

SUPPLEMENTARY MATERIAL

Table 1. List of objective elements which were achieved by all the facilities

Sl.No.	Name of Objective Element	Achievement (% of facilities)
COP.4.a	Care of patient is in consonance with the documented procedures.	100%
COP.8.d	Qualified persons are permitted to perform the procedures that they are entitled to perform.	100%
MOM.1.e	Documented procedures address procurement and usage of implantable prosthesis.	100%
PRE.1.c	Patient rights include treating patient information as confidential.	100%
PRE.1.f	Patient rights include information on the expected cost of the treatment.	100%
PRE.1.g	Patient has a right to have an access to his / her clinical records.	100%
ROM.2.b	The leaders/management guide the organization to function in an ethical manner.	100%
ROM.2.d	The organization's billing process is accurate and ethical.	100%
IMS.1.b	Organization identifies those authorized to make entries in medical record.	100%
IMS.2.c	Operative and other procedures performed are incorporated in the medical record.	100%
IMS.2.f	Care providers have access to current and past medical record.	100%
IMS.3.b	Privileged health information is used for the purposes identified or as required by law and not disclosed without the patient's authorization.	100%

Table 2. List of objective elements which were most commonly not achieved by the facilities (ie. the most common non-compliances)

Sl.No.	Name of Objective Element	Achievement (% of facilities)
MOM.2.c	Medication orders are clear, legible, dated and signed.	36%
IMS.1.d	The author of the entry can be identified.	39%
AAC.7.e	Discharge summary incorporates instructions about when and how to obtain urgent care.	39%
COP.7.e	Informed consent for administration of anaesthesia is obtained by the anaesthetist.	39%
AAC.3.a	The organization defines the content of the assessments for in-patients and emergency patients.	43%
AAC.5.c	Laboratory results are available within a defined time frame and critical results are intimated immediately to the concerned personnel.	46%
COP.8.b	An informed consent is obtained by a surgeon prior to the procedure.	46%
IMS.1.c	Every medical record entry is dated and timed.	50%
CQI.2.a	Organization shall identify the appropriate key performance indicators in both clinical and managerial areas.	50%
COP.7.d	An immediate preoperative re-evaluation is documented.	50%

Table 3. Distribution of non-compliances by facility characteristics

Facility characteristics		Number of non-compliances (% of Total)										Total number of non-compliances	Average non-compliances per facility
		Chapter 1	Chapter 2	Chapter 3	Chapter 4	Chapter 5	Chapter 6	Chapter 7	Chapter 8	Chapter 9	Chapter 10		
State	Jharkhand	28 (25%)	26 (24%)	14 (13%)	3 (3%)	7 (6%)	6 (5%)	3 (3%)	10 (9%)	4 (4%)	9 (8%)	110	22
	Maharashtra	34 (20%)	31 (18%)	27 (16%)	2 (1%)	14 (8%)	5 (3%)	4 (2%)	24 (14%)	9 (5%)	22 (13%)	172	22
	Uttar Pradesh	94 (17%)	139 (25%)	78 (14%)	13 (2%)	35 (6%)	22 (4%)	21 (4%)	59 (11%)	46 (8%)	42 (8%)	549	37
Number of beds	≤50	141 (19%)	168 (22%)	108 (14%)	16 (2%)	51 (7%)	31 (4%)	25 (3%)	83 (11%)	58 (8%)	67 (9%)	748	30
	>50	15 (18%)	28 (34%)	11 (13%)	2 (2%)	5 (6%)	2 (2%)	3 (4%)	10 (12%)	1 (1%)	6 (7%)	83	28
Monthly delivery load	<20	40 (17%)	59 (25%)	35 (15%)	2 (1%)	18 (8%)	8 (3%)	9 (4%)	23 (10%)	22 (9%)	21 (9%)	237	26
	20-50	82 (19%)	95 (22%)	62 (14%)	14 (3%)	23 (5%)	22 (5%)	15 (3%)	50 (11%)	35 (8%)	40 (9%)	438	31
	>50	34 (22%)	42 (27%)	22 (14%)	2 (1%)	15 (10%)	3 (2%)	4 (3%)	20 (13%)	2 (1%)	12 (8%)	156	31
Type of facility	Exclusive maternity facility	66 (19%)	65 (18%)	57 (16%)	8 (2%)	27 (8%)	15 (4%)	9 (3%)	41 (12%)	26 (7%)	38 (11%)	352	32
	Multi-specialty facility	90 (19%)	131 (37%)	62 (13%)	10 (2%)	29 (6%)	18 (4%)	19 (4%)	52 (11%)	33 (7%)	35 (7%)	479	28