

**Minutes of Meeting of State Quality Assurance Committee (SQAC) cum
State level Award Nomination Committee for Kayakalp held on 28th
January 2017 at NHM Conference Hall**

The 4th Meeting of the State Quality Assurance Committee cum State level Award Nomination Committee for Kayakalp was held under the Chairmanship of the Commissioner-cum- Secretary, Health and Family Welfare Deptt., Government of Odisha on 28th January 2017. The members present in the meeting is attached in **Annexure - I**.

A detailed presentation was made by the Mission Director, NHM regarding National Quality Assurance Standard (NQAS) Accreditation, ISO 9001:2008 Certification, Kayakalp Award to Public Health Facilities, Action taken for this so far & different initiatives and activities that are going on for ensuring quality health care services to the patients at Public Health Facilities. The detailed presentation is attached in **Annexure-II**.

After detail discussion, following decisions were taken:

Agenda Item No-1		Decision Taken
Confirmation of the Minutes of the last SQAC-cum- State level Award Nomination Committee for Kayakalp Meeting.		Confirmed
Agenda Item No-2		
Action taken on the decisions of Previous SQAC-cum-Kayakalp Award Nomination Committee Meeting.		
Item No	Decision Taken	Action Taken
2.1	State level Assessor will visit DHH Koraput to conduct assessment of facilities for NQAS State Certification. After assessment if the DHH secure more than 70% marks, recommendation will be sent to GoI for External Assessment & NQAS Accreditation.	State Assessment and External Assessment by GOI team for NQAS accreditation of DHH Koraput conducted. DHH Koraput got conditional accreditation. Compliance report submitted to NHSRC for necessary action.
2.2	IMEP Practices including BMWM will be strengthened in all hospitals including Medical College & Hospitals. All staffs coming in contact of Bio medical Waste will be immunized.	Fund provisioning was made from State budget and released by DPH to district for Immunizing staff.
Agenda Item No-3: NQAS Certification		
Item No	Agenda	Decision Taken
3.1	<ul style="list-style-type: none"> • Detailed discussion was made regarding current status of NQAS implementation. • NQAS Accreditation activities will be taken up in all DHHs simultaneously but this year 2 district Head Quarter Hospitals (DHH Kalahandi and DHH Sambalpur) will be taken up for NQAS Certification. • One batch of NQAS External Assessors Training will be conducted in Odisha. A letter will be communicated to Advisor QI, NHSRC for conducting the training. 	Approved

	<ul style="list-style-type: none"> Five district taken up for Model Health District i.e Kandhamal, Koraput, Keonjhar, Sundargarh, Mayurbhanj, Focus will be given for the 5 DHHs for NQAS accreditation in the year 2017-18. 	
3.2	<p>Members in the SQAC & DQAC: The Nodal Officer of NUHM at state level will be included as member of SQAC and the Nodal Officer of NUHM at district level will be included as member of DQAC. A letter will be communicated to all CDMOs to include the district Nodal Officer of NUHM in the DQAC.</p>	Approved
Agenda Item No-4: ISO 9001:2008 Certification		
4	<ul style="list-style-type: none"> 9 DHHs (Angul, Balasore, Baripada, Jajpur, Kandhamal, Keonjhar, Koraput, Puri & Capital Hospital Bhubaneswar) have got ISO 9001:2008 Certification in 2013. Recertification audit of 8 DHH (Angul, Balasore, Baripada, Jajpur, Kandhamal, Keonjhar, Koraput & Capital Hospital Bhubaneswar) completed and all 8 DHHs have got ISO 9001:2008 Certification in Oct. 2016. ISO 9001:2008 Certification Pre audit was conducted in DHH Puri by the certifying agency and final audit will be conducted in February 2017 	Noted
Agenda Item No-5:		
Kayakalp Award to Public Health Facilities		
Item No	Agenda	Decision Taken
	<ul style="list-style-type: none"> A detailed discussion was held regarding Kayakalp Award to public Health Facilities, its assessment methods, Assessors for Internal Assessment, Peer Assessment and External Assessment, marks secured by different DHH, SDH/CHC in all three types of assessments and all activities undertaken in this regard as per the guideline prescribed by Govt. of India. Kayakalp Peer Assessment was conducted for all 32 DHH, 27 SDH & 377 CHCs. In the Peer Assessment 13 DHH, 9 SDH & 55 CHC qualified for External Assessment and the qualified hospitals are assessed by team of external assessors. The list of Kayakalp Award winner and Runners up based on the assessment was finalized. As DHH Sambalpur secured highest marks i.e 466 out of 500 (93.20%), the 1st prize/Winner for Kayakalp will be awarded to DHH Sambalpur. City Hospital Berhampur (DHH Ganjam) secured 2nd highest marks i.e 406 out of 500 (81.20%), the 2nd prize/Runners up for Kayakalp will be awarded to DHH Ganjam. DHH Kalahandi, Capital Hospital, Bhubaneswar, Koraput, Mayurbhanj, Nabarangpur, Balasore secured more than 70% marks, the Commendation Award for Kayakalp will be given to the 6 DHHs. 	Approved

	<ul style="list-style-type: none"> • As CHC Ghatagaon, Keonjhar secured highest marks i.e 489 out of 500 (97.80%), the 1st prize/Winner for Kayakalp will be awarded to CHC Ghatagaon, Keonjhar. • CHC Mandasahi, Jagatsinghpur secured 2nd highest marks i.e 472 out of 500 (94.40%), the 2nd prize/Runners up for Kayakalp will be awarded to CHC Mandasahi, Jagatsinghpur. • CHC Kesinga, SDH Rairangpur, SDH Baliguda, SDH Karanjia, CHC Jashipur, CHC Soro, CHC Gudari, CHC Bahalda, SDH Nilagiri, CHC Mahanga secured more than 70% marks; the Commendation Award for Kayakalp will be given to the 10 SDH/CHCs. <p>The detailed score sheet attached at Annexure-III</p>	
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Agenda Item No-6

Claim Status and other issues related to Family Planning Services

Item No	Discussion /Decision taken	Responsibility
6.1	<ul style="list-style-type: none"> • Road map for improving the quality of Family Planning Services was prepared. Strategy to operationalize the Road Maps is to be defined. Meeting to be conducted on every month under the chairmanship of DFW to review the progress and it will be discussed in SQAC meeting once in six month. • The progress and the list of defaulters are to be placed in Whats App group. 	DFW (O)
6.2	To ensure quality of care in hospitals a team has to be formed for visiting the facilities to access the facility available, quality of service provided, identify the gaps and suggest for improving the service quality. The team is also conduct to client exit interview and facility audit.	DFW (O)
6.3	It was observed that the number of FP failure cases have increased. Categorization of failure has to be done; with detailed analysis of cases. Data has to be reviewed to identify the type operations which lead to failure. (Minilap or Laparoscopy) and instruction to be given for districts for taking corrective action.	DFW (O)
6.4	There is a provision of incentive for doctors performing Minilap /laparoscopy /NSV i.e. Rs. 150 for tubectomy, Rs. 250 for PPS and Rs. 250 for Vasectomy. Doctors are not getting the compensation as desired by the Enhanced Compensation scheme (GOI) DO.NO. 11026/11/2014-FP, dated 20.10.2014. Instruction to be given to all CDMOs to release the incentive to all concerned for performing Minilap /laparoscopy /NSV.	DFW (O)
6.5	A guideline to be prepared for supply of contraceptive to all Urban ASHAs from UPHCs.	DFW (O)

6.6	A format has to be developed and to be mailed to district, where the district has to report in a monthly basis of the performance of the empanelled surgeons.	DFW (0)
6.7	<ul style="list-style-type: none"> • A study was conducted for assessing the quality of FDS. Some quality issues are observed from the study. • A letter will be communicated to all the CDMOs reiterating the standard required and improving and ensuring the quality of FP services. • A letter to be issued to all CDMOs reiterating the items to be kept in OT and ensuring it. 	DFW (0)

The meeting ended with vote of thanks to the chair and the participants.


Mission Director,
NHM, Odisha.


Commissioner-cum- Secretary to Govt.
H & FW Deptt., Odisha