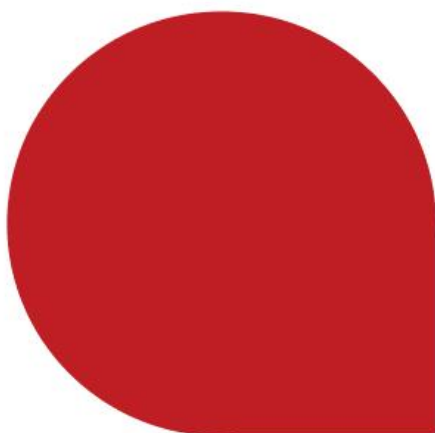




Office of Health Standards Compliance  
Ensuring quality and safety in health care



# Clinical Services

**v1.3**

**Regulatory Clinic inspection tool**

Facility:
Date:

- **Tool Name:** Regulatory Clinic Inspection tool v1.3 - Final
- **HEs Type:** Clinics/ PHC
- **Sector:** Public
- **Specialization:** Clinic
- **Created By:** Health Standards Development and Training

## 2 Clinical Services

### Domain 2.1 USER RIGHTS

#### Sub Domain 2.1.1 4 User information

**Standard 2.1.1.1 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 2.1.1.1.1 4(2)(a)(i)** The health establishment must provide users with information relating to the health care services provided by the health establishment.

**2.1.1.1.1.1** Helpdesk or reception services are available.

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

Observe if there is a designated helpdesk or reception in the health establishment. Not applicable: Never

Score	Comment

**2.1.1.1.1.2** A legible package of services board is displayed at the entrance of the health establishment.

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

The signage must be at the entrance of the health establishment and indicate the services offered in the health establishment. The information must be clearly legible. Not applicable: Never

Score	Comment

**Criterion 2.1.1.1.2 4(2)(a)(ii)** The health establishment must provide users with information relating to service opening and closing times.

**2.1.1.1.2.1** A health establishment information board which reflects the service hours is visibly displayed at the entrance of the premises.

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

The opening and closing times must be displayed at the entrance of the health establishment premises. The information must be clearly legible. Not applicable: Never

Score	Comment

**Criterion 2.1.1.1.3 4(2)(iv) The health establishment must provide users with information relating to the complaints, compliments and suggestions management system.**

**2.1.1.1.3.1 CHECKLIST:** The complaints toolkit is available at the health establishment.

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

Use the checklist below to check whether the complaint forms, box and poster are available at the health establishment. Score 1 if compliant and score 0 if not compliant.

Score	Comment	
Aspects	Score	Comment
1. Lockable complaints box is visibly placed in the health establishment.		
2. The complaints box is mounted (fixed to the wall or flat surface)		
3. Official complaint forms (in at least two commonly spoken languages) and a pen are at the box		
4. A standardised poster describing the process to follow to lodge a complaint is visibly displayed at the health establishment.		
5. The poster on complaints is available in at least two of the commonly spoken official languages in the area		

**Criterion 2.1.1.1.4 4(2)(c) The health establishment must display the results of user experience of care surveys conducted within the past twelve months.**

**2.1.1.1.4.1** Results of the Patient Experience of Care Survey are visibly displayed.

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

The results from the most recent survey must be visibly displayed. The survey must have been conducted in the previous 12 months. Not applicable: Never

Score	Comment

**Sub Domain 2.1.2 5 Access to care**

**Standard 2.1.2.1 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 2.1.2.1.1 5(2)(a) The health establishment must implement a system of triage.**

**2.1.2.1.1.1** The process to fast track very sick, frail and elderly users to the front of the queue is implemented.

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

The process to implement the fast-tracking of vulnerable users must be evident on observation of the waiting room. This can include a poster or information provided to users about the process or observing users who have been fast-tracked in the waiting area. Not applicable: Never

Score	Comment

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**2.1.2.1.1.2 CHECKLIST:** Healthcare providers responsible for user prioritisation are able to explain how users are prioritised.

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

Interview the healthcare providers responsible for user prioritisation. If they report the correct prioritisation procedure score 1. If any other procedure is described score 0.

Score	Comment	
Aspects	Score	Comment
1. Health care provider 1		
2. Health care provider 2		
3. Health care provider 3		

**Criterion 2.1.2.1.2 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.**

**2.1.2.1.2.1** Emergency Medical Service contact number(s) are displayed in areas where telephones are available.

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

Check whether emergency contact numbers are displayed next to each telephone. It could be 112 and other numbers. (The requirement will be met if only 112 is displayed as calls can be re-routed from this service.) If the health establishment utilises official mobile phones/cellphones, score positive if the emergency numbers are displayed within the unit

Score	Comment

**Standard 2.1.2.2 5(3)** The health establishment must maintain a system of referral as established by the responsible authority.

**Criterion 2.1.2.2.1 5(4)(a) The health establishment must ensure that users are provided with information relating to their referral to another health establishment.**

**2.1.2.2.1.1 CHECKLIST:** A referral register that records referred users is available.

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

Review the register to confirm that it includes the information listed in the aspects below. Score 1 if the aspect is included and score 0 if the aspect is not included.

Score	Comment	
Aspects	Score	Comment
1. Name of referred user		

2. Name of referring health establishment		
3. Name of referring health care practitioner		
4. Name of receiving health establishment		
5. Reason for referral		
6. Date referred		

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

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

Interview three health care providers to establish if they are aware of the information that must be provided to users who are referred. Answers should be provided to the questions below: Score 1 if the health care provider provides the correct answers and 0 if the health care provider does not provide the correct answers.

Score	Comment

Unit 1 Health care provider 1

Aspects	Score	Comment
1. Why are they being referred? (reason for referral)		
2. Where should they go? (the health establishment or service or department referred to)		
3. What should they do after being seen by the person/service they have been referred to? (Do they need to return to the clinic or continuity of care will be determined by the service referred to, e.g. follow-up visits)		

Unit 2 Health care provider 2

Aspects	Score	Comment
1. Why are they being referred? (reason for referral)		
2. Where should they go? (the health establishment or service or department referred to)		
3. What should they do after being seen by the person/service they have been referred to? (Do they need to return to the clinic or continuity of care will be determined by the service referred to, e.g. follow-up visits)		

Unit 3 Health care provider 3

Aspects	Score	Comment

1. Why are they being referred? (reason for referral)		
2. Where should they go? (the health establishment or service or department referred to)		
3. What should they do after being seen by the person/service they have been referred to? (Do they need to return to the clinic or continuity of care will be determined by the service referred to, e.g. follow-up visits)		

**Criterion 2.1.2.2.2 5(4)(b) The health establishment must ensure that a copy of the referral document is kept in the user's health record.**

**2.1.2.2.1 CHECKLIST:** The health records of the last three users referred out of the health establishment contain copies of a referral letter.

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

Request the documented record (register or similar) of referrals out of the health establishment and ask for the health records of the last three users referred. Score 1 if the referral form contains the aspect listed below and score 0 if the aspect listed below is not documented.

Score	Comment

Unit 1 Health record 1

Aspects	Score	Comment
1. Name of user		
2. Name of referring health establishment		
3. Name of referring health care provider		
4. Name of receiving health establishment		
5. Summary of clinical details		

Unit 2 Health record 2

Aspects	Score	Comment
1. Name of user		
2. Name of referring health establishment		
3. Name of referring health care provider		
4. Name of receiving health establishment		
5. Summary of clinical details		

Unit 3 Health record 3

Aspects	Score	Comment
1. Name of user		
2. Name of referring health establishment		
3. Name of referring health care provider		
4. Name of receiving health establishment		
5. Summary of clinical details		

**Sub Domain 2.1.3 22** Waiting times

**Standard 2.1.3.1 22** The health establishment must monitor waiting times against the National Core Standards for Health Establishments in South Africa.

**Criterion 2.1.3.1.1 22** Waiting times are monitored and improvement plans are implemented.

**2.1.3.1.1.1** The National waiting time target of not more than three (3) hours for time spent in the health establishment is visibly displayed.

**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 health establishment and to assist the personnel to work within the scope of the target waiting time. The document reflecting the National waiting time target must be displayed in an area which is easily visible to users waiting to receive care. Not applicable: Never

Score	Comment

**Domain 2.2 CLINICAL GOVERNANCE AND CLINICAL CARE**

**Sub Domain 2.2.1 6** User health records and management

**Standard 2.2.1.1 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 2.2.1.1.1 6(2)(a)** The health establishment must have a health record filing, archiving, disposing, storage and retrieval system which complies with the law.

**2.2.1.1.1.1 CHECKLIST:** The health establishment complies with health records management guidelines.

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

Use the checklist below to determine whether the health establishment adheres to the requirements listed below. Score 1 if compliant and score 0 if not compliant

Score	Comment	
Aspects	Score	Comment
<b>User record storage room adheres to the following:</b>		
1. The storage room contains shelves or cabinets to store files		

2. The aisle and shelves or cabinets are labelled.		
3. The storage room contains a counter or sorting table or dedicated shelves to sort files		
4. The lighting is functional and allows for all areas of the room to be well lit		
5. The storage room is clean and dust free		
<b>Filing system for user records adheres to the following:</b>		
6. The user records in use are retained in the filing system. Explanatory note: Request a list of users seen the previous week and from that list select three users and request their health records. This is to assess whether health records are retained in the health establishment and not taken home by users.		
7. A standardised, unique record registration number is assigned to files. (One of the following methods is consistently used: user's surname, identity document number or date of birth, or a set of health establishment assigned and -recorded numbers).		
8. The record registration number is clearly displayed on the cover of the user record		
9. A tracking system is in place to check that all user records issued for the day are returned to the user records storage room/registry by the end of the day		
10. An annual register of archived records is available		
11. An annual register of disposed records is available		
12. A copy of disposal certificates is available - copies must correspond with entries in the disposal register		

**Criterion 2.2.1.1.2 6(2)(b) The health establishment must ensure confidentiality of health records.**

**2.2.1.1.2.1** Records are not left unattended in public areas and are only accessible to health establishment personnel and users.

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

Observe how user health records are managed in various areas within the health establishment and determine whether unauthorised individuals would be able to access the information in the health records. This will include the health records of users waiting to be seen, users who have already been seen but their records have not yet been returned to the records storage area/room, health records being used for clinical audit or other administrative purposes, or health records outside the records storage area/room for any other reason. Such records should be kept in a manner which safeguards against unauthorised access to the content of the record. Not applicable: Never

Score	Comment



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**Criterion 2.2.1.1.3 6(2)(c) The health establishment must secure health records with appropriate security control measures in the records storage area and in the clinical service area in accordance with the Protection of Personal Information Act, 2013 (Act No. 4 of 2013).**

**2.2.1.1.3.1** There is a “No unauthorised entry” sign on the door of the records storage area.

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

Observe if there is a sign that reads “No unauthorised entry” on the records storage room door. All internal signs must as a minimum be laminated. Text on signs must be typed, no handwritten signs must be accepted. Signs do not need to be framed, but laminating must be in good condition, no turned corners or peeling loose at places. If frames are not used- posters must be neatly fastened to the wall. Any other sign, e.g. “Staff only” will be scored not compliant. Not applicable: Never

Score	Comment

**2.2.1.1.3.2** The records storage area is lockable with a security gate or electronically controlled entrance (tag).

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

Observe if there is a security gate which is lockable and/or access control measures, e.g. a tag/card.

Not applicable: Never

Score	Comment

**2.2.1.1.3.3** Records are not left unattended in clinical service areas.

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

Observe how user health records are managed in consultation rooms and determine whether unauthorised individuals would be able to access the information in the health records. This will include the health records of users waiting to be seen and users who have already been seen but their records have not yet been returned to the records storage area/room. Such records should be kept in a manner which safeguards against unauthorised access to the content of the record. Not applicable:

Never

Score	Comment

**Standard 2.2.1.2 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 2.2.1.2.1 6(4)(a) The health establishment must record the biographical data of the user and the identification and contact information of the user and his or her next of kin.**

**2.2.1.2.1.1 CHECKLIST:** Biographical, demographic and contact information of the user is recorded in the user record.

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

Use the checklist below to check whether user records comply with the requirements. Select five records of users who were seen at the time of inspection. Include records for the following conditions: one adult acute/minor ailment, one adult chronic, one

adult maternal health, one sick child and one well baby, to include records of users consulted in all three streams of care (Chronic, MCWH and Acute). Score 1 if the aspect is recorded and score 0 if the aspect is not recorded.

Score	Comment	
Aspects	Score	Comment
<b>Adult acute / minor ailment</b>		

1. Name and surname		
2. User file number		
3. Gender		
4. Health establishment name		
5. ID or refugee number or passport number or date of birth		
6. Residential address		
7. Personal contact details		
8. Next of kin contact details		
<b>Adult chronic</b>		
9. Name and surname		
10. User file number		
11. Gender		
12. Health establishment name		
13. ID or refugee number or passport number or date of birth		
14. Residential address		
15. Personal contact details		
16. Next of kin contact details		
<b>Maternal Health</b>		
17. Name and surname		

18. User file number		
19. Gender		
20. Health establishment name		
21. ID or refugee number or passport number or date of birth		
22. Residential address		
23. Personal contact details		
24. Next of kin contact details		
<b>Sick child (IMCI)</b>		
25. Name and surname		
26. User file number		
27. Gender		
28. Health establishment name		
29. ID or refugee number or passport number or date of birth		
30. Residential address		
31. Name and surname of parents or guardian		
32. Next of kin contact details		
<b>Well baby</b>		
33. Name and surname		
34. User file number		
35. Gender		
36. Health establishment name		
37. ID or refugee number or passport number or date of birth		
38. Residential address		
39. Name and surname of parents or guardian		
40. Next of kin contact details		

**Criterion 2.2.1.2.2 6(4)(b) The health establishment must record information relating to the examination and health care interventions of users.**

**2.2.1.2.2.1 CHECKLIST:** Clinical assessment and management plan for the user is recorded in the user record.

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

Use the checklist below to check whether user records comply with the requirements. Select records of users who were seen at the time of inspection. Include records for the following conditions: one adult acute/minor ailment, one adult chronic. Score 1 if the aspect is recorded and score 0 if the aspect is not recorded. Score NA (not applicable) if the user did not receive relevant treatment or the aspect does not apply to the particular type of record selected.

Score	Comment

Unit 1 Adult acute / minor ailment

Aspects	Score	Comment
<b>User profile - 1st visit</b>		
1. Health risk factors (alcohol, smoking, other substances, physical activity, healthy eating, sexual behaviour)		
2. Known chronic conditions		
3. Surgical history		
4. Allergies(where applicable)		
<b>Clinical management</b>		
5. Length/height		
6. Weight		
7. Temperature		
8. Blood pressure		
9. Respiratory rate		
10. Pulse rate		
11. Blood sugar (where applicable)		
12. Urine dipstick (where applicable)		
13. Basic screening where indicated (HIV, TB, STI, diabetes)		

14. Current chronic condition		
15. Presenting complaints		
<b>Examination</b>		
16. General(this will include but not limited to respiratory, cardiovascular, abdominal, central nervous system, musculoskeletal, mental state)		
17. Diagnosis		
<b>User management</b>		
18. Investigation/tests requested		
19. Results of investigations/test recorded		
20. Health education provided		
21. Treatment prescribed		
22. Date of next visit indicated (where applicable)		
23. Health care provider's name and surname		
24. Health care provider's designation		
25. Health care provider's signature		
26. Date signed by health care provider		

Unit 2 Adult chronic

Aspects	Score	Comment
<b>User profile - 1st visit</b>		
1. Health risk factors (alcohol, smoking, other substances, physical activity, healthy eating, sexual behaviour)		
2. Known chronic conditions		
3. Surgical history		
4. Allergies(where applicable)		

<b>Clinical management</b>		
5. Length/height		
6. Weight		
7. Temperature		
8. Blood pressure		
9. Respiratory rate		
10. Pulse rate		
11. Blood sugar (where applicable)		
12. Urine dipstick (where applicable)		
13. Basic screening where indicated (HIV, TB, STI, diabetes)		
14. Current chronic condition		
15. Presenting complaints		
<b>Examination</b>		
16. General(this will include but not limited to respiratory, cardiovascular, abdominal, central nervous system, musculoskeletal, mental state)		
17. Diagnosis		
<b>User management</b>		
18. Investigation/tests requested		
19. Results of investigations/test recorded		
20. Health education provided		
21. Treatment prescribed		
22. Date of next visit indicated (where applicable)		
23. Health care provider's name and surname		
24. Health care provider's designation		
25. Health care provider's signature		
26. Date signed by health care provider		

**2.2.1.2.2.2 CHECKLIST:** Clinical assessment and management plan for the patient is recorded in the patient record.(Paediatric care).

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

Use the checklist below to check whether user records include the information listed below. Select two records of patients who were seen at the time of inspection. Include records for the following conditions: one sick child and one well baby record. Score 1 if details are recorded; score 0 if details not recorded; score N/A if the aspect is irrelevant to the user's condition.

Score	Comment

Unit 1 Sick child (IMCI)

Aspects	Score	Comment
<b>Patient profile - 1st visit</b>		
1. Family history of chronic conditions		
2. Known chronic conditions		
3. Surgical history		
4. Allergies(where applicable)		
<b>Clinical management</b>		
5. Length/Height		
6. Weight		
7. MUAC (every 3 months; MUAC = mid upper arm circumference)		
8. Temperature		
9. Basic screening where indicated (HIV, TB)		
10. Current chronic condition		
11. Presenting complaints		

<b>Examination</b>		
12. General (this will include but not limited to respiratory, cardiovascular, abdominal, central nervous system, musculoskeletal, mental state)		
13. Diagnosis		
<b>Patient management</b>		
14. Investigation/tests requested		
15. Results of investigations/test recorded		
16. Health education provided		
17. Treatment prescribed		
18. Date of next visit indicated (where applicable)		
19. Health Care Practitioner's name and surname		
20. Health care provider's designation		
21. Health Care Practitioner's signature		
22. Date signed by Health Care Practitioner		
<b>Child health records</b>		
23. History of immunisations		
24. Deworming treatment		
25. Vit A supplementation		
26. Developmental screening (6,14 weeks and 6, 9, 18 months and 3, 5-6 years)		
27. Growth charts completed		



28. Basic screening completed according to Road to Health Charts		
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Unit 2 Well baby

Aspects	Score	Comment
<b>Patient profile - 1st visit</b>		
1. Family history of chronic conditions		
2. Known chronic conditions		
3. Surgical history		
4. Allergies(where applicable)		
<b>Clinical management</b>		

5. Length/Height		
6. Weight		
7. MUAC (every 3 months; MUAC = mid upper arm circumference)		
8. Temperature		
9. Basic screening where indicated (HIV, TB)		
10. Current chronic condition		
11. Presenting complaints		
<b>Examination</b>		
12. General (this will include but not limited to respiratory, cardiovascular, abdominal, central nervous system, musculoskeletal, mental state)		
13. Diagnosis		
<b>Patient management</b>		

14. Investigation/tests requested		
15. Results of investigations/test recorded		
16. Health education provided		
17. Treatment prescribed		
18. Date of next visit indicated (where applicable)		
19. Health Care Practitioner's name and surname		
20. Health care provider's designation		
21. Health Care Practitioner's signature		
22. Date signed by Health Care Practitioner		
<b>Child health records</b>		
23. History of immunisations		
24. Deworming treatment		
25. Vit A supplementation		
26. Developmental screening (6,14 weeks and 6, 9, 18 months and 3, 5-6 years)		
27. Growth charts completed		
28. Basic screening completed according to Road to Health Charts		

**2.2.1.2.2.3 CHECKLIST:** Clinical assessment and management plan for the patient is recorded in the patient record (Maternal health care).

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

Select one record of a maternal health care user seen at the time of inspection for maternity care. Score 1 if details are recorded; score 0 if details not recorded; score N/A if the aspect is irrelevant to the user's condition.

Score	Comment

Aspects	Score	Comment
<b>BANC 1st visit</b>		
1. Obstetric history		
2. Previous obstetric history and family		
3. Gestational age		
4. General examinations		
5. Abdomen - FHH examination		
6. Vaginal examination		
7. HIV status		
8. Pregnancy risk screening		
9. Health education provided, including information on Mom Connect		
10. Health Care Practitioner's name and surname		
11. Health care provider's designation		
12. Health Care Practitioner's signature		
13. Date signed by Health Care Practitioner		
<b>BANC PLUS follow-up visits</b>		
14. HIV status (retest)		
15. General examination		
16. Abdominal examination		
17. Supplements (for the mother)		
18. Feeding practices		
19. Gestational graph plotted per visit		
20. Health Care Practitioner's name and surname		
21. Health care provider's designation		
22. Health Care Practitioner's signature		
23. Date signed by Health Care Practitioner		
<b>Delivery summary</b>		

24. Birth date		
25. Birth weight		
26. Apgar score		
27. Delivery mode		
28. Pregnancy outcome		
29. Health Care Practitioner's name and surname		
30. Health care provider's designation		
31. Health Care Practitioner's signature		
32. Date signed by Health Care Practitioner		
<b>Postnatal Care visits</b>		
33. General examination (3-6 days post-delivery)		
34. General examination (6 weeks post-delivery)		
35. Health education		
36. Health Care Practitioner's name and surname		
37. Health care provider's designation		
38. Health Care Practitioner's signature		
39. Date signed by Health Care Practitioner		

**Standard 2.2.1.3 6(5)** The health establishment must have a formal process to be followed when obtaining informed consent from the user.

**Criterion 2.2.1.3.1 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).**

**2.2.1.3.1.1 CHECKLIST:** Forms used for informed consent are completed correctly by the health care providers.

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

Use the checklist below to check whether user records comply with the requirements. Select records of users who were seen at the time of inspection and had to sign informed consent for a procedure. Score 1 if the aspect is recorded and score 0 if the aspect is not recorded.

Score	Comment

Unit 1 Health record 1

Aspects	Score	Comment

1. User's full name(s) and surname are written on the consent form		
2. The user's age or date of birth or identity number is documented in the consent form		
3. The exact nature of the operation/procedure/treatment is written on the consent form		
4. The name of the person who signed the consent is documented(it could be the parent or guardian).Explanatory note: This aspect is not applicable where the user signed the consent form		
5. The consent form is signed by the user or parent/guardian		
6. The consent form is signed by the health care provider		
7. The consent form is dated		

Unit 2 Health record 2

Aspects	Score	Comment
1. User's full name(s) and surname are written on the consent form		
2. The user's age or date of birth or identity number is documented in the consent form		
3. The exact nature of the operation/procedure/treatment is written on the consent form		
4. The name of the person who signed the consent is documented(it could be the parent or guardian).Explanatory note: This aspect is not applicable where the user signed the consent form		
5. The consent form is signed by the user or parent/guardian		
6. The consent form is signed by the health care provider		
7. The consent form is dated		

Unit 3 Health record 3

Aspects	Score	Comment
1. User's full name(s) and surname are written on the consent form		
2. The user's age or date of birth or identity number is documented in the consent form		
3. The exact nature of the operation/procedure/treatment is written on the consent form		
4. The name of the person who signed the consent is documented(it could be the parent or guardian).Explanatory note: This aspect is not applicable where the user signed the consent form		
5. The consent form is signed by the user or parent/guardian		
6. The consent form is signed by the health care provider		
7. The consent form is dated		

**Sub Domain 2.2.2 7 Clinical management**

**Standard 2.2.2.1 7(1)** The health establishment must establish and maintain clinical management systems, structures and procedures that give effect to national policies and guidelines.

**Criterion 2.2.2.1.1 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.

**2.2.2.1.1.1 CHECKLIST:** Clinical guidelines are available in consultation rooms.

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

Use the checklist below to check the availability of clinical guidelines. Select two consultation rooms.

Score 1 if the guideline is present and score 0 if the guideline is not present. At least one copy of the Standard Treatment Guidelines and Essential Medicines List (EML) for hospitals must be in the doctor's room and therefore only one consultation room needs to have one; mark the other consultation room as NA (not applicable). Guidelines can also be available electronically or via APPs. Check that the most current guidelines are being used.

Score	Comment

Unit 1 Consulting room 1

Aspects	Score	Comment
<b>Consulting room used by the doctor</b>		
1. Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2020		

2. Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Adults, 2019 (only in consultation room used by the doctor)		
3. Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Paediatrics, 2017 (only in consultation room used by the doctor)		
4. New-born Care Charts Management of Sick and Small New-borns in Hospital SSN Version 1, 2014 (only in consultation room used by the doctor)		
5. Adult Primary Care guide (APC) – 2019 or Practical Approach to Care Kit (PACK), 2019		

Unit 2 Consulting room 2

Aspects	Score	Comment
1. Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2020		
2. Adult Primary Care guide (APC) – 2019 or Practical Approach to Care Kit (PACK), 2019		

**Criterion 2.2.2.1.2 7 The health establishment implements process to ensure environmental cleanliness.**

**2.2.2.1.2.1 CHECKLIST:** Disinfectants, cleaning materials and equipment are available.

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

Check the available cleaning materials and storage facilities. Score 1 if the item is present and 0 if it is not present. Score not applicable if the item is not part of the routine supplies of the health establishment.

Score	Comment	
Aspects	Score	Comment
<b>Disinfectant and cleaning materials</b>		
1. High-level disinfection for medical equipment (e.g. sodium perborate powder or phthalaldehyde)		
2. Chlorine releasing agent - hypochlorite (e.g. Biocide D or Clorox)		
3. Alcohol based agent (70%-90%)		
4. Detergents – neutral pH		

5. Wet polymer (floor polish)		
6. Protective polymer(strippers)		
7. All cleaning materials clearly labelled		
8. Materials Safety Data Sheets for all cleaning products		
<b>Cleaning equipment</b>		
9. Two-way bucket system for mopping floors (bucket for clean water and bucket for dirty water) or Janitor trolley		
10. Colour labelled mop - Red for toilets and bathrooms		
11. Colour labelled mop - Blue for Clinical and non-clinical service areas		
12. Mop labelled for cleaning exterior areas		
13. Green bucket and cloths for bathroom and consulting room basins		
14. Red bucket and cloths for toilet		
15. White cloths for kitchen		
16. Blue bucket and cloths for clinical areas and non-clinical service areas		
17. Labelled spray bottle for disinfectant solution		
18. Window cleaning squeegee		
19. Mop sweeper or soft-platform broom		
20. Floor polisher		

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

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

Daily inspections will ensure the cleanliness of the building. The person responsible for overseeing the cleaning service must inspect the building 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

**2.2.2.1.2.3 CHECKLIST:** The areas listed below are clean.

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

Verify whether the service areas listed below are clean. Inspector to observe general cleanliness of the area including but not limited to whether the area is free of dirt and stains. Score 1 if the area is clean and score 0 if not clean. Score not applicable if an indicated area does not exist in the health establishment.

Score	Comment	
Aspects	Score	Comment
1. Consulting rooms		
2. Waiting area		
3. Vital signs room/area		
4. User toilets		
5. Staff toilets		

**Standard 2.2.2.2 7(2)** (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

**Criterion 2.2.2.2.1 7 The management of emergency resuscitations must be guided and monitored to improve user outcomes.**

**2.2.2.2.1.1 CHECKLIST:** The emergency room or resuscitation room is equipped with functional, basic resuscitation equipment.

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

Use the checklist below to check whether the emergency or resuscitation room complies with measures for functional basic equipment. Check the room where resuscitation is performed. Score 1 if the aspect listed is available, functional and not expired (if applicable) and score 0 if it is not available or functional or expired (if applicable).

Score	Comment	
Aspects	Score	Comment
1. Emergency trolley with lockable medicine drawer and accessories		
2. Patient trolley or stretcher with fowlers position or examination couch or 2-part obstetric delivery bed		
3. Wall or mobile or ceiling mounted anglepoise-style examination lamp		

4. Nebuliser or face mask with nebuliser chamber for adult and paediatric		
5. Functional electric powered or manual suction devices		
6. Suction catheters sizes 8-14		
7. Drip stand		
8. Dressing trolley		
9. Cardiac arrest board		
10. Saturation monitor (pulse oximeter or within the electronic baumanometers; adult and paediatric )		
11. Bin (general waste)		
12. Bin (medical waste)		
13. Suture material (Suture chromic g0/0 or g1/0 or g1/2 75cm)		
14. Suture material (Suture nylon g2/0 or g3/0 or g3/8 45cm)		
15. Suture material (Suture nylon g4/0 or g3/8 45cm)		
16. Thermal (space) blanket		
17. Gloves (non-sterile): small, medium and large		
18. Gloves (surgical sterile): 6 or 6.5, 7 or 7.5 or 8		
19. Protective face shields or goggles with face mask		
20. Disposable plastic aprons		
21. Disposable face masks		
22. Resuscitation algorithms (adult, paediatric and neonatal)		
23. Wall-mounted liquid hand soap dispenser		
24. Wall-mounted hand paper dispenser		
25. Urinary (Foley's) catheter: 8f		
26. Urinary (Foley's) catheters: 12f		
27. Urinary (Foley's) catheters: 14f		
28. Urinary (Foley's) catheters: 16f		
29. Urinary (Foley's) catheters: 18f		
30. Urinary bags		

**2.2.2.2.1.2 CHECKLIST:** Emergency trolley is stocked with medicines, medical supplies and equipment.

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

Use the checklist below to check whether the emergency trolley is sufficiently stocked with unexpired medicines and the equipment listed below. Check whether the equipment and medicines are available on the emergency trolley (or on other surfaces in the resuscitation room) and also check the expiry dates of medicines. Score expired medication as "0". Score 1 if the aspect listed is available, functional and not expired (if applicable) and score 0 if the aspect is not available or functional or expired (if applicable).

Score	Comment	
Aspects	Score	Comment
<b>Applicable to Health establishments with a permanent appointed Doctor</b>		
1. Laryngoscope handle with functional batteries		
2. Adult curved blades for laryngoscope size 2		
3. Adult curved blades for laryngoscope size 3		
4. Adult curved blades for laryngoscope size 4		
5. Paediatric laryngoscope handle		
6. Paediatric straight blades for laryngoscope, size 00		
7. Paediatric straight blades for laryngoscope, size 0		
8. Paediatric straight blades for laryngoscope size 1		
9. Endotracheal tubes - uncuffed size 2.5mm		
10. Endotracheal tubes - uncuffed size 3mm		
11. Endotracheal tubes - uncuffed size 3.5mm		
12. Endotracheal tubes - uncuffed size 4mm		
13. Endotracheal tubes - uncuffed size 4.5mm		
14. Endotracheal tubes, cuffed, size 3.0mm		
15. Endotracheal tubes, cuffed, size 4.0mm		

16. Endotracheal tubes - cuffed size 5mm		
17. Endotracheal tubes - cuffed size 6mm		
18. Endotracheal tubes - cuffed size 7mm		
19. Endotracheal tubes - cuffed size 8mm		
20. Laryngeal mask airways size 3 or size 4 or size 5		
21. Tape to hold endotracheal tube in place		
22. Adult-size introducer, intubating stylet or bougie for endotracheal tubes		
23. Paediatric size introducer, intubating stylet or bougie for endotracheal tubes		
<b>Equipment for all health establishments (with and without a permanently appointed doctor)</b>		
24. Oropharyngeal airways (Guedel) size 00		
25. Oropharyngeal airways (Guedel) size 0		
26. Oropharyngeal airways (Guedel) size 1		
27. Oropharyngeal airways (Guedel) size 2		
28. Oropharyngeal airways (Guedel) size 3		
29. Oropharyngeal airways (Guedel) size 4		
30. Oropharyngeal airways (Guedel) size 5		
31. Magill's forceps (adult)		
32. Magill's forceps (paediatric)		
33. Manual bag valve mask/ manual resuscitator or self-inflating bag with compatible masks (adult)		

34. Manual bag valve mask/ manual resuscitator or self-inflating bag with compatible masks (paediatric)		
35. Reservoir mask for oxygen (paediatric)		
36. Reservoir mask for oxygen (adult)		
37. Face mask for nebuliser or face mask with nebuliser chamber or spacers for MDIs (adult)		
38. Face mask for nebuliser or face mask with nebuliser chamber or spacers for MDIs (paediatric)		
39. Automatic External Defibrillator (AED) or defibrillator. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping these items. The health establishment must be listed in the letter signed by HOD: Health and directed to NDOH .		
40. Electrodes for defibrillator. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping these items. The health establishment must be listed in the letter signed by HOD: Health and directed to NDOH .		
41. Defibrillator pads. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping these items. The health establishment must be listed in the letter signed by HOD: Health and directed to NDOH .		
42. Conductive gel. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping these items. The health establishment must be listed in the letter signed by HOD: Health and directed to NDOH .		
43. Intravenous cannula 18g green and appropriate strapping		
44. Intravenous cannula 20g pink and appropriate strapping		
45. Intravenous cannula 22g blue and appropriate strapping		
46. Intravenous cannula 24g yellow and appropriate strapping		
47. Syringes 3-part: 2ml		

48. Syringes 3-part: 5ml		
49. Syringes 3-part: 10 or 20ml		
50. Syringes: insulin syringes		
51. Admin set 20 drops/ml 1.8m /pack		
52. Admin set paed 60 drops/ml 1.8m /pack		
53. Needles: 18 (pink) or 20 (yellow)		
54. Needles: 21 (green)		
55. Needles: 22 (black) or 23 (blue)		
56. Stethoscope		
57. Rescue scissors (to cut clothing)		
58. Nasogastric tubes: 600mm fg 8		
59. Nasogastric tubes: 1000mm fg 10 or 12		
60. Water-soluble lubricant / lubricating jelly		
<b>Present individually or in a combined multifunctional diagnostic monitoring set</b>		
61. Pulse oximeter with adult and paediatric probes		
<b>Emergency medicines (check expiry dates)</b>		
62. Activated charcoal		
63. Adrenaline 1mg/ml (Epinephrine) ampoule		
64. Amlodipine 5mg or 10mg tablets		
65. Aspirin 100mg or 300mg tablets		
66. Atropine 0.5mg or 1mg ampoule		

67. Calcium gluconate 10% ampoule		
68. Furosemide 10mg or 20MG/2ml ampoule		
69. Hydrocortisone 100mg/ml vial or 200mg/2ml vial		
70. Insulin short acting vial (stored in the medicine fridge)		
71. Ipratropium 0.25mg/2ml or 0.5mg/2ml unit dose vial for nebulisation		
72. Isosorbide dinitrate, sublingual, 5mg tablets		
73. Lidocaine / Lignocaine IM 1% or 2% vial		
74. Magnesium sulphate 50%, 1g/2ml ampoule (minimum of 14 ampoules required for one treatment course)		
75. Midazolam (1mg/ml or 5mg/ml) or Diazepam 5mg/ml ampoule (To be locked away in the vicinity of the trolley)		
76. Nifedipine 5mg or 10mg capsules		
77. Prednisone 5 mg tablets		
78. Promethazine 25mg/2ml or 25mg/1ml ampoule		
79. Salbutamol nebulising solution or 2.5mg/2.5ml or 5mg/2.5ml unit dose vials for nebulisation		
80. Thiamine 100mg vial		
81. Water for injection		
<b>IV Solutions</b>		
82. 50% dextrose (20ml ampoule or 50ml bag) or 10% dextrose 1L solution		
83. Paediatric solutions e.g. ½ strength Darrows(200ml or 500ml) solution and neonatalyte 200ml solution		
84. Sodium chloride 0.9% 1L solution		

**Sub Domain 2.2.3 8** Infection prevention and control programmes

**Standard 2.2.3.1 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 2.2.3.1.1 8(2)(a)** The health establishment must ensure that there are hand washing facilities in every service area.

**2.2.3.1.1.1 CHECKLIST:** Hand washing facilities are available in every service area.

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

Use the checklist below to check whether the hand washing facilities and items listed below are available. Score 1 if the aspect available and score 0 if the aspect is not available. Score not applicable if the health establishment has fewer areas those than listed for review.

Score	Comment

Unit 1 Consultation room

Aspects	Score	Comment
1. Functional hand wash basin. Explanatory note: The basin should not be blocked, broken, or have deep cracks causing leaking of water.		
2. Taps are functional with running water. Explanatory Note: Requirement not applicable when health establishment utilises sanitiser during drought episodes.		
3. Liquid hand wash soap. Explanatory Note: Requirement not applicable when health establishment utilises sanitiser during drought episodes.		
4. Disposable hand paper towels		
5. A poster on hand hygiene is displayed above or next to the hand wash basin.		
6. Alcohol based hand rub		

Unit 2 Vital signs room

Aspects	Score	Comment
1. Functional hand wash basin. Explanatory note: The basin should not be blocked, broken, or have deep cracks causing leaking of water.		
2. Taps are functional with running water. Explanatory Note: Requirement not applicable when health establishment utilises sanitiser during drought episodes.		



3. Liquid hand wash soap. Explanatory Note: Requirement not applicable when health establishment utilises sanitiser during drought episodes.		
4. Disposable hand paper towels		
5. A poster on hand hygiene is displayed above or next to the hand wash basin.		
6. Alcohol based hand rub		

**Criterion 2.2.3.1.2 8(2)(b) The health establishment must provide isolation units or cubicles where users with contagious infections can be accommodated.**

**2.2.3.1.2.1** A dedicated room or area is used to accommodate users with highly infectious diseases.

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

The health establishment must provide a room or an area to accommodate users with contagious infections while awaiting transfer to a higher level of care. This could be an emergency room. Not applicable: Never

Score	Comment

**Criterion 2.2.3.1.3 8(2)(c) The health establishment must ensure there is clean linen to meet the needs of users.**

**2.2.3.1.3.1 CHECKLIST:** The linen in use is sufficient, clean, appropriately used and not torn.

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

Use the checklist below to check whether the linen is sufficient, clean, appropriately used and not torn (meaning it is not ripped, split, slit, cut, lacerated or in disrepair). Score 1 if the aspect is compliant and score 0 if it is not compliant. Score not applicable where the type of linen listed (cloth/disposable) is not in use.

Score	Comment	
Aspects	Score	Comment
1. All examination couches are covered with linen		
2. Two sets of cloth linen (i.e. couch cover, two draw sheets, two sheets, two pillowcases) per consultation room		
3. Disposable linen - at least 30 draw sheets or linen savers per consultation room		
4. The linen is clean		

5. The linen is appropriately used for its intended purpose		
6. The linen is not torn		

**Criterion 2.2.3.1.4 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.**

**2.2.3.1.4.1 CHECKLIST:** 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 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 1: Worn

Aspects	Score	Comment
1. Gloves - non-sterile		
2. Gloves - sterile		
3. Disposable gowns or aprons		
4. Face masks		
5. N95 or KN95 or FFP2 respirator or equivalent.		

Unit 2 Consultation room 2: Worn

Aspects	Score	Comment
1. Gloves - non-sterile		
2. Gloves - sterile		
3. Disposable gowns or aprons		
4. Face masks		
5. N95 or KN95 or FFP2 respirator or equivalent.		

**Sub Domain 2.2.4 9 Waste management**

**Standard 2.2.4.1 9(1)** The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

**Criterion 2.2.4.1.1 9(2)(a)** The health establishment must have appropriate waste containers at the point of waste generation.

**2.2.4.1.1.1 CHECKLIST:** Healthcare waste is managed as required by waste management practices.

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

Use the checklist below to check whether health care risk waste is managed as required. Score 1 if the aspect is compliant and score 0 if it is not compliant. Score not applicable if the health establishment has fewer areas than those listed. \* If disposable boxes for sanitary waste with gel granules in the bottom of the box for treating the waste are used, no bag is required and the health establishment can score 1.

Score	Comment

Unit 1 Staff Toilet

Aspects	Score	Comment
1. Sanitary disposal bins with a fitting lid or healthcare risk waste box with a lid.		
2. Sanitary disposal bins or boxes lined with red plastic bags		
3. Sanitary disposal bins or boxes are clean and not overflowing		
4. Bins available for general waste		
5. Bins for general waste are lined with appropriate coloured bags (Black, beige, white or transparent packaging can be used.)		

Unit 2 Public Toilet

Aspects	Score	Comment
1. Sanitary disposal bins with a fitting lid or healthcare risk waste box with a lid.		
2. Sanitary disposal bins or boxes lined with red plastic bags		
3. Sanitary disposal bins or boxes are clean and not overflowing		
4. Bins available for general waste		
5. Bins for general waste are lined with appropriate coloured bags (Black, beige, white or transparent packaging can be used.)		

Unit 3 Clinical Area

Aspects	Score	Comment
1. Health care risk waste disposal bins with functional lids or health care risk waste box		

2. Health care risk waste disposal bins or boxes lined with red colour plastic bags		
3. Health care risk waste disposal bins or boxes contain only health care waste		
4. Health care risk waste disposal bins or boxes are not overflowing		
5. Bins available for general waste		
6. Bins for general waste are lined with appropriate coloured bags (Black, beige, white or transparent packaging can be used.)		

Unit 4 Waiting Area

Aspects	Score	Comment
1. Bins available for general waste		
2. Bins for general waste are lined with appropriate coloured bags (Black, beige, white or transparent packaging can be used.)		

**2.2.4.1.1.2 CHECKLIST:** There are appropriate containers for disposal of all types of waste.

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

Observe if the waste containers listed below are available. Score 1 if the waste container is available and score 0 if it is not available. Where a particular type of waste is not generated in the unit, score NA (not applicable).

Score	Comment

Aspects	Score	Comment
1. Infectious non-anatomical waste (red)		
2. Sharps (yellow) - Sharps are disposed of in impenetrable, tamperproof containers		
3. General waste (black, beige, white or transparent packaging can be used)		
4. Anatomical waste (Red bucket with sealable lid)-applicable where male medical circumcision or deliveries are done.		

5. Sanitary bins (box/container with red bag)		
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**Criterion 2.2.4.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.**

**2.2.4.1.2.1 CHECKLIST:** Sharps are safely managed and discarded in clinical areas.

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

Use the checklist below to check three consultation rooms and determine whether sharps are safely managed and discarded. Score 1 if compliant and score 0 if not compliant.

Score	Comment

**Unit 1 Consultation room 1**

Aspects	Score	Comment
1. Waste is properly segregated. Explanatory note: Only sharps are discarded into the container; no gloves, papers or any other waste is discarded into the container.		
2. Sharps containers are discarded when they reach the limit mark		
3. Sharps containers are placed on a work surface or in wall mounted brackets		
4. Sharps containers have correctly fitting lids		
5. Needles are not recapped before disposal, not applicable for safety needles and syringes)		

**Unit 2 Consultation room 2**

Aspects	Score	Comment
1. Waste is properly segregated. Explanatory note: Only sharps are discarded into the container; no gloves, papers or any other waste is discarded into the container.		
2. Sharps containers are discarded when they reach the limit mark		
3. Sharps containers are placed on a work surface or in wall mounted brackets		
4. Sharps containers have correctly fitting lids		

5. Needles are not recapped before disposal, not applicable for safety needles and syringes)		
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Unit 3 Consultation room 3

Aspects	Score	Comment
1. Waste is properly segregated. Explanatory note: Only sharps are discarded into the container; no gloves, papers or any other waste is discarded into the container.		
2. Sharps containers are discarded when they reach the limit mark		
3. Sharps containers are placed on a work surface or in wall mounted brackets		
4. Sharps containers have correctly fitting lids		
5. Needles are not recapped before disposal, not applicable for safety needles and syringes)		

**Sub Domain 2.2.5 21** Adverse events

**Standard 2.2.5.1 21(1)** The health establishment must have a system to monitor and report all adverse events.

**Criterion 2.2.5.1.1 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.

**2.2.5.1.1.1 CHECKLIST:** Health care personnel are aware of the procedure to report adverse events.

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

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

Score	Comment

Unit 1 Healthcare personnel 1

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

Unit 2 Healthcare personnel 2

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

Unit 3 Healthcare personnel 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		
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 2.3 CLINICAL SUPPORT SERVICES**

**Sub Domain 2.3.1 10 Medicines and medical supplies**

**Standard 2.3.1.1 10(1)** The health establishment must comply with the provisions of the Pharmacy Act, 1974 and the Medicines and Related Substances Act, 1965.

**Criterion 2.3.1.1.1 10(2)(b)** The health establishment must ensure the availability of medicines and medical supplies for the delivery of services.

**2.3.1.1.1.1 CHECKLIST:** 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 available stock in the storage room. Score 1 if the item listed is available and score 0 if it is not available.

Score	Comment	
Aspects	Score	Comment
<b>Surgical supplies</b>		
1. Intravenous administration set 20 drops/ml		

2. Intravenous administration set paed 60 drops/ml		
3. Blade stitch cutter sterile/pack		
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. Simple face mask or reservoir mask or nasal cannula (prongs) for oxygen, paediatric		
11. Face mask for nebuliser or face mask with nebuliser chamber (adult)		
12. Face mask for nebuliser or face mask with nebuliser chamber (paediatric)		
13. Nasogastric feeding tube 600mm fg8		
14. Nasogastric feeding tube 1000mm fg10 or 12		
15. Disposable aprons		
16. Disposable eye patches		
17. Disposable razors or clippers		
18. HB strips/slides		
19. Ultrasound gel medium viscosity (where doppler or ultrasound machines are available)		
20. Vaginal Cusco speculum		
21. Gloves exam non-sterile large /box		



22. Gloves exam non-sterile medium /box		
23. Gloves exam non-sterile small /box		
24. Gloves surgical sterile size 6 or 6.5 or small/box		
25. Gloves surgical sterile size 7 or 7.5 or medium/box		
26. Gloves (surgical sterile) size 8 or large (box)		
27. Intravenous cannula 18g green/box		
28. Intravenous cannula 20g pink/box		
29. Intravenous cannula 22g blue/box		
30. Intravenous cannula 24g yellow/box		
31. Needles: 18 (pink) or 20 (yellow)/box		
32. Needles: 21 (green)/box		
33. Needles: 23 (blue)/box or 22 (black)/box		
34. Syringes 3-part 2ml/box		
35. Syringes 3-part 5ml/box		
36. Syringes 3-part 10 or 20ml/box		
37. Insulin syringe with needle/box		
38. Suture chromic g0/0 or g1/0 1/2 75cm		
39. Suture nylon g2/0 or g3/0 3/8 45cm		
40. Suture nylon g4/0 or g3/8 45cm		
<b>Only applicable if the health establishment uses an older HB model</b>		
41. Haemolysis applicator sticks		

42. HB meter clip		
43. HB chamber glass-grooved		
44. HB cover glass-plain		
45. Replacement pads for AED - adult. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping Automatic External Defibrillator (AED) . The health establishment must be listed in the letter signed by HOD: Health and directed to NDOH		
46. Replacement pads for AED - paediatric. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping Automatic External Defibrillator (AED) . The health establishment must be listed in the letter signed by HOD: Health and directed to NDOH		
<b>Dressing supplies</b>		
47. Basic disposable dressing pack (should contain at the very least cotton wool balls, swabs, disposable drape)		
48. Gauze swabs plain non-sterile 100x100x8ply (pack)		
49. Gauze paraffin 100x100 (box)		
50. Bandage crepe		
51. Adhesive micro-porous surgical tape 24/25mm or 48/50mm		
52. Gauze absorbent grade 1 burn (pack)		
53. 70% isopropyl alcohol prep pads 24x30 1ply or 2 ply (box)		
54. Plaster roll		
55. Cotton wool balls 1g (500s)		
56. Stockinette 100mm OR 150mm (roll)		
<b>Laboratory supplies</b>		

57. Lancets		
58. Blood glucose strips		
59. Urine dipsticks		
60. Urine specimen jar or flask		
61. Malaria rapid test (where applicable in facilities in KZN, GP, MP and LP)		
62. Rapid HIV test		
63. Rh 'D' (Rhesus factor) test		
<b>Required specimen collection material and stationery</b>		
64. Vacutainer tube: Blue Top (Sodium Citrate)		
65. Vacutainer tube: Red or Yellow Top (SST)		
66. Vacutainer tube: Grey Top (Sodium Fluoride)		
67. Vacutainer tube: White Top (PPT)		
68. Vacutainer tube: Purple Top (EDTA)		
69. Microtainer tube: Purple Top (EDTA Paeds)		
70. Microtainer tube: Yellow Top (SST Paeds)		
71. Sterile specimen jars		
72. Swabs with transport medium		
73. Sterile Tubes (without additive) for MCS (Microscopy, culture and sensitivity)		
74. Venipuncture needles (Green or Black)		
75. Specimen Plastic Bags		

<b>Pap smear collection materials</b>		
76. Liquid - based Cytology (LBC) vials (NA if facility uses traditional pap smear method)		
77. Combi - brush (NA if facility uses traditional pap smear method)		
78. Cervix – brush (NA if facility uses traditional pap smear method)		
79. Fixative (NA if facility uses liquid-based cytology method)		
80. Wooden spatula (NA if facility uses liquid-based cytology method)		
81. Slide holder or brown envelope (NA if facility uses liquid-based cytology method)		
82. Microscope slides (NA if facility uses liquid-based cytology method)		
<b>Early Infant diagnosis (EID) collection material</b>		
83. DBS PCR Kit or EDTA Microtainer tube (where PCR is performed at the laboratory)		

**2.3.1.1.1.2 CHECKLIST:** Three scripts in the consultation rooms are correlated with the medicines dispensed to ensure that all medicines were received as prescribed.

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

Select three user scripts in the consultation rooms and check whether medicines were dispensed against this script. If all medicines as prescribed were dispensed, score 1. If a user has not received all the medicines as prescribed, score 0.

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

**Sub Domain 2.3.2 13** Medical equipment

**Standard 2.3.2.1 13(1)** Health establishments must ensure that the medical equipment is available and functional in compliance with the law.

**Criterion 2.3.2.1.1 13(2)(b)** The health establishment must ensure that equipment is in accordance with the essential equipment list in all clinical service areas.

**2.3.2.1.1.1 CHECKLIST:** Essential equipment is available and functional in consultation areas.

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

Use the checklist below to check whether essential equipment is available and functional in consultation, vital signs and child health rooms. Select the number of areas to review as indicated in the scoring columns. Score 1 if the item listed is available and functional and score 0 if it is not available or functional.

Score	Comment	
Aspects	Score	Comment
<b>Consultation room 1</b>		
1. Stethoscope		
2. Blood pressure machine (wall mounted or portable)		
3. Adult, paediatric, large cuffs (three) for Blood pressure machine		
4. Diagnostic sets including ophthalmic pieces (wall mounted or portable)		
5. Patella hammer (only required in one consultation room)		
6. Tuning fork (only required in one consultation room)		
7. Clinical thermometers (Thermometers containing mercury are non-compliant)		
<b>Consultation room 2</b>		
8. Stethoscope		
9. Blood pressure machine (wall mounted or portable)		
10. Adult, paediatric, large cuffs (three) for Blood pressure machine		
11. Diagnostic sets including ophthalmic pieces (wall mounted or portable)		
12. Patella hammer (only required in one consultation room)		

13. Tuning fork (only required in one consultation room)		
14. Tape measure		
15. Clinical thermometers (Thermometers containing mercury are non-compliant)		
<b>Vital signs room</b>		
16. Blood pressure machine (wall mounted or portable)		
17. Adult, paediatric, large cuffs (three) for Blood pressure machine		
18. Blood glucometer		
19. Peak flow meter		
20. Adult clinical scale up to 150 kg		
21. Stethoscope		
22. HB meter		
23. Clinical thermometer(Thermometers containing mercury are non-compliant)		
24. Height measure		
25. Tape measure		
<b>Child health room</b>		
26. Baby scale		
27. Bassinet		
28. Stethoscope		
29. Blood glucometer		
30. Blood pressure machine (wall mounted or portable)		

31. Paediatric cuff for Blood pressure machine		
32. Diagnostic sets including ophthalmic pieces (wall mounted or portable)		
33. Patella hammer		
34. Tape measure		
35. Clinical thermometers (Thermometers containing mercury are non-compliant)		

**2.3.2.1.1.2** An oxygen cylinder with pressure gauge is available.

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

An oxygen cylinder fitted with regulator indicating cylinder pressure and adjustable flowrate must be available. Not applicable: Never

Score	Comment

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

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

Oxygen levels must not be below the minimum level indicated in the oxygen cylinder gauge. Not applicable: Never

Score	Comment

**2.3.2.1.1.4** CHECKLIST: There is an emergency sterile obstetric delivery pack.

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

Use the checklist below to check whether an emergency sterile pack is available. Score 1 if the pack is available and not expired and score 0 if it is not available or expired. Note: Sterile packs must be labelled with the contents of the pack if the pack is not labelled score 0.

Score	Comment	
Aspects	Score	Comment
1. Stitch scissor- 1		
2. Episiotomy scissor 1		

3. Cord scissor-1		
4. Dissecting forceps non-toothed (plain)-1		
5. Dissecting forceps toothed-1		
6. Artery forceps, straight, long-2		
7. Needle holder-1		
8. Small bowl-2		
9. Kidney dishes OR receivers (big)-2		
<b>Extras - not part of pack</b>		
10. Basin-1		
11. Stainless-steel round bowl, large-1		
12. Green towels-4		
13. Disposable apron-2		
14. Gauzes-5		
15. Vaginal tampons-1		
16. Sanitary towels-2		
17. Round cotton wool balls-1 pack		
18. Umbilical cord clamps-2		

**2.3.2.1.1.5 CHECKLIST:** There is a sterile pack for minor surgery.

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

Use the checklist below to check whether equipment for minor surgery is available. Score 1 if the pack is available and not expired and score 0 if it is not available or expired. Note: Sterile packs for minor surgery must be labelled by indicating the contents of the pack if the pack is not labelled score 0.

Score	Comment



Aspects	Score	Comment
1. Small stitch tray-1		
2. Stitch scissor-1		
3. Toothed forceps-1		
4. Non-toothed forceps-1		
5. Bard-Parker surgical blade handle to fit accompanying blades (blades do not form part of sterilised pack but must be available)-1		
6. Mosquito, straight-2		
7. Mosquito, curved-2		
8. Artery forceps, straight-2		
9. Artery forceps, curved-2		
10. Needle holder-1		
11. Swab holder-1		

**Domain 2.4 GOVERNANCE AND HUMAN RESOURCES**

**Sub Domain 2.4.1 20** Occupational health and safety

**Standard 2.4.1.1 20(1)** The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

**Criterion 2.4.1.1.1 20(2)(b) Awareness of safety and security issues must be promoted**

**2.4.1.1.1.1** Notices prohibiting smoking are displayed inside the clinic.

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

No-smoking signs must be displayed at the entrance of the health establishment and inside the health establishment. Where the notice is kept in the staff room only, the requirement will be non-compliant.

Not applicable: Never

Score	Comment

**2.4.1.1.1.2** Safety and security notices are displayed.

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

Safety and security notices must be displayed in accordance with health and safety legislation, including but not limited to signs indicating the following: dangerous weapons not allowed, emergency exits, assembly points, location of stored flammable materials and location of the first aid box. This could also be a disclaimer sign. Where the health establishment is small, only one area can be assessed, e.g. the waiting area. Where information is kept in the staff room only, the requirement will be non-compliant. Not applicable: Never

Score	Comment

**Domain 2.5 FACILITIES AND INFRASTRUCTURE**

**Sub Domain 2.5.2 14** Management of buildings and grounds

**Standard 2.5.2.1 14(1)** The health establishment and their grounds must meet the requirements of the building regulations.

**Criterion 2.5.2.1.1 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.

**2.5.2.1.1.1 CHECKLIST:** All clinical service areas have natural ventilation or functional mechanical ventilation.

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

The National building regulations stipulate that satisfactory ventilation is only provided by forcing outdoor air into a space mechanically or passively through either ducting or apertures open to the outside such as windows or ventilation grilles. Check if the areas listed below have passive ventilation (windows, doors that can be opened and ventilation grilles) or functional mechanical ventilation (i.e. Ducting system). Score 1 if the aspect is compliant and 0 if it is not compliant. NB: Inspect areas available in the health establishment.

Score	Comment	
Aspects	Score	Comment
1. Waiting area		
2. Vital signs room		
3. Consulting room		

**Sub Domain 2.5.1 17** Security services

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

**Criterion 2.5.1.1.1 17(2)(a)** The health establishment must ensure that security staff are capacitated to deal with security incidents, threats and risks.

**2.5.1.1.1.1** The security guards wear uniform.

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

Security guard must be easily identifiable. Observe if all security guards performing their duties at the health establishment are wearing uniform. Not applicable: Where the health establishments does not have physical security guards.

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 Clinics.

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- The Certification and Enforcement Committee of the OHSC Board for reviewing the tools and for recommending to the Board for approval.

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

**Ms. W Moleko**

**Signature:**



**Executive Manager: Health Standards  
Development Analysis and Support**

**Date:**

10/08/2022

**Dr Sipiwe Mndaweni**

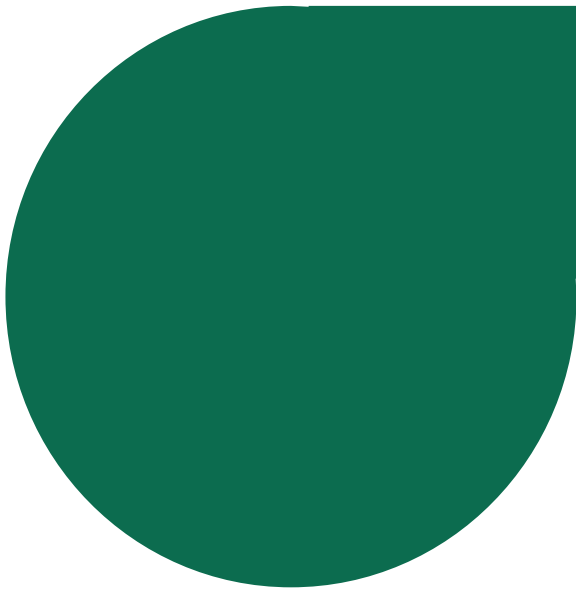
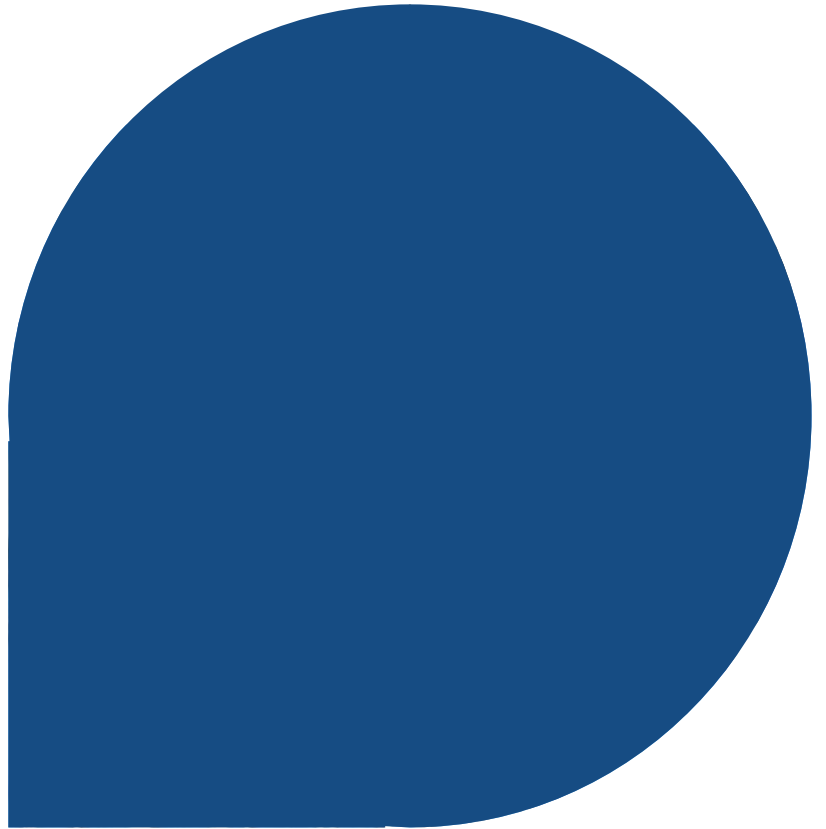
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