



Facility:

Date:

- **Tool Name:** Regulatory District Hospital Inspection tool v1.3 - Final
- **HES Type:** Hospitals
- **Sector:** Public
- **Specialization:** District
- **Created By:** Mosehle Matlala

# 11 Accident And Emergency Unit

## Domain 11.1 USER RIGHTS

### Sub Domain 11.1.1 4 User information

**Standard 11.1.1.1 4(1)** The health establishment must ensure that users are provided with adequate information about the health care services available at the health establishment and information about accessing those services.

**Criterion 11.1.1.1.1 4(2)(a)(iv)** The health establishment must provide users with information relating to the complaints, compliments and suggestions management system.

**11.1.1.1.1.1** A complaints toolkit is available.

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

Verify whether the complaint forms, box and poster are available at the health establishment. Score 1 if compliant and 0 if not compliant.

Score	Comment

Aspects	Score	Comment
1. Lockable complaints box is visibly placed in the unit.		
2. Complaints box is fixed to wall or a flat surface.		
3. Official complaint forms in at least two commonly spoken official languages are available next to box or there is an indication on the poster where to obtain the forms.		
4. Standardised poster describing process to follow to lodge a complaint is visibly displayed.		
5. Poster on complaints is available in at least two of the official languages commonly spoken in the area.		

### Sub Domain 11.1.2 5 Access to care

**Standard 11.1.2.1 5(1)** The health establishment must ensure that users are attended to in a manner which is consistent with the nature and severity of their health condition.

**Criterion 11.1.2.1.1 5(2)(a)** The health establishment must implement a system of triage.

**11.1.2.1.1.1** The algorithm used for triage is visibly displayed in the triage area.

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

The triage algorithm must be visibly displayed or available in the triage area. Not applicable: Never

Score	Comment

**11.1.2.1.1.2** Health care providers have received training on the triage process in the past 12 months.

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

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

Score	Comment

**11.1.2.1.1.3** Health care providers implement the triage process as described in the displayed algorithm.

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

Observe the health care provider responsible for user triage as they triage a user. Score 1 if the procedure described in the algorithm is followed and 0 if not followed. NB: Score not applicable when there are no patients/users at the time of inspection. Not applicable: Never

Score	Comment

**11.1.2.1.1.4** Users are triaged in accordance with the documented procedure.

**Assessment type:** Patient record audit - **Risk rating:** Vital measure

Select the health records of three users who were attended to in the emergency unit at the time of inspection. Verify whether their triage status was recorded. Score 1 if it was recorded and 0 if not recorded.

Score	Comment

Aspects	Score	Comment
1. User health record 1		
2. User health record 2		
3. User health record 3		

**11.1.2.1.1.5** Health care providers are able to explain the triage process.

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

Interview three health care providers and ask them to explain the triage process. Score 1 if the process is correctly explained, as per the displayed algorithm, and 0 if not correctly explained.

Score	Comment

Aspects	Score	Comment
1. Health care provider 1		
2. Health care provider 2		

3. Health care provider 3		
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**Criterion 11.1.2.1.2 5(2)(b) The health establishment must ensure access to emergency medical transport for users requiring urgent transfer to another health establishment, and that they are accompanied by a health care provider.**

**11.1.2.1.2.1** The contact numbers for emergency user transport services are displayed near the point of use.

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

Verify whether the emergency transport numbers are displayed at the point of use, i.e. close to the telephone to be used. Not applicable: Never

Score	Comment

**Criterion 11.1.2.1.3 5(2)(c) The health establishment must adhere to clinical guidelines on stabilizing users presenting in an emergency before referring them to another health establishment.**

**11.1.2.1.3.1** User health records indicate adherence to the guidelines regarding examination and stabilisation.

**Assessment type:** Patient record audit - **Risk rating:** Vital measure

Select three health records of emergency users to determine whether the aspects listed below were documented. Score 1 if the aspect is documented and 0 if not documented. Score Not applicable if there were no users transferred to another health establishment as an emergency in the last three months.

Score	Comment

Unit 1 Health record 1

Aspects	Score	Comment
1. Triage category or score		
2. Initial doctor's assessment		
3. Medical history		
4. Physical examination		
5. Investigations ordered.		
6. Provisional diagnosis		
7. Final diagnosis (NA where final diagnosis has not been made prior to transfer)		
8. Interventions made to stabilise user.		
9. All vital signs monitored.		

10. Transfer arrangements for receiving doctor or health establishment(where applicable).		
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Unit 2 Health record 2

Aspects	Score	Comment
1. Triage category or score		
2. Initial doctor's assessment		
3. Medical history		
4. Physical examination		
5. Investigations ordered.		
6. Provisional diagnosis		
7. Final diagnosis (NA where final diagnosis has not been made prior to transfer)		
8. Interventions made to stabilise user.		
9. All vital signs monitored.		
10. Transfer arrangements for receiving doctor or health establishment(where applicable).		

Unit 3 Health record 3

Aspects	Score	Comment
1. Triage category or score		
2. Initial doctor's assessment		
3. Medical history		
4. Physical examination		
5. Investigations ordered.		
6. Provisional diagnosis		
7. Final diagnosis (NA where final diagnosis has not been made prior to transfer)		
8. Interventions made to stabilise user.		
9. All vital signs monitored.		
10. Transfer arrangements for receiving doctor or health establishment(where applicable).		

**Standard 11.1.2.2 5(3)** The health establishment must maintain a system of referral as established by the responsible authority.

**Criterion 11.1.2.2.1 5(4)(b)** The health establishment must ensure that a copy of the

**referral document is kept in the user's health record.**

**11.1.2.2.1.1** A copy of the referral letter for users referred out of the health establishment are filed in the user health record.

**Assessment type:** Patient record audit - **Risk rating:** Essential measure

Request the health records of the last three users who were referred. Verify whether a copy of the referral letter is filed in the health record, the referral copy should include but not limited to user's health status, reason for referral and name of health establishment they are being referred to. Score 1 if the referral letter is the health record and 0 if not. NB: Health records kept/filed in electronic health system are acceptable.

Score	Comment

Aspects	Score	Comment
1. Health record 1		
2. Health record 2		
3. Health record 3		

**Sub Domain 11.1.3 22** Waiting times

**Standard 11.1.3.1 22** The health establishment must monitor waiting times against the National Core Standards for Health Establishments in South Africa.

**Criterion 11.1.3.1.1 22** Waiting times are monitored and improvement plans are implemented.

**11.1.3.1.1.1** Compliance with waiting time target(s) in the emergency unit is monitored.

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

Request the previous six months' tools used for monitoring waiting times at the emergency unit. Not applicable: Never

Score	Comment

**11.1.3.1.1.2** The waiting time survey report for the emergency unit is available.

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

Request the report from the previous six months it must be dated and signed. Contents of the report should include but not limited to: Title or name of report, Background information, Targets and Findings, Causes of delays(if any) ,Recommendations, Conclusion. Not applicable: Never

Score	Comment

**11.1.3.1.1.3** The average waiting time per category of the triage scale is visibly displayed in the emergency unit waiting area.

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

The aim of this requirement is to give users an indication of how long they should expect to wait in the emergency unit, and to assist health care personnel to work within the scope of the target waiting

time. The document reflecting the waiting time must be displayed in an area that is easily visible to users waiting to receive care. The average waiting time for each triage category, as determined by the previous waiting time report, must be displayed. Not applicable: Never

Score	Comment

**Domain 11.2 CLINICAL GOVERNANCE AND CLINICAL CARE**

**Sub Domain 11.2.1 6** User health records and management

**Standard 11.2.1.1 6(1)** The health establishment must ensure that health records of health care users are protected, managed and kept confidential in line with section 14, 15 and 17 of the Act.

**Criterion 11.2.1.1.1 6(2)(b) The health establishment must ensure confidentiality of health records.**

**11.2.1.1.1.1** Confidentiality of health records is maintained.

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

Observe how user health records are managed in the unit and determine whether unauthorised individuals would be able to access the information in the health records. This includes but not limited to the health records of users admitted to the unit, health records being used for clinical audits or other administrative purposes or health records outside the records storage area or room of the unit for any other reason. Such records should be kept in a manner that safeguards against unauthorised access to the content of the health record. User records may be placed at the foot end of the bed but must not be left open for people to be able to read them when a health care provider is not present. Not applicable: Never

Score	Comment

**Standard 11.2.1.2 6(3)** The health establishment must create and maintain a system of health records of users in accordance with the requirements of section 13 of the Act.

**Criterion 11.2.1.2.1 6(4)(b) The health establishment must record information relating to the examination and health care interventions of users.**

**11.2.1.2.1.1** A clinical assessment and management plan for the user is recorded in the user health record.

**Assessment type:** Patient record audit - **Risk rating:** Vital measure

Select the health records of three users who attended the emergency unit at the time of inspection. Verify that the aspects listed below have been recorded. Score 1 if the aspect is recorded and 0 if not recorded. NB: Score N/A if there are no users at the time of inspection.

Score	Comment

Unit 1 Health record 1

Aspects	Score	Comment
1. Vital signs		
2. Physical examination findings		

3. Investigations requested (where applicable)		
4. Provisional diagnosis		
5. DSM V (applicable to mental care users only)		
6. Treatment plan		
7. Nursing care plan		
8. Health education provided(where applicable).		
9. Date of each entry		
10. Time of each entry		
11. Each entry signed by health care provider making entry.		
12. Designation of signatory		
13. Medicines administered (signed, dated, time of administration and dose recorded)		
14. Clear prescription by medical officer for users to be secluded and/or restrained (specific to mental health care users)		

Unit 2 Health record 2

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
1. Vital signs		
2. Physical examination findings		
3. Investigations requested (where applicable)		
4. Provisional diagnosis		
5. DSM V (applicable to mental care users only)		
6. Treatment plan		
7. Nursing care plan		
8. Health education provided(where applicable).		
9. Date of each entry		
10. Time of each entry		
11. Each entry signed by health care provider making entry.		
12. Designation of signatory		
13. Medicines administered (signed, dated, time of administration and dose recorded)		

14. Clear prescription by medical officer for users to be secluded and/or restrained (specific to mental health care users)		
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Unit 3 Health record 3

Aspects	Score	Comment
1. Vital signs		
2. Physical examination findings		
3. Investigations requested (where applicable)		
4. Provisional diagnosis		
5. DSM V (applicable to mental care users only)		
6. Treatment plan		
7. Nursing care plan		
8. Health education provided(where applicable).		
9. Date of each entry		
10. Time of each entry		
11. Each entry signed by health care provider making entry.		
12. Designation of signatory		
13. Medicines administered (signed, dated, time of administration and dose recorded)		
14. Clear prescription by medical officer for users to be secluded and/or restrained (specific to mental health care users)		

**Standard 11.2.1.3 6(5)** The health establishment must have a formal process to be followed when obtaining informed consent from the user.

**Criterion 11.2.1.3.1 6 A documented procedure which describes the information to be collected and discussed during the process to obtain informed consent is implemented, in accordance with Chapter 2 of the National Health Act(Section 7).**

**11.2.1.3.1.1** Health care providers correctly complete forms used for informed consent.

**Assessment type:** Patient record audit - **Risk rating:** Non negotiable measure

Request three health records of users admitted in the unit at the time of inspection who gave consent to operation or procedure or medical treatment. Examine the consent forms to verify whether they comply with the aspects listed below. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment

Unit 1 Health record 1

Aspects	Score	Comment
1. Signatory providing consent was legally entitled to give informed consent. Explanatory note: As described in the National Health Act, this may be a person authorised by the court (e.g. a curator), or in order of priority, the user's spouse, partner, parent, grandparent, major child, or brother or sister. In an emergency, lifesaving procedures may be authorised by the health care provider, if "the treatment is limited to what is immediately necessary to save life or avoid significant deterioration in the user's health" HPCSA, Booklet 4. In the case of a child, the age to give consent is over 12 years in accordance with sections 129(2)(a)(b) and 129(3)(a)(b)(c).		
2. Exact nature of operation/procedure or treatment, including site and side, where relevant		
3. User's full names appear on consent form.		
4. Age of user		
5. Consent form is signed by user, his/her legal guardian (for minors) or person legally responsible for the user (adults with diminished mental capacity)		
6. Consent form is signed by health care provider who will perform procedure or delegated person.		
7. Consent form is dated.		
8. All entries on form are legible.  <i>Reference:</i> <a href="https://www.hpcs.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf">https://www.hpcs.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf</a>		

## Unit 2 Health record 2

Aspects	Score	Comment
1. Signatory providing consent was legally entitled to give informed consent. Explanatory note: As described in the National Health Act, this may be a person authorised by the court (e.g. a curator), or in order of priority, the user's spouse, partner, parent, grandparent, major child, or brother or sister. In an emergency, lifesaving procedures may be authorised by the health care provider, if "the treatment is limited to what is immediately necessary to save life or avoid significant deterioration in the user's health" HPCSA, Booklet 4. In the case of a child, the age to give consent is over 12 years in accordance with sections 129(2)(a)(b) and 129(3)(a)(b)(c).		
2. Exact nature of operation/procedure or treatment, including site and side, where relevant		
3. User's full names appear on consent form.		
4. Age of user		
5. Consent form is signed by user, his/her legal guardian (for minors) or person legally responsible for the user (adults with diminished mental capacity)		
6. Consent form is signed by health care provider who will perform procedure or delegated person.		

7. Consent form is dated.		
8. All entries on form are legible. <i>Reference:</i> <a href="https://www.hpcs.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf">https://www.hpcs.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf</a>		

Unit 3 Health record 3

Aspects	Score	Comment
1. Signatory providing consent was legally entitled to give informed consent. Explanatory note: As described in the National Health Act, this may be a person authorised by the court (e.g. a curator), or in order of priority, the user's spouse, partner, parent, grandparent, major child, or brother or sister. In an emergency, lifesaving procedures may be authorised by the health care provider, if "the treatment is limited to what is immediately necessary to save life or avoid significant deterioration in the user's health" HPCSA, Booklet 4. In the case of a child, the age to give consent is over 12 years in accordance with sections 129(2)(a)(b) and 129(3)(a)(b)(c).		
2. Exact nature of operation/procedure or treatment, including site and side, where relevant		
3. User's full names appear on consent form.		
4. Age of user		
5. Consent form is signed by user, his/her legal guardian (for minors) or person legally responsible for the user (adults with diminished mental capacity)		
6. Consent form is signed by health care provider who will perform procedure or delegated person.		
7. Consent form is dated.		
8. All entries on form are legible. <i>Reference:</i> <a href="https://www.hpcs.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf">https://www.hpcs.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf</a>		

**Sub Domain 11.2.2 7 Clinical management**

**Standard 11.2.2.1 7(1)** The health establishment must establish and maintain clinical management systems, structures and procedures that give effect to national policies and guidelines.

**Criterion 11.2.2.1.1 7(2)(a)** The health establishment must ensure that clinical policies and guidelines for priority health conditions issued by the national department are available and communicated to health care personnel.

**11.2.2.1.1.1** Clinical guidelines and policies are communicated to health care providers.

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

Documented evidence that personnel have been informed about the clinical policies and guidelines must be available. This may include, but need not be limited to, distribution lists that include personnel signatures to indicate they have read and understood the document (which must be dated and signed), proof of attendance at a meeting where policies and guidelines are discussed, or similar evidence for electronic distribution. Score 1 if such evidence is available and 0 if not available.

Score	Comment

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Aspects	Score	Comment
1. Standard Treatment Guidelines and Essential Medicines List for Hospital Level (Adults) 2019 or latest		
2. Standard Treatment Guidelines and Essential Medicines List for Hospital Level (Paediatrics) 2017 or latest		
3. Tuberculosis Management Guidelines 2014 or latest		
4. Guidelines for the Treatment of Malaria in South Africa 2018 or latest		
5. National Consolidated Guidelines for the Management of HIV in adults, adolescents, children and infants and prevention of mother-to-child transmission South African National Department of Health,2020 or latest		
6. Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework 2020 or latest		
7. National clinical guidelines of PEP in occupational and non-occupational exposures 2020 or latest		

**Criterion 11.2.2.1.2 7 Healthcare providers are informed on the health establishment and their specific responsibilities.**

**11.2.2.1.2.1** 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. Triage		
2. Managing psychiatric emergencies		
3. Referrals		
4. Maintaining confidentiality of user health records in clinical areas		

5. Obtaining informed consent		
6. Handover of users from emergency medical services (EMS) to health establishment personnel		
7. Management of emergency resuscitations		
8. Standard precautions		
9. Storage of Schedule 5 and 6 medicines		
10. Access to medicines after hours.		
11. Safe administration of medicines to users		
12. Administration of blood		
13. Management of needlestick and sharps injuries		

**Standard 11.2.2.2 7(2)** (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

**Criterion 11.2.2.2.1 7 The health establishment implements process to ensure environmental cleanliness.**

**11.2.2.2.1.1** All work completed is verified by the cleaning supervisor or delegated health care personnel.

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

Daily inspections will ensure the cleanliness of the emergency 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 (e.g. checklists/tick sheets) listing all cleaning tasks must be completed for each room or area. Not applicable: Never

Score	Comment

**11.2.2.2.1.2** 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 unit is free of dirt and stains. Not applicable: Never

Score	Comment

**Criterion 11.2.2.2.2 7 Procedures to minimise the risk of health care-associated infections must be implemented.**

**11.2.2.2.2.1** 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

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

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

There must be a documented record for the previous three months of the dates when the eyewash bottles were checked. Not applicable: Never

Score	Comment

**Criterion 11.2.2.2.3 7 Implementation of standard operating procedures must be monitored.**

**11.2.2.2.3.1** 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

**Criterion 11.2.2.2.4 7 The management of used and soiled linen must meet infection prevention and control requirements.**

**11.2.2.2.4.1** The emergency unit 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. Access to Not applicable: Never

Score	Comment

**Criterion 11.2.2.2.5 7 The health establishment must have a functional quality management system**

**11.2.2.2.5.1** Quality improvement plans are developed by health care personnel.

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

**11.2.2.2.5.2** 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 11.2.2.2.6 7 Communication systems must be available and functional to facilitate adequate user care, and safety of user and health care personnel.**

**11.2.2.2.6.1** Functional, accessible telephones are available in the unit.

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

Maintaining and sustaining communication is essential for user safety. Telephones must be functional and available in the unit. Not applicable: Never

Score	Comment

**Criterion 11.2.2.2.7 7 The health establishment must implement systems to ensure that blood and blood products are available and administered safely.**

**11.2.2.2.7.1** Emergency blood is available in a designated area on-site.

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

To meet this requirement, O-negative blood must be available on site. This blood may be found in the South African National Blood Service (SANBS) refrigerator. The health establishment may choose an area such as the emergency unit, theatre or Intensive Care Unit in which to store the blood. Not applicable: Where emergency blood is not kept in the unit.

Score	Comment

**11.2.2.2.7.2** Administration of blood is recorded.

**Assessment type:** Patient record audit - **Risk rating:** Vital measure

Select the health records of three users seen in the unit who had blood administered and verify whether the aspects listed below are documented. Score 1 if the aspect is documented and 0 if not documented. NB: Score Not applicable if there were no users who had blood administered.

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Score	Comment

Unit 1 Health record 1

Aspects	Score	Comment
1. Clinical indication for blood or blood products		
2. Type of blood product required.		
3. Informed consent completed and signed.		
4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The unit of blood has a tag that has user details, donor details, blood type, date when blood was donated, rhesus factor and expiry date. These details must be cross-checked with the user information prior to administration.		
6. Confirmation of user's identity prior to administration		
7. User's vital signs recorded and documented prior to administration.		
8. User's vital signs recorded and documented during administration of blood		
9. User's vital signs recorded and documented for 12 hours after administration		
10. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were administered, any reaction, and observations.		

Unit 2 Health record 2

Aspects	Score	Comment
1. Clinical indication for blood or blood products		
2. Type of blood product required.		
3. Informed consent completed and signed.		
4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The unit of blood has a tag that has user details, donor details, blood type, date when blood was donated, rhesus factor and expiry date. These details must be cross-checked with the user information prior to administration.		

6. Confirmation of user's identity prior to administration		
7. User's vital signs recorded and documented prior to administration.		
8. User's vital signs recorded and documented during administration of blood		
9. User's vital signs recorded and documented for 12 hours after administration		
10. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were administered, any reaction, and observations.		

Unit 3 Health record 3

Aspects	Score	Comment
1. Clinical indication for blood or blood products		
2. Type of blood product required.		
3. Informed consent completed and signed.		
4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The unit of blood has a tag that has user details, donor details, blood type, date when blood was donated, rhesus factor and expiry date. These details must be cross-checked with the user information prior to administration.		
6. Confirmation of user's identity prior to administration		
7. User's vital signs recorded and documented prior to administration.		
8. User's vital signs recorded and documented during administration of blood		
9. User's vital signs recorded and documented for 12 hours after administration		
10. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were administered, any reaction, and observations.		

**Criterion 11.2.2.2.8 7 Communication during user handover must be standardised to advance user safety.**

**11.2.2.2.8.1** The correct handover procedure from emergency medical services personnel to health establishment personnel is followed.

**Assessment type:** Patient record audit - **Risk rating:** Vital measure

Select three health records and verify whether the aspects listed below have been documented. Score 1 if the aspect is documented and 0 if not documented.

Score	Comment

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Unit 1 Health record 1

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
1. User identification		
2. Clinical status of user (Glasgow coma scale [GCS])		
3. Clinical status of user (pain score)		
4. Vital signs monitored during transfer.		
5. Known medical history.		
6. Times of arrival		
7. Times of handover		
8. Method of transfer of user from ambulance to consultation room or health establishment bed, i.e. walking, stretcher or wheelchair.		
9. Name and designation of health care provider to whom user was handed over.		
10. Signatures of transferring and receiving health care provider.		

Unit 2 Health record 2

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
1. User identification		
2. Clinical status of user (Glasgow coma scale [GCS])		
3. Clinical status of user (pain score)		
4. Vital signs monitored during transfer.		
5. Known medical history.		
6. Times of arrival		
7. Times of handover		
8. Method of transfer of user from ambulance to consultation room or health establishment bed, i.e. walking, stretcher or wheelchair.		
9. Name and designation of health care provider to whom user was handed over.		

10. Signatures of transferring and receiving health care provider.		
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Unit 3 Health record 3

Aspects	Score	Comment
1. User identification		
2. Clinical status of user (Glasgow coma scale [GCS])		
3. Clinical status of user (pain score)		
4. Vital signs monitored during transfer.		
5. Known medical history.		
6. Times of arrival		
7. Times of handover		
8. Method of transfer of user from ambulance to consultation room or health establishment bed, i.e. walking, stretcher or wheelchair.		
9. Name and designation of health care provider to whom user was handed over.		
10. Signatures of transferring and receiving health care provider.		

**Criterion 11.2.2.2.9 7 The management of emergency resuscitations must be guided and monitored to improve user outcomes.**

**11.2.2.2.9.1** Emergency trolley is stocked with medicines and equipment.

**Assessment type:** Observation - **Risk rating:** Non negotiable measure

Inspect the contents of the emergency trolley against the aspects listed below. Score 1 if the aspect listed is available, functional and not expired (if applicable) and score 0 if the aspect is not available, not functional or expired (if applicable).

Score	Comment

Aspects	Score	Comment
<b>Devices to open and protect airway</b>		
1. Laryngoscope handle		
2. Curved blade for laryngoscope size 2 (adult)		
3. Curved blade for laryngoscope size 3 (adult)		
4. Curved blade for laryngoscope size 4 (adult)		

5. Straight blade for laryngoscope size 1 (paediatric)		
6. Endotracheal tubes - uncuffed size 2.5mm (paediatric)		
7. Endotracheal tubes - uncuffed sizes 3mm (paediatric)		
8. Endotracheal tubes - uncuffed size 3.5mm (paediatric)		
9. Endotracheal tubes - uncuffed sizes 4.0mm (paediatric)		
10. Endotracheal tubes - uncuffed size 4.5mm (paediatric)		
11. Endotracheal tubes - uncuffed sizes 5.0mm (paediatric)		
12. Endotracheal tubes - uncuffed sizes 5.5mm (paediatric)		
13. Endotracheal tubes - cuffed sizes 3.0mm (paediatric)		
14. Endotracheal tubes - cuffed sizes 3.5mm (paediatric)		
15. Endotracheal tubes - cuffed sizes 4.0mm (paediatric)		
16. Endotracheal tubes - cuffed sizes 4.5mm (paediatric)		
17. Endotracheal tubes - cuffed sizes 5.0mm (paediatric)		
18. Endotracheal tubes - cuffed sizes 5.5mm (paediatric)		
19. Endotracheal tubes - cuffed sizes 6.0mm (paediatric)		
20. Endotracheal tubes - cuffed sizes 6.5mm (paediatric)		
21. Endotracheal tubes - cuffed sizes 7.0mm (adult)		
22. Endotracheal tubes - cuffed sizes 7.5mm (adult)		
23. Endotracheal tubes - cuffed sizes 8.0mm (adult)		
24. Endotracheal tubes - cuffed sizes 8.5mm (adult)		
25. Oropharyngeal airway size 00 (neonate)		
26. Oropharyngeal airway size 0 (infant)		
27. Oropharyngeal airway size 1 (small child)		
28. Oropharyngeal airway size 2 (child)		
29. Oropharyngeal airway size 3 (small adult)		
30. Oropharyngeal airway size 4 (medium adult)		
31. Oropharyngeal airway size 5 (large adult)		
32. Nasopharyngeal airway size 3		
33. Nasopharyngeal airway size 4		

34. Nasopharyngeal airway size 5		
35. Plaster or ties for endotracheal tubes		
36. Xylocaine spray or Lubricating gel		
<b>Equipment for difficult Intubation</b>		
37. Introducer		
38. Laryngeal mask airway size 2		
39. Laryngeal mask airway size 3		
40. Laryngeal mask airway size 4		
41. Laryngeal mask airway size 5		
42. Magill forceps (adult)		
43. Magill forceps (paediatric)		
<b>Devices to deliver oxygen/ventilate users</b>		
44. Manual resuscitator device or bag and valve mask (adult)		
45. Manual resuscitator device or bag and valve mask (paediatric)		
46. Oxygen masks		
47. Oxygen supply - ready for use (portable).Explanatory note: An oxygen cylinder fitted with regulator indicating cylinder pressure and adjustable flowrate must be available. Oxygen levels must not be below the minimum level indicated in the oxygen cylinder gauge		
<b>Equipment to diagnose and treat cardiac dysrhythmias</b>		
48. Automated external defibrillator (AED) or defibrillator with pads, paddles and electrodes		
49. Cardiac arrest board (Please note some health establishments have bed-fitted cardiac arrest boards)		
<b>Devices to gain intravascular access</b>		
50. Intravenous administration sets		
51. IV Cannulae		
<b>Medicine</b>		
52. Emergency medicines according to local protocol are available and have not expired.		

**11.2.2.2.9.2** Medical supplies and equipment for resuscitation are available.

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

Inspect whether medical supplies and equipment used for resuscitation is available. The items may be available in the trolley or vicinity of the trolley. Score 1 if the aspect listed is available, functional and not expired (if applicable) and score 0 if the aspect is not available, not functional or expired (if applicable).

Score	Comment

Aspects	Score	Comment
1. Chlorhexidine solution or Alcohol swabs		
2. Eye protection		
3. Facemask		
4. Gloves		
5. Spare batteries for laryngoscope		
6. Spare bulb(where applicable)		
7. Syringe 2ml		
8. Syringe 5ml		
9. Syringe 20ml		
10. Catheter tip syringe 50ml		
11. Needles size 16 G		
12. Needles pink 18 G		
13. Needles green 21G		
14. Scissors		
15. Tourniquet		
16. Stethoscope		
17. Nasogastric tubes size 5 (paediatric)		
18. Nasogastric tubes size 6 (paediatric)		
19. Nasogastric tubes size 8 (paediatric)		
20. Nasogastric tubes size 10 (paediatric)		
21. Nasogastric tubes size 12 (adult / paediatric)		
22. Nasogastric tubes size 14 (adult)		
23. Nasogastric tubes size 16 (adult)		

24. Nasogastric tubes size 18 (adult)		
25. Suction catheter 6F (neonate)		
26. Suction catheter 8F (paediatric)		
27. Suction catheter 10F (paediatric)		
28. Suction catheter 12F (adult)		
29. Suction catheter 14F (adult)		
30. Suction devices (portable)		
31. Yankhauer suction		
32. Resuscitation algorithm		

**11.2.2.2.9.3** The emergency trolley in the unit is checked.

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

This must be done at the change of each shift and after each use. Check records from the previous 30 days. Not applicable: Never

Score	Comment

**Criterion 11.2.2.2.10 7 Medical equipment management systems must be in place to minimise the risk of patient safety incidents related to medical equipment.**

**11.2.2.2.10.1** Health care personnel receive training in the use of medical equipment.

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

This includes, but is not limited to, orientation records demonstrating that in-service training or training by the supplier of new equipment has been conducted. Training must be provided for each health care personnel member for each item of equipment he/she will be required to use in the course of performing his/her duties. Not applicable: Where there was no new equipment introduced in the past 12 months.

Score	Comment

**Sub Domain 11.2.3 8** Infection prevention and control programmes

**Standard 11.2.3.1 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 11.2.3.1.1 8(2)(a)** The health establishment must ensure that there are hand washing facilities in every service area.

**11.2.3.1.1.1** Hand washing facilities are available.

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

Verify whether the hand washing items listed below are available. Score 1 if the item is available and 0 if not available.

Score	Comment

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Unit 1 User care area

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
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 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. Explanatory note: Taps must be elbow-operated in user care areas, but not in toilets		
5. Running water		
6. Plain liquid soap		
7. Wall mounted soap dispenser		
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 Personnel toilet

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
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 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. Explanatory note: Taps must be elbow-operated in user care areas, but not in toilets		
5. Running water		

6. Plain liquid soap		
7. Wall mounted soap dispenser		
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 3 User toilet

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 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. Explanatory note: Taps must be elbow-operated in user care areas, but not in toilets		
5. Running water		
6. Plain liquid soap		
7. Wall mounted soap dispenser		
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 11.2.3.1.2 8(2)(c) The health establishment must ensure there is clean linen to meet the needs of users.**

**11.2.3.1.2.1** The unit manager has determined the linen requirements for the unit.

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

It is necessary to determine the linen requirements for the unit, to ensure sufficient linen is available, i.e. the number of linen items required to ensure that all users have clean linen and are warm enough during their stay in the unit. It is also necessary to determine how many linen items must be available in the linen storage area for routine linen changes, and to respond to episodes of dirtying or soiling of linen. A document indicating linen requirements for the unit must be available. Not applicable: Never

Score	Comment

**11.2.3.1.2.2** 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.		
5. Clean linen is available		

**Criterion 11.2.3.1.3 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.**

**11.2.3.1.3.1** Personal protective equipment is worn.

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

Using the checklist below, verify whether protective clothing and equipment is worn. Score 1 if the items are worn and 0 if 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 Consulting room: Worn

Aspects	Score	Comment
1. Latex or nitrile gloves – non-sterile		
2. Gloves – sterile		
3. Disposable gowns or aprons		
4. Protective face shields or goggles		

5. Face masks		
6. N95 or KN95 or FFP2 respirators.		

Unit 2 Traige area: Worn

Aspects	Score	Comment
1. Latex or nitrile gloves - non-sterile		
2. Gloves - sterile		
3. Disposable gowns or aprons		
4. Protective face shields or goggles		
5. Face masks		
6. N95 or KN95 or FFP2 respirators.		

Unit 3 Resuscitation area: worn

Aspects	Score	Comment
1. Latex or nitrile gloves - non-sterile		
2. Gloves - sterile		
3. Disposable gowns or aprons		
4. Protective face shields or goggles		
5. Face masks		
6. N95 or KN95 or FFP2 respirators.		

Unit 4 Cleaner: Worn

Aspects	Score	Comment
1. Latex or nitrile gloves - non-sterile		
2. Domestic gloves		
3. Disposable gowns or aprons		
4. Protective face shields or goggles		
5. Face masks		
6. N95 or KN95 or FFP2 respirators.		

**Sub Domain 11.2.4 9** Waste management

**Standard 11.2.4.1 9(1)** The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

**Criterion 11.2.4.1.1 9(2)(a)** The health establishment must have appropriate waste

**containers at the point of waste generation.**

**11.2.4.1.1.1** The emergency unit 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 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 emergency unit, score NA.

Score	Comment

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

**Criterion 11.2.4.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.**

**11.2.4.1.2.1** Sharps are safely managed and discarded in the emergency unit.

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

Select three clinical areas in the emergency unit and verify whether sharps and needles are correctly managed in accordance with the health establishment’s standard operating procedures. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment

Unit 1 Clinical area 1

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids.		
3. Needles are not recapped before disposal (not applicable where safety engineered devices, i.e. built-in safety devices for recapping or retracting the needle are used). Explanatory note: This does not apply where it is not possible to see inside the sharps container.		
4. Syringes with attached needles are discarded in their entirety.		

Unit 2 Clinical area 2

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids.		
3. Needles are not recapped before disposal (not applicable where safety engineered devices, i.e. built-in safety devices for recapping or retracting the needle are used). Explanatory note: This does not apply where it is not possible to see inside the sharps container.		
4. Syringes with attached needles are discarded in their entirety.		

Unit 3 Clinical area 3

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids.		
3. Needles are not recapped before disposal (not applicable where safety engineered devices, i.e. built-in safety devices for recapping or retracting the needle are used). Explanatory note: This does not apply where it is not possible to see inside the sharps container.		
4. Syringes with attached needles are discarded in their entirety.		

**11.2.4.1.2.2** 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	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 or resistant, not cracked)		

**Sub Domain 11.2.5 21** Adverse events

**Standard 11.2.5.1 21(1)** The health establishment must have a system to monitor and report all

adverse events.

**Criterion 11.2.5.1.1 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.**

**11.2.5.1.1.1** 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 Health care 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 Health care 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 Health care 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 11.3 CLINICAL SUPPORT SERVICES**

**Sub Domain 11.3.1 10 Medicines and medical supplies**

**Standard 11.3.1.1 10(1)** The health establishment must comply with the provisions of the Pharmacy Act, 1974 and the Medicines and Related Substances Act, 1965.

**Criterion 11.3.1.1.1 10(2)(a)** The health establishment must implement and maintain a stock control system for medicine and medical supplies.

**11.3.1.1.1.1** The stock control system shows minimum and maximum levels and/or reorder levels for medicine.

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

Each item held as stock must have documented minimum, maximum and/or reorder levels. These levels must be recorded on bin cards or equivalent. The system may be manual or electronic. Not applicable: Never

Score	Comment

**11.3.1.1.1.2** Stock levels of medicine on the shelves correspond with recorded stock levels in the stock control system.

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

Select five medicines and verify the number of items available against the balance indicated on the bin cards or equivalent. The system may be manual or electronic.

Score	Comment

Aspects	Score	Comment
1. Item 1		
2. Item 2		
3. Item 3		
4. Item 4		
5. Item 5		

**11.3.1.1.1.3** The entries in the schedule 5 and/or 6 drug register are complete and correct.

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

All columns in the provincially provided registers must be completed comprehensively. Any omitted information noted during the review of the register will receive a non-compliant score. The inspector must confirm that all sections of the register have been completed correctly. Not applicable: Never-

Score	Comment

**11.3.1.1.1.4** The schedule 5 and/or 6 medicines held in the unit correspond with the quantities documented in the drug register.

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

Select three medicines from the schedule 5 and 6 medicine cupboard and verify whether the quantity

available corresponds with the balance recorded in the register. Score 1 if there is correspondence 0 if not. Score not applicable where schedule 5 and 6 medicines are not held in the ward.

Score	Comment

Aspects	Score	Comment
1. Medicine 1		
2. Medicine 2		
3. Medicine 3		

**11.3.1.1.1.5** The stock control system shows minimum and maximum levels and/or reorder levels for medical supplies.

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

Each item held as stock must have documented minimum, maximum and/or reorder levels. These levels must be recorded on bin cards or equivalent. The system may be manual or electronic. Not applicable: Never

Score	Comment

**11.3.1.1.1.6** Physical stock for medical supplies corresponds with stock control system.

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

Select five items held as stock and verify the number of items available against the balance indicated on the bin cards or equivalent. The system may be manual or electronic.

Score	Comment

Aspects	Score	Comment
1. Item 1		
2. Item 2		
3. Item 3		
4. Item 4		
5. Item 5		

**Criterion 11.3.1.1.2 10(2)(b) The health establishment must ensure the availability of medicines and medical supplies for the delivery of services.**

**11.3.1.1.2.1** There is a locked emergency cupboard for the supply of medicine after hours.

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

The emergency cupboard must be in an area that can be accessed after hours and must be kept locked. Not applicable: Where medicines are obtained from the pharmacy after hours.

Score	Comment

**11.3.1.1.2.2** A stock control system is in place for medicines in the emergency cupboard.

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

The stock in the emergency cupboard must be managed in the same way as stock on the wards or in the pharmacy. Minimum, maximum and reorder levels must be determined for all medicines held in the emergency cupboard and bin cards or the equivalent must be completed. Not applicable: Where the health establishment does not use an emergency cupboard.

Score	Comment

**11.3.1.1.2.3** Medicines issued from the emergency cupboard are documented.

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

All medicines dispensed from the emergency cupboard must be documented, including the date of issue, the health care provider issuing the medicine and the user to whom the medicine is issued. This information must be kept in the emergency cupboard. Not applicable: Where the health establishment does not use an emergency cupboard.

Score	Comment

**11.3.1.1.2.4** Stock on the shelves in the emergency cupboard corresponds with the stock items recorded on the bin cards or equivalent.

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

The inspector must check five items in the emergency cupboard to verify whether the number of items on the shelves corresponds with the number of items recorded on the bin cards or equivalent. Not applicable: Where the health establishment does not use an emergency cupboard.

Score	Comment

Aspects	Score	Comment
1. Item 1		
2. Item 2		
3. Item 3		

4. Item 4		
5. Item 5		

**11.3.1.1.2.5** Basic medical supplies (consumables) are available.

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

Use the checklist below to check availability of medical and dressing supplies. Check the storeroom for availability of the items listed below. Score 1 if the item is available and not expired and 0 if the item is not available or expired.

Score	Comment

Aspects	Score	Comment
1. Intravenous administration set 20 drops/ml.		
2. Intravenous administration set 60 drops/ml.		
3. Blood administration set 10 drops/ml.		
4. Urinary (Foley's) catheter silicone/latex 10f		
5. Urinary (Foley's) catheter silicone/latex 12f		
6. Urinary (Foley's) catheter silicone/latex 14f		
7. Urinary (Foley's) catheter silicone/latex 18f		
8. Urine drainage bag		
9. Simple face mask or reservoir mask or nasal cannula (prongs) for oxygen, adults		
10. Face mask for nebuliser or face mask with nebuliser chamber (adult)		
11. Nasogastric feeding tube 600mm fg10		
12. Nasogastric feeding tube 1000mm fg12		
13. Nasogastric feeding tube 1000mm fg14		
14. Nasogastric feeding tube 600mm fg16		
15. Nasogastric feeding tube 600mm fg18		
16. Disposable aprons		
17. Disposable eye patches		
18. HB strips/slides		

19. Ultrasound gel medium viscosity (where doppler or ultrasound machines are available)		
20. Gloves exam non-sterile large /box		
21. Gloves exam non-sterile medium /box		
22. Gloves exam non-sterile small /box		
23. Gloves surgical sterile size 6 or 6.5		
24. Gloves surgical sterile size 7 or 7.5		
25. Gloves surgical sterile size 8		
26. Facemasks		
27. Particulate respirator masks (e.g. N95 or KN95 or FFP2 respirators)		
28. Goggles or protective glasses or face shield		
29. Gown, isolation (Single use, disposable, made of nonwoven material)		
30. Intravenous cannula 18g green/box		
31. Intravenous cannula 20g pink/box		
32. Intravenous cannula 22g/blue/box		
33. Intravenous cannula 24g yellow/box		
34. Needles: 18 (pink) or 20 (yellow)/box		
35. Needles: 21 (green)/box		
36. Syringes 3-part 2ml/box		
37. Syringes 3-part 5ml/box		
38. Syringes 3-part 10 or 20ml/box		
39. Insulin syringe with needle/box		
40. Basic disposable dressing pack (should contain at the very least cotton wool balls, swabs, disposable drape)		
41. Gauze swabs plain non-sterile 100x100x8ply (pack)		
42. Gauze paraffin 100x100 (box)		
43. Bandage crepe		
44. Adhesive micro-porous surgical tape 24/25mm or 48/50mm		
45. Gauze absorbent grade 1 burn (pack)		

46. 70% isopropyl alcohol prep pads 24x30 1ply or 2 ply (box)		
47. Plaster roll 2.5cm or 5cm or 7.5cm or 10 cm		
48. Cotton wool balls 1g (500s)		
49. Stockinette 100mm OR 150mm (roll)		
50. Blade stitch cutter sterile/pack		

**Sub Domain 11.3.3 12** Blood services

**Standard 11.3.3.1 12(1)** Hospitals and CHCs must ensure that users have access to blood and blood products when required.

**Criterion 11.3.3.1.1 12(2)(c)** The health establishment must ensure that adverse blood reactions are reported to a committee in the health establishment that monitor adverse incidents.

**11.3.3.1.1.1** All adverse blood reactions are reported to relevant forum.

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

Manual or electronic minutes from the previous quarter must reflect that the forum has been informed of all adverse blood reactions and that the forum has considered and discussed the reported incidents. If no incidents were reported, zero reporting must be done. Not applicable: Where no adverse blood reactions have occurred.

Score	Comment

**11.3.3.1.1.2** Action is taken where adverse blood reactions were reported.

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

Documented evidence of reported adverse blood reactions must be available. If no incidents were reported, zero reporting must be done. Not applicable: Where no adverse blood reactions were reported.

Score	Comment

**Sub Domain 11.3.2 13** Medical equipment

**Standard 11.3.2.1 13(1)** Health establishments must ensure that the medical equipment is available and functional in compliance with the law.

**Criterion 11.3.2.1.1 13(2)(b)** The health establishment must ensure that equipment is in accordance with the essential equipment list in all clinical service areas.

**11.3.2.1.1.1** Functional essential medical equipment is available in the unit.

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

Inspect the unit to 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 NA if the equipment is not required for the level of care provided.

Score	Comment

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
1. Diagnostic set portable or wall mounted.		
2. An electronic or manual blood pressure machine (NIBP)		
3. Pulse oximeter with adult and paediatric probe		
4. Paediatric, adult and obese cuffs for blood pressure machine		
5. Transport incubator, complete with adjustable temperature, ventilator, oxygen cylinder skin/air temperature control and suction unit on collapsible trolley		
6. Infant resuscitation apparatus		
7. Glucometer		
8. Haemoglobinometer		
9. Blunt-nose scissors, general purpose		
10. Blood gas analyser (the emergency unit should have access to one urgently within the health establishment for immediate analysis)		
11. Cervical collar (adult and paediatric)		
12. Thermometer		
13. Height meter		
14. Tourniquet		
15. Nebuliser(Explanatory note: This can be a nebulising machine or a nebuliser mask connected to oxygen point)		
16. Spirometer mechanical (adult)		
17. Spirometer mechanical (paediatric)		
18. Oxygen cylinder trolley		
19. Oxygen cylinder stand		
20. Oxygen flow meter, single		
21. Electrocardiograph (ECG) machine		
22. Large dressing cart or trolley		
23. Instrument cart or trolley		
24. Stethoscope		
25. Pinard foetal stethoscope		
26. Tracheostomy set		

27. Instrument set for dressings or dressing pack.		
28. Instrument set for IV cut downs		
29. Instrument set for central lines		
30. Instrument set for manual cast removal		
31. Fine instrument set for small object removal		
32. Bowl on stand or within a pack		
33. Drip stand, mobile		
34. Drip rail, drip hanger wall or ceiling mounted.		
35. Surgeon's stool or appropriate chair		
36. Mobile examination light		
37. Examination light mounted on pendant.		
38. Single ceiling mounted theatre light		
39. Resuscitation bag, pulmonary, manual (adult)		
40. Resuscitation bag, manual (infant)		
41. Resuscitation bag, manual (child)		
42. X-ray viewing box or monitor (digital X-ray viewing). Explanatory note: The monitor is for digital X-ray viewing and may be part of the unit computer (laptop or desktop).		
43. Trauma trolley, complete with collapsible side rails, oxygen cylinder holder, drip rod, shelf for user clothing, safety belt. Explanatory note: Trauma trolley is interpreted to be a mobile trauma bed.		
44. Digital baby scale with rechargeable battery or analogue		
45. Adult scale		
46. Infusion pumps		
47. Cast cutter, complete with vacuum cleaner.		
48. Fluid warmer		
49. User warmer, forced air.		
50. Examination couch, complete with removable lithotomy poles		
51. Wheelchair, porter type with drip rod		
52. Refrigerator, medicine		

53. Refrigerator, blood. Explanatory note: This requirement will be NA where blood is stored off site.		
54. Patella hammer		
55. Ring cutter, complete with blades		
56. Stitch pack		
57. Intercostal drain pack		
58. Ultrasound		

**Domain 11.4 GOVERNANCE AND HUMAN RESOURCES**

**Sub Domain 11.4.1 20 Occupational health and safety**

**Standard 11.4.1.1 20(1)** The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

**Criterion 11.4.1.1.1 20(2)(b) Awareness of safety and security issues must be promoted**

**11.4.1.1.1.1** 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

**11.4.1.1.1.2** 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		

**Criterion 11.4.1.1.2 20 The health establishment must have a disaster management plan in place, which is communicated to health care personnel and tested annually.**

**11.4.1.1.2.1** The actions to be taken when the disaster management response is activated are visibly displayed.

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

The actions to be taken by allocated individuals in the event of a disaster must be clearly visible for easy reference during a disaster. This may be displayed in any manner relevant to the size and complexity of the health establishment, including, but not limited to, a single summary sheet of actions to be taken, action cards to be retrieved by allocated individuals to remind them of the tasks for which they are responsible, or any other method chosen by the health establishment. Not applicable: Never

Score	Comment

**11.4.1.1.2.2** A current disaster management plan is available.

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

Request a copy of the health establishment’s disaster management plan. Verify whether it complies with the aspects listed below. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment

Aspects	Score	Comment
1. Individual roles in terms of a disaster. Explanatory note: This includes allocation of roles for internal disasters, including, but not limited to, fire, and external disasters, including, but not limited to, train crashes.		
2. Evacuation plan for the ward in case of a disaster, including clear indication of assembly point.		
3. Method for verifying that all health care workers, users and visitors have been evacuated to designated assembly area in the event of an evacuation. Explanatory note: This may include, but need not be limited to, a register for roll call.		
4. Triage system to be implemented in the event of a disaster. Explanatory note: As a minimum, this must include colour stickers for users with different acuity.		

**Criterion 11.4.1.1.3 20 The disaster management plan must be communicated to personnel and tested annually.**

**11.4.1.1.3.1** Health care personnel are able to explain the disaster management plan, including health emergencies and their role in the plan.

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

Interview three health care personnel to determine whether they are able to respond to the questions listed below. Score 1 if the question is answered and 0 if not answered.

Score	Comment

Unit 1 Health care personnel 1

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
1. Where the disaster plan is for this unit?		
2. Have you received in-service education on the disaster plan in the past 12 months?		
3. Have you participated in a mock emergency drill in the past 12 months?		
4. How will you know that there is a disaster at this health establishment?		
5. What is the health establishment's evacuation plan in case of a disaster?		
6. If there is a major incident what is your specific role in terms of the disaster plan?		
7. Please explain the triage system used at this health establishment in the event of a disaster. Explanatory note: They should mention, as a minimum, colour stickers for users in accordance with the acuity of their condition.		
8. What equipment will be used during a disaster (e.g. additional wheelchairs, stretchers, trauma trolley, glucometer, adult and paediatric baumanometers)		

#### Unit 2 Health care personnel 2

<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
1. Where the disaster plan is for this unit?		
2. Have you received in-service education on the disaster plan in the past 12 months?		
3. Have you participated in a mock emergency drill in the past 12 months?		
4. How will you know that there is a disaster at this health establishment?		
5. What is the health establishment's evacuation plan in case of a disaster?		
6. If there is a major incident what is your specific role in terms of the disaster plan?		
7. Please explain the triage system used at this health establishment in the event of a disaster. Explanatory note: They should mention, as a minimum, colour stickers for users in accordance with the acuity of their condition.		
8. What equipment will be used during a disaster (e.g. additional wheelchairs, stretchers, trauma trolley, glucometer, adult and paediatric baumanometers)		

#### Unit 3 Health care personnel 3

Aspects	Score	Comment
1. Where the disaster plan is for this unit?		
2. Have you received in-service education on the disaster plan in the past 12 months?		
3. Have you participated in a mock emergency drill in the past 12 months?		
4. How will you know that there is a disaster at this health establishment?		
5. What is the health establishment's evacuation plan in case of a disaster?		
6. If there is a major incident what is your specific role in terms of the disaster plan?		
7. Please explain the triage system used at this health establishment in the event of a disaster. Explanatory note: They should mention, as a minimum, colour stickers for users in accordance with the acuity of their condition.		
8. What equipment will be used during a disaster (e.g. additional wheelchairs, stretchers, trauma trolley, glucometer, adult and paediatric baumanometers)		

## Domain 11.5 FACILITIES AND INFRASTRUCTURE

**Sub Domain 11.5.2 14** Management of buildings and grounds

**Standard 11.5.2.1 14(1)** The health establishment and their grounds must meet the requirements of the building regulations.

**Criterion 11.5.2.1.1 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.

**11.5.2.1.1.1** 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 or doors and 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 11.5.2.1.2 14(2)(c)** The health establishment must as appropriate for the type of buildings and grounds of the establishment ensure emergency exit and entrance points are provided in all service areas and kept clear at all times.

**11.5.2.1.2.1** The entrance is free from any obstruction or hazards.

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

Hazards or blockages include, but are not limited to, hawkers, potholes, debris at the entrance to the premises and unauthorised parked vehicles. Not applicable: Never,

Score	Comment

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**11.5.2.1.2.2** The emergency vehicle access route is clearly marked.

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

Inspect the emergency vehicle access route within the health establishment premises to determine whether it meets the requirements in the measure. Not applicable: Never

Score	Comment

**11.5.2.1.2.3** There are no physical obstacles on the access route for emergency vehicles.

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

Check the emergency vehicle access route within the health establishment premises to determine if it meets the requirements in the measure. It must not be blocked by people, cars, furniture or any other objects or obstructions. Not applicable: Never

Score	Comment

**Criterion 11.5.2.1.3 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.**

**11.5.2.1.3.1** Emergency unit has natural ventilation or functional mechanical ventilation.

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

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. Verify that the emergency unit has natural ventilation (windows and doors that can be opened) or functional mechanical ventilation (i.e. a ducting system). Not applicable: Never

Score	Comment

**Sub Domain 11.5.3 15** Engineering services

**Standard 11.5.3.1 15(1)** The health establishment must ensure that engineering services are in place.

**Criterion 11.5.3.1.1 15(2) The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.**

**11.5.3.1.1.1** The emergency unit has a functional system to supply piped oxygen to all clinical areas.

**Assessment type:** Observation - **Risk rating:** Non negotiable measure

This is to ensure that users have access to piped oxygen when required. Verify whether piped oxygen is available and functional in all the clinical areas in the unit. Not applicable: Never

Score	Comment

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**11.5.3.1.1.2** A functional system is in place to supply piped suction to all clinical areas.

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

This is to ensure that users have access to piped suction when required. Verify whether piped suction is available and functional in all the clinical areas in the unit. Not applicable: Never

Score	Comment

**Sub Domain 11.5.1 17** Security services

**Standard 11.5.1.1 17(1)** The health establishment must have systems to protect users, health care personnel and property from security threats and risks.

**Criterion 11.5.1.1.1 17(2)(a)** The health establishment must ensure that security staff are capacitated to deal with security incidents, threats and risks.

**11.5.1.1.1.1** Security measures are implemented to safeguard users.

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

Verify that access control measures are available, including, but not limited to, security guards, closed-circuit television or gated entry. Not applicable: Never

Score	Comment