

**Exhibit - C**

<b>Audit Report</b> : Performance Audit Report on Delivery of OPD Services at JDWNRH (AIN: 14724)				
<b>Date of Issue</b> : 22 <sup>nd</sup> August 2017				
<b>Name of Agency</b> : Jigme Dorji Wangchuck National Referral Hospital				
<b>No. of Review</b> : 3 <sup>rd</sup> Review				
<b>Recommendations</b>		<b>RAA's Last Comments</b>	<b>Action Taken Submitted by JDWNRH</b>	<b>RAA's Further Comments</b>
<b>4.1</b>	<p><b>JDWNRH should formulate strategic plan</b></p> <p>The healthcare system in the country prior to granting autonomy to the JDWNRH was found inept owing to unclear responsibilities and accountabilities within the Departments/ Divisions/ Units under the MoH. The RAA observed that the JDWNRH does not have a strategic focus and direction. It has not formulated its strategic and operational plans. The Hospital does not have a mechanism instituted to implement its 11<sup>th</sup> FYP activities.</p> <p>Therefore, JDWNRH should formulate strategic and operational plans to enhance efficient delivery of healthcare services.</p>	<p><b>Partially Implemented</b></p> <p>Since, the initiatives and arrangements are still ongoing, towards formulation of strategic Plan, the recommendation is remains as Partially implemented.</p>	<p>The strategic plan is final draft. Strategic plan is being prepared with help of WHO. The plan was prepared upon consultation with stakeholders. Final draft will be submitted to cabinet for the approval. JDWNRH would be grateful, if RAA could consider this recommendation as implemented (Draft strategic plan is attached as annexure-B)</p>	<p><b>Partially Implemented</b></p> <p>While the RAA noted the formulation of the strategic plan which is in the final draft, the fact is that the final draft is yet to be submitted to the cabinet for approval.</p> <p>Therefore, the recommendation shall remain as partially implemented until it is approved by the cabinet and formally operationalized.</p>
<b>4.6</b>	<p><b>JDWNRH should institute Clinical Audit</b></p> <p>While there are no standard time requirements for the patient</p>	<p><b>Partially Implemented</b></p> <p>The RAA has noted that the clinical audit could not be carried</p>	<p>Following clinical auditing has been competed:</p> <ol style="list-style-type: none"> <li>1. Department of nursing administration (Standard based audit)</li> </ol>	<p><b>Implemented</b></p> <p>It was noted that with the development more than 200 SOPs by various clinical and administrative units, the</p>

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<p>consultation, it was observed that longer queue of patients availing the specialist services had resulted in devoting lesser consultation time and not properly profiling and recording the history of patients. There were instances noted in the endoscopy unit, where patients had to wait for 3 to 46 days to avail the services.</p> <p>In this regard, the hospital management should institute clinical audits to enhance measurement of clinical activities and outcomes. It would provide opportunities to confirm established processes resulting on expected outcome, but more importantly, it would highlight potential problem areas within the hospital.</p> <p>Therefore, the Quality Assurance Unit should also include clinical audits in order to capture information about day to day work of clinical practice, identify problems, consider and make changes</p>		<p>out in the absence of SOPs for compliance and reference.</p> <p>Off late 226 SOPs has been developed however it is yet to be finalized and start clinical auditing.</p> <p>Until such action is taken, the recommendation shall remain as partially implemented.</p>	<p>2. Department of obstetrics &amp; gynecology (significant event audit)</p> <p>3. Department of surgical (surgical audit)</p> <p>Since clinical auditing is continuous process and scopes are so broad, JDWNRH would like to request RAA to consider this recommendation as implemented (supporting documents attached)</p>	<p>QSAD had carried out three clinical audits in four different departments in 2018 besides the regular clinical audits. However, the QSAD should come up with the follow up reports for clinical audit observations and recommendations for compliance and implementation. Further, the JDWNRH should ensure that such activities are carried out continuously.</p> <p>In view of the above the recommendation is treated as implemented.</p>

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	and monitor progress towards improved patient outcome.			
<b>4.9</b>	<p><b>JDWNRH should develop robust patient information system to enhance informed decision making</b></p> <p>In absence of Hospital Information System, the details of services provided and details of patients were not recorded. Records related to appointment and token were maintained manually without much ease of tracking and monitoring. A systematic patient information system would benefit doctors to efficiently examine follow-up patients. The system would provide all the details of the patient instantly to the doctors, provide quality time and avoid extensive paper works. Therefore, as an apex healthcare institution in the country, the need to develop robust patient information system was found necessary for ensuring quality care services to the patients.</p>	<p><b>Partially Implemented</b></p> <p>The recommendation shall remain as Partially implemented until the system, ePIS is fully developed and operationalized.</p>	<p>It is included in flagship program of 12<sup>th</sup> FYP. Expression of interest has been floated by the Ministry of Health. Since it is nationwide program, JDWNRH can't do much to expedite such process. JDWNRH would be grateful if RAA could waive off this recommendation.</p>	<p><b>Partially Implemented</b></p> <p>The response has been noted. However, since the ToR for procurement, installation and implementation of ePIS were jointly developed by MoH, DITT and JDWNRH, the RAA would recommend the JDWRNH to closely work with the Ministry of Health as per the action plan. Therefore, the status of the recommendation shall remain as partially implemented until the system is fully developed and operationalized.</p>