

Facility QI indicators

Facility QI indicators indicate the QI implementation by levels of health facilities.

The National Healthcare Quality Improvement Strategic Plan Timor-Leste 2020-2024

guided on facility indicators based on QI domains. These are as follows:

Domains	Indicators	Health Facility level
Leadership	Health facility having a QI team with documented terms of references	Level 1(excluding HP), 2, 3
	Health facility having QI strategic document	Level 1, 2, 3
	Health facility QI teams conduct QI meeting following the national guidelines	Level 1(excluding HP), 2, 3
	Health facility QI teams/focal person review QI action plans and update for following a continuing progress	Level 1, 2, 3
	QI leaders/management collaborates to the appropriate authority for required support	Level 1, 2, 3
	QI team leader/management responded to any identified need placed by the QI committee	Level 1(excluding HP), 2, 3
	Regular assessment done by QI teams on QI performance	Level 1(excluding HP), 2, 3
	Maternal, perinatal, neonatal death review done and necessary actions taken by quality team/focal person	Level 1(excluding HP), 2, 3
	Patient centered care	Patient satisfaction rate
Patient's privacy maintained		Level 1, 2, 3
Average waiting time for being registered in a health facility		Level 1, 2, 3
Average waiting time to be seen by the provider		Level 1, 2, 3
Patient safety	Facility having uninterrupted supplies of hand-washing materials (soap bars, soap racks, soap dispensers, waterless alcohol-based hand rubs, and disposable towels or clean towels etc)	Level 1, 2, 3
	Facilities having an infection control policy for visitors	Level 1, 2, 3
	Proportion of patients whose ID was checked with medication prescribed	Level 1, 2, 3
	Proportion of patients whose identity is confirmed prior to interventions (e.g., blood test, therapy, surgical procedure, etc.)	Level 1, 2, 3 (where applicable)
	Adequate logistics for final waste management (incinerator, pit) available in health facility	Level 1, 2, 3
	Waste bins are colour-coded and (or) labeled and put in the health services areas	Level 1, 2, 3

	in appropriate place	
	Sharps are collected in safe sharps containers (plastic or metal box), lid closed, marked with appropriate label	Level 1, 2, 3
	Proportion of providers practice hand washing according to guideline	Level 1, 2, 3
Improved clinical practices	Number of SOP/guidelines available in health facilities	Level 1, 2, 3
	Proportion of providers use SOP/guidelines	Level 1, 2, 3
Provider's engagement	Proportion of provider having formal training for clinical practices	Level 1, 2, 3
	Number of provider rewarded for good performance	Level 1(excluding HP), 2, 3
	Proportion e of providers having formal training for clinical practices	Level 1, 2, 3
<i>Use of improvement methods</i>	Proportion of health facility staffs having formal training on 5s-CQI-TQM	Level 1, 2, 3
	Proportion of health facility staffs having formal training on CQI	Level 1, 2, 3
<i>Measurement for quality</i>	Registered are filled by providers with accuracy and completeness	Level 1, 2, 3
	Number of meetings in which routine data has been reviewed for assessing quality improvement	Level 1, 2, 3
<i>Ensure system's inputs for quality improvement tool</i>	Adverse events reported for anesthesia	Level 2, 3 (where applicable)
	FEFO (first expired/first out) rule followed for managing medicine and drugs	Level 1, 2, 3
	Reported stock-out event of emergency medicines within the last 3 months	Level 1, 2, 3
	Proportion of test reports re-validated to ensure safety and quality of diagnostic procedures	Level 1, 2, 3
Ensure continuity of services and improve preventive services for health care quality tool	Standardized handover process followed as required following high-risk patients, (e.g. changing of shift, and transfer) between internal departments or other facilities	Level 1, 2, 3
	Proportion of referred patients for which referral protocols are followed	Level 1, 2, 3