



Report on 03-Day Internal Assessor's cum Service Provider Training on National Quality Assurance Standards (NQAS)



Organized By:

State Quality Assurance Unit, NHM Meghalaya
With technical support of
Regional Resource Centre for NE States, Guwahati, Assam

Date of Training : 7th January to 9th January, 2025

**Venue: Mourea Institute of Integral Training (MIIT), Dhanketi, Shillong,
Meghalaya**

Introduction

The National Quality Assurance Standards (NQAS) was introduced in 2013 to enhance the Quality of Care (QoC) in public health facilities, starting with District Hospitals. Community Health Centres (which serve as First Referral Units) and Primary Health Centres (PHCs) with beds were added to the criteria in 2014. Then, in 2016, Quality Standards for Urban PHCs were created. In 2019, the LaQshya rules for maternity OT and labour room were implemented which aimed for zero preventable maternal and neonatal deaths. The SUMAN NQAS guidelines for Health & Wellness Centres were implemented in 2020 and a new initiative called "MusQan" for the paediatric age group within the current NQAS framework was introduced in 2021 to ensure child-friendly services in public health facilities.

The NQAS Standards have been internationally accredited by International Society for Quality in Healthcare (ISQua) and the Insurance Regulatory and Development Authority (IRDA) has approved these requirements for hospital empanelment at the national level.

Implementation of National Quality Assurance Programme in the North-Eastern States has been actively monitored and supported by Regional Resource Centre for Northeast States (RRC-NE) in coordination with National Health System Resource Centre (NHSRC) since the launch of the programme in November 2013. A pool of external and internal assessors has been created in each state for undertaking the assessment of the health facilities, identification of gaps, analysis of the identified gaps, prioritization, action planning for closure of the gaps so that quality of the services provided in our public health facilities can be improved and they may be taken up for National certification.

With the technical assistance of RRC-NE, the State QA Team, NHM, Meghalaya, arranged a three-day Internal Assessor cum Service Provider Training. The goal of the training was to increase the number of assessors, and RRC-NE provided assistance by drafting the agenda, providing study materials, and taking sessions during the training. The training program was divided into 18 topics and included hands-on exercises to give participants exposure with different assessment approaches. Following the training, a discussion about the State of Meghalaya's NQAS implementation roadmap status was held, and the training was finished with a post-training evaluation.

Objectives and Participants

The main objectives of the training were as follows:

1. To impart understanding of the basic concept of Quality Assurance Standards and how to implement them in public health facilities.
2. To acquaint the participants with Area of Concerns, Standards, Measurable elements, Departmental Checklists and Scoring System.
3. To support the facilities for achieving National Quality Certification.

Training was facilitated by following Resource Persons:

1. Dr. Ravikar Singh, Consultant-QPS, RRCE-NE
2. Dr. Munmee Das, Consultant-QPS, RRCE-NE
3. Dr. Joshua Sangma, District Quality Manager, Garo hills
4. Ms. Dakarupaia Biam, Program Manager, Nishitha, Jhpiego
5. Dr. Steffi C Laloo, State Quality consultant
6. Dr. D P Syiem, Sr. Medical & Health Officer I/c. Pomlum PHC
7. Dr. P Lyngdoh, Sr. Medical & Health Officer O/o Directorate of Health Services (MCH&FW)
8. Dr. B Passah, Medical and Health officer MD Immunohematology and Blood Transfusion

The agenda of the three-day Training is placed as Annexure – I.

Participants: A total of 46 (Forty-six) participants including District Nodal Officer, Medical Officers, Nursing Tutors, Quality Consultants, Staff Nurses, Pharmacist were nominated in the training, out of which 43 (forty-three) attended the training. The Participants list along with the post training evaluation result is enclosed as Annexure – II.

Inaugural Session: Dr. Arwan Phanbuh, Sr. Medical & Health Officer O/o Directorate of Health Services (MI) & member, JD QC, welcomed all the participants & resource persons from RRCNE, & state officials to the 03-day State level Internal Assessor's cum Service Providers Training Program. He stressed on the importance of the training and urged all the participants to gain maximum knowledge from it. Additionally, he conveyed his hope that the attendees will further the state's NQAS certification process after completing the internal assessor training.

| Technical Sessions | |
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| Topic | Brief Description |
| Day -1 (7 th January 2025) | |
| Session 1: Overview of National Quality Assurance Program(NQAP) and Assessment Protocol. | This session gives an overview of NQAP and milestones of its journey in India including basics of measurement system of National Quality Assurance Standards. In this session, Dr. Ravikar Singh explained the concepts of Quality, development of National Quality Assurance Standards (NQAS), its key features, Implementation framework at state and district level and the function of Quality Assurance Committees & Units. He briefed about Areas of Concerns & Standards, Measurable Elements & Checkpoints, followed by the measurement system of National Quality Assurance standards. The session concluded with discussion on the Scoring System, Assessment methods, Methodologies, and protocols of the NQAS assessment. |
| Session 2: Standards for Service Provision, AoC-A | The second session covered the area of concern A (AoC-A) which measures availability of services in a health facility. Dr. Joshua Sangma explained standards under service provision, which focused on ensuring hospitals provide comprehensive functional services and facilities to end-users. He explained the compliance to the standards and measurable elements should be checked by observing services delivery, reviewing records/documents & evaluating utilization across hospital departments. During the session, high interaction between participants with their queries was the main highlight. |
| Session 3: Standards for Patient Rights, AoC-B | The standards under the Area of Concern B ensures accessibility of services to the end users with dignity and confidentiality including due consideration to a patient's preferences. This session was taken by Ms. Dakarupaia Biam. She covered the key aspects of privacy such as access to information, Patient rights and responsibilities, Citizen charter, user-friendly signages, confidentiality, consent for treatment, privacy, dignity, and providing treatment without any physical and financial barriers. |
| Session 4: Standards for Inputs, AoC-C | This Area of Concern C predominantly covers structural part of the facility. During this session , Dr. Joshua Sangma explained the structural components of healthcare facilities as outlined by the Indian Public Health Standards (IPHS). This session covered infrastructure requirements, essential utilities like water and |

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| | electricity, workforce adequacy, staff competency evaluations, and the availability of drugs, consumables, and equipment. |
| Session5: Standards for support Services (AoC-D) & Inventory Management | In this session the standards under Area of Concern D were discussed. Under this Area of Concern, the support services that help a facility to run smoothly are covered. Dr. Steffi C Laloo elaborated on hospital support services, including preventive & breakdown maintenance of equipment's, calibration, of critical equipment's, daily inspection, inventory management of drugs & consumables in pharmacy as well as patient care areas, dispensing & storage of drugs, regular upkeep of facility, 24x7 water and power supply, laundry, dietary & security services, accounts & finance management, statutory requirements for hospital etc. |
| Session 6: Standards for Infection Control, AoC-F | The standards under the Area of Concern F covers standards related to infection control practices including BMW management. Dr. Steffi C Laloo delivered an in-depth session on infection control protocols and practices critical for preventing nosocomial infections in public hospitals. She emphasized the importance of hand hygiene, personal protective measures, antiseptic practices, sterilization and disinfection of equipment, and environmental control. She concluded the session with a brief discussion on effective biomedical waste management in the health facility. |
| Day - 2 (8th January 2025) | |
| Session 7: Standards for General Clinical Services (AoC-E) (Std. E1 – E5) | The standards under Area of Concern E are primarily concerned with clinical processes. The session was taken by Dr. D P Syiem and he introduced the first set of five standards under AoC-E, focusing on essential clinical processes that ensure comprehensive patient care. He explained the general clinical services & their importance. His session covered vital areas such as patient registration, admission, consultation, clinical assessment, continuity of care, nursing practices, identification and management of high-risk patients. |
| Session 8: Standards for General Clinical Services (AoC-E) (Std. E6 - E9) | Dr. P Lyngdoh facilitated the session highlighting the importance safe drug administration, drug administration protocols, medical record maintenance, and patient discharge procedures. |
| Session 9: Standards for - AoC E Specific Clinical Services (Std. E10 - Std. E12) | Dr. D P Syiem discussed in detail about standard E10 E 11 and E12. There she discussed the procedure for intensive care, procedure for Emergency services, disaster management and procedure for diagnostic services. |
| Session 10: Standards for - AoC E Specific Clinical Services (Std. E13) | Dr. B Passah focused on defined and established procedures for Blood bank and Storage management and transfusion. |
| Session 11: Standards for - AoC E Specific Clinical Services (Std. E14 - Std. E16 & Std E24) | Dr. P Lyngdoh explained in detail the standards for specific clinical Services from E14 to E16 & E24. It includes Standards for anesthetic services, surgical interventions, hemodialysis, and end-of-life care. Dr. Ravikar singh added inputs for E 24 (Hemodialysis services) and interacted with participants. |
| Session 12: Standards for RMNCHA Services - AoC E (Std. E17 - Std. E21) | Dr. D P Syiem took the next session for RMNCH+A services also. In this session, she delivered a detailed talk on the standards which are specific to Maternal, New-born and Child health services. Maternal Services is further categorized into Ante-natal, Intra-natal, and post-natal services. |
| Session 13: Standards for Adolescent health services and NHP-AoC E | Dr. P Lyngdoh also took the next session on Adolescent Reproductive, sexual health services and National Health Programs. |

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| (Std. E22- Std. E23) | |
| Session 14: Introduction to LaQshya and MusQan | The LaQshya initiative ensures Quality of Care during intrapartum & immediate post-partum period in healthcare facility. MusQan is designed to ensure provision of quality child friendly services from birth to children up to 12 years of age. Dr. Ravikar Singh took the session on introduction to LaQshya and MusQan initiative. He explained the process of preparing for certification of maternal and paediatric services under these initiatives. |
| Session 15: Overview of SaQsham Status & process for NQAS application. | SaQsham is an online portal wherein nation-wide health centres and public health facilities can come up for national level certification. In this session, Dr. Ravikar, introduced the SaQsham portal, a digital platform facilitating the application process for NQAS national-level assessments. He guided participants through registering healthcare facilities, obtaining login credentials, and completing the required documentation for certification. Dr. Ravikar outlined the steps for approval by the state QA team, ensuring participants understood the entire process from registration to submission of mandatory documents for national certification. |
| Session 16: Prescription Audit and SaQsham | A prescription audit is a part of the holistic clinical audit and is a quality improvement process that seeks to improve patient care and outcomes through a systematic review of care against explicit criteria and the implementation of change. Dr. Ravikar Singh took the session on conducting prescription Audit and explained the practical application for the same. |
| Day - 3 (09th January 2025) | |
| Session 17: Standards for Quality Management (AoC G 1-5) | The Area of Concern G covers various quality tools and methods that are used for enhancing quality of services. Dr. Ravikar Singh took the first five standards of AoC G emphasizing the formation of quality teams and role of its members, development of quality policies and objectives, creation of Standard Operating Procedures (SOPs), work instructions, internal & external quality assurance system. He later explained process mapping, identification of non-value adding activities and corrective action to improve the process. |
| Session 18: Standards for Quality management System (G6- G10), AoC G with Quality management System Risk management framework | Dr. Ravikar next explained the remaining five standards of AoC G focusing on Mission, Vision, Quality policy & objectives, Strategic plan to achieve them. He also delved into various quality methods and tools and their use. Discussion on the Risk Management Framework, covering the processes of assessing, reporting, evaluating, and managing risks were the highlights of the session. Dr. Ravikar discussed the importance of adhering to the risk management plan and clinical governance framework to ensure the quality and safety of clinical care processes. |
| Session 19: Outcome Indicators & KPIs, AoC H | As measurement of quality is critical to improvement of processes and outcomes and this Area of Concern H, covers different measures for quality. In this session, Dr. Munmee Das discussed in detail about the different indicators, KPIs and Outcome indicators. She explained in details about KPIs for different levels of healthcare facilities and also gave an overview of outcome indicators. The outcome indicators where four standards of measures for quality – Productivity, Efficiency, Clinical Care & Service Quality were briefed in terms of measurable indicators and |

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| | to have a system to measure the indicators and meeting the benchmarks. Next, she explained about Patient and Employee satisfaction, its analysis and corrective & preventive action to address the low performing attributes. She highlighted the significance of patient and employee satisfaction surveys. |
| Session 20: Status & Road map for NQAS implementation in the state. | Dr. Arwan Phanbuh, JD QC, outlined the State Action Plan for Quality Assurance activities as per the proposed SPIP for 2024-25. He provided an update on the status of facilities shortlisted for the NQAS and LaQshya programs and urged the officials to follow the established timelines for completing the assessments. He stressed the need for adherence to these timelines to ensure the successful implementation of the programs in the state. |

Post Training Evaluation: RRCNE QPS team conducted a post training evaluation of the participants with an objective type of question paper. A total of 43 (forty-three) participants appeared in the post training evaluation and out of these, 32 participants have qualified the post training evaluation with a pass percentage of 74%. Following the evaluation, feedback on the 3-day training program was also collected from the participants. The NQAS training program includes an inbuilt training evaluation system where each participant provides feedback on a 5-point Likert scale. The feedback aimed to understand the effectiveness of the training, identify areas for improvement, and gather insights into the overall learning experience. The overall rating of the training, based on participant feedback analysis, was 4.48 out of 5. The analysis of training feedback is enclosed in Annexure – III.



Post Training Evaluation



Valedictory session

Valedictory and closing ceremony:

The training program concluded with closing remarks and a vote of thanks delivered by Dr. Steffi Laloo, State Quality Consultant, NHM-Meghalaya. Dr. Laloo expressed appreciation to all participants and trainers for their active involvement and contributions throughout the training. She emphasized the importance of applying the knowledge gained in improving quality standards and patient safety in their respective health facilities.

All of the participants found the training to be helpful. They all expressed that after completing this training their knowledge and skills were greatly improved in terms of healthcare quality, which they will implement at their respective facilities.

Annexure I

Training Agenda

| Time | Topic | Resource Person |
|---|---|----------------------|
| Day-01 (7th Jan 2025) | | |
| 09:00 am - 09:30 am | Registration | State Team |
| 09:30 am - 09:45 am | Inaugural Address | State Representative |
| 09:45 am - 10:00 am | Introduction by Participants | Participants |
| 10:00 am - 11:30 am | Overview of National Quality Assurance Program and Assessment Protocol | RRC - NE Team |
| 11:30 am - 11:45 am | Tea & Group Photo | |
| 11:45 am - 12:30 pm | Standards for Service Provision (AoC-A) | Dr. Joshua Sangma |
| 12:30 PM - 01:15 PM | Standards for Patient Rights (AoC-B) | Ms. Dakarupaia Biam |
| 01:15 pm - 02:00 pm | Lunch | |
| 02:00 pm - 03:00 pm | Standards for Inputs (AoC-C) | Dr. Joshua Sangma |
| 03:00 pm - 04:00 pm | Standards for support Services (AoC-D) & Inventory Management | Dr. Steffi C Laloo |
| 04:00 pm - 04:15 pm | Tea | |
| 04:15 pm - 5:30 pm | Standards for Infection Control, AoC-F | Dr. Steffi C Laloo |
| Day-02 (8th Jan 2025) | | |
| 09:00 am - 09:15 am | Recap | |
| 09:15 am - 09:45 am | Standards for General Clinical Services (AoC-E)(Std. E1 - E5) | Dr. D P Syiem |
| 09:45 - 10:15 am | Standards for General Clinical Services (AoC-E)(Std. E6 - E9) | Dr. P Lyngdoh |
| 10:00 am - 11:00 am | Tea | |
| 11:00 am - 11:30 am | Standards for - AoC E Specific Clinical Services(Std. E10 - Std. E12) | Dr. D P Syiem |
| 11:30 am - 12:00 pm | Standards for - AoC E Specific Clinical Services(Std. E13) | Dr. B Passah |
| 12:00 pm - 01:15 pm | Standards for - AoC E Specific Clinical Services(Std. E14 - Std. E16 & Std E24) | Dr. P Lyngdoh |
| 01:15 pm - 02:00 pm | Standards for RMNCHA Services - AoC E (Std. E17 - Std. E21) | Dr. D P Syiem |
| 02:00 pm - 02:30 pm | Lunch | |
| 02:30 am - 03:00 pm | Standards for RMNCHA Services - AoC E (Std. E22- Std. E23) | Dr. P Lyngdoh |
| 03:00 pm - 04:00 pm | MusQan & LaQshya - An Overview | RRC - NE Team |
| 04:00 pm-04:15 pm | Tea | |
| 04:15 pm - 05:00 pm | Overview of SaQsham and prescription audit | RRC - NE Team |
| Day-03 (9th Jan 2025) | | |

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| 09:00 am - 09:15 am | Recap | |
| 09:15 am – 11:00 am | Standards for Quality Management (AoC G 1-5) | RRC – NE Team |
| 11:00 am – 11:15 am | Tea | |
| 11:15 am – 12:15 pm | Standards for Quality Management (AoC G 6-10) | RRC – NE Team |
| 12:15 pm - 1:15 pm | Outcome Indicators & KPIs, AoC H | RRC – NE Team |
| 01:15 pm - 02:15 pm | Lunch | |
| 02:15 pm - 03:15 pm | Status & Road map for NQAS implementation in the state | Dr. Steffi C Laloo |
| 03:15 pm – 04:30 pm | Post Training Evaluation & Feedback | RRC – NE Team |
| 04:30 pm – 5:00 pm | Valedictory & Tea | |

Annexure II

List of Participants with Post Training Result

| Results INTERNAL ASSESSOR'S CUM SERVICE PROVIDER TRAINING Venue: MIIT, SHILLONG Date: 7th - 9th Jan 2025 | | | | |
|---|--------------------------------|-----------------|---|--------|
| Sl.no | Name | Designation | Place of Posting | Result |
| 1 | Mrs.Dimsey R Marak | Nursing Tutor | School of Nursing, Williamnagar District Hospital | FAIL |
| 2 | Ms.Indamanbha Chyne | Nursing Tutor | School of Nursing, GDH MCH Hospital (Theresa Training Centre) | FAIL |
| 3 | Mrs.Darilin Nongbet | Nursing Tutor | School of Nursing, GDH MCH Hospital (Theresa Training Centre) | PASS |
| 4 | Mrs.Ieitriti Lyndem | Health Educator | Sohra CHC | PASS |
| 5 | Smt.Sengchi J Sangma | Nursing Tutor | School of Nursing, Nongstoin District Hospital | Absent |
| 6 | Mrs.Heiomika Dhar | Nursing Tutor | School of Nursing, Civil Hospital Shillong | PASS |
| 7 | Mrs.Judith Clareen Lawrynniang | PHN Instructor | Regional Health & Family Welfare Training Centre, Shillong | PASS |
| 8 | Mrs.Siantimai Synrem | Nursing Tutor | School of Nursing, Civil Hospital Shillong | PASS |
| 9 | Ms.Gressenthia R Sangma | Nursing Tutor | School of Nursing, Williamnagar District Hospital | PASS |
| 10 | Mrs.Jimse D Marak | Nursing Tutor | School of Nursing, GDH MCH Hospital (Theresa Training Centre) | FAIL |
| 11 | Mrs.Renisha Ch Momin | PHN Tutor | Family Health Welfare Training School, Rongkhon Tura | FAIL |

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| 12 | Smt.Hasmiterak R. Marak | Nursing Tutor | School of Nursing, Baghmara District Hospital | Absent |
| 13 | Smt.Phidalin Nongkhaw | PHN | Sohiong CHC | Absent |
| 14 | Mrs.Jubie D Sangma | Tutor | Family Health Welfare Training School, Rongkhon Tura | FAIL |
| 15 | Mrs.Tarsila Mukhim | Tutor/Clinical Instructor | School of Nursing, GDH MCH Hospital (Theresa Training Centre) | PASS |
| 16 | Ms.Phisha Nora Nongpluh | Nursing Tutor | School of Nursing, Nongpoh District Hospital | PASS |
| 17 | Smt.Shitmailin Khongsar | Tutor/Clinical Instructor | School of Nursing, Civil Hospital Shillong | FAIL |
| 18 | Mrs.Silbana Lyngdoh | Nursing Tutor | School of Nursing, GDH MCH Hospital (Theresa Training Centre) | PASS |
| 19 | Mr.Wallamjop Kharsyntiew | Nursing Tutor | School of Nursing, Nongpoh District Hospital | FAIL |
| 20 | Dr. Rapbanker Marwein | Jr. Specialist | O/o DMHO West Khasi Hills | PASS |
| 21 | Mr.Constant Shullai | Pharmacist | Reid Provincial Chest Hospital, Shillong | PASS |
| 22 | Mr.Donlutmain Lyngdoh | Pharmacist | Ganesh Das Govt. MCH Hospital, Shillong | FAIL |
| 23 | Ms. Lodgelyn Nongbri | Pharmacist | Civil Hospital Shillong | PASS |
| 24 | Dr Wanbha Myllemngap | Medical Officer | Civil Hospital Shillong | PASS |
| 25 | Dr Jennifer Shullai | Medical Officer | Civil Hospital Shillong | PASS |
| 26 | Dr Persara Gatphoh | Quality Manager | Civil Hospital Shillong | PASS |
| 27 | Ms.Ibalawanpynhun Wriang | Quality Consultant | Ganesh Das Govt. MCH Hospital, Shillong | PASS |
| 28 | Ms.Kasmiri Tangsang | Quality Assistant | Ganesh Das Govt. MCH Hospital, Shillong | PASS |
| 29 | Dr. Dalawanka Marbaniang | DQAA MHSSP | O/o DMHO East Khasi Hills | PASS |
| 30 | Ms.Jaidalin Basaiawmoit | DQAA MHSSP | O/o DMHO East Jaintia Hills | PASS |
| 31 | Ms.Ibaplielad Jana | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 32 | Mr.Joel James | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 33 | Mr.Joel Shabong | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 34 | Ms.Charisma Khongwir | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 35 | Dr. Kamdathrang Syngkon | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 36 | Ms.Mattimi Passah | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 37 | Mrs.Sanika Lyngdoh Mawphlang | JDQC Consultant | O/o DHS (MI) Shillong | PASS |
| 38 | Dr. Michael Nongrum | District Urban Health Consultant | O/o District Medical and Health Officer, West Khasi Hills District, Nongstoin | PASS |

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| 39 | Dr Myntuhiwot Shylla | Ayush Medical Officer | Pynursla CHC | PASS |
| 40 | Dr Lamshuwa Mawlong | M&HO | Mawiong CHC | PASS |
| 41 | Mrs.Suhakee Warbah | DME | O/o DMHO, East Khasi Hills | PASS |
| 42 | Dr.RatanMoni Debnath | Joint DHS | DHS MCH Shillong | FAIL |
| 43 | Mrs.Amica A Sangma | Nursing Tutor | School of Nursing Civil hospital | FAIL |
| 44 | Mrs.Pinky Lywait | District PHN | DM&HO EJH | PASS |
| 45 | Dr.Benjamin R Laitphlang | Jr. Specialist | DM&HO EJH | PASS |
| 46 | Mrs.Grace Perry Sunn | Assitant Director Nursing | DHS(MI) | FAIL |

Annexure III

Training Feedback Analysis

1. Topic wise Score as per the feedback received from the participants:

| Sl. | Name of the Topic | Average Score |
|-----|--|---------------|
| 1 | Overview of NQAP and Measurement System | 4.84 |
| 2 | Standards for Service Provision, AoC-A | 4.31 |
| 3 | Standards for Patient Rights, AoC-B | 4.09 |
| 4 | Standards for Inputs, AoC-C | 4.27 |
| 5 | Standards for support Services, AoC-D | 4.62 |
| 6 | Standards for Clinical Services, AoC-E (Std. E1- Std. E5) | 4.02 |
| 7 | Standards for General Clinical Services, AoC-E (Std. E6 - Std. E9) | 4.53 |
| 8 | Standards for - AoC E Specific Clinical Services (Std. E10 - Std. E12) | 4.11 |
| 9 | Standards for - AoC E Specific Clinical Services (Std. E13) | 4.73 |
| 10 | Standards for - AoC E Specific Clinical Services (Std. E14 - Std. E16 & Std E24) | 4.56 |
| 11 | Standards for RMNCHA Services - AoC E (Std. E17 - Std. E21) | 4.16 |
| 12 | Standards for RMNCHA Services - AoC E (Std. E22- Std. E23) | 4.51 |
| 13 | Standards for Quality Management (AoC G) | 4.76 |
| 14 | Overview of SaQsham portal | 4.64 |
| 15 | Outcome Indicators & KPIs, AoC H and PSS | 4.87 |
| 16 | MusQan & LaQshya – An Overview | 4.71 |
