

**A Report on
Two Days Regional Review cum Advocacy Meeting for National Quality Assurance Programme for NE States**



**Organized by
Regional Resource Centre for NE States
(Branch of NHSRC, New Delhi)
Venue: IIBM, Khanapara, Guwahati, Assam**

Regional Resource Centre for NE states organized Regional Review cum Advocacy Meeting for National Quality Assurance Programme for NE states on 21st & 22nd May 2019 at IIBM, Khanapara, Guwahati.

1. **Objective of the meeting:**

- 1.1. To review the status of implementation of the QA Program-NQAS and LaQshya, Kayakalp and Swacch Swasth Sarvatra in the eight North Eastern States and advocate for the same.
- 1.2. To discuss the critical issues/challenges faced during the implementation of QA program and possible solutions.
- 1.3. To share/learn about any new innovations/good practice from other states
- 1.4. To discuss the roadmap for augmenting the QA program implementation in the NE states in the FY 2019-20.

2. **Participants:**

- 2.1. The meeting was attended by State Nodal Officers- QA, State Quality Consultants, M&HOs of selected facilities, CMOs of districts, consultants from NHSRC, RRC-NE and UNICEF (List of Participants is at Annexure 1).

3. **Inaugural and welcome address:**

- 3.1. At the very outset, Dr. Suchitra Rajkumari, Sr. Consultant, QI, RRC-NE welcomed all the respected dignitaries on the Dias - **Dr. Ashoke Roy**, Director, RRC - NE States; **Dr. J.N. Srivastava**, Advisor, QI Division, NHSRC; **Dr. Maulik Shah**, Health Officer, UNICEF; **Dr Baroon Subba**, Additional Director, Sikkim; **Dr Rashmi Wadhwa and Dr Shivali Sisodia**, Consultants QI, other officials from UNICEF and all the state nominated participants from all NE states to the **Two days Regional Review cum Advocacy Meeting** organized by RRC-NE. She stated that National Quality Assurance Programme is yet to gain its momentum in the NE States. There is need to increase the number of NQAS Certified facilities in this region though there is some improvement made in FY 2018-19. Therefore, the States need to have clear strategy in place to enhance the implementation of the programme in the FY2019-20.
- 3.2. **Dr. Ashoke Roy, Director, RRCNE** welcomed and felicitated the dignitaries on the dais. He also welcomed all state participants and expressed that in last few months some of the NE states could produce few NQAS certified facilities and have achieved in improving the health scenario to some extent. He congratulated the states for it. He told all the 8 NE States should have clear roadmap for FY 2019-20 especially in the next 100 days of new government and targets to make more number of health facilities certified against NQAS standards.
- 3.3. It was then followed by round of introduction from all the participants.
- 3.4. **Dr. J.N Srivastava, Advisor, QI, NHSRC** thanked RRC-NE team led by Dr Ashoke Roy, during his key note address, for organizing the meeting. He said that during this two days meeting, review and advocacy the implementation of National QA programme. We will also be focusing more on understanding the concerns and challenges faced in this region of the country. He told that Quality journey has been started in this region, the main concern is to expedite the progress and make it measurable. Dr. Srivastava informed the house that Quality has two dimensions- one is patient receiving care as per the protocol and second one is positive user experience. He expressed that many initiatives have been done to improve the Quality of care in different platforms. Recently, in World Health Assembly one of the key agenda was pertaining to Quality framework of Patient Safety. Dr Srivastava also highlighted that Global group has been constituted by Lancet Commission for Quality in Health and a meeting was held at national level to address the key issues. He also spoke on importance of obtaining patient feedbacks and analyzing it to identify the weak areas for further improvement.
- 3.5. In regard to shortlist the health facilities for NQAS Certification, **Dr. Srivastava guided the States to prepare a matrix of health facilities covering 5 parameters - HR, Infrastructure, Kayakalp score, NQAS baseline score and commitment of local leadership.** Based on this matrix, state may select facilities for NQAS certification.





Dr Suchitra welcoming the dignitaries on the Dias and state participants



Dr. Ashoke Roy, Director, RRCNE delivering the Inaugural address



Director RRCNE felicitating the dignitaries

Technical Session

- A. Day 1: 21st May 2019:** All states were shared a template in advance for the presentation. The template includes number of different level of health facilities, HR status and their key deliverables, QAC meetings, Trainings, NQAS Certification – commitment and progress, Assessment status, status of Kayakalp for FY 2018-19, Kayakalp winner facilities, status on LaQshya, Mera Aspataal, Swachh Swasth Sarvatra, KPI, Patient Satisfaction Survey, list of health facilities selected for NQAS and LaQshya for FY 2019-20, good practices, critical issues with suggestions. All NE States made the presentation based on this template.
1. **Meghalaya:** **Dr. (Mrs) Rafellia Allya, Jt. Director of Health Services (MCH&FW) cum SNO – QA** made the first presentation of the day for the State of Meghalaya. She informed the house that two PHCs of Meghalaya have received NQAS certification- one is PHC Umden under Ri- Bhoi district with 86.9% and another one is PHC- Nartiang under West Jaintia Hills with 79.5%. She expressed her gratitude to RRC-NE and NHSRC for constantly guiding and supporting the State and also her predecessor Dr Joy Lyngwa. Dr Allya made the presentation based on the template. Key points discussed during the presentation are as follows:
 - 1.1. No State QI Consultant for last 2 years.
 - 1.2. Difficult to take up CHC for NQAS certification as most of the CHCs do not have all the required HR especially specialists and Dr Srivastava advised to take up only those CHCs with full HR in position for NQAS certification. If assured services including FRU services are not being provided at all the CHCs of a particular NE State due to non-availability of specialized manpower, then the State may apply for customization of the check list.

- 1.3. Dr. Srivastava advised Dr Allya to initiate NQAS certification process for 2 facilities DH Ganesh Das Hospital and CHC Chokpot at state level as they have scored above 70%. He mentioned that State NQAS certification has been notified as one of the empanelment criteria by Insurance Regulatory and Development Authority of India (IRDA). Under Ayushman Bharat, NQAS certified facilities would get some incentives, which would be added resource for the facility. Dr Srivastava requested RRCNE QI team to extend required support to the state for the State certification
- 1.4. Dr. Allya shared some Good practices in the state of Meghalaya which includes **BIOWAT** which is a low cost primary care intervention for the treatment and safe disposal of liquid waste generated at Health facilities. It is developed by Dr Pohsnem who is MO I/C of Nartiang PHC (NQAS Certified facilities) and also a certified external assessor for NQAS. Other good practices are good involvement of community in Quality improvement of health facilities, Periodic Medical Checkup of Kitchen staffs every 6 months & all Staffs once a year in Ganesh Das Hospital.
- 1.5. Critical issues of the state are Infrastructure development, Human resource (frequent transfer), lack of BSU in District MCH Hospital, No common treatment plant for BMW Management, Overloaded District Hospital, No Essential Drug List, irregular training of MOs & paramedical staffs on National Health Programmes.
- 1.6. Mera Aspataal Data for Tura Civil Hospital & Shillong Civil Hospital already shared from NIC to Ministry Mera Aspatal team. User ID for State in Mera Aspataal not yet received from Ministry.
- 1.7. Facilities selected for NQAS certification in FY 2019-20 - Ganesh Das Govt MCH Hospital, Williamnagar CHC, Chokpot CHC, Mawphlang CHC, Pomlum PHC and Pamra Paithlu PHC. And the list of facilities selected for LaQshya are Ganesh Das Govt MCH Hospital, NEIGRIHMS Medical College, Nongpoh DH, Tura MCH and Sohra CHC.



*Dr. (Mrs). Rafellia Allya, Jt. Director of Health Services (MCH&FW)
cum SNO – QA, Meghalaya during the presentation*

2. **Sikkim: Dr. Baroon Subba, Additional Director cum SNO-QA, Sikkim** also made the presentation based on the shared template. Key points discussed during the presentation are as follow:
 - 2.1. Good practices in Sikkim as presented includes West district is covered under 108 (MCH & Trauma) ambulances, 104 health help line, toll free, CATCH (Chief Minister's Comprehensive Annual and Total Health Check up for Healthy Sikkim), Proud Mother Scheme, Smoking banned in public places, HPV vaccination- 9 yrs to < 14 yrs girls, Open Defecation Free State- declared on 1st March 2016 and Free health services.
 - 2.2. Dr Subba highlighted that there is need to sensitize the top level managers of Health Department on NQAS, Kayakalp and LaQshya due to which the programme could not be implemented successfully. He requested Dr Srivastava and Dr Ashoke Roy to kindly address this issue.

- 2.3. Other critical issues include lack of NQAS fund for traversing the gaps and for establishment of office of District Quality Unit at district level. Dr Srivastava responded that required fund (except infrastructure) for traversing gaps may be proposed with proper justification under Quality head in supplementary PIP. Fund for establishing DQAU may be approved unless it is not approved already in previous years.
- 2.4. Best PHC Award for Kayakalp was not declared for each district in the state, only the commendation awards were given.
- 2.5. In regard to Mera Aspataal, Dr Subba informed that state is facing challenges in getting net connectivity. Dr Srivastava responded that state may explore offline excel sheet based option to this issue. If there are still challenges, the technical need may be channelized through Director (NHM – III) with office of Joint Secretary (Policy) and Joint Secretary (E-governance) in the loop.
- 2.6. Dr. Baroon Subba further informed that regarding Bio Medical Waste Management, transportation of wastes is very difficult to manage and some of the PHCs are inaccessible for transportation. Dr. Srivastava said it is a great challenge for every State. State should have common waste management facility as per BMW rule 2016. He mentioned deep burial pit may be used for disposal of biomedical wastes until Common treatment plant is established as per the guideline. However, explicit approval for deep burial for each location is required to be taken from the competent authority.
- 2.7. Regarding KPI measurement, Dr. Srivastava informed the participants that NHSRC is working on a Booklet on reporting and analysis of Hospital KPI. This booklet will be shared with states once it is finalized and approved by Ministry.
- 2.8. Dr. Subba requested NHSRC to give permission to include STNM Multi Speciality Hospital for NQAS Certification.
- 2.9. Dr Srivastava informed the house that those DH which are NQAS certified after October 2018 will also be deemed LaQshya if labour room and Maternity OT are certified and such certification is without conditionality. In this regard, a process document has already been shared.
- 2.10. Dr. Subba also shared the list of facilities selected for NQAS certification in FY 2019-20 - PHC Dentam, PHC Pakyong and DH Namchi. Apart from that, the following facilities are selected for LaQshya certification in FY 2019-20: DH Gyalshing and DH Singtam.



*Dr. Baroon Subba, Additional Director cum SNO-QA
delivering the State Presentation, Sikkim*

3. **Tripura: Dr. Anirban Hore, State Consultant, QA** presented for Tripura. He first of all, thanked RRC-NE and NHSRC for constantly guiding and supporting the State towards implementing Quality Assurance Program in state Tripura. Key points discussed are as follow:
 - 3.1. Good Practices in the state are EQAS in Lab services initiated at 1 SH, 2 DH and 2 SDH; Mera Aspataal initiated at SH and All DHs; Disinfection of liquid waste before disposal; Calibration of measuring equipments in almost all the health facilities; Bed head ticket for Labour Room and PNC ward has been developed by DH Dhalai in booklet form consisting of

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Consent form, Examination details, Treatment note, partograph, safe delivery checklist and will be shortly implemented at all DH and even in Medical college.

- 3.2. Two PHCs – PHC Atharabola and PHC Taibandala are NQAS Certified with conditionality. Certification of SDH Belonia is lost as the state failed to close the gap of conditionality certification even one year after certification.
- 3.3. DHs are not getting NQAS certified due to lack of initiative from State Directorate.
- 3.4. Regional level advocacy training involving the Medical Superintendent of targeted DH, Designated Nodal officer for QA in the Hospital and Hospital Managers of those hospitals will be helpful.
- 3.5. Use of DH checklist for assessment of SDH is a big challenge. Dr. Srivastava asked them to flag the issue to the concerned authority. Director of Health Services, Tripura may issue an office order regarding the list of services delivered in SDH. Then NHSRC would support the state in customizing the SDH checklist.
- 3.6. Designated District Nodal persons are multitasked due to lack of dedicated District consultant. QA district level monitoring are not being carried out properly. Requested NHSRC to write to state for proposing more District QA consultant.
- 3.7. Swachh Swasth Sarvatra has not yet been initiated in Tripura as the state do not have list of ODF block. Dr Srivastava asked Dr Anirban to check the Ministry of Drinking Water & Sanitation website for the list of ODF block in Tripura and start SSS implementation.
- 3.8. Mera Aspataal is implemented in few facilities. However, SMS/phone calls are not received by patients who have shared the contact number with the hospital where Mera Aspataal is implemented. It was also re-iterated that due publicity regarding Mera Aspataal requires to be done by the States for generating awareness among community.
- 3.9. Dr. Srivastava also informed the house that SAATHI has handed over the Mera Aspataal program to Centre for Health Informatics (CHI). Any required technical support related to Mera Aspataal may be sought from Director (NHM III) and JS e-governance by the respective State Mission Director marking a copy to NHSRC & RRCNE.
- 3.10. Selected facilities for NQAS certification in FY 2019-20 are Jampui PHC, Kanika Memorial PHC, Dashrathdeb Memorial PHC, Chachubazar PHC, Ashrampara UHC, Dhanpur PHC, Tulumura PHC, Baikhora PHC, Belonia SDH(Re-certification). The selected facilities for LaQshya are: DH Gomati, DH Dhalai, IGM Hospital, Belonia SDH and DH South.



Dr. Anirban Hore, State Consultant-QA, delivering state presentation of Tripura

4. **Nagaland: Dr. Vizovotuo Lohe, State Consultant-QA**, made the presentation for the State of Nagaland. Key issues discussed are as follow:
 - 4.1. With introduction of QA programme, there is improvement in BMW management, Cleanliness and Infection control Practices in the State of Nagaland. Also QA program has greatly boosted the motivation of the health care providers in the State.
 - 4.2. Dr. Lohe informed the house that within few days the UPHC Seikhazou will be ready for National Certification.
 - 4.3. Fund constraint and delay in release of fund is a major hindrance to implementing QA program

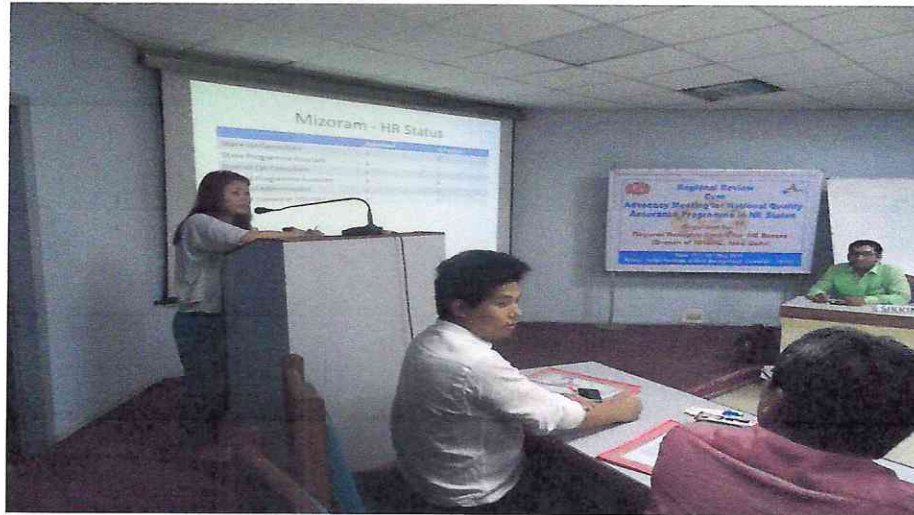
- 4.4. Need to orient district heads i.e, CMO's, SMO's and MO's on QA programme.
- 4.5. Dr. J N. Srivastava advised the State of Nagaland to take immediate measures on the following points: Timely fund release, targets to be assigned to District Quality Consultant in getting at least two facilities NQAS certified in a year. He advised the state to take at least 5-10% of the facility for NQAS certification in FY 2019-20.
- 4.6. The selected facilities for NQAS certification in FY 2019-20 are: PHC Chunlikha, PHC Khonoma, PHC Chukitong, PHC Englan, PHC Mongsenyimti, PHC Chuchuyimlang, PHC Kuhuboto, PHC Niuland, PHC Longpang, PHC Likhimro, UPHC Burma campand UPHC Duncan. The selected facilities for LaQshya are:DH Kiphire, DH Mon and DH Tuensang.
- 4.7. Dr. Ashoke Roy enquired about the output of the existing QI Consultants and advised to take the services of the External Assessors, available in the State for certification and requested to issue a GO in this regard.



*Dr. Vizovotuo Lohe, State Consultant-QA,
presenting State Presentation of Nagaland*

5. **Mizoram: Dr Laltlanliani, State Consultant (Public Health)** presented the status of QA programme for the state of Mizoram. Major issues discussed are as follow:
 - 5.1. In Mizoram, immunization and ANC registration services are provided in SCs which are under Main Centre and not under Urban PHCs due to which the NQAS certification of 2 UPHCs are kept on hold. Dr JN Srivastava informed the house that as per Cabinet approved guidelines, under the NUHM, there should not be any sub centres in the urban areas. That is why a good number of ANMs are deputed in the UPHCs to take the services to the community. In this regard, he advised the State of Mizoram to go for customization of UPHC checklist.
 - 5.2. State has provision of giving 1st, 2nd and 3rd prize in DH/SDH/CHC/UPHC/PHC and Special award in Kayakalp- Most Improved, Most Beautiful and Most Inspiring for DH, CHC/SDH, UPHC (incentive cash award Rs 75000 for each winner for DH and CHC, 25000 for UPHC) without increasing the total amount.
 - 5.3. Dr. Srivastava showed his concern on the Kayakalp external assessment score. He said that the facilities which scored more than 70% in Kayakalp external assessment are also expected to score reasonably good in NQAS assessment too. But it is not happening in Mizoram. Also in Mizoram most of the facilities that were undergone Kayakalp external assessment, scored 70% or more which is commendable. Dr. Srivastava expressed his desire to validate the Kayakalp Assessment score through External assessors from outside the State. Dr. Srivastava asked Dr Suchitra to validate few facilities in the next visit to Mizoram and if the facilities showing encouraging results, then NHSRC would be more than happy to flag this issues in the Ministry.
 - 5.4. The roles & responsibilities of the three State Consultants (State QA Consultant, State Consultant Public Health & State QA monitoring consultants) need to be defined so that there is clarity on their deliverables.
 - 5.5. As reported by the State, KPIs are being collated at state level, may be further analysed and may be shared with the facilities for improvement.

- 5.6. Dr J N Srivastava also informed the house that all States need to upload the Kayakalp score (Peer & External assessment) and NQAS score in the NITI Ayug portal for District Hospital ranking.
- 5.7. Dr. Ashoke Roy also advised the state to expedite the process of RKS registration.
- 5.8. Selected facilities of NQAS certification of Mizoram for the year 2019-20 are Champhai DH, Lunglei DH, Aibawk PHC, Reiek PHC, Kawlkulh PHC, Bilkhawthlir PHC, Haulawng PHC, Tawipui PHC, Bungtlang PHC, Kawrtethawveng PHC, Khawruhlian PHC, Chhingchhip PHC, Tipa PHC.
- 5.9. Facilities for LaQshya for FY 2019-20 are Aizawl East DH, Aizawl West DH, Champhai DH, Kolasib DH, Lawngtlai DH, Lunglei DH, Mamit DH, Siaha DH, Serchhip DH



Dr. Laltlanliani, State Consultant-Public Health, delivering State Presentation of Mizoram

6. **Manipur: Dr. L. Tomcha Khuman, State Nodal Officer, QI** made the presentation for Manipur where the key issues discussed are as follow:
 - 6.1. Orientation workshop on Area of Concern G was organized for the selected facilities. Quality Management tools, Process mapping, PDCA, 5S etc were discussed in detailed in that workshop.
 - 6.2. Good Practices: PHC Behiang has installed software with the help of a local IT firm. The benefits of this software are: Paperless work, Generates one ID for each patient and all treatment detail send through SMS with local language. All Investigation record, treatment chart, history of patients are automatically recorded in the patient ID; Due date of Immunization is also intimated to the person through mobile; All IPD, OPD, Immunization data, pharmacy, investigation etc are being saved in cloud for future reference
 - 6.3. No collection centre of BMW at Hill District. Regarding Biomedical Waste Management, Dr Srivastava advised all State officials to go through the BMW Rule 2016(amended in 2018).He also informed that deep burial with approved specification is still permissible as per the BMW rule. Major concern is all health facility needs to have the authorization certificate from State Pollution Control Board of the state.
 - 6.4. Irregular Light and Water scarcity at Hill District bring difficult function of Facilities.
 - 6.5. Frequent transfer & HR issues in Hill District.
 - 6.6. Dr. J N Srivastava expressed that in spite of having 2 state QA consultants, 7 District QA consultants, 123 Internal Assessors; the State has not come up with any NQAS certified facility. Also DQAC meeting are not being conducted in the districts though seven district QA consultants are in place. He advised the state to prepare each District wise plan with the coordination of District QA Consultants and to assess their performances.

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- 6.7. Selected facilities of NQAS certification of Manipur for the year 2019-20: DH Churachandpur, DH Thoubal, CHC Mao, CHC Wangoi, PHC Behiang, PHC Leimapokpam, PHC Mekola, PHC Nongpok Sekami, PHC Jessami, PHC Komlathabi, PHC Kumbi, PHC Wangiang, PHC Andro, PHC Tadubi and PHC Saikul
- 6.8. List of facilities selected for LaQshya in the FY 2019-20: DH Chandel, DH Churachandpur, DH Thoubal, DH Bishnupur, RIMS and JNIMS.

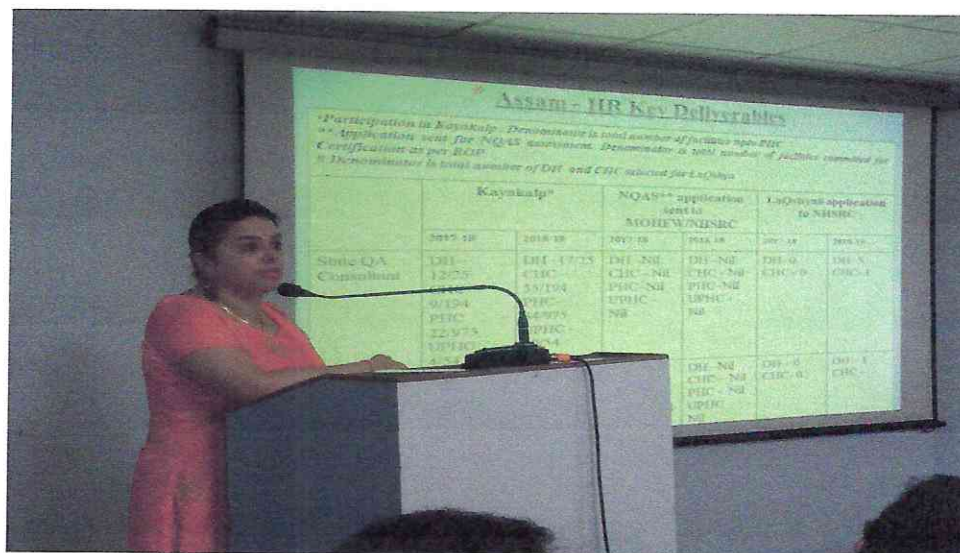


Dr. Tomcha Khuman, Additional Director cum SNO-QA delivering the State presentation of Manipur

7. **Assam: Dr. Rohini Kumar, State Consultant-QA, NHM, Assam** presented the QA Status for State of Assam where critical issues discussed are as follow:
- 7.1. There are three LaQshya certified facilities in Assam and out of them; one facility received Platinum Badge i.e. scored more than 90%.
- 7.2. Some Good practices in the state include Display of signage in Assamese and English language, Prayer area in MCH wing, Introducing BMW trolley, Changing of linen on daily basis, Foot step navigator for departments
- 7.3. Dr Rohini informed that the KPIs of DH will be captured through HMIS.
- 7.4. She also said that though the State of Assam has not achieved NQAS certification of any facility so far, though there are many promising centres. There are all total 50 facilities for NQAS certification and 128 facilities for LaQshya certification selected for FY 2019-20. The selection of these facilities is done based on Kayakalp score and 5 star/4 star ratings. She also mentioned that IPHS survey has already been conducted in these selected facilities. Facility Improvement Plan has been prepared depending upon the IPHS score. The 5 star/4 star rating includes HR, infrastructure and IPHS score.
- 7.5. Critical Issues in the state are No Common treatment facility for Biomedical Waste Management, No Standard treatment guideline, Attitude and ownership of the program at facility level and especially by regular doctors is lacking, Old Infrastructure/building, Fire safety NOCs/Audits is not available, Mera Aspataal is not implemented yet.
- 7.6. Dr. Ashoke Roy advised the State to promote and popularize the Mera Aspataal Program. He also asked the state to conduct district level review meeting to extend the Kayakalp Program in all facilities (upto PHC level).
- 7.7. Dr. Srivastava informed the house that Prescription audit manual has been developed by NHSRC and submitted to Ministry. Ministry has given some inputs on that. Once it is finalized/approved, this manual will be shared with all states officially.

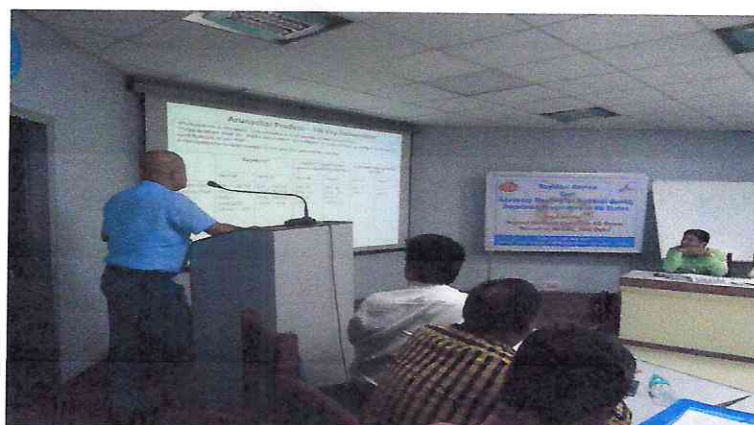
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- 7.8. Dr. Srivastava advised the States to give targets to the District Quality consultants along with timeline. State needs to show some outputs in the respective areas. He also suggested States to focus on the low hanging fruits i.e. those promising facilities for NQAS certification instead of going altogether.



Dr. Rohini Kumar State QA Consultant delivering state presentation of Assam

8. **Arunachal Pradesh: Dr. Shaibal Bhattacharyya, State Nodal Officer-QA, NHM**, presented the status for state of Arunachal Pradesh. Key points are as follow:
- 8.1. Good practices in Arunachal Pradesh are installation of elbow taps, improved hygiene and sanitation after Kayakalp implementation
 - 8.2. District Nodal officer/ District consultants/ Hospital Administrators not assigned/recruited. All the active doctors are over burdened with other duties. Training/ orientation on NQAS and Kayakalp required for the DMO's/DRCHO's/certified assessors.
 - 8.3. Proper Disposal of Bio-Medical Waste is yet to be implemented.
 - 8.4. Selected facilities for NQAS certification in FY 2019-20: PHC Bilat, CHC Ruksin and Bakin Pertin General Hospital, Pasighat.
 - 8.5. Selected facilities for LaQshya in the FY 2019-20 i.e.: Bakin Pertin General Hospital, Pasighat, GH Tezu, TRIHMS, Naharlagun, DH Namsai and DH Daporijo
 - 8.6. During discussion, SNO, QA requested NHSRC for approval of one District QA Consultant for East Siang Dist. Dr J N Srivastava told that this could be approved provided some facilities are NQAS certified in the state.



Dr. Shaibal Bhattacharyya, SNO-QA, presenting the State Presentation of Arunachal Pradesh

9. After completion of the NE States presentation, Dr J N Srivastava summarized the whole day discussion and made concluding remarks:

- 9.1. **SQAC/DQAC:** The SQAC & DQAC meetings need to be conducted regularly with prior appointment from the highest authority.
- 9.2. **HR:** If the states showing results in NQAS certification, then required/additional manpower may be approved. NHSRC may approach the Ministry to approve the same.
- 9.3. **Advocacy:** If the States feel that there is a need of orientation to the Principal Secretary or other higher officials, then Advisor, NHSRC or Director, RRCNE may travel down to orient the officials. But NE States need to intimate this well in advance to NHSRC or RRCNE.
- 9.4. **Financial allocation:** Other than HR, funds for activities like-EQAS, Fire safety, Mechanized laundry, CSSD, minor infrastructure may be sanctioned provided full justification is given by the States in the PIP/Supplementary PIP.
- 9.5. **Incentive:** J N Srivastava advised the States to demand the Incentive money of the certified facility in the PIP/supplementary PIP without fail.
- 9.6. **NITI Portal:** Every facility must undergone Kayakalp peer assessment. The score of the Kayakalp peer assessment/external assessment and NQAS assessment of the DH need to be uploaded in the NITI Aayog portal.
- 9.7. **Mera Aspataal:** For any difficulty in implementing Mera Aspataal, the Mission Director need to write a letter to JS(E governance) with copy to JS(policy),Director(NHM) and RRC-NE/NHSRC QI division.
- 9.8. **Utilization of manpower:** External Assessor of the States may be involved in the Quality program and he/she may be deputed as Mentor of 2-3 facilities besides his/her regular activity.
- 9.9. **SSS:** JN Srivastava asked the states to visit the website of Ministry of Drinking and Sanitation to find out the list of ODF block. In case of any difficulty, states may contact NHSRC/RRCNE

B. Day 2 – 22nd May 2019

1. The first session of second day was delivered by Dr. Suchitra Rajkumari. She presented the complete picture of status of National Quality Assurance Program in NE states. She highlighted the achievements of NE states in Quality program. She mentioned that more than 130 trainings on NQAS, Kayakalp & LaQshya have been conducted, more than 480 assessors are trained in the region, there are 12 state & 5 national NQAS certified facilities, 6 state & 4 national LaQshya certified facilities and Mera Aspataal initiated in 4 states as of now.
2. Dr Suchitra further discussed in details about the HR status, trainings, number of trained assessors, Kayakalp assessment in DH,CHC & PHCs, commitment for NQAS certification in FY 2018-19 & the progress, status of NQAS assessment, status of LaQshya, Swachh Swasth Sarvatra & implementation of Mera Aspataal in NE states and also presented the state wise challenges faced during implementation of Quality Assurance Program which are listed as follow:

3. Arunachal Pradesh:

- 3.1. Poor functionality of SQAUs & DQAUs.
- 3.2. State has 4 External & 55 trained Internal Assessors but no progress has been made in terms of State or National Certification
- 3.3. Till date, the State has conducted only 1 IA and 1SPT training, No training requirement has been received from the State for capacity building of the Staff.
- 3.4. Six districts did not take part in Kayakalp – Kamle, Anjaw, Longding, Kra-Dadi, Namsai, Upper Subansiri. Best PHC award declared in 5 districts only.
- 3.5. Visit of NHSRC/RRC-NE team from 10th-16th June 2018 to 4 facilities namely, GH Pasighat, DH Namsai, PHC Bilat & CHC Ruksin reflected that the facilities especially GH Pasighat and PHC Bilat have the capability to achieve NQAS Certification. Based on the observations of the team, gap analysis report was shared with the State and the facilities along with the continuous technical support from RRC-NE & NHSRC team but no resilient actions have been taken to address the gaps. Hence, the visit did not have any outcomes in terms of improvement at the visited facilities.



4. Assam:

- 4.1. State has not made much progress in spite of many promising facilities, no NQAS certified facility in the State till date and application for only two facilities is pending at National level.
- 4.2. All facilities did not participate in Kayakalp, only 20% of the facilities took part in Kayakalp. 25/27 districts have declared best PHC award, not declared in Chirang and Udalguri district
- 4.3. State may recruit the vacant positions (1 state consultant, 19 District Consultants and 4 Hospital Administrator) to expedite the implementation of NQAS programme in the state.
- 4.4. The already placed 21 Hospital Administrators and State/District QA consultants may be given clear cut targets to achieve Quality certification of their facilities vis-à-vis minimum performance benchmarks.
- 4.5. Difficulty in getting legal statutory compliances - SPCB charge very huge amount for giving certificate for handling biomedical waste.
- 4.6. Implementation of Mera Aspataal needs to be scaled up

5. Manipur:

- 5.1. Frequent transfer of officials at the facility, no rational deployment of staff in the state – lack of required staff in the hill districts whereas excess staff in the valley districts. UPHC Mantripukhri having 11 ANMs as reported by MOI/C.
- 5.2. Despite of having 3 External & 95 trained Internal Assessors, no facility has been NQAS certified at national level. More focus is laid on Kayakalp than NQAS
- 5.3. State/District Quality Consultants need to have clear cut deliverables.
- 5.4. While interacting with few district consultants, it was found that Monitoring visits to the facilities could not be undertaken due to untimely/non-disbursement of TA/DA bills.
- 5.5. Need to establish system for management of outsourced services like laboratory services in DH Thoubal and Churachandpur. The staff working in outsourced services also needs to be trained in NQAS to meet the standards.
- 5.6. Mera Aspataal is not yet implemented in the District Hospital.

6. Meghalaya:

- 6.1. Functionality of SQAU and DQAU is a concern. The post of State QA consultant is vacant for last 2 years. The 2 District consultants may be given clear cut targets.
- 6.2. There are 7 external assessors and 93 internal assessors in the state. These assessors may be assigned some facilities for NQAS Certification.
- 6.3. State need to give priority to NQAS Certification of Health Facilities. Facilities are shortlisted, need to have action plan for certification in defined time period.
- 6.4. SSS supported CHCs need to be strengthened to meet Kayakalp standards

7. Mizoram:

- 7.1. The State has brought up two U-PHCs for External Assessment under NQAS, which is commendable.
- 7.2. DH Aizawl East being the first NE facility to be Nationally Certified in the year 2017, the State may target other DH also for National Certification.
- 7.3. The State has 3 External & 79 trained Internal Assessors which may be utilized for bringing up more facilities for NQAS Certification.
- 7.4. Functionality of District QA Unit is a concern. No proposal for district QA consultant.
- 7.5. There is no free drug distribution system in the state. Only BPL patients are given free drugs. Recently, some improvements made with launch of PMJAY.
- 7.6. RKS registration of the UPHC needs to be expedited.

8. Nagaland:

- 8.1. Functionality of SQAU and DQAU is a concern
- 8.2. Only one UPHC has been applied for National Certification
- 8.3. Delay in declaration of Kayakalp Award every year. 9/11 districts have declared Best PHC Award, Not declared in 2 districts (Longleng and Phek Districts)
- 8.4. Delay in release of fund from state treasury which affects the QA activities – training, assessments, monitoring visits, gap closure activities.
- 8.5. State/ District consultants may be given clear cut targets.
- 8.6. While interacting with district consultants, it was learnt that monitoring visits could not be conducted as TA/DA reimbursement is not done in time.

- 8.7. Mera-Aspataal is not yet implemented in the state.
- 8.8. Suggested for NQAS Certification of Laboratory in Naga Hospital under the LIFE program.

9. Sikkim:

- 9.1. State need to prioritise QA programme to improve the implementation of the programme.
- 9.2. Till date, the State has conducted only one Internal Assessors training and there is no communication received from the State for any other training need
- 9.3. Minimal communication of the state with RRC-NE/NHSRC
- 9.4. Late release of fund hinders the implementation of QA programme in the state – training, assessment, monitoring visits etc. for Kayakalp and NQAS.
- 9.5. State is yet to implement Mera Aspataal

10. Tripura:

- 10.1. Belonia SDH was NQAS certified at National level with conditionality. Lost the certification as state has not submitted the gap closure report for achieving full certification even after one year.
- 10.2. The already placed 14 Hospital Administrators may be given clear cut targets to achieve Quality certification of their facilities.
- 10.3. Five External Assessors may provide the required technical support in achieving NQAS Certification of facilities.
- 10.4. Difficulty in getting AERB approval
- 10.5. Mera Aspataal – needs to scale up, need to generate awareness with IEC

11. Common challenges across NE states are as follow:

- 11.1. Lack of Common Biomedical Waste Management Facility
- 11.2. Irregular supply of drugs from state and district drug store
- 11.3. Documentation – SOP and Policies
- 11.4. Measurement of KPI and Outcome indicators not done
- 11.5. Patient Satisfaction Survey not done, need to scale up implementation of Mera Aspataal
- 11.6. Prescription Audit
- 11.7. Practice of using STG
- 11.8. Use of Quality Tools

12. After that, states were given group work to finalize the Road Map for FY 2019-20. Then all NE states made state wise presentation on the Road Map for National Quality Assurance Program for FY 2019-20 which are as follow:

12.1. Arunachal Pradesh

- 12.1.1. Kayakalp: The external assessment of Kayakalp will be completed by November 2019
- 12.1.2. SSS: State has selected CHC Balijan & CHC Geku facility under SSS. The assessment will be completed by November 2019.
- 12.1.3. LaQshya: State has selected following 4 facilities for LaQshya, plan to certify at state level by December 2019 and National Certification by February 2020 except Namsai DH for which state and national level NQAS certification will be done by September and December 2019 respectively.
 - 12.1.3.1. TRIMHS, Naharlagun, Papum pare District
 - 12.1.3.2. GH Tezu, Lohit District
 - 12.1.3.3. DH Daporijo, Upper Subansiri District
 - 12.1.3.4. DH Namsai, Namsai District
- 12.1.4. NQAS: Arunachal Pradesh has selected three facilities for NQAS certification in FY 2019-20. The state certification of these three facilities will be completed by January 2020 & will apply for national certification by March 2020. The facilities are:
 - 12.1.4.1. PHC Bilat, East Siang District
 - 12.1.4.2. CHC Ruksin, East Siang District
 - 12.1.4.3. BPGH Pasighat, East Siang District.
- 12.1.5. Mera Aspataal: The Mera Aspataal will be implemented in BPGH Pasighat by September 2019.

12.2. Assam. NB: The presentation was made by District QA Consultant as State QI Team was not present on 2nd day.

LaQshya Certification

Sl	Name of Facility	Timeline for State Certification	Timeline for application sent to Ministry/NHSRC for National certification
1	Dr.Ravi Baro Civil Hospital	Certified	June 2019
2	Barpeta Civil Hospital	September 2019	October 2019
3	Pathsala SDH	Certified	June 2019
4	FAAMCH	December 2019	January 2020
5	Mandia Civil Hospital	September 2019	October 2019
6	Dhubri Civil Hospital	Certified	June 2019
7	Agomani CHC	December 2019	January 2020
8	Halakura CHC	December 2019	January 2020
9	Gauripur CHC	December 2019	January 2020
10	Bogribari SD	December 2019	January 2020
11	Ambari Bazar Model Hospital	September 2019	October 2019
12	Matia BPHC/Model Hospital	September 2019	October 2019
13	Dudhnoi FRU	September 2019	October 2019
14	Lakhimpur CHC	December 2019	January 2020
15	Udalguri Civil Hospital	Certified	June 2019
16	Tangla CHC	December 2019	January 2020
17	Rowta Model Hospital	December 2019	January 2020

NQAS Certification (For Aspirational District)

Sl	Name of Facility	Timeline for State Certification	Timeline for application sent to Ministry/NHSRC for National certification
1	Baksa Civil Hospital	June 2019	July 2019
2	Kumarikata SD	September 2019	October 2019
3	Dighaldinga MPHC	June 2019	July 2019
4	Pathsala SDH	September 2019	October 2019
5	Gomura MPHC	December 2019	January 2020
6	Mangaldoi Civil Hospital	December 2019	January 2020
7	Garukhauti MPHC	September 2019	October 2019
8	Kenduguri MPHC	September 2019	October 2019
9	Golakgani PHC	September 2019	October 2019
10	Bilasipara SHC	June 2019	July 2019
11	Agia PHC	September 2019	October 2019
12	2o bedded maternity hospital	September 2019	October 2019
13	Algapur CHC	December 2019	January 2019
14	Rowta Model Hospital	December 2019	January 2019
15	Orang CHC	December 2019	January 2019

12.3. Manipur

NQAS Certification			
Sl	Name of Facility	Timeline for State Certification	Timeline for application sent to Ministry/NHSRC for National certification
1	CCPUR DH	Certified	Applied
2	DH Thoubal	26th June 2019	16th July 2019
3	CHC Mao	25th June 2019	28th July 2019
4	CHC Wangoi	10th July 2019	7th August 2019
5	PHC Behiang	Certified	Applied
6	PHC Leimapokpam	10th June 2019	12th July 2019
7	PHC Mekola	11th June 2019	25th July 2019
8	PHC Nongpok Sekmi	18th June 2019	27th August 2019
9	PHC Jessami	20th June 2019	30th August 2019
10	PHC Komlathabi	15th July 2019	1st September 2019
11	PHC Kumbi	17th July 2019	8th September 2019
12	PHC Wangiang	8th August 2019	24th September 2019
13	PHC Andro	18th August 2019	8th October 2019
14	PHC Tadubi	18th August 2019	19th October 2019
15	PHC Saikul	24th August 2019	26th October 2019

12.3.1. **Kayakalp Road Map:**

- 12.3.1.1. 1st Phase: IA by 31 May 2019
- 12.3.1.2. 2nd Phase (In case <70% in 1st Phase): by 30 June 2019.
- 12.3.1.3. 3rd Phase (In case of <70% in 2nd Phase): by 31 July 2019.
- 12.3.1.4. Peer Assessment: by 31st August 2019.
- 12.3.1.5. External Assessment: by 25th September 2019.
- 12.3.1.6. Declaration & submission of result by 30 September 2019.
- 12.3.1.7. Award Distribution function on 2nd October 2019.

12.4. Meghalaya

- 12.4.1. **Kayakalp:** The External Assessment to be done by 31/12/2019
- 12.4.2. **Mera Aspataal:** This will be implemented in Ganesh Das MCH Hospital (by September 2019), Tura MCH Hospital (by March 2020) & Williamnagar Civil Hospital by March 2020.
- 12.4.3. **NQAS:** State has selected six facilities for NQAS certification for FY 2019-20. These are-
 - 12.4.3.1. Ganesh Das MCH Hospital (Apply for national certification by December 2019)
 - 12.4.3.2. Williamnagar Civil Hospital (State certification by July 2019 & apply for National certification by October 2019)
 - 12.4.3.3. Chokpot CHC (apply for national certification by November 2019)
 - 12.4.3.4. Mawphlang CHC (State certification by December 2019 & apply for national certification by March 2020)
 - 12.4.3.5. Pomlum PHC (state certification by November 2019 & apply for national certification by February 2020)
 - 12.4.3.6. Paithlu PHC (state certification by December 2019 & apply for national certification by March 2020)
- 12.4.4. **LaQshya:** Meghalaya has selected three facilities for LaQshya certification.
 - 12.4.4.1. Nongpoh DH (state certification by June 2019 and apply for national certification by December 2019)
 - 12.4.4.2. Ganesh das MCH Hospital (state certification by September 2019 and apply for national certification by December 2019)
 - 12.4.4.3. Tura MCH Hospital (state certification by September 2019 and apply for national certification by December 2019)



12.5. Mizoram

12.5.1. **Kayakalp:**

- 12.5.1.1. Internal assessment: 26th – 30th August 2019 and report at the CMO level on or before 4th September 2019
- 12.5.1.2. Gap analysis and gap rectification: 2nd- 13th September 2019
- 12.5.1.3. Peer Assessment: 16th – 23rd September 2019 and submit the report on or before 30th September 2019.
- 12.5.1.4. Gap analysis and gap rectification: 1st-11th October 2019
- 12.5.1.5. External Assessment: 14th Oct – 1st November 2019
- 12.5.1.6. Report submission of the state result: 4th-6th November 2019
- 12.5.1.7. Declaration of results and award ceremony: 1st week of December.

12.5.2. **SSS:**

- 12.5.2.1. Mizoram has not proposed any budget for the SSS activity. State will propose the budget in the supplementary PIP.

12.5.3. **Mera Aspataal:** State has decided to implement the Mera Aspataal in DH Aizawl, CHC Vairengte, CHC Sakawrdi & PHC Darlawn under Aizawl East district.

12.5.4. **LaQshya:** There are total 7 facilities selected for LaQshya certification in FY 2019-20.

- 12.5.4.1. Mamit DH (State certification completed & to apply for national certification by 30th June 2019)
- 12.5.4.2. Civil Hospital Aizawl (state certification by 31st July 2019)
- 12.5.4.3. Champhai DH (state certification by 31st July 2019)
- 12.5.4.4. Kolasib DH (state certification by 31st July 2019)
- 12.5.4.5. Lawngtlai DH (state certification by 31st July 2019)
- 12.5.4.6. Lunglei DH (state certification by 31st July 2019)
- 12.5.4.7. Siaha DH (state certification by 31st July 2019)

12.5.5. **NQAS:** Mizoram has given the commitment to certify the following facility by State level on or before November 2019:

- | | |
|---------------------|------------------------|
| 1. Champhai DH | 8. Tawpui PHC |
| 2. Lunglei DH | 9. Bungtlang PHC |
| 3. Aibawk PHC | 10. Kawetethawveng PHC |
| 4. Reiek PHC | 11. Khawruhlian PHC |
| 5. Kawlkulh PHC | 12. Chhingchhip PHC |
| 6. Bilkhawthlir PHC | 13. Tipa PHC |
| 7. Haulawng PHC | |

12.6. Nagaland

12.6.1. **Kayakalp:** External assessment to be completed by August 2019 & results will be declared on 2nd October, 2019

12.6.2. **Mera Aspataal:** State has selected Naga Hospital Authority Kohima & IMDH for implementation of Mera Aspataal. Letter to be sent to MoHFW (e-governance) by 15th June 2019.

12.6.3. **NQAS:** The following facilities were selected for NQAS certification for FY 2019- 20. The state certification of these facilities will be completed by 30th September 2019 & apply for national certification by 10th October 2019.

- | | |
|-----------------------------|----------------------------|
| 12.6.3.1. PHC Chunlikha | 12.6.3.7. PHC Kuhuboto |
| 12.6.3.2. PHC Khonoma | 12.6.3.8. PHC Niuland |
| 12.6.3.3. PHC Chukitong | 12.6.3.9. PHC Longpang |
| 12.6.3.4. PHC Englan | 12.6.3.10. PHC Likhimro |
| 12.6.3.5. PHC Mongsenyimti | 12.6.3.11. UPHC Burma camp |
| 12.6.3.6. PHC Chuchuyimlang | 12.6.3.12. UPHC Duncan |

12.6.4. **LaQshya:** State has selected DH Kiphire (state certification by May 2019 & to apply for national certification by September 2019), DH Mon (State certification by June 2019) & DH Tuensang (state certification going on) for LaQshya certification in FY 2019-20.

12.6.5. **Swachh Swasth Sarvatra:** State is yet to identify the ODF block.

12.7. Sikkim

- 12.7.1. **Kayakalp:** The External assessment will be completed by November 2019 & final report to be shared by December 2019.
- 12.7.2. **SSS:** Sikkim was declared ODF state on 1st March 2016
- 12.7.3. **Mera Aspataal:** state will implement Mera Aspataal in New STNM multi speciality hospital at Gangtok. Necessary proposal will be placed to higher authority.
- 12.7.4. **NQAS:** Three facilities has been selected for NQAS certification in FY 2019-20. The state certification of these facilities will be completed by November 2019 & will apply for national certification by March 2020. The facilities are:
- 12.7.4.1. PHC Dentam
 - 12.7.4.2. PHC Pakyong
 - 12.7.4.3. DH Namchi


12.8. Tripura

- 12.8.1. **NQAS:** Tripura has selected the following facilities for NQAS certification in FY 2019-20:
- 12.8.1.1. Jampui PHC (state certification by June 2019 & national certification by September 2019)
 - 12.8.1.2. Ashrampara UPHC (state certification by June 2019 and national certification by September 2019)
 - 12.8.1.3. Chachubazar PHC (state certification by September 2019 & national certification by September 2019)
 - 12.8.1.4. Baikhora PHC (state certification by September 2019)
 - 12.8.1.5. Barpathari PHC (state certification by December 2019 & national certification by December 2019)
 - 12.8.1.6. Belonia SDH (state certification by September 2019 & national certification by September 2019)
 - 12.8.1.7. Kanika Memorial PHC (state certification by December 2019 & national certification by March 2020)
 - 12.8.1.8. DDM PHC (state certification by December 2019 & national certification by March 2020)
 - 12.8.1.9. Tulamura PHC (state certification by March 2020 & national certification by March 2020)
 - 12.8.1.10. Dhumacherra PHC (state certification by March 2020 & national certification by March 2020)
- 12.8.2. **LaQshya:** The following facilities were shortlisted for LaQshya certification.
- 12.8.2.1. DH Dhalai (State certification by June 2019 & national certification by September 2019)
 - 12.8.2.2. Belonia SDH (State certification by September 2019 & apply for national certification by September 2019)
 - 12.8.2.3. DH South (State certification by December 2019 & to apply for national certification by December 2019)
 - 12.8.2.4. DH Gomati (State certification by December 2019 & to apply for national certification by December 2019)
 - 12.8.2.5. IGM Hospital (State certification by December 2019 & to apply for national certification by March 2020)
 - 12.8.2.6. Khengbag CHC (State certification by December 2019 & to apply for national certification by March 2020)
 - 12.8.2.7. DH North (State certification by March 2020 & to apply for national certification by March 2020)
 - 12.8.2.8. DH Khowai (State certification by March 2020 & to apply for national certification by March 2020)
 - 12.8.2.9. AGMC & GBPH (State certification by March 2020 & to apply for national certification by March 2020)
- 12.8.3. **Kayakalp:** The External assessment will be completed by December 2019.
- 12.8.4. **Mera Aspataal:** It will be implemented in all DH, SH & medical colleges by December 2019.
- 12.8.5. **SSS:** State will propose the budget for four CHCs in supplementary PIP



Valedictory: Dr. Ashoke Roy, Director, RRC-NE delivered the Valedictory address. During his speech, he requested all NE states to understand their challenges and work pro-actively accordingly. Dr Roy also informs that, RRCNE & NHSRC will do the follow up of the progresses along with the timeline, as per the commitments made by the States.

At the end, Dr. Ashoke Roy thanked all the participants from eight NE states, officials from NHSRC & UNICEF for attending this two days meeting.


(Dr. Ashoke Roy)
Director, RRC - NE States

RRC-NE/Programme/QI/2019/348/


20th June, 2019

Copy for information and necessary action please to:

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Arunachal Pradesh/Assam/Manipur/Meghalaya/Mizoram/Nagaland/Sikkim/Tripura
2. Nodal Officer, QA Programme,
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Copy also forwarded for information and necessary action please to:

1. Dr. J. N. Srivastava, Advisor, QI, NHSRC, New Delhi
2. PS to the Executive Director, NHSRC


Director, RRC - NE States

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National Quality Assurance Programme for NE States
21st & 22nd May, 2019**

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