

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



**Organized By**

**State QA Team, NHM Nagaland**  
with technical support from  
**Regional Resource Centre for North-eastern States, Guwahati, Assam**

23<sup>rd</sup> to 25<sup>th</sup> November 2021  
Venue: Seminar Hall, Hotel Vivor, Kohima, Nagaland

## **A. Introduction and Background**

National Quality Assurance Standards were launched for improving the Quality of Care (QoC) in public health facilities in 2013 for District Hospitals. Standards for Community Health Centres (functional as FRU's) and Primary Health Centres (with beds) rolled-out in the year 2014. Subsequently, Quality Standards for Urban PHC's were developed in 2016. NQAS Standards have attained International Accreditation from International Society for Quality in Healthcare (ISQua). At National level, these standards have been recognized by the Insurance Regulatory and Development Authority (IRDA) for empanelment of hospitals.

Implementation of National Quality Assurance Programme in the North-eastern States has been closely 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 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.

A three-day Internal Assessor cum Service Provider Training was organized in Hotel Vivor, Kohima by State QA Team, NHM Nagaland with the technical support from RRC-NE to increase the pool of assessors in the state. RRC-NE extended support by drafting the agenda, providing study materials & taking sessions on various areas of concerns of NQAS & conducting exercises on various topics like Prescription Audit, PSS & Quality tools during the training. Training program was spread into 21 topics and 5 practical exercises for hands on experience on various methodologies of the assessment. Post training, participants were made to undergo a qualifying exam on NQAS Internal Assessors certificate program and then followed by a group discussion with SNO-QA, SC-QA, DPM's and other facility representatives on NQAS implementation in public health facilities of the state of Nagaland.

## **B. Objectives and Participants.**

The main objectives of the training are as follow:

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 public health facilities for achieving National Quality Assurance Standards Certification.

Training was facilitated by following Resource Persons:

1. Sh. Anupjyoti Basistha, Consultant – QI, RRC-NE
2. Dr. Vinaya RSL, Consultant – QI, RRC-NE
3. Dr. Antoly Suu, Deputy CMO, Dimapur
4. Ms. Vethipralu Lohe, SPM-QA, NHM, Nagaland

**Participants:** Total 52 (Fifty-Two) participants including State Nodal Officer - QA, State QA Consultant, Quality Managers, Officials from Nagaland State AIDS Control Society, Deputy Director – Health & Family Welfare, DPM's – QA, Medical Officers from various health facilities of Nagaland state have attended the training.

Participant list along with the Post Training Evaluation Report is enclosed in Annexure – II.

## **C. Inaugural Session**

At the very onset of 3 days SPT Program, the State Nodal Officer for Quality Assurance Dr. Thanghoi Lam welcomed officials from DoH&FW, Nagaland & the participants who have come from various facilities and the resource persons from RRC-NE to the three days Internal Assessor cum Service Provider training program. Followed by the inaugural address of SNO-QA, Mission Director, NHM, Nagaland, Dr. I Talitemsula Jamir addressed the participants of the program & stressed the importance of QA Program in uplifting of public health facilities.

## D. Technical Session

| Topic   | Briefing of the Session   |
|---|---|
| <b>Day 1 (23-11-2021)</b>   |   |
| 1. Overview of National Quality Assurance Program and Assessment Protocol         | <p><b>Mr. Anupjyoti Basistha</b>, Consultant, Quality Improvement, RRC-NE started the session by welcoming all the participants to the 3-day training program.</p> <p>The first session, an overview of National Quality Assurance Program has been explained thoroughly which covered the concepts of Quality &amp; its various definitions, development of National Quality Assurance Standards &amp; its Implementation framework at state &amp; district level, key features of NOAS, Measurement system of National Quality Assurance standards, Measurable elements &amp; checkpoints. It also included overview of scoring methodologies and protocols.</p>  |
| 2. Standards for Service Provision, AoC-A and Standards for Patient Rights, AoC-B | <p><b>Dr. Vinaya RSL</b>, Consultant QI, RRCNE conducted the session on the first two Areas of Concern i.e., Service Provision and Patient Rights.</p> <p>He explained about the availability of functional services &amp; facilities in the hospital which will be made available to the end users under various areas &amp; departments of the facility along with other support services.</p> <p>Patient rights includes rights of patients to access information about the services, user friendly signages, confidentiality of their information which are provided with privacy &amp; dignity without any physical and financial barrier which also includes patients' right for grievance redressal and to take informed decisions regarding their treatment plan.</p> |
| 3. Standards for Inputs, AoC-C  | <p><b>Mr. Anupjyoti Basistha</b> explained this area of concern which has 7 standards from infrastructure to performance of staff which includes the structural part of the facility based on the standard guidelines of Indian Public Health Standards (IPHS) for different levels of facility.</p>  |
| 4. Group Activity: Identifying Standards  | <p>This session on Group activity was about identifying the standards 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.</p>  |
| 5. Standards for Support Services, AoC-D  | <p>This session was taken by <b>Dr. Vinaya RSL</b> where he explained the importance of support services which are backbone of the facility. This session included the detailed discussion on the maintenance &amp; calibration of equipment's, inventory management &amp; dispensing of drugs, safe environment, upkeep of facility, 24X7 water and power supply, Laundry, FnB Services, Accounts &amp; Finance management, Contract Services and Statutory requirements.</p>  |
| 6. Standards for Clinical Services, AoC-E (Std. E1 - Std. E9)                     | <p><b>Ms. Vethipralu Lohe</b>, SPM-QA, NHM, Nagaland took the session on first part of Standards for Clinical Services. She explained the importance of clinical services &amp; their importance the first set of nine standards of Clinical Services are concerned with those clinical processes that ensures adequate care to the patients which includes registration, admission, consultation, assessment, continuity of care, nursing care, identification of high risk and vulnerable patients, prescription practices, safe drug administration, maintenance of records and discharge from the hospital.</p>   |
| 7. Standards for Infection Control, AoC-F   | <p><b>Mr. Anupjyoti Basistha</b> explained the infection control practices and protocols to be followed in public hospitals which usually have high occupancy where these measures become more critical to avoid cross infections, nosocomial infections, and their spread. This section includes infection control program to curb the incidence of nosocomial infections, hand hygiene practices &amp; antisepsis std. practices for personal protection, processing of equipment &amp; instruments, environmental control, and biomedical waste management in the facility. A video on Infection Control Practices was also shown to the participants.</p>   |

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|---|---|
| 8. Overview of "Gunak Application" and its uses   | <b>Dr. Vinaya RSL</b> spoke on the overview & usage of 'GUNAK' application which is a quality assessment application developed by NHSRC for the assessment of quality programs like NOAS, LaQshya and Kayakalp through digital checklists available in the app at various levels of assessments like internal, external and peer assessment of facilities and for identification of gaps.   |
| <b>Day 2 (24-11-2021)</b>   |   |
| 9. Standards for Specific Clinical Services, AoC-E (Std. E10 - Std. E16)  | <b>Dr. Antoly Suu, Deputy CMO, Dimapur</b> took this session & explained in detail the 7 standards for specific clinical Services from E10 to E16 which included the standards for services like Intensive care treatment, Emergency clinical processes, ambulance, MLC Cases & Disaster preparedness & its management, Lab and radio diagnostics, Blood bank, Anaesthesia, OT & Established procedures for end-of-life care & death.   |
| 10. Standards for RMNCHA Services, AoC-E (Std. E17 - Std. E23)  | <b>Dr. Antoly Suu, Deputy CMO, Dimapur</b> took this session & explained in detail the 7 standards for specific clinical Services from E10 to E16 which included the standards for services like Ante natal care & its processes, Intra natal care, post-natal care of mother & new-born, care of new-born, infant and child as per guidelines, abortion & family planning, ARSH Guidelines & providing national health program as per respective OG's.   |
| 11. Standards for Quality Management, AoC-G<br>12. Internal Assessment, Root Cause Analysis, Action Planning & Prioritization of Gaps | This session was taken by <b>Mr. Anupjyoti Basistha</b> where he discussed eight standards on Quality Management system which are creating quality teams in the facility, employee satisfaction, implementation of internal & external quality assurance system – EQAS, SOP's & work instructions, Process mapping, Quality Policy, Objectives, Patient Satisfaction Survey etc. various MUDAS – wastes in hospital processes were also discussed.<br><br>Then 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 & 'PDCA' Cycle. |
| 13. Outcome Indicators and KPI's, AoC-H<br>Patient Satisfaction Survey  | <b>Dr. Vinaya RSL</b> explained the four areas of measures for quality – Productivity, Efficiency, Clinical Care & Service Quality in terms of measurable indicators and to have a system to measure the indicators and meeting the benchmarks. Later few indicators like ALOS, BOR, Rate of Surgeries, C-section Rate, OT Utilization Rate, SSI Rate have been explained with formulas to calculate the KPI's & examples on how to measure & analyse these indicators were also briefed to the participants.   |
| 14. Prescription Audit  | The session on Prescription Audit was taken by <b>Mr. Anupjyoti Basistha</b> where he explained importance and need of conducting prescription audits on monthly basis in the facilities, he also focused on prescription form, its contents, effects of inadvertent prescription of drugs and Adverse drug reactions.  |
| <b>Day 3 (25-11-2021)</b>   |   |
| 15. Quality Tools - PDCA, 5S, Mistake Proofing etc.   | <b>Mr. Anupjyoti Basistha</b> has discussed the use of quality tools like Bar chart, Histogram, Fish bone diagram, Pie charts and PDCA Cycle, Workplace management/5S, Etc., in process improvement activities to improve the quality in public health facilities.  |
| 16. Exercise on Prescription Audit & Patient Satisfaction Survey  | An exercise on prescription audit was conducted by giving samples of prescription form to all the participants and they were told to fill 'YES' or 'NO' to the corresponding attributes of the prescription form then <b>RRC Team</b> members discussed the analysis, identification of low scoring attributes and to develop the corrective action and preventive action on the low scoring attributes of the audit exercise.  |

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|--|---|
| 17. Process Mapping  | In this session, <b>Mr. Anupjyoti Basistha</b> explained the process mapping, its purpose, its importance, series of steps involved in the process mapping, symbols used for representation of various activities while mapping the process, pointing out the bottle necks in a process, removing nonvalue adding activities from the process. Few examples of process mapping charts of different hospital activities were explained to make the participants to understand this quality tool. |
| 18. Exercise on Process Mapping                            | A group exercise has been conducted on process mapping where the participants have been told to map the process of certain activities of a hospital like registration process, admission process, labor room activities etc., and they were told to present to the audience and to explain it by highlighting the value & nonvalue adding activities, bottlenecks they are facing in the process. <b>Mr. Anupjyoti Basistha</b> has coordinated this activity.                                  |
| 19. Status & Road Map for NQAS Implementation in the state | <b>Dr. Thanghoi Lam</b> , SNO-QA, Nagaland has briefly explained the state action plan of QA related activities as per the approval in ROP 2021-22. He also spoke about the status of shortlisted facilities for NQAS & LaQshya program in the state and urged the officials to adhere to timelines to complete the assessments in time.  |
| 20. Post training evaluation                               | <b>RRC – NE Team</b> has conducted a post training evaluation of the participants with an objective type of question paper where answer sheet will be filled by participants, and this is followed by providing feedback on the 3 days training program.  |

#### E. Roadmap for FY 2021-22:

| NQAS  |      |     |      |      |     |     |     |     |     |      |     |     |
|---|------|-----|------|------|-----|-----|-----|-----|-----|------|-----|-----|
| Assessments   | 2021 |     |      |      |     |     |     |     |     | 2022 |     |     |
| Months  | Apr  | May | June | July | Aug | Sep | Oct | Nov | Dec | Jan  | Feb | Mar |
| State level Assessments & Certification of DH's (2)   |      |     |      |      |     |     |     |     |     |      |     |     |
| State level assessment and certification of PHC's (5) |      |     |      |      |     |     |     |     |     |      |     |     |
| Baseline assessment of PHC's, all DH's and SDH/CHC's  |      |     |      |      |     |     |     |     |     |      |     |     |
| Kayakalp  |      |     |      |      |     |     |     |     |     |      |     |     |
| Months  | Apr  | May | June | July | Aug | Sep | Oct | Nov | Dec | Jan  | Feb | Mar |
| Internal Assessment of all facilities                 |      |     |      |      |     |     |     |     |     |      |     |     |
| Peer Assessment of all facilities                     |      |     |      |      |     |     |     |     |     |      |     |     |
| External Assessment of selected facilities            |      |     |      |      |     |     |     |     |     |      |     |     |

#### F. Valedictory & Closing Ceremony:

The training program concluded with Dr. Thanghoi Lam, SNO-QA, NHM, Nagaland explaining Status & Road map for NQAS implementation in the state followed by closing remarks & vote of thanks from officers of DoH&FW, Nagaland.

**Annexure I: Agenda of the IA cum SPT**

| Time  | Topic  | Resource Person                              |
|---|--|--|
| <b>Day-01 (23<sup>rd</sup> November 2021)</b> |  |  |
| 09:00 am - 09:30 am                           | Registration   | State Team                                   |
| 09:30 am - 09:45 am                           | Inaugural Address  | State Representative                         |
| 09.45 am. -10.45 am                           | Overview of National Quality Assurance Program and Assessment Protocol             | Anup Basistha<br>Consultant-QI, RRCNE        |
| 10:45am -11:00 am                             | <b>Tea</b>   |  |
| 11.00am - 11:45 am                            | Standards for Service Provision, AoC-A<br>Standards for Patient Rights, AoC-B      | Dr. Vinaya RSL<br>Consultant-QI, RRCNE       |
| 11:45am - 12:15 pm                            | Standards for Inputs, AoC-C  | Anup Basistha<br>Consultant-QI, RRCNE        |
| 12.15pm - 1:30 pm                             | Group Activity: Identifying Standards  | RRC-NE/State Team                            |
| 1:30 pm - 2:15 pm                             | <b>Lunch</b>   |  |
| 2:15 pm - 3:00 pm                             | Standards for support Services, AoC-D  | Dr. Vinaya RSL<br>Consultant-QI, RRCNE       |
| 3:00 pm - 3:45 pm                             | Standards for Clinical Services, AoC-E<br>(Std. E1 - Std. E9)                      | Ms. Vethipralu Lohe<br>SPM-QA, NHM, Nagaland |
| 3:45pm - 4:00 pm                              | <b>Tea</b>   |  |
| 4:00 pm - 4:45 pm                             | Standards for Infection Control, AoC-F   | Anup Basistha<br>Consultant-QI, RRCNE        |
| 4:45 pm - 5:00 pm                             | Overview of "Gunak Application" and its uses                                       | Dr. Vinaya RSL<br>Consultant-QI, RRCNE       |
| <b>Day-02 (24<sup>th</sup> November 2021)</b> |  |  |
| 09:00 am - 09:30 am                           | Recap  | Anup Basistha<br>Consultant-QI, RRCNE        |
| 9:30 am- 10:15 am                             | Standards for Specific Clinical Services, AoC-E<br>(Std. E10 - Std. E16)           | Dr. Antoly Suu<br>Deputy CMO, Dimapur        |
| 10:15 am - 11:00 am                           | Standards for RMNCHA Services, AoC-E<br>(Std. E17 - Std. E23)                      | Dr. Antoly Suu<br>Deputy CMO, Dimapur        |
| 11:00 am- 11:15 am                            | <b>Tea</b>   |  |
| 11.15 am-12.15 pm                             | Exercise on Area of Concern A, B and C   | RRC-NE Team                                  |
| 12.15 pm - 1.15 pm                            | Standards for Quality Management, AoC-G  | Anup Basistha<br>Consultant-QI, RRCNE        |
| 1:15 pm - 02.15 pm                            | <b>Lunch</b>   |  |
| 2:15 pm. - 03.15 pm                           | Internal Assessment, Root Cause Analysis, Action Planning & Prioritization of Gaps | Anup Basistha<br>Consultant-QI, RRCNE        |
| 3:15 pm. - 04.15 pm                           | Outcome Indicators and KPI's, AoC-H<br>Patient Satisfaction Survey                 | Dr. Vinaya RSL<br>Consultant-QI, RRCNE       |
| 4:15 pm - 4:30 pm                             | <b>Tea</b>   |  |
| 4:30 pm - 5:30 pm                             | Prescription Audit   | Anup Basistha<br>Consultant-QI, RRCNE        |
| <b>Day 3 (25<sup>th</sup> November 2021)</b>  |  |  |
| 09:30 am- 10:00 am                            | Recap  | Anup Basistha<br>Consultant-QI, RRCNE        |
| 10:00 am- 11:00 am                            | Quality Tools - PDCA, 5S, Mistake Proofing etc.                                    | Anup Basistha<br>Consultant-QI, RRCNE        |
| 11:00 am -11:15 am                            | <b>Tea</b>   |  |
| 11.15 am- 11:45 am                            | Exercise on Prescription audit and<br>Exercise on Patient Satisfaction Survey      | Dr. Vinaya RSL<br>Consultant-QI, RRCNE       |
| 11:45 pm -12:30 pm                            | Process Mapping  | Anup Basistha<br>Consultant-QI, RRCNE        |
| 12:30 pm -1:15 pm                             | Exercise on Process Mapping  | Anup Basistha<br>Consultant-QI, RRCNE        |
| 01:15 pm - 02:00pm                            | <b>Lunch</b>   |  |
| 02:00 pm-2:30 pm                              | Status & Road map for NQAS implementation in the state                             | Dr. Thanghoi Lam<br>SNO-QA, NHM Nagaland     |
| 2:45 pm - 3:45 pm                             | Post Training Evaluation   | RRC-NE Team                                  |
| 3:45 pm- 4:00 pm                              | <b>Valedictory &amp; Tea</b>   |  |

**Annexure II: Post Training Evaluation Report & Result Sheet**

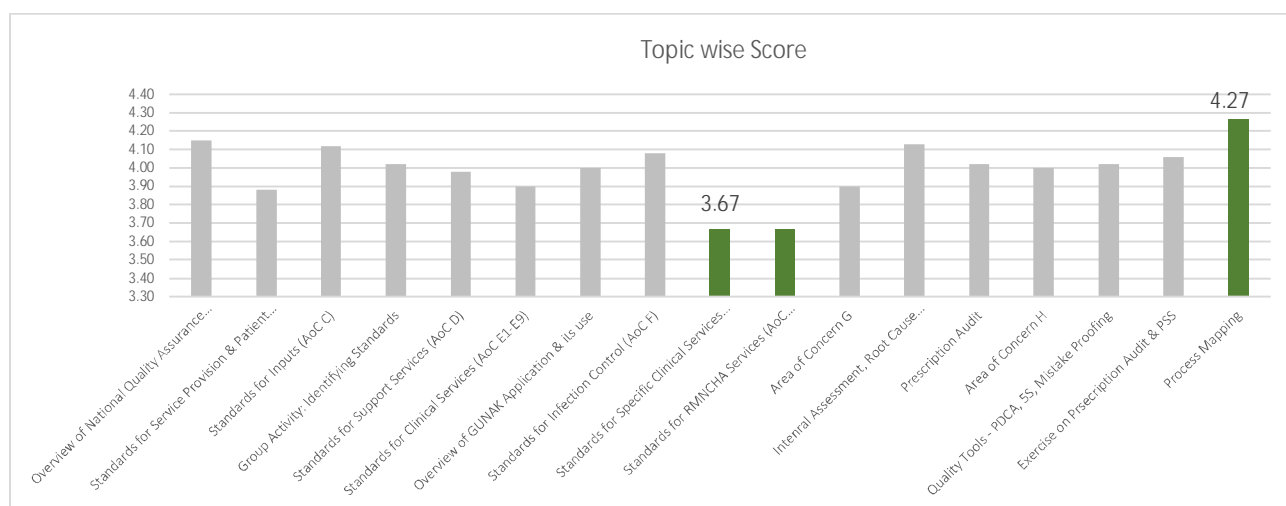
| Sl. No. | Name of Participants      | Designation               | Name of district/facility                    | Score (%) | Result |
|---------|---------------------------|---------------------------|--|-----------|--------|
| 1       | Achumthung Patton         | Consultant                | Nagaland Health Project                      | 75.0      | PASS   |
| 2       | Akumjungla                | Quality Assurance Manager |  | 82.5      | PASS   |
| 3       | Watikumla Amlari          | District Program Manager  |  | 85.0      | PASS   |
| 4       | Kereilhouvinuo Miachieo   | Consultant                | Nagaland Health Project                      | 75.0      | PASS   |
| 5       | Menguzenuo Sachu          | Consultant – IEC          | Nagaland Health Project                      | 72.5      | PASS   |
| 6       | Dr. Vezokholu Khamo       | Medical Officer AYUSH     | PHC, Athibung Peren                          | 77.5      | PASS   |
| 7       | Dr. Jongroi L             | Medical Officer           | PHC, Thonoknyu                               | 70.0      | PASS   |
| 8       | Dr. Akaholi V Zhimomi     | DPM – QA                  | Zunheboto                                    | 77.5      | PASS   |
| 9       | Bokaho T John Yeptho      | Medical Officer           | DH, Zunheboto                                | 77.5      | PASS   |
| 10      | Aosangla Longkumer        | M&E Assistant – NHP       | Directorate of Health & Family Welfare       | 80.0      | PASS   |
| 11      | Jentinochet Amri          | Asst. Director            | Nagaland State AIDS Control Society          | 80.0      | PASS   |
| 12      | Dr. M Nukshi Sangla Jamir | Deputy Director           | Nagaland State AIDS Control Society          | 80.0      | PASS   |
| 13      | Thejavituo Kire           | Medical Officer           | DH, Longleng                                 | 75.0      | PASS   |
| 14      | Dr. Avika P Jimo          | Medical Officer, AYUSH    | DH, Peren                                    | 77.5      | PASS   |
| 15      | Dr. Martha                | DVBO                      | CMO Office, Kiphire                          | 67.5      | PASS   |
| 16      | Dr. Alo A Ayeh            | Medical Officer           | PHC, Panso                                   | 67.5      | PASS   |
| 17      | Avika Yepthomi            | Medical Officer           | CHC, Aghunato                                | 85.0      | PASS   |
| 18      | Ethrongli Sangtam         | Medical Officer           | PHC, Chare Tuensamg                          | 80.0      | PASS   |
| 19      | Dr. Shevo Hiese           | DVBC, Phek                | CMO Office, Phek                             | 67.5      | PASS   |
| 20      | Dr. Y Imlongchaba         | Medical Officer           | DH, Tuensang                                 | 77.5      | PASS   |
| 21      | P. Imtimongba Kechu       | Medical Officer           | CHC, Changtongya Mokokchung                  | 80.0      | PASS   |
| 22      | Dr. Imlisenba             | Medical Officer           | IMDH, Mokokchung                             | 85.0      | PASS   |
| 23      | Dr. Holiba A Anar         | Medical Officer           | DH, Kiphire                                  | 87.5      | PASS   |
| 24      | Kisheka V Achuml          | Doctor                    | CHC, Pungro, Kiphire                         | 87.5      | PASS   |
| 25      | Dr. Imnanoktsung Longchar | DPM-QA                    | CMO Office, Kiphire                          | 87.5      | PASS   |
| 26      | Dr. Tinenlo James         | DTO MON                   | District TB Centre, Mon                      | 75.0      | PASS   |
| 27      | Renchamo Tungoe           | Medical Officer           | Sanis CHC Wokha                              | 75.0      | PASS   |
| 28      | Azhie Mero                | Medical Officer           | DH, Phek                                     | 75.0      | PASS   |
| 29      | Dr. Vepfuhu Kezo          | Medical Officer           | CHC, Peutsero, Phek, NL                      | 75.0      | PASS   |
| 30      | Nitovi Shikhu             | Deputy Director           | Health & Family Welfare, Nagaland            | 67.5      | PASS   |
| 31      | Pukhato Wotsa             | Consultant – NHP          | Directorate of H&FW, Nagaland Health Project | 75.0      | PASS   |
| 32      | Dr. Maongkala             | Medical Officer           | PHC, Mongsenyimti, Mokokchung                | 85.0      | PASS   |
| 33      | C Hosea NS Lam            | DPM                       | DH, Noklak                                   | 70.0      | PASS   |
| 34      | Imlinoba Changkiri        | DPM-QA                    | Dimapur                                      | 75.0      | PASS   |
| 35      | Dr. K Manan Phom          | Medical Officer           | PHC, Yongnyah, Longleng District             | 80.0      | PASS   |
| 36      | Dr. Alemwapang O          | Medical Officer           | Nhak   | 80.0      | PASS   |
| 37      | Ms. Mununu Vero           | DPM-QA                    | Tuensang                                     | 80.0      | PASS   |
| 38      | Dr. Renathung M Kithan    | Medical Officer           | Community Health Centre, Bhandari, Wokha     | 85.0      | PASS   |

|    |                        |                         |                              |      |      |
|----|------------------------|-------------------------|------------------------------|------|------|
| 39 | Epibenil Homtsoe       | Medical Officer         | DH, Wokha                    | 85.0 | PASS |
| 40 | Dr. Thomas Keppen      | Deputy Director         | DoH&FW, Nagaland             | 72.5 | PASS |
| 41 | Khumrila Sangtam       | Medical Officer         | Tang PHC                     | 62.5 | PASS |
| 42 | Dr. Tinurenla Anichari | Deputy Director         | NHM, Health & Family Welfare | 75.0 | PASS |
| 43 | Dr. Nounengulie Kire   | Medical Officer         | PHC, Piphema                 | 82.5 | PASS |
| 44 | Obed Sema              | Junior Specialist       | DH, Dimapur                  | 82.5 | PASS |
| 45 | Kekhriele - U Angahi   | DPM-QA                  |                              | 72.5 | PASS |
| 46 | Chenosin Yimchungru    | DPM-QA                  |                              | 75.0 | PASS |
| 47 | Dr. Chongya BL         | Medical Officer         | DH, Noklak                   | 77.5 | PASS |
| 48 | Ruokuovinuo Rachel     | Medical Officer         | CHC, Jalukie                 | 82.5 | PASS |
| 49 | Medophretuo Dzuvichu   | Medical Officer - AYUSH | CHC, Viswema                 | 75.0 | PASS |
| 50 | Dr. Kuotho T Nyuwi     | Medical Officer         | DH, Mon                      | 80.0 | PASS |

- Total Participants appeared in the NOAS Internal Assessor's Certificate Test: 50
- Total Participants who cleared the NOAS Internal Assessor's Certificate Test: 50
- Pass Percentage: 100.00 %
- Average Score of the Test: 77.60 %

### Annexure III: Training Feedback Analysis

| Sl. No. | Name of the Topic  | Average Score |
|---------|--|---------------|
| 1       | Overview of National Quality Assurance Program & Assessment Protocol       | 4.15          |
| 2       | Standards for Service Provision & Patient Rights (AoC A & B)               | 3.88          |
| 3       | Standards for Inputs (AoC C)   | 4.12          |
| 4       | Group Activity: Identifying Standards                                      | 4.02          |
| 5       | Standards for Support Services (AoC D)                                     | 3.98          |
| 6       | Standards for Clinical Services (AoC E1-E9)                                | 3.90          |
| 7       | Overview of GUNAK Application & its use                                    | 4.00          |
| 8       | Standards for Infection Control (AoC F)                                    | 4.08          |
| 9       | Standards for Specific Clinical Services (AoC E10-E17)                     | 3.67          |
| 10      | Standards for RMNCHA Services (AoC E18-E23)                                | 3.67          |
| 11      | Area of Concern G  | 3.90          |
| 12      | Internal Assessment, Root Cause Analysis, Action Planning & Prioritization | 4.13          |
| 13      | Prescription Audit   | 4.02          |
| 14      | Area of Concern H  | 4.00          |
| 15      | Quality Tools - PDCA, 5S, Mistake Proofing                                 | 4.02          |
| 16      | Exercise on Prescription Audit & PSS                                       | 4.06          |
| 17      | Process Mapping  | 4.27          |





**Topics that were most useful as per the feedback received from the participants:**

| Sl. No. | Topics  | Nos. of Participants appreciated the session |
|---------|---|--|
| 1       | Overview of NQAP & Assessment Protocol  | 07   |
| 2       | Area of Concern A - Standards for Service Provision<br>Area of Concern B - Standards for Patient Rights | 10<br>09                                     |
| 3       | Area of Concern C - Standards for Inputs  | 10   |
| 4       | Area of Concern D - Standards for Support Services  | 09   |
| 5       | Area of Concern E - Standards for Specific Clinical Services  | 12   |
| 6       | Area of Concern E - Standards for RMNCH A Services  | 05   |
| 7       | Area of Concern F - Standards for Infection Control   | 25   |
| 8       | Area of Concern G - Standards for Quality Management  | 09   |
| 9       | Area of Concern H - Outcome Indicators & KPI  | 12   |
| 10      | Quality Tools - PDCA, 5S, Mistake Proofing  | 06   |
| 11      | Internal Assessment, Root Cause Analysis, Action Planning & Prioritization                              | 12   |
| 12      | Process Mapping   | 22   |
| 13      | Prescription audit, Patient Satisfaction Survey & Exercises on Prescription Audit & PSS                 | 15   |
| 14      | Gunak Application & its uses  | 04   |

**Trainers Score:**

| Sl. No. | Name of the Trainer | Position                | No. of topics taken | Average Score |
|---------|---------------------|-------------------------|---------------------|---------------|
| 1       | Sh. Anup Basishta   | Consultant - QI, RRC-NE | 8                   | 4.08          |
| 2       | Dr. Vinaya RSL      | Consultant - QI, RRC-NE | 5                   | 3.98          |
| 3       | Ms. Vethipralu Lohe | SPM-QA, NHM, Nagaland   | 1                   | 3.90          |
| 4       | Dr. Antoly Suu      | Deputy CMO, Dimapur     | 2                   | 3.67          |
| 5       | RRC - NE Team       | -                       | 1                   | 4.02          |