Quality Management Department

Open Audit Documentation Compliance - Pediatric Department

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		MONTH	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
NO	CRITERIA	ADMISSION ASSESSMENT IN ICIS												
1	PC.9	Medical assessments is completed and documented within the first 24 Hours of admission for routine elective cases.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
2	PC.10.1.1	Main complaints	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
3	PC.10.1.2	Details of the present illness	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
4	PC.10.1.3	System Review	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
5	PC.10.1.4	Past history including previous admission and surgeries	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
6	PC.10.1.5	Allergies and prior adverse drug reactions	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
7	PC.10.1.7	Family History	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
8	PC.10.1.8	Psychological Assessment: (Ref: AOP.1.1): The psychosocial assessment determines the patient's emotional status (for example, if he or she is depressed, fearful, or belligerent and may harm himself or herself or others)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
9	PC.10.1.8	Social History: (Ref: AOP.1.1) Gathering social information on a patient is not intended to "classify" the potient. Rather, a patient's social cultural, spiritual, family, and ecomomic contexts are important factors that can influence his or her responce to illness and treatment	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
10	PC.10.1.9	Economic Factors: Economic factors are assessed as part of the social assessment or assessed seperately when the patient and his family will be responsible for the cost of all or a portion of the care while an inpatient or following discharge	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
11		Physical Examination	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
12	PC.16.8	The plan of care includes a provisional date of dischage set within 24 hours of admission (Plan od care including length of stay (LOS/ Discharge Planning) documented	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
13	PC.6.5	Impression/diagnosis	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
14	PC.7.3	Pain Screening documented followed by assessment if required	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
15	PC.7.3	Pain assessment is performed when applicable (Location, severity,character,pain management history)	NA	100%	NA	100%	NA	NA	100%	NA	NA	NA	NA	NA
		PROGRESS NOTES IN ICIS												
16	PC.16.6	The plan of care is reviewed by the most responsible physician on a daily basis	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
17	PC.17.2	Medical reassessment must be performed at least once daily, including weekends and holidays, and in response to any significant change in the patient's condition	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
		VTE SCREENING - POWER ORDER												
18	PC.26.1	Patients are screened for the risk of developing venous thromboembolism	NA											
		CONSULTATION -ICIS												
19	PC.36.1.4	Urgency of consultation- when a consultation is required an order shall be placed in ICIS (Power Chart)	NA	100%	NA	NA								
20	PC.36.1.5	Case summary	NA	100%	NA	NA								
21	PC.36.1.6	Rationale for consultation	NA	100%	NA	NA								
22	PC.36.1.4	Consultation shall be attended to and documented on the consultation requestr in ICIS within 8hrs for non-urgent	NA	100%	NA	NA								
23	PC.36.1.4	Consultation shall be attended to and documented on the consultation requestr in ICIS within 2hrs for urgent	NA											

24	PC.36.2.3	Opinion and recommendations, including the need to transfer the patient under his name	NA	NA	NA	NA	NA	NA	NA	NA	NA	100%	NA	NA
PFE DISCHARGE NOTE - ICIS													l l	
25		The hospital ensured that the patient has his follow up clinic appoinments (Discharges Notes)	100%	100%	66%	100%	100%	100%	100%	66%	100%	100%	100%	100%
GRAND TOTAL			100%	100%	98%	100%	100%	100%	100%	98%	100%	100%	100%	100%

* UTM - Unable to monitor

* NA - Not Applicable

* DNS - Data Not Submitted

Compliance Rate: ≤75% = Severe Deficiency; ≥90% = Compliant; 76 % to 89% = Areas for Improvement