Directorate General of Health Services
Quality Improvement Secretariat

Quality Improvement Monitoring Checklist: Patient Safety

Name of hospital: _____

Date of monitoring: _____

A	Management:	Status	Score	Remarks
1	Quality Improvement Committee (QIC) in place	Yes / No		
2	Have regular meeting of QIC	Yes / No		
3	Patient safety committee in place (a sub-committee of QIC)	Yes / No		
4	**Following registers are in place and used:**			
4.1	• Recognizing and responding to clinical deterioration of acute case	Yes / No		
4.2	• Prevention and management of pressure injuries	Yes / No		
4.3	• Medication safety	Yes / No		
4.4	• Prevention of fall associated harm	Yes / No		
4.5	• Patient identification and procedure matching	Yes / No		
4.6	• Infection	Yes / No		
4.7	• Risk management register (anesthesia)	Yes / No		
4.8	• Risk management register (general)	Yes / No		
5	**Regularly uses following tools/checklists:**			
5.1	• Incidence reporting	Yes / No		
5.2	• IPC checklist	Yes / No		
5.3	• Patient safety reporting tool	Yes / No		
5.4	• Sterilization audit checklist	Yes / No		
5.5	• Autoclave audit checklist	Yes / No		
5.6	• Safe surgery checklist for all surgeries	Yes / No		
B	**Infection Prevention:**			
1	Does the facility has national guideline for IPC (infection prevention and control)	Yes / No		
2	Staff trained on IPC	Yes / No		
3	Practices hand hygiene	Yes / No		
4	Sterilize equipment properly (at 121^0C & uses indicator) and store them appropriately	Yes / No		

C	**Waste management:**			
1	Uses standard color bins for waste management	Yes / No		
2	Waste are segregated at source	Yes / No		
3	Waste are disposed as per SOP	Yes / No		
D	**Patient safety indicators (data of last month):**			
1	**Healthcare associated infections (nosocomial infection)**			
1.1	• Wound infection rate			
1.2	• Wound dehiscence rate			
1.3	• Rate of nosocomial infection at ICU			
1.4	• Rate of catheter associated infections			
1.5	• Number of accidental puncture or laceration happened			
2	**Medication safety**			
2.1	• Number of wrong medication incidents			
2.2	• Number of deaths due to medication errors			
2.3	• Percentage of patients received prophylactic antibiotic prior to operation			
2.4	• Number of complications of anesthesia			
2.5	• Number of incidences of retained surgical items			
3	**Blood and blood products**			
3.1	• Number of transfusion reaction occurred			
3.2	• Number of incidences of giving wrong blood			
4	**Preventing and managing pressure injuries**			
4.1	• Rate of pressure ulcer			
4.2	• Rate of birth trauma			
4.3	• Number of obstetric injuries due to assisted vaginal delivery (Forceps/Vacuum)			
5	**Recognizing and responding to clinical deterioration in acute health**			
5.1	• Number patients developed shock due to PPH/MI/ Eclampsia/ Diarrhea			
6	**Preventing fall associated harm**			
6.1	• Number of falls happened			
6.2	• Number of falls that had caused fractures			

7	**Patient identification and procedure matching**			
7.1	• Number of mismatch happened			
7.2	• Number of incidences of incorrect patient identified during operation or during a procedure			
7.3	• Number of procedural mismatching happened			
E	**Other management issues:**			
1	Analyze patient safety issues (incidents) monthly	Yes / No		
2	Report/present data and discuss patient safety issues in the QIC meetings	Yes / No		
3	Develop action plan based on recommendations, implement the plan and monitor them	Yes / No		
F	**Specialized Services (If services available)**			
1	CCU Monitoring checklist using	Yes / No		
2	ICU Monitoring Check list using	Yes / No		
3	Dialysis Check list using	Yes / No		

Note : If Any Services are not available Please mention it in the remarks: