

Terms of Reference and Modalities to conduct meeting for Divisional Level Quality Improvement Committee

o Division Level

Terms of References for Division Quality Improvement Committee:

1. Implement QI strategy & Guidelines in all health facilities at divisional level and below
2. Ensure attainment of the Standards for Quality of Care by Public & Private Health Facilities in division
3. Monitor and mentor health facilities at divisional level
 - Necessary support for implementation of QI initiatives at divisional facilities
 - Support and ensure hospital administrator/managers/service providers to mentor motivate and encourage quality improvement teams
 - Monthly supervisory visits to divisional health facilities
 - Ensure regular training and orientation of the QI teams
 - Ensure functioning of the QI teams in health facilities
4. Specific mentoring of district and upazila level units
 - Conduct quarterly routine supervisory and monitoring visits to the district and upazila facilities
 - Provide necessary support to establish a functional mechanism of QI activities at the district and upazila facilities including training and orientations
 - Establish a regular reporting system from the district and upazila QI facilities to divisional level and necessary feedback
 - Quarterly divisional co-ordination meeting with district and upazila facility level committees
 - Ensure 'quality initiatives' as an agenda in district and upazila monthly meeting
5. Regular reporting to higher level on divisional update on QI activities and share feedback in the internal review meeting
 - Monthly reporting to the NQIC/ N-TFC
 - Upload reviewed monthly report at divisional health website
 - Sharing of report in internal review meeting as well as with district and upazila committees and other stakeholders
6. Periodic Review of the progress of QI activities
 - Conduct divisional quarterly co-ordination meetings with district and upazila committees
 - Conduct monthly internal review meetings
 - Set targets, roadmaps and site example for best practices
 - Review Quality scores attained by different categories of Public Health Facilities.
 - Provide support for necessary corrections as per need
7. Support quality improvement process
 - Organize yearly QI festival
 - Recognize good performance by the facilities 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 Divisional Co-ordination meeting for Division Quality Improvement Committee:

- a. The Divisional Quality Improvement Committee will arrange Divisional co-ordination meeting quarterly involving the district and upazila committees
- b. The Member Secretary will issue meeting notice at least 2 weeks before the scheduled date of meeting with the approval of the Chairperson/ Vice Chairperson. The district and upazila participants will be notified even earlier.
- c. While every attempt should be made to ensure that the Chairperson and/or the Vice-Chairperson are able to attend the meeting, however, in the absence of the Chair, the Member Secretary shall have the right to convene the meeting and conduct it according to the set agenda. Under such circumstances, the minutes of the meeting should be sent to all members before finalization.
- d. The Member Secretary will ensure the preparation of the agenda and notes for the meeting, minutes of the last meeting and Action Taken Report (ATR), which will also be circulated in advance to all committee members, at least seven days before the scheduled date for the meetings.
- 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.

Modalities to conduct Internal Review meeting for Division Quality Improvement Committee:

- a. The Divisional Quality Improvement Committee will meet once in every month.
- b. The Member Secretary will issue meeting notice at least 7 days before the scheduled date of meeting with the approval of the Chairperson/ Vice Chairperson.
- c. While every attempt should be made to ensure that the Chairperson and/or the Vice-Chairperson are able to attend the meeting, however, in the absence of the Chair, the Member Secretary shall have the right to convene the meeting and conduct it according to the set agenda. Under such circumstances, the minutes of the meeting should be sent to all members before finalization.
- d. The Member Secretary will ensure the preparation of the agenda and notes for the meeting, minutes of the last meeting and Action Taken Report (ATR), which will also be circulated in advance to all committee members, at least seven days before the scheduled date for the meetings.
- 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.

○ **Facility Level**

Quality Improvement Committee at Specialized hospital (Public & Private)

Terms of References for Specialized Hospital Quality Improvement Committee:

1. Ensure adherence to the clinical protocols & quality standards:
Through regular internal assessments, audits, reviews etc the hospital QI committee members should ensure that the protocols, guideline & standards set are being met. Corrective action

- plans should be initiated for identified gaps.
2. Regular monthly reporting to the NQIC/QIS and sharing of feedback of report in internal review meeting
 3. Ensure implementation of QI strategy & guidelines at hospitals to attain quality of care
 4. Monitoring and mentoring QI teams
 - Regular inspection, review of QI activities and planning for continuous improvement-
 - Provide support for activities of quality improvement teams
 - Ensure regular training and orientation of the QI teams with support from National Task force
 - Ensure interdepartmental coordination through liaison with various departments within the facility for effective implementation of QI activities.
 5. Periodic Review of the progress of QI activities:
 - Conduct monthly review meetings.
 - Set targets, roadmaps and site example for best practices
 - Review Quality scores attained by teams
 - Provide support for necessary corrections as per need
 6. Support quality improvement process:
 - Organize yearly QI festival
 - Recognize good performance by the facilities on QI activities
 7. View key performance indicators of quality:
 - Encourage to follow national key indicator chart
 - Develop and maintain facility level indicators chart
 - Identify champions as model to encourage others
 8. Co-opt any member as per requirement

Modalities to conduct monthly internal review meeting for Specialized Hospital Quality Improvement Committee:

- a. Once the Specialized hospital (facility) QI committee is formed, areas for an initial assessment need to be identified in the first meeting.
- b. For achieving the standards, the committee will undertake the process of filling the check list, scoring the measurable indicators, summing up area wise and services wise gaps.
- c. Assessment to be carried out and based on its findings follows up actions to be taken.
- d. Monitoring of the follow up actions has to be done in the subsequent meetings. A regular monthly meeting will be conducted
- e. Assessments should be followed by time bound action plans along with person responsible for each action shall be prepared.
- f. Facility in-charge and hospital manager should do daily rounds to supervise the QI activities and sustain the motivational level of the staff.

Quality Improvement Committee at Medical College hospital

Terms of References for Quality Improvement Committee at Medical College Hospital:

1. Ensure adherence to the clinical protocols & quality standards:
Through regular internal assessments, audits, reviews etc the hospital QI committee members should ensure that the protocols, guideline & standards set are being met. Corrective action

- plans should be initiated for identified gaps.
2. Regular monthly reporting to the NQIC/QIS and sharing of feedback of report in internal review meeting
 3. Ensure implementation of QI strategy & guidelines at hospitals to attain quality of care
 4. Monitoring and mentoring QI teams
 - Regular inspection, review of QI activities and planning for continuous improvement
 - Provide support for activities of quality improvement teams
 - Ensure regular training and orientation of the QI teams with support from National Task force
 - Ensure interdepartmental coordination through liaison with various departments within the facility for effective implementation of QI activities.
 5. Periodic Review of the progress of QI activities:
 - Conduct monthly review meetings.
 - Set targets, roadmaps and site example for best practices
 - Review Quality scores attained by teams
 - Provide support for necessary corrections as per need
1. Support quality improvement process:
 - Organize yearly QI festival
 - Recognize good performance by the facilities on QI activities
 2. View key performance indicators of quality:
 - Encourage to follow national key indicator chart
 - Develop and maintain facility level indicators chart
 - Identify champions as model to encourage others
 3. Co-opt any member as per requirement

Modalities to conduct monthly internal review meeting for Quality Improvement Committee at Medical College Hospital:

- a. Once the Medical College QI committee is formed, areas for an initial assessment need to be identified in the first meeting.
- b. For achieving the standards, the committee will undertake the process of filling the check list, scoring the measurable indicators, summing up area wise and services wise gaps.
- c. Assessment to be carried out and based on its findings follows up actions to be taken.
- d. Monitoring of the follow up actions has to be done in the subsequent meetings.
- e. Assessments should be followed by time bound action plans along with person responsible for each action shall be prepared.
- f. Facility in-charge and hospital manager should do daily rounds to supervise the QI activities and sustain the motivational level of the staff.