

Specialized Hospital (DGFP)

Chairperson: Superintendent/Director: 1

Member Secretary: Deputy Director/Senior Consultant/Junior Consultant: 1

Members:

- a. Senior consultant: 1
- b. Junior Consultant: 1
- c. Jr. Matron
- d. FWV: 1

Committee formation format

Name of hospital:

Division:

District:

Sl.No.	Name and designation	Position in the committee	Mobile Phone No	Email
1	Superintendent/ Director, Hospital	Chair Person		
2	Deputy Director/Snr. Consultant/Jnr-Consultant	Member Secretary		
3	Senior consultant: 1	Member		
4	Junior Consultant: 1	Member		
5	Jr. Matron	Member		
6	FWV: 1	Member		
7	Name of Focal person	Focal Person		

* Focal Person should be an active and dedicated person

District(MCWC)

Chairperson: MO (Clinic)-1

Member Secretary: MO (MCH-FP)-1

Members:

- a. FWV-2
- b. Store-keeper-1

Committee formation format

Name of hospital:

Division:

District:

Sl.No.	Name and designation	Position in the committee	Mobile Phone No	Email
1	MO-Clinic	Chair Person		
2	MO (MCH-FP)	Member Secretary		
3	Senior consultant: 1	Member		
4	FWV: 2	Member		
5	Store keeper	Member		
6	Name of focal person	Focal person		

* Focal Person should be an active and dedicated person

Terms of References for Quality Improvement Committee of MCWC

1. Implement QI strategy & Guidelines in MCWCs
2. Ensure attainment of the Standards for Quality of Care
3. Monitor and mentor Work Improvement teams (WITs) of MCWCI

-Support and ensure hospital administrator/managers/service providers to mentor, motivate and encourage quality improvement teams(WIT)

-Making monthly supervisory visits

-Ensure regular training and orientation of the WITs

-Ensure functioning of the WITs in MCWC

4. Regular reporting to higher level on QI activities and share feedback in the internal review meeting

-Monthly reporting to the District QIC/Div-QIC

-Sharing of report in internal review meeting

6. Periodic Review of the progress of QI activities

-Conduct monthly internal review meetings

-Set targets, roadmaps and site example for best practices

-Provide support for necessary corrections as per need

7. Support quality improvement process

-Organize yearly QI festival

-Recognize good performance on QI activities

8. View and assess key performance indicators of quality

-Encourage to follow national key indicator chart

-Identify champions as model to encourage others

9. Co-opt any member as per requirement

Modalities to conduct MCWC internal review meeting

- a. The MCWC Quality Improvement Committee will meet once in a month.
- b. The Member Secretary will issue meeting notice at least seven working days before the scheduled date of the meeting with the approval of the Chairperson.
- c. While every attempt should be made to ensure that the Chairperson is able to attend the meeting, however, in the absence of the Chair, the Member Secretary shall convene the meeting. Under such circumstances, the minutes of the meeting should be sent to the Chairperson for information and ratification
- d. Member Secretary will ensure the preparation of agenda notes, and action taken reports, which will be circulated in advance to all committee .
- e. An attendance by at least one third of the Committee members will constitute the quorum required for a valid meeting.
- f. Member Secretary will ensure follow-up actions with responsibilities and timelines for the same.