

UTTAR PRADESH  
TECHNICAL SUPPORT UNIT

# NQAS & LaQshya

DR VANDANA SINGH (DEPUTY DIRECTOR NURSE MENTOR)

12-September-2022

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University  
of Manitoba



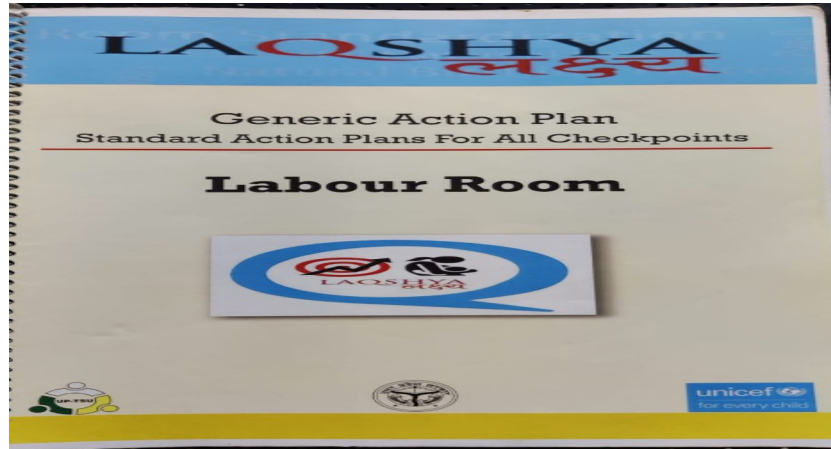
# Program Update



**LaQshya External Result  
Awaited N=15**

# State level activities Supported by UPTSU: A) Tools & Job Aids

## Generic Action Plan for LR and OT



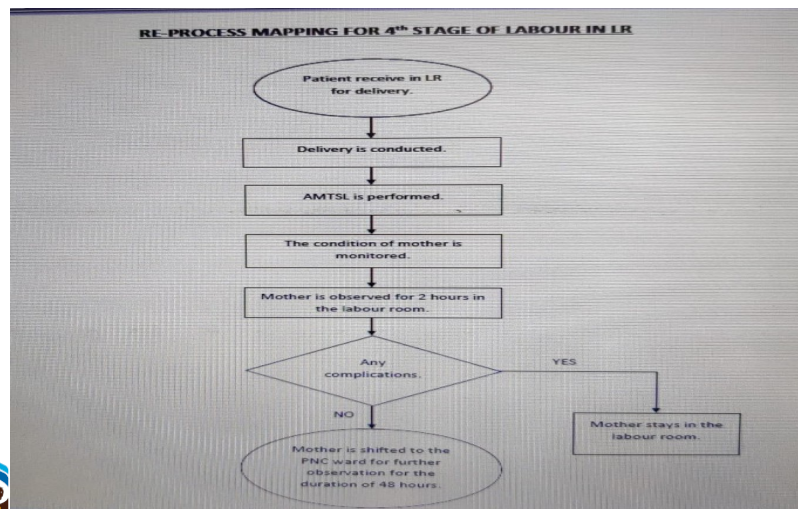
## Mini Skill Lab Guidelines



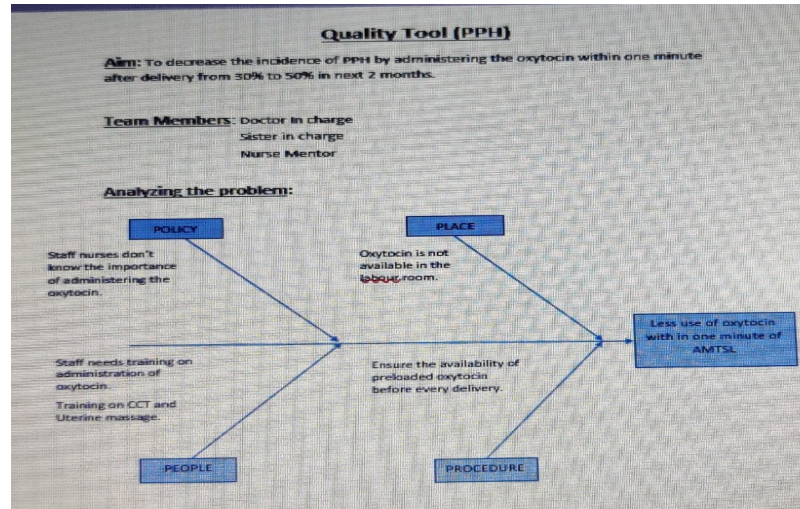
## LaQshya Compendium



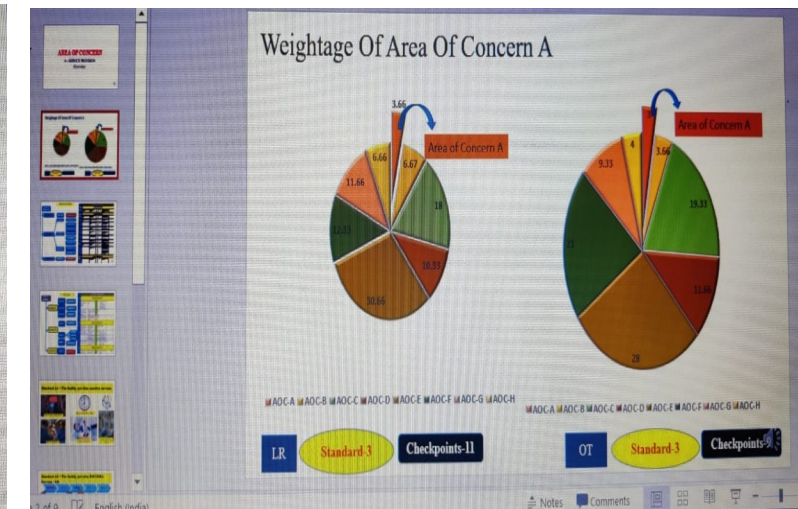
## Quality Tools: Process Mapping



## Quality Tools: Fish Bone

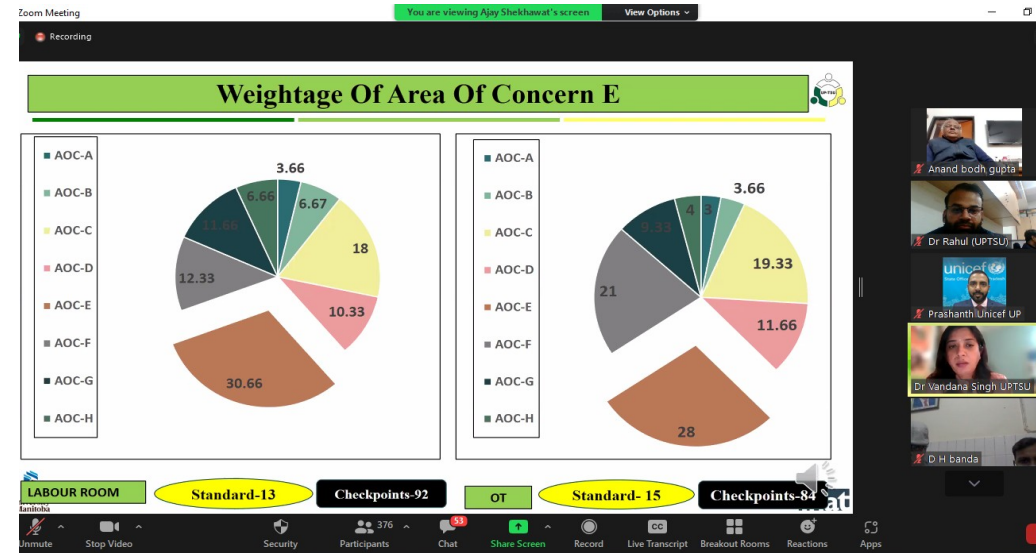


## Self Explanatory PPTs





# State level activities Supported by UPTSU: B) Capacity Building



Orientation cum review of all 75 Districts on various AOC through virtual platform



Training of TSU Team  
DSS & DH NM  
Total 48 District Senior Specialist & 78 DH and Divisional NM trained in LaQshya

Training of Govt. NMs and MH Consultants  
Total 64 Maternal Health Consultants and 694 Govt. NMs Trained in LaQshya

# State level activities Supported by UPTSU: C) Analysis

## 1. Analyzing problems in Certification

### External Assessment summary Report

Name of the Facility: District Women Hospital, Rampur, Uttar Pradesh

Date of Assessment: 17<sup>th</sup> to 18<sup>th</sup> Feb. 2022

Department: Labour Room

#### 1. Compliance to Certification Criteria:

Criterion No.	Certification Criteria	Status
I.	Aggregate score of department shall be $\geq 70\%$	<b>Criteria met</b> (Overall score 80%)
II.	Score of each Area of Concern shall be $\geq 70\%$	<b>Criteria not met</b> <b>Quality Management- 56%</b>
III.	Score of Standard B3, E18 and E19 is $\geq 70\%$	<b>Criteria met</b> Standard- B3 (100%) Standard- E18 (86.48%) Standard- E19 (81.25%)
IV.	Individual Standard wise score is $\geq 50\%$	<b>Criteria not met</b> <b>Standard- G2 (33.33%)</b> <b>Standard- G3 (25%)</b> <b>Standard- G10 (0%)</b>
V.	Patient Satisfaction of the department shall be more than $\geq 70\%$	<b>Criteria met</b> PSS- 83.67%

Annexure to Appendix

Department: Maternity Operation Theatre

#### 1. Compliance to Certification Criteria:

Criterion No.	Certification Criteria	Status
I.	Overall score of the department shall be $\geq 70\%$	<b>Criteria not met</b> (Overall Score- 68%)
II.	Score of each area of concern shall be $\geq 70\%$	<b>Criteria not met</b> Service Provision-56% Clinical Services- 66% Quality Management-43% Outcome-50%
III.	Score of Standard B3, E18 and E19 is $\geq 70\%$	<b>Criteria not met</b> Standard B3 (80%) Standard E18 (64.3%) Standard E19 (66.7%)
IV.	Individual Standard wise score is $\geq 50\%$	<b>Criteria not met</b> Refer to table no. 3
V.	Patient satisfaction of the department shall be more than $\geq 70\%$	<b>Criteria met</b> PSS-84.3%



# State level activities Supported by UPTSU: C) Analysis

## 2. Analyzing the scores of deferred facilities

S.No	Name of the Standard	Department Name		Facility Name
		Labor Room	Maternity OT	
1	A1	0	1	DCH Amroha
2	A3	2	1	RLB Lucknow, DWH Kanpur nagar
3	B4	0	1	RLB Lucknow
4	B5	1	0	DCH Maharajganj
5	C1	3	0	RLB Lucknow, DWH Fatehpur, DCH Ambedkar Nagar
6	C2	2	1	DCH Maharajganj, CHC Harchandpur, Raebareli
7	C3	1	1	DCH Maharajganj DWH Unnao
8	C6	1	0	DWH Fatehpur
9	C7	3	3	DCH Maharajganj, DWH Mainpuri, DWH Unnao, CHC Harchandpur, Raebareli
10	D1	1	1	DCH Maharajganj
11	D2	2	1	DWH Gonda, DWH Fatehpur
12	D4	0	1	DCH Maharajganj
13	D5	1	0	DWH Fatehpur
14	E4	1	0	DCH Maharajganj
15	E5	0	1	DWH Gonda
16	E6	2	1	DCH Maharajganj, CHC Harchandpur, Raebareli
17	E7	0	1	DWH Gonda
18	E8	0	1	DWH Basti
19	E11	0	1	DCH Maharajganj
20	E12	3	1	DWH Unnao, DCH Maharajganj, DWH Ayodhya, CHC Harchandpur, Raebareli
21	E13	2	1	DCH Maharajganj, DWH Ayodhya
22	E16	0	2	DWH Basti, DWH Agra
23	E18	0	1	DWH Hamirpur
24	F1	0	1	DCH Maharajganj
25	F3	0	1	DCH Ambedkar Nagar
26	F5	1	1	DCH Maharajganj
27	F6	1	0	DCH Maharajganj
28	G2	2	0	DWH Manipuri, CHC Harchandpur, Raebareli
29	G3	5	1	DWH Rampur, DWH Gonda, DCH Ambedkar Nagar, CHC Harchandpur, Raebareli, DCH Amroha
30	G4	0	2	DCH Maharajganj, DWH Mainpuri
31	G5	5	6	DWH Manipuri, DCH Maharajganj, DWH RLB, CHC Dobhi, Jaunpur, CHC Harchandpur, Raebareli, DCH Amroha
32	G6	2	1	DCH Maharajganj, DWH RLB
33	G7	5	4	DWH Manipuri, DCH Maharajganj, DWH Barabanki, DWH Gonda, DCH Ambedkar Nagar, DWH Unnao
34	G8	0	2	DCH Maharajganj, DCH Amroha
35	G10	4	6	DWH Rampur, DWH Manipuri, DCH Maharajganj, CHC Gangoh, Saharanpur, DWH RLB, DWH Kanpur nagar, DWH Unnao

## 3. Analyzing the internal assessment scores

LABOUR ROOM -Major Findings based on Internal Assessment Checklist, (N=136)

Ref No.	Checkpoint	# of Facility with score ZERO	# of Facility with score 1	# of Facility with score 2
ME C1.3	Labour Room layout is arranged in LDR concept	45	55	36
ME C1.3	Availability of Triage and Examination Area	21	47	68
ME C1.3	Dedicated nursing station and Duty Rooms	7	31	98
ME C1.3	Availability of Newborn Care area	8	26	102
ME C1.5	Availability of functional telephone and Intercom Services	73	20	43
ME C1.7	Unidirectional flow of care	50	37	49
ME C5.1	Availability of uterotonic Drugs	5	25	106
ME C5.1	Availability of Vitamins	26	18	92
ME C6.3	Availability of Diagnostic Instruments	13	55	68
ME C7.1	Check parameters for assessing skills and proficiency of clinical staff has been defined	33	35	68
ME C7.2	Check for competence assessment is done at least once in a year	36	41	56
ME C7.10	Labour room staff is provided refresher training	24	52	60

## 4. Identification of Single checkpoints indicators: Labor Room-7 & Maternity OT-11 and further training the facility team on the same

# Facility level activities Supported by UPTSU under LaQshya

## Formation of Quality Circle

**सामुदायिक स्वास्थ्य केंद्र जगदीशपुर अमेठी**  
 तारीख: 16-05-22

**आदेश**

निम्नलिखित सदस्यों को नियमित रूप से बैठकें आयोजित करने के लिए निर्देशित किया जाता है। बैठकें हर एक महीने के प्रथम शनिवार को आयोजित की जाएंगी।

क्र.सं.	सदस्य	अधिकारी/कर्मचारी का नाम	पदनाम	संयोजित समिति के पद
1.	डा. प्रदीप तिवारी	डिप्टी कमिश्नर	अध्यक्ष	
2.	डा. रवींद्र सिंह	महिला सहायक	सदस्य	
3.	श्री. प्रदीप तिवारी	डी.एस.ओ.	सदस्य	
4.	श्री. अरुण शर्मा	प्रशिक्षण अधिकारी	सदस्य	
5.	समिता चंद्रशेखर	डिप्टी कमिश्नर	सदस्य	
6.	प्रमोद शर्मा	डिप्टी कमिश्नर	सदस्य	
7.	अरुण प्रदीप सिंह	डी.एस.ओ.	सदस्य	
8.	समिता	डिप्टी कमिश्नर	सदस्य	
9.	संजय कुमार	डिप्टी कमिश्नर	सदस्य	

नोट: बैठकें हर एक महीने के प्रथम शनिवार को आयोजित की जाएंगी।

सामुदायिक स्वास्थ्य केंद्र जगदीशपुर अमेठी

## Monthly QC Meetings and Facility Action Plan

**District Women Hospital, Saharanpur**  
**Quality Circle Meeting Attendance**

QC Meeting:-  
 Date:- 16/05/22 Time:- 10AM Location:- CMS Office

S.No	Participants Name	Cadre Of the Participants	Signature
1.	DR. JATINA		
2.	DR. JATINA		
3.	DR. NAVDEEP		
4.	DR. SUSHMA		
5.	DR. GURMEET KOUR		
6.	DR. NISHA		
7.	DR. ANKIT		
8.	DR. VIKAS RAJ SINGH		
9.	MR. S.S. BHANDARI		
10.	MR. SHAILESH KUMAR		
11.	MR. HIMANSHU KUMAR		
12.	MRS. NEELAM SHARMA		
13.	MRS. SUSHMA		
14.	MRS. SUNANDA RAM		
15.	MRS. MANISHA KUMAR		
16.	MRS. RAGINI		
17.	MRS. SHALINI KUMAR		
18.	MRS. RAJANI		
19.	KAJAL KUMAR		
20.	RAHUL KUMAR		
21.	RAHUL KUMAR		
22.	RAHUL KUMAR		
23.	RAHUL KUMAR		
24.	RAHUL KUMAR		
25.	RAHUL KUMAR		

Issues	Root Cause	Action Plan	Responsible	Timeline
प्रतिदिन पावर और इलेक्ट्रिकल के रख रखाव है।	अवधान की कमी है। इलेक्ट्रिकल के रख रखाव को नियमित रूप से चेक करना है।	रखी से Discharge करने के बाद में तब हुआ कि एक CMS Sir की तरफ से Issue बताया है जिससे प्रतिदिन पावर और इलेक्ट्रिकल हर जगह का चेक करें।	CMS HM Electrician Plumber Ward Incharge	1 Week
Outcome Indicator Board सही अंश में चला रहा है।	प्रतिदिन प्रत्येक और भागिका के रख रखाव में सही पावर का चेक करना है।	CMS Sir के आदेश पर सभी Ward Incharge को उनके यहां के Outcome Indicator Board और Register Maintain करने के लिए निर्देश देंगे।	CMS Ward Incharge HM	1 Week
लेबर कम है Power Backup Indicator	लेबर कम है Inverter न होने की वजह से अगर Generator की नहीं चल पाता है तो मरीज और स्टाफ को बहुत परेशानी होती है।	CMS Sir ने Store Incharge को Inverter लगवाने और Issue कसने का आदेश दिया है।	CMS Ward Incharge HM Store Incharge	1 Month

## QC Meeting chaired by MOIC facilitated by NM

## Mentoring of Staff on normal delivery and AMTSL

## Quality Circle Banner



**DISTRICT WOMEN HOSPITAL, GHAZIABAD**  
**QUALITY CIRCLE**

Team member Name	Designation
Dr. Sangita Goyal	CMS
Dr. Sushma Bharti	SR. CONS
Mrs. P.N. TIWARI	CHIEF PHARMACIST
Mrs. USHA DEVI	MATRON
Mrs. Azra	LR INCHARGE
Mrs. Pramod	LR PHARMACIST
Mrs. Krishna	HQM
Mrs. Tara Tiwari	NURSE MENTOR
Ms. Anshu Sharma	ICN

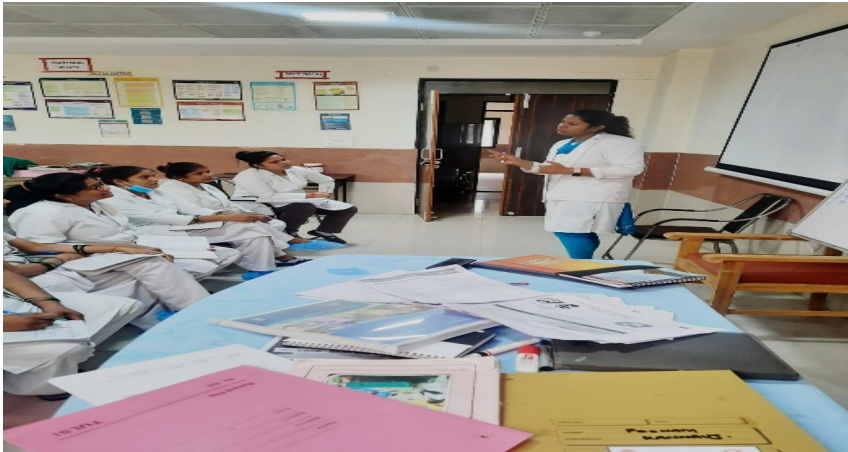
**समिति के कार्य एवं दायित्व:**

- प्रोटोकाल एवं समस्त दिशा निर्देशों का अनुपालन सुनिश्चित करना
- एन वयू एस चेकलिस्ट का प्रयोग करते हुये लेबर रूम व ओ टी का मूल्यांकन करना
- मातृ एवं शिशु स्वास्थ्य डूकट के अनुसार लेबर रूम व ओ टी में पाये गए गेप्स को खत्म करने के लिए कार्य योजना तैयार करना
- मानकों को तेजी से सुधार (Rapid Improvement cycle) हेतु प्रबंधन करना
- मानकों को पर्यवेक्षण हेतु डाटा संकलित करना



# Facility level activities supported by UPTSU under LaQshya

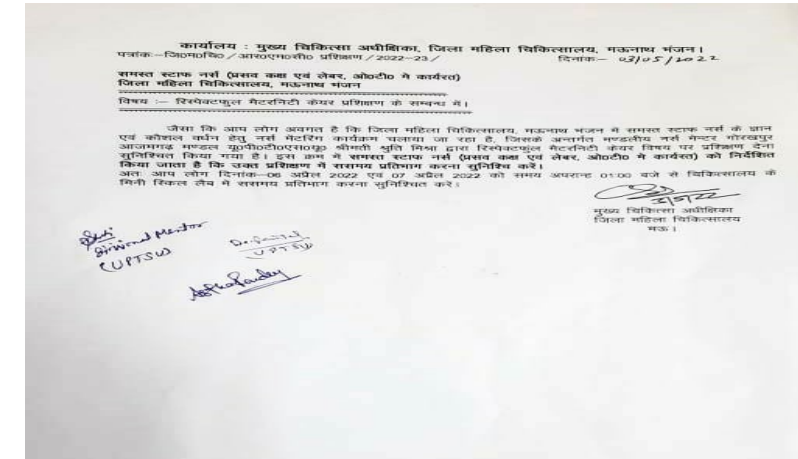
## Mentoring of Staff nurses on SOPs



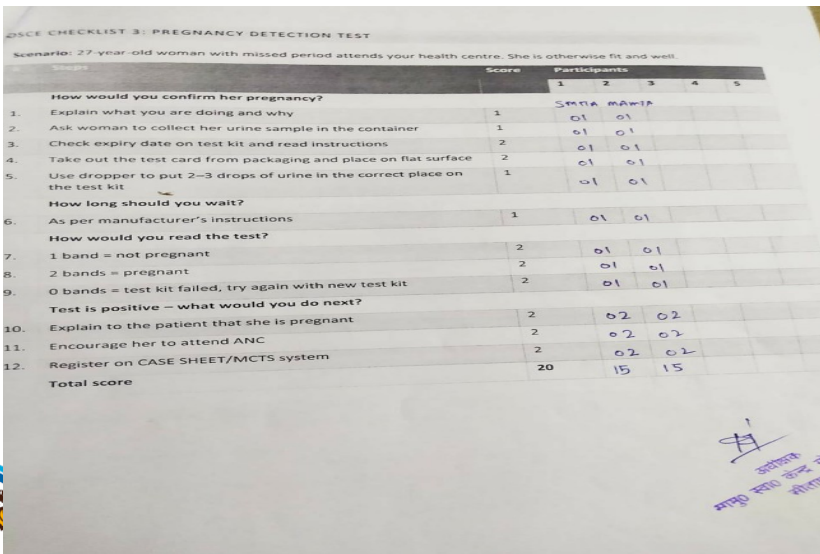
## Orientation of Nodal doctors LR & OT



## Training Letter on RMC



## Use of OSCE Checklist



## Use of NM register



## Use of NM register for Mentoring Plan

Sl. #	Staff Name	Designation	EHMS code	Date (DDMM/YYYY)	Topic	Dose (D.R)
1	Mouli Mishra	SN		01/01/21	Pantograph, One sheet	1
2	Mouli Mishra	SN		01/01/21	Pantograph, One sheet	1
3	Mouli	SN		01/01/21	Pantograph, One sheet	1
4	Mouli	SN		01/01/21	Pantograph, One sheet	1
5	Mouli	SN		01/01/21	Pantograph, One sheet	1
6	Mouli	SN		01/01/21	Pantograph, One sheet	1
7	Mouli	SN		01/01/21	Pantograph, One sheet	1
8	Mouli	SN		01/01/21	Pantograph, One sheet	1
9	Mouli	SN		01/01/21	Pantograph, One sheet	1
10	Mouli	SN		01/01/21	Pantograph, One sheet	1
11	Mouli	SN		01/01/21	Pantograph, One sheet	1
12	Mouli	SN		01/01/21	Pantograph, One sheet	1
13	Mouli	SN		01/01/21	Pantograph, One sheet	1
14	Mouli	SN		01/01/21	Pantograph, One sheet	1
15	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
16	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
17	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
18	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
19	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
20	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
21	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
22	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
23	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
24	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
25	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1
26	Kishu Choudhary	SN		01/01/21	Pantograph, One sheet	1



# Roles and Responsibilities of Nurse Mentors in LaQshya Program

## Role of Nurse Mentors in LaQshya:

- Facilitate the formation of quality circle at facility for LR and MOT and support the self assessment of Labor room and maternity OT on LaQshya checklist by members of quality circle and development of action plan. Ensure regular monthly meeting of QC and gap closure as per action plan.
- Conduct Mentoring and OSCE of the staff of LR and maternity OT at DWH/DCH on clinical topics as per the MSL guidelines prepared by GoUP
- Mentor the Staff Nurses of LR and OT to improve the quality of LR recording and reporting including the standard documents such as case sheets, LR register, refer in & refer out registers
- Mentor the staff nurses on improvement of infection prevention practices of LR and OT
- Support the QC in gap closure specifically of AOC A,B,C, E, F and G

# LaQshya assessment by external assessors





Quality may have different names but path to achieve it remains same.....



# Thank You

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