



Steps for Implementation of NQAS at Ayushman Arogya Mandirs



Learning Objectives

Steps in implementing NQAS Standards at Ayushman Arogya Mandirs

10-Steps of NQAS at Ayushman Arogya Mandirs



Sensitization
of Team
Members



Quality
Policy and
Objectives



Formation of
Quality
Team



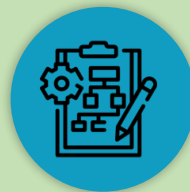
Document &
Implement
Work
Instructions



Conduct
Baseline/
Internal
Assessment



Action
Planning and
Prioritization



Do Gap
Analysis



Conduct of
Client
Satisfaction
Survey



Measurement
of Key
Performance
Indicators



Referral Audit
and Refill
Monitoring
Audit



Sensitization of Team Members

WHAT

Orientation of Quality Team and Ayushman Arogya Mandir Staff on Standards, Assessments, Scoring system and its implementation

WHO

DQAU with support of MO PHC

WHEN

First month of implementation



Formation of Quality Team

WHAT

- Form the Quality team –Ayushman Arogya Mandir
- Community Health Officer (CHO), MPW, LHV, ANM and ASHA Workers (1-2 Nos).

WHO

CHO with support of MO PHC

WHEN

First month of implementation

Also view training module on **Quality Team Formation and Functions**



Quality Policy and Objectives

Example of Quality Policy:

- › *“Ayushman Arogya Mandir endeavor to deliver safe, effective, efficient, accessible, free of cost comprehensive services to its beneficiaries, keeping focus on providing patient centric quality care, within the available resources.”*

Example of Quality Objective:

- › *To increase screening of diabetes among population from 50 % to 70 % by March 2025*
- › *To increase the cervical cancer screening percentage of female population above age of 30 from 60 % percent 80 % by March 2025*



Document and Implement of Work Instructions

Work Instructions are step wise steps guide to instruct the user 'how' to perform a particular task/activity.

Use of Rapid Diagnostic Kits

RMNCHA Services

Screening, management and appropriate referral of NCDS

Screening of common ophthalmic problems

Infection Prevention & Bio-medication
Waste Management



Conduct of Baseline & Internal Assessment

WHAT

- Conduct of Baseline Assessment immediately
- Periodic internal assessment using NQAS and Kayakalp checklist

WHO

Quality Team

WHEN

Baseline Assessment – Second Month of implementation
Internal Assessments – NQAS (ix Monthly), Kayakalp (Quarterly)



Do the Gap Analysis

WHAT

Analysis of assessment activities, identification of gaps, preparation of action plan and closure of gaps

WHO

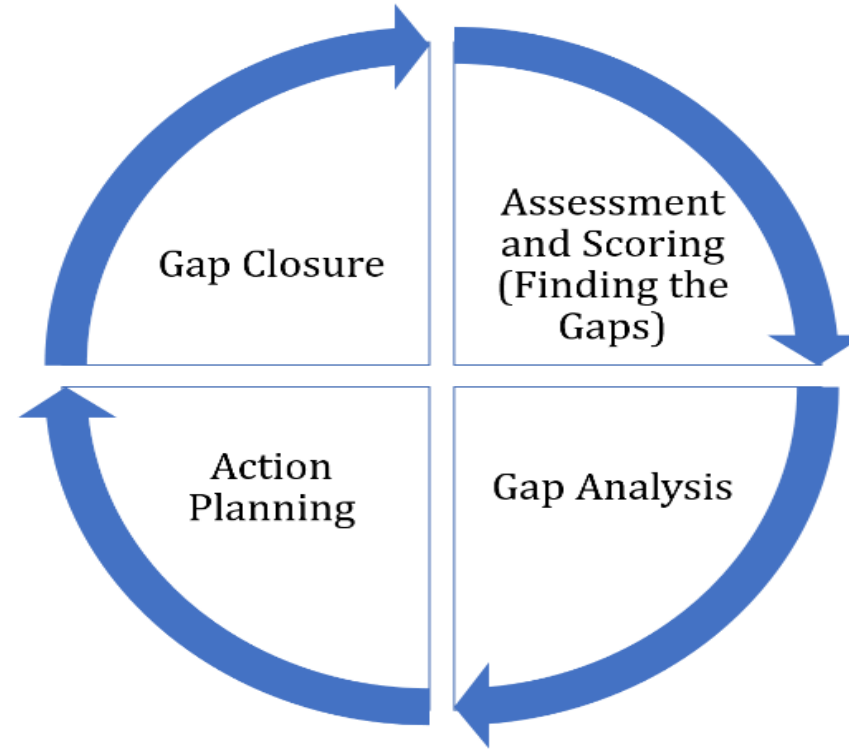
Quality Team, DQAU

WHEN

Immediately after Baseline Assessment & Internal Assessments



Action Planning and Prioritization





Client Satisfaction Survey



- › Collect monthly feedback in a ***structured format*** defined by the state.
- › ***Minimum 30 patients / community*** feedback to be collected
- › Analyze and identification of actions for improvement.



Reporting and Monitoring of Outcome Indicators



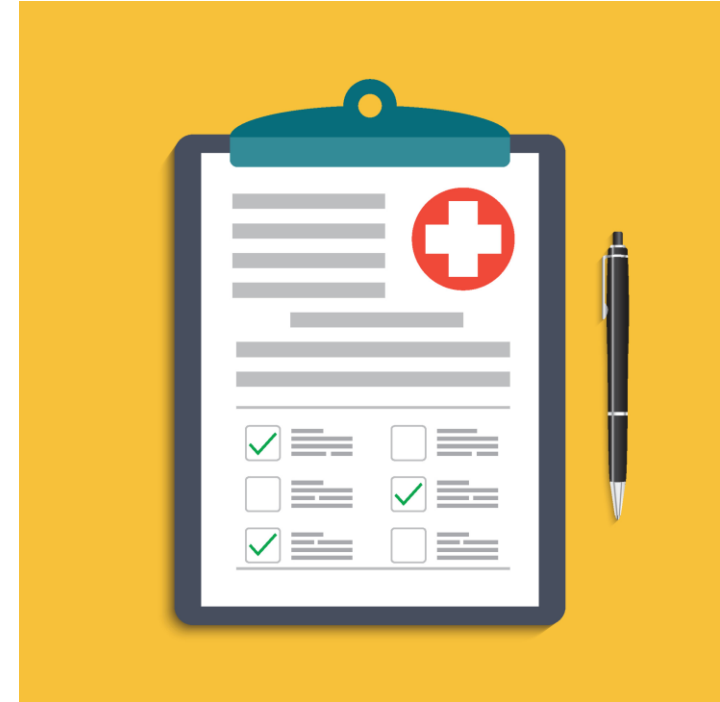
- › Capture the Outcome indicators on monthly basis.
- › Analyze, review and utilize data for monthly quality team meetings.
- › Report to DQAC/ SQAC for monitoring purpose.



Refill Monitoring Audit and Referral Audit



A monthly audit of refill prescriptions

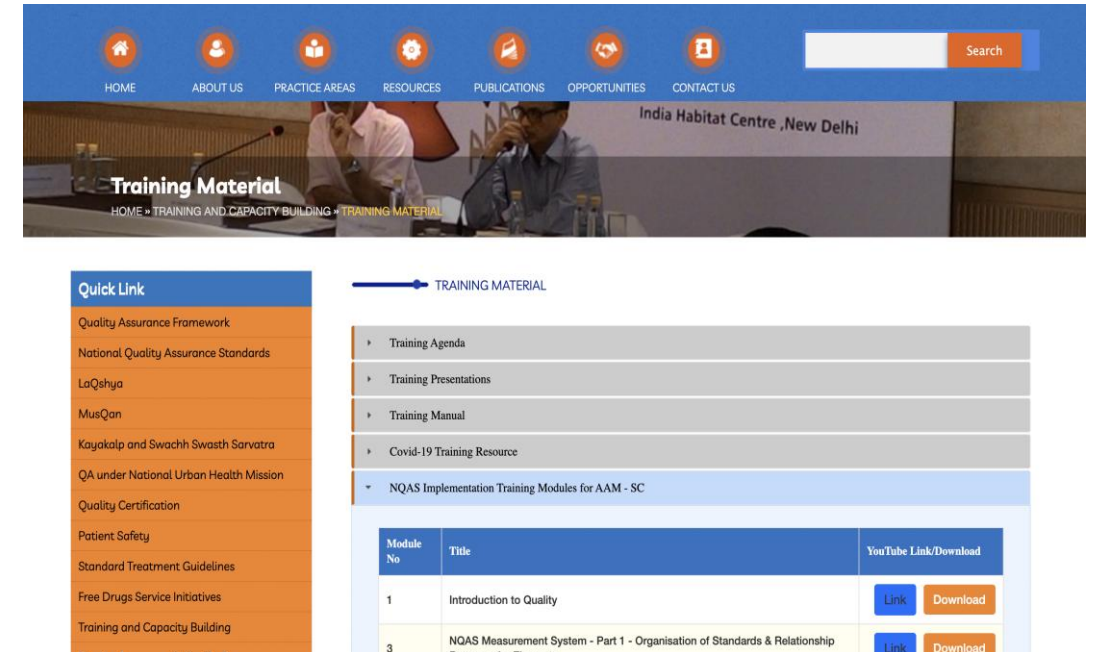


A monthly audit of referral to higher facilities

Online Training Video Links



<https://youtu.be/2PLeCOeikJ0?si=okXLRCTiRnFLhLrq>



<https://qps.nhsrccindia.org/training-and-capacity-building/training-material>



THANK YOU

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