



PHC MSDS Self-Assessment Checklist

GP, Family Physician and Specialist Clinics · 10 functional areas · 18 standards · 47 indicators

How to use this checklist

Walk through your clinic the way a Punjab Healthcare Commission (PHC) assessor would. For each indicator, tick **Met**, **Partly** or **Not met**.

RED indicators (25) need **100% compliance**: anything less than fully met counts as not met.

YELLOW indicators (22) need **at least 80%**. Indicators marked **N/A** apply only if you provide that service.

No.	Indicator	Category	Met	Partly	Not met
Responsibilities of Management (ROM)					
1	The clinic is identifiable with name and PM&DC registration number on a sign board.	RED	☐	☐	☐
2	Patient/client has easy access to the clinic.	YELLOW	☐	☐	☐
3	The clinic is registered/licensed with the PHC.	YELLOW	☐	☐	☐
4	Door plate clearly displays name and qualification/s of the doctor.	YELLOW	☐	☐	☐
5	Consultation hours are displayed.	RED	☐	☐	☐
6	The clinic manager has requisite qualifications.	RED	☐	☐	☐
7	PM&DC registration certificate of the doctor is displayed.	YELLOW	☐	☐	☐
8	Premises of the clinic are as per minimum requirement.	YELLOW	☐	☐	☐
9	Clinic has adequate facilities for the comfort of the patients.	YELLOW	☐	☐	☐
10	Clinic has adequate arrangements for the privacy of patients during consultation/examination.	RED	☐	☐	☐
Facility Management and Safety (FMS)					
11	The staff has knowledge about early detection and containment of fire and non-fire emergencies.	RED	☐	☐	☐

No.	Indicator	Category	Met	Partly	Not met
12	Arrangements to combat fire and non-fire emergencies are available at the clinic.	YELLOW	☐	☐	☐
Human Resource Management (HRM)					
13	Personal record/credentials of all staff of the clinic are maintained.	RED	☐	☐	☐
14	Performance evaluations are based on the job descriptions (JDs).	YELLOW	☐	☐	☐
Information Management Systems (IMS)					
15	Every patient's record has a unique identifier and particulars for identification.	YELLOW	☐	☐	☐
16	Only authorized person/s make entries in the record.	YELLOW	☐	☐	☐
Quality Assurance and Improvement (QA)					
17	A quality assurance system is in place.	YELLOW	☐	☐	☐
18	A quality improvement system is in practice.	YELLOW	☐	☐	☐
19	The clinic has enlisted the sentinel events to be assessed and managed.	RED	☐	☐	☐
Assessment and Continuity of Care (ACC)					
20	The services being provided at the clinic are displayed as per Code of Ethics.	RED	☐	☐	☐
21	The specialized services being provided conform to the standards. <i>(N/A if not provided)</i>	RED	☐	☐	☐
22	The use and maintenance of specialized equipment conform to the standards. <i>(N/A if not provided)</i>	RED	☐	☐	☐
23	The laboratory services, if provided, conform to the respective standards. <i>(N/A if not provided)</i>	RED	☐	☐	☐
24	The radiological/imaging diagnostic services, if being provided, conform to the respective standards. <i>(N/A if not provided)</i>	RED	☐	☐	☐
25	Health education is provided as per guidelines.	YELLOW	☐	☐	☐

No.	Indicator	Category	Met	Partly	Not met
26	The preventive services are provided as per guidelines.	YELLOW	☐	☐	☐
27	The clinic has established registration and guidance process.	RED	☐	☐	☐
28	Standard/ethical clinical practice is evident from patient's medical records.	YELLOW	☐	☐	☐
29	The clinic has referral SOPs.	RED	☐	☐	☐
30	The clinic has list of contact numbers of the referral facilities, medico legal authorities, concerned police stations, ambulance/rescue services and social services organizations.	RED	☐	☐	☐
Care of Patients (COP)					
31	The clinic has essential arrangements to cater for emergency care.	RED	☐	☐	☐
32	The policy regarding home visit is portrayed and accordingly catered for. <i>(N/A if not provided)</i>	YELLOW	☐	☐	☐
Management of Medication (MOM)					
33	Standards for prescription writing are followed.	RED	☐	☐	☐
34	Prescriptions are clear, legible, dated, timed, name stamped and signed.	YELLOW	☐	☐	☐
35	Prescriptions are provided to the patients.	YELLOW	☐	☐	☐
36	Medicines are stored as per guidelines.	YELLOW	☐	☐	☐
37	Expiry dates/shelf life are checked prior to dispensing, as applicable.	RED	☐	☐	☐
38	Labelling requirements are implemented.	RED	☐	☐	☐
39	Dispensing is done by an authorized person.	RED	☐	☐	☐
40	Adverse drug reaction/s (ADRs) are reported.	RED	☐	☐	☐
Patient Rights, Responsibilities and Education (PRE)					
41	The doctor obtains consent from a patient before examination.	YELLOW	☐	☐	☐

No.	Indicator	Category	Met	Partly	Not met
42	The clinic has listed those situations where specific informed consent is required from a patient or family.	RED	☐	☐	☐
43	The patient/family is informed about the costs of treatment.	RED	☐	☐	☐
44	Patients and families have a right to refuse the treatment.	RED	☐	☐	☐
45	Patients and families have a right to complain and there is a mechanism to address the grievances.	RED	☐	☐	☐
46	The HCE Charter is displayed and patients/families are guided.	YELLOW	☐	☐	☐
Infection Control (IC)					
47	The clinic has arrangements for infection control.	YELLOW	☐	☐	☐

Your score

RED indicators fully met _____ / 25 (fewer if some are N/A)

YELLOW indicators at 80% or more _____ / 22

Indicators still to fix _____

Want the score worked out for you?

The UPMED MSDS Dashboard shows what the assessor checks for every indicator, scores your clinic automatically, lists the RED and YELLOW indicators still to fix, and gives you 61 ready-to-print registers and forms with filled examples.

Free demo: upmed.net/msds-dashboard · Guides for every indicator: upmed.net/msds · WhatsApp 0304 2397393