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ABSTRACT

Tamil Nadu Health System Reform Program – Governance structure/ institutional arrangements comprising various committees for implementation of Quality of Care Strategy –Orders - Issued.

HEALTH AND FAMILY WELFARE (EAPI-1) DEPARTMENT

G.O.(Ms)No. 230

Dated: 04.05.2021
Pilava, Chithrai – 21
Thiruvalluvar Aandu – 2052

Read:

1. G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated 31.12.2014.
2. G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017.
3. G.O.(Ms) No.155, Health and Family Welfare (EAPI-1) Department, Dated 24.03.2020.
4. From the Project Director, Tamil Nadu Health System Reform Program, Chennai, letter Ref.No.5308/TNHSRP/ PMU/2021, dated 25.02.2021.

ORDER:

In the Government Order first and second read above, orders have been issued for formation of various committees and its activities in order to measure the quality of services at Public Health facilities in Rural areas under National Rural Health Mission (NRHM).

2. In the Government Order third read above, orders have been issued for adopting "Quality of Care Strategy" to ensure health services provided are effective, safe and people centered.

3. The Project Director, Tamil Nadu Health System Reform Program, Chennai has stated that Government of Tamil Nadu is committed in improving the quality of its health care services. Tamil Nadu Health System Reform Program has worked with various stake holders in a consultative manner and has developed the "Tamil Nadu Quality of Care Strategy" (TNQoCs). Under this TNQoCs, it is proposed to work through the existing organizational structure created in the Government Order first and second read above. However the scope and membership of the organizational / Governance structure will be expanded to ensure implementation of the "Quality of Care Strategy" adopted in Government Order third read above.

4. The Project Director, Tamil Nadu Health System Reform Program has further stated that the committees should be operationalized and the members of the various committees should be made aware of their roles and responsibility

5. The Project Director, Tamil Nadu Health System Reform Program has requested the Government to issue a separate order for all Head of Departments insisting on the governance structure/ institutional arrangements for the implementation of "Quality of Care Strategy", which can be communicated to the various committee members.

6. The Government after careful consideration of the proposal of the Project Director, Tamil Nadu Health System Reform Program have decided to accept the same and accordingly all Head of Departments are directed to implement the governance structure/institutional arrangements comprising various committees and its activities annexed to this order for the implementation of "Quality of Care Strategy".

(BY ORDER OF THE GOVERNOR)

J.RADHAKRISHNAN
PRINCIPAL SECRETARY TO GOVERNMENT

To

The Project Director, Tamil Nadu Health System Reform Program, Chennai-6.

The Mission Director, State Health Society, Chennai-6.

The Managing Director, Tamil Nadu Medical Services Corporation Limited,
Egmore, Chennai-8.

The Director of Medical Education, Chennai-10.

The Director of Medical and Rural Health Services, Chennai-6.

The Director of Public Health and Preventive Medicine, Chennai-6.

✓ The Committee Members through Project Director, Tamil Nadu Health System
Reform Program, Chennai-6.

Copy to

The Health and Family Welfare (EAPII/Data Cell) Department, Chennai-9.

SF/SC

//FORWARDED BY ORDER //



SECTION OFFICER



Annexure to G.O.(Ms)No.230, Health and Family Welfare (EAPI-1) Department, dated: 04.05.2021.

GOVERNANCE STRUCTURE FOR QUALITY WITHIN THE HEALTH SECTOR

A governance structure for quality was created within the State health sector for planning, implementing, monitoring and reviewing various activities related to provision of quality care at all levels of health facilities in the State. State, District level committees and Regional, State and District level units, are formed under National Health Mission (NHM) vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017. Major roles & responsibilities of these committees focused on quality certification like NQAS, Kayakalp and LaQshya.

Government of Tamil Nadu (GoTN), has committed to improve the quality of its health care services. Tamil Nadu Health System Reform Project has therefore worked with various stakeholders in a consultative manner and has developed the "Tamil Nadu Quality of Care Strategy" (TN QoCS), which was approved and adopted by the Govt vide G.O. No: 155, Health and Family Welfare (EAPI-1) Department, dated 24th March 2020.

Under this "Tamil Nadu Quality of Care Strategy", it is proposed to work through the existing organizational structure, however the scope and membership of the organizational structure will be expanded to ensure implementation of the QoCS. It is proposed that the membership amendment will be done only for the state level unit, whereas, the scope will be amended for all the committees and units. Government of India and National Health Mission has recommended the formation of a facility level quality team, however it is not inbuilt in the organizational structure mention in the G.O from NHM. Under Tamil Nadu Health System

Reform Project, TNQoCS -G.O. No: 155, Health and Family Welfare (EAPI-1) Department, dated 24th March 2020, it is proposed to include a facility level quality assurance committee. The amendments to the existing organizational structure in terms of the composition and scope of work are given below:-

Organization structure of Quality Committee at different levels



1.State Quality Assurance Committee (SQAC)

[NHM -vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated: 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated: 18.12.2017.]

The SQAC is chaired by the Secretary to the Government, Health & Family Welfare Department and Mission Director, National Health Mission (NHM) is the member secretary. This committee meets bi-annually. The committee has 28 members which includes the heads of various departments and projects

A) Composition of the SQAC

Chair Person	The Secretary, Health & Family Welfare Department, Tamil Nadu
Vice Chairperson	The Mission Director, National Health Mission
Member Secretary	Additional Director, National Rural Health Mission
Convenor	Director of Public Health and Preventive Medicine , Chennai
Member	The Project Director, TNHSRP, Chennai
Member	The Managing Director, TNMSC, Chennai
Member	The Commissioner, Indian Medicine and Homoeopathy, Chennai
Member	The Managing Director, TANSACS, Chennai
Member	The Commissioner, Food safety & Drug Administration, Chennai
Member	The Director of Medical Education, Chennai
Member	The Director of Medical and Rural Health Services, Chennai
Member	The Director of Family Welfare, Chennai
Member	The Deputy Director, Family Welfare, Chennai
Member	The Principal, Institute of Public Health, Poonamallee
Member	The Director, Institute of Obstetrics &Gynaecology
Member	The Professor of Surgery, Kilpauk Medical College
Member	The Professor of Anaesthesia, Kasturba Gandhi Hospital, Chennai
Member	The Professor of Paediatrics, Government Raja Sir Ramasamy Muthaliyar Lying-in Hospital, Royapuram, Chennai
Member	The Director, Institute of Medicine, Rajiv Gandhi Government General Hospital, Chennai
Member	The Hospital Superintendent , DHQH, Tiruvallur
Member	The Hospital Superintendent, GH, Tambaram
Member	Incharge Medical Officer, Nandhivaram, UPHC
Member	The Principal, College of Nursing, Madras Medical College, Chennai
Member	Medical Superintendent, Andhra Mahila Sabha / VHS

Member	President, IMA
Member	President, Indian Association of Physiotherapist
Member	President, Federation O&G societies
Member	Representative from the Legal cell of Director of Public Health & Preventive Medicine / Director of Medical and Rural Health Services / Director of Medical Education

B) Activities

- i. Formation of Quality Assurance Team at Facility level.
- ii. Identification of the gaps based on National Quality Assurance Standards.
- iii. Preparation of action plan based on the gaps analysed.
- iv. Internal assessment of the facilities.
- v. Reporting on Patient Satisfaction Survey by all facilities.
- vi. Reporting on Key Performance Indicators (KPI) by all facilities.
- vii. Customization of Standard Operating Protocols and Quality policy.
- viii. Rapid Improvement Events, Medical and Death Audits.
- ix. Phasing out actions and allocation of resources for the actions to be carried out based on gap analysis.
- x. National Quality Assurance Standards are implemented and integrated with hospital functioning.
- xi. Review of actions and process of certification of State and National level.

The scope of activity of this committee will include the following additional activities:

[TNHSRP, TNQoCS -G.O. No: 155, Health and Family Welfare Department, dated 24th March 2020.]

1. Provide overall guidance & direction for the implementation of TN QoC Strategy
2. Review periodically the TN QoC Strategy implementation across Directorates and societies and make course corrections as and when required
3. Approve annual action plans for implementation of TN QoC Strategy (including priority interventions)

II. State Quality Assurance Unit (SQAU)

[NHM -vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017.]

The state quality assurance unit has members from NHM and other state disease control programs, consultants at state level for quality assurance and nodal officers from various departments (DPH/DMS/DME, etc) and projects (TNHSRP). This unit meets on a quarterly basis.

A) Composition of the SQAU

- Additional Director, NHM
- State Nodal Officers of NVBDC, IDSP, IDDCP, NTCP, RNTCP, NLEP, NPCB, NPCDCS, NPHCE, NPPCD, NOHP, NMHP, NPPC, NPPMB, NPPCF and any other new national Programmes created later.
- State consultant (Quality Assurance)
- State consultant (Public health)
- State consultant (Quality Monitoring)
- Administrative cum Program Assistant

Nodal officers from the three directorates – DPH, DMS & DMs and Nodal officers from TNHSRP

B) Activities

The nature of the activities of the State Quality Assurance Unit (SQAU) will be as per the G.O.(Ms) No.479, Health and Family Welfare (EAP II-1) Department, dated 18.12.2017. which specifies responsibilities of individual members from NHM. In addition to the above, the following roles and responsibilities are included.

1. Monitoring the score cards of the facilities, ranking of health facilities and make recommendations to improve scores.
2. Monitoring audits – Clinical, Morbidity and Mortality
3. Support for certification of health facilities in the state (NQAS/NABH).
4. Ensuring conduct of State level health assemblies
5. Recommend interventions / address issues identified by the State and District Health Assemblies
6. Plan and support implementation of interventions in the TN QoCS , State TN Health policy – Vision 2030 and CME Policy.
7. This unit would also prepare necessary documents and reports including presentations for meetings of State Quality Assurance Committee and ensure sharing minutes of the meetings with relevant stakeholders.

8. Review and monitor the functioning of Regional and District level committees.

III. Regional Quality Assurance Unit (RQAU):

[NHM -vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017.]

This Unit is headed by the Joint Director Health Services (JDHS) of the respective regions and has membership of nine more members from various departments of the district levels, government medical college, and quality nodal officers from the district and meets on a quarterly basis.

A) Composition of the RQAU

Chair Person	JDHS of respective 7 regions
Member Secretary	Principal of the Regional Training Institute of 7 regions
Convenor	Deputy Director of Public Health Services comprising of 4-6 districts in a region
Member	JDHS of concerned districts comprising of 4-6 districts in a region
Member	District Family Welfare Officer /RCHO/ ACMO/ equivalent comprising of 4-6 districts in a region
Member	Medical Superintendent of Government Medical College of the respective region
Member	One clinician (CCS cadre- Surgical/ Medical/ any other speciality) respective region
Member	Quality Medical Officer from the DQT (Head Quarters Hospital) from 4-6 districts in a region
Member	Regional Consultant for Quality Assurance
Member	Administrative cum Programme Assistant

B) Activities

- i. Ensure roll out of standard protocols for Quality services in DH, SDH, CHC and PHCs.
- ii. Develop a plan for the Quality Assurance at each level of health facilities in a phased manner.

- iii. Disseminating the quality assurance guidelines & tools and methodology to be followed at district and sub district level.
- iv. Develop a field travel plan for Independent and joint (with State teams) visits to the health facilities in the districts by members of the DQAU.
- v. Following these visits, prepare the draft report and recommendations.
- vi. Mentor the facility in-charges at the districts for Implementing quality improvement measures at the facilities.
- vii. Compile and collate monthly data received from facilities as stated in terms of reference for DQAU and share it with the DQAC members and discuss with DQAC meeting.
- viii. Follow up the activities of DQAU and report to SQAU so as to review at State level for improvement further.
- ix. Follow up the activities of District Quality Team and Facility Team as per the terms of reference given for District Quality Team in the GoI guidelines.
- x. Closely monitor the process of implementation of NQAS at facility level as per the road map given in the Operational Guideline for NQAS.
- xi. Provide necessary support to utilize the services of the Regional Consultant and Administrative cum Programme Assistant (contract posts) to follow up the quality assurance process successfully.
- xii. RQAU should develop and act as Resource centre for quality assurance to provide guidance and support to the DQAU and DQT to improve further.
- xiii. Report to DQAU every month regarding the progress of NQAS.
- xiv. RQAU should meet every month to report the status and progress of NQAS programme to SQAU before 5th of every month.
- xv. Update the Quality Assurance programme through online.

In the following activities are added to the current scope of work of this committee: *[as per-G.O. No: 155, Health and Family Welfare (EAPI-1) Department, dated 24th March 2020.]*

1. Reviewing score cards of the facilities and ranking of health facilities
2. Support for certification of health facilities in the state (NQAS/NABH).
3. Address issues identified by the District Health Assemblies

4. Support implementation of interventions recommended in the TN QoCS, State TN Health policy – Vision 2030 and CME Policy.

District Quality Assurance Committee

[NHM -vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated: 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017.]

This committee is headed by District collector and has members from various departments, societies, projects, private healthcare sector, legal representative, profession bodies, etc and meets once in three months.

A) Composition of the DQAC

Chair Person	District Collector
Member Secretary	Deputy Director of Medical and Rural Health Services, Family Welfare
Convenor	Deputy Director, DPH of the Revenue Headquarters
Member	The Hospital Superintendent of the DHQH/ Dean of Govt Medical College of District
Member	Joint Director, DMS
Member	DD Leprosy
Member	DD TB
Member	Nodal Officers of NVBDC, IDSP, IDDCP, NTCP, RNTCP, NLEP, NPCB, NPCDCS, NPHCE, NPPCD, NOHP, NMHP, NPPC, NPPMB, NPPCF and any other new national Programmes created later.
Member	HOD OBG from Govt Medical College Hospital / Senior most Gynaecologist from the District Headquarters Hospital
Member	HOD Surgery from Govt Medical College Hospital / Senior most Surgeon from the District Headquarters Hospital
Member	HOD Medicine from Govt Medical College Hospital / Senior most Physician from the District Headquarters Hospital
Member	HOD Paediatrics from Govt Medical College Hospital / Senior most Paediatrician from the District Headquarters Hospital
Member	HOD Anaesthesia from Govt Medical College Hospital / Senior most Anaesthesiologist from the District Headquarters Hospital
Member	Nursing Matron from MCH/ Nursing Superintendent from GHQH

Member	Representative from legal cell (as decided by Chairman)
Member	Accredited private sector hospital (as decided by Chairman)
Member	Representative from Medical Professional Bodyeg, Federation of Obstetrics and Gynaecological Societies of India / Indian Medical Association / Indian Association of Physiotherapist / Association of Public Health (as decided by Chairman)
Member	BMO & MO from PHC (as decided by Chairman)

B) Activities

- i. Dissemination of QA policy and guidelines.
- ii. Ensuring standards for quality of care.
- iii. Review, report and process compensation claims.
- iv. Capacity building of DQAU and DQT.
- v. Monitoring QA efforts in the district.
- vi. Periodic Review of the progress of QA activities.
- vii. Periodic Review of the progress of QA activities.
- viii. Supporting quality improvement process.
- ix. Coordination with the State.
- x. Reporting.

The following activities are added as per G.O.(Ms)No.155, Health and Family Welfare (EAPI-1) Department, dated: 21.03.2020

1. Ensure adoption of score cards and improved performance on scorecards.
2. Monitoring functioning of Quality Assurance Committee meeting at the facility level and review of minutes and action taken report.
3. Monitoring audits at the district level.
4. Monitoring the progress of certification/ accreditation of health facilities in the district
5. Participation in District level health assemblies and address the issues identified
6. Monitor implementation of interventions recommended in the TN QoCS

District quality assurance unit:

[NHM -vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017.]

This unit has membership of Deputy Director Family welfare who is the convener of this unit and assisted by, clinician, program assistant, and consultants and is convened every month.

A) Composition of the DQAU

Member	District Consultant (Quality Assurance)
Member	District Consultant (Public health)
Member	District Consultant (Quality Monitoring)
Member	Administrative cum Program Assistant

B) Activities

- i. Ensure roll out of standard protocols for RMNCH-A services (as well as for Disease Control Program implementation).
- ii. Develop a plan for the QA at each level of health institution in a phased manner.
- iii. Disseminating the QA guidelines, tools and methodology to be followed at district and sub district level.
- iv. Develop a field travel plan for independent and joint (with State teams) visits to the health facilities in the districts by members of the DQAU.
- v. Following these visits, prepare the draft report and recommendations.
- vi. Mentor the facility in-charges at the districts for implementing quality improvement measures.
- vii. Compile and collate monthly data received from facilities on outcome level indicators, especially those related case of adverse outcomes.
- viii. Send the regular reports on sterilization related indicators (death, complications, failures) to the State after ratification of the same by the Chairperson of the DQAC.
- ix. Review the implementation of the National Family Planning Indemnity Scheme/ payment of compensation in the district, based on reports received from the facilities as well as from the visits undertaken by the DQAU members.

The following activities are added as per G.O.(Ms)No.155, Health and Family Welfare (EAPI-1) Department, dated: 24.03.2020.

1. Review implementation and performance of score cards.
2. Review progress of activities for obtaining certification/accreditation of health facilities in the district.
3. Review the progress implementation of interventions recommended in the TN QoCS.
4. Provide feedback to the District level Quality Committee.

District quality assurance team:

[NHM -vide G.O.(Ms) No.445, Health and Family Welfare (EAPII-2) Department, Dated 31.12.2014 & G.O.(Ms) No.479, Health and Family Welfare (EAPII-1) Department, Dated 18.12.2017.]

The District Quality assurance team is head by the Hospital Superintendent of the DHQH/ Medical Superintendent of Medical College of District. The members would include heads of the various clinical and para clinical specialties, Nursing matron, Pharmacists, Hospital managers etc. and meeting is held every month

A) Composition of the DQAT

Chair Person	Hospital Superintendent of the DHQH/ Medical Superintendent of Medical College of District
Member	HOD Surgery from Govt Medical College Hospital / Senior most Surgeon from the District Headquarters Hospital
Member	HOD OBGY from Govt Medical College Hospital / Senior most Surgeon from the District Headquarters Hospital
Member	HOD Micro & Pathology of the Medical College / Incharge Medical Officer of the Lab services in the District Headquarters for enforcing IMEP & Bio-Medical Waste Management protocols
Member	Nursing Matron from MCH/ Nursing Superintendent from GHQH
Member	District Transport Officer
Member	Incharge of Medical Records DHQH/ MCH/ Technician of the Medical College Hospital
Member	Chief Pharmacist of DHQH/ MCH / Surgical store officer of the Medical College Hospital
Member	Hospital Manager

B) Activities

- i. Staff Orientation
- ii. Ensuring adherence to quality standards
- iii. Regular reporting to district QAC
- iv. Ensure interdepartmental coordination
 - Liaise with various departments

- Share the internal assessment findings of QT with all the staff.
- Ensure departmental nodal officers will take
- corrective actions as per road map.

The following activities are included as per G.O.(Ms)No.155, Health and Family Welfare (EAPI-1) Department, dated: 24.03.2020.

1. Support implementation of the score cards and review performance on scorecards
2. Provide supportive supervision to the health workers and facilities in the district
3. Support certification/ accreditation related activities of health facilities in the district
4. Support implementation of interventions recommended in the TN QoC
5. Provide feedback to the facilities of the districts

For implementing interventions under QoCS, the district level committees will play a monitoring role and address challenges in implementation, while the district quality assurance unit will periodically review implementations and district quality assurance team will actually provide necessary guidance and support for implementation. The district quality assurance team and unit will provide feedback to the district quality assurance committee.

In addition to the existing committees, QoCS includes addition of Facility Quality Assurance Committee / Team.

7.Facility Quality Assurance Committee / Team

[TNHSRP, TNQoCS -G.O. No: 155, Health and Family Welfare (EAPI-1) Department, dated 24th March 2020.]

Facility Quality Assurance Committees is now introduced in the organizational structure and below are the details of the membership and roles and responsibilities of the committee.

1. Medical college Hospitals

Chair Person	Hospital Superintendent / Dean
Members	Representative from all clinical departments and representatives from Pathology, Microbiology, Biochemistry & Community Medicine.
Member	Nursing Matron / Nursing Superintendent
Member	Officer -In charge of Medical Records Dept
Member	Chief Pharmacist

Member	Lab technician
Member	Outsourcing representative
Member	Representatives from Community/ patients organization
Additional members as per the need of the institution	

2. District/Sub District Hospitals

Chair Person	Hospital Superintendent
Members	Heads of different departments of the facility
Member	Nursing Superintendent from hospitals
Member	Officer -In charge of Medical Records Dept
Member	Chief Pharmacist
Member	Lab technician
Member	Outsourcing representative
Member	Representatives from Community/ patients organization
Additional members as per the need of the institution	

3. Primary health Centers/Community Health Centers

Chair Person	Medical Officer in-charge
Members	Medical Officer
Member	Staff nurse
Member	Chief Pharmacist
Member	Lab technician
Member	ANM
Member	Sanitary worker /Grade-4 worker
Member	Representative from Community/ patient organization
Additional members as per the need of the institution	

Roles & Responsibilities of Facility Quality Committee / team

1. Conduct monthly quality committee meetings
2. Ensure data collection & reporting of score cards
3. Perform routine clinical & care related audits in the facility
4. Perform various activities for certification of the facility
5. Document, monitor, report & resolve grievances of patients in the facility

6. Implement various Quality Improvement interventions as outlined by TN QoCS
7. Ensure implement, monitor, audit, course correction, feedback, and documentation of TNQoCS for that facility

While state committees/ Units will be involved in planning, supporting and monitoring the activities, the District level committees/ Units will provide a supportive/ Implementation role. The newly formed facility level quality assurance committee will be involved in implementation.

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PRINCIPAL SECRETARY TO GOVERNMENT

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