



#### Ms. Vinny Arora Lead Consultant – Certification Unit Quality & Patient Safety Division, NHSRC

















### Virtual certification process



### Step – 1 – Login through SaQsham

Rectified Grade	Please Enter Your Information	×
HOME ABOUT US FEATURES	<u>۵</u>	At]nhsrcindia[dot]org Sign in Register
	Captcha	
Automated Certification Pro	🗣 Login 🎍 Register New User	
Continual Assessment & Ma National Quality & Patient Sa	Forgot Password	
GUNAK App Integration		Strengthening Quality and Safety of Health facility Assessments

Welcome to SAQSHAM Portal...

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### Step – 2 – Mark your availability through SaQsham

$\leftarrow \rightarrow C$	C A https://saqsham.nhsrcindia.org/II	MCS/login		80%	ତ © ମି ≡
🞯 SaQsham				* S 🛸	🛕 💿 🖂 🔮 Welcome, Vinny Arora 👻
🕄 Services 🗸 🗸	Profile				*
Create Availability	Vinny Arora Profile	_			
Assessment Application		Full Name	Vinny Arora	User Type	Assessor
Actions		State	Delhi	Designation	-
Co-Assessor FeedBack		User Role	Assessor	Address	Delhi
Assessment Score Entry	0	Resume	NA	Update Profile	
	Vinny Arora Task				
	Acceptance Pending 0	Reconfirmed Per 0	nding Declarat Pending 0	ion of Impartiality	Opening/Closing/Executive Summary Pending 0
	Assessment Score Entry Pending 0	Assessment Scor Inprocess 0	re Entry		

# Step 3 – You will be deputed for an Assessment

E Services ×		te Availability ×												0
Create Availability	Assessor Ava	ailibility			_					_				Ø 🗏
Assessment Application Actions	< >	today		July	20					Au	ugust 2024			
Co-Assessor FeedBack	Sun	Mon	<b>Tue</b> 2	Wed 3	T Are you	ı sure to add	Availability of	n Selected Dat	es ?	e	Wed	Thu 1	<b>Fri</b> 2	Sat 3
Assessment Score Entry		1	2	5				Can	cel OK					
(%)	7	8	9	10	_			- 1		6	7	8	9	10
	14	15	16	17	18	19	20	11	12	13	14	15	16	17
	21	22	23	24	25	26	27	18	19	20	21	22	23	24
	28	29	30	31				25	26	27	28	29	30	31



### Step 4 – Seek Approval, Reconfirm & Fill Declaration Form of Impartiality

Ŧ	Services ×	Profile As	ssessment Application Actions >				0
	Create Availability	Assessor S	chedule Acceptance				
•	Assessment Application	Status : Al	1				Ť
	Actions	Search:					1 <u>6</u> v
	Co-Assessor FeedBack	Sr.No.	Application No.	Assessment Start	Assessment End	Status	Action
	Assessment Score Entry	1	SCN2402160000011_01	26-Jun-2024	26-Jun-2024	Re-Confirmed	View Declaration of Impartiality   Team Lead Selected   View Tool Kit   View Reliving/Invitation Letter   Opening Meeting
	(*)						Closing Meeting View
		2	SCN2401080000035_01	24-Jun-2024	24-Jun-2024	Re-Confirmed	View Declaration of Impartiality   Team Lead Selected   View Tool Kit   View Reliving/Invitation Letter   File Upload Executive Summary   View Opening Meeting   View Closing Meeting   View
		3	SCN2403110000102_01	25-Jun-2024	25-Jun-2024		View Declaration of Impartiality   Team Lead Selected   View Tool Kit   View Reliving/Invitation Letter   View Opening Meeting   View Closing Meeting   <mark>View  </mark>
		4	PHCN2403100000039_01	13-Jun-2024	14-Jun-2024	Deleted	
		5	SCN2403090000001_01	15-Jun-2024	15-Jun-2024	Deleted	
						Showing 1 to 5 of 12 entr	Previous 1 2 3 Next
		*Legends :					

Assessment Scheduled Date Lapsed

#### Name of Health Facility: District Women Hospital M

Full Address : Gandhi Nagar , Mahoba , Near Roadways , Mahoba

Applied Department / Program:NRC, Paediatrics OPD, Paediatrics Ward, SNCU / MusQan

Declara	ation Of Im	pertiality							
	Declaration of Impartiality and Confidentiality National Health Systems Resource Centre, New-Delhi External Acaessment of Public Health facilities under National Quality Assurance								
	1	Full Name	DR N RAJESH KUMAR						
	2	Address	Brundavan Colony , Nizampet, Opp Sriram Food Court Line						
	3	Qualification	MBBS						
	4	Present Organization	HEALTH AND FAMILY WELFARE						
	5	Designation	Civil Assistant Surgeon						
	6	Name of the Health Facility to be assessed	District Women Hospital Mahoba						
	7	Date(s) of Assessment	16-Feb-2023 To 17-Feb-2023						
	8	Name Of Departments to be Assessed	NRC, Paediatrics ORD, Paediatrics Word, SNCU						

#### 9. 🗌 l declare that;

i) I have not offered any guidance, supervision or other services to the above mentioned health facility, in any way

ii] I do not have any commercial interest in the above mentioned health facility

ii) I am not an exemployee of the health facility and also not related to any employee/administrative personnel of the above mentioned health facility.

#### 10. 🗌 I under take that;

() I shall maintain stric conflicentially of the information acquired through various documents like health facility records, Quality Manual, Standard Operating Procedures, Internal Reports, etc. of the above mentioned public health facility and other related information that have been provided by the National Health Systems Resource Centre, New Dehin. State Quality Assurance Unit; in the ocurse of lidischarge of my responsibility and shall not disclose to any person other than that required by the National Health Systems Resource Centre, New Dehin.

ii) I shall neither copy any documentation nor divulge any information to any third party without the written prior consent of the above mentioned public health facility or National Health Systems Resource Centre-New-Delhi

iii) dal be maintaining transparency and shall act imparially with integrity during the entre course of assessment. I shall not engage in any act that might affect the reputation/interest of the National Health Systems Resource Centre, New Dehi or the above mentioned public health facility.

iv) In the event of any alleged breach of this undertaking, I shall co-operate fully with National Health Systems Resource Centre-New-Delhi.

### Step -5 - Meanwhile Download and Create Profile through Webex

X



# Step -6 – Day before Assessment - Review the facility Documents

🚯 Services 🗸 🗸	Profile A	ssessment Application Actions	×			
Create Availability		Schedule Acceptance				
<ul> <li>Assessment Application Actions</li> </ul>	Status : A Search:		As	sessor View	×	T T
Co-Assessor FeedBack	Sr.No. 🔶	Application No. 💧	Asses	Application Details Hospital DataSheet Document CheckList	<b>^</b>	i
Assessment Score Entry	1	SCN2402160000011_01	26	E Facililty : D.Vaddipalli, Dakkili Mandal	Bed Details	
	2	SCN2401080000035_01	24	Application Request No     SCN2402160000011_01       Program Type     Physical	ed Functional Beds	ool Kit View Reliving/Invitation Letter File Upload
	3	SCN2403110000102_01	25	Applied Program Name NQAS Applied Date 16-Feb-2024		ool Kit View Reliving/Invitation Letter
	4	PHCN2403100000039_01	13	Application Status		
	5	SCN2403090000001_01	1:	Assessor Result Entry /Document Upload Inprocess		
	*Legends :			PSS Entered by Assessor		Previous 1 2 3 Next
		Assessment Scheduled Dat	e Lapsed		Close	

🚯 Services 🛛 🗸		ssessment Application Actions ×									
Create Availability		Schedule Acceptance	_								
<ul> <li>Assessment Application Actions</li> </ul>	Status : A Search:		Ass	sessor View						×	۲ ۲ آگا
Co-Assessor FeedBack	Sr.No. 🔶	Application No.	Asses	3	Minutes of last Quality Team	Yes	<u>Minutes of</u>	2	ok	<b>^</b>	1 9
- Assessment Score Entry	1	SCN2402160000011_01	2€		meeting (Preferable within Last Quarter)						ool Kit View Reliving/Invitation Letter Opening Meeting
	2	SCN2401080000035_01	24	4	Work Instructions (As per Service Packages)	Yes	Work Instr	•	ok		ool Kit View Reliving/Invitation Letter File Upload
	3	SCN2403110000102_01	28	5	Copy of Facility Wide Policies / Instructions						View Ool Kit View Reliving/Invitation Letter
	4	PHCN2403100000039_01	18	5.1	Quality Policy & Objectives	Yes	<u>Quality Po</u>	2	ok		
	5	SCN240309000001_01	18	5.2	Policy for Maintaining Patients Records [its security, sharing of	Yes	<u>maintaina</u>	•	ok		Previous 1 2 3 Next
	*Legends :				information and					-	
		Assessment Scheduled Date La	ipsed							Close	

### List of documents for NQAS Certification

- Filled application form & Hospital data sheet.
- Last district level assessment report verified by the state, not older than 6 months
- Last month Quality Team's minutes of meeting
- Work instructions (as per service package)
- Quality Policy
- Last 3 months record of Patient Satisfaction Survey with CAPA Availability of a system for Biomedical Waste Management
- Last 3 months record of Outcome Indicators\*
- State notified Essential Medicine List\*
- Last 3-months data from drug stock register for drugs availability as per state's notified Essential Medicine List, signed by CHO or equivalent\*

\*Additional documents requested from the facility as compared to physical assessment

### Step -6 – Review the 12 Packages program Guidelines for changes if any

Assessment of 12 Comprehensive packages – One checklist

- 1. Care in pregnancy and child-birth
- 2. Neonatal and Infant healthcare services
- 3. Childhood and adolescent healthcare services
- 4. Family Planning, Contraceptive and Reproductive Healthcare Service
- 5. Management of Communicable Disease including NHP
- 6. Management of common Communicable Disease and Out-Patient care for acute simple illness and minor ailments
- 7. Screening, Prevention, Control and Management of NCD.
- 8. Care for Common Opthalamic and ENT problems
- 9. Basic Oral Healthcare Services
- 10. Elderly & Palliative Healthcare Services
- 11. Emergency Medical Services
- 12. Screening and Basic Management of Mental Health ailments.

### Step -7 – Assessment Day

assessment.

Link for Meeting is given below: <u>https://nhsrc.webex.com/nhsrc/j.php?</u> <u>MTID=m1d9a201d9af27738b84c42b1bc1aaaca</u> Meeting number: 2511 466 8900

Meeting password: 12345678

Join from a video or application Dial <u>25114668900@nhsrc.webex.com</u>

You can also dial 210.4.202.4 and enter your meeting number.

Click on the Link Generated and join the Assessment

#### Two Links will be visible

#### **NQAS Virtual Quality Assessment Stepwise Approach**

#### **Step1: Introduction and Opening Meeting**

- The assessment of the AAM-SC starts with an introductory meeting with the CHO and other healthcare staff posted at AAM-SC
- The assessors outline the objectives of the assessment and their key deliverables: a scored checklist, overall score, summary, and detailed narrative report.
- The assessors will discuss the scope of the assessment and the method/approach that will be use.

#### **Overall duration for opening meeting: 20min**

Task	Responsibility	Means of Interaction
Introduction by Assessors	Assessor 1& Assessor 2	Live Video Call
<ul> <li>Introduction by staff posted at AAM-SC (CHO, ANM, MPW, Others)</li> </ul>	Staff	Live Video Call
<ul> <li>Objective of this virtual assessment</li> </ul>	Assessor 1& Assessor 2	Live Video Call
<ul> <li>Information regarding Methodology of assessment and Instructions</li> </ul>	Assessor 1& Assessor 2	Live Video Call

#### **Step 2: A virtual walk through the AAM- SC:**

A round of the assessee AAM-SC will be conducted. Means of interaction: Live Video call and responsibility Staff of AAM\_SC and Assessors deputed for the assessment.

**Overall Duration of Activity: 45 min** 

#### Entrance.

- Clinic Name, Location, Accessibility, Approach Road, and Nearby Setup (to assess time to care approach, distance from community)
- AAM-SC exterior & display/signboards of centre, Logos, IEC if any.
- Health centre compound and entrance.

#### **Approximate Time: 15 Minutes**

Presenter – ANM or MPW (M)

#### **Registration/Waiting Area**

- Display of IEC, posters, patient rights and responsibilities, Citizen Charters etc.
- Drinking water facility, toilets.
- Client registration process
- Interview with client if there are any.
- Ask from client regarding availability of drugs, diagnostics, camps, community awareness/campaign/VHNDs, yoga session by health centre.

#### **Approximate Time: 15 Minutes**

Presenter – ANM or CHO

Interviewee – Client or patient or community representative (if available)

#### Consultation Room/CHO Room/Labour Room

- Physical Infrastructure of Room
- Ventilation, adequate lightning, IT infrastructure etc.
- Any clinical protocols display, emergency equipment
- Medicine dispensing counter
- ANC Checkup room
- Storage area for drugs, equipment, records etc.
- Infrastructure of Labour Room in case of SC Type-B.

**Approximate Time: 15 Minutes** 

Presenter – CHO or MPW (M)

#### Laboratory Area

- Display of IEC, posters, handwashing instructions.
- Number of test available at AAM-SC
- Storage of RDKs, Reagents and other consumables.
- Cleanliness of laboratory
- Interview with ANM, if there are any question clarification required

#### **Approximate Time: 15 Minutes**

Presenter – CHO or MPW (M)

Interviewee – CHO or MPW (M) or any person performing POC tests

#### **CHO Interaction**

- Service Availability as per packages
- Competence/Knowledge/Processes
- Human Resource
- Records and Registers
- Training
- Grievance Redressal
- JAS, Community Participation
- Service availability for normal delivery, newborn resuscitation, referral etc. (in case of SC Type-B)
- Management of Labour and related complications (in case of SC Type-B\_

#### **Approximate Time: 120 Minutes**

Presenter – CHO

Interviewee - CHO

#### **ANM Interaction**

Immunization Outreach, VHNDs Waste Management Records, Registers, Apps and Portal Training Meetings Management of pregnant women (in case of SC Type-B)

#### **Approximate Time: 45 Minutes**

Presenter – ANM

Interviewee - ANM

#### <u>ASHA</u>

Outreach Activities (i.e., camps, sessions, talk) VHNDs Population mapping Records, Registers, Apps and Portal Meetings

Management of pregnant women (in case of SC Type-B)

#### **Approximate Time: 30 Minutes**

Presenter – ASHA

Interviewee - ASHA

#### <u>MPW</u>

- Training
- Roles and Responsibilities
- Meetings

#### **Approximate Time: 20 Minutes**

Presenter – MPW

Interviewee - MPW

#### **<u>Community/Client Interaction</u>**

- Availability of Services
- Behavior of Staff
- Outreach/ Community level interventions by AAM-SC
- Satisfaction
- Availability of Drugs and Diagnostics
- JAS Activities
- Interaction with pregnant women (in case of SC Type-B)

#### **Approximate Time: 20 Minutes**

Presenter – Client/JAS Member

Interviewee – Client/JAS Member

#### **Record Review**

- As submitted by Facility
- Drugs and Diagnostics
- Cross verification if required

#### **Approximate Time: 2 hours**

Presenter – Assessor

Interviewee – CHO, ANM

### **Closing Meeting**

#### **Approx Time: 30 Minutes**

- Pointers for that need to be discussed in the closing meeting must be prepared by the assessors
- The assessor must ask all the interviewees for the closing meeting.
- Feedback from the healthcare staff regarding the assessment methodology must be taken by assessors
- The assessor must ensure that priority action must be highlighted during the closing meeting
- Vote of thanks to healthcare staff for their support.

### **How to score in Virtual AAM SC Checklist for NQAS**

Quality and Patient Safety Division has developed virtual assessments checklist for Ayushmann Arogya Mandir-Sub Centre.

The virtual checklist contains:

- Area of Concerns
- Standards
- Measurable Elements
- Checkpoints
- Means of Verification

## Assessment Methodology

To ease the process for the verification of checkpoints, the points has been grouped into:-

- General Round
- CHO Interaction
- ANM Interaction
- ASHA Interaction
- MPW Interaction
- Client/Community Interaction
- Drugs and Diagnostic
- Record Review.

### Assessment Tool

1	В	С	D	DE		G	Н		J
	Measurable Elements No ⊊î	Statement Checkpoint		Means of Verification	Assessment Method ▼	Compliance Score	Remarks ~	Virtual Verification-1	Verification-2, if required
2	/IE A1.1	Pregnancy & child hirth	Availability of functional ANC services with minimum 4 ANC check-ups	Services for early registration, screening including lab investigation ,counselling & identification of high risk and danger signs	SI/ RR	2		CHO Interaction	
3		Prognancy & child hirth	First aid, referral & follow up services	APH, PIH, Pre eclampsia, Severe Anaemia, IUGR, Multiple pregnancies, Gestational Diabetes , Hypothyroidism, Syphilis and bad obstetric history	SI/ RR	2		CHO Interaction	Client Interaction
4		Pregnancy & child birth	services and referral services for	Normal Delivery using partograph, identification & management of danger sign during labour and post-delivery 24 hr stay	SI/ RR	2		CHO Interaction	Record Review
5	/IE A1.1	Pregnancy & child birth	Availability of prompt referral services for Obstetrics emergencies	PPH, Eclampsia, Sepsis.	SI/ RR	2		CHO Interaction	Record Review

ile Result Generation ×							3	<b>o</b> ; 🔺	❷     (	CU Ad
Facility/Application Details										
Application Details         Hospital DataSheet         Document CheckList         Score Details         Assessor Documents         Process Result										
Score Details										
Family Planning, Co     Management of cor										Iments
				Gunak Ther	nes Details					
General Round	CHO Interaction	ASHA Interaction	ANM Interaction	MPW Interaction	Client Interaction	Drug and Diag	Record Review			

Walcom

## Step -8 – Report Preparation & Submission

Profile || Assessment Application Actions ×

Executive Summary Form		
Upload Executive Summary Scan Copy	▲ No File	Choose
	Executive Summary	
Introduction		
External Assessment of ANNAMEDU against National Quality Assurance S	Standards was conducted from 24- <b>Jun-2024 to 24-Jun-2024</b> .	
care services, Family Planning, Contraceptive Services and other Repro	Assurance Programme Checklist which contains functional departments (Care in Pregnancy oductive Health care Services, Management of common communicable diseases and Outj Health Programmes, Neonatal and infant health care services, Screening, Prevention, Co	patient care for acute simple illness and minor
Main Gaps		

### Weightage Criteria

S. No.	Criteria	Weightage	Score Obtained
1	State certification score of the facility	25%	
2	Virtual assessment score of the facility	40%	
3	PSS Score	5%	
4	Service Availability	10%	
5	Drugs Availability	10%	
6	Diagnostic Availability	5%	
7	Outcome Indicators	5%	
	Total Score		

### **Certification Outcome**

- a. Fully Certified, if weighted average score is 70% or above
- b. Conditional certified, if weighted average score is from 60% to 69%
- c. Deferred, if weighted average score is below 60%

Assessment Phase	Do's	Don'ts
Pre-assessment	Relieving/Availability to be ensured before giving consent	Last minute cancellation
	Ensure co-ordination among all stakeholders	Share/disclose documents
	Review the documents & prepare in advance	
During assessment	Adhere to the assessment plan and time	Record or click any picture without facility's consent
	Ensure conducting opening & closing meeting	Quote any negative remarks or objectionable comment.
	Be impartial courteous & follow principles of assessment	Any undue demands
	Respect patient privacy	Make any changes in the checklist & report format
	Suggestions & recommendations for gap closure	
Post-assessment	Report to be compiled & completed with mutual consensus & co-ordination of all the assessors	Take any assistance from facility staff in report preparation
	Final report to be submitted within three days post-assessment	Share the report with Facility/State

# **Conflict Resolution**



### **Appeal Process**

Appeal disposal

#### Input

- Feedback of assessor from facility.
- 2. Written Complaint by facility for assessment/ assessor
- Written compliant by assessor against facility
- Written feedback of Co-assessor
- 5. Dis-agreement amongst assessors for scoring



NESRC

received

NHSRC

to

Appeal

directed

Register

**Certification Unit** 

Entry in Appeal

at

1.

2.

 Copy of appeal / complaint along with relevant documents sent to assigned members.

(360 degree feedback system from assessor / co-assessor/ facility/ state)

Collective response communicated to NHSRC. Disagreement – Majority decision will be final

Decision Communicated to Appellant

Outcome

### Virtual Assessment Challenges

- 1. How to fill the tool?
- 2. How to frame the question?
- 3. Review of documents in whose responsibility?
- 4. Facility meets or does not meet the certification criteria?







### THANK YOU

### Quality & Patient Safety Team National Health Systems Resource Centre