



To be completed quarterly in May, August, November and February by Assistant Nursing Manger	
NB. Should an indicator not be possible to assess (eg no baby on respiratory support of IV fluids) then interview the nurse to assess standard practice	
Unit:	
Not applicable:	Does not apply to the unit or individual assessment or not observed
Non-Compliant:	<50% compliance
Partially Compliant:	50 - 79% Compliance
Compliant:	80 - 100% Compliance

N ^o	INDICATOR	May	August	November	February
General Care and safety					
1	All children have legible ID bands				
2	All staff are clearly identified				
3	Bed line clean, intact and present on every bed				
4	All cot sides are up				
5	Security gate/entrance door is locked				
6	Medication cupboard and trolley are locked				
7	All electrical points are covered				
8	Children in play area/bathroom are supervised				
Thermal Care					
9	Children under 1 year and those admitted with burns and SAM managed in a warm room/cubicle AND:				
10	Room temperature (temp) is recorded twice daily				
11	Room temperature is maintained 22-26 °C				
Emergency Care					
12	All suction units ready for use (with tubing & suction catheter)				
13	All oxygen units ready for use for HC/Tiny tots (humidifier and tubing)				
14	Saturation monitors have appropriately set alarm limits: Minimum 92%				
15	Paediatric resuscitation trolley available, locked and clean				
16	Resuscitation trolley not used for general storage				
17	Stocked using KZN paediatric resus trolley checklist				
18	Checked twice daily				
19	Out of stock items replaced within 24hrs				
20	Portable oxygen cylinder and gauge available & checked daily				
21	Defibrillator present and checked daily				
Early Childhood Development-LOVE, PLAY, GROW					
22	Family (including siblings) visiting encouraged (2 visitors at a time)				
23	Unrestricted visiting times for primary caregivers permitted				
24	Primary caregivers encouraged to lodge or remain with the child				
25	Parents participate in decision making				
26	Mothers assist with routine care				
27	Mothers administer oral medications and feeds				
28	Children have 24 hr access to play activities				
29	Children have supervised outdoor play time				
30	Stimulation items (eg mobile) provided for Children in cots				
31	Structured stimulation/play activities provided Play schedule displayed in the ward				
32	Comfort items (eg teddy bear) and toys are available				
33	RtHB posters are displayed				
34	Staff are knowledgeable of key RtHB messages				
35	All children's growth is appropriately monitored				
		A. NA			
		NC			
		PC			
		C			

Fluids and Feeds		May	August	November	February
36	Breast feeding support available				
37	Age appropriate snacks are given as per paed. menu				
38	Age appropriate meals are served eg puree for toddlers				
39	SAM patients receive appropriate feeds eg F75/F100/Ready to use therapeutic feed (RUTF)				
40	Appropriate giving sets(per RT 253 tender) used for feeding pumps				
41	IV fluid administered via infusion pump.				
42	Appropriate giving sets in use (correct for infusion pump)				
43	IV fluid labelled correctly with date, time, signature				
44	IV skin site appropriately strapped (able to monitor IV site)				
45	IV site checked 6 hrly				
Positioning					
46	Children with respiratory distress nursed semi - Fowlers				
Environmental control					
47	Curtains/blinds on windows- clean and functional (not broken)				
48	Warning signs for wet floors				
49	Daily equipment maintenance checklist current				
Hygiene and skin care					
50	All children bathed daily				
51	Oral hygiene provided twice daily				
52	Pressure part care given 6 - hrly (for bedrest children)				
53	Catheter care given 6 - hrly (if in situ)				
54	Nappies changed when wet or soiled				
55	Buttocks cleaned with soap and water and barrier ointment applied (Vaseline or zinc oxide)				
Respiratory Care					
56	Appropriate sized nasal cannula in use				
57	Nasal cannulas securely strapped				
58	All Children on oxygen have 24 - hr saturation monitoring				
Procedures					
59	Assent given for all procedures				
60	Mother consulted before all procedures				
61	Pain relief given before all painful procedures				
62	Privacy ensured before all procedures				
Medications					
63	Stored apart from other stores in clean, locked cupboard				
64	Schedule meds. locked in a metal drug cupboard and shift leader carries the key				
65	Oral meds (multivits and ARTs) issued to and given by mother				
Multidisciplinary support					
66	Evidence of SAM multidisciplinary team (MDT) rounds				
67	Occupational Therapist/ Physiotherapist involved in play therapy				
68	<u>Daily</u> (including weekends and public holidays) ward round by medical officer				
69	Weekly telephonic round by specialist (district hospitals)				
70	Monthly outreach visit by specialist (district hospitals)				
Dying and death					
71	Mother and Child receive appropriate counselling, support and care before, during and after death. (interview staff)				
		B.	NA		
			NC		
			PC		
			C		

Month	Assessed By -Sign	Print	Desig.	Date
May				
August				
November				
February				

Scoring and feedback-In Discussion with the Unit:				
May Scoring	NA =	NC =	PC =	C =
	NA x 2 =			C x 2 =
	A: PC + (C x 2) =		B: 156 - (NA x 2) =	
	A / B =		X 100 =	%
Gaps Identified:				
Action Plan:				
August Scoring	NA =	NC =	PC =	C =
	NA x 2 =			C x 2 =
	A: PC + (C x 2) =		B: 156 - (NA x 2) =	
	A / B =		X 100 =	%
Gaps Identified:				
Action Plan:				
November Scoring	NA =	NC =	PC =	C =
	NA x 2 =			C x 2 =
	A: PC + (C x 2) =		B: 156 - (NA x 2) =	
	A / B =		X 100 =	%
Gaps Identified:				
Action Plan:				
February Scoring	NA =	NC =	PC =	C =
	NA x 2 =			C x 2 =
	A: PC + (C x 2) =		B: 156 - (NA x 2) =	
	A / B =		X 100 =	%
Gaps Identified:				
Action Plan:				