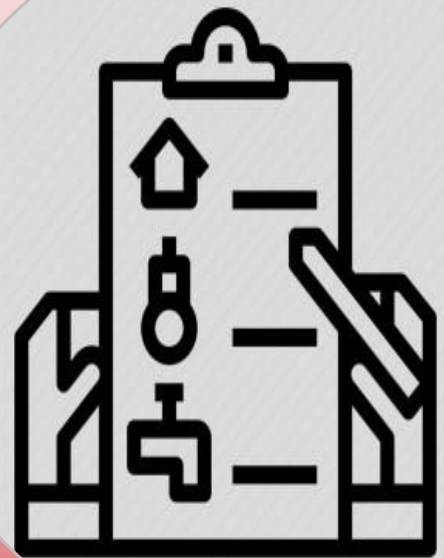


Regulatory District Hospital Inspection Tool v1.3



Human Resource Management



| |
|-----------|
| 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
-

2 Human Resource Management

Domain 2.2 CLINICAL GOVERNANCE AND CLINICAL CARE

Sub Domain 2.2.1 7 Clinical management

Standard 2.2.1.1 7(2) (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

Criterion 2.2.1.1.1 7 Health care personnel must be inducted into the health establishment’s policies and procedures and receive orientation training for their specific responsibilities.

2.2.1.1.1.1 The health establishment provides induction to all new health care personnel.

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

Verify whether induction was conducted on the aspects listed below. Request records from the previous 12 months. Evidence may include but not limited to induction programme and attendance registers. Score 1 if the aspect is included and 0 if not included.

| Score | Comment | |
|-------------------------------------|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Organizational structure | | |
| 2. National and provincial policies | | |
| 3. Standard operating procedures | | |

Criterion 2.2.1.1.2 7 The health establishment must have a functional quality management system

2.2.1.1.2.1 The health establishment has a designated individual to co-ordinate the quality management programme.

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

Documented evidence of the designated individual must be available. This could be a formal letter of appointment or designation or included in the incumbent’s job description (the job description must be signed). Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

Criterion 2.2.1.1.3 7 Health care providers must provide clinical services consistent with their qualifications.

2.2.1.1.3.1 The central sterilisation service department (CSSD) is managed by person qualified in sterilisation services.

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

The manager should be qualified in Operating theatre training or have a qualification in

decontamination services or qualification in any other sterilisation procedures. Not applicable: Never

| Score | Comment |
|-------|---------|
| | |
| | |

2.2.1.1.3.2 The radiology department is managed by a qualified radiologist or radiographer or sonographer.

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

This will ensure that the safety of users and health care personnel is promoted. The person in charge must produce a certificate or proof of registration with the Health Professions Council of South Africa (displayed or filed). Not applicable: Never

| Score | Comment |
|-------|---------|
| | |
| | |

2.2.1.1.3.3 The infection prevention and control unit are managed by a healthcare provider with appropriate qualifications.

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

The person responsible for infection control in the health establishment must be a qualified health care provider or an individual with a minimum of two years' experience in the field of infection prevention and control There must be evidence of the appointment or designation of the infection control health care provider and of his/her experience in the field of infection prevention and control.

Not applicable: Never

| Score | Comment |
|-------|---------|
| | |
| | |

Criterion 2.2.1.1.4 7 Health care personnel receive ongoing in-service education according to their roles and responsibilities.

2.2.1.1.4.1 The annual in-service education and training plan is available.

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

Verify whether the aspects listed below are included in the training plan. Score 1 if the aspect is included and 0 if not included.

| Score | Comment | |
|--|---------|---------|
| | | |
| | | |
| Aspects | Score | Comment |
| 1. Infection prevention and control education | | |
| 2. Prevention of respiratory infections, especially TB | | |
| 3. Standard precautions | | |

| | | |
|---|--|--|
| 4. Response to disease outbreaks | | |
| 5. Safety checks and prevention of accidents in the environment | | |
| 6. Correct use of medical equipment | | |

2.2.1.1.4.2 Health care personnel have been trained in standard precautions in the previous financial year.

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

Request the total number of health care personnel at the hospital and the number who have been trained in standard precautions in the previous financial year. If 50% have been trained, allocate a compliant score. The infection prevention and control (IPC) manager must ensure that evidence is submitted to human resources. The training record must indicate the date and trainees' signatures of when the training was received. Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

Domain 2.4 GOVERNANCE AND HUMAN RESOURCES

Sub Domain 2.4.1 19 Human resources management

Standard 2.4.1.1 19(1) The health establishment must ensure that they have systems in place to manage health care personnel in line with relevant legislation, policies and guidelines.

Criterion 2.4.1.1.1 19(2)(a) The health establishment must, as appropriate to the type and size of the establishment, have and implement a human resource plan that meet the needs of the health establishment.

2.4.1.1.1.1 All individuals appointed to management positions have the required qualifications.

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

Examine all key senior management positions for the aspects listed below. Score 1 if the aspect is compliant and 0 if not compliant.

| Score | Comment |
|-------|---------|
| | |

Unit 1 Is the position filled?

| Aspects | Score | Comment |
|-----------------------------|-------|---------|
| 1. Manager or CEO | | |
| 2. Human resources manager | | |
| 3. Nursing services manager | | |
| 4. Quality manager | | |

| | | |
|--|--|--|
| 5. Financial manager. (NB: In other health establishments one manager will be responsible for Finance and Procurement) | | |
| 6. Procurement manager. (NB: In other health establishments one manager will be responsible for Finance and Procurement) | | |
| 7. Facility infrastructure manager | | |
| 8. Head of clinical management | | |

Unit 2 Does the incumbent have suitable qualifications such as those suggested below.

| Aspects | Score | Comment |
|---|-------|---------|
| 1. Manager or CEO (A health qualification or business management qualification or other higher education qualification). | | |
| 2. Human resources manager (Diploma or degree in human resources management) | | |
| 3. Nursing services manager (Diploma or degree in nursing management) | | |
| 4. Quality manager (Registered nurse or other health care provider) | | |
| 5. Financial manager (Diploma or degree in financial management). (NB: In other health establishments one manager will be responsible for Finance and Procurement) | | |
| 6. Procurement manager (Diploma or degree in financial management or procurement). (NB: In other health establishments one manager will be responsible for Finance and Procurement) | | |
| 7. Facility infrastructure manager (Diploma or degree in facility management) | | |
| 8. Head of clinical management (Degree in medicine) | | |

2.4.1.1.1.2 Health care provider-to-user ratios in the areas listed below are consistent with the approved staffing plan.

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

Examine the approved staffing plan for the current health care personnel complement in each of the clinical areas listed below. Score 1 if the health care personnel complement matches the number of health care personnel in each category specified in the approved staffing plan and 0 if it does not. NB: Score Not applicable for service areas not available in the health establishment.

| Score | Comment |
|-------|---------|
|-------|---------|

| Aspects | Score | Comment |
|---------------------------|-------|---------|
| 1. Emergency unit | | |
| 2. Outpatients department | | |
| 3. Medical ward | | |
| 4. Surgical ward | | |
| 5. Paediatric ward | | |
| 6. Maternity | | |
| 7. Operating theatre | | |
| 8. Mental healthcare unit | | |

2.4.1.1.1.3 The health establishment has a current staff retention strategy in place.

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

A document with specific focus on retention plans and health care personnel rewards, recognition programmes and incentives must be available. Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

2.4.1.1.1.4 Job descriptions meet the requirements listed below.

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

Select one human resources file from each of the job categories. Verify whether the job descriptions include the aspects listed below. Score 1 if the aspect is compliant and 0 if it is not compliant. NB: If the job profile has been amended, a new job description must be signed.

| Score | Comment |
|-------|---------|
| | |

Unit 1 Hospital Manager/CEO

| Aspects | Score | Comment |
|-------------------------|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |

| | | |
|--|--|--|
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 2 Human resources manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 3 Nursing services manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 4 Quality manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 5 Financial manager. (NB: In other health establishments one manager will be responsible for Finance and Procurement)

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 6 Procurement manager. (NB: In other health establishments one manager will be responsible for Finance and Procurement)

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 7 Facility infrastructure manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 8 Head of clinical management

| Aspects | Score | Comment |
|-------------------------|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |

| | | |
|--|--|--|
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 9 Head of Pharmacy

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 10 Head of Rehabilitation Services

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 11 Cleaner (randomly select one file)

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 12 Administration Clerk/personnel (randomly select one file)

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

Unit 13 Driver (randomly select one file)

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Signed by incumbent | | |
| 2. Signed by supervisor | | |
| 3. Dated | | |
| 4. List of activities, responsibilities or key performance areas | | |
| 5. Key competencies required | | |
| 6. Lines of accountability are described | | |

2.4.1.1.1.5 Senior managers have had a leadership and management competency assessment performed within the previous two years.

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

Senior managers must possess the required leadership and management skills to perform effectively. Documented evidence of assessments must be available. Not applicable: Where the management level is below level 13 (mostly in district health establishments)

| Score | Comment |
|-------|---------|
| | |

2.4.1.1.1.6 Managers have undergone leadership and management development courses within the previous two years.

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

Documented evidence of training is required, including but not limited to certificates of attendance and attendance registers with topics listed. Not applicable: Never

| Score | Comment |
|-------|---------|
| | |

Criterion 2.4.1.1.2 19(2)(b) The health establishment must, as appropriate to the type and size of the establishment, have a performance management and development system in place.

2.4.1.1.2.1 The performance management agreements of managers meet the requirements listed below.

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

Request strategic, operational plans and performance agreements for the current financial year. Verify whether the aspects listed below meet the performance management requirements. Score 1 if the aspect is compliant and 0 if not compliant.

| Score | Comment |
|-------|---------|
| | |

Unit 1 Manager or CEO

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 2 Human resources manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 3 Nursing services manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 4 Quality manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 5 Financial manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 6 Procurement manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 7 Facility infrastructure manager

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 8 Head of clinical management

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

Unit 9 Infection Prevention and control Practitioner

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Aligned with strategic, APP and operational plans | | |
| 2. Contain targets | | |
| 3. Targets are assigned completion dates | | |
| 4. Signature of employee | | |
| 5. Signature of manager | | |

2.4.1.1.2.2 Senior managers undergo comprehensive reviews of their performance against targets twice a year.

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

Select any three human resources files of senior managers (level 13 and above) to verify whether performance reviews were conducted within the last six months. Not applicable: At a health establishment where there are no level 13 and above health care personnel.

| Score | Comment |
|-------|---------|
| | |

2.4.1.1.2.3 Remedial action is implemented where poor performance of senior managers is identified.

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

Implementation/intervention reports indicating action taken to address failures in performance must be available. Reports must be dated and signed by the respective individuals and their supervisors. Not applicable: Where all senior managers have achieved their targets.

| Score | Comment |
|-------|---------|
| | |

2.4.1.1.2.4 Health care personnel undergo comprehensive performance reviews based on their performance plans.

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

Request finalised performance management reviews for each job category listed below. Check each file for the 10 aspects listed below. Request documentation for completed assessment cycles from the previous financial year. Score 1 if the aspect is compliant and 0 if not compliant.

| Score | Comment |
|-------|---------|
| | |

Unit 1 Professional nurse

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Annual work plan is available | | |
| 2. Annual work plan activities are aligned to the health establishment's operational plan | | |
| 3. Personal development plan is available | | |
| 4. Objectives and targets are reviewed for each quarter or biannually | | |
| 5. Performance agreement is available | | |
| 6. Annual (final) assessment report for Performance Management and Development System is available | | |
| 7. Dated signature of incumbent is included in the final performance assessment report | | |
| 8. Annual (final) assessment for Performance Management and Development System report or outcome was moderated by a moderating committee | | |
| 9. A letter informing the employee of the outcome of the final performance assessment is available | | |

Unit 2 Doctor

| Aspects | Score | Comment |
|----------------------------------|-------|---------|
| 1. Annual work plan is available | | |

| | | |
|--|--|--|
| 2. Annual work plan activities are aligned to the health establishment's operational plan | | |
| 3. Personal development plan is available | | |
| 4. Objectives and targets are reviewed for each quarter or biannually | | |
| 5. Performance agreement is available | | |
| 6. Annual (final) assessment report for Performance Management and Development System is available | | |
| 7. Dated signature of incumbent is included in the final performance assessment report | | |
| 8. Annual (final) assessment for Performance Management and Development System report or outcome was moderated by a moderating committee | | |
| 9. A letter informing the employee of the outcome of the final performance assessment is available | | |

Unit 3 Rehabilitation services (any category)

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Annual work plan is available | | |
| 2. Annual work plan activities are aligned to the health establishment's operational plan | | |
| 3. Personal development plan is available | | |
| 4. Objectives and targets are reviewed for each quarter or biannually | | |
| 5. Performance agreement is available | | |
| 6. Annual (final) assessment report for Performance Management and Development System is available | | |
| 7. Dated signature of incumbent is included in the final performance assessment report | | |

| | | |
|--|--|--|
| 8. Annual (final) assessment for Performance Management and Development System report or outcome was moderated by a moderating committee | | |
| 9. A letter informing the employee of the outcome of the final performance assessment is available | | |

Unit 4 Pharmacist

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Annual work plan is available | | |
| 2. Annual work plan activities are aligned to the health establishment's operational plan | | |
| 3. Personal development plan is available | | |
| 4. Objectives and targets are reviewed for each quarter or biannually | | |
| 5. Performance agreement is available | | |
| 6. Annual (final) assessment report for Performance Management and Development System is available | | |
| 7. Dated signature of incumbent is included in the final performance assessment report | | |
| 8. Annual (final) assessment for Performance Management and Development System report or outcome was moderated by a moderating committee | | |
| 9. A letter informing the employee of the outcome of the final performance assessment is available | | |

Unit 5 Administration clerk

| Aspects | Score | Comment |
|---|-------|---------|
| 1. Annual work plan is available | | |
| 2. Annual work plan activities are aligned to the health establishment's operational plan | | |
| 3. Personal development plan is available | | |

| | | |
|--|--|--|
| 4. Objectives and targets are reviewed for each quarter or biannually | | |
| 5. Performance agreement is available | | |
| 6. Annual (final) assessment report for Performance Management and Development System is available | | |
| 7. Dated signature of incumbent is included in the final performance assessment report | | |
| 8. Annual (final) assessment for Performance Management and Development System report or outcome was moderated by a moderating committee | | |
| 9. A letter informing the employee of the outcome of the final performance assessment is available | | |

Unit 6 Cleaner

| Aspects | Score | Comment |
|--|-------|---------|
| 1. Annual work plan is available | | |
| 2. Annual work plan activities are aligned to the health establishment's operational plan | | |
| 3. Personal development plan is available | | |
| 4. Objectives and targets are reviewed for each quarter or biannually | | |
| 5. Performance agreement is available | | |
| 6. Annual (final) assessment report for Performance Management and Development System is available | | |
| 7. Dated signature of incumbent is included in the final performance assessment report | | |
| 8. Annual (final) assessment for Performance Management and Development System report or outcome was moderated by a moderating committee | | |
| 9. A letter informing the employee of the outcome of the final performance assessment is available | | |

Criterion 2.4.1.1.3 19(2)(c) The health establishment must, as appropriate to the type and size of the establishment, have a system to monitor that health care personnel maintain their professional registration with the relevant councils on an annual basis.

2.4.1.1.3.1 Health care providers have a current registration with relevant health professional bodies.

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

Use the checklist below to verify whether health care providers working at the health establishment are registered with the relevant professional bodies. Select three files of each category of health care provider listed below. A copy of the registration certificate or card issued by the professional body must be available. Score 1 if they have a current registration and 0 if not. NB: For nurses the following evidence must be accepted (a) a copy of the last published issue of a register or any supplementary list purported to be printed and published in terms of section 35 of the Act;(b) a South African Nursing Council certificate of registration ; (c) a South African Nursing Council annual practising certificate (APC); (d) a certified copy under the hand of the Registrar of the entry of the person's name in the register; (e) eRegister published (displayed on the Internet) in terms of section 35 of the Nursing Act, 2005 can legally be used by employers to verify that a person is registered in terms of the Nursing Act, 2005.Score Not applicable for categories of health providers not employed in the health establishment. NB: Please note other Statutory bodies/councils will issue a virtual card which must be accepted.

| Score | Comment | |
|---|---------|---------|
| | | |
| Aspects | Score | Comment |
| 1. Doctors including sessional doctors. | | |
| 2. Nurses | | |
| 3. Pharmacists | | |
| 4. Physiotherapists | | |
| 5. Radiographers | | |
| 6. Social workers | | |
| 7. Occupational therapists | | |
| 8. Nutritionists or dieticians | | |
| 9. Psychologists | | |
| 10. Speech Therapists | | |
| 11. Ultra-sonographers | | |
| 12. Medical Technologists | | |
| 13. Dentists or Oral Hygienists | | |

Criterion 2.4.1.1.4 19 Health care personnel recruitment and selection procedures must be adhered to by the health establishment.

2.4.1.1.4.1 The health establishment can demonstrate that it has adhered to its selection and recruitment procedures with respect to the last three appointments filled.

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

Select files of the last three employees recruited by the health establishment. Verify whether the appointments comply with the requirements listed below. Score 1 if the files are compliant and 0 if not compliant.

| Score | Comment |
|-------|---------|
| | |

| | |
|--|--|
| | |
|--|--|

Unit 1 File 1

| Aspects | Score | Comment |
|-----------------------------------|-------|---------|
| 1. Copy of advertisement. | | |
| 2. List of shortlisted candidates | | |
| 3. Invitations for interviews | | |
| 4. Minutes of the interview | | |
| 5. Appointment letter | | |
| 6. Acceptance letter or slip | | |

Unit 2 File 2

| Aspects | Score | Comment |
|-----------------------------------|-------|---------|
| 1. Copy of advertisement. | | |
| 2. List of shortlisted candidates | | |
| 3. Invitations for interviews | | |
| 4. Minutes of the interview | | |
| 5. Appointment letter | | |
| 6. Acceptance letter or slip | | |

Unit 3 File 3

| Aspects | Score | Comment |
|-----------------------------------|-------|---------|
| 1. Copy of advertisement. | | |
| 2. List of shortlisted candidates | | |
| 3. Invitations for interviews | | |
| 4. Minutes of the interview | | |
| 5. Appointment letter | | |
| 6. Acceptance letter or slip | | |

Criterion 2.4.1.1.5 19 The health establishment must have the most up to date human resources policies and comply with labour legislation.

2.4.1.1.5.1 Provincial or health establishment human resources policies are available.

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

Verify whether the documents listed below are available. Score 1 if the document is available and 0 if not available.

| Score | Comment | |
|---|---------|---------|
| | | |
| | | |
| Aspects | Score | Comment |
| 1. Leave Policy | | |
| 2. Recruitment and Selection Policy | | |
| 3. Skills Development Policy or Education and Training Policy | | |
| 4. Remuneration Policy | | |
| 5. Performance Management Policy | | |
| 6. Employment Equity Policy | | |
| 7. Disciplinary Policy | | |
| 8. Grievance Handling and Dispute Resolution Policy | | |
| 9. Occupational Health and Safety Policy | | |
| 10. Internship Policy | | |
| 11. Relocation Policy | | |
| 12. Personnel Retention Policy | | |
| 13. Sexual Harassment Policy | | |
| 14. Remunerative Work Outside the Public Service (RWOPS) Policy | | |
| 15. Financial Disclosure Policy | | |
| 16. Commuted Overtime Policy | | |

Domain 2.5 FACILITIES AND INFRASTRUCTURE

Sub Domain 2.5.1 17 Security services

Standard 2.5.1.1 17(1) The health establishment must have systems to protect users, health care personnel and property from security threats and risks.

Criterion 2.5.1.1.1 17 The health establishment must have a zero-tolerance approach to violence and abuse towards health care personnel and must take action to support this.

2.5.1.1.1.1 The report or statistics from the previous 12 months specifies incidents of harm to health care personnel.

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

The report or statistics from the previous 12 months must include information about incidents of harm to health care personnel.
NB: This refers to incidents of physical harm. Not applicable: Where no incidents of harm to health care personnel have occurred in the previous 12 months.

| Score | Comment |
|-------|---------|
| | |
| | |

2.5.1.1.1.2 The report or statistics for the previous 12 months includes remedial action taken in response to incidents of harm to health care personnel.

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

Remedial action taken in response to specific incidents must be available. Not applicable: Where no incidents of harm to health care personnel have occurred.

| Score | Comment |
|-------|---------|
| | |



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.

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- 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
Development Analysis and Support**

Date:

10/08/2022

Dr Sipiwe Mndaweni

Signature:

Chief Executive Officer: OHSC

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A decorative graphic at the bottom of the page consists of three curved, overlapping bands. The top band is light blue, the middle band is red, and the bottom band is green. The bands curve from the left side towards the right, creating a sense of movement and depth.