

17. Theatre and Anaesthetic Services

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.

| 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 docume | ent: |
| Post and position held: | |
| Date of survey: | |
| 3. EXTERNAL SURVEY INFORMATION: | |
| Name of external surveyor: | |
| Date of external survey: | |
| GUIDE TO COMP | PLETION 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 criterio (Partially compliant), C (Compliant). | on, e.g. NA (Not applicable), NC (Non-compliant), PC |
| The default category affected is designated on the 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 | |
| | Documents Checked Surveyor: Surveyor: |

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17.1 Coordination of Patient Care

17.1.1 Standard

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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.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.1.1.1 | The individuals responsible | |
| Critical: | for the patient's care are designated. | |
| Catg: Basic Management + Efficiency | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.1.1.2 | The individuals responsible | |
| Critical: | for the patient's care are qualified. | |
| Catg: Basic Management + Legality | 1 . | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.1.1.3 | The individuals responsible | |
| Critical: | for the patient's care are identified and made known to | |
| Catg: Basic Management + Efficiency | the patient and other personnel. | |
| Compliance | ľ | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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17.1.2 Standard

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The operating theatre and anaesthetic services are managed and staffed to provide a safe and effective service.

Standard Intent: Theatre management personnel work with organisation leaders to ensure adequate and suitable management processes and staffing of the theatre, anaesthetic service and recovery room.

The qualifications of those persons who administer anaesthesia in the hospital are documented in accordance with current professional society standards. There may not be a formally constituted committee, but the function must be performed at some level, for example, in the private sector there are clinical forums where medical practitioners meet with management. These forums include representatives of the theatre nursing staff.

Privileges assigned to individuals may not be documented, but the organisation places restrictions on who may administer anaesthetics. In the private sector, privileging is implied by the fact that anaesthetists are allowed to provide services in an organisation only once their credentials have been checked.

The patient has the right not to be subjected to prolonged anaesthesia for the surgeon's convenience.

| | Criterion | Comments |
|--|--|-----------------|
| | | Recommendations |
| Criterion 17.1.2.1 | There is a Theatre Users' Committee or equivalent, | |
| Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious | which meets regularly and consists of representatives of, for example, the surgical staff, the anaesthetic staff, the nursing staff and organisational management. | |
| Criterion 17.1.2.2 Critical: Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | A senior professional who is suitably qualified and experienced is in charge of the theatre and the recovery area. | |
| Criterion 17.1.2.3 Critical: Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | Operating theatre rosters ensure that registered nurses with suitable qualifications and experience are present during all shifts for theatre duties, anaesthetic assistance and for recovery room duties. | |

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| Criterion 17.1.2.4 Critical: Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4 | Anaesthesia is administered only by a qualified anaesthesiologist or qualified nurse anaesthetist. | |
|--|--|--|
| Very Serious | | |
| Criterion 17.1.2.5 | Trainee anaesthetists are | |
| Critical: | under the supervision of trained anaesthesiologists. | |
| Catg: Basic Management + Efficiency | inamed andestriesiologists. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.1.2.6 | The person administering | |
| Critical: | anaesthesia is directly responsible for only one | |
| Catg: Basic Management + Efficiency | anaesthetic at a time. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.1.2.7 | Anaesthesia is commenced | |
| Critical: | and terminated only in the | |
| Catg: Basic Management + Efficiency | presence of a member of the staff whose sole duty it is to assist the person | |
| Compliance | administering anaesthesia | |
| NA NC PC C | until such time as the latter indicates that assistance is no | |
| Default Severity for NC or PC = 4 Very Serious | longer required. | |
| Criterion 17.1.2.8 | The surgeon performing the | |
| Critical: | procedure(s) is available before the anaesthetist | |
| Catg: Basic Management + Efficiency | commences administering the anaesthetic. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.1.2.9 Critical: Catg: Basic Management + Efficiency | There is at least one suitably trained and experienced anaesthetic nurse per operating theatre. | |
|--|--|--|
| Compliance NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.1.2.10 Critical: | Nursing personnel who are trained in recovery room care are available until the patient has fully recovered. | |
| Catg: Basic Management + Efficiency Compliance | lias fully recovered. | |
| NA NC PC C Default Severity for NC or PC = 4 Very Serious | | |

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17.2 Facilities, Equipment, Supplies and Medication

17.2.1 Standard

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Facilities for safe surgical and anaesthetic care are provided and maintained.

Standard Intent: The design of the operating theatre provides space for the reception, anaesthesia, surgery, recovery and observation of patients.

There are areas for the disposal and collection of used equipment and health waste, including contaminated waste and sharps. Safe and adequate storage space for pharmaceutical and surgical supplies is available, including separate lockable cupboards for schedule 1 (Habit Forming Drugs) substances and other scheduled medicines and for inflammables, according to country-specific regulations.

Theatre personnel are provided with office facilities or a day station, a restroom, washrooms, toilets, changing facilities and a separate space for their personal clothing and theatre clothing.

There are facilities for scrubbing-up procedures in each theatre, with hot and cold running water and elbow-operated taps. There is an anaesthetist's chair, an operating table with Trendelenburg position control, at least one lateral padded straight arm support and an infusion pole. Equipment for patients awaiting surgery includes blood pressure monitoring equipment, vacuum points with ancillary fittings and oxygen points with flowmeters and all ancillary fittings. Space and facilities are available for setting up surgical trays and for autoclaving instruments.

| | Criterion | Comments |
|--|---|-----------------|
| | | Recommendations |
| Criterion 17.2.1.1 | The design of the operating | |
| Critical: | theatre complex provides space for the reception, | |
| Catg: Basic Management + Physical Struct | anaesthesia, surgery, recovery and observation of | |
| Compliance | patients. | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.2.1.2 | There is direct access to the | |
| Critical: | operating theatres from the receiving, scrubbing-up and | |
| Catg: Basic Management + Physical Struct | recovery areas. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |

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|--|--|--|
| Criterion 17.2.1.3 | The accommodation for | |
| Critical: | patients awaiting surgery is suitably equipped. | |
| Catg: Basic Management + Physical Struct | journally equipped: | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.2.1.4 | There is safe and adequate | |
| Critical: | storage space for pharmaceutical and surgical | |
| Catg: Basic Management + Physical Struct | supplies. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.2.1.5 | Access to the theatre suites is | |
| Critical: | controlled. | |
| Catg: Basic Management + Physical Struct | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.2.1.6 | There is access to | |
| Critical: | sterilisation and disinfection facilities. | |
| Catg: Basic Management + Physical Struct | raciilles. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.2.1.7 | There is a system for | |
| Critical: | controlling the environmental | |
| Catg: Basic Management + Physical Struct | temperature and humidity that ensures safe limits for anaesthetised patients | |
| Compliance | (temperature between 22 and | |
| NA NC PC C | 25 degrees Celcius and relative humidity between | |
| Default Severity for NC or PC = 3 Serious | 40% and 70%). | |

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| Criterion 17.2.1.8 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | Where resuscitation, intensive care, life support or critical monitoring equipment without built-in battery backup units is used, there is an uninterruptible power supply (UPS) which complies with relevant requirements and is regularly serviced and tested. | |
|---|--|--|
| Criterion 17.2.1.9 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | There is either an UPS or a battery backup system for the theatre lamp which is regularly tested, with such tests being fully documented. | |
| Criterion 17.2.1.10 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The theatre has a lockable refrigerator for medications, the temperature of which is measured and recorded daily. | |

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17.2.2 Standard

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Anaesthetic equipment, supplies and medications used comply with the recommendations of anaesthetic professional organisations or alternate authoritative sources.

Standard Intent: Anaesthetic risks are significantly reduced when appropriate and well-functioning equipment is used to administer anaesthesia and monitor the patient. Adequate supplies and medications are also available for planned use and emergency situations. Each organisation understands the required or recommended equipment, supplies and medications needed to provide anaesthetic services to its patient population. Recommendations on equipment, supplies and medications can come from a government agency, national or international anaesthetic professional organisations or other authoritative sources. There is an equipment maintenance programme.

| | Criterion | Comments Recommendations |
|---|--|--------------------------|
| Criterion 17.2.2.1 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The recommendations of anaesthetic professional organisations or alternate authoritative sources guide the provision and use of anaesthetic mixture components. | |
| Criterion 17.2.2.2 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The recommendations of anaesthetic professional organisations or alternate authoritative sources guide the provision and use of breathing circuits. | |
| Criterion 17.2.2.3 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The recommendations of anaesthetic professional organisations or alternate authoritative sources guide the use of scavenging equipment for removing vapours and anaesthetic gases. | |

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| Criterion 17.2.2.4 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The recommendations of anaesthetic professional organisations or alternate authoritative sources guide the provision and use of monitoring equipment. | |
|--|---|--|
| Criterion 17.2.2.5 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The recommendations of anaesthetic professional organisations or alternate authoritative sources guide the provision and use of ancillary equipment. | |
| Criterion 17.2.2.6 Critical: Catg: Basic Management + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 3 Serious | Recommended medications are used. | |
| Criterion 17.2.2.7 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 3 Serious | A medication trolley is available for the exclusive use of the anaesthesiologist in each theatre. | |
| Criterion 17.2.2.8 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | A tracheotomy tray is available. | |

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| Criterion 17.2.2.9 | Theatre personnel ensure | |
|--|--|--|
| Critical: | that all equipment is included in the organisation's | |
| Catg: Basic Management + Physical Struct | equipment replacement and maintenance programme. | |
| Compliance | maintenance programme. | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |

17.2.3 Standard

Emergency and protective equipment are provided in the operating theatre.

Standard Intent: Theatre staff must prepare for any emergencies through the provision of emergency and protective equipment.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.2.3.1 | Emergency resuscitation | |
| Critical: O | equipment is available and functional. | |
| Catg: Basic Management + Physical Struct | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.2.3.2 | Emergency resuscitation | |
| Critical: | equipment shows evidence of regular checking. | |
| Catg: Basic Process + Efficiency | Togular officiality. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.2.3.3 | There is a mechanism for | |
| Critical: | summoning assistance in an emergency. | |
| Catg: Basic Management + Physical Struct | omorgonoy. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.2.3.4 | There is appropriate shielding | |
|---|---|--|
| Critical: | and protective clothing in the presence of biohazards (including lasers) or radiographic equipment. | |
| Catg: Basic Management + Physical Struct | | |
| Compliance | 3 4 3 4 1 | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.2.3.5 | Emergency and resuscitation | |
| Critical: | equipment and supplies have clearly defined instructions for | |
| Catg: Basic Management + Physical Struct | use. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.2.3.6 | Hazard or warning notices | |
| Critical: | are displayed. | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

17.2.4 Standard

Recovery room facilities and equipment are available to provide safe and effective care.

Standard Intent: The number of beds/trolley spaces in the recovery room provides sufficient space for at least one patient from each operating theatre that it services and is sufficient for peak loads. The provision, use and maintenance of recovery room equipment comply with the guidelines for practice of the professional society.

| | Criterion | Comments |
|--|------------------------------|-----------------|
| | | Recommendations |
| Criterion 17.2.4.1 | The recovery area forms part | |
| Critical: | of the operating suite. | |
| Catg: Basic Management + Physical Struct | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |

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| Criterion 17.2.4.2 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 3 | There is an adequate number of recovery beds for the patients from the operating theatre. | |
|---|---|--|
| Serious | | |
| Criterion 17.2.4.3 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | There is adequate lighting. | |
| Criterion 17.2.4.4 Critical: Catg: Basic Management + Physical Struct Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The provision, use and maintenance of recovery room equipment comply with the guidelines for practice of the relevant professional society. | |

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17.3 Clinical Practice Guidelines

17.3.1 Standard

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

Standard Intent: Clinical practice guidelines provide a means for improving quality and they 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, standards of practice and/or care pathways. Regardless of the source, the scientific basis of guidelines should be reviewed and approved by organisational leaders and clinical practitioners before implementation. Consideration should be given to providing guidelines for high risk, high volume and high cost conditions as these will form the basis for structured clinical audits.

This ensures that they meet the criteria established by the leaders and are adapted to the community, patient needs and organisational resources. Once implemented, guidelines are reviewed on a regular basis to ensure their continued relevance.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.3.1.1 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | Clinical practice guidelines relevant to the patients and services of the organisation are available to guide patient care processes. | |
| Criterion 17.3.1.2 Critical: Catg: Evaluation + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The implementation of guidelines is monitored as part of a structured clinical audit. | |
| Criterion 17.3.1.3 Critical: Catg: Evaluation + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious | Guidelines are reviewed and adapted on a regular basis. | |

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17.4 Policies and Procedures

17.4.1 Standard

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Policies and procedures relating to the activities in the operating theatre are developed and implemented.

Standard Intent: Policies and procedures are necessary to guide the administration of the operating theatre and anaesthetic services to ensure the smooth operation of those services and to ensure that the personnel act swiftly and in a coordinated manner in an emergency. Those policies and procedures are made available to all theatre, recovery room and anaesthetic personnel and are known and implemented. Biohazards, which need to be monitored and notified, include radiation, laser and electrical hazards. Policies and procedures are available to ensure that informed consent is documented and the patient is correctly identified; they also make sure that the nature of surgery and the site are correctly documented. Processes during the surgery such as the use of instruments and counting procedures are documented to ensure coordination and safety.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.4.1.1 | Written policies and | |
| Critical: | procedures that guide the activities of the theatre and | |
| Catg: Basic Management + Patient Care | anaesthetic services are implemented. | |
| Compliance | · | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.4.1.2 | Policies and procedures that | |
| Critical: | relate to the duties of the theatre and recovery room | |
| Catg: Basic Management + Patient Care | nurses are implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.4.1.3 | Policies and procedures that | |
| Critical: D | relate to the preparation of | |
| Catg: Basic Management + Patient Care | patients for surgery are implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Critical: | Criterion 17.4.1.4 Critical: | | | Policies and procedures that relate to theatre cleaning are implemented. | |
|----------------------------|---------------------------------------|---------|--|--|--|
| Catg: Basic | c Manag | ement + | ⊦ Patient | | |
| | Compli | ance | | | |
| NA | NC | РС | С | | |
| Default Sev Serious | verity for | NC or F | PC = 3 | | |
| Criterion 1 | 7.4.1.5 | | | Policies and procedures that | |
| Critical: | | | | relate to the notification of biohazards are implemented. | |
| Catg: Basic | c Manag | ement + | ⊦ Patient | | |
| | Compli | ance | | | |
| NA NA | NC | PC | С | | |
| Default Sev Very Serior | verity for us | NC or F | PC = 4 | | |
| Criterion 1 | 7.4.1.6 | | | Policies and procedures that | |
| Critical: | | | relate to medications identified for special control | | |
| Catg: Basic | Catg: Basic Management + Patient Care | | Patient | by law or organisational policy are implemented. | |
| | Compli | ance | | . , . | |
| NA NA | NC | РС | С | | |
| Default Sev Very Serior | | NC or F | PC = 4 | | |
| Criterion 1 | 17.4.1.7 | | | Policies and procedures that | |
| Critical: | | | | relate to patient positioning are implemented. | |
| Cota: Book | | | | are implemented. | |
| Care Care | c Manag | ement + | Patient | | |
| | c Manag Compli | | Patient | | |
| | | | Patient | | |

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17.4.2 Standard

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Policies and procedures are developed relating to the preparation of patients for surgery.

Standard Intent: Policies and procedures are available to ensure that informed consent is documented and the patient is correctly identified; they also make sure that the nature of surgery and the site are correctly documented. Processes during the surgery such as the use of instruments and counting procedures are documented to ensure coordination and safety.

| | Criterion | Comments |
|---|--|-----------------|
| | | Recommendations |
| Criterion 17.4.2.1 | Policies and procedures | |
| Critical: | relating to the scheduling of patients for listed and | |
| Catg: Basic Management + Patient Care | emergency surgical procedures are implemented. | |
| Compliance | , | |
| NA NC PC C | | |
| Default Severity for NC or PC = 3 Serious | | |
| Criterion 17.4.2.2 | Policies and procedures | |
| Critical: | relating to the patient identification are | |
| Catg: Basic Management + Patient Care | implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.2.3 | Policies and procedures | |
| Critical: D | relating to the verification of the nature and site of the | |
| Catg: Basic Management + Patient Care | operation are implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.2.4 | Policies and procedures | |
| Critical: | relating to the verification of the last oral intake are | |
| Catg: Basic Management + Patient Care | implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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|---|--|---|
| Criterion 17.4.2.5 | Policies and procedures | |
| Critical: | relating to the checking of consent documents are | |
| Catg: Basic Management + Patient Care | implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.2.6 | Policies and procedures | |
| Critical: | relating to specifying the instruments required for | |
| Catg: Basic Management + Patient Care | specific operations are implemented. | |
| Compliance | · | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.2.7 | Policies and procedures | |
| Critical: | relating to aseptic techniques are implemented. | |
| Catg: Basic Management + Patient Care | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.2.8 | Policies and procedures | |
| Critical: | relating to intra-operative recording required are | |
| Catg: Basic Management + Patient Care | implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.2.9 | Policies and procedures | |
| Critical: | relating to the recording of tissue(s) and specimen(s) | |
| Catg: Basic Management + Patient Care | collected are implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.4.2.10 | Policies and procedures | |
|--|--|---|
| Critical: | relating to the counting procedures for swabs, | |
| Catg: Basic Management + Pa | 1: | 1 |
| Compliance | the event of incorrect counts are implemented. | |
| NA NC PC C | | |
| Default Severity for NC or PC = Very Serious | 4 | |

17.4.3 Standard

Policies and procedures are developed relating to the anaesthetic service.

Standard Intent: Guidelines of professional societies and associations are available and followed whenever anaesthesia is administered. Implementing these guidelines is particularly important with regard to the qualifications, training and experience needed by personnel in the service. This includes the nurses who assist the anaesthetist and who monitor the recovery of patients. Implementing these guidelines is also particularly important with regard to the provision, maintenance and use of medical equipment and drugs.

Controlling bodies also develop guidelines and regulations relating to professional practice.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.4.3.1 | Policies and procedures relating to the required | |
| Catg: Basic Management + Efficiency | qualifications of persons who administer anaesthetics and of persons who assist the | |
| Compliance | anaesthetist are implemented. | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.3.2 | Policies and procedures | |
| Critical: | relating to the pre-operative assessment and pre- | |
| Catg: Basic Management + Patient Care | medication are implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.3.3 | Policies and procedures | |
| Critical: | relating to the administration of anaesthesia are | |
| Catg: Basic Management + Patient Care | implemented. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.4.3.4 Critical: Catg: Basic Management + Patient Care | Policies and procedures relating to assessing the fitness of patients to leave the recovery area are | |
|--|--|--|
| Compliance NA NC PC C | implemented. | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.4.3.5 Critical: Catg: Basic Management + Efficiency | Policies and procedures comply with current guidelines of relevant professional bodies. | |
| Compliance NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

17.4.4 Standard

Policies and procedures guide the care of patients undergoing moderate and deep sedation.

Standard Intent: Sedation, in particular moderate and deep sedation, poses risks to patients and thus needs to be provided using clear definitions, policies and procedures. The degrees of sedation occur on a continuum, and a patient may progress from one degree to another based on the medications administered, route and dosages. Important considerations include the patient's ability to maintain protective reflexes, an independent, continuous patent airway, and to respond to physical stimulation or verbal commands.

Sedation policies and procedures indicate:

- a) how planning will occur and will include the identification of differences between adult and paediatric populations, or other special considerations
- b) documentation required for the care team to work and communicate effectively
- special content considerations, if appropriate
- patient monitoring requirements
- special qualifications or skills of staff involved in sedation processes
- the availability and use of specialised equipment.

| | Criterion | Comments |
|---|--|-----------------|
| | | Recommendations |
| Criterion 17.4.4.1 | Policies and procedures that | |
| Critical: | address at least elements a) to f) of the intent statement | |
| Catg: Basic Management + Patien Care | 1 ' | |
| Compliance | deep sedation are implemented. | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.4.4.2 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | There is a pre-sedation assessment, according to organisation policy, to evaluate risk and appropriateness of the sedation for the patient. | |
|---|---|--|
| Criterion 17.4.4.3 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | A qualified individual monitors the patient during sedation and during the period of recovery from sedation and documents the monitoring. | |
| Criterion 17.4.4.4 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | Moderate and deep sedation are administered according to organisation policy. | |

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17.5 Anaesthetic Care

17.5.1 Standard

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A pre-anaesthetic assessment is conducted and recorded.

Standard Intent: Because anaesthesia carries a high level of risk, its administration is carefully planned. The patient's pre-anaesthetic assessment is the basis for that plan and for the use of post-operative analgesia. The pre-anaesthetic assessment provides information needed to:

- select the type of anaesthesia to be administered and plan anaesthetic care
- identify any drug sensitivities
- safely administer the appropriate anaesthetic, and
- interpret the findings of patient monitoring.

An anaesthesiologist or other qualified individual conducts the pre-anaesthetic assessment.

Anaesthetic care is carefully planned and documented in the anaesthetic record. The plan considers information from other patient assessments and identifies the anaesthetic to be used, the method of administration, other medications and fluids, monitoring procedures and anticipated post-anaesthetic care.

The anaesthetic planning process includes education of the patient and his or her family or decision-maker regarding the risks, potential complications and options related to the planned anaesthesia and post-operative analgesia. This discussion occurs as part of the process of obtaining consent for anaesthesia. The anaesthesiologist or the qualified individual who will administer the anaesthetic provides this education.

| | Criterion | Comments |
|--|--|-----------------|
| | | Recommendations |
| Criterion 17.5.1.1 | Patients have an anaesthetic assessment performed before | |
| Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 | the administration of anaesthesia. | |
| Very Serious | | |
| Criterion 17.5.1.2 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The medical assessment of surgical patients is documented before the start of the anaesthesia. | |
| Criterion 17.5.1.3 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The patient, family and decision-makers are educated regarding the risks, potential complications of and options related to the anaesthesia. | |

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| Criterion 17.5 | .1.4 | | The anaesthesiologist or | |
|----------------------------|-------------|------------|---|--|
| Critical: | | | other qualified individual provides that education. | |
| Catg: Basic Pro | ocess + Pa | tient Care | provides that eddedien. | |
| Co | mpliance | | | |
| NA N | C PC | С | | |
| Default Severit Serious | y for NC or | PC = 3 | | |

17.5.2 Standard

Each patient's physiological status is monitored and recorded during anaesthesia and surgery.

Standard Intent: The anaesthetist monitors and records the physiological status of the patient during anaesthesia and enters the drugs and intravenous fluids used, and the anaesthetic, in the patient's anaesthetic record.

The anaesthetist has access to the patient care notes and is familiarised with the findings of the medical examination. It is important that each health professional has access to the records of other care providers, in accordance with organisational policy.

All the criteria related to this standard will be assessed by undertaking an audit of randomly selected records of patients who have undergone surgical procedures.

If copies of the intra-operative records are not available in the patient records, it must be established if they are kept elsewhere, e.g. by the anaesthetists.

Wherever the records are kept, documented evidence will be sought and the criteria marked according to findings.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.5.2.1 | The patient's physiological | |
| Critical: | status is continuously monitored during the | |
| Catg: Basic Process + Patient Care | anaesthesia and surgery. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.5.2.2 | The results of such | |
| Critical: D | monitoring are entered into the patient's record. | |
| Catg: Basic Process + Patient Care | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.5.2.3 | The anaesthetic used is | |
|---|--|--|
| Critical: | entered into the patient's anaesthetic record. | |
| Catg: Basic Process + Patient Cal | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

17.5.3 Standard

There is a system to monitor and document each patient's post-anaesthetic status and to discharge the patient from the recovery area according to accepted

Standard Intent: Physiological monitoring provides reliable information about the patient's status during the administration of anaesthesia and the recovery period. Monitoring methods depend on the patient's pre-anaesthetic status, anaesthetic choice and the complexity of the surgical or other procedures performed during anaesthesia. In all cases, however, the monitoring process is continuous and the results are entered into the patient's record.

Monitoring during anaesthesia provides the basis for monitoring during the post-anaesthetic recovery period. The ongoing, systematic collection and analysis of data on the patient's status in recovery may support decisions about moving the patient to other settings and less intensive services. Only a suitably qualified and experienced registered nurse or a designated member of the medical staff may carry out monitoring in the recovery area. Recording of monitoring data provides the documentation to support discharge decisions.

Patients are discharged from the post-anaesthesia recovery area in the following ways: a) The patient is discharged by a fully qualified anaesthetist or other individual authorised

- by the individual(s) responsible for managing the anaesthetic service
- b) The patient is discharged by a nurse or similarly qualified individual in accordance with post-anaesthesia criteria developed by the organisation's leaders and the discharge is documented in the patient's record
- The patient is discharged to a unit which has been designated as appropriate for postanaesthesia or post-sedation care of selected patients, such as an intensive care unit.

The time of arrival in and discharge from the recovery area are recorded. Signatures of those who hand over and those who receive the patient are recorded.

| | Criterion | Comments |
|---|--|-----------------|
| | | Recommendations |
| Criterion 17.5.3.1 | The anaesthetist is | |
| Critical: | responsible for supervising the recovery period. | |
| Catg: Basic Process + Patient Care | and receivery period. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.5.3.2 Critical: Catg: Basic Process + Patient Care Compliance | Monitoring is appropriate to the patient's condition during the post-anaesthetic recovery period. | |
|---|--|--|
| NA NC PC C Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.5.3.3 Critical: Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious | The qualifications and experience of staff members who may monitor patients are documented. | |
| Criterion 17.5.3.4 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | Monitoring findings are entered into the patient's record. | |
| Criterion 17.5.3.5 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | Established criteria are used to make decisions to discharge patients from the recovery room. | |
| Criterion 17.5.3.6 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious | The individual responsible for discharging the patient according to items a) and b) in the intent statement signs the discharge in the patient record. | |

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| Criterion 17.5.3.7 | Recovery area arrival and discharge times are recorded. | |
|---|---|--|
| Catg: Basic Process + Patient Care Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.5.3.8 | Signatures of those handing | |
| Critical: | over and of those receiving the patient are recorded. | |
| Catg: Basic Process + Patient Care | • | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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17.6 Quality improvement

17.6.1 Standard

A formalised proactive quality improvement approach is maintained in the theatre and anaesthetic services.

Standard Intent: This refers to the implementation of organisational quality improvement processes (Service Element 8).

It is the responsibility of the management of the organisation to ensure that standards are set throughout the organisation. Within each department or service, it is the responsibility of managers to ensure that standards are set for the particular department. This requires coordination with the organisation's central/management/coordinating quality management structures or systems. Departmental managers use available data and information to identify priority areas for quality monitoring and improvement.

Quality monitoring could include items from the WHO Surgical Safety Checklist (www.safesurg.org) such as:

- a) surgical site infection
- b) unplanned return to the operating theatre
- c) surgical deaths
- d) case length
- e) length of the operating day
- f) the number of times blood was not available.

The following will be evaluated:

- problems identified in this service for which quality improvement activities were initiated
- the processes put in place to resolve the problems
- identification of indicators to measure improvement
- the tool(s) used to evaluate these indicators
- the monitioring of these indicators and corrective steps taken when goals were not achieved
- graphed and/or tabled results, as appropriate.

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.6.1.1 | There are formalised quality | |
| Critical: | improvement processes for the service that have been | |
| Catg: Evaluation + Efficiency | developed and agreed upon | |
| Compliance | by the personnel of the service. | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.6.1.2 | Indicators of performance are | |
| Critical: | identified to evaluate the quality of treatment and patient care. | |
| Catg: Evaluation + Efficiency | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.6.1.3 Critical: Catg: Evaluation + Efficiency Compliance | The quality improvement cycle includes the monitoring and evaluation of the standards set and the remedial action implemented. | |
|--|--|--|
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.6.1.4 | A documentation audit system is in place. | |
| Catg: Evaluation + Efficiency Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

17.7 Patient Rights

17.7.1 Standard

The department/service implements processes that support patient and family rights during care.

Standard Intent: This refers to the implementation of organisational policies on patient and family rights (Service Element 5).

Compliance will be verified during observation of patient care processes, patient record audits and patient interviews.

| | Criterion | Comments |
|---|--|-----------------|
| | | Recommendations |
| Criterion 17.7.1.1 | There are processes that | |
| Critical: | support patient and family rights during care. | |
| Catg: Basic Management + Patient Care | ingine daring dare. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.7.1.2 | Measures are taken to protect | |
| Critical: | the patient's privacy, person and possessions. | |
| Catg: Basic Process + Patient Care | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.7.1.3 | The personnel respect the | |
|---|--|--|
| Critical: | rights of patients and families to treatment and to refuse | |
| Catg: Basic Process + Patient Care | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

17.8 Prevention and Control of Infection

17.8.1 Standard

The department/service implements infection prevention and control processes.

Standard Intent: This refers to the implementation of organisational processes on infection prevention and control (Service Element 9).

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.8.1.1 | The department identifies the procedures and processes associated with the risk of infection, and implements strategies to reduce risk. | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | onategree to readed not | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.8.1.2 | Infection control processes | |
| Critical: | include prevention of the spread of respiratory tract infections. | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.8.1.3 | Infection control processes | |
| Critical: | include prevention of the spread of urinary tract infections. | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.8.1.4 | Infection control processes | |
|---|---|--|
| Critical: | include prevention of the spread of infection through | |
| Catg: Basic Process + Pat & Staff Safety | intravascular invasive Idevices. | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| | | |
| Criterion 17.8.1.5 | Infection control processes | |
| Criterion 17.8.1.5 | include prevention of the | |
| | | |
| Critical: Catg: Basic Process + Pat & Staff | include prevention of the spread of infection through | |
| Critical: Catg: Basic Process + Pat & Staff Safety | include prevention of the spread of infection through | |

17.9 Risk Management

17.9.1 Standard

The department/service implements risk management processes.

Standard Intent: This refers to the implementation of organisational risk management processes (Service Element 7).

| | Criterion | Comments |
|---|---|-----------------|
| | | Recommendations |
| Criterion 17.9.1.1 | The department conducts | |
| Critical: | ongoing monitoring of risks through documented | |
| Catg: Basic Process + Pat & Staff Safety | assessments as part of organisational risk | |
| Compliance | management processes. | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.9.1.2 | A system for monitoring | |
| Critical: | incidents/near misses/sentinel/adverse | |
| Catg: Basic Process + Pat & Staff Safety | events is available and includes the documentation of | |
| Compliance | interventions and responses to recorded incidents. | |
| NA NC PC C | ito recorded incidents. | |
| Default Severity for NC or PC = 4 Very Serious | | |

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| Criterion 17.9.1.3 | Security measures are in place and are implemented to ensure the safety of patients, personnel and visitors. | |
|---|--|--|
| Critical: | | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.9.1.4 | Fire safety measures are | |
| Critical: | implemented. | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |
| Criterion 17.9.1.5 | The organisation's policy on | |
| Critical: | handling, storing and disposing of health waste is implemented. | |
| Catg: Basic Process + Pat & Staff Safety | | |
| Compliance | | |
| NA NC PC C | | |
| Default Severity for NC or PC = 4 Very Serious | | |

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