

Health Facility Quality Improvement Module for Health Services Strengthening



Government of Nepal
Ministry of Health
Department of Health Services
Management Division

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Health Facility Quality Improvement Module for Health Services Strengthening User's Manual



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Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

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रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भनेको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धि गर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ, भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी
सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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महाशाखा

पत्र संख्या:-

चलानी नम्बर:-



पवली, टेक
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ। तर उपलब्धीको वावजूद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ। केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ। यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रूपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रूपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामग्री तयार गरेको छ। यस सामग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिलेछ भन्ने विश्वास लिएको छ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामग्रीलाई निरन्तर रूपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ। यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु। यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पुर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ। यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
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व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेकु
काठमाडौं, नेपाल।

मिति : २०७४।६।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ। यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ। सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न। जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालाई महत्व दिएको छ। यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ। गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ। यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु। अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुझाव दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हार्दिक धन्यवाद दिन चाहान्छु। प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहान्छु।


डा.भीमसिंह तिर्करी
निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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व्यवस्थापन

पत्र संख्या:-

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मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरुबाट दिइने सेवाहरु गुणस्तरीय हुन नसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरुको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरुमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीर्घो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागूगरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरु तयार गरिएका छन ।

यी सामाग्रीहरु नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरुको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरुका कार्यसम्पादन मापदण्डहरु राष्ट्रिय चिकित्सा मापदण्डहरु, प्रोटोकलहरु, तालिम सामग्रीहरु, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तराष्ट्रिय संस्थाहरुको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/SuaaharaI), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic)जस्ता विगतमा प्रयोग भएका टुलहरुको आधारमा तयार पारिएका यी सामाग्रीहरुलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरुका टुलहरुसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरुले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालार्ई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरु पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ। यी टुलहरुले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदानगर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याडकन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरुलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरुले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदानगर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

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Abbreviations

ANC	Antenatal Care
ART	Anti-Retroviral Therapy
COC	Combined Oral Contraceptive
DMPA	Depot Medroxyprogesterone Acetate
FP	Family Planning
HF	Health Facility
IUCD	Intrauterine Contraceptive Device
ML/LA	Minilaparotomy under Local Anaesthesia
NSV	No-Scalpel Vasectomy
PMTCT	Prevention of Mother to Child Transmission
QI	Quality Improvement
QAWC	Quality Assurance Working Committee

Introduction

Improving quality of care has been a major area of focus for the Ministry of Health. To that end, the Health Facility Development and Quality Section, Management Division, Department of Health Services, with the support of various agencies, has engaged in a number of efforts aimed at reinforcing skills among health care providers. It was in this context that the Quality Improvement (QI) modules were developed.

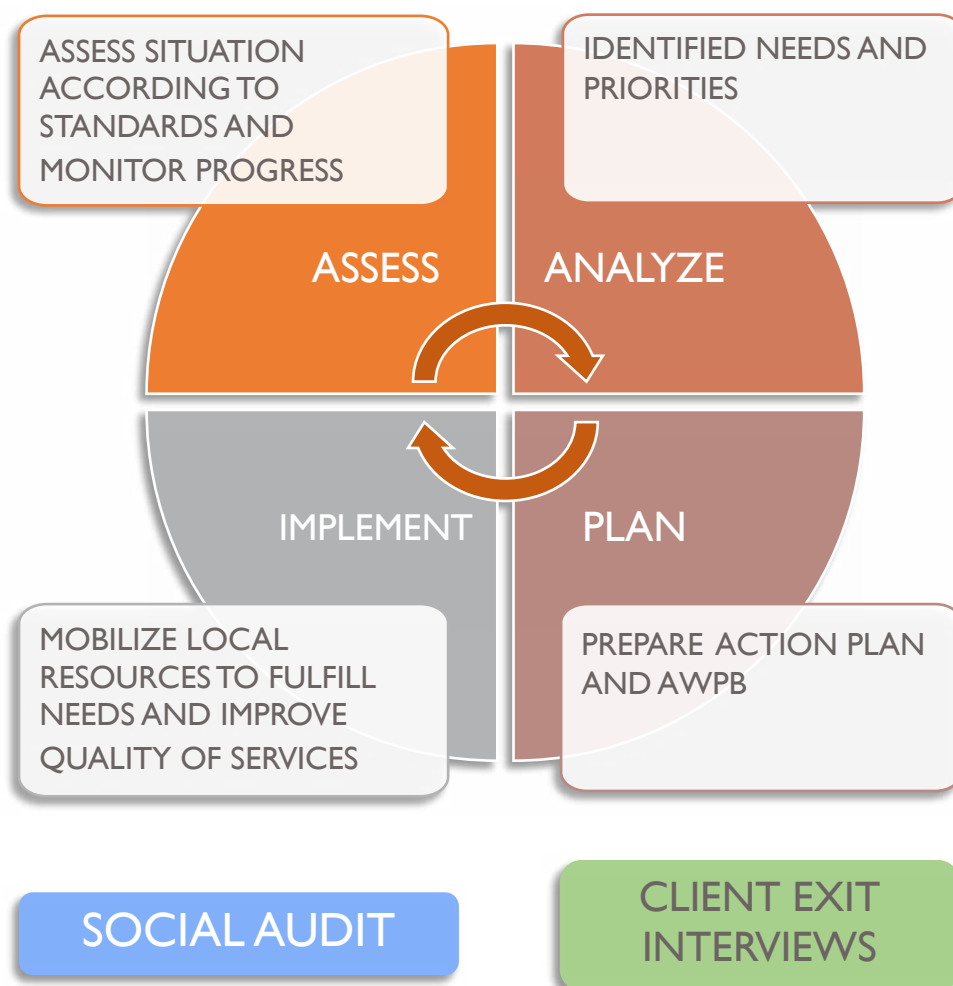
These QI modules are based on national medical standards and protocols, updated training packages, recommendations from international agencies including the WHO and existing QI modules. A series of workshops and consultation meetings with experts from government and non-government organizations were organized to develop, compile, update and adapt these modules to Nepal.

The purpose of the QI modules is to strengthen health services by ensuring, sustaining and standardizing the delivery of high quality health services. This set of QI modules includes:

1. Management
2. Service Readiness
3. Family Planning Services
4. Maternal and Newborn Health Services
5. Child Health Services
6. Infectious Disease Services
7. Logistics and Laboratory Services

Summary of the Quality Improvement Cycle

Quality improvement is a continuous process, consisting of four steps: 1) Assessment 2) Analysis 3) Planning 4) Implementation. The health facility should conduct a quality self-assessment every four months, using the QI modules to determine whether health services meet national and international standards. Following the assessment of health service quality, the next step is to identify and analyze needs: simple issues should be solved immediately while complex issues should be sorted by order of importance and included in an action plan. Client exit interviews and social audits will help identify problems which can then be included in the work plan to improve service quality. Problems which cannot be solved by the QI-team should be solved in coordination with the supervising body or municipality. To draft an annual budget and plan, quality-related information and activities should be incorporated into the Municipality Health Situation Analysis Report. Once the annual budget and plan is approved, activities should be implemented accordingly. The final step is to assess and monitor progress. This cycle should repeat in every four months.



Quality Improvement Modules for Health Services

This set is a compilation of QI modules where each tool is a series of checklists corresponding to performance standards and verification criteria that allow service providers to identify gaps in quality of service delivery within their facility and prepare action plans to address those gaps.

These modules not only allow service providers to assess, analyze, and identify gaps and find solutions by themselves, but also empower them to improve quality of care.

Table 1. QI Modules

Area	Modules	Total number of standards
Management	MG01: Governance and Human Resource Management	6
	MG02: Financial Management	4
	MG03: Information Management	4
	MG04: Quality Management	7
Service Readiness	SR01: Infrastructure	5
	SR02: Basic Amenities	4
	SR03: Commodities	9
	SR04: Clinical Management	5
	SR05: Infection Prevention and Healthcare Waste Management	14
Family Planning Services	FP 01: Counselling	6
	FP 02: COCs & DMPAs	6
	FP 03: Implants	11
	FP 04 : IUCDs	10
	FP 05: Non-Scalpel Vasectomy	9
	FP 06: Minilap under local anesthesia	13
	FP 07: Emergency Contraceptives	3
Maternal and Newborn Services	MN 01: Focused ANC	11
	MN 02: Complications During Pregnancy	15
	MN 03: Normal Delivery and Immediate Newborn Care	27
	MN 04: Complications During Labor and Childbirth	26
	MN 05: Postpartum care	11
	MN 06: Newborn Care	11
Child Health Services	CH 01: Growth monitoring	10
	CH 02: Care of Sick Newborns and Young Infants (up to 2 months)	8
	CH 03: Care of sick child (2 months to 5 years)	15
	CH 04: Immunization	5

Area	Modules	Total number of standards
Infectious Disease Services	ID 01: Malaria Case Management	9
	ID 02: TB Case Management	13
	ID 03: ART services	10
	ID 04: PMTCT services	9
Logistics and Laboratory Services	LM 01: Logistic Management for District/rural/urban municipality	10
	LM 02: Logistic Management for Health Facility	7
	LB 01: Laboratory services	10
Total		323

These QI modules have various uses as listed below:

- To allow service providers to conduct self-assessments of health service delivery at their own facility
- To be used as a job aid at health facilities to improve quality of health services and performance of service providers
- To help track quality of health services over time, internally and through external assessments
- To ensure compliance with national standards, protocols and guidelines

Assessment

Self-assessment

Health facility staff or service providers conduct a self-assessment of the services provided by the facility using the QI modules. Through this self-assessment process, the service provider will be able to identify particular gaps affecting quality of service delivery. The QI modules guide them to assess their services easily. If not all standards are met, health facility staff can develop an action plan to meet the required standards.

External assessment

A qualified person other than someone working at a particular health facility (such as QAWC members, supervisors or other assessors e.g., from TA agencies) can also use these modules to carry out external assessments of service quality and provide feedback based on the findings. The first assessment by clinical coach/mentor can be used as an external assessment.

Job Aid

All health service providers at the health facility can use the modules as a job aid to assist them in preparing and providing health services. The modules help guide health staff and management to attain what is required for quality service delivery. Staff can self-assess or peer assess their colleagues in a supportive manner.

Monitoring

Internal and external teams can use the standards to monitor performance and can record adherence to a particular standard as a way to track progress. Repeated monitoring can show changes in quality over time. Measurable monitoring information can assist health staff in advocating for further improvements.

The most important element of the HF QI system is addressing the gaps identified during the assessment. Thus, in order to monitor improvements in quality of care, follow-up QI assessments are conducted. As both internal and external teams use the same modules, it helps in comparing and validating results, as well.

Supervision

Supervisors within and external to the municipalities can use the standards to supervise and support the service providers. When a standard is not being met, supervisors can discuss with the service providers where the gaps are and prepare action plans for filling the gaps. The supervisor can use the results of the gap analysis to further supervise and follow up.

Reporting

Within the health facility, the modules can be helpful for measuring performance. Across health facilities, performance can be reported and aggregated for comparison, particularly by higher authorities. This information can describe program activities and achievements over time.

Compliance with standards or quality of care is achieved when at least 80 percent of performance standards are met.

Assessing Quality of Care using QI Modules

QI modules are used to improve quality of care and will help to:

- Establish a desired level of performance for all health facilities that can be measured objectively
- Measure actual performance during a baseline (or first) assessment as well as follow-up assessment during internal monitoring and external assessment
- Allow health service providers to objectively calculate performance and identify gaps between actual and desired performance.

The first column of the QI modules lists **performance standards**. Each standard is objectively measurable and considered essential to achieving overall performance. Generally, a performance standard is a measurable indicator that focuses on the desired level of performance. It often builds on and supports existing national and/or state standards and guidelines. Most importantly, performance standards show providers and managers the areas of improvement for a particular health service.

The second column is the **definition of the standard**, also referred to as *verification criteria*. Each performance standard has several verification criteria that must be achieved in order to meet the standard. While this level of detail may seem excessive, verification criteria ensure that everyone who uses the checklist assesses performance of the standard in the same manner and maintains consistency in the way services are provided.

The third column is used to mark whether every single verification criteria within a standard has been met or not. If the criteria is met, 'Y' is written to mean YES; if it is not met, 'N' is written to denote NO. Not Applicable ('NA') is marked when the specific verification criteria is not relevant to the particular health facility. Each and every verification criteria must be assessed and marked.

The detailed verification criteria for each performance standard allows users to understand what is needed to meet the performance standard.

Using and scoring QI modules

The modules are to be used for self-assessments while services are being delivered by oneself or by a colleague. While delivering health services, the user fills in the boxes for each performance standard and its verification criteria. If all the criteria are met, the standard is achieved. To achieve one point, all criteria of the standard should be met. If even one of the listed criteria is not met, the standard has not been achieved in its entirety and thus no point is achieved. An example is given in Table 2, below.

Table 2: Using and Scoring QI modules

Performance standard	Verification criteria	Self-Assessment			External Assessment	
		1	2	3	1	2
The health facility has adequate functioning basic amenities	• Regular water supply (Grid or Solar)	Y	Y			
	• Running water source in facility premises	Y	Y			
	• Telephone	Y	Y			
	• Refrigerator	N	Y			
	• Emergency transport (stretcher, bicycle, ambulance,)	Y	Y			
Score: All “Yes”=1 point; Any “No”=0 points		0	1			

After scoring for all the verification criteria, all standards in a tool are summed. For example, the Infection Prevention & Health Care Waste Management tool has 14 performance standards; if a health facility has successfully achieved 7 standards out of the 14, then the score achieved is 50%. Health facility staff can then use the modules to determine which verification criteria were not met and identify the gap/problem. Based on the findings, an action plan is prepared to address the identified gaps. We suggest regular review of the action plan which will be helpful in meeting all the standards

Score:
If All “Yes” or “NA” = 1
If Any “No” = 0

A qualified person other than a service provider from the health facility can also use these modules to conduct internal monitoring, external monitoring and external assessments. Separate columns under the title “external assessment” are provided for scoring during supportive supervision and external assessments. The scoring system for supportive supervision and external assessments are the same as for self-assessments.

Process of completing QI Modules and summary form

The following activities are essential to conducting an assessment of health services using the QI modules:

- Take the time to first review the tool during a QI team meeting before using it. This will help focus on the key points and the specific details of the verification criteria for each standard
- Always remember to mark or score each verification criteria based on what is actually seen and observed at the time of assessment. The purpose of these standards is to assess actual performance—not knowledge of service providers or managers
- Observe and score each verification criteria under each standard.
- For self-assessments, score in the boxes in first, second and third columns corresponding to the particular verification criteria assessed. Be sure to fill the first box in each assessment. For external assessments, score the boxes in the fourth and fifth columns corresponding to the particular verification criteria assessed

- Do not leave any space next to verification criteria blank. If it is not observed, write NA and specify the reasons in the comment space. In the comment space, write a brief summary of gaps and its possible causes
- Note that some clients may not have all the conditions listed in a particular tool during a QI assessment. Some examples :
 - For a client receiving IUCD insertion services, QI assessment for IUCD removal is not possible. Service delivery for IUCD removal should be assessed for another client receiving removal services
 - A child with ARI may not have diarrhea, so assessment for diarrhea is not possible. A child with diarrhea needs to be assessed for service delivery of diarrhea management
 - Assessment of breech delivery is not possible for a woman with a normal vaginal delivery. Another case with breech delivery needs to be observed to conduct assessment of breech delivery.
- At the end of every tool there is a small table that is used to compile results for each area
- To score all of the standards and fill in this summary table for each tool, first review the individual standards to be sure each standard is marked with a 'Y,' 'N' or 'NA.' This information will then be used to compile the summary
- When all the standards have been scored and marked as achieved or not achieved, then fill in the table. In the event that a standard was not observed, reduce the total number of performance standards. This will affect the denominator in the final calculation
- Count all the standards that were achieved (the standards where all the verification criteria have only 'Y' or 'NA') and mark the total in the "Standards Achieved" box
- Calculate the percentage:

Percent achievement by area = $[\text{standards achieved (SA)}/\text{standards observed (SO)}] * 100$ $[\text{SA}/\text{SO} * 100]$

- Fill in the information as per the requirements of the tool
- Compile summary sheets every 4 months to see progress made during the last period and report to the respective authority.

Developing a QI Action Plan

Developing the HF QI Action Plan is a process of planning and problem-solving usually developed in a simple table format. For every verification criteria standard where 'N' is recorded, complete an action plan to address how this standard can be achieved in the future. Brainstorm and discuss underlying causes for why each verification criteria was not met. The health facility QI team should prepare an action plan following the steps below:

- For each standard in a particular tool, identify the verification criteria that were not met. Write the criteria that were not met in Column 1 of the Action Plan
- In Column 2, mention the main reasons (root causes) for the poor performance on the criteria. The QI team can use a simple "Why? Why?" exercise among team members to determine causes. This process will lead to identifying appropriate solution to achieve the verification criteria and thus improve quality of health services. Be sure to explore, without bias, all possible factors that may be influencing the health facility's ability to achieve the standards
- In Column 3, list all the possible solutions to the identified problem once real root causes are identified
- In Column 4, set a clear deadline for accomplishing the work (date/month/year)

- In Column 5, assign a person to do the work. Be certain that the person identified as responsible is included in the discussion (name and designation). It is highly recommended **not to write ALL or just the position**
- Once the QI Action Plan is in place, it should be shared with the Health Facility Operation and Management Committee (or its successor body). Monitor and update the status of actions periodically (at least every 4 months) during QI team meetings. Check off the issues that have been resolved and discuss progress on other issues. If some issues have not been resolved, they should be discussed, their causes should be identified and the team should revisit the action plan. Appreciate contribution of all QI team members
- Finally, in Column 6, indicate the status of the actions taken such as “achieved,” “in progress” or “not started.”

QI Modules for Strengthening Health Services

1. Management

- o Governance and Human Resource Management
- o Financial Management
- o Information Management
- o Quality Management

2. Service Readiness

- o Infrastructure
- o Basic Amenities
- o Medicines of Commodities
- o Clinical Management
- o Infection Prevention and Healthcare Waste Management

3. Family Planning Services

- o Counseling
- o COC and DMPA
- o Implants
- o IUCD
- o NSV
- o MiniLap under local anesthesia
- o Emergency Contraception

4. Maternal and Newborn Services

- o Focused ANC
- o Complication during pregnancy
- o Normal Delivery and immediate Newborn Care
- o Complication during labor and childbirth
- o Post-partum care
- o Newborn Care

5. Child Health Services

- o Growth monitoring
- o Care of sick Newborn and Young Infant (up to 2 months)
- o Care of sick child (2 months to 5 years)
- o Immunization

6. Infectious Disease Services

- o Malaria Case Management
- o TB Case Management
- o ART services
- o PMTCT services

7. Logistics and Laboratory Management

- o Laboratory services
- o Logistic Management- District/Rural/Urban Municipality
- o Logistic Management- Health Facility



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Health Facility Quality Improvement Module for Health Services Strengthening

MANAGEMENT



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

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रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भएको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धिगर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
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फ्याक्स: ४-२६२२६६

महाशाखा

पत्र संख्या:-

चलानी नम्बर:-



पवली, टेम्प
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ । तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ । केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ । यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रूपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रूपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ । यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छ ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रूपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ । यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु । यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ । यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु ।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२

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फ्याक्स: ४-२६२२६८



व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल ।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ । यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ । सेवाहरुको गुणस्तरीय छैन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न । जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालाई महत्व दिएको छ । यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ । गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ । यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु । अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुझाव दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु । प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहन्छु ।


डा.भीमसिंह तिकरी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६८

पत्र संख्या:-

चलानी नम्बर:-



व्यवस्थापन

महाशाखा

पचली, टेक
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन तसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीगो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागू गरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic)जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदानगर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदानगर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening MG 01: Governance/Human Resource Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility has a ward committee or committee for health facility management	Verify the following:					
	Participation by Dalits/Janajatis and women in committee's last meeting (at least in the last three months)					
	Committee meets regularly—at least once in the last three months (review meeting minutes)					
	Meetings announced in advance with agenda; decisions documented in meeting minutes (review invitation letter with agenda and minutes)					
	Provision of health services during regular hours (10am-5pm)					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The health facility has a functional ward committee or committee for health facility management	Verify the following:					
	Committee implements special programs for disadvantaged/ethnic groups (review meeting minutes)					
	Committee participates in Health Facility Quality Improvement Team (HFQIT) meetings (review QI meeting minutes)					
	Committees with HFQITs conduct client exit interviews					
	Health facility has an evidence-based annual plan for the last FY					
	Committee has gotten approval for the annual health plan from the concerned council (DDC/VDC council)					
	Committee mobilized at least 5% of total budget in the last one-year period					
	Committee has registered commodities purchased/received during the previous fiscal year in the stock ledger					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3.The health facility has mechanisms in place to provide information to clients/service users	Verify the following:					
	Citizen charter is posted in the waiting area					
	A sign listing all essential care services displayed, including hours of operation posted in the waiting area (No. of CHU and EPI clinics)					
	Signs or plaques placed on doors to identify the type of services provided					
	- Registration					
	- Waiting area/room					
	- Counselling room					
	- OPD					
	- ANC/PNC					
	- Labor Room					
	- Dispensary					
	- Dressing Room					
	- Recovery Room					
	- FP procedure room (if IUCDs or implants are available)					
	List of mothers who received AAMA incentives displayed on notice board					
	Organizational chart with Ward Committee members and health facility staff displayed					
	List of FCHVs displayed					
List of 'free drugs' displayed						
Score:All "Yes"=1 point;Any "No"=0 points						
4.The health facility staff are aware and understand their roles and responsibilities clearly as per their job descriptions	Verify the following :					
	Job description of the following positions are provided to all staff including those hired locally					
	- M.O.					
	- Health Assistant/Sr.AHW					
	- AHW					
	- Lab assistant					
	- Staff nurse					
	- ANM					
	- Admin & Finance staff					
	- Office assistant					
- Other (Locally hired)						
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. There is a staff performance management system in place	Verify the following :					
	Staff meetings are conducted regularly (monthly)					
	Records of all staff have been kept up-to-date					
	Annual evaluations or performance appraisals of all staff conducted					
	Records of attendance and absenteeism are kept and maintained					
	Activities to enhance staff motivation done at least annually					
	Score: All "Yes"=1 point; Any "No"=0 points					
6. The health facility has mechanisms to provide services to remote and/or marginalized populations	Verify the following :					
	'Social map' developed showing distance from health facility and DAG population identified and displayed					
	Operates EPI clinic in areas located as per guidelines to address geographical and other barriers					
	Provides oversight of CHU/UHC functioning, as per guideline, to address geographical and other barriers					
	Score: All "Yes"=1 point; Any "No"=0 points					

Comments

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MG01: Governance/HR Management	Self-Assessment Score			External Assessment Score	
Total standards	6	6	6	6	6
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

MG 02: Financial Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility prepares an annual health plan & budget	The health facility does the following:					
	Reviews implementation status of the previous year (physical progress)					
	Prepares its annual health plan based on service utilization and findings of the QI self-assessment					
	Reviews previous year's income and budget expenditure (financial progress)					
	Prepares budget for planned activities including internal and external sources					
	Prepares a health plan and budget that includes a flexible budget for QI-related activities ('QI budget')					
	Health facility staff and Ward Committee meet to review and finalize health plan and budget for submission					
	Conducts financial and physical evaluation every four months and keeps records					
	Uses TABUCS for budgeting/accounting					
	Determines OPD ticket fee in Ward Committee every year					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. Ward Committee/ committee for health facility management submits annual work plan and budget to VDC/ municipality council for approval	The health facility does the following:					
	Committee submits health plan and budget to concerned council					
	Committee advocates approval of proposed health plan and budget					
	Committee allocates flexible budget for health facility					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. Financial recording and auditing system in place	The health facility does the following:					
	Puts council-approved annual health plan with budget in place					
	Bank account of health facility is operated by joint signatures of Committee Chairperson and Health Facility In-charge					
	Service fee (if any) is fixed by Committee					
	Deposits its income in bank account regularly (within a week)					
	Updates financial records (income and expenditure) daily					
	Discusses and records financial report/records in Committee meeting (at least quarterly)					
	Committee/health facility audits its accounts by external auditors and makes reports available for previous year					
	Submits annual financial report and discusses it in committee meetings					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. Health facility has mechanism for disbursement of funds to clients	The health facility:					
	Has an EOC fund					
	Utilizes the EOC fund in CEONC (obstetrics and newborn complication) referrals					
	Provides EOC funds to mothers in a timely manner					
	Provides AAMA program transportation incentives to recently delivered women before they are discharged					
Score: All "Yes"=1 point; Any "No"=0 points						

Comments

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MG 02: Financial Management	Self-Assessment Score			External Assessment Score	
	4	4	4	4	4
Total standards					
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening MG 03: Information Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	The health facility has the following:					
1. The health facility has recording and reporting tools	Master register					
	OPD register					
	Immunization register					
	Nutrition register					
	IMNCI OPD register					
	Pills, Depo service register					
	IUCD, Implant service register					
	NSV, MiniLap service register					
	Maternal and Newborn service register					
	PHC/ORC register					
	Malaria and Kala-azar treatment register					
	Leprosy treatment register					
	TB treatment register					
	HIV Testing Services Register					
	FCHV monthly report collection forms					
	Immunization and EPI program monthly report forms					
	HF monthly report forms					
	HMIS user's Manual					
		Score: All "Yes"=1 point; Any "No"=0 points				
	The health facility staff:					
2. The health facility has mechanism for data quality improvement and maintenance	Cross-checks the accuracy of records regularly (once a week)					
	Meets and discusses the preparation of the monthly report					
	Uses the tally sheet to compile data					
	Cross-checks the monthly report					
		Score: All "Yes"=1 point; Any "No"=0 points				

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. The health facility reviews and analyzes service statistics	The health facility ensures the following:					
	Monthly monitoring sheet is completed on time					
	Monthly progress of service statistics is displayed on wall (flex or board or paper)					
	Annual performance for last three years is displayed					
	Service data is analyzed and reviewed quarterly among staff and management committee members					
	Root cause of poor performance (if any) is identified					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. The health facility uses data and information for programming	The health facility ensures that:					
	Discussions regarding new program approaches or activities are based on service statistics					
	Special programs are carried out based on data (if needed)					
	There is evidence that service expansion is based on data					
	Score: All "Yes"=1 point; Any "No"=0 points					

Comments

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MG03: Information Management	Self-Assessment Score			External Assessment Score	
Total standards	4	4	4	4	4
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening MG 04: Quality Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility QI team is formed according to guidelines and is functional	The following are true:					
	QI team has been formed per the QAI guidelines					
	QI team reviews progress on implementing QI action plan every month					
	QI team raises QI-related issues in Ward Committee meeting					
	QI team prepares and sends QI report to District QAWC/D(P)HOs on a quarterly basis					
	Discussion and decisions documented					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. QI team conducts self-assessment using QI Modules on management and readiness every 4 months	The HFQI team does the following:					
	Conducts self-assessment (at least every 4 months) of the following health facility management functions:					
	MG01: Governance/HR Management					
	MG02: Financial Management					
	MG03: Information Management					
	MG04: Quality Management					
	Conducts self-assessment (at least every 4 months) on the following health facility service readiness topics:					
	- SR01: Infrastructure					
	- SR02: Basic amenities					
	- SR03: Medicine, commodities and supplies					
	- SR04: Equipment					
	- SR05: IP/HCWM					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. QI Team conducts QI self-assessment for quality of services using QI Modules every 4 months	The HFQI team does the following:					
	Carries out self-assessment (at least every 4 months) on the following services:					
	Family Planning					
	- FP01: Counselling					
	- FP02: CoC and DMPA					
	- FP03: Implants					
	- FP04: IUCDs					
	- FP05: Vasectomy					
	- FP06: MiniLap					
	- FP07: Emergency contraceptives					
	Maternal Health					
	- MN01: Focused ANC					
	- MN02: Complications during pregnancy					
	- MN03: Normal Delivery and Immediate Newborn Care					
	- MN04: Complications during labor and childbirth					
	- MN05: Postpartum Care					
	- MN06: Newborn Care					
	Child Health					
	- CH01: Growth Monitoring					
	- CH02: Care of sick child up to 2 months					
	- CH03: Care of sick child 2-59 months					
	- CH04: Immunization					
	Infectious Disease					
	HIV					
	- HIV01: ART services					
	- HIV02: PMTCT services					
	Malaria					
	- ML01: Malaria case management					
	Tuberculosis					
	- TB01: Tuberculosis case management					
	Logistics and Laboratory					
	- LM 01: Logistics Management for District (Public) Health Store					
- LM 02: Logistics Management for Health Facilities						
- LB 01: Laboratory services						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4. HFQI team regularly conducts interview of clients receiving services	The HFQI team does the following:					
	Interviews 2-3 clients or caretakers every month for feedback on services received (exit interviews)					
	- For clinical services provided at OPD					
	- For clinical services such as FP, MN, CH, HIV, TB, ML					
	- For administrative, finance or support functions					
	Use results of the client exit interviews to improve performance of the health facility (reflected in QI action plan)					
	Score: All "Yes"=1 point; Any "No"=0 points					
5. HFQI team includes information from social audit to improve quality of care provided by health facility	The HFQI team does the following:					
	Reviews report of social audit carried out in VDC (or its successor body) and its recommendations					
	Discusses and includes quality of care-related findings in QI action plan					
	Score: All "Yes"=1 point; Any "No"=0 points					
6. The health facility has all the relevant guidelines, protocols, standards and job aid	The health facility has the following:					
	National Medical Standard Vol. I (Contraceptive service 2010)					
	National Medical Standard Vol. III (MNC Services)					
	IMNCI treatment booklet 2072 B.S					
	Home therapy card for ARI cases					
	Zinc counseling card					
	Storage guidelines for health commodities					
	HFOMC guidelines					
	FCHV fund guidelines					
	HMIS recording and reporting guideline					
	MNH job-aid					
	Birth Preparedness Package flip chart					
	QAI guidelines					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7.The health facility has at least one staff trained to provide services and other supporting functions being provided	The health facility has staff trained on the following:					
	Family Planning					
	- Comprehensive family planning and counseling					
	- Implant insertion and removal					
	- IUCD insertion and removal					
	- NSV					
	- Minilap					
	Maternal Health					
	- ANC					
	- Delivery					
	- PNC					
	Child Health					
	- IMNCI					
	- MIYCF					
	- Immunization					
	Logistics					
	- Basic logistics training					
	- Laboratory					
	Infectious Disease					
	HIV Clinical management of HIV					
Malaria						
Tuberculosis						
Score:All "Yes"=1 point;Any "No"=0 points						

Comments

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MG04: Quality Management	Self-Assessment Score			External Assessment Score	
	Total standards	7	7	7	7
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%



USAID
FROM THE AMERICAN PEOPLE

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Health Facility
Quality Improvement Module
for Health Services Strengthening

SERVICE READINESS



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

४२६२५५०
४२६२८०२
४२६२७०६
४२६२५३५
४२६२८६२
४२२३५८०

रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भनेको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धि गर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६६

महाशाखा

पत्र संख्या:-

चलानी नम्बर:-



पवली, टेम्प
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ । तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ । केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ । यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रूपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रूपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ । यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छ ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रूपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ । यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु । यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ । यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु ।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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फ्याक्स: ४-२६२२६८



व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ। यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ। सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न। जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालाई महत्व दिएको छ। यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ। गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ। यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु। अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुझाव दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु। प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहन्छु।


डा.भीमसिंह तिकरी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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फ्याक्स: ४-२६२२६८

पत्र संख्या:-

चलानी नम्बर:-



व्यवस्थापन

महाशाखा

पचली, टेक
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन नसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीर्घो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागू गरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन् ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic) जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदान गर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदान गर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening

SR 01: Infrastructure

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Health facility has its own building	Confirm the following:					
	Health facility has ownership of the land					
	Health facility has its own building, constructed based on new guidelines					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. Health facility has adequate physical facilities to provide quality services	The health facility has the following:					
	Separate registration/reception area					
	Separate room/area for counseling services with auditory and visual privacy					
	Separate rooms for check-ups					
	Separate room for FP examinations and procedures					
	Separate area for instrument processing and autoclave					
	Separate room for ANC and PNC					
	Separate room for delivery					
	Separate room for dressing					
	Separate room for In-charge					
	Separate room for dispensing					
	Separate toilets for staff, patients and visitors					
	Separate room for laboratory services					
	Quarters or room available for nursing staff for 24 hour delivery services					
Separate space for cold chain storage						
Separate area for washing and drying cloths						
	Score: All "Yes"=1 point; Any "No"=0 points					

Quality Improvement Modules for Health Services Strengthening

SR 02: Basic Amenities

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility has adequate source of water	The health facility has:					
	Water available within premises of the facility					
	Regular water supply throughout the year					
	Running water available in:					
	• Dressing room					
	• ANC/ Delivery/ PNC room					
	• FP procedure room					
	• Instrument cleaning area					
	• Laundry/Linen washing area					
	• Sterilization room					
	• OPD					
	Water tank for storage					
Safe drinking water for clients and staff						
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The health facility has an adequate power supply	The health facility has:					
	Power supply is connected to electrical grid					
	Power backup (generator, solar, inverter) is available					
	Electricity is available for service delivery					
	The backup source is functional and supports electrical clinical equipment					
		Score: All "Yes"=1 point; Any "No"=0 points				
3. The health facility has adequate transportation and communication	The health facility has:					
	Functional ambulance or other means of transportation (stretcher, doko)					
	Driver for ambulance is available					
	Fuel for ambulance					
	Landline telephone/mobile available					
	Landline telephone/mobile functional					
	Computer/laptop is available					
	Computer/laptop is functional					
	Score: All "Yes"=1 point; Any "No"=0 points					

Quality Improvement Modules for Health Services Strengthening

SR 03: Commodities/Drugs/Supplies

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility has all 5 FP commodities	The health facility has the following:					
	Condoms					
	Combined oral contraceptive pills					
	Injectable contraceptives					
	Implants					
	IUCDs					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The health facility has essential drugs for child health and maternal health	Has following drugs available for maternal and child health services:					
	Child health					
	ORS packets					
	Zinc tablets					
	Cotrimoxazole suspension					
	Amoxicillin 125 and 250 mg					
	Inj. Gentamycin 500 mg/ml					
	Paracetamol syrup					
	Vitamin A					
	Chlorhexidine 4% gel					
	Safe motherhood					
	Iron folate tablets (Ferrous sulphate)					
	Magnesium sulfate					
	Inj. Oxytocin					
	Calcium gluconate					
	Misoprostol					
	T.D vaccine					
	Vitamin A tablets					
Vitamin K inj.						
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. The health facility has essential drugs for infectious diseases	Has the following drugs for tuberculosis, HIV and malaria:					
	Tuberculosis					
	Ethambutol					
	Pyrazinamide					
	Rifampicin					
	Isoniazide					
	Streptomycin inj.					
	ARV medicines					
	Zidovudine tablets or syrup					
	Abacavir tablets					
	Didanosine					
	Lamivudine tablets					
	Lamivudine syrup					
	Stavudine syrup					
	Tenofovir disoproxil fumarate					
	Malaria					
	Artemether lumefrantrine (alu) tablets/pack					
	Sulfadoxine + pyrimethamine					
	Quinine tablets					
	Quinine injection					
	Injectable artesunate					
	Other anti-malarial medicine 1 3 4 5 [other than artesunate + amodiaquine tabs]					
	Chloroquine tablets					
Primaquine tablets						
Score: All "Yes"=1 point; Any "No"=0 point						
4. The health facility has essential antibiotics available	Has the following antibiotics available:					
	Amoxicillin 500 mg					
	Cotrimoxazole tablets					
	Doxycycline capsules					
	Metronidazole tablets					
	Neomycin skin ointment					
	Ciprofloxacin eye/ear drops					
	Ciprofloxacin tablets					
	Chloramphenicol applicaps/caplets					
	Azithromycin tablets					
	Cloxacillin					
	Tetracycline					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. The health facility has essential drugs for non-communicable diseases	Has the following drugs for non-communicable diseases:					
	Atenolol 50 mg tablets					
	Dexamethasone injection 2ml					
	Epinephrine/adrenaline injection					
	Ranitidine/omeprazole/panantoprazole tablets					
	Salbutamol tablets					
	Metoclorpropamide tablets/ inj.					
	Chlorpheniramine tablets					
	Pheniramine injection					
	Aluminium hydroxide +Mag. Hydroxide tablets					
	Hyoscine butylbromide tablets					
	Promethazine Hydrochloride tablets					
	Metformin					
	Score: All "Yes"=1 point; Any "No"=0 point					
6. The health facility has intravenous fluids, fever reducing, pain and worm medicine available	Has the following drugs and fluids available:					
	Intravenous Fluids					
	Ringer's lactate					
	5% dextrose					
	Normal saline					
	Fever Reducing And Pain Medicines					
	Diclofenac tablets or inj.					
	Paracetamol tablets/ inj.					
	Ibuprofen tablets					
	Indomethacin tablets					
	Worm infestation					
	Albendazole 400 mg					
	Metronidazole infusion, tablets, syrup					
Score: All "Yes"=1 point; Any "No"=0 point						
7. The health facility has essential drugs for other services	Has the following drugs available for other services					
	Vitamin B complex					
	Lignocaine injection					
	Calamine lotion					
	Gamma benzene hexachloride lotion					
	Povidone iodine					
	Clove oil					
	Charcol activated powder					
	Benzoic acid + salicylic acid					
	Frusamide tablets					
	Silver Sulphadiazine cream					
	Clotrimazole skin cream					
	Gentian violet					
Sodium chloride infusion						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Cetirizine HCL					
	Tinidazole tab					
	Sulfamethoxazole + trimethoprim					
	Fluconazole					
	Atropine inj.					
	Aminophyllin					
	Prednisolone					
	Pralidoxin sodium					
	Alprazolom					
	Hydrocortisone					
	Diazepam					
	Acetazolamide					
	Oxymetazoline					
	Score:All "Yes"=1 point;Any "No"=0 points					
8.The health facility has basic supplies and equipment	The health facility has the following:					
	Adult weighing scale					
	Child weighing scale (250 gm gradation)					
	Infant weighing scale (100 gm gradation)					
	Stadiometer (or height rod)					
	Measuring tape					
	Delivery set					
	Thermometer					
	Stethoscope					
	BP apparatus					
	Light source					
	Self-inflating bag and mask (adult)					
	Self-inflating bag and mask (pediatric)					
	Nebulizer					
	Spacers for inhalers					
	Oxygen flow meters					
	Pulse oximeter					
	Oxygen concentrators					
	Filled oxygen cylinder					
	Oxygen distribution system					
	Intravenous infusion kits - adults					
	Intravenous infusion kits - pediatric					
	Wheelchair					
Refrigerator						
Ice packs for cold compression						
Score:All "Yes"=1 point;Any "No"=0 points						

Quality Improvement Modules for Health Services Strengthening

SR 04: Clinical Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility has adequate services at OPD	The health facility ensures that:					
	Adequate numbers of health workers available (at least one medical officer and one paramedic)					
	OPD is open from 10am to 5pm					
	OPD consultation/examination area/room has audio and visual privacy					
	Patients are counseled on the type of treatment being given and its consequences					
	Instruments and equipment to carry out OPD work are available and functioning in OPD area:					
	Stethoscope					
	Sphygmomanometer (digital)					
	Thermometer (digital)					
	Knee-jerk hammer					
	Otoscope					
	Flashlight/ torch light					
	Disposable wooden tongue depressor					
	Tuning fork					
	Duck's speculum					
	Proctoscope					
	Hand sanitizer					
	Examination gloves					
	Light and ventilation are adequate					
	Required furniture is available					
	Safe drinking water is available in waiting area/lobby throughout the day					
Handwashing and toilet facilities are available for patients						
Duty roster of OPD is prepared regularly and is hung in appropriate place						
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. The health facility has furniture and general supplies at OPD	The health facility has the following:					
	Working table					
	Working chairs					
	Patient chairs					
	Examination bed					
	Delivery bed					
	Curtain separator for examination beds					
	Examination lamp					
	Waste bin					
	Vaseline					
	Mask					
	Racks for papers, registers					
	Reference books					
	Weighing scale - adult					
	Weighing scale - infant					
	Snellen's chart					
	Measuring tape					
	Tap with running water supply					
	Soap					
Score: All "Yes"=1 point; Any "No"=0 points						
3. The health facility has furniture and general supplies in emergency room	The health facility has the following available:					
	Suction machine					
	Suture set					
	Ambu bag (resuscitation bag with laryngoscope)					
	Oxygen cylinder					
	BP set and stethoscope					
	IV stand					
	Instrument trolley					
	Wheelchair					
	Trolley					
	Stretcher					
	NG tube aspiration set					
	Enema set					
	Foot-operated suction machine (non-electric)					
	Oxygen tubes and masks					
	Hard cervical collar					
	Splints					
Portable light						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Furniture and General Supplies					
	Notice board					
	Foot step					
	Medical exam bed					
	Working table					
	Chair					
	Medicine rack					
	Supply rack					
	Waste bins					
	Sharp disposal bin					
	Poisoning chart					
	Telephone set					
	Reference books with cupboard					
	Tap with running water supply					
	Soap					
	Score:All "Yes"=1 point;Any "No"=0 points					
4. The health facility has furniture and general supplies in MCH/FP room	The health facility has the following available:					
	Tap with running water					
	Soap					
	Wall clock					
	Torch with extra batteries and bulb					
	Adequate space for ANC, PNC, FP, nutrition and immunization services					
	Toilet with handwashing facility for clients					
	Examination bed with pillow					
	Foot step					
	Waste bins					
	Sharps container (safety box)					
	Stools					
	Working table					
	Chairs					
	Cupboard					
Shelves						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment		
		1st	2nd	3rd	1st	2nd	
	Equipment/Instruments						
	A. ANC/PNC						
	BP and stethoscope set						
	Weighing scale for adult						
	Fetoscope						
	Examination gloves						
	Table calendar						
	Maternity register/maternity card						
	B. Family Planning						
	Condoms						
	OCP						
	DMPA with syringes						
	IUCDs, IUCD insertion and removal set						
	Implants, implant insertion and removal set						
	Sterile gloves and examination gloves						
	Family planning register - HMIS and FP cards						
	Family planning demonstration set (counseling kit)						
	C. Nutrition						
	Weighing scale for children						
	Iodized salt for demonstration						
	Sarbottam pitho ingredients for demonstration						
	Nutrition register - HMIS						
	Growth monitoring cards						
	D. Immunization						
	BCG, Measles, DPT/Hep B/Hib/JE, OPV/IPV,TD						
	Disposable syringes 0.5ml, 0.05 ml and 5 ml						
	Water for injections						
	Vaccine carrier with 4 ice packs						
	Refrigerator with continuous power supply						
	Immunization register- HMIS						
	Score:All "Yes"=1 point;Any "No"=0 points						
	5.The health facility has medical and related supplies in the storeroom	The health facility has the following available:					
		Pharmacy/Store room (Medical supply)					
Adhesive tape							
Adhesive handy-plast							
Betadine solution							
Butterfly needle 23 G							
Butterfly needle 24 G							
Cervical collar							
Chromic catgut 0, 1-0, 2-0, 3-0, 4-0							
Clinical thermometer							
Cord clamp							
Cotton roll 400 mg							

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Disposable needles 18, 20, 22, 24, 26					
	Disposable syringes 1ml, 3ml, 5ml, 10ml, 20ml, 50ml					
	Distilled water 500 ml					
	Endotracheal tube (ET Tube)					
	Female catheter					
	Surgical blades 10, 11, 15					
	Surgical gloves 6.5, 7, 7.5					
	Urobag					
	Foley's catheter 14, 16, 18, 20,					
	I/V canula 16, 18, 20, 22, 24, 26					
	IV infusion set tube					
	Lignocaine jelly					
	NG tube 10, 12, 18					
	Nylon suture thread 3-0					
	Oxygen mask					
	Peri pads rolls					
	Phenyl					
	POP bandage 3", 4", 6"					
	Pregnancy test kit					
	Suction catheter					
	Use and throw mask					
	Use and throw gloves					
	Vaginal ring pessary size 2.5, 3					
	Vaginal ring pessary size 3					
	Petroleum jelly					
	Score: All "Yes"=1 point; Any "No"=0 points					

Comments

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SR 04: Clinical Management	Self-Assessment Score			External Assessment Score	
	5	5	5	5	5
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

SR 05: Infection prevention and Health Care Waste Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility has running water.	Observe if there is running water (sink or plastic bucket with faucet) in:					
	Examination room					
	Dressing room					
	Recovery area/room					
	Toilet					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The health facility area is kept clean	Observe whether the HF maintains cleanliness in:					
	Around the health facility					
	Waiting room/area					
	Examination room					
	Recovery area/room					
	Instrument processing area					
	Dressing room					
	Storeroom					
	Toilet					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3.The health facility has equipment for standard precautions for infection prevention	Observe whether there is:					
	Sterilization equipment (i.e. autoclave with energy source)					
	Puncture-proof container					
	Disinfectant (chlorine)					
	Single-use – standard disposable syringes					
	Soap					
	Hand disinfectant (alcohol + glycerin)					
	Disposable gloves					
	Caps					
	Masks					
	Goggles					
	Plastic aprons					
	Utility gloves					
	IP Guidelines					
	Score:All "Yes"=1 point;Any "No"=0 points					
4. There is an appropriate system for collecting waste	Observe whether:					
	The health facility has puncture-proof sharps containers or a needle cutter					
	The health facility has color-coded (as per HCWM guidelines by MD/ MoH) and clearly-labeled containers for waste segregation					
	Containers are located in:					
	Examination room					
	Procedure room (e.g. delivery, minor/major OT)					
	Antenatal check-up room					
	Labor room/delivery room					
	Ward					
	Score:All "Yes"=1 point;Any "No"=0 points					
5. Staff properly disposes of sharps in each room	Syringes with needles are:					
	Immediately placed in sharps container without recapping or destroyed in needle cutter or destroyer					
	Containers are closed and waste disposed of when 3/4 th full					
	Score:All "Yes"=1 point;Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
6. The health facility prepares, uses and stores antiseptic solutions properly	Observe whether:					
	Antiseptics are stored in cool area away from direct sunlight					
	Antiseptic solution is stored in an airtight container					
	Antiseptics are kept in small, closed and reusable containers for daily use					
	The appropriate antiseptic solution is used (as per standards)					
	Antiseptic solution is used on unbroken skin, only					
	Gauze and cotton are stored in containers without antiseptics					
	Spirit swab is prepared and used everyday					
	Reusable containers are washed with soap and water and dried before being refilled with antiseptic solution					
	Auxiliary instruments such as thermometers, probes and other materials are stored in dry containers without antiseptic or disinfectant solutions					
	Score:All "Yes"=1 point;Any "No"=0 points					
	7. The health facility performs decontamination process properly	Observe whether staff:				
Prepares 0.5% chlorine solution daily, as per IP guidelines						
Keeps chlorine solution in the procedure room/area and OT						
Soaks used instruments in chlorine solution for 10 minutes only						
...then transfers materials and instruments to soapy water solution for cleaning						
Cleans the procedure room with chlorine solution						
Stores chlorine powder in safe container in a safe place						
Score:All "Yes"=1 point;Any "No"=0 points						
8.The support staff cleans instruments properly	During cleaning, the staff:					
	Uses protective barriers for cleaning:					
	Caps					
	Masks					
	Goggles					
	Plastic apron					
	Boots					
	Utility gloves					
	Uses detergent, clean water and a soft brush to clean instruments properly					
	Disassembles instruments with multiple parts					
	Rinses thoroughly with clean water until detergent is removed					
	Dries the instruments with clean towel and dries in air					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
9. The health facility performs sterilization as per guidelines	Observe whether staff :					
	There is a timetable/schedule for sterilization					
	Sterilizes instruments (including cheattle forceps and jar) after processing properly					
	Wraps or puts the instrument open in surgical drum					
	Opens all holes of the drum and puts in the autoclave					
	Sterilizes 30 minutes for wrapped instruments at 121 degree centigrade and 106 kPA (15 lb/in ²) pressure					
	Sterilizes 20 minutes for unwrapped instruments at 121 degree centigrade and 106 kPA (15 lb/in ²) pressure					
	Closes all the holes of the drum immediately after taking instruments out of the autoclave and uses within one week or re-sterilizes					
	Score:All "Yes"=1 point;Any "No"=0 points					
10.The health facility performs chemical (cidex, lizol) sterilization properly	Observe whether staff:					
	Prepares the chemical solution as per manufacture's instruction or uses previously prepared solution					
	Puts the solution in a clean container with a lid					
	Marks the container with the date the solution was prepared and the date it expires					
	Cleaned, disassembled instruments are completely submerged in chemical solution					
	Instruments are allowed to soak in gluteraldehyde for 10 hours or at least 24 hours in 8% formaldehyde					
	Instruments are removed from the solution with sterile forceps					
	All surfaces of instruments are rinsed with sterile water and allowed to air dry					
	The instruments are used immediately or stored in a sterile container with tight-fitting lid and used within one week					
	Score:All "Yes"=1 point;Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
11. The health facility performs high-level disinfection (HLD) properly according to the standards	Observe whether the provider:					
	When using boiler or pot (dekchi) with lid:					
	Cleaned, disassembled instruments are completely immersed in water					
	Lid is closed					
	Boils for 20 minutes (after rolling boil starts)					
	When using momo cooker:					
	Puts all instruments and gloves in separate compartments					
	Steams for 20 minutes after steam starts to come out					
	No additional instruments are added after timing begins					
	After 20 minutes, instruments are removed with high-level disinfected or sterile forceps or gloves, dried and stored in HLD containers.					
Score:All "Yes"=1 point;Any "No"=0 points						
12. The health facility stores sterile instruments properly	Observe whether the provider:					
	Stores sterile/HLD instruments in a sterile/ HLD container					
	Stores double-wrapped sets in dry and clean racks and uses within one week					
	Labels expiry date of sterilization on the sterile instrument					
Score:All "Yes"=1 point;Any "No"=0 points						
13.The health facility collects waste properly	Observe whether the health facility:					
	Staff members use utility gloves when handling or transporting waste					
	Collects medical waste and other waste separately in different color-coded and clearly-labeled containers					
	Collects sharps in a puncture-proof container					
	Collects glass in a separate container					
	Score:All "Yes"=1 point;Any "No"=0 points					
14.The health facility promotes cleanliness	Observe if					
	There are dustbins outside the health facility for general waste to reduce littering					
	The surroundings are free of litter and waste					
Score:All "Yes"=1 point;Any "No"=0 points						



USAID
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Health Facility
Quality Improvement Module
for Health Services Strengthening

FAMILY PLANNING



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

४२६२५५०
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४२२३५८०

रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भएको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धिगर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६६

महाशाखा

पत्र संख्या:-

चलानी नम्बर:-



पवली, टेम्प
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ । तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ । केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ । यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रुपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रुपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ । यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छ ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रुपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ । यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु । यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ । यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु ।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६८



व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ। यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ। सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न। जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालाई महत्व दिएको छ। यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ। गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ। यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु। अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुझाव दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु। प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहन्छु।


डा.भीमसिंह तिकरी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
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महाशाखा

व्यवस्थापन

पत्र संख्या:-

चलानी नम्बर:-



पचली, टेक
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन तसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीगो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागूगरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic)जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदानगर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदानगर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening

FP 01: Counseling

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The facility's counseling room is set up appropriately	FP counseling room is observed to have the following:					
	Seperate counseling room					
	Other clients cannot hear what is being said OR room has a door or partition that can be closed/ drawn. (Any alternative to provide privacy is acceptable)					
	Counseling kit, BCC materials and FP materials are displayed on the desk/table					
	Chairs for client and provider/counselor					
	Samples of all FP methods in the room for counseling: COCs, IUCDs, injectables, implants, condoms, emergency contraception					
	Has FP flipchart or Decision Making tool					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The FP client is greeted cordially and respectfully, and client is asked about his/ her FP needs	Service provider performs the following:					
	Greets client warmly					
	Offers client a seat					
	Asks client's name, calls her/him respectfully and introduces own self					
	Obtains or confirms personal information (name, address, etc)					
	Confirms purpose of the visit					
	Assures client confidentiality					
	Ensures that information during the visit will not be shared with anyone					
	Asks the client his/her reproductive goals and needs for contraception.					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. Adequate interpersonal communication skills are used during counselling	Service provider performs the following:					
	Encourages client to ask questions					
	Addresses client's questions and concerns					
	Uses active listening and questioning techniques (e.g. open-ended questions)					
	Maintains eye contact					
	Uses body language that shows interest and concern for the client					
	Uses simple language that client understands					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. The FP client is given information about the contraceptive methods available at the facility and confirms client's choice	Service provider performs the following:					
	• Asks if the client is interested in one specific contraceptive method					
	• Tells the client what other methods are available and gives information according to her/his interest					
	• Confirms the contraceptive method that s/he wants to use or helps the client to choose an appropriate method					
	Score: All "Yes"=1 point; Any "No"=0 points					
5. Pregnancy in client is ruled out	Service provider performs the following:					
	• Explains to the client that it is important to check that she is not pregnant					
	• Asks if client is within seven days of the onset of her menstrual period					
	Rules out pregnancy if beyond day seven:					
	- Abstinence since last menses OR					
	- Is within seven days post-abortion OR					
	- Less than six months postpartum, is exclusively breastfeeding and has not had any menses					
	- Had a baby in the last 4 weeks					
	- Has been using a reliable FP method consistently and correctly					
	If pregnancy is ruled out, client can be given the FP method of their choosing the same day					
Score: All "Yes"=1 point; Any "No"=0 points						

Quality Improvement Modules for Health Services Strengthening

FP 02: COC and DMPA

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
COC method chosen						
1. Information specific to COC pills is shared with the client	Service provider performs the following:					
	Asks the woman what she knows about the pill (combined oral contraceptives) and corrects any misconceptions					
	Briefly, giving only the most important information, tells the client about the pills that she has chosen:					
	- How it prevents pregnancy					
	- Effectiveness					
	- Advantages and non-contraceptive benefits					
	- Side effects					
	- Precautions					
	- Common side effects and warning signs					
	- No protection against STIs, HIV/AIDS					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The client is given information on COC and its use	Service provider performs the following:					
	Ensures the chosen method is an informed choice					
	Gives the woman instructions about COC pills:					
	- Explains how to use the COC pills					
	- Provides information on what to do if she misses any pills					
	- Provides information about what to do if any side effects occur					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Provides information on preventing STIs and HIV/AIDS					
	- If she is at risk: reinforce dual protection and encourage the use of condoms along with other FP methods					
	Encourages the woman to repeat the instructions to be sure she understands					
	Confirms medical eligibility					
	Provides the woman with three cycles of COC					
	Schedules a follow-up visit (date and time) in three months to make sure that the woman is not having any problems with the pill					
	Records the relevant information in FP register and on woman's record card					
	Thanks the woman and politely says goodbye					
	Score: All "Yes"=1 point; Any "No"=0 points					
	3.The client is provided with follow-up counseling	Service provider performs the following:				
Greets the woman with respect and kindness						
Asks the woman about the purpose of her visit						
Reviews her record/chart						
Checks whether the woman is satisfied with her family planning method and is still using it						
Reassures the woman about minor side effects she is having and treats them, if necessary						
Asks the woman if she has any questions. Listens to her attentively and responds to her questions or concerns						
Performs necessary physical assessment						
Provides the woman with three cycles of COC pills						
Schedules return visit as necessary						
Records relevant information in the register and on woman's chart						
Thanks the woman, politely says goodbye and encourages her to return as needed						
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4. DMPA-specific information given to the client	Service provider performs the following:					
	Asks the client what she already knows about DMPA and corrects any misconceptions					
	Briefly, giving only the most important information, tells the client about DMPA					
	- How it works					
	- Effectiveness					
	- Advantages and non-contraceptive benefits					
	- Disadvantages					
	- Precautions					
	- Common side effects and warning signs					
	- No protection against STIs, HIV/AIDS etc					
	Explains the injection schedule and menstrual bleeding changes, and has the client repeat the instructions to be sure she understands					
	Confirms medical eligibility for DMPA					
Score: All “Yes”=1 point; Any “No”=0 points						
5. The client is given DMPA injection followed by post-procedure counseling	Service provider performs the following:					
	Washes hands thoroughly					
	Prepares Depo-Provera (DMPA) for injection					
	Cleans the injection site with dry cotton					
	Ensures appropriate dose of DMPA					
	Inserts the needle deep into the muscle (deltoid in arm or upper, outer quadrant of gluteal area)					
	Ensures that needle is not in vein or vessel (aspirates to check the blood in syringe) and injects DMPA slowly					
	Applies pressure to injection site with dry cotton, but does not rub					
	Discards assembled needle and syringe in a puncture-proof container without recapping or breaking or bending the needle					
	Disposes waste materials in leak- and puncture-proof containers (cotton, packaging etc)					
	Instructs client to return in 12 weeks for next injection. Gives her an appointment date and time					
	Encourages client to return if she has any side effects or problems and advises her to visit nearby HF					
Records all relevant details in the register and client’s card						
Score: All “Yes”=1 point; Any “No”=0 points						

Quality Improvement Modules for Health Services Strengthening

FP 03: Implants

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
COC chosen method						
1. The health facility has separate area or room for Implant services	The service room contains the following:					
	Separate area/room for procedure					
	A door or partition that can be closed/drawn for privacy during examination					
	Examination table					
	Rubber mackintosh					
	Light source					
	Covered plastic container with 0.5% chlorine solution for decontamination					
	Plastic container for contaminated waste					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The health facility has the necessary instruments and equipment for implant services	Health facility has followings :					
	A complete insertion/removal kit:					
	- Scalpel handle					
	- Scalpel blades, size II					
	- Syringe, disposable - 5 ml					
	- Needle, 22 gauge x 2"					
	- Mosquito forceps, curved 5"					
	- Dissecting forceps (non-toothed)					
	- Forceps, circle, curved 5.5"					
	- Implant trocars with canula					
	- Sponge-holding forceps					
	- Ringed forceps					
	- Small metal bowl					
	- Cheatle forceps with jar					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. Essential information on implants is given to the client	Service provider performs the following:					
	Asks the client what she already knows about implants and corrects any misconceptions					
	Briefly, giving only the most important information, tells the client about implants:					
	- How it works					
	- Effectiveness					
	- Advantages and non-contraceptive benefit					
	- Disadvantages					
	- Precautions					
	- Common side effects and warning signs					
	- Lack of protection against STIs, HIV/AIDS					
	Confirms medical eligibility for implants					
	Encourages woman to repeat instructions to be sure she understands					
Score:All “Yes”=1 point;Any “No”=0 points						
4. Preparation is done to provide implants to client	Service provider performs the following:					
	Tells woman what is going to be done (step by step), listens to her queries and responds attentively to her questions and concerns					
	Ensures that a sterile implant insertion set is ready					
	Ensures implant service room has curtains on the doors and windows					
	Helps to position the client comfortably on the examination bed					
	Provides continual emotional support and reassurance to make the client comfortable					
	Score:All “Yes”=1 point;Any “No”=0 points					
5. Implant inserted properly	Service provider performs following:					
	Washes hands thoroughly and dries them and puts on sterile gloves					
	Prepares instruments and other necessary supplies on sterile tray					
	Uses proper infection prevention procedures					
	Applies antiseptic solution to the insertion area two times					
	Gives an injection of local anesthesia under the skin (sub-dermal) of the arm in “V” shape.					
	Makes small incision in the skin on the inside of the upper arm					
	Inserts the implants just under the skin (while doing this client may feel some pressure or tugging) with the help of trocar					
	Closes the incision after implants are inserted with an adhesive bandage					
	Covers and wraps the incision with sterile gauze and bandage					
Score:All “Yes”=1 point;Any “No”=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
6. The client is provided with post-insertion counseling	Service provider performs the following:					
	Explains to client when to remove the adhesive tape and how to keep the incision area dry					
	Discusses what to do if the client experiences any side effects or problems (e.g. pain, swelling, expulsion of rods)					
	Explains the need for a follow-up appointment					
	Completes implant card and records all relevant details on client's record/chart					
	Score: All "Yes"=1 point; Any "No"=0 points					
7. Counseling is provided during a follow-up visit after implant insertion	Service provider performs the following:					
	Greets the client warmly					
	Asks the client the purpose of her visit to the clinic					
	Reviews client's record and card					
	Checks whether the client is satisfied with her family planning method and is still using it					
	Reassures the woman about minor side effects she is having and treats them if necessary					
	Asks the client if she has any questions. Listens to her attentively and responds to her questions or concerns.					
	Performs necessary physical assessment					
	Schedules time and date for next visit					
	Records relevant information in the woman's chart					
	Thanks the woman, politely says goodbye					
Score: All "Yes"=1 point; Any "No"=0 points						
8. The client is provided implant pre-removal counseling and physical examination	Service provider performs the following:					
	Greets the client respectfully					
	Asks the client reason for removal					
	Confirms her name, address and other required information and completes implant card and records all relevant details in the register as per client's record in (HMIS 3.3)					
	Evaluates reason for removal					
	Answers any queries					
	Reviews the client's reproductive goals and need					
	Examines insertion area for any sign of infection or abnormality					
	Asks if client has any abnormal vaginal bleeding					
	- Prepare equipment and supplies (including a light source)					
	- Helps the client to examination table, ensures her comfort and makes sure that she is draped/covered appropriately throughout the procedure					
- Washes hands thoroughly and puts gloves on						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	- Without contaminating them, arranges instruments and supplies in sterile tray					
	Score:All “Yes”=1 point;Any “No”=0 points					
9. Preparation for implant removal	Service provider performs the following:					
	Prepares necessary instruments for the removal					
	Helps the client into a comfortable position on procedure bed					
	Interacts with client to put her at ease at all times					
	Explains removal procedure and answers any questions					
	Washes hands thoroughly and puts on sterile gloves					
	Score:All “Yes”=1 point;Any “No”=0 points					
10. Implant removal	Service provider performs the following:					
	Follows proper infection prevention procedures					
	Gives injection of local anesthesia (1% xylocaine without adrenaline) under the implants rods					
	Makes a small incision (4mm) in the skin vertically between rods					
	Pulls out each implant one by one using “U” technique					
	Closes incision with medicated adhesive tape and applies press dressing					
	Shows removed implants to the woman					
	Immerses instruments gently into 0.5% chlorine solution for 10 minutes for decontamination					
	Disposes wastes materials in a leak-proof container before removing gloves					
	Puts gloves in 0.5% solution					
	Washes hands properly					
	Completes record in woman’s card and register					
	Score:All “Yes”=1 point;Any “No”=0 points					
11. The client is provided post-removal counseling	Service provider performs the following:					
	Counsels the client about other family planning methods					
	Helps the client choose temporary FP method i.e. condoms until the client starts another method of choice (if she cannot start using another method on the same day)					
	Encourages client to return whenever she has any questions or concerns					
	Explains about the return of fertility					
	Provides her information about ANC services if she wants another child					
	Score:All “Yes”=1 point;Any “No”=0 points					

Quality Improvement Modules for Health Services Strengthening

FP 04: IUCD

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
IUCD method chosen						
I. Separate area or room for IUCD services is available at the health facility	Service provider performs the following:					
	Asks the client what she already knows about IUCDs and corrects any misconceptions					
	Briefly, giving only the most important information, tells the client about IUCDs:					
	- How it works to prevent pregnancy					
	- Effectiveness					
	- Advantages and non-contraceptive benefit					
	- Disadvantages					
	- Precautions					
	- Common side effects and warning signs					
	- No protection against STIs, HIV/AIDS					
	Tells client to return to the clinic if she thinks the IUCD is not in place or if period is not regular					
	Encourages the client to repeat the instructions to be sure she has understood					
	Explains the procedure of IUCD insertion and issues before and after insertion					
Ensures client's eligibility for IUCD insertion						
Answers any questions the client has						
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. Separate area or room equipped for examination/ procedure for IUCD services is available at the health facility	The health facility has the following:					
	Separate area/room for procedure					
	A door or partition that can be closed/drawn for privacy during examination					
	Examination table					
	Rubber mackintosh					
	Light source					
	Drapes for covering client's abdomen					
	Covered plastic container with 0.5% chlorine solution for decontamination					
	Plastic container for contaminated waste					
	Score: All "Yes"=1 point; Any "No"=0 points					
3. Examination/ procedure room for IUCD services with necessary instruments is available at the health facility	Availability of the following:					
	A complete insertion/removal kit:					
	- Bi-valve vaginal speculum; medium					
	- Sponge-holding forceps					
	- Small metal bowl (Galley pot)					
	- Cervical tenaculum/volselum					
	- Uterine sound					
	- Scissors; long-handled					
	- Instrument pan and cover					
	- Torch/flashlight; two-cell, or equivalent					
	- Cheatle forceps					
	- Cheatle jar					
	- Kidney tray (big size)					
	- Long, curved artery forceps					
- Alligator forceps						
Score: All "Yes"=1 point; Any "No"=0 points						
4. A pre-insertion physical examination is conducted and eligibility is ensured	Service provider performs the following:					
	Prepares equipment and supplies (including light source)					
	Asks the client to wash and rinse her genital area with soap and water					
	Ensures that she has emptied her bladder					
	Helps the client onto the examination table, positions her comfortably					
	Makes sure that she is draped/covered throughout the examination					
	Explains each step of her examination to the client. Encourages her to ask questions and responds to her questions and concerns					
Palpates the abdomen well and checks for lower abdominal (especially suprapubic) tenderness, masses or other abnormalities						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Washes hands thoroughly and puts on sterile gloves					
	Without contaminating, arranges instruments and supplies on a sterile tray					
	Gently performs examination of external genitalia, urethral opening, Skene's and Bartholin's glands					
	Gently performs speculum examination of vagina and cervix					
	Gently removes speculum and sets it in a HLD or sterile kidney basin or places in 0.5% chlorine solution for 10 minutes for decontamination if another HLD or sterile speculum is available.					
	Performs a gentle bimanual examination:					
	Immerses both gloved hands in 0.5% chlorine solution. Removes gloves by turning inside out.					
	If gloves are to be disposed, places in leak-proof container or plastic bag.					
	If reusing surgical gloves, submerges in 0.5% chlorine solution for 10 minutes for decontamination					
	Washes hands thoroughly					
	Based on findings of history and physical examination, confirms that the IUCD is an appropriate method of contraception for the woman.					
	Score: All "Yes"=1 point; Any "No"=0 points					
5. IUCD is inserted properly by the service provider	Service provider performs the following:					
	Explains the procedure to the client and encourages her to ask questions and responds to her queries					
	Loads copper T 380A in sterile way					
	Puts new or HLD sterilized surgical gloves on both hands during examination					
	Gently inserts vaginal speculum to see the cervix and applies antiseptic solution two times to the cervix and vagina					
	Gently grasps cervix with tenaculum/vulselum					
	Estimates depth of uterus without touching the uterine walls					
	Inserts copper T 380A using withdrawal technique					
	Partially withdraws the inserter tube and cuts IUCD strings to 3-4 cm length					
	Removes inserter tube					
	Gently removes the tenaculum and places it in 0.5% chlorine solution for 10 minutes for decontamination					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Examines cervix; if there is bleeding at the site grasped by tenaculum, places cotton (or gauze) swab over bleeding and applies gentle pressure for 30-60 seconds					
	Gently removes speculum and places it in 0.5% chlorine solution or 10 minutes for decontamination					
	Before removing gloves, places all instruments in 0.5% chlorine solution for 10 minutes for decontamination					
	Disposes of waste materials in a leak-proof container or plastic bag					
	Immerses both gloved hands in 0.5% chlorine solution. Removes gloves by turning inside out:					
	- If gloves are to be disposed, places in leak-proof container					
	- If reusing surgical gloves, submerges in 0.5% chlorine solution for 10 minutes for decontamination					
	Washes hands thoroughly					
	Ensures client is not experiencing excessive cramping and answers any queries from the client					
	Score: All “Yes”=1 point; Any “No”=0 points					
IUCD post-insertion counseling						
6. Service provider gives post-insertion counseling to the client	Service provider performs the following:					
	Observes the client for at least 15 to 20 minutes before sending her home					
	Tells the client about side effects and warning signs; reminds the client to return to the clinic if any warning signs occur					
	Instructs the client to return for follow-up within 1 month (3-6 weeks) or after menstruation, and schedules date and time for next meeting					
	Answers any questions the client has					
	Encourages the client to return for follow-up if she has any questions or concerns or if she wants to have the IUCD removed					
	Completes IUCD card and records all relevant details on client’s record/chart					
	Thanks the woman, politely says goodbye and encourages her to return					
	Score: All “Yes”=1 point; Any “No”=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7. Counseling is provided during follow-up visit after IUCD insertion	Service provider performs the following:					
	Greets the client warmly					
	Asks the client the purpose of her visit to the clinic					
	Reviews client's record and card					
	Checks whether the client is satisfied with her IUCD and is still using it					
	Reassures the woman about minor side effects she is having and treats them if necessary.					
	Asks the client if she has any questions. Listens to her attentively and responds to her questions or concerns					
	Performs any necessary physical examination					
	Schedules time and date for return visit as necessary					
	Records relevant information in the woman's chart					
	Thanks the woman, politely says goodbye and encourages her to return as needed					
	Score: All "Yes"=1 point; Any "No"=0 points					
8. The client is provided with IUCD pre-removal counseling and physical examination	Service provider performs the following:					
	Greets the client respectfully and with kindness					
	Confirms her name, and address as per details in the register and client record (HMIS 3.3)					
	Asks the client reason for removal and answers any questions					
	Reviews the client's reproductive goals and need for protection against STIs and HIV/AIDS					
	Prepares equipment and supplies (including a light source)					
	Asks the client to wash and rinse her genital area. Ensures that the woman has emptied her bladder					
	Helps the client onto examination table, ensures her comfort and makes sure that she is draped/covered appropriately throughout the procedure					
	Describes the removal procedure and answers any questions					
	Washes hands with soap and water thoroughly and puts gloves on					
	Without contaminating them, arranges instruments and supplies in HLD container or sterile tray					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
9. IUCD is removed by service provider	Service provider performs the following:					
	Performs bimanual examination					
	Gently inserts vaginal speculum to see cervix and IUCD strings, applies antiseptic solution two times to the cervix, grasps strings close to the cervix with hemostat or other narrow forceps and pulls on strings slowly but firmly to remove IUCD					
	Shows the client the removed IUCD					
	Immerses IUCD in 0.5% chlorine solution for 10 minutes for decontamination. Then disposes of it in a leak-proof container or plastic bag					
	Gently removes speculum and places in 0.5% chlorine solution for 10 minutes for decontamination					
	Before removing gloves, places all instruments in 0.5% chlorine solution for 10 minutes for decontamination					
	Disposes of waste materials in a leak-proof container					
	Immerses both gloved hands in 0.5% chlorine solution, Removes gloves by turning inside out					
	If gloves are to be disposed, places in leak-proof container or plastic bag					
	Score: All "Yes"=1 point; Any "No"=0 points					
10. The client is provided with post-removal counseling	Service provider performs the following:					
	Counsels the client about other family planning methods (NA if not necessary)					
	Helps the client choose temporary contraceptive method e.g. condoms until the client starts another method (if she cannot start another method on the same day)					
	Encourages client to return whenever she has any questions or concerns					
	Provides her information about ANC services if she wants another child					
	Score: All "Yes"=1 point; Any "No"=0 points					

Comments

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FP 04: IUCD	Self-Assessment Score			External Assessment Score	
Total standards	10	10	10	10	10
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

FP 05: No-Scalpel Vasectomy (NSV)

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format
Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
No-Scalpel Vasectomy Chosen						
1. The facility has an area with the equipment needed to conduct VSC (if applicable)	Ensure that the health facility has following things:					
	Enclosed well-ventilated area					
	Private space for client to change clothing					
	Sink and running water for surgical hand scrub					
	Procedure table with mattress					
	Directable light source (gooseneck lamp)					
	Bucket and safe box/puncture-proof container for waste, needle segregation and sharps disposal					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. Client is counseled on the NSV procedure	Service provider performs the following:					
	Asks the client what he already knows about NSV and corrects any misconceptions					
	Briefly explains:					
	- How it works					
	- Advantages, disadvantages					
	- Precautions					
	- Common side effects					
	- No protection against STI/HIV/AIDS					
	Emphasizes that if procedure is successful, it prevents the client from having more children in the future and cannot be reversed					
	Tells client that he can decide against the procedure at any time before it takes place					
Ensures that client has decided to use the method without any coercion or incentives						
Maintains privacy during counseling						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Explains the need to use condoms or other contraceptive method for 3 months after vasectomy					
	Explains the need for semen analysis after 3 months					
	Ensures that the couple is using a reliable method of contraceptive and ensures that his wife is not pregnant					
	Score: All "Yes"=1 point; Any "No"=0 points					
3. Client provides written informed consent	Service provider performs the following:					
	Explains that there are temporary methods of contraception available to the client and his partner					
	Explains that the procedure to be performed is a surgical procedure, the details of which have been explained					
	Explains that this surgical procedure involves risks, discomfort and complications in addition to benefits, both of which have been explained					
	Explains that if the procedure is successful, the client will be unable to have any more children					
	Explains that the procedure is less than 100% effective					
	Explains that the effect of the procedure is permanent					
	Explains that he can decide against the procedure at any time before the operation is performed (and no medical, health, or other benefits or services will be withheld from him as a result)					
	Receives signed informed consent form					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. Client's eligibility for NSV is assessed by the provider	Provider takes medical history of the following:					
	Heart disease, respiratory problems, asthma					
	Hypertension (should be controlled before surgery)					
	Diabetes					
	Convulsions					
	Scrotal surgery					
	Genitourinary infections					
	Allergies to medications					
	Bleeding disorders					
	Sexual impairment and scrotal abnormalities					
	History of recent trauma to genital area					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. Screening is carried out by the provider	Provider notes any of the following during the physical examination:					
	Temperature					
	Blood pressure					
	Pulse					
	Auscultation of heart and lungs					
	P/A lower abdomen mass and Inguinal region for surgery and hernia					
	Problems with genitals such as infections, swelling, injuries or lumps on penis					
	Un-descended testicles					
	Skin infections or mass or swelling (large varicocele, hydrocele, filariasis [elephantitis]) of the scrotum					
	Score:All “Yes”=1 point;Any “No”=0 points					
6. Preparation for the procedure	Service provider performs the following:					
	Prepares necessary supplies, including medicines, as well as emergency drugs					
	Prepares necessary sterile instruments needed for procedure					
	Asks client to clean genital area					
	Helps client to put on OT gown					
	Score:All “Yes”=1 point;Any “No”=0 points					
7. The facility has complete set of instruments for NSV	Facility has following things:					
	Black silk or cotton thread 2/0					
	Galli pot 4 oz 1.5” high					
	Forceps, artery, straight, 5 ^{1/2} inch					
	Ringed forceps, 4.0 mm ring					
	Ringed forceps, 3.5 mm ring					
	Sharp dissecting forceps for NSV					
	Small straight scissors					
	Sponge-holding forceps					
	Score:All “Yes”=1 point;Any “No”=0 points					
8. NSV procedure is performed by service provider	Service provider performs the following:					
	Positions the client on the operating table					
	Interacts with client to put him at ease					
	Uses proper infection prevention practices					
	Identifies isolates and fixes the vas deferens using 3-finger technique					
	Gives injection of local anesthesia (1% of xylocaine 3-10 ml)					
Uses 3-finger method to isolate the right vas and applies ringed clamp						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Uses the dissecting curved forceps to puncture scrotal skin and expose the vas deferens					
	Delivers a loop of vas through the puncture hole					
	Ligates and removes 1 cm of vas					
	Ensures hemostasis					
	Creates facial interposition and returns vas to original position					
	Repeats steps for next vas					
	Uses adhesive bandage or sterile gauze dressing and tape to cover puncture site					
	Allows client to rest for 20-30 minutes					
	Score: All "Yes"=1 point; Any "No"=0 points					
9. The client is provided post-procedural counseling	Service provider performs the following:					
	Tells client to avoid strenuous (hard) physical exercise for 1 week					
	Suggests client take analgesic every 4-6 hours if he experiences pain or discomfort					
	Advises client to wear snug underwear for 2-3 days to help support the scrotum					
	Tells client to keep puncture site clean and dry for 1-2 days					
	Advises client not to have intercourse for at least 2-3 days or until he feels comfortable and to use condoms or another FP method for 3 months					
	Asks client to return in 3 months for semen analysis					
	Score: All "Yes"=1 point; Any "No"=0 points					

Quality Improvement Modules for Health Services Strengthening

FP 06: Interval Minilaparotomy under Local Anaesthesia (ML LA)

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format
Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Minilap method chosen						
1. The facility has an area with essential equipment to conduct Minilap services (if applicable)	Health facility has the following:					
	Enclosed well-ventilated area					
	Private space for client to change clothing					
	Sink and running water for surgical hand scrub					
	Procedure table with mattress					
	Directable light source (gooseneck lamp)					
	Bucket and safety boxes for waste, and needle segregation, disposal					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. Ensures client is not pregnant	The provider asks the following questions to rule out pregnancy:					
	Are you less than 6 months postpartum and fully breastfeeding and have not resumed menstruation?					
	Have you abstained from sexual intercourse since your last menses?					
	Have you had a miscarriage or abortion in the past 7 days?					
	Have you been using a reliable contraceptive method consistently?					
	Did your last menstrual period start within the past 7 days?					
	If not reasonably sure that the client is not pregnant, advise her to do urine test to confirm.					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. The client is provided with counseling on MiniLap services	Service provider performs the following:					
	Asks the client what she already knows about MiniLap and corrects any misconceptions					
	Briefly explains how MiniLap works					
	Advantages, disadvantages					
	Precautions					
	Common side effects					
	No protection against STI/HIV/AIDS					
	Emphasizes that if procedure is successful, it will prevent the client from having any more children in the future and cannot be reversed					
	Tells client that she can decide against the procedure at any time before it takes place					
	Ensures that client decided to use MiniLap without any coercion or incentives					
	Maintains privacy during counseling					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. Written informed consent is received from client	Service provider performs the following:					
	Explains that there are temporary methods of contraception available to the client and her partner					
	Explains that the procedure to be performed on the client is a surgical procedure, the details of which have been explained					
	Explains that this surgical procedure may involve risks, discomfort and complications in addition to benefits, all of which have been explained					
	Explains that if the procedure is successful, the client will be unable to have any more children					
	Explains that the procedure is less than 100% effective					
	Explains that the effect of the procedure is permanent					
	Explains that she can decide against the procedure at any time before the operation is performed (and no medical, health, or other benefits or services will be withheld as a result)					
	Gets a signed informed consent form from the client					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. Client's eligibility for MiniLap is assessed	The provider reviews client's medical history:					
	Heart disease					
	Convulsions					
	Respiratory problems, asthma					
	Hypertension (should be controlled before surgery)					
	Allergy to medication					
	Diabetes (should be controlled before surgery)					
	Bleeding disorders					
	Score:All "Yes"=1 point; Any "No"=0 points					
6. Screening, including laboratory tests, is carried out	The provider performs the following:					
	General physical examination:					
	- Temperature					
	- Blood pressure					
	- Pulse					
	- Weight					
	- Auscultation of heart and lungs					
	Abdominal examination:					
	- Suprapubic and pelvic tenderness					
	- Mass or growth abnormalities					
	- Surgical scars					
	- Local infection					
	Pelvic examination:					
	- Check external genitalia for ulcers and buboes (enlarged groin nodes)					
	- Abnormal vaginal discharge					
	- Purulent discharge					
	- Cervical growths or unhealthy cervix					
	- Bimanual examination for size, shape, position, mobility or other abnormalities of the uterus/ tenderness					
	The provider recommends the following lab investigations:					
	Haemoglobin (Hb 7gm/dl and above or HCT 20% and above)					
Urine analysis for sugar and protein						
Pregnancy test, if required						
Score:All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7. Necessary equipment and drugs are prepared	Service provider performs the following:					
	Prepares the operating room					
	Checks emergency kit					
	Prepares necessary supplies, including medicines, as well as emergency drugs					
	Prepares necessary sterile or HLD instruments needed for procedure					
	Score:All “Yes”=1 point; Any “No”=0 points					
8.The facility has complete set of instruments for MiniLap (stainless steel)	The health facility has following things:					
	Galli pot					
	Forceps, dressing, standard pattern, 5”, (non-toothed)					
	Forceps; tissue, 5” (toothed)					
	Forceps; artery (Kelly straight), 5.5”-2pc					
	Forceps; artery (Kelly straight), 6 “-2 pc					
	Forceps; mosquito (curved) 5”-4 pc					
	Forceps; Allis, 7.7”-2 pc					
	Forceps; baby babcock, 7.5”-2 pc					
	Sponge-holder, 9.5”					
	Needle holder (Mayo-Hegar) 7”-2 pc					
	Retractor (Richardson-Eastman) – 2 pc					
	Double-ended retractor -2 pc					
	Mayos operating scissors (straight) 6.5”					
	Metzenbaum scissors (curved) 7”					
	Disposable syringe with needle 10 cc-2 pc					
	Disposable syringe with needle 5 cc					
	Round-body needle (half circle) 6”					
	Cutting needle 6”					
	Surgical handle no. 3					
	Surgical blade no. 10					
	Metallic catheter no. 14					
	Kidney tray medium size					
	Tubal hook					
	Instruments for inserting the uterine elevator					
	- Speculum (Graves or Sim’s) medium size					
	- Sponge holder 9.5”					
	- Volselum/tennaculum					
	- Galli pot					
	- Uterine elevator					
Score:All “Yes”=1 point;Any “No”=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
9. Client is prepared for the procedure	Service provider performs the following:					
	Provides benzodiazepne (diazepam 5 mg orally for a client <35 kg or 10 mg for a client > 35 kg by weight before 45 minutes of the operation diazepam 5 mg) 30 min prior to surgery.					
	Asks client to empty her bladder					
	Cleans genital area with soap and water					
	Helps client to put on OT gown					
	Score:All “Yes”=1 point; Any “No”=0 points					
10. Pre-op medications administered to client	Provider gives following pre-medication to the client prior to the surgery:					
	Pethidine 25 mg IV with phenargan 12.5 mg IV with atropine 0.6 mg IV (if necessary)					
	Pentazocine 30mg IV + atropine 0.6mg IV (optional)					
	Score:All “Yes”=1 point; Any “No”=0 points					
11. Tubal ligation (MiniLap) procedure is performed	Service provider performs the following:					
	Positions the client comfortably on the operation bed					
	Interacts with client to put her ease					
	Uses proper infection prevention practices					
	Inserts uterine elevator into the uterus through the vagina and cervix to raise each of the 2 fallopian tubes					
	Gives injection of local anesthesia (1% xylocaine 10-20 ml) in above the pubic hairline					
	Monitors blood pressure, pulse and respiration regularly					
	Makes a small transverse (for postpartum tubal ligation) or vertical (for interval MiniLap) incision (2-5 cm) in the anesthetized area					
	Ties and cuts each tube					
	Closes the incision with stitches and covers it with and adhesive bandage					
	Immerses the used instruments into the 0.5% chlorine solution with gloves on, then adds gloves to solution					
Score:All “Yes”=1 point; Any “No”=0 points						

Quality Improvement Modules for Health Services Strengthening

FP 07: Emergency Contraceptive (EC)

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Provides counseling specific to emergency contraceptives	Service provider performs the following:					
	Assesses whether the client really needs emergency contraceptives (EC) and is eligible					
	Explains to the client when EC is needed					
	Explains that EC must be used within 5 days of unprotected sex (COC, POP) or 12 days (IUCD)					
	Clearly explains to the client, step-by-step, the use of emergency contraception					
	Explains the types of EC available at the HF (COC, POPs, and IUCDs)					
	Explains the effectiveness and chances of pregnancy for each type					
	Explains that the sooner the EC is taken after unprotected sex, the more effective it is at preventing pregnancy					
	Explains the common side effects:					
	- Nausea - Abdominal pain - Fatigue - Headaches - Breast tenderness - Dizziness - Vomiting					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. EC is provided to client	Service provider performs the following:					
	COC Provides first dose (4 tabs) totaling 0.01 mg ethinyl estradiol + 0.5 mg levonorgestrol					
	Asks her to take first dose immediately					
	Asks her to take second dose after 12 hrs (4 tabs)					
	POPs Provides levonorgestrel single dose (total 1.5 mg) and asks her to take immediately					
	IUCD Inserts IUCD after assessing the client's eligibility and counsels the client on IUCD (refer to IUCD checklist for details)					
	Score: All "Yes"=1 point; Any "No"=0 points					
	3. Client is provided with follow-up counseling	Service provider performs the following:				
Explains that if vomiting starts within 2 hours, client should take anti-vomiting drugs and repeat the first dose						
If using hormonal methods:						
- Explains there might be slight bleeding or changes in timing of monthly bleeding						
- Explains that she needs to remember if there is no monthly bleeding or her monthly bleeding is delayed by more than one week, that she might be pregnant						
Explains that EC is not a long-term method, and that other FP methods should be considered						
Score: All "Yes"=1 point; Any "No"=0 points						

Comments

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FP 07: EC	Self-Assessment Score			External Assessment Score	
Total standards	3	3	3	3	3
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%



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Health Facility
Quality Improvement Module
for Health Services Strengthening

MATERNAL AND NEWBORN SERVICES



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

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रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भनेको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धि गर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६६

महाशाखा

पत्र संख्या:-

चलानी नम्बर:-



पवली, टेम्पु
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ । तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ । केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ । यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रुपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रुपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ । यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छु ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रुपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छु । यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु । यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छु । यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु ।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२

४-२६१४३६

फ्याक्स: ४-२६२२६८



व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल ।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ । यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ । सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न । जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालाई महत्व दिएको छ । यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ । गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ । यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु । अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुभाब दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु । प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहान्छु ।


डा.भीमसिंह तिकरी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६८

पत्र संख्या:-

चलानी नम्बर:-



व्यवस्थापन

महाशाखा

पचली, टेक
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन नसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीगो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागू गरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic)जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदानगर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदानगर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening

MN 01: Focused Antenatal Care

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The health facility has examination room with all necessary equipment to provide ANC	The ANC room has the following:					
	Examination table with mattress					
	Foot step					
	Stool/chair					
	Proper light source					
	Container with 0.5% chlorine solution for decontamination					
	Container for waste					
	Puncture-proof container for sharps					
	Speculum					
	Gloves (HLD)					
	Screen					
	BP instrument					
	Adult stethoscope					
	Fetoscope					
	Thermometer					
	Tape to measure fundal height					
	Weighing scale					
	Provision for hand washing					
	BCC materials (e.g. jeevan surakshya flip chart)					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. The pregnant woman is received and greeted cordially and respectfully	The service provider does the following:					
	Greets the woman and her companion (If present)					
	Allows the woman's companion to remain in the room, if she wishes					
	Explains to the woman and her companion what s/he is going to do and encourages them to ask questions					
	Responds to questions using easy-to-understand language					
	Score: All "Yes"=1 point; Any "No"=0 points					
3. The service provider takes clinical history of the pregnant woman and records	The service provider does the following:					
	Asks about and records danger signs that the woman may have had, including:					
	- Vaginal bleeding					
	- Respiratory difficulty					
	- Severe headache, blurred vision					
	- Severe abdominal pain					
	- Convulsions/loss of consciousness					
	Asks about and records previous pregnancies and births (on first antenatal visit only)					
	Asks about and records common discomforts of pregnancy					
	Asks about and records surgical, medical and family history					
	Asks about and records:					
	TT/TD immunization					
	Current medications and/or ayurvedic treatments					
	Malaria treatment (if applicable)					
	Calculates/confirms gestational age.					
Calculates/confirms expected date of delivery on first visit						
Score: All "Yes"=1 point; Any "No"=0 points						
4. The service provider correctly performs a physical examination of pregnant woman	The service provider does the following:					
	Washes both hands					
	Explains each stage of the examination to the woman using easy-to-understand language					
	Measures pulse					
	Measures blood pressure					
	Checks conjunctiva and palms/nails for anemia					
	Examines the woman's breasts for inverted nipples, lumps and discharge					
	Examines thyroid gland and lymph nodes in axilla					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. The service provider correctly performs an obstetrical exam	The service provider does the following:					
	Inspects the abdomen					
	Measures symphysis fundal height					
	Determines fetal lie and presentation (after 36 weeks)					
	Listens to fetal heart rate (after 20 weeks)					
	Washes and dries hands					
	Records all findings on the ANC card					
	Informs woman of key findings					
	Score: All "Yes"=1 point; Any "No"=0 points					
6. The service provider requests and provides laboratory tests	The service provider provides the following tests and results:					
	Hemoglobin					
	Blood grouping and Rh factor					
	Urine analysis to test albumin (dipstick)					
	Score: All "Yes"=1 point; Any "No"=0 points					
7. The service provider informs and refers woman to HIV testing services (HTS) and/or PMTCT in first visit	The service provider does the following:					
	Asks the woman if she has ever been tested for HIV					
	If no, provides information about HTS including the process, confidentiality, results and locally available services					
	If yes and positive: - Explains about HIV/AIDS and risks of transmission to the child - Explains about nearest available PMTCT services					
	Score: All "Yes"=1 point; Any "No"=0 points					
8. The service provider assists the woman and her companion to develop a birth plan	The service provider explains the importance of the following:					
	Skilled birth attendant and place of birth					
	Signs and symptoms of labor and when she has to go to the health facility					
	Emergency transportation and funds					
	Items for a clean and safe birth					
	Decision-making person if complications occur					
	Safe motherhood program					
Score: All "Yes"=1 point; Any "No"=0 points						
9. The service provider correctly describes danger signs and symptoms	The service provider describes the following:					
	Vaginal bleeding/discharge					
	Respiratory difficulty					
	Severe headache/blurred vision					
	Severe abdominal pain					
	Convulsions/loss of consciousness					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
10. The service provider gives routine medications and counselling to the woman on different topics	The service provider does the following:					
	Checks to make sure that the client has enough iron and folic acid tablets to take once daily until next visit					
	Counsels on the importance of eating nutritious food, foods rich in vitamin A, iron and vitamin C					
	Gives TT/TD based on woman's need and according to protocol					
	Provides albendazole 400 mg one tablet					
	Provides specific advice and counselling, as needed (e.g., common discomforts, rest, hygiene and breastfeeding)					
	Advises on breastfeeding: immediate, exclusive breastfeeding during the first 6 months, optimal complimentary feeding starting at 6 months, continued breast feeding and complementary feeding up to 2 years and importance of colostrum					
	Counsels on the use of iodized salt by pregnant woman and whole family					
	Dangers of smoking to health of mother and baby					
	Counsels the woman and provides necessary information on benefits of spacing between births (at least 33 months between births)					
	Score: All "Yes"=1 point; Any "No"=0 points					
11. The service provider reviews care and with the pregnant woman, schedules time and date for a return visit	The service provider does the following:					
	Asks if she has any questions and responds to questions using easy-to-understand language					
	Sets a date for the next visit based on GoN's SBA policy of four focused ANC visits (second visit at 22–28 weeks, third at 32 and fourth at 38)					
	Informs the woman that she must come immediately if she experiences any danger signs or symptoms					
	Fills out the woman's ANC card					
	Verifies that the woman knows time and date of the next ANC visit and requests her to come for the next visit					
	Records all information in the antenatal register and card					
	Instructs the woman to bring the card at the time of next visit and delivery					
Score: All "Yes"=1 point; Any "No"=0 points						

Comments

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MN 01: Focused Antenatal Care	Self-Assessment Score			External Assessment Score	
Total standards	11	11	11	11	11
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

MN 02: Complications During Pregnancy

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Bleeding during pregnancy						
1. The service provider performs initial assessment of bleeding during pregnancy	The service provider does the following:					
	Greets woman respectfully and with kindness (socially accepted manner)					
	Assesses woman for shock or other complications					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The service provider assesses the woman's health condition	The service provider does the following:					
	Takes a reproductive history and performs physical examination and laboratory tests					
	Gives her information about her condition					
	Score: All "Yes"=1 point; Any "No"=0 points					
Hypovolemic Shock						
3. The service provider describes/ checks for signs of shock	The service provider can describe and checks for signs of shock:					
	Pulse weak and rapid (≥ 110 per minute)					
	Systolic blood pressure < 90 mm Hg					
	Pallor or sweating					
	Rapid breathing (30 breaths per minute, or more)					
	Confusion or unconsciousness					
	Low urine output (< 30 mL/hour)					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. The service provider describes management of/ manages shock	The service provider immediately manages shock:					
	Ensures that the woman is in the Trendelenburg position					
	Maintains airway					
	Opens vein with a cannula of 16 or 18 gauge					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Takes a blood sample for hemoglobin, coagulation, blood group and Rh (cross-matching).					
	Replaces fluids with normal saline or Ringer's lactate:					
	- Starts one liter of normal saline (NS)/Ringer's lactate (RL) within 15–20 minute period (wide open rate)					
	- Continues to replace NS/RL intravenously in accordance with blood loss					
	- Administers at least 2 additional liters of NS/RL solution during the first hour					
	Assesses woman's vital signs (every 15 minutes) and blood loss					
	Performs bladder catheterization and measures urine output					
	Administers oxygen 6–8 liter/minute by using cannula or mask					
	Score: All "Yes"=1 point; Any "No"=0 points					
5. The service provider identifies the specific cause of shock and describes management or manages shock according to the cause	The service provider can describe the causes and management of shock and correctly manage shock:					
	Records history of pregnant woman's health condition with woman or accompanying person					
	Performs obstetric (vaginal/uterine) examination, if needed					
	Diagnoses or identifies cause of bleeding					
	Performs specific actions to stop the bleeding, as per protocol					
	Performs blood transfusion as soon as possible in needed amount					
	Refers to specialty service centers (BEONC, CEONC, N/ICU), if needed					
	Score: All "Yes"=1 point; Any "No"=0 points					
6. The facility has the equipment and drugs for management of shock (ready to use)	The following commodities are available:					
	IV Cannula (16 or 18 gauge)					
	Container for taking blood sample					
	IV set					
	NS or RL					
	Oxygen cylinder or centrally managed and supplied source of oxygen (functional)					
	Nasal cannula and mask					
	Foley's catheter					
	Urine collection bag					
	Catheterization set					
	Suction machine					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Blood transfusion						
7. Clinical records show that the service provider followed the recommended procedures BEFORE initiating blood transfusion	Determine whether the following information was recorded on the clinical records of the two most recent transfusions for obstetric care:					
	Information prior to initiating transfusion:					
	– General appearance					
	– Temperature					
	– Pulse					
	– Respiration					
	– Blood pressure (BP)					
	– Liquid intake (IV and oral)					
	– Diuresis					
	– Hematocrit or hemoglobin					
– Woman’s blood group, type and volume of blood to be transfused						
– Confirmed donor code to be transfused is matches the woman’s blood						
8. Clinical records show that the service provider followed the recommended procedures DURING blood transfusion.	Determine whether the following information was recorded in the woman’s clinical record:					
	Information on the history of patient’s condition 15 minutes subsequent to initiation of transfusion then hourly during transfusion:					
	– General appearance					
	– Temperature					
	– Pulse					
	– Respiration					
	– BP					
	– Liquid intake (IV and oral)					
– Amount of urine						
	Score: All “Yes”=1 point; Any “No”=0 points					
9. Clinical records show that the service provider followed and recorded the recommended procedures AFTER completing a blood transfusion	Determine whether the following information was recorded on the woman’s clinical record:					
	Information on the history upon completion of the transfusion					
	- Duration (time of completion of transfusion)					
	- Volume and type of products transfused					
	- Donor code for product transfused					
	- Whether there was any adverse reaction					
	- Specific actions taken according to the adverse reaction, if any					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
10.The service provider prepares to manage bleeding using MVA (PAC)	The service provider prepares for shock management:					
	Tells the woman (and her support person) what is going to be done, listens to her and responds attentively to her questions and concerns					
	Provides continual emotional support and reassurance					
	Gives paracetamol 500 mg by mouth to the woman 30 minutes before procedure					
	Determines that required sterile or HLD instruments and cannula are ready					
	Checks MVA syringe and charges it (establishes vacuum). Ensures that appropriate size cannula and adapters are available					
	Checks that patient has recently emptied her bladder and washed her perineal area					
	Puts on plastic apron					
	Washes hands thoroughly and puts on HLD or sterile surgical gloves					
	Score:All "Yes"=1 point;Any "No"=0 points					
	11.The service provider performs MVA	The service provider does the following:				
Communicates with woman what is going to be performed and why						
Even if bleeding is slight, gives oxytocin IM or ergometrine						
Performs bimanual examination						
Inserts speculum						
Applies antiseptic to cervix and vagina two times						
Removes any products of conception (POC) hanging from uterus and checks for any cervical tears						
If using a tenaculum to grasp the cervix, first injects 1 mL of 0.5% lidocaine solution into the anterior or posterior lip of the cervix that has been exposed by the speculum						
Puts tenaculum or volsellum forceps on upper lip (12 o'clock) of cervix						
Inserts the cannula gently through the cervix into the uterine cavity						
Attaches the prepared syringe to the cannula						
Evacuates POC of the uterus using cannula						
Pushes the plunger to empty POC into the strainer						
Ensures signs of completion (pink foam, grating sensation)						
Remove forceps, tenaculum and speculum						
Performs bimanual examination						
Inserts speculum and checks for bleeding						
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
12. The service provider performs post-procedural task of MVA	The service provider does the following:					
	Flushes MVA syringe and cannula with 0.5% chlorine solution and submerges in solution for decontamination					
	Washes hands with gloves on in 0.5% chlorine solution, removes gloves and discards them in a leak-proof container, if disposing of; OR decontaminates them in 0.5% chlorine solution, if reusing					
	Washes hands thoroughly					
	Checks for bleeding and ensures cramping has decreased before discharging					
	Monitors vital signs. (BP, pulse)					
	Instructs patient regarding post-abortion care					
	Discusses reproductive goals and, as appropriate, provides family planning.					
	Score: All "Yes"=1 point; Any "No"=0 points					
13. The service provider correctly describes/ identifies signs and symptoms of severe pre-eclampsia and eclampsia	The service provider explains the following:					
	Severe pre-eclampsia					
	- Diastolic BP equal to or more than 110mm Hg					
	- 20 weeks or more gestation					
	- Proteinuria 3 +					
	Eclampsia					
	- Convulsions					
	- Diastolic BP equal to or more than 90mm Hg					
	- 20 weeks or more gestation					
- Proteinuria 2+ or greater						
Score: All "Yes"=1 point; Any "No"=0 points						
14. The service provider correctly describes/manages severe pre-eclampsia and eclampsia	The service provider manages severe pre-eclampsia and eclampsia					
	Administers initial (loading) dose of magnesium sulphate					
	- Gives 4 grams of 20% magnesium sulphate solution IV over the course of 5 minutes					
	- Follow promptly with 10g 50% MgSO ₄ solution: 5g in each buttock as a deep IM injection with 1mL 2% lidocaine in the same syringe					
	- If convulsion occurs after 15 minutes, administers 2g 50% MgSO ₄ IV drip over a 5 minute period					
	Administers maintenance dose of MgSO ₄					
- Administers 5 grams of 50% magnesium						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	<p>sulphate solution with 1mL 2% lidocaine deep IM alternately in each buttock every 4 hours</p> <p>- Continues MgSO₄ for 24 hours following birth or the most recent convulsion (whichever occurs last).</p> <p>Performs catheterization</p> <p>Monitors intake and output</p> <p>Monitors vital signs of pregnant woman</p> <p>Monitors fetal heartbeat and rate</p> <p>If there are convulsions (eclampsia), delivery done within 12 hours following the convulsion OR, if there is no convulsion, (severe pre-eclampsia) delivery done within 24 hours</p> <p>Provide antihypertensive treatment IF diastolic BP is 110mm Hg or more, and there ARE NO convulsions; OR BP is 90mm Hg and there ARE convulsion:</p> <p>- Plan 1: hydralazine 5 mg IV slowly every 5 minutes or 12.5 mg IM every 2 hours, until diastolic BP stabilizes between 90 and 100 mm Hg OR</p> <p>- Plan 2: Provide nefidipine 5mg sublingual. Repeat same dose of nefidipine if the BP still persistence >110 mm Hg after first dose of 10 minutes</p> <p>Score: All "Yes"=1 point; Any "No"=0 points</p>					
15. The service provider correctly describes/ performs examination during follow-up	The service provider does the following during follow-up for woman with severe pre-eclampsia or eclampsia					
	Monitors the following signs hourly:					
	- BP					
	- Pulse					
	- Temperature					
	- Respiration rate					
	- Patellar reflex					
	- Fetal heart rate					
	- Intake and urine output					
	- Signs and symptoms of pulmonary edema					
	Suspends or postpones the use of magnesium sulphate if respiration is <16/minute, absent of patellar reflexes or urinary output <30 mL per hour					
	If urine output less than 30ml/hour, magnesium sulphate is withheld and patient is infused with 1 liter RL IV over 8 hours. Also looks for signs of pulmonary edema					
In the event of respiratory arrest:						
- Performs assisted ventilation						

Quality Improvement Modules for Health Services Strengthening MN 03: Normal Delivery and Immediate Newborn Care

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format
Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The area designated for labor and delivery is safe and comfortable	The service provider provides an area that has:					
	Sufficient ventilation (open windows, fan) and is warm					
	Is clean					
	Enough light to perform procedure					
	Chairs for women during the first stage of labor					
	Sufficient chairs and space for one companion for each pregnant woman in the first stage room					
	Sufficient space for pregnant women in the first stage room to be able to walk around					
	A delivery table with pad and back that raises to allow for semi-seated position					
	Screens or curtains to ensure the privacy of women					
	Accessible, working toilets and bathrooms available for women during the first and second stage of labor					
	A sink with running water and soap					
	Wheelchair or stretcher					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2.The area designated for first stage of labor and delivery has equipment appropriate for the provision of care	The designated area is equipped with:					
	BP instrument					
	Stethoscope					
	Fetoscope or doppler					
	Thermometer					
	Working oxygen tank					
	Delivery kit					
	Suture kit					
	Forceps or vacuum extractor					
	Bag and mask					
	Neonatal mask size 0 and 1					
	DeLee Suction or foot-powered/electric suction with tubing					
	Sterile clamp or thread to tie umbilical cord					
	Instrument table or stand					
	Scale for weighing the newborn					
	Wall clock					
	IV stand					
Score:All "Yes"=1 point;Any "No"=0 points						
3.The area designated for first stage of labor and delivery has appropriate supplies for provision of care	The area contains:					
	Sterile gloves					
	Examination gloves					
	Suture materials					
	Four clean baby wraps per newborn for warming and drying newborn					
	Sterile gauze for wiping face and mouth of newborn					
	Cotton swabs and antiseptic solution (povidine iodine) or boiled water for cleaning perineum					
	Disposable syringes and needles					
	Perineal towel					
	Sterile perineal pad					
	Sterile catheters if necessary					
	Score:All "Yes"=1 point;Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4.The area designated for the first stage of labor and delivery has appropriate infection prevention materials available	The service provider checks if the area has:					
	Plastic aprons					
	Eye shields					
	Face masks					
	Closed-toed rubber shoes or boots					
	Individual hand towels for drying hands					
	Containers for 0.5% chlorine solution for gloves and instruments					
	Buckets for immersing dirty linens in water with detergent					
	Sharps containers (puncture-proof)					
	Waste bins					
	Spray bottle or basin containing 0.5% chlorine solution					
	Cloth for wiping tables with chlorine solution					
	Bucket with cover for placenta disposal					
	Score:All "Yes"=1 point;Any "No"=0 points					
5.Appropriate medications are available for provision of routine care in the labor room	The service provider checks the labor room for:					
	Oxytocin (stored in refrigerator)					
	Ergometrine					
	Lidocaine 1%					
	IV fluids and sets					
	Vitamin A					
	'Navi Malam'					
Score:All "Yes"=1 point;Any "No"=0 points						
6.There is a designated emergency trolley that is easily accessible	The service provider checks designated trolley for:					
	IV set and and IV cannulae (16, 18 gauge)					
	IV fluid/normal saline					
	Oxytocin					
	Syringe 5 mL, 10 mL, 20 mL					
	Magnesium sulphate 50%					
	Calcium gluconate					
	Lignocaine 1%					
	Nefidipine					
	Neonatal resuscitation set					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7. Equipment and supplies for newborn resuscitation are prepared before every birth	The service provider ensures the following:					
	Resuscitation table: clean, dry, well-lit, flat surface covered with clean cloth					
	Four cloths: 2 cloths for delivery (1 to dry baby, 1 to wrap baby) 1 cloth for resuscitation to put under the baby's shoulder, 1 cloth if necessary, for baby					
	Suction or cloth to wipe mouth					
	Bag and mask					
	Oxygen, if available					
	Score:All "Yes"=1 point;Any "No"=0 points					
8.The maternity (postnatal) ward is adequate for providing post-partum care	The service provider ensures that the maternity (postnatal) ward:					
	Is well ventilated (open windows) and warm					
	Is clean and well-maintained					
	Has good light					
	Has sufficient space for the mother, the baby and a companion					
Score:All "Yes"=1 point;Any "No"=0 points						
9.Appropriate equipment is available in the postnatal ward for providing post-partum care	The service provider ensures that the postnatal ward is equipped with:					
	BP instrument					
	Stethoscope					
	Thermometers					
	IV stand					
	Working oxygen tank or central supply source in or near the area					
	Examination gloves					
Score:All "Yes"=1 point;Any "No"=0 points						
10.There are working toilets for provider and for women, in the first stage of labor, delivery and postpartum areas	The health facility ensures that the toilet has:					
	A door that locks					
	Is clean and well-maintained					
	A working washbasin					
	Soap					
	Container for waste					
	Availability of water					
	Tap with water for bathing					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Care During Labor and Delivery						
11.The service provider receives the woman in labor in a cordial manner	Service provider does the following in the labor and delivery room:					
	Greets the woman and her companion in a cordial manner					
	Responds to questions using easy-to-understand language					
	Responds to her immediate needs (thirst, hunger, cold/hot, need to urinate, etc.)					
	Score:All "Yes"=1 point;Any "No"=0 points					
12.The service provider properly reviews and fills out the clinical history of the woman in labor	The service provider does the following in the labor room:					
	Asks the woman the following information and verifies the information in the patient's record card:					
	Name					
	Age					
	Number of previous pregnancies and births					
	Any complications during labor or postpartum period					
	Previous births by cesarean section, forceps or vacuum					
	Other general medical problems					
	Use of medications					
	Estimated date of delivery or last menstrual period					
	Asks the woman about her labor:					
	Time when painful regular contractions began					
	Frequency of contractions					
	If her membranes ruptured: time, color and smell					
	Whether she feels the baby's movements					
	Records the information on clinical history chart					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
13. The service provider properly prepares for the physical examination	The service provider does the following in the labor and delivery rooms:					
	Ensures privacy with a screen or curtain to separate the woman from others, at least during examination					
	Explains to the woman and her companion what the provider is going to do and encourages them to ask questions					
	Asks the woman to empty her bladder and clean perineum					
	Helps the woman to climb onto bed or examination table					
	Washes hands with running water and soap for 10–15 seconds and dries with an individual clean towel or allows hands to air dry					
	Score: All "Yes"=1 point; Any "No"=0 points					
14. The service provider properly conducts the physical examination	The service provider does the following:					
	Explains each step of the examination to the woman					
	Takes temperature					
	Takes pulse					
	Measures blood pressure					
	Determines respiratory rate					
	Measures symphysis fundal height					
	Determines fetal lie and presentation					
	Identifies degree of engagement by abdominal palpation (from five to zero fingers above the pubis)					
	Evaluates uterine contractions (frequency and duration over a 10 minute period)					
	Auscultates fetal heart rate					
	Explains all findings to the woman and her companion					
Score: All "Yes"=1 point; Any "No"=0 points						
15. The service provider properly conducts a vaginal examination	The service provider does the following:					
	Explains to the woman what is going to be done					
	Washes hands with running water and soap for 10 – 15 seconds and dries with an individual clean towel or allows hands to air dry					
	Puts sterile gloves on both hands					
	Cleanses the perineum with non-alcoholic antiseptic solution or boiled, warm water					
	Carefully inserts two fingers of the examining hand					
	Assesses cervical dilation, moulding, station of presenting part and position					
	Carefully withdraws fingers once the examination has concluded					
Explains findings to the woman						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Gloves are removed after being immersed in 0.5% chlorine solution and placed in a leak-proof container					
	Washes hands with running water and soap for 10 – 15 seconds and dries with an individual clean towel or allows hands to air dry					
	Records all information on the clinical records and partograph					
	Score:All "Yes"=1 point;Any "No"=0 points					
16.The service provider prepares and implements a plan according to the findings of the clinical history and the physical, obstetric and vaginal examination for providing care to the woman	The service provider does the following:					
	Ensures the woman has a companion during first stage of labor and birth					
	Counsels the woman on the importance of:					
	Going to the bathroom often to empty her bladder					
	Taking liquids and light foods whenever she needs to					
	Walking and changing position according to desire and comfort					
	Score:All "Yes"=1 point;Any "No"=0 points					
17.The service provider uses the partograph to monitor labor and make adjustments to the birth plan when the woman goes into active stage of labor (4 cm)	Based on the clinical history and partograph of the woman in labor, the service provider does the following:					
	Records patient's information:					
	- Name					
	- Gravida, para					
	- Hospital number (if applicable)					
	- Date and time of admission					
	- Time of ruptured membranes					
	Records every 30 minutes:					
	- Fetal heart rate					
	- Uterine contractions (frequency and intensity over a 10-minute period)					
	- Maternal pulse					
	- Amount of IV solution with oxytocin in drops per minute, medications and other intravenous liquids, if used					
	- Records temperature every four hours					
	- Records BP every 4 hours					
	At every vaginal examination, the service provider does the following (every 4 hours or less, according to progress of labor):					
- Records the condition of the membranes and characteristics of the amniotic fluid						
- Graphs the degree of moulding of the head						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	- Graphs cervical dilation					
	- Graphs the descent of the head or buttocks.					
	Records the amount of urine every time the woman urinates					
	Records the time of the observation					
	Adjusts the labor plan according to the parameters encountered:					
	- If parameters are normal, continues to implement the plan (walk about freely, hydration, light food if desired, change positions, etc.) OR					
	- If parameters are not normal, identifies complications, records the diagnosis and makes adjustments to the birth plan					
	Score:All "Yes"=1 point;Any "No"=0 points					
18.The IP practices during labor are performed according to standards	In the labor room, the service provider does the following:					
	Cleanses the vulva with an antiseptic solution or boiled water before performing vaginal examination					
	Uses HLD or sterile gloves when performing vaginal examination or when in contact with bodily fluids					
	Performs limited vaginal examination (e.g., every four hours, or as indicated)					
	Performs limited bladder catheterization					
	- Plain bladder catheterization is not routinely performed for normal delivery					
	- Plain bladder catheterization is not performed as a routine for normal delivery					
	Uses limited IV solution:					
	- Taking fluids orally encouraged during labor					
	- Use of IV solution is not routine during labor and delivery					
	Shaving of the perineal area is not performed					
	Rupture of membranes is not performed routinely					
	Score:All "Yes"=1 point;Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
19. The service provider prepares to assist the birth	The service provider does the following (in the labor or delivery rooms):					
	Has delivery pack and the following essential materials available and ready to assist the delivery:					
	- Sterile tray					
	- Two hemostats (clamps)					
	- One pair of scissors for cutting the cord					
	- One sponge holder					
	- One bowl to keep placenta					
	- Small bowl for antiseptic solutions					
	- One cord clamp or sterile tie					
	- Four clean or sterile towels: one to receive baby; one to dry the baby; one to place under the woman; one for active management					
	- Sterile gauze to clean baby's mouth and nose					
	- One syringe with 10 IU of oxytocin					
	- Two pairs of sterile gloves					
	Ambu bag and mask ready for use					
	Has one plastic container with 0.5% chlorine solution for decontamination					
	Has one plastic container with lid for placenta					
	Has one plastic container for medical waste (gauze, etc.)					
	Has one sharps container (puncture-proof) at point of use to dispose of needles and syringes					
	Has one leak-proof container to dispose of soiled linen					
	Keeps the place where the woman is located clean					
	Attends the birth in the position selected by the woman					
	Ensures the privacy of the woman:					
	– Separates the area with curtains, sheets or screens as appropriate					
	– Ensures that the fewest people possible are present during birth (the provider attending the birth and a family member/the individual chosen by the woman)					
	Explains to the woman how to help herself and manage the bearing down process (when and how)					
	Puts on a clean plastic or rubber apron					
	Puts on face shield or mask and goggles					
Wears shoes that protect feet from blood spills, splashes or instruments						
Washes hands with running water and soap for 10–15 seconds and dries with an individual clean towel or air dries						
Puts sterile gloves on both hands						
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
20.The service provider properly assists delivery of the head	The service provider does the following (in the labor or delivery rooms):					
	Cleanses the vulva with non-alcoholic antiseptic solution (betadine) or boiled, warm water					
	Allows the woman to bear down when she feels the desire (does not force her to bear down when she does not feel the desire)					
	Performs an episiotomy only if necessary (breech, shoulder dystocia, forceps, vacuum, scarring from poorly healed third or fourth degree tears)					
	Asks to bear down gently along with the contractions while the head is emerging					
	Places the palm of one hand against the baby's head to keep it flexed and to prevent abrupt expulsion, places another hand on perineum with gauge for support					
	Score:All "Yes"=1 point;Any "No"=0 points					
21.The service provider properly assists with the delivery of the body	The service provider does the following:					
	After the emergence of the head, asks the woman to stop bearing down					
	Cleans the baby's mouth and nose using sterile gauze					
	Palpates to determine if cord around neck					
	Allows spontaneous external rotation without manipulation					
	Carefully takes the baby's head in both hands and applies downward traction until the anterior shoulder has emerged (no neck holding)					
	Guides the baby's head and chest upward until the posterior shoulder has emerged					
	Holds the baby by the trunk and places the baby on a clean dry towel on the mother's abdomen					
	Dries baby vigorously and changes wet towel for a clean dry one to wrap the baby					
	Delays clamping of the umbilical cord for 1-3 minutes					
	Clamps the umbilical cord and cuts using sterile scissors under gauze to prevent blood spurting					
	If the baby is breathing normally, passes the baby to mother for skin-to-skin contact on chest					
	If the baby does not begin breathing or is breathing with difficulty, initiates resuscitation					
	Notes time of birth					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
22. The service provider properly performs active management of the third stage of labor	The service provider does the following in the delivery room:					
	Palpates the mother's abdomen to rule out the presence of a second baby					
	Tells the woman that she will receive an injection and administers 10 IU of oxytocin IM					
	Places the other hand on the woman's symphysis pubis (over a sterile towel)					
	Maintains firm traction on the cord and waits for the uterus to contract					
	Upon contraction, applies firm and sustained downward traction on the cord with counter traction above the pubis to guard the uterus, until the placenta is expelled					
	If this maneuver does not provide immediate results, stops applying traction, holding the cord and clamp until the next contraction					
	Repeats controlled cord traction during contraction while simultaneously applying counter traction above pubis to guard uterus					
	With both hands, assists in the expulsion of the placenta by turning it over in the hands without applying traction twisting the membranes					
	Gently massages the uterus with one hand on a sterile cloth over the abdomen until it contracts firmly					
	Score: All "Yes"=1 point; Any "No"=0 points					
Immediate postpartum and newborn care						
23. The service provider adequately performs immediate postpartum care	The service provider does the following in the labor or delivery room:					
	Checks to see whether the delivery of placenta is complete (maternal and fetal sides, plus membranes)					
	Informs the woman what is going to be done before proceeding, then carefully examines the vagina and perineum					
	Sutures tears, if necessary					
	Covers the perineum with a clean sanitary pad					
	Makes sure that the woman is comfortable (clean, hydrated and warmly covered)					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
24. The provider adequately performs immediate newborn care	The service provider does the following after birth:					
	Cleans and dries newborn immediately using clean, soft and dry cloth and wraps with another clean, soft and dry cloth					
	Tells the mother to place newborn on her chest to keep the baby warm (skin-to-skin contact)					
	Advises and supports mother for colostrum feeding within one hour of delivery					
	Applies 'Navi Malam' after cutting cord and advises mother to keep the cord dry and clean					
	Advises mother to not bathe the child within 24 hours to prevent hypothermia					
	Score: All "Yes"=1 point; Any "No"=0 points					
25. The service provider properly disposes of the used instruments and medical waste after assisting the birth	The service provider does the following (in labor or delivery room):					
	Before removing gloves:					
	– Discards the placenta in a leak-proof container					
	– Disposes of medical waste (gauze, etc.) in a plastic container					
	– Puts the soiled linens in a leak-proof container					
	– Places all reusable instruments in a 0.5% chlorine solution for 10 minutes					
	– Disposes of needles and syringes in a puncture-proof container, without removing, recapping or breaking the needles					
	Removes gloves after immersing in 0.5% chlorine solution and disposes in a leak-proof container					
	Washes hands with running water and soap for 10 – 15 seconds and dries with an individual clean towel or air dries					
Score: All "Yes"=1 point; Any "No"=0 points						
Immediate care provided to newborn and mother						
26. The provider performs a thorough physical examination of the baby	The service provider does the following:					
	Washes hands thoroughly for 30 seconds with soap and water and dries them with a clean, dry cloth or allows them to air dry					
	Places baby on a clean, warm surface under a good light, with the mother or family present					
	Weighs the baby and records temperature					
	Determines respiratory rate by counting the number of breaths taken in a full minute					
	Checks color for pallor, jaundice and cyanosis					
	Examines head, eyes, face and mouth					
	Observes movements and posture, level of alertness and limbs					
Examines chest, abdomen and umbilicus						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Examines anus, reproductive organs					
	Examines back and vertebra					
	Informs mother of results of examination including any abnormalities					
	Washes hands again					
	Score:All "Yes"=1 point;Any "No"=0 points					
27.The service provider closely monitors the woman and newborn for at least six hours after the birth	The service provider does the following:					
	Monitors the woman every 15 minutes in the first two hours checking for:					
	- Uterine contractions					
	- Vaginal bleeding					
	- Inflammation of perineum, checks for hematoma if stitched					
	- Bladder distention					
	- BP					
	- Pulse					
	- Consciousness					
	- Baby's breathing, condition and breastfeeding					
	Monitors the woman every 30 minutes in the third hour, checking:					
	- Uterine contraction					
	- Vaginal bleeding					
	- Bladder distention					
	- BP					
	- Pulse					
	- Hydration					
	- Consciousness					
	- Baby's breathing, condition and breastfeeding					
	After 4 hours, monitors the woman and newborn every hour for the next three hours					
Assists the woman with breastfeeding						
Asks the woman if she has urinated and encourages her to urinate whenever she wishes						
Records the information on the woman's clinical record and reports any abnormalities						
Score:All "Yes"=1 point;Any "No"=0 points						

Comments

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MN 03: Normal Delivery and Immediate Newborn Care	Self-Assessment Score			External Assessment Score	
	27	27	27	27	27
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening MN 04: Complications During Labor and Childbirth

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Cord prolapse						
1. The service provider performs the correct management of prolapsed cord	The service provider describes/performs management of cord prolapse:					
	Greets the woman in a cordial manner					
	Provides continuous emotional support and reassurance, as feasible					
	Gives oxygen 4–6 L/minute by face mask or nasal cannula					
	Checks for cord pulsation (if pulsative-fetus is alive)					
	If woman is in 1 st stage of labor: places one gloved hand into the vagina and pushes the presenting part upward					
	Elevates the hips (Trendelenberg position), as feasible					
	Holds the presenting part as high as possible out of the pelvic brim with the abdominal hand until the woman has been prepared for caesarean section					
	Score: All “Yes” = 1 point; Any “No” = 0 points					
Breech delivery						
2. The service provider prepares for breech delivery	The service provider does the following:					
	Prepares the necessary equipment					
	Tells the woman (and her support person) what is going to be done, listens to her and responds attentively to her questions					
	Provides continuous emotional support and reassurance					
	Ensures that the conditions for breech delivery are present					
	Puts on personal protective barriers					
	Washes hands thoroughly and puts on HLD or sterile surgical gloves					
	Cleans the vulva with antiseptic solution or boiled water					
	Catheterizes the bladder, if necessary					
	Score: All “Yes” = 1 point; Any “No” = 0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. The service provider correctly performs delivery of buttocks and legs	The service provider does the following:					
	When the anterior and posterior buttocks are seen in the vagina and the cervix is fully dilated, tells the woman that she can bear down with contractions if she has the urge to push					
	Performs an episiotomy, if necessary					
	Lets the buttocks deliver until the lower back and then the shoulder blades are seen					
	Gently holds the buttocks in one hand, but do not pull					
	Covers the baby with a clean towel					
	If the legs do not deliver spontaneously, delivers one leg at a time					
	Holds the baby by the hips					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
4. The service provider properly manages delivery of the arms	The service provider does the following:					
	Allows arms to dis-engage spontaneously					
	If the arms are stretched above the head or folded around the neck, uses Lovset's maneuver:					
	- Holds the baby by the hips and turn half a circle, keeping the back uppermost					
	- Applies downward traction at the same time so that the posterior arm becomes anterior and delivers the arm under the pubic arch by placing two fingers on the upper part of the arm					
	- Draws the arm down over the face as the elbow is flexed, with the hand sweeping over the face					
	- To deliver the second arm, turns the baby back half a circle while keeping the back uppermost and applying downward traction to deliver the second arm in the same way under the pubic arch					
	If the baby's body cannot be turned to deliver the arm that is anterior first, delivers the shoulder that is posterior					
	Holds and lifts the baby up by the ankles					
	Moves the baby's chest towards the woman's inner leg. The shoulder that is posterior should deliver					
	Delivers the arm and hand					
	Lays the baby back down by the ankles. The shoulder that is anterior should now deliver					
	Delivers the arm and hand					
Score: All "Yes" = 1 point; Any "No" = 0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. The service provider manages to deliver head properly	The service provider does the following:					
	Service provider delivers the head by modified Mauriceau Smellie Veit maneuver:					
	Lays baby face-down with the length of its body over hand and arm					
	Places first and third fingers of this hand on baby's cheekbones and places second finger on baby's chin to flex head					
	Uses the other hand to grasp the baby's shoulders					
	With two fingers of the same hand, gently flexes the baby's head toward chest, while applying downward pressure on the both cheeks to bring the baby's head down until hairline is visible					
	Pulls gently to deliver the head					
	Raises the baby, still astride the forearm, until the mouth and nose are free					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
	6. The service provider correctly performs post-procedure tasks	The service provider does the following:				
Disposes of waste materials in a leak-proof container before removing gloves						
Places all instruments in 0.5% chlorine solution for decontamination						
Removes gloves and discards them in a leak-proof container, if disposing of; or decontaminates them in 0.5% chlorine solution, if reusing						
Washes hands thoroughly						
Score: All "Yes" = 1 point; Any "No" = 0 points						
Shoulder Dystocia Management						
7. The service provider correctly manages shoulder dystocia	The service provider does the following:					
	Provides continuous emotional support and reassurance to the woman					
	Calls for help					
	Makes an adequate episiotomy					
	Asks the woman to flex both thighs, bringing her knees as far up as possible towards her chest					
	Wearing HLD gloves, applies firm downward pressure on the fetal head to move shoulder that is anterior under symphysis pubis					
	Asks an assistant to apply suprapubic pressure downwards to assist delivery					
	If the shoulder is still not delivered, inserts a hand into vagina and applies pressure to shoulder that is anterior to rotate and decrease shoulder diameter					
	If needed, applies pressure to shoulder that is posterior in the direction of sternum					
	If the shoulder still is not delivered, inserts a hand into vagina and grasps the humerus of the arm that is posterior and sweeps the arm across the chest. This will provide room for the shoulder that is anterior to move under the symphysis pubis					
	If the baby is still not delivered, keep mother in knee chest position. If unsuccessful, refer after explanation					
Score: All "Yes" = 1 point; Any "No" = 0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Newborn Resuscitation						
8. The service provider performs the necessary steps required to perform newborn resuscitation	The service provider prepares for newborn resuscitation:					
	Prepares equipment and supplies for resuscitation before every birth					
	Immediately after delivery, puts the baby on the mother's abdomen. Dries the baby with clean cloth. To stimulate the baby, rubs the baby's whole body firmly with cloth covering the body					
	If the baby does not begin breathing spontaneously, cuts cord and moves baby to resuscitation area					
	Explains to the mother and family that the baby needs help					
	Removes wet cloth or towel					
	Quickly wraps the baby with clean, dry, warm cloth without covering the face and chest					
	Maintains the airway by gently extending the neck to slightly raise the head					
	If blood or meconium is present in the mouth or nose, clear airways by suctioning the mouth first and then nostrils using mucous trap or suction machine					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
9. The service provider correctly ventilates the baby/states the correct technique for ventilating the baby	The service provider performs further steps in resuscitation if the baby still does not breathe:					
	If baby is still not breathing, places the bag or mask over the baby's mouth and nose and starts resuscitation					
	Places the mask over the baby mouth and nose ensuring it is airtight and gives oxygen twice					
	If the chest does not rise:					
	- Checks head position, slightly extends the newborn's head to position chin upwards					
	- Checks for fluid in the mouth. If there is fluid, performs suction					
	- Checks the mask position to ensure that bag and mask is sealed over nose and mouth					
	Ventilates the baby 40 times in 60 seconds. When the baby begins to breathe, stops ventilation					
	After every 60 seconds of ventilation, re-assesses the baby's breathing:					
	- If the baby breathes spontaneously, stops resuscitation. Continues to give supportive care					
	- If the baby is not breathing or heart rate is <100, evaluates for 6 seconds. Continues to ventilate 40 times in 60 seconds and then re-evaluates					
	If the newborn's heart rate is not normal and referral is possible then, continues resuscitation and refers. If newborn's heart rate is not normal and referral is not possible then, continues resuscitation for 20 minutes					
In between, provides emotional support to family						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	If the baby is still not breathing and has hiccups only, then continues resuscitation for an additional 10 minutes					
	If there is no heartbeat and referral is not possible, then declare death after 30 minutes					
	Score: All “Yes” = 1 point; Any “No” = 0 points					
10. The service provider correctly cares for the newborn following resuscitation	The service provider does the following:					
	Stimulates the baby gently to continue breathing, as needed					
	If baby’s breathing and skin color is good, gives baby to the mother and advises to keep the baby warm and initiate breastfeeding					
	Keeps the baby warm and dry and does not bathe the baby during the first 24 hours					
	If the baby shows danger signs, refers immediately for specialized care					
	Score: All “Yes” = 1 point; Any “No” = 0 points					
11. The service provider correctly performs post-procedure tasks	The service provider does the following:					
	Wipes exposed surfaces of the bag and mask with a gauze pad soaked in 80% alcohol and rinses immediately					
	Washes hands thoroughly with soap and water and dries with a clean, dry cloth or air dries					
	Records the resuscitation effort:					
	- Time and date of birth					
	- Breathing condition at birth					
	- Time of slightly extending newborn’s neck to straighten respiratory tract					
	- Time of using suction to clean nose and mouth of the newborn					
	- Time of rubbing newborn’s back					
	- Time of artificial resuscitation given to baby (bag and mask or other method)					
	- Time and condition of newborn’s heart rate examination					
	- Time when newborn started breathing normally					
	- Time when artificial resuscitation was stopped					
	- Result of resuscitation (success, referral, death)					
Score: All “Yes” = 1 point; Any “No” = 0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
Bimanual compression of the uterus						
12. The service provider correctly performs the procedure for bimanual compression of uterus	The service provider does the following:					
	Provides continuous emotional support and reassurance					
	If not wearing gloves already, puts on HLD or sterile surgical gloves					
	Inserts a hand into the vagina and removes any blood clots from the lower part of the uterus or cervix					
	Forms a fist					
	Inserts fist into anterior vaginal fornix and applies pressure against the anterior wall of the uterus					
	Places other hand on abdomen behind uterus, presses the hand deeply into the abdomen and applies pressure against the posterior wall of the uterus					
	Maintains compression until bleeding is controlled and the uterus contracts					
	Monitors vaginal bleeding, takes the woman's vital signs and makes sure that the uterus is firmly contracted					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
13. The service provider correctly performs post-procedure tasks	The service provider does the following:					
	Removes gloves and discards them in leak-proof container, if disposing of, or decontaminates them in 0.5% chlorine solution, if reusing					
	Washes hands thoroughly with soap and water					
	Monitors vaginal bleeding, takes the woman's vital signs and makes sure that the uterus is firmly contracted					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
Compression of the Abdominal Aorta						
14. The provider correctly performs compression of the abdominal aorta	The service provider does the following:					
	Tells the woman what is going to be done, listens to her and responds attentively to her questions and concerns					
	Provides continuous emotional support and reassurance					
	Applies downward pressure with a closed fist over the abdominal aorta directly through the abdominal wall					
	Applies compression just above the umbilicus and slightly to the left					
	Feels aortic pulsations through the anterior abdominal wall in the immediate postpartum period					
	With the other hand, palpates the femoral pulse to check the adequacy of compression - If the pulse is palpable during compression, pressure exerted by the fist is inadequate - If the femoral pulse is not palpable, the pressure exerted is adequate					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Maintains compression until bleeding is controlled or alternative measures can be taken					
	Monitors vaginal bleeding, takes the woman's vital signs and makes sure that the uterus is firmly contracted					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
Vacuum-Assisted Birth						
15. The service provider prepares for vacuum extraction	The service provider does the following:					
	Prepares the necessary equipment					
	Tells the woman what is going to be done, listens to her and responds attentively to her questions and concerns					
	Provides continuous emotional support and reassurance					
	Ensures that the conditions for vacuum extraction are present					
	Makes sure an assistant is available					
	Puts on personal protective barriers					
	Washes hands thoroughly and puts on HLD or sterile surgical gloves					
	Cleans the vulva with antiseptic solution or boiled lukewarm water					
	Catheterizes the bladder, if necessary					
	Checks all connections on the vacuum extractor and tests the vacuum					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
16. The service provider performs vacuum extraction	The service provider does the following:					
	Assesses the position of the fetal head and identifies the posterior fontanelle					
	Locates the flexion point, 3 cm anterior to the posterior fontanelle					
	Applies the largest cup that will fit					
	Performs episiotomy if necessary for traction					
	Checks the application and ensures that there is no maternal soft tissue within the rim of the cup					
	Tells the assistant to create a vacuum of 0.2 kg/cm ² negative pressure and checks the application of the cup					
	Increases the vacuum to 0.8 kg/cm ² and then applies traction. Corrects the tilt or deflexion of the head during traction if fetal head is tilted or not flexed well					
	With each contraction, applies traction in a line perpendicular to the plane of the cup rim and assesses potential slippage and descent of the vertex					
	Between each contraction, have assistant check fetal heart rate and check application of the cup					
	Releases the vacuum and removes the cup when the head has been delivered					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Performs active management of the third stage of labour					
	Checks the birth canal for tears following delivery and repairs if necessary. Repairs the episiotomy, if one was performed					
	Score:All “Yes” = 1 point;Any “No” = 0 points					
17.The service provider performs post-extraction tasks	The service provider does the following:					
	Before removing gloves, disposes of waste materials in a leak-proof container					
	Places all instruments in 0.5% chlorine solution for decontamination					
	Removes gloves and discards them in a leak-proof container if disposing of or decontaminates them in 0.5% chlorine solution if reusing					
	Washes hands thoroughly					
	Score:All “Yes” = 1 point;Any “No” = 0 points					
Repair of Cervical Tears						
18.The service provider correctly prepares for cervical tear repair	The service provider does the following:					
	Prepares the necessary equipment					
	Tells the woman what is going to be done, listens to her and responds attentively to her questions and concerns					
	Provides continuous emotional support and reassurance					
	Tells the woman to empty her bladder or inserts a catheter					
	Puts on personal protective barriers					
	Score:All “Yes” = 1 point;Any “No” = 0 points					
19.The service provider repairs cervical tears following proper technique	The service provider does the following:					
	Wearing HLD or sterile surgical gloves, cleans the vagina and cervix with an antiseptic solution					
	Grasps both sides of the cervix using ring or sponge forceps (one forceps for each side of tear)					
	Places the first suture at the top of the tear and closes it with a continuous suture including the whole thickness of the cervix each time the suture needle is inserted					
	If a long section of the rim of the cervix is tattered, under-runs it with a continuous suture					
	Uses artery or ring forceps if the apex is difficult to reach and ligate. Leaves the forceps for four hours					
	After 4 hours, opens the forceps partially but does not remove					
	After another 4 hours, removes the forceps completely and measures blood pressure					
Score:All “Yes” = 1 point;Any “No” = 0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
20. The service provider correctly performs post-tear repair tasks	The service provider does the following:					
	Before removing gloves, disposes of waste materials in a leak-proof container					
	Places all instruments in 0.5% chlorine solution for decontamination					
	Removes gloves and discards them in a leak-proof container; if disposing of, or decontaminates in 0.5% chlorine solution, if reusing					
	Washes hands thoroughly					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
Repair of First and Second Degree Tears						
21. The service provider prepares for repair of first or second degree tears of vagina	The service provider does the following:					
	Prepares the necessary equipment					
	Tells the woman what is going to be done, listens to her and responds attentively to her questions and concerns					
	Provides continuous emotional support and reassurance					
	Asks about allergies to anesthetics					
	Wears personal protective barriers					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
22. The service provider correctly repairs first and second degree tears of vagina	The service provider does the following:					
	Washes hands thoroughly and puts on HLD or sterile surgical gloves					
	Applies antiseptic solution to the areas around the tear					
	Administers 5-10 ml local anesthesia 0.5% lidocaine					
	Places the first suture about 1 cm above the top of the vaginal tear					
	Using a continuous suture, works down to the level of the vaginal opening and brings together the torn edges of the vaginal opening					
	Repairs the perineal muscle using interrupted sutures. Repairs the skin using interrupted (or subcuticular) sutures starting at the vaginal opening					
	Washes the perineum and puts a clean pad on the woman's perineum					
	Score: All "Yes" = 1 point; Any "No" = 0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
23. The service provider correctly performs post-tear repair tasks	The service provider does the following:					
	Before removing gloves, disposes of waste materials in a leak-proof container					
	Places all instruments in 0.5% chlorine solution for decontamination					
	Places syringe in puncture-proof container					
	Removes gloves and discards them in a leak-proof container if disposing of or decontaminates in 0.5% chlorine solution if reusing					
	Washes hands thoroughly					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
Manual Removal of Placenta						
24. The service provider prepares for manual removal of the placenta	The service provider does the following:					
	Prepares the necessary equipment					
	Tells the woman what is going to be done, listens to her and responds attentively to her questions and concerns					
	Provides continuous emotional support and reassurance					
	Tells the woman to empty her bladder or inserts a catheter					
	Gives anesthesia: IV morphine and diazepam slowly- do not mix in same syringe or ketamine					
	Gives prophylactic antibiotics: ampicillin 2 g IV or cefazolin 1 g IV					
	Puts on personal protective barriers					
Score: All "Yes" = 1 point; Any "No" = 0 points						
25. The service provider correctly performs manual removal of the placenta	The service provider does the following:					
	Washes hands and forearms thoroughly and puts on HLD or sterile surgical gloves (ensure elbow-length protection)					
	Holds the umbilical cord with a clamp and pulls the cord gently					
	Places the fingers of one hand into the uterine cavity and locates the low edge of placenta					
	Provides support to the fundus					
	Moves the hand back and forth in a smooth lateral motion until the whole placenta is separated from the uterine wall					
	Withdraws the hand from the uterus, bringing the placenta with it while continuing to provide counter-traction abdominally					
	Gives 20 unit oxytocin in 1 L IV fluids					
Have an assistant massage the fundus to encourage uterine contraction						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	If heavy bleeding continues, gives ergometrine (0.2mg) by IM injection or prostaglandins					
	Examines the uterine surface of the placenta to ensure that it is complete					
	Examines the woman carefully and repairs any tears to the cervix or vagina or repairs episiotomy					
	Score: All "Yes" = 1 point; Any "No" = 0 points					
26. The service provider correctly performs the steps after placenta removal	The service provider does the following:					
	Removes gloves and discards them in a leak-proof container if disposing of or decontaminates them in 0.5% chlorine solution if reusing					
	Washes hands thoroughly					
	Monitors vaginal bleeding, takes the woman's vital signs and makes sure that the uterus is firmly contracted					
	Score: All "Yes" = 1 point; Any "No" = 0 points					

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MN 04: Complications During Labor and Childbirth	Self-Assessment Score			External Assessment Score	
Total standards	26	26	26	26	26
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening MN 05: Postpartum Care

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The service provider prepares for postpartum assessment and care	The service provider does the following:					
	Prepares the necessary equipment					
	Greets woman respectfully and with kindness					
	Tells the woman and her support person what is going to be done, listens to her attentively and responds to her questions and concern					
	Provides continual emotional support and reassurance					
	Washes hands thoroughly					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The service provider takes history of personal information (first visit)	The service provider asks for the following information, if not available on the women's record:					
	Mother's name, age and name of baby					
	Access to reliable transportation					
	Source of income/financial support					
	Frequency of pregnancies and number of children					
	Number of children that are still living					
	Any particular problems at present					
	Care received from other caregivers					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. The service provider takes history of daily habits and lifestyle	The service provider asks the woman about the following:					
	Working outside the home					
	Long-distance walking, carrying heavy loads or physical labor					
	Getting enough sleep/rest in a day					
	Usual foods taken in a day					
	Smoking, drinking alcohol or using other possibly harmful substances					
	Ever prevented from seeing family or friends, stopped from leaving home or any threats to her life					
	Injured, hit or forced to have sex by someone					
	Frightened of anyone					
	Score: All "Yes"=1 point; Any "No"=0 points					
4. The service provider takes history of recent pregnancy and childbirth (First visit)	The service provider asks the woman about the following:					
	When woman delivered the baby					
	Delivery place of the baby and who attended the birth					
	Whether woman had any vaginal bleeding during this pregnancy					
	Whether woman had any complications during this childbirth					
	Any complications with the baby					
	About weight of the baby at birth					
Score: All "Yes"=1 point; Any "No"=0 points						
5. The service provider takes history of present postpartum period (every visit)	The service provider asks the woman about the following:					
	About any heavy bleeding since women she gave birth					
	Color of vaginal discharge and frequency of pad/cloth change					
	Any problems with bowel or bladder function					
	Feeling of mother after child birth and ability to take care of the baby					
	How the family is adjusting to the baby					
	Experience of breastfeeding					
	If she has had any complications following previous childbirth					
	Score: All "Yes"=1 point; Any "No"=0 points					
6. The service provider takes contraceptive history (first visit)	The service provider asks the woman about the following:					
	Number of children she plans to have					
	If she has used any family planning method before					
	If she plans to use family planning in the future and counsels on different types of FP methods, if needed					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7.The service provider takes medical history (first visit)	The service provider asks the woman about the following:					
	Any allergies					
	Recent anemia					
	Tested for HIV/VDRL					
	Any chronic illness/conditions, such as tuberculosis, hepatitis, heart diseases, diabetes or any other chronic illness					
	History of hospitalization or surgery/operations					
	Taken any drugs/medications including traditional/ local preparations, herbal remedies, over-the-counter drugs, vitamins and dietary supplements					
	Complete series of five tetanus toxoid/tetanus diphtheria immunizations					
	Any problems at present					
	Score:All "Yes"=1 point;Any "No"=0 points					
8.The service provider performs physical examination/vital signs and breast examination (every visit)	The service provider does the following:					
	Asks the women to empty her bladder					
	Observes gait and movements, behavior and facial expressions					
	Observes general hygiene noting visible dirt and odor					
	Checks skin, noting lesions and bruises					
	Checks conjunctiva for pallor					
	Measures blood pressure, temperature and pulse					
	Explains the next steps in the physical examination and obtains her consent to proceed					
	Asks the women to uncover her body from the waist up and examines her breasts, noting any abnormalities					
	Score:All "Yes"=1 point;Any "No"=0 points					
9.The service provider performs abdominal, leg and genital examination (every visit)	The service provider does the following:					
	Asks the women to uncover her stomach and lie on her back with her knees slightly bent					
	Looks for old or new incisions on the abdomen and gently palpates abdomen between umbilicus and symphysis pubis noting size and firmness of uterus					
	Examines woman's legs, noting any calf pain or inflammation					
	Asks the woman to uncover her genital area and covers or drapes her to preserve privacy and modesty					
	Washes hands and puts on new examination or HLD gloves on both hands					
	Inspects/examines labia, clitoris and perineum noting lochia, scars, bruising and skin integrity					
	Decontaminates gloves before removing them					
	Washes hands thoroughly					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
10. The service provider takes interim history (return visit)	The service provider asks the woman the following:					
	Any problems since last visit?					
	Daily habits or lifestyle (workload, rest, dietary intake) changed since last visit					
	Care received from another caregiver since last visit					
	Have you taken any drugs/medications prescribed and followed the advice/recommendations provided during the last visit?					
	Any reactions to or side effects from immunizations or drugs/medications given at last visit?					
	Score: All "Yes"=1 point; Any "No"=0 points					
11. The service provider provides specialized care according to the mother's needs	The service provider does the following:					
	Provides HIV counselling (if the woman does not know her HIV status or has not been tested for HIV)					
	Provides information about breastfeeding and breast care, based on the women's breastfeeding history					
	Reviews the complication readiness plan with woman (or develops one if she does not have one)					
	Introduces the concepts of birth spacing and family planning					
	Provides advice and counselling about diet and nutrition					
	Provides advice and counselling about self-care and hygiene					
	Gives TT/TD based on woman's need					
	Dispenses sufficient supply of iron/folic acid until next visit and counsels the women about taking the pills					
	Dispenses other medications (such as vitamin A), if not given immediately after birth					
	Schedules the next visit on third day, 3rd on 7th day, and 4th within 42 days or as needed in case of complications					
	Records in maternal and newborn register and on ANC card					
Score: All "Yes"=1 point; Any "No"=0 points						

Comments

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MN 05: Post-partum Care	Self-Assessment Score			External Assessment Score	
Total standards	11	11	11	11	11
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening MN 06: Newborn Care

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The service provider properly prepares for assessment of newborn	The service provider does the following:					
	Prepares necessary equipment					
	Tells the mother what service provider is going to do, encourages her to ask questions and listens to what she has to say					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The service provider takes history of personal information (first visit)	The service provider asks the following questions if the information is not available on the mother's/baby's record:					
	Mother's name, age and address					
	Name and sex of baby					
	Date and time of baby's birth					
	Sources of income/financial support					
	Frequency of pregnancy and number of children					
	Any particular health problem at present					
	Care received from other caregivers					
Score: All "Yes"=1 point; Any "No"=0 points						
3. The service provider takes birth history of the baby	The service provider asks the following questions if the information is not available on the mother's/baby's record:					
	Place of birth and who attended the birth					
	Any complications during the birth that may have caused injury to the baby					
	If the baby needed resuscitation at birth					
	Baby's weight at birth					
	Any congenital malformation and/or deformity					
	Immunization for polio, BCG and hepatitis B given					
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4.The service provider takes medical history of the mother (first visit)	The provider asks the following questions if the information is not available on the mother's/ baby's record:					
	History of any infectious diseases such as hepatitis B, syphilis, HIV, or TB					
	Score:All "Yes"=1 point;Any "No"=0 points					
5.The service provider takes health and family history of newborn (first and every visit)	The service provider asks about the following:					
	Feelings about the baby and ability to take care of her/him					
	Is family adjusting well to the baby?					
	Is breastfeeding going well?					
	Frequency of the baby's feeding					
	The color/consistency of baby's last stool					
	Score:All "Yes"=1 point;Any "No"=0 points					
6.The service provider takes interim history (return visit)	The service provider asks about the following:					
	Any problems at present or any problems since the last visit					
	Care received from any other caregiver since the last visit					
	Any changes in the baby's condition or routine since the last visit					
	Any reactions or side effects from immunization, drugs/medications					
Score:All "Yes"=1 point;Any "No"=0 points						
7.The service provider performs a newborn examination (first and every visit)	The service provider does the following:					
	Washes hands thoroughly for 10–15 seconds with soap and water and dries them with a clean, dry cloth or air dries					
	Examines baby by placing the baby on a clean warm surface or on the mother's arms					
	Weighs the baby					
	Measures respiratory rate and temperature					
	Observes color, movements and posture, level of alertness and muscle tone, and skin noting any abnormalities					
	Examines head, face, mouth and eyes noting any abnormalities					
	Examines chest, abdomen, cord and external genitalia noting any abnormalities					
	Examines back and limbs noting any abnormalities					
Washes hands thoroughly						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
8. The service provider correctly provides BCG vaccination to the baby	The service provider does the following:					
	Prepares the necessary equipment and instruments					
	Tells the mother what is going to be done and responds to her questions and concerns					
	Washes hands thoroughly for 10-15 seconds with soap and water and dries them with a clean, dry cloth or air dries					
	Selects the deltoid site for injection					
	Checks the expiry date on the vial of vaccine					
	Draws vaccine into a BCG syringe					
	Checks whether dosage of vaccine is correct					
	Holds the syringe and needle almost parallel with skin, with the bevel of needle facing up					
	Pulls the skin taut with one hand, inserts the tip of needle barely under the skin and advances the needle slowly until bevel of needle has fully entered the skin					
	Gently points the needle upward, without re-piercing skin and injects the vaccine with steady pressure for three to five seconds and looks for blanching of skin					
	Places any blood-contaminated items (cotton-wool balls, syringe, vaccine vial) in a leak-proof, covered waste container					
	Disposes of needles and syringes in puncture-proof container					
	Washes hands thoroughly with soap and water and dries with a clean, dry cloth or air dries					
	Score: All "Yes"=1 point; Any "No"=0 points					
9. The service provider provides counseling on breastfeeding	The service provider does the following:					
	Includes family in discussion of breastfeeding, if possible					
	Explains why it is important to breastfeed the baby					
	Score: All "Yes"=1 point; Any "No"=0 points					
10. The service provider assesses breastfeeding	The service provider does the following:					
	Helps the mother into a comfortable position					
	Assists the mother to position the baby:					
	– Looks at how the baby is attached and suckling					
	– Explains to mother how she can tell if the baby is suckling well					
	– If the baby is not attached or suckling well, takes the baby off the breast and tries again					
	– Lets baby suckle as long as s/he wants or until s/he releases the breast					
	– After breastfeeding, stimulates the baby to burp					
Score: All "Yes"=1 point; Any "No"=0 points						



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Health Facility
Quality Improvement Module
for Health Services Strengthening

CHILD HEALTH



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

४२६२५६०
४२६२८०२
४२६२७०६
४२६२६३५
४२६२८६२
४२२३५८०

रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भनेको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धिगर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६६



महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पवली, टेम्प
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ । तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ । केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ । यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रूपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रूपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ । यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छ ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रूपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ । यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु । यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ । यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु ।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२

४-२६१४३६

फ्याक्स: ४-२६२२६८



व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ। यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ। सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न। जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालार्ई महत्व दिएको छ। यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ। गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ। यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु। अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुभाब दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु। प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहन्छु।


डा.भीमसिंह तिर्करी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

४-२६१७१२
४-२६१४३६
फ्याक्स: ४-२६२२६८

पत्र संख्या:-

चलानी नम्बर:-



व्यवस्थापन

महाशाखा

पचली, टेकु
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन नसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीर्घो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागू गरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन् ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic) जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदान गर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदान गर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening

CH 01: Growth Monitoring

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The service provider prepares to weigh the child	The service provider does the following:					
	Ensures that there is enough space to hang the Salter scale					
	Ensures the area has sufficient light to read the Salter scale					
	Ensures that the scale is securely hung					
	Ensures that scale is at eye level					
	Ensures that the scale is reading "0" before placing the child in the weighing bag					
	Before weighing, ensures that child is wearing no clothing or light clothing					
	Informs mother/caretaker that child will be weighed					
	Washes both hands before weighing					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The service provider correctly weighs the child (following protocol)	The service provider does the following:					
	Places the child in the weighing bag (cuddle) (if needed, with help from mother/caretaker)					
	Ensures that child's legs are not touching the ground and the child is not holding the mother/caretaker					
	Reads the weight of the baby after the needle has stopped moving					
	Observes and records the weight of child clearly					
	Once weighing is done, removes child from weighing bag and returns child to mother/caretaker					
	Asks mother/caretaker to dress the child					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3.The service provider correctly plots the weight of the child on the child health card	The service provider does the following:					
	After weighing, plots the weight of the child and draws a line on child health card (according to the month and sex of the child)					
	Counsels the mother/caretaker on the child's weight					
	Records the weight in nutrition register					
	Score:All "Yes"=1 point;Any "No"=0 points					
4.The service provider correctly classifies nutritional stage of the child based on guidelines	The service provider does the following:					
	Classifies the weight of the child based on Road to Health Chart (RTH) - Normal weight (green) (go to standard 5A) - Low weight (yellow) (go to standard 5B) - Very low weight (red) (go to standard 5C)					
	Score:All "Yes"=1 point;Any "No"=0 points					
5.The service provider provides proper counseling to the mother/ caretaker (first visit and repeated visits)	The service provider does the following:					
	A) If child is normal weight (growth line falls within green portion of RTH card):					
	Encourages mother/caretaker to continue current feeding and health care practices					
	Counsels mother on breastfeeding					
	Immediate breastfeeding (colostrum) within one hour					
	• Exclusive breastfeeding (first 6 months)					
	• Extended breastfeeding with complementary feeding (from 6 months to 24 months). Complementary feeding only after 6 months.					
	• Proper positioning and attachment for breastfeeding					
	• Breastfeeding a minimum of 8 times (in night and day) or on demand					
	• Ensure child empties one breast before switching to another					
	Counsels on characteristics of complementary feeding (AFATVAH – after 6 months completion) A = Age of infant/young child F = Frequency A = Amount T = Thickness/consistency V = Variety (4 food groups) A = Active or responsive feeding H = Hygiene					
	Advises the mother to come back after one month for follow-up weighing					
	B) If child is low weight (growth line falls within yellow portion of RTH card)					
Assesses cause of low weight and counsels accordingly on the following:						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	<ul style="list-style-type: none"> • Current feeding practice 					
	<ul style="list-style-type: none"> • Illness 					
	<ul style="list-style-type: none"> • Maternal illness (during pregnancy or postpartum) 					
	<ul style="list-style-type: none"> • Breastfeeding method (proper attachment and position of child for breastfeeding) 					
	<ul style="list-style-type: none"> • Low birthweight 					
	<ul style="list-style-type: none"> • Early or late initiation of complementary feeding 					
	<ul style="list-style-type: none"> • Pregnancy interval less than 24 months 					
	Provides counseling on optimal and exclusive breastfeeding:					
	<ul style="list-style-type: none"> • Early initiation of breastfeeding (within one hour of birth) 					
	<ul style="list-style-type: none"> • Exclusive breastfeeding (first 6 months) 					
	<ul style="list-style-type: none"> • Extended breastfeeding (up to 24 months) with complementary feeding after 6 months 					
	<ul style="list-style-type: none"> • Breastfeeding on demand 					
	<ul style="list-style-type: none"> • Breastfeeding method (proper positioning and attachment) 					
	Provides counselling on characteristics of complementary feeding (AFATVAH-after 6 months completion) A = Age of infant/young child F = Frequency A = Amount T = Thickness/consistency V = Variety (Four food groups) A = Active or responsive feeding H = Hygiene					
	If the child is sick : Follows Integrated Management of Neonatal and Childhood Illness (IMNCI) treatment protocol (examines as per Treatment Chart Booklet)					
	<ul style="list-style-type: none"> • Assesses, classifies, treats and refers the sick child under 2 months, accordingly 					
	<ul style="list-style-type: none"> • Assesses, classifies, treats and refers the sick child between 2 months and 5 years, accordingly 					
	C. If the child is very low weight (growth line falls within red portion of RTH card):					
	The service provider asks questions on the following to find out cause of the low weight and counsels accordingly:					
	<ul style="list-style-type: none"> • Illness 					
	<ul style="list-style-type: none"> • Low birthweight 					
	<ul style="list-style-type: none"> • Early or late initiation of complementary feeding 					
	<ul style="list-style-type: none"> • Pregnancy interval less than 24 months 					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	<ul style="list-style-type: none"> Maternal illness (during pregnancy and postpartum period) 					
	<ul style="list-style-type: none"> Breastfeeding method (proper positioning and attachment) 					
	Measures arm with MUAC tape, classifies as red, yellow or green and records the result					
	Takes medical history of the child and performs physical examination:					
	<ul style="list-style-type: none"> Breastfeeding 					
	<ul style="list-style-type: none"> Usual diet before current episode of illness 					
	<ul style="list-style-type: none"> Birthweight 					
	<ul style="list-style-type: none"> Immunizations 					
	<ul style="list-style-type: none"> Weight for height 					
	<ul style="list-style-type: none"> General condition (active, unconscious/ lethargic, irritable, normal) 					
	<ul style="list-style-type: none"> Pallor 					
	<ul style="list-style-type: none"> Eyes: corneal lesion (Bitot's spot) indicative of vitamin A deficiency 					
	<ul style="list-style-type: none"> Ear, mouth, throat for evidence of infection 					
	<ul style="list-style-type: none"> Signs of pneumonia 					
	<ul style="list-style-type: none"> Signs of dehydration 					
	<ul style="list-style-type: none"> Bilateral pitting edema 					
	<ul style="list-style-type: none"> Abdominal distension 					
	The service provider provides treatment based on CMAM:					
	<ul style="list-style-type: none"> Gives child one Vitamin A capsule on diagnosis, according to age 					
	<ul style="list-style-type: none"> Treats for hypoglycemia 					
	<ul style="list-style-type: none"> Treats for infection (if present) 					
	<ul style="list-style-type: none"> Provides dietary treatment - ready-to-use food (RUTF) 					
	<ul style="list-style-type: none"> Treats dehydration 					
	<ul style="list-style-type: none"> Provides counseling based on IMAM 					
	<ul style="list-style-type: none"> Counsels on feeding during and after illness (complimentary feeding) 					
	<ul style="list-style-type: none"> Refers to district hospital/zonal hospital or nearest Nutrition Rehabilitation Home 					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
6. The service provider correctly counsels on appropriate IYCF practices for children aged 6-23 months	The service provider counsels on the following:					
	Exclusive breastfeeding (first 6 months)					
	Extended breastfeeding (up to 2 years old) with complementary feeding after 6 months					
	Introduction of complementary food (solid, semi-solid foods) after first 6 months					
	Breastfeeding with complementary feeding up to 2 years					
	Minimum dietary diversity (at least 4 foods out of 7 food groups)					
	Intake of iron, vitamin A and vitamin C					
	Intake of iodized salt (with 2 children's logos)					
	Score: All "Yes"=1 point; Any "No"=0 points					
7. The service provider asks about bi-annual supplementation of vitamin A for children aged 6-59 months	The service provider does the following :					
	Ensures child has received vitamin A capsules every 6 months					
	If the child has not received, provides vitamin A					
	Score: All "Yes"=1 point; Any "No"=0 points					
8. The service provider asks about bi-annual supplementation of deworming tablets for children aged 12-59 months	The service provider does the following :					
	Ensures child has received deworming tablets every 6 months					
	If the child has not received, provides deworming tablet					
	Score: All "Yes"=1 point; Any "No"=0 points					
9. The service provider asks about the use of MNP supplementation (Baal Vita) by children aged 6-23 months	The service provider does the following :					
	Ensures child has received Baal Vita					
	Counsels on feeding Baal Vita and provides Baal Vita					
	Score: All "Yes"=1 point; Any "No"=0 points					
10. The service provider counsels the mother on healthy timing and spacing	The service provider does the following :					
	Asks about age at first pregnancy					
	Asks about pregnancy spacing after delivery and abortion					
	Score: All "Yes"=1 point; Any "No"=0 points					

Comments

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CH 01: Growth Monitoring	Self-Assessment Score			External Assessment Score	
Total standards	10	10	10	10	10
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening CH 02: Care of Sick Newborns, Young Newborns and Young Infants (up to 2 months old)

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write in DD/MM/YY format

Instruction: Fill in performance standards and verification criteria during examination of sick children between 2 months and 5 years of age. Standards not be applicable during examination of one sick child may be applicable during examination of another child e.g. when examining a child with PSBI, standards other than PSBI like LBI may not be applicable however, if second child with LBI is identified, standards and verifications related to LBI should be filled. "Infants" in the tool refers to children up to 2 months of age.

Scoring Key: Yes = 1, No = 0, NA = Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The service provider records details of the sick child	The service provider records the following information:					
	Name of mother and child					
	Age of the child (in weeks)					
	Sex					
	Weight					
	Temperature (degrees Celsius)					
	Ethnic code					
	Whether this is the first or a follow-up visit					
	Referred by: none/FCHV/PHC-ORC/HF					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The service provider correctly assesses and classifies possible severe bacterial infection (PSBI), local bacterial infection (LBI), hypothermia or jaundice and classifies accordingly	The service provider does the following:					
	Asks the following questions:					
	Is the infant is having difficulty breastfeeding?					
	Has the infant had convulsions/fits?					
	Looks, listens and feels for the following:					
	Counts the breaths in one minute using timer. Repeats the count if 60 or more breaths in one minute and records in register					
	Looks for severe chest indrawing					
	Looks for nasal flaring					
	Looks and listens for grunting					
	Looks for bulging fontanelle					
Looks for eye discharge						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Examines the umbilicus. • Is it is red or draining pus? • Is there is redness extending to the surrounding skin?					
	Records child's temperature					
	Looks for skin pustules and whether there are more than 10 small pustules, or one (or more) large abscesses					
	Looks for lethargy and unconsciousness					
	Looks at the infant's movement whether it is normal					
	Asks about and looks for jaundice - Up to hands or feet after birth - Within 24 hours of birth - Between 2 and 14 days after birth - More than 14 days after birth					
	Classifies according to above signs:					
	- Possible severe bacterial infection (PSBI) - Local bacterial infection (LBI) - No bacterial infection - Severe jaundice - Jaundice - Severe hypothermia (less than 35.5 °C) - Hypothermia (35.5- 36.5 °C)					
	Score:All "Yes"=1 point;Any "No"=0 points					
	3.The service provider correctly follows 6 steps of hand washing	The service provider does the following:				
Rubs palm-to-palm 5 times						
Right palm over left dorsum and left palm over right dorsum 5 times						
Palm-to-palm, fingers interlocked 5 times						
Backs of fingers to opposing palms with fingers interlocked 5 times						
Rotational rubbing of right thumb clasped in left palm, then vice versa 5 times						
Rotational rubbing, backwards and forwards with clasped fingers of hand in left palm then vice versa 5 times						
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4. The service provider manages possible severe bacterial infection, local bacterial infection, severe jaundice, severe hypothermia and hypothermia	The service provider does the following:					
	Possible Severe Bacterial Infection (PSBI)					
	Counsels the mother on the severity and urgent need of treatment					
	Gives first dose of both gentamycin (IM) injection and ampicillin (IM) injection immediately and refers. If referral not possible, counsels mother/caretaker clearly on need to continue gentamycin (IM) for 7 days					
	In addition, gives first dose of amoxicillin and counsels mother/caretaker to give amoxicillin twice daily for 7 days					
	Advises to continue breastfeeding to prevent low blood sugar					
	Advises mother to keep the baby warm (KMC for minimum 1 hour)					
	Assesses child under treatment during follow-up visit on third day					
	If the condition during follow-up has not improved, refers immediately					
	Local Bacterial Infection (LBI)					
	Gives first dose of amoxicillin and explains need to give amoxicillin 2 times daily for 5 days					
	Advises/teaches mother to treat local infection at home					
	Cleans the pustules/umbilicus and applies gentian violet (GV)					
	Advises mother on how to give home care					
	Advises mother to breastfeed exclusively					
	Advises need for follow-up on third day					
	No Bacterial Infection					
	Counsels breastfeeding exclusively					
	Advises keeping newborn/young infant warm (KMC for at least 1 hour)					
	Recommends immunization according to age					
Counsels regarding symptoms of infection and advises to follow up immediately if any symptoms are seen						

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Severe Jaundice					
	Counsels the mother on severity of the infant's condition.					
	Gives first dose of gentamycin injection (IM) after receiving consent form the mother/caretaker					
	Recommends continuing breastfeeding every 2 hours to prevent low blood sugar					
	Refers urgently to the hospital					
	Advises mother to keep the infant warm on the way to the hospital					
	Jaundice					
	Advises the mother to give home care for the infant					
	Recommends exposing infant to sunlight in the morning: 1-2 hours each day, making sure eyes are protected from sunlight					
	Advises follow-up in 3 days					
	Advises breastfeeding every two hours					
	Advises mother to keep the infant warm					
	Explains when to bring newborn/young infant to HF immediately					
	Severe Hypothermia					
	Treats as for PSBI					
	Gives first dose of amoxicillin and advises giving amoxicillin 2 times daily for 7 days					
	Gives gentamycin injection (IM)once daily for 7 days					
	Advises the mother to give home care to the infant					
	Keeps the baby in warm room					
	Advises continuing breastfeeding every 2 hours					
	Initiates KMC for minimum of 1 hour					
	Advises follow-up in 3 days. If symptoms persist, refers urgently					
	Hypothermia					
	Advises mother to give home care to the infant					
	Keeps the baby in warm room					
	Initiates KMC for minimum of 1 hour					
	Advises continuing breastfeeding every 2 hours					
	Advises mother when to return to HF					
	Score:All "Yes"=1 point;Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. The service provider correctly assess for feeding problems or low birthweight babies	Provider does the following:					
	Asks:					
	Has breastfeeding been difficult?					
	Is the infant breastfed? If yes, how many times in the previous 24 hours?					
	Does the infant receive any other food or drinks? If yes, how often?					
	If the newborn/young infant is receiving food/drinks, what does the mother use to feed the infant? Bottle, spoon or bowl?					
	Looks, Listens, Feels:					
	Determines weight for age in the card and plots					
	Looks for ulcers or oral thrush					
	Determines if the newborn and young infant is :					
	Having difficulty breastfeeding or					
	Breast fed less than 8 times in 24 hours or					
	Fed any other foods or drinks					
	Low weight for age or					
	Showing evidence of ulcers or oral thrush					
	If there is no need to urgently refer to health facility, assesses breastfeeding:					
	- If the newborn and young infant has not been fed in the previous hour, asks the mother to breast feed and observes breastfeeding for 4 minutes.					
	- If the newborn/young infant was fed within the last hour, asks mother whether she can wait and tell you when the newborn and young infant is willing to feed again and observe breastfeeding					
	Checks for positioning of breastfeeding (all of these signs should be present to determine good positioning):					
	- Infant's legs, body and head straight					
	- Infant turns towards mother					
	- Infant is completely attached to the mother					
	- Infant is receiving full support for head, body and legs from the mother					
	Checks attachment by looking for (all of these signs should be present to determine good attachment):					
	- Chin touching breast					
	- Mouth wide open					
	- Lower lip turned outwards					
	- More areola seen above the infant's top lip than below bottom lip					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Inquires if the newborn/young infant is suckling effectively: slow deep suckling, sometimes pausing					
	Classifies :					
	- Inability to feed related to possible severe bacterial infection					
	- Feeding problems or low weight for age					
	- No feeding problem/no low weight					
	Score:All "Yes"=1 point;Any "No"=0 points					
6. The service provider manages feeding problem for severe bacterial infection and low weight for age	The service provider does the following:					
	If child is unable to feed, then diagnoses as possible severe bacterial infection and treats accordingly					
	Refers urgently, if required					
	- Gives first dose of gentamycin injection and amoxicillin and refers. If referral not possible, treats for 7 days					
	- Advises frequent breastfeeding to prevent low blood sugar					
	- Advises the mother how to keep the infant warm on the way to the hospital					
	Management of feeding problem or low weight for age:					
	- If position and attachment of infant is not good or child is not suckling effectively, teaches correct positioning and attachment					
	- If infant is not able to suck milk, teaches the mother to express the breast milk in a cup and feed infant using a spoon					
	- If infant is breastfed less than 8 times in 24 hours, advises to increase frequency of feeding. Advises mother to breastfeed as often and for as long as the infant wants during day and night					
	- If infant is receiving other foods or drinks, counsels mother about breastfeeding more and stopping other foods or drinks. Also suggests KMC					
	If not breastfeeding at all :					
	Encourages breastfeeding:					
	- Advises expressing milk and feeding the infant using a spoon					
	- Advises how to prepare and feed breast milk substitutes					
	- Advises the mother how to feed and keep a low weight infant warm at home using KMC method					
	- If infant has oral thrush, teaches the mother to treat thrush at home					
- Advises mother to give home care to the infant						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	- Advises follow-up in 3 days if feeding problem or oral thrush exists					
	- Advises follow-up in 14 days for infants with low weight for age					
	No feeding problem, no low weight:					
	- Advises mother to give home care to the infant					
	- Praises mother for feeding infant well					
	Score:All "Yes"=1 point;Any "No"=0 points					
7. The service provider examines and classifies diarrhea	The service provider does the following:					
	Asks:					
	Does the child have diarrhea? If yes, for how long and is there blood in the stool?					
	Looks (general condition):					
	Is the infant lethargic or unconscious?					
	Is the infant restless and irritable?					
	Does the infant have sunken eyes?					
	Pinches the skin of the abdomen and sees if it goes back:					
	-Very slowly (longer than 2 seconds)					
	-Slowly					
	-Immediately					
	Correctly classifies:					
	-Severe dehydration					
	-Some dehydration					
	-No dehydration					
	-Severe persistent diarrhea					
-Dysentery						
Score:All "Yes"=1 point;Any "No"=0 points						
8. The service provider manages diarrhea and dehydration	The service provider does the following:					
	Severe dehydration					
	If child has no possible severe bacterial infection (PSBI):					
	- Gives IV fluid for severe dehydration as per Plan C, if the service provider is trained					
	If child also has possible severe bacterial infection:					
	- Gives first dose of inj. gentamycin & inj. ampicillin; then refers urgently to hospital, giving ORS frequently					
	- Advises mother to continue breastfeeding					
	- Advises keeping the infant warm					
	Some dehydration					
- Gives fluid as per Plan B						
- If infant has PSBI, LBI, jaundice or hypothermia, treat as per protocol						

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	- Advises the mother to continue breastfeeding and keep the infant warm					
	- Advises the mother when to bring the infant immediately to HF					
	- Advises follow-up in 2 days if infant's condition does not improve					
	No dehydration; treats as per plan A					
	- Advise home Rx according to process 'A'					
	- Advises mother on frequent breastfeeding					
	- Advises mother when to bring the infant immediately to HF					
	- Recommends follow-up in 2 days if infant's condition does not improve					
	Severe persistent diarrhea					
	- If the infant has dehydration but no PSBI, treats with ORS					
	- Refers to hospital					
	Dysentery					
	- Gives 1st dose gentamycin and ampicillin injection IM					
	- Refers immediately to hospital					
	- Advises to continue breastfeeding					
	- Advises keeping the infant warm using KMC method					
	Score: All "Yes"=1 point; Any "No"=0 points					

Comments

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CH 02: Care of Sick Newborn and young newborn and young infant (up to 2 months)	Self-Assessment Score			External Assessment Score	
	8	8	8	8	8
Total standards	8	8	8	8	8
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

CH 03: Care of Sick Child (aged 2 months to 5 years)

Facility Name and Place		Rural Municipality/ Municipality		Health Facility Code	
Period of Assessment	First	Second	Third	External Assessment	
				1st	2nd
Date of Observation					
Name of Observer					
Designation of Observer					

Note: Write in DD/MM/YY format

Instruction:

Fill in the performance standards and verification criteria during examination of sick child between 2 months and 5 years of age. Standards which are not applicable during examination of one child may be applicable during examination of another child e.g. when examining a child with ARI standards, other standards like Diarrhea may not be applicable. However, if second child with diarrhea is identified, diarrhea standards and verification should be filled.

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. The service provider records background information of the child	The service provider records the following information:					
	Name of mother and child					
	Age of the child					
	Address					
	Sex					
	Ethnic code					
	Weight					
	Temperature (Celsius)					
	Is this the initial or follow-up visit?					
	Referred by: none/FCHV/PHC-ORC/HF					
	Score: All "Yes"=1 point; Any "No"=0 points					
2. The service provider correctly identifies and manages danger signs	The service provider does the following:					
	Asks:					
	Is the child able to drink or breastfeed?					
	Does the child vomit everything?					
	Has the child had convulsions?					
	Examines:					
	If the child is lethargic or uncouncious					
	If the child has convulsions					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. The service provider examines and classifies cough or difficult breathing	The service provider does the following:					
	Asks					
	Does the child have coughing or difficult breathing?					
	If yes, asks and performs the following:					
	Counts child's breaths in one minute using timer, and records					
	Asks how long the child has been coughing or has had difficulty breathing					
	Examines for chest indrawing					
	Examines and listens for stridor					
	Examines and listens for wheezing					
	Classifies difficulty breathing: Severe pneumonia or very severe disease, Pneumonia, No pneumonia: common cold					
	Score: All "Yes"=1 point; Any "No"=0 points					
	4. The service provider correctly manages cough or difficult breathing	The service provider classifies the condition:				
Severe pneumonia/very severe disease						
Gives first dose of appropriate antibiotic						
Refers urgently to hospital (if referral is not possible, manages as described in IMCI)						
Pneumonia						
Gives oral antibiotic for 5 days						
Counsels and treats wheezing, if present						
In case of HIV infection, gives first dose of antibiotic and refers						
Counsels the mother on home treatment of cough and sore throat						
Explains to the mother when to bring the child immediately to HF						
Advises follow-up in 3 days						
No pneumonia: common cold						
Counsels the mother on home treatment of cough and sore throat						
Counsels and treats wheezing, if present						
If coughing persists for more than 2 weeks or there is recurrent wheezing, refers for assessment of TB or asthma						
Explains to the mother when to bring the child immediately to HF						
Advises follow-up in 5 days, if the child's condition does not improve						
Score: All "Yes"=1 point; Any "No"=0 points						

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. The service provider examines and classifies diarrhea	The service provider does the following:					
	Asks					
	If the child has diarrhea, asks the following:					
	•For how long has the child had diarrhea?					
	•Is blood present in the stool					
	Determines if the child: (observes)					
	• Is lethargic or unconscious, restless and irritable					
	• Has sunken eyes					
	• Is not able to drink or is drinking poorly					
	• Is drinking eagerly, thirsty					
	• Is drinking normally					
	Pinches the skin of the abdomen and sees if it goes back					
	- Very slowly (longer than 2 seconds)					
	- Slowly					
	Correctly classifies: - Severe dehydration - Some dehydration - No dehydration - Severe persistent diarrhea - Persistent diarrhea - Dysentery					
Score: All "Yes"=1 point;Any "No"=0 points						
6. The service provider correctly manages diarrhea	The service provider manages the case as per diagnosis:					
	In cases of severe dehydration:					
	If child has no other severe classification: gives IV fluid for severe dehydration, as per Plan C (R/L or N/S) and immediately refers to the hospital					
	If child also has another severe classification					
	Refers immediately to the hospital with mother, giving ORS frequently on the way					
	Advises mother to continue breastfeeding					
	If the child is 2 years or older and there is a cholera outbreak in the area, gives antibiotics for cholera (ciprofloxacin)					
	In cases of some dehydration					
	Follows Plan B (gives fluid, zinc tablet and food for some dehydration)					
	If child also has a severe classification					
	Refers urgently to the hospital with mother, giving ORS frequently on the way					
	Advises the mother to continue breastfeeding					
Explains to the mother when to bring the child immediately to HF						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Advises follow-up in 5 days, if the child's condition does not improve					
	In cases of no dehydration					
	- Follows 4 home rules, as per Plan A					
	- Advises increase in fluid intake (teaches mother how to prepare the ORS and provides 2 packets of ORS)					
	- Advises giving one zinc tablet per day for 10 days					
	Advises mother to continue feeding as usual					
	Explains to mother when to bring the child immediately to HF					
	Advises follow-up in 5 days, if the child's condition does not improve					
	In cases of severe persistent diarrhea					
	Treats dehydration before referral					
	Gives vitamin A					
	Refers to hospital with zinc and ORS treatment					
	Persistent diarrhea					
	Advises mother to regularly feed the child					
	Gives a single dose of vitamin A and one zinc tablet per day for 10 days					
	Advises follow-up in 5 days					
	Dysentery					
	Treats the child as per the dehydration classification					
	Gives ciprofloxacin 2 times per day for 3 days					
	Advises follow-up in 3 days					
Score: All "Yes"=1 point; Any "No"=0 points						
7. The service provider examines the child for fever and classifies	The service provider:					
	Classifies fever as per revised CB-IMNCI Protocol (Very severe febrile disease, Severe complicated malaria, Falciparum malaria, Vivax malaria, Fever without malaria)					
	Score: All "Yes"=1 point; Any "No"=0 points					
8. The service provider manages fever in high malaria risk, low malaria and no malaria risk areas	The service provider does the following:					
	I. In High, Medium or Low Malaria Risk Areas:					
	Severe febrile disease or complicated malaria					
	Prepares blood slide					
	Gives a single rectal dose of artesunate and refers immediately					
	Gives first dose of appropriate antibiotic injection before referral					
	Treats the child to prevent low blood sugar					
Gives one dose of paracetamol in clinic for high fever (38.5°C or above)						

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	Refers with patient's blood slide					
	Falciparum malaria					
	Gives ACT (artemisinin + combination) therapy to children more than one year of age					
	Gives one dose of paracetamol in clinic for high fever (38.5°C or above)					
	Explains to mother when to bring child immediately to HF					
	Advises follow-up in 3 days. If fever persisted every day for the last 3 days, refers immediately					
	Advises giving the child plenty of food and fluids					
	Malaria without Falciparum					
	In cases when vivax has been determined by blood test, treats with chloroquine					
	Gives one dose of paracetamol in clinic for high fever (38.5°C or above)					
	Explains to mother when to bring child immediately to HF					
	Advises follow-up in 3 days. If fever persisted every day for the last 3 days, refers immediately					
	Advises giving the child plenty of food and fluids					
	2. No Malaria Risk Area					
	In cases of very severe febrile disease:					
	Gives first dose of ampicillin injection IM and refers immediately					
	Treats the child to prevent low blood sugar					
	Gives one dose of paracetamol in clinic for high fever (38.5°C or above)					
	Advise adequate diet and fluid intake					
	Fever					
	Gives one dose of paracetamol in clinic for high fever (38.5°C or above)					
	Appropriately treats the cause of fever					
	Explains to mother when to bring child immediately to HF					
	If fever persists, advises follow-up in 3 days					
	If fever persists for more than 7 days, refers immediately					
	Advise adequate diet and fluid intake					
	Score: All "Yes"=1 point; Any "No"=0 points					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
9. The service provider examines the child for fever (for measles)	The service provider does the following:					
	Asks and examines:					
	Has the child had measles (within the last 3 months)					
	Examines for sign of measles					
	- Hazy cornea or mouth ulcers					
	- Generalized rash					
	- Any of the following: cough, runny nose, or red eyes					
	Classifies as: Severe complicated measles, Measles with eye or mouth complications, Measles-like disease					
Score:All "Yes"=1 point;Any "No"=0 points						
10. The service provider manages fever (for measles)	The service provider does the following:					
	Manages severe complicated measles:					
	Gives vitamin A					
	Gives first dose of appropriate antibiotic					
	If child has hazy cornea or pus discharge from eye, applies tetracycline eye ointment					
	Refers urgently to hospital					
	Manages measles with eye or mouth complications:					
	Gives vitamin A					
	If child has pus discharge from eye, applies tetracycline eye ointment					
	If child has mouth ulcers, treats with gentian violet					
	Advises follow-up in 3 days					
	Manages measles-like disease					
	Gives vitamin A					
	Reports as per measles case-based surveillance					
Score:All "Yes"=1 point;Any "No"=0 points						
11. The service provider diagnoses the child's ear problem	The service provider does the following:					
	Asks if there is ear pain					
	Asks/examines if there is ear discharge. If yes, asks for how long					
	Looks for pus draining from the ear					
	Feels for tender swelling behind the ear					
	Classifies ear problem:					
	- Mastoiditis					
	- Acute ear infection					
	- Chronic ear infection					
	- No ear infection					
Score:All "Yes"=1 point;Any "No"=0 points						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
12. The provider manages ear problems	The service provider does the following:					
	Manages Mastoiditis					
	Gives first dose of an appropriate antibiotic					
	Gives paracetamol for pain					
	Refers urgently to hospital					
	Manages acute ear infection					
	Gives an antibiotic for 5 days					
	Gives paracetamol for pain					
	Dries the ear by wicking					
	Advises follow-up in 5 days					
	Manages chronic ear infection					
	Dries the ear by wicking					
	Treats with topical ciprofloxacin eardrops 4 times daily for 2 weeks					
	Advises follow-up in 5 days					
	No ear infection					
	No treatment					
	Score: All "Yes"=1 point; Any "No"=0 points					
13. The service provider checks and categorises for malnutrition and anemia	The service provider does the following:					
	Acute severe malnutrition					
	Classifies malnutrition and anemia based on: severe muscle wasting, MUAC (< 115mm), low height for weight (< -3 SD), low weight for age (< -3 SD), low height for age (< -3 SD), bilateral pitting edema and pallor of palms					
	- Severe acute malnutrition					
	- Severe stunting					
	- Severe anemia					
	- Very low weight					
	Moderate acute malnutrition					
	Examines for malnutrition and anemia					
	Classifies malnutrition and anemia based on: severe muscle wasting, MUAC (115-125 mm), low height for weight (<-2 SD to -3 SD), low weight for age (<-2 SD to -3 SD), low height for age (<-2 SD to -3 SD), bilateral pitting edema and pallor of palms					
	- Acute malnutrition					
	- Low weight					
	- Stunting					
- Anemia						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	No malnutrition					
	Classifies no malnutrition and no anemia based on: normal weight for height, (≥ -2 SD), MUAC (≥ 125 mm), normal weight for age (≥ -2 SD), MUAC (115-125 mm), normal height for age (≥ -2 SD) and absence of pallor of palms					
	No malnutrition, No anemia					
	Score: All "Yes"=1 point; Any "No"=0 points					
14. The service provider manages child according to nutritional status	The service provider manages for malnutrition:					
	Severe acute malnutrition					
	Gives vitamin A (in case of Kwashiorkor, gives vitamin A after swelling has been reduced)					
	Refers urgently (hospital or nutrition rehabilitation center)					
	Provides nutrition counseling					
	Moderate acute malnutrition					
	Refers urgently to hospital or nutrition rehabilitation center if severe disease occurs along with acute malnutrition					
	Explains AFATVAH to mother/caretaker					
	Advises follow-up in 5 days if feeding problem persists					
	Gives iron, if child has anemia					
	Advises follow-up in 14 days if anemia persists					
	If the child has low weight for age, advises follow-up after 30 days					
	If the child has not been given deworming tablets in the last 6 months, gives deworming tablet to children more than 1 year of age					
	Explains to mother when to bring child immediately to HF					
	Children with no malnutrition/no anemia					
	Explains AFATVAH to mother/caretaker					
	Advises follow-up in 5 days if feeding problem persists					
	Explains to mother when to bring child immediately to HF					
	Score: All "Yes"=1 point; Any "No"=0 points					

Quality Improvement Modules for Health Services Strengthening

CH 04: Immunization

Facility Name and Place		Rural Municipality/ Municipality		Health Facility Code	
Period of Assessment	First	Second	Third	External Assessment	
				1st	2nd
Date of Observation					
Name of Observer					
Designation of Observer					

Note: Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Health facility has adequate equipment and instruments for immunization	The health facility has following equipment for immunization:					
	Cold chain box					
	Sitting area for person bringing the baby					
	Adequate syringes with needles					
	Puncture-proof containers for disposal of sharps					
	Cotton swabs					
	Child health (immunization) card- HMIS 2.1					
	Immunization service register- HMIS 2.2					
	Immunization schedule poster					
	Score: All "Yes"=1 point; Any "No"=0 point					
2. Health facility has adequate supply of different vaccines	The health facility has the following vaccines available:					
	BCG					
	DPT, Hib, Hep B,					
	PCV (Pneumococcal vaccine)					
	OPV					
	IPV					
	Measles/Rubella					
	JE					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. Health provider counsels caretaker on benefits of vaccines and schedule of immunization	The service provider counsels on the following immunization:					
	BCG					
	DPT, Hib, Hep B,					
	PCV					
	OPV					
	IPV					
	Measles/Rubella					
	JE					
	The mother/caretaker is informed of the different vaccines to be given at different ages					
	Score:All "Yes"=1 point;Any "No"=0 point					
4. Health care provider provides immunization services following immunization guidelines	The service provider does the following:					
	Informs mother/caretaker about the vaccination procedure					
	Updates immunization register and card					
	Washes hands properly before and after vaccination					
	Prepares for vaccination					
	Mixes vaccine adequately with distilled water in syringe					
	Properly cleans the site of injection with clean cotton					
	Gives vaccine according to specific route of administration					
	Compresses vaccination site with clean cotton after vaccination and advises not to rub the site					
	Disposes of needles and syringes in puncture-proof container					
	Disposes of materials used in vaccination in leak-proof container					
	Updates all necessary information in immunization register and immunization card and gives the card to mother/caretaker					
		Score:All "Yes"=1 point;Any "No"=0 point				
5. Mother/ caretaker told about minor effects, general care following the vaccination and advises observation for side effects	The service provider advises on the following:					
	Minor effects of vaccination like redness, local increase in temperature, slight rise in temperature					
	If these effects occur, treat the site first with a cool compress followed by lukewarm saltwater compress					
	If any other problems persist, advises immediate consultation					
	Provides date and time of next visit for immunization					
	Score:All "Yes"=1 point;Any "No"=0 point					

Comments

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CH 04: Immunization	Self-Assessment Score			External Assessment Score	
Total standards	5	5	5	5	5
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%



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Health Facility
Quality Improvement Module
for Health Services Strengthening

INFECTIOUS DISEASE SERVICES



HIV



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

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रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भनेको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धि गर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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४-२६१४३६
फ्याक्स: ४-२६२२६६

महाशाखा

पत्र संख्या:-

चलानी नम्बर:-



पवली, टेम्प
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ । तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ । केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ । यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रूपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रूपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ । यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छ ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रूपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ । यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु । यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ । यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु ।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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फ्याक्स: ४-२६२२६८



व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ। यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ। सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न। जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालार्ई महत्व दिएको छ। यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ। गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ। यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु। अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुभाब दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु। प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहन्छु।


डा.भीमसिंह तिकरी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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महाशाखा

व्यवस्थापन

पत्र संख्या:-

चलानी नम्बर:-



पचली, टेक
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन नसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीगो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागू गरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic)जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदानगर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदानगर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening

ID 01: Malaria Case Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Conducts an initial assessment of the client's condition to determine differential diagnosis, including malaria	The service provider does the following:					
	Asks client or caregiver about signs and symptoms and other relevant concerns about illness					
	Takes temperature with a thermometer to determine presence of fever					
	Refers immediately and provides first dose of medication per guidelines if the client appears to have severe illness including unconsciousness, high temperature, confusion, or convulsions					
	If the client has suspected uncomplicated malaria, service provider begins process for parasitological test (RDT/microscopy)					
	Score: All "Yes"=1 point; Any "No"=0 point					
2. Plans/prepares for malaria diagnostic testing	The service provider ensures the following:					
	Adequate supplies of parasitological test (RDT/ Microscopy) are available to match expected number of clients who present with febrile illness and/or suspected malaria					
	Staff who have been trained in RDT use/laboratory testing are on duty at all times where outpatients are seen					
	RDTs and laboratory testing materials are stored in a safe place					
	Expiry dates of RDTs and other laboratory reagents in storage are known and a system for requesting supplies before the stock's expiry date is practised					
	During clinic hours, adequate supplies of RDTs/ laboratory reagents are available for staff in child health, ANC, and general outpatient departments for the day's use					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
3. Conducts malaria parasitological test	The service provider does the following:					
	Explains use of RDT to clients before test is performed and permission obtained					
	Washes hands and uses gloves before blood sample collection					
	Assembles all components of the test kit according to the package instructions and content and checks that the expiry date has not passed					
	Cleans test site with skin antiseptic and gauze pad and allows to dry					
	Prepares for RDT according to WHO standards, placing adequate amount of blood in appropriate receptacle on cassette and applying adequate buffer based on manufacturer's instructions on number of drops					
	Writes client number or other identifying information on the cassette					
	Allows cassette to sit for at least 15 minutes (or longer, as specified by brand) to enable results to emerge					
	Prepares slides for RDT positive cases					
	Repeats test if results are indeterminate					
	Explains test results and implications for treatment to client					
	Disposes of used RDT materials in the appropriate safety containers					
	Sends positive slides to district for quality assurance and quality control					
	Score: All "Yes"=1 point; Any "No"=0 point					
4. Interprets malaria diagnostic test results and makes treatment decision	The service provider does the following:					
	Determines whether the laboratory examination (RDT/microscopy) results are positive or negative, per instructions, and writes this information in appropriate registers, and/or case notes					
	Treats clients with positive test results using National Malaria Treatment Protocol and ensures the client receives enough medicine for the full course of treatment					
	Bases initial treatment and referral for severe malaria on National Guidelines					
	Treats client according to differential diagnosis if laboratory/RDT results are negative					
	Treats for Plasmodium Vivax only after conducting G6PD (glucose phosphate dehydrogenase) test					
Score: All "Yes"=1 point; Any "No"=0 point						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. Plans and prepares for adequate supplies of appropriate antimalarial medicines	The service provider does the following:					
	Forecasts the need for laboratory reagents/RDTs and G6PD test kits based on the number of suspected malaria cases/cases of febrile illness in a particular period, taking into account any seasonal variations					
	Forecasts the need for chloroquine, Primaquine, ACTs and other treatment drugs based on the expected number of positive RDTs and seasonality					
	Integrates forecasting into an overall malaria logistics management information system					
	Score:All "Yes"=1 point;Any "No"=0 point					
6. Ensure that job aids and behaviour change communication materials(BCC) materials are available	The following job aids and BCC materials are available:					
	Job aids on RDT use and malaria treatment					
	Job aids are up-to-date and reflect current malaria case management guidance					
	BCC materials (distinct from job aids) such as posters, flipcharts, and counseling cards are easily accessible to health workers who provide case management					
	BCC materials are up-to-date and reflect current case management guidance					
	Adequate job aids and BCC materials are available in the health facility for use at each clinic/point of service					
	Score:All "Yes"=1 point;Any "No"=0 point					
7. Counsels clients cordially on anti-malarial drug regimen	The service provider does the following:					
	Explains the importance of taking all the prescribed medication at the appropriate times					
	Encourages the client to return immediately if there are any side effects					
	Explains the potential danger signs that require further treatment and tells the client to return immediately if conditions worsens or these danger signs appear					
	Asks client or caregiver if he/she perceives any problems in adhering to the regimen, and if any exist, discuss ways to overcome the problems					
	Finishes the counseling by asking the client to repeat what was discussed, ensuring that he/she remembers the correct regimen and procedures					
	Score:All "Yes"=1 point;Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
8. For clients with negative malaria diagnostic tests, provides appropriate treatment based on differential diagnosis and/or refers client	The service provider does the following:					
	Reviews with the client the implication of negative results and assures the client that the test was conducted properly					
	Asks about other signs and symptoms that could point to another diagnosis including observing chest for in-drawing, counting breathing, determining pattern of fever, coma, convulsions, etc.					
	Provides appropriate treatment for other suspected conditions but avoids using antibiotics unless certain the diagnosis warrants them					
	Refers the client if unable to determine the diagnosis					
	Score: All "Yes"=1 point; Any "No"=0 point					
9. Ensures that individual client records and clinic registers reflect both malaria diagnostic test results and treatment recommended/ provided	The health facility does the following:					
	Has a register (HMIS 5.2) in a designated place to record lab results					
	Has a treatment register (HMIS 5.3) in a designated place to record actual treatment given					
	Records all test results and treatment in the appropriate spaces in HMIS 5.2/5.3					
	Shows in the treatment register (HMIS 5.3) that antimalarial medicine prescription was based on positive results					
	Provides monthly summary report in HMIS 9.3/9.4					
	Score: All "Yes"=1 point; Any "No"=0 point					

Comments

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ID 01: Malaria Case Management	Self-Assessment Score			External Assessment Score	
	9	9	9	9	9
Total standards					
Total standards assessed					
Total standards met					
Percent achievement (%)					

Quality Improvement Modules for Health Services Strengthening

ID 02:TB Case Management

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1.The provider ensures an appropriate and private environment during the visit	The service provider does the following:					
	Before starting the daily attention, s/he verifies that everything needed for providing services, including cleaning floors, furniture, and equipment are available as listed below:					
	• Scale in working condition					
	• Measuring tape					
	• Thermometer					
	• Stethoscope					
	• X-ray viewing box					
	• Recepticle with colored bag for non-contaminated waste					
	• Recepticle with colored bag for contaminated waste					
	• Procedure gloves					
	• Tap/running water					
	• Soap					
	• Individual or paper towels					
	• Alcohol gel 70%					
	• High efficiency masks (N95)					
	• Sterile sputum specimen tapped glass jars					
	• Jar transportation racks					
	• Lab forms					
	• Clinical records					
	Greets and treats the patient respectfully					
Ensures privacy and confidentiality during the visit						
Informs the client that the TB diagnosis, treatment and follow-up is free-of-charge						
Asks client why they have come to the health facility						
Score: All "Yes"=1 point; Any "No"=0 point						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. The provider investigates for tuberculosis in clients with cough lasting two weeks or more or those living with HIV	The service provider does the following:					
	Actively looks for people coughing in the waiting area and other service areas, sending those suspected of having TB to the respective service area					
	Screens all PLHIVs with TB screening questionnaires and referring all presumptive TB cases for diagnosis					
	Registers all patients with possible TB symptoms and those living with HIV in the corresponding register/log book					
	Screens all TB patients for HIV					
	Enrolls all TB-HIV co-infected cases in both ART and ATT					
	Score:All "Yes"=1 point;Any "No"=0 point					
3. The provider collects critical/ important clinical information during the first visit	The service provider does the following:					
	Asks for history of any major disease					
	Asks for history of TB diagnosis and treatment					
	Asks for HIV status					
	Ask for symptoms suggestive of TB infection					
	Assesses risks factors for drug resistance					
	Performs hand hygiene before and after examining the client					
	Takes vital signs and weight					
	Examines the chest, auscultates the lungs, and palpates neck and armpits for lymph nodes					
	Looks for signs of extra-pulmonary TB infection					
	Registers results in the client's clinical record					
Score:All "Yes"=1 point;Any "No"=0 point						
4. The provider correctly collects sputum specimens and sends them to the lab for processing	The service provider does the following:					
	Explains to the user the need for taking the sample and the procedure for producing a good sample					
	Performs hand hygiene					
	Uses gloves and high-efficiency mask					
	Takes sputum specimen according to protocol					
	Verifies that the sampling container has the correct client information					
	Puts the jar on the transportation rack					
	Disposes of the gloves in the container for contaminated waste					
	Performs hand hygiene					
	Gives the client a second container for collecting an early-morning sputum sample, which must be brought to the health facility					
	Explains the next steps to the client					
Score:All "Yes"=1 point;Any "No"=0 point						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. The provider correctly diagnoses and manages TB infection	The service provider does the following:					
	Registers a description of the TB infection (location, treatment history, risk of drug resistance, bacteriological/Rx results)					
	Determines the most suitable treatment scheme for the client					
	Explains to the client the characteristics of TB treatment, side effects and the importance of adherence					
	Collects information about people in close contact with the client and recommends bringing them in for assessment					
	Provides counseling on nutrition					
	Refers female clients to the family planning clinic to start/revise contraception, according to the client diagnosis and treatment scheme					
	Administers the first dose of the drugs, checking that the client swallows them					
	Identifies and addresses issues that can jeopardize adherence to treatment					
	Explains to the client the schedule for receiving the drugs and when s/he should return					
	Registers the information on the client's card, the clinical record, and log book					
	Score: All "Yes"=1 point; Any "No"=0 point					
6. The provider correctly administers DOTS and DOTS Plus	The service provider does the following:					
	Verifies client identity and treatment scheme					
	Verifies that the client swallows the drugs					
	Assesses the presence of any adverse reaction to drugs					
	Congratulates the client for adhering to the treatment and encourages him/her to continue coming					
	Registers the administration of the drug in the client's treatment card, clinical record and log book					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7. The provider correctly manages the TB infection during follow-up visits	The service provider does the following:					
	Performs a new complete clinical, bacteriological, and radiological assessment when the client moves to a new treatment phase					
	Assesses adherence to treatment, revising the client's treatment card and clinical record					
	Informs the client of his/her clinical condition					
	Assesses risk factors for drug resistance					
	Refers the client to a doctor, if needed					
	If the client has adverse reaction to the drugs, requests lab test for assessing liver function. If the reaction is severe, refers the client for hospitalization					
	Registers and notifies adverse drug reactions in the corresponding form					
	Score: All "Yes"=1 point; Any "No"=0 point					
8. The provider correctly manages/refers special cases	The service provider knows/ does the following:					
	Knows the criteria for identifying people at risk of dying and what to do in such cases					
	Knows the strategies to recover and manage clients who fail to adhere to treatment					
	Performs a complete clinical, bacteriological, and radiological assessment when the clinical evolution is not favourable					
	Addresses irregularity in the treatment					
	Identifies and addresses imminent risk of abandoning the treatment					
	Identifies and manages/refers co-morbidities					
	Identifies and refers pregnancy in clients under treatment					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
9. The provider correctly manages the discharge of a client from treatment	The service provider does the following:					
	Performs a complete clinical, bacteriological, and radiological assessment at the completion of treatment					
	If the treatment is complete and the results of the assessments are negative, discharges the client from treatment					
	Reinforces information to prevent TB re-infection					
	Assesses risk factors for drug resistance					
	Refers the client to a doctor if needed					
	If the client has adverse reaction to the drugs, requests lab test for assessing liver function. If the reaction is severe, refers the client for hospitalization					
	Explains the need to return immediately to the health facility if symptoms, especially respiratory, reappear. Emphasizes the need to be alert during the first six months after discharge					
	Score: All "Yes"=1 point; Any "No"=0 point					
10. The manager ensures that the TB clinic follows infection prevention practices	The service provider does the following:					
	Ensures the availability of infection prevention norms in all the health facility rooms					
	Ensures the availability of personal protection equipment					
	Ensures that the waiting area is properly ventilated					
	Ensures the separation/isolation of hospitalized clients with TB-MDR, and TB-HIV co-infection					
	Ensures that hospitalized clients with TB always use masks					
	Ensures that visitor to clients with TB use high efficiency masks					
	Guarantees that providers and other staff members of the clinic, especially those from the laboratory, get annual medical checkups, and bacteriological and radiological exams					
	Ensures the availability of long-sleeved medical coats/aprons for health providers in contact with clients or contaminated materials					
	Ensures that all the rooms of the facility are properly cleaned with disinfectant according to protocol					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
11. The laboratory manager ensures that the lab has adequate and safe working conditions	The service provider does the following:					
	Ensures that the laboratory is well-ventilated and illuminated					
	Ensures that it has running water, soap, and individual towels for the lab staff					
	Ensures that the floor, walls, and furniture surfaces have waterproof materials that allow easy and thorough cleaning					
	Ensures that the floor, walls, and furniture in the lab are cleaned every day, and when needed, using disinfectant solutions, according to norms					
	Ensures that the door has a visible biological hazard sign					
	Ensures the availability of an updated fire extinguisher					
	Ensures the availability of a laminar flow cabinet for specimen processing					
	Ensures the availability of Zielh Nielsen colorant and proper culture materials					
	Ensures the availability of containers for contaminated and non-contaminated waste					
	Score:All "Yes"=1 point;Any "No"=0 point					
	12.The laboratory staff follows infection prevention and personal protection practices	The staff does the following:				
Only allows authorized personnel on the lab premises						
Uses medical long-sleeve coat/aprons, high efficiency masks, and gloves while in the lab						
Takes off the medical coat/scrub jacket/gowns, mask, and gloves when leaving the laboratory premises						
Uses 0.5% chlorine solution to decontaminate work surfaces						
Avoids eating, drinking, or smoking in the lab						
Avoids storing food in the lab						
Avoids mouth pipetting and opening centrifuges while still in motion						
Covers the end of sample collection tubes with a cloth or paper towel, or point them away from anyone's face when opening						
Wears heavy-duty or utility gloves when cleaning lab glassware						
Works with TB samples only in a exclusive designated area						
Disposes of waste materials in proper containers						
Score:All "Yes"=1 point;Any "No"=0 point						

Quality Improvement Modules for Health Services Strengthening

ID 03:ART Services

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Human Resources trained for ART services	Ask whether					
	Medical service providers are trained in clinical management of HIV					
	Score: All "Yes"=1 point; Any "No"=0 point					
2. ART center has required space available	ART center has following spaces:					
	Patient waiting area					
	Medical examination room					
	Confidential examination room for patients					
	Drug supply room/dispensing room					
	Medical record/ patient file storage space/cupboard					
	Score: All "Yes"=1 point; Any "No"=0 point					
3. Guideline and BCC materials available	ART center has following available:					
	Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations					
	HIV and ART-related wallcharts					
	PEP wall chart					
	Pediatric ART and cotrimoxazole drug chart					
	HIV and ART-related IEC materials for distribution					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4. Service provider performs clinical examination	The service provider does the following:					
	Builds rapport					
	Takes general and specific history					
	Conducts thorough physical examination					
	Performs WHO staging					
	Screens for TB (applicable for first visit and every three months thereafter)					
	Performs TB diagnosis					
	Refers to lab for CD4 count					
	Refers to lab for viral load					
	Reviews previous lab test records					
	Performs ART adherence counseling					
	Counsels for positive prevention					
	Counsels/provides nutritional support					
	Provides psychological support					
	Offers PEP on site under the following conditions:					
	- Parenteral and mucous membrane exposure (sexual exposure or splashes to the eye, nose or oral cavity)					
	- Exposure to the following bodily fluids: blood, blood-stained saliva, breastmilk, genital secretions, and cerebrospinal, amniotic, rectal, peritoneal, synovial, pericardial or pleural fluids					
	Staff consults with HIV experts for difficult cases (phone, email, or in person)					
	Looks at 10 ART client charts:					
	Records weight during every visit					
	Provides clients with ART regimens that follow national guidelines					
	Ensures that no clients ran out of medicine before their appointment					
	Makes sure that correct OI medications are prescribed					
	For children under two, records and plots weight, length and head circumference on growth charts					
	Prescribes correct dose of ART based on dosing chart					
	Adjusts dosage of pediatric clients according to their weight					
Score: All "Yes"=1 point; Any "No"=0 point						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. ART registers are available and recorded correctly	The service provider confirms the following:					
	ART register available (HMIS register 7.4)					
	PMTCT treatment care register 7.3 available					
	Drug Stock Register available					
	Monthly report sent (HMIS 9.3)					
	ART register correctly completed					
	ART patient treatment cards (including history forms) used correctly					
	PMTCT treatment care register (7.3) maintained correctly					
	Drug dispensing and drug stock registers properly completed					
	Score:All "Yes"=1 point;Any "No"=0 point					
6. Laboratory services are available	The ART center meets the following criteria:					
	Trained laboratory personnel (laboratory technician, laboratory assistant) available on site					
	HIV testing is done following national algorithm					
	HIV test report is provided to client on same day					
	Has a diagnostic laboratory (microbiology, biochemistry) with adequate space, running water and technical expertise to perform the following tests:					
	· Laboratory diagnosis of STIs					
	· Laboratory diagnosis of opportunistic infections					
	· CD4 count					
	· Viral load test					
	· CBC and other routine biochemistry investigations (where applicable)					
	· LFT (where applicable)					
	· S. Creatinine , S. lactate and S. Lipase, blood sugar (where applicable)					
· Lipid profile (where applicable)						
· Pregnancy test						
Score:All "Yes"=1 point;Any "No"=0 point						
7. Standard procedures are followed for infection prevention	The following procedures are followed:					
	Laboratory technician wears gloves and apron during blood collection and sample processing					
	Disposable syringes and needles properly destroyed (puncture-proof box/needle destroyer)					
	Score:All "Yes"=1 point;Any "No"=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
8. Standard procedures are followed for infection prevention and health care waste management	The ART center performs the following:					
	Uses a safe disposal system for biohazardous waste, including segregation by color-coded bins					
	Uses a disinfectant (e.g. chlorine solution)					
	Uses autoclave to treat infectious waste					
	Municipality collects health care waste					
	Health facility incinerates health care waste					
	Health facility buries health care waste					
	Score:All "Yes"=1 point;Any "No"=0 point					
9. Health facility refers clients, as needed	The health facility does the following:					
	Displays list of referral centers					
	Refers clients, where applicable, for the following services: · PMTCT · HTC · TB · FP · STI clinic · PLWHA network · NGOs · CHBC · CCC · CABA · Support group					
	Ensures that HIV care management committee is functional					
	Score:All "Yes"=1 point;Any "No"=0 point					
10. Availability of logistic supplies	The service provider checks stock of:					
	Drug supplies for ART/STI/OI					
	First line and second line ARV drugs					
	Drugs for opportunistic infections					
	Drugs for STI					
	PEP drugs (packed separately)					
	HIV test kits (Determine, Unigold and Statpak), and notes the expiration date					
	Stock book used and maintained properly					
	Drugs needed for the next 3 months (stock position)					
	Drugs stored as per specifications					
	Materials for HIV EQAS (DBS paper and accessories)					
	Lab reagents: CD4, VL and other lab reagents					
	Score:All "Yes"=1 point;Any "No"=0 point					

Comments

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ID 03:ART services	Self-Assessment Score			External Assessment Score	
	10	10	10	10	10
Total standards					
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

ID 04: PMTCT Services

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Write in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Availability of Human Resources trained in PMTCT services	The health facility has:					
	Medical personnel working at ANC, labor room and PNC trained on PMTCT					
	Lab technician trained on HIV testing using rapid test kits					
	Score: All "Yes"=1 point; Any "No"=0 point					
2. Adequate physical facilities available for PMTCT services	The health facility has the following:					
	ANC room					
	A clean and well maintained ANC room					
	Space allocated for group counselling					
	Score: All "Yes"=1 point; Any "No"=0 point					
3. PMTCT information during ANC checkup	The service provider does the following:					
	Provides group information on PMTCT as per national guidelines on HIV testing and treatment					
	Informs pregnant women about confidentiality of HIV testing					
	Asks pregnant women if they have any related questions					
	Answers questions of pregnant women in a manner they can understand					
	Takes verbal consent before HIV testing					
	Score: All "Yes"=1 point; Any "No"=0 point					

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
4. Service provider provides HIV test	The service provider does the following:					
	Wears gloves for blood collection					
	Screens using Determine Rapid test kit					
	Refers clients with reactive results for confirmatory testing					
	Conducts confirmatory test using three test kits (Determine, Uni Gold and STAT PAK) following national algorithm					
	Provides HIV test free-of-cost					
	Ensures test kits (Determine, Uni Gold and STAT PAK) are in sufficient supply and have not reached their expiration dates					
	Participates in external quality control for HIV testing					
	Disposes of syringes, needles, lancets and test kits according to IP and HCWM guidelines					
	Follows up on clients who have been referred to another health facility					
	Score: All "Yes"=1 point; Any "No"=0 point					
	5. Service provider provides post- test counseling	In post-test counseling, service provider:				
Checks all results prior to providing to client						
Gives results						
For negative results, service provider does the following:						
Checks window period and subsequent exposure						
Advises client to re-test if necessary						
Advises client on ways of staying HIV-negative and distributes condoms						
For indeterminant HIV results, service provider does the following:						
Informs client that this is not final test result						
Calls for re-testing at this center in 14 days						
For HIV positive result , service provider does the following:						
Checks all results prior to providing results to client						
Assesses client's readiness to receive result						
Provides and explains result and ensures client has understood the result						
Provides information about follow-up and support						
Assesses client capacity to cope with result						
Explains the ART						
Refers to ART clinic						

PERFORMANCE STANDARDS	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
	For follow-up counseling, service provider does the following					
	Discusses strategies for disclosing HIV status to his/her sexual partner/friends/family					
	Discusses client risk reduction					
	Counsels client on ART adherence					
	Explains the importance of continuing with ART (retention) and benefits of ART					
	Explains how to care for a baby exposed to HIV (HIV prophylaxis for newborns, safer infant feeding, cotrimoxazole, immunization, EID, PCR test at birth and HIV test at 18 months)					
	Makes referrals where necessary					
	Score: All "Yes"=1 point; Any "No"=0 point					
6. Service provider provides PMTCT services during labour	Service provider does the following:					
	Performs HIV testing and counseling on all pregnant women with unknown HIV status					
	Ensures ARV drugs for women and babies are available and will not expire within anticipated duration of use					
	Confirms that HIV test kits are available					
	If HIV-positive women are identified, confirms that mothers and babies identified as HIV positive start ART					
	Score: All "Yes"=1 point; Any "No"=0 point					
7. Availability of Key-Population-Friendly services	Are special services for any of the following target groups available?					
	Adolescents					
	Children and families					
	Sex workers					
	Migrants and spouses					
	IDUs					
Score: All "Yes"=1 point; Any "No"=0 point						
8. Recording and reporting system for PMTCT service	Service provider records HIV status in:					
	Maternal and Newborn service register (HMIS 3.6) (ANC/MCH & DR)					
	PMTCT service register (HMIS 7.3) (ART clinic)					
	HIV Test Register					
	PMTCT Monthly Report Form (HMIS 9.3)					
	For CB-PMTCT sites: FCHVs records in Ward register- HMIS 4.2					
	ORC Register (HMIS 4.1)					
	Score: All "Yes"=1 point; Any "No"=0 point					



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Health Facility
Quality Improvement Module
for Health Services Strengthening

LOGISTICS AND LABORATORY MANAGEMENT



Government of Nepal
Ministry of Health
Department of Health Services
Management Division



नेपाल सरकार

स्वास्थ्य मन्त्रालय

(.....शाखा)



प्राप्त पत्र संख्या :-

पत्र संख्या :-

चलानी नं. :-

फोन नं.

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४२६२८६२
४२२३५८०

रामशाहपथ,
काठमाडौं, नेपाल।

मिति : २०७४।०६।०४

विषय :- मन्तव्य

स्वास्थ्य सेवाको विस्तार, पहुँच अभिवृद्धि तथा उल्लेखनीय प्रगति गरेअनुरूप नै गुणस्तरियता सुधार गर्न सकिएन भने त्यो दीगो र प्रभावकारी बन्न सक्दैन। त्यसैले नेपाल सरकारको आजको आवश्यकता तथा प्राथमिकता भनेको आम नागरिकलाई गुणस्तरीय सेवा प्रदानगरी स्वास्थ्यस्थितिमा सुधार ल्याउनु हो। राष्ट्रिय स्वास्थ्य नीति २०७१ ले पनि स्वास्थ्य सेवाको गुणस्तर अभिवृद्धिमा विशेष जोड दिएको छ।

यदि स्वास्थ्य प्रणालीले उच्च गुणस्तरीय सेवा प्रवाह गर्न सकेन भने अपेक्षा अनुसारको प्रतिफल नआउँने र अन्ततः दीगो विकास लक्ष्य प्राप्त गर्न निकै कठिन हुन्छ। यसै सन्दर्भमा नेपाल स्वास्थ्य क्षेत्र रणनीति २०७२-७७ ले पनि स्वास्थ्य क्षेत्रमा भएका प्रगतिलाई दीगो बनाउन अगिकार गरेका चार निर्देशक सिद्धान्तमध्ये गुणस्तरीय स्वास्थ्य सेवा एक हो। जसले सेवाको गुणस्तरका सबै आयाममा सुधार गर्न अपरिहार्य रहेको औल्याएको छ।

सेवाको गुणस्तर अभिवृद्धि गर्ने कार्यमा स्वास्थ्यसंस्था, स्वास्थ्यकर्मी, तथा व्यवस्थापकलाई सहयोग पुऱ्याउने उद्देश्यले तयार गरिएको यस गुणस्तर सुधार समग्रीलाई प्रयोगगरी सेवाग्राहीलाई गुणस्तरीय सेवा प्रदान गर्ने कार्यमा सवैबाट सहयोग मिल्नेछ भन्ने अपेक्षा लिएको छु। यसलाई तयार गर्न नेतृत्व प्रदानगर्नु हुने स्वास्थ्य सेवा विभाग तथा विभाग अर्न्तगतको व्यवस्थापन महाशाखा सहित सहयोगी संस्थाहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. किरण रेग्मी

सचिव



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पवली, टेम्प
काठमाडौं, नेपाल।

२०७४।६।४
मिति :

विषय : मन्तव्य

नेपालले स्वास्थ्य सेवाको पहुँच बढाउनमा महत्वपूर्ण उपलब्धी हाँसिल गरेको सर्वविदितै छ। तर उपलब्धीको वावजुद सेवाको गुणस्तर अभिवृद्धि गर्न पनि उत्तिकै महत्वपूर्ण छ। केही समयअघि सम्पन्न भएको बर्थिङ्ग सेन्टरबाट प्रदान गरिने सेवाको गुणस्तरको लेखाजोखा, २०१४ तथा नेपाल स्वास्थ्य संस्था सर्वेक्षण, २०१५ जस्ता अध्ययनहरूले पनि गुणस्तर अभिवृद्धिको विषय आवश्यक रहेको देखाउँछ। यस स्थितिलाई सम्बोधन गर्न राष्ट्रिय नीतिको उद्देश्यअनुरूप नेपाल स्वास्थ्य क्षेत्र रणनीति तथा कार्यान्वय योजनामा गुणस्तरीय सेवा प्रदान गर्नको लागि विशेष जोड दिइएको छ।

यी कुरालाई मध्यनजर गर्दै विगतमा भएका प्रयासलाईसमेत सघन रूपमा अगाडी बढाउँन स्वास्थ्य सेवा विभाग व्यवस्थापन महाशाखाले राष्ट्रिय गुणस्तर सुधारप्रणालीको एक महत्वपूर्ण पक्षको रूपमा स्वास्थ्य संस्था तथा स्वास्थ्यकर्मीद्वारा प्रदान गरिएको सेवाको गुणस्तरको लेखाजोखागर्न गुणस्तर सुधार सामाग्री तयार गरेको छ। यस सामाग्रीले देशभरका स्वास्थ्य संस्थाबाट प्रदानगरिने सेवाको गुणस्तर सुधार गर्ने कार्यमा सहयोग मिल्नेछ भन्ने विश्वास लिएको छ।

हाल मुलुक संघीय संरचनामा गइसकेको सन्दर्भमा पनि यो सामाग्रीलाई निरन्तर रूपमा प्रयोग गर्न सकिन्न भन्ने विश्वास लिएको छ। यसबाट प्राप्त सूचना स्वास्थ्य संस्थामा मात्रै नभई, स्थानीय तह, प्रदेशदेखि तथा राष्ट्रिय स्तरमा समेत प्रयोग हुनेछ भन्ने कुरामा म विश्वस्त छु। यी सूचनाले हामीलाई के कस्ता कुरालाई प्राथमितामा राखी गुणस्तरमा सुधार ल्याउन सकिन्छ भन्ने कार्यमा मार्गदर्शन गर्नेछ।

यसका साथै राष्ट्रिय नीति तथा रणनीतिमा उल्लेख भएअनुरूप सेवाको गुणस्तरमा अभिवृद्धि गर्ने कार्यमा स्वास्थ्य सेवा विभाग प्रतिबद्ध छ र यो कार्यमा सम्पूर्ण स्वास्थ्यसंस्था, स्वास्थ्यकर्मी तथा साभेदार संस्थाहरूबाट समेत पूर्ण सहयोगको अपेक्षा गरेको छ। यीगुणस्तर सुधार टुलहरूलाई तयार गर्न नेतृत्व प्रदान गर्नुहुने व्यवस्थापन महाशाखा तथा प्राविधिक सहयोग प्रदानगर्ने USAID-Health for Life का साथै प्राविधिक कार्य समूहका सम्पूर्ण सदस्यहरूलाई विशेष धन्यवाद दिन चाहन्छु।

डा. राजेन्द्र प्रसाद पन्त

महानिर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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व्यवस्थापन महाशाखा

पत्र संख्या:-

चलानी नम्बर:-

पचली, टेक
काठमाडौं, नेपाल।

मिति : २०७४।४

विषय : कृतज्ञता

मुलुकको जनसंख्याको विभिन्न समूहमा विद्यमान स्वास्थ्य समस्यालाई सम्बोधन गर्न बनेको राष्ट्रिय स्वास्थ्यनीति २०७१ ले आफ्नो लक्ष्य तथा उद्देश्यमा गुणस्तरीय स्वास्थ्यसेवा प्रदान गर्ने बारेमा उल्लेख गरेको छ। यस नीतिमा उल्लेख भएअनुसारको लक्ष्य तथा उद्देश्य प्राप्त गर्नका लागि सम्पूर्ण स्वास्थ्य सेवा गुणस्तरीय हुन जरुरी छ। सेवाहरुको गुणस्तरीय छैनन भने जनसमुदायको स्वास्थ्यसेवाप्रतिको भरोशा बढाउन सकिन्न। जसको प्रत्यक्ष प्रभाव स्वास्थ्यमा अपेक्षकृति सुधारमा पर्छ।

नेपाल स्वास्थ्य नीति र रणनीतिले गुणस्तरीय स्वास्थ्य सेवालाई महत्व दिएको छ। यसको अर्थ स्वास्थ्यको गुणस्तरीयतामा सुधार नेपालको स्वास्थ्य क्षेत्रको प्रमुख लक्ष्य एवं एजेण्डा बनेको प्रमाणित गर्छ। गुणस्तरीय स्वास्थ्य सेवा हाँसिल गर्ने सन्दर्भमा स्वास्थ्य मन्त्रालयले 'गुणस्तरीय स्वास्थ्य सेवासम्बन्धी राष्ट्रिय नीति २०६४' निर्माणगरी लागू गर्दै चरणबद्ध रूपमा गुणस्तर सुधार पद्धतिको पाटोको रूपमा यस गुणस्तर सुधार सामाग्रीको विकास गरिएको छ। यी सामाग्रीको प्रयोगले स्वास्थ्य सेवाको गुणस्तर सुधारमा महत्वपूर्ण भूमिका खेल्ने विश्वास मैले लिएको छु। अन्त्यमा यी सामाग्री तयार गर्न नेतृत्व प्रदान गर्ने डा.हेमन्तचन्द्र ओझाका साथै आफ्ना अमूल्य समय र सुझाव दिनुहुने पूर्व निर्देशकहरु डा.भीम आचार्य र डा.विकास देवकोटा लगायत डा.लोकराज पनेरु, डा.सुधा देवकोटा, रमेश अधिकारी, सृजना श्रेष्ठ र स्वास्थ्य संस्था विकास तथा गुणस्तर शाखाका सम्पूर्णमा हाद्विक धन्यवाद दिन चाहान्छु। प्राविधिक सहयोग प्रदान गर्ने USAID-Health for Life लाई विशेष धन्यवाद दिँदै यस कार्यमा सहयोग गर्नुहुने WHO, GIZ, NHSSP र NSI प्रतिसमेत आभार व्यक्त गर्न चाहन्छु।


डा.भीमसिंह तिकरी

निर्देशक



नेपाल सरकार
स्वास्थ्य मन्त्रालय

स्वास्थ्य सेवा विभाग

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पत्र संख्या:-

चलानी नम्बर:-



व्यवस्थापन

महाशाखा

पचली, टेक
काठमाडौं, नेपाल ।

मिति २०७४/६/४.....

प्राक्कथन

विषय :

स्वास्थ्यसेवाको पहुँचबढे पनि स्वास्थ्य संस्थाहरूबाट दिइने सेवाहरू गुणस्तरीय हुन तसकिरहेको सन्दर्भमा आगामी दिनमा सेवाको गुणस्तरमा सुधार गर्न विशेष महत्व दिन जरुरी छ । साभेदार संस्थाहरूको सहयोगमा विभिन्न प्रयास भएपनि गुणस्तर सुधार पद्धति स्वास्थ्य सेवा प्रणालीको अंगको रूपमा लागू हुन सकिरहेको थिएन ।

स्वास्थ्यसेवा प्रदान गर्ने संस्थाहरूमा गुणस्तर सुधार पद्धति लागू गर्न सकियो भने व्यवस्थित तथा दीगो रूपमा सेवाको गुणस्तरमा सुधार गर्न सकिन्छ । यस पद्धतिलाई लागू गरी सुदृढीकरण गर्ने कार्यमा सहयोग गर्न गुणस्तर सुधार सामाग्रीहरू तयार गरिएका छन ।

यी सामाग्रीहरू नेपाल सरकारद्वारा प्रदान गरिने प्राथमिकतामा रहेका स्वास्थ्य सेवाहरूको राष्ट्रिय मापदण्ड तथा निर्देशिकाअनुसार तयार गरिएका छन् । यी गुणस्तर सुधार सामाग्रीहरूका कार्यसम्पादन मापदण्डहरू राष्ट्रिय चिकित्सा मापदण्डहरू, प्रोटोकलहरू, तालिम सामग्रीहरू, विश्व स्वास्थ्य संगठन लगायत अन्य अन्तर्राष्ट्रिय संस्थाहरूको सिफारिस समेतमा आधारित छन् । MNC QI tools (NHTC/Jhpiego), Child health tools(CHD/Suaahara), FP QI tools (FHD/NHTC/Jhpiego), Logistic tool (LMD/JSI/H4L-logistic)जस्ता विगतमा प्रयोग भएका टुलहरूको आधारमा तयार पारिएका यी सामाग्रीहरूलाई परिमार्जित गर्दै HIV, TB, Malaria तथा Laboratory सम्बन्धी सेवाहरूका टुलहरूसमेत समावेश गरिएका छन् ।

साथै यी सामाग्रीहरूले स्वास्थ्य संस्थाबाट प्रदान गरिने सेवालाई गुणस्तरीय बनाउन आईपरेका समस्या तथा बाधाहरू पहिचान गरी त्यसलाई समाधान गर्न आवश्यक कदम चाल्न सेवाप्रदायक तथा गुणस्तर सुधार टोलीलाई मद्दत पुग्दछ । यी टुलहरूले सेवा प्रदायकलाई मापदण्डअनुसारको सेवा प्रदानगर्न Job Aidको रूपमा तथा प्रदान गरिएका सेवाको स्वमूल्याङ्कन गर्न सहयोग गर्ने भएकोले निरन्तर रूपमा सेवाको गुणस्तरको सुनिश्चितता सुधार गर्न सकिन्छ ।

यस सन्दर्भमा व्यवस्थापन महाशाखाले तयार गरेका यी गुणस्तर सुधार सामाग्रीहरूलाई सबै स्वास्थ्यकर्मी, स्वास्थ्य संस्था तथा साभेदार संस्थाहरूले प्रयोगगरी गुणस्तरीय स्वास्थ्य सेवा प्रदानगर्ने कार्यमा महत्वपूर्ण योगदान गरिदिनु हुनेछ भन्नेपूर्ण विश्वास लिएको छु ।

डा. हेमन्तचन्द्र ओझा

प्रमुख

स्वास्थ्य संस्था विकास तथा

गुणस्तर शाखा

Quality Improvement Modules for Health Services Strengthening

LM 01: Logistics Management of the District or Rural/Urban Municipality Store

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write dates in DD/MM/YY format
Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Materials are safely stored	The store does the following:					
	Stores drugs and commodities in racks, cabinets and pallets					
	Stores drugs and commodities in a dry and well ventilated space					
	Ensures cartons of drugs and commodities are stored without touching the walls or floor directly					
	Stores drugs and commodities away from direct sunlight					
	Stores drugs and commodities separately from other office items, pesticides and chemical substances					
	Protects drugs and commodities from moisture					
	Stores condoms and items made of rubber away from electric motors and light-emitting sources					
	Has a fire extinguisher or sand-filled bucket in the storage area					
	Ensures that the storeroom is secured (using iron bars and a lock)					
	Ensures storage area is clean and protected from insects and rodents					
	Ensures that commodities are arranged using the FEFO system (check five items randomly)					
	Ensures that drugs and commodities kept in cartons and racks are arranged such that label and expiry date are clearly visible (check any five items)					
	Keeps damaged or expired drugs/commodities separately					
Score: All "Yes"=1 point; Any "No"=0 point						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. Vaccines are safely stored	The store does the following:					
	Ensures temperature of storage area is between +2 to 8 C					
	Records temperature every morning and evening					
	Arranges vaccines as per FEFO system (check any 3 items)					
	Maintains VVM in good condition (check any 3 items)					
	Ensures refrigerator/generator are functional					
	Score:All “Yes”=1 point;Any “No”=0 point					
3. Stock register is properly maintained	The store does the following:					
	Records income and expenditure details of drugs, vaccines & commodities in stock book or on the online Inventory Management System (IMS) within 7 days of receipt or supply					
	Records income details of drugs, vaccines & commodities in stock book and sends the stock entry report					
	Records drugs by generic name in the stock register as per LMIS form					
	Mentions ASL/EOP at the top of the stock register (check any 5 items)					
	Score:All “Yes”=1 point;Any “No”=0 point					
4. LMIS Trimester Report correctly prepared	The store does the following:					
	Ensures that each column of LMIS trimester report sent by District is properly filled (check any 5)					
	Ensures that the numbers on last remaining stock of last trimester (column # 6) and last remaining stock of (column # 2) of current trimester report are same					
	Mentions the list of drugs that expired within the last six month on remarks column (Check any 5)					
	Prepares and sends LMIS trimester report by the 15 th day of every fourth month					
	Improves LMIS report by incorporating LMIS feedback (verify follow-up documents)					
	Score:All “Yes”=1 point;Any “No”=0 point					
5. Status of stock	The store does the following:					
	Ensures stocks are in between ASL and EOP (check any 5 items)					
	Ensures stock of syringes/vaccines is enough for 5 to 9 weeks (check any 3 items)					
	Score:All “Yes”=1 point;Any “No”=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
6. Order quantity and distribution determined	The store does the following:					
	Supplies drugs/commodities to health facility from the district store, as per ASL					
	Processes LMIS trimester report and order form together for regular commodity orders from the regional medical store					
	Supplies drugs and commodities to health facilities on trimesterly basis					
	Supplies drugs/commodities to health facilities with handover form					
	Score:All “Yes”=1 point;Any “No”=0 point					
7. Training curriculums are used properly	The store has the following:					
	Reference materials, Participant’s Handbook, Pull System and Online Inventory Management System Training Manual					
	Score:All “Yes”=1 point;Any “No”=0 point					
8. Local procurement properly done	The store does the following:					
	Quantity of drugs/commodities for purchase from district determined based on previous year’s expenditures and morbidity					
	Procures drugs after deducting the district stock					
	Procures commodities that are recommended by procurement unit (observe the minute register of procurement unit)					
	Ensures procurement plan is available					
	Score:All “Yes”=1 point;Any “No”=0 point					
9. Use of computer received in store	In the store:					
	The received computer is used in the store					
	Storekeeper is trained to use computer					
	Storekeeper uses IMS software					
	Score:All “Yes”=1 point;Any “No”=0 point					
10. Distribution and Transportation	The store does the following:					
	Estimates cost of transporting drugs/commodities from district store to the health facilities for one full year					
	Sets trimesterly budget for the transportation of drugs/commodities to the health facilities					
	Score:All “Yes”=1 point;Any “No”=0 point					

Note: Record stock levels on the following table

Drugs/commodities stock levels, physical count (Check any 3 Program items and any 2 Essential drugs)							
Name	Unit	Stock level		ASL	EOP	Stock on Hand	Remarks
		Number according to stock register	Actual number counted				

Comments

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LM 01: Logistics Management for District or Rural/Urban Municipality Store	Self-Assessment Score			External Assessment Score	
	10	10	10	10	10
Total standards					
Total standards assessed					
Total standards met					
Percent achieved	%	%	%	%	%

Quality Improvement Modules for Health Service Strengthening

LM 02: Logistics Management for Health Facilities

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First	Second	Third	External Assessment		
				1st	2nd	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Drugs and commodities are safely stored	The health facility does the following:					
	Stores drugs and commodities in racks, cabinet and pallets					
	Stores drugs and commodities in a dry and well-ventilated space					
	Ensures cartons of drugs and commodities are stored without directly touching walls and floors					
	Drugs and commodities are stored away from direct sunlight					
	Drugs and commodities are stored separately from other office items, pesticides and chemical substances					
	Drugs and commodities are protected from moisture					
	Condoms and items made from rubber are stored away from electric motors and light sources					
	Has a fire extinguisher or sand-filled bucket in the storage area					
	Ensures that the storeroom is secured (with iron bars and a lock)					
	Ensures store is clean and protected from insects and rodents					
	Arranges commodities using the FEFO system (check any five items randomly)					
	Drugs and commodities are kept in cartons and racks arranged such that labels and expiry dates are clearly visible (check any five items)					
	Damaged or expired drugs/commodities are kept separately					
Score: All "Yes"=1 point; Any "No"=0 point						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. Vaccines are safely stored	The health facility does the following:					
	Ensures storage between +2 to +8 degrees C					
	Temperature is recorded every morning and evening					
	Vaccines arranged using FEFO system (check any 3 items)					
	VVM maintained in good condition (check any 3 items)					
	Refrigerator/generator are functioning					
	Score:All “Yes”=1 point;Any “No”=0 point					
3. Stock register maintained	The health facility does the following:					
	Income and expenditure details of drugs, vaccines & commodities recorded in stock or online Inventory Management System (IMS) within 7 days of receipt or supply					
	Income details of drugs, vaccines & commodities recorded in stock book and stock (entry) report sent					
	Drugs recorded by generic name in the stock register, as per LMIS form					
	ASL/EOP mentioned at the top of the stock register (Check any 5 items)					
	Score:All “Yes”=1 point;Any “No”=0 point					
4. LMIS Trimester Report prepared	The health facility does the following:					
	Ensures proper completion of each column of LMIS Trimester Report sent by health facility (check any 5)					
	Ensures that the numbers on last remaining stock of last trimester (column #6) and last remaining stock of current trimester report (column # 2) match					
	The list of drugs that expired within the last six months are mentioned in remarks column (check any 5)					
	LMIS trimester report prepared and sent by 7 th day of each trimestral month					
	Improved LMIS report by incorporating LMIS feedback (verify follow-up documents)					
	Score:All “Yes”=1 point;Any “No”=0 point					
5. Status of stock situation	The health facility does the following:					
	Ensures stocks are between ASL and EOP (check any 5 items)					
	Score:All “Yes”=1 point;Any “No”=0 point					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
6. Order Quantity and Distribution determined	The health facility does the following:					
	Drugs /commodities have been supplied to health facility from the district store as per ASL					
	LMIS trimester report and order form are processed together for regular commodities orders					
	Drugs and commodities are supplied every trimester					
	Drugs/commodities are supplied to health facilities with handover form					
	Score:All “Yes”=1 point;Any “No”=0 point					
7. Training Curriculums are used properly	The health facility does the following:					
	Reference material,s Participant’s handbook, Pull System and Online IMS training manual kept in store					
	Score:All “Yes”=1 point;Any “No”=0 point					

Note: Fill the stock level status in the following table

Drugs/commodities stock level situation, physical count (Check any 3 Program items and any 2 Essential drugs)							
Name	Unit	Stock level		ASL	EOP	Stock on Hand	Remarks
		As per the information in stock register	Amount by physical count				

Comments

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LM 02: Logistics Management for Health Facilities	Self-Assessment Score			External Assessment Score	
	7	7	7	7	7
Total standards					
Total standards assessed					
Total standards met					
Percent achievement	%	%	%	%	%

Quality Improvement Modules for Health Services Strengthening

LB 01: Laboratory Services

Facility Name and Place		Rural Municipality/ Municipality			Health Facility Code	
Period of Assessment	First <input type="checkbox"/>	Second <input type="checkbox"/>	Third <input type="checkbox"/>	External Assessment		
				1st <input type="checkbox"/>	2nd <input type="checkbox"/>	
Date of Observation						
Name of Observer						
Designation of Observer						

Note: Write date in DD/MM/YY format

Scoring Key: Yes=1, No=0, NA=Not Applicable

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
1. Adequate infrastructure present to provide laboratory services at health facility	The health facility has the following:					
	Clean and tidy premises outside laboratory					
	Adequate waiting area					
	Clean and tidy premises inside laboratory					
	Adequate lighting in workplace					
	Adequate ventilation in workplace					
	Continuous running water and drainage system					
	24-hour electricity					
	Adequate furniture for staff and clients					
	Separate rooms for collecting biological specimens and for report dispatching, with signboards outside each room					
	Toilets within premises for urine and stool specimen collection					
	Score: All "Yes"=1 point; Any "No"=0					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
2. Adequate equipment and instruments available to provide laboratory services at health facility	The following instruments are available:					
	Microscope					
	Semi-auto analyzer					
	Incubator					
	Chemical balance/scale					
	Electrolyte analyzer					
	Colorimeter					
	Hot air oven					
	Refrigerator					
	Centrifuge					
	DLC counter					
	Pipettes, glassware/kits/syringes					
	Water bath					
	Disposable test tubes					
	Computer and printer					
	Autoclave					
	Score: All "Yes"=1 point; Any "No"=0					
3. Adequate reagents and supplies available to provide laboratory services	The following reagents/supplies are available:					
	HIV, HBsAg, HCV-RDT/ELISA (WHO-recommended)					
	Blood group and typing sera					
	Blood glucose reagent/kit					
	Blood urea reagent/kit					
	LFT reagent kit					
	Other reagents according to offered tests					
	Urine pregnancy test kit					
	Uristix for albumin and sugar					
	Score: All "Yes"=1 point; Any "No"=0					
4. Adequate human resources present to provide laboratory services	The following positions are filled:					
	Office Assistant					
	Medical Lab Assistant					
	Medical Lab Technician					
	Medical Lab Technologist					
	Pathologist					
	Score: All "Yes"=1 point; Any "No"=0					

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
5. Laboratory staff at health facility follow standard precautions whilst providing services	The following precautions are taken:					
	Puncture-proof containers					
	Disinfectant (chlorine), hypochlorite					
	Single-use standard disposable syringes					
	Soap or hand disinfectant (alcohol + glycerin)					
	Disposable gloves					
	Utility gloves					
	Masks					
	Aprons					
	HF-level guidelines for standard precautions					
	HF-level guidelines for IP and HCWM for labs					
	SOP, guidelines and protocols for lab tests					
	Score: All "Yes"=1 point; Any "No"=0					
	6. Laboratory performs all tests as per the level of health facility.	The following tests are done in the laboratory:				
Hemoglobin/hematocrit						
Blood count – TC, DC						
ESR						
BT, CT, PT						
Blood Group and Rh type						
Sugar						
Sodium, potassium						
Urea, creatinine						
Amylase						
Bilirubin, alkaline phosphatase, SGPT, SGOT						
RA factor						
AFB						
Gram's stain						
Culture (any one blood, urine, stool, pus)						
Malaria parasite						
HIV						
HBsAg						
VDRL						
Monteux test						
Semen analysis						
Urine – routine and microscopic (including albumin and sugar)						
Urine – acetone						
Urine pregnancy test						
Stool – routine and microscope						
Stool for occult blood						
Score: All "Yes"=1 point; Any "No"=0						

PERFORMANCE STANDARD	DEFINITION (VERIFICATION CRITERIA)	Trimester			External Assessment	
		1st	2nd	3rd	1st	2nd
7. Laboratory collects waste as per laboratory waste management standards	The health facility does the following:					
	Staff wear protective gloves during work					
	Sharps are disposed of in puncture-proof container					
	Sharp instruments are disposed of in puncture-proof containers without recapping instruments					
	Laboratory waste during testing and other processes are disposed of in separate containers (according to WHO protocol)					
	Laboratory glass utensils and broken glass pieces are disposed of in separate containers					
	Score:All "Yes"=1 point;Any "No"=0					
8. Laboratory disposes of waste as per laboratory waste management standards	The health facility does the following:					
	Puncture-proof containers are sealed and disposed of once ¾ full					
	Sharp instruments are disposed of in separate containers and needles are destroyed by destroyer before disposal					
	Non-combustible waste is buried in a suitable place after disinfection and/or sterilization					
	Human tissue and organs are buried in a separate burial pit					
	Chlorine solution is disposed of in separate burial pits after use					
	Unused or extra lab specimens and chemical reagents are disposed of after chemical treatment					
	Score:All "Yes"=1 point;Any "No"=0					
9. Self-assessment is done for quality assurance of services provided by the laboratory at health facility	The health facility does the following:					
	Registers, both manually and in the computer, the purchase and maintenance details of instruments and equipment					
	Conducts laboratory tests according to Lab Standard Operating Procedure leaflet					
	Uses serum for internal quality control					
	Properly labels reagents and chemical kits					
	Checks for expiry of reagents and chemicals					
	Stores reagents and chemicals at correct temperature (review temperature chart)					
	Ensures correct temperature is maintained for refrigerator, incubator and water bath					
	Keeps a record of internal quality control					
	Advertises services provided by laboratory in citizen charter and concerned forums with suitable signboards					
	Ensures quality assurance as per NPHL's EQAs.					
Score:All "Yes"=1 point;Any "No"=0						



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Annexes

Annex 1: Satisfied Client Survey Form

सेवाग्राहीको सन्तुष्टि सम्बन्धी सर्वेक्षण फारम
(स्वास्थ्य संस्थामा आउने सेवाग्राहीलाई सोध्ने प्रश्नावली)

स्वास्थ्य संस्थाको नाम : सेवाग्राहीको विवरण
गाउँ/ नगरपालिका: सेवाग्राहीको लिंग : महिला () पुरुष ()
जिल्ला : सेवाग्राहीको उमेर :.....
मिति : सेवाग्राहीको शैक्षिक स्तर : क) निरक्षर () ख) साक्षर ()

<p>१. तपाईं यो स्वास्थ्य संस्थामा के सेवा लिन आउनुभएको हो ?</p> <p>.....</p>	<p>२. के तपाईंले चाहेको सेवा पाउनुभयो ?</p> <p>क) पाएँ ख) पाइनँ</p> <p>.....</p> <p>पाउनुभएन भने किन होला ?</p> <p>.....</p>
<p>३. तपाईंलाई यहाँ आउन कति समय लाग्यो ?</p> <p>क) आधा घण्टा ख) आधा घण्टादेखि १ घण्टा ग) १ घण्टाभन्दा माथि</p>	<p>४. तपाईं यहाँ आफैँ आउनुभयो कि कसैले पठाएर आउनुभएको ?</p> <p>क) आफैँ आएको ख) कसैले पठाएर</p>
<p>५. यदि कसैले पठाएर आएको हो भने कसले पठाएको ?</p> <p>क) स्वास्थ्यकर्मीले ख) स्वास्थ्य स्वयंसेविकाले ग) धामीभाँकी घ) अन्य, खुलाउनुस</p> <p>.....</p>	<p>६. स्वास्थ्य संस्थाको सरसफाइ कस्तो पाउनुभयो ?</p> <p>क) राम्रो ख) ठीकै ग) नराम्रो के कारणले ?</p> <p>.....</p>
<p>७. स्वास्थ्यकर्मीको व्यवहार कस्तो पाउनुभयो ?</p> <p>क) राम्रो ख) ठीकै ग) नराम्रो के कारणले</p>	<p>८. सेवा लिन कति समय पर्खनुपयो ?</p> <p>क) १५ मिनेटभन्दा कम ख) १५ मिनेटदेखि १ घण्टा ग) १ घण्टाभन्दा बढी</p>

<p>९. के स्वास्थ्य संस्थामा खानेपानीको व्यवस्था थियो ?</p> <p>क) थियो</p> <p>ख) थिएन</p> <p>ग) थाहा भएन</p> <p>व्यवस्था भएको भए, कस्तो थियो?</p> <p>.....</p> <p>.....</p> <p>व्यवस्था नभएको भए, किन होला?</p> <p>.....</p> <p>.....</p>	<p>१०. स्वास्थ्य संस्थामा शौचालयको व्यवस्था थियो कि थिएन ?</p> <p>क) थियो</p> <p>ख) थिएन</p> <p>ग) थाहा छैन</p> <p>शौचालयको व्यवस्था भए, सरसफाई कस्तो थियो?</p> <p>.....</p> <p>.....</p> <p>व्यवस्था नभएको भए, किन होला?</p> <p>.....</p> <p>.....</p>
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नोट : यी प्रश्नहरू अत्यावश्यकिय हुन् । स्थानीय आवश्यकता, सेवाको प्रकारको उपलब्धताका आधारमा थप प्रश्नहरू सोध्न सकिनेछ ।

Annex 2: Action Plan

कार्य योजना (Action Plan)

स्वास्थ्य संस्थाको नाम :

मिति :

कार्य योजना						
समस्याहरू (मुख्य भिन्नता) (Major Gaps)	मुख्य कारणहरू	समाधानका उपायहरू	जिम्मेवार व्यक्ति (नाम)	कहिले पुरा गर्ने (मिति)	कार्यान्वयनको अवस्था	

गुणस्तर सुधार टोलीको उपस्थित सदस्यहरूको नाम :

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कार्यालय प्रमुखको दस्तखत

नाम :

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