जननी सहयोगी योजना

सुरक्षित मातृत्व एवं शिशु स्वास्थ्य सेवाऐं प्रदान करने हेतु निजी एवं अशासकीय अस्पतालों की भागीदारी

Check List for Inspection Team for Accreditation of Private/NGO Hospitals

Name of Host	nital	District
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S.No.	Particular	YES	NO
I.	Services Being Provided (Mandatory)		
1.	Antenatal Care/Post natal care		
2.	Routine Immunization Services for Children & Pregnant Women		+
3.	24 Hrs Delivery Services -		
	Normal		
	Assisted		
4.	Management of Common Obstetric Complication -		
	Parenteal antibiotics		
	Parenteral oxytocis		
	Parenteal Sedatives / anticonvulsants		
	Manual Removal of Placenta		
5.	Early & Safe Abortion Services		
6.	Full range of F.P. Service including LTT		
	IUD Insertion		
	Provision of OCP, Condom, Emergency Pills.		
	Sterilization Services Tubectomy		
	Sterilization Services Vasectomy		
	Treatment of RTI / STI		
7.	New Born Care		
8.	Emergency care of sick children		1
9.	Essential lab Services -		
	HB Estimation		
	Blood Grouping and Testing		
	BT, CT		1
	Urine Albumin and Sugar		

10.	Caesarean Section & Laparotomy		
11.	Blood Transfusion services		
II	Infrastructure Facilities (Mandatory)		
1.	Minimum Bed Strength 10-12 in difficult area 5-7 beds		
2.	Fully equipped & operational Labour Room		
3.	Labour Room with Toilet		
4.	Ward with Toilet		
5.	Area ear marked for newborn care in Labour Room.		
6.	Regular 24 Hrs. Water supply/availability		
7.	Functional lab facility		
8.	Regular electric supply with backup arrangements		
9.	Fully functional O.T. for undertaking LSCS/ Laparotomy		
10.	Functional O.T. for MTP & Tubectomies		
11.	Telephone Connection		
12.	Ambulance (owned or locally hired)		
13.	Arrangement for waste disposal.		
14.	Blood Storage facility (optional)		
		,	1
III	Supplies & Equipments (Mandatory)		
1.	Normal Delivery kit		
2.	Equipment for assisted vaginal delivery		
3.	Standard surgical set for episiotomy		
4.	Equipment for MVA		
5.	Equipment for MTP		
6.	Equipment for new born care & Neonatal resuscitation		
7.	IUCD insertion kit		
8.	Equipment for sterilization operation		
9.	Equipment / Reagents for essential laboratory investigation		
10.	Stock of contraceptive material		
11	Standard Surgical Set.		
12	Cold Chain maintenance facilities		
12	Cora Chain maintenance memues		

	Manpower
1.	Gynecologist (Mandatory)
2.	Pediatrician ** if not available to be hired
3.	Anesthetist * if not available to be hired
4.	Surgeon
5.	Paramedical Support Staff – (As per 20 bedded CHC norms)
	Staff Nurses (minimum 4)
	Lab technician-1
	Radiographer-1
	Compounder-1
	Dresser-1
	Cleaning Staff

Note: 1. The accredited institution will be considered for providing package of services under RCH/Janani Suraksha Yojana

2. While inspecting the institution please consider the work performance of the health institution for last years.

आवेदन-पत्र का प्रारूप

प्रति,

	सयुक्त र संयुक्त र संभाग मध्यप्रदेश	तंचालक कार्यालय,
	•	मातृत्व एवं शिशु स्वास्थ्य सेवाऐं प्रदान करने हेतु निजी एवं अशासकीय अस्पतालों की भागीदारी वेज्ञप्ति क्रमांक।
(1)		संस्था का नाम :
(2)		पता :
(3)		संस्था प्रमुख का नाम / पता :
(4)	1. 2. 3. 4. 5. 6. 7. 8. 9.	चिकित्सालय में उपलब्ध अधोसंरचना— कम से कम 10—12 शैय्याएं । अत्यंत दूरस्थ एवं दुर्गम स्थानों पर स्थित चिकित्सालय में 5—7 शैय्याएं। पूर्ण रूपे से सुसज्जित लेबर रूम नवजात शिशु देखमाल के लिये लेबर रूम एवं वार्ड के लिये पृथक स्थान पूर्ण रूप से सुसज्जित क्रियाशील आपरेशन थियेटर एक क्रियाशील पैथोलॉजी लेबोरेट्री जहां सभी सामान्य आवश्यक जांचें की जा रही हो। 24 घंटे पानी की सुविधा आपरेशन थियेटर, लेबर रूम, कोल्ड चैन को नियमित रूप से संचालित करने के लिये विद्युत् व्यवस्था। नियमित रूप से व्यवस्था बनाये रखने के लिये इन्वर्टर / जनरेटर की व्यवस्था। टेलीफोन सुविधा एम्बुलेंस सुविधा (स्वयं की अथवा स्थानीय किराये पर की गई व्यवस्था) भारत शासन के दिशा निर्देशों के अनुसार ब्लड स्टोरेज फेसीलिटी (वांछनीय)
(5)	1.	लय में उपलब्ध मानव संसाधन— स्त्री रोग विशेषज्ञ, निश्चेतना विशेषज्ञ, शिशु रोग विशेषज्ञ (यदि किसी संस्था में नियमित शिशु रोग विशेषज्ञ एवं निश्चेतना विशेषज्ञ नहीं है तो वह इन विशेषज्ञों को hire basis पर भी रख सकते है।) स्टाफ नर्स –4, लेब टेक्निशियन–1 एवं अन्य सहयोगी स्टाफ
(6)		ं देखे गये आउटडोर एवं इन्डोर रोगियों की संख्या, एवं कराये गये प्रसव। शिशु देखभाल एव गर्भपात तथा कराये गये सीजेरियन सेक्शन की पिछले 5 वर्षो की जानकारी
स्थान :		
दिनांकः		
		हस्ताक्षर :

AGREEMENT FOR PRIVATE/NGO HOSPITALS FOR DELIVERING EMERGENCY OBSTETRIC AND NEONATAL CARE

This DEED OF AGREEMENT is made on this	day	of
2006 between District Health Society, District		
(hereinafter called first party) and the private hospital owner /Hospital	run	by
NGO shall be called as second party herein.		

Responsibilities of Second Party

- 1. Second Party shall be providing delivery services both normal & complicated delivery to referred pregnant woman of BPL family along with postpartum care.
- 2. The quality services shall be provided as per the rates prescribed below: (inclusive of medicine & material cost)
 - i. Normal Delivery Rs. 1200/- per delivery It will mean stay in general ward from the date of admission to 3rd day post delivery. It shall include all services that are essential for safe labour, including attendance by doctor.
 - ii. MTP/Spontaneous Abortion -
 - (a) 8 weeks Abortion: Rs .500/-
 - (b) 8-12 Weeks Abortion: Rs. 750/-
 - iii. LSCS Rs. 5500/- per LSCS It shall include all expenses needed for safe conduct of LSCS including all processes required for closure and post operative attention in indoor for 7 days in general ward.
 - iv. Blood Transfusion Rs. 750/-
 - v. Care of New Born
 - vi. Baby Warmer RS. 50 per day
 - vii. Phototherapy Rs. 50 per day
 - viii. Pediatrician visit Rs. 50 per day
 - ix. Premature care Rs. 250 per day
- 3. The hospital authority shall keep separate information in a register for each service rendered for the patients for perusable format
- 4. Monthly reporting of the services provided as per the prescribed format by 5th of every month.
- 5. After agreement is signed, second party shall render surety / Bank guarantee against the amount of advances of Rs. 25000/- issued by first party.

- 6. Second party shall have all necessary arrangement to handle complicated obstetric cases referred by Chief Medical officers /Civil Surgeon or Medical Officers at CHCs & PHCs of the district 24 hrs. round the clock on all 7 days of week.
- 7. Second party will entertain all those BPL cases which are coming directly to them and also those cases which are being referred by Chief Medical officers /Civil Surgeon./Medical Officers of CHC & PHC.
- 8. Second party will give an undertaking that the services provided by them to the treated BPL cases were without any charge from these patients.
- 9. Postpartum checkup on 7th & 15th day shall be done free of charge.
- 10. If any complication arises during the treatment at institution of Second party, then further treatment, follow up & any legal matter arising out of treatments will be taken care of by the Second party.
- 11. Second party shall maintain a separate record for Janani Suraksha Yojana, as per the eligibility and this record should be forworded to concerned CMHO.
- 12. After expenditure of 75% of disbursed amount, second party shall apply for next installment to first party. Next installment shall be disbursed by first party after duly verification of record & achievement as per terms of agreement within 5 days of the application, through crossed checkup.
- 13. First party has full rights to inspect the institution run by SECOND party through state/ Divisional / Districts level officials as and when required and instructions given during inspection by the first party shall be binding by the Second party.
- 14. If it is found that second party is not rendering the services as per agreement then first Party has full rights to terminate the agreement. after giving 7 days notice to second party.
- 15. If it is found that the services rendered by second party is not qualitatively appropriate then first party has the right to curtail part of the payment of that particular case.
- 16. Termination of agreement could be done either side after giving one months notice

Responsibilities of First Party:

- 1. First party before referring the case to second party shall confirm BPL certificate which should be issued by CEO (Janpad) /CEO Jila (panchayat)/ Collector or Din Dayal Card issued by CMHO/BMO
- 2. First party shall ensure receipt of Bank guarantee against the advances disbursed to the second party.
- 3. The reimbursement shall be released on submission of utilization of 75% of the outstanding advance and after verification of achievement of activities by the CMHO within 7 days.
- 4. The services as required under this agreement to be provided by the second party shall be monitored by the officials of the District Health Society (CMHO) and Health & Family Welfare Dept., Govt. of M.P.

This term of contract shall remain in force for period of two years from the date of signing of agreement. For further agreement second party if willing shall apply for next term 3 months prior to expiry of existing agreement.

First party shall have full right to modify the terms of agreement of any time during the period of agreement with prior consultation between both parties.

In case if the second party, is aggrieved by the decision of first party, second party may file an appeal before the Director Public Health & Family Welfare and the decision of Director Public Health & Family Welfare M.P. will be final & binding on both parties.

In WITNESS WHEREOF both FIRST AND SECOND PARTY have signed this agreement on the date, month and year and place as mentioned.

ON BEHALF OF FIRST PARTY Secretary, District Health Society ON BEHALF OF SECOND PARTY Incharge/Director of Private Health Institution Authorized signatory

Witnesses Name, address & Signature	Witnesses Name, address & Signature
1.	1.

2.