

**Chattisgarh Internal Assessor Training  
on National Quality Assurance  
Standards**

**27th to 28th May 2015**

**Conducted by:  
National Health System Resource Centre in  
collaboration with NHM, Madhya Pradesh**

**TRAINING COORDINATOR:** Surbhi Sharma (Consultant, NHSRC, New Delhi)

Ms.SharvariUbale (Consultant QA, Chattisgarh)

**DATE OF TRAINING:** 27<sup>th</sup> to 28th May 2015

**PLACE OF TRAINING:** Hotel Sheetal International, Chattisgarh

**COURSE OVERVIEW:** The course schedule (Attached in Annexure I)

**PARTICIPANTS OF TRAINING:** Total no. (*List attached in Annexure II*)

### **OBJECTIVES OF TRAINING:**

The specific objectives of the Training programme were: -

- A) To set up pool of Internal Assessors for state of Chhattisgarh
- B) To equip assessors with knowledge of key concepts, tools and methodologies of National quality assurance standards.
- C) Provide skill to assessors to independently assess different area of concern, measurable elements & checklist
- D) To develop skills and acumen to carry out internal evaluation as well as assessment of hospitals.

### **BACKGROUND**

Under National Health Mission, to improve the quality of Health care services at public hospitals, Ministry of Health & Family welfare, Govt. of India, has launched National Quality Assurance Standards. To comply these standards, Govt. has launched operational Guidelines as well as Assessor's Guidebook for District hospitals, CHC (FRU) and PHC (24X7).

For implementation and certification under National Quality Assurance Standards (NQAS), 4 types of trainings courses were designed i.e. one day Awareness training, two days Internal Assessor Training, three day Service provider training and five day External Assessor training.

Two day internal assessor training is mandated for assessors who will periodically assessed their facilities covering all critical departments and action plan would be prepared on observed non conformities.

Main aim of training is to provide complete understanding of standards, their sub components, & scoring methodology to aspiring Internal Assessors.

There is fixed curriculum for the training extended up to period of two days, followed by written evaluation of aspiring Internal Assessor. In evaluation, if trainer would be able to score minimum 60 % of marks, than he/she will be awarded with Internal Assessor Certification for NQAS & eligible as an empanelled Internal Assessor for the State.

## **EXECUTIVE SERVICE**

1st Internal Assessor training was conducted by NHSRC in collaboration with NHM, Chhattisgarh from 27<sup>th</sup> May to 28<sup>th</sup> May 2015 at Hotel Sheetal International, Chhattisgarh

The aim of training was to strengthen assessor's knowledge of key concepts, tools, and methodologies for assessment of National Quality assurance Standards. Course curriculum for training was prepared by the NHSRC and was duly syndicated with state. Participants consisted of the District Program Managers, Hospital Consultants, State QA Consultants, and Regional QA Consultants.

The participants were given-

1. A copy of Operational Guideline for National Quality Assurance in public health care.
2. A copy of Assessor's guidebook for District Hospital.(Volume1 & Volume 2)
3. A Bag with writing pad and pen.
4. Instruction's for Participant about "Internal Assessor's Training.
5. Hard copy of Exercises and material wherever required during training.

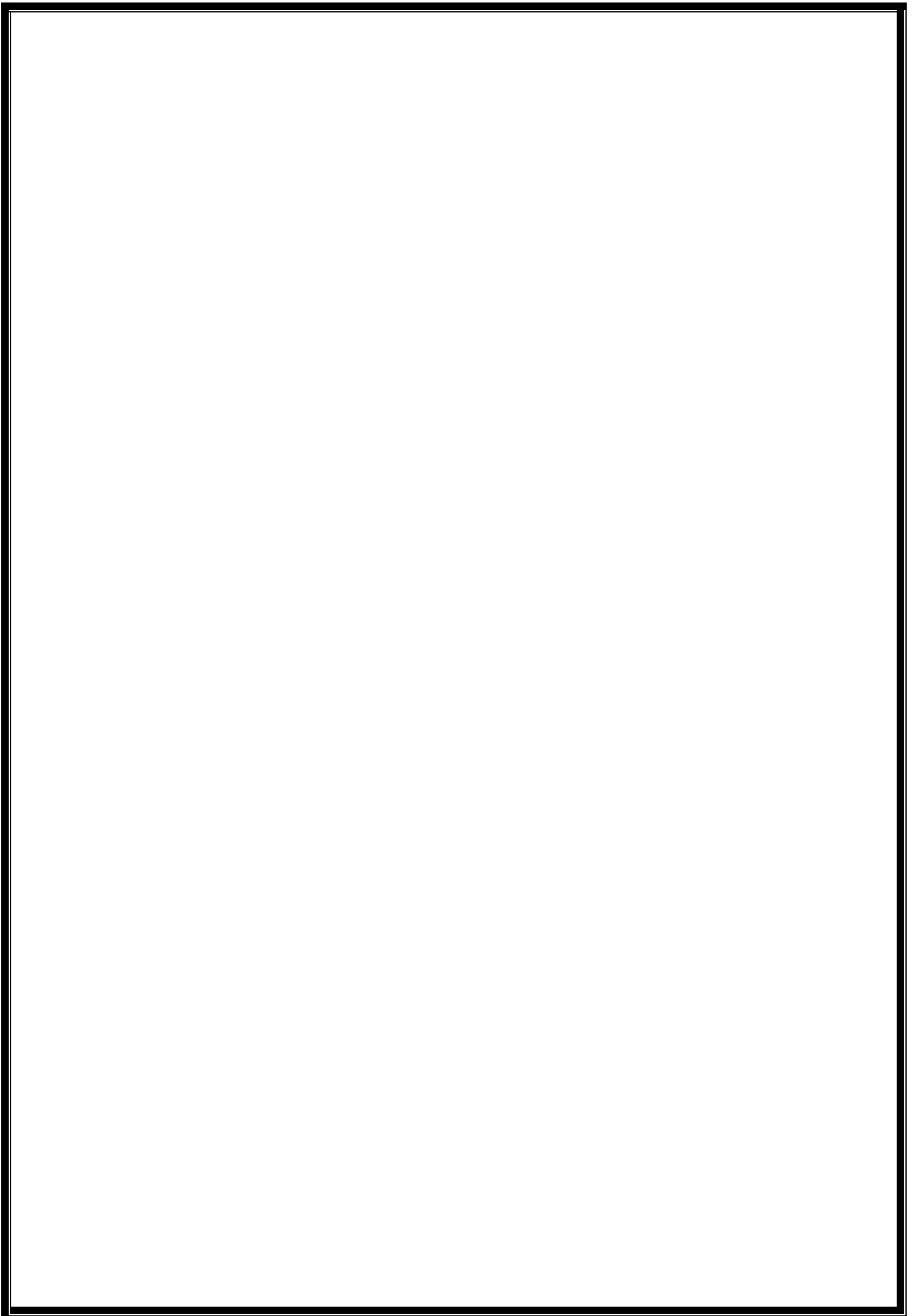
Dynamic Training tools like Group discussions; Interactions, individual work etc. has been used to facilitate focused learning and keep the interest of the audience alive.

The programme had 12 Sessions, spread over a period of two day.

Feedback from the participants was taken and the report contains analysis and suggestions given by the participants.

Training was started with welcome speech from Dr. Rajesh Raipur (DD, NHM, and Chhattisgarh)

The overall rating of the programme in feedback was good with an overall score of 3.72 on day 1 and 3.59 on day 2. The average score of overall training is 3.65



**Session 1 :-Overview of National Quality Assurance Program:** - The Training session started with a presentation on overview of the **National Quality Assurance Programme**.

The topic was delivered by Dr.Parminder Gautam, while delivering the lecture he first briefed about Quality .He tried to involve the participants and discussed the definition of quality as per their perspective. He talked about the various quality certification programmes which are existing in the country and tried to explain the evolution of National Quality Assurance Programme in context of Public Health Facilities. During the presentation, Dr.Parminder threw light on the various approaches of quality which included:-

1. Quality Assurance
2. Quality improvement
3. Quality Management
4. Accreditation and certification

He quoted various examples for the participants to understand the approaches of **“QUALITY”**.

His presentation briefed the participants on the key features of the National Quality Assurance Programme. While explaining this he talked about the eight key features of the programme which includes:-

1. Unified Organizational Framework
2. Explicit Measurement System
3. Flexibility of adopting as per state's need
4. Training & Capacity Building
5. Continuous Assessment and scoring
6. Inbuilt Quality Improvement Model
7. Certification at State & National Level
8. Incentives on Achievement & Sustenance

While briefing these key features he talked about the structure of the QA cells at the state as well as the district levels. He discussed the compositions as well as functions of the SQAC, SQAU, DQAC and DQAU as well as DQT.

He explained that the NQAS is an implicit system which is user friendly, balanced, comprehensive as well as transparent. While explaining the flexibility

of the standards he explained that the standards can be customized as per the state need.

Dr.Gautam explained the various types of trainings that have been suggested under the NQAS programme along with the target audience to strengthen the state capacity for rolling out this programme. He talked about the assessment scoring pattern as well as performance measurement from the facility, district, state as well as the National level.

The presentation also briefed the participants of the facility level activities which need to be implemented at the facility level for an inbuilt quality improvement model. At last in key features he explained the certification process as well as incentives related to the certification process.

Dr.Parminster also explained about measurement system of **NQAS** and the relationship between the areas of concern -Standard -measurable element -Checkpoint and approaches for assessment. Participants were explained about the scoring patterns and the method to obtain the cumulative hospital score card. This helped the participants to acquaint themselves with the newly introduced National Quality Assurance standards.

**Session 2:-** The first three areas of concern A, B and C: **-Service Provider, Patients' Rights and Inputs** were covered in session 2, which was delivered by Ms.Surbhi Sharma. While delivering the area of concern A "Service Provider" all six standards were covered. She talked about the provision of services under this area of concern in context of Curative Services, RMNCH+A, Diagnostics, Support Services as well as provision of services as per the community needs. The applicability of these standards was shown in various checklists to have a better understanding of the standard. She also highlighted the various means of verification that should be used for checking the standard.

The session continued with Area of Concern B "Patient Rights" .Ms.Surbhi tried to involve the participants and learnt from them as to "What they consider are the rights of the Patients". There was variety of answers which made the standard clear to them. Various pictures were used in this presentation which were focused on the patient rights .Later all the five standards Information, Accessibility ,Privacy and Confidentiality, participation as well as free services were discussed with them.

Continuing, Ms.Surbhi covered the area of concern C that is Input. All the six standards mentioned below were discussed.

1. Infrastructure and Space which talked about space, patient amenities, layout, circulation area, internal and external communication, availability of service counters as per load and structure plan as per process.
2. Physical Safety which talked about seismic, lift, fire as well as building safety
3. Fire Safety which threw a light on fire safety plan, fire safety equipment and fire safety training.
4. HR which talked about the availability of Specialist, nurses, technicians, support staff per the scope of services and provision of their training and job responsibilities.
5. Drugs and Consumables which talked about drug, consumables and availability of Emergency trays.
6. Instruments and Equipment: Availability as per the scope of services.

### **Session 3:-**

A case study on labor room was given to the participants. The participants were expected to go through the labor room case study and score the labor room. The case study was discussed along with the scores the participants had given. The participants learnt the art of scoring a department as per the NQAS pattern on the scale of 0,1 and 2 and correlated non compliances, partial compliances as well as full compliances with the scale. All the participants expressed their views on scoring and clarified their doubts. The case study proved to be very helpful in acquainting the participant with the scoring pattern.

### **Session 4:-Standards for General Clinical Services**

Standards for General Clinical services were covered by Dr. AK Datta. He explained the participant that the Clinical services is area of concern E, which is divided into 3 parts. Standards E1 to E9 talks about General clinical services, Standards E9 to E16 talks about specific clinical process while standard E16 to E 23 talks about RMNCH+A services.

Under General Clinical Services the various standards that were covered were:-

1. Consultation and Admission- which talked about the defined procedures for registration consultation and admission

2. Assessment- talked about the clinical assessment and reassessment of the patient
3. Continuity of care- which talked about the defined procedures for continuity of care of patients
4. Nursing care -talked about the established procedures of nursing care
5. High risk patients- talked about the procedures of identifying high risk patients and vulnerable patients
6. Rational use of drugs- which talked about the standard treatment guidelines defined by state/central government for prescribing generic medicines
7. Medication safety -talked about procedures for safe drug administration
8. Medical records- which talked about maintenance, updating of patients clinical record and their storage.
9. Discharge - which talked about the established procedures for patients discharge

## **Day 2**

**Session 1:-**The training on day 2 started at 9:30 am .The first session was an **exercise, Identintifying standards.** Each participant picked up a chit in which a word /sentence was mentioned. The participants were expected to identify as to which standard it belongs. On this basis each participant identified their Area of concern. The participants successfully identified their groups .Eight groups belonging to eight areas of concern were formed. Each group was expected to present and discuss the following things.

1. Importance of their respective area of concern ( Service provision, Patient Rights, Inputs, Support Services, Clinical Services, Infection Control, Quality Management and Outcome)
2. Various standards covered in their respective area of concern

This group exercise enhanced the capacity of the participants in identifying standards as well as relates it to the concerned area of concern. The participants also got acquainted with the different standards under each area of concern and their importance in the facility.

## **Session 2:- Standards for Clinical Services (Specific & RMNCHA)**

The session was delivered by Dr.AK Datta. Dr.Datta discussed various standards falling under the clinical services.

1. Intensive Care: - He discussed some specifications of ICU, the structure as well as the processes.



2. **Emergency Services:-** He discussed the process flow diagram in Accident and Emergency Department
3. **Diagnostic Services:-**
4. **Blood Bank and Transfusion**
5. **Anesthesia -** He discussed about the Pre Anesthesia care, Anesthesia records and Post Anesthesia care.
6. **Surgical Services:-** He talked about OT scheduling, preoperative care, surgical safety and post-operative care.
7. **End of Life care and Death -** He talked about death note, death management, End of life support and post mortem.

### **Session 3:-Standards for Support Services**

The topic was delivered by Ms.Surbhi Sharma .She highlighted that it is area of concern D which covers twelve standards. The presentation gave an overview of the support services that exist in a facility.Ms.Surbhi Sharma highlighted that support services in a facility is the backbone of the hospital operations. She explained that the quality of services is directly related to it.The various standards she discussed under this topic are :-

1. **Equipment maintenance:-** The standard talked about the equipment maintenance, calibration and availability of operating instructions.
2. **Inventory Management:-** The standard gave an overview of the indenting procedure, drug procurement and management, management of expiry, inventory management, cold chain and process of psychotropic and narcotic drug.
3. **Safety and Security :-** The standard talked about illumination level, visitor policy, women safety, security system.
4. **Facility Management:-** The standard talked on the established programme for maintenance and upkeep of facility
5. **Water and power supply :-** The standard talked about 24\*7 water and electricity supply as per service delivery
6. **Dietary Services-** The standard talked about the provision of the dietary services as per the nutritional requirements of the patient
7. **Laundry Services :-** The standard talked about the provision of clean linen to the patients
8. **Community monitoring :-** The standard talked about the procedures for promoting public participation in management of hospital
9. **Financial management:-** The standard talked about the proper utilization of the funds.
- 10.**Legal Compliances:-** The standard talked about the compliances with statutory requirements, regulatory requirement etc.
- 11.**HR Management:-** The standard talked about job description, dress code and procedures of deputation.
- 12.**Contract Management-** The standard gave an overview of contract management and outsourced services.

#### **Session 4:- Standards for Infection Control**

The session on infection control was delivered by Dr.Ak Datta. Dr Datta discussed the six standards under infection control. He discussed the standard precautions as under:-

1. Hand Hygiene
2. Personal Protection
3. Instrument processing
4. Environment control
5. Bio Medical Waste Management

While discussing the first standard, he discussed on the infection control programme which stressed on the infection control committee in the facility. He talked about the composition as well as functions of the committee. Hospital acquired infection, staff immunization as well as monitoring of infection control practises was discussed under this standard.

Standard on Hand Hygiene was focussed on the six steps of hand washing. The availability of hand washing, antiseptics,

Under Personal Protection:-availability and adherence to personal protective equipment was discussed under this standard.

Instrument Processing was discussed under which decontamination, cleaning and disinfection as well as sterilization was discussed. While discussing this standard a video was shown to the participants on the process of decontamination, disinfection as well as sterilization of the instrument and equipment.

Under Environment control availability of disinfectant material, Environment cleaning practises, isolation practises and air quality as well as layout of the departments were discussed.

Procedures for segregation, collection, treatment and disposal of Bio Medical and hazardous Waste were discussed.

#### **Session 5:- Key Performance Indicators**

Dr.Parminder Gautam presented on **“Key Performance Indicators”**. Participants were explained about all the 30 indicators mentioned in the operational guidelines and were given examples to calculate each indicator. This session was very participative as it engaged all the participants for exercise.

#### **Session 6:- Overview of Swachta Tools**

Introduction of Swachata Abhiyan and KAYAKALP Scheme of GOI was discussed by Dr.Parminder Gautam. Dr.Gautam first discussed about the swachata Guidelines and its importance in Public health facilities. Followed by this Dr.Gautam also explained about GOI Scheme of “KAYAKALP”. He said for FY-2015-16, State is supposed to take all District Hospital under this scheme; best

district hospital will get Rs. 50 Lakhs, followed by 2<sup>nd</sup> prize of 20 lakhs and consolation award of Rs. 3 lakhs for facilities scored more than 70%. State can propose budget under this scheme for its implementation under Supplementary PIP.

#### **Session 7:-**

Last session of this training was Standards for Quality Management and Roadmap. The standards under Quality Management were:-

1. Organizational Framework
2. Patient Satisfaction surveys
3. Internal and External Quality Assurance Programme
4. Standard Operating Procedures
5. Process Mapping
6. Internal Assessment and Clinical audits
7. Quality policy and objectives
8. Continual quality improvement

While giving briefing on roadmap, a ten step approach for achieving the certification was discussed. All the steps of facility based quality improvement programme were briefed .The participants were also told about the incentives linked with NQAS certification in terms of financial and non-financial.

After completion participants were given question paper with 42 multiple choice questions. 3 set of question paper were prepared for evaluation.

***Annexure I***  
**Internal Assessor's Training on National Quality Assurance  
Standards  
27<sup>th</sup> and 28<sup>th</sup> May 2015, Chhattisgarh**

<b>Time</b>	<b>Topic</b>	<b>Resource Person</b>
9:00AM-9:30 AM	<b>Registration</b>	
09:30AM - 10:00 AM	<b>Inaugural Address MD NHM</b>	
10:00-11:45 AM	<b>Overview of National Quality Assurance Program and Measurement System for Quality Assurance &amp; Assessment Protocol</b>	<b>Dr. Parminder Gautam</b>
11:45 AM to 12:00 PM	<b>Tea</b>	
12:00 PM to 1:30	<b>Standards for Service Provision , Patient Rights&amp; Inputs</b>	<b>Ms. Surbhi Sharma</b>

PM		
1.30PM-2:30 PM	<b>Lunch</b>	
2:30 PM to 3:00 Pm	<b>Case Study 1</b>	<b>Ms.Surbhi / Dr.Parminder</b>
3.00 PM - 3.15 PM	<b>TEA</b>	
3:15 PM to 4:00 PM	<b>Standards for General Clinical Services</b>	<b>Dr.AKDatta</b>
4:00 PM to 5:00 PM	<b>Identifying Standards</b>	<b>Ms. Surbhi /Dr.Parminder</b>
<b>Day-2</b>		
9:00 AM - 9:30 AM	<b>Recap</b>	
9.30 AM - 11:00 AM	<b>Standards for Clinical Services (Specific &amp; RMNCHA)</b>	<b>Dr. AK Datta</b>
11:00 AM -11:15 AM	<b>Tea</b>	
11.15 AM-12:00 AM	<b>Standards for Support Services</b>	<b>Ms.Surbhi Sharma</b>
12.00 PM-12:45 PM	<b>Standards for Infection Control</b>	<b>Dr.AKDatta</b>
12:45 PM -1:30 PM	<b>Key Performance Indicators</b>	<b>Dr. Parminder Gautam</b>
1.30 PM - 2:30 PM	<b>Lunch</b>	
2.30 PM - 3:00 PM	<b>Overview of Swachta Tools</b>	<b>Dr.Parminder Gautam</b>
3.00 PM - 4:00 PM	<b>Standards for Quality Assurance and Roadmap</b>	<b>Ms.Surbhi Sharma</b>
4:00 Pm - 5:00 PM	<b>Post Training Evaluation</b>	
5:00PM - 5:15 PM	<b>Feedback &amp; Valedictory</b>	

***Annexure II***  
**List of Participants for IA-Training Chhattisgarh**

<b>S.n</b>	<b>Organization &amp;</b>		
<b>o</b>	<b>Name</b>	<b>Designation</b>	<b>Place</b>
1	PRAVEEN SHARMA	DPM	KAWARDHA
2	RAKESH DEWANGAN	DAM	MAHASAMUN

			D
3	UTKARSH TIWARI	DPM	BILASPUR
4	MANISH KUMAR MAIJORWAR	DPM	KORBA
5	PADMAKAR	DPM	JANJGIR
6	GIRISH KURRE	DPM	RAIGARH
7	DR SARAVJEET	DPM	DANTEWADA
8	DR BHUMIKA VERMA	DPM	GARIYABAND
9	SMRITI EKKA	DPM	BALRAMPUR
10	VIBHA TOPPO	DPM	JASHPUR
11	LATA BANJARE	DPM	BALODABAZA R
12	DR NISHA MAURYA	DPM	BASTAR
13	DR REENA LAXMI	DPM	BALOD
14	P. MAJUMDAR	DPM	RAJNANDGAO N
15	SRISHTI SHARMA	DPM	MUNGELI

16	NEELU GHRITLEHRE	DPM	KONDAGAON
17	RAVIV KUMAR SINGH	DPM	KANKER
18	SANDEEP TAMRAKAR	DPM	DURG
19	GANPAT KUMAR NAYAK	DPM	SURAJPUR
20	DEEPAK KUMAR DHARA	DPM	SARGUJA
21	RAJIV RANJAN MISHRA	DPM	KOREA
22	AKHILESH SHARMA	DPM	DHAMTARI
23	DR.PUSHPENDRA RAM	DPM	BIJAPUR
24	DEVENDRA GURJAR	HOSPITAL CONSULTANT	KORBA
25	HARDIK SELARKA	HOSPITAL CONSULTANT	JANJGIR CHAMPA
26	DR. OMPRAKASH VERMA	HOSPITAL CONSULTANT	BALOD
27	RANVEER SINGH BAGHEL	HOSPITAL CONSULTANT	RAIPUR
28	DR NIKHIL GOSWAMI	HOSPITAL CONSULTANT	MAHASAMUN D
29	AVIN CHAUDHARY	HOSPITAL CONSULTANT	RAJNANDGAO N

30	BHOGEN德拉 PATEL	HOSPITAL CONSULTANT	RAIGARH
31	KALYAN SINGH	HOSPITAL CONSULTANT	NARAYANPUR
32	DR RAKESH THAPA	HOSPITAL CONSULTANT	DHAMTARI
33	AASHISH BOSE	HOSPITAL CONSULTANT	DANTEWADA
34	NILESH GUPTA	HOSPITAL CONSULTANT	SURAJPUR
	SANDEEP KUMAR		
35	SHRINGI	HOSPITAL CONSULTANT	DURG
36	RAJESH KUREEL	HOSPITAL CONSULTANT	JASHPUR
37	PRIYANKA KUREEL	HOSPITAL CONSULTANT	SARGUJA
38	DR PRAMOD KUMAR	HOSPITAL CONSULTANT	KOREA
			BALODABAZA
39	DR SWATI YADU	HOSPITAL CONSULTANT	R
40	DR SHEFALI KUMAWAT	HOSPITAL CONSULTANT	BILASPUR
41	MITHLESH SONBER	HOSPITAL CONSULTANT	KANKER
42	SARFARJ ALAM	HOSPITAL CONSULTANT	BEMETARA
43	DR ANAND VERMA	PROGRAM ASSOCIATE	RAIPUR
44	DR PRAGNYA SONTEKE	QUALITY ASSURANCE	RAIPUR

		CONSULTANT	
45	SHARVARI UBALE	QUALITY CONSULTANT	RAIPUR
46	ROOPAL CHANDRAKAR	REGIONAL HOSPITAL CONSULTANT	SARGUJA
47	DR. ABHYUDAY SHAKTY TIWARI	REGIONAL HOSPITAL CONSULTANT	RAIPUR
48	DR APURVA TIWARI	REGIONAL HOSPITAL CONSULTANT	BILASPUR

<b>Annexure-iii</b> <b>Internal Assessor Training, Chhattisgarh Participant Feedback</b> <b>Evaluation</b>	
<b>Topic</b>	<b>Average</b>
Overview of National Quality Assurance Program and Measurement System Dr. Parminder Gautam	<b>3.77</b>
Standards for Service Provision, Patient Rights and Inputs Ms.Surbhi Sharma	<b>3.41</b>
Case Studies Dr.Parminder Gautam	<b>3.83</b>
Standards for General Clinical Services Dr.A.K.Dutta	<b>3.81</b>
Identifying Standards Ms.Surbhi Sharma	<b>3.77</b>
Standards for Specific Clinical Services Dr.A.K.Dutta	<b>3.45</b>
Standards for Support Services Ms.Surbhi Sharma	<b>3.39</b>



Standards for Infection Control Dr.A.K.Dutta	<b>3.68</b>
Key Performance Indicators Dr.Parminder Gautam	<b>3.83</b>
Introduction of "KAYAKALP" Dr.Parminder Gautam	<b>3.75</b>
Standards for Quality Management and RoadmapMs.Surbhi Sharma	<b>3.41</b>
<b>Overall Average</b>	<b>3.65</b>