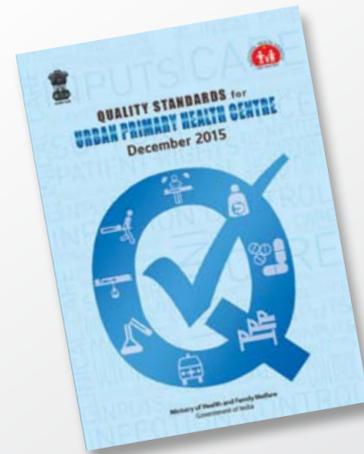
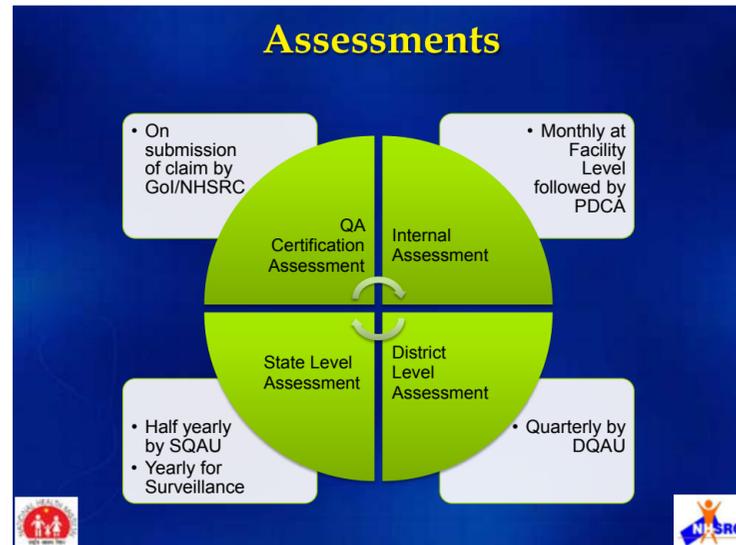


Questionnaire for Patients at U-PHCs							
Sl. No.	Attributes	Poor (1)	Fair (2)	Good (3)	V. Good (4)	Excellent (5)	No comments
7	Ease of availability investigation facilities						
8	Availability of prescribed drugs at the dispensary						
9	Your overall satisfaction during the visit to the UPHC						
10	Would you like to recommend this Health Centre to your Relatives & Friends	Never	Emergency only	Sometimes	Mostly	Always	

- ❖ The Patient Satisfaction survey of OPD patients should be evenly distributed, a cluster of patients is taken daily, while indoor patients would be administered the survey questionnaire at time of discharge or referral.
- ❖ On monthly basis, findings of satisfaction survey are analysed and compared with the previous month. The two lowest performing attributes are also identified and concerted actions are taken to address patients' concerns.

Common Gaps Observed and Action Thereon

Patient Amenities	<ul style="list-style-type: none"> ❖ Renovation of one toilet with easy access. ❖ Privacy in consultation room & ANC clinic, seating arrangement etc.
Signage's	<ul style="list-style-type: none"> ❖ Directional Indoor & Outdoor Signages. ❖ Display of list of available services & drugs including Citizen's Charter.
Infection Control & BMW Management	<ul style="list-style-type: none"> ❖ Color coded bins for segregation of waste as per BMW Rules, 2016. ❖ Infection Control Practices like use of Antiseptic soap, disposable gloves, hypochlorite solution etc.
Stationary, Printing, Work Instructions & (SOPs)	<ul style="list-style-type: none"> ❖ Printing and Display of work instructions in local language & Pictorial form ❖ Protocol for waste segregation
Grievance redressal	<ul style="list-style-type: none"> ❖ Installation of complaint box for grievance redressal and whom to contact is displayed.
Infrastructure	<ul style="list-style-type: none"> ❖ Equipment & instruments required in UPHC ❖ Ramp and hand rails at the entrance of the UPHC building for easy access.
Safety	<ul style="list-style-type: none"> ❖ Installation of fire extinguishers – 3 in number. ❖ Signage for fire escape route.
Validation	<ul style="list-style-type: none"> ❖ External Quality Assurance System (EQAS) of Lab test.



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Ministry of Health & Family Welfare, Government of India



NATIONAL URBAN HEALTH MISSION (NUHM)

National Quality Assurance Programme (NQAP)

Quality of health care is performance of health facility according to pre-defined criteria. In a health facility it is:

- ❖ Patient Centric
- ❖ Equitable
- ❖ Safe
- ❖ Effective
- ❖ Efficient

National Quality Assurance Programme under NUHM:

- ❖ Improves Patients' Outcome
- ❖ Enhances Patients' Satisfaction
- ❖ Supports efficient utilisation of resources
- ❖ Ensures effective and Safe Clinical Care

Baseline assessment of 50% of U-PHCs and U-CHCs using NUHM approved tools to be undertaken in the current FY 2016-17.

Concerns of Patients in a Health Facility

Cure	Care
1. Correct diagnosis & speedy recovery	1. Feeling of being 'welcomed' & courteous behaviour
2. No new disease	2. Minimal Waiting Time
3. No harmful procedure	3. Personalised Approach
4. Fast relief in symptoms	4. Clean toilets & environment
5. Low cost of treatment	5. Getting food to his/her liking

Process of QA Implementation (At the State, District, Facility level)



Actions by the States/ULBs/ Districts/Facilities

Step 1: NUHM QA Institutional Framework

- ❖ **State Level** – NUHM Nodal Officer inducted in the State Quality Assurance Committee (SQAC).
- ❖ **ULBs** – Nodal officer NUHM of 7 metro cities inducted into the State Quality Assurance Committee.
- ❖ **District** – District's NUHM Nodal Officer is inducted into District Quality Assurance Committee (DQAC).
- ❖ Bi annual meetings of SQAC to be held regularly.

Step 2: Following the National Quality Assurance Standards for UPHCs and UCHCs 2015

– A set of 35 Quality Standards have been defined for a UPHC, and 65 Quality Standards for a UCHC. The checklists are to be used for assessment of health facility and performance review. However, if the states desire to add or change some of the 35 check point in identified standards it may do so in consultation with the QI Division of NHSRC.

Step 3: Training on Quality Assurance

– A two days training module has been designed for training of the service provider and the assessors. NHSRC would identify and depute resources for the training programme and the trainings would be arranged by the States/ULBs.

Step 4: Creating pool of Assessors

– The Quality Assurance Programme under NUHM envisages internal & external assessments of Urban Health Facilities periodically. The states should create a pool of the qualified QA Assessors for the Urban Health Facilities. SQAC should also identify senior and experienced professionals, who may function as External Assessors, after they have been trained by NHSRC. They would carry out assessment of the health facilities for the State level QA Certification. For the National Level Certification of Health Facilities, NHSRC maintains a pool of the NQAS Assessors.

Step 5: Baseline Assessment of Selected Urban Health Facilities

– Baseline assessment of 50% of U-PHCs

and U-CHCs using NUHM approved tools to be undertaken in the current FY 2016-17. Assessment of remaining Urban Health Facilities should be undertaken in the FY 2017-18. Score of the facilities should be discussed in SQAC/DQAC meeting and actions as planned, are executed and monitored. Assessment reports may be shared with QI Division NHSRC.

Step 6: Implementation of Quality Assurance at Facility Level

– For improving clinical and support processes, every facility should constitute a quality team, for rapid improvement, periodic reviews, internal assessment and prescription audits, drafting and implementation of Standard Operating Procedures (SOPs), calibration of equipment, external quality assurance programme for laboratory, etc.

Step 7: Organising Improvement Activities at Health Facilities

– After identifying the gaps, concerted efforts are required for improving the health facilities. Some of the suggested activities are Directional Signage, Citizen's Charter, all-time availability of Essential Drugs, Wheel-chairs, Stretchers, Fire Audit, Drinking Water & Chairs in waiting area, Curtains, Patients' Calling System, Ramps etc.

Step 8: Institutionalisation of Measurement of Patients' Satisfaction

– Patient satisfaction is a key determinant of Quality of Care (QoC). It is important that satisfaction level of the patients is measured objectively.

Step 9: Selection of 'Priority Facilities', Re-assessment & QA Certification

– As a norm, the States are expected to aim that at least 20% of UPHCs are certified for quality by the State and 10% National QA certified in FY 2016-17.

Step 10: Performance Measurement through Key Performance Indicators

– Key Performance indicators has been defined for Urban PHCs. These 16 key indicators measures Productivity, Efficiency, Clinical Quality and Service quality of service. These KPI's should be reported on Monthly basis and discussed.

Measuring Patients' Satisfaction

WHY?

- ❖ Provides inputs regarding patients' overall experience at the Urban Health Facility objectively.
- ❖ Helps in identifying specific attributes, which are either increasing or decreasing satisfaction levels.
- ❖ Acts as a survey tool for 'action planning'.
- ❖ Helps in generating bench-mark score for U-PHCs & U-CHCs.
- ❖ Acts as a monitoring tool for performance.
- ❖ Acts as a tool for comparing two health facilities of similar type.

WHO?

All patients for whom a registration number have been generated, on their first visit and subsequent visit form part of the total population, from which samples are drawn. This also includes patients kept under observation in the U-PHCs.

HOW MANY ? (Sample Size Calculator)

Questionnaire for Patients at U PHCs							
Sl. No.	Attributes	Poor (1)	Fair (2)	Good (3)	V Good (4)	Excellent (5)	Comments
1	Availability of sufficient information in Hospital (Direction, Location & Department signage etc.)						
2	Waiting time at registration Counter						
3	Behavior & Attitude of staff of UPHC						
4	Cleanliness of the OPD, toilets and overall facility						
5	Attitude and communication of doctors						
6	Time spent on Consultation, examination and counseling						
7	Availability of laboratory test within UPHC						
8	Promptness at Pharmacy counter						
9	Availability of prescribed drugs at UPHC						
10	Overall impression of the facility						

Questionnaire for Patients at U-PHCs							
Sl. No.	Attributes	Poor (1)	Fair (2)	Good (3)	V. Good (4)	Excellent (5)	No comments
1	Directional Signages and availability of sufficient information in U-PHC						
2	Time spent in getting Treatment (From Registration to collection of drugs)	> 2 hrs	1.5 hrs to 2 hrs	> 1 hr to 1.5 hrs	30 mts to 1 hr	< 30 minutes	
3	Behaviour and attitude of Health Centre Staff						
4	Amenities in waiting area (chairs, fans, drinking water and clean toilets)						
5	Attitude & communication by Doctors						