

# HEALTH PROFESSIONS COUNCIL OF ZAMBIA

## COMPLIANCE MONITORING ASSESSMENT TOOL FOR PHYSIO AND REHABILITATION (Class E Health Facility)

Facility Name \_\_\_\_\_ Catch pop \_\_\_\_\_

Physical Address \_\_\_\_\_ District \_\_\_\_\_

Postal Address \_\_\_\_\_ Phone No \_\_\_\_\_ Imprest \_\_\_\_\_

HPCZ No. \_\_\_\_\_ Class \_\_\_\_\_ Date \_\_\_\_\_ Nationality: \_\_\_\_\_

Inspectors 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

### 1. Introduction

### 2. Objectives

### 3. Scope of Service

1	General Physiotherapy	6	Speech rehab therapy	11	Outdoor therapy
2	Pediatric Physiotherapy	7	Language rehab therapy	12	Prosthetic
3	Electrotherapy	8	Hearing Rehab	13	Orthotics
4	Chiropractic therapy	9	Learning support services		
5	Occupational Therapy	10	Counselling		

### 4. Staffing

#### a) List of staff

S/N	Name	Profession	HPCZ/ GNC #	Position	F/Time	P/Time	NRC	Nationality
1								
2								
3								
4								
5								
6								
7								
8								

#### b) Staff Levels

Profession	Establishment	Available	Profession	Establishment	Available
Physiotherapist			General Nurses		
Physiotherapy Tech			Receptionist		
Medical Officer			Cleaners		
CO- General			Watchmen		
Other.....			Other.....		

### 5. Standard 1: Legal Establishment, Leadership and Governance

Assessment Area	Assessment Criteria (scoring criteria : Met =2, Partially Met = 1 and Not Met = 0)				Score
					2/1/0
Facility	Valid Annual License from HPCZ available and displayed				
Staff files	<b>Sample 4 Files and check the following:</b>			<b>Comment</b>	
	Appointment Letter/ Contract				
	Photocopy of Professional and Academic Qualification				
	Photocopy of NRC/Passport				
	Valid work permit ( <i>Applicable to non-citizens</i> )				
	Valid Practicing Licence				
	Job Descriptions on file & distributed to staff				
	Evidence of staff performance Appraisal available				
Disciplinary/Awards records where applicable					
Staff levels	Practitioners are -----for the scope of service	Qualified		Adequate	
Training	Records of CPD/Workshops		CPD/Training Plan		
Leave	Leave schedule (Booking log)		Records of Leave taken against accrual		
Dress Code	Official Id's won appropriately		Staff adhered to work place dress code		
Disciplinary	Discipline code available		Records of disciplinary cases and actions		
	HPCZ Code of ethics available		GNC Code of ethics available		
Governance	Evidence of business registration		Evidence of Tax Registration		
	Updated ZRA Annual returns		Updated PACRA Annual returns		
	Valid fire certification		Valid Business Permit		
	Waste management Contract		Evidence of updated NAPSA returns		
Strategy management	Latest strategic plan available		Vision statement documented/displayed		
	Latest action plan available		Mission statement documented/displayed		
	Review of progress on plans		Scope of service documented/displayed		
	Approved Organogram displayed		Evidence of management meeting		
Supervision & Support	Supervision/ Tech-support log book		Supervision/Tech-support feedback		
	Compliance to Weekly supervision requirements				
<b>Achieved Score / Total Applicable Score</b>					<b>20</b>

### 6. Standard 2: Sanitary Facilities

Assessment Area	Assessment Criteria (scoring criteria : Met =2, Partially Met = 1 and Not Met = 0)				Score	
					2/1/0	
Male Sanitary	Toilet	Clean state	Running water	Lighting	Hand washing signage	
		Good state of infrastructure		Adequate Natural ventilation		
Female Sanitary	Toilet	Clean state	Running water	Lighting	Hand washing signage	
		Good state of infrastructure		Natural ventilation	Sanitary bin	
Staff Sanitary	Toilet	Clean state	Running water	Lighting	Hand washing signage	
		Good state of infrastructure		Natural ventilation	Sanitary bin	
	Bathroom	Clean state	Lighting	Running water	State of infrastructure	
	Bathroom	Clean state	Lighting	Running water	State of infrastructure	
<b>Achieved Score / Total Applicable Score</b>					<b>12</b>	

### 7. Standard 3: Patient focus and feedback

Assessment Area	Assessment Criteria (Scoring criteria : Met =2, Partially Met = 1 and Not Met = 0)			Score
				2/1/0
Patient Focus	Appropriate Sign posts		Safe water for drinking provided	
	Adequate waiting area		Waiting area appropriately furnished	
	Adequate IEC materials		HPCZ Approved patient charter	
Patient feedback	System for collecting patient feedback (suggestion boxes/complaint register)			
	System for collecting feedback from referral facility (referral form with feedback)			
Confidentiality & Consent	Adequate screens available		Facility has written consent form	
	Availability of the following guidelines from HPCZ;			
	Guidelines on Patient Consent		Guidelines on Patient Confidentiality	
	Guidelines on Patient's record		Guidelines on Pervasive Incentives	
<b>Achieved Score / Total Applicable Score</b>				<b>6</b>

### 8. Standard 4: Generation, Storage and management of Records

Assessment Area	Assessment Criteria (scoring criteria : Met =2, Partially Met = 1 and Not Met = 0)			Score
				2/ 1/ 0
Ventilation	Adequate natural ventilation		Artificial ventilation (Aircon/fan)	
Lighting	Adequate natural lighting		Adequate artificial lighting	
Paper base data	Adequate shelves/cabinets		Records lockable and secure	
	Adequate Section for archiving		Active & inactive files separated	
Electronic data	System password protected		Access is restricted	
	System for back up of records		user rights clearly defined	
Generation and Storage Practices	Health facility maintains patients records for minimum of 5 years before disposal			
	Facility captures sufficient patient contact information			
	Age	Patient ID No.	Emergency Contact person	
	Sex	Patients phone No.	Phone for contact person	
	Patients Name	Address		
	Availability of qualified personnel to manage patient record			
Managing Health Information (HMIS)	SOP for Data management		Monthly report to next level done	
	Assigned responsibility for HMIS		Appropriate data equipment	
	Data forms e.g tally sheets,		Notifiable diseases being reported	
	Availability of OPD Register		Data trending/flagging	
<b>Achieved Score / Total Applicable Score</b>				<b>12</b>

## 9. Standard 5: Environment, Health & Safety

Assessment Area	Assessment Criteria (scoring criteria : Met =2, Partially Met = 1 and Not Met = 0)				Score
					2/1/0
Infrastructure	All rooms in the building meeting Public Health Act Cap 295 of the Laws of Zambia(Floor area not less than 8.4 m <sup>2</sup> , Horizontal dimensions not less 2.1m, Height not less than 2.6m	Room	Y	N	Comment if No.
		Reception			
		Consultation room			
		Active rooms- general physio			
		Passive rooms- general physio			
		Prosthetic and orthotics room			
		Pediatric physiotherapy room			
		Occupational therapy			
		Occupational therapy gym			
		Speech therapy room			
		Office			
		Store room			
		Learning support			
Toilets					
Parking space	Adequate parking space for the number of ambulances				
State of infrastructure	Building in good state of repair with the following well maintained?				
	Walls	Fixtures	Windows	Doors	Floors
Sanitation	Infection Prevention Committee or Designated person overseeing IPC activities				
	Functional sinks in...	Passive room	Active room	Toilets	
	Running water in...	Passive room	Active room	Toilets	
	Handwashing signage	Passive room	Active room	Toilets	
	Male Toilet	Female Toilet	Staff Toilets		
	Sanitary bin in female toilet	Sanitary bin in Staff Toilet			
	Are toilets clean?	Male toilet	Female toilet	Staff Toilet	
Ventilation	Adequate natural ventilation	Artificial ventilation (Aircon/fan)			
Lighting	Adequate natural lighting	Artificial lighting			
Surrounding	Clean environment	Outdoor sanitary bins provided			
	Proper ground maintenance	No littering of rubbish on premises			
	Secure storage place for waste	Proper drainage system available			
Waste Disposal	Incinerator or waste contract	Bins for segregation of waste			
	Recommended Pedal bin	Colour coded bin liners			
	Sharps box	Segregation of waste adhered to			
Occupation health/safety	OHS Guidelines/SOP	Adequate Personal protective equip			
	Signage in all rooms	Staff vaccination program in place			
	Provision for wheelchair	Premises safe for people with disability			
Venerable population	Written Policies available	Linkage to ZP/Victims Support			
	Register for cases	Linkage to Social welfare services			
	Case reporting system	Linkage to Referral Hospital			
Fire Safety	Functional Fire extinguisher	Bucket of sand			
	Fire exist marks in all rooms	Extinguisher servicing is up to date			
	Evidence of annual fire drills	Fire assembly point available			
Power supply	Electricity Available	Backup power supply			
Security	Perimeter Fence	Security Guards			
<b>Achieved Score / Total Applicable Score</b>					<b>26</b>

**10. Standard 6: Passive Room (General Physiotherapy)**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)						Score 2/1/0
Electro-therapy	Shortwave Diathermy units			Microwave Diathermy units			1
	Infrared Diathermy units			Faradic current			
	Interferential			TENS			
	Ultrasound			Wax bath			
	Russian current			Bench for equipment			
	Interrupted Direct Current						
Standard Equipment	Therapist chair		Hydrocholetor		Table		1
	Patients chair		Access to sterilizer		Hot packs	Foot step	
Water & sanitation	Running water–hot		Pedal bin		Binliner-black	Liquid Soap	1
	Running water–cold		Big Towels		Dark curtains	Bedsheets	
	Assorted towels		Pillows		Handwash-sign	Pillow cover	
<b>Achieved Score / Total Applicable Score</b>							<b>3   6</b>

**11. Standard 7: Active Room (General Physiotherapy)**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)						Score 2/1/0
Standard Equipment	Hand exercise gadget		Quadriiceps bench		Parallel bars		Sand bag
	Pulley-lower limbs		Suspension Frame		Treatment bed		Weights
	Pulley-lower limbs		Walking frame		Wobble boards		Exercise table
	Auxiliary Crutches		Elbow crutches		Exercise mats		
	Exercise- stationery bicycles				Exercise (Registered) springs		
Environment	Therapist chair		Patients chair		Table	Liquid Soap	Binliner-black
	Running water		Pedal bin			Paper towel	Handwash-sign
<b>Achieved Score / Total Applicable Score</b>							<b>4</b>

**12. Standard 8: Pediatric Physiotherapy Room (optional)**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)						Score 2/1/0
Standard Equipment	Standing frame		Cerebral palsy chair		Kaye walker		Parallel bars
	Walking frame		Plaster of Paris-POP		Theraband		Corner seats
Environment	Therapist chair		Patients chair		Table		Foot step
	Running water		Pedal bin		Binliner-black		Liquid Soap
<b>Achieved Score / Total Applicable Score</b>							<b>4</b>

**13. Standard 9: Speech Therapy Room (optional)**

Assessment Area	Assessment Criteria						Score
Standard Equipment	Tape recorders		Tempanometer		Audiometer		Pretend play materials
	Picture Exchange Communication System (PECS)						
Environment	Therapist chair		Patients chair		Table		Foot step
	Running water		Pedal bin		Binliner-black		Liquid Soap
	Handwash-sign		Paper towel				
<b>Achieved Score / Total Applicable Score</b>							<b>4</b>

**14. Standard 10: Occupational Therapy Room (optional)**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)						Score 2/1/0
Standard tests	Berry Visual Motor Integration 6th Ed			Visual perception developmental 3 <sup>rd</sup> ed			
	Test of Visual perceptual Skills 3rd Ed			Test for Handwriting skills Revised Ed			
Standard Equipment	Sensory Box		Puzzles		Weighted vests		vibrating pens
	Tables		Kinetic sand		weighted pencils		Audio Box
Environment	Therapist chair		Patients chair		Table	towel	Foot step
	Running water		Pedal bin		Binliner-black		Liquid Soap
<b>Achieved Score / Total Applicable Score</b>							<b>6</b>

**15. Standard 11: Occupational Therapy gym (optional)**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)							Score 2/1/0
Standard Equipment	Equipment		Snoozing box		Mirrors		Prone wedge	
	Exercise mats		Warble board		Vibrating massagers		Dumbbells	
	Weighted balls		Balance beam		Therapeutic swings		Gym balls	
Environment	Therapist chair		Patients chair		Table	Towel	Foot step	
	Running water		Pedal bin		Binliner-black		Liquid Soap	
<b>Achieved Score / Total Applicable Score</b>								<b>4</b>

**16. Standard 12: Outdoor Therapy service (optional)**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)							Score 2/1/0
Standard Equipment	Trampoline			Jungle gym & play house				
	Outdoor balance beam			Hydrotherapy pool				
<b>Achieved Score / Total Applicable Score</b>								<b>2</b>

**17. Standard 13: Prosthetic and orthotics**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)							Score 2/1/0	
Exercise equipment	Air compressor unit, flexible connection, with blow gun				Suction machine				
	Wide belt surface sanding machine			Finishing and trimming machine					
	Electric zigzag sewing machine		Anvils	Foot measuring/casting device					
	High speed orthopedic press		Vice	Cervical traction component					
	Combined face / belt grinding		Oven	Electric hand drilling machine					
	Electric welding torch		Enveloping suction tube			Lathe machine			
	Column drilling machine		Shoe stretching apparatus			Electric blower			
	Shoe patching machine		Film demonstration screen			Screw press			
	Prosthetic fitting stand		Shoe stretching apparatus			Alignment jig			
	Bench drilling machine		Double grinding machine			Vacuum pump			
	Lead block	Bench grinder		Laminator		Band saw machine			
	Mirror welder	Riveting bar		Electric jig saw		Hand sealing iron			
	Mobile dust aspirator		Podoscope				Welding machine		
	Cutting device	Staple gun		Machine vice		Electric cast cutter			
Furniture	Table	Practitioner's Chairs		Patients Chair		Storage cabinet			
Sanitation	Running water	Bin liner		Pedal bin		Liquid Soap	Towel		
<b>Achieved Score / Total Applicable Score</b>								<b>12</b>	





**18. Standard 14: Rehabilitation & Physiotherapy Practices**

Assessment Area	Assessment Criteria (scoring criteria : Score =2, Partially Score = 1 and Not Score = 0)							Score 2/1/0
Register/form	Standard Operating Procedures			Referral Form		Patient register		
Clinical audit (documenting of care)	Documented presenting complaints			Evaluate adequate patient history				
	Patient appropriately examined			Conduct appropriate tests				
	Correct diagnosis arrived at			Documented plan of care				
	Plan of care implemented			Patient adequately reviewed				
	Therapist name printed on all notes			Therapists signs off all notes				
Equipment Maintenance	Equipment service schedule			Equipment installed appropriate				
	Damaged equipment labeled/isolated			Equipment inventory up to date				
	Equipment serviced according to schedule by qualified/competent			Equipment manuals available to users/servicing staff				
Emergency	Access to emergency tray			Log of adverse events				
<b>Achieved Score / Total Applicable Score</b>								<b>8</b>

## 19. Summary of scores for all Standard

Standard No.	Standard Description	Achieved Score	Applicable standards Scores	Maximum scores
Standard 1	Legal Establishment, Leadership and Governance			20
Standard 2	Sanitary Facilities			12
Standard 3	Patient focus and Feedback			6
Standard 4	Generation, Storage and management of Records			12
Standard 5	Environment, Health & Safety			26
Standard 6	Passive Room (General Physiotherapy)			6
Standard 7	Active Room (General Physiotherapy)			4
Standard 8	Pediatric Physiotherapy Room			4
Standard 9	Speech Therapy Room			4
Standard 10	Occupational Therapy Room			6
Standard 11	Occupational Therapy gym			4
Standard 12	Outdoor Therapy service			2
Standard 13	Prosthetic and orthotics			12
Standard 14	Rehabilitation & Physiotherapy Practices			8
Total scores				<b>126</b>
		$Total\ Score = \frac{Total\ Achieved\ Scores}{Total\ applicable\ scores} \times 100 = \dots \times 100 = \dots\%$		

## 20. Risk Grading

Score	Risk Level Identified	Colour Code	Tick (/)	Comment
100%	No risk of harm identified	Green		
75 – 100%	Relative risk of harm Identified	Yellow		
50 – 75 %	Moderate risk of harm identified	Orange		
< 50 %	High risk of harm identified	Red		

## 21. Summary of Major Inspection Findings and Recommendations

S/N	Major Findings	Recommendations
1		
2		
3		
4		
5		
6		

7		
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**22. Inspection Team**

S/N	Name	Station	Signature
1			
2			
3			

**23. Signature of Facility Representative**

S/N	Name	Position	Signature
1			
2			

**24. Official Stamp (were available)**