

Documentation for NQAS implementation at AAM-SHC

AAM-SHC में NQAS लागू करने के लिए जरूरी दस्तावेज़



Learning Objectives सीखने के उद्देश्य



Importance of Documents.
दस्तावेजीकरण का महत्व



Level of Documentation
दस्तावेजीकरण के स्तर



Documentation for NQAS Certification
एनक्यूएस प्रमाणन के लिए दस्तावेजीकरण

Importance of Documentation at AAM-SHC

AAM-SHC में दस्तावेजीकरण का महत्व

Continuity of care/
देखभाल की निरंतरता

Improved Patient
safety and Quality/
रोगी सुरक्षा और गुणवत्ता
सुधार

Legal Protection/
कानूनी सुरक्षा

Regulatory
Compliance/ नियामक
अनुपालन

Consistency Across
states & Facilities

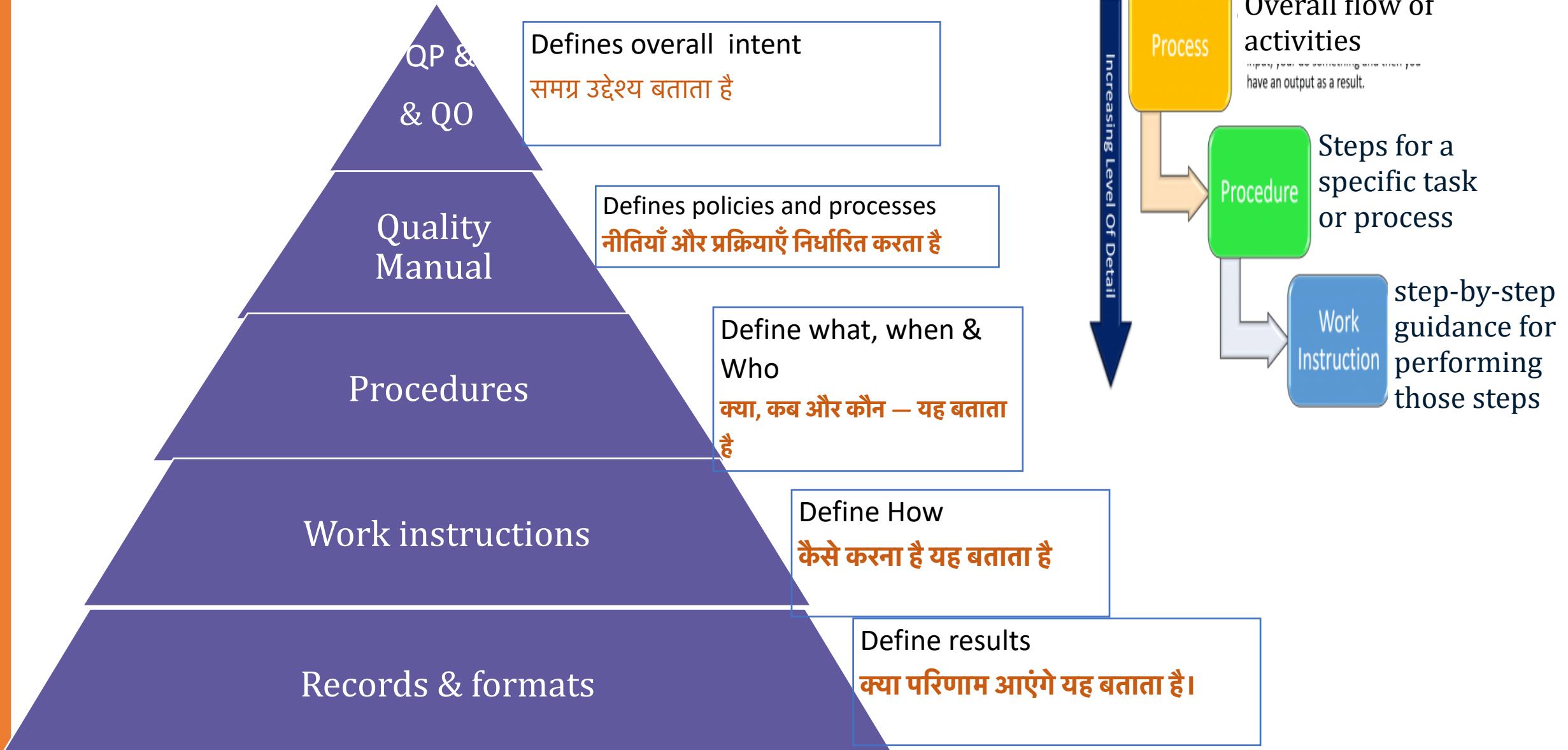
Financial
Reimbursement/
वित्तीय वापसी

Performance Evaluation
and Training/ प्रदर्शन
मूल्यांकन और प्रशिक्षण

Preservation and
Accessibility/ सुरक्षा
और संभाव्य पहुँच

Hierarchy of Documents

दस्तावेज़ों का क्रम



General Consideration for documentation

दस्तावेज़ और रिकॉर्ड प्रबंधन

All the QMS Document should have:

1. Doc title/ दस्तावेज़ का शीर्षक
2. Doc ID no./ दस्तावेज़ पहचान संख्या
3. Revision/ Version No./ संशोधन/संस्करण संख्या
4. Effective date/ प्रभावी तिथि
5. Next review date/ अगली समीक्षा तिथि
6. Name of the reviewer/ समीक्षक का नाम
7. Name of the approver/ अनुमोदक का नाम
8. Copy No./ प्रति संख्या
9. Date of issue/ जारी करने की तिथि
10. Control/ Uncontrolled status/ नियंत्रित / अनियंत्रित स्थिति
11. Amendment sheet/ Revision status/संशोधन पत्रक / संशोधन स्थिति

Sadar Hospital	Quality Management System Procedure	Doc. No.: SH-CH/P/010
	Issue No.: 01	
	Title: Procedure for Radiology Department Management	Page: 5 of 15
		Page Rev. No.: 00
	Reviewed & Approved by:	Effective date
	Signature & Date	

Document is legible and identifiable.

Control of Documents

Document is reviewed and an approved prior to issue

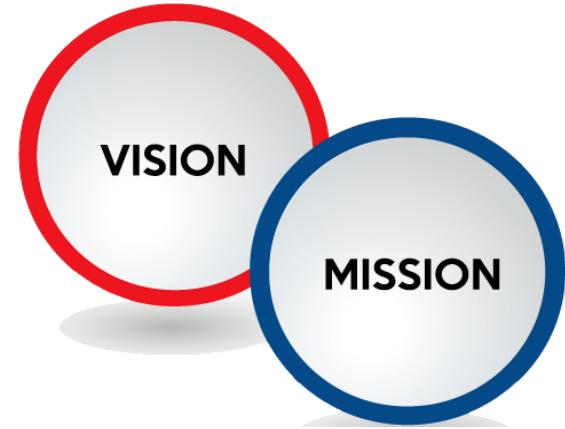
Revision Status of the document are identified

Record Control form number :

Unique form no./facility/ Area of Concern / form number/
00

Mission and Vision

मिशन और विजन



Aspect स्वरूप

Mission

Vision

Definition परिभाषा

Describes the purpose of the organization → Why we exist?

Describes the future goal/ aspiration → Where we want to go?

Focus केंद्र

Present → what the organization does today.

Future → what the organization hopes to achieve.

Nature स्वभाव

Action-oriented, practical, measurable.

Inspirational, long-term, motivating.

Timeframe निर्धारित समय - सीमा

Short to medium term.

Long-term (5-20 years).

Example उदाहरण

“To provide accessible, affordable, and quality primary healthcare to all people in our community.”

“To build a healthier society where every individual enjoys the highest standard of health and well-being.”

Quality Policy

गुणवत्ता नीति

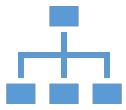
- Quality Policy should be the goal of Facility
- गुणवत्ता नीति सुविधा का लक्ष्य होना चाहिए।
- It should include mission , vision of the facility.
- इसमें सुविधा का मिशन और विज्ञन शामिल होना चाहिए।
- Policy is a reflection of the goals of the organization it can be used as a filter for decisions
- नीति संगठन के उद्देश्यों को दर्शाती है और इसे निर्णय लेने में मदद करने वाले नियम या गाइड की तरह इस्तेमाल किया जा सकता है।

Quality Policy



Quality Policy

गुणवत्ता नीति



A brief description about your Facility

आपकी सुविधा के बारे में संक्षिप्त विवरण



A quality statement relevant to facility

सुविधा से संबंधित गुणवत्ता विवरण



A commitment to continuous quality improvement

निरंतर गुणवत्ता सुधार के प्रति प्रतिबद्धता



A reference to the processes and systems in your organization

आपके संगठन की प्रक्रियाओं और प्रणालियों का संदर्भ



What systems you use to monitor the effectiveness of your QMS

आप अपने QMS की प्रभावशीलता की निगरानी के लिए कौन सी प्रणालियों का उपयोग करते हैं?



Reference to your objectives and how they are reviewed

आपके उद्देश्यों का संदर्भ और उनकी समीक्षा कैसे की जाती है



Signed and dated

हस्ताक्षरित और दिनांकित

Quality Policy/ ગુણવત્તા નીતિ

A policy is a formal guideline or principle set by an organisation, government, or institution to direct decisions, actions, and behaviour.

It defines what is allowed, what is expected, and how things should be done to achieve specific objectives.

A Quality Policy is a formal statement from an organization's management that expresses its commitment to quality and continuous improvement. It provides a framework for setting quality objectives and guides employees in maintaining consistent standards in services, or processes.

“We shall strive to provide preventive, promotive and secondary level of curative healthcare services to the people in the state with sustained efforts to ensure that it is equitable, affordable, accountable and responsive to the people needs, within the limit of its resources.”

Referral Policy

रेफरल नीति

Process Detail

- All patient transfers must be well coordinated with the receiving facility.
- The CHO/ANM will decide and inform the patient/relatives about the need and reason for transfer.
- Emergency patients should receive first aid and be stabilized before transfer.
- All transferred patients must receive a case summary with patient status, key findings, and treatment given.

Activity and Responsibility

S. NO.	ACTIVITY	RESPONSIBILITY
1.	Patient will be referred, if the concerned equipment or services are not available in the HWC.	CHO/ANM
2.	If the patient comes in emergency situation, basic treatment will be provided and if required refer the patient to nearest referral center for better treatment and follow up.	CHO/ANM
3.	Enter patient case records in the referral slip format /CPHC IT application and provide information on the closest and most appropriate health facility for seeking care.	CHO/ANM
4.	Provide information to the service providers at referral centers for the patients and enter the details in Referral slip and Referral out register.	CHO/ANM
5.	The patient shall be transported by the support of 108 ambulance, and if not possible then patient can go on their own vehicle	CHO/ANM

Policy for Maintaining Patients' Records

मरीजों के रिकॉर्ड बनाए रखने की नीति

Safeguarding the data and records

डेटा और रिकॉर्ड की सुरक्षा:

Physical

No files will be taken out of the AAM-SHC without the permission of MO in charge of the CHC/PHC.

Fire extinguishers shall be placed in AAM-SHC. The staff are trained in handling all types of fire extinguishers.

No patient information shall be shared with anyone without the written or verbal order of the Medical Officer in charge, and it must not be disclosed to any unauthorized person.

Digital

- The AAM-SHC must give each user a unique name/number and ensure that only authorized users can access electronic health information.
- Only the CHO or ANM can access clinical records, using their own ID and password.
- Keep the application updated.
- Install antivirus on the tablet/phone/computer.
- Regularly scan the system for threats.

Quality Objectives

गुणवत्ता उद्देश्य

Quality objectives are quality-oriented goal

गुणवत्ता उद्देश्य गुणवत्ता-उन्मुख लक्ष्य हैं।

A quality objective is something facility aim for or try to achieve

गुणवत्ता उद्देश्य वह चीज है जिसका लक्ष्य या प्राप्ति का प्रयास किया जाता है।

Quality objectives are the main method used to focus the goal(s) from the Quality Policy into plans for improvement

गुणवत्ता उद्देश्य, गुणवत्ता नीति के लक्ष्य (लक्ष्यों) को सुधार की योजनाओं में केन्द्रित करने के लिए प्रयुक्त मुख्य विधि है।

Quality objectives shall be measurable and consistent with the quality policy & quality problems

गुणवत्ता उद्देश्य मापनीय होंगे और गुणवत्ता नीति एवं गुणवत्ता समस्याओं के अनुरूप होंगे

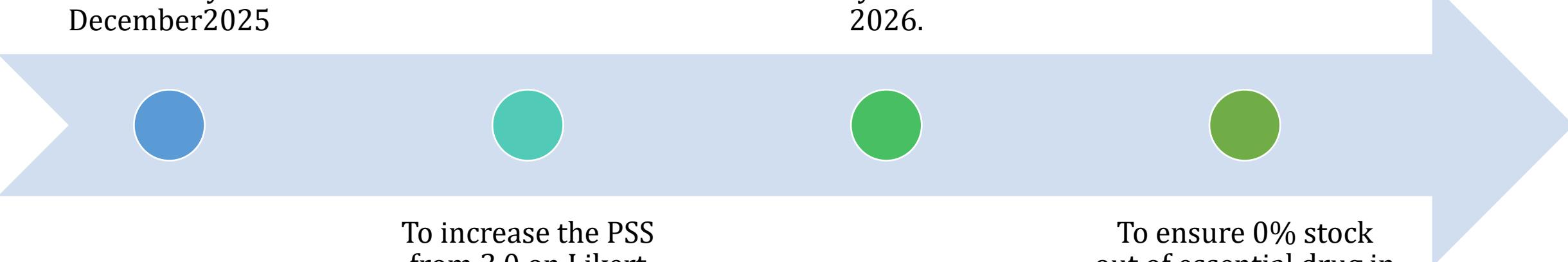
S.M.A.R.T Quality Objectives

1. Specific विशिष्ट
2. Measurable औंसती
3. Achievable प्राप्त
4. Realistic वास्तववादी
5. Time-based समय आधारित

Some SMART Objectives

To decrease the time taken during the registration to 15 minutes by 1st December 2025

To ensure 100% closure of patient grievances within 72 hours by December 2026.



To increase the PSS from 3.0 on Likert scale to 4.0 by 15th December 2025.

To ensure 0% stock out of essential drug in OPD by February 2025

Standard Operating Procedures

मानक संचालन प्रक्रियाएं

•Check for-

1. All required SOPs are submitted.
2. All SOPs should be drafted and approved by competent Authority.
3. All SOPs adequately describes the process and have details as per NQAS.

Check format for SOP-

1. Title/ **SOP का नाम**
2. Purpose/**SOP बनाने का कारण या उद्देश्य**
3. Scope/**SOP किनकार्यों/क्षेत्रों पर लागू होती**
4. Responsibility/**किसेक्या जिम्मेदारी दी गई है**
5. Definition/Procedure/**शब्दों की व्याख्या और काम करने की प्रक्रिया**
6. Forms/Format/Records/**इस्तेमाल होने वाले फॉर्म, फॉर्मेट या रिकॉर्ड्स**
7. Work Instructions/**काम करने के स्पष्ट निर्देश**
8. Revision History/**SOP में किए गए बदलावों का विवरण**
9. Reference Documents/**SOP बनाने में जिन दस्तावेजों का उपयोग हुआ**



Transition from 7 Packages to 12 Packages

7वें पैकेज से 12वें पैकेज में परिवर्तन



Transition time for the state from 7 packages to 12 packages for NQAS certification of AAM-SHC

In reference to letter D.O. No. Z-18015/27/2022-NHM-II dated April 21, 2025, it has been decided that applications for NQAS certifications of Ayushman Arogya Mandir - Sub Health Centres (AAM-SHCs) **will be accepted only for those providing all 12 service packages.**

Subsequently, many states and UTs have requested for providing clarification regarding status & follow-up actions in respect of those AAM-SHCs which are providing seven (07) service packages and are state certified. After considerations of all the facts, following clarifications are being provided:

1. All AAM-SHCs which are state NQAS certified till 31st March 2025 need to be marked as state certified on SaQsham Portal by 15th May 2025.
2. All state certified AAM-SHCs providing seven (07) service packages may apply for the national NQAS certifications by 30th June 2025.
3. Only those AAM-SHCs will be considered for National Certification if the state-level NQAS certification was completed before 31st March 2025 and their names were included in the original online spreadsheet.

For any further queries, the Quality & Patient Safety Division at the National Health Systems Resource Centre may be contacted.

07.05.25

A handwritten signature in black ink, appearing to read 'C J N Srivastava'. Below the signature, the text 'Adv- QPS' is written.

Assessment report required for NQAS Certification

- ❑ AAM-SHC needs to share 3 Mandatory reports for undergoing National Assessment:
 - ❖ Internal Assessment Report - At Facility Level
 - ❖ आंतरिक मूल्यांकन रिपोर्ट -सुविधा स्तर पर
 - ❖ District Quality Assurance Unit(DQAU) Assessment Report – At District Level **जिला गुणवत्ता आश्वासन**
 - ❖ इकाई (DQAU) मूल्यांकन रिपोर्ट -जिला स्तर पर
 - ❖ State Quality Assurance Unit (SQAU) Assessment Report – At State level. **राज्य गुणवत्ता आश्वासन इकाई (एसक्यूएयू) मूल्यांकन रिपोर्ट - राज्य स्तर पर।**

S.No.	Report Type	Report Date	Report From Date	Report To Date	Score (%)	File
1	DQAU Assessment Report	18-Nov-2025	19-Mar-2025	18-Mar-2026	85.0	file DQAU-Chhirka HWC SC NQAS Checklist 7 packages Chhirka_1751111745...
2	Internal Assessment Report	18-Nov-2025	NA	NA	86.0	file Internal-Chhirka HWC SC NQAS Checklist 7 packages Chhirka_175111176...
3	SQAU Assessment Report	18-Nov-2025	21-Mar-2025	20-Mar-2026	81.0	file State Chhirka_1751811270701.xlsx

Documents for Physical NQAS Certification at AAM-SHC

प्रमाणन के लिए दस्तावेज



QUALITY POLICY
AND QUALITY
OBJECTIVE
गुणवत्ता नीति और
गुणवत्ता उद्देश्य



QUALITY TEAM
MEETING
गुणवत्ता टीम की बैठक



POLICY FOR
MAINTAINING
RECORD
रिकॉर्ड बनाए रखने की
नीति



REFERRAL
POLICY
रेफरल नीति



BMW
AUTHORIZATION
CERTIFICATE
बीएमडब्ल्यू प्राधिकरण
प्रमाणपत्र



LAST 3 MONTHS
OUTCOME
INDICATORS
पिछले 3 महीनों के
परिणाम संकेतक



FIRE COMPLIANCE
अग्नि अनुपालन

Letter for Fire Compliance from the
appropriate authority.

Documents for Virtual NQAS Certification at AAM-SHC

AAM-SHC में वर्चुअल NQAS प्रमाणन के लिए दस्तावेज़



Quality Policy/ गुणवत्ता नीति

Last 3 Months Patient Satisfaction Score with CAPA
CAPA के साथ पिछले 3 महीनों का रोगी संतुष्टि स्कोर

Last 3 months data of Outcome Indicator परिणाम
सूचक का पिछले 3 महीनों का डेटा

Biomedical Waste Management Authorization as per
2016 rule 2016 नियम के अनुसार जैव चिकित्सा अपशिष्ट
प्रबंधन प्राधिकरण

Document Verification Checklist

Final Remarks: OK

S.No.	Name of Document	Document Parameters	Version	Remarks	Approved
1	*Quality Policy	<input checked="" type="radio"/> Yes <input type="radio"/> No Quality policy_kalapur...			
2	*last 3 months Patient Satisfaction Survey Report (Analysis) with subsequent Corrective and Preventive actions undertaken	80.67 PSS_kalapur_Kalapur...			
3	*Last 3 months data of Outcome Indicators.	<input checked="" type="radio"/> Yes <input type="radio"/> No Kpi_kalapur_Kalapur...			
4	*Availability of a system of BioMedical Waste Management	<input checked="" type="radio"/> Yes <input type="radio"/> No BMW_kalapur_Kalapur...			

Documents for Virtual NQAS Certification at AAM-SHC

State Essential Medicine List(EML) आवश्यक दवा सूची (ईएमएल)	राज्य	4	* Availability of a system of BioMedical Waste Management	<input checked="" type="radio"/> Yes <input type="radio"/> No	BMW kalapur_Kalapur...		
		5	*State notified Essential Medicine List (EML)	<input checked="" type="radio"/> Yes <input type="radio"/> No	EDL Letter-30 Octobe...		
Name and No of service packages to be assessed मूल्यांकन किए जाने वाले सेवा पैकेजों का नाम और संख्या		6	*Last 3 months data from the drug stock register for drug availability as per the states notified Essential Medicine List, signed by CHO or equivalent*	<input checked="" type="radio"/> Yes <input type="radio"/> No	EDL kalapur_Kalapur...		
		7	*Filled Application Form	<input checked="" type="radio"/> Yes <input type="radio"/> No	Document verificatio...		
Last month Quality Team Minutes of Meeting पिछले महीने की गुणवत्ता टीम की बैठक का विवरण		8	No. and Names of service packages to be assessed	80.0	file AAM SC Kalapur...		
		9	*Latest District level assessment report verified by state	<input checked="" type="radio"/> Yes <input type="radio"/> No	AAM SC Kalapur NOA...		
Work Instructions (As per service Packages) कार्य निर्देश (सेवा पैकेज के अनुसार)		10	*Last month Quality Teams Minutes of meeting	<input checked="" type="radio"/> Yes <input type="radio"/> No	Quality meeting regis...		
		11	Work Instructions (As per Service Packages)	<input checked="" type="radio"/> Yes <input type="radio"/> No	SOP kalapur_Kalapur...		

<https://qps.nhsrcindia.org/training-and-capacity-building/training-material>

THANKYOU

Quality & Patient Safety Team
National Health Systems Resource Centre