MNL: QSM: 02/05/Form1-C

PHC/U-PHC: Document Verification Checklist (To be submitted along with the application)

Name of the Documents	Status of submission
Latest State Assessment Report and scores.	Yes/No
Minutes of last Quality Team meeting (MOM).	Yes/No
3. Departmental SOPs.	Yes/No
4. Quality Improvement Manual.	Yes/No
5. Copy of Hospital Wide Policies/ Procedures. (Government Order/ Single Pager Policy / Procedures) • Vision, Mission, Values, Strategic Plan and	4
Quality Policy • Condemnation Policy.	Yes/No
Maintaining of Patients Record, its security, sharing of information and safe disposal	Yes/No
Higher Centre Referral Policy	Yes/No
Scores of Last 3 Patient Satisfaction Surveys and Subsequent Corrective and Preventive actions undertaken.	Yes/No
7. Last 3 months data of Key Performance Indicators (KPI).	Yes/No
8. Prescription Audit Analysis with Corrective and Preventive Action (CAPA)	Yes/No