

SELF ASSESSMENT FORM AND TOOL

Goal 1 Std 1. The TB DOTS center is easily located and patients have convenient and safe access to the center

1.2: Appropriate physical access

- access for all types of patients *esp. the disabled and elderly*
- *spacious facade, adequate shoulder space from main street to the center*
- *walkway ramp or alike for wheelchairs; other mechanisms i.e., utility, doctor to patient's area*
- *clear driveways, "no parking signs"*
- *dedicated space for waiting patients*
- *accessibility by patient's needs*
 - *alternative schedules for working patients; flexi-time*
 - *1st floor vs. other floors*
 - *Driveway/gates/entrance/ not blocked*

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1.4: Resources informing patients of daily and hourly schedule of TB services

- bulletin board with TB-DOTS schedule including sputum collection, DOT, etc.
- *may include schedule in IECs (flyers)*
- *health staff and patients aware of the schedule*

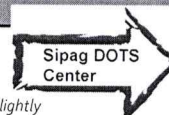
Monday	5:30 am - 11:00 am
Tuesday	5:30 am - 11:00 am
Wednesday	5:30 am - 11:00 am
Thursday	5:30 am - 11:00 am
Friday	5:30 am - 11:00 am



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1.1: Appropriate signage

- clear & visible from a distance *esp. for elderly & slightly vision-impaired clients*
- directional signages from the main road to the facility or in various parts of the area
- *Signages can be in local dialect*
- *may use indigenous materials, size proportionate to the facility*
- *value of ownership than dictated by TA providers*
- *content vs. material*



Goal 1 Std 1. The TB DOTS center is easily located and patients have convenient and safe access to the center

1.3: Clearly marked entrances and exits

- properly labelled "entrance" & "exit" to door/s
- improve access inside the facility by the use of arrows, labels of rooms/corners
 - Free lobby, corridors and floors from blockages and hazardous conditions
 - "window" for providing medicines with caution on stigma and discrimination
 - *infection control measures*

Goal 1 Std2. The TB DOTS center provides for the privacy and comfort of its patients

2.1: Clean and wholesome environment within and outside the immediate premises

- Clinic staff implements and evaluates policies for keeping the premises clean
 - *observance of 5S, clean linens and seat covers*
 - *housekeeping schedule and policies are posted*
 - *staff are aware of the policies*
 - *well-ventilated; continuous airflow (in and out)*
 - *provide an environment of wellness and sanitized area*

Goal 1 Std 2. The TB DOTS center provides for the privacy and comfort of its patients

2.2: Available resources and processes for quality waiting time for patients

- IEC and other reading materials at waiting area
- health education sessions held by health staff are Documented
- *Written program or schedule of lectures*
- *Documentation like pictures, attendance sheet, etc.*
- *Video showing*

Goal 1 Std 2. The TB DOTS center provides for the privacy and comfort of its patients

2.3: Appropriate lighting for the assigned purpose

- Well lit rooms
- Switches and bulbs are functional
- *Natural lighting in cases where electricity are not available*
- *Well lighted room if you can assess patient pallor or icterisia*

Goal 1 Std2. The TB DOTS center provides for the privacy and comfort of its patients

2.4: Privacy of staff-patient encounter

- adequately concealed examination room
- *curtains provided but ideally it should be closed door from ceiling to floor*
- confidentiality ensured during Conversations & interactions & keeping of records and documents
- *locked cabinets; accessed by authorized staff*
- *no public display of names of patients*

Goal 1 Std3. The TB DOTS center provides for the safety of its patients and staff

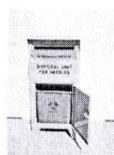
3.1: Adequate clean water

- Running water or covered containers
- *running water from the faucet or*
- *Covered Water receptacles*
- *Separate dippers for comfort room and washing sink*
- *Available for both patients and staff*

Goal 1 Std3. The TB DOTS center provides for the safety of its patients and staff

3.2: Maintain cleanliness and antisepsis

- written policy/guidelines including responsible person on disinfection and sterilization
- aware staff
- *presence of system for regular assessment of the effectiveness of the policy*
- *Available disinfectants and soaking trays*

Goal 1 Std3. The TB DOTS center provides for the safety of its patients and staff


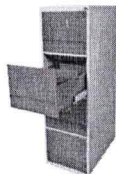
3.3: Proper waste disposal

- Basic Garbage segregation: degradable, non biodegradable, infectious, sharps; properly labelled disposal bins
- *Written policy on waste collection and disposal including needles is available*
- *Sharps & sputum cups must be buried*
- *Composting but not burning*

Goal 1 Std3. The TB DOTS center provides for the safety of its patients and staff

3.4: Proper storage and conditions of anti-TB drugs

- Cabinet or storage room with lock or secured
- Drugs are not directly exposed to sunlight or moisture, rodents, insects, et.
- FEFO principle is observed



Goal 1 Std3. The TB DOTS center provides for the safety of its patients and staff

3.5: Sputum collection area

- Clearly designated and well-ventilated sputum collection area with hand washing facilities
- *instructions in the vernacular on proper collection posted in area*
- *Hand washing facility (with soap & water)*
- *staff are aware*

Goal 1 Std3. The TB DOTS center provides for the safety of its patients and staff

3.6: Documented, disseminated and implemented procedures from risks of contamination

- Written policy
- Oriented staff and can correctly explain how to minimize the risk
- Annual examination done & results are filed

Goal 2 Std4. All patients undergo a comprehensive assessment to facilitate the planning and delivery of treatment



4.1-2: professionals document history and examinations of each patient

- complete and updated NTP forms/ITR by the physician or nurse
- with signatures
- available schedule for follow-up exams
- *Randomly select ITRs for validation*

Goal 2 Std5. All patients have continuous access to accurate and reliable TB diagnostic tests

5.1: Qualified and trained microscopist

- certificate of microscopy training from recognized training institution
- sputum examination results are signed

5.1.1: Policies and procedures for quality assurance of microscopy results

- Written policy; oriented staff
- Filed EQA results (Feedback sheet)

Goal 2 Std5. All patients have continuous access to accurate and reliable TB diagnostic tests

5.1.2: If the facility is not a microscopy center, policies and procedures for referral is available

- Updated list of microscopy center(s), maps and location
- Written referral guidelines; oriented staff
- Referral forms are available
- MOU/MOA is available (when applicable)

Goal 2 Std5. All patients have continuous access to accurate and reliable TB diagnostic tests

5.1.3: External providers of sputum microscopy with accreditation and quality assurance system

- Written copy of accreditation
- Certificate of trainings
- EQA report (Feedback Sheet) filed
- MOA/MOU for services

Goal 2 Std5. All patients have continuous access to accurate and reliable TB diagnostic tests

5.2: Policies and procedures for X-ray referrals

- Written policy and procedures
- List of accredited X-ray laboratories including addresses and contact persons
- Copy of license to operate
- Flowchart of referral
- Referral forms
- MOA/MOU for services to be availed or provided including fees

Goal 2 Std5. All patients have continuous access to accurate and reliable TB diagnostic tests

5.3: Policies and procedures for referring to a TBDC

- Written policy and procedures
- Composition of TBDC s & schedule of meetings
- Master list of referred cases
- Filed copies of referral forms and TBDC results
- MOA/MOU with TBDC

Goal 2 Std6. A care plan is developed and followed for all patients

6.1: All treatment is consistent with NTP

- Correct categorization/typing of patients
- Consistency of records and registries
- Forms/records are properly filled-up
- Knowledgeable staff
- *Randomly select NTP Treatment Card and compare with the TB Registry;*
- *TB Registry vs. NTP Laboratory Registry*
- *Interview staff*

Goal 2 Std6. A care plan is developed and followed for all patients

6.2: Flow chart of patient management from entry to separation

- Flow chart is displayed
- Available: MOP, complete training modules
- Written procedures and point person for defaulter tracing is available ; documentation is evident
- *Interview staff and patient on procedures*

Goal 2 Std6. A care plan is developed and followed for all patients

6.3: DOTS partners are selected based on criteria and procedures

- Written procedures for assigning DOTS partners
- Staff are aware of the procedure
- *Interview patient on how his/her treatment partner was selected*

Goal 2 Std6. A care plan is developed and followed for all patients



6.4: Education to all patients

- IECs available in the waiting area
- IECs are up to date
- IPCC training certificate
- Knowledgeable staff
- Interview patient and staff



Goal 2 Std6. A care plan is developed and followed for all patients

6.5: Clinical progress of patient is documented in each visit

- data (SOAP)available in the medical record (ITR) filled up by the physician at least 3x during whole course of treatment
- Properly signed ITRs
- Randomly select ITRs to validate the evidence

Goal 2 Std6. A care plan is developed and followed for all patients

6.6: Defaulter tracing (6.2)

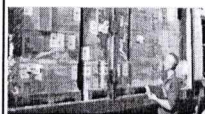
- Written policies and procedures on defaulter tracing mechanism
- Implementation documents like logbooks containing the list of defaulters and how they are traced
- Knowledgeable staff

Goal2 Std7. Patients have continuous access to safe and effective anti-TB medications through out the duration of their treatment



7.1: Written policies and procedures in assuring continuous supply of drugs

- Written procedures for conducting drug inventory, requisition, purchasing and replenishment
- Drug inventory report, filed requisition slips



7.2: Buffer stock is maintained

- Patients attest to availability of medicines
- Actual 20%buffer stock is present (during visit)

Goal 2 Std7. Patients have continuous access to safe and effective anti-TB medications through out the duration of their treatment



7.3: Written policies and procedures in assuring quality and safety of TB drugs (3.4)

- Documented procedures for conducting gross inspection
- Current Cert. Of Prod. Reg. if purchased by LGU
- Adverse reaction reports

Goal 3 Std8. Policies and procedures for providing care to patients are developed, disseminated, implemented and monitored for effectiveness.

8.1: Consistency of policies and procedures for TB with the organization

- Vision, mission-goal (of the health center) is available
- Staff are aware of the organization's VMG



Goal 3 Std8. Policies and procedures for providing care to patients are developed, disseminated, implemented and monitored for effectiveness.

- 8.2: Policies and procedures on referral for other services
- Written policies and procedures
 - MOA/MOU is available (when applicable)
 - List of referral centers, addresses and contact persons
 - Referral forms

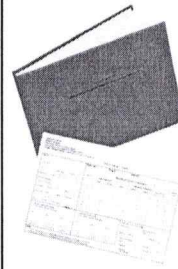
Goal 3 Std8. Policies and procedures for providing care to patients are developed, disseminated, implemented and monitored for effectiveness.

- 8.3: Patient default rates are monitored (6.6)
- Filed treatment outcome quarterly and annual reports
 - Written defaulter tracing mechanism
 - Disseminated policies and procedures
 - List of defaulters and actions taken

Goal 3 Std8. Policies and procedures for providing care to patients are developed, disseminated, implemented and monitored for effectiveness.

- 8.4: Policies and procedures in working with external groups
- List of partners with clear delineation of roles and responsibilities
 - Written policies in liaising
 - MOA/MOU with these groups are available

Goal 3 Std9. Policies and procedures for managing patient information are developed, disseminated, implemented and monitored for effectiveness.



- 9.1 Patient unique identification
- patients TB case number consistent with their NTP Treatment Card, TB Registry and all related documents
 - *Verify TB case number*

Goal 3 Std9. Policies and procedures for managing patient information are developed, disseminated, implemented and monitored for effectiveness.



- 9.2 Database of patient records and related registries maintained and easy to access
- NTP recording forms properly, correctly filled up, updated and consistent
 - iTIS implemented
 - Trained personnel maintains databases
 - Records are easily recovered from files

Goal 3 Std9. Policies and procedures for managing patient information are developed, disseminated, implemented and monitored for effectiveness.

- 9.3 Security and confidentiality of patient information ensured (2.4)
- Written policies and procedures to include releasing of patient information
 - Records and reports are secured and only authorized personnel can access
 - Drug labels are not visible to other patients

Goal 3 Std9. Policies and procedures for managing patient information are developed, disseminated, implemented and monitored for effectiveness.

9.4 Submission of complete and accurate reports

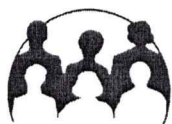
- Filed copy of submitted quarterly and annual reports duly marked as received by agency receiving report
- Staff aware of deadlines set by all reporting levels
- Reporting forms available

Goal 3 Std9. Policies and procedures for managing patient information are developed, disseminated, implemented and monitored for effectiveness.

9.5 Reviews records to assess and improve performance

- Staff meeting with filed minutes of the meeting
- Document reflecting actions that improved clinic performance
- Filed reports

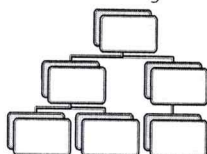
Goal 4 Std10. The TB DOTS Center has an adequate number of qualified personnel skilled in providing DOTS services.



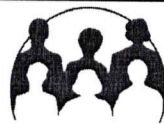
10.1 Adequate number of qualified and trained personnel

- Physician, nurse, microscopist, TB administrator (records)

- Organogram with roles and responsibilities is present
- Certificates of training of staff are available
- Staff demonstrates sufficient knowledge



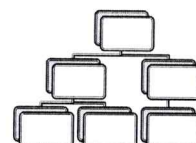
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10.1.1 Over all manager - Physician

- 10.1.2 Patient care services – Physician and Nurse
- 10.1.3 Diagnostic Services- Med Tech

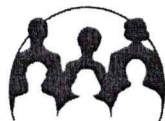
- 10.1.4 Drug Management – Nurse or Physician
- 10.1.5 Information Management – Nurse or Physician or Data Administrator
- 10.1.6 Financial Management – Accountant or Physician or Designate



Goal 4 Std10. The TB DOTS Center has an adequate number of qualified personnel skilled in providing DOTS services.

10.2 Clear job descriptions

- Appointments with job descriptions
- Personnel knowledgeable of their roles and responsibilities



Goal 4 Std10. The TB DOTS Center has an adequate number of qualified personnel skilled in providing DOTS services.

10.3 Safety in the workplace

- Regular personnel risk assessment
 - Infection control protocol
- 10.4 Up to date trainings
- TNA
 - Certificate of trainings



