



## **Guidance Note: Roll out of Quality Assurance under SUMAN**

### **1.1. Introduction:**

- In order to achieve SDG targets, firm implementation of the existing programs is the need of the hour. There is a need to go beyond 'service delivery' to 'assured service delivery'. With that aim the Government of India has launched "SUMAN – Surakshit Matritva Aashwasan" a multipronged and coordinated policy approach that subsumes all existing initiatives under one umbrella in order to create a comprehensive initiative which goes beyond entitlements and provides a service guarantee for the entitlements.
- Targeted beneficiaries of SUMAN initiative are all pregnant women, post-partum care up to 6 months and all sick infants.
- This initiative has been launched with objectives as mentioned below:
  - a) To provide high quality medical, surgical and emergency care services in a dignified and respectful manner as per SUMAN service package at no cost to the beneficiaries.
  - b) To leverage institutional and community-based platforms to help create awareness in the community on the entitlements under SUMAN.
- The packages under SUMAN have been divided into Basic, BEmONC and CEmONC. All the public health facilities including facilities in urban areas are expected to follow it in order to operationalize the service guarantee package under this initiative.
- Simultaneously it also underlines the commitment towards ensuring compliance to the existing National Quality Assurance Standards (NQAS) at all levels of committed services as one of the broad pillars. SUMAN compliant facilities would provide services under all existing schemes with service guarantee, robust grievance redressal mechanism and respectful maternity care.

### **1.2. Target audiences:**

This note is intended to help following category of personnel in achieving NQAS certification of SUMAN facilities.

- Nodal Officer (Quality Assurance) at state/district level
- Nodal Officer (Maternal Health, Child Health, Family Planning Division, all other related divisions etc.) at state/district level

- Facility level Medical Officer in Charge/Facility level Quality Manager/Hospital Manager
- Service providers at DH/SDH/CHC/PHC/UPHC etc.

### 1.3. Rationale:

- The Guidance note is expected to be followed for ensuring the attainment of quality standards at all level of public health facilities as mentioned below:
  - After notification of SUMAN **CEmONC** facilities, States/UTs shall attain either full NQAS certification / Part NQAS certification including departments containing SUMAN service packages.
  - Non-FRU CHCs and PHCs, designated for SUMAN **BEmONC** services should attain NQAS certification.
  - HWC-Sub Centres should also attain the NQAS certification.

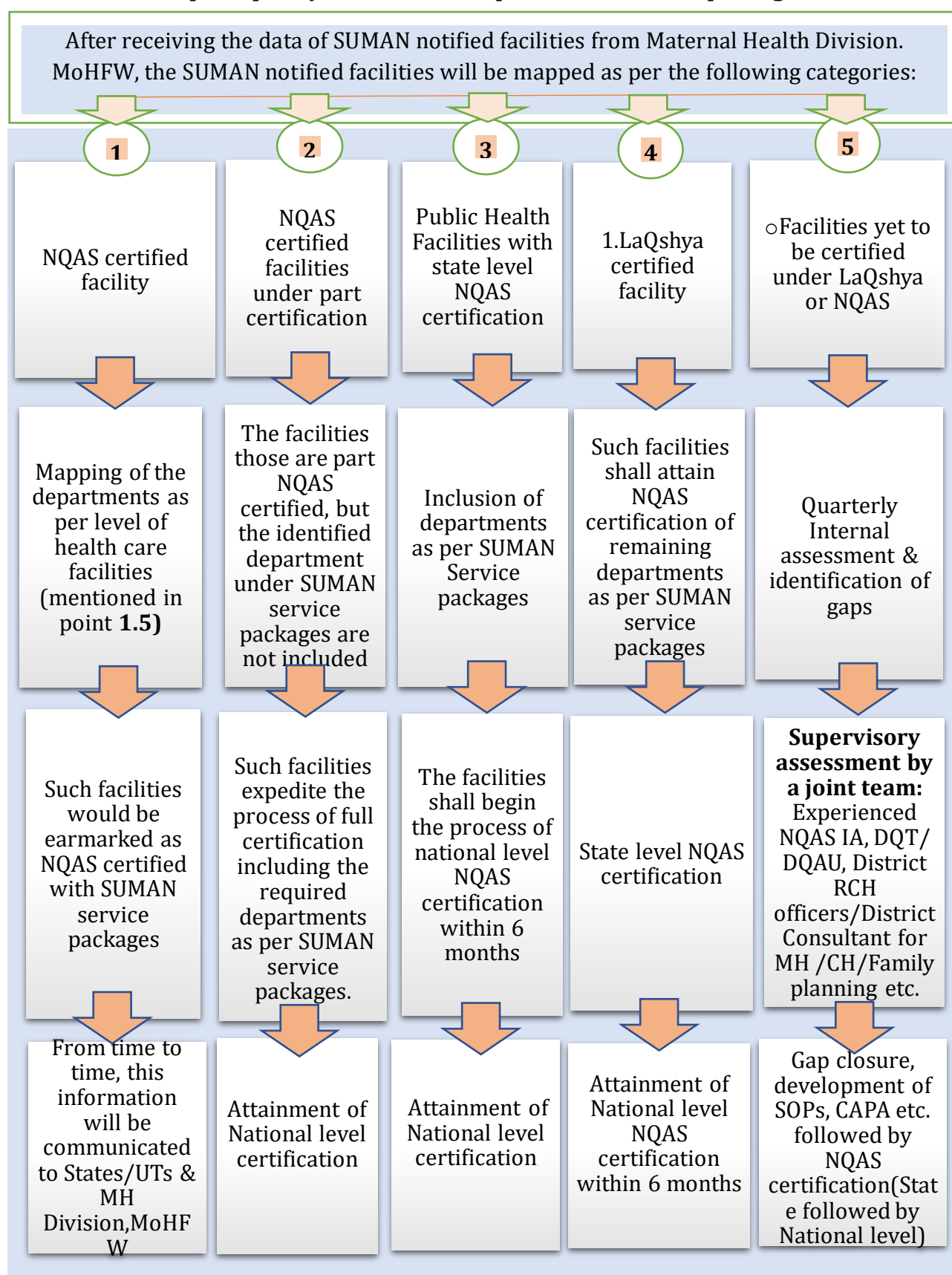
**All the SUMAN notified facilities should preferably ensure State level NQAS certification followed by attainment National NQAS certified status within six months**

State Certification	National Certification
<ul style="list-style-type: none"> <li>○ Responsibility of State/SQAU</li> <li>○ Validity one year</li> <li>○ Facility shall apply for National certification within six months attaining State Certification</li> <li>○ Status of the state certified hospitals to be shared with NHSRC within one week of the state certification</li> </ul>	<ul style="list-style-type: none"> <li>○ Responsibility of State/UT: Submission of application for national level certification along with all the requisite documents to NHSRC as per procedure given in “Operational Guidelines for Quality Assurance in Public Health Facilities”</li> <li>○ Responsibility of NHSRC: After receiving application, QI division NHSRC will facilitate the process of national level certification through:               <ul style="list-style-type: none"> <li>a) Document verification by QI team (i.e., respective state in charges)</li> <li>b) Scheduling of national level assessment by the Certification unit</li> </ul> </li> <li>○ Full certification: Validity for three</li> </ul>

	<p>years. However, surveillance assessment would be undertaken by the State team every year and report submitted to NHSRC</p> <ul style="list-style-type: none"> <li>○ Certification with conditionality: The facilities will be reassessed after one year</li> <li>○ Financial incentives as per NHM norm</li> </ul>
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- The detailed roadmap has been illustrated as Table no: 1

## Roadmap for quality certification as per SUMAN service packages



*Table 1: Roadmap for quality certification as per SUMAN service packages*

#### 1.4. Institutional framework:

Institutional framework towards implementation of SUMAN service packages and to carry out all the tasks towards certification of those facilities, are outlined below:

- The existing framework for quality assurance i.e., State Quality Assurance Committee (SQAC), District Quality Assurance Committee (DQAC), and Quality Team at the facility level, would continue to support implementation of NQAS and Part NQAS certification of SUMAN facilities.
- Nodal officers for MH, CH, Immunisation & Family Planning would especially focus on improving quality care in respective departments of their domain.

#### 1.5. Departments for part NQAS certification at SUMAN notified facilities:

- Ideally, all SUMAN notified facilities should be NQAS certified in totality. However, if such approach appears to be overwhelming, NQAS certification of following departments would be required.
- The minimum departments/themes/packages for certification are illustrated below as Table-2:

Sl. No	Level of Facilities	Department
1	District Hospitals / SDH	OPD (should prioritize antenatal & pediatrics services), Labour room, Maternity OT, Maternity ward, Pediatric ward, SNCU, Post-Partum unit, Blood Bank/Blood storage unit, General Administration
2	CHC	OPD (Antenatal clinic & pediatrics services), Labour room, OT, IPD, NBSU, Post-Partum unit, Blood Storage Unit, General Administration
3	PHC	All departments (LR, OPD, IPD, General Administration, National Health Programme & Laboratory). States may take exemptions for the National Health Programme & Laboratory, if needed.
4	UPHC	General clinic, Maternal Health, New born and Child health, Immunization, Family Planning, Outreach, General Administration

5	HWC-SC (7 mandatory packages)	Care in pregnancy & child-birth, Neo-natal & infant health care services, Family planning and contraceptive services and other Reproductive Health Care Services, Management of communicable diseases including National Health Programme, Management of common communication diseases & outdoor care for acute simple illness and minor ailments, Screening, prevention, control and management of non-communicable diseases
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*Table 2: Minimum departments for NQAS certification containing SUMAN service packages*

### **1.6. Roles & responsibilities of Quality Assurance Committees**

- The broad responsibility of the quality assurance committee will be to support the members of the SUMAN committee in accordance with the operational guidelines for quality assurance in public health facilities to ensure that targeted SUMAN facilities have met the state and national certification norms of NQAS.
- They are also expected to carry all the relevant activities in close liaison with Maternal Health/Child Health /Immunisation all other related departments of their respective state/district level.

#### **A. State level: State Quality Assurance Unit (SQAU)**

- States/UTs may plan for training of SUMAN notified facilities of all the districts/clustering few districts as required with minimum 100 participants in each batch. States/UTs may communicate to QI Division, NHSRC for technical support
- State level co-ordination between State Quality Assurance Unit & State Maternal and Child Health cell would be of paramount importance
- List of SUMAN notified facilities need to periodically updated and shared with State Quality Assurance Unit, MH, CH, Immunisation, Family Planning and MH division, MoHFW & QI division, NHSRC
- The State Quality Assurance Unit shall share the data to State Maternal Cell/Child Health Cell/ Family Planning Cell pertaining to status of NQAS/LaQshya certification of the SUMAN notified facilities
- Develop a plan for the quality improvement at each level of SUMAN targeted health facility (Medical College/DH/SDH/FRU-CHC/Non-FRU CHC/PHC/HWCs) including urban healthcare facilities in a phased manner
- Orient the state level NQAS Internal Assessors, district level QA units on the requirement of SUMAN guidelines, facility wise service guarantee packages and the

processes to be followed for QA activities in compliance with service packages.

- Develop a field travel plan for independent and joint (with SUMAN committee/ state maternal cell/child health cell/Family planning cell) visits to the districts and provide 'on-site' support for underperforming districts for quality initiatives
- The state nodal officer QA/Maternal Health shall visit the districts at least once in six months
- The state consultant QA/Maternal Health/Child Health/Family planning/Immunisation is/are expected to visit frequently (at least quarterly) for handholding support to district level officials
- Develop a road map and Time Bound Action Plan for implementation of the initiatives (NQAS/LaQshya certification). A suggestive format for developing the TBAP has been mentioned at "1.7"
- Ensure full certification/part certification of SUMAN facilities within 6-months of the notification
- Ensure the integration of health facilities up to HWCs under Mera-Aspataal to capture real-time patient satisfaction to further strengthen the grievance redressal system
- Periodic review of status of quality certification in SUMAN notified facilities in monthly review meetings
- The review reports would be shared with all district committees and other stakeholders
- SQAU should encourage districts to document the case studies of improvement and share it with NHSRC/ upload on National Healthcare innovation portal - <http://www.nhinp.org/>

#### **B. District level: District Quality Assurance Committee/Unit (DQAC/DQAU)**

- Ensure that district level trainings of SUMAN notified facilities are accomplished in time for Quality Teams of all level of health care facilities with the support from SQAU
- Develop a plan for the quality improvement at each level of SUMAN targeted health facility (DH/SDH/FRU-CHC/Non-FRU CHC/PHC/HWCs) including urban healthcare facilities in a phased manner
- Develop a field travel plan for independent and joint (with SUMAN committee/District level RCH officer/ District Consultant for Maternal Health/Child Health/Family Planning /Immunisation as per the mandate of the state/UTs) visits to the facilities and provide 'on-site' support for quality initiatives
- District RCH officer shall visit at least once in six months & District Consultant Maternal Health/Child Health/Family division is/are expected to visit frequently for handholding support
- The Maternal Health Cell/Child Health Cell/Family Planning/Immunisation Cell is expected to support the Quality team towards closure of gaps (e.g., towards gap closure of LR, Maternity OT, the concerned personnel from Maternal Health Division shall work closely with QI team, towards gap closure at SNCU/NBSU the concerned personnel from Child Health Cell shall work closely with QI team, towards gap closure

- at PP Unit, Family planning cell shall work closely with QI team)
- Develop a road map and Time Bound Action Plan for implementation of the initiatives (NQAS/LaQshya certification).
- The committee needs to ensure that facility assessments and subsequent quality improvement efforts are executed as per plan
- Ensure full certification/part certification of SUMAN facilities within 6-months of the notification
- Ensure that feedbacks received from Mera-Aspataal portal is analyzed periodically, attributes of low satisfaction score are identified, time-bound corrective action plan is prepared and implemented to further strengthen the grievance redressal system
- Ensure the submission of application to state level after receiving from facility
- Periodic review of status of quality certification in SUMAN notified facilities in monthly review meetings
- The review reports would be shared with all state committees and other stakeholders

### **C. Facility level: District Quality Team**

- Formal training for the staff of QT (Quality Team)/service providers of the respective SUMAN identified facility needs to be conducted with support from the district team
- Through regular internal assessments, audits, reviews etc. The QT members should ensure that the standards set for a health facility (rural/urban) are being met and facility conducts self-assessment as per SUMAN checklist attached as annexure in SUMAN standard operational guidelines
- Internal assessment (under National Quality Assurance Programme) of the SUMAN notified facilities shall be conducted quarterly/as & when required by a joint team containing:
  - a) Experienced NQAS Internal Assessors
  - b) Related personnel from District quality team, District Quality Assurance Unit,
  - c) District RCH officers/District Consultant for Maternal Health/Child Health/Family division.
- The QT should also report to the district QAC on the internal assessment findings, quality improvement measures undertaken, etc.
- The QT should liaise with various departments within the facility for effective implementation of QA & SUMAN activities and towards traversing gaps
- Ensuring that the health facility meets all statutory/regulatory compliances such as BMW, Blood Bank/storage license, AERB regulations, etc.
- Ensure integration and regular functioning of the facility under “Mera Aspataal” for institution of an effective grievance redressal system
- Ensure the reporting of the indicators as mentioned in SUMAN Operational Guidelines along with all other KPIs
- Ensure the submission of application for state level certification (NQAS/LaQshya) / attainment of national level certification (NQAS/LaQshya)



### 1.7. Suggestive format for Action Plan:

Sl. No	Level of action (State/District/Facility level)	Activities to be undertaken	Person/s responsible	Time line
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