



TRAINING GUIDE FOR INTRODUCTION TO SOFTWARE FOR IDEAL CLINIC/CHC STATUS DETERMINATIONS

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Table of Contents

1. BACK GROUND ON IDEAL CLINIC PROGRAMME	2
1.1 IDEAL CLINIC PROGRAMME.....	2
1.2 DEFINITION	2
1.3 COMPOSITION OF THE IDEAL CLINIC DASHBOARD.....	2
1.4 WEIGHING OF ELEMENTS	3
1.5 METHOD OF MEASURING.....	4
1.6 RESPONSIBILITY.....	4
1.7 SCORING.....	4
2. CONDUCTING STATUS DETERMINATIONS.....	6
3. CAPTURING OF DATA.....	7
4. OBTAINING ACCESS TO IDEAL CLINIC SOFTWARE.....	8
4.1 ACCESSING THE WEB-BASED (LIVE) SOFTWARE	8
4.2 ACCESSING THE WEB-BASED (LIVE) TEST SITE.....	9
4.3 ACCESSING THE OFFLINE MODULE	9

1. Back ground on Ideal Clinic programme

1.1 Ideal clinic programme

The Ideal Clinic (IC) initiative commenced in July 2013 by the National Department of Health as a way of systematically improving the deficiencies in Primary Health Care clinics in the public sector. The initiative is also supported by the Department for Planning Monitoring and Evaluation (DPME) through the Operation Phakisa programme.

1.2 Definition

An Ideal Clinic is a clinic with good infrastructure¹, adequate staff, adequate medicine and supplies, good administrative processes and adequate bulk supplies that use applicable clinical policies, protocols, guidelines as well as partner and stakeholder support, to ensure the provision of quality health services to the community. An Ideal Clinic will cooperate with other government departments as well as with the private sector and non-governmental organizations to address the social determinants of health. PHC facilities must be maintained to function optimally and remain in a condition that can be described as the “Ideal Clinic”. Integrated clinical services management (ICSM) will be a key focus within an Ideal Clinic.

1.3 Composition of the Ideal Clinic dashboard

The Ideal Clinic dashboard (see example below) is the tool that is used to measure the status of the clinic, determining whether the health facility is Ideal or not. The dashboard comprises of 10 components and 33 Sub components. Within each sub component there are various elements that speak to quality and safety. Some elements are further defined by checklists with measurements.

IDEAL CLINIC REALISATION AND MAINTENANCE DASHBOARD								
National Core Standards	Component	Sub Component	ELEMENTS	Weight	MM	Level of responsibility	Comments	Check-list
PATIENT RIGHTS	1. Signage and Notices: Monitor whether there is communication about the facility and the services provided		1 All way-finding signage in place 2 Display board reflecting the facility name, service hours, physical address, contact details and service package details is visible displayed at the entrance of the facility 3 The NO WEAPONS, NO SMOKING, NO ANIMALS (except for service animals) and NO HAWKERS sign is clearly sign posted at the entrance of the facility 4 Display board indicating a disclaimer on searches is visibly sign posted at the entrance of the facility 5 The Vision, Mission and Values of the district must be visibly displayed 6 The facility organogram with the contact details of the manager is displayed on a central notice board 7 All service areas within the facility are clearly signposted		(+) (+) P D D HF HF			Y

¹ Physical condition and spaces, essential equipment and information and communication tools

1.4 Weighing of elements

Each element is weighted as Non-negotiable vital, vital, essential or important. The definitions for each weight are as follows;

Non-negotiable Vital (NNV)

These are elements that can cause loss of life or prolonged period of recovery.

Vital (V)

Extremely important (vital) elements that require immediate and full correction. These are elements that affect direct service delivery to and clinical care of patients and without which there may be immediate and long-term adverse effects on the health of the population.

Essential (E)

Very necessary (essential) elements that require resolution within a given time period. These are process and structural elements that indirectly affect the quality and safety of clinical care given to patients.

Important (I)

Significant (important) elements that require resolution within a given time period. These are process and structural elements that affect the quality of the environment in which healthcare is given to patients.

1.5 Method of measuring

The method of measuring each element is indicated with a symbol. See table below for explanation of each method of measuring

Key	Method of Measurement
	a) Check applicable documents e.g. policies, guidelines, standard operating procedures, data, etc
	b) Ask staff members and or clients for their views or level of understanding
	c) Observations and or conclusion
	d) Test the functionality of equipment/systems

1.6 Responsibility

The responsibility to achieve each element lies with four levels within the government structure. The four levels are set out in the table below

Key	Description
NDoH	National Department of Health
P	Province
D	District
HF	Health Facility

1.7 Scoring

Performance is scored in line with two colours as follows:

Green		= Achieved (Yes)
Red		= Not achieved (No)

For elements without a checklist

Binary scoring: 1 or 0

Achieved (**Green**): Yes = 1

Not-achieved (**Red**): No = 0

For elements with a checklist

Fractional scoring: e.g. 10/20 measures compliant on checklist, score = 0.5

Achieved (**Green**): NNV = 1; V \geq 0.8; E \geq 0.6; I \geq 0.5

Not-achieved (**Red**): NNV < 1; V < 0.8; E < 0.6; I < 0.5

When conducting a status determination (SD), refer to the Ideal Clinic Manual for clear instructions on what needs to be assessed.

The average score according to the weights assigned to the elements determines whether Ideal Clinic status is achieved or not.

The Ideal Clinic/CHC categories is set out in the table below:

Weights	Silver	Gold	Platinum
Non-negotiable Vitals	100%	100%	100%
Vital	60-69%	70-79%	≥80%
Essential	50-59%	60-69%	≥70%
Important	50-59%	60-69%	≥70%

2. Conducting Status Determinations

There are four different types of status determinations that can be conducted. The type of status determination is determined by the status determination role of the staff that will conduct the status determination as explained below.

- **SD by the Facility manager**

A SD by the Facility manager is recommended to prepare the facility for the SD by the Perfect Permanent Team for Ideal Clinic Realization and Maintenance (PPTICRM). Once conducted, short fall must be corrected before the district PPTICRM SD takes place.

- **SD by the district or provincial PPTICRM**

The SD by the PPTICRM is compulsory and must be conducted once in a financial year. The first SD must be conducted at the start of the financial year, before the end of May. Short fall must be corrected before the district peer PPTICRM SD takes place.

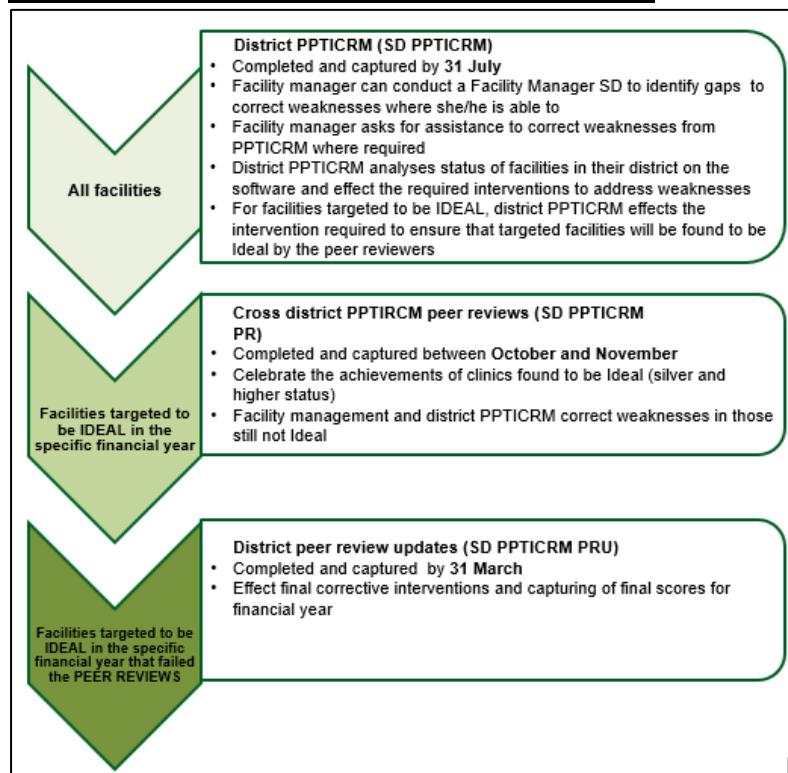
- **SD by district peer reviewer's PPTICRM Peer Review (PR)**

Only the top scoring 500 facilities will be selected for this review. The SD by the PPTICRM PR is conducted by the PPTICMR of a neighbouring district within the same province. The PPTICRM PR must commence on 19 September and be completed by 7 October.

- **SD by neighbouring PPTICRM Peer Review Update (PRU)**

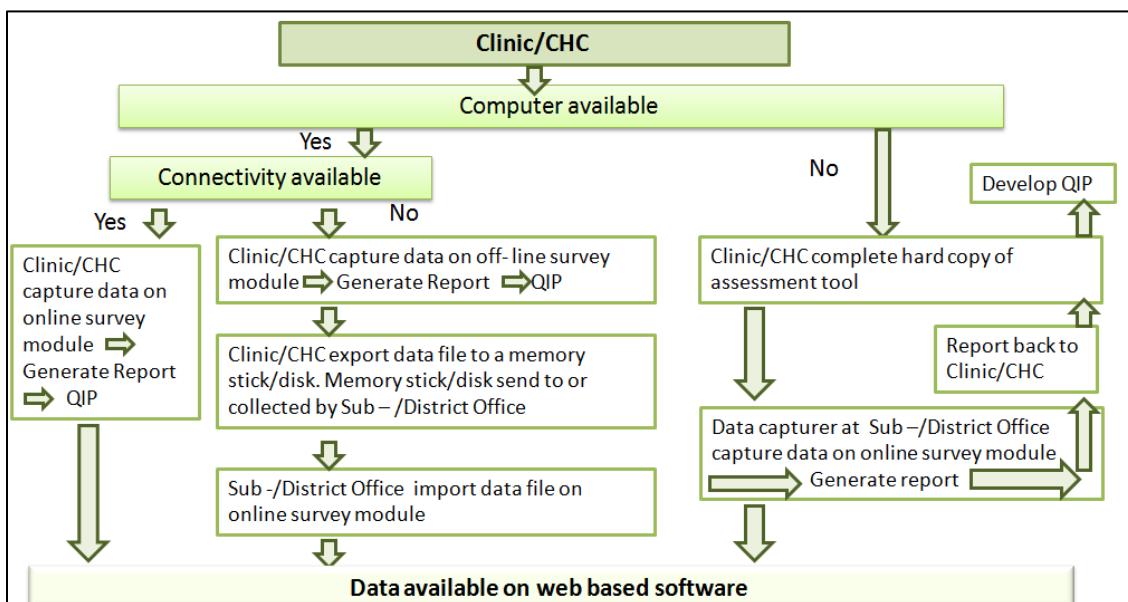
Only facilities that did not obtain an Ideal Clinic category during the peer reviews must be reassessed by the district itself once shortfalls in those clinics were corrected.

Flow diagram of SD process for Financial year:



3.Capturing of data

A web-based application (<https://www.idealclinic.org.za>) was designed to monitor and evaluate the implementation of the IC Initiative. The software can also be installed as a standalone application should connectivity to the web-based interface not be available. The standalone application can be downloaded from the IC website. See flow diagram of data flow below.



The reporting tool will present the information in a meaningful way that will support analysis, findings and recommendations effectively. The reporting system will allow for individual facility reports, aggregated reports at sub-district, district, provincial and national levels. These reports will assist facilities, sub- districts, districts, provincial and national departments to monitor and evaluate the quality of services in PHC facilities and to develop quality improvement plans accordingly to close the identified gaps.

4. Obtaining access to Ideal Clinic software

4.1 Accessing the web-based (live) software

To access the online live IC software go to the Department of Health's website (<https://www.health.gov.za>) there is a tab named Ideal Clinic. Clinic on it to redirect you to the Ideal Clinic website (<https://www.idealhealthfacility.org.za>) or you can access the site directly as well. A user must have a user account to access the online live IC software.

There are two types of user accounts. Firstly an account that allows the user to view reports and dashboards and secondly an account that also allows a user to capture data on the dashboard.

There are four types of permissions to capture data

- SD by Facility Manager
This type of permission will allow the user to capture only SDs that was conducted by the Facility manager.
- SD by PPTICRM
This type of permission will allow the user to capture SDs that were conducted by the district PPTICRM.
- SD by PPTICRM PR
This type of permission will allow the user to capture SDs for peer reviews that were conducted by another district's PPTICRM.
- SD by PPTICRM PRU
This type of permission will allow the user to capture SDs for peer review updates that were conducted by the district's PPTICRM.

To request a user account the Ideal Health Facility – User Registration Form, see below, must be completed and submitted to the staff member responsible for verifying/creating user accounts at the Provincial or District office.

2.25in

 **Ideal Health Facility - User Registration Form**

All existing users of the web Ideal Health Facility Information System (WHFIS) that have not previously completed this form must complete it. Thereafter existing users that want to change/edit their previously assigned permissions, must also complete this registration form, only indicating changes/additions. Kindly complete the required user information and upload the form onto the WHFIS system. ONLY after signoff and approval, will the user be created or edited.
* fields are Compulsory Information that must be completed.

TYPE OF REQUEST (Tick where applicable)		
<ul style="list-style-type: none">• New users must tick the 'New User' box.• Existing users must tick the 'Existing User' box AND specify what type of change to the user account is required e.g. Orgunit, user role, permission set, password reset.• If Termination box is ticked, provide the termination date. *	New User	<input type="checkbox"/>
	Existing User	<input type="checkbox"/>
	Password reset/account reactivation	<input type="checkbox"/>
	Change/addition of user role	<input type="checkbox"/>
	Change of Organisational Units Access	<input type="checkbox"/>
	Termination	<input type="checkbox"/>
	Termination Date:	

Personal Details	
First Name (in full) *	
Surname (in full) *	
Email Address *	
Position (eg. Data Capturer, Information Officer, deputy director, CEO etc.) *	
Place of employment *	
ID Number *	

Once the account has been created the user will receive an e-mail on the e-mail address that was used to register the account. See example below:

"From: <idealclinic@asgworld.co.za>
Date: Tue, Feb 24, 2015 at 9:44 AM
Subject: Password Reset: Ideal Clinic Monitoring System
To: susan.botha@gmail.com

Hi, Susan Botha,

Please use the following details to login to the Ideal Clinic Monitoring System:

Link: <https://www.idealhealthfacility.org.za/>
USERNAME: SBotha
PASSWORD: eNMku@0P

When the user login for the first time, the user has to enter their own password twice that must consist of eight characters that include one capital letter and one numerical number. The user must access their account at least once in three months, else the account will be disabled.

4.2 Accessing the web-based test site

Staff from the provincial office, PPTICRM or District office that will be responsible to train staff on the IC software can access the test site on <https://test.idealhealthfacility.co.za> to train staff to capture assessments etc.

The details to log onto the test site are as follows:

Username: ICRM

Password: Password123

4.3 Accessing the Offline module

Users that work on the off line module do not need to have a user account. A generic account that is 1234 is used to access the Offline module.