

PERFORMANCE STANDARDS FOR FAMILY PLANNING SERVICES IN NIGERIAN HOSPITALS



Federal Ministry of Health
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FOREWORD

In Nigeria, approximately 800 women out of every 100,000 women giving birth, die as a result of pregnancy and childbirth. This translates to approximately 42,600 maternal deaths in Nigeria every year as a result of pregnancy or childbirth-related complications. This situation has been of great concern to government. Many of the causes of these maternal deaths are related to inadequate child spacing and include haemorrhage, anaemia in pregnancy, and uterine rupture. Family planning, therefore, plays an important role in efforts to reduce maternal deaths. However, the contraceptive prevalence rate for modern methods in Nigeria is only 9.7% (NDHS 2008) although efforts have been ongoing to provide quality family planning services in the country for the past three decades.

The reasons for low uptake of modern contraceptives in the country are varied and include socio-cultural factors, myths and misconceptions about family planning, lack of knowledge and inability to access reproductive health services, as well as poor quality of services. Even when women seek family planning services, they experience delays in receiving care as a result of inadequate or poorly trained staff, lack of necessary equipment, commodity stock-outs, and other avoidable problems. Even when care is provided, it is often not done according to internationally recognized performance standards.

Given this background, government has recently begun to revisit the issue of quality of care in our health facilities, encouraging development and enforcement of critical performance

standards in the different thematic areas. To this end, I am highly delighted to support the development of the performance standards for family planning services in our hospitals and primary health centres. These standards when enforced nationally are bound to raise the quality of care in our health facilities. They will also serve as self or peer review tools and help to improve knowledge of providers, and identify gaps in the quality of care. Once identified, these gaps should be analysed to determine their root causes. Given our inadequate resource base, only interventions that directly address the root causes of poor performance deserve to be addressed.

Finally, let me use this opportunity to thank the stakeholders who got together to develop these set of performance standards and our implementing partners (ACCESS/MCHIP Nigeria and the USAID) who funded the development of the standards. It is my desire to see it used by every health manager and frontline family planning provider to digest the contents of the standards and thereafter take appropriate actions to implement its many recommendations.

Signed: _____

Hon. Minister of Health,
January, 2010.

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Preface

In many countries, the health industry is experiencing a significant transformation designed to improve its functioning and performance and ultimately the health status of the population. This transformation, often called health sector reform, is greatly affecting the way in which services are provided. Some of the main characteristics of this transformation include:

- Emphasis on **evidence-based** health care
- A more **preventive and integrated** approach
- Great emphasis on the **active role of clients and communities**
- Increased focus **on quality, regulation and accountability** within an environment of **efficiency and cost control**
- **Decentralization** of managerial functions, increasing decision-making power at the local level.

The standard-based management and recognition (SBM-R) approach used for the development of these standards is particularly helpful in addressing the challenges presented by health reform. Evidence-based knowledge and best practices do not reach many health facilities and providers because of shortcomings in dissemination of information. In many developing countries, Nigeria inclusive, service delivery guidelines are often placed on a shelf and are not used for day-to-day service provision. The SBM-R approach translates

scientific and technical reference materials such as guidelines and protocols into operational tools containing performance standards that can be used as job-aids or guides by frontline providers and managers in their daily work. In this way, SBM-R helps in the implementation of evidence-based health care and dissemination of best practices.

Coming to the home front, maternal mortality in Nigeria is very high and low contraceptive prevalence rate contributes significantly to this problem. Though various on-going efforts are trying to increase contraceptive prevalence rate and decrease unmet need for contraception, there is a need for standards that should be met by health facilities for providing family planning services. All health facilities in the country need to abide by those standards in order to provide high quality services that will contribute significantly to increasing uptake of modern contraceptive methods thus reducing maternal and newborn morbidity and mortality. Health facilities and providers who meet the standards need to be recognized in order to motivate them to keep up the good work and motivate others to emulate them.

Prior to this effort, Nigeria did not have any such set of operational standards or system of recognition for family planning services. However, the need for such performance standards for family planning services at all levels of health care delivery is a key activity recognized in the *Road Map for Accelerating the Attainment of the MDGs Related to Maternal and Newborn Health in Nigeria* (page 20). To respond to this gap in the road map, the FMOH and ACCESS Nigeria organized a series of activities to obtain national consensus on a set of performance standards for the provision of quality family planning services at both hospital

and primary health care levels. By so doing, the FMOH has been able achieve its set goal of establishing family planning standards of practice for use at all levels of health care delivery. ACCESS and other implementing partners on their part are committed to helping to implement these standards in the project areas.

Signed: _____

Dr. Phillipa Momah

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ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral therapy
BP	Blood Pressure
CHEW	Community Health Extension Worker
DOT	Directly Observed Therapy
FP	Family Planning
FPC	Family Planning Clinic
FPS	Family Planning Services
FMOH	Federal Ministry of Health
HAART	Highly Active Anti-Retroviral Therapy
Hb	Haemoglobin
HIV	Human Immunodeficiency Virus
HLD	High Level Disinfection
IEC	Information, Education and Communication
IM	Intramuscular
IP	Infection Prevention
IU	International Units
IUD	Intra Uterine Device
IV	Intravenous
LMP	Last Menstrual Period
MDG	Millennium Development Goals

MVA	Manual Vacuum Aspiration
NDHS	Nigeria Demographic and Health Survey
PAC	Postabortion Care
PHC	Primary Health Care
POC	Products of Conception
STI	Sexually Transmitted Infection
TB	Tuberculosis

<p>1. The provider performs pre-choice counseling</p>	<p>Observe if the provider:</p> <ul style="list-style-type: none"> • Welcomes client, calls her by name and introduces herself. • Asks how she can help the Client • Administers “<i>Checklist to be reasonably sure that the client isn’t pregnant</i>” • Displays ALL counseling cards • Asks if client has a particular contraceptive method in mind that she wants to use. If YES, continues on Performance Standard No. 2 <p>If Client has no particular method in mind:</p> <ul style="list-style-type: none"> • Asks about client’s reproductive goals (postponement of childbearing debut, spacing of births or birth limitation?) <ul style="list-style-type: none"> ○ If client wants to have children in future, sets aside Vasectomy and Tubal Ligation cards and explains why these are not 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
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	<p style="text-align: center;">suitable for the client.</p> <ul style="list-style-type: none"> • Asks client if she is breast-feeding an infant less than 6 months old <ul style="list-style-type: none"> ○ If YES, sets aside Combined Oral Contraceptive pills and Combined Injectables cards ○ If NO or she has resumed her menstruation, sets aside the LAM counseling card • Asks client if her partner supports her in family planning: <ul style="list-style-type: none"> ○ If YES, proceeds to Standard No. 2 ○ If NO, sets aside male or female condoms cards as well as Natural Family Planning method cards (e.g. Standard-Day Method or Two-Day method cards) • Asks client if there is any method she/he does not want to use or has had trouble 	<p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p>	
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	<p>using in the past</p> <ul style="list-style-type: none"> ○ If YES, sets the appropriate method card aside ○ If NO, keeps the rest of the cards <ul style="list-style-type: none"> ● Assesses client’s HIV and STI risks and precautions <ul style="list-style-type: none"> ○ If NONE, continues with Standard No.2 ○ If YES, revisits male and female condom cards 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>2. The provider performs choice counseling</p>	<p>Observe if the provider</p> <ul style="list-style-type: none"> ● Arranges the remaining counseling cards in order of method effectiveness ● In order of effectiveness and using available job aids, models and counseling cards, discusses 3-5 facts about each of ALL the remaining contraceptive 	<p>_____</p>	

	<p>methods.</p> <ul style="list-style-type: none"> • Ask the client to pick the method most convenient for her • Asks the client to repeat what she/he knows about the chosen method • Corrects any myths, rumours or incorrect information in respect of the method • Asks client questions to determine if she has any medical contraindications to the method chosen. • Answers the client's questions clearly 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>3. The provider performs post-choice counseling</p>	<ul style="list-style-type: none"> • Observe if the provider advises the client about his/her chosen method: <ul style="list-style-type: none"> ○ Method efficacy, ○ How it works, ○ Common side effects, ○ How to use the method, 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

	<ul style="list-style-type: none"> ○ Health benefits and risks. ● Provider verifies client comprehension by asking open-ended questions after each section (e.g. “how do you use the method?”) ● Obtains informed consent from the client ● Explains any test or procedure that will be performed ● Examines the client (only if the chosen method requires an exam and or if the client presents any symptoms). ● Screens the client for any medical precautions to the use of the method ● Explains to the client what to do if problems arise ● Explains to the client how and where she can get re- supplies of the method if necessary. 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
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	<ul style="list-style-type: none"> • Discusses STI/HIV prevention, counseling and testing and offers screening 	<p>_____</p> <p>_____</p>	
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RETURN OR FOLLOW UP VISITS

4. The provider conducts return visits appropriately

Observe with a return client if the provider:

- Asks the client if she is still using the method or has stopped using the method
- Asks about any problems or side effects and discusses options
- Makes sure she is using the method correctly
- Ensures that discussion cannot be overheard (auditory privacy)
- Uses visual aids (posters, job aids, models)

Observe the provider's nonverbal communication

- Friendly/ welcoming/ smiling/ respectful/ non-judgmental
- Listens attentively/ nods head to encourage and acknowledge client's response
- Does not appear rushed/ impatient

	<p>Observe the provider’s verbal communication</p> <ul style="list-style-type: none"> • Phrases questions clearly and appropriately • Uses non-technical terms • Listens to client’s responses closely • Answers client’s questions • Uses language the client can understand. 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
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Total of standards	4
Total observed	
Total achieved and (%)	

**PERFORMANCE STANDARDS FOR FAMILY PLANNING SERVICES (FPS) -
FMOH NIGERIA**

AREA: FAMILY PLANNING METHOD PROVISION

FACILITY: _____

ASSESSOR: _____ **DATE:** _____

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
METHOD PROVISION			
Instructions for the assessor: Observe the following standards with clients that come to the clinic to start a method or to continue or change a method			
INJECTABLES			
1. The provider	Observe in the procedure area if the		

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
<p>provides DMPA or Noristerat according to standards:</p>	<p>provider</p> <ul style="list-style-type: none"> • Asks the woman if she would like to continue with the injectable method or if she is initiating, the provider checks to be reasonably sure that the client is not pregnant • If the client is continuing the injectable method the provider has verified that the last DMPA has been ≤ 16 weeks and for Noristerat ≤ 10 weeks • Washes hands thoroughly with soap and water or uses alcohol rub and dries with a clean, dry cloth or air dries. • Rolls (does not shake) DMPA vial thoroughly but gently • Draws DMPA or Noristerat into the 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>syringe while maintaining sterile technique</p> <ul style="list-style-type: none"> • Forces out any air bubbles before injection • Swabs the injection site with anti-septic (e.g. Savlon, spirit) or soapy water • Injects DMPA or Noristerat deep into the muscle (deltoid in arm or Ventrogluteal) • Pulls back the plunger • If no blood seen, injects DMPA or Noristerat slowly and removes needle • Applies pressure to injection site with cotton without rubbing injection site • Disposes of waste in appropriate infection prevention containers • Washes hands thoroughly with soap 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>and water or uses alcohol rub and dries with a clean, dry cloth or air dry.</p> <ul style="list-style-type: none"> • Records and reminds client when to return • Records in client chart and register 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
MALE AND FEMALE CONDOMS			
<p>2. The provider provides condom (male or female) to the client</p>	<p>Observe if the provider briefly:</p> <ul style="list-style-type: none"> • Emphasizes the use of new condom for each act of sexual intercourse • Explains the importance of consistent use of the condom • Emphasizes the need to check the expiry date of the condom before each use • Demonstrates practically how to use the male or female condom using models • Explains the importance of safe disposal of used condoms 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
COMBINED ORAL CONTRACEPTIVES (COC) / PROGESTERONE ONLY PILL (POP)			
<p>3. The provider provides COC or POP according to standards</p>	<p>Observe whether the provider:</p> <ul style="list-style-type: none"> • Uses the COC/POP check list • Educates the client on the need to commence COC if she is reasonably sure that she is not pregnant. • Checks to see if the woman is breastfeeding an infant less than 6 months • Advices client on possible side effects during the first 1-3 months e.g. weight gain, nausea, vomiting and headache, break through bleeding • Records in chart and register and • Reminds client when to return • Provides the client with 6-12 months 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>worth of pills</p> <p>Indicates that POP is best for breastfeeding mothers or women who cannot tolerate estrogen and that irregular cycles are more common with POPs for women not breastfeeding</p>	<p>_____</p> <p>_____</p>	
IMPLANTS INSERTION e.g. Jadelle, Implanon			

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
4. The provider inserts implants according to standards	Observes if the provider <ul style="list-style-type: none"> • Reviews the clients history to see that she is a candidate for implants • Counsels the woman on the side effects that are common with implants • Verifies that the woman is interested in implants • Explains to clients the procedure of insertion and removal of the implants and what the client should expect during and afterwards to ensure 	 _____ _____ _____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>clients cooperation and relaxation</p> <ul style="list-style-type: none"> • Instructs the client to lie down on a couch with arm stretched out comfortably • Supports arm with arm rest • Wash hands thoroughly with soap and water or uses alcohol rub and dries with a clean, dry cloth or air dry • Wears sterile gloves • Organizes the sterile instruments, drapes, medication, implants, antiseptic solution, cotton, and tape that she will need for the insertion • Cleans the area of insertion with antiseptic solution • Applies sterile drapes, exposing the insertion area only (inside of the upper arm) 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> • Prior to injection of local anaesthetic, checks to see that the needle is not in a blood vessel • Injects local anaesthetic (e.g. Xylocaine) at insertion site • Checks to see that the anaesthetic has taken effect prior to making a small incision • Uses a scalpel to make a shallow 2 mm incision with scalpel just through skin • Advances trocar and plunger to the mark nearest to the hub of the trocar • Removes plunger and loads rod into trocar with gloved hand or forceps • Reinserts plunger and advances it until resistance is felt. • Holds plunger firmly in place with 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>one hand and slides trocar out of incision until it reaches plunger handle.</p> <ul style="list-style-type: none"> • Withdraws trocar and plunger together until the mark nearest the trocar tip just clears incision. (Does not remove trocar from incision). • Moves tip of trocar away from end of rod and holds rod out of the path of the trocar. • Redirects trocar about 15° and advances trocar and plunger to mark nearest hub of trocar. • Places the second rod using the same technique • Palpates the ends nearest the shoulder and incision to make sure rods are placed correctly 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> • Removes trocar only after insertion of second rod • After insertion, Wipes client's skin with alcohol • Brings edges of incision together and closes it with Band-Aid or surgical tape with sterile cotton • Applies pressure dressing snugly • Disposes sharps in puncture proof container e.g safety box • Wash hands thoroughly with soap and water or uses alcohol rub and dries with a clean, dry cloth or air dry. • Gives clear information about probable changes in the bleeding pattern during the menstrual cycle • Records and remind client when to 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	return <ul style="list-style-type: none"> • Records in clients chart and register 	_____ _____ _____	
PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A ²	COMMENTS
IMPLANT REMOVAL			

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
<p>5. The provider removes implants according to standards</p>	<p>If the client is for implant removal, observe if the provider:</p> <ul style="list-style-type: none"> • Asks client her reason for requesting removal and answers any questions • Reviews client’s reproductive goals and asks if she wants another set of JADELLE® rods inserted • Describes the removal procedure and what to expect • Positions woman’s arm and palpates the rods to determine point for removal incision • Prepares for the removal in the same manner as for the insertion (see above) • Under sterile technique. injects small amount of local anesthetic at the incision site and under the end of the rods • Checks for anesthetic effect before making skin incision • Makes a small incision in the skin on the inside of the upper arm, near the 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
IUD INSERTION			
6. The provider inserts IUD according to standards:	<p>Observe whether the provider</p> <ul style="list-style-type: none"> • Has adequately ruled out pregnancy • Screens the client for IUD and adequately discusses side effects such as longer menses and increased dysmenorrhea • Explains the procedure to the client • Assures necessary privacy during the procedure: <ul style="list-style-type: none"> - Keeps the door closed - Does not allow people coming in and out of the room • Sets up instrument kit and supplies • Checks that client has recently emptied her bladder • Performs abdominal examination 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> • Uses the no-touch technique to load the IUD into the inserter while both are in the sterile pack • Washes hands thoroughly with soap and water or uses alcohol rub and dries with a clean, dry cloth or air dry • Puts on new examination, high-level disinfected (HLD) or sterile gloves on both hands • Arranges instruments and supplies on sterile or HLD tray • Performs bimanual examination and checks for uterine position, size, and any abnormalities as well as visual exam of the external genitalia looking for symptoms of chlamydia or gonorrhea infection <ul style="list-style-type: none"> • If the client has signs of STI the 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>provider</p> <ul style="list-style-type: none"> ▪ Gives appropriate treatment according to STIs guidelines. ▪ Counsels the client on the need of the spouse also to get treated for STIs ▪ Asks client which temporary FP method she will use until the infection clears • Inserts bivalve sterile speculum to visualize the cervix • Cleans the cervix with anti-septic solution • Gently grasps the anterior lip of the cervix with tenaculum or volsellum • Determines depth of uterus by carefully passing sound into cervical canal without the sound touching the 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>vulva, walls of the vagina or speculum</p> <ul style="list-style-type: none"> • Applies gentle pressure to advance the sound to reach the uterine fundus • To mark the point on the sound, applies ring forceps to sound where it meets the external cervical os • Sets depth gauge to measured uterine depth with IUD still in sterile package, then completely opens the package • Inserts the Copper T 380A using the “withdrawal” technique • Cuts strings to 3-4 cm in length below the cervix • Places all used instruments in 0.5% chlorine solution for 10 minutes for decontamination 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> • Disposes of waste appropriately • Washes hands thoroughly with soap and water or uses alcohol rub and dries with a clean, dry cloth or air dry • Reminds client of warning signs and side effects • Records and remind when to return • Records in clients chart and register 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
IUD REMOVAL			
7. The provider removes the IUD according to standards.	<p>Observe in the procedure area if the provider</p> <ul style="list-style-type: none"> • Assures privacy 	<p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> • Determines the reason for removal and interest in another method • Prepares necessary equipment • Washes hands thoroughly with soap and water or uses alcohol rub and dries with a clean, dry cloth or air dries • Puts new examination, HLD or sterile gloves correctly on both hands • Inserts sterile bivalve speculum • Cleans the cervix with anti-septic lotion • Grasps strings close to cervix and pulls slowly but firmly to remove IUD • Shows removed IUD to the client • Immerses instruments in 0.5% chlorine solution for 10 minutes for 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	decontamination <ul style="list-style-type: none"> • Disposes of waste appropriately • Washes hands thoroughly with soap and water or uses alcohol hand rub and dries with a clean, dry cloth or air dry • Records and remind client when to return • Records in client chart and register 	_____ _____ _____ _____ _____	
EMERGENCY CONTRACEPTION			
8. The provider offers emergency contraception.	Observe if the provider: <ul style="list-style-type: none"> • Identifies women who have been exposed to unprotected intercourse within the last 5 days • Determines if the woman wishes to 	_____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<p>use an IUD for EC and continued protection or take pills for short-term EC</p> <ul style="list-style-type: none"> • Adequately explains how the pills (or IUD if that is selected) reduce risk for unintended pregnancy • Inserts IUD according to protocol, if selected • If OC is selected, provides for immediate start: <ul style="list-style-type: none"> - Postinor-2 (2 tablets), or - COC (30-35 mcg EE) 4 tablets immediately and 4 tablets 12 hours later, or - COC (50mcg EE) 2 tablets immediately, and 2 tablets 12 hours later - POP 40 tablets STAT 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> • Advises client of possible side effects (nausea and vomiting) • Offers client oral contraception to start as family planning the next day (COC or POP) or condoms • If breastfeeding, advises mother not to offer breast milk for 8 hours. After 8 hours she can resume breastfeeding • Checks to see if the unprotected coitus may have increased her risks of acquiring an STI. She may need to be checked for STIs • Advises client to return to the health center if she does not see her menses within 3 weeks • Record in clients chart and register 	<p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">_____</p>	
MALE OR FEMALE STERILIZATION			

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
<p>9. The provider gives general information about male or female sterilization.</p>	<p>Observe if the provider briefly explains the most relevant characteristics of sterilization as follows:</p> <ul style="list-style-type: none"> • Effectiveness: highly effective (99.5% with vasectomy-effective after 3 months, bilateral tubal ligation (BTL)-immediately) • Advantages: <ul style="list-style-type: none"> - Very effective - Usually safe - Does not affect sexual function • Disadvantages: <ul style="list-style-type: none"> - Not reversible - Short term discomfort/ pain following procedure - Does not protect against STI, including HIV/AIDS - Requires signing a consent form 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or N/A	COMMENTS
	<ul style="list-style-type: none"> Tells client where she/he can access these methods 	_____	

Total of standards	9
Total observed	
Total achieved and (%)	

**PERFORMANCE STANDARDS FOR FAMILY PLANNING SERVICES (FPS) -
FMOH NIGERIA**

AREA: INFORMATION, EDUCATION, AND COMMUNICATION (IEC)

FACILITY:

—

ASSESSOR: _____ **DATE:**

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or NA	COMMENTS
1. Provider uses IEC materials and models for counseling	Observe during one counseling session if the provider: <ul style="list-style-type: none"> • Uses IEC support materials e.g. posters, models 	_____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or NA	COMMENTS
	<ul style="list-style-type: none"> • Uses clear language • Confirms at intervals that the clients understand the messages 	<p>_____</p> <p>_____</p>	
<p>2. There is information on clients' rights for FP services.</p>	<p>Observe in the FP clinic whether:</p> <ul style="list-style-type: none"> • There are culturally appropriate educational materials available on clients' rights with regard to FP services • Materials are written clearly using appropriate language, or have understandable pictures (for illiterate client) • There is information available on where to go in the event of complaints or problems 	<p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or NA	COMMENTS
	<p>related to the care received, located in:</p> <ul style="list-style-type: none"> - Reception area - Counseling room - Family planning procedure room 	<p>_____</p> <p>_____</p> <p>_____</p>	
<p>3. There is an appropriate distribution and placement of educational posters and models for Family Planning.</p>	<p>Verify the existence of educational posters on FP services in the following areas:</p> <ul style="list-style-type: none"> • Reception and waiting area • Examination procedure room • Availability of anatomic models on the table in the counseling room <ul style="list-style-type: none"> - Penile model - Pelvic model - Samples of different methods: 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or NA	COMMENTS
	<ul style="list-style-type: none"> ○ Condom (male and female) ○ IUD ○ Pills ○ Injectables ○ Implants <p>Determine whether such materials are appropriately placed and if they are:</p> <ul style="list-style-type: none"> ● Visible ● In good shape ● Culturally appropriate e.g. models are draped 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>4. The provider links FP service to other RH services e.g. post-abortion care, HIV/AIDS/STI,</p>	<p>Verify if provider has:</p> <ul style="list-style-type: none"> ● 2 ways referral form ● Record of client referred for other RH services 	<p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or NA	COMMENTS
screening for reproductive tract cancers, etc			
5. The clinic works together with the community organization to improve FP services.	Verify whether: <ul style="list-style-type: none"> • There is a record of joint meetings between the health facility and community representatives and other care givers in the community • The health facility helps community to develop/promote: <ul style="list-style-type: none"> - Transportation plans - Referral systems 	_____ _____ _____	
6. The clinic promotes innovative alternatives for	Determine with the director whether: <ul style="list-style-type: none"> • At least one innovative 		

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N, or NA	COMMENTS
<p>improving the quality and coverage of FP services.</p>	<p>initiative has been implemented to improve service quality and/or coverage or to make cultural adaptations to services</p>	<p>_____</p>	

Total of standards	6
Total observed	
Total achieved and (%)	

**PERFORMANCE STANDARDS FOR FAMILY PLANNING SERVICES (FPS) -
FMOH NIGERIA**

AREA: HUMAN, PHYSICAL, AND MATERIAL RESOURCES

FACILITY:

ASSESSOR: _____ **DATE:**

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
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PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
<h1><i>HUMAN RESOURCES FOR FAMILY PLANNING CLINIC (FPC)</i></h1>			
<p>1. The Family Planning Clinic (FPC) has the minimum human resources for providing family planning services.</p>	<ul style="list-style-type: none"> • Verify the existence of at least (per shift): <ul style="list-style-type: none"> – One physician – Two midwives – Community Health Officer/CHEW – Cleaning staff 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
2. Human resources are appropriate for the language needs.	<ul style="list-style-type: none"> • Verify whether: <ul style="list-style-type: none"> – There is at least one provider present at all times who speaks the local language or someone who can provide interpreting services while care is being provided 	_____	
PHYSICAL STRUCTURE, FURNITURE, AND EQUIPMENT FOR FPC			
3. The FPC has a reception area.	<ul style="list-style-type: none"> • Observe if: <ul style="list-style-type: none"> – There is an area to receive and register the clients – There is good ventilation (e.g. window) – The area has good illumination 	_____ _____ _____	
4. The FPC has working toilets for clients and	<ul style="list-style-type: none"> • Observe if the toilets have: 	_____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
<p>providers</p>	<ul style="list-style-type: none"> - Doors that can be locked - Sinks with running water (or bucket with tap) - Clean or paper towels - Toilets with running water (flush or bucket) - Covered garbage can with pedal bin • The toilets are available for: <ul style="list-style-type: none"> - Clients - Providers 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>5. The FPC has an adequate counseling area.</p>	<p>Observe if:</p> <ul style="list-style-type: none"> • The counseling area provides privacy for the client: <ul style="list-style-type: none"> - It has a door that can be closed or area is set up so that people outside cannot 	<p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p>hear what is being said</p> <ul style="list-style-type: none"> • There is a desk • There are samples of various methods available • There are anatomic models e.g. penile model, pelvic, etc • There are IEC materials • Balanced Counseling Strategy (BCS) counseling cards • BCS FP method pamphlet • There are job aids • There are chairs for: <ul style="list-style-type: none"> – Client – Companion – Provider 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
6. The FPC has an adequate	<p>Observe if:</p> <ul style="list-style-type: none"> • The examination/procedure area 		

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
<p>examination/procedure area</p>	<p>provides privacy for the client:</p> <ul style="list-style-type: none"> - Door that can be closed - Curtains or screens to prevent seeing the examination area from the door - Hand washing facilities inside or nearby • And there is: <ul style="list-style-type: none"> - Chair for client and one companion - Chair for provider - Table - Examination table/couch with facility for lithotomy position - Arm support for Jadelle insertion 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> – Step ladder (if couch is high) – Cabinet for storing commodities/materials – Appropriate light source (e.g. angle poise lamp) – Container with 0.5% chlorine solution for decontamination of used instruments – Container with plastic bag for contaminated waste – Adequate ventilation (fan) 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>7. The FPC has equipment to provide family planning services</p>	<ul style="list-style-type: none"> • Verify if the facility has the following equipment ready for use: <ul style="list-style-type: none"> – Vaginal speculum 	<p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> – Sphygmomanometer – Adult stethoscope – Gallipots (at least 2) – Kidney dishes – Scissors – Cheatle forceps – Sponge holding forceps – Tenaculum or Volsellum – Instrument drum for sterilization – Kits for IUD insertion/removal – Kits for Implants insertion/removal – Artery forceps – Drapes – Macintosh 	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> – Instrument table or stand – Sutures – Brushes for washing instruments – Thermometer – Weighing scale – Wall calendar 	 	
<p>8. The FPC has supplies and materials to provide FPS.</p>	<ul style="list-style-type: none"> • Observe if the facility has the following materials: <ul style="list-style-type: none"> – Cotton swab – Gauze – Swab sticks – Examination gloves – Xylocaine ampoules – Face masks – Syringes and needles – Soap 	 	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p>– <i>Antiseptic</i></p>		
<p>9. The FPC uses specific client records and charts</p>	<ul style="list-style-type: none"> • Observe whether the following stationery is available: <ul style="list-style-type: none"> – <i>FP client record forms</i> – <i>Client appointment</i> 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p style="text-align: center;"><i>cards</i></p> <p style="text-align: center;">– <i>Daily</i></p> <p style="text-align: center;"><i>consumption register</i></p> <p style="text-align: center;">– <i>Monthly</i></p> <p style="text-align: center;"><i>summary</i></p> <p style="text-align: center;"><i>forms</i></p> <ul style="list-style-type: none"> • Charts (e.g. Bar, Line, Pie) of service utilization (e.g. New and 		

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> – Syringes /needles – Local anesthetics – Tubal hook – Bivalve speculum – Uterine elevator – Clamps (artery) – Scissors – Sutures – Retractors – Blades and handles – IV stand – Working oxygen cylinder or central supply – Ventilation bag and mask for adult 	 <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
LABORATORY SERVICES			
11. The laboratory is set up to support FP services.	<ul style="list-style-type: none"> • Determine whether there are: <ul style="list-style-type: none"> – Working washbasin with tap – Sturdy bench and shelves – Good lighting – Stool – Armchair – Logbook – Fire-fighting equipment – Toilet for clients 	_____ _____ _____ _____ _____ _____ _____ _____	
12. The laboratory is equipped with the supplies to perform pregnancy test.	<ul style="list-style-type: none"> • Verify that the following are available: <ul style="list-style-type: none"> – Dipsticks for pregnancy test 	_____	
13. The laboratory is equipped with the	<ul style="list-style-type: none"> • Verify that the following are available: 	_____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	rapid tests		
COMMODITY SUPPLY			
14. The FPC has storage conditions for commodities	Verify if: <ul style="list-style-type: none"> • There is a cupboard that is: <ul style="list-style-type: none"> – Clean – Can be locked – Dry, kept away from direct sunlight • Products are kept in manner to achieve FEFO (first expired, first out) 	_____ _____ _____ _____	
15. The FPC has available all FP commodities	<ul style="list-style-type: none"> • Verify the availability of: <ul style="list-style-type: none"> – Oral pills <ul style="list-style-type: none"> ○ Combined Oral Contraceptives 	_____ _____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> (COCs) <ul style="list-style-type: none"> ○ Progestin Only Pills (POP) ○ Emergency contraception – Female condoms – Male condoms – Injectables <ul style="list-style-type: none"> ○ Noristerat or Depo-Provera – IUD – Implants <ul style="list-style-type: none"> ○ Implanon or Jadelle – Facilities for sterilization (female and male) 	 <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
16. The FPC maintains a minimum/ maximum inventory control	<ul style="list-style-type: none"> ● Ask if they maintain minimum/ maximum inventory control 	<hr/> <hr/>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
system	system <ul style="list-style-type: none"> • Observe records • Observe requisition, issue forms 	_____	
17. The FPC maintains records	Observe if the following are available: <ul style="list-style-type: none"> • Daily consumption register • Requisition and issue forms • Cost recovery records • Store distribution reports 	_____ _____ _____ _____	

Total of standards	17
Total observed	
Total achieved and (%)	

PERFORMANCE STANDARDS FOR FAMILY PLANNING SERVICES (FPS) -
FMOH NIGERIA

AREA: INFECTION PREVENTION

FACILITY: _____

ASSESSOR: _____ DATE: _____

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
1. The FPC is clean.	Check during the visit for the absence of dust, blood, trash, used needles and syringes and cobwebs in the following areas:	_____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> • Admission/registration/examination room • Family planning procedure room • Operating Theater (OT) • Areas for cleaning the instruments (central supply and sterilization department [CSSD], maternity and OT) • Toilets in the FPC • Toilets in the OT 	<hr/> <hr/> <hr/> <hr/> <hr/>		
<p>2. The FPC has sharps containers available and properly uses sharps containers</p>	<p>Observe in each of the following areas:</p> <p>a. Family planning procedure room</p> <p>b. Operating Theater</p> <p>Whether:</p> <ul style="list-style-type: none"> • The sharps containers are appropriate: cardboard box, hard plastic containers, cans that are closed, with only a small opening for disposing of syringes with needles 	<p>a</p> <hr/>	<p>b</p> <hr/>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> • The sharps containers are located at “point of use” • Syringes with needles are disposed of immediately after use, following decontamination with a 0.5% chlorine solution, without being re-capped and without being taken apart 	<p>—</p> <p>—</p>	<p>—</p> <p>—</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> • Containers are closed and collected when three-quarters full • Each sharps container is used only once and is discarded when three-quarters full 	—	—	
<p>3. The FPC has antiseptics and disinfectants available in amounts sufficient for one month of operation.</p>	<p>Verify in the storeroom and/or central stockroom, by comparison with usage during the previous month as indicated on the stock control form, the existence and amounts of the following consumable materials:</p> <ul style="list-style-type: none"> • Antiseptics: <ul style="list-style-type: none"> - Chlorhexidine (solution) - Alcohol, 60–90% (methylated spirit) • Disinfectants: 	—	—	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> - Sodium hypochlorite (bleach) 			
<p>4. The concentration and use of antiseptics (for skin and/or mucous membrane preparation) are correct.</p>	<p>Observe the FPC:</p> <ul style="list-style-type: none"> a. Family planning procedure room b. Operating Theater <p>Whether:</p> <ul style="list-style-type: none"> • The antiseptic concentration is labeled with the name and concentration of the antiseptic as follows: <ul style="list-style-type: none"> - Ethyl, isopropyl alcohol (60%–90%), or - Cetrimide and chlorhexidine gluconate (2%–4%) (e.g., Savlon®), or - Chlorhexidine gluconate (2%–4%) (e.g., Hibiclens®), 	a	b	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<p>Hibiscrub®, Hibitane®, or</p> <ul style="list-style-type: none"> - Iodine preparations (1%–3%) e.g., Lugol’s, or - Iodophor (1:2500; e.g., Betadine®) <ul style="list-style-type: none"> • Antiseptics are prepared in small, reusable containers for daily use 	—	—	
		—	—	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> • The reusable containers are thoroughly washed with soap and water, rinsed with clean water, and dried before refilling • Reusable containers are labeled with date each time they are refilled • Gauze or cotton wool is stored in dry containers without an antiseptic • Instruments and other items are stored in dry containers without antiseptics • Pick-up forceps are stored in dry containers without antiseptics 	<p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p>	<p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
<p>5. The decontamination of instruments and other articles (immediately after use and before cleaning) is performed properly.</p>	<p>Observe in each FPC if the person cleaning the instruments complies with the following steps and recommendations:</p> <ul style="list-style-type: none"> a. Family planning procedure room b. Operating Theater <ul style="list-style-type: none"> • The concentration of chlorine solution is 0.5%: Liquid chlorine: <ul style="list-style-type: none"> - If using a concentration of 3.5%, uses 1 part bleach for 6 parts water, OR - If using a concentration of 5%, uses 1 part bleach to 9 	A	B	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<p style="text-align: center;">parts water</p> <ul style="list-style-type: none"> • A new chlorine solution is prepared at the beginning of each day or sooner if needed • Plastic containers are used for decontamination • Instruments and other items are soaked in the 0.5% chlorine solution for 10 minutes • After 10 minutes, instruments and other items are removed from the chlorine solution and cleaned immediately 	—	—	
		—	—	
		—	—	
		—	—	
		—	—	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> • There is a counter for instruments to dry <p>If instruments are wrapped/packed in this area:</p> <ul style="list-style-type: none"> • There is a clean work area for wrapping/packing instruments with: <ul style="list-style-type: none"> - A work table - Shelves for holding clean packages - Office desk for record keeping 	<p>—</p> <p>—</p> <p>—</p>	<p>—</p> <p>—</p> <p>—</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
7. The process of cleaning instruments and other items is performed properly.	Observe in each of the following areas if the person cleaning the instruments complies with the following steps and recommendations: a. Family planning procedure room b. Operating Theater <ul style="list-style-type: none"> • Wears: <ul style="list-style-type: none"> - Utility gloves - Mask and eyewear protection or face shield - Plastic apron - Rubber boots or enclosed shoes(for mini theatre) • Utilizes: <ul style="list-style-type: none"> - Soft brush - Detergent (liquid or 	a	b	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<p style="text-align: center;">powder)</p> <ul style="list-style-type: none"> • Scrubs instruments and other items under the surface of water, completely removing all blood and other foreign matter • Disassembles instruments and other items with multiple parts, and cleans in the grooves, teeth, and joints with a brush • Rinses the instruments and other items thoroughly with clean water • Allows instruments and other items to air-dry, or dries with a clean towel • Washes hands after removing gloves and other personal 	—	—	
		—	—	
		—	—	
		—	—	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	protective equipment: - Washes hands with running water and soap for 10–15 seconds and dries with an individual clean towel, paper towel or allows hands to air-dry, OR - Rubs hands with 3–5 ml of an alcohol-based solution until the hands are dry (if hands are not visibly soiled)	—	—	
8. The High Level Disinfection (HLD) process is performed properly according to the method utilized.	Observe during the HLD cycle if the standard conditions listed below are followed: If boiling: <ul style="list-style-type: none"> • All cleaned, disassembled instruments are totally 			

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p>immersed in water before lid is closed</p> <ul style="list-style-type: none"> • The lid is closed • Instruments are boiled for 20 minutes starting from the time a rolling boil begins • After 20 minutes, instruments are removed with HLD or sterile forceps or gloves, dried, and stored in HLD containers <p style="text-align: center;">AND/OR</p> <p>If chemical:</p> <ul style="list-style-type: none"> • Glutaraldehyde (2–4%), formaldehyde (8%), or 0.1% chlorine solution (prepared with boiled or sterile water): <ul style="list-style-type: none"> - All cleaned, disassembled instruments are immersed 	<p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p> <p style="text-align: center;">—</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p>in solution for 20 minutes in a container with a lid</p> <ul style="list-style-type: none"> - There is a label on the container indicating the starting time of HLD - There is a label on the container indicating the date of reconstitution, and it is within 14 days if using glutaraldehyde, 28 days if using formaldehyde, or within 24 hours, if using chlorine solution - After 20 minutes, instruments are removed with HLD or sterile forceps or gloves, rinsed with sterile or boiled 	<p>—</p> <p>—</p> <p>—</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	water, dried, and stored in HLD containers		
<p>9. The process of packaging of instruments and other items to be sterilized is performed properly.</p>	<p>Observe during the packaging process if:</p> <ul style="list-style-type: none"> • The instruments are clean and dry <p>If packaging items to be sterilized through steam sterilization (autoclave):</p> <ul style="list-style-type: none"> • Cloth items have been laundered, dried, and are intact (have no holes) • All jointed instruments are opened or in unlocked position • All instruments are disassembled • The types of materials used for wrapping are: 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
performed properly to avoid injuries and contamination.	a. Family planning procedure room b. Operating Theatre Medical waste (e.g., cotton wool, gauze, etc): <ul style="list-style-type: none"> • Medical waste is placed in a washable container with a leak-proof plastic bag • Containers are closed and collected when three quarters full 	 _____ _____	 _____ _____	
12. The disinfectant cleaning solution is prepared properly.	Verify if the disinfectant cleaning solution is prepared properly in each of the following areas: a. Family planning procedure room b. Operating Theatre	a _____	b _____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	<ul style="list-style-type: none"> • A 0.5% chlorine solution is prepared • Detergent that does not contain an acid, ammonia, or ammonium is added to the 0.5% chlorine solution until a mild soapy cleaning solution is made 	—	—	
13. The cleaning equipment is decontaminated, cleaned, and dried before reuse or storage	<p>Observe in the following areas if the mops, buckets, brushes and cleaning cloths are:</p> <ul style="list-style-type: none"> a. Family planning procedure room b. Operating Theatre <ul style="list-style-type: none"> • Decontaminated by soaking for at least 10 minutes in 0.5% chlorine solution or other approved disinfectant after 	a	b	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA		COMMENTS
	use <ul style="list-style-type: none"> • Washed in detergent and water after use • Rinsed in clean water • Dried completely before re-use or storage 	—	—	
		—	—	
		—	—	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
Waste management			
14. There is a written plan for waste management.	Verify with the person responsible for the waste management if: <ul style="list-style-type: none"> • There is a written plan for waste management including: <ul style="list-style-type: none"> - Segregation at point of use - Transportation - Interim storage - Final disposal 	_____ _____ _____ _____	
15. The health facility promotes good practices for waste management and disposal.	Observe if: <ul style="list-style-type: none"> • There are sufficient dustbins outside the health facility (in the grounds) for general waste to avoid littering • The grounds (outside the health facility) are clean 	_____ _____	
16. The staff uses	Observe during the visit, if:		

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
<p>personal protective equipment when handling waste.</p>	<ul style="list-style-type: none"> • Housekeeping personnel wear personal protective equipment when handling medical waste: <ul style="list-style-type: none"> - Utility gloves - Rubber boots - Plastic apron - Masks covering nose and mouth • Disposable personal protective equipment (examination gloves, surgical masks) are decontaminated in 0.5% chlorine solution (if applicable) and disposed in a leak-proof container after use • Re-usable personal protective equipment (e.g., utility gloves, gumboots, plastic apron, face shield) are reprocessed after use: 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> - Decontaminated in 0.5% chlorine solution - Washed with soap and water - Dried and stored 	<hr/> <hr/>	
<p>17. The staff washes hands after handling waste and removing gloves.</p>	<p>Observe if housekeeping staff performs hand hygiene after handling waste and removing gloves:</p> <ul style="list-style-type: none"> • Wash hands with running water and soap for 10–15 seconds and dry with an individual clean towel, paper towel or allow hands to air-dry, or • Rub hands with 3–5 ml of an alcohol-based solution until the hands are dry (if hands are not visibly soiled) 	<hr/> <hr/>	
<p>18. There is a system for interim storage of waste.</p>	<p>Observe if:</p> <ul style="list-style-type: none"> • The traffic in the interim storage area is controlled (accessible only 		

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p>to the in-charge personnel)</p> <ul style="list-style-type: none"> • Containers are leak-proof and closed with tight lids • All waste is inside of the containers • The interim storage area is free of waste on the grounds <p>Verify with the manager if:</p> <ul style="list-style-type: none"> • There is a written plan for a short-term storage: maximum two days, and cleaning of storage area and containers • Waste is transported in vehicles or containers used only to transport waste • Vehicles transporting waste have a cover or tarp/tarpaulin to prevent waste from littering during 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	transport		
19. The contaminated waste is disposed of properly to avoid injuries and contamination	Verify if: <ul style="list-style-type: none"> • Contaminated waste is disposed of on-site through: <ul style="list-style-type: none"> - incinerating, or - burying, or - burning in a closed pit 	_____ _____ _____	
20. The non-contaminated waste is disposed of properly to decrease the volume of contaminated waste.	Verify if: <ul style="list-style-type: none"> • Non-contaminated waste is disposed of on-site through: <ul style="list-style-type: none"> - incinerating, or - burying, or - burning in a closed pit <p style="text-align: center;">OR</p> Non-contaminated waste is sent off-site (municipal waste or sanitary landfill)	_____ _____ _____ _____	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
<p>21. The waste disposal process is performed properly according to the method utilized.</p>	<p>Verify:</p> <p>If the waste is incinerated:</p> <ul style="list-style-type: none"> • The traffic in this area is controlled and accessible only to the in-charge personnel • During incineration, there are flames • Ash from incinerated material is disposed of as non-contaminated waste • There is no waste lying around the grounds <p style="text-align: center;">Or</p> <p>If the waste is buried in a pit:</p> <ul style="list-style-type: none"> • The area is not accessible to other staff, the community, and domestic animals • The burial site is lined with a 	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<p>material of low permeability (e.g., clay)</p> <ul style="list-style-type: none"> • The burial site is at least 50 meters away from any water source, and it is located in an area free of floods • The pit is about 1 meter square and 2 meters deep • The disposed waste is covered with 10–15 cm of soil each day • The final layer of soil is 50–60 cm • The burial pit last 30–60 days maximum • There is no waste lying around the grounds <p style="text-align: center;">Or</p> <p>If the waste is burned:</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

PERFORMANCE STANDARDS	VERIFICATION CRITERIA	Y, N or NA	COMMENTS
	<ul style="list-style-type: none"> • The area is not accessible to other staff, the community, and domestic animals • The waste is burned in a small designated area • The waste is transported to the area just before burning • During burning, there are flames • Person in charge remains with the fire until it is out • A layer of soil is used to cover the burned waste • The grounds around this area are free of waste 	<p>_____</p> <p>_____</p> <p>_____</p>	

Total of standards	21
Total observed	

Total achieved and (%)	
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**PERFORMANCE STANDARDS FOR FAMILY PLANNING SERVICES
(FPS)
FEDERAL MINISTRY OF HEALTH, NIGERIA**

SUMMARY FORM

Name of health facility: _____ **Date of assessment:** _____

AREAS	NUMBER OF STANDARDS	STANDARDS ACHIEVED	
		NUMBER	%
<i>FAMILY PLANNING COUNSELING</i>	6		
<i>FAMILY PLANNING METHOD PROVISION</i>	9		
INFORMATION, EDUCATION, AND COMMUNICATION	6		
HUMAN, PHYSICAL, AND MATERIAL RESOURCES	14		
INFECTION PREVENTION	21		

GENERAL TOTAL	56		
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