAIlability of Antibiotics ins ASHA Kits  Training on counseling  AVAIlability of Antibiotics ins ASHA Kits  AVAIlability of Antibiotics ins ASHA Kits  Training on counseling  AVAIlability of Antibiotics ins ASHA Kits  AVAIlability of Availability of Availability of Availability of Availability of Availability of Availability of Availability of Availability of Availability of Availability of Availability of Diagnostic Kits in ASHA  Kits  AVAIlability of Dressing Material  AVAIlability of Dressing Material  AVAIlability of Dressing Mate	ME C2.4					A training of 3 to 6 weeks for	
Training of ASHA and ANMs on counseling  Training of ASHA and ANMs on counseling  Training of ASHA on community mobilization and various aspects of public health  Training of ASHA on community mobilization and various aspects of public health  The Staff is skilled and competent as per job description  ANM is skilled of ANC Checkup & counselling  ANM is skilled or ANM is skilled or ANM is skilled or ANM is skilled or ANM is skilled or ANM is skilled or ANM is skilled or ANM is skilled or ANM is skilled for diagnostic services  ANM is skilled for diagnostic services  ANM is skilled for home based new born care & counselling  ASHA is skilled for home based new born care & counselling  ASHA is skilled for preparing Malaria Sides  The facility has availability of Adiability of Vaccines for immunization  Availability of Vaccines for immunization  Availability of Antipyretic in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  The Facility has availability of Availability of Availability of Availability of Availability of Availability of Antibiotics ins ASHA Kits  The Facility has availability of Availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Antibiotics ins ASHA Kits  The Facility has availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Topical (locally Applied) drugs  The Facility has availability of Availability of Diagnostic Kits in ASHA Kits  The Facility has availability of Availability of Diagnostic Kits in ASHA Kits  The Facility has availability of Availability						providing outreach services	
counseling  Training on counseling for RTI, PETC, ANC, nutrition and spacing between births who industry in mobilization and various aspects of public health public health 1 RR/SI refersher training followed by 15 days of perfesher training		Totes & responsibilities		1	RR/SI	in urban areas	
Training of ASHA on community 1 RR/SI and spaning between births and robilization and various aspectsof public health 1 RR/SI and spaning between births and various aspectsof public health 1 RR/SI refresher training followed by 15 days of public health 1 RR/SI refresher training followed by 15 days of public health 1 RR/SI refresher training followed by 15 days of public health 1 RR/SI refresher training followed by 15 days of public health 1 RR/SI refresher training followed by 15 days of public health 1 RR/SI refresher training followed by 15 days of refresher training followed by 15 days of refresher training followed by 15 days of refresher training followed by 15 days of refresher training followed by 15 days of refresher training followed by 15 days of the refresher training followed by 15 days of training followed by 15 days of training followed by 15 days of training followed by 15 days of training followed by 15 days of training followed by 15 days of training followed by 15 days of training followed by 15 days of training followed by 15 days of training			•			Training on counceling for	
Training of ASHA on community mobilization and various aspects of public health problems of the community mobilization and various aspects of public health problems of the community mobilization and various aspects of public health and competent as per job courselling and competent as per job description  ANM is skilled of ANC Checkup & counselling 1 RR/SI			counseling			-	
Training of ASHA on community mobilization and various aspectsof public health  The Staff is skilled and competent as per job description  AMM is skilled preparing micro plan for immunization  AMM is skilled preparing micro plan for immunization  AMM is skilled for diagnostic services  AMM is skilled for diagnostic services  ASHA is skilled for home based new born care & counselling  ASHA is skilled for home based new born care & counselling  The facility has availability of adequate drugs at point of use  Availability of Contraceptives in ASHA Kits  Availability of Contraceptives in ASHA  Kits  The facility has availability of Availability of Topical (locally Applied) drugs  Availability of Topical (locally Applied) drugs  Availability of Availability of Availability of Availability of Availability of Availability of Nutritional Supplement  Availability of Nutritional Supplement  The Facility has availability of Availability of Availability of Indeposits in ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of Availability of Availability of Diagnostic Kits in ASHA  Availability of Nutritional Supplement  The Facility has availability of Availability of Diagnostic Kits in ASHA  Availability of Nutritional Supplement  The Facility has availability of Availability of Diagnostic Kits in ASHA  Kits  The Facility has availability of Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availab				1	RR/SI		
mobilization and various aspects of public health  The Staff is skilled and competent as per job description  ANM is skilled of ANC Checkup & counselling  ANM is skilled of ANC Checkup & counselling  ANM is skilled perparing micro plan for immunization  ANM is skilled for diagnostic services  ANM is skilled for home based new born care & counselling  ASHA is skilled for home based new born care & counselling  ASHA skilled for preparing Malaria slides  Sides  The facility provides drugs and consumables required for assured services.  The facility has availability of adequate drugs at point of use  Availability of Antipyretic in ASHA kits  Availability of Contraceptives in ASHA  Kits  Availability of Contraceptives in ASHA  Kits  Availability of Topical (locally Applied) drugs  Availability of Antipiotics ins ASHA kits  Availability of Autipiotics in ASHA kits  Availability of Autipiotics in ASHA kits  Availability of Antipiotics in ASHA kits  Availability of Inpical (locally Applied) drugs  Availability of Antipiotics in ASHA kits  Availability of Inpical (locally Applied) drugs  The Facility has availability of Autipiotics in ASHA kits  Availability of Inpical (locally Applied) drugs  The Facility has availability of Autipiotics in ASHA kits  Availability of Inpical (locally Applied) drugs  The Facility has availability of Autipiotics in ASHA kits  Availability of Ordinate Supplement  Availability of Autipiotics in ASHA kits  The Facility has availability of Autipiotics in ASHA kits  Availability of Ordinate Supplement  Availability of Ordinate Supplement  The Facility has availability of Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of Diagnostic kits in ASHA kits  Availability of			Training of ASHA on community	_	111751		
The Staff is skilled and competent as per job description  ANM is skilled preparing micro plan for immunization  ANM is skilled preparing micro plan for immunization  ANM is skilled for diagnostic services  ANM is skilled for home based new born care & counselling  ASHA is skilled for home based new born care & counselling  ASHA skilled for preparing Malaria Sides  Standard  The facility provides drugs and consumables required for assured services.  The facility has availability of adequate drugs at point of use  Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA  Kits  Availability of Topical (locally Applied)  Availability of Autibiotics ins ASHA Kits  Availability of Autibiotics ins ASHA Kits  Availability of Autibiotics ins ASHA Kits  The Facility has availability of Availability of Availability of Availability of Autibiotics ins ASHA Kits  Availability of Autibiotics ins ASHA Kits  The Facility has availability of Availability of Oversing Material  The Facility has availability of Availability of Diagnostic Kits in ASHA  Kits  Availability of Dressing Material  Availability of Dressing Material  Availability of Cotton Bandages						followed by 15 days of	
competent as per job description  ANM is skilled preparing micro plan for immunization  ANM is skilled for diagnostic services  ANM is skilled for diagnostic services  ASHA is skilled for home based new born care & counselling  ASHA skilled for preparing Malaria Slides  The facility provides drugs and consumables required for assured services.  Availability of adequate drugs at point of use  Availability of Antilipretic in ASHA Kits  Availability of Antilipretic in ASHA Kits  Availability of Contraceptives in ASHA  Kits  Availability of Topical (locally Applied)  Availability of Antiliprotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Sterilized Cotton Bandages			public health	1	RR/SI	refresher training	
ANM is skilled preparing micro plan for immunization   1   RR/SI			•				
ANM is skilled preparing micro plan for immunization  ANM is skilled for diagnostic services  ANM is skilled for diagnostic services  ASHA is skilled for home based new born care & counselling  ASHA is skilled for preparing Malaria  ASHA skilled for preparing Malaria  ASHA skilled for preparing Malaria  Siddes  The facility provides drugs and consumables required for assured services.  The facility has availability of adequate drugs at point of use  Availability of vaccines for immunization  Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA  Kits  Availability of Contraceptives in ASHA  Kits  Availability of Topical (locally Applied)  drugs  Availability of Topical (locally Applied)  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  Availability of Nutritional Supplement  The Facility has availability of Availability of Nutritional Supplement  Availability of Nutritional Supplement  The Facility has availability of Availability of Nutritional Supplement  Availability of Dressing Material  Availability of Sterilized Cotton Bandages	ME C2.5		counselling	1	DD/CI		
Immunization		description	ANM is skilled preparing micro plan for	1	KK/SI		
ASHA is skilled for home based new born care & counselling 1 RR/SI  ASHA skilled for preparing Malaria Slides 1 RR/SI  AFA skilled for preparing Malaria Slides 1 RR/SI  The facility provides drugs and consumables required for assured services.  Availability of adequate drugs at point of use  Availability of vaccines for immunization Availability of Antibiotics ins ASHA Kits Availability of Contraceptives in ASHA Kits Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Antibiotics ins ASHA Kits Availability of Nutritional Supplement Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability of Diagnostic Kits in ASHA Kits Availability				1	RR/SI		
ASHA is skilled for home based new born care & counselling 1 RR/SI PR/SI SAHA skilled for preparing Malaria Slides RR/SI RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SIdes RR/SI SETAIL RR/SI SETAIL RR/SI SETAIL RR/SI SETAIL RR/SI SETAIL SETAIL RR/SI SETAIL			ANM is skilled for diagnostic services			Using rapid diagnostic Kits ,	
ASHA is skilled for home based new born care & counselling 1 RR/SI  ASHA skilled for preparing Malaria Slides 1 RR/SI  The facility provides drugs and consumables required for assured services.  The facility has availability of adequate drugs at point of use Availability of Processing Malaria Services in ASHA Kits 1 RR/SI IFA, OCP, Cotimoxazole Availability of Antipyretic in ASHA Kits 1 RR/SI Dicyclomine Contraceptive Pills, Emergency Contraceptive Pills, Emerg				_	(	9 .	
born care & counselling ASHA skilled for preparing Malaria Slides The facility provides drugs and consumables required for assured services.  Availability of Drugs for Outreach Sessions  The facility has availability of adequate drugs at point of use  Availability of Availability of Availability of Availability of Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Topical (locally Applied) Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics in ASHA Kits  Availability of Nutritional Supplement  Availability of Nutritional Supplement  Availability of Diagnostic Kits in ASHA Kits  Availability of Diagnostic Ki			ASHA is skilled for home based new	1	KK/SI	by strip Method	
ASHA skilled for preparing Malaria Slides  The facility provides drugs and consumables required for assured services.  ME C3.1 The facility has availability of adequate drugs at point of use  Availability of vaccines for immunization 1 RR/SI IFA, OCP, Cotimoxazole  Availability of vaccines for immunization 1 RR/SI Schedule  Availability of Antipyretic in ASHA Kits 1 RR/SI Dicyclomine  Availability of Contraceptives in ASHA Kits 1 RR/SI Dicyclomine  Availability of Contraceptives in ASHA Kits 1 RR/SI Condoms and Oral Contraceptive Pills, Emergency Condoms Pills				1	RR/SI		
Standard C3  The facility provides drugs and consumables required for assured services.  Availability of Drugs for Outreach Sessions  1 RR/SI IFA, OCP, Cotimoxazole  Availability of vaccines for immunization 1 RR/SI Schedule  Availability of Antipyretic in ASHA Kits 1 RR/SI Dicyclomine  Availability of Contraceptives in ASHA Kits 1 RR/SI Dicyclomine  Availability of Contraceptives in ASHA Kits 1 RR/SI Dicyclomine  Availability of Topical (locally Applied) 1 RR/SI Pills  Availability of Topical (locally Applied) 1 RR/SI Tube, G.V. Paint, Sprit  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement 1 RR/SI tablets, Tab. Iron Folic acid, ORS Packets  The Facility has availability of Availability of Diagnostic Kits in ASHA Kits 1 RR/SI Lancets  Availability of Dressing Material 1 RR/SI Sterilized Cotton Bandages					·		
ME C3.1 The facility has availability of adequate drugs at point of use  Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of adaptate at point of use  Availability of Dressing Material  Availability of Contraceptive products and consumables are quite for assured services.  I RR/SI IFA, OCP, Cotimoxazole  As per Immunization  As pe			Slides	1	RR/SI		
The facility has availability of adequate drugs at point of use  Availability of Autipyretic in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Intritional Supplement  The Facility has availability of Diagnostic Kits in ASHA  Availability of Drugs for Outreach  Availability of Drugs for Outreach  Availability of Sessions  1 RR/SI IFA, OCP, Cotimoxazole  As per Immunization  Schedule  Tab. Paracetamol, Tab. Dicyclomine  Condoms and Oral  Contraceptive Pills, Emergency Contraceptive Pills, Emergency Contraceptive Pills  Tetracycline ointment, Povidine Iodine ointment  Povidine Iodine ointment  Tube, G.V. Paint, Sprit  Cotrimoxazole syrup, Pediatric cotrimoxazole  1 RR/SI tablets,  Availability of Nutritional Supplement  The Facility has availability of Availability of Diagnostic Kits in ASHA  Kits  Availability of Diagnostic Kits in ASHA  Kits  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages		The	e facility provides drugs and consumal	oles required f	or assured servic	es.	
Availability of Topical (locally Applied)  Availability of Topical (locally Applied)  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of Diagnostic Kits in ASHA  Kits  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Cottmosazole  Availability of Sessions  Availability of Availability of Dressing Material  Availability of Sessions  Availability of Nutritional Supplement  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material	C3		Availability of Drugs for Outroach	l .			
Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied)  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  Availability of Nutritional Supplement  The Facility has availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Contraceptive in ASHA Kits  Availability of Dressing Material	ME C3.1		, -				
Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of Availability of Availability of Diagnostic Kits in ASHA Kits  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages		adequate drugs at point of use		1	RR/SI	IFA, OCP, Cotimoxazole	
Availability of Antipyretic in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of Availability of Diagnostic Kits in ASHA Kits  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Tab. Paracetamol, Tab. Dicyclomine  Condoms and Oral Contraceptive Pills  Tetracycline ointment, Povidine lodine ointment The Tetracycline ointment, Povidine lodine ointment Cotrimoxazole syrup, Pediatric cotrimoxazole yrup, Pediatric cotrimoxazole tablets, Zinc tablets, Zinc tablets, Tab. Iron Folic acid, ORS Packets  Nischay kit, rapid diagnostic kit, Sildes for Malaria & Lancets  Availability of Dressing Material			Availability of vaccines for immunization			· ·	
Availability of Contraceptives in ASHA Kits  Availability of Contraceptives in ASHA Kits  Availability of Topical (locally Applied) drugs  Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Contraceptive Pills, Emergency Contraceptive Pills  Tetracycline ointment, Povidine lodine ointment Cotrimoxazole syrup, Pediatric cotrimoxazole syrup, Pediatric cotrimoxazole tablets,  In RR/SI acid, ORS Packets Availability of Diagnostic Kits in ASHA Availability of Diagnostic Kits in ASHA Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material				1	RR/SI		
Availability of Contraceptives in ASHA Kits  1 RR/SI Pills  Availability of Topical (locally Applied) drugs  1 RR/SI Tube, G.V. Paint, Sprit Cotrimoxazole syrup, Pediatric cotrimoxazole syrup, Pediatric cotrimoxazole syrup, Pediatric cotrimoxazole tablets,  Availability of Nutritional Supplement  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  Availability of Dressing Material  Availability of Dressing Material  Condoms and Oral Contraceptive Pills, Emergency Contraceptive Pills  Availability of Interaction interaction interaction interaction interaction.  RR/SI Tube, G.V. Paint, Sprit Cotrimoxazole syrup, Pediatric cotrimoxazole tablets, Interaction interaction interaction interaction interaction interaction.  RR/SI acid, ORS Packets Interaction interaction interaction interaction.  RR/SI Lancets  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages			Availability of Antipyretic in ASHA Kits	1	pp/ci	· ·	
Kits  Contraceptive Pills, Emergency Contraceptive Pills  Availability of Topical (locally Applied) drugs  1 RR/SI Tibe, G.V. Paint, Sprit Cotrimoxazole syrup, Pediatric cotrimoxazole syrup, Pediatric cotrimoxazole syrup, Pediatric cotrimoxazole tablets,  Availability of Nutritional Supplement 1 RR/SI tablets,  Availability of Nutritional Supplement 1 RR/SI acid,ORS Packets Availability of Diagnostic Kits in ASHA Kits  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages			Availability of Contracentives in ASHA	1	NN/3I	-,	
Availability of Topical (locally Applied) drugs  Availability of Antibiotics ins ASHA Kits  Availability of Nutritional Supplement  The Facility has availability of availability of Diagnostic Kits in ASHA Kits  The Facility has availability of Surgice and Point of use  Availability of Dressing Material  Emergency Contraceptive Pills  Ref,SI  Tetracycline ointment, Povidine Iodine ointment Tube, G.V. Paint, Sprit Cotrimoxazole syrup, Pediatric cotrimoxazole tablets,  In RR/SI  RR/SI  RR/SI  RR/SI  Sterilized Cotton Bandages							
Availability of Topical (locally Applied) drugs  1 RR/SI Tube, G.V. Paint, Sprit Cotrimoxazole syrup, Pediatric cotrimoxazole syrup, Pediatric cotrimoxazole tablets, Availability of Nutritional Supplement  1 RR/SI tablets, Zinc tablets, Tab. Iron Folic acid,ORS Packets  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages							
drugs  1 RR/SI Tube, G.V. Paint, Sprit Cotrimoxazole syrup, Pediatric cotrimoxazole tablets,  Availability of Nutritional Supplement  1 RR/SI tablets,  Availability of Nutritional Supplement  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  Availability of Dressing Material  RR/SI Sterilized Cotton Bandages				1	RR/SI		
Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  Availability of Antibiotics ins ASHA Kits  RR/SI  RR/SI  Tube, G.V. Paint, Sprit  cotrimoxazole syrup, Pediatric cotrimoxazole tablets,  Zinc tablets, Tab. Iron Folic acid,ORS Packets  The Facility has availability of Availability of Diagnostic Kits in ASHA Availability of Diagnostic Kits in ASHA Kits  RR/SI  RR/SI  RR/SI  Sterilized Cotton Bandages			, , , , , , , , ,				
Availability of Antibiotics ins ASHA Kits    Availability of Antibiotics ins ASHA Kits   Cotrimoxazole syrup, Pediatric cotrimoxazole tablets,			drugs	4	nn/ci		
Availability of Nutritional Supplement  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  RR/SI  Sterilized Cotton Bandages			Availability of Antibiotics inc ASHA Kitc	1	KK/SI		
Availability of Nutritional Supplement  The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  Availability of Dressing Material  1 RR/SI tablets,  RR/SI acid,ORS Packets  1 RR/SI sichay kit,rapid diagnostic kit, Sildes for Malaria & Lancets  1 RR/SI Sterilized Cotton Bandages			A Committee of American Committee of American			* *	
The Facility has availability of adequate consumables at point of use  Availability of Dressing Material  1 RR/SI acid,ORS Packets  nischay kit,rapid diagnostic kits, Slides for Malaria & Lancets  1 RR/SI Lancets  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages				1	RR/SI		
The Facility has availability of Availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has availability of Diagnostic Kits in ASHA Recall to the facility has ava			Availability of Nutritional Supplement			· ·	
ME C3.2 adequate consumables at point of use  Availability of Dressing Material  Availability of Dressing Material  1 RR/SI Sterilized Cotton Bandages				1	RR/SI		
point of use 1 RR/SI Lancets  Availability of Dressing Material 1 RR/SI Sterilized Cotton Bandages	ME C2.2						
Availability of Dressing Material 1 RR/SI Sterilized Cotton Bandages	IVIE C3.2		INICS	1	RR/SI		
1 RR/SI Sterilized Cotton Bandages			Availability of Dressing Material	-	, 51		
Availabilty of Sanitary Napkins 1 RR/SI						Sterilized Cotton Bandages	
			Availabilty of Sanitary Napkins	1	RR/SI		

Standard	The f	facility has equipment & instruments	required for as	sured list of serv	vices.	
C4 ME C4.1	Availability of equipment & instruments for examination & monitoring of patients	Availability of functional Measuring equipments	1	RR/SI	BP Apparatus, thermometer, Weighing scale, measuring tape, Stethoscope	
Standard		Area of Concern - D S				
D2	·	ed procedure for storage, Inventory N	Management 8	dispensing of d		
ME D2.4	The facility has established procedure for inventory management techniques	There is a system of periodic replenishment of drugs and consumable sin ASHA Kits	1	RR/SI	Condoms, NISCHAY Kit, Sanitary pads & drugs etc	
ME D2.5	There is process for storage of vaccines and other drugs, requiring controlled temperature & storage environment	Drugs are kept at dry and cool place away from sun light	1	RR/SI		
Standard D3	Facility has define	d & established procedure for Comm	unity Participa	tion for providir	ng assured services	
ME D3.3	The facility has established procedure for supporting and monitoring activities of community health work -ASHA	UPHC monitors the activities assigned to ASHAs	1	DD /CI	Check for the records that ASHAs attends Monthly Review meetings	
	·	Incentives and TA/DA to ASHAs are paid	1	RR/SI	Check for there Is no backlog	
		on time UPHC supports in skill development of ASHAs	1	RR/SI	Check for timely trainings have been provided to ASHAS, MO orient ASHA at monthly review meeting	
		There is system of taking feedback	1			
ME D3.4	The facility has established procedure for supporting and monitoring activities of Mahila	from ASHAs to improve the services Mahila Arogya Samiti has been formed in all the slums served by UPHC		RR/SI		
	Arogya Samiti	Accounts have been opened for MAS	1	RR/SI		
		·	1 1	RR/SI RR/SI		
		MAS meets every month  Data base regarding functional MAS is	1			
Standard		available at UPHC	1	RR/SI		
D5	Facility has	procedure for collecting & Reporting	of the health	facility related in	nformation	
ME D5.9	The facility provide monitoring and reporting service for Integrated Disease Surveillance Programme, as per guidelines	Reporting on Form S under IDSP	1	pp /ci		
	The facility provides	Reporting under Universal	1	RR/SI		
ME D5.11	monitoring and reporting services under Universal Immunization Programme, as	immunization program by ANM				
ME D5.14	per guidelines Facility Reports data for Mother and Child Tracking	Reporting for MCTS	1	RR/SI		
ME D5.15	System as per Guidelines  Facility Reports data for HMIS System as per Guidelines	Reporting for HMIS	1	RR/SI RR/SI		
		Area of Concern - E C				
Standard E2	Facility has defined proced	lure for primary management and co	ntinuity of car	e with appropria	te maintenance of records	
ME E2.2	The facility provides appropriate referral linkages for transfer to other/higher facilities to assure the continuity of care.	ANM/ASHA has defined format for referring patients to UPHC	1	RR/SI		
		ASHA/ANM is aware of where to refer the patient based on presenting condition of patients	1	RR/SI		
		Records of referred patients are maintained by ASHA/ANM	1	RR/SI		
		,	_ =	, 2.	•	1

		To a series of the series of t	T	ı		
		Wherever required ASHA provides				
		escort services to patients during			Referral for Institutional	
		referral	1	RR/SI	Delivery escorted by ASHA	
ME E2.3	Facility ensures follow up of	Follow up of referred patients by ASHA		/		
	patients	& ANM	1	RR/SI		
		ANM & ASHA prepare micro plan for				
		home visits for follow up of discharged		DD/CI		
		patients	1	RR/SI		
	The facility ensures safe and	ANM has been provided with provision				
ME E2.9	adequate storage and	of safe keeping of records at UPHC				
	retrieval of medical records			22/61		
			1	RR/SI		
Standard	Facility has defined & imple	emented procedures for Drug adminis	tration and sta	ndard treatment	guideline as mandated by	
E 3		Govt.				
	Patient is counseled for self	ANM/ASHA explain patients about	T T	T T		
ME E3.3			1	RR/SI		
	drug medication	dosage and timings There is system of montoring so that	1	NN/3I	+	
ME E3.5	There is procedure of rational	drugs are not irrationally prescribed by				
IVIL L3.3	use of drugs	ASHA/ANM	1	RR/SI		
	Drugs are prescribed	Treatment guidelines for use of drugs		Riysi		
ME E3.6	according to Standard	are provided to ASHA & ANM				
IVIL LS.U	Treatment Guidelines	are provided to ASTIA & ARRIVI	1	RR/SI		
Standard	Treatment dudennes		<u> </u>			
E4		Facility has defined & establish proc	edure for Diag	nostic Services		
	There are established	Use of Rapid Diagnostic Kits as per				
ME E4.2	procedures for testing	protocols				
	Activities		1	RR/SI		
		HB testing is done as per protocols	1	RR/SI		
	There are established	Preparation of Malaria Slides as per		, -		
	procedures for laboratory	protocols				
ME E4.5	diagnosis of Malaria as per					
	prevalent guidelines		1	RR/SI		
Standard						
E5	The	facility has establish procedure for Ma	aternal health	care as per guide	line	
		Early registration of Pregnant	1		Check ANC records for	
	There is an established	women is ensured by the ANM	_		ensuring that majority of	
ME E5.1	procedure for Registration	Women is ensured by the runni			ANC registration is taking	
	and follow up of pregnant				place within 12th week of	
	women.			RR/SI	Pregnancy in ANC register	
		Mother and Child Protection Card is	1	,	Check Mother & Child	
		provided and updated			Protection cards have been	
					provided for each pregnant	
					women at time for	
				RR/SI	registration/ First ANC	
		Records are maintained for ANC	1		Records of each ANC check-	
		registered pregnant women			up is maintained are	
					maintained in ANC register	
					by the ANM of respective	
				RR/SI	area	
		Clinical information of ANC is kept with	1		Check, if there is a system of	
		ANC clinic			keeping copy of ANC	
					information like LMP, EDD,	
					Lab Investigation Findings ,	
				DD /C:	Examination findings etc.	
		Staff has knowledge of calculating	1	RR/SI	with them Check with ANM the	
		Staff has knowledge of calculating	1			
		expected pregnancies in the area			expected pregnancies in her area / How to calculate	
					it.(Birth Rate X	
					Population/1000 Add 10%	
					as correction factor (Still	
				RR/SI	Birth)	
		Tracking of Missed and left out ANC	1	, 5.	Check with ANM how she	
		3	_		tracks missed out ANC. Use	
					of MCTS by generating work	
					plan and follow-up with	
					ASHA, AWW etc.	
					Check if there is practice of	
					recording Mobile no. of	
					clients/next to kin for follow	
					up	
				RR/SI	<u> </u>	
		ASHA ensure At least one ANC visit is	1		Preferably 3rd Visit (28-34	
		attended by Medical Officer		RR/SI	Weeks)	
			. —		• •	

		T			
ME E5.2	There is an established procedure for History taking, Physical examination, and counseling of each antenatal	Comprehensive Obstetric History is recorded	1		History of Pervious pregnancies including complications and procedures done, if any, is
	woman, visiting the facility.				taken
				RR/SI	
		Physical Examination of Pregnant	1	/	Pulse, Respiratory Rate ,
		Women is done on every ANC visit Blood Pressure and weight is measured	1	RR/SI	Pallor, Oedema Check any 3 ANC records/
		on every ANC visit	1		MCP Card randomly to see
		on every rave visit			that BP and weight has been
					measured and recorded at
					every ANC visit
				RR/SI	
	The feetite and on a feet of the control of the con	Hemoglobin and Urine test is done on	1		Check randomly any 3 MCP
ME E5.3	The facility ensures of drugs & diagnostics are prescribed as	every ANC visit			card/ ANC record for Hemoglobin test is done at
IVIL LO.S	per protocol				every ANC visit and values
	P P			RR/SI	are recorded
		Staff can recognize the cases, which	1		Anaemia, Bad obstetric
		would need referral to Higher			history, CPD, PIH, APH,
	There is an established	Centre(FRU)			Medical Disorder
ME E5.4	procedure for identification of				complicating pregnancy,
	High risk pregnancy and appropriate & Timely referral.				Malpresentation, fetal distress, PROM, obstructed
	appropriate & Timely referral.				labor, rupture uterus, & Rh
				RR/SI	negative
		Staff is competent to identify	1		
		Hypertension / Pregnancy Induced			Hypertension - Two
		Hypertension			consecutive reading taken
					four hours apart shows Systolic BP >140 mmHg
					and/or Diastolic BP > 90
					mmHg
				RR/SI	
		Staff is competent to identify Pre-	1		Pre - Eclampsia- High BP
		Eclampisa			with Urine Albumin (+2) Imminent eclampsia -BP
					>140/90 with positive
					albumin 2++, severe
					headache, Blurring of vision,
					epigastria pain & oligouria
		Chaff :		RR/SI	144 mm (/ Albania a of
		Staff is competent to classify anaemia according to Haemoglobin Level	1		>11 gm% -Absence of Anaemia,10 to 11 gm% mild,
	There is an established	decording to macmoglobin Ecver			7-10 gm% Moderate
ME E5.5	procedure for identification				Anaemia
	and management of anaemia				<7 gm% Severe Anaemia
		Chaff in account of the latest of		RR/SI	Described and 150 to 11 to
		Staff is aware of prophylactic & Therapeutic dose of IFA	1		Prophylactic - one IFA tablet per day for at least 100 days
		merapeutic dose of IFA			starting from first trimester
					Therapeutic - 2 IFA tablet
					per day for three months
				RR/SI	
		Line listing of pregnant women with	1	DC/CI	Check the records
		moderate and severe anaemia  Counseling is provided during the ANC	1	RR/SI	Counseling regarding birth
	Counseling of pregnant	check-up as per protocol	1		preparedness, identification
NAT 55 6	women is done as per				of danger signs, nutrition,
ME E5.6	standard protocol and				breast feeding and family
	gestational age				planning
				RR/SI	
	There is a established	Postpartum home visits are ensured by	1		Check the records
ME E5.7	procedures for Postnatal visits	ASHA / ANM			ANM/ASHA visits home on 3rd, 7th and 42nd day after
	& counseling of Mother and Child			RR/SI	delivery
		History Taking and Examination is done	1	951	
		during the postnatal visits		RR/SI	

				1	1	
		Counseling is done during the home	1			
		visits				
					Ask ANM/ ASHA regarding	
					components of counseling	
					Pregnant women is	
					counseled for Postpartum	
					care , Hygiene, Nutrition,	
					Contraception,	
					Breastfeeding, Registration	
					of Birth and Identification of	
				PI/SI	danger signs	
Standard	Facilit	y has established procedure for care o	of New born &	Child as per guid	deline	
E6		ASHA/ ANM maintains the list of New-	1			
	Post natal visit & counseling	born in their area				
ME E 6.1	for New born care is provided	born in their area				
	as per guideline		1	RR/SI	Check the records	
		6 Home visits are provided by ASHA		KN/31	Check the records	
		o frome visits are provided by AsriA			On 3rd, 7th , 14th, 21st ,	
					28th and 42nd Day. Check	
					records that for identified	
					new-born visits have been	
			1	RR/SI	timely made by ASHA	
		Home visit form is filled by ASHA	1	INN 31	amely made by ASHA	
		The fish term is fined by Asia			Check Home visit form for	
					examination of Mother and	
					New Born has been updated	
			1	RR/SI	by ASHA during the visit	
		ASHA is skilled for Identifying danger	-	, 51	Weight <1.8 kg	
	Triage, Assessment &	signs and referral for Newborn			Temperature > 99 degree	
ME E 6.2	Management of new-born	S y Eller Eller of New Morn			Yellowness in eyes/Skin	
WE E 0.2	having emergency signs are				persistent for more than 14	
	done as per guidelines		1	RR/SI	day after birth.	
		ASHA is skilled for home based	_	,		
		management of Hypothermia			If temperature is <97F then	
		The large ment of trypothermia			advice the mother to keep	
					the baby warm through	
					increasing room	
					temperature and providing	
			1	RR/SI	skin to skin contact	
	Management of children	ORS therapy is provided as per	_	111,701	Similar Contract	
ME E 6.5	presenting diarrhoea is done	guidelines during Outreach Sessions				
	per guidelines	g	1	RR/SI		
		Identification for birth defects during		,-		
	Screening & Referral of	home visits by ASHA			Check ASHA is skilled for	
ME E 6.6	children as per guidelines of	,			recognizing birth defects and	
	Rastriya Bal Swasth Karkarm		1	RR/SI	referral	
Standard	Fa	cility has establish procedure for Fam	ily Planning as	per Govt guideli	ne	
E7			1	par caragination		
ME EZ 2	Facility provides spacing	Staff is aware of eligibility, Limitation				
ME E7.2	method of family planning as per guideline	and Benefits of Lactation Amenorrhea Method (LAM)	1	RR/SI		
	per guiucinie	Staff is aware of eligibility, Limitation,	1	nny 31		
		Method and Benefits of OCP				
		INICERIOU AND BEHEIRS OF OCP	1	RR/SI		
Standard				•		
E8	Facility	provides Adolescent reproductive &s	sexual health s	ervices as per gu	ideline	
	Facility provides Promotive	Counseling and group sessions during				
ME E8.1	ARSH Services	adolescent health days	1	RR/SI	Check for IEC activites	
	Facility provides Preventive	Distribution of Sanitary Napkin and		, -		
ME E8.2	ARSH Services	counseling of Menstrual Hygiene	1	RR/SI		
ME EQ.4	Facility Provides Referral	Referral linkages to adolescent friendly				
ME E8.4	Services for ARSH	health clinic	1	RR/SI		
Standard	Facility provides I	National Health Programmes as per op	perational/clin	ical guidelines of	the Government	
E9	7.		Je. acional/ cilli	Salacinics Of	oovermient	
	Facility provides service under	Distribution of Chloroquine in endemic				
ME E9.1	National Vector Borne Disease	area				
	Control Program as per					
	guidelines		1	RR/SI		
	Facility provides services	ASHA/ ANM are aware for monitoring				
ME E9.2	under Revised National TB	of TB Patients and adherence to DOT				
WIL LO.Z	Control Program as per	treatment				
	guidelines		1	RR/SI		
		What action is taken by DOT provider			Reported to next level	
		(ASHA/ANM) if they fail to retrieve			supervisor (PHW/MO-	
		such patient	1	RR/SI	PHI/STS/ MO-TB)	j

		What action is taken if patient misses			Arrange visit of MO- PHI to	
		DOT on 2 occasion in Intensive phase			patient home for counseling	
			1	RR/SI	of the patient.	
		Side effects of anti TB treatment is				
		identified by DOT provider and				
		reported to MO	1	RR/SI		
	Facility provide service for	Staff skilled to fill form S				
ME E9.9	Integrated disease					
	surveillance program		1	RR/SI		
		ASHA prepares due list of immunization		,		
	The facility provides services	for her respective area				
ME E9.11	under Universal Immunization	To her respective area				
	Programme as per guidelines		1	RR/SI		
		ANM/ASHA is aware of how to	1	NN/3I		
		calculate the no. of Beneficiaries				
		(pregnant women & Infants for every	_	(		
		vaccination)	1	RR/SI		
		Micro plan for respective area of ANM				
		has been adequately prepared	1	RR/SI		
		Tracking of missed out children done by				
		ANM /ASHA	1	RR/SI		
		Area of Concern - F In	fection Cont	rol		
Standard						
F1	Facility has o	defined & implemented procedure for	ensuring Hand	nygiene practi	ces & asepsis	
	Staff is trained and adhere to	Availability of Hand Sanitizer for				
ME F1.2	standard hand washing	outreach session and home visits				
WIE FI.Z	practices	Sacredon session and notife visits	1	RR/SI		
	•	Chack ASHA is aware of 5 stone of band		INITY 31	+	
N/E E4 2	Facility ensures standard	Check ASHA is aware of 6 steps of hand				
ME F1.3	practices for maintaining	wash	4	DD/CI		
	asepsis		1	RR/SI		
		Check ASHA is aware of when to hand	_	(		
		wash	1	RR/SI		
Standard	Facility ensur	res availability of Personal Protective e	equipment & 1	ollows standard	precautions.	
F2	· ·	<u> </u>				
	Facility ensures adequate	Availability of personal protective				
ME F2.1	personal protection	equipment for out reach sessions				
IVIL I Z.I	equipment as per					
	- 4- b b -					
	requirements		1	RR/SI	Gloves & Mask	
Standard	requirements	ablish procedure for segregation, colle		· · ·		
Standard	requirements	ablish procedure for segregation, colle		· · ·		
Standard F4	requirements	ablish procedure for segregation, colle waste		· · ·		
	requirements			· · ·		
	requirements  Facility has defined & est	waste		· · ·		
F4	requirements  Facility has defined & est  The facility ensures	waste Segregation of Biomedical waste during		· · ·		
F4	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines	Segregation of Biomedical waste during the outreach session	ection, treatme	ent & disposal o		
F4 ME F4.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof	ection, treatme	ent & disposal o		
F4	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per	Segregation of Biomedical waste during the outreach session	ection, treatme	ent & disposal o		
F4 ME F4.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions	ection, treatme	ent & disposal o		
ME F4.1 ME F4.2	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical	ection, treatme	ent & disposal o		
F4 ME F4.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to	ection, treatme	RR/SI		
ME F4.1 ME F4.2	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC	1 1	RR/SI RR/SI		
ME F4.1  ME F4.2  ME F4.3	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to	1 1	RR/SI RR/SI		
ME F4.1 ME F4.2 ME F4.3 Standard	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC	1 1 1 ality Manage	RR/SI RR/SI RR/SI RR/SI ment	F Bio medical &hazardous	
ME F4.1  ME F4.2  ME F4.3	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quantas established quality Assurance Pro	1 1 1 ality Manage	RR/SI RR/SI RR/SI RR/SI ment	F Bio medical &hazardous	
ME F4.1 ME F4.2 ME F4.3 Standard	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof Concern - G Quality Assurance Proof ASHA and ANM are represented in	1  1  1  Ality Manage	RR/SI RR/SI RR/SI ment ate/National gu	F Bio medical &hazardous	
ME F4.1 ME F4.2 ME F4.3 Standard G.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof Concern - G Quality Team	1 1 1 ality Manage	RR/SI RR/SI RR/SI RR/SI ment	F Bio medical &hazardous	
ME F4.1 ME F4.2 ME F4.3 Standard G.1 ME G1.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality	1  1  1  Ality Manage	RR/SI RR/SI RR/SI ment ate/National gu	F Bio medical &hazardous	
ME F4.1 ME F4.2 ME F4.3 Standard G.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality policy and it has been	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof Concern - G Quality Team	1  1  1  Ility Manage	RR/SI RR/SI RR/SI RR/SI RR/SI RE/SI RE/SI RE/SI	F Bio medical &hazardous	
ME F4.1 ME F4.2 ME F4.3 Standard G.1 ME G1.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of waste as per guidelines  Facility The facility has a quality team in place The facility has defined quality policy and it has been disseminated	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC	1  1  1  Ality Manage	RR/SI RR/SI RR/SI ment ate/National gu	F Bio medical &hazardous	
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ME F4.1  ME F4.2  ME F4.3  Standard G.1  ME G1.1  ME G1.2  ME G1.3	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of waste as per guidelines  Facility The facility has a quality team in place The facility has defined quality policy and it has been disseminated Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals The facility has established	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for	1 1 ality Manage	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	F Bio medical &hazardous	
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F4  ME F4.1  ME F4.2  ME F4.3  Standard G.1  ME G1.1  ME G1.2  ME G1.3	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of waste as per guidelines  Facility The facility has a quality team in place The facility has defined quality policy and it has been disseminated Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals The facility has established	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for	1 1 ality Manage	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	F Bio medical &hazardous	
F4  ME F4.1  ME F4.2  ME F4.3  Standard G.1  ME G1.1  ME G1.2  ME G1.3	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality policy and it has been disseminated  Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals  The facility has established internal quality assurance programme	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Production ASHA and ANM are represented in Quality Team ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting Internal Assessment Conducted for Outreach services	1 1 1 ality Manage gram as per st 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
F4  ME F4.1  ME F4.2  ME F4.3  Standard G.1  ME G1.1  ME G1.2  ME G1.3  ME G1.4  ME G1.5	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality policy and it has been disseminated  Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals  The facility has established internal quality assurance programme	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for	1 1 1 ality Manage gram as per st 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
ME F4.1  ME F4.2  ME F4.3  Standard G.1  ME G1.1  ME G1.2  ME G1.3  ME G1.5  Standard	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality policy and it has been disseminated  Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals  The facility has established internal quality assurance programme	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Production ASHA and ANM are represented in Quality Team ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting Internal Assessment Conducted for Outreach services	1 1 1 ality Manage gram as per st 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
ME F4.1  ME F4.2  ME F4.3  Standard G.1  ME G1.1  ME G1.2  ME G1.3  ME G1.5  Standard	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place The facility has defined quality policy and it has been disseminated Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals The facility has established internal quality assurance programme	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for Outreach services	1 1 1 ality Manage gram as per st 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
F4 ME F4.1 ME F4.2 ME F4.3 Standard G.1 ME G1.1 ME G1.2 ME G1.3 ME G1.4 ME G1.5 Standard G.2	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines The facility ensures management of sharps as per guidelines The facility ensures transportation and disposal of waste as per guidelines  Facility The facility has a quality team in place The facility has defined quality policy and it has been disseminated Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals The facility has established internal quality assurance programme  F Patient Satisfaction surveys	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting Internal Assessment Conducted for Outreach services  Sacility has established system for Patic Feed back is taken during outreach	1 1 1 ality Manage gram as per st 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
F4 ME F4.1 ME F4.2 ME F4.3 Standard G.1 ME G1.1 ME G1.2 ME G1.3 ME G1.4 ME G1.5 Standard G.2	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility The facility has a quality team in place The facility has defined quality policy and it has been disseminated Quality objectives have been defined, and the objectives are reviewed and monitored periodically The facility reviews quality of its services at periodic intervals The facility has established internal quality assurance programme  F Patient Satisfaction surveys are conducted at periodic	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for Outreach services  accility has established system for Patie Feed back is taken during outreach services	1 1 1 ality Manage gram as per st 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
F4 ME F4.1 ME F4.2 ME F4.3 Standard G.1 ME G1.1 ME G1.2 ME G1.3 ME G1.4 ME G1.5 Standard G.2	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality policy and it has been defined, and the objectives are reviewed and monitored periodically  The facility reviews quality of its services at periodic intervals  The facility has established internal quality assurance programme  F  Patient Satisfaction surveys are conducted at periodic intervals	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for Outreach services  accility has established system for Patie Feed back is taken during outreach services	1 1 1 ality Manage gram as per st 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	
F4 ME F4.1 ME F4.2 ME F4.3 Standard G.1 ME G1.1 ME G1.2 ME G1.3 ME G1.4 ME G1.5 Standard G.2 ME G2.1	requirements  Facility has defined & est  The facility ensures segregation of Bio Medical Waste as per guidelines  The facility ensures management of sharps as per guidelines  The facility ensures transportation and disposal of waste as per guidelines  Facility  The facility has a quality team in place  The facility has defined quality policy and it has been desined, and the objectives are reviewed and monitored periodically  The facility reviews quality of its services at periodic intervals  The facility has established internal quality assurance programme  F  Patient Satisfaction surveys are conducted at periodic intervals  Employee satisfaction Surveys	Segregation of Biomedical waste during the outreach session  Sharps are collected in Puncture proof box during outrace sessions  There is system of collecting Biomedical waste from Outreach session site to UPHC  Area of Concern - G Quality Assurance Proof ASHA and ANM are represented in Quality Team  ASHA and ANM are aware of Quality Policy of the UPHC  Specific Quality Objectives are set for Outreach services  Quality of outreach services are reviewed during Monthly quality team meeting  Internal Assessment Conducted for Outreach services  accility has established system for Patic Feed back is taken during outreach services  Employee Satisfaction survey includes	1 1 1 ality Manage gram as per st 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI  RR/SI	idelines	

Standard G3	Facility has established	documented &implemented standard	d operating pro	ocedure system fo	or its all key processes .	
ME G3.1	Standard Operating procedures are prepared , distributed and implemented for all key processes	SOPs for Outreach services have been prepared	1	RR/SI		
		SOPs includes all Key processes				
		regarding out reach services	1	RR/SI		
ME G3.2	Staff is trained as per SOPs	Outreach staff has been trained on SOPS	1	RR/SI		
		Area of Concern -	H: Outcomes	<u> </u>		
Standard H1	The facilit	y measures its productivity, efficiency	, clinical care 8	& service Quality i	ndicators	
ME H1.1	Facility measures Productivity Indicators on monthly basis	No. of special outreach session conducted per month	1	RR		
		No. of MAS meeting conducted per month	1	RR		
ME H1.2	Facility measures efficiency Indicators on monthly basis	No. of outreach session conducted per ANM	1	RR		
		No. of home visit conducted by ASHA	1	RR		
		No. of home visit conducted by ANM	1	RR		
Standard H2		Facility endeavors to improve its perf	ormance to m	eet bench marks		
ME H2.2	The facility strives to improve indicators from its current	Trends analysis of Indicators is done at Periodic Intervals				
	performance		1	RR		

	Outreach	Score Card
	Outreach Score	50.0
	Area of Co	ncern wise Score
Α	Service Provision	50.0
В	Patient Rights	50.0
С	Inputs	50.0
D	Support Services	50.0
E	Clinical Services	50.0
F	Infection Control	50.0
G	Quality	50.0
	Manangement	50.0
Н	Outcome	50.0

	National Quality	Assurance Standards for L	J - PHC		12	
		Checklist for General	Admin			
Reference No.	Measurable Elements	Checkpoints	Compliance	Assessment Methods	Means of Verification	Remarks
		Area of Concern - A	Service Provisi	ion		
Standard A1	Fa	cility provides Promotive, prev	ventive and cura	tive services		
ME A1.2	The facility provides Accident & Emergency Services	Availability of linkage to ambulance services	1	RR/SI		
ME A1.4	Services are available for the time period as mandated	Dispensaries are functional for time as mandated	1	RR/SI		
		Dispensaries functional in evening hours	1	RR/SI	Provision of OPD services in evening hours for working population	
Standard A3	The Facil	ity provides Diagnostic Service	es, Para-clinical	support servic	es.	
ME A3.3	The facility provides medico legal and administrative services	Issuing of Medical Certificates	1	RR/SI		
		Reimbursement related issues	1	RR/SI		
ME A3.4	The facility provides support services	Availability of Housekeeping services	1	RR/SI		
		Availability of Security Services	1	RR/SI		
Standard A5	The facility provides s	ervices as per local needs / Sta	ite specific healt	h programmes a	s per guidelines	
ME A5.2	Facility provides services as per local needs/ state specific health programmes as per guidelines	Availability of services as per state scheme/Program	1	RR/SI		
		Area of Concern B -	Patients' Righ			
Standard B1		The service provided at t	facility are access	sible		
ME B1.1	The facility has uniform and user- friendly signage system	Direction to Dispensaries is displayed from the Access road	1	ОВ		
		Name of the facility prominently displayed at front of hospital building	1	ОВ	With facility of illumination in night	
		All functional areas identified by their respective signage	1	ОВ	Clinics, Injection Room, Pharmacy, MO I/C Office etc.	
		Facility lay out with Directions to different departments displayed	1	ОВ		
		All signage are in uniform color & user friendly List of available services are	1	ОВ	At enterance of	
ME B1.2	The facility displays the services and entitlements available	predominatly displayed	1		Dispensaries	
		Important numbers like MO I/C and other important officials are displayed	1	ОВ		
		Days and Timings of Specific services are displayed	1	OB	General clinic Immunization clinic, ANC Clinic, Specialty clinic etc	

		Citizen Charter including Rights	1		Preferably near entrance	
ME B1.3	The facility has established citizen charter	& Responsibilities of Patients is prominently displayed			or OPD area	
	Criarter	prominently displayed		ОВ		
	Dationts Contains and a section of		1			
ME B1.4	Patients & visitors are sensitized and educated through					
	appropriate IEC / BCC approaches	Availability of IEC corner		ОВ		
	Information is available in bi-	Signage and information are	1			
ME B1.5	lingual signage and easy to understand	provided in bilingual language		ОВ		
		Availability of complaint box	1	<u> </u>		
ME B1.6	The facility has defined and established grievance redressal	and display of process for grievance re addressal and				
	system in place	whom to contact is displayed				
		There is defined frequency of	1	OB/SI/RR		
		collecting complaints from	-			
		complaint box  Records of patient complaints	1	SI/RR		
		suggestion are maintained	1			
		There is a sate as of a sais dis	1	SI/RR		
		There is system of periodic review of patient complaints	1			
		There is evidence of action	1	SI/RR		
		taken on complaints	-	SI/RR		
ME B1.7		Availability of Ramp at the	1			
ME B1.8	Access to facility is provided without any physical barrier	entrance of Dispensaries	-			
	without any physical barrier	Building Handrails are provided with the	1	ОВ		
		ramp & Stairs		ОВ		
		Approach road to hospital is accessible without congestion	1			
		or encroachment		ОВ		
		Internal Pathways and corridors of the facility are without any	1			
		obstruction / Protruding Object				
		Availability of at least one	1	ОВ		
		Disable friendly toilet		ОВ		
		Availability of Wheel chair and stretcher for easy Access	1			
		successes relicately recess		ОВ		
Standard B2		The service provided at f	acility are accep	table		
	Services are provided in manner					
ME B2.1	that are sensitive to gender	Availability of separate male and female toilets	1	ОВ		
			-	0.5		
	The facility ensures the behaviors of staff is dignified and	Behavior of staff is empathetic and courteous to patients and				
ME B2.4	respectful, while delivering the	visitors				
	services Religious and cultural	Check for special precaution is	1	PI	HIV, Leprosy , Abortion,	
	preferences of patients and	taken for maintaining privacy &			domestic Violence,	
ME B2.5	attendants are taken into consideration while delivering	confidentiality of cases having social stigma			Adolescence pregnancy	
	services	Social Sugilla	1	RR/SI		
Standard B3		The service provided at f	acility are afford	lable		
ME B3.2						
		Area of Concer	n Clanute			
		Area of Concer	n - C inputs			
Standard C1	The facility has adequate &	Safe infrastructure for deliver	y of assured ser	vices and meets	the prevalent norms	

Departments have adequate space as per patient load  Amenities for Patients & Staff are available as per load  Availability of Demarcated parking area  Availability of Dedicated Toilets for Staff  Availability of Drinking water facility  Availability of Fans/ Coolers in Waiting area  Availability of seating facility in waiting area  Departments have layout and  Availability of Seating facility in waiting area  Departments have layout and  Services available. Minimum 2000 sq ft covered area  DoB/SI  Services availabl			<u>,                                      </u>				
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Mile CL2  Mile C	ME C1 1	Departments have adequate	available & Workload			services available.	
Amenities for Patients & Staff are availability of Demanded availability of Demanded availability of Demanded in Staff are availability of Demande	IVIL CI.I	space as per patient load				Minimum 2000 sq ft	
Availability of Derinking water Availability of Prinking water Availability of Seating Lacility in Wating area  Departments have layout and demarcated areas as per functions  Dedicated Prince on 1 Dedicated Prince on 1 Dedicated Prince on 1 Dedicated Prince on 1 Dedicated Prince on 1 Dedicated Prince on 1 Dedicated Prince on 1 Dedicated room for Conducting ANC and Immunization  Dedicated room for Conducting ANC and Immunization  Dedicated room for Laboratory Dedicated room for Conducting ANC and Immunization  Dedicated Prince on For Seneral Information of Prince on Information Dedicated Prince on For Seneral Information on Information  ME CLA  The facility has infrastructure for Information on Information  Availability of Internet Connection  Department on Information  No temporary connections and Information on Information  No temporary connections and Information Information  No temporary connections and Information Information  Department have a prince on Information Information  No temporary connections and Information Information  Department have a prince on Information Information Information  No temporary connections and Information Information Information Information  All electrical panels are covered and has restricted access  Information Information  All electrical panels are covered and has restricted access  Information Information  All electrical panels are covered and has restricted access  Information Information  All electrical panels are covered and has restricted access  Information Informat				1	OB/SI	covered area	
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MEC.1.3 demarcated areas as per functions  Dedicated OPD room  Dedicated Room for Examination/NUCD Insertion  Dedicated Prosting room / I OB/SI  Dedicated room for conducting ANC and immunization  Dedicated room for conducting ANC and immunization  ANC and immunization  Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated room for Laboratory Dedicated Pharmacy with demarcated dispensing counter 1 OB/SI  MEC.1.4 In facility has infrastructure for Internated dispensing counter Internated and extracted dispension connection Internated and extracted dispension connection Internated and extracted dispension connection Internated and extracted dispension connection Internated and extracted dispension connection Internated and extracted and laboratory Internated and extracted and laboratory and labo			waiting area	1	OB/SI		
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Floors are non slippery and even 1 OB  The facility ensures fire safety measures including fire fighting equipment critical areas  1 OB  There is system to track the expiry dates and periodic				4	O.D.		
The facility ensures fire safety measures including fire fighting equipment  The facility ensures fire safety measures including fire fighting equipment  There is system to track the expiry dates and periodic			Dispensaries Building	1	OR		
The facility ensures fire safety measures including fire fighting equipment  The facility ensures fire safety measures including fire fighting equipment  There is system to track the expiry dates and periodic			Slagge and man alternative and	4	65		
ME C1.7 measures including fire fighting equipment critical areas  1 OB  There is system to track the expiry dates and periodic		The feetile consum C C		1	OR		
equipment 1 OB  There is system to track the expiry dates and periodic	NAT 04 -						
There is system to track the expiry dates and periodic	ME C1.7		critical areas				
expiry dates and periodic		equipment		1	OB	-	
refilling of the extinguishers   1   SI/RR							
			retilling of the extinguishers	1	SI/RR		

		I				
		Periodic Training is provided for				
		using fire extinguishers	1	SI/RR		
		Staff is skilled to operate fire	1	31/ NN		
		extinguishers	1	SI/RR		
		Periodic mock drills for fire		•		
		safety are organized at the				
		Dispensaries	1	SI/RR		
	The facility has adequate qual	ified and trained staff, require	ed for providing t	he assured ser	vices to the current case	
Standard C2		load				
	The facility has adequate medical					
ME C2.1	officers as per service provision	Availability of regular Medical				
	and work load	Officer	1	SI/RR	At least one	
	The facility has adequate nursing					
ME C2.2	staff/Paramedics as per service					
	provision and work load	Availability of Staff Nurses	1	SI/RR	At least 3	
		, , , , , , , , , , , , , , , , , , , ,				
					As per ESIC norms(ANMs	
					in future will be replaced	
		Availability of ANMs	1	SI/RR	by Nursing officer)	
		Availability of Lab Technician	1	SI/RR	At least 1	
		A variability of Lab recifficial	1	31/1/1/	AC ACUSE I	
ME C2.3						
	The Staff has been imparted	Training of staff on infection				
ME C2.4	necessary trainings/skill set to enable them to meet their roles	control				
	& responsibilities		1	RR/SI		
		Training of staff on Bio Medical		, -		
		Waste Management	1	RR/SI		
		Training on Basic Life Support				
		(BLS)	1	RR/SI		
Standard C3	The facili	ty provides drugs and consum	<mark>ables required fo</mark>	or assured servi	ces.	
	The Facility has availability of					
ME C3.2	adequate consumables at point	Availability of Stationary items	1	CI/DD		
	of use	as per requirement	1	SI/RR		
Standard C4	The facility	has equipment & instruments	required for ass	sured list of ser	vices.	
	Availability of patient furniture					
ME C4.5	and fixtures as per load and					
	service provision	Availability of office furniture	1	OB/SI	1	
	Availability of functional		1		Buckets for mopping,	
ME C4.6	equipment and instruments for				Mops, Brooms etc.	
	support & outreach services	Equipment for Cleaning		OB/SI		
				, -		
		Avec of Community	Support Com.			
		Area of Concern - D	support Service	.62		
	The facility has establish	ed facility management progra	amme for mainte	enance & unker	en of equipment &	
Standard D1		tructure to provide safe & secu				
		Diamenanias automatica u	4		U.D. door for any 1	
	The facility has system for	Dispensaries ensures that all	1		ILR, deep freezer , Lab	
ME D1.1	The facility has system for maintenance of critical Equipment	equipments are covered under  AMC including preventive			equipments etc.	
		maintenance		RR/SI		
		Records of equipments	1	•		
		maintenance are available with				
		facility		RR/SI		

			I			
ME D1.3	Patient care areas are clean and	PHC has a system for safe	1			
	hygienic	disposal of general waste		OB/RR/SI		
		Schedule for cleaning is defined	1			
		and implemented		OB/RR/SI		
		Housekeeping checklist used for	1			
		monitoring cleaning activities				
				OB/RR/SI		
	Facility infrastructure is	Check for there is no seepage,	1			
ME D1.4	adequately maintained	Cracks, chipping of plaster				
	adequately maintained			ОВ		
		Dispensaries has system for	1			
		periodic maintenance of				
		Building		SI		
	Facility, has noticed of some and of	No condemned/Junk material	1			
ME D1.5	Facility has policy of removal of	in the corridors, storage,				
	condemned junk material	administrative area		ОВ		
		Periodic removal of junk	1			
		material done at the				
		Dispensaries		RR/SI		
				,		
	Facility maintains both the	Interior of Patient care areas	1			
ME D1.6	internal and open area of the	are plastered & painted				
	facility.	and process of an parmiton		ОВ		
		Dispensaries Building is	1			
		painted/whitewashed in	_			
		uniform color		ОВ		
		uniform color		0.5		
	The facility provides adequate		1			
ME D1.7	illumination level at patient care	Adequate illumination in	_			
IVIE D1.7	areas	circulation area		OB/SI		
	areas	Adequate illumination in	1	06/31		
		I	1			
		patient care and procedure		OP/CI		
	The feeilibe grounder Class and	areas	1	OB/SI		
	The facility provides Clean and		1			
ME D1.8	adequate linen as per	Check linen provided at clinics		0.0		
	requirement	and procedure area is clean	_	ОВ		
		There is defined schedule for	1	<u> </u>		
		change of linen	_	SI		
		Dispensaries has in-house	1			
		/Outsourced arrangement of		2. /==		
		washing the linen		SI/RR		
		Availability of 24x7 running and	1		Check for source of water	
		potable water			(near by water body,	
	The facility has adequate				ground water, municipal	
	arrangement for storage and				supply etc.) Check for the	
ME D1.9	supply of potable water in all				measure taken to ensure	
	functional areas				availability of water in	
	- acional areas				areas having water	
					scarcity	
				OB/SI		
		Dispensaries has adequate	1	_		7
		water storage facility as per				
		requirements		OB/SI	<u> </u>	
		All water tanks are kept tightly	1			
		closed		ОВ		
		Periodic cleaning of water tanks	1			
		carried out		SI/RR	<u>                                     </u>	
		Chlorination of water is done as	1			
		per requirement		SI/RR		
						-

		RO/ Filters are available for	1			
		potable drinking water Availability of Generator/UPS	1	ОВ		
ME D1.10	The facility ensures adequate power backup	for Power Backup				
	'			OB		
Standard D3	Facility has defined & e	stablished procedure for Com	munity Participa	tion for providing	g assured services	
ME D3.1						
ME D3.2						
Standard D4	Facilit	y has defined procedure for Go	overnance & wo	rk Management		
ME D4.1						
ME D4.2						
ME D4.3						
ME D4.4	The facility has a established procedure for duty roster and deputation of staff	Duty roster of all staff is prepared, updated and communicated	1	RR/SI		
ME D4.5	The facility ensures the adherence to dress code as	All clinical and support staff adhere to their respective dress	1	OB		
	mandated by the department	code	1	OB OB		
		I Cards and Name plates have been provided to all the staff	1	OB/SI		
		Seem provided to all tile starr	1	05/31		
ME D4.6						
ME D4.7	The facility ensures its processes are in compliance with statutory and legal requirement	No Smoking sign is displayed at the prominent places in Dispensaries	1	ОВ		
		Any positive report of notifiable disease is intimated to designated authorities				
	The facility has a defined		1	SI/RR		
ME D4.8	The facility has a defined protocol for the issue of medical certificates	Defined formats for issuing Medical Certificate is available	1	SI/RR		

		I		П	T	T
		A copy of issued Medical				
		Certificate is kept for				
		records(available online)	1	RR		
		Medical Certificate are issued				
		on the day of request	1	RR		
Chandend DF	Facility has aven	adura for collecting C Deportin	a of the bealth i	in cilitur valatad i	-f	
Standard D5	Facility has proc	edure for collecting & Reporting	ig of the health i	racility related i	ntormation	
	English Bounds date for Markhau	Facility reports data regarding	1		Check for all antenatal	
ME DE 44	Facility Reports data for Mother	Antenatal care for availed			cases registered at	
ME D5.14	and Child Tracking System as per	services			Dispensaries are entered	
	Guidelines			RR/SI	in MCTS	
		Facility reports data about child	1		Check all child	
		immunization in MCTS			immunization cases are	
				RR/SI	entered in MCTS	
ME DE 15	Facility Reports data for HMIS	HMIS data is reported on	1			
ME D5.15	System as per Guidelines	monthly basis		RR/SI		
		All data elements of HMIS are	1		Check HMIS report for	
		reported			filling up of all data	
				RR/SI	elements	
		Area of Concern - E	Clinical Service	· · · · · · · · · · · · · · · · · · ·		
		Ju or oblicerii - E	Jan Jer Vie			
	Facility has defined precedu	re for primary management a	nd continuity of	care with anny	onriate maintenance of	
Standard E2	racinty has defined procedu	record	-	care with appro	opriate maintenance or	
		record	us			
		lo:		I	T	
		Dispensaries maintains list of				
	The facility provides appropriate	higher centers/Secondary &				
	referral linkages for transfer to	Tertiary ESI hospitals where				
ME E2.2	other/higher facilities to assure	patient can be referred with				
	the continuity of care.	their contact no.				
	the continuity of care.					
			1	SI/RR		
		Dispensaries has designated				
	The facility ensures safe and	and secure place to keep				
ME E2.9	adequate storage and retrieval	Records (presently online				
	of medical records	records) including Patient				
		Records	1	SI/RR		
				,		
		Dispensaries has policy for				
		retention period for different				
		kinds of records	1	SI/RR		
		Dispensaries has policy for safe		· ·		
		disposal of records	1	SI/RR		
		· ·				
		Area of Concern - F	Infection Cont	rol		
Standard F2	Facility ensures av	ailability of Personal Protective	e equipment & f	ollows standar	d precautions.	
	Facility ensures adequate	Immunization of Staff is done		1		
ME F2.1	personal protection equipment					
WIL TZ.I	as per requirements					
	as per requirements		1	SI/RR	T.T, Hep-B etc.	
ME F2.2	Staff adheres to standard	Medical Check-up staff is done		<u> </u>		
WIL TZ.Z	personal protection practices	at periodic Intervals	1	SI/RR		
	Facility has defined & es	tablish procedure for segregati	on, collection, tr	eatment & disc	osal of Bio medical	
Standard F4	. acinty has defined a co	&hazardou			or Die medical	
				1	T	
	The facility ensures	Facility as arrangement for	2			
ME F4.3	transportation and disposal of	disposal of infectious waste		1		
	waste as per guidelines	through common treatment		a		
	, 5	Facility		SI/RR		
		Demarcated area for secure	1	1		
		storage of BMW before disposal				
				OB		<u> </u>

		Check for any sign of burning of	1			
		waste in Dispensaries premises				
		maste in Dispensaries premises		O.D.		
				OB		
		Log book /Record of waste	1			
		generated is maintained		SI/RR		
		Display of Bio Hazard sign at the	1	,		
			1			
		point of storage and generation				
				OB		
		Mutilation of Plastic waste	1			
		before disposal		ОВ		
		before disposar		OB		
			1			
		Waste is not stored for more				
		than 48 hours in the facility		RR/SI		
		,		, -		
		Area of Concern - G Q	iality Manage	ment		
		7.1.02.01.001100111.00.00	aunty manage			
Standard G.1	Facility has es	stablished quality Assurance P	rogram as per sta	ate/National guid	delines	
	-					
ME G1.1						
		<u> </u>				
ME G1.2						
					<u></u>	
ME G1.3						
ME G1.4			<del></del>			
ME G1.5						
ME G1.6						
ME G1.7						
145 64 0						
ME G1.8						
ME G1.9						
ME G1.10						
IVIE G1.10						
Standard G.2	Facility	has established system for Pa	tients and emplo	vees satisfaction	1	
			and the complete	,,		
		Patient feedback form are	1			
ME G2.1	Patient Satisfaction surveys are	available in local language				
IVIL UZ.I	conducted at periodic intervals	available iii local laliguage		DD /CI		
				RR/SI		
			1	RR		
				1		·
	Employee satisfaction Surveys	Patient feedback is analyzed on	1		Overall department	
ME CO O			_			
ME G2.2	are conducted at periodic	monthly basis			wise/attribute wise score	
	intervals				are calculated	
ME G2.3				<u></u>		
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Standard G3	Facility has established ,docun	nented &implemented standa	rd operating pro	cedure system f	or its all key processes.	
ME G3.1						
ME G3.2						
ME G3.3						
ME G3.4						

		Area of Concern	H: Outcomes			
Standard H1	The facility measures its productivity, efficiency, clinical care & service Quality indicators					
ME H1.1						
ME H1.3						
ME H1.4						
Standard H2	dard H2 Facility endeavors to improve its performance to meet bench marks					
ME H2.2						

General Admin Score					
	General	0.0			
	Admin Score	0.0			
	Area of Conce	rn wise Score			
Α	Service Provision	0.0			
В	Patient Rights	0.0			
С	Inputs	0.0			
D	Support Services	0.0			
E	Clinical Services	0.0			
F	Infection Control	0.0			
G	Quality Manangement	0.0			
Н	Outcome	0.0			