

Minutes of 6th Central Quality Supervisory Committee Meeting

249-A, 2nd Floor, Nirman Bhawan,
Ministry of Health and Family Welfare, New Delhi

22nd July' 2021

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Sixth meeting of Central Quality Supervisory Committee (CQSC) was held on 22nd July' 2021 under the chairpersonship of Ms. Vandana Gurnani, Additional Secretary & Mission Director NHM MoHFW. List of the participants is enclosed at Annexure 'I.

The meeting initiated with a welcome address by Ms. Vandana Gurnani, AS & MD-NHM and thereafter she directed the member secretary, Dr J N Srivastava, Advisor, QI to start the proceedings. In-depth discussions were held on the following points:

- ATR (Action Taken Report) on the decisions taken in the fifth CQSC meeting held on 26th October' 2020,
- Status and achievements of the quality assurance programme across the states
- Upcoming interventions under the existing framework of NQAS
- Decision points

Detailed discussions/decisions undertaken in the meeting are as under:

Agenda Point 1: Action Taken Report (ATR) on decisions of 6th CQSC meeting:

1.1 Inclusion of NQAS Certified into Gold Category

Dr Sachin Mittal, Director NHM informed that the issue was taken up with the NHA on 13th April 2021 on file. However, it was not agreed to. Thereafter, Mr. Vishal Chauhan, Joint Secretary (Policy) informed that a D.O. letter is being written by the health secretary to the CEO of NHA.

Action to be taken:

- AS & MD instructed that matter needs to be pursued immediately and in case our request is denied by the NHA, we must find out from NHA about the inadequacies in existing NQAS framework (if any).

1.2. IT enabled certification system for NQAS and LaQshya

It was informed that a MoU had been signed between NHSRC, New Delhi and the Centre for Development of Advanced Computing (CDAC) on 11th February'21 to develop an integrated solution for the quality assessments. A series of virtual meetings have been held with the CDAC team and a prototype application is under finalisation. This IT enabled certification system will have provision of physical as well as virtual assessments under NQAS, LaQshya, etc.

1.3 Finalization of Quality Standards for HWC

A dissemination workshop for the National Quality Assurance Standards of Health and Wellness Centres was conducted on 2nd July 2021, when JS(P) had delivered the inaugural address. To support the states/UTs in implementation of quality standards at the HWCs, a guidance note has been submitted to MoHFW for its approval.

Action to be taken:



- AS & MD instructed that matter needs to be pursued immediately and guidance note should be finalised earliest to support the roll-out of quality standards at HWCs
- AS & MD also directed to fast track the finalisation of quality standards for Primary Health Centres which have now been converted into HWCs

1.4 Patient Safety Standards

Subsequent to decision taken in 5th CQSC meeting, an expert group, duly approved by MoHFW, was constituted to develop draft patient safety standards. However, it was decided in the last NHSRC EC meeting on 11th March 2021 that separate certification against patient safety standards need not be undertaken. Self-assessment tools may be developed to support the health facilities for ensuring delivery of safe care.

Action to be taken:

- Advisor (QI) informed that self-assessment tool is being developed and final draft will be ready by first week of the October 2021.

1.5 Effective dissemination of STGs

A meeting was held under the chairpersonship of ED, NHSRC on June 22,2021 to review the prototype of 'online' module. The inputs were shared with National Institute of Epidemiology – ICMR for necessary action.

1.6 Publish Prescription Audit Guidelines

It was informed that approved prescription audit guidelines have been shared with the states/UTs. A national dissemination workshop will be conducted in the month of August to support implementation of the audit guidelines at facility level.

1.7 Develop scheme on Child-friendly services 'MusQan' under NQAS framework

It was briefed by Advisor, QI that draft scheme has been discussed in a meeting on 15 July 2021 with JS (RCH) in the chair and CH Division. Subsequently, after incorporating suggestions, revised scheme & assessment tools have been submitted for approval. Dr Sumita Ghosh, Additional Commissioner- CH submitted to include ICU and HDU departments within the scope of MusQan scheme. Since, guidelines for ICU and HDU departments are yet not finalised, AS & MD directed to include these departments later, as and when, these guidelines are approved by the MoHFW.

Action to be taken:

- It was reiterated by the AS & MD that the scheme must be finalised soon so that it could be launched on 17th Sep 21 (World Patient Safety Day) by Honourable HFM.

1.8 Advisory to the States to relieve the assessors, as and when requested



It was decided in the 5th CQSC meeting that an advisory needed to be issued to the states to relieve the assessors, as and when required to conduct national assessment of at least two public health facilities in a year. However, due to upsurge of 2nd wave, matter has not been pursued further.

1.9 Advisory to states to utilize Gunak for conducting self-assessment

Advisor (QI) apprised that an advisory letter has been sent to all the states/UTs to utilise GUNAK app for conducting the assessments.

1.10 Dissemination of 'Quality Darpan' through MoHFW

Advisor (QI) shared that final draft is in the MoHFW for approval and will be disseminated after its approval.

1.11 Share the PRCs Impact assessment studies with the respective states

All the key findings of the impact assessment studies were shared with the respective states for taking appropriate actions.

1.12 Commence the physical assessment of health facilities for Quality certification

Due to upsurge of 2nd wave, physical assessment of health facilities could not be started. However, a willingness from the empanelled external assessors for up taking physical assessments has been obtained and around 300 assessors have given their consent for the same.

Action to be taken:

- Commencement of physical assessments from 1st September 2021 onwards as per the willingness of the states. Option for conduct of virtual assessment will also be available to the states.

1.13 Re-certification and surveillance protocol for LaQshya certifications on the lines of NQAS certification

Process of re-certification and surveillance protocol for LaQshya certification on the lines of NQAS certification has been implemented.

1.14 Prepare Mera- Aspataal questionnaire in other Indian languages.

After approval of MoHFW, questionnaire is being translated in 12 other languages by NHSRC.

Agenda Point 2: Status and Achievements under National Quality Assurance Standards and its related domains

2.1 Status of NQAS Certifications



The status of National Certified facilities was then discussed. Advisor (QI) informed that a total of 942 facilities (both urban and rural) have been certified nationally, while 1061 (both urban and rural) facilities are State Certified.

Action to be taken:

- AS & MD pointed out that ensuring quality in delivered services at public health facilities is one of the key priority of NHM. Current trajectory of the certification is not likely to result into NQAS certification of most of public health facilities. She directed to prepare a road-map for next five years with a target of 50 % health facilities getting quality certified in the next phase of NHM.
- AS & MD also asked to explore the possibility of institutional collaboration for supporting implementation of NQAS within the states and simultaneously, concerted efforts to strengthen surveillance system under the NQAS

2.2 Status of LaQshya Certifications

Advisor (QI) informed that a total of 400 labour rooms and 328 maternity operation theatres have been certified nationally under the LaQshya initiative.

2.3 Status of Kayakalp

Subsequently, Advisor (QI) presented the status of Kayakalp award scheme and progress of the States/UTs over the years. Total number of Kayakalp Awardee facilities has increased from 100 facilities in the FY 2015-16 to 9815 in FY 2020 2021.

2.4 Swachh Swasth Sarvatra (SSS)

The CQSC members were briefed that in the year 2021-22, Rs. 1938.55 lakhs have been approved as a one-time grant to CHCs & U-PHCs in the ODF blocks and wards respectively for improving the hygiene and sanitation.

2.5 Mera-Aspataal status

While providing the status of 'Mera-Aspataal' feedback system, Adviser-QI mentioned that a total of 8156 health facilities across 34 states/UTs are integrated with Mera Aspataal with a satisfied response from 76.73% beneficiaries.

2.6 Support for free drug service initiative (FDSI)

It was informed by Advisor-QI that revised EMLs for DH/SDH/CHC have been submitted to MoHFW for approval and revised EML for UPHC is under preparation. The division is also in the process of drafting guidelines for district drug warehouse planning.

2.7 Training and Capacity Building

Advisor-QI briefed that a total of 591 batches of trainings have been imparted since the inception of the programme, out of which, 36 batches were conducted virtually.



Action to be taken:

- AS & MD instructed to plan one or two batch of External Assessor Trainings (EAT) in the current FY 2021-22 to increase the pool of External Assessors for anticipated high load

2.8 NQAS for Comprehensive Lactation Management Centre (CLMC) and breastfeeding practices in health facilities

Advisor-QI informed that draft revised assessment tool and certification criteria have been submitted to MoHFW for approval.

2.9 Support to the States in COVID activities

Advisor (QI) shared the support, which was provided to the states in strengthening the COVID response.

- Webinar on "Managing Bio-Medical Waste during COVID-19 pandemic in Domiciliary and Institutional Care" and it was attended by 1800+ Participants from all states/UTs
- A series of 'Infection Prevention Practices and BMW Management in COVID Care Health facilities'. More than 8000+ participants from state, district & facilities were trained
- Standard Operating Procedure for Data Security during Online Assessments was drafted and circulated to ensure 'Data Security' while assessing facilities in the virtual mode.
- A video on 'Linen Management during COVID-19 Pandemic' was developed for the HCF staff for strengthening the management of linen of COVID-19 patients.
- A 'Motivational cum Informative Video on COVID-19' to boost up the self-confidence of patients with COVID-19 infection was developed

Agenda Point 3: Upcoming interventions under the existing framework of NQAS

Subsequently, Advisor (QI) mentioned about the expansion of the existing scope of National Quality Assurance Program to the domains:

1. Development of 'NQAS for Elderly Care Services'
2. Development of 'NQAS for Optional Services' under the IPHS Guidelines
3. Strengthening of the quality standards for 'Data management and E-Record Maintenance' at facility level.
4. Development of an App for 'SCAET' (Skill and Competence Assessment & Enhancement Tool).
5. Development of a framework for engaging family and community in patient care.
6. Development of short video films regarding implementation of NQAS at public health facilities.

Action to be taken:



- AS & MD emphasised that given the scope and magnitude of challenge in ensuring quality services at a public health facilities it would be prudent to expand the scope of services covered under the NQAS as per NHM mandate. But at the same time she also emphasised that all the newer initiatives must be undertaken within in the existing framework of NQAS only.

Agenda Point 4: Key decision

4.1 NQAS roll-out under SUMAN initiative

It was highlighted by Advisor (QI) that for assuring Quality in delivered care and sustaining it, all SUMAN notified health facilities are expected to undergo NQAS state and national certifications. Currently, 120 SUMAN notified facilities are State NQAS certified, and 117 nationally certified. However, 163 SUMAN facilities are yet to have any kind of Quality certification. Matrix of Departments considered under the SUMAN packages at various levels was also presented.

Action to be taken:

- AS & MD directed to expedite the process of quality certification in 163 out of 400 health facilities which are neither state quality certified nor nationally quality certified.

4.2 LaQshya incentive

The proposal for awarding incentive to the LaQshya certified facilities on the similar lines of NQAS i.e., for 3 years subject to annual validation and submission of yearly surveillance assessment report by the states was approved by the AS & MD.

4.3 Post training Evaluation following Re- fresher Training

It was highlighted by Advisor (QI) that there are few assessors, who do not keep abreast of latest developments. Therefore, he proposed to introduce a post-training evaluation for renewal of the empanelment of external assessors under the NQAS. Unsuccessful candidates will be given two more chances to appear in the evaluation test. In case, they don't qualify in three attempts, their names will be removed permanently from list of NQAS empanelled assessors. This was approved.

4.4 Expansion of NQAS to 'Not for Profit' Organisations

A proposal to expand NQAS to Non-for-profit organizations working with governments was put forward by Advisor (QI). The proposal was discussed at length. It was agreed that at present the division should support the implementation of NQAS in public health facilities to meet the NHM mandate.

4.5 Webinar on 3rd Patient Safety Day

It was proposed to observe the 3rd 'World Patient Safety Day' on 17th September'2021 under the theme of 'Safe Maternal and Newborn Care'.



Action to be taken:

- AS & MD suggested to prepare a list of activities to be undertaken by the states/UTs on the occasion of patient safety and an advisory letter could be issued from the MoHFW for observing patient safety day by the states/UTs
- Organise webinar with eminent national and international subject experts
- Recognition of NQAS and LaQshya certified facilities/states could be undertaken based on certain criteria/norms and the same could be drafted by the QI division

4.6 NQAS Certification of Haemodialysis Unit

Advisor (QI) briefed that the division has developed quality standards (draft) for haemodialysis unit under the guidance of an expert-group and also proposed to have stand-alone scheme for quality certification of Haemodialysis Unit. After discussion, it was decided that the facility may opt for NQAS assessment of Haemodialysis Unit under the full certification or part certification of the hospital. No stand-alone certification scheme for the dialysis unit should be launched.

5 AOR

With the permission of the chair, Advisor (QI) mentioned that after World Health Assembly (WHA) recognized that Patient Safety is a global health priority, there is an increased focus on Patient Safety internationally. Though key attributes of patient safety are embedded in the existing NQAS framework, there is a need to rename the name of the division to ***"Quality and Patient Safety Division"***. AS&MD and other CQSC members agreed to the proposal. However, AS & MD instructed that no changes should be incorporated in the naming of NQAS certification.

In her concluding remarks, the chairperson asked the QI Division to prepare a timeline of all the planned activities and expedite.

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

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Annexure 'A'**List of Participants (6th CQSC Meeting)****A. Attended in-person**

| | Name | Designation |
|----|---------------------|---|
| 1 | Ms. Vandana Gurnani | AS&MD - NHM |
| 2 | Shri Vishal Chauhan | JS (Policy) |
| 3 | Dr Ashok Babu | JS (RCH) |
| 4 | Shri Sachin Mittal | Director – NHM II |
| 5 | Dr S K Sikdar | Advisor - Maternal Health & Family Planning |
| 6 | Dr J N Srivastava | Advisor-QI, NHSRC |
| 7 | Dr Deepika Sharma | Sr. Consultant- QI, NHSRC |
| 8 | Dr Arpita Agrawal | Consultant- QI, NHSRC |
| 9 | Mr. Mandar Randive | Consultant-Policy & Planning, MoHFW |
| 10 | Ms. Nondiya Wanth | Jr Consultant NHM |

B. Attended virtually

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| 11 | Maj. Gen (Prof) Atul Kotwal, SM, VSM | ED-NHSRC |
| 12 | Shri Robert Singh | Director – NHM |
| 13 | Dr Sumita Ghosh | Additional Commissioner-CH/AH/RBSK |
| 14 | Dr Teja Ram | Additional Commissioner-MH and Family Planning) |
| 15 | Dr Sila Deb | Additional Commissioner-CH |
| 16 | Dr Padmini Kashyap | Assistant Commissioner-MH |
| 17 | Dr Sunny Swarnkar | Dy. Asstt. Director General (DADG), DGHS, MoHFW |
| 18 | Dr Ashok Roy | Director – NERRC |
| 19 | Dr Santosh Ojha | Senior Consultant-MH |
| 20 | Dr Rashmi Wadhwa | Senior Consultant-MH |
| 21 | Ms. Jyoti Rai | Consultant – Public Health |
| 22 | Dr Gaurav Chauhan | Consultant – Public Health Policy & Planning |
| 23 | NHSRC-QI Team | |

