



# “Sehat Sahulat Program”

## HOSPITAL EMPANELMENT STANDARD FORM

Name of Hospital:

Address of Hospital:

City:

Tehsil / District:

Contact Person Name:

Contact Person Phone / Cell #:

Contact Person Email Address:

**Note:** Hospitals (Public, Private or Military) interested to be empanelled in Sehat Sahulat Program (SSP) should complete the below given self-evaluator form and send it to following address or email address. Queries can also be sent to same address.

**Address:** Chief Executive Officer. Project Management Cell (PMU), Sehat Sahulat Program (SSP), Ministry of National Health Services, Regulation and Coordination (NHSRC), Local Government & Rural Development (LG&RD) Building (Behind State Bank Building), G-5/2, Islamabad, Pakistan,

Email: [pmnhip@gmail.com](mailto:pmnhip@gmail.com)



## HOSPITAL EMPANELMENT STANDARD

NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
<b>1.</b>	<b>HEALTH FACILITY</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
1.1	At least 10 inpatient medical beds for primary inpatient health care. The requirement of minimum number of beds can be reduced based on available infrastructure in rural areas.	O	0	1	2
1.2	The facility is accessible by a motor able road, allowing for patient movement.	O	0	1	2
1.3	Functional wheel chairs and stretchers are available at the gate/reception for patients who are unable to walk.	O, PI	0	1	2
1.4	The hospital and its departments are clearly signposted and a site plan is displayed at a central place for orientation of staff and patients.	O	0	1	2
1.5	A reception with a receptionist to guide the patients is open during operating hours.	O, PI, SI	0	1	2
1.6	Clients / Patients admitted to the hospital have access to an allotted bed with fresh linen and do not have to double up with other clients/patients.	O, PI,	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
1.7	There are separate wards for males and females	O	0	1	2
1.8	Toilets and bathrooms are available and adequate for the number of clients/patients in the ward or department (at least one toilet for every twelve clients/patients) with warm water for winter months	O	0	1	2
1.9	Potable water and electrical power/ Alternate sources of water and power are available 24 hours a day, seven days a week.	O, MI, PI	0	1	2
<b>2.</b>	<b>MANAGEMENT</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
2.1	A health facility can also provide the services for which it has the right skills mix, infrastructure and equipment.	D, O, MI,	0	1	2
2.2	The services to be performed by the institutions are in accordance with the services listed in the registration form provided to PMNHIP and approved by PMNHIP.	D	0	1	2
2.3	There are clear, documented lines of responsibility for all clinical and non-clinical services.	D	0	1	2
2.4	Health facility has access to ambulance services in twenty minutes.	PI, O, MI	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
2.5	The ambulance service may be contracted out, but the vehicle used for patient transport must be available for 24 hours. There must be a mechanism to ensure that it is readily available whenever there is a need to transfer patients to a higher level of facility or to transport patients to diagnostic facilities.	D, MI	0	1	2
2.6	Electricity/ telephones/water/civil engineering may be contracted out.	D, MI	0	1	2
2.7	Where an external contractor provides services, a detailed service specification is available, where appropriate.	D, MI	0	1	2
2.8	Client/Patient records are maintained through the use of a unique number or other form of identification unique to the patient.	D	0	1	2
2.9	Where referrals have been made, the client/patient record includes the referral letter and indications for referral.	O, PI, D,	0	1	2
<b>3.</b>	<b>INFECTION CONTROL, HYGIENE &amp; WASTE MANAGEMENT</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
3.1	Gloves, gowns, masks, soap and disinfectants are available and correctly used in situations where there is a risk of infection.	O, SI,	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
3.2	Maintenance of proper sanitation in toilets and other public utilities should be given utmost attention. Sufficient funding for this purpose must be kept and the services may be outsourced.	O, SI, PI,	0	1	2
3.3	Sufficient covered, clean dustbins are provided for clients/patients, visitors/attendants and staff and the dustbins are emptied on a regular basis.	O, SI,	0	1	2
3.4	Cleaners are trained and provided with sufficient appropriate equipment and cleaning material and work according to cleanliness and sanitation policies and procedures	SI, O	0	1	2
<b>4.</b>	<b>HUMAN RESOURCES</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
4.1	The healthcare practitioner is registered with the appropriate professional regulatory body.	D	0	1	2
4.2	The practitioner is trained, experienced and entitled for the roles they undertake.	D, SI	0	1	2
4.3	Written and dated job descriptions are available for all posts, which specify at least the following: Job title and grade, Job purpose and objectives, Responsibilities, Accountability, Review date.	D, MI	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
4.4	A duty resident medical officer and a nurse are physically available for 24 hours in the healthcare facility.	PI, SI, MI, D	0	1	2
4.5	The duty medical officer should have MBBS or equivalent degree approved by Pakistan Medical & Dental Council with one year house job experience.	D	0	1	2
4.6	The nurse should have a bachelor's degree in nursing approved by Pakistan Nursing Council.	D	0	1	2
4.7	One duty medical officer for every 20 indoor patients should be available for 24 hours.	D, SI, MI	0	1	2
4.8	Physician/Consultant -on-Call is a physician who may be called on at any time to provide services. There must be at least one (1) Physician/Consultant-On-Call.	D, MI	0	1	2
4.9	A healthcare facility providing surgical facilities should have a surgeon and anesthetist available on call.	D, MI,	0	1	2
4.10	A nursing home providing maternity facilities should have an obstetrician and gynecologist, an anesthetist, and a neonatologist available on call round the clock.	D, MI	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
4.11	A healthcare facility providing surgical facilities must have a qualified operation theatre nurse in every shift.	D, SI	0	1	2
4.12	Every ward should have one ward boy or ayah available 24 hours with a maximum twelve hours shift.	O, SI, D	0	1	2
<b>5.</b>	<b>CLINICAL PRACTICE</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
5.1	As soon as a patient arrives at a nursing home, (in emergencies) he or she should immediately be seen by a Duty Medical Officer otherwise within half an hour.	D, PI, O, MI	0	1	2
5.2	In case the required services are not available a mechanism for referral to higher level facility is available.	O,HPI,MI	0	1	2
5.3	ECG facilities should be available in the healthcare facility round the clock.	O, SI,	0	1	2
5.4	Medical devices intended for single use are not reprocessed for reuse.	SI, MI, D, O	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
5.5	<p>The client / patient record is sufficiently detailed to enable the client / patient to receive effective treatment and care and includes details of admission, date and time of arrival. Client / Patient assessment and medical examination sheet containing history pertinent to the condition being treated including details of present, past history. Diagnosis by a registered medical doctor for each entry. Details of the client / patient treatment plan and follow-up plans, diagnostic test orders and results, progress notes written by medical, nursing and allied health staff to record all significant events such as alterations in the client's/patient's condition and responses to treatment and care Record of any near misses, incidents or adverse events. Medication sheet recording each dose given. Treatment record Observation charts, e.g. temperature chart, input and output chart, head injury chart, diabetic chart. Specialist consultation reports, Mode of discharge, e.g. left against medical advice or discharge on will. In case of death, details of circumstances leading to the death of patients</p>	O, D	0	1	2





NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
6.	<b>OPERATING THEATRE DEPARTMENT</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
6.1	A height adjustable OT Table, and a cold, shadow less Operating light is available.	O	0	1	2
6.2	<p>The anaesthetic induction area/room and operating theatre are equipped with safe and well maintained equipment specific for OT activities including but not restricted to the following:</p> <ul style="list-style-type: none"> <li>• Anaesthetic machine</li> <li>• Laryngoscopes</li> <li>• Endotracheal tubes/laryngeal masks</li> <li>• Airways</li> <li>• Nasal tubes</li> <li>• Suction apparatus and connectors</li> <li>• Oxygen</li> <li>• Drugs and IVs required for planned anaesthesia</li> <li>• Drugs for emergency situations Monitoring equipment including ECG, ETCO<sub>2</sub>, temperature monitoring, pulse oximeter and blood pressure</li> <li>• Suction machine</li> <li>• Instrument</li> <li>• cleaning/decontamination/ sterilization facilities</li> <li>• Adequate light sources</li> </ul>	O,D	0	1	2
6.3	Adequate lighting, Air conditioning and Ventilation are provided in each OT.	O	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
6.4	The operating area is of sufficient size to accommodate the patient, the anesthetist, the surgeon and the assistants for the anesthetist and the surgeon.	O	0	1	2
6.5	Procedures are available and up to date for; <ul style="list-style-type: none"> <li>• Informed patient consent</li> <li>• Pre-operative assessment</li> <li>• Post-operative care</li> </ul>	D, SI	0	1	2
<b>7</b>	<b>CASUALTY DEPARTMENT</b>				
7.1	The casualty department is managed at all times by a suitably qualified and experienced nurse, doctor department assistant	O, D, SI	0	1	2
7.2	Procedure exists for referral for specialist care if necessary.	O, D	0	1	2
7.3	The casualty entrance is clearly signposted from outside the hospital.	O	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
<b>8.</b>	<b>INTENSIVE CARE UNIT</b>				
8.1	Registered nurses in the unit have completed formal in-service training or a recognized course in intensive care and at least one is present on all shifts.	(O,D)	0	1	2
8.2	A suitably experienced doctor is immediately available at all times.	O,D	0	1	2
8.3	Each bed has a facility for <ul style="list-style-type: none"> <li>• Oxygen</li> <li>• Suction</li> <li>• Compressed air</li> <li>• ECG monitoring.</li> </ul>	O,D	0	1	2
8.4	Facilities in the unit include <ul style="list-style-type: none"> <li>• CVP monitoring</li> <li>• Pulse oximetry</li> <li>• Blood pressure monitoring</li> <li>• Urometry</li> <li>• Ambient and client/patient temperature monitoring.</li> <li>• Arterial blood gases</li> <li>• Glucometer.</li> <li>• Electrolyte machine</li> </ul>	O,D	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
9.	<b>MATERNITY SERVICES</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
9.1	The maternity department is managed by a suitably qualified, registered and experienced nurse, doctor or senior midwife for normal delivery.	D, SI, MI	0	1	2
9.2	The maternity department has 24 hour on-site cover from qualified medical doctor, obstetrician & gynaecologist and an anaesthesiologist.	D,SI, MI	0	1	2
9.3	Written procedures and guidelines are used consistent with the hospital policies and functions for: <ul style="list-style-type: none"> <li>• ante natal care and booking/registration</li> <li>• post-natal care</li> <li>• peri-natal care</li> <li>• identifying high risk pregnancy</li> <li>• admission to labour room/ward</li> <li>• planning, treatment and mode of delivery</li> <li>• plan for managed pain during labour and delivery</li> <li>• delivery monitoring process</li> <li>• referral</li> <li>• discharge including discharge summary</li> <li>• birth record and certificate</li> </ul>	D	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
9.4	A trained midwife/nurse is present at every birth.	O,D, PI	0	1	2
9.5	A guideline on summoning medical assistance at any time during labour is used by nurses and midwives.	D,SI	0	1	2
9.6	For C Section an anaesthetist and obstetrician with relevant qualifications and experience available for mothers with epidural, C Section, emergency breech and instrumental deliveries, multiple or high risk deliveries, instrument deliveries or C-sections, emergency resuscitation and women with eclampsia.	D, MI	0	1	2
9.7	<p>The delivery room is equipped with functioning, safe and well maintained equipment specific for deliveries including but not restricted to the following:</p> <ul style="list-style-type: none"> <li>• Fetoscope. Delivery table which can be turned to the Trendelenburg position</li> <li>• An anaesthetics machine with emergency oxygen supplies in case of management of complicated deliveries</li> <li>• Endotracheal tubes, laryngoscope in case of surgery. Resuscitation equipment and drugs for infants and for adults Intravenous crystalloid and plasma expanders.</li> <li>• Weighing machine for the baby</li> </ul>	O,D	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
	<b>AUXILIARY SERVICES</b>				
<b>10.</b>	<b>LABORATORY SERVICES</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
10.1	Availability of services of a licensed clinical laboratory is mandatory. A Contract of Service or Memorandum of Agreement with a clinical laboratory located within the locality can be done, provided that results for emergency cases are transmitted within one hour.	O,D	0	1	2
10.2	If the medical testing laboratory is present in the healthcare facility it is managed by a suitably qualified and experienced medical technologist	D, MI	0	1	2
10.3	Staff has access to sufficient laboratory equipment to carry out their jobs safely.	SI	0	1	2
10.4	There are designated storage areas for specimens, reagents and records	O	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
<b>11</b>	<b>RADIOLOGY</b>				
	<b>CRITICAL</b>				
11.1	The services of a licensed radiology facility should be available, which may be contracted out but must be situated in close proximity to the healthcare facility to ensure availability and timeliness of services.	O	0	1	2
11.2	If the radiology services are available within the healthcare facility then a trained radiologist (either on site or visiting) is responsible for the clinical direction of the department and the safety of the client/patients and for radiologist.	D, MI	0	1	2
11.3	Radiology services are administered by an identified qualified, registered radiologist or radiographer with clearly defined responsibility for all non-clinical aspects of the department	D, SI	0	1	2
11.4	Diagnostic imaging is performed only upon a signed written request from a qualified medical practitioner.	O, D	0	1	2
11.5	Required reporting times are based on the urgency of the situation, e.g. films or scans for emergency client/patients are reported within one hour and routine reports are reported within 24 hours.	O, D	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
11.6	There is provision for a female attendant to accompany female patients during radiological procedures.	O	0	1	2
11.7	There are prominently displayed signs in local language warning women of childbearing age of the dangers of radiation in pregnancy	O	0	1	2
<b>12</b>	<b>PHARMACY SERVICES</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
12.1	The services of a pharmacy should be available, which may be contracted out but must be situated in close proximity to the healthcare facility to ensure availability and timeliness of services.	O	0	1	2
12.2	The pharmacy services if available within the healthcare facility must be managed by a qualified pharmacist	D	0	1	2
12.3	Medicines are stored on shelves enabling protection from the adverse effects of light, e.g. glass windows painted white, dampness and temperature extremes	O	0	1	2
12.4	Heat sensitive and/or light sensitive medicines / vaccines are stored in a controlled environment to keep them in optimum condition.	O, D	0	1	2





NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
<b>13</b>	<b>BLOOD BANK</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
13.1	The blood bank services should be available, which may be contracted out but must be situated in close proximity to the health care facility to ensure availability and timeliness of blood in emergency situations.	O, D	0	1	2
13.2	Effective blood cold chain should be ensured	O, D	0	1	2
13.3	Blood collected is labeled appropriately with the donor's name, registration number, blood group, and the time of collection and the date of expiry.	O, D	0	1	2
13.4	The blood bank maintains records of procurement, issues and transfusion of blood, cross-matching and any issue related to blood and blood components. The records are kept for at least 5 years	D	0	1	2



NO.	STANDARD	ASSESSMENT METHOD	RATING		
			0	1	2
<b>14.</b>	<b>CLIENT/PATIENT RIGHTS</b>				
	<b>CRITICAL</b>		<b>Please Check One Rating in a Row</b>		
14.1	Guidance and advice is provided to the clients/patients at the PMNHIP registration counter.	O, P	0	1	2
14.2	The reception area and wards display information about the organisation, including: <ul style="list-style-type: none"> <li>• The rights of the clients/patients</li> <li>• Services and facilities available in the hospital for PMNHIP beneficiary</li> <li>• Feedback and complaints pathways</li> </ul>	O	0	1	2
14.3	Client/Patient consent is obtained for the proposed care or treatment. Written consent is obtained for any invasive procedures or operations.	O, D	0	1	2
14.4	There is a documented process for collecting, prioritizing, reporting and investigating complaints which is fair and timely.	O, D	0	1	2
14.5	There are adequate provision for patient privacy in the form of screens and curtain etc.	O	0	1	2
14.6	In case of a male doctor is attending a female patient, there is provision for a female attendant to be present during such an event.	O	0	1	2
<b>O: observations. D: Documentations. PI: Patient Interview. SI: Staff Interview. MI: Management Interview</b>					



**Definitions:**

Rating:	Definition:
0	Hospital do not provide the service.
1	Hospital partially qualify / provide the service.
2	Hospital fully qualify / provide the service.
Abbreviations:	Definition:
O	Observations.
D	Documentations.
PI	Patient Interview.
SI	Staff Interview.
MI	Management Interview.

**Health Care Facility Score Summary Statement:**

Name of Hospital: \_\_\_\_\_

#	Standards:	Maximum Score:	Hospital Score:
1.	Health Facility:	18	
2.	Management:	18	
3.	Infection Control, Hygiene & Waste Management.	8	
4.	Human Resource:	24	
5.	Clinical Practice:	10	
6.	Operation Theater Department	10	
7.	Causality Department	6	
8.	Intensive Care	8	
9.	Maternity Service	14	
10.	Laboratory Services:	8	
11.	Radiology	14	
12.	Pharmacy Services	8	
13.	Blood Bank	8	
14.	Client / Patient Rights	12	
Total Scores:		166	