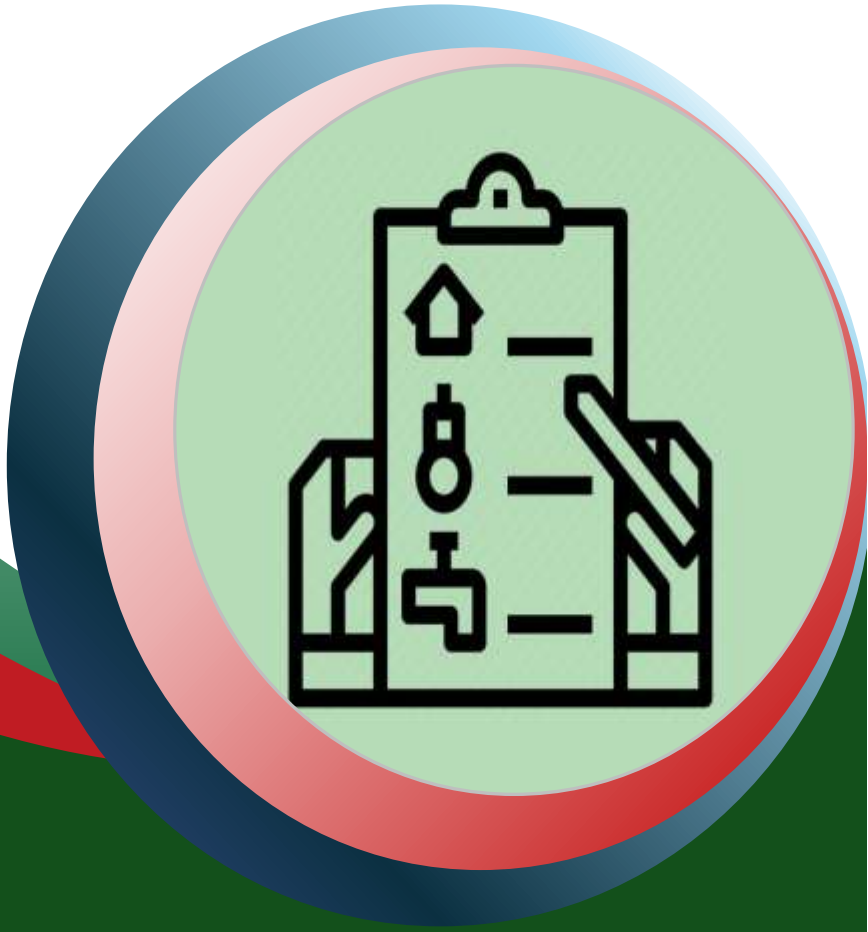
OHSC

Office of Health Standards Compliance

Ensuring quality and safety in health care

Regulatory Central Hospital Inspection Tool v1.0



Mortuary Services

Facility: Date:

- **Tool Name:** Regulatory Central Hospital Inspection Tool v1.0
  HEs Type: Hospitals
- **Sector:** Public
- **Specialization:** Central
- **Created By:** Health Standards Development and Training

41 Mortuary Services

Domain 41.2 CLINICAL GOVERNANCE AND CLINICAL CARE
Sub Domain 41.2.1 7 Clinical management.
Standard 41.2.1.1 7(2) (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.
Criterion 41.2.1.1.1 7 The mortuary service must be compliant with relevant legislation.

41.2.1.1.1.1 The temperatures of the refrigerators and cold rooms are maintained between 2 degrees Celsius and 4 degrees Celsius.

Assessment type: Document - **Risk rating:** Essential measure
Inspect the temperature records for the previous three months to verify whether it has been maintained between 2 degrees Celsius and 4 degrees Celsius.
Not applicable: Never

Score	Comment

41.2.1.1.1.2 The temperature of the refrigerators and/or cold rooms are recorded twice daily.

Assessment type: Document - **Risk rating:** Essential measure
Inspect the temperature records for the previous three months to verify whether temperatures have been recorded twice daily. This will ensure that any malfunction in the refrigeration system will be detected and corrected as soon as possible, preventing decay of the corpses in storage.
Not applicable: Never

Score	Comment

41.2.1.1.1.3 Corpses are recorded in the register.

Assessment type: Document - **Risk rating:** Essential measure
A register for recording corpses must be available. Check entries for the previous three months. Verify whether all columns of the register are comprehensively completed.
Not applicable: Never

Score	Comment

41.2.1.1.1.4 All corpses are labelled.

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

Select three corpses and verify whether they are labelled. Score 1 if the corpses are labelled and 0 if not labelled.

Score	Comment

1. Corpse 1		
2. Corpse 2		
3. Corpse 3		

41.2.1.1.1.5 Anatomical waste is recorded in a register.

Assessment type: Document - **Risk rating:** Essential measure
A register for recording anatomical waste must be available. The date of placement and date of removal for disposal is recorded.
Not applicable: Where the register for anatomical waste is not kept in mortuary but kept in other areas such as Maternity unit.

Score	Comment

Criterion 41.2.1.1.2 7 Equipment for storage and transportation of bodies are available and meet environmental hygiene standards.

41.2.1.1.2.1 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.

Score	Comment

Aspects	Score	Comment
1. Stainless steel trolley.		
2. Fridges with stainless steel drawers. Explanatory note: Score 0 if the drawers are rusted.		
3. Hydraulic jack (stainless steel).		
4. Stainless steel shelves.		
5. Built-in temperature regulator.		

Criterion 41.2.1.1.3 7 The health establishment must have a functional quality management system.

41.2.1.1.3.1 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. Score not applicable where no gaps have been identified.

Aspects	Score	Comment

1. Gaps identified		
2. Activities required to address gaps		
3. Health care personnel responsible		
4. Time frames		

41.2.1.1.3.2 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

Sub Domain 41.2.2 8 Infection prevention and control programmes.
Standard 41.2.2.1 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 41.2.2.1.1 8(2)(a) The health establishment must ensure that there are hand washing facilities in every service area.

41.2.2.1.1.1 Hand washing facilities are available in the mortuary.

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

Aspects	Score	Comment
1. Functional hand wash basin. Explanatory note: The basin should not be blocked, broken, or have cracks .		
2. Taps are functional and not broken.		
3. Plain liquid soap		
4. Wall mounted soap dispenser		
5. Paper towel dispenser with disposable hand paper towels		
6. General waste container. Explanatory note: Containers used for the temporary storage of general waste should be leak proof, intact, corrosive resistant and have a tight-fitting lid. The container must be lined with the appropriate colour coded liner. (Practical Manual: Implementation of the National Infection Prevention and Control Strategic Framework page 82 and page 84).		

41.2.2.1.1.2 Alcohol based hand rub is available.

Assessment type: Observation - **Risk rating:** Vital measure
Observe whether alcohol-based hand rub is available.
Not Applicable: Never

Score	Comment

41.2.2.1.1.3 Posters on hand hygiene are displayed.

Assessment type: Observation - **Risk rating:** Essential measure
Observe whether posters on hand hygiene are displayed This could be a single hand hygiene poster or individual posters for hand washing or correct use of alcohol-based hand rub.
Not applicable: Never

Score	Comment

Criterion 41.2.2.1.2 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.

41.2.2.1.2.1 Personal protective equipment is worn.

Assessment type: Observation - **Risk rating:** Vital measure
Verify whether mortuary personnel are wearing personal protective equipment for the tasks they are performing. Score 1 if the items are available and worn and 0 if not available or not worn. Score not applicable where at the time of the inspection personnel are not in a situation in which they are required to wear protective clothing.

Score	Comment

Aspects	Score	Comment
1. Suitable gloves – non-sterile		
2. Warm clothing (freezer overalls). Explanatory note: Score not applicable for health establishments that do not have an open cold room mortuary.		
3. Waterproof aprons		
4. Face masks		
5. Protective eyewear (goggles or face shields)		

Sub Domain 41.2.3 9 Waste management.
Standard 41.2.3.1 9(1) The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.
Criterion 41.2.3.1.1 9(2)(a) The health establishment must have appropriate waste containers at the point of waste generation.

41.2.3.1.1.1 Appropriate containers for disposal of all types of waste are available.

Assessment type: Observation - **Risk rating:** Vital measure
Verify whether the waste containers listed below are available. All health care risk waste containers must have an appropriate international infectious hazard label 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.

Score	Comment

Aspects	Score	Comment
1. Human anatomical waste (red bucket with tight fitting lid)		
2. Infectious non-anatomical waste (red)		
3. General waste (black, beige, white or transparent packaging may be used)		

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 Central Hospitals.

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It is hereby certified that the Regulatory Central Hospital Inspection Tools version 1.0 was developed by the Office of Health Standards Compliance.

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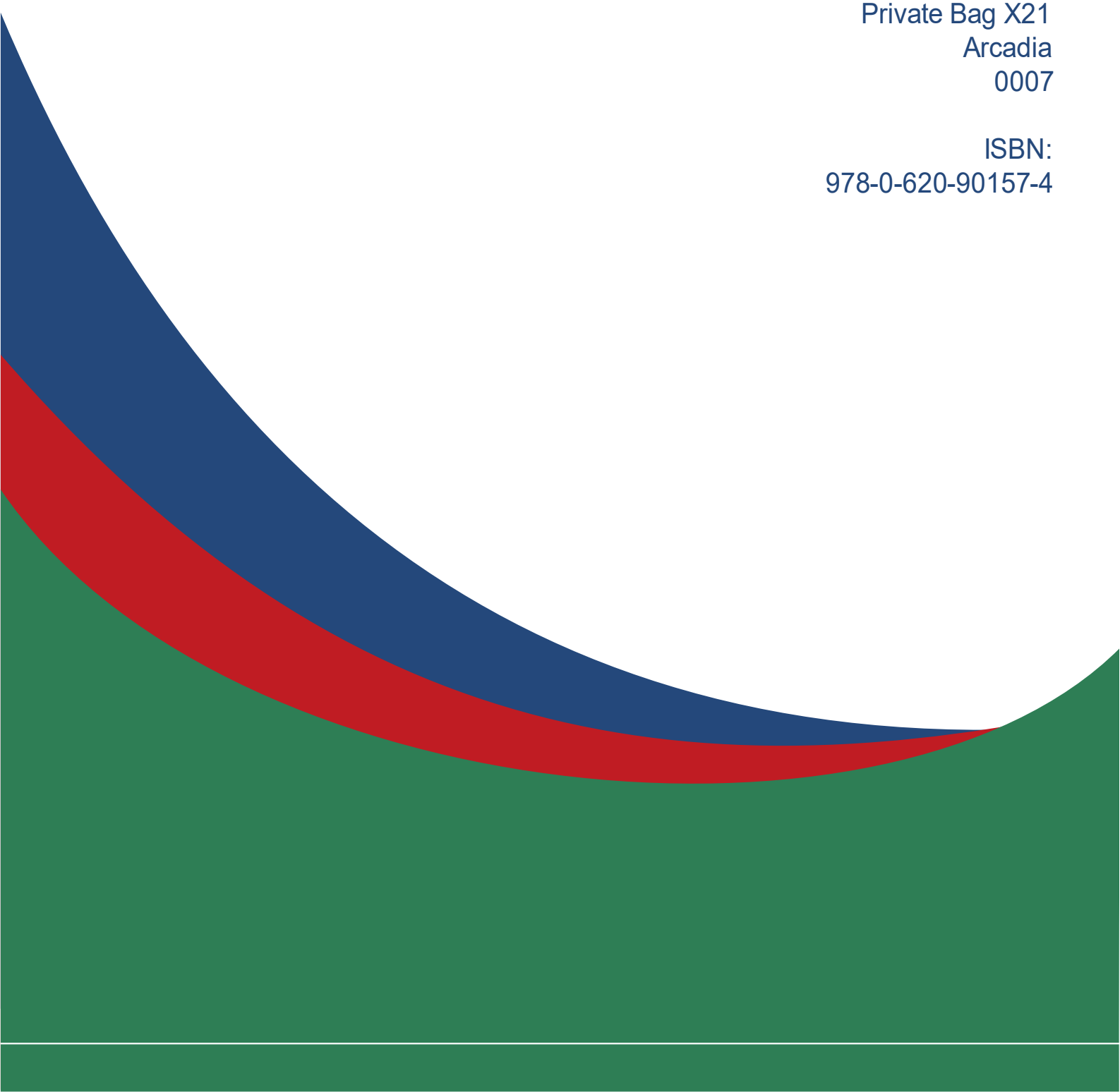
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