Directorate General of Health Services Health Systems Strengthening (HSS), MIS

Onsite Monitoring Form

Name of facility:

District:	Upazila:	Date:		
		(dd mm y	/y)	

	Leadership/ Governance/ Management				
-					
	Was a HMC/Hospital Coordination meeting held last month? (Please check meeting attendance sheet)?	-Yes	-No		
	Were the HMC/Coordination meeting minutes preserved for last month?	-Yes	-No		
	Were there any actions and or decisions based on last month's statistics report for this facility as per the HMC/Coordination meeting minutes?	-Yes	-No	-Partial	
	Were any death reviews conducted in this facility in the last month?	-Yes	-No	-Partial	
	Was a community death review conducted by this facility in the last month?	-Yes	-No	-Partial	
	Were any clinical audit conducted in this facility in the last month?	-Yes	-No	-Partial	
	Are sign boards for the SMS complaints system publicly displayed?	-Yes	-No	-Partial	
	Are complains/suggestions board displayed at main entrance?	-Yes	-No	-Partial	
	Health Financing				
	Whether at least 80% of your budget was executed in the last month?	-Yes	-No	-Partial	
	Health Workforce				
	Were at least 80% of the doctors and nurses/midwives on duty in the facility over the last 24 hours? (based on attendance register and the roster plan)	-Yes	-No		
INPUT	Confirm functionality of the biometric attendance machine by staff	-Yes	-No		
∠	Health Information System				
	Are monthly EmOC data matching with the registry book for last month? (not applicable Super Specialized Hospital)	-Yes	-No		
	Are monthly IMCI data matching with the registry book for last month? (not applicable Super Specialized Hospital)	-Yes	-No		
	Are monthly EPI infant and women data matching with the registry book for last month? (not applicable District Hospital, Medical College Hospital, Super Specialized Hospital)	-Yes	-No		
	Are daily OPD, emergency visits & admission data matching with the registry book for last month?	-Yes	-No		
	Are monthly hospital bed statement data matching with the registry book for the last month?	-Yes	-No		
	Are monthly major equipment data matching with the registry book for last month?	-Yes	-No		
	Are monthly HMC meeting data matching with the registry book for last month?	-Yes	-No		
	Access to Essential Medicines/ equipment, logistics/ utilities/ infrastructure				
	Is the medicines availability list displayed outside the pharmacy?	-Yes	-No		
	Are available laboratory tests displayed with prices?	-Yes	-No	-Partial	
	Are there stocks of infection control materials (gloves, surgical masks, anti-septic/disinfectant, soap (bar or liquid)?	-Yes	-No	-Partial	

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			(0	dd mm yy)	
-	Is an autoclave machine being used in labor room?	-Yes	-No	-Partial	
	Is an oxygen cylinder (not empty) available at emergency, indoor and labor rooms?	-Yes	-No	-Partial	
	Service Delivery / Management				
	Has screening and cross-matching been performed for any blood transfusion?	-Yes	-No	-Partial	
	Is the pathology laboratory service functional?			-Partial	
	Are all imaging services functional?			-Partial	
	Are the ambulance services available?	-Yes	-No	-Partial	
	Overall maintenance and infrastructure:				
	- Cleaning and painting				
	 Are both indoor and outdoor floors, walls, windows and doors 			- · · · ·	
	clean?	-Yes	-No	- Partial	
	Are both indoor and outdoor colors maintained		N	D. attal	
	- Waste management and sanitary facilities	-Yes	-No	- Partial	
	 Was any garbage found outside garbage bins or outside defined 	V	NI-	Dantial	
	areas? o Are toilets available and functional (doors, bolts, light)?	-Yes	-No	- Partial - Partial	
		-Yes	-No	- Partiai	
	 Are toilets available and functional in separate units for both male and female? 	-Yes	-No	- Partial	
	Are toilets clean (floor, walls, pan/commode)?	-163	-110	- i ai tiai	
	- Water and electricity				
	o Is 24 hour water supply available?	-Yes	-No	- Partial	
	 Is a generator/alternative power supply available and functioning? 			. a. c.a.	
	- Sitting, privacy arrangements and signage:	-Yes	-No	- Partial	
	 Are patient sitting arrangements available at all service areas (OPD, 				
	emergency, lab and imaging)?	-Yes	-No	- Partial	
	 Are privacy arrangements (curtain or separate room with closed 				
	door) available for female patients at all service areas?	-Yes	-No	- Partial	
	 Are guiding signs available to all service areas? 	-Yes	-No	- Partial	
	Quality				
	Is there a functional quality management system for the laboratories (based on	Voc	No	-Partial	
	records)?	-Yes	-No	-Partial	
	Performance of major surgery (three randomly selected surgeries over the last				
OUTPUT	month) conducted according to standards (by reviewing the completeness of	-Yes	-No	-Partial	
	operation notes)	103	140	rartiai	
	(not applicable Upazila Health Complex)				
	Appropriate referral protocol is maintained (based on facility register)	-Yes	-No	-Partial	
	(not applicable Medical College Hospital)				
	Are patients receiving medicines according to essential drug list available in the	-Yes	-No	-Partial	
	hospital during the time of visit (any five patients)? Safety (including infection control)				
	Are separate color coded waste bins for infectious materials being used?	-Yes	-No	-Partial	

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	_	f patients in the outdoor clinic were staffs in charge of patients on control practices (based on observation)?	-Yes	-No	-Partial	
		ential medicines are available during the visit	-Yes	-No	-Partial	
Qualitative questions (not used for scoring)						
	1. What are the m	ost positive aspects of performance in this facility?				
	2. What are the m	ain challenges in the performance of this facility?				
	3. Recommendation	ons for review during the next visit				
		tor/Civil Surgeon				

Divisional Director/Civil Surgeon
Divisional Directorate Office/Civil Surgeon Office
Division/District:
Facility manager:
Date and location:

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