

Patient Safety:

Patient safety is a new healthcare discipline that emphasizes the reporting, analysis, and prevention of medical error that often lead to adverse healthcare events. According to the World Health Organization (WHO) patient safety issue is an endemic health concern. Patient safety involves applying lessons learned from business and industry, adopting innovative technologies, educating providers and consumers, enhancing proper reporting systems, and developing new economic incentives. Patient safety has emerged as a powerful force in the current movement to improve quality and lower cost in health care. Patient safety involves minimizing the risk of error to patients.

Activities:

- Development, finalization, printings, dissemination and distribution of Patient Safety guidelines.
- Orientation of healthcare service providers based on guidelines about patient safety issues: incident reporting, medication safety, adverse drug reaction monitoring, surgical safety, infection control including hand wash, crisis management tools, death audit etc.
- Provision of logistics for DH, MCH, Specialized Institutes for addressing patient safety issues.
- Ensure Patient safety issues are properly addressed at Private Medical College Hospitals and other private health care facilities.
- Incorporation of Patient safety issues in undergraduate curriculum and internship training.

Progress over the years:

1. Development, Finalization and Approval of Patient Safety Training Modules. **(Fig-1)**
2. “ToT on Patient Safety Issues” done to health care providers based on patient safety module.
3. Orientation and Training Workshop done to health care providers based on Patient Safety module on 11 Facilities.
4. Development of Patient Safety assessment tools (draft) **(Fig-2)**.
5. Baseline assessment of Patient Safety done on 20 Facilities
6. ToT done on Infection Prevention and Control .
7. Hands on training done on 300 Doctors and 300 Sisters of 15 Facilities.
8. Development & finalization of Infection Prevention and Control assessment tool **(Fig-3)**, Monitoring Tool **(Fig-4)** and Reporting Tool **(Fig-5)**.
9. Development, finalization of IPC Reporting Data Set **(Fig-6)**.
10. Baseline assessment of Infection Prevention and Control done on 28 Facilities.
11. Strengthening WASH services in Health Care Facilities through implementing “WASH FIT” in two district hospital collaboration with unicef.

On Going Process:

1. Development of costed national action plan based on Global Patient Safety Action Plan in corporation with WHO.
2. Incorporation of Patient safety issues in undergraduate curriculum and internship training.

• Attachments:

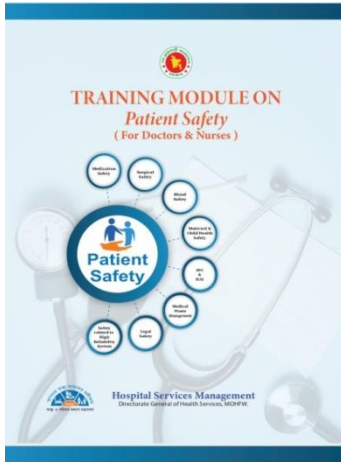


Fig-1. Training module on patient safety

Baseline Assessment Checklist for Patient safety
Hospital Services Management (HSM)
DGHS, MOH & FW

Name of the Facility: _____
Date of Assessment: _____
Name & Designation of Facility Head: _____
Mobile No: _____
Name and Designation of the Assessors:
1. _____
2. _____
3. _____

No	Question	Response	Remarks
Leadership and Governance			
1	Is there a patient safety committee to formulate national priorities and actions?	Yes: 1 No: 0	
2	The hospital has a patient safety team responsible for overseeing patient safety efforts.	Yes: 1 Partial: 0.5 No: 0	
3	A senior leader (e.g. Director/ Superintendent) actively contributes to patient safety and provides support and resources	Yes: 1 Partial: 0.5 No: 0	
Safety Culture, Communication and Teamwork			
4	Clear charter on in-patient and visits to visitors.	Yes: 1 No: 0	
5	The hospital encourages a culture of open communication and encourages staff to report any unwanted incidents.	Yes: 1 Partial: 0.5 No: 0	
6	There is a standardized handover process for patient care transitions (e.g., shift changes, transfers).	Yes: 1 Partial: 0.5 No: 0	
7	Interdisciplinary team meetings are conducted regularly to discuss patient care plans and safety concerns.	Yes: 1 Partial: 0.5 No: 0	
Medication Safety			
8	Display board with information on available medicines is present.	Yes: 1 No: 0	
9	Reviewing the patient's complete medication regimen at the time of admission, transfer, and discharge.	Yes: 1 Partial: 0.5 No: 0	
10	High-risk medications have specific protocols for administration and monitoring.	Yes: 1 Partial: 0.5 No: 0	
11	Staff members receive training on safe medication administration practices.	Yes: 1 No: 0	

Fig-2. Baseline Assessment Checklist on Patient Safety

Infection Prevention and Control (IPC) Assessment Checklist
Hospital Services Management (HSM)
DGHS, MOH & FW

Name of the Facility: _____
Name & Designation of Facility Head: _____
Mobile No: _____
Name and Designation of the Assessors:
A. _____
B. _____
C. _____
Date of Assessment: _____

Basic Information about the hospital:

1. Type of the hospital: 1. Public, 2. Private

2. Hospital bed no: _____

3. Developed bed for COVID or other infectious diseases? 1. Yes, 2. No

If yes, then:
Number of beds designated for COVID or other infectious patients: _____

Component 1: Infection Prevention and Control (IPC) program

Question	Response	Yes (Y)	Partial (P)	No (N)	Remarks
1. Do you have a functional IPC Committee? (According to National Guidelines)	Yes: 1 (or, provide a notification letter to Committee)				
If yes, then: 1a. Is the IPC committee formed as per guidelines? (No: 0.5 or skip to Question 6)	Yes: 1 No: 0				
2. Do you have an active IPC Team comprising of IPC professionals? (Yes: 1)	Yes: 1 No: 0				
2a. How many members?	_____				
2b. Meeting occurs on a regular basis? (reporting monthly basis)	Yes: 1 No: 0				
2c. Is there IPC team at different wards/units as per National Guidelines?	Yes: 1 No: 0				
3. Do you have an assigned IPC Focal Officer? (Yes: 1)	Yes: 1 No: 0				
3a. How many cases of HAI are reported per month? (Please specify)	_____				
3b. How many CLABSI reported per month?	_____				

Fig-3 IPC Assessment Checklist

DAILY/ WEEKLY INFECTION PREVENTION & CONTROL (IPC) MONITORING CHECKLIST
Directorate General of Health Services (DGHS), MOH & FW

Facility Name: _____ Date: _____

Area	Score	Total	Remarks
A. OUTDOOR, EMERGENCY AND TRIAGE AREA			
1. Overall cleanliness (lights, switches, patient equipment, IV stands and other fixtures). Are you visible dirt (floor, surfaces, side flows, walls and roof) and well-maintained?			
2. Adequate PPE (gown, mask, gloves, face shield/face for Health Care Workers (HCWs)).			
3. Hand wash station (clean with running water, soap, one time use paper towel, AHSR) located hand-hygiene and personal submissions are also available.			
4. Equipment for emergency items are identified daily.			
5. Proper ventilation, safety equipment, hand-washing area available for visitors.			
6. Waste segregation bins are available, clean, filled, proper place (according to color coding system with pictorial instructions) are also available.			
7. Hand hygiene (for all staff and visitors) is available.			
8. PPE (gloves, mask, goggles, face shield) are available.			
9. PPE disposal bins are available.			
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Fig-4: IPC Monitoring Checklist

Infection Prevention and Control (IPC) Reporting Tools
Hospital Services Management (HSM)
DGHS, Mohakhah, Dhaka-1212

Sl.	Questions	Responses	Score	Remarks
1	Do you have a functional IPC Committee? (According to National Guidelines)	Yes: 1 / No: 0 If yes, then: 1a. Is the IPC committee related information updated every month? 1b. Are the IPC related files updated every month in the website?	1 / No: 0	Mandatory (If no, skip question to 4)
2	Do you have an active IPC Team comprising of IPC professionals?	Yes: 1 / No: 0 If yes: 2a. Meeting occurs on a monthly (reporting monthly basis)? 2b. Is there IPC team at different wards/units as per National Guidelines?	1 / No: 0	
3	Do you have an assigned IPC Focal Person?	Yes: 1 / No: 0 If yes: Please add name, contact number & e-mail of assigned IPC Focal Person. Do you have an assigned IPC Focal Nurse? Please add name and contact number & e-mail of assigned IPC Focal Nurse.	1 / No: 0	
4	How many cases of Hospital Acquired Infection (HAI) are reported last month? (please add operational definition) 4a. Central Line-associated Bloodstream Infection (CLABSI) (if applicable) 4b. Catheter-associated Urinary Tract Infections (CAUTI) 4c. Surgical Site Infection (SSI)	Yes: 0 / No: 1 Yes: 0 / No: 1 Yes: 0 / No: 1		Mandatory-associated Pneumonia (VAP)

Fig-5. . IPC Reporting tools Checklist

Infection Prevention and Control (IPC) Report
Hospital Services Management (HSM)

1.1	Do you have a functional IPC Committee? (According to National Guidelines)	
1.2	Are the IPC committee related information updated every month?	
1.3	Are the IPC related files uploaded every month in the website?	
2.1	Do you have an active IPC Team comprising of IPC trained personnel?	
2.2	Meeting occurs on a monthly (reporting monthly basis)?	
2.3	Is there IPC team at different wards/units as per National Guidelines?	
3.1	Do you have an assigned IPC Focal Person?	
3.2	Name of assigned IPC Focal Person	
3.3	Contact number & Email of IPC Focal Officer	
3.4	Do you have an assigned IPC Focal Nurse?	
3.5	Name of assigned IPC Focal Nurse	
3.6	Contact number & Email of IPC Focal Nurse	
4.1	How many cases of Hospital Acquired Infection (HAI) are reported on month? (please add operational definition)	
4.2	Central Line-associated Bloodstream Infection (CLABSI) (if applicable)	
4.3	Catheter-associated Urinary Tract Infections (CAUTI)	
4.4	Surgical Site Infection (SSI)	

Fig-6: IPC Reporting Dataset Checklist

