

PAEDIATRIC STAFF DATABASE



FACILITY NAME: _____

YEAR : _____



KWAZULU-NATAL PROVINCE

HEALTH
REPUBLIC OF SOUTH AFRICA

GROWING KWA-ZULU NATAL TOGETHER

Facility Name:								Year:							
Staff Rotation															
<ul style="list-style-type: none"> • Please indicate for which months the staff member has been permanently allocated in the Paediatric unit. Please include medical and nursing staff • A minimum of 66% of paediatric staff should be non-rotational 															
N ^o	Name	Desig	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	
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PTO for Staff training

Facility Name:							Year:				
Staff Training and skills (Medical and Nursing)											
<ul style="list-style-type: none"> • Please indicate what training the staff member has received and whether she has performed the required skills assessments • Each staff member is required to have 1 skills assessment every 6 months. A different audit must be used for each staff member 											
N ^o	Name	Desig	Post Basic (Specify)	ETAT (Date)	IMAM (Date)	18-20 hour MBFI (Date)	40 hour IYCF (Date)	PMTCT (Date)	Skills Assess Q1 (Score)	Skills Assess Q3 (Score)	
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Abbreviations:	MBFI= Mother Baby Friendly Initiative; IYCF = Infant & Young Child Feeding; PMTCT= prevention of Mother to Child transmission; ETAT= Emergency triage and treatment; IMAM=Integrated Management of Acute Malnutrition										

