

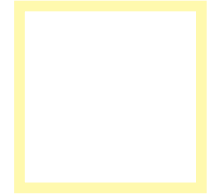


# A Stepwise Quality Improvement Checklist for Federal Tertiary Hospitals

## **IN-PATIENTS CARE WARDS AND NURSING SERVICES**

*An Assessment Tool to Strengthen the Operations, Service Delivery,  
Safety, Quality and Management of In-Patient Care  
(Wards and Nursing Services).*





## INTRODUCTION

### Context

#### *Continuous Quality and Safety Improvement in Federal Tertiary Hospital*

#### **In-Patient Services (Wards and Nursing Services)**

In patient care refers to care for patients who are formerly admitted/hospitalised in wards. This type of care tends to be directed towards more serious ailments and trauma that require one or more days of overnight stay at a hospital. The procedures for their medical condition require the patient to be admitted, so that he or she can be closely monitored during and after the procedure.

Wards are integral part of in-patient care and requires the active involvement of nursing services. They must:

- be a safe and comfortable place for delivering quality patient care services;
- be equipped with modern and functional equipment that will ensure high success rate of patient outcomes;
- provide conducive environment for both patients and staff to promote healing;
- prioritize infection control at all times.

## Objectives of this Checklist

This quality assessment checklist will provide **direction, support, and accountability framework** while focussing on individuals, systems, management of resources and self-governance. It will build corporate accountability for clinical performance into the nursing service management model and wards operations. It will enhance a corporate culture in which quality improvement becomes a shared enterprise through shared learning and information. It will also provide strategic opportunities to diagnose and repair broken processes.

Frequent and accurate assessment and timely feedback will support action plans to implement systems that are lacking and revive those that are not functioning effectively.

This checklist therefore represents a clinical governance assessment tool to determine:

- 1) The quality of inpatient nursing services.
- 2) The quality of patient safety strategies in the wards
- 3) The quality and competency level of clinical and non-clinical support services in the wards and their impact on patient outcomes.
- 4) The level of process capabilities
- 5) Areas for improvement.



## Assessment Scoring

The contents of this checklist have been awarded point values based on their relative importance. Responses to all questions must be either **“Yes” or “No” or “Not Applicable” (NA)**.

The checklist has considerable overlap and expanded to include important continuous quality tools.

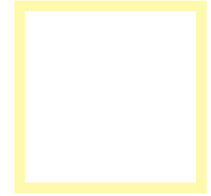
### NOTE:

- Only responses marked yes should be given the allotted points. All the required answers to a particular question must be present before you can indicate a “yes” for any given checklist question and then award the corresponding allotted points.
- It is often not necessary to ask all the checklist questions verbatim. An experienced auditor can often learn to answer multiple checklist questions through open-ended questions with the key or designated staff contact.

This checklist is divided into different aspects of Quality Management System that the department is required to develop and implement regularly as listed below;

Assessment Score Sheet			
Sections		Total Allotted Scores	Assessed Scores
8.0	Staffing Summary	36	
8.1	Facility and Safety	51	
8.2	Organisation and Management	41	
8.3	Patient Documentation (Nursing Process)	12	
8.4	Patients' Engagement & Communication	19	
8.5	Occurrence/Incidence Management	11	
8.6	Infection Control	36	
8.7	Waste Management	10	
<b>Total Scores</b>		<b>180</b>	

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## General Information

Date of Assessment	
Name(s) and Affiliation(s) of Assessor(s)	
Name of Federal Tertiary Hospital	
Address	
State:	
Name of CMD/MD:	Telephone/E-mail (CMD/MD):
Name/Type of Ward:	
Ward Telephone:	Email:
Head of Nursing Services:	Telephone (Head of Nursing Services)
Number of beds:	Number of referrals:
Number of admitted patients/annum:	Number of discharge:
Number of mortality per annum:	



## 8.0 Staffing Summary

Profession	Expected Number	Number of Full Time Equivalents (FTEs)	Adequate for Facility Operations			Allotted Scores	Assessed Scores
			Yes	No	Insufficient Data		
Matron	1					5	
Nursing sisters	>7					5	
Staff nurses trained for inpatient services	>20					5	
Paediatric Nurses	>10					5	
Special cases nurses	>10					5	
Ward Auxiliary Nurses	>20					5	
Porters	>10					3	
Cleaners	>10					3	
<b>Subtotal</b>						<b>36</b>	

For each item, please circle either Yes, No, or Not Applicable (N/A). All elements of the question must be satisfactorily present to indicate "yes" and award credit. Provide explanation or further comments for each "no" or "n/a" response.

	YES	NO	N/A	Comments	Allotted Scores	Scores Assessed
<b>8.1 FACILITY &amp; SAFETY</b>						
Are there well equipped nurses' stations?	YES	NO	N/A		3	
Are the hospital wards well ventilated?	YES	NO	N/A		1	
<b>Standard:</b> Hospital wards are to be well ventilated and spacious to minimize the risk of cross-infection.						
Are the beds in the ward regularly maintained, stable and clean at all times?	YES	NO	N/A		2	
Is there adequate lighting in the patient ward areas?	YES	NO	N/A		2	
Are the wards connected to alternative power supply of the hospital at all times?	YES	NO	N/A		1	
<b>Standard:</b> All the wards must be well lit up at all times with uninterrupted power supply to facilitate comfortable healing environment.						
Is there adequate water supply on the wards?	YES	NO	N/A		2	
Are there comfortable rooms provided for recess of nurses on shift duties?	YES	NO	N/A		2	
Are the wards generally tidy and clean at all times?	YES	NO	N/A		2	
Are patients provided with clean bed sheets at all times?	YES	NO	N/A		1	
<b>Standard:</b> The should provide adequate bed linens for the in-patients throughout their stay on ward.						
Is there any functional suctioning machine available on the wards?	YES	NO	N/A		2	
Is there any resuscitation trolley available on the ward?	YES	NO	N/A		2	
Are the drugs regularly checked for expiry and changed?	YES	NO	N/A		1	
<b>Standard:</b> Emergency resuscitation trolley medicines are to be checked regularly and expired ones removed and replaced immediately.						
Is there any oxygen supply on the wards?	YES	NO	N/A		1	
Are there any pottering services available on the wards?	YES	NO	N/A		2	
Are trolleys and wheelchairs available on the wards?	YES	NO	N/A		3	
<b>Standard:</b> At least 2 trolleys and wheelchairs should be available on the wards with easily accessible portering services as and when needed.						



	YES	NO	N/A	Comments	Allotted Score	Scores Assessed
Are there more than 2 toilets and bathrooms on each ward?	YES	NO	N/A		3	
<b>Standard:</b> <i>There should be more than two toilet and bathroom facility on each ward to promote general hospital hygiene.</i>						
Are bed pan facilities available for patients?	YES	NO	N/A		3	
<b>Standard:</b> <i>Bed pans are to be provided and managed by the auxiliary nurses on duty and not left with the patients/relatives to manage.</i>						
Are there well equipped sluice/dirty linen rooms available on the ward?	YES	NO	N/A		3	
Are dressing trolleys available?	YES	NO	N/A		2	
Are facilities for special procedures available on the wards, e.g. enema, vitriol-catheterization, etc.	YES	NO	N/A		1	
Are there functional fire alarms on the wards?	YES	NO	N/A		2	
Are there fire fighting equipment on the wards?	YES	NO	N/A		2	
Are the fire safety alarms tested regularly?	YES	NO	N/A		2	
If YES, state how often?	Very Often		Often	Not Often	Rarely	
<b>Standard:</b> <i>The fire safety alarms must be tested regularly to ensure they are still sensitive and the management must always ensure the fire extinguishers installed on the wards are in date and functional.</i>						
Are the ward staff trained on fire safety alerts and emergency response to such?	YES	NO	N/A		3	
<b>Standard:</b> <i>The hospital management should ensure that ward staff are a trained on fire safety measures and emergency response to fire-alert and incidences.</i>						
Is there adequate security measures put in place on the wards at all time? i.e. 24/7	YES	NO	N/A		2	
Are the ward receptions manned by competent trained staff nurses and security staff?	YES	NO	N/A		1	
<b>Standard:</b> <i>Ward reception areas must be manned by competent trained staff nurses who are skilled to take some security measures.</i>						
<b>Subtotal</b>					<b>51</b>	



For each item, please circle either Yes, No, or Not Applicable (N/A). All elements of the question must be satisfactorily present to indicate "yes" and award credit. Provide explanation or further comments for each "no" or "n/a" response.

	YES	NO	N/A	Comments	Allotted Scores	Scores Assessed
<b>8.2 ORGANIZATION AND MANAGEMENT</b>						
Does nursing services have a short and long-term strategic plan for continuous quality improvement in the wards?	YES	NO	N/A		2	
Are the wards connected to the integrated hospital information system?	YES	NO	N/A		1	
<b>Standard:</b> <i>Integrated hospital information system is vital to decision making and plays a crucial role in the success of the organisation.</i>						
Does the hospital have a competent designated nursing officer heading the wards operations?	YES	NO	N/A		2	
Does the hospital have a developed policy on routine wards operations?	YES	NO	N/A		1	
Are there developed standard operating procedures and guidelines on the various nursing procedures and key operations of the wards?	YES	NO	N/A		1	
<b>Standard:</b> <i>The hospital management should develop policies for carrying out routine nursing procedures and ensure that there are SOPs and guidelines for all major and minor nursing care and support services.</i>						
Does the nursing management team ensure that all these policy and procedure documents are accessible to all relevant ward staff?	YES	NO	N/A		1	
Are nursing staff trained on effective use of these checklists and procedures?	YES	NO	N/A		1	
<b>Standard:</b> <i>Management should organise regular in-house training for nursing and support staff on the policy and procedure documents to ensure best practices are adhered to at all times in the wards.</i>						
Are these policy documents and SOPs reviewed and updated regularly?	YES	NO	N/A		2	
<b>Standard:</b> <i>Policy documents, guidelines, checklists and SOPs are to be reviewed and updated by the nursing management team regularly, (at least once a year).</i>						
Are nurse managers in the wards trained regularly on leadership and management ?	YES	NO	N/A		1	
Do the nurses participate in relevant professional continuing education programme activities?	YES	NO	N/A		1	
<b>Standard:</b> <i>The hospital management must ensure and support nurses to participate in relevant CPD programmes to enhance their competencies and skills.</i>						
Is there a regular staff meeting for the ward staff?	YES	NO	N/A		1	
Are daily tasks clearly assigned and communicated to the relevant ward team on time?	YES	NO	N/A		1	
Is there a system for regular competency and performance assessment for nursing staff?	YES	NO	N/A		2	

Is there an established procedure for orientation of new ward staff?	YES	NO	N/A		2	
<b>Standard:</b> <i>Appropriate orientation programme must be established by the hospital management and carried for all newly recruited or redeployed staff to the wards.</i>						
Are drug trolleys and cupboard kept safe and locked at all time?	YES	NO	N/A		2	
Are patients bed side cupboards where their own medications are kept locked at all time?	YES	NO	N/A		2	
<b>Standard:</b> <i>All ward medicines and patients own drugs are to be kept safe in locked cupboards at all time.</i>						
Are the ward beds fitted with appropriate rails especially in the children's wards?	YES	NO	N/A		3	
Are these rails functional at all time and well maintained?	YES	NO	N/A		3	
<b>Standard:</b> <i>Bed rails are to be used for vulnerable patients, children and infants to prevent falls. The management must ensure that procured beds have functional rails and breaks on the wheels at all times.</i>						
Is there a designated call room?	YES	NO	N/A		1	
If YES, is it comfortably furnished & equipped for call officers? i.e. fridge, microwave, air conditions/fans.	YES	NO	N/A		1	
Is there a documented procedure for making and receiving emergency or out of hours calls?	YES	NO	N/A		1	
If YES, does this procedure document include levels of calls to the different levels of on-call duty officers?	YES	NO	N/A		1	
Does this document contain the compulsory inclusion of recruited in-house consultants in the day-to-day on-call duty roster?	YES	NO	N/A		1	
Does this document include guidelines for weekend call duty rostering?	YES	NO	N/A		1	
Do you always get prompt response from the following on-call duty officers when rostered including weekend calls?	YES	NO	N/A		2	
Senior consultant						
Junior consultant						
Senior Registrars						
Junior Registrars						
House officers						
Matrons						
Is there a system for periodic monitoring on-call duty performance for all level officers/staff?	YES	NO	N/A		2	
If YES, does the management ensure that on-call duty performance are monitored regularly including weekend call duty?	YES	NO	N/A		2	
<b>Subtotal</b>					<b>41</b>	

For each item, please circle either Yes, No, or Not Applicable (N/A). All elements of the question must be satisfactorily present to indicate "yes" and award credit. Provide explanation or further comments for each "no" or "n/a" response.

	YES	NO	N/A	Comments	Score	Scores Assessed
<b>8.3 PATIENT DOCUMENTATION (Nursing Process)</b>						
Is nursing process effectively applied in the wards?	YES	NO	N/A		3	
Assessment?						
Diagnosis?						
Outcomes/Planning?						
Implementation?						
Evaluation						
<b>Standard:</b> Nurses should effectively practice nursing processes, which is a series of organised steps designed to provide excellent care.						
Does each nurse documentation include the patient's biodata; hospital number, vital sign chart and drug chart?	YES	NO	N/A		1	
<b>Standard:</b> Nurses documentation must contain full description of all patient's assessment and care that is being given and planed.						
Is there an established process and documented guideline that ensures the transfer of correct and accurate patient information between care giver e.g during nursing, clinical, medical and non-clinical hand overs?	YES	NO	N/A		2	
<b>Standard:</b> There must be established written and accessible policy guidelines to ensure the correct and accurate hand over of patient's care plan and update between care givers.						
Is there a written policy guideline for receiving verbal and telephone orders?	YES	NO	N/A		2	
<b>Standard:</b> Policy must include writing down the orders and reading it back to confirm the correct information given.						
Is there a written and accessible protocol for identifying patients and matching patient with correct care?	YES	NO	N/A		2	
<b>Standard:</b> There must be a written and adopted protocol for identifying patients before and during care.						
Does the hospital apply at least a 2-patients identifiers system in which the patient also participate in the identification process?	YES	NO	N/A		1	
<b>Standard:</b> The hospital is expected to adopt at least 2 patients identifiers system to ensure matching correct patient with correct care and reduce the risk of error.						
Are containers used in collecting specimens labeled with the patient's detail in his/her presence after taking the samples?	YES	NO	N/A		1	
<b>Standard:</b> Specimens must be labeled with patient's name immediately after taking and confirmed correct with the patient for sedated/unconscious patients, sample bottles are labeled and cross checked by two health professionals.						
<b>Subtotal</b>					<b>12</b>	

For each item, please circle either Yes, No, or Not Applicable (N/A). All elements of the question must be satisfactorily present to indicate "yes" and award credit. Provide explanation or further comments for each "no" or "n/a" response.

	YES	NO	N/A	Comments	Allotted Scores	Scores Assessed
<b>8.4 PATIENTS'/CLIENTS ENGAGEMENT AND COMMUNICATION</b>						
Do ward care teams respect the patients' rights, beliefs and values in line with the hospital policy?	YES	NO	N/A		2	
<b>Standard:</b> <i>Patients' rights, beliefs and values must be respected as far as this is reasonably practicable when receiving care.</i>						
Do the nurses receive informed consent from patients at all time before performing an invasive procedure in accordance with the Federal government and hospital policy?	YES	NO	N/A		3	
<b>Standard:</b> <i>Informed consent must be received from all patients and documented in accordance with the government law before care providers initiate any invasive procedure.</i>						
Are patients educated on their care plan and intended procedures so they can make informed decision?	YES	NO	N/A		2	
Are patients informed decision clearly documented in patient's note?	YES	NO	N/A		2	
Are patients communicated with in the language they understand the most?	YES	NO	N/A		2	
Are the ward team aware of the patients bill of rights?	YES	NO	N/A		3	
Have they been trained on patients bill of rights to ensure they know and understand the contents?	YES	NO	N/A		2	
<b>Standard:</b> <i>The management should ensure that all the ward staff are aware and trained on the patients' bill of rights policy document.</i>						
Do the ward staff communicate with patients in a respectful manner?	YES	NO	N/A		1	
Are the attitude of the ward staff helpful to the patients?	YES	NO	N/A		1	
Are the nurses supportive to the patients when carrying out their nursing duties?	YES	NO	N/A		1	
<b>Subtotal</b>					<b>19</b>	



For each item, please circle either Yes, No, or Not Applicable (N/A). All elements of the question must be satisfactorily present to indicate "yes" and award credit. Provide explanation or further comments for each "no" or "n/a" response.

	YES	NO	N/A	Comments	Allotted Scores	Scores Assessed
<b>8.5 OCCURRENCE/INCIDENCE MANAGEMENT</b>						
Is there any incident record book in each ward?	YES	NO	N/A		2	
<b>Standard:</b> There must be an incident record book in the wards according to hospital policy and a designated senior clinical officer must oversee the management of recorded incidents in the wards.						
Are nursing staff on the wards informed and encouraged to fill the incidents record book appropriately?	YES	NO	N/A		3	
<b>Standard:</b> Management are expected to practice a non-punitive and no-blame culture in reported incidents so as to encourage staff to report and respond to incidents.						
Are patient safety incidence during nursing care procedures identified, and reported immediately?	YES	NO	N/A		2	
Are these incidences managed and responded to according to the hospital incidence policy?	YES	NO	N/A		2	
Are the identified trends used to plan strategic actions to improve patient care services?	YES	NO	N/A		2	
<b>Standard:</b> Management is expected to collate adverse events and incidents, identify the trends and use the findings to plan strategic actions to continuously improve patient care, service delivery and minimize reoccurrences.						
<b>Subtotal</b>					<b>11</b>	



For each item, please circle either Yes, No, or Not Applicable (N/A). All elements of the question must be satisfactorily present to indicate "yes" and award credit. Provide explanation or further comments for each "no" or "n/a" response.

	YES	NO	N/A	Comments	Allotted Scores	Scores Assessed
<b>8.6 INFECTION CONTROL</b>						
Are the wards cleaned daily with the appropriate cleaning disinfectants?	YES	NO	N/A		2	
Are the cleaners trained on the correct procedures of cleaning the wards and the correct use of cleaning disinfectants?	YES	NO	N/A		2	
<b>Standard:</b> Ward support staff and cleaners are to be trained regularly on the proper way to clean the wards and the correct use of the cleaning reagents.						
Are the drug trolleys and medicines cupboard kept clean regularly?	YES	NO	N/A		2	
Is there a separate refrigerator for drugs?	YES	NO	N/A		2	
<b>Standard:</b> Food items are not to be kept in the same refrigerator for medicines in the ward.						
Are sharps used disposed off in correct sealable sharps bins?	YES	NO	N/A		2	
<b>Standard:</b> All used sharps are to be disposed off in appropriate sharps bin						
Are these sharps bins adequately available for use on the wards at all time?	YES	NO	N/A		3	
Are solid aprons and personal protective equipment disposed off in leak proof bags?	YES	NO	N/A		3	
Are the sluice rooms always clean?	YES	NO	N/A		2	
<b>Standard:</b> The ward management team should ensure that sluice rooms are kept clean and free of clutter regularly.						
Are the wards toilets and bathrooms always clean?	YES	NO	N/A		2	
Are there accessible hand washing basins and soap for the ward staff?	YES	NO	N/A		2	
Are there hand hygiene guidelines visibly posted around the ward areas?	YES	NO	N/A		2	
Is there adequate water supply in the ward?	YES	NO	N/A		2	
<b>Standard:</b> The hospital management must ensure that the wards have uninterrupted water supply at all time.						
Is there any hand hygiene guidelines posted in and around the ward areas?	YES	NO	N/A		3	
<b>Standard:</b> The WHO or CDC hand hygiene guideline must be followed and visibly posted around the ward area for all staff to see and comply.						
Are personal protective equipment (PPE) readily available for use whenever required in the wards?	YES	NO	N/A		2	
<b>Standard:</b> PPEs must be readily available in adequate quantities in the wards at all times and must be worn by all ward staff, both clinical and non-clinical when handling patients and hazardous wastes.						

Are used PPE discarded in appropriate disposal bags and disposed as per the hospital policy?	YES	NO	N/A		2	
Are new ward staff trained on the appropriate use of PPE?	YES	NO	N/A		1	
Is there any guideline for post exposure prophylaxis after needle stick injury on the wards?	YES	NO	N/A		2	
<b>Subtotal</b>					<b>36</b>	

	YES	NO	N/A	Comments	Allotted Scores	Scores Assessed
<b>8.7 WASTE MANAGEMENT</b>						
Are all the ward clinical and non-clinical staff conversant with hospital waste management policy?	YES	NO	N/A		2	
<b>Standard:</b> <i>The hospital management must have a waste management policy and ensure that all relevant clinical and non-clinical staff are aware, trained and understand the policy.</i>						
Are waste segregation performed appropriately at the site of generation in the wards??	YES	NO	N/A		2	
<b>Standard:</b> <i>Waste segregation done at its site of generation reduces cross-contamination during transportation to disposal site.</i>						
Are medical wastes always collected in covered leak-proof containers from the wards?	YES	NO	N/A		3	
Are medical waste collected to the centralised disposal site daily?	YES	NO	N/A		3	
<b>Standard:</b> <i>Wastes generated from the wards must be collected daily to the centralised waste collection area.</i>						
<b>Subtotal</b>					<b>10</b>	







## **SUMMARY**

Noted Challenges:

Noted Recommendations: