



BASELINE ASSESSMENT OF CIVIL HOSPITAL, FEROZEPUR UNDER NATIONAL QUALITY ASSURANCE PROGRAM

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INTRODUCTION

Indian Public Health Standards were introduced in 2007 by the National Rural Health Mission (NRHM) for District Hospitals, Sub District Hospitals, Primary Health Centers (PHCs), Community Health Centers (CHCs), and Sub-Centers. The implementation of these standards primarily focused on creating IPHS-specified infrastructure and deploying recommended human resources. However, the perspective of the users and the requirement of national programs for service quality were often overlooked during this process. In 2008, Quality Management Systems were introduced in eight District Hospitals in EAG states. Subsequently, in 2011, the ISO-NABH certification program was introduced, reaching all district hospitals, resulting in 74 facilities obtaining ISO Certification by 2012. In 2013, the consultation for National Quality Assurance Standards began, and operational guidelines were launched for District Hospitals. Guidelines for PHCs and CHCs were introduced in 2014, emphasizing Quality Assurance as a priority area for the National Health Mission (NHM) [2,3].

Based on available data, the annual healthcare spending per capita in India was approximately \$120, constituting approximately 4.2% of the country's GDP. The majority of this expenditure originates from the private sector, contributing significantly more compared to the minimal 1% contribution from the public sector. Despite this modest public sector contribution, the cost of medical care is on the rise when considering factors such as purchasing power parity and affordability. Notably, over 44% of the Indian population, as estimated by the World Bank in 2005, earns less than one dollar a day. The Finance Ministry reports an overall inflation rate in India of approximately 9.4% during April-December 2010, with medical expenses experiencing inflation exceeding 10% for the fourth consecutive year [1].

RESEARCH QUESTIONS

What was the level of quality assurance at Civil Hospital Ferozepur based on National Quality Assurance Standards?

RESEARCH OBJECTIVES

1. To evaluate the adherence of Civil Hospital, Ferozpur to National Quality Assurance Standards at a quality assurance level
2. To assess department-wise quality assurance at Civil Hospital, Ferozpur against National Quality Assurance Standards.

RESEARCH METHODOLOGY

Conducted an Observational Descriptive Study at Civil Hospital, Ferozpur, spanning a duration of 3 months. Data collection utilized department-specific checklists derived from the Assessor's Guidebook for Quality Assurance in District Hospitals, totaling 18 available checklists.

RESULTS & DISCUSSION

The quality assurance assessment of Civil Hospital, Ferozpur revealed a score of 56 percent, falling below the government's target of a score above 70 percent, indicating a Satisfactory Level. A detailed examination of results highlights the Blood Bank as the highest-scoring department with 69 percent, while General Administration scored the lowest with 44 percent. Each checklist used to assess these departments encompassed 8 areas of concern, each with standards and measurable elements. The Blood Bank excelled in all areas of concern except Quality Management and Outcomes, where it performed significantly lower, yielding overall scores of 4 percent and 11 percent, respectively. This suggests that the hospital possesses a well-established blood bank meeting National Quality Standards to a considerable extent, and with attention to the lagging areas, it could easily surpass the 70 percent mark. The Laboratory and General Administration departments scored the lowest with 44 and 45 percent, respectively.

CONCLUSION

The concept of quality in public health was relatively recent, and the outcomes and impact of these established standards will only become apparent in the long run. The hospital must make substantial efforts in

the realm of Quality Management to attain the established benchmark of 70% and beyond. While persistent endeavors can undoubtedly result in reaching this target, the primary challenge lies in maintaining this score consistently over an extended period, especially in the absence of any external assessments.

REFERENCES

1. *Maternal Health Division, M. o. (2013). Operational Guidelines for Quality Assurance in Public Health Facilities.*
2. *Ministry of Health & Family Welfare, G. o. (2013). Assessor's Guidebook for Quality Assurance in District Hospitals.*
3. *Shah, R. M. (01, 2011). Private Sector in Indian Healthcare Delivery: Consumer Perspective and Government Policies to promote private Sector. Information Management and Business Review*