

REPORT

ON

15th NATIONAL cum 2nd REGIONAL EXTERNAL ASSESSORS' TRAINING FOR NATIONAL QUALITY ASSURANCE STANDARDS

27th January 2020 to 31st January 2020



2nd Regional cum
15th National External Assessors' Training for
National Quality Assurance Standards
Organized by
Regional Resource Centre For NE States
(Branch of National Health Systems Resource Centre)
Date : 27th - 31st January, 2020



Venue : Indian Institute of Bank Management, Khanapara, Guwahati-781022

Organized by
Regional Resource Centre for North Eastern States
(Branch of NHSRC, MoHFW, GoI, New Delhi)
Venue: IIBM, Khanapara, Guwahati, Assam

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I. INTRODUCTION

Under National Quality Assurance Programme, assessment of the facilities for NQAS Certification is required to be undertaken by empanelled External Quality Assessors who have undergone 5 (Five) days training successfully and meet the qualification requirement as given in 'Operational Guidelines for Quality Assurance in Public Health Facilities'. With increasing number of health facilities for the NQAS and LaQshya External Assessments, there is need to increase the pool of NQAS External Assessors. Number of external assessors in the NE region is very less. To increase the pool of External Assessors in the NE states in particular and rest of country in general, second Regional External Assessors' Training was organized by Regional Resource Centre for NE States (Branch of NHSRC, MOHFW, GOI, New Delhi) supported by QI Division, NHSRC, New Delhi at IIBM, Jawaharnagar, Khanapara, Guwahati, Assam from 27th -31st January, 2020. Total of 70 participants took part in the training. The training curriculum was designed to equip the participants with knowledge and information required to conduct assessment at DH, SDH, CHC, 24x7 PHC & Urban PHC of India.

The report details about the way the five days training was undertaken, learning sessions and the direction towards improving the quality of the public health facilities in India. The training was conducted with mixed methods like Power point presentations, Brainstorming sessions, Case studies, Group work and Group Presentations, Questions and Answer Rounds, Practical Experiences sharing from Field Visit

The Study materials were provided to all the participants. The sessions were divided into four days and consisted of elaborate sessions describing standards, measurable elements, check points and all areas of concern as mentioned in the Operational Guidelines. A Field visit was conducted at two of the district hospitals at Guwahati. The field visit provided the participants a platform for practical learning experience on conducting hospital assessments using NQAS Checklist.

II. AIM AND OBJECTIVES OF TRAINING

AIM

The aim of the training was focussed upon strengthening the capacities of the participants on knowledge, skills and assessment on Operational Guidelines for Quality Improvement.

OBJECTIVES

- A.** Preparing participants with knowledge of key concepts, tools and methodologies of Quality improvement.
- B.** Development of the skills and expertise to undertake Assessment as per the National Accreditation System proposed under Quality Assurance Programme.

III. PREPARATION

The course curriculum was designed by NHSRC. The training was conducted for five days and consisted of detailed sessions with descriptions on Standards, Measurable Elements, check points and all Areas of Concern as mentioned in the Operational Guidelines. A field visit was also undertaken in two of the hospitals in District Hospital, Sonapur & Mahendra Mohan Choudhury Hospital, M.G, Road, Fancy Bazar, Guwahati on 30th January 2020. The purpose of the field visit was to provide the participants a platform to conduct assessments.

The Study materials were distributed to the participants as followings:

- a. A bag with writing pad, pen, pencil, sharpener & eraser.
- b. Operational Guidelines for Quality Assurance in Public Health Facilities.
- c. Assessors Guidebook for Quality Assurance in District Hospital Volume I
- d. Assessors Guidebook for Quality Assurance in District Hospital Volume II
- e. Assessors Guidebook for Quality Assurance in CHC
- f. Assessors Guidebook for Quality Assurance in PHC
- g. Quality Standards for Urban Primary Health Centres.
- h. Guidelines for Implementation of Kayakalp Initiative.
- i. Award to Public Health Facilities – Kayakalp.
- j. Labour Room Quality Improvement Initiative - LaQshya.
- k. National Quality Assurance Standards for Public Health Facilities
- l. Guideline for Swachh Swasth Sarvatra

IV. METHODOLOGY

The following mixed methods were used in conducting External Assessors Training under Quality Assurance

- a. Power point presentations
- b. Brainstorming sessions
- c. Case studies
- d. Group work and Group Presentations
- e. Questions and Answers
- f. Practical Experiences from Field Visit

V. INAUGURAL AND WELCOME ADDRESS

At the very outset, **Dr. Suchitra, Sr. Consultant, QI, RRC NE** welcomed Dr Madhulika Jonathan, Chief of field office, UNICEF; Dr. Parminder Gautam, Sr. Consultant-QI, NHSRC, Dr Arvind Srivastava, Consultant, QI, NHSRC, state nominated participants from all NE states and Bihar & the private participants to the second Regional External Assessors' Training for National Quality Assurance Standards (NQAS) which is organized by Regional Resource Centre for North East States in collaboration with National Health System Resource Centre. She also shared the vision and mission of RRC NE in general and Quality improvement division in particular. She explained that External Assessors' Training is the highest level of training under National Quality Assurance program which is also recognized by international body ISQAU (International Society for Quality in Health Care).

It was then followed by a welcome address by **Dr. Ashoke Roy, Director RRC NE**. He welcomed Dr. Madhulika Jonathan, Chief of field office, UNICEF; Dr. Parminder Gautam, Sr. Consultant – QI, NHSRC, Dr. Arvind Srivastava, Consultant – QI-NHSRC, all participants from the NE states, Bihar and all private participants. He expressed that he hope everyone have enriching learning experience during this five days training program.



Welcome address by Dr. Ashoke Roy, Director, RRC-NE

Dr. Madhulika Jonathan, Chief of Field Office, UNICEF formally inaugurated the Second Regional External Assessors Training for National Quality Assurance Standards (NQAS). She mentioned that it is very important to understand NQAS and its core value. She emphasized whenever assessor visit any facility they should ensure that core entitlements for mother and children in particular are addressed with highest quality. She said while coverage has been achieved we should urge for Quality of services in health care facilities as poor quality will compromise not only the patient, but it will also bring risk to the doctors and other health care providers.



Inaugural address by Dr. Madhulika Jonathan, Chief of Field Office, UNICEF

Dr Jonathan highlighted once again that the programme is a globally recognized and accepted programme. She informed the house that institutional delivery of Assam is increase from 38.7% to 78.9% as per NFHS IV which indicates that women are getting access to the health facilities and now Quality of service is the need of the time. That is why such training is essential and she encouraged the participants to have learning attitude during the sessions.

Dr. Jonathan said that UNICEF has partnership with NHSRC and RRC-NE with a goal to bring quality to the facility and ended her speech by saying **SLOW CHANGE IS IRRELEVANT** and urge the participants to take up the challenges to bring about the changes quickly and effectively.

Dr. Parminder Gautam, Sr. Consultant, QI, NHSRC gave the key note address of the training programme. He expressed his gratitude to Dr. Ashoke Roy, for his dedication and support in this training programme and also appreciated the effort of RRC-NE QI team. He considered UNICEF to be the most matured developmental partner to work with as they believe in working with people, with the system, for the people. He thanked Dr. Madhulika Jonathan and her team for the support provided in LaQshya Certification of the health facilities. He also mentioned that UNICEF team is the integral part in the process of conceptualizing NQAS particularly for SNCU and NBSU part. He pointed out that even though the Institutional delivery of Assam has been increased from 38% to 78% as per NFHS IV, there is no proportionate decrease in MMR and neonatal mortality rate. In low and middle income group country, 60% of the preventable death are not because of the lack of services but because of poor quality. Dr. Parminder Gautam gives a brief orientation about the training programme and the post training evaluation and ended his key note speech by saying **IT IS CONTINUOUS LEARNING, EXAMINATION IS NOT THE END OF THE TRAINING.**



Key Note Address Dr. Parminder Gautam, Sr. Consultant, QI, NHSRC

It was then followed by round of introduction in which the participants were requested to introduce brief about themselves and their expectations. Most of them responded that they intend to expand their knowledge in the field of Quality Improvement for Health Facilities.

Dr. J. N. Srivastava, Advisor, QI NHSRC delivered his keynote address through Skype to the participants as he was not able to attend the training due to unexpected urgent requirement in remote district of Uttar Pradesh. He mentioned that the

Government has been very keen for improving the quality of care. Also he pointed out that with the launch of NRHM, there is significant contributions in strengthening the health system of the country in terms of Maternal Health, Child Health, different health schemes, financial protection like JSK and JSSY, but still unable to improve the outcome indicators. Then it was realized that quality is essential to improve our health indicators. He told that poor quality of health services results to high negative outcome as per recent Lancet Global Health Commission report on High Quality Health Systems in SDG era, 2018. He informed the house that due to poor quality of services in health, around 15.99 lakh people have died which could have been prevented. He in his deliberation stressed upon significance of holistic aspect of NQAS in Public health facilities for making it more meaningful and sustainable & also focussed upon LaQshya initiative which endeavour for Quality Improvement of Labour Room and Maternity OT.



Key Note Address Dr. J. N. Srivastava, Advisor, QI NHSRC

Felicitation:



Felicitation of the respected dignitaries on the dais.

Vote of Thanks:



Dr. Suchitra Rajkumari, Sr. Consultant-QI, RRC-NE delivered vote of thanks to the house. She thanked Dr Madhulika Jonathan for gracing the occasion, Dr J. N. Srivastava for his encouraging and motivating words, all the resource persons from NHSRC- Dr Parminder Gautam, Ms. Vinny Arora, Dr. Sushant Agrawal, Dr Arvind Srivastava, Dr Upasna Naik from MOHFW, Dr Sridhar from UNICEF, Dr Joydeep Das from Jhpiego, Dr Rohini from NHM Assam, all State participants from NE States and Bihar and all the private participants. Also she thanked RRC-NE QI team and all administrative staffs of RRC-NE led by Dr Ashoke Roy, Director RRC-NE.

VI. TECHNICAL SESSIONS

DAY 1

Session 1: Overview of Public Health System & Introduction to National Quality Assurance Program for Public Health facilities, delivered by Dr. Ashoke Roy, Director, RRC NE. At the beginning of the session he explained about establishment of RRCNE and NHSRC, the broad objectives, themes & core mandate and various divisions in NHSRC/RRC-NE. He expressed that community support/participation is very important, without the public support any programme cannot be successful. He pointed that the assessor should have knowledge about control of local disease profile with appropriate treatment, provision of drugs and diagnostic & healthy lifestyle promotion. He told that Govt. Health system is more or less reproductive and child health centric, but now NCD burden cannot be ignored anymore as 60% of mortality is due to NCDs.

Dr. Roy also shared about ISQua accreditation of National Quality Assurance Standards which is valid till 2022. He explained that quality concerns can be addressed under the quality framework which is efficient, effective, safe, equitable, responsive and benchmarked & how to meet these expectations. He explained the difference of Quality Control, Quality Assurance and Quality Improvement. He also spoke about the training protocol, Group work & participation, evaluation, commitment for undertaking assessments.



Dr. Ashoke Roy, Director, RRC NE delivering session on Overview of Public Health System & Introduction to National Quality Assurance Program

Session 2: Key concept of Quality and terminology

The second session of the Day 1 was on the **Key Concept Of Quality And Terminology**. The session was delivered by Dr Parminder Gautam - Sr. Consultant, QI Division, NHSRC, New Delhi. He started his session with short explanation on the rules of the training and examination followed by discussion on definition of quality, all the participant shared their own understanding and idea towards Quality.

He talked about the 8 (Eight) areas of concern and the standards under these 8 areas of concern. The session built the capacity of the participants in understanding the programme as well as the area of concern.

Dr Parminder Gautam told that Maternal OT was added in the checklist and he also mentioned that there is some flexibility to the States to make amendment as per their requirement and suggest the assessor to ask the facility if there is any customized checklist during their assessment. He shared the house that they are in the process of developing Patient Safety Operational Guidelines.

He explained the Donabedian model of structure, process and outcome, PDCA, Juran Trilogy for Quality management – Quality planning, Quality Control and Quality Improvement. While presenting overview, he told about the history of Quality Assurance Programme and briefed the participants on the eight key features of the programme mentioned below:-

- a) Unified Organizational Framework
- b) Explicit Measurement System
- c) Flexibility of adopting as per state's need
- d) Training & Capacity Building
- e) Continuous Assessment and scoring
- f) Inbuilt Quality Improvement Model
- g) Certification at State & National Level
- h) Incentives on Achievement and Sustenance



Dr Parminder Gautam- Sr. Consultant, QI Division, NHSRC delivering session on Key Concept of Quality and Terminology

Session 3: National Quality Assurance Standards

The session was delivered by **Dr Arvind Srivastava - Consultant, QI Division, NHSRC**, New Delhi. He explained the key 4 (Four) terminology in NQAS i.e., Area of concern, Standard, Measurable element and Checkpoints and the relationship among these four key points. He explained all the 74 Quality Standards under NQAS & Measurable Elements, specific to each level of the health facilities from DH, CHC, PHC, and UPHC.

It was then followed by Group activity on NQAS in which small paper written with a gap statement is distributed to each participant and they were asked to identify the area of concern, standards & measurable elements. Accordingly eight groups were formed as per the eight areas of concern. All the group members were then made to sit together.



Dr Arvind Srivastava - Consultant, QI Division, NHSRC delivering session on National Quality Assurance Standards

Session 4: Measurement system and Assessment protocol

The session was delivered by **Dr. Parminder Gautam - Sr. Consultant, QI Division, NHSRC**. According to Dr. Gautam, Quality is about changes that make us do changes in the process that help to improve our outcome and satisfied the need of the internal and external clients to make the process enjoyable for the doer. And his definition of measurement is that it is applying/assigning number to object or process according to a set of rules.

He explained the four assessment methods and the golden rules for scoring full compliance (2), partial compliance (1) and noncompliance (0). He also emphasized to triangulate the findings assessed through one assessment method by other methods as well. He also gave an overview of the checklists in various levels of health facilities (DH/SDH/CHC/PHC/UPHC).



Dr Parminder Gautam- Sr. Consultant, QI Division, NHSRC delivering session on Measurement system and Assessment protocol

Session 5: Assessment of Area of Concern A- Service Provision

The session was delivered by Dr. Arvind Srivastava - Consultant, QI Division, NHSRC, New Delhi. His presentation started with recap of previous sessions. Dr. Arvind explained the 6 standards under Area of concern (A) Service Provision which are as follows:

- | | |
|--------------------------|---------------------------------|
| i. Curative services | iv. National Health Programs |
| ii. RMNCH+A services | v. Support services |
| iii. Diagnostic services | vi. Services as per local needs |



Dr Arvind Srivastava - Consultant, QI Division, NHSRC delivering session on Assessment of Area of Concern A- Service Provision

Session 6: Assessment of Area of Concern B – Patients Right

The session was delivered by Dr. Parminder Gautam - Sr. Consultant, QI Division, NHSRC. He explained the second area of concern (B) which is Patient's Right. In this context, he explained the patient right standards in context of IAPFFE

- I – Information
- A – Accessible
- P – Physical Access
- P – Privacy
- F – Free services
- E – Ethical issue

The 6 (Six) standards under Area of Concern Patient Rights as explained by Dr. Parminder are narrated below:-

- i. B1 Information
- ii. B2 Accessibility
- iii. B3 Privacy and Confidentiality
- iv. B4 Informing the patients about treatment
- v. B5 Free Services
- vi. B6 Ethical issues

After his session, each group was given a situation and they were asked to review the situation and identify the related standards as home assignment. The groups were asked to present the same on the 2nd day of the training i.e. on 28th January 2020.



Dr Parminder Gautam- Sr. Consultant, QI Division, NHSRC delivering session on Assessment of Area of Concern B – Patients Right

Day 2:-

Recap & Quiz on Area of Concern A & B:

The Second day of the training started with recap and quiz on area of concern A & B and that was undertaken by **Sh. Anupjyoti Basistha, Consultant-QI, RRC-NE, Guwahati**. The participants enthusiastically participated in the session. The objective of the quiz was to refresh the learning of the previous sessions.



Recap & Quiz on Area of Concern A & B taken by Shri Anupjyoti Basistha, Consultant-QI, RRC-NE

Following recap & Quiz session, **Dr. Parminder Gautam, Senior Consultant-QI** facilitated discussion on exercise on area of concern B. Each group was asked to identify the Standards/Measurable Elements for the situation provided to each group on previous day. Each group made the presentation and explained the various standards which are relevant for that situation. It was a good practical example to understand the standards.

Session 1: Assessment of area of concern E (Standard E10 – E16) Specific clinical processes.

The first session of the Day 2 was delivered by **Dr. Parminder Gautam, Senior Consultant-QI**. The session was on Assessment of area of concern E (Standard E10 – E16) Specific clinical processes.

Dr. Parminder explained the standards citing various examples from his clinical experience. He mentioned that Accident & Emergency department can make and break the image of the hospital. He then explained about pre analytical errors – Patient fasting, stress and anxiety, smoking, time and post analytical errors – All the process should be in place and according to protocols.

He covered the 7 (Seven) Standards from E 10 to E 16 as narrated below –

- E10** - Intensive Care
- E11** - Emergency Services
- E12** - Diagnostic Service
- E13** - Procedure for Blood bank storage management/transfusion
- E14** - Defined & established procedure for Anesthetic services
- E15** - Defined & established procedure for OT services
- E16** - Defined & established procedure for end of life care and death



Dr Parminder Gautam- Sr. Consultant, QI Division, NHSRC delivering session on Assessment of area of concern E - Specific clinical processes.

Session 2: Assessment of Family Planning Services (E21)

The second session of Day 2 was delivered by **Dr. Upasna Naik, MOHFW**. Dr. Upasna shared that the Family Planning Programme is the oldest programme; the programme is unique and it is the only programme which is under the legal lens of Supreme Court. She told that three figure i.e. Demand, Services And Commodities all these figures have to go hand in hand to provide FP services. She then elaborated the family planning services in terms of 8 (Eight) areas of concern as per NQAS. The key discussion points of the session are as follows:-

- i. **Service Provision:** Different baskets of contraceptive (temporary and permanent) available were explained in context of level of health facilities (DH to SC). She told that sterilization must be conducted only in the facility with a functional OT. She also explained about the fixed day services and static day services. New initiatives under Family Planning such as Mission Parivar Vikash, unified software, new contraception packaging and new FP media Campaign were also explained.
- ii. **Patient Rights:** IEC material, compensation packages, display of available services was discussed.
- iii. **Inputs:** Adequate infrastructure, patient amenities, Training of the staff and empanelment to DQAC committee, FP Commodities and supply, equipment and instruments.
- iv. **Support Service:** Maintenance of FP equipments, procedure for storage, inventory management of FP commodities, FEFO was discussed.
- v. **Clinical Service:** Eligibility criteria for sterilization client, mandatory documents like consent form, post operative discharge card, sterilization certificate, were discussed.
- vi. **Infection Control:** She explained the processing of laparoscope and maintaining log chart.
- vii. **Quality Management:** She explained about the composition of SQAC and DQAC, FP Indemnity Subcommittee, Death Audit for deaths attributable to sterilization.
- viii. **Outcome:** Number of service delivered, number and rate of Deaths attributable to Sterilization, counseling and client satisfaction score.



Dr. Upasna Naik, MOHFW delivering session on Assessment of Family Planning Services

Session 3 - Assessment of Area of Concern C- inputs

The session was delivered by **Dr Suchitra, Sr. Consultant, QI, RRC- NE**. Before starting her presentation she recaps the previous session lecture and interacts with the participants. She explained donabedian model of Quality of Care in regard to eight areas of concern. She also talked about IPHS standards and explained how it differs from NQAS standards. She then explained all the seven standards under area of concern C-Inputs as mentioned below:

- C1** Infrastructure and Space
- C2** Physical Safety of the infrastructure
- C3** Fire Safety & other disaster
- C4** Qualified & trained staff (Human Resource)
- C5** Drugs and Consumables for assured services
- C6** Instrument and Equipment
- C7** Competence & performance of staff



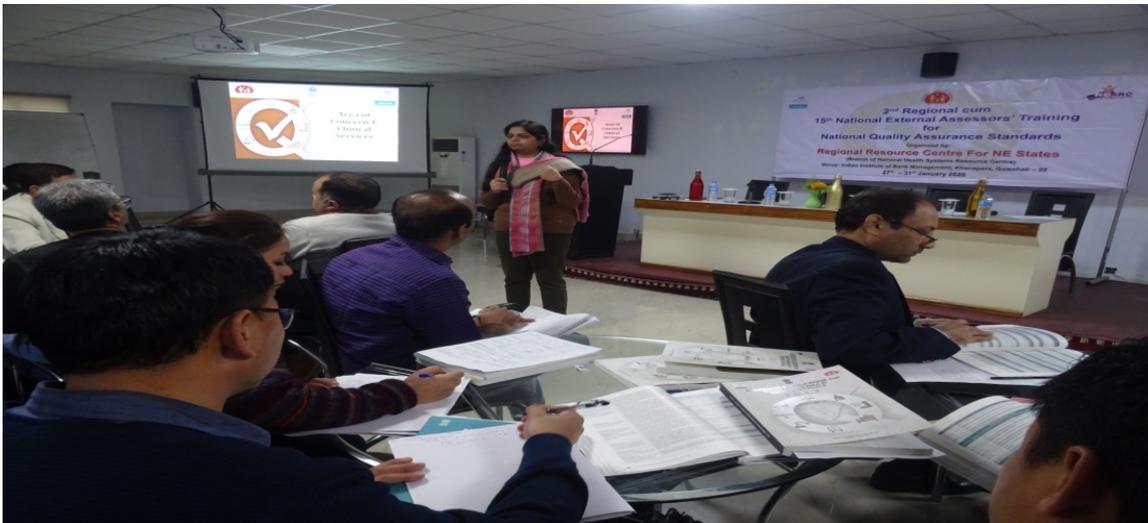
Dr Suchitra, Sr. Consultant, QI, RRC- NE delivering session on Assessment of Area of Concern C- input

Session 4 – Assessment of Area of concern D – Support Service

The session was delivered by **Ms. Vinny Arora, Consultant, QI, NHSRC**. She mentioned that hospital has defined and established procedure for financial Management. Job description of all staffs should be defined and assigned. She also said that during the assessment of facility the accessor should check the calibration of the equipments through measurement of the equipment because some facility just kept for documented purpose. Operating instruction of equipments is needed to display and sensitized according to how it needs to be used. Standard D6 – she said that checklist can be customized according to state scenario for diet supply in the facility.

Ms Vinny Arora explained the role of support services in the facility and mentioned all the 12 Standards under this area of concern with examples:

- D1** Inspection, testing & maintenance & calibration of measuring equipment
- D2** Procedure for storage inventory management & dispensing of drugs in pharmacy
- D3** Safe secure & comfortable environment to staff patients & visitors
- D4** Maintenance & upkeep
- D5** 24x7 water & power back up
- D6** Dietary service as per service provision & nutritional requirements
- D7** Clean linen to the patients
- D8** Public participation, management of hospital transparency & accountability
- D9** Financial Management
- D10** Statutory & regulatory requirement as per local, State & Central govt.
- D11** Role & responsibility of administrative & Clinical staff as per govt. rules
- D12** Monitoring Quality of outsourced service



Ms. Vinny Arora, Consultant, QI, NHSRC delivering session on Assessment of Area of concern D – Support Service

Session 5: Assessment of Area of Concern “E” – Maternal and Child Health Services : (E17- 20 & 22)

The session was delivered by **Dr. Sridhar Ryavanki, Health Officer, UNICEF**. He shared that his main objective of his presentation is to introduce the participants about the different protocols and guidelines related to RMNCH+A services issued by MOHFW. He explained the Standards for RMNCH+A Services - E17 to E20 and E22. He talk about the management of different stages of labour and explained how to plot the Partograph, interpretation of the graph and protocols of AMTSL, he told that for uterotonic drugs no other drugs should be administered other than inj.Oxytocin, but in case of home delivery the ASHA can give Misoprostol and in those district where inj. Oxytocin is not available.



Dr. Sridhar Ryavanki, Health Officer, UNICEF delivering session on Assessment of Area of Concern “E” – Maternal and Child Health Services (E17- 20 & 22)

Session 6: LaQshya – Labour Room Quality Improvement Initiatives

The session was taken by **Dr. Rohini Kumar, State Quality Consultant, NHM, Assam**. Dr. Rohini spoke about LaQshya’ programme and said the programme aims at improving quality of care in labour room and maternity Operation Theatre (OT). She mentioned that after NHM was launched the number of institutional delivery has increased but the maternal and newborn mortality, morbidity has not reduced so the goal of LaQshya programme is to reduce preventable maternal and newborn mortality, morbidity and stillbirths associated with the care during Intrapartum and immediate post natal period.

She talked about criteria for achieving LaQshya certification, its scope, institutional arrangement, incentivisation and JSSK programme. She then spoke of critical component of Labour Room and Maternal OT assessment in regard to 8 areas of concern as per National Quality Assurance Standards. Dr. Rohini explained about the various procedures of checking the Infrastructure of Hospital. Follow up of Bio Medical Waste Management Act, 2016 and 2018 should be done regularly. For certification criteria B3, E18, E19 is most mandatory criteria and have to score more than 70% for LaQshya Certification.



Dr. Rohini Kumar, State Quality Consultant, NHM, Assam delivering session on LaQshya – Labour Room Quality Improvement Initiatives

After the session, a case study exercise on Area of Concern D of SNCU is given to all the groups as a home assignment, which need to be presented on the next day of the training i.e. 29th January, 2020.

Day 3:-

Recap & Quiz on Area of Concern D and E

The third day of the training started with recap and quiz on area of concern D & E & that was undertaken by **Sh. Anupjyoti Basistha, Consultant-QI, RRC-NE, Guwahati**. The participants enthusiastically participated in the session. The objective of the quiz was to refresh the learning of the previous sessions.



Recap & Quiz on Area of Concern D & E taken by Shri Anupjyoti Basistha, Consultant-QI, RRC-NE

Following recap & Quiz session **Dr. Arvind Srivastava, Consultant-QI** facilitated discussions on Exercise on Area of Concern D of SNCU department where all the groups give their score based upon the situation narrated in the case study. The exercise enables the participants in practical understanding the system of assessment, identifying the gaps, scoring and filling up checklist and generating the score.

Session 1 - Assessment of area of concern E- General Clinical Services E1 –E9

The first session of Day 3 was delivered by **Ms. Vinny Arora, Consultant, QI, NHSRC**. Ms. Arora first explain the three parts in Area of Concern E, then she spoke about the first part of Area of Concern E i.e. E1-E9 (General Clinical Services), she said that availability of services cannot be denied and utilization of available resources is very important.

She explained that accreditation should not only be documented but it should also be an established procedure. Ms Vinny said that the lower level facility should have proper linkage with referral unit.

Patients should be identified with Unique Identification Number generated for each patient. All records should be thoroughly checked during the assessment. She then explained briefly all the standards E1- E9 with examples for each Standard.



Ms. Vinny Arora, Consultant, QI, NHSRC delivering session on Assessment of area of concern E- General Clinical Services E1 –E9

Session 2 – Assessment of area of concern E 23 – National Health programme

The second session of Day 3 was delivered by **Dr. Joydeep Das, Jhpiego**. Dr. Joydeep shared in the house that earlier there were 14 National Health Programmes, now it has increased upto 38. In almost 34 states, Leprosy was eliminated in India, but now it is in the process of resurgence. He shared the key essence of IDSP, NTCP, NDCCP and other programmes. He mentioned that RNTCP programme is one of the most structured and successful programme. He discussed about the NQAS checklist of DH, PHC and CHC in regard to these national programmes.

The following National Health Programmes with details was discussed.

- i. National Vector Borne Disease Control Programme
- ii. Revised National TB control Programme
- iii. National Leprosy Eradication Programme
- iv. National AIDS control programme
- v. National Programme for control of Blindness

- | | | | |
|-------|--|-------|--------------------------------------|
| vi. | National Programme for the health care of elderly | x. | National Mental Health Programme |
| vii. | National Programme for prevention and control of Cancer, Diabetes, Cardiovascular disease and Stroke | xi. | School Health programme |
| viii. | Integrated Disease Surveillance Programme | xii. | Universal Immunization Programme |
| ix. | National Programme for Prevention and Control of Deafness | xiii. | National Iodine deficiency Programme |
| | | xiv. | National Tobacco Control programme |
| | | xv. | National Oral health Programme |



Dr. Joydeep Das, Jhpiego delivering session on Assessment of area of concern E 23 – National Health programme

Session 3 – Overview of “Gunak Application” and its use

The session was delivered by **Dr. Arvind, Consultant, QI, NHSRC**, New Delhi. Dr. Arvind introduced the participants with GUNAK application which means Guide for **NQAS** and Kayakalp. He explained what it is, the reason for its development and its benefits. He then explained the key features of GUNAK and its application for using while assessment, entering data and score generation.



Dr. Arvind, Consultant, QI, NHSRC delivering session on Overview of “Gunak Application” and its use

Session 4 - Assessment of Area of Concern ‘G’ - Quality management

The session was delivered by **Ms Vinny Arora, Consultant, QI, NHSRC**. She spoke about the ten standards (G1-G10) under this area of concern. Ms. Vinny elaborated on the process of conducting Patient Satisfaction Survey, informed that minimum 30 (Thirty) samples are to be taken for conducting the survey and analysis, she explained on implementation of Mera Aaspatal application, internal & external quality assurance of the laboratory. She explained the SOP preparation, Process Mapping, 7MUDAs in hospitals & reducing the gaps identified through process mapping, Prescription Audit, Medical Audit & Death Audits, PDCA cycle and model for improvement. She elaborated on meaning of Mission, Quality Policy and Objectives, Quality Tools (Pareto, Brainstorming, Cause and effect, Run chart, Control chart. She explained the usage of PICK Chart (P – Possible, I – Implement, C – Challenge, and K – Kickoff) for closure of gaps. She concluded her presentation by saying the only issue that we encounter on area of Concern G is people do not focus on closure of gaps using Quality methods and tools and suggest the participants to utilize these tools for closure of the identified gaps.



Ms Vinny Arora, Consultant, QI, NHSRC delivering session on Assessment of Area of Concern ‘G’ - Quality management

Session 5 - Assessment of Area of Concern H – Outcome

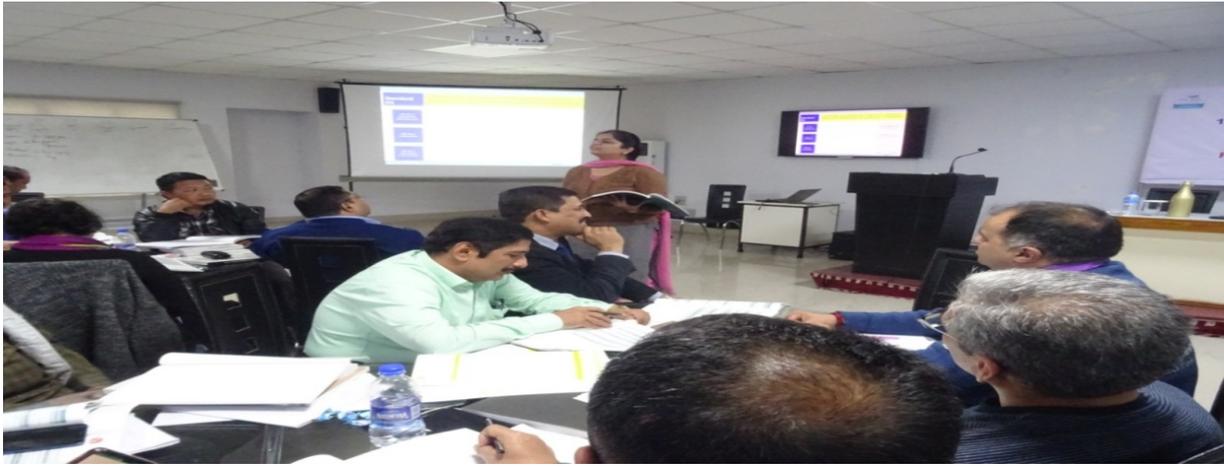
The session was delivered by **Dr. Sushant Agrawal, Consultant, QI, NHSRC**. Dr. Sushant explained the peculiar indicator and how to calculate the indicators. He explained 30 Key Performance Indicators with formulas and four categories of indicators - Productivity, Efficiency, Clinical and Service quality were explained with examples. In between, there was also quiz for practical learning, the participants give their full participation in the session and those with correct response were rewarded. He trained the participants on measuring KPI and outcome indicators of each department in the hospital.



Dr. Sushant Agrawal, Consultant, QI, NHSRC delivering session on Assessment of Area of Concern H – Outcome

Session 6 – Assessment of Area of Concern F – Infection Control

The session was delivered by **Ms Vinny Arora, Consultant, QI, NHSRC**. She starts her session by asking her previous session imprints on 5 approaches of quality management. She informed the house that on January 2020, they have a new Infection Prevention and Control Guidelines from National Centre for Disease Control (NCDC) under DGHS and ask the participants to refer to it. She said that the infection control committee has been constituted with members, to ensure the formation and functional of the committee in the facilities, during assessment the assessor should check the frequency of meeting of the committee. She explained all the standards falling in this area of concern (F1 – F6) with example. In her explanation, she mentioned that the most important components in BMW are segregation of waste at the source not at the point of collection.



Ms Vinny Arora, Consultant, QI, NHSRC delivering session Assessment of Area of Concern F – Infection Control

Session 7 - Assessment Team formation & Instructions for Field Visit

The session was conducted by **Sh. Anup Jyoti Basistha**. The participants were divided into 8 (Eight) groups. The first 4 (Four) groups were planned to assess 4 (Four) departments in Sonapur DH and the next 4 (Four) groups were planned to assess 4 (Four) departments in MMCH. The 7 departments selected are Labour Room, SNCU, Laboratory, MOT, IPD, Emergency Department, Blood Bank. The assessment protocols were explained to the participants. He explained that it is a fact finding exercise not fault finding exercise, polishing exercise not policing. While conducting assessment of the hospital, assessors should priorities patient care and maintain Privacy.

Day 4:-

Field Visit

The first session of Day 4 is Field Visit, 8 groups proceeded for visiting the allotted department in the identified hospitals which was facilitated by RRC-NE/NHSRC team supported by DQAU, NHM, Assam.

Team A, B, C and D

Name of the facility visited: District Hospital, Sonapur

Nodal Officers for the visit:

1. Dr. Suchitra Rajkumari (RRC-NE)
2. Ms. Rijumoni (NHM, Assam)
3. Ms. Dakaru Biam (RRC - NE)

The Team Members with assigned Departments:

Department	Team Members
SNCU (Team A)	1. Dr. Paulunmang Vaiphei 2. Dr. Anirban Hore 3. Dr. Vinita Kumar 4. Dr. Umashankar Singh 5. Dr. Rajeev Kumar 6. Dr. Hrishikesh Gaitonde 7. Dr Raman Swathy Vaman 8. Dr. S.Praveen
Labour Room (Team B)	1. Dr. M. Bikramjit Singh 2. Dr. Wemeri Khutsoh 3. Dr. Ayan Ray 4. Dr. Rekha Kumari 5. Dr. Rajendra Choudhary 6. Dr. Sanjay Kumar 7. Dr. Manish Pratap Singh 8. Dr. Shilpa Manchanda 9. Dr. Biraj Chandra Paul
M-OT (Team C)	1. Dr. Kumud Bania 2. Dr. C. Vanlalhruaia 3. Dr. Sukhendu Nath 4. Dr. M.E Haque 5. Dr. Sunil Kumar Chaudhary 6. Deepak Dixit 7. Dr Juri Bharat Kalita 8. Hemant Bhatnagar
Laboratory (Team D)	1. Dr. Lalnunpuui 2. Dr. Soubhik Debbarma 3. Dr. Sharad Chandra 4. Amit Kumar Singhal 5. Dr. Vijay P. Bawiskar 6. Dr. Abhijit Neog 7. Dr Indumati Patil 8. Dr. Pranav Thaker

Team E, F, G, H

Name of the facility visited: Mahendra Mohan Choudhury Hospital

Nodal Officers for Visit:

1. Dr. Sushant Agrawal (NHSRC)
2. Ms. Vinny Arora (NHSRC)
3. Sh. Anup Jyoti Basistha (RRC-NE)
4. Ms Rekhashree (NHM, Assam)

The Team Members with assigned Departments:

Department	Team Members
IPD (Team E)	<ol style="list-style-type: none">1. Dr. Reisangmi Raikhan2. Dr. Ivonne M. Sangma3. Dr. Zolankimi Ngente4. Dr. Khrievilhou Nakhro5. Dr. Manisha Kulshrestha6. Dr. Sachin Wagh7. Dr. Prasad Somnath Bhandari8. Dr. Rajeshwari Devi H.R
Emergency dept (Team F)	<ol style="list-style-type: none">1. Dr. Dipak Das2. Dr. S. Rajen Singh3. Dr. Alprina Sangma-4. Dr. KT Lalrammawia5. Dr. Shevosa Vese6. Dr. Rajeshwar Debadwar7. Dr. Shivakumar Hiremath8. Dr. Abhishek Jinwal
Blood Bank (Team G)	<ol style="list-style-type: none">1. Dr. Jonny Darang2. Dr. M. Ibochouba Singh3. Dr. (Mrs.) Junnywed Syiem4. Dr. Mrityunjoy Banik5. Dr Nishigandha Dilliprao Kute6. Dr. Swapnav Borthakur7. Dr. Sumithra K
SNCU (Team H)	<ol style="list-style-type: none">1. Dr. Thuten Droma2. Dr. Y. Ramananda Singh3. Dr. Howni Wothi Laloo4. Dr. Debajyoti Bhattacharya5. Minarva Kshetrimayum6. Dr. Yogendra Singh Prayasi7. Dr. Tridib Sarma

Session 2 - Presentations on the field visit

Post lunch, session started where all the 8 teams entered the data, generate the scores and analyzed and were asked to prepare group wise presentation and to present as per assignments allocated during the field visit. The presentations on the findings of the assessment were made using common format. The field visit provided great learning opportunity to the participants.



Group Presentation on the findings of Field Visit

Day 5:-

Recap & Quiz:

The last day of the training started with recap and spotting exercise given to participants by **Mr. Anup Jyoti Basistha, Consultant, QI, RRC-NE**. The Quiz was very participatory and it helps the participants refresh all the learning session during the training.



Recap & Quiz by Shri Anupjyoti Basistha, Consultant-QI, RRC-NE

Session 1 – Standards for PHC and Urban PHCs

The session was delivered by **Dr. Sushant Agrawal, Consultant, QI, NHSRC**. He starts his presentation by reviewing the area of concern, standards, measurable elements of District hospital and then differentiates the same with PHCs and UPHCs. He then explained the checklists specific to each level of the health facilities PHCs and UPHCs. He mentioned that during assessment the assessor have to monitor the patients whether they are receiving the treatment and to observe the cases reported and also to see from the patient's perspective too.



Dr. Sushant Agrawal, Consultant, QI, NHSRC delivering session on Standards for PHC and Urban PHCs

Session 2 – Standards for CHCs

The session was delivered by **Dr. Suchitra Rajkumari, Sr. Consultant, QI, RRC NE**. Dr. Suchitra started her session with recall of all the level of health facilities in India and she explained the purpose of this session is to share how the CHC NQAS checklist different from that of DH checklist.

She talked about NQAS checklist for CHC, all the standards and measurable elements. She mentioned that customization of checklist must be done with proper justification at State level and it must be done with utmost caution. She explained the difference in services for Blood Storage Unit and Blood Bank. She talked about the benchmark of delivery points at health facility of NE States at different level of SC, PHC, CHC (FRU and non FRU), and DH.



Dr. Suchitra Rajkumari, Sr. Consultant, QI, RRC NE delivering session on Standards for CHCs

Session 3 – General principles of Assessment, Operational issues under NQAS Certification – Pre- certification, during certification and post certification.

The session was delivered by **Ms. Vinny Arora, Consultant, QI, NHSRC**. Ms. Vinny Arora elaborates that national assessment both for LaQshya and NQAS can be done at national level under Government of India. . They are assessed thrice to be qualified for national level. Documents like SOPs, Patient Satisfaction Survey, reports etc. need to be submitted.

The following issues were elaborately discussed:

- a. Types of Assessment
- b. External Assessment from receipt of State application to issue of Certification.
- c. Audit Mandays as per level of facilities
- d. Principals of Audit as per ISO 1901:2011
- e. Phases in External Assessment – Pre Assessment, Assessment, Post Assessment processes
- f. Reports preparation
- g. Quality Certification Criteria of DH, CHC/UHC, PHC/UPHC
- h. Incentives on NQAS certification

Session 4 - Role Play

Role play was performed where few participants were asked to played different role along with the resource persons from NHSRC and RRC NE. Course of conversation and activities were reflected through Role Play.

VII. Evaluation

Evaluation of the participants was undertaken on the last day of training. The evaluation timing was for 2 hour 15 minutes. The participants were first given spotting of the gaps in which they were shown pictures of gaps in public health hospitals and were asked to enumerate the gaps in the form of gap statement. The participant was then allocated in three different Halls. Question papers were distributed to each participant. Seven participants from earlier batches (January 2019) also appeared for re-examination.

VIII. Valedictory

Dr. Ashoke Roy, Director, RRC-NE delivered the Valedictory address. He thanked all the resource persons from NHSRC, UNICEF, Jhpiego and NHM Assam; all State Participants and participants from private institutions for their co-operation and sincerity during the training

IX. FEEDBACK BY PARTICIPANTS

Most of the participants expressed that the training will help them:

- i. To improve structure & process for Quality Healthcare Delivery in Healthcare Institutions, by helping in our journey of quality we will be integral part of the quality journey of India as far as healthcare is concerned.
- ii. To improve Quality in every aspect. It has helped us in understanding the expected standards & how to keep upto the mark and reach benchmarks in the facility.
- iii. This training helped in learning the proper assessment of the gaps and filling up the gaps. It will help to bring quality to the service provided.
- iv. Gathered lots of knowledge, experience and this will lead to do better work in our health institution in upcoming days
- v. We will be able to focus access and analyze more in each and every aspect of jobs roles and responsibilities.
- vi. The training gave a basic idea for implementation and assessment of health institution for quality of which we can contribute to improve the quality of health institute for our district and state.
- vii. To improve our hospital service quality and get NQAS certified.
- viii. This training is very fruitful, we got to develop our knowledge and even got a chance to face the circumstances that we will have to face during assessment.

SL	Name of the topic	No. of participants who found the topic most useful
I.	Area of Concern A	2
II.	Area of concern B	10
III.	Area of Concern C	7
IV.	Area of Concern D	4
V.	Area of concern E	15
VI.	Area of Concern F	17
VII.	Area of Concern G	12
VIII.	Area of Concern H	8
IX.	Family planning service (E21)	5
X.	National Health Programme	4
XI.	LaQshya	4
XII	Overview of Public Health System	5
XIII	Quiz	7
XIV	Group Activity	4
XV	Field Visit	13
XVI	Use of Gunak application	4
XVII	Measurement system of assessment protocols	3
XVIII	Key Concept of Quality and terminology	5
XIX	National Quality Assurance Standard	3

X.Suggestion given by the participant

- a. Suggested to reduce the lecture sessions and increase the practical session.
- b. Field visit may be extended & exam may be conducted during field visit
- c. After every session Quiz should be arranged
- d. Suggested to extend the days for training
- e. Suggested to include live videos/AV tools during lecture.
- f. Time management should maintain.
- g. To emphasis more on Quality methods & tools
- h. Sitting chair was not comfortable

Agenda
2nd Regional External Assessors' Training
National Quality Assurance Standards (NQAS)
Venue: IIBM Land mark -ESIC Hospital, Tripura Road
27th – 31st January 2020

Time	Topic	Resource Person
Day 1 – Monday, 27th January 2020		
INAUGURATION SESSION		
08:30 am - 09:00 am	Registration	
09:00 am –09:10 am	Welcome Address	Dr Ashoke Roy, Director RRC - NES
09:10 am –09:20 am	Inaugural address	Dr. Madhulika Jonathan, Chief of Field Office, UNICEF
09:20 am- 09:30 am	Key Note Address	Dr Parminder Gautam, Sr. Consultant, QI, NHSRC
09:30 am - 09:50 am	Introduction of participants	
09:50 am – 09:55 am	Vote of Thanks	Dr. Suchitra Rajkumari, Sr. Consultant, QI, RRC NE
09:55 am - 10:30 am	Group Photography followed by Tea Break	
TECHNICAL SESSIONS		
10:30 am - 11:15 am	Overview of Public Health System and Programs in India and Introduction to National Quality Assurance Program for Public Health Facilities.	Dr Ashoke Roy, Director RRC - NES
11:15 am -12:15 pm	Key Concept of Quality and terminology	NHSRC – Dr Parminder Gautam
12:15 pm - 01:15 pm	National Quality Assurance Standards	NHSRC – Dr Arvind Srivastava
01:15 pm - 02:00 pm	Lunch Break	
02:00 pm - 02:45 pm	Group Activity on National Quality Assurance Standards	RRCNE Team – Dr Arvind Srivastava
02:45 pm - 03:45 pm	Measurement System and Assessment Protocol	NHSRC – Dr Parminder Gautam
03:45 pm - 04:00 pm	Tea Break	
04:00 pm - 05:00 pm	Assessment of Area of Concern 'A' - Service Provision	NHSRC – Dr Arvind Srivastava
05:00 pm - 05:30 pm	Exercise on Area of Concern A	RRC-NE – Dr Suchitra Rajkumari
05:30 pm – 05:45 pm	Feedback Collection	RRC-NE- Ms Dakaru Biam
Day 2 – Tuesday, 28th January 2020		
09:00 am - 09:30 am	Recap & Quiz	RRC-NE - Mr. Anup Basistha
09:30 am - 10:00 am	Assessment of Area of Concern 'B'- Patient Rights	NHSRC – Dr Parminder Gautam

10:00am – 10:30 am	Exercise on Patient Rights	NHSRC – Dr Arvind Srivastava
10:30 am – 11:00 am	Assessment of Area of Concern C - Inputs	RRC-NE – Dr Suchitra Rajkumari
11:00 am - 11:15 am	Tea Break	
11:15 am - 12:00 noon	Assessment of Area of Concern D – Support Services	NHSRC – Ms. Vinny Arora
12:00 noon – 12:45 pm	Case Study on Area of Concern ‘C’ and ‘D’	NHSRC – Dr Arvind Srivastava
12:45 pm – 01:30 pm	Assessment of Area of concern ‘E’ - Specific Clinical Services E10–E16	NHSRC – Dr. Parminder Gautam
01:30 pm –2:30 pm	Lunch Break	
02:30 pm – 03:30 pm	Assessment of Family Planning Services (E21)	MOHFW – Dr Upasna Naik
03:30 pm – 04:15 pm	Assessment of Area of Concern ‘E’- Maternal & Child Health Services (E17-20 & 22)	UNICEF - Dr Sridhar Ryavanki
04:15 pm - 04:30 pm	Tea Break	
04:30 pm – 05:00 pm	LaQshya-Labour Room Quality Improvement Initiative	NHM Assam - Dr Rohini Kumar
05:00 pm – 05:15 pm	Feedback Collection	RRC-NE-Ms Dakaru Biam
Time	Topic	Resource Person
Day 3 – Wednesday, 29th January 2020		
09:00 am-9:30 am	Recap & Quiz	RRC-NE - Mr. Anup Basistha
09:30 am -10:30 am	Assessment of Area of Concern ‘E’ – General Clinical Services E1-E9	NHSRC – Ms Vinny Arora
10:30 am -11:15 am	Assessment of National Health Programmes (E23)	Jhpiego - DR. Joydeep Das
11:15 am -11:30 am	Tea Break	
11:30 am -12:15 pm	Assessment of Area of Concern ‘G’- Quality Management	NHSRC – Ms. Vinny Arora
12:15 pm -1:15 pm	Exercise on Area of Concern ‘G’- Quality Management	NHSRC – Dr Arvind Srivastava
1:15 pm -2:00 pm	Lunch Break	
02:00 pm - 02:30 pm	Overview of “Gunak Application” and its use	NHSRC – Dr Arvind Srivastava
02:30 pm -03:30 pm	Assessment of Area of Concern F – Infection Control	NHSRC – Ms. Vinny Arora
03:30 pm -03:45 pm	Tea Break	
03:45 pm - 04:30 pm	Assessment of Area of Concern ‘H’ – Outcome & Indicators	NHSRC – Dr Sushant Agrawal

04.30 pm – 05.00 pm	Assessment Team formation and Instructions for Field Visit	RRC-NE - Mr. Anup Basistha
05:00 pm – 05: 15 pm	Feedback collection	RRC-NE- Ms Dakaru Biam
Day 4: Thursday, 30th January 2020		
09:00 am - 01:00 pm	Field Visit	NHSRC, NHM – Assam and RRC NE
01:00 pm - 02:00 pm	Lunch Break	
02:00 pm – 03:30 pm	Analysis & Scoring	By the Participants
03:30 pm - 4:15 pm	Presentations & Discussions	Teams
04:15 pm – 04:30 pm	Tea Break	
04:30 pm – 05:30 pm	Presentations & Discussions	Teams
Day 5 – Friday, 31st January 2020		
09:00 am - 09:30 am	Recap	RRC-NE - Mr Anup Basistha
09:30 am - 10:30 am	Standards for PHC and Urban PHCs	NHSRC – Dr Sushant Agrawal
10:30 am – 11:15 am	Standards for CHCs	RRC-NE - Dr Suchitra Rajkumari
11:15 am - 11:30 am	Tea Break	
11:30 am – 12:15 pm	General Principles of Assessment	NHSRC - Ms Vinny Arora
12:15 pm – 12:45 pm	Operational issues under NQAS Certification – Pre-Certification, during Certification and Post Certification	NHSRC - Ms Vinny Arora
12:45 pm – 1:30 pm	Role Play	Dr Suchitra Rajkumari, Dr Sushant Agrawal, Mr Anup Basistha & All participants
01:30 pm - 02:15 pm	Lunch Break	
02:15 pm - 04:30 pm	Post Training Evaluation	
04:30 pm - 05:00 pm	Tea Break	
05:00 pm - 05:30 pm	Feedback & Valedictory	

ANNEXURE II

LIST OF PARTICIPANTS

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59	Dr. Shilpa Manchanda	Consultant, PH	9802488935/ 9991655793/ 0171- 4001165	dqau.kkr@gmail.com shilpa.manchanda@gmail.com
60	Dr. Swapnav Borthakur	Consultant of Medicine, DMS	9864038704	swapnav.borthakur@gmail.com
61	Dr.S.Praveen	Medical Supdt. , Govt. Area Hospital, Arunachal Pradesh	9848257592/ 8008553460/ 0884- 2306379	ah_rcpm@yahoo.co.in kayakalpa.ahrcpm@gmail.com, drspchand@gmail.com
62	Dr. Tridib Sarma	Consultant, Pathologist, Apollo Hospital, Guwahati	9435044658/ 0361- 7135005	drtridib2008@gmail.com
63	Dr. Biraj Chandra Paul	Sr. Resident, Dept. of Hospital Administration, AIIMS, Delhi	9742055532	drpaulbc1@gmail.com
64	Dr Sankar Roy	MO	8414966062	roysankar1987@gmail.com
65	Dr Swapan Kr Paul	DANO	9402222793	paulswapanbdn2@gmail.com
66	Dr Sukla Das.	MBBS, MD(Biochemistry)	9864014793	mailsukladas@gmail.com
67	Dr. Rahul R. Shinde	BHMS, MBA, Hospital Management, DPS, MHSc	9011050884	dr.rrshinde@gmail.com
68	Dr. T. Ramesh Kishore	MBBS, PG Degree(Gen. Surgery), DCHS	8008553430	dchs.egdt@yahoo.co.in
69	Dr. Maheswar Prasad	Medical Superintendent	9431186123	2stateqacjharkhand@gmail.com
70	Jayantee Rabha	MSc Nursing	9101504260	rabhajayantee@gmail.com

FEEDBACK ANALYSIS

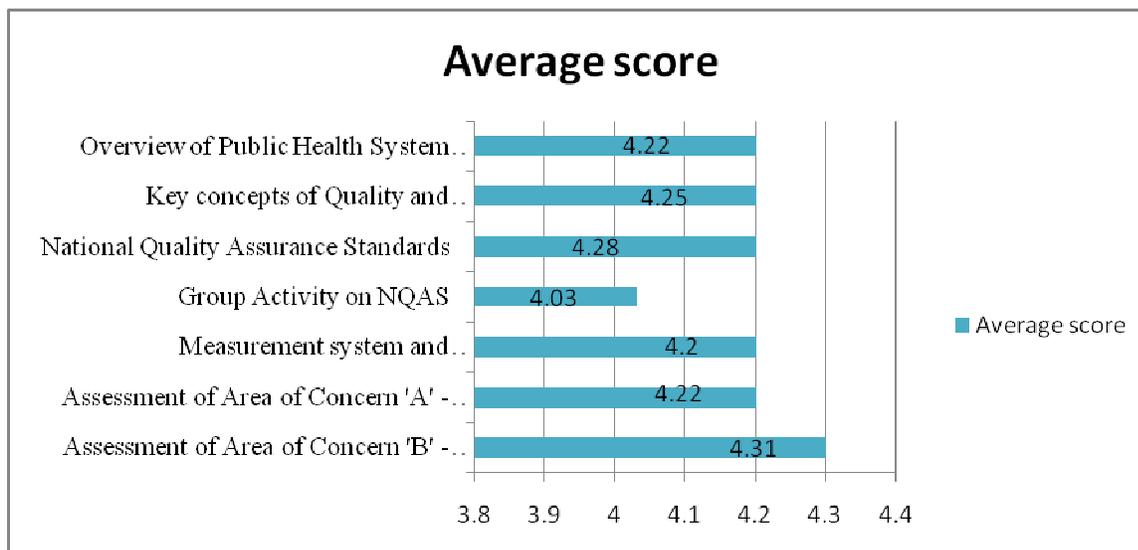
SESSION	FACULTY	AVERAGE SCORE
DAY-1		
Overview of Public Health System & Introduction to NQAS for Public Health Facilities	Dr. Ashoke Roy	4.22
Key concepts of Quality and terminology	Dr. Parminder Gautam	4.25
National Quality Assurance Standards	Dr. Arvind Srivastava	4.28
Group Activity on NQAS	RRCNE & NHSRC	4.03
Measurement system and assessment protocol	Dr. Parminder Gautam	4.20
Assessment of Area of Concern 'A' - Service Provision	Dr. Arvind Srivastava	4.22
Assessment of Area of Concern 'B' - Patient Rights	Dr. Parminder Gautam	4.31
DAY-2		
Recap & Quiz	Mr. Anup Jyoti Basistha	4.10
Exercise on Area of Concern B	Dr. Arvind Srivastava	4.05
Assessment of Area of Concern C – Inputs	Dr. Suchitra Rajkumari	4.14
Assessment of Area of Concern D - Support Service	Ms. Vinny Arora	4.13
Case study on Area of Concern C & D	Dr. Arvind Srivastava	4.05
Assessment of Area of Concern E- Special clinical services (A&E, Blood Bank & Lab)	Dr. Parminder Gautam	4.20
Assessment of Area of Concern E- Special clinical services (OT,Anesthesia,ICU &End of Life)	Dr. Parminder Gautam	4.15
Assessment of Family Planning services (E21)	Dr. Upasna Naik	4.20
Assessment of Area of Concern E- Maternal & Child Health Services (E17-20 & 22)	Dr. Sridhar Ryavanki	4.06
LaQshya- Labour Room Quality Improvement Initiative	Dr. Rohini Kumar	4.01
DAY-3		
Recap & Quiz	Mr. Anup Jyoti Basistha	4.14
Assessment of Area of Concern E - General Clinical Services E1 - E9	Ms. Vinny Arora	4.17
Assessment of National Health Programme (E23)	Dr. Joydeep Das	3.77
Assessment of Area of Concern G - Quality Management	Ms. Vinny Arora	4.09
Exercise on Area of Concern G- Quality management	Dr. Arvind Srivastava	4.03

Overview of "Gunak Application" and its use	Dr. Arvind Srivastava	4.07
Assessment of Area of Concern F- Infection Control	Ms. Vinny Arora	4.15
Assessment of Area of concern H- Outcome & Indicators	Dr. Sushant Agrawal	3.80
Assessment Team Formation and instructions for field visit	Mr. Anup Basistha	3.96
DAY-4 & 5		
Field Visit	NHSRC,RRCNE& NHM Assam	4.46
Analysis & Scoring	NHSRC,RRCNE & participants	4.20
Presentation & discussion	NHSRC,RRCNE & participants	4.20
Standards for PHC & UPHC	Dr. Sushant Agrawal	4.01
Standards for CHCs	Dr. Suchitra Rajkumari	4.06
General principles of assessment	Ms. Vinny Arora	4.22
Operational issues under NQAS certification -pre certification, during certification and post certification	Ms. Vinny Arora	4.25
Role Play	Dr. Suchitra, Dr Sushant & Mr. Anup	4.40
Total Score - 4.13		

The overall scoring as per the feedback analysis for four days is 4.13 on a five-point scale

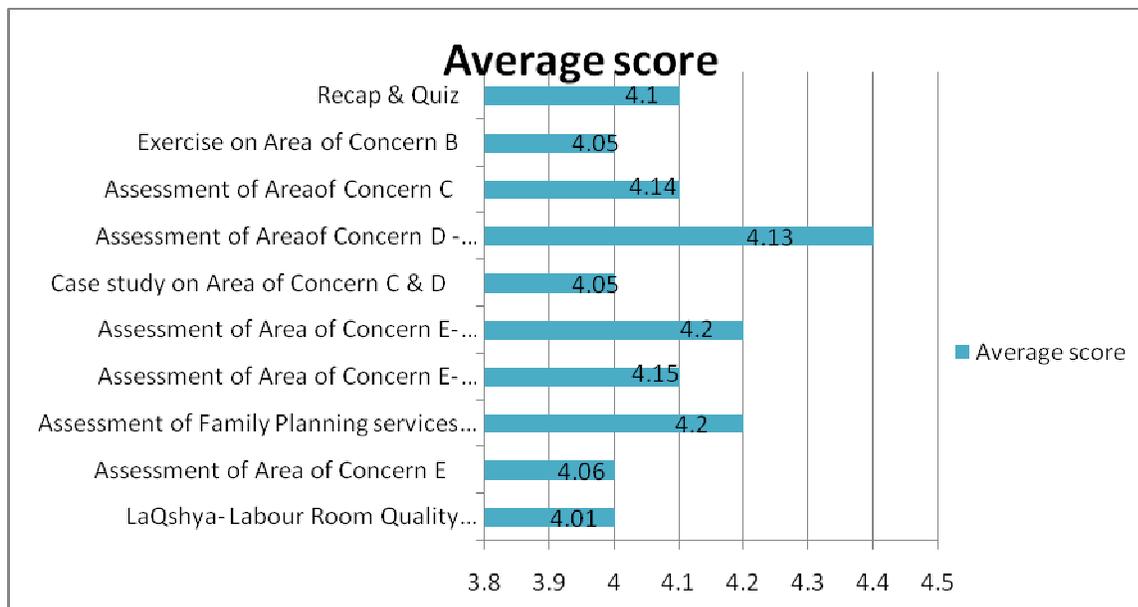
Feedback Analysis

Day 1



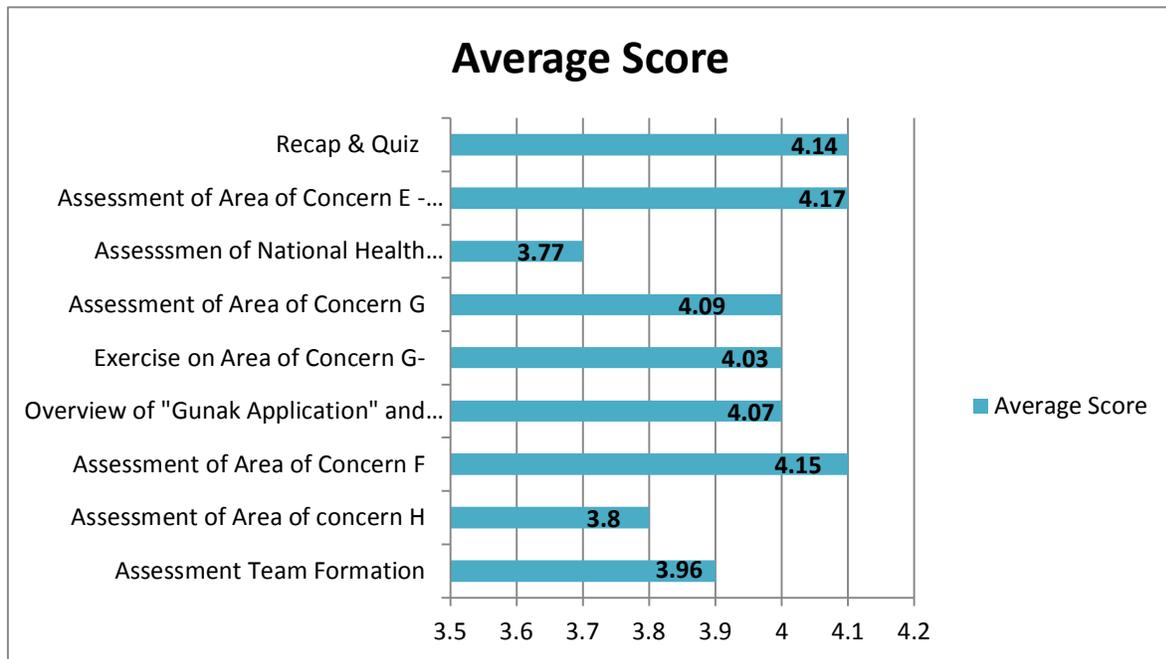
As per Day 1 Feedback analysis, the highest scoring session was the session on ‘Assessment of area of concern B’ with average score of 4.31 in Likert scale. The second highest scoring session of the day was ‘National Quality Assurance standards’ with average score of 4.28 in Liker Scale.

Day 2



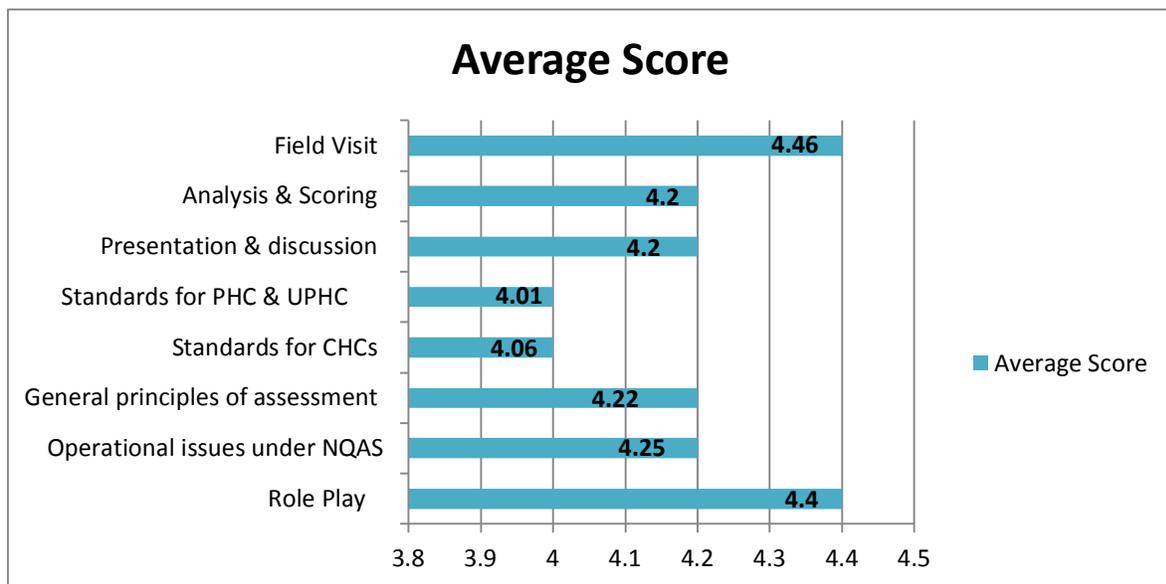
As per analysis of second day sessions the highest scoring session was ‘Assessment of area of concern C-Input’ with average score of 4.14 & second highest scoring session was ‘Assessment of area of concern D-Support services’ with average score of 4.13 in Likert sc

Day 3



On analysis of day three of the External Assessor Training, the highest scoring session was 'Assessment of Area of Concern E' with average scores of 4.17 in Likert Scale. The second highest score was gained by the session on 'Assessment of area of Concern-F, Infection control' with average score of 4.15 in Likert Scale

Day 4 & 5



As per analysis of day 4 & 5 day the highest scoring was 'Field visit' with average score of 4.46 in Likert Scale & the second highest scoring session was 'Operational issues under NQAS' with average score of 4.25 in Likert scale.

Equity Report

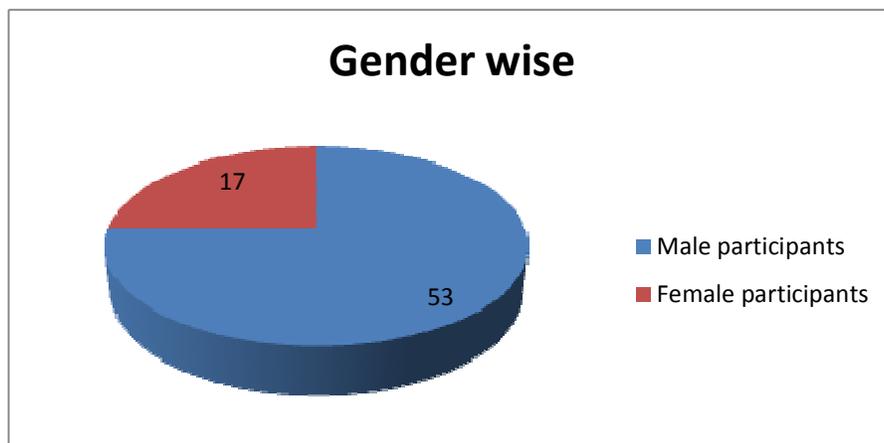
The fifteen batch of National External Assessors Training was held at **IIBM, Landmark-ESIC Hospital, Tripura Road, Jawahar Nagar, Khanapara, Guwahati, Assam 781028**. Total 63 participants attended the training and 7 participants reappeared for exams.

An analysis has been done as per the criteria mentioned below under Equity Report.

1. Gender wise
2. Profession wise
3. Sponsorship wise: State / Non-Government
4. Years of Experience wise
5. State wise distribution

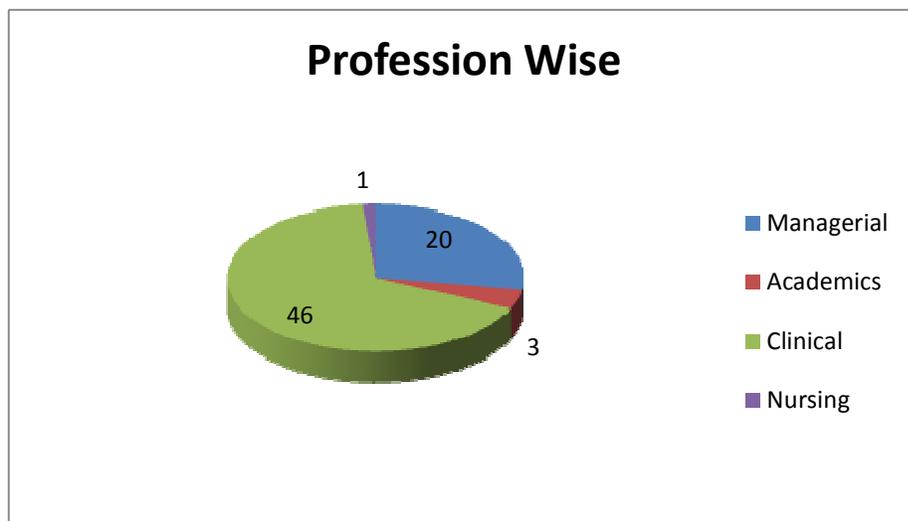
1. **Gender Wise:** Male: Female Ratio = 51:17

Inference: 25% of participants were female and 75% of participants were male



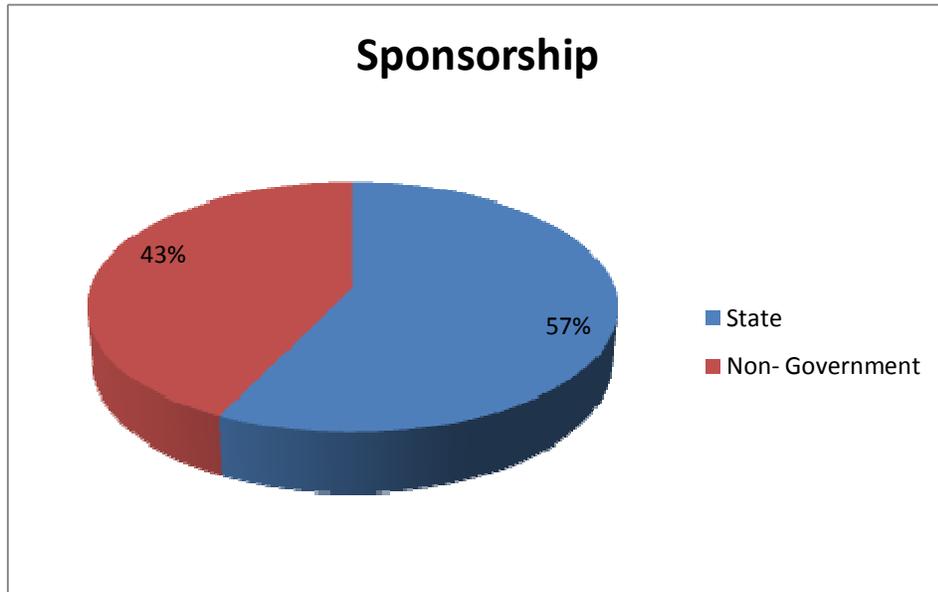
2. Profession Wise:

Inference: Most of the participants are currently working under clinical positions in various institutions



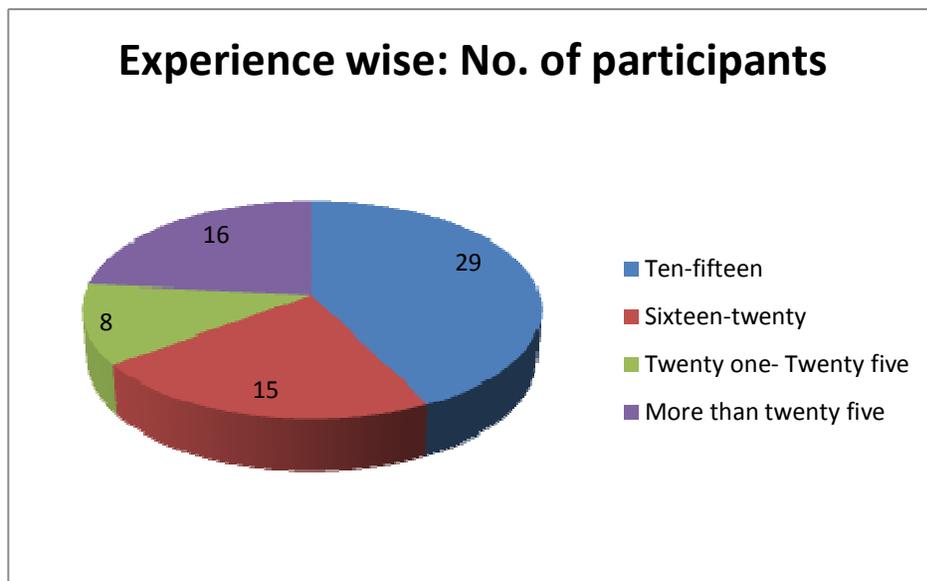
3. Sponsorship

Inference: 57% of participants are state sponsorship and 43% of participants were non - government sponsorship



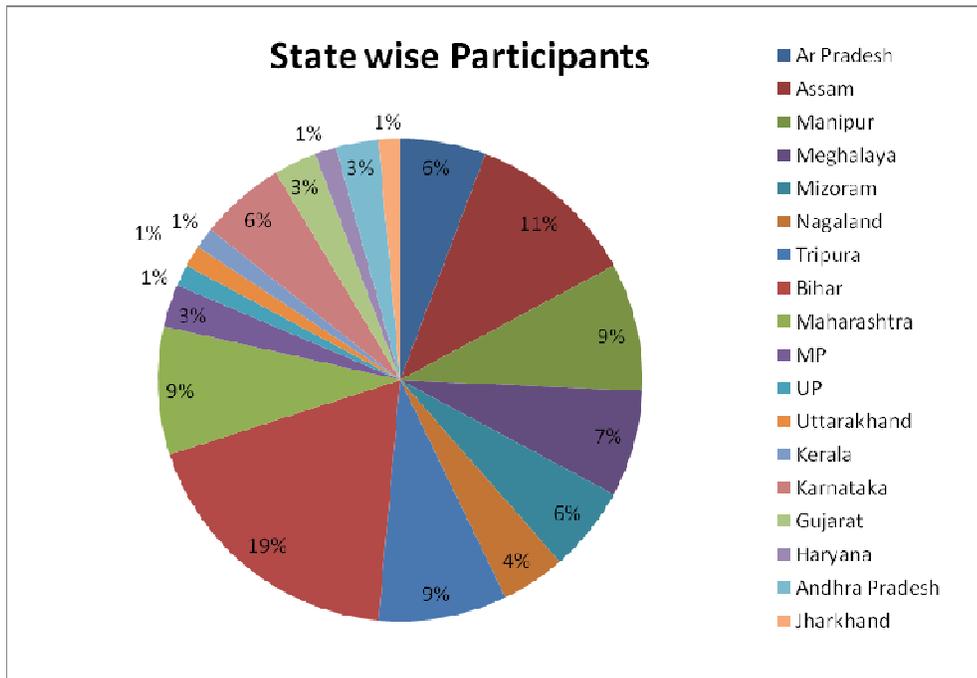
4. Experience Wise: Years of Experience in Healthcare Domain

Inference: Lot of ten- fifteen years experience level persons is interested in the course.



5. No. of Participants – State Wise

Inference: Total 70 participants from 18 states of India have participated in the training program. The state wise participation percentage is given below-



ANNEXURE V**List of Qualified Candidates in the External Assessor's Training, NQAS Batch XV, January, 2020, Recommended for Empanelment**

Sl	Name
1	Dr Abhijit Neog
2	Dr Abhishek Jinwal
3	Dr Anirban Hore
4	Dr Biraj Chandra Paul
5	Hemant Bhatnagar
6	Dr Hrishikesh Gaitonde
7	Dr Indumati Patil
8	Dr Juri Bharat Kalita
9	Dr Lalnunpuii
10	Dr Manisha Kulshrestha
11	Dr Mrityunjoy Banik
12	Dr Nishigandha Dilliprao Kute
13	Dr Paulunmang Vaiphei
14	Dr Pranav Thaker
15	Dr Prasad Somnath Bhandari
16	Dr Rajiv Kumar
17	Dr Rajeshwar Debadwar
18	Dr Raman Swathy Vaman
19	Dr Sachin Wagh
20	Major (Dr) Shivakumar Hiremath
21	Dr Swapnav Borthakur
22	Dr Umashankar Singh
23	Dr Vinita Kumar
24	Dr Yumnam Ramananda Singh

Abbreviations

Sl.	Abbreviation	Full Form
1	NHSRC	National Health Systems Resource Centre
2	RRCNE	Regional Resource Centre for North Eastern States
3	DH	District Hospital
4	SDH	Sub – District Hospital
5	CHC	Community Health Centre
6	PHC	Primary Health Centre
7	UPHC	Urban Primary Health Centre
8	NQAS	National Quality Assurance Standards
9	QI	Quality Improvement
10	KPI	Key Performance Indicators
11	SOP	Standard Operating procedures
12	QA	Quality Assurance
13	NQAP	National Quality Assurance Programme
14	MOHFW	Ministry of Health and Family Welfare
15	MMCH	Mahendra Mohan Choudhury Hospital, Guwahati