

Quality Management Department

Open Audit Documentation Compliance - Oncology Department

		MONTH	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
NO	CRITERIA	ADMISSION ASSESSMENT IN ICIS												
1	PC.9	Medical assessments is completed and documented within the first 24 Hours of admission for routine elective cases.	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
2	PC.10.1.1	Main complaints	100%	100%	100%	100%	60%	100%	100%	100%	100%	100%	100%	100%
3	PC.10.1.2	Details of the present illness	100%	100%	100%	100%	60%	100%	100%	100%	100%	100%	100%	100%
4	PC.10.1.3	System Review	100%	80%	80%	100%	40%	100%	80%	100%	100%	100%	80%	100%
5	PC.10.1.4	Past history including previous admission and surgeries	60%	80%	60%	100%	40%	40%	40%	80%	100%	100%	80%	80%
6	PC.10.1.5	Allergies and prior adverse drug reactions	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
7	PC.10.1.7	Family History	40%	40%	80%	40%	20%	20%	40%	60%	40%	100%	80%	60%
8	PC.10.1.8	Psychological Assessment: (Ref: AOP.1.1) : The psychosocial assessment determines the patient's emotional status (for example, if he or she is depressed, fearful, or belligerent and may harm himself or herself or others)	60%	40%	40%	60%	20%	20%	60%	100%	80%	100%	60%	60%
9	PC.10.1.8	Social History : (Ref: AOP.1.1) Gathering social information on a patient is not intended to "classify" the patient. Rather, a patient's social cultural, spiritual, family, and economic contexts are important factors that can influence his or her response to illness and treatment	100%	80%	100%	100%	40%	80%	80%	100%	60%	100%	100%	100%
10	PC.10.1.9	Economic Factors: Economic factors are assessed as part of the social assessment or assessed separately when the patient and his family will be responsible for the cost of all or a portion of the care while an inpatient or following discharge	100%	80%	100%	100%	40%	80%	80%	100%	60%	100%	100%	100%
11		Physical Examination	100%	80%	60%	60%	100%	80%	60%	80%	60%	100%	80%	80%
12	PC.16.8	The plan of care includes a provisional date of discharge set within 24 hours of admission (Plan od care including length of stay (LOS/ Discharge Planning) documented	100%	100%	80%	100%	40%	100%	100%	100%	100%	100%	100%	100%
13	PC.6.5	Impression/diagnosis	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
14	PC.7.3	Pain Screening documented followed by assessment if required	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
15	PC.7.3	Pain assessment is performed when applicable (Location, severity,character,pain management history)	100%	100%	67%	100%	100%	50%	67%	100%	100%	100%	100%	100%
PROGRESS NOTES IN ICIS														
16	PC.16.6	The plan of care is reviewed by the most responsible physician on a daily basis	80%	100%	80%	100%	100%	60%	80%	100%	100%	100%	100%	100%
17	PC.17.2	Medical reassessment must be performed at least once daily, including weekends and holidays, and in response to any significant change in the patient's condition	80%	100%	80%	100%	100%	60%	80%	100%	100%	100%	100%	100%
VTE SCREENING - POWER ORDER														
18	PC.26.1	Patients are screened for the risk of developing venous thromboembolism	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	80%

CONSULTATION - ICIS														
19	PC.36.1.4	Urgency of consultation- when a consultation is required an order shall be placed in ICIS (Power Chart)	0%	0%	0%	0%	0%	0%	0%	67%	50%	67%	33%	0%
20	PC.36.1.5	Case summary	0%	0%	0%	0%	0%	0%	0%	67%	50%	67%	33%	0%
21	PC.36.1.6	Rationale for consultation	0%	0%	0%	0%	0%	0%	0%	67%	50%	67%	33%	0%
22	PC.36.1.4	Consultation shall be attended to and documented on the consultation request in ICIS within 8hrs for non-urgent	UTM	UTM	UTM	UTM	UTM	UTM	UTM	UTM	TBMS	TBMS	TBMS	TBMS
23	PC.36.1.4	Consultation shall be attended to and documented on the consultation request in ICIS within 2hrs for urgent	UTM	UTM	UTM	UTM	UTM	UTM	UTM	100%	TBMS	TBMS	TBMS	TBMS
24	PC.36.2.3	Opinion and recommendations, including the need to transfer the patient under his name	100%	100%	100%	100%	100%	100%	100%	100%	TBMS	TBMS	TBMS	TBMS
PFE DISCHARGE NOTE - ICIS														
25	PFE.5.12	The hospital ensured that the patient has his follow up clinic appointments (Discharges Notes)	0%	0%	0%	20%	0%	20%	0%	0%	0%	20%	0%	0%
GRAND TOTAL			80%	78%	72%	81%	60%	69%	68%	89%	80%	93%	83%	82%
* UTM - Unable to monitor														
* NA - Not Applicable														
* TBMS- To Be Measured Separately														
* DNS - Data Not Submitted														
Compliance Rate : ≤ 75% = Severe Deficiency ; ≥ 90% = Compliant; 76 % to 89% = Areas for Improvement														