

# 5003 : CQI Tools

Quality Improvement Secretariat

[www.qis.gov.bd](http://www.qis.gov.bd)

# Tools for CQI

## Clinical service delivery & Patient contacts area

### Reception & Waiting area:

Areas	Standards	Indicators (Output)	Remarks
Reception area	An organized reception available	A reception desk is available A trained person in place all the time during office hour for communication	
Waiting area	Spacious & ventilated waiting area available	Ventilated environment on the working area The layout of the waiting area is well organized Bathroom facility (Male & female toilet separate) is ensured	
	Adequate seating facilities available with proper seating order	A sufficient number of seating facilities is available at the working area Seating facilities are arranged in order	

### Outpatient departments

Areas	Standards	Indicators (Output)	Remarks
OPD	Standard operating procedure (SOP) for OPD	SOP is maintained properly for OPD services SOP monitoring tools in place	
	Every consultation room properly mark	Name & number are used for identification	
	Examination beds appropriately arranged	Examination beds are screened for privacy Beds have clean mattress and linen	
	The sterility maintained in dressing room, injection room etc	A hand wash protocol is available Wash basin, soap & hand rub clean towel available Surgical gloves are available with proper size Sterilized instruments Equipment are kept in cupboard with a written indication of sterility	
	Proper referral system	Patient referral tools available List of Referral hospital for upward referral Proper communication for the referral ensured	
	Survey to conduct waiting time	A waiting time survey is conducted and analyzed monthly	
Emergency care unit	Standard Operating Procedure for Emergency dept.	SOP for emergency tools available	
	An emergency care unit functioning 24 hours with essential equipment and drugs	The Essential equipment is kept in accessible place in working order <ul style="list-style-type: none"> <li>• Emergency tray</li> <li>• ECG &amp; Defibrillator</li> <li>• Nebulising machine</li> <li>• Sucker machine</li> <li>• Ambu bag</li> <li>• Laryngoscope</li> <li>• ET tube</li> </ul>	

		Emergency protocol is available Checklist for drugs & equipment are available	
	A disaster prepared mess protocol	Disaster management tools available	
	Proper referral system	Referral tools are available List of Referral hospital for upward referral	

### Responsiveness

Areas	Standards	Indicators (Output)	Remarks
<b>Overall Responsiveness</b>	An information desk for patient & relatives	An information desk with trained staff Information is dispensed in an appropriate way	
	Safe drinking water	Safe water is available all time for patients with a dispenser/ container	
	Appointment system	A mechanism is available for patient appointment system	MIS, DGHS will introduce it
	Suggestion Box	Suggestion Box is available Suggestions are reviewed in every month & action taken A record of action taken available	
<b>Responsive to in-patients</b>	Bed linen changed properly	<ul style="list-style-type: none"> <li>Bed linen is changed in the following occasion</li> <li>At every discharge of patient</li> <li>Where there is blood spot and bloody secretarion</li> <li>When a reasonable request by the patient</li> </ul>	
	Food provided in proper manner	<ul style="list-style-type: none"> <li>For food transportation a closed container is used</li> <li>Food is distributed in a clean environment</li> </ul>	
	Patient trolleys with mattresses	Patient trolley provided with comfortable manners ensured	
	Separate dining area	A separate dining area ensured in each ward	
	Patient changing room	A patient changing place / space available	
<b>Responsiveness to specialized groups</b>	Access to disable person & senior citizen	Priority counter for senior / disable people Special access at stairways is available Separate toilet	

### IPD Services:

Areas	Standards	Indicators (Output)	Remarks
<b>General Ward</b>	Updated summary of statistics displayed in the ward	Display of the statistics of the last year ensured by: <ul style="list-style-type: none"> <li>Number of beds</li> <li>Number of admission</li> <li>Number of discharge</li> <li>Bed occupancy rate</li> <li>Number of Referral (upward &amp; Downward)</li> </ul>	

		<ul style="list-style-type: none"> <li>• Number of surgery categories</li> <li>• Number of deliveries</li> </ul>	
	Standard Operating Procedure (SOP) for IPD	SOP tools for IPD available and displayed with checklist monitoring tools	
	An Emergency tray systematically arranged	An emergency tray is available with necessary drug list & equipments A officer is responsible for maintaining this endured	
	Separate Examination room	A separate examination bed & room available The examination is secured with privacy ensured	
	Nursing station arranged properly to meet emergency	Ensured the nurses observation for acute & emergency patient who require close monitoring from nursing station all time	
	Bed Head Ticket properly written	The information are ensured Date & time written in every BHT Patient information Drug, fluid temperature chart Diagnosis	
	Ward Rounds conducted twice a day	Ensured ward round twice a day Observation written in the BHT during round	
	Handover and taking over properly done	Handover & take over register is place Patient details written with signature	
	System of informing Doctors during emergency	A list of on call doctor is updated with contact number is available On call register is updated Intercom & telephone is available	
	Arrangement of Discharge & Referral is adequate	A printed discharge & Referral check list is available Vital information is included	
	Relevant Register maintained & updated	The following regist4er are available Admission & Discharge Register Referral Register Hand over Register Medicine Register Instrument Register OT Register Incident Register Death register	
	Death Register & Death audit form	Death recorded in register & audit form completed	
	Updated cleaning checklist	Cleaning checklist is displayed and made visible to all staff	
	Waste Management	Waste segregation ensured by using the olor coded bin A person should be selected for waste management	
<b>Intensive care unit</b>	A functioning intensive care unit with essential equipment	A 24 hour specialist coverage is ensured Medical officer and others are assigned properly The following equipments are equipped properly <ul style="list-style-type: none"> <li>• ECG &amp; defibrillator</li> </ul>	

		<ul style="list-style-type: none"> <li>• Nebulising Machine</li> <li>• Ventilator</li> <li>• Pulse oxymeter</li> <li>• Sucker machine</li> <li>• Laryngoscope</li> <li>• Tubes</li> <li>• Ventilators</li> <li>• Blood gas analyzer</li> <li>• ICU beds</li> <li>• Medical gases</li> </ul> <p>A emergency trail is available with necessary equipments, drugs and others A strong communication mechanism for emergency attending doctor A checklist for emergency tray ICU register</p>	
	Handover and taking over properly done	Handover & take over register in place Patient details written with signature	
<b>Operating theater</b>	Standard Operating Procedure of OT	SOP for OT in place Monitoring check list for SOP is in place	
	An updated summary of statistics displayed in OT	Statistical summery of last year displayed Number of major and minor surgery	
	Proper OT equipment / Instruments	A complete list of OT equipment and instrument in place	
	Safe surgery check list	Safe surgery check list displayed A coordinator for completing the safe surgery check list The check list is properly filled up	
	Post operative room	A post operative room is available Essential equipment & instrument ensured in POT	
	Relevant register	OT register in place & properly maintained	
	The theater schedule	The theater schedule for a week is made available to hospital staff Guideline for emergency surgery are available	
<b>Blood Bank</b>	A 24 hour blood bank service available	A blood bank is open for 24 hour and functioning Urgent grouping & cross matching ensured	
	Trained staff available	Doctors, MT and other support staff received SBT training	
	Sufficient blood and blood product stock	Availability of blood stock ensured	
	SOP of blood bank	SOP in place	
	Blood transfusion standard	Transfusion standard in place	
	A validation mechanism for blood transfusion services	Standardized compatibility report is available	
	Refrigerator temperature maintained	Temperature chart is maintained	

<b>Labour Room</b>	SOP of Labour Room	Labour Room SOP in Place	
	The sterility maintain in the Labourroom	Sterility of instrument ensured A sterility register is maintained Daily & weekly cleaning practice recorded in the register	
	Essential facilities for resuscitation of newborns	A checklist for essential item for resuscitation of new born ensured A functional warmer is available SOP of newborn management in place	

#### Diagnosics Service

<b>Areas</b>	<b>Standards</b>	<b>Indicators (Output)</b>	<b>Remarks</b>
<b>Laboratory</b>	24 hour laboratory service	24 Hour laboratory service are available for inpatients	
	List of Essential laboratory equipment functional	Essential equipment list in place	
	Standard operating procedure	SOP in place	
	Laboratory standards available	Monitoring check list for following laboratory standard	
	Mechanism to ensure quick delivery of laboratory report	Register available which will be indicate ordering of investigation Routine sample should be send within 10 am Delivery report within 3 pm	
	Urgent request entertained	A mechanism to attend urgent request is in place	
	Internal & external quality control measures	Internal & external quality control mechanism established list & Ext Quality control register is valuable SOP is available	

#### Radiology

<b>Areas</b>	<b>Standards</b>	<b>Indicators (Output)</b>	<b>Remarks</b>
<b>Radiology</b>	24 hour radiology service	24 hour radiology service are available for inpatients	
	List of Essential Radiology equipment functional	Essential equipment list in place	
	Standard Operating procedure	SOP in place	
	Radiology standards available	Monitoring check list for following radiology standard	
	Mechanism to ensure quick delivery of radiology report	Register available which will be indicate ordering of investigation	
	Urgent request entertained	A mechanism to attend urgent request is in place	
	Radiation protection measure taken accordingly AEC	Document used by Atomic energy commission Protective gear is available	

### Other Diagnostic Services

Areas	Standards	Indicators (Output)	Remarks
ECG	24 hour ECG service	24 hour ECG service are available for inpatients Duty roaster available for MT performing ECG	
	Privacy of the patient	Patient privacy ensured by screen and female attendant for female patient	
USG	24 hour USG service	24 hour USG services are available for inpatient Duty roster available for sinologists Patient privacy ensured by screen and female attendant for female patient	

### Infection Control

Areas	Standards	Indicators (Output)	Remarks
Infection control management	Infection control programme available	An infection prevention committee in place Infection control protocol in place Infection control register in place	
	Ensure hand wash	Hand wash instruction are displayed at all wards Hand rub available Sink are functioning for hand wash	

### Waste Management

Areas	Standards	Indicators (Output)	Remarks
Waste Management	Medical Waste adequately displayed	Four types of waste are separated by color codes <ul style="list-style-type: none"> <li>• General waste</li> <li>• Sharp</li> <li>• Infected</li> <li>• Plastic</li> </ul> A color coding chart is available Waste collector using protective device Niddle crusher is present Waste bins are available according to color code	
	Hazardous waste disposed according to national standard	Protocol is available for hazardous waste disposal	

### Medical Record

Areas	Standards	Indicators (Output)	Remarks
Medical Record Management	Bed Head Ticket (BHT) handed over to the medical record room on time	Completed BHT with complete diagnosis in MR BHT are arranged in shelves according to the year A qualified MRO is assigned	

### Health Education Activities

Areas	Standards	Indicators (Output)	Remarks
Health Education	A functional health education unit	Monthly health education programme in place HE monitoring check list in place Monthly HE report in place Audio Visual equipment are available	

### Leadership & Management

Areas	Standards	Indicators (Output)	Remarks
Leadership Quality	Vision and Mission of the hospital	The vision & mission of the hospital are displayed in a visible place Hospital staff are aware of vision & mission	
	Strategic plan of Hospital service management	A document of hospital strategic plan is available	
Public relation & community mobilization	A mechanism to improve community participation	An annual plan is available Community activities are recorded	
Human Resource Management	Staff training conducted regularly	Annual training plan in place A training coordinator appointed	
	Job description	Staff job description is available	
	Performance Appraisal	Performance appraisal plan is available PA done regularly	
	Motivation	Staff motivation plan available Regular meeting minute(monthly)	
	Ethical committee	An ethical committee in place	

### Kitchen Management

Areas	Standards	Indicators (Output)	Remarks
Kitchen Management	Kitchen Maintained in hygienic environment	SOP of kitchen is available No visible dirt is present Medical examination done of the kitchen staff every three month Food chart displayed A log book with comment for supervision Apron, mask & other gear of kitchen staff are available	



**Utility Service**

<b>Areas</b>	<b>Standards</b>	<b>Indicators (Output)</b>	<b>Remarks</b>
<b>Utility Service</b>	Communication facility available	A telephone exchange is functional Telephone register book available	
	Ambulance maintained properly	The following form available in Ambulance Log book Daily running chart The vehicle inventory	
	Maintenance plan for building, equipment & others	A maintenance plan is available	

**Performance Review**

<b>Areas</b>	<b>Standards</b>	<b>Indicators (Output)</b>	<b>Remarks</b>
<b>PA</b>	Staff meeting held monthly	Meeting minute of monthly staff meeting	
	Death Audit	Death audit form available Death audit committee in place Monthly death audit report in place	
	Medical & Clinical Audit	Medial audit committee in place Audit report disseminated regularly	

**Patient Safety**

<b>Areas</b>	<b>Standards</b>	<b>Indicators (Output)</b>	<b>Remarks</b>
<b>Patient safety programme</b>	Patient safety mechanism available	Risk Management protocol Risj management committee Incident report register	

