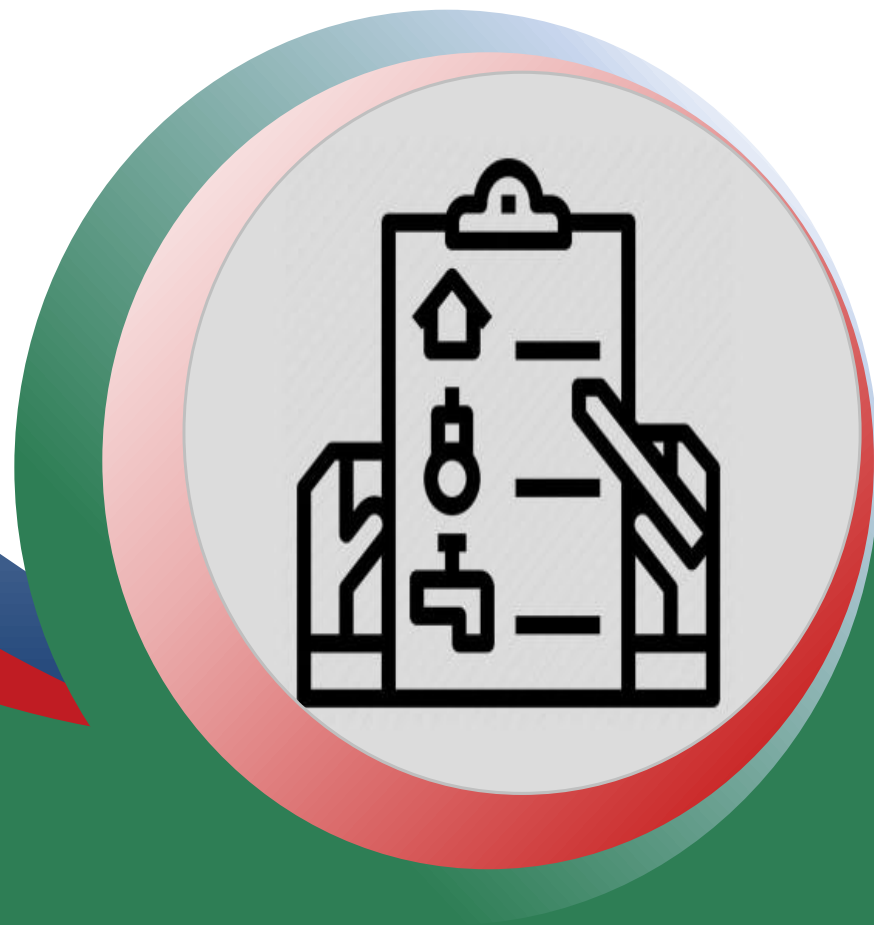




Regulatory District Hospital Inspection Tool v1.3



CSSD



Facility:
Date:

- **Tool Name:** Regulatory District Hospital Inspection tool v1.3 - Final
- **HEs Type:** Hospitals
- **Sector:** Public
- **Specialization:** District
- **Created By:** Health Standards Development and Training

31 CSSD

Domain 31.2 CLINICAL GOVERNANCE AND CLINICAL CARE

Sub Domain 31.2.1 7 Clinical management

Standard 31.2.1.1 7(1) The health establishment must establish and maintain clinical management systems, structures and procedures that give effect to national policies and guidelines.

Criterion 31.2.1.1.1 7 Healthcare providers are informed on the health establishment and their specific responsibilities.

31.2.1.1.1.1 Health care personnel have been informed about the Standard Operating Procedures of the unit and health establishment.

Assessment type: Document - **Risk rating:** Essential measure

Documented evidence that personnel have been informed about the Standard Operating Procedures of the unit and health establishment must be available. This could include but is not limited to distribution lists which include personnel signatures to indicate they have read and understood the document (which must be dated and signed), proof of attendance at meetings where policies, guidelines and standard operating procedures are discussed, or similar evidence for electronic distribution. Score 1 if such evidence is available and score 0 if it is not available.

Score	Comment	
Aspects	Score	Comment
1. Decontamination and sterilisation processes.		
2. Management of adverse events		
3. Procedure to support personnel affected by adverse events		
4. Management of needlestick and sharps		
5. Cleaning of hazardous and biohazardous spills		
6. Use of Personal protective equipment(PPE)		

Standard 31.2.1.2 7(2) (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

Criterion 31.2.1.2.1 7 The health establishment implements process to ensure environmental cleanliness.

31.2.1.2.1.1 All work completed is verified by the cleaning supervisor or delegated personnel.

Assessment type: Document - **Risk rating:** Essential measure

Daily inspections will ensure the cleanliness of the unit. The person responsible for overseeing the cleaning service must inspect the unit daily to confirm that cleaning has been carried out according to the schedule and that all areas attended to have been effectively cleaned. Monitoring tools (including, but not limited to, checklist/tick sheets) listing all cleaning tasks must be completed for each room or area. Not applicable: Never

Score	Comment

31.2.1.2.1.2 The unit is observed to be clean.

Assessment type: Observation - **Risk rating:** Vital measure

Inspector to observe general cleanliness of the unit including but not limited to whether the is unit free of dirt, dust and stains.

Score	Comment

Criterion 31.2.1.2.2 7 Procedures to minimise the risk of health care-associated infections must be implemented.

31.2.1.2.2.1 An emergency eyewash station or eyewash kit is available.

Assessment type: Observation - **Risk rating:** Vital measure

The emergency eyewash station or bottle must be available, functional and easily accessible. An eyewash kit which is moveable is acceptable. Not applicable: Never

Score	Comment

31.2.1.2.2.2 Sterile sealed eyewash bottles are checked monthly for leaks and expiry dates.

Assessment type: Document - **Risk rating:** Vital measure

A documented record for the previous three months must be available, showing the dates when the eyewash bottles were checked. Not applicable: Never

Score	Comment

Criterion 31.2.1.2.3 7 The management of used and soiled linen must meet infection prevention and control requirements.

31.2.1.2.3.1 The central sterile services department has a designated, access-controlled area for the storage of dirty linen.

Assessment type: Observation - **Risk rating:** Essential measure

The area used to store dirty linen must have a door, which is kept shut. Not applicable: Never

Score	Comment

31.2.1.2.3.2 Dirty linen trolleys are not overflowing.

Assessment type: Observation - **Risk rating:** Essential measure

Linen must be collected frequently enough to avoid excessive accumulation of dirty linen. Not applicable: Never

Score	Comment

Criterion 31.2.1.2.4 7 The success of sterilisation procedures must be monitored.

31.2.1.2.4.1 All sterilisation failures are documented.

Assessment type: Document - **Risk rating:** Vital measure

Any identified failures must be documented to provide a record for further analysis. Not applicable: Where no failures are identified.

Score	Comment

31.2.1.2.4.2 All sterilisation failures are investigated.

Assessment type: Document - **Risk rating:** Vital measure

All sterilisation failures must be investigated to determine the cause of the failure. A report of the investigation must be available. Not applicable: Where no failures are identified.

Score	Comment

31.2.1.2.4.3 Action plans are implemented to address gaps identified in the sterilisation process.

Assessment type: Document - **Risk rating:** Vital measure

Addressing gaps identified during the investigation will prevent further failures from the same cause. Not applicable: Where no gaps have been identified.

Score	Comment

Criterion 31.2.1.2.5 7 Where sterilisation services are outsourced, the service level agreement must be managed effectively.

31.2.1.2.5.1 A service level agreement for sterilisation service provider is available.

Assessment type: Document - **Risk rating:** Essential measure

The service level agreement must be valid (not expired) and must be signed by the service provider and the responsible accounting officer. Not applicable: Where the service is not outsourced.

Score	Comment

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31.2.1.2.5.2 Service level agreements for decontamination services are monitored.

Assessment type: Document - **Risk rating:** Vital measure

This is to ensure that service providers adhere to their contractual obligations. This includes, but is not limited to, monitoring checklists, minutes of meetings, reports. Not applicable: Where the service is not outsourced.

Score	Comment

Criterion 31.2.1.2.6 7 The health establishment must have a functional quality management system

31.2.1.2.6.1 Quality improvement plans are developed by health care personnel.

Assessment type: Document - **Risk rating:** Essential measure

Request the quality improvement plan of the unit from the previous six months. Verify whether the aspects listed below are documented. Score if aspect is documented and 0 if not. NB: Score not applicable where no gaps have been identified.

Score	Comment

Aspects	Score	Comment
1. Gaps identified		
2. Activities required or implemented to address gaps		
3. Healthcare personnel responsible		
4. Time frames		

31.2.1.2.6.2 Corrective action has been taken to improve the quality of service provided where gaps are identified.

Assessment type: Document - **Risk rating:** Vital measure

Evidence must be available that the action specified in the quality improvement plan was implemented. Not applicable: Where there were no gaps identified.

Score	Comment

Criterion 31.2.1.2.7 7 Standard operating procedures for decontamination processes must be available.

31.2.1.2.7.1 Healthcare personnel are able to explain the procedure for sterilising used instruments from start to finish.

Assessment type: Staff interview - **Risk rating:** Essential measure

Interview three healthcare personnel members and ask them to describe how they perform sterilisation of instruments according to the standard operating procedure. Score 1 if the aspect is described and 0 if not described.

Score	Comment

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Unit 1 Healthcare personnel 1

Aspects	Score	Comment
1. Personal protective equipment to be worn, including caps, goggles, masks, gauntlet gloves and plastic aprons.		
2. Clean sink to be filled with water and detergent.		
3. Detergent solution to be constituted in accordance with manufacturer's instructions.		
4. Instruments to be fully immersed in solution.		
5. Instruments to be brushed, wiped, agitated and irrigated to dislodge and remove all visible material. Explanatory note: These actions must be performed while holding the instruments under water.		
6. Instruments to be rinsed thoroughly.		
7. Instruments to be drained before drying.		
8. Sterile packaging to be done according to procedure.		
9. In-pack chemical indicator to be placed in all sets and towels.		
10. Tracking system indicators to be marked on packs and sets.		
11. Storage to ensure integrity of materials.		

Unit 2 Healthcare personnel 2

Aspects	Score	Comment
1. Personal protective equipment to be worn, including caps, goggles, masks, gauntlet gloves and plastic aprons.		
2. Clean sink to be filled with water and detergent.		
3. Detergent solution to be constituted in accordance with manufacturer's instructions.		

4. Instruments to be fully immersed in solution.		
5. Instruments to be brushed, wiped, agitated and irrigated to dislodge and remove all visible material. Explanatory note: These actions must be performed while holding the instruments under water.		
6. Instruments to be rinsed thoroughly.		
7. Instruments to be drained before drying.		
8. Sterile packaging to be done according to procedure.		
9. In-pack chemical indicator to be placed in all sets and towels.		
10. Tracking system indicators to be marked on packs and sets.		
11. Storage to ensure integrity of materials.		

Unit 3 Healthcare personnel 3

Aspects	Score	Comment
1. Personal protective equipment to be worn, including caps, goggles, masks, gauntlet gloves and plastic aprons.		
2. Clean sink to be filled with water and detergent.		
3. Detergent solution to be constituted in accordance with manufacturer's instructions.		
4. Instruments to be fully immersed in solution.		
5. Instruments to be brushed, wiped, agitated and irrigated to dislodge and remove all visible material. Explanatory note: These actions must be performed while holding the instruments under water.		
6. Instruments to be rinsed thoroughly.		
7. Instruments to be drained before drying.		
8. Sterile packaging to be done according to procedure.		

9. In-pack chemical indicator to be placed in all sets and towels.		
10. Tracking system indicators to be marked on packs and sets.		
11. Storage to ensure integrity of materials.		

31.2.1.2.7.2 The storage of sterile packs ensures the integrity of materials.

Assessment type: Observation - **Risk rating:** Essential measure

The manner in which sterile packs are stored must prevent physical damage to packages, avoid exposure of packages to moisture. Packages should not be stored in a manner that will crush, bend, puncture, or compress them. Therefore, packs should not be wet or have water damage, they should be intact (not opened or torn). Not applicable: Never

Score	Comment

31.2.1.2.7.3 The central sterile services department is segregated into service areas.

Assessment type: Observation - **Risk rating:** Vital measure

To comply with infection prevention and control procedures, the central sterile services department must be segregated into the service areas listed below. Score 1 if the unit has the segregated area and 0 if areas are not segregated. NB: The service area must be demarcated to define separate areas for receiving dirty and clean materials. The design of the area must allow for the sterilisation processes to progress from the dirty area, where used instruments are received, to the clean area, where sterilised instruments are stored and issued.

Score	Comment	
Aspects	Score	Comment
1. Dirty area/section (for cleaning and inspection of equipment)		
2. Clean area/section (assembly, packaging and sterilisation)		
3. Sterile packs storage area		
4. The set-up of the unit allows flow of instruments from dirty to clean areas. Explanatory note: The set-up of the unit must allow the sterilisation processes to progress from the dirty area, where used instruments are received, to the clean area, where sterilised instruments are stored and issued.		

Criterion 31.2.1.2.8 7 Health care personnel receive ongoing in-service education according to their roles and responsibilities.

31.2.1.2.8.1 Healthcare personnel working with the reprocessing or sterilisation of medical devices are trained.

Assessment type: Document - **Risk rating:** Essential measure

Using the checklist below, verify whether health care personnel have received in-service training on reprocessing or sterilisation of medical devices in the past two years. Select two health care providers and two cleaners from the health establishment's personnel. Request the training records (attendance registers). Score 1 if the health care workers have been trained and 0 if not.

Score	Comment

Unit 1 Health care provider 1

Aspects	Score	Comment
1. Sterilisation procedures		
2. Use of sterilisation equipment		
3. Hand hygiene		
4. Use of personal protective equipment		

Unit 2 Health care provider 2

Aspects	Score	Comment
1. Sterilisation procedures		
2. Use of sterilisation equipment		
3. Hand hygiene		
4. Use of personal protective equipment		

Unit 3 Cleaner 1

Aspects	Score	Comment
1. Hand hygiene		
2. Use of personal protective equipment		

Unit 4 Cleaner 2

Aspects	Score	Comment
1. Hand hygiene		
2. Use of personal protective equipment		

Criterion 31.2.1.2.9 7 Medical equipment management systems must be in place to minimise the risk of patient safety incidents related to medical equipment.

31.2.1.2.9.1 Equipment is maintained according to a planned schedule.

Assessment type: Document - **Risk rating:** Vital measure

For the equipment listed below, inspect the planned preventive maintenance schedule for the previous 12 months in the central sterile services department as well as the manufacturer’s instructions and maintenance records. Determine whether the service intervals in the maintenance schedule correspond with the manufacturer’s instructions. Check that maintenance has been done according to the schedule. In the event that the manufacturer’s instructions are not available, they may be replaced by documented guidance from the local health technology team. Score 1 if the requirement is met and 0 if not met. NB: Score Not applicable for equipment that is not available in the health establishment.

Score	Comment

Unit 1 Maintenance schedule available

Aspects	Score	Comment
1. Steam autoclave		
2. Mobile autoclave, electrical table-top type		
3. Gas steriliser		
4. Ultrasonic washer		
5. Incubator for biological control of steam sterilisation		
6. Incubator for biological control of gas sterilisation		
7. Heat sealing machine		

Unit 2 Schedule aligned to manufacturer’s instructions

Aspects	Score	Comment
1. Steam autoclave		
2. Mobile autoclave, electrical table-top type		
3. Gas steriliser		
4. Ultrasonic washer		
5. Incubator for biological control of steam sterilisation		
6. Incubator for biological control of gas sterilisation		

7. Heat sealing machine		
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Unit 3 Maintained according to schedule

Aspects	Score	Comment
1. Steam autoclave		
2. Mobile autoclave, electrical table-top type		
3. Gas steriliser		
4. Ultrasonic washer		
5. Incubator for biological control of steam sterilisation		
6. Incubator for biological control of gas sterilisation		
7. Heat sealing machine		

Sub Domain 31.2.2 8 Infection prevention and control programmes

Standard 31.2.2.1 8(1) The health establishment must maintain an environment, which minimises the risk of disease outbreaks, the transmission of infection to users, health care personnel and visitors.

Criterion 31.2.2.1.1 8(2)(a) The health establishment must ensure that there are hand washing facilities in every service area.

31.2.2.1.1.1 Hand washing facilities are available.

Assessment type: Observation - **Risk rating:** Vital measure

Inspect the hand washing facilities for the items listed below. Score 1 if the item is available and 0 if not available.

Score	Comment

Unit 1 Dirty area

Aspects	Score	Comment
1. Hand washing basin. Explanatory note: The basin must not be blocked, broken, have deep cracks causing leaking of water, or have hairline cracks.		
2. Poster on correct hand washing technique		
3. Poster on the correct use of alcohol-based hand rub. Explanatory note: Posters must be placed at strategic places and above alcohol dispensers in the health establishment as stipulated in page 33 of Practical Manual for Implementation of IPC Strategic framework March 2020.		
4. Taps		
5. Running water		
6. Wall mounted soap dispenser		
7. Plain liquid soap		

8. Paper towels		
9. Paper towel dispenser		
10. Bin		
11. Alcohol based hand rub. Explanatory note: Item does not necessarily have to be in the hand washing basin/facility area.		

Unit 2 Clean area

Aspects	Score	Comment
1. Hand washing basin. Explanatory note: The basin must not be blocked, broken, have deep cracks causing leaking of water, or have hairline cracks.		
2. Poster on correct hand washing technique		
3. Poster on the correct use of alcohol-based hand rub. Explanatory note: Posters must be placed at strategic places and above alcohol dispensers in the health establishment as stipulated in page 33 of Practical Manual for Implementation of IPC Strategic framework March 2020.		
4. Taps		
5. Running water		
6. Wall mounted soap dispenser		
7. Plain liquid soap		
8. Paper towels		
9. Paper towel dispenser		
10. Bin		
11. Alcohol based hand rub. Explanatory note: Item does not necessarily have to be in the hand washing basin/facility area.		

Criterion 31.2.2.1.2 8(2)(c) The health establishment must ensure there is clean linen to meet the needs of users.

31.2.2.1.2.1 Linen rooms or storage cupboards are adequately stocked and well organised.

Assessment type: Observation - **Risk rating:** Essential measure

Inspect the area where linen is stored to determine whether the aspects listed below are compliant. Score 1 if the aspect is compliant and 0 if not compliant. Score 0 if the unit does not have a designated area with a door that can be kept closed.

Score	Comment	
Aspects	Score	Comment
1. Designated area for storage of linen		
2. Area is locked		
3. Linen is stored on shelves		
4. Area is well organised		

Criterion 31.2.2.1.3 8(2)(d) The health establishment must ensure that health care personnel are protected from acquiring infections through the use of personal protective equipment and prophylactic immunisations.

31.2.2.1.3.1 Personal protective equipment is worn.

Assessment type: Observation - **Risk rating:** Vital measure

Verify whether the protective clothing and equipment listed below are available and worn. Score 1 if the items are available and worn and 0 if they are not available or not worn. Score NA where, at the time of the inspection, personnel are not in a situation in which they are required to wear protective clothing.

Score	Comment

Unit 1 Storage room/are: Available

Aspects	Score	Comment
1. Gloves – non-sterile		
2. Disposable gowns or aprons		
3. Protective eyewear (face shields or goggles)		
4. Face masks		

Unit 2 Receiving area: Worn

Aspects	Score	Comment
1. Gloves – non-sterile		
2. Disposable gowns or aprons		
3. Protective eyewear (face shields or goggles)		
4. Face masks		

Unit 3 Sterilisation area: Worn

Aspects	Score	Comment
1. Gloves – non-sterile		
2. Disposable gowns or aprons		
3. Protective eyewear (face shields or goggles)		
4. Face masks		

Unit 4 Cleaner: Worn

Aspects	Score	Comment
1. Gloves – non-sterile		
2. Domestic gloves		
3. Disposable gowns or aprons		
4. Protective eyewear (face shields or goggles)		
5. Face masks		

Sub Domain 31.2.3 9 Waste management

Standard 31.2.3.1 9(1) The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

Criterion 31.2.3.1.1 9(2)(a) The health establishment must have appropriate waste containers at the point of waste generation.

31.2.3.1.1.1 The central sterile services department has appropriate containers for disposal of all types of waste.

Assessment type: Observation - **Risk rating:** Vital measure

Verify whether the waste containers listed below are available. Health care risk waste containers must have the appropriate international hazard symbol and be marked as prescribed in SANS 10248-1: Management of Health Care Waste, Part 1: Management of healthcare risk waste from a health facility. Score 1 if the waste container is available and 0 if not available. Where a particular type of waste is not generated in the unit, score NA.

Score	Comment	
Aspects	Score	Comment
1. Infectious non-anatomical waste (red)		
2. Sharps (yellow)		
3. General waste (black, beige, white or transparent packaging may be used)		

Criterion 31.2.3.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.

31.2.3.1.2.1 Sharps are safely managed and discarded in the unit.

Assessment type: Observation - **Risk rating:** Vital measure

Select three areas and verify whether sharps, needles and the collection of sharps are correctly managed in accordance with the standard operating procedures of the health establishment. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment

Unit 1 Area 1

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids		

Unit 2 Area 2

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids		

Unit 3 Area 3

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids		

31.2.3.1.2.2 There is a temporary healthcare risk waste storage area.

Assessment type: Observation - **Risk rating:** Essential measure

In all areas where waste is held for collection and removal to the central storage area, a designated area for temporary storage of waste must be available. Some health establishments will have a purpose-built temporary waste storage area, others will utilise a specific area within the available space. Score 1 if the aspect is compliant and 0 if not compliant, or where there is no designated area. Score NA for any aspects not found in the temporary waste storage area.

Score	Comment	
Aspects	Score	Comment
1. Space available to store waste containers		

2. Area is well ventilated		
3. Area is well lit		
4. Area has impervious floor surfaces (waterproof/resistant, not cracked)		

Sub Domain 31.2.4 21 Adverse events

Standard 31.2.4.1 21(1) The health establishment must have a system to monitor and report all adverse events.

Criterion 31.2.4.1.1 21(2)(b) The health establishment must have systems in place to report adverse incidents to a structure in the health establishment or responsible authority that monitors these events.

31.2.4.1.1.1 Health care personnel are aware of the procedure to report adverse events.

Assessment type: Staff interview - **Risk rating:** Essential measure

Interview three health care personnel to establish their awareness on reporting of adverse events Score 1 if they are able to explain the aspects listed below and 0 if not.

Score	Comment

Unit 1 Healthcare personnel 1

Aspects	Score	Comment
1. Types of adverse events that might happen in the unit (give three examples)		
2. How to report adverse events in the unit		
3. Feedback processes on reported adverse events. Explanatory notes: This could include but not limited to formal feedback on the progress, outcome and quality improvement plans)		

Unit 2 Healthcare personnel 2

Aspects	Score	Comment
1. Types of adverse events that might happen in the unit (give three examples)		
2. How to report adverse events in the unit		
3. Feedback processes on reported adverse events. Explanatory notes: This could include but not limited to formal feedback on the progress, outcome and quality improvement plans)		

Unit 3 Healthcare personnel 3

Aspects	Score	Comment
1. Types of adverse events that might happen in the unit (give three examples)		
2. How to report adverse events in the unit		
3. Feedback processes on reported adverse events. Explanatory notes: This could include but not limited to formal feedback on the progress, outcome and quality improvement plans)		

Domain 31.3 CLINICAL SUPPORT SERVICES

Sub Domain 31.3.1 13 Medical equipment

Standard 31.3.1.1 13(1) Health establishments must ensure that the medical equipment is available and functional in compliance with the law.

Criterion 31.3.1.1.1 13(2)(b) The health establishment must ensure that equipment is in accordance with the essential equipment list in all clinical service areas.

31.3.1.1.1.1 Functional essential equipment is available.

Assessment type: Observation - **Risk rating:** Essential measure

Verify whether the equipment listed below is available and functional. Score 1 if the equipment is available and functional and 0 if not available or not functional. NB: Score Not applicable for equipment not used in the unit.

Score	Comment	
Aspects	Score	Comment
1. Steam autoclave		
2. Mobile autoclave, electrical table-top type		
3. Gas steriliser		
4. Hanger for ventilation/anaesthetic circuits		
5. Ultrasonic washer		
6. Surgical instrument washer/decontamination unit		
7. Water-jet cleaning pistol		
8. Incubator for biological control of steam sterilisation		
9. Incubator for biological control of gas sterilisation		
10. Scissors, general purpose		
11. Heat sealing machine		
12. Table, packaging, sterilisation, medium, inox		

13. Table, packaging, sterilisation		
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31.3.1.1.1.2 The sterilisation unit manager has determined the number of surgical packs required for the unit.

Assessment type: Document - **Risk rating:** Essential measure

To ensure sufficient sterile packs are available for the sterilisation unit to cover all theatres and procedures that are performed at the health establishment, it is necessary to determine the requirements for the unit, i.e. how many sterile packs are required to ensure that all theatres and procedures are covered. Not applicable: Never

Score	Comment

31.3.1.1.1.3 The unit has a method for tracking surgical packs issued from and returned to the central sterile services department.

Assessment type: Document - **Risk rating:** Essential measure

This may be a register to track sterile packs sent to and received from the theatres and other functional areas. The purpose of the system is to ensure that the sterilisation unit keeps track of all sterile packs. Not applicable: Never

Score	Comment

31.3.1.1.1.4 Sterile packs storage area or room or cupboards are adequately stocked and well organised.

Assessment type: Observation - **Risk rating:** Vital measure

Inspect the area where sterile packs are stored to determine whether the aspects listed below are compliant. Score 1 if the aspect is compliant and 0 if not compliant. Score 0 if the unit does not have a designated area with a door that can be kept closed.

Score	Comment

Aspects	Score	Comment
1. Designated area for the storage of sterile packs		
2. Area is well organised		
3. Packs are stored in a manner that ensures their integrity. Explanatory note: The storage of sterile packs must be in such a way that it prevents physical damage to packages, avoids exposure of packages to moisture and or becoming soiled. Packages should not be stored in a manner that will crush, bend, puncture, or compress them.		

Domain 31.4 GOVERNANCE AND HUMAN RESOURCES

Sub Domain 31.4.1 20 Occupational health and safety

Standard 31.4.1.1 20(1) The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

Criterion 31.4.1.1.1 20(2)(b) Awareness of safety and security issues must be promoted

31.4.1.1.1.1 The emergency evacuation plan is prominently displayed.

Assessment type: Observation - **Risk rating:** Essential measure

The evacuation plan must include but is not limited to route/directions to be followed during evacuation, emergency exits and assembly point(s). This must be visibly displayed. Not applicable:

Never

Score	Comment

31.4.1.1.1.2 The healthcare personnel are familiar with the emergency evacuation procedure.

Assessment type: Staff interview - **Risk rating:** Essential measure

Interview three health care personnel to establish whether they are able to explain the evacuation procedure as illustrated in the evacuation plan. Score 1 if they explain the procedure as illustrated in the evacuation plan and 0 if not. Where no evacuation plan is available, this measure must be scored 0.

Score	Comment	
Aspects	Score	Comment
1. Healthcare personnel 1		
2. Healthcare personnel 2		
3. Healthcare personnel 3		

Domain 31.5 FACILITIES AND INFRASTRUCTURE

Sub Domain 31.5.1 14 Management of buildings and grounds

Standard 31.5.1.1 14(1) The health establishment and their grounds must meet the requirements of the building regulations.

Criterion 31.5.1.1.1 14(2)(b) The health establishment must as appropriate for the type of buildings and grounds of the establishment have a maintenance plan for buildings and the grounds.

31.5.1.1.1.1 No obvious safety hazards are observed during the visit.

Assessment type: Observation - **Risk rating:** Vital measure

Inspect the surroundings for maintenance-related safety hazards in the unit. This will include but is not limited to loose electrical wiring, collapsing ceiling, roof, doors or any other type of safety hazards that represent a risk to the health and safety of personnel, users and visitors. Not applicable: Never

Score	Comment

Criterion 31.5.1.1.2 14(2)(d) The health establishment must as appropriate for the type of buildings and grounds of the establishment have ventilation systems that maintain the inflow of fresh air, temperature, humidity and purity of the air within specified limits set for different service areas such as theatres, kitchen and isolation units.

31.5.1.1.2.1 The service areas listed below have natural ventilation or functional mechanical ventilation.

Assessment type: Observation - **Risk rating:** Essential measure

Verify whether the areas listed below have passive ventilation (windows, doors that can be opened and ventilation grilles) or functional mechanical ventilation (i.e. a ducting system).The national building regulations stipulate that satisfactory ventilation is

only provided by forcing outdoor air into a space mechanically or passively through either ducting or apertures open to the outside, including, but not limited to, windows or ventilation grilles.. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment	
Aspects	Score	Comment
1. Dirty area		
2. Clean area		
3. Storage area		

Official Sign-Off

The National Health Act, 2003 (Act No. 61 of 2003) provides for quality requirements and standards in respect of health services provided by health establishments to the public. The main objective is to promote and protect the health and safety of the users of health services and contribute to improved outcomes and improved population health.

To achieve this mandate standardised inspection tools aligned to Norms and Standards Regulations applicable to different categories of health establishments promulgated by the Minister of Health in 2018 have been developed for District Hospitals.

Acknowledgements

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- Provincial Department of Health personnel, Quality Assurance Managers, District Managers, Programme Managers, Operational Managers for their valuable feedback
- The Certification and Enforcement Committee of the OHSC Board for reviewing the tools and for recommending to the Board for approval.

It is hereby certified that the Regulatory District Hospital Inspection tools version 1.3 was developed by the Office of Health Standards Compliance.

Ms W Moleko

Signature:



**Executive Manager: Health Standards
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Date:

10/08/2022

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