

**GOVERNMENT OF TRIPURA
HEALTH AND FAMILY WELFARE DEPARTMENT
(NATIONAL HEALTH MISSION)**

F.3 (5-2929)-FWPM/SHFWS/2015-16

Date: 4.5.2016

NOTIFICATION

A District Quality Team(DQT) is hereby constituted with following Officials for functioning at District Hospitals and that team will be responsible for undertaking various responsibilities in accordance with terms of reference(ToR) as laid down in the '**Operational Guidelines for Quality Assurance in Public Health Facilities**'. District QualityTeam(DQT) will be consists off following members:

1. Medical Superintendent - Chairperson
2. HOD, Dept of Surgery
3. HOD, Dept of Gynecology
4. HOD, Dept of Microbiology (for enforcing IMEP [Infection management and Environmental Plan and BMW [Biomedical Waste Management])
5. Matron
6. I/c Store
7. I/c Record Section
8. Hospital Administrator/Assistant Hospital Administrator

Terms of reference:

1. Staff orientation:

- Formal training needs to be conducted for the staff of DQT with support from the District Quality Assurance Committee.
- DQT should orient the medical, paramedical and support staff team including Group C & Group D to the service standards set by the state.

2. Ensuring adherence to quality standards:

- Through regular internal assessments, audits, review etc the DQT members should ensure that the standards set for a District Hospital are being met.
- Corrective action plan should be initiated for identified Gaps.

3. Regular reporting to district QAC:

- The DQT needs to report regularly to the DQC on outcome level indicators such as sterilization deaths, complications, failures as well as maternal and infant deaths.
- The DQT should also report to DQC on internal Assessment findings, quality improvement measures undertaken.

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4. Ensure interdepartmental coordination:

- The DQT should liaise with various departments within the facility for effective implementation of QA services.
- To share the internal assessment findings of DQT and External Assessment finding of SQAU/DAQU with staff at district hospital.
- DQT will ensure that Departmental nodal officers will take corrective actions as per the map provided by the DQT.

Process:

- Once the DQT is formed, areas of initial assessment need to be identified in the first meeting.
- For achieving the standards DQT will undertake the process of filling the checklist, scoring the measurable indicators, summing up the area wise and service wise gap.
- Assessment to be carried out and based on its findings follows up action to be taken.
- Monitoring the follow up actions has to be done in the subsequent meetings.
- Assessments should be followed by time bound action plan along with the person responsible for each action shall be prepared.
- Once the DQT completes the assessments and gives service wise /area wise scoring then will inform and invite District/state assessors for verification and guidance.
- The process will continue till the SQAC assessors certify the attainment of quality standards at the hospital. The onwards DQT WILL ensure maintaining the standards.
- The Chairman of DQT will prepare a schedule for daily round involving Hospital Administrator / Assistant Hospital Administrator with facility In-charges at DH, SDH, CHC& PHC to supervise the QA activities and sustain the motivational level of the staff.
- The DQT will meet once every month.


Under Secretary (H)
Govt. of Tripura