Minutes of 2nd Meeting of Central Quality Supervisory Committee (CQSC) Monday, 04th December' 2017

Venue: Room No. 153-A, Nirman Bhawan, New Delhi.

Second Meeting of Central Quality Supervisory Committee (CQSC) was held on Monday, 4th December' 2017 under the chairmanship of Mr Manoj Jhalani, Additional Secretary & Mission Director, NHM, MoHFW. List of the participants is attached as '*Annexure I'*.

After a round of introduction, AS&MD in his welcome address emphasised the need for ensuring Quality in the delivered services at Public Health Facilities. This would have positive impact on outcome indicators. There is also an urgent need for improving Quality of care around birth and immediate post-partum period, which must be focussed on respectful maternal care and adherence to standardised protocols. For meeting this objective, the Ministry of Health & Family Welfare would launch 'LaQshya' Initiative on 11th Dec 2017. He called upon every CQSC member to put in 100% efforts for ensuring success of the LaQshya Initiative.

Subsequently Dr J N Srivastava, Advisor QI, NHSRC presented an overview of the actions taken on the decisions of the last CQSC meeting held on 1st Feb 2017 and progress made under the National Quality Assurance Programme. Presentation is attached as '*Annexure II'*.

Following broad topics were covered in the presentation:

• Overview & key activities under National Quality Assurance Program

- Quality Assurance Committees constituted in all the States & UTs
- ➤ ISQua (International Standards of Quality in Healthcare) Accreditation of National Quality Assurance Standards

Status of QA Program, trainings & certification process under NQAS

- > Total 319 trainings (NQAS & Kayakalp)
- ➤ NQAS Certification: 52 National Certified & 286 State Certified
- ➤ Launch of 'GUNAK' App
- > STGs for 12 clinical conditions approved by DGHS & uploaded on Clinical Establishments Act website.

Follow up actions on decisions of 1st CQSC meeting

- ➤ Sample assessment of 3 DHs in Rajasthan done, 30% of variation of scores was found. MoHFW has issued an advisory to the state for taking corrective measures.
- Regular follow up & advocacy of the NQAS implementation in all States & UTs.
- ➤ Discussion on QA implementation in the state's NPCC meeting.
- ➤ Guidelines for Laboratory Quality Improvement launched during best practice workshop in August' 2017 at Indore.

- ➤ Dissemination of Certification Criteria of DH, PHC, CHC and UPHC completed.
- > ToRs have been defined for Appeal Committee of the NQAS Certification.
- ➤ Micro-site of NQAP linked to NHSRC's existing website.

• State-wise overall Quality scores, KPIs of District Hospitals & major constraints in achieving Quality certification

- ➤ Pan India Overall Quality Score of DHs 67.3%
- ➤ Overall Patient Satisfaction Score of DHs 3.16 out of 5 (on Likert scale)

• Collaborative Capacity building training programme in Health Quality

- ➤ PG Diploma in Healthcare Quality Management in collaboration with TISS Mumbai (Second Batch in Academic Session 2017-18)
- ➤ Management Development Program in collaboration with ASCI (First Batch Training from 13th Dec 2017)
- ➤ Certification Course in Healthcare Quality in collaboration with PHFI & AHPI (First batch 6-day contact programme from 5th March 2018)

Pan India Quality Assessors pool (Internal & External)

- ➤ 2399 Internal Assessors, who primarily have skills for undertaking baseline assessment of health facilities
- ➤ 199 Empanelled External Assessors for the Quality Certification

• Kayakalp & Quality Assurance under the NUHM

- ➤ Kayakalp program has been successfully scalded up to 70%
- ➤ DLI Targets in respect to U-PHC assessment successfully met

• Mera-Aspataal

➤ Percentage of patients satisfied with the Hospital services has increased from 74% in Feb.' 17 to 76.8% in Nov.' 17

While acknowledging the steady progress in the number of quality certified health facilities in the country, AS&MD asked the QI team to follow-up on inter and intra state variables in progress and work on creating awareness and public on the social media and electronic platform.

Agenda Point 1 (Follow up Action on previous CQSC meeting)

1.1 Emphasis on critical areas for Quality of care: AS & MD emphasised the need of ensuring quality in critical areas such as Labour room, Maternity OT, Laboratory etc. and these should be targeted first. He reiterated importance of 'LaQshya' initiative in achieving this. He also suggested initiating the quality assessment & certification of public health laboratories under the National

Quality Assurance Programme. This would be an intermediate step before laboratories are accredited to NABL. He asked NHSRC team to pursue this. Ms. Vandana Gurnani, JS (RCH) also highlighted that JHEPIGO had informed readiness of about 200 health facilities for Quality certification. She also pointed out that the Ministry has also received request from the private sector for the quality certification of their services. AS & MD suggested that this initiative of private sector may be taken forward, and cost of assessment audit may be communicated to such organisations.

1.2 Quality Standards for Health & Wellness Centre: AS&MD recommended for developing Quality Standards for Health & Wellness Centre. NHSRC would be talking this forward.

Agenda Point 2 (Status of Quality Assurance Program and Certification process)

- **2.1 Increasing the visibility of the Quality Assurance Programme:** While reviewing the follow-up action on 1st CQSC meeting decisions, AS & MD asked for undertaking intensive efforts for increasing the visibility of the Quality Assurance Programme on the social media, twitter, news feeds, WhatsApp group, uploading the names & photographs of NQAS certified facilities, etc. He also added that it is important to celebrate achievements and create higher level of visibility for advocacy.
- **2.2 Training & Capacity building:** AS & MD suggested increasing the pool of Quality Assessors for strengthening the implementation of NQAP especially in low performing State/UTs. Such assessors would also be needed under the LaQshya initiative.
- 2.3 HR for NUHM: Considering the key challenge in implementation of NQAS at Urban Health Facilities, Ms. Preeti Pant, JS, Urban Health suggested that HR of the QI Division needs to be strengthened for effective roll-out of the NQAS & Kayakalp under the NUHM. In addition, AS & MD suggested collaborating with Technical Institutions/Medical Colleges for assessment & implementation of Quality in Urban Health Facilities.

Agenda Point 3 (Revision of QA operational Guidelines)

3.1 Revision of QA operational Guidelines: After the launch of 'Operational Guidelines for Quality Assurance in Public Health Facilities' in the year 2013, many new dimensions under the ambit of NQAP have been added. Hence approval for revision of 'Operational Guidelines for Quality Assurance in Public Health Facilities' was approved. Draft revisions would be approved on file by the MoHFW.

Agenda Point 4 (National Quality Convention along with Kayakalp Award felicitation ceremony)

4.1 Quality convention: For increasing the visibility & scope of the National Quality Assurance Program, two days National Quality Convention along with Kayakalp award felicitation ceremony was approved under which the winner facilities would be felicitated at the National level.

Agenda Point 5 (Development of Central Quality Information Management System)

5.1 Central Quality Information Management System: Existing process for reporting of Data elements for KPI is highly fragmented, human resource intensive and mistake prone. Hence, an IT enabled Central Quality Information System was proposed for monitoring the activities of Quality Assurance Committees (QAC) and Units (QAU) working at the State, District and Facility level, automation of the certification process including submission of documents, assessor's allocation & tracking of due dates of assessment.

For avoiding aberrations in the reporting of KPIs, a decision was taken to include the Quality data elements in HMIS (Administrative KPI to be reported in HMIS & Facility based KPI to be reported in MIS). Proposal to this effect may be put on the file.

Agenda Point 6 (Mera Asptaal Initiative)

6.1 Uploading time on Mera-Aspataal: Review of Mera-Aspataal initiative revealed low capture of information related to valid mobile numbers and receipt of feed-back from the beneficiaries. Approval was accorded for increasing the duration of uploading window from existing 24 hours to 72 hours.

Agenda Point 7 (Kayakalp Award)

7.1 **Kayakalp:** As per the Kayakalp guidelines, the winning District Hospitals in the previous year would have to show an improvement in the score by at least 5% from previous year's score. If the winning District Hospital does not meet the said criterion, then it would only receive the commendation award subject to facilities scoring >70%. There have been instances where winning health facilities scoring more than 95% marks on External Assessment. Such facilities should be accorded 'mentor' status and they should eventually support other health facilities in achieving the Kayakalp award.

Agenda Point 8 (Standard Treatment Guidelines)

Standard Treatment Guidelines (STGs): In order to increase the usage of STGs, AS & MD suggested displaying them at the point of use and on websites of MoHFW & NHSRC. The support of WHO can be sought for developing implementation tools for STGs. AS&MD also suggested that Department of

Health Research (DHR) would be the appropriate institution for take on the task of evolving institutional framework on Standard Treatment Guidelines.

Agenda Point 9 (Inclusion of NQAS certification under IRDA conditionality for Health insurance)

9.1 Inclusion of NQAS certification under Health insurance: IRDA has recently has made NABH entry level mandatory for empanelling of the hospitals for cashless service which puts NQAS certified public hospitals in a disadvantageous position. Hence, it was suggested to provide insurance incentives to hospitals who achieved NQAS certification.
In this regard, a decision was taken to send a letter from MoHFW to Chairman, IRDA requesting for inclusion of NQAS certification as an option for empaneling with the health insurance schemes. Also, RSBY (Rashtriya Swasthya Bima Yojana) and the States may be requested for providing incentive benefits to the hospitals certified under the NQAS. The example of Karnataka is best practice in this regard was emphasized.

Agenda Point 10 (Refresher's Training for External Assessors through WebEx/Skype)

- **10.1 Refresher's Training:** An online, one day 'Refresher's training' of certified External Assessors was approved.
- **10.2 Training & Capacity building: For** building the capacity of the States and increase the numbers of Quality professionals, conduct of online courses/classes for Quality Improvement in Healthcare were approved.

Agenda Point 11 (Recognition/Reward for Quality Teams)

11.1 Recognition/Reward for Quality Teams: In order to boost the zeal for continual Quality Improvement and sustenance of best practices, a need was felt to recognize the efforts of best performing Quality Units. Hence, rewards for the best performing Quality Units at State & District levels were approved.

Agenda Point 12 Gunak (Quality Assessment Tool)

12.1 Gunak (Quality Assessment Tool): Inclusion of LaQshya scheme for Labour room on 'Gunak' Platform was approved in the meeting.

The meeting ended with a vote of thanks to the chair and the members.

<u>'Annexure I'</u>

<u>List of Participants: Central Quality Supervisory Committee</u>

List of CQSC members:

S.NO.	Name	Designation
1.	Shri Manoj Jhalani	AS & MD, NHM, MoHFW - Chairman
2.	Smt. Vandana Gurnani	JS, RCH
3.	Smt. Preeti Pant	JS, Urban Health
4.	Dr. Rajani Ved	ED, NHSRC
5.	Dr. Teja Ram	DC, FP-II
6.	Dr. Sushma Dureja	DC, Adolescent Health
7.	Dr. P.K. Prabhakar	DC, Child Health-II
8.	Dr. Dinesh Baswal	DC, Maternal Health I/C
9.	Dr. M.K Aggarwal	DC,UIP
10.	Ms. Biswajit Das	Director, Statistics, MoHFW
11.	Capt. Kapil Chaudhary	Director, NHM, MoHFW
12.	Dr. J.N. Srivastava	Advisor, QI, NHSRC – Member Secretary

Others:

S.NO.	Name	Designation
1.	Dr. Nikhil Prakash	Senior Consultant, QI, NHSRC
2.	Ms. Shraddha Masih	Senior Consultant, QI, NHSRC
3.	Dr. Deepika Sharma	Consultant, QI, NHSRC
4.	Dr. Namit Singh Tomar	Consultant, QI, NHSRC
5.	Ms. Vinny Arora	Consultant, QI, NHSRC
6.	Dr. Shivali Sisodia	Consultant, QI, NHSRC