

DATA COLLECTION AND USE

Objective:

Follow the clinical record for mother and baby from birth through discharge from the health facility. Examine at least one example of each type of patient record. If a data collection tool is not available, note N/A next to the heading.

Name of observer: Date:

	Yes	No
Admission register-data duplication and protection		
Is there a single register (or are there multiple for different purposes)?.....	<input type="checkbox"/>	<input type="checkbox"/>
If multiple specify		
Is the register kept in a location accessible to all health workers?.....	<input type="checkbox"/>	<input type="checkbox"/>
Is the register data protected (confidentiality)?.....	<input type="checkbox"/>	<input type="checkbox"/>
Is information entered only once (not repeated in other locations)?.....	<input type="checkbox"/>	<input type="checkbox"/>
If repeated, specify what and where		
Antenatal records- data completeness		
Do the records contain results of all antenatal diagnostic tests and examinations?.....	<input type="checkbox"/>	<input type="checkbox"/>
Are the records always available when a patient comes to the facility in labour?.....	<input type="checkbox"/>	<input type="checkbox"/>
Is the requested information complete?.....	<input type="checkbox"/>	<input type="checkbox"/>
If no specify		
Intrapartum and delivery summary - data use to guide care		
Is the partograph (labour care guide) used?.....	<input type="checkbox"/>	<input type="checkbox"/>
Is the record completed throughout the course of labour (not only after delivery)?.....	<input type="checkbox"/>	<input type="checkbox"/>
Does the record include all of the following: time of birth, route of delivery, Apgar scores, intervention given (if any) to help the baby breathe?.....	<input type="checkbox"/>	<input type="checkbox"/>
Newborn records - respectful care of the newborn as an individual		
Is the newborn's record separate from that of the mother?.....	<input type="checkbox"/>	<input type="checkbox"/>
Does the record include all of the following: admission temperature, weight, sex, examination findings?.....	<input type="checkbox"/>	<input type="checkbox"/>
Newborn daily assessment		
Does each baby have a daily assessment recorded by a health worker including feeding volumes and output?.....	<input type="checkbox"/>	<input type="checkbox"/>
Is the daily assessment used in handover from one shift to another?	<input type="checkbox"/>	<input type="checkbox"/>
Does each baby receiving KMC have a record of mother's observation?.....	<input type="checkbox"/>	<input type="checkbox"/>
Does each baby receiving KMC have a growth monitoring chart?.....	<input type="checkbox"/>	<input type="checkbox"/>
Discharge summary		
Is there a summary prepared for each baby who has received routine care?.....	<input type="checkbox"/>	<input type="checkbox"/>
Is there a summary prepared for each baby who has received KMC or special care?	<input type="checkbox"/>	<input type="checkbox"/>
Does the summary include time/place/person for all follow-up appointments?.....	<input type="checkbox"/>	<input type="checkbox"/>
Referral form		
Does a referral form accompany every newborn sent to a higher level of care?	<input type="checkbox"/>	<input type="checkbox"/>
Does the referral form document acceptance of the patient at the receiving facility (when and by whom)?	<input type="checkbox"/>	<input type="checkbox"/>
Does the referral form include documentation of condition during transfer (medical transport)?	<input type="checkbox"/>	<input type="checkbox"/>

Discuss together

What did you observe?
 What was done well?
 Problems identified?
 Change needed?

Complete QI template