

Disbursement-Linked Indicators	Definition and Description of Achievement	Information Source and Frequency	Verification Agency and Procedure ¹	Verification Time Frame
<p>DLI 7: Number of urban HWCs capturing patient satisfaction of their services increased</p>	<p>Definition: Urban HWCs include UHCs (lower level) and UPHC-HWCs. The percentage operational urban HWCs across the 13 states implemented measures to record patient satisfaction by any mechanism as adopted by respective states, including but not limited to (i) paper-based survey form, (ii) QR codes, or (iii) Mera Aspataal feedback can be recorded on the HWC Portal, via short message service, using the mobile app, or through outbound calls.</p> <p>The percentage will be obtained by</p> $\left(\frac{\text{number of urban HWCs capturing patient satisfaction data}}{\text{the number of operational urban HWCs in the year}} \right) * 100$ <p>March 2021: 1. Circular issued to states to establish patient feedback systems at HWCs. 2. Technical assistance to states to identify ways to record patient satisfaction and monitor it at regular intervals.</p>	<p>For 2021, MOHFW circular, once For subsequent years: Mera Aspataal or any other mechanism adopted by states</p>	<p>For FY2021 result:</p> <p>By March 2021, MOHFW will provide a copy of the circular issued to states to establish patient feedback systems at HWCs and evidence of assistance provided to states in establishing such systems. IVA will confirm the achievement or non-achievement of the target within 1 month from receipt of the circular and guidance note.</p> <p>For DLIs from FY2022 to FY2026:</p> <ol style="list-style-type: none"> MOHFW's urban health division will obtain quarterly data on number of urban HWCs implemented measures to record patient satisfaction from Mera Aspataal or any other mechanism adopted by states from MOHFW's statistics division/NHSRC. The report will facilitate regular assessment of performance toward this indicator. By 31 March each year from 	<p>For FY2021 results, by May 2021</p> <p>For the rest of the targets, by July every year</p>

	<p>March 2022: At least 20% urban HWCs recordpatient satisfaction.</p> <p>March 2023: At least 30% urban HWCs recordpatient satisfaction.</p> <p>March 2024: At least 40% urban HWCs recordpatient satisfaction.</p> <p>March 2025: At least 50% urban HWCs recordpatient satisfaction.</p> <p>March 2026: At least 60% urban HWCs recordpatient satisfaction.</p>		<p>FY2022 to FY2026, NHSRC's Quality Division will prepare data from Mera Aspataal or any other mechanism adopted by states as of31 March each year, or on date when targets are met if not met by 31 March.</p> <p>3. MOHFW will provide IVA with access to data from Mera Aspataalor other mechanisms used by states by 15 May every year to independently verify the data by sample-based checking.</p> <p>4. IVA will submit the verification report to MOHFW and ADB, with summarized data and verification results, and confirmation of achievement or non achievement of the target within 1 month from receipt of access to Mera Aspataal or patient satisfaction data or commencement of verification work as per MOHFW instruction.</p>	
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Disbursement-Linked Indicators	Definition and Description of Achievement	Information Source and Frequency	Verification Agency and Procedure ¹	Verification Time Frame
DLI 9 Quality assurance of urban primary health care facilities improved	<p>Prior results: Online training for self-assessment made accessible to UPHC-HWCs.</p> <p>Definition: Increase in states having at least 90% of UPHC-HWCs that completed self- and peer assessments under Kayakalp.b</p> <p><i>Note: Kayakalp has three levels of assessment:</i> <i>Level 1- Internal assessment is to be carried out every quarter by facility's own staff where they should assess and score their facility.</i> <i>Level 2-- Peer assessment is conducted for facilities having an average score of 70% or more on internal assessment. The state, municipality, or union territories will ensure that peer assessment is carried out by staff from another facility within the district, zone, or region at least once in a year for all the facilities. The award nomination committee would collate and analyze the peer assessment score of all health care facilities and recommend the names of all facilities scoring 70% or more.</i> <i>Level 3-- For formal recognition and</i></p>	<p>For prior results, MOHFW once</p> <p>Quality Improvement and Quality Assurance Microsite updated by NHSRC, annual</p>	<p>Upon loan effectiveness, MOHFW will provide (i) baseline for the indicator and would confirm the source of the data; (ii) a link for online training for self- assessment or the e-modules accessible to UPHC-HWCs will be submitted to ADB. An ADB-appointed expert will verify the baseline and dissemination of e-learning mechanisms and confirm the achievement or non-achievement of the target within one month from receipt of the evidence.</p> <p>By March 2021, MOHFW will submit the supplementary guidelines to ADB and IVA. IVA will confirm the achievement or no achievement of the target within 1 month from receipt of the evidence.</p> <p>For DLIs from FY2022 to FY2026:</p> <p>1. MOHFW's Urban Health Division will obtain quarterly data on Kayakalp assessments from</p>	<p>For prior results, within 1 month from receipt of evidence</p> <p>For FY2021 result, within 1 month from</p>

	<p><i>award, an external assessment would be carried out in the nominated facilities by teams of external assessors to validate the scores generated through the peer.</i></p> <p>March 2021: Supplementary guidelines disseminated for strengthened infectious disease control practices in light of COVID-19.</p> <p>March 2022: At least six states having at least 90% of UPHC-HWCs that completed self- and peer assessments under Kayakalp..</p> <p>March 2023: At least seven states having at least 90% of UPHC-HWCs that completed self- and peer assessments under Kayakalp..</p> <p>March 2024: At least eight states having at least 90% of UPHC-HWCs that completed self- and peer assessments under Kayakalp..</p> <p>March 2025: At least nine states having at least 90% of UPHC-HWCs that completed self- and peer assessments under Kayakalp..</p> <p>March 2026: At least 10 states having at least 90% of UPHC-HWCs that completed self- and peer assessments under Kayakalp..</p>		<p>MOHFW's Statistics Division or NHSRC. The report will facilitate regular assessment of performance toward this indicator.</p> <p>2. MOHFW Statistics Division or NHSRC will prepare QI microsite data as of 31 March each year, or on date when targets are met if not met by 31 March.</p> <p>3. By 30 April each year from FY2022 to FY2026, MOHFW will submit to ADB and IVA a report with list of states that have completed Kayakalp self- and peer assessments in at least 90% of UPHC-HWCs.</p> <p>4. MOHFW will provide IVA with QI microsite access by 15 May every year to independently verify the data by sample-based checking.</p> <p>5. IVA will submit the verification report to MOHFW and ADB with summarized data and verification results, and confirmation of achievement or no achievement of the target within 1 month from receipt of QI microsite access or commencement of verification work as per MOHFW instruction.</p>	
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