



Office of Health Standards Compliance  
Ensuring quality and safety in health care



**Accident and Emergency  
Unit**

**v1.2.1**

**Regulatory Private Acute  
Hospital Inspection tool**

Facility:
Date:

- **Tool Name:** Regulatory Private Acute Hospital Inspection Tool v1.2.1
- **HES Type:** Hospitals
- **Sector:** Private
- **Specialization:** Private Acute Hospital
- **Created By:** Health Standards Development and Training

# 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 system to provide users with information on complaints management procedure is available.

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

There must be a system in place to inform users on the procedure for lodging complaints in the unit. The system could include but is not limited to a person responsible for informing users about the complaints procedure or posters or pamphlet informing users about the complaints procedure, information displayed within the unit informing users about the complaints procedure or where to access information about complaints procedure. This can be a manual or electronic system.

Not applicable: Never

Score	Comment

### 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 available 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.

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

In-service training documentation must include attendance registers and evidence of the topics discussed. Request records from the previous twelve months.

Not applicable: Never

Score	Comment

**11.1.2.1.1.3** 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			

**11.1.2.1.1.4** 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 as they triage a user. The procedure described in the algorithm must be followed.

Not applicable: Never

Score	Comment		

**11.1.2.1.1.5** 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 attended the emergency unit within the past month. 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			

**Criterion 11.1.2.1.2 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.**

**11.1.2.1.2.1** User health records indicate adherence to the guidelines for examination and stabilisation of emergency users.

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

Select three health records of emergency users who have been stabilised and referred to another health establishment 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 referred to another health establishment following stabilisation.

Score	Comment		

Unit 1 User health record 1

Aspects	Score	Comment
1. Triage category or score		
2. Initial assessment		
3. Medical history		
4. Physical examination		
5. Investigations ordered		
6. Provisional diagnosis		
7. Final diagnosis (not applicable where final diagnosis has not been made prior to transfer)		
8. Interventions made to stabilise user		
9. Vital signs monitored. Explanatory notes: Vital signs to be monitored must include but not be limited to temperature, pulse, respiration, blood pressure etc.		
10. Transfer arrangements for receiving doctor and health establishment (where applicable)		

Unit 2 User health record 2

Aspects	Score	Comment
1. Triage category or score		
2. Initial assessment		
3. Medical history		
4. Physical examination		
5. Investigations ordered		
6. Provisional diagnosis		
7. Final diagnosis (not applicable where final diagnosis has not been made prior to transfer)		
8. Interventions made to stabilise user		
9. Vital signs monitored. Explanatory notes: Vital signs to be monitored must include but not be limited to temperature, pulse, respiration, blood pressure etc.		
10. Transfer arrangements for receiving doctor and health establishment (where applicable)		

Unit 3 User health record 3

Aspects	Score	Comment
1. Triage category or score		

2. Initial assessment		
3. Medical history		
4. Physical examination		
5. Investigations ordered		
6. Provisional diagnosis		
7. Final diagnosis (not applicable where final diagnosis has not been made prior to transfer)		
8. Interventions made to stabilise user		
9. Vital signs monitored. Explanatory notes: Vital signs to be monitored must include but not be limited to temperature, pulse, respiration, blood pressure etc.		
10. Transfer arrangements for receiving doctor and 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)(a)** The health establishment must ensure that users are provided with information relating to their referral to another health establishment.

**11.1.2.2.1.1** Health care providers are able to explain what information they provide to users being referred.

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

Interview three health care providers to determine whether the information they provide to users requiring referral includes the aspects listed below. Score 1 if the aspect is explained and 0 if not explained.

Score	Comment

Unit 1 Health care provider 1

Aspects	Score	Comment
1. Documentation to be provided to user (this could include but not limited to referral letter or radiology results or laboratory results)		
2. Reason for referral		
3. Service to which user will be referred, i.e. the health establishment or health care provider.		

Unit 2 Health care provider 2

Aspects	Score	Comment
1. Documentation to be provided to user (this could include but not limited to referral letter or radiology results or laboratory results)		
2. Reason for referral		
3. Service to which user will be referred, i.e. the health establishment or health care provider.		

Unit 3 Health care provider 3

Aspects	Score	Comment
1. Documentation to be provided to user (this could include but not limited to referral letter or radiology results or laboratory results)		
2. Reason for referral		
3. Service to which user will be referred, i.e. the health establishment or health care provider.		

**Criterion 11.1.2.2.2 5(4)(b) The health establishment must ensure that a copy of the referral document is kept in the user's health record.**

**11.1.2.2.2.1** A copy of the referral letter or external transfer record 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 a documented record of referrals from the unit (this may include, but need not be limited to, an admissions or referral register or record of transfer book) and request the health records of the last three users who were referred. Verify whether a copy of the referral letter or external transfer record is filed in the health record and whether the aspects listed below are recorded. Score 1 if the aspect is recorded in the referral letter or external transfer record and 0 if not recorded. Score 0 if the referral letter is not kept in the user health record. Score Not applicable if there were no users referred out of the unit in the past three months. Manual or electronic records are acceptable.

Score	Comment

Unit 1 User health record 1

Aspects	Score	Comment
1. Copy of referral letter or external transfer record is filed in user health record		
2. User's health status		
3. Reason for referral		
4. Name of health establishment to which they were referred		
5. Name of accepting health care provider or department.		

Unit 2 User health record 2

Aspects	Score	Comment
1. Copy of referral letter or external transfer record is filed in user health record		
2. User's health status		
3. Reason for referral		
4. Name of health establishment to which they were referred		
5. Name of accepting health care provider or department.		

Unit 3 User health record 3

Aspects	Score	Comment

1. Copy of referral letter or external transfer record is filed in user health record		
2. User's health status		
3. Reason for referral		
4. Name of health establishment to which they were referred		
5. Name of accepting health care provider or department.		

**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

Request the health records of three users who attended the emergency unit. Verify that the aspects listed below have been recorded. Score 1 if the aspect is recorded and 0 if not recorded. Manual or electronic records are acceptable.

Score	Comment

Unit 1 User health record 1

Aspects	Score	Comment
1. Physical examination findings		
2. Vital signs		
3. Fluid monitoring (where applicable)		
4. Nursing care plan(where applicable)		
5. Medicines administered (signed, dated, time of administration and dose recorded)		
6. Date of each entry		

7. Time of each entry		
8. Each entry signed by the nurse		
9. Full names of signatory		
10. Designation of signatory		

Unit 2 User health record 2

Aspects	Score	Comment
1. Physical examination findings		
2. Vital signs		
3. Fluid monitoring (where applicable)		
4. Nursing care plan(where applicable)		
5. Medicines administered (signed, dated, time of administration and dose recorded)		
6. Date of each entry		
7. Time of each entry		
8. Each entry signed by the nurse		
9. Full names of signatory		
10. Designation of signatory		

Unit 3 User health record 3

Aspects	Score	Comment
1. Physical examination findings		
2. Vital signs		
3. Fluid monitoring (where applicable)		
4. Nursing care plan(where applicable)		
5. Medicines administered (signed, dated, time of administration and dose recorded)		
6. Date of each entry		
7. Time of each entry		
8. Each entry signed by the nurse		
9. Full names of signatory		
10. Designation of signatory		



**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** Confirmation of informed consent is documented in the user health records.

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

Request three health records of users who gave written consent to procedures and medical treatment. Examine whether confirmation of informed consent is documented in the health records. This could be a specific form designed for this purpose by the health establishment or notes made by a healthcare provider in the health record. Score 1 if the aspect is compliant and 0 if not compliant. Manual or electronic records are acceptable.

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

**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 Health care personnel must be informed about standard operating procedure and guidelines.**

**11.2.2.1.1.1** Health care personnel have been informed about the policy or standard operating procedure or procedure or guideline of the unit and health establishment.

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

Documented evidence that personnel have been informed about the policy or standard operating procedure or procedure or guideline 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 which could include but not limited to email distribution or documents deposited in intranet or other electronic platforms. Score 1 if such evidence is available and score 0 if it is not available.

Score	Comment	
Aspects	Score	Comment
1. Triage		
2. Confirmation of informed consent		
3. Handover of users from emergency medical services (EMS) to health establishment personnel		
4. Management of emergency resuscitations		
5. Management of adverse events		
6. Storage of Schedule 5 and 6 medicines		
7. Access to medicines after hours		
8. Safe administration of medicines to users		
9. Administration of blood		

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

**Criterion 11.2.2.1 7** The health establishment must implement systems to ensure that blood and blood products are available and administered safely.

**11.2.2.1.1** 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

**11.2.2.1.2** Administration of blood is recorded.

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

Select the health records of three users who were administered blood and verify whether the aspects listed below are documented. Score 1 if the aspect is documented and 0 if not documented. Score Not applicable if there were no users who received blood at the time of inspection.

Score	Comment

Unit 1 User health record 1

Aspects	Score	Comment
1. Clinical indication for blood or blood products		
2. Type of blood product required		
3. Confirmation of informed consent.		
4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The blood type, rhesus factor, date when blood was donated and expiry date must be crosschecked with the user information prior to administration of blood.		
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		
9. 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 User health record 2

Aspects	Score	Comment
1. Clinical indication for blood or blood products		

2. Type of blood product required		
3. Confirmation of informed consent.		
4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The blood type, rhesus factor, date when blood was donated and expiry date must be crosschecked with the user information prior to administration of blood.		
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		
9. 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 User health record 3

Aspects	Score	Comment
1. Clinical indication for blood or blood products		
2. Type of blood product required		
3. Confirmation of informed consent.		
4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The blood type, rhesus factor, date when blood was donated and expiry date must be crosschecked with the user information prior to administration of blood.		
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		
9. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were administered, any reaction, and observations.		

### Criterion 11.2.2.2.2 7 The management of emergency resuscitations must be guided and monitored to improve user outcomes.

#### 11.2.2.2.2.1 Emergency trolley is stocked with medicines, medical supplies 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). Please note that in some emergency units/departments the equipment will be in resuscitation bays and not necessarily in a trolley. Score Not applicable for items not used in the unit because the category of user is not seen in that unit.

Score	Comment

Aspects	Score	Comment
<b>Devices to open and protect airway</b>		
1. Laryngoscope handle (as determined by the user profile seen in the unit)		
2. Straight blades for laryngoscope (a minimum of two different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
3. Curved blade for laryngoscope (a minimum of two different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
4. Endotracheal tubes- paediatric (a minimum of three different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
5. Endotracheal tubes- adult (a minimum of three different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
6. Oropharyngeal airway (a minimum of three different sizes that accommodate both adult and paediatric users).		
7. Plaster or ties for endotracheal tubes.		
8. Lubricating gel.		
<b>Equipment for difficult Intubation.</b>		
9. Laryngeal mask airway (a minimum of three different sizes that accommodate both adult and paediatric users).		
10. Magill's forceps (adult).		
11. Magill's forceps (paediatric).		
12. Introducer.		
<b>Devices to deliver oxygen/ventilate users.</b>		
13. Manual resuscitator device or bag and valve mask (adult)		
14. Manual resuscitator device or bag and valve mask (paediatric).		
15. Oxygen masks- re breather (adult).		
16. Oxygen Mask- re breather (paediatrics).		
<b>Devices to gain intravascular access.</b>		
17. Intravenous administration sets.		
18. IV Cannulae (a minimum of three different sizes that accommodate both adult and paediatric users).		
<b>Equipment to diagnose and treat cardiac dysrhythmias.</b>		
19. Automated external defibrillator (AED) with pads and pacing cables or defibrillator with conducting gel, pads, paddles and electrodes		
20. Cardiopulmonary Resuscitation board		

<b>Medicine</b>		
21. Emergency medicines according to local protocol are available and have not expired.		

**11.2.2.2.2** Medical supplies and equipment for resuscitation is 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 Not applicable for items not used in the unit because the category of user is not seen in that unit.

Score	Comment	
Aspects	Score	Comment
1. Chlorhexidine or Alcohol swabs		
2. Eye protection		
3. Facemask		
4. Gloves		
5. Spare batteries for laryngoscope		
6. Spare bulb (where applicable)		
7. Syringes (a minimum of syringes of five different sizes).		
8. Catheter tip syringe 50ml.		
9. Needles (a minimum of five different sizes)		
10. Scissors.		
11. Tourniquet.		
12. Stethoscope.		
13. Nasogastric tube (a minimum of four different sizes as determined by the user profile seen in the unit)		
14. Suction catheter (a minimum of four different sizes as determined by the user profile seen in the unit)		
15. Suction devices (portable).		
16. Yankhauer suction.		
17. Nasal cannula.		
18. Blood administration set.		
19. Local resuscitation protocol or Resuscitation Algorithm		

**11.2.2.2.3** The emergency trolley and emergency equipment is checked in accordance with agreed unit practice.

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

Request a documented practice for checking the emergency trolley and verify whether it is checked as documented. This must also include checking of the defibrillator/Automated External Defibrillator. Request documented records of checking the emergency trolley from the previous month.

Not applicable: Never

Score	Comment

**Criterion 11.2.2.3 7 Procedures to minimise the risk of health care-associated infections must be implemented.**

**11.2.2.3.1** An emergency eyewash station or eyewash kit is available.

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

The emergency eyewash station or bottle must be easily accessible.

Not applicable: Never

Score	Comment

**11.2.2.3.2** Sterile sealed eyewash kit is checked.

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

Request documented evidence from the previous month indicating when the eyewash kit was checked for leaks and expiry dates.

Not applicable: Never

Score	Comment

**Criterion 11.2.2.4 7 The management of used and soiled linen must meet infection prevention and control requirements.**

**11.2.2.4.1** 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.

Not applicable: Never

Score	Comment

**Criterion 11.2.2.5 7 Communication systems must be available and functional to facilitate adequate user care, and safety of user and health care personnel.**

**11.2.2.5.1** The Nurse call bed system is functional and easily accessible by the user.

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

Nurse call systems are equipment used by a user to alert or communicate with a caregiver. Observe whether the system is available and functional in at least three areas of the unit. Score 1 if available and functional and 0 if not.

Score	Comment

Aspects	Score	Comment
1. Clinical area 1		
2. Clinical area 2		
3. Bathroom or toilet		

**11.2.2.2.5.2** The unit has a functional alerting system that sounds throughout staffed areas.

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

This is to ensure that personnel are alerted immediately in the event of an emergency.

Not applicable: Never

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

Unit 1 User care area

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

11. Alcohol based hand rub		
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Unit 2 Personnel toilet

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

Unit 3 User toilet

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



**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** There is a designated area for storage of linen.

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

This could be but not limited to a room or a storage cupboard.

Not applicable: Never

Score	Comment

**11.2.3.1.2.2** There is sufficient stock of linen in accordance with the number of users in the unit.

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

The minimum and maximum number of linen items required for all users must be available in the linen storage area as determined by the unit.

Not applicable: Never

Score	Comment

**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 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

Unit 1 Consultation room

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 or approved equivalent.		

Unit 2 Triage area

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 or approved equivalent.		

Unit 3 Resuscitation area

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 or approved equivalent.		

**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:** Essential 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 not applicable.

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, needles and the collection of sharps are correctly managed. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment

Unit 1 Area 1

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps containers have correctly fitting lids.		
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 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 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. Not applicable for any aspects not found in the temporary waste storage area.

Score	Comment		
Aspects	Score	Comment	
1. Space available to store waste containers			
2. Area is well ventilated			
3. Area is well lit			
4. Area has impervious floor surfaces (waterproof 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 note: 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 note: 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 note: 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/preferred levels for medicine.

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

Each item held as stock must have documented minimum, maximum and/or reorder/preferred 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 corresponds with recorded stock levels in the stock control system.

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

Randomly select five items held as stock and verify whether their availability corresponds with the balance indicated on the bin cards or equivalent. The system may be manual or electronic. Score 1 if there is correspondence and 0 if not.

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 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: Where schedule 5 and/6 medicines are not held in the unit

Score	Comment

**11.3.1.1.1.4** The schedule 5 and 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 0 if the medicines do not correlate or if any of the columns have not been completed.

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/preferred levels for medical supplies.

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

Each item held as stock must have documented minimum, maximum and/or reorder/preferred 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 of 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 1 if there is correspondence and 0 if not.

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** Basic medical supplies (consumables) are available.

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

Request the list of medical supplies/consumables for the unit and randomly sample five items from each of the categories listed below and check whether the selected items are available and not expired (where applicable). Document the name of the non-compliant items that were sampled. Score 1 if the sampled item is available and not expired (where applicable) or 0 if not available or expired or if there is no list of medical supplies/consumables available.

Score	Comment	
Aspects	Score	Comment
<b>Surgical supplies.</b>		
1. Item 1		
2. Item 2		
3. Item 3		
4. Item 4		
5. Item 5		
<b>Dressing supplies.</b>		
6. Item 1		
7. Item 2		
8. Item 3		
9. Item 4		
10. Item 5		
<b>Other supplies</b>		
11. Item 1		
12. Item 2		
13. Item 3		
14. Item 4		
15. Item 5		

**11.3.1.1.2.2** 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 the emergency medicine cupboard is not kept in the unit, or the health establishment does not keep an emergency medicine cupboard.

Score	Comment

**11.3.1.1.2.3** A stock management system is in place for medicines in the emergency cupboard.

**Assessment type:** Document - **Risk rating:** Essential 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 emergency medicine cupboard is not kept in the unit or the health establishment does not keep an emergency medicine cupboard.

Score	Comment

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

**Assessment type:** Document - **Risk rating:** Essential 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 emergency medicine cupboard is not kept in the unit or the health establishment does not keep an emergency medicine cupboard.

Score	Comment

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

**Assessment type:** Observation - **Risk rating:** Vital 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 emergency medicine cupboard is not kept in the unit, or the health establishment does not keep an emergency medicine cupboard.

Score	Comment

### 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 documented and reported monthly to the forum responsible for user safety incidents.

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

There is documented manual or electronic evidence that adverse blood reactions are reported to the relevant forum. Request evidence from the previous quarter. If no incidents were reported, zero reporting must be recorded.

Not applicable: Where no adverse blood reactions have occurred.

Score	Comment

**11.3.3.1.1.2** Corrective 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:** Vital measure

Request the list of medical equipment for the unit and randomly sample ten different items on the equipment list. Check whether the sampled equipment is available and functional. Document the name of the non-compliant equipment that was sampled. Score 1 if the sampled item is available and functional or 0 if not available or not functional or if the list is not available.

Score	Comment	
Aspects	Score	Comment
1. Equipment 1		
2. Equipment 2		
3. Equipment 3		
4. Equipment 4		
5. Equipment 5		
6. Equipment 6		
7. Equipment 7		
8. Equipment 8		
9. Equipment 9		
10. Equipment 10		

**Domain 11.4 GOVERNANCE AND HUMAN RESOURCES**

**Sub Domain 11.4.1 19 Human resources management**

**Standard 11.4.1.1 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 11.4.1.1.1 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.

**11.4.1.1.1.1** Staffing levels for the unit as determined by acuity levels are available.

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

Documented staffing levels for the unit are available. Request staffing levels from the previous three months.

**Not applicable:** Never

Score	Comment

**Sub Domain 11.4.2 20** Occupational health and safety.

**Standard 11.4.2.1 20(1)** The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

**Criterion 11.4.2.1.1 20** The health establishment must have a disaster management plan in place, which is communicated to health care personnel and tested annually.

**11.4.2.1.1.1** 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

**Criterion 11.4.2.1.2 20** The disaster management plan must be communicated to personnel and tested annually.

**11.4.2.1.2.1** 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

Aspects	Score	Comment
1. Where is the disaster plan for this unit?		
2. Have you received in-service education on the disaster plan in the past twelve months?		
3. Have you participated in a mock emergency drill in the past twelve 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

Aspects	Score	Comment
1. Where is the disaster plan for this unit?		

2. Have you received in-service education on the disaster plan in the past twelve months?		
3. Have you participated in a mock emergency drill in the past twelve 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 is the disaster plan for this unit?		
2. Have you received in-service education on the disaster plan in the past twelve months?		
3. Have you participated in a mock emergency drill in the past twelve 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 11.5.1 14 Management of buildings and grounds

**Standard 11.5.1.1 14(1)** The health establishment and their grounds must meet the requirements of the building regulations.

**Criterion 11.5.1.1.1 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.

**11.5.1.1.1.1** 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

**Sub Domain 11.5.2 15** Engineering services

**Standard 11.5.2.1 15(1)** The health establishment must ensure that engineering services are in place.

**Criterion 11.5.2.1.1 15(2)** The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.

**11.5.2.1.1.1** Piped oxygen is available in the unit.

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

This is to ensure that users have access to oxygen when required. Verify whether piped oxygen is available and functional in the unit.

Not applicable: Never

Score	Comment

**11.5.2.1.1.2** Oxygen cylinder is available in the unit.

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

This is to ensure that users have access to oxygen when required. Verify whether an oxygen cylinder is available and functional in the unit.

Not applicable: Never

Score	Comment

**11.5.2.1.1.3** The oxygen available in the cylinder is above the minimum level.

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

Oxygen levels must not be below the minimum level indicated in the oxygen cylinder gauge.

Not applicable: Never.

Score	Comment

**11.5.2.1.1.4** Piped or portable suction is available in the unit.

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

This is to ensure that users have access to piped suction when required. Verify whether piped or portable suction is available and functional in the unit.

Not applicable: Never

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 Private Acute Hospitals.

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- The internal OHSC teams (Compliance Inspectorate, for their contribution during the update of the Private Acute Hospital inspection tools).

**It is hereby certified that the Regulatory Private Acute Hospital Inspection tools version 1.2.1 was updated by the Office of Health Standards Compliance.**



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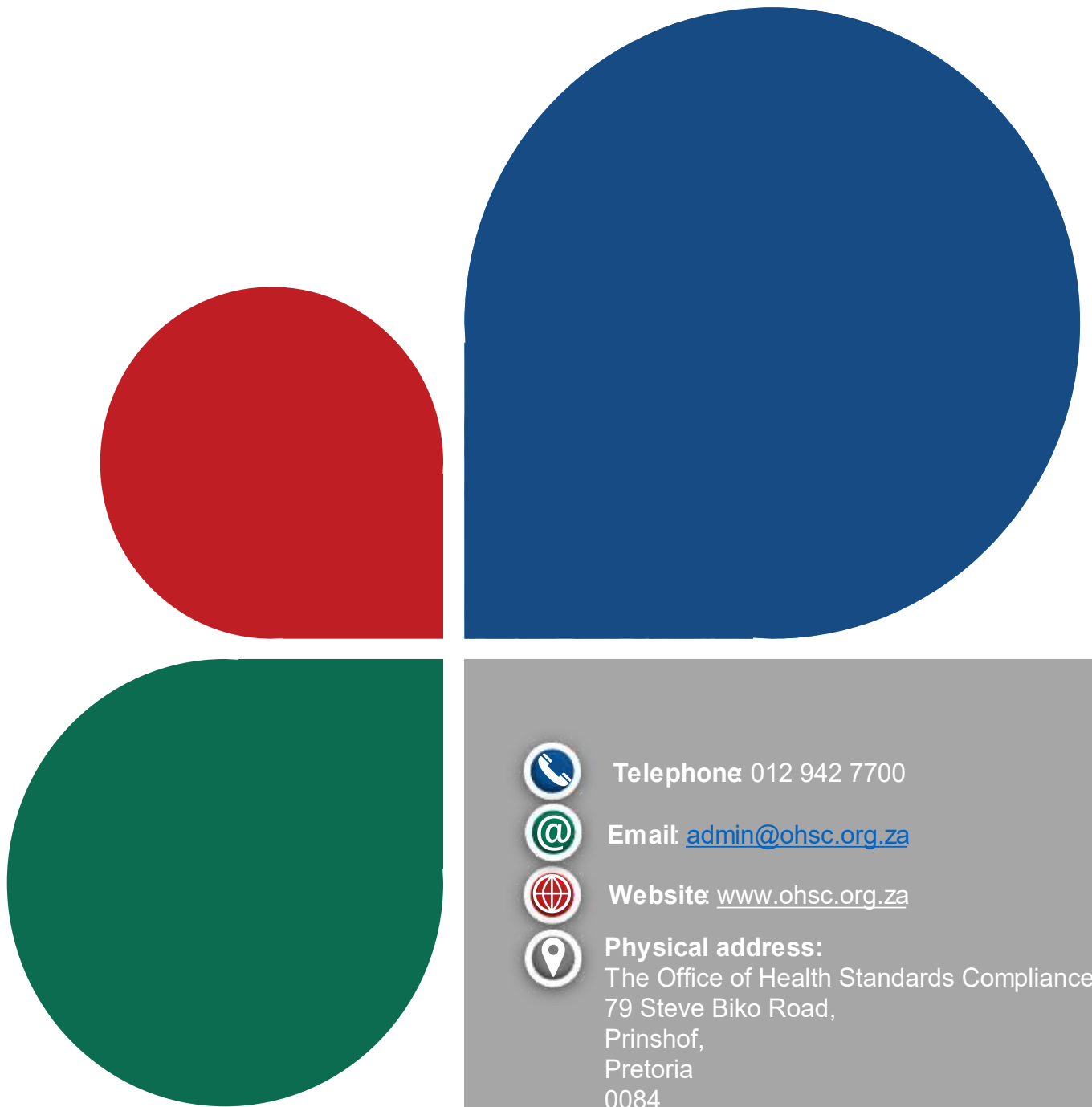
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