

**Report on Three Days Internal Assessors'
cum
Service Providers' Training on National Quality Assurance Standards (NQAS)**

Date of Training: 22nd to 24th March 2021

Place of Training: Meghalaya Administrative Training Institute (MATI), Shillong

A. INTRODUCTION

Three days Internal Assessors' cum Service provider training (IA cum SPT) on National Quality Assurance Standards was conducted by State QA Team, National Health Mission (NHM) Meghalaya with the technical support of Regional Resource Center for NE States (RRC- NE) Guwahati from 22nd March to 24th March 2021.

Main objective of the training was to provide an overview of National Quality Assurance Standards as well as to increase the pool of Internal Assessors in the State of Meghalaya. To fulfill the main objective, the State has nominated 37 participants for the training which includes State Nodal Officer-Quality Assurance, State QA Consultant, Medical Officers, Nursing Staff, Pharmacists and para-medical staff from the health facilities shortlisted for NQAS Certification.

The Training programme have inbuilt training course evaluation system both for trainers and trainees. Total of 37 (thirty-seven) participants appeared in the Post Training Evaluation, out of which 27 Participants (73%) have cleared the Evaluation Test. Out of total 37 participants, 6 of them were from Ri Bhoi (Aspirational) District. All the 6 participants (100%) from Ri Bhoi District have cleared the Post Training Evaluation. Training feedback forms were provided to each participant at the end of the training for evaluating the quality of training resources. Feedbacks from the participants have been compiled and analyzed on 5-point Likert scale. Overall score for training programme was 4.15 on Five-point Likert scale.

B. Inaugural Session:

Shri Ram Kumar, IAS, Mission Director, NHM, Meghalaya welcomed all the Participants & the Resource Persons to the three days Internal Assessor cum Service Provider Training. He informed the house that the training was conducted right on time as many Health facilities of Meghalaya will be taken up for NQAS certification. He also told that the gaps which have been identified during physical assessment of the health facilities may be addressed and closed with the support of Meghalaya Health Strengthening System Project (MHSSP) funded by the World Bank. and this would expedite the national certification process of the shortlisted health facilities. He also encouraged the participants to implement Quality Assurance in every facility as this will help to improve the Quality of Health care services being delivered to the community. He wished the training to be a great success and for successful implementation of the National Quality Assurance Standards in respective health facilities in the near future.

C. Technical Session:

Topic	Brief of the Session
DAY-1- (22.3.2021)	
1. Overview of National Quality Assurance Programme and Assessment Protocol	Mr. Anupjyoti Basistha, Consultant, Quality Improvement , RRC-NE, welcomed all the participants to the training programme. He then delivered the first technical session on overview of National Quality Assurance Programme which covered concepts of Quality, various definitions of Quality, development of National Quality Assurance Standards and Implementation framework at state and district level, key features of NQAS and Measurement system of National Quality Assurance standards, Measurable elements and checkpoints. It also includes overview of scoring methodologies and protocols.
2. Standards for Service Provision and Patient Rights (AOC A and B)	Mr. Anupjyoti Basistha then took the second session on the first two Areas of Concern i.e. Service Provision and Patient Rights. The session includes thorough explanation about availability of services under various departments of health facility and Patient Rights which includes patients' rights to information about the services, accessible to them and are provided with dignity and confidentiality and without any physical and financial barrier. It also includes Patients' right to take informed decisions regarding their treatment plan.
3. Standards for Inputs (AOC C)	Dr Joy Lyngwa, External Assessor, NQAS , explained about Area of Concern C with its seven standards, which includes the structural part of the facility, which is based on the standard guidelines of Indian Public Health Standards (IPHS) for different level of facilities.
4. Group Activity	The session on Group activity was about identifying the standard and the corresponding area of concern. During the exercise, one key word was given to each participant and was asked to identify the standard and the Area of Concern.
5. Standards for Support Services (AOC D)	This Session was taken by Mr. Anupjyoti Basistha which includes the importance of Support Services in the public healthcare facilities. It included detailed discussion on the standards for maintenance, calibration, inventory management, laundry, dietary, financial management, contract management and statutory requirements.
6. Standards for Clinical Services (AOC E1-E9)	Dr Joy Lyngwa, External Assessor, NQAS took the Session on first part for Standards for Clinical Services. He explained the importance of clinical services and discussed about the

	9 (nine) Standards of Clinical Services which includes registration, admission, consultation, assessment, reassessment, patient care during transfer and referral. It also includes nursing care, drug administration, patient record maintenance and discharge process etc.
7. Standards for Infection Control (AOC F).	Dr Joy continued her deliberation on Area of Concern F that includes infection control practices, hand hygiene, antisepsis and personal protection, processing of equipment, environment control and biomedical waste management. A video on Infection Control Practices was also shown to the participants.
8. Overview of "GUNAK Application" and its use	Mr. Anup continued the session on overview of the application of "GUNAK" which is a quality assessment application for NQAS, LaQshya and Kayakalp. This application can be used for internal, external and peer assessment of public healthcare facilities and for identification of gaps. This application is available for both android and apple users.
DAY – 2 (23.03.2021)	
9. Recap	The second day of the training started with a quick recapitulation of Areas of Concern A, B, C, D, E1 to E9 & Gunak Application via Quiz.
10. Standards for specific Clinical Services (AOC E10 -E16)	Dr. R Pohsnem, NQAS External Assessor explained in detail the 7 (seven) standards for specific clinical Services from E10 to E16. It includes Standards for Intensive Care, Emergency, Diagnostic, Blood Bank/Storage, Anesthetic, Surgical and End of life care services.
11. Exercises on AOC A, B & C	In this session, all participants were given a case study and were asked to give score in the checkpoints of the relevant checklist and to generate the overall score of the department.
12. Standards for RMNCHA Services (AOC E17-E23)	Dr Joy Lyngwa took the next session for RMNCH+A services also. In this session, he delivered a detailed talk on the 6 (six) standards which are specific to Maternal, Newborn, Child, Adolescent & Family Planning services and National Health Programmes. Maternal Services is further categorized into Ante-natal, Intra-natal, and Post-natal services.
13. Standards for Quality Management (AOC G)	The session was taken by Mr. Basistha . This session includes 8 (eight) standards on Quality Management system. He discussed about the importance of Quality Policy, Objective, Standard Operating Procedure, Patient Satisfaction Survey etc. Various "Mudas or Wastes in Hospital" and "Process Mapping" were also discussed.

14. KPI, Outcome & Patient Satisfaction Score (AOC-H)	Dr. R Pohsnem discussed about the 30 Key Performance Indicators of District Hospital, its calculation and reporting mechanism with examples.
15. Internal assessment, Root Cause Analysis, Action Planning & Prioritization.	The session was taken by Mr. Basistha , where he discussed about the importance of Internal Assessment, Gap analysis, Prioritization and Action Planning. Gap Analysis', by using "fish bone diagram" and "why why" technique was explained in detailed with examples. He then explained the prioritization of gaps by using 'PICK' chart.
16. Experience sharing of achieving NQAS certification of Nartiang PHC	Dr. R Pohsnem shared the journey of NQAS Certification of Nartiang PHC. He also shown the list of documents required to be submitted for NQAS National Certification.
DAY-3 (24.3.2021)	
17. Recap	The third day of the training started with recap of second day's sessions via Quiz.
18. Quality Tools: PDCA, 5S, Mistake proofing	The session was carried forward by Mr. Basistha . He discussed about various Quality Tools like PDCA Cycle (Plan-Do-Check Act), 5 S (Sort, Set, Shine, Standardize and Sustain for workspace Management, Mistake proofing i.e. preventing errors and negative effects from errors with various examples.
19. Process mapping, procedure/documentation for certification & experience sharing of Umden PHC	Dr B Pohsngap, External Assessor, NQAS shared her experiences and the journey of PHC Umden to achieve NQAS certification. She also shared a brief idea regarding "Process Mapping" procedure and the documents required for national certification.
20. Exercise on Process Mapping	In this activity, the participants were asked to make a Process Mapping by taking an example of an activity and then they were asked to present for discussion.
21. Prescription audit	This session was taken by Mr. Basistha where he discussed about the importance of Prescription Audit and method of analysis.
22. Exercise on Prescription audit & PSS	In this activity, sample prescriptions were given to the participants and were asked to give scores on the prescription audit form. Then Mr. Basistha discussed about its analysis, identification of low scoring attributes and to develop Corrective and Preventive Action.

23. Mera Aspataal and calculation of Kayakalp score.	This session was taken by Mr. Basistha where he gave a brief overview of "Mera Aspataal" and detailed discussion on the process to calculate Kayakalp final score by using Mera Aspataal score (cleanliness score only). Mera Aspataal score carries 15% weightage on final Kayakalp External Assessment score of the District Hospital.
24. Protocol of NQAS and LaQshya Assessment of health facilities in virtual platform.	The session was taken by Mr. Basistha which includes the overview of NQAS and LaQshya Assessment protocol for virtual certification. The protocol was developed during COVID 19 developed as physical assessment could not be conducted.
25. NQAS Implementation status and road map for the State of Meghalaya for FY 21-22	Dr Steffi C Laloo , State QA Consultant, Meghalaya presented the NQAS implementation status of Meghalaya & road map for FY 21-22 in her session.
26. Post training evaluation	At the end of session, a post training evaluation was conducted in the form of questions and answer sheet of objective type which was followed by filling up of the feedback form by the participants.

D. Discussion:

The following queries were raised by the participants during the three days training. The queries along with the responses are listed below as Frequently Asked Questions (FAQ):

Question 1: How to dispose the Biomedical waste if the facility is not linked with Common Waste Treatment Facility?

Answer: If the health facility is not linked with Common Biomedical Waste Treatment Plant, Deep burial pit and sharp pit may be constructed as per the guideline with due approval from State Pollution Control Board. For disposing the liquid waste, ETP may be constructed or Karnataka Liquid Waste Management Model may be set up for small facilities like PHC, UPHC or CHC with less load.

Question 2: How to download and share the assessment checklist in the GUNAK Application?

Answer: After completing the assessment in the GUNAK application, there is an option for download and share at the top of the toolbar. One may download and share through various medium like email, WhatsApp, etc.

Question 3: When do you empty the Biomedical waste from the bins in the various departments of health facility?

Answer: The Biomedical waste in the health facility needs to be emptied within 24 hours or when the bins are 3/4th filled, whichever is early.

Question 4: What is the procedure for getting NQAS National Certification of a health facility?

Answer: The procedure for getting NQAS National Certification of a health facility are as follow:

Conduct Internal Assessment by using NQAS Checklist – identification of the gaps – analysis of the identified gaps – categorizing the gaps into State, district and facility level and prioritization of the gaps for its Closure – Drafting of all the required documents like SOPs, Policies, Quality Manual- Start Capturing Key Performance Indicators- Conduct Patient Satisfaction Survey - Conduct Prescription Audit - Repeat Internal Assessment – Ensure all criteria for State and National NQAS Certification are fulfilled – Applied for State Assessment.

Question 5: What is Buffer amount in drug inventory management?

Answer: **Buffer stock** or safety stock is the amount of stock or medical supplies set aside to meet the requirement of the hospital in the time of an emergency like unforeseen demand or depleting stock. One-month consumption is to be considered as Buffer amount.

Question 6: What is the difference between Annual Maintenance Contract (AMC) and Comprehensive Maintenance Contract (CMC)?

Answer: AMC is an agreement with the service provider for calibration and maintenance of the equipment for a year. On the other hand, CMC is also agreement which includes maintenance of equipment along with replacement of parts as well.

Question 7: What do you mean by ABC Analysis?

Answer: This is one method of Inventory Control system where the drugs are grouped into 3 (three) categories:

A category: 10-20% of items representing 75-80% of expenditure (High Volume, Fast Moving).

B category: 10-20% of items representing 15-20% of expenditure.

C category: 60-80% of items representing 5-10% of the expenditure (Low volume- slow moving)

E. Road Map:

State QA Team, Meghalaya has shortlisted the following facilities for the NQAS National Certification in FY 2021-22

Sl.	Level of Facility	Name of Facility	Timeline for State Certification	Timeline for National Certification
1	PHC	Bansamgre PHC	Completed	Applied for National Certification
2		Babadam PHC	June-July 2021	August-September 21
3		Pomlum PHC	June 2021	July-August 2021
4		Pamra Paithlu PHC	June-July 2021	August-September 21
5		Marngar PHC	June 2021	July-August 2021
6		Laitryngew PHC	October-November 2021	December 2021
7		Wageasi PHC	October-November 2021	December 2021

Annexure I: List of Participants and Result of Post Training Evaluation

Sl.	Name of the Participants	Designation	Name of the District/facility	Score (%)	Result
1	YEBHA MAYSHA G MOMIN	MEDICAL &HEALTH OFFICER	AMPATI CIVIL HOSPITAL	70.0	PASS
2	RICHARD JAMES WAHLANG	PHYSIOTHERAPIST	NONGPOH CIVIL HOSPITAL, Ri-BHOI	62.5	PASS
3	SAHITA G MOMIN	NURSING SUPERINTENDENT	AMPATI CIVIL HOSPITAL	57.5	FAIL
4	DR. EMAIA SAVIO LAKIANG	MEDICAL &HEALTH OFFICER	TIROT SINGH MEMORIAL HOSPITAL	60.0	PASS
5	DR. IOHBORLANG RYMBAE	MEDICAL &HEALTH OFFICER	KHLIEHRIAT CIVIL HOSPITAL	62.5	PASS
6	BAPHIMON TARIANG	NURSING IN CHARGE	SOHRA CHC	62.5	PASS
7	DR. MELONI BAREH	JT. DIRECTOR of HEALTH SERVICES (MCH&FW) CUM STATE NODAL OFFICER -QA	NHM, MEGHAYALA	65.0	PASS
8	DR. STEFFI C LALOO	STATE CONSULTANT-QA	NHM, MEGHALAYA	80.0	PASS
9	DR. TOPSI G MOMIN	MEDICAL &HEALTH OFFICER	SOHRA CHC	70.0	PASS
10	IBASHONGDOR SYIEMLIEH	STAFF NURSE	SOHRA CHC	70.0	PASS
11	SENGSRANG R MARAK	MEDICAL &HEALTH OFFICER	RESUBELPARA CHC	62.5	PASS
12	DR. RINGNINGCHI D MARAK	MEDICAL &HEALTH OFFICER	SELSELLA CHC	75.0	PASS
13	KANIPONGHI RABON	HEALTH EDUCATOR	RANIKOR CHC	40.0	FAIL
14	AIRFORCE KSIH	PHARMACIST	KHLIEHRIAT CHC	50.0	FAIL
15	TRACY G MOMIN	STAFF NURSE	RESUBELPARA CHC	27.5	FAIL
16	DR. ANANYA R MARAK	DENTAL SURGEON	CHOKPOT CHC	87.5	PASS
17	DITTYSCARIA	STAFF NURSE	WAGEASI PHC	45.0	FAIL
18	OLGA GRIMCHI N MARAK	STAFF NURSE	MOHESHKHOLA PHC	60.0	PASS
19	FAIR-I-CA SIANGSHAI	PUBLIC HEALTH NURSE	BARATO PHC	70.0	PASS
20	RICHESTER SHULLAI	PHARMACIST	MARNGAR PHC, Ri-BHOI	62.5	PASS
21	DR. ARVIND KHONGLAH	MEDICAL &HEALTH OFFICER	PADU STATE DISPENSARY	57.5	FAIL

22	PRINGPRANG S D SHIRA	MEDICAL &HEALTH OFFICER	NENGMANDALGRE PHC	87.5	PASS
23	THILDA BIAM	AYURVEDIC PHYSICIAN	MARNGAR PHC, Ri-BHOI	77.5	PASS
24	SONA JOSE	STAFF NURSE	WAGEASI PHC	65.0	PASS
25	WANISHA PHAWA	STAFF NURSE	PAMRAPAITHLU PHC	65.0	PASS
26	DR. ABU TAIBO AKOND	MEDICAL &HEALTH OFFICER	BHAIT BARI PHC	52.5	FAIL
27	SR. MARY LEKI	GNM	BABADAM PHC	65.0	PASS
28	MARKORITI SUN	STAFF NURSE	MARNGAR PHC, Ri-BHOI	82.5	PASS
29	RABEKA KHARKONGOR	COMMUNITY HEALTH OFFICER	UMDEN PHC, Ri-BHOI	62.5	PASS
30	BIMLA C MOMIN	PUBLIC HEALTH NURSE	DM&HO	52.5	FAIL
31	DAROIKI DKHAR	STAFF NURSE	PAMRA PAITHLU PHC	67.5	PASS
32	LANALANG SUTNGA	MEDICAL &HEALTH OFFICER	UMDEN PHC, Ri-BHOI	62.5	PASS
33	SR. GRACYMARY LYNGDOH	GNM	BABADAM PHC	50.0	FAIL
34	JISHA PAUL V	SISTER IN CHARGE	WAGEASI PHC	57.5	FAIL
35	DR. PAUL A LYNGDOH	MEDICAL &HEALTH OFFICER	MAWTHAWPDAH PHC	80.0	PASS
36	DR. HANDAKA RYMBAI	MO (AYUSH)	LAITRYNGE PHC	60.0	PASS
37	IEIDHUNRILANG E. SYIEMLIH	STAFF NURSE	LAITRYNEW PHC	70.0	PASS

Total Participants who took part in Post-Training Evaluation: **37**

Total Participants who cleared the Post-Training Evaluation: **27 (73%)**

Total Participants from Ri-Bhoi District (Aspirational District): **6 (16%)**

Total Participants from Ri-Bhoi District who cleared the Post Training Evaluation: **6 (100%)**

Annexure II: Agenda

Time	Topic	Resource Person
Day-01 (22nd March 2021)		
09:00 am - 09:30 am	Registration	
09:30 am – 09:45 am	Inaugural Address	State Representative
09:45 am. -10:30 am	Overview of National Quality Assurance Program and assessment protocol	Sh. Anup Basistha Consultant QI, RRC-NE
10:30 am -10:45 am	Tea	
10:45 am – 11:30 pm	Standards for Service Provision and Patient Rights (AOC A and B)	Sh. Anup Basistha Consultant QI, RRC-NE
11:30pm – 12:15 pm	Standards for Inputs (AOC C)	Dr. J Lyngwa, External Assessor NOAS
12:15 pm – 1:00 pm	Group Activity: Identifying Standards	Sh. Anup Basistha Consultant QI, RRC-NE
1:00 pm – 1:45 pm	Lunch	
1:45 pm – 2:30 pm	Standards for Support Services (AOC D)	Sh. Anup Basistha Consultant QI, RRC-NE
2:30 pm – 3:15 pm	Standards for Clinical Services (AOC E1-E9)	Dr. J Lyngwa, External Assessor NOAS
3:15 pm – 4:00 pm	Standards for Infection Control (AOC F)	Dr. J Lyngwa, External Assessor NOAS
4:00pm – 4:15 pm	Tea	
4:15 pm – 5:00 pm	Overview of “GUNAK Application” and its use	Sh. Anup Basistha Consultant QI, RRC-NE
Day-02 (23rd March 2021)		
09:00 am - 09:30 am	Recap	Sh. Anup Basistha Consultant QI, RRC-NE
09:30 am – 10:30 am	Standards for Specific Clinical Services (AOC E10-E16)	Dr. R Pohsnem, External Assessor NOAS
10:30 am- 11:15 am	Exercise on AOC A, B & C	Sh. Anup Basistha
11:15 am- 11:30 am	Tea	
11:30 am – 12:30 pm	Standards for Quality Management (AOC G)	Sh. Anup Basistha Consultant QI, RRC-NE
12:30 am – 1:30 pm	KPI, Outcome Indicators & Patient Satisfaction Score (AOC H)	Dr. R Pohsnem, External Assessor NOAS
1:30 pm – 2.15 pm	Lunch	
02:15 pm – 3.15 pm	Standards for RMNCHA Services (AOC E17-E22)	Dr. J Lyngwa, External Assessor NOAS
3:15 pm. – 4.15 pm	Internal Assessment, Root Cause Analysis, Action Planning & Prioritization	Sh. Anup Basistha Consultant QI, RRC-NE
4:15 pm – 4:30 pm	Tea	
4:30 pm. – 5.00 pm	Experience sharing of achieving NOAS certification of Nartiang PHC	Dr. R Pohsnem, External Assessor NOAS

Annexure III: Feedback Analysis:

Topic	Average Score
Overview of National Quality Assurance Program and Assessment Protocol	3.06
Standards for Service Provision and Patient Rights (AOC A and B)	4.35
Standards for Inputs (AOC C)	3.17
Group Activity: Identifying Standards	3.48
Standards for Support Services (AOC D)	4.42
Standards for Clinical Services (AOC E1-E9)	3.40
Standards for Infection Control (AOC F)	4.58
Overview of "GUNAK Application" and its use	4.32
Standards for Specific Clinical Services (AOC E10-E16)	4.21
Exercise on AOC A, B & C	4.50
Standards for Quality Management (AOC G)	4.36
KPI, Outcome Indicators & Patient Satisfaction Score (AOC H)	4.16
Standards for RMNCHA Services (AOC E17-E22)	4.51
Internal Assessment, Root Cause Analysis, Action Planning & Prioritization	4.29
Experience sharing of achieving NQAS certification of Nartiang PHC	4.37
Quality Tools: PDCA, 5S, Mistake Proofing	4.38
Process Mapping, procedure/ documentation for certification & experience sharing of achieving NQAS certification of Umden PHC	4.19
Exercise on Process Mapping	4.24
Prescription Audit	4.40
Exercise on Prescription audit & PSS, Pareto etc.	4.37
Mera Aspataal and calculation of Kayakalp score	4.13
Protocol of NQAS and LaQshya Assessment of Health Facilities in virtual mode	4.27
TOTAL AVERAGE	4.15

Annexure IV: Topics that are found most useful by the participants

Topics	Score
1. Process Mapping	8
2. Standards on Infection Control	7
3. Prescription Audit	5
4. Standards for Quality Management	4
5. Gunak Application	4
6. Internal Assessment, Root Cause Analysis	3

Annexure V: Suggestions to Improve the Training from the Participants

1. Time management
2. Better internet connectivity
3. More Resource Persons
4. More activities and exercise
5. Technical Issue