

OFFICE OF THE MISSION DIRECTOR

NATIONAL HEALTH MISSION (NHM), ASSAM

Saikia Commercial Complex, Srinagar Path, Christianbasti, G.S. Road, Guwahati-05

No: NHM/Quality Assurance/2016-17/3048

Date:

Minutes of the meeting on SQAC & SISC held on 29/06/2018 at Conference Hall, NHM, Assam

The State Quality Assurance Committee & State Indemnity Sub Committee held a meeting on Quality Assurance under the chairmanship of Shri Samir Kumar Sinha, IAS, Principal Secretary, Health & Family Welfare Department, Govt. of Assam, on 29th June 2018 in the office of Mission Directorate, NHM, Assam. The following members were present:

Members Present

- 1. Shri S. K. Sinha, Principal Secretary H&FW, Dispur
- 2. Shri J. V. N. Subramanyam, MD NHM, Assam
- 3. Dr. Ramen Talukdar, Superintendent, GMCH
- 4. Dr. Biplab Gohain, Principal, SIHFW
- 5. Dr. Ratna Talukdar, HOD (Dept of Gynaecology, GMCH)
- 6. Dr. P. P. Das, HOD (Dept of Surgery, GMCH)
- 7. Dr. Faiza Ahmed Talukdar, HOD (Dept. of Anaesthesia)
- 8. Dr. Binita Goswami, Jt. DHS (UIP) & RCH(FW)
- 9. Dr. Apurba Krishna Sarma, Dy. Superintendent of Dhirenpara FRU
- 10. Dr. Udayan Baruah, Medical Superintendent, Down Town Hospital
- 11. Smt. Bhagya Devi Das, Sr. Consultant Nursing, NHM

At the outset, the Mission Director, NHM, Assam welcomed the committee members for this meeting and highlighted the major issues pertaining to Quality Assurance program in the State of Assam.

The following points were discussed in the meeting.

It was discussed that the SQAC meeting should be held mandatorily every six months as per GOI
guidelines and therefore the next meeting shall be held within six months wherein all the
members shall be informed in advance.

(Responsibility – Quality division, NHM Timeline for next meeting- Dec 2018)

2. After a brief presentation on the current situation of the Quality Assurance activities going on in the State, it was felt by all the members of the committee that there is a shortage of qualified Internal Assessors per district. Therefore, there is a need to increase the pool of Internal Assessors so as to widen the scope of Quality Assurance activities. For this fresh trainings need to be conducted for new participants with support from NHSRC. The previously trained participants, who have not cleared the Internal Assessor Examination, shallalso be re-trained and re-evaluated. All other trainings under QA as per ROP approval will be conducted as soon as possible.

(Responsibility – Quality division, NHM Timeline- first batch in first week of August)

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3. Dr Ramen Talukdar, Superintendent, GMCH proposed that few Internal Assessors could be nominated from all the Medical Colleges of Assam to sustain quality assurance activities in the Medical Colleges. He also added that the nodal officers for LaQshya program may be nominated as Internal Assessors. The committee then agreed that 20 nominated faculty fromMedical Colleges would be trained in the first batch in the first week of August 2018.

(Responsibility-Principal / Medical Superintendent GMCH for nominations and Quality division, NHM for conducting trainings Timeline- first batch in first week of August)

4. The Chairman suggested that the six Medical Colleges would be assessed as per Kayakalp Guidelines and the award money shall be proposed in SPIP during financial Year 2018-19. A team of three Internal Assessors would be assigned for gap assessment of each Medical College.

(Responsibility-Principal / Medical Superintendent of all Medical Colleges and Quality division for organizing assessments Timeline- Gap assessment shall start from last week of July)

5. The Committee decided that at least 6 District Hospitals, 2 SDCH/ CHCs, 1 PHC to be made NQAS certified during the financial Year 2018-19. The District Hospitals which can score more than 70 % in the Kayakalp assessment shall be strengthened for NQAS certification.

(Responsibility-Quality division, Joint Directors of respective districts,
DPMs and Hospital Administrators)
Timeline- March 2019)

 It was decided that the Quality division, NHM, Assam will distribute departmental SOPs and Policy documents to all the District Hospitals and peripheral institutes. Responsibility to be given to Hospital Administrator/ DME/ DPM to ensure full compliance.

> (Responsibility –PE Quality & Consultant Quality & Skill Lab Timeline- Second week of July)

7. The Committee decided that for the FY 2018-19, the target for Kayakalp award winning hospitals shall be approximately 400 Health Facilities across the State, out of which all District Hospitals, CHCs / SDCHs shall mandatorily take part. A target of at least 10 PHCs per district has been proposed.

(Responsibility –PE Quality & Consultant Quality Skill Lab for technical guidance and Jt DHS/ DPMs/DMEs/BPMs of respective districts)

8. It was felt that for proper implementation of QA activities throughout the State, one Nodal person should be designated for District Quality Assurance activities in all the districts. Since there is a dearth of District Quality Assurance Consultants, the committee decided that Hospital Administrators would be Nodal person for District Quality Assurance activities. All Hospital Administrators will be trained on QA activities accordingly.

(Responsibility - Quality division, NHM)

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 Mission Director, NHM, Assam directed all NQAS certified Internal Assessors from State HQ to mentor at least two districts by providing them hand holding support and technical guidance so that NQAS certification can be obtained within timeline. A list of assessors along with districts will be notified accordingly by Quality division.

(Responsibility – Quality division will prepare the mentoring plan Timeline-Mentoring shall start immediately from the month of August 2018)

10. After discussion on Biomedical Waste management as a major issue in obtaining certification of hospitals, the Chairman directed that Mapping of incinerators in all Districts need to be done for CBMWTF. Load assessment of incinerators to be done to identify feasibility of catering to load of neighbouring Districts. Additionally feasibility assessment of new incinerators to be made zone wise.

(Responsibility -PE Quality & Consultant Quality & Skill Lab)

- 11. Inviting more private parties for common biomedical waste management in Assam was set to be a priority by the Chairman and he directed that more private parties be identified for the same with land allotment from Govt in line with the Biomedical waste management Act & rules 2016.
- Refresher training for Biomedical Waste management and all other related trainings will be taken up.

(Responsibility – Quality division, NHM Timeline- Trainings will start from the first week of August)

13. The chairman advised to prepare a road map for Laqshya final assessment. First preference will go to low hanging fruits preferably like Model Hospitals and MCH wings within the month of July. List of facilities which would apply for certification would be listed and directly supported from State level. He also directed that a complete listing of all gaps of the 128 selected facilities be made viz that of equipment, supplies, records etc. –

(Responsibility - Consultant Maternal Health & Quality division, NHM)

14. For an effective infection control in all the critical areas of a hospital, it was decided by the Committee that Swab Culture report should be submitted on a monthly basis from SNCU, Labour room and OT from all district hospitals and all Medical Colleges. These reports will be analysed and discussed in the next SQAC meeting. Those facilities which report high growth of microorganism continuously has to be highlighted.

(Responsibility – Quality division, NHM & Consultant Quality & Skill Lab Timeline- Reporting shall be started from August 2018)

15. The Committee decided that Chairman of Assam Pollution Control Board would be invited in the subsequent SQAC meetings as a member. Notification to be made accordingly.

(Responsibility - PE, Quality, NHM)



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State Indemnity Sub Committee

 The Chairman directed that the 100 pending cases of Family Planning Indemnity Scheme (FPIS) should be reviewed by SISC members before 16thJuly.

(Responsibility - HOD Obs & Gynaec and Surgery dept. - GMCH)

2. It was decided that all consent forms should be immediately translated into local languages, including Bodo and Bengali

(Responsibility - SPM1 & SME

Timeline – Before World Population Day (11th July 2018)

3. The Chairman directed that Empanelment of PPIUCD and IUCD along with minilap, LS, PPS and NSV service providers is to be completed in public and private facilities through DQAC

immediately within Aug 15th 2018 in compliance of SC guidelines.

(Responsibility – Jt. DHS, Ad CM&HO (FW), DPM & DFPC– All Districts Timeline –Before World Population Day (11th July 2018)

 The Chairman also directed the Obstetrician & Gynaecology Professors from Medical Colleges to impart fixed day services in different districts in absence of adequate surgeons.

(Responsibility - Principal, All Medical colleges)

5. Partial filling of consent forms and medical record checklist of sterilization cases was taken as a serious issue and Chairman directed that all consent forms and medical record checklists have to be completely filled and signed by the treating surgeon and MO in charge of the respective facility. All DQAC members were directed to review completeness of the above forms in the respective district review meetings and share the minutes / action taken report to MD NHM.

(Responsibility – Jt DHS &Addl CM&HO – All Districts)

6. The Chairman directed that all the 22 non performing LS Surgeons should be called in the meeting of Joint Directors with Principal Secretary.

(Shri Samir Kumar Sinha, IAS) Principal Secretary Health & FW Deptt Govt. of Assam

Memo No: NHM/Quality Assurance/2016-17/3048

Date

Copy to:

- 1. PS to the Hon'ble Minister, Health & FW, Govt. of Assam with a request to appraise matter to the Hon'ble Minister.
- 2. The Executive Director, NHM Assam for favour of kind information.
- 3. Person Concerned.....
- Office Copy.

MD N HM

Principal Secretary
Health & FW Deptt Govt. of Assam