



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

These forms are designed to be used by both hospital personnel and external surveyors. The following information must be provided after each survey, before submitting the completed survey forms.

**1. NAME OF HOSPITAL/CLINIC/FACILITY:** \_\_\_\_\_

**2. BASELINE/INTERNAL SURVEY INFORMATION:**

Title and name of person who completed this document: \_\_\_\_\_

Post and position held: \_\_\_\_\_

Date of survey: \_\_\_\_\_

**3. EXTERNAL SURVEY INFORMATION:**

Name of external surveyor: \_\_\_\_\_

Date of external survey: \_\_\_\_\_

**GUIDE TO COMPLETION OF FORM**

**N.B. Hospital staff are please to use BLACK ink at all times. The external surveyors are requested to use RED ink at all times.**

Please circle the rated compliance with the criterion, e.g. NA (Not applicable), NC (Non-compliant), PC (Partially compliant), C (Compliant).

The default category affected is designated on the form for each criterion as follows:

1. patient and staff safety
2. legality
3. patient care
4. efficiency
5. structure
6. basic management
7. basic process
8. evaluation

The seriousness of the default is designated on the form for each criterion as follows:

1. mild
2. moderate
3. serious
4. very serious

<p><b><u>Documents Checked</u></b></p> <p>Surveyor: .....</p> <p>Surveyor: .....</p>
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# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

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# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.1 Management of the Service

#### 7.1.1 Standard

*During all phases of care, there are qualified individuals responsible for the patient's care.*

**Standard Intent:** The individuals who bear overall responsibility for the patient's care or for a particular phase of care are identified in the patient's record or in a manner that is made known to the personnel. Those responsible for the patient's care include medical practitioners, nurses and members of professions allied to medicine, e.g. physiotherapy, etc.

	Criterion	Comments
		Recommendations
<b>Criterion 7.1.1.1</b> Critical: '' Catg: Basic Management + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	The individuals responsible for the patient's care are designated.	
<b>Criterion 7.1.1.2</b> Critical: '' Catg: Basic Management + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	The individuals responsible for the patient's care are identified and made known to the patient and other staff members.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.1.2 Standard

*The delivery of services is integrated and coordinated amongst care providers.*

**Standard Intent:** The coordination of patient care depends on the exchange of information between the members of the multidisciplinary team. This can be through verbal, written or electronic means in accordance with appropriate policies determined by the organisation. Clinical leaders should use techniques to better integrate and coordinate care for their patients (for example, team delivered care, multi-departmental patient care rounds, combined care planning forums, integrated patient records, case managers). The process for working together will be simple and informal when the patient's needs are not complex.

The patient, family and others are included in the decision process when appropriate.

The patient's record contains a history of all care provided by the multidisciplinary team and is made available to all relevant caregivers who are authorised to have access to its content.

	Criterion	Comments
		Recommendations
<b>Criterion 7.1.2.1</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	There is a regular schedule of ward rounds with medical personnel.	
<b>Criterion 7.1.2.2</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Information exchanged includes a summary of the care provided.	
<b>Criterion 7.1.2.3</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Information exchanged includes patient response to treatment.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.2 Facilities and Equipment

#### 7.2.1 Standard

***Adequate facilities are available for providing safe care to patients in the ward.***

**Standard Intent:** In order to provide safe patient care, each unit requires adequate resources. The physical facilities required include adequate office accommodation for the personnel, sluice rooms which are hygienically clean at all times, treatment and dressing rooms and adequate storage space for clean linen. Cleaning equipment is safely stored in a room or cupboard used expressly for this purpose. There are adequate toilet and bathing facilities for the number of patients in the ward.

There is adequate lighting and ventilation. Emergency call systems are available at bedsides and in bathrooms and toilets. The emergency call system is connected to the emergency power system.

Where there is no piped oxygen and vacuum supply, there are mobile oxygen cylinders and vacuum pumps. All the necessary fittings for oxygen and suction are in place and working satisfactorily. Each bed is serviced by at least one electrical socket outlet. Each ward is provided with a socket outlet that is connected to the emergency power supply.

Resuscitation equipment is immediately accessible from each section of the ward.

Where midwifery services are provided, each delivery room has:

- at least one cardio-tocograph machine
- an infant warming and resuscitation cart
- an incubator with adjustable temperature and separate oxygen supply
- a foetal monitor
- equipment for inhalation analgesia, and
- a suction machine.

	Criterion	Comments
		Recommendations
<b>Criterion 7.2.1.1</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Patient and staff accommodation in the service is adequate to meet patient care needs.	
<b>Criterion 7.2.1.2</b> Critical: '' Catg: Basic Management + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 4 Very Serious	Oxygen supplies (oxygen cylinders or air enrichers) meet the patient care needs.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

Republic of Botswana

## 7. Inpatient Care

<b>Criterion 7.2.1.3</b> Critical: '' Catg: Basic Management + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	Suction supplies meet the patient care needs.	
<b>Criterion 7.2.1.4</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Where there are no piped oxygen installations, there is a documented procedure for ensuring that cylinder pressures (i.e. contents) are constantly monitored while patients are receiving oxygen.	
<b>Criterion 7.2.1.5</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 2 Moderate	There is a dedicated area in the ward kitchen for preparing infant feeds, where applicable.	
<b>Criterion 7.2.1.6</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 2 Moderate	There is a separate room for the personnel to hand over between shifts, write reports, hold meetings, etc.	
<b>Criterion 7.2.1.7</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 2 Moderate	Separate sanitary facilities are provided for the personnel.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

<b>Criterion 7.2.1.8</b> Critical: .. Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	Separate ablution facilities are available in the ward for the patients.	
<b>Criterion 7.2.1.9</b> Critical: .. Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	There is a separate scullery/sluice room for patients' eliminations, waste and laundry.	

### 7.2.2 Standard

*Adequate resources are available for providing safe care to patients in the ward.*

	Criterion	Comments
		Recommendations
<b>Criterion 7.2.2.1</b> Critical: .. Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Bed devices (frames/cot-sides, cradles, bed blocks, etc) are available and functional.	
<b>Criterion 7.2.2.2</b> Critical: .. Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Bedside facilities (bedside table/locker, chair/bench) are available.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

Republic of Botswana

## 7. Inpatient Care

<b>Criterion 7.2.2.3</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	Each patient has access to a nurse call system at all times.	
<b>Criterion 7.2.2.4</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Each bed space is provided with adequate lighting.	
<b>Criterion 7.2.2.5</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Ward screens are available to ensure privacy.	
<b>Criterion 7.2.2.6</b> Critical: 0 Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	Resuscitation equipment is available in accordance with the policies of the organisation.	
<b>Criterion 7.2.2.7</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Equipment and materials are provided for the patients' personal hygiene.	





# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

Republic of Botswana

## 7. Inpatient Care

<b>Criterion 7.2.2.8</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Mattresses, bed linen, towels and pyjamas for patients are available and in good condition.	
<b>Criterion 7.2.2.9</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Equipment and materials for facilitating patients' mobility are available and in good condition.	
<b>Criterion 7.2.2.10</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	Equipment and materials for monitoring patients' vital signs are provided.	
<b>Criterion 7.2.2.11</b> Critical: '' Catg: Basic Management + Physical Struct <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	Equipment and materials for wound care and treating fractures are provided.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.3 Policies and Procedures

#### 7.3.1 Standard

*Policies and procedures/SOPs guide the care of patients and the provision of services.*

**Standard Intent:** Policies and procedures are important to help the personnel understand the facility's patients and services, and to respond in a thorough, competent and uniform manner. The clinical and managerial leaders take responsibility for identifying the needs of the patients and the services to be provided. They use a collaborative process to develop policies and procedures and to train the personnel in their implementation.

It is particularly important that the policies or procedures indicate:

- how planning will occur
- the documentation required for the care team to work effectively
- special consent considerations
- monitoring requirements
- special qualifications or skills of the personnel involved in the care process, and
- the availability and use of resuscitation equipment, including equipment for children.

Clinical guidelines are frequently helpful and may be incorporated in the process. Monitoring provides the information needed to ensure that the policies and procedures are adequately implemented and followed for all relevant patients and services.

Policies and procedures should focus on high risk patients and procedures, e.g.

- the care of emergency patients
- the handling, use and administration of blood and blood products
- the management of contaminated blood supplies (expired, opened or damaged containers)
- the care of patients with communicable and non-communicable diseases
- the care of immuno-suppressed patients
- the use of restraint and the care of patients in restraint
- the care of frail, dependent elderly patients
- the care of young, dependent children, and
- the security of newborn babies.

	Criterion	Comments
		Recommendations
<b>Criterion 7.3.1.1</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Policies and procedures for nursing care are available and are followed as indicated in the statement of intent above.	
<b>Criterion 7.3.1.2</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Nurses use performance checklists/protocols/guidelines for complex skills, e.g. intravenous infusions,	



Republic of Botswana

# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

<b>Criterion 7.3.1.3</b>	The personnel are trained and use the policies and procedures to guide care.	
Critical: ..		
Catg: Basic Process + Patient Care		
<b>Compliance</b>		
NA    NC    PC    C		
Default Severity for NC or PC = 3 Serious		

### 7.3.2 Standard

***Clinical practice guidelines are used to guide patient care and reduce unwanted variation.***

**Standard Intent:** Practice guidelines provide a means to improve quality and assist practitioners and patients in making clinical decisions. Guidelines are found in the literature under many names, including practice parameters, practice guidelines, patient care protocols and standards of practice. Regardless of the source, the scientific basis of guidelines should be reviewed and approved by the organisation's leaders and clinical practitioners before implementation. This ensures that the guidelines meet the criteria established by the leaders and are adapted to the community, patient needs and the resources of the organisation. Once implemented, guidelines are reviewed on a regular basis to ensure their continued relevance.

	Criterion	Comments
		Recommendations
<b>Criterion 7.3.2.1</b>	Clinical practice guidelines relevant to the patients and services of the organisation are used to guide patient care processes.	
Critical: ..		
Catg: Basic Management + Patient Care		
<b>Compliance</b>		
NA    NC    PC    C		
Default Severity for NC or PC = 3 Serious		
<b>Criterion 7.3.2.2</b>	Guidelines are used in clinical monitoring as part of a structured clinical audit.	
Critical: ..		
Catg: Basic Process + Patient Care		
<b>Compliance</b>		
NA    NC    PC    C		
Default Severity for NC or PC = 3 Serious		



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

Republic of Botswana

## 7. Inpatient Care

<b>Criterion 7.3.2.3</b>	Guidelines are reviewed and adapted on a regular basis after implementation.	
Critical: ..		
Catg: Evaluation + Patient Care		
<b>Compliance</b>		
NA    NC    PC    C		
Default Severity for NC or PC = 3 Serious		



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.4 Patient Care

#### 7.4.1 Standard

*The patient needs identified in the care plan are addressed.*

**Standard Intent:** A single, integrated plan is preferable to the entry of a separate care plan by each provider.

Collaborative care and treatment team meetings or similar patient discussions are recorded.

Individuals qualified to do so order diagnostic and other procedures. These orders must be easily accessible if they are to be acted on in a timely manner. Locating orders on a common sheet or in a uniform location in patient records facilitates the correct understanding and execution of orders.

An organisation decides:

- which orders must be written rather than verbal
- who is permitted to write orders, and
- where orders are to be located in the patient record.

The method used must respect the confidentiality of patient care information.

When guidelines and other related tools are available and relevant to the patient population and mission of the organisation, there is a process for evaluating and adapting them to the needs and resources of the organisation, and for training the personnel to use them.

Patients and their families or decision-makers receive adequate information to participate in care decisions. Patients and families are informed as to what tests, procedures and treatments require consent and how they can give consent, e.g. verbally, by signing a consent form or through some other mechanism. Patients and families understand who may, in addition to the patient, give consent. Designated staff members are trained to inform patients and to obtain and document patient consent. These staff members clearly explain any proposed treatments or procedures to the patient and, when appropriate, the family. Informed consent includes:

- an explanation of the risks and benefits of the planned procedure
- In addition, when blood or blood products may be needed, information on the risks and alternatives is discussed.

The organisation lists all those procedures that require informed written consent. Leaders document the processes for obtaining informed consent. The consent process always concludes with the patient signing the consent form, or the documentation of the patient's verbal consent in the patient's record by the individual who provided the information for consent. Documentation includes the statement that the patient acknowledged full understanding of the information. The patient's surgeon or other qualified individual provides the necessary information and the name of this person appears on the consent form.

	Criterion	Comments
		Recommendations
<b>Criterion 7.4.1.1</b>	The initial assessment results in the identification of the patient's medical, nursing or other healthcare needs.	
Critical: ..		
Catg: Basic Process + Patient Care		
<b>Compliance</b>		
<b>NA NC PC C</b>		
Default Severity for NC or PC = 3 Serious		



Republic of Botswana

# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

<b>Criterion 7.4.1.2</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	There is documented evidence that patients' vital signs are monitored, registered and interpreted according to a regular daily schedule.	
<b>Criterion 7.4.1.3</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Procedures for the elimination of patients' secretions are implemented.	
<b>Criterion 7.4.1.4</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Wound care procedures/guidelines/standard operating procedures (SOP) are available and are followed.	
<b>Criterion 7.4.1.5</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Wound dressings are inspected daily and where indicated the wound is inspected.	
<b>Criterion 7.4.1.6</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	When indicated, the dressing is changed.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

Republic of Botswana

## 7. Inpatient Care

<b>Criterion 7.4.1.7</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Measures are in place to prevent immobility and prevent the complications of immobility.	
<b>Criterion 7.4.1.8</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	There is evidence that the patient is encouraged to become active and to use aid appliances, where necessary, to stimulate the rehabilitation process.	
<b>Criterion 7.4.1.9</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	There is evidence that the patient, when confined to bed or immobile, receives assistance with lifting, moving, positioning, turning in bed and transferring from and back to bed.	
<b>Criterion 7.4.1.10</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	There is evidence that pressure relieving techniques (care of skin, turning in bed on schedule, observing and preventing potential bedsores) are implemented and documented.	
<b>Criterion 7.4.1.11</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Patients receive professional physiotherapy care and assistance with rehabilitation if required.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.4.2 Standard

*Compassionate care is provided to patients in pain and to the dying.*

**Standard Intent:** While pain may be a part of the patient experience, unrelieved pain has adverse physical and psychological effects. The patient's right to appropriate assessment and management of pain is respected and supported. The organisation has processes for:

- identifying patients with pain during initial assessment and reassessment
- communicating with and providing education for patients and families about pain management in the context of their personal, cultural and religious beliefs, and
- educating healthcare providers in pain assessment and management.

Dying patients have unique needs for respectful, compassionate care. Concern for the patient's comfort and dignity guides all aspects of care during the final stages of life. To accomplish this, all the personnel are made aware of the unique needs of patients at the end of life. These needs include treatment of primary and secondary symptoms, pain management, responding to the concerns of the patient and family and involving them in care decisions.

	Criterion	Comments
		Recommendations
<b>Criterion 7.4.2.1</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	The organisation implements processes for addressing the patient's needs for appropriate assessment and management of pain.	
<b>Criterion 7.4.2.2</b> Critical: '' Catg: Basic Management + Efficiency <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	The organisation educates health professionals in assessing and managing pain.	
<b>Criterion 7.4.2.3</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Policies and procedures regarding the care of dying and deceased patients are implemented.	





# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.5 Surgical Services

#### 7.5.1 Standard

*Based on the results of the assessment, each patient's surgical care is planned and documented.*

	Criterion	Comments
		Recommendations
<b>Criterion 7.5.1.1</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Medical assessments are carried out and documented before patients go to surgery.	
<b>Criterion 7.5.1.2</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	The results of surgical patients' diagnostic tests are recorded before surgery.	
<b>Criterion 7.5.1.3</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 4 Very Serious	Surgical patients' preoperative diagnoses are recorded before surgery.	
<b>Criterion 7.5.1.4</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 4 Very Serious	The anaesthetic assessment identifies any drug sensitivities.	



Republic of Botswana

# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

<b>Criterion 7.5.1.5</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	An intra-operative report and a post-operative diagnosis are documented.	
<b>Criterion 7.5.1.6</b> Critical: '' Catg: Basic Process + Legality <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	The names of the surgeon and other personnel as required by law are documented.	
<b>Criterion 7.5.1.7</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	The patient's clinical status is monitored during the immediate post-surgery period.	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.6 Patient and Family Education

#### 7.6.1 Standard

*Each patient's educational needs are assessed and written in his or her record.*

**Standard Intent:** Learning occurs when attention is paid to the methods used to educate patients and families. The organisation selects appropriate educational methods and people to provide the education.

Staff collaboration helps to ensure that the information patients and families receive is comprehensive, consistent and as effective as possible.

Education is focused on the specific knowledge and skills that the patient and his or her family will need to make decisions about care, participate in care and continue care at home.

Variables like educational literacy, beliefs and limitations are taken into account.

Each organisation decides the placement and format for educational assessment, planning and delivery of information in the patient's record.

Education is provided to support care decisions of patients and families. In addition, when a patient or family directly participates in providing care, for example changing dressings, feeding and administering medication, they need to be educated.

It is sometimes important that patients and families are made aware of any financial implications associated with care choices, such as choosing to remain an inpatient rather than being an outpatient.

Education in areas that carry high risk to patients is routinely provided by the organisation, for instance instruction in the safe and effective use of medications and medical equipment.

Community organisations that support health promotion and disease prevention education are identified and, when possible, ongoing relationships are established.

	Criterion	Comments
<b>Criterion 7.6.1.1</b> Critical: .. Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Patients and families learn about participation in the care process.	<b>Recommendations</b>
<b>Criterion 7.6.1.2</b> Critical: .. Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	Patients and families learn about any financial implications of care decisions.	



Republic of Botswana

# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

<b>Criterion 7.6.1.3</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Patients are educated about relevant high health risks, e.g. the safe use of medication and medical equipment, or medicine and food interactions.	
<b>Criterion 7.6.1.4</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	The patient and family are taught in a language and format that they can understand.	
<b>Criterion 7.6.1.5</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 3 Serious	Information given to the patient and family is noted in the patient's record.	
<b>Criterion 7.6.1.6</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA NC PC C Default Severity for NC or PC = 4 Very Serious	There is evidence in the patient health record that he or she gave informed consent	



# BOTSWANA NATIONAL HEALTH QUALITY STANDARDS FOR CLINICS

## 7. Inpatient Care

### 7.7 Discharge Process

#### 7.7.1 Standard

*There is an organised process for appropriately discharging patients.*

**Standard Intent:** The organisation begins to plan for the patients' continuing needs as early in the care process as possible. Instructions for discharge and follow-up visits must be clear and provided in writing.

	Criterion	Comments
		Recommendations
<b>Criterion 7.7.1.1</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	There is a documented process for appropriately discharging patients.	
<b>Criterion 7.7.1.2</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	The organisation works with the family, healthcare practitioners and agencies outside the organisation to ensure timely and appropriate discharge.	
<b>Criterion 7.7.1.3</b> Critical: '' Catg: Basic Process + Patient Care <b>Compliance</b> NA    NC    PC    C Default Severity for NC or PC = 3 Serious	The medical practitioner gives patients (and their families when appropriate) understandable follow-up instructions in the discharge note at referral or discharge.	