

Ministry of Health & Family Welfare www.qis.gov.bd

Guideline for using Quality Assurance Checklist

The quality assurance (QA) checklist is the checklist to assess the quality of EmOC services of public hospitals in Narsingdi district on pilot basis. Following is the guideline for using the checklist. However, the facility manager may adopt the guideline according to the local situation and needs.

- The health facilities should be assessed quarterly using the QA checklist.
- The facility should be assessed by a small group of service providers, who are the members of the EOC team. The team may include RMO, consultant/MO trained in OG, Consultant/MO trained in anesthesia, and a senior staff nurse. However, the EOC team members can decide about the QA team composition for doing the job.
- In order to fill up the checklist, the team will visit all the rooms one by one as mentioned on the checklist and collect relevant information from the person in-charge (mentioned on the checklist) and through observation.
- The team will then sit together to sum up the total score (count 1 for "Yes" and 0 for "No") for each of the rooms and calculate the percentage. They will also calculate the total score and percentage for the whole facility adding up the scores obtained by each of the rooms. It is good to make bar graphs with the scores by room and total score to see changes over time. At the end of the assessment and based on assessment findings, the team will provide feedback and recommendations for improvement of quality of services.
- The findings will then be shared with the facility manager and present in the subsequent EOC team meeting for discussion and making an action plan for implementation. To visualize the current situation and changes, the team may consider making bar graphs with the scores (percentage) obtained over time (by room and total). This would help the service providers understand the trend over time.
- A copy of the findings should be send to the Civil Surgeon/DDFP for information. A copy should also be forwarded to the Program Manager, RHP (DGHS/DGFP) for information and necessary action.

Quality Assurance Checklist for EmOC Services: UHC/District Hospital

1. General Information	
Date of visit:	
Name of facility visited:	
Name of QAT members with designation:	1.
	2.
	3.
	4.
	5.

2. Human resources for EOC services

Human Resources	No.	Comments
1. Medical Officer (MO) trained in Obs & Gyne		
2. Consultant Obs & Gynae		
3. MO trained in anesthesia		
4. Consultant anesthesia		
5. MO trained in safe blood transfusion		
6. Consultant/MO trained in ETAT		
7. Nurses trained in EOC/Midwifery		
8. Nurses trained in ETAT		
9. Lab technologist trained in safe blood		
transfusion		
10. Cleaner/sweeper		
11. Aya		

3. Availability of EmOC services (services provided during last 3 months)

Services	Yes	No	Comments
1. Use injectable antibiotics			
2. Use injectable anticonvulsants (e.g.,			
diazepam, magnesium sulphate)			
3. Use injectable oxytocics (e.g., Oxytocin)			
4. Conduct manual removal of placenta			
5. Perform manual vacuum aspiration and/or			
DE&C			
6. Conduct assisted vaginal delivery (ventose or			
forceps)			
7. Perform basic neonatal resuscitation (with			
bag and mask)			
8. Perform caesarian section			
9. Provide safe blood transfusion			
10. Assist normal delivery			
11. Provide ANC			
12. Provide PNC			
13. Manage neonatal illnesses (sick newborn)			

4. EmOC status of the facility

1. Comprehensive EmOC	2. Basic EmOC	3. No EmOC
(1-9 functions done)	(1-7 functions done)	(Otherwise)
Reasons for not providing compreh	nensive or Basic EmOC services:	

5. EmOC service statistics (statistician/SSN)

Compless	No. pe	erformed	Comments
Services	Last month	Last 3 months	Comments
1. ANC			
2. PNC			
3. Obstetric admissions			
4. Normal delivery			
5. Manual removal of placenta			
6. Manual vacuum aspiration			
and/or DE&C			
7. Assisted vaginal delivery (ventose or forceps)			
8. Caesarian section			
9. Safe blood transfusion			
10. Obstetric complications treated			
11. Obstructed labour			
12. Pre-eclampsia and eclampsia			
13. APH/PPH			
14. Complications of abortions			
15. Puerperal sepsis			
16. Maternal deaths			
17. Still births			
18. Sick neonate treated			
19. Neonatal deaths			
20. Referred in			
21. Referred out			

6. General management (RMO)

		Yes	No	Comments
1.	EOC team formed			
2.	Facility action plan developed			
3.	Conduct EOC team meeting regularly			
	(monthly or bimonthly) [check the minutes]			
4.	Conducts maternal death review			
5.	Conducts neonatal death review			
6.	EOC information board present with updated data			
7.	Monthly EOC report sent regularly			
	Total score:			% achieved:

7. Out-patient department (RMO)

		Present	Absent	Comments
1.	Service information board			
2.	Clients' charter of rights			
3.	Providers' charter of rights			
4.	Drug list			
5.	Seating arrangements for OPD patients			
6.	Provide regular health education at OPD			
	(check the register)			
	Total score:			% achieved:

8. ANC/PNC room/corner (ANC/PNC in-charge)

	Present	Absent	Comments
1. BP machine			
2. Stethoscope			
3. Foetoscope			
4. Weighing scale (adult)			
5. Measuring tape			
6. Examination bed			
7. Does the provider check BP, weight,			
anemia, edema etc. (cross check with one			
or two clients)			
8. Does the provider check the abdomen			
(position, fetal heart sound etc.) [cross			
check with one or two clients]			
9. Maintains privacy			
10. Counsel mother on birth planning, nutrition			
and exclusive breast feeding			
11. Maintains register			
Total score:			% achieved:

9. Emergency room (emergency room in-charge: EMO/SSN)

	Present	Absent	Comments
1. Running ambulance			
2. Hand washing facility with running water			
3. Trolley/wheel chair/stretcher			
4. Person to transfer patient			
5. Examination table			
6. IV stand			
7. IV fluid (normal saline, DNS etc.)			
8. BP machine			
9. Stethoscope			
10. Thermometer			
11. Filled Oxygen cylinder			
12. Decontaminates equipment with 0.5%			
chlorine solution			
13. Maintains privacy			
14. Duty roaster			
Total score:			% achieved:

10. Operation theatre (OT in-charge/MO AN) [Omit this section if it is a basic EmOC centre]

Equipments in functioning state	Present/ Yes	Absent/ No	Comments
1. Anesthesia machine			
2. Laryngoscope			
3. Endotracheal tube			
4. OT light			
5. OT table			
6. At least 3 C-section sets			
7. At least one C-section set ready for use (sterile)			
8. At least one DE&C set or manual vacuum			
aspirator ready for use (sterile)			
9. Filled Oxygen cylinder			
10. Filled Nitrous oxide cylinder			
11. Spinal needle			
12. Sucker machine (adult)			
13. Diathermy machine			
14. Autoclave			
15. Sterilizer (electrical or burner type)			
16. BP machine			
17. Stethoscope			
18. Ambu bag (adult)			
19. Baby weighing scale			
20. Sterile gloves			
21. Sterile gown			
22. Air conditioner			
23. Emergency light (generator or charger)			
24. Spinal anesthetic			
25. General anesthetic			
26. Emergency drug list			
27. Decontamination done with 0.5% chlorine			
solution			
28. Hand washing facility with running water			
and elbow tap			
29. Maintains privacy			
30. OT cleaned (mopped) daily			
31. OT table and instrument trolleys			
decontaminated (with 0.5% chlorine			
solution)			
32. OT register maintained properly (check)			0/ achieved.
Total score:			% achieved:

11. Newborn care corner in OT: [Present / Absent]

	Equipments in functioning state	Present/ Yes	Absent/ No	Comments
1.	Radiant warmer			
2.	Baby ambu bag			
3.	Baby sucker machine (electrical or foot			
	pump type)			
4.	Room Thermometer			
5.	Spot light			
6.	I/V Cannula 24 G, 26 G			

	Equipments in functioning state	Present/	Absent/	Comments
		Yes	No	
7.	Mucous sucker [Penguin type]			
8.	Sterile equipment for cutting and tying the cord			
9.	Towels for drying and wrapping the baby			
	Total score:			% achieved:

12. Delivery room (labour room in-charge):

Functioning equipment and logistics	Present/ Yes	Absent/ No	Comments
1. Delivery table			
2. Spot light			
3. Sucker machine (adult)			
4. Sterilizer (electrical)			
5. Baby weighing scale			
6. Filled oxygen cylinder with flow meter			
7. Ambu bag (adult)			
8. At least 3 normal delivery sets			
9. At least 3 episiotomy sets			
10. At least one delivery set ready for use			
(sterile)			
11. At least one episiotomy set ready for use			
(sterile)			
12. Vacuum extractor (ventose)			
13. Sterile obstetric forceps			
14. Instrument trolley			
15. Baby tray			
16. BP machine			
17. Stethoscope			
18. Measuring tape			
19. IV stand			
20. Sharp disposal container			
21. Emergency light (generator or charge light)			
22. Sterile gloves			
23. Catheter			
24. Gown, musk and cap			
25. Emergency drug list available			
26. Allows choice of position for delivery			
27. Restricts use of episiotomy			
28. Uses partograph (check)			
29. Decontaminates equipment with 0.5%			
chlorine solution			
30. Cleans (mopped) delivery room daily			
31. Decontaminates delivery table and			
instrument trolley with 0.5% chlorine			
solution			
32. Practices active management of 3 rd stage of			
labour (check with the SSN)			
33. Practices delayed cord cutting			
34. Baby dried and wrapped immediately after			
birth			
35. Baby put onto the breast within 30 minutes			
36. Neonatal resuscitation done (if necessary)			
(in necessary)	1	I	<u> </u>

Functioning equipment and logistics	Present/ Yes	Absent/ No	Comments
37. Maintains privacy			
38. Hand washing facility with running water and elbo tap			
39. Takes birth weight			
40. Provides post-partum vitamin A supplementation to mother			
41. Closely observe mother for at least 2 hours			
42. Maintains delivery register (check if all the columns are filled up)			
43. Duty roster			
Total score:			% achieved:

13. Newborn care corner in delivery room: [Present / Absent]

	Equipments in functioning state	Present/ Yes	Absent/ No	Comments
1	Radiant warmer	ies	NU	
2.	Baby ambu bag			
-	·			
3.	Baby sucker machine (electrical or foot			
_	pump type)			
4.	Room Thermometer			
5.	Spot light			
6.	I/V Cannula 24 G, 26 G			
7.	Mucous sucker [Penguin type]			
8.	Sterile equipment for cutting and tying the			
	cord			
9.	Towels for drying and wrapping the baby			
	Total score:			% achieved:

14. Female/obstetric ward (ward in-charge)

Functioning equipment and logistics	Present/ Yes	Absent/ No	Comments
1. Beds ready for receiving patients			
2. Bed side locker			
3. BP machine			
4. Stethoscope			
5. Thermometer			
6. IV stand			
7. Filled oxygen cylinder			
8. Ambu bag (adult)			
9. Ambu bag (baby)			
10. Sharp disposal container (at nurse's station)			
11. Indoor register maintained properly (Check			
if all columns are filled up)			
12. EOC reporting forms			
13. Cleanliness			
14. Patients' clinical history writing			
satisfactory (presenting complaint, history			
in brief, physical examination, diagnosis)			
15. PTR (pulse, temperature and respiration)			
chart hanged from the bed			
16. Uses magnesium sulphate for treatment of			

eclampsia		
17. Health education material		
18. Provides health education at IPD		
Total score:		% achieved:

15. Newborn stabilization unit in female/pediatric ward (applicable for UHC) [Present / Absent]

Functioning equipment and logistics	Present/ Yes	Absent/ No	Comments
1. Radiant warmer			
2. Baby ambu bag			
3. Baby weighing scale (preferably electronic			
type)			
4. Baby sucker machine (electric or foot pump			
type)			
5. Thermometer			
6. Spot light			
7. IV stand			
8. Phototherapy machine/unit			
9. Mucous sucker (Penguine sucker)			
10. Filled Oxygen cylinder with flow meter and			
oxygen hood/mask			
11. Stethoscope (neonatal)			
12. I/V cannula 24G, 26 G			
13. Feeding tube (CH07, L40cm)			
14. Sterile Gloves			
15. Suction tube (CH 10, L50 cm)			
16. Disinfectant e.g., Chlorhexidine 20%			
Total sco	re:		% achieved:

16. Special Care Newborn Unit (SCANU) (Applicable for district hospital) [Present/Absent]

	Functioning equipment and logistics	Present/	Absent/	Comments
		Yes	No	
1.	Radiant warmer			
2.	Basinet on trolley, neonatal, with mattress			
3.	Phototherapy unit			
4.	Baby ambu bag			
5.	Laryngoscope set (neonate)			
6.	Baby sucker machine (electrical or foot pump			
	type)			
7.	Mucous sucker (Penguin type)			
8.	Surgical suture set			
9.	Syringe pump, 10, 20, 50 ml, single phase			
10	. Oxygen cylinder with mask			
11	. Thermometer			
12	. Baby weighing scale (electronic type)			
13	. Neonatal pulse oxymeter (bedside)			
14	. Stethoscope (neonatal)			
15	. BP machine (neonatal, electronic)			
16	. Spot light (mobile)			
17	. Measuring tape			
18	. Kidney tray			
19	. Dressing tray/trolley			
20	. IV stand			

Functioning equipment and logistics	Present/ Yes	Absent/ No	Comments
21. Air Conditioner			
22. Emergency light (Generator, charge light or			
IPS)			
23. Room Heater			
24. Electric Sterilizer			
25. Gowns for staffs and mothers			
26. Washable Slippers			
27. Maintains register			
28. Duty roster			
Total score:			% achieved:

17. Laboratory/blood supply room (medical technologist) [Omit this section if it is a basic EmOC centre]

	Present	Absent	Comments
1. Blood grouping reagents (ABO and RH)			
2. All five screening kits/reagents (hepatitis			
B&C, syphilis, HIV and malaria)			
3. Blood collection bag with set			
4. Bilirubinometer (for total bilirubine and			
capillary based)			
5. Photometer for blood sugar/glucose			
6. Disposable syringe			
7. BP machine			
8. Stethoscope			
9. Refrigerator (functioning)			
10. Medical technologist is on call			
11. Maintains register (check)			
Total score:			% achieved:

18. Overall achievements

Overall total score: 124 for basic and 176 for comprehensive EmOC; and 188 for district hospital	Total score obta	nined:
Overall achievement:	=	%
[(total score obtained \div overall total score) \times 100]		

15. Prepare case study (2 to 3) to assess the knowledge and skills of MO trained in OG and anesthesia and nurses based on standard protocol. Comments on case study:

16. Actions taken by the QAT:

17. Recommendations:

Note: Please provide a copy of this report to concerned UHFPO, Civil Surgeon (Norsingdi) and Program Manager, Reproductive Health Program, DGHS