#### TERMS OF REFERENCE

## GAP ANALYSIS OF SELECT PUBLIC HEALTH FACILITIES

### **BACKGROUND**

Going forward on its mission for quality improvement (QI), such as the internal mechanism of QI built through Health Systems Improvement Team (HSIT) operating under the guidance of District Program Coordinator (DPC), under the World Bank financed project, RHSDP plans to undertake an independent external evaluation at a broader level in all more than 100 bedded hospitals of the State. The project in this regard envisages undertaking a detailed Gap Analysis against a set of National Standards so as to develop a detailed baseline report. The proposed gap analysis will be undertaken in 44 hospitals of the State (including project and non-project hospitals) with respect to Indian Public Health Standards (IPHS). IPHS provides/ defines standards for infrastructure, human resource, service delivery requirements for various types of public healthcare facilities in the country.

This study, undertaken as a part of the World Bank extension project, has been envisaged to serve as a baseline for the State or NRHM to address the funding requirements and enhance capacity of the hospitals in the long term in a planned manner.

#### SCOPE OF WORK:

A detailed Organizational Survey of the selected healthcare facilities for Gap Analysis with respect to relevant Indian Public Health Standards (IPHS) for the select category of healthcare facility.

### SPECIFIC OBJECTIVE

The objective of the Gap Analysis is to get a detailed report on the current gap in the select hospital as against the applicable IPHS for the following 44 hospitals including 40 project facilities (100 bedded & above) and 4 non project facilities (also 100 bedded & above). The details of project facilities are as follows:

s.no.	Hospital Size	Numbers	
1.	100 bedded	12	
2.	150 -175 bedded	19	
3.	300 beds & above	9	
4.	Non-project hospitals (100-150 beds)	4	
	Total number of hospitals	44	

The details of the project facilities are as follows:

S.No.	District Name	Facilities Name	Number of Beds	S.No.	District Name	Facilities Name	Number of Beds
1	Ajmer	Kishangarh	100	21	Jaipur	Jaipur	150
2	Ajmer	Nasirabad	100	22	Jaipur	Kotputli	150
3	Barmer	Balotra	100	23	Jaisalmer	Jaisalmer	150
4	Chittorgarh	Nimbaheda	100	24	Jaloer	Jalore	150
5	Churu	Ratangrah	100	25	Jhunjhunnu	Jhunjhunnu	150
6	Churu	Sujangarh	100	26	Karoli	Karoli	150
7	Dausa	Dausa	100	27	Nagaur	Nagaur	150
8	Dungarpur	Sagwara	100	28	S.Madhopur	S.Madhopur	150

9	Nagaur	Didwana	100	29	Sirohi	Sirohi	150
10	Pali	Sojat	100	30	Tonk	Tonk	150
11	Rajsamand	Rajsamand	100	31	Churu	Churu	175
·12 ·	Udaipur	Salumber	100	32	Ajmer	Beawer	300
13	Baran	Baran	150	33	Alwar	Alwar	300
14	Barmer	Barmer	150	34	Banswara	Banswara	300
15	Bundi	Bundi	150	35	Bharatapur	Bharatapur	300
16	Chittorgarh	Chittrogarh	150	36	Bhilwara	Bhilwara	300
17	Chittorgarh	Pratapgarh	150	37	Ganganagar	Ganganagar	300
18	Dholpur	Dholpur	150	38	Pali	Pali	300
19	Dungarpur	Dungarpur	150	39	Sikar	Sikar	300
20	Hanumangarh	Hanumangarh	150	40	Jhalawar	Jhalawar	500

The non-project facilities Include:

- 1. Satellite Hospital, Bikaner-100 beds
- 2. Jaipuria Hospital, Jaipur-100 beds
- 3. District Hospital Rampura, Kota-100 beds
- 4. Hiran Magri Satellite Hospital, Udaipur-beds

### **OUTLINE OF TASKS**

The consulting will be responsible for the completion of following tasks:

- a) Familiarize themselves with relevant IPHS standards.
- b) Undertake field visits to the facilities to undertake gap analysis through review of documents, assess the manpower, equipment, infrastructure, clinical and support processes including training and capacity building activities, legal compliances etc.

# **DURATION OF STUDY**

The analysis and report for all hospitals should be completed within 1 year of award of work.

### **DELIVERABLES**

- a) The analysis should be submitted in the form of a comprehensive report in word format for each individual facility
- b) Wherever required/ applicable in the report (process description and gap analysis) illustrative photographs/ scanned copy of relevant documents/ forms/ formats should be appended to reinforce the point.
- c) Both hard (4 in number) and soft copy (doc and pdf format) of the report should be submitted for each facility

### INPUTS FROM THE CLIENT

a) Directions to all District Project Co-ordinators and Facility in-charges/PMOs to extend their full co-operation to the study team at their respective institutions

## SKILLS REQUIRED

- a. Understanding of health sector
- b. 5 years of experience in health sector for having undertaken similar exercises
- c. Turn over more than INR 5 crores annually
- d. Details of Annual turnover per year in last three years

### PAYMENT SCHEDULE

- 1. 10% as advance against submission of bank guarantee of an equivalent amount
- 2. 10% after delivery of draft report for one hospital, its presentation at PIU and incorporation of the suggestions in the report
- 3. 10% on delivery final reports of 10 hospitals.
- 4. 20% on delivery for final reports of another 10 hospitals
- 5. 20% on delivery for final reports of another 10 hospitals
- 6. 30% on delivery for final reports of rest 14 hospitals, presentation & submission of the final study report and its approval by the project