

Outline of the Norms and Standards Regulations applicable to Different Categories of Health Establishments

30 October 2018



National Core Standards and six priorities

National core standards

1. Patient rights

2. Safety, clinical risk

3. Clinical support services.

4. Public health

5. Leadership & corporate governance

6. Operational management

7. Facilities & infrastructure

6 Priorities

Patient Rights:

1. Values and attitudes
2. Waiting times
3. Cleanliness

Patient Safety, Clinical Governance & Care:

4. Patient safety
5. Infection prevention and control

Facilities & infrastructure

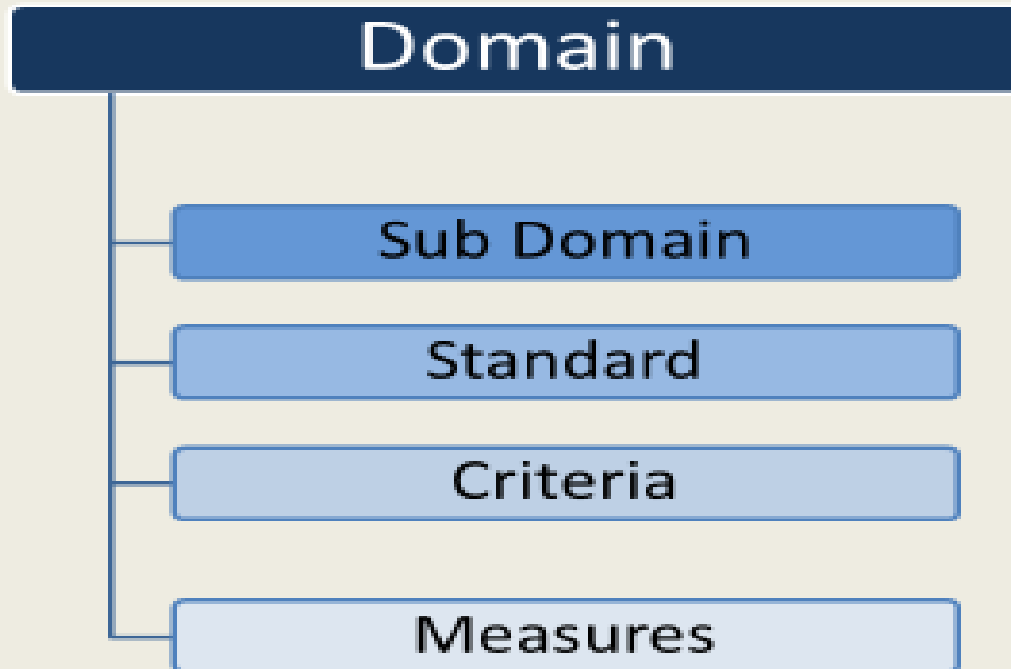
3. Cleanliness/infection control
4. Patient safety and security (e.g maintenance, waste management)

Clinical Support Services:

6. Availability of medicines and supplies

9/29/2017

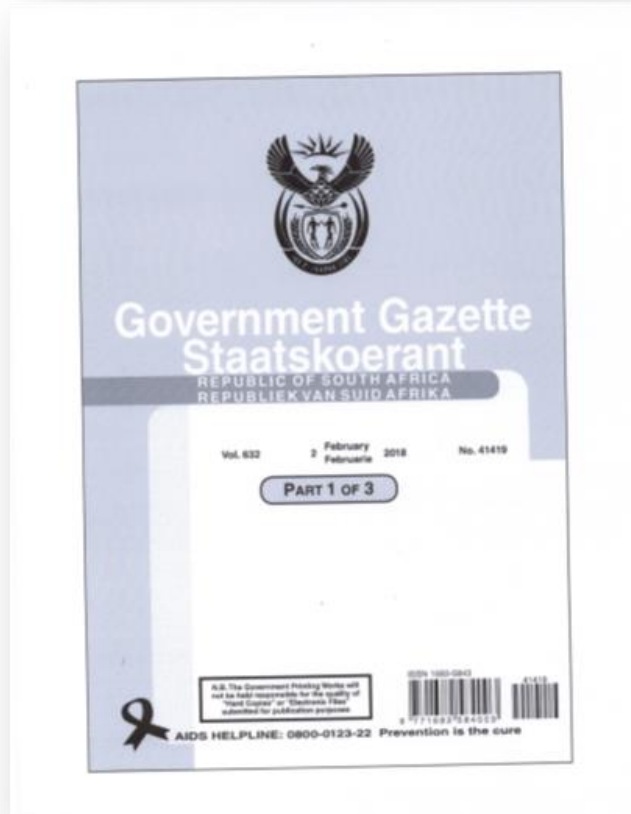
Structure of standards



- **Domain** - an aspect of service delivery where quality or safety can be at risk
- **Sub Domain** - further break down the domains into subsections or critical areas which combined describe the scope of that domain
- **Standards** - define what is expected to be delivered in terms of quality care; reflect the expected situation resulting from successful implementation of a policy, procedure or system.
- **Criteria** - elements setting out the requirements to achieve compliance with the standard; are measurable and achievable
- **Measures** - the means or evidence for determining whether the criteria have been met; examine aspects that can be seen, heard or felt by the assessors and give reasonable assurance that a standard is met

9/29/2017

Promulgated Norms and Standards



- *Promulgated on 2 February 2018*
- *Will come into operation 12 months after promulgation, February 2019*

Chapters / Domains

- *There are seven chapters in the regulations*
- *Chapter 1-definitions,purpose and scope*
- *Five Chapters(from chapter 2-6) in the regulations which will translate to Domains in the Inspection tool*
 - User rights
 - Clinical governance and clinical care
 - Clinical support services
 - Facilities and Infrastructure
 - Governance and Human Resources
- *Seventh chapter – General provisions – does not relate to a clinical environment and will therefore not be used to create a domain in the inspection tools*

Regulation title / Sub-domain

- *Each regulation is given a title to summarise its content*
 - *User Rights, Facilities and Infrastructure*
- *Each Regulation title will be used to create a sub-domain name*
 - *User Information, Management of buildings and grounds*

Promulgated Norms and Standards

4. *User Information:*

services, costs, user experiences

5. *Access to Care:*

Emergency patients: triage, emergency transport, appropriate care (stabilisation)

Referrals

6. *Health Records:*

Records management system including confidentiality

Biographical data

Documentation of care provided

Consent

Discharge report

7. *Clinical Management systems:*

Clinical policies/guidelines available and communicated,

Clinical risk management systems

8. *IPC:*

Handwashing, isolation, linen, protective equipment and immunizations

9. *Waste management:*

Containers available; collection, handling, storage and disposal of waste

Promulgated Norms and Standards (cont. 1)

10. ***Medicines and medical supplies:***
 - Availability and stock control
11. ***Diagnostic services:***
 - Accreditation by regulatory body
12. ***Blood Services:***
 - Cold chain maintenance
 - Hazardous waste management
 - Adverse blood reaction management
13. ***Medical equipment:***
 - Licensing
 - All required medical equipment available in each unit
14. ***Management of buildings and grounds:***
 - Compliance certificates, maintenance plan, emergency access, ventilation
15. ***Engineering services:***
 - Electricity, lighting, medical gas, water, sewage system available and functional without interruption
16. ***Transport:***
 - Vehicles licensed and maintained
 - Drivers have valid driver's licenses

Promulgated Norms and Standards (cont. 2)

17. Security:

Security staff able to respond to incidents, threats and risks

18. Functional Governance structure with ToRs

19. HRM:

HRM plan; Performance management, monitor registration of health care professionals

20. Occupational Health:

Comply with OHS Act

21. Adverse Events:

Reporting systems in place, documentation and monitoring of events

22. Waiting times:

Monitoring of waiting times against targets

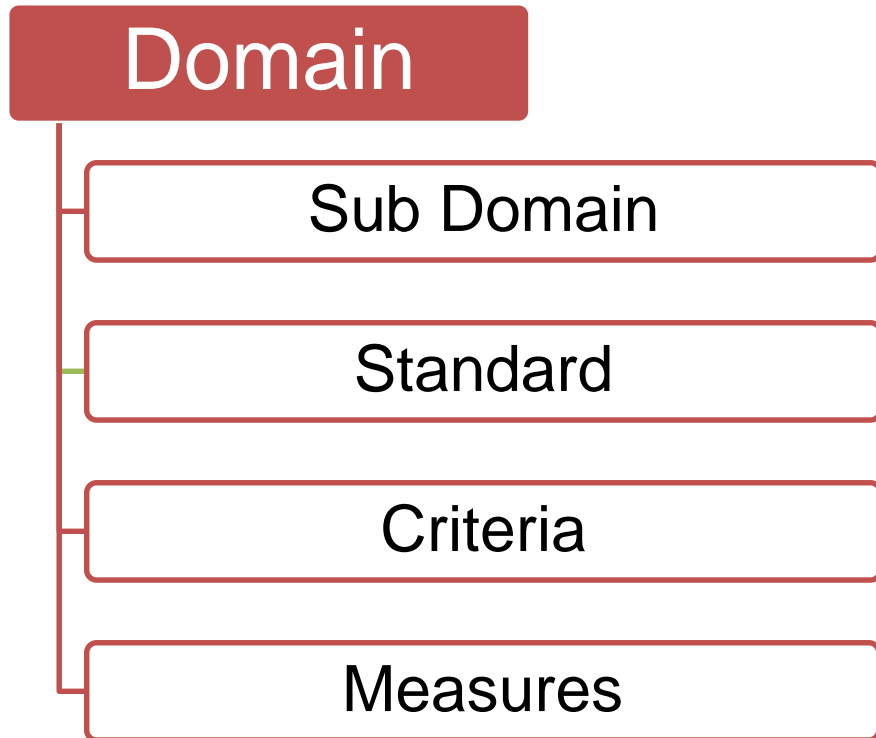
Sequencing

- *Sequencing of the chapters has been adjusted to reflect the inspection process*
 - User rights
 - Clinical governance and clinical care
 - Clinical support services
 - Governance and Human Resources
 - Facilities and Infrastructure

Inspection Tools being developed for evaluation of compliance with Norms and Standards

- ***Public hospitals – central, tertiary, regional, district***
- ***Public CHCs***
- ***Public Clinics***
- ***TB Hospitals***
- ***Mental Health Hospitals***
- ***Private Hospitals***
- ***Private clinics***

Structure to retain hierarchy of the national core standards



Domain - an aspect of service delivery where quality or safety can be at risk.

Sub-Domain - further break down the domains into sub-sections or critical areas which combined describe the scope of that domain.

Standards - what is expected to be delivered in terms of quality care; reflect expected situation resulting from implementation of a policy, procedure or system.

Criteria - elements setting out the requirements for measurable and achievable standard compliance.

Measures - the means or evidence for determining whether the criteria have been met; examine aspects that can be seen, heard or felt by the assessors and give reasonable assurance that a standard is met.

Structure Of Measurement Tools

SUB-DOMAIN Access to care

Regulation heading = Subdomain

Standard 5 (1) The health establishment must ensure that users are triaged in a manner which is consistent with the nature and severity of their health condition,

Sub-regulation = standard statement

Criterion 5.(2)(a) A health establishment must implement a system of triage.

Sub-regulation = criterion statement

Measures

1. The guideline or standard operating procedure for triaging is available. **Doc, E**

Explanatory Note: The document implemented must be approved by a relevant national body, such as the Emergency Medical Services of South Africa. Not Applicable: Never

2. The procedure used for triage is visibly displayed in the triage area. **Obs, E**

Measure statement with methodology and risk rating

3. Staff members responsible for triaging have received training on the triage process in the past 12 months. **Doc, V**

Explanatory Note: In-service training documentation must include attendance registers and evidence of the topics discussed. Not Applicable: Never

4. Users are triaged in accordance with the documented procedure. **PRA, V**

Explanatory Note: The user's triage status should be indicated on the emergency unit health record. Not Applicable: Never

Explanatory note to clarify evidence required

5. Triaged users are seen within the target time frames. **PRA, V**

Explanatory Note: The time the user was triaged should be compared with the time the user was seen to evaluated whether the user was seen within the agreed timeframe, as indicated in the triage poster. Not Applicable: Never