

Medical Quality Assurance (QA) Audit Scorecard

	Benchmark	Means of verification	Fully met (2)	Partially met (1)	Not met (0)	Action plan
STANDARD 1 Technical Competency						
1.1- RDTs should be performed by licensed/registered providers who are authorized by the government to do so.	Copy of official license or registration authenticated by the government	Provider's folder/file				
1.2- All personnel providing RDT services in affiliation with the programs must have received training from PSI/MC, MoH, or accredited organizations approved by PSI/MC.	Copy of the training certificate approved by PSI	Provider's folder/file				
1.3- Providers must perform RDTs according to the relevant protocol.	Correct execution of critical steps: infection prevention control, correct blood collection, safe lancet disposal, correct RDT performance, correct interpretation of results	Past assessments or direct observation				
1.4- PSI/MC-affiliated providers will have a current letter of agreement with PSI/MC that clearly stipulates the roles and responsibilities of both parties and consequences of non-compliance.	Copy of the initial agreement between the owner of the outlet and PSI/MC	Provider's folder/file				
1.5- Agreements with PSI/MC-affiliated providers must be renewed on annual basis, pending satisfactory evaluation of providers' overall skills and procedural compliance.	Copy of the renewed agreement for the current year based on last year provider's overall skills and procedural compliance	Provider's folder/file				
Sub-score: Technical competency				0	/10	
STANDARD 2 Client Safety						
2.1- Providers must check for danger signs and obtain a medical history from the caregiver/patient.	Providers check for danger signs and obtain medical history from caregivers/patients	Past assessments or direct observation				
2.2- Providers must properly identify, test and treat/refer fever cases in accordance with the government approved treatment algorithm for the level of provider.	Providers properly follow government's algorithm on FCM	Past assessments or direct observation				
2.3- All PSI/MC-affiliated clinics where PSI/MC's program refer patients must comply with Service Delivery Standards and are approved by a PSI/MC medical representative.	Selected referral facilities comply with Service Delivery Standards	Direct observation of referral facilities*				
2.4- Facilities must have all required equipment (ie: RDTs, gloves, safe disposal units) and appropriate drugs (ie: ACTs and antipyretics).	All required equipment and drugs are in place	Past assessments or direct observation				
2.5- Facilities must assure all the conditions to prevent infections (hand-washing procedure, decontamination equipment, antiseptic detergents, etc).	Facilities ensure infection prevention control measures	Direct observation				
2.6- Facilities must ensure appropriate bio-hazard waste management: presence of appropriate waste disposals (sharp and infectious, non-sharp and infectious, non-infectious) and waste management system in place.	Facilities ensure bio-hazard waste management	Direct observation				
Sub-score: Client safety				0	/12	
STANDARD 3 Privacy and Confidentiality						
3.1- Services must be performed in a setting that offers clients privacy in accordance with relevant government regulation (i.e. the setting is screened from view of others).	Privacy is secured at outlet level	Past assessments or direct observation				
3.2- Precautions must be taken to ensure that client records are stored safely and confidentially.	Confidentiality is secured at outlet level	Past assessments or direct observation				
Sub-score: Privacy and confidentiality				0	/4	
STANDARD 4 Continuity of Care						
4.1- Providers must ensure that the patient/caregiver receives accurate information regarding on how to manage the case at home and identify signs of risk.	Caregiver/patient receives appropriate counselling and instructions for follow-up cares	Past assessments or direct observation				
4.2- Providers must give relevant documentation to the patient/caregiver and ensure that s/he understands the case management procedures and that s/he is firm and clear about the treatment or referral.	Providers ensure patients/caregivers' understanding of the instructions given for follow-up cares and provide supportive documentation (takeaways, etc.)	Past assessments or direct observation				
4.3- Providers or facilities must provide clients with information on who to call or where to go (approved referral sites) in case of emergency and complications.	Caregivers/patients are exposed to contacts of referral sites or referral providers	Past assessments or direct observation				
4.4- PSI/MC programs must have one of the recommended mechanisms to assess client satisfaction with services, including counseling, provider access, and follow-up care.	Follow-up action plan in place based on findings from Eis, HH surveys or qualitative research activities	Follow-up action plan on client satisfaction with services				
Sub-score: Continuity of care				0	/8	
TOTAL SCORE				0	/34	
TOTAL SCORE (%)				0%		