



सत्यमेव जयते



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
निर्माण भवन, नई दिल्ली-110011

Government of India  
Ministry of Health and Family Welfare  
Nirman Bhawan, New Delhi-110011

D.O. No.NHSRC/CU/23-24/Assessment of Health Facilities

Dated: 8<sup>th</sup> May, 2024

*Respected Sir / Madam,*

Please refer to D.O. no. Z-18015/13/2023-NHM dated February 3, 2024, the Ministry of Health and Family Welfare has envisioned a target to achieve NQAS certification of all public healthcare facilities by December 2026. Since the major proportion of public health facilities is Ayushman Aarogya Mandir – Sub Centre (AAM-SCs); hence, to expedite progress towards this goal, it is proposed to undertake NQAS certification of AAM-SCs in a virtual mode.

Leveraging the experience of virtual assessments gained during the COVID-19 pandemic, we aim to implement a similar virtual assessment model for the certification of AAM-SCs.

It is important to note that the virtual quality certification does not intend to replace the existing certification process. Rather, it will complement and support the ongoing efforts of the States/Union Territories (UTs) in achieving targets for NQAS certification. Facilities facing challenges with reliable internet connectivity or lacking appropriate hardware/software for virtual assessments may opt for the physical assessment process.

Applications for virtual assessments of Ayushman Arogya Mandir – Sub Centres may be submitted through SaQsham, from June 1, 2024. 10% of the facilities applying for virtual assessment will undergo onsite assessment in physical mode, based on NHSRC discretion.

Assessor's Honorarium shall be reimbursed by state at the rate of Rs 3000/ day for virtual assessment of the facility.

The protocol for virtual assessment of Ayushman Arogya Mandir – Sub Centres is attached as **Annexure I**.

*With regards.*

Yours Sincerely



(Aradhana Patnaik)

To

Additional Chief Secretary/Principal Secretary/Secretary (H&FW) – All States / UTs

Copy to:

1. Mission Director, National Health Mission - All States / UTs
2. Director/DS NHM I/II/III/IV
3. ED NHSRC
4. PPS to AS&MD

**Protocol for Virtual Assessment**

Protocol for the NQAS Certification of the Ayushman Aarogya Mandir – Sub Centre (AAM-SC), is enumerated below:

1. **Eligibility for NQAS Certification** - All state level certified health facilities as per established State certification norms are eligible for the virtual NQAS certification of AAM – SC.
2. **Mode to apply for national certification** – AAM – SC to apply through SaQsham portal.
3. **Application for national level Certification:** State Certified Health Facilities ready for Virtual Certification can apply for the National level virtual certification through State Quality Assurance Committee/ Units (SQAC/ SQAU). The SQAU shall validate the scores before applying for the national level certification.
4. **Verification of documents** - All the documents that have been requested from the health facility would undergo two level of verification. The initial verification in terms of adequacy will be done by the designated Consultant, QPS Division NHSRC. Thereafter the set of documents will be forwarded to the selected assessors. List of documents is attached as Annexure – I.
5. **Scheduling of assessment** –Upon clearance of the documents the dates of the assessments shall be given to the facility to undergo the national level assessment. On mutually agreed the assessment dates are finalized, within 30 days of complete submission of the documents.
6. **Selection and deputation of assessors** – From the pool of empanelled assessors, two assessors shall be deputed for one day for each assessment. Assessors will be shortlisted without any possibility of conflict of interest.
7. **Communication of Assessment Schedule:** The assessment schedule is communicated to the assessors and the state, ensuring all parties involved are aware of the timing and logistics of the assessment.
8. **Desktop Verification of documents by Assessors:** Upon finalization of the dates the documents are sent the selected assessors. The assessors are expected to review

the documents for factual accuracy and completeness as per the scope of the facility applied for assessment. If required, assessors may ask additional documents also, under the ambit of NQAS only to review and opine about the Quality Certification of the healthcare facility. It allows assessors to familiarize themselves with the facility's documentation before assessment.

9. **Virtual Tour:** On the allocated day of assessment, online calls are arranged with the facility administration and assessors with intimation to Certification Unit, for a virtual tour to visually inspect the facility as per the approved Virtual assessment tool and ask any pertinent questions. Data Security is of utmost importance while conducting the virtual tour, Standard Operating Procedure (SoP) for the same is attached as Annexure – II for compliance.
10. **Community Interactions:** Interaction with patients & relatives may be useful in getting information about quality of services and their experience at the facility. It should include feedback on quality of services, staff behaviour, waiting times, out of pocket expenditure incurred etc. Similarly, satisfaction of clients/individuals attending the VHND, meetings, PSG meetings etc. should be taken to measure their level of satisfaction. During virtual assessment, the facility will ensure that the members of VHSNCs/JAS/SHGs/NGOs/Ayushman Ambassadors/Patient beneficiary are available to interact with the assessors. Assessors may interact with these members pertaining to their awareness and engagement for health promotion and disease prevention activities.
11. **Feedback Collation:** Upon completion of Virtual tour, facility has to submit the feedback for each assessor through SaQsham to undertake continuous improvement of the assessment process based on stakeholder input.
12. **Timelines for report submission** – Upon completion of virtual tour with the facility, assessors are expected to submit within three (03) working days after the last day of assessment. The Assessment criteria along with the report format will be provided to the assessors.
13. **Compilation of Assessment Report:** The certification team compiles the assessment report, calculates the weighted average scores (Annexure - III), reviews the compliance towards the approved certification criteria and thereafter, drafts result and letter for the Ministry of Health and Family Welfare (MoHFW) to issue

virtual certification to the facility. If the facility fails to meet certification criteria, a letter from Advisor – QPS will be sent to the facility stating the reasons for the same.

**14. National certification criteria** for virtual assessment are mentioned below:

- a) Fully Certified, if the weighted average score is 70% or above.
- b) Conditional certified, if the weighted average score is from 60% to 69%.
- c) Deferred, if the weighted average score is below 60%.

**15. Validity of Certification** - This is a virtual certification, and the certification will be valid till the time physical assessment of the facility will be done or maximum for a period of three years. The facility that attains virtual certification will submit its surveillance report duly approved by SQAC to Certification Unit, NHSRC for two consecutive years. NHSRC may also undertake a physical verification of quality score in between by deputing a team of external assessors, as and when required.

**16. Assessors Honorarium** - Assessor's honorarium shall be reimbursed by the state for the undertaking virtual certification at the rate of Rs 3000/day/Assessor.

## **Annexure - I**

The following documents are required for virtual certification:

1. Last district-level assessment report verified by the state, not older than 6 months.
2. Last month Quality Team's minutes of the meeting
3. Work instructions (as per service package)
4. Quality Policy
5. Last 3 months record of Patient Satisfaction Survey with CAPA
6. Availability of a system for Biomedical Waste Management
7. Last 3 months record of Outcome Indicators\*
8. State notified Essential Medicine List\*
9. Last 3-months data from the drug stock register for drug availability as per the state's notified Essential Medicine List, signed by CHO or equivalent\*

*\*Additional documents requested from the facility as compared to physical assessment*

**Standard Operating Procedure for Data Security during Virtual Assessment**

This section covers processes and guidelines to be followed by the States, facility, staff and assessors involved in the management of virtual certification in an environment of minimal risk.

**Pre-assessment:**

- a. Use government approved virtual platform to schedule a virtual meeting.
- b. Avoid using Personal Meeting ID (PMI) to host meetings and create a random or randomly generated meeting number for each meeting: - PMI refers to unique meeting room like the cell phone number. Each time the person hosts a meeting, anyone with PMI can join even without the meeting URL. To avoid PMI being circulated online, it's best to use a randomly generated meeting ID for each virtual meeting. During set up a virtual meeting, uncheck "Use my Personal Meeting ID" to make sure invitees receive a unique link to the meeting and not PMI.
- c. Create links that require a password to join: - Always create link with a password for the meeting and share with the attendees and assessors from official email ID. Don't share the link and password through social media posts like Facebook, WhatsApp etc.
- d. Enable the "Waiting Room" feature: - The "Waiting Room" feature of the virtual meeting platform means no one can join the call unless the host manually admits them. It is the safeguard against unwanted guests.
- e. Pay attention to the "Join before host" setting: - While this setting is turned off by default, don't activate it to enable others to start the meeting without the host.
- f. Allow only signed-in users to join: - This feature means that only those who sign in to the meeting with the email address used to invite them can join the meeting. If someone tries to join using an alternate email or one that isn't already on the list, they'll see a pop-up window stating, "This meeting is for authorized attendees only."
- g. Disable unnecessary guest privileges: -Disable privileges like screen sharing, file transfers, and annotations. Users can still request these privileges with the host's approval. These features are mostly present in the "Share Screen" option under "Advanced Sharing Options."
- h. Lock virtual meetings once they're in session: - Some virtual platforms allow for meeting creators to lock their meetings once they're in session. To prevent unexpected attendees from joining a current session, lock the meeting. Host will be notified when

an attendee attempts to join and can easily connect all waiting attendees to the meeting by unlocking.

**During Virtual Assessment:**

- a. Only assessors, Certification Unit NHSRC and authorized persons from State/staff of public health facility / being assessed can join the assessment virtually using the official email ID and shared links.
- b. Avoid installing any sort of malicious software/unauthorized software in the computer /Laptop/Mobile etc.
- c. The virtual assessment should not be recorded by any attendees of the meeting except Certification Unit, NHSRC.
- d. All Documents/reports generated during the assessment should be kept confidential by all party, and it will not be shared with any third party.
- e. Any breach/non-compliance in this procedure/virtual assessment shall be considered as misconduct and NHSRC should be informed immediately.
- f. Mobiles should not be used by assessors for assessment.

**Post Assessment:**

- a. All the documents/information of public health facilities/contact details of assessors, received from Certification Unit, NHSRC, must be protected in terms of confidentiality, sensitivity and criticality.
- b. Disclosing any kind of information regarding State/facility assessed/staff at the public health facility /NQAS Assessors on any social media platforms should be avoided.
- c. Reports should be shared with the certification unit through SaQsham portal only.



**Annexure – III**

Criteria to calculate the weighted average scores is given below:

<b>Criteria</b>	<b>Scores</b>	<b>Weightage</b>	<b>Marks obtained</b>
State certification score of the facility	% of scores obtained during the state-level assessment	25%	
Virtual assessment score of the facility	% of scores obtained during the virtual assessment	40%	
Patient Satisfaction Score	% of Marks obtained	5%	
Service availability	% of Marks obtained in Area of Concern-A	10%	
Drugs availability	% of Marks obtained in the drug thematic area	10%	
Diagnostic availability	% of Marks obtained in the diagnostic thematic area	5%	
Outcome indicators	% of Marks obtained	5%	