

GOVERNMENT OF KERALA

Abstract

Health and Family Welfare Department - Quality Assurance in Health Care Institutions - State Level Accreditation Programme - Orders issued

HEALTH & FAMILY WELFARE (FW) DEPARTMENT

G.O.(MS) No. 24/2011/H&FWD Dated, Thiruvananthapuram 20.01.2011

Read:- Minutes of the 11<sup>th</sup> Executive Committee meeting of State Health and Family Welfare Society held on 14<sup>th</sup> July 2010.

**ORDER**

Quality in Health Care is a guiding principle in assessing how well the health system is performing in its mission to improve the health of citizens. Quality is the degree of adherence of a product or service to the predetermined specification. International organization for Standardization (ISO) defines quality in health services as the totality of features and characteristics of a service that bear on its ability to satisfy the stated and implied needs of the patients.

2. There are 1254 Government health care institutions under Health Services Department and 5 Government Medical Colleges under Medical Education Department. The health care institutions under Health Services Department include General hospitals, District hospitals, Taluk hospitals, Community Health Centres, 24X7 Primary Health Centres, Primary Health centres, TB Centres/Clinics, W&C Hospitals, Mental Health Centres, Leprosy hospitals, Government hospitals/health clinics, Mobile Units/Mobile clinics and Government dispensaries. These institutions are spread over the state. The quality of health care services offered by these institutions need to be further improved.

3. Government of Kerala have decided to accredit some hospitals with National Accreditation Board for Hospitals and Healthcare Providers (NABH) by Quality Council of India. More health care institutions will be included in the NABH accreditation programme at a later stage.

4. Government of Kerala have decided to improve the quality of services offered by all health care institutions in the State by introducing a Quality Assurance Programme in the State. Government, therefore, decided to introduce a new accreditation programme for health care institutions in the State. All Government health care institutions will be included in the Quality Assurance Programme. As an initial step NRHM will assist the implementation of the Quality Assurance Programme in selected institutions from each district. The aim of the State level accreditation programme is to provide the better patient care, health care quality improvement, patient safety, infection control, medication safety, facility safety and equity in health care. Private health care institutions will be included at a later stage on voluntary basis.

5. The Kerala Accreditation Standards for Hospitals are prepared for 4 different levels of hospitals which are Primary Health centre (PHC), Community Health centre (CHC), Taluk level Hospitals (THQH) and District level Hospitals including specialty and General Hospitals. The major

emphasis of Quality Assurance Programme is on sensitization of health care organization towards importance of quality health care services, involvement of staffs for improving the quality of patient service, development, review and implementation of policies and procedures for implementation of Quality Management System. The different committees will be formed at the health care institution for the development and implementation of policies and procedures in the institution. The Programme also includes training of all staffs in the institution as per requirement of Kerala Accreditation Standards, conducting patient and employee satisfaction survey, development and monitoring of the quality indicators, disaster management plan, infection control practices, implementation of patient rights and responsibilities, management of medication, facility management practices, incidence reporting system, hospital safety programme, patient information, inventory management, quality control, safety in diagnostics etc.

6. For the purpose of providing the accreditation to the health care institutions, an Accreditation Board is created with the following members.

Secretary, Health and Family Welfare Dept.  
State Mission Director, NRHM  
Director of Health Services  
Director of Medical Education

7. The Accreditation Board will provide accreditation to the health care institutions based on the assessment report and recommendation of the Quality Assurance Team. Accreditation Board also will approve the Kerala Accreditation Standards for Hospitals and any amendments there after. The Accreditation Board will change the constitution of the Technical Committee on Accreditation Standards, if required.

8. Quality Assurance Team of NRHM, which is implementing the process of preparation of Government hospitals for NABH accreditation, will also assist the process of preparation of hospitals for Kerala State Level Accreditation. Quality Assurance team has prepared a draft standard for the State level accreditation programme. Quality assurance team will incorporate the relevant suggestions of the Technical Committee on Accreditation Standards and finalize Kerala Accreditation Standards for Hospitals and forward it to Accreditation Board for approval. The structure of the Quality Assurance Team is given below.

State Programme Manager, NRHM  
Additional DHS (Medical), Directorate of Health Services  
Senior Consultant M&E (Monitoring, Evaluation and Quality Assurance)  
Director, State Public Health Laboratory  
Consultant QA (Quality Assurance)  
Regional Quality Assurance Officers  
Assistant Quality Assurance Officers.

9. Quality Assurance Team will check the internal assessment report and assessor's report against the standards. Members of the Quality Assurance Team will visit the health care organization, as and when necessary and submit the recommendation to the State Mission Director, NRHM through State Programme Manager, NRHM. State Mission Director, NRHM will forward the report to the Accreditation Board for granting accreditation.

10. For providing suggestions and comments for the finalization of accreditation standards and suggestions for amending the accreditation standards, a Technical Committee on Quality in Health Care is formed with the following members.

State Mission Director, NRHM  
 State Programme Manager, NRHM  
 Additional DHS (Planning), Directorate of Health Services  
 Dr. Zainab Zaidi, Assistant Director, Quality Council of India  
 Dr. S.K. Jawahar, Administrative Medical Officer, Sri Chithira  
 Thirunal Institute for Medical Sciences and Technology,  
 Thiruvananthapuram  
 District Medical Officer (Health), Thiruvananthapuram  
 Senior Consultant (M&E), NRHM  
 Dr. Sanjeev Singh, Medical Superintendent, Amrita Institute of  
 Medical Sciences & NABH Assessor

11. Kerala Accreditation Standards for Government Hospitals has been developed by Quality Assurance Team of NRHM. Accreditation Board will approve the accreditation standards prepared by the Quality Assurance Team. Amendments in the accreditation standards will be done by Accreditation Board from time to time based on the suggestions of the Technical Committee and recommendation of the Quality Assurance Team. Accreditation Standards for Private Health Care Institutions will be developed later.

12. Superintendent or Medical Officer in charge of the health care organization will be the implementing officer of the Accreditation programme. He/she will implement the accreditation standards in the hospitals. Quality Assurance Team of NRHM will assist the implementation of accreditation standards in the health care institutions.

13. After preparing the hospitals for accreditation, the Superintendent or Medical Officer in charge of the health care institutions will send the application for accreditation to State Mission Director NRHM, along with internal assessment report.

14. NRHM will provide assessor training to District Programme Manager (DPM), Reproductive and Child Health officers, selected medical officers from the Health Services Department and selected nurses from the health care institutions. NRHM appoints Assessor/ Assessment team who is responsible for assessment of healthcare organization. NRHM forwards the application form, documents, procedures, self assessment report to assessor prior to assessment. The assessment report will be forwarded to State Mission Director, NRHM.

15. State Mission Director, NRHM will forward the Assessment report to Quality Assurance Team of NRHM. Quality Assurance Team will check the report against the standards and will send report to health care institutions, if there are any non conformities to the standards. Quality Assurance Team will assist the health care institutions to correct the non conformities. If the conformities to the standards are less than 70%, the report will be sent to concerned institutions to correct the non conformities within a stipulated time. If the health care institution has conformities more than 70% of the standards, the assessment report along with the recommendation submitted to the State Mission Director, NRHM through State Programme Manager. State Mission Director, NRHM will forward the

report to the Accreditation Board for granting accreditation.

16. After getting approval of the Accreditation Board, NRHM will issue an accreditation certificate to the hospital with a validity of five years. The certificate has the name of the institutions, unique number and date of validity

17. The Accreditation Board will have the sole responsibility to cancel the accreditation, if there is any major reported deficiency in patient care and safety. The hospitals may apply for renewal of accreditation at least six months prior to the expiry of validity of accreditation for which reassessment will be conducted. Quality Assurance Team will conduct surveillance of the accredited hospitals periodically.

(By Order of the Governor),

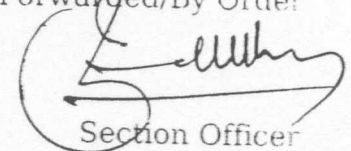
K.S.SRINIVAS  
Special Secretary to Govt.

To

The State Mission Director, NRHM, Thiruvananthapuram  
The Director of Health Services, Thiruvananthapuram  
The Director of Medical Education, Thiruvananthapuram  
✓ The State Programme Manager, NRHM, Thiruvananthapuram  
The Additional DHS (Planning), Thiruvananthapuram  
The Additional DHS (Medical), Thiruvananthapuram  
All District Medical Officers of Health  
All District Programme Managers of NRHM  
The Secretary General, Quality Council of India, IInd Floor, Institution of  
Engineers' Building, Bahadur Shah Safar Marg, New Delhi.  
The Director, Sri Chithira Thirunal Institute of Medical Sciences and  
Technology, Thiruvananthapuram

SF/OC

Forwarded/By Order

  
Section Officer