Module 5: Measurement in Continuous Quality Improvement

Unit 5.2: Application of the KQMH Monitoring Sheet to Evaluate the Progress of Quality Improvement Activities
Objectives

• Describe quality standards applicable in the KQMH
• Interpret the requirements of the standards and the scoring for each standard.
• Demonstrate the use of KQMH monitoring and evaluation checklist
• Complete the KQMH checklist in the DHIS2
Content

- KQMH standards and monitoring and evaluation tool
- Use of the checklists
- KQMH program data entry in the DHIS2
1. Leadership in Healthcare

• Weighted Score: 1, 2, 3, 4, 5
1.1 Management and clinical meetings are held on a monthly basis
# Scoring Criteria

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Very Poor</td>
<td>Management and clinical meetings are not held at all.</td>
</tr>
<tr>
<td>2: Poor</td>
<td>Management and clinical meetings are held on irregular (ad hoc) basis.</td>
</tr>
<tr>
<td>3: Average</td>
<td>Management and clinical meetings are held on a regular basis. Terms of Reference for meetings are not available.</td>
</tr>
<tr>
<td>4: Good</td>
<td>Management and clinical meetings are held on a regular basis. A quorum of key people is not present most of the time. Terms of Reference for meetings are available and known to members.</td>
</tr>
<tr>
<td>5: Very Good</td>
<td>Management and clinical meetings are held on a regular basis. A quorum of key people is present at all sittings (apologies to be documented). Terms of Reference for meetings are available and known to members.</td>
</tr>
</tbody>
</table>
1.2 Leaders take ownership and recognize their role in Quality Management and Improvement
Scoring Criteria

1 – Very Poor: No evidence of leaders commitment in quality management or improvement

2 – Poor: Leaders have not taken ownership of KQMH but approves activities that lead to Quality Management and improvement

3 – Average: Leaders take ownership of KQMH and it appears in the performance contract

4 – Good: Leaders take ownership of KQMH and it appears in the performance contract, efforts for quality improvement beyond KQMH are demonstrated

5 – Very Good: KQMH is a key indicator in performance contract and the institution have been awarded due to quality excellence
Standard

1.3 Leaders promote a quality culture of continuous improvement
Scoring Criteria

1 – Very Poor: Leaders do not promote quality improvement

2 – Poor: Leaders approve KQMH Implementation activities.

3 – Average: Leaders approve KQMH Implementation activities and include quality management performance in their performance contract.

4 – Good: Leaders approve KQMH Implementation activities and include and strictly monitor quality management performance in the performance contract.

5 – Very Good: Leaders approve KQMH Implementation activities and include, strictly monitor and reward quality management performance in the performance contract.
Standard

1.4 Leaders have established a Quality Assurance unit
Scoring Criteria

1 – **Very poor:** Leaders have not established a Quality Assurance unit

2 – **Poor:** Leaders have not established a Quality Assurance unit but there is ongoing quality activities within the facility

3 – **Average:** Leaders have established a Quality Assurance unit

4 – **Good:** Leaders have established a Quality Assurance unit with adequate staffing level and resource allocation to achieve AOP activities

5 – **Very Good:** Leaders have established a Quality Assurance unit with adequate staffing level, infrastructural and resource allocation to achieve AOP activities. The head of the unit is a member of the Top Management
THE END

THANKS
KQMH program data entry in the DHIS2

- TRANSFORMATION AND RE-ENGINEERING
... determine “must know” information needs
There are obstacles to a functional DHIS.
Sometimes you are not sure how something got into the system

Occasionally you are given a warning that this road is not the right one
Data entry
Requirements for DHIS Login.

- A functional computer, mobile phone (smart phone or feature phone)
- Access to internet (means of internet connectivity) - Use Modem, LAN etc
- Web Browser (Google Chrome, Mozilla, Internet Explorer 10 and above)
Login DHIS

- SARAM Website address
- Live site: hiskenya.org
- Login credentials (user name and password)
Step By step
To open data entry screen click on the link, either in the middle or in the left side menu. Click on Profile to edit your personal details (in Profile) or to change your password (in Account).
1. First locate and select a health facility in the hierarchy on the left side. Click on ‘+’ to expand the hierarchy.

2. Select the Section of the SARAM.

3. After selecting both facility and the correct Section, then click on «Add new» to open the form.
Click on the calendar icon and select the date when the survey was conducted.
Fill in the values one by one. You can use arrow down key to see and move to the correct option for each field. Then press Tab to select the option and move to the next field. Using these two keys you can move quickly down the form. Values are saved immediately, and a green field means the value has been successfully save on the server.
<table>
<thead>
<tr>
<th>Description</th>
<th>Field</th>
</tr>
</thead>
<tbody>
<tr>
<td>Altitude</td>
<td></td>
</tr>
<tr>
<td>Latitude (a) N/S</td>
<td></td>
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<tr>
<td>Latitude (b) Degrees/Dec</td>
<td></td>
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<tr>
<td>Latitude (c)</td>
<td></td>
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<tr>
<td>Longitude (a) E/W</td>
<td></td>
</tr>
<tr>
<td>Longitude (b) Degrees/Dec</td>
<td></td>
</tr>
<tr>
<td>Longitude (c)</td>
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</table>

When done filling the form, click **Complete** to notify the system that all available data has been entered and that you regard the form as complete.
Before setting your form to complete the system will run validation checks. Any violations will be listed as seen above. In this case the number of available equipment must be equal or greater than the number of functional. Correct the data and click «Complete» again.
After completing the form you will be taken back to the previous screen and your survey will appear in the list with a date. Click the notebook symbol if you need to edit.
Select a new Section in the program list to continue with the survey for the same facility or click on a new facility on the left to move to another facility.
THANKS