Translating State's Feedback into Action

NQAS REVIEW MEETING 2025
State progress, challenges & Best practices

28th-29th May 2025

Workshops & Meetings – 2024-25

Workshops	Date	Stakeholders
Regional Workshop- Meghalaya	2nd – 3rd May 2024	MoHFW, NHSRC, State NHM team including State Quality Nodal Officers/ representatives
Regional Workshop- Jammu & Kashmir	16th- 17th May 2024	MoHFW, NHSRC, State NHM team including State Quality Nodal Officers/ representatives
Review of States for NQAS certification (Online)	4th – 8th July 2024	Director NHM –II, NHSRC and State Quality team
Regional Workshop- Vijaywada	15-16th July 2024	MoHFW, NHSRC, State NHM team including State Quality Nodal Officers/ representatives
Regional Workshop- Jodhpur	22nd-23rd August 2024	MoHFW, NHSRC, State NHM team including State Quality Nodal Officers/ representatives
State Review Meetings for NQAS (online)	9th – 16th Dec 2024	State Quality team & NHSRC

Key Initiatives exclusive for Primary care

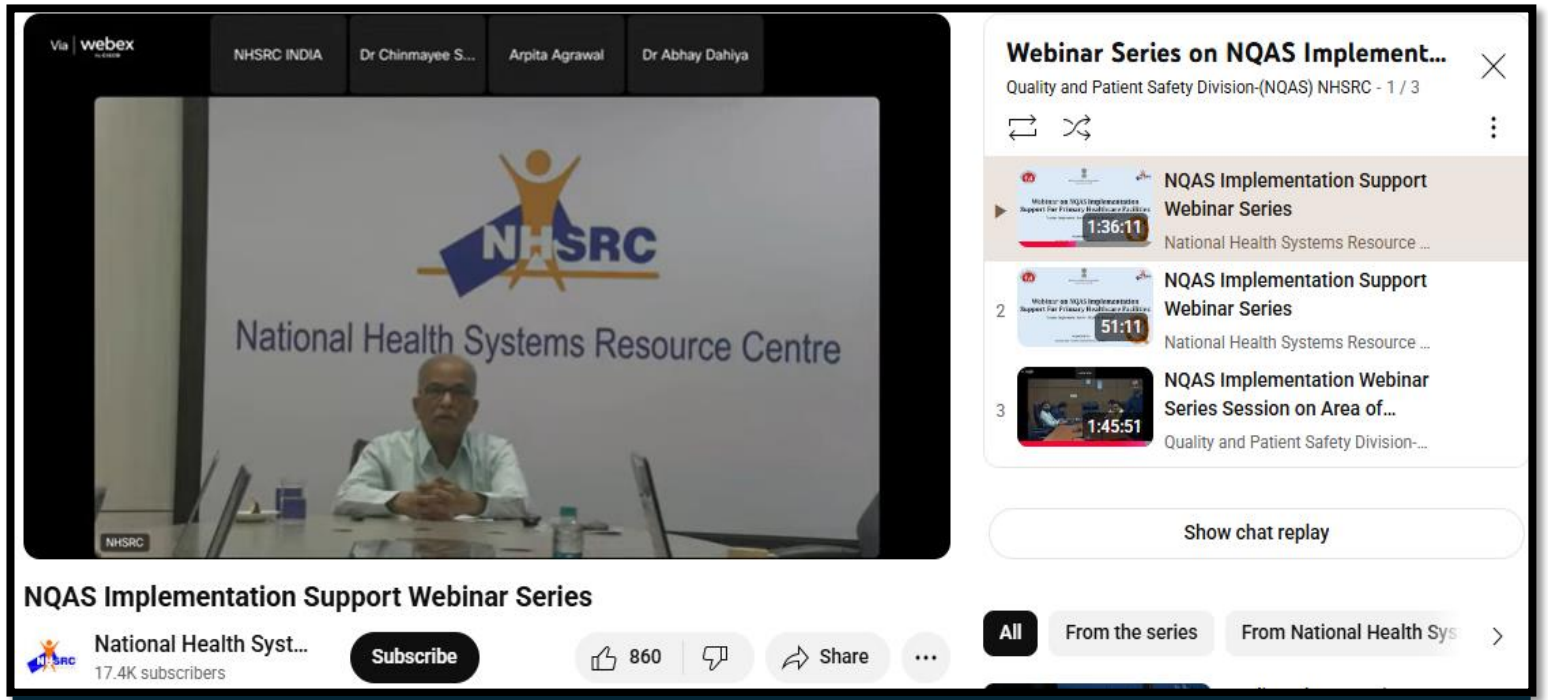
- ❑ Capacity building for NQAS with the representative of the NHSRC
  - Orientation workshop = **05**
  - Field Visit by State Consultants =**37**
  - External Assessor's training for **National mentors for CPHC**

- ❑ Creation of **Training Modules** for CHO (available in Hindi)

30 Modules are available at NHSRC QPS microsite

Online Capacity Building for AAM-SHCs

- Online sessions on one thematic area fortnightly- i.e. Every **2nd & 4th Thursday** of the month



Link : https://www.youtube.com/watch?v=VwJbaIO445A&list=PL_gAnx-mHR_DGfs6YIfRmd2-T9QtsSjh_&ab_channel=NationalHealthSystemsResourceCentre-NHSRC

Training

Request received from States/ UTs

1. Kerala
2. Manipur
3. Punjab
4. Lakshadweep
5. Odisha
6. Haryana
7. Gujarat
8. Rajasthan
9. Ladakh
10. DNH & DD
11. Uttar Pradesh
12. Jammu & Kashmir
13. Bihar
14. Chandigarh
15. Chhattisgarh
16. Maharashtra

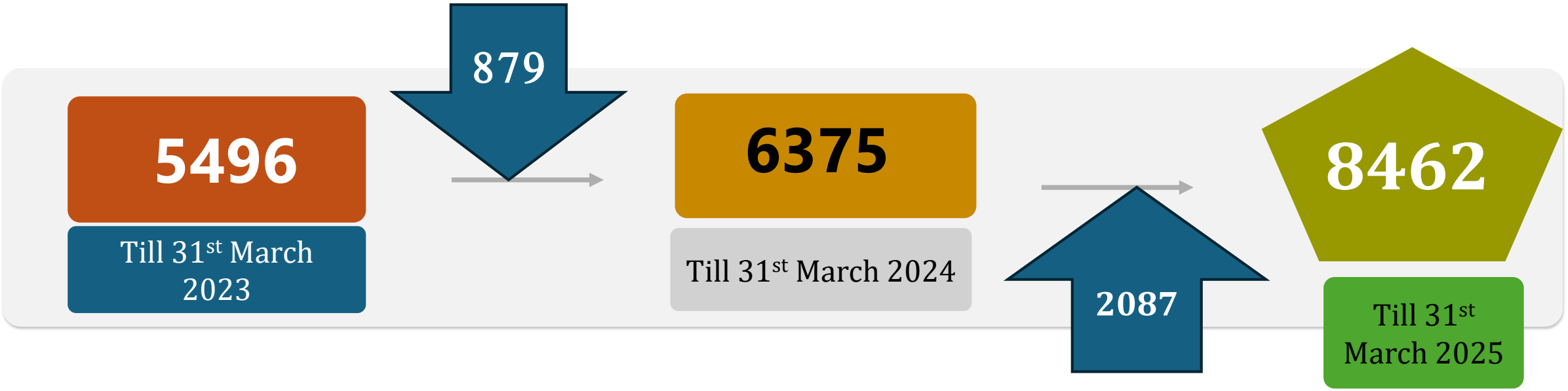
Training held/ Field Visit

25

1. Kerala-2
2. Manipur-0
3. Lakshadweep-0
4. Punjab- 2
5. Odisha- 3
6. Haryana-2
7. Gujarat-4
8. Rajasthan-1
9. Ladakh-1
10. DNH & DD- 1
11. Uttar Pradesh-2
12. Jammu & Kashmir-0
13. Bihar- 4
14. Chandigarh-0
15. Chhattisgarh-1
16. Maharashtra-2

* July 2024- April 2025

Increasing Assessors' Pool- Internal Assessors'



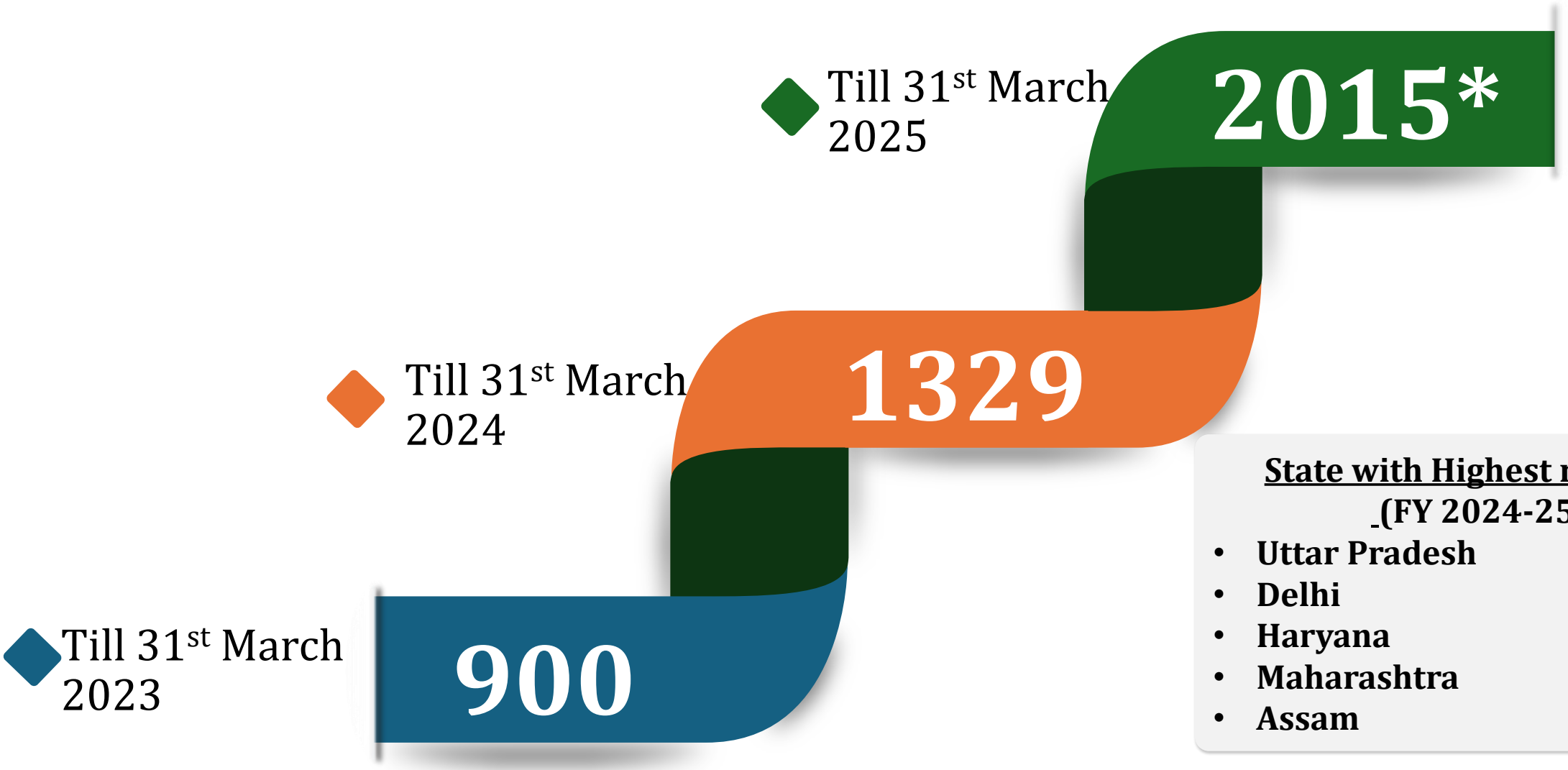
State with the Highest no. of IA (FY 2024-25)

- Gujarat
- Rajasthan
- Puducherry
- Chhattisgarh
- Uttar Pradesh

State with no new addition (FY 2024-25)

- Maharashtra
- Uttarakhand
- Delhi
- Andhra Pradesh

Increasing Assessors' Pool- External Assessors'



State with Highest no. of EA (FY 2024-25)

- **Uttar Pradesh**
- **Delhi**
- **Haryana**
- **Maharashtra**
- **Assam**

* EA- 1740 , Ayushman Assessor - 275

Meeting state specific requirements

- Customization of the checklist incorporating State Specific requirements-

66

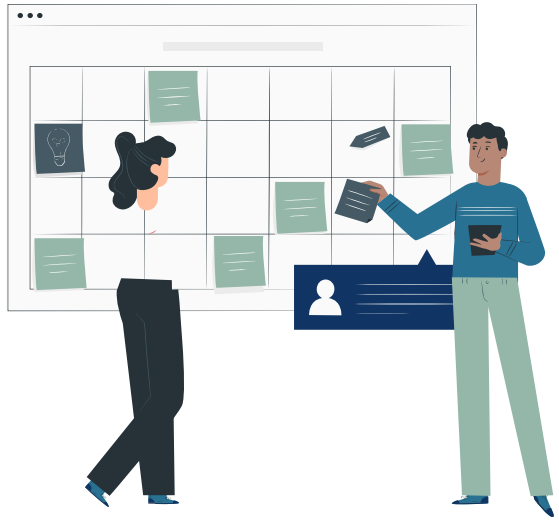
Customization Request

47

Customization Done

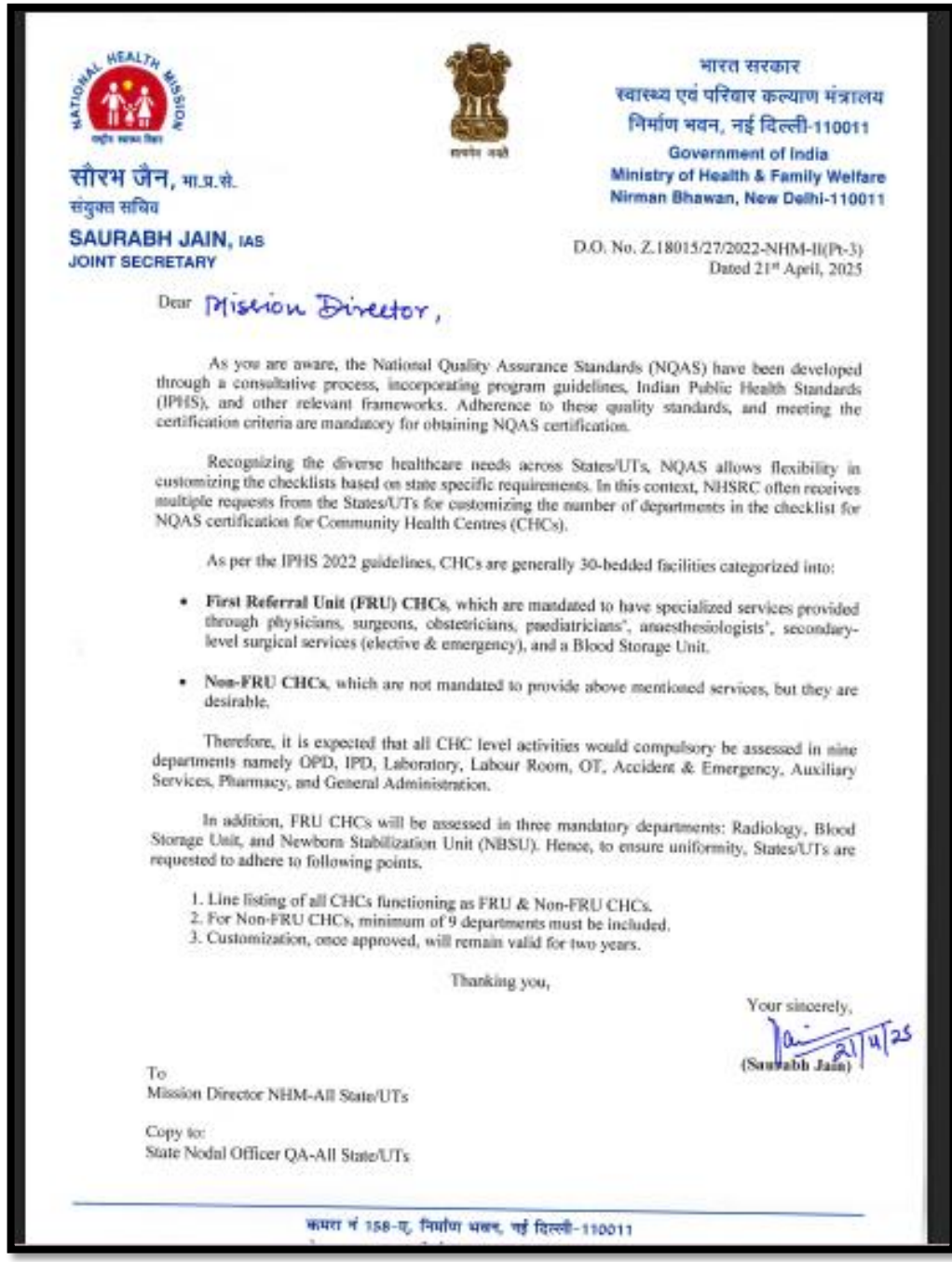
11

Customization Pending with State/UTs



Accelerating NQAS certification of CHC

- ☑ All the CHC are not functioning as FRU — **Challenge**
- ☑ NQAS standards are for FRU — **Limitation**
- ☑ Can apply for non-FRU CHC with 9 Department — **Solution**



सौरभ जैन, भा.प्र.से.
संयुक्त सचिव
SAURABH JAIN, IAS
JOINT SECRETARY

भारत सरकार
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
निर्माण भवन, नई दिल्ली-110011
Government of India
Ministry of Health & Family Welfare
Nirman Bhawan, New Delhi-110011

D.O. No. Z.18015/27/2022-NHM-II(Pt-3)
Dated 21st April, 2025

Dear Mission Director,

As you are aware, the National Quality Assurance Standards (NQAS) have been developed through a consultative process, incorporating program guidelines, Indian Public Health Standards (IPHS), and other relevant frameworks. Adherence to these quality standards, and meeting the certification criteria are mandatory for obtaining NQAS certification.

Recognizing the diverse healthcare needs across States/UTs, NQAS allows flexibility in customizing the checklists based on state specific requirements. In this context, NHSRC often receives multiple requests from the States/UTs for customizing the number of departments in the checklist for NQAS certification for Community Health Centres (CHCs).

As per the IPHS 2022 guidelines, CHCs are generally 30-bedded facilities categorized into:

- **First Referral Unit (FRU) CHCs**, which are mandated to have specialized services provided through physicians, surgeons, obstetricians, paediatricians', anaesthesiologists', secondary-level surgical services (elective & emergency), and a Blood Storage Unit.
- **Non-FRU CHCs**, which are not mandated to provide above mentioned services, but they are desirable.

Therefore, it is expected that all CHC level activities would compulsory be assessed in nine departments namely OPD, IPD, Laboratory, Labour Room, OT, Accident & Emergency, Auxiliary Services, Pharmacy, and General Administration.

In addition, FRU CHCs will be assessed in three mandatory departments: Radiology, Blood Storage Unit, and Newborn Stabilization Unit (NBSU). Hence, to ensure uniformity, States/UTs are requested to adhere to following points.

1. Line listing of all CHCs functioning as FRU & Non-FRU CHCs.
2. For Non-FRU CHCs, minimum of 9 departments must be included.
3. Customization, once approved, will remain valid for two years.

Thanking you,

Your sincerely,
21/4/25
(Saurabh Jain)

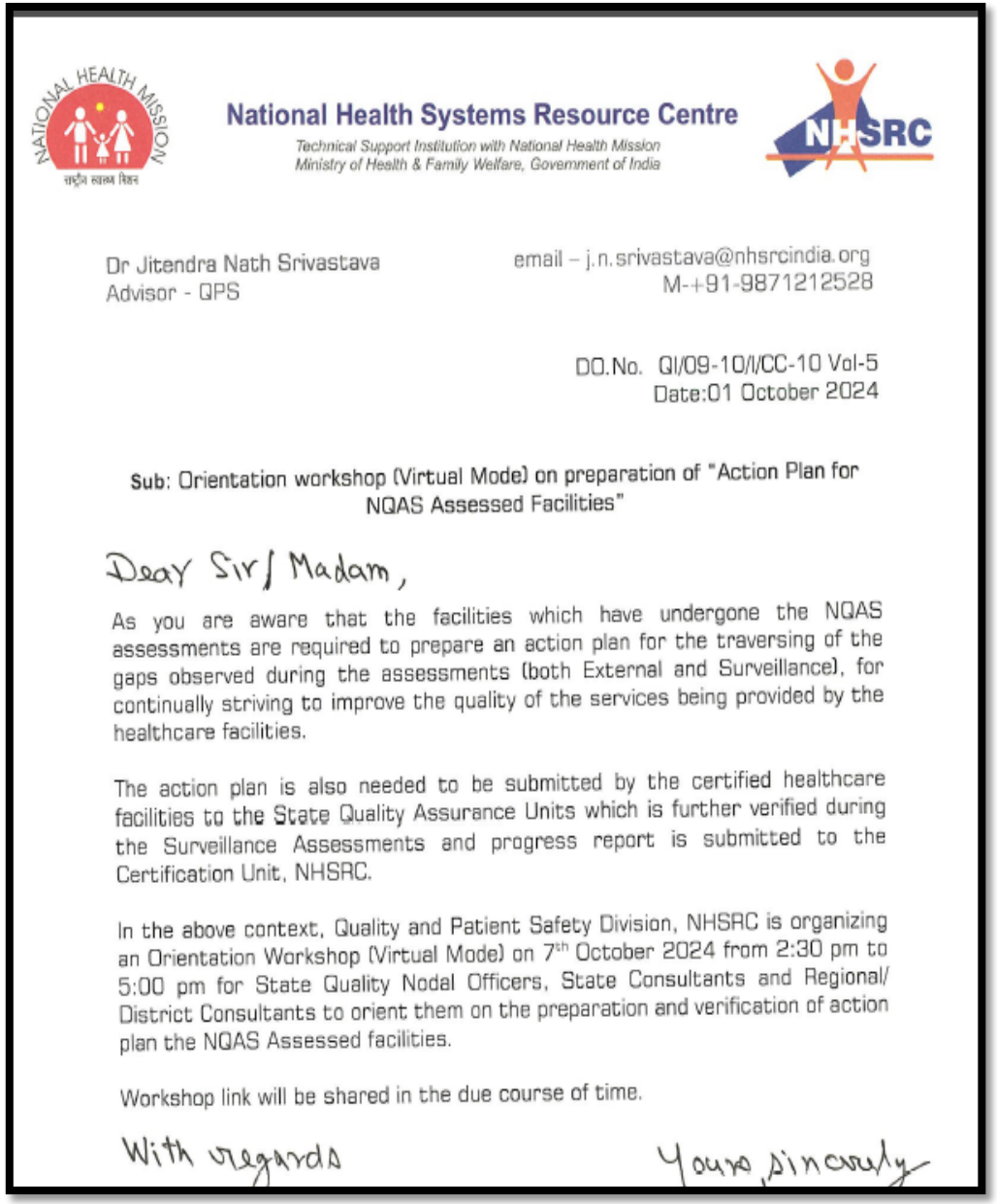
To
Mission Director NHM-All State/UTs

Copy to:
State Nodal Officer QA-All State/UTs

कमरा नं 158-ए, निर्माण भवन, नई दिल्ली-110011

Continual Improvement in NQAS certified facilities

- Action Plan submission is requirement under NQAS certification process
- Orientation of the state on Action plan Preparation
- First orientation Conducted on 7th Oct 2024, subsequently it is added in EAT, refresher and IA training



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

Dr Jitendra Nath Srivastava
Advisor - QPS

email – j.n.srivastava@nhsrcindia.org
M-+91-9871212528

DO.No. QI/09-10/I/CC-10 Vol-5
Date:01 October 2024

Sub: Orientation workshop (Virtual Mode) on preparation of "Action Plan for NQAS Assessed Facilities"

Dear Sir/ Madam,

As you are aware that the facilities which have undergone the NQAS assessments are required to prepare an action plan for the traversing of the gaps observed during the assessments (both External and Surveillance), for continually striving to improve the quality of the services being provided by the healthcare facilities.

The action plan is also needed to be submitted by the certified healthcare facilities to the State Quality Assurance Units which is further verified during the Surveillance Assessments and progress report is submitted to the Certification Unit, NHSRC.

In the above context, Quality and Patient Safety Division, NHSRC is organizing an Orientation Workshop (Virtual Mode) on 7th October 2024 from 2:30 pm to 5:00 pm for State Quality Nodal Officers, State Consultants and Regional/ District Consultants to orient them on the preparation and verification of action plan the NQAS Assessed facilities.

Workshop link will be shared in the due course of time.

With regards

Yours sincerely

Handholding of the State

Request received from State	Action Taken
Drafting the Policies like Quality Policies, Condemnation policy etc	Reference document for requested policies & SOPs were shared by State Consultant
Drafting of the facility specific quality documents & SOP	Finalized from State
Preparation of facility specific action plan for improving the quality	Started receiving application on SaQsham portal
Guiding facilities during Filed visit	

Acceleration of NQAS certification in Ayushman Arogya Mandir- Sub Health Centre

- Launch of Virtual Assessment of AAM-SHC -28th June 2024
- Creating a pool of National Level NQAS Ayushman Assessors
- Orientation training to State/ UTs on Virtual certification-9 July 2024

NQAS Ayushman Assessors' Training	No. of NQAS Ayushman Assessors
06	275

Till 15th May 2025

Ensuring Fire Safety in Primary healthcare Facilities

Challenge-Fire safety compliance in Primary healthcare level

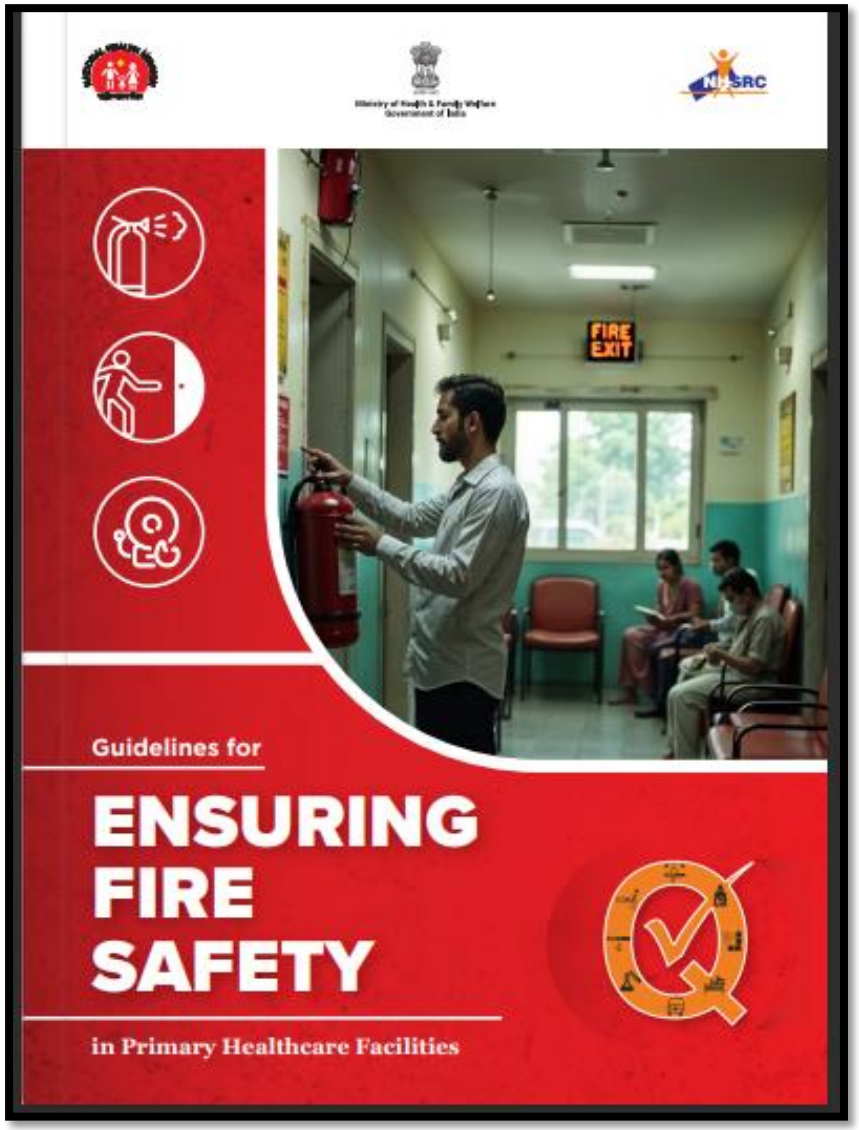
Action Plan-

QPS division is in the process of

drafting-

Guidelines for Ensuring Fire Safety in Primary Healthcare Facilities

Sent to Ministry of Health & Family Welfare for Approval



DRAFT

Challenges Pertaining to Waste Management

Issue regarding BMW collection in primary healthcare facilities particularly AAM_SHC

Action Plan-
Linkage of BMW management with nearest PHC for storage & collection

Guidance of ETP establishment in secondary healthcare facilities

Action Plan-
Deriving tool for calculating capacity of ETP

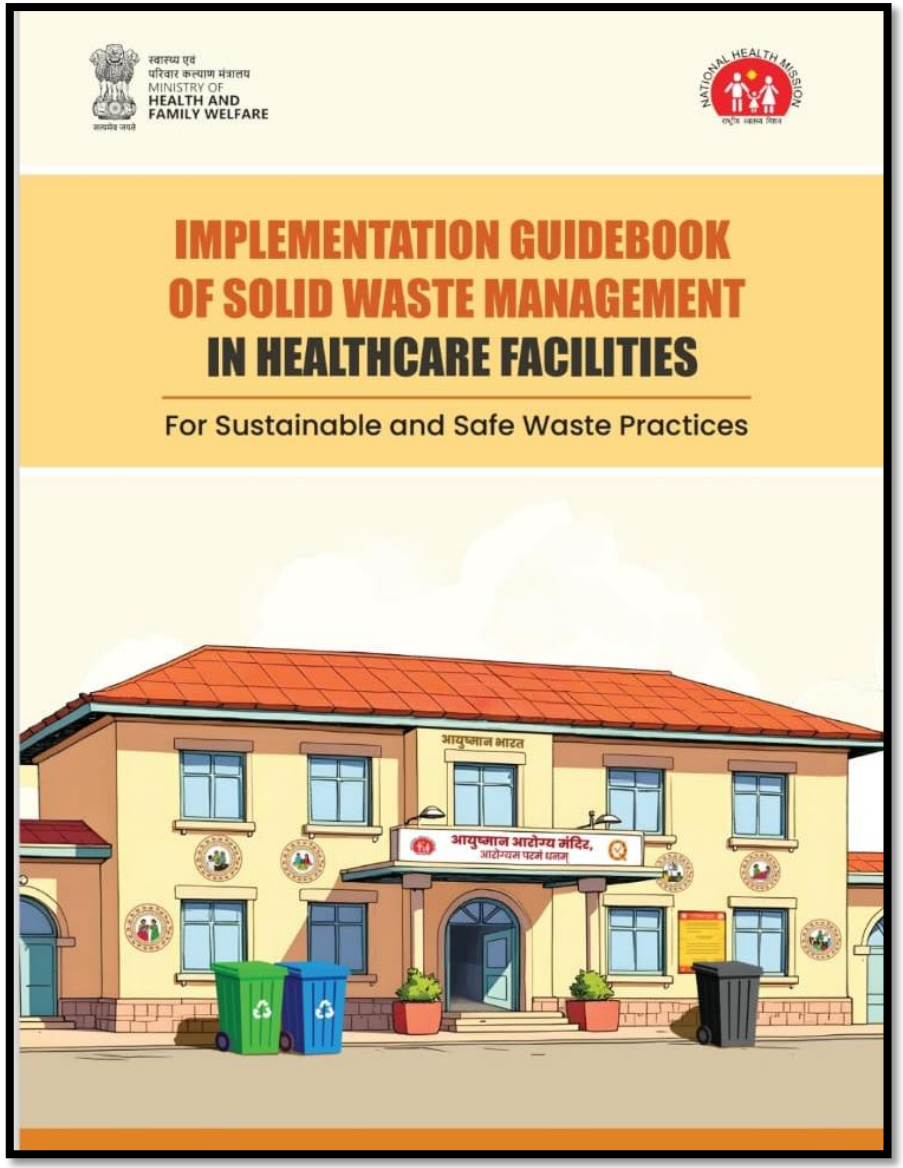
⇩

State can propose budget in PIP

Challenges Pertaining to Waste Management

Guidance of solid waste management as per 2024 rules

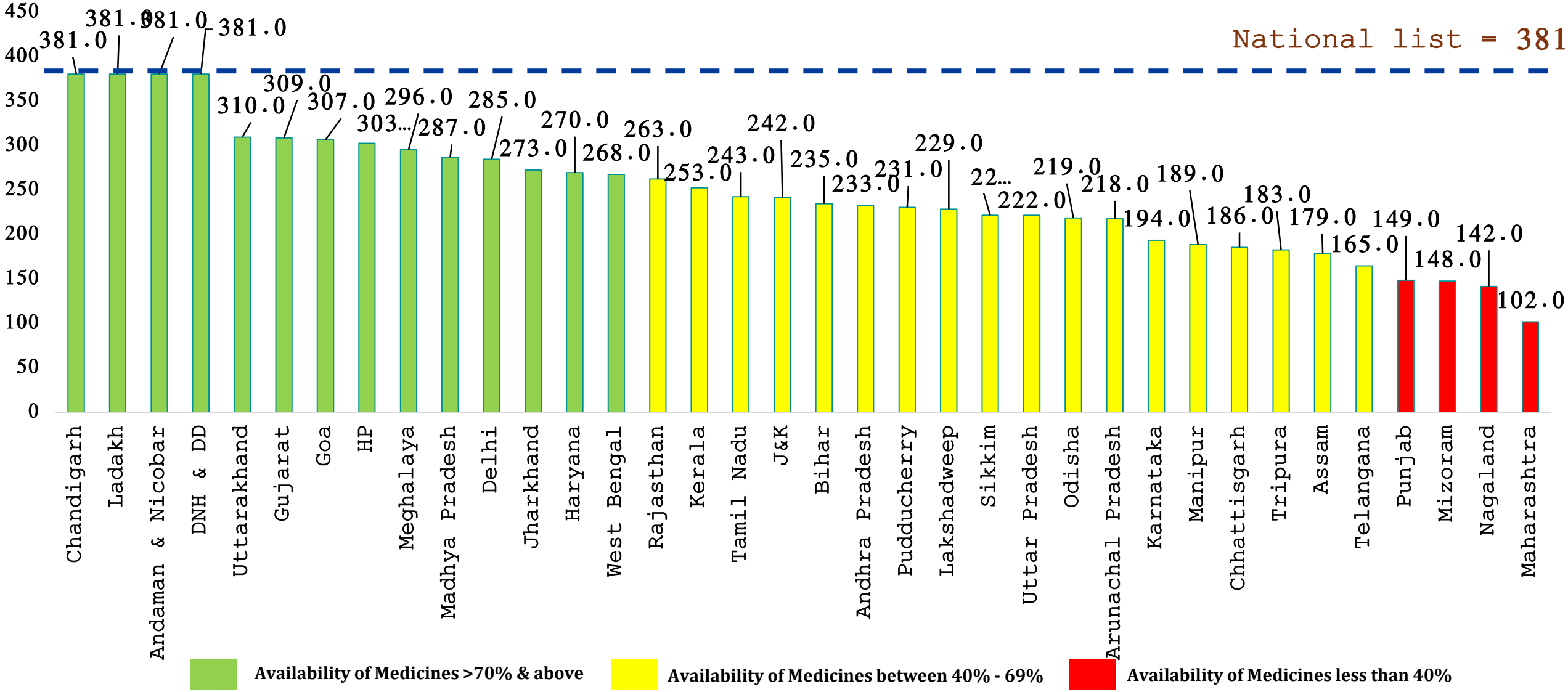
Action Plan-
Implementation guidebook for Solid Waste Management in healthcare facilities



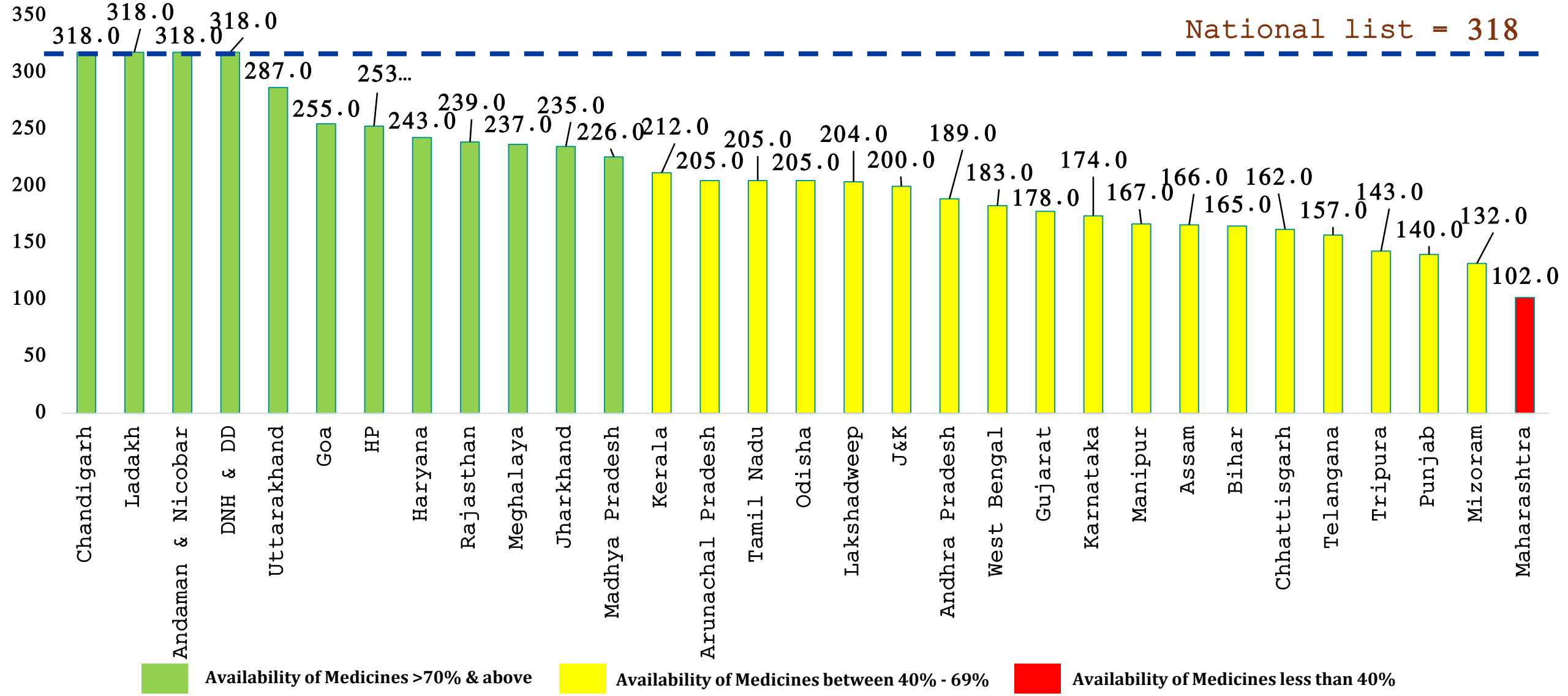
Challenges of Medicines Availability as per NQAS Checklists

22	09	05
DVDMS –Integrated	**NON DVDMS –Integrated**	**NON DVDMS -Not Integrated**
Andhra Pradesh, Arunachal Pradesh, Assam, Bihar, Chandigarh, Gujarat, Himachal Pradesh, Jammu & Kashmir, Jharkhand, Ladakh, Lakshadweep, Madhya Pradesh, Maharashtra, Manipur, Mizoram, Nagaland, Puducherry, Punjab, Rajasthan, Telangana, Uttarakhand, Uttar Pradesh	Chhattisgarh, Haryana, Tripura, Karnataka, Kerala, Meghalaya, Odisha, Dadra And Nagar Haveli And Daman And Diu, West Bengal	Andaman & Nicobar Islands, Delhi, Goa, Sikkim, Tamil Nadu

Availability of IPHS essential medicines in the state EML: DH

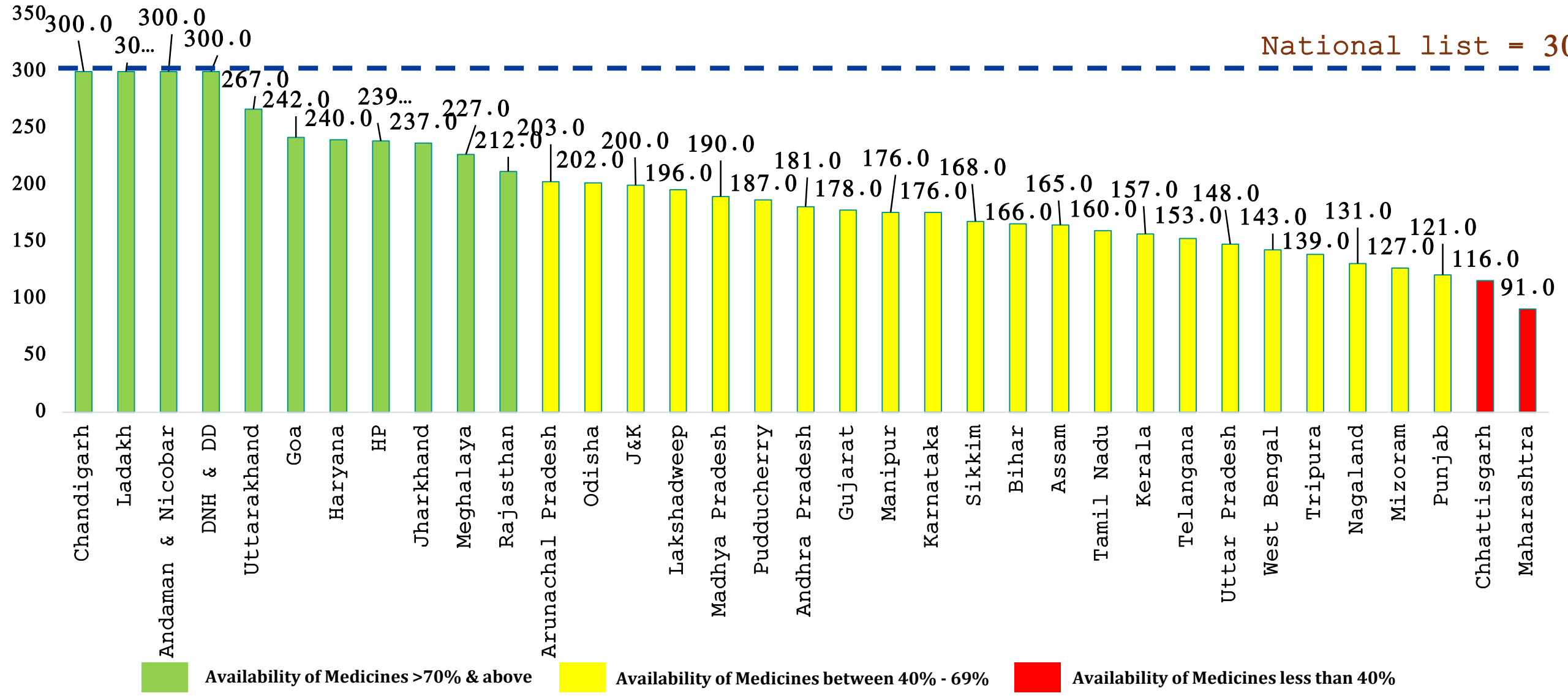


Availability of IPHS essential medicines in the state EML: SDH

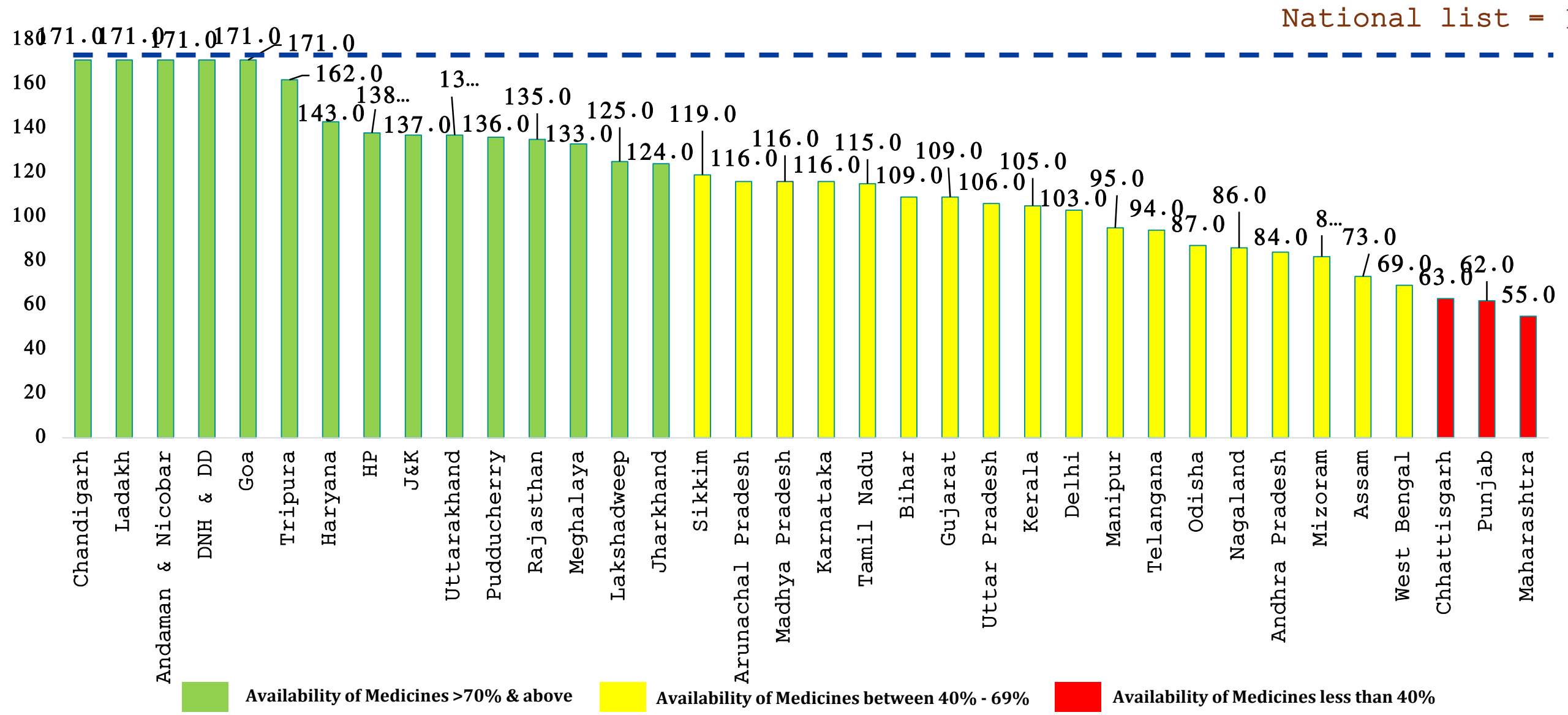


Availability of IPHS essential medicines in the state EML:

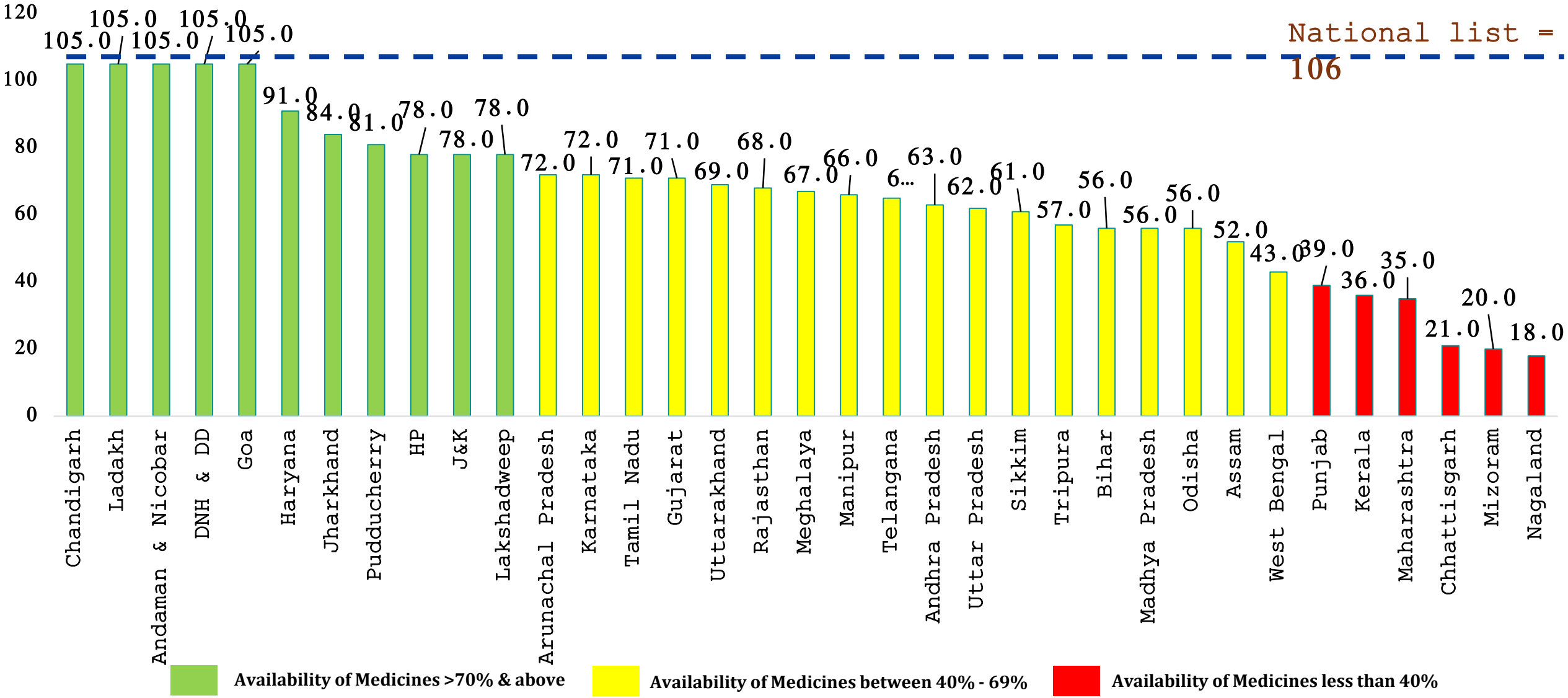
CHC



Availability of IPHS essential medicines in the state EML: AAM-PHC



Availability of IPHS essential medicines in the state EML: AAM-SHC



State-Specific Reviews

Strategic engagement with State Officials- Consultative meeting with Advisor –QPS & State Consultants

West Bengal, Maharashtra, Karnataka, Ladakh, Tripura, Tamil Nadu

Regular State/ UTs Review Meetings

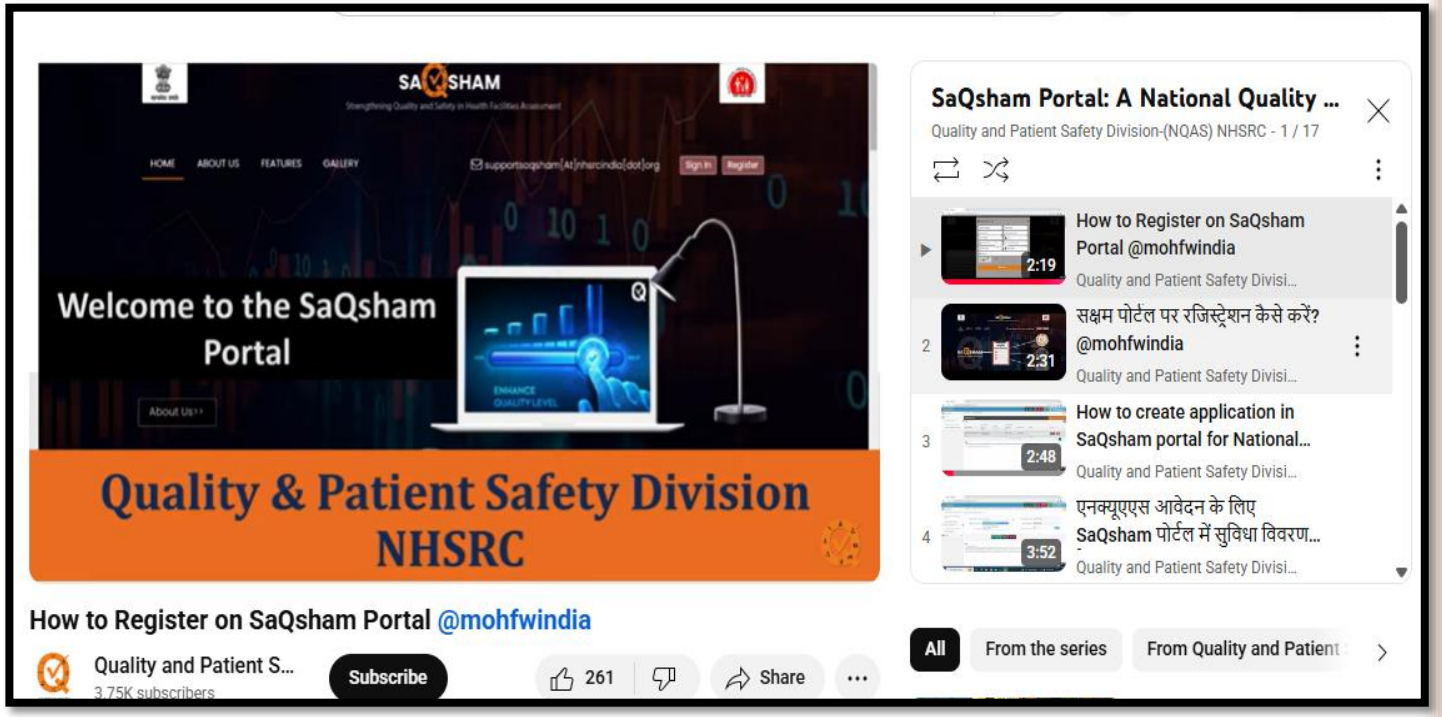
Regional review Meetings

Visit to State of Tripura

Visit to State of Maharashtra

IT Initiatives

YouTube videos for orientation on SaQsham-



Link: https://www.youtube.com/watch?v=h2mX-hAppZk&list=PL_gAnx-mHR_BOPcXiSvfpYBsA60boZhQU&ab_channel=QualityandPatientSafetyDivision-%28NQAS%29NHSRC

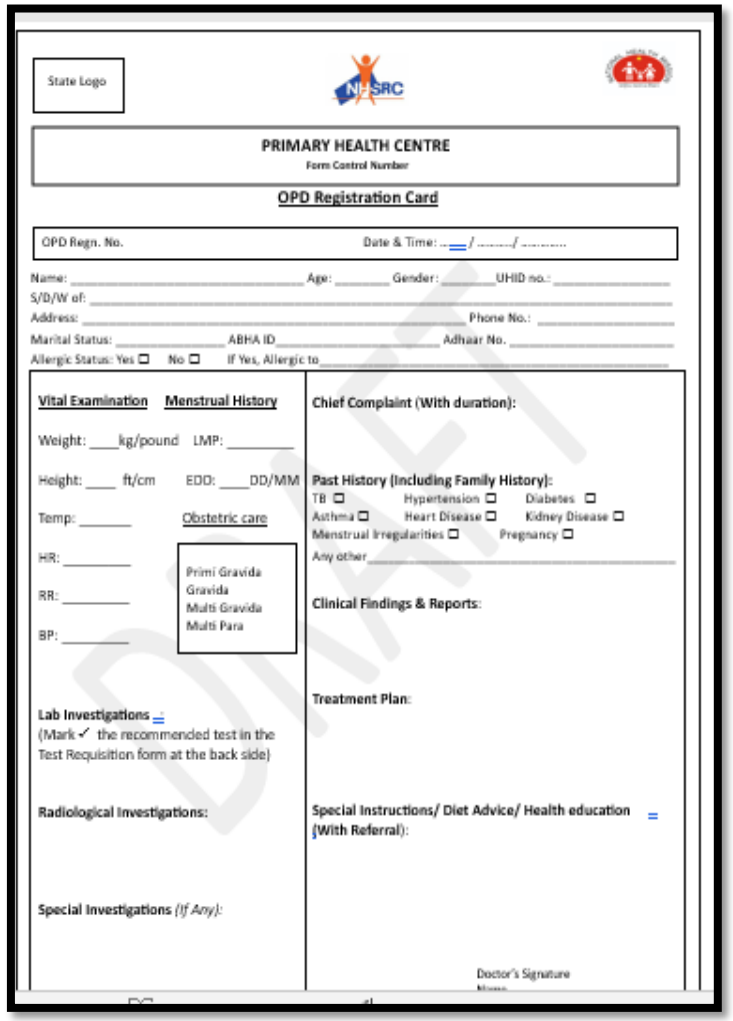
Way Forward-

SaQsham Phase II rollout is in process -

- Availability of dashboard for review at the State/ UT level regarding status of NQAS certification
- Monitoring of KPI on web based application

Standardisation of Case files

- Unavailability of Uniform clinical forms & format
- QPS division in the process of drafting case sheet for
  - Primary healthcare
  - Secondary Healthcare



State Logo

NHSRC

PRIMARY HEALTH CENTRE

Form Control Number

OPD Registration Card

OPD Regn. No. Date & Time: __/__/____

Name: Age: Gender: UHID no.:

S/D/W of:

Address: Phone No.:

Marital Status: ABHA ID Adhaar No.

Allergic Status: Yes ☐ No ☐ If Yes, Allergic to

Vital Examination **Menstrual History**

Weight: ___kg/pound LMP: _____

Height: ___ ft/cm EDD: ___DD/MM

Temp: _____ Obstetric care

HR: _____ Primi Gravida / Gravida / Multi Gravida / Multi Para

RR: _____

BP: _____

Chief Complaint (With duration):

Past History (Including Family History):

TB ☐ Hypertension ☐ Diabetes ☐

Asthma ☐ Heart Disease ☐ Kidney Disease ☐

Menstrual Irregularities ☐ Pregnancy ☐

Any other

Clinical Findings & Reports:

Treatment Plan:

Lab Investigations

(Mark ✓ the recommended test in the Test Requisition form at the back side)

Radiological Investigations:

Special Investigations *(If Any):*

Special Instructions/ Diet Advice/ Health education (With Referral):

Doctor's Signature

UHID No. _____ Date: __/__/____

Name of the Facility

Case Sheet

Patient's name: Age Sex

Mother's/Father's/ Husband's name: Contact no.:

Address:

Occupation: Income:

Diagnosis:

Date of Admission: Date of Surgery:

Result: Discharge/ Referred/ Discharged on Request/ LAMA/ Died/ Absconded

Surgical Procedures & Surgeon's Name

Method of family planning: PPIUCD/ NSV/ TL/

DRAFT

Limitations -

Infrastructure

- Rented buildings- AAM-SC
- Fire compliance issues, especially in Heritage buildings

HR

- Availability of trained Quality manpower at the block level
- Lack of interdepartmental coordination
- Staff attrition

Limitations -

Budget

- Delay in the release of gap closure funds
- ROPs are not released timely
- Budget constraint for the External and state-level assessment

Network

- Internet connectivity issues
- Limited IT integration

Every step forward, no matter how small, is progress.
While many milestones have been achieved, the Journey continues because excellence is not a destination but a relentless pursuit.
Onward, with purpose!