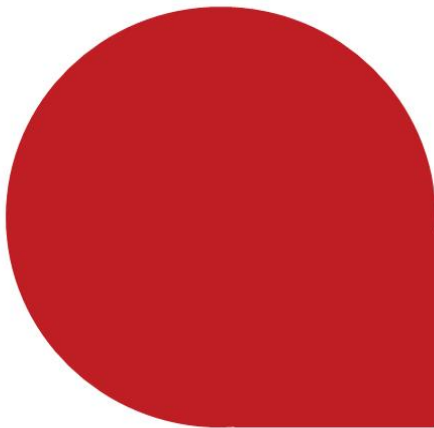




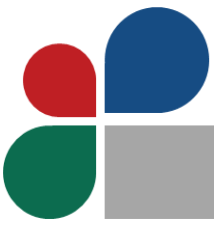
Office of Health Standards Compliance  
Ensuring quality and safety in health care



**v1.2**

**Human Resource  
Management**

**Regulatory Private Acute  
Hospital Inspection tool**



## 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.

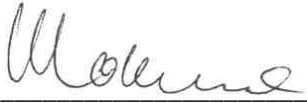
To achieve this mandate, standardised inspection tools aligned to Norms and Standards Regulations applicable to different categories of health establishments promulgated by the Minister of Health in 2018 have been developed for Private Acute Hospitals.

### **Acknowledgements**

There are many people who have contributed to the development of the Regulatory Private Acute Hospital Inspection Tools Version 1.2. The Office of Health Standards Compliance wishes to extend most heartfelt acknowledgement and gratitude to the following:

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- Former Health Standards Development and Training unit Director Dr Grace Labadarios
- Systems, Data Analysis and Research unit Director Dr Thabiso Makola who is also the Acting Director for Health Standards Development and Training unit
- The Health Standards Development and Training unit (Mr Jabu Nkambule who led the team and worked tirelessly with the leadership of Hospital Association of South Africa (HASA) during various development stages of the tool, Ms Florina Mokoena, Ms Mosehle Matlala, Ms Busisiwe Mashinini) and contract workers Ms Thesia Pather and Ms Busi Ngubane for the development of the Private Acute Hospital Inspection tools.
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- The Hospital Association of South Africa (HASA) for their commitment and constructive engagements during the consultative process and for affording the OHSC an opportunity to conduct scoping visits in the private hospital health establishments.

It is hereby certified that these Regulatory Private Acute Hospital Inspection tools version 1.2 was developed by the Office of Health Standards Compliance.



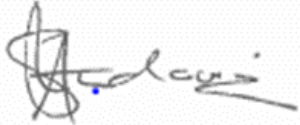
Ms. WMoleko

Executive Manager

Health Standards Development

Analysis and Support

Date: 31/03/2022



Dr. S. Mndaweni

Chief Executive Officer

Date: 31/03/2022

Facility:
Date:

- **Tool Name:** Regulatory Private Acute Hospital inspection tool v1.2 - Final
- **HEs Type:** Hospitals
- **Sector:** Private
- **Specialization:** Private Acute Hospital
- **Created By:** Health Standards Development and Training

## 2 Human Resource Management

### Domain 2.2 CLINICAL GOVERNANCE AND CLINICAL CARE

#### Sub Domain 2.2.1 7 Clinical management

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

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

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

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

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

Score	Comment	
Aspects	Score	Comment
1. Organizational structure		
2. Group or Company policies		
3. Standard operating procedures		
4. Health and safety risks		

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

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

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

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

Score	Comment

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

**2.2.1.1.3.1** The central sterilisation service department (CSSD) manager is qualified or experienced in sterilisation services.

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

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

decontamination services or qualification in any other sterilisation procedures or have a minimum of two years' experience in sterilisation services. Not applicable: Never

Score	Comment

**2.2.1.1.3.2** The infection prevention and control unit is managed by a healthcare provider with appropriate qualifications or experience.

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

The person responsible for infection control in the health establishment must be a qualified health care provider or an individual with a minimum of two years' experience in the field of infection prevention and control. There must be evidence of the appointment or designation of the infection control health care provider and of his/her experience in the field of infection prevention and control. Infection Prevention and Control practitioners appointed or designated to a position must be trained in accordance with the national Infection Prevention and Control Practitioners Curriculum or other relevant training. (Reference: Practical Manual for Implementation of the National IPC Strategic Framework 2020 pg.173-182) Not applicable: Never

Score	Comment

**Domain 2.4 GOVERNANCE AND HUMAN RESOURCES**

**Sub Domain 2.4.1 19** Human resources management

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

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

**2.4.1.1.1.1** Staffing levels as determined by acuity or activity levels are available.

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

Request staffing level records of three units from the previous three months and verify whether acuity or activity levels are documented. The Health establishment could use any staffing model. Not applicable: Never

Score	Comment

**2.4.1.1.1.2** The health establishment has a strategy or standard operating procedure or guideline for staff retention in place.

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

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

Score	Comment

**2.4.1.1.1.3** Healthcare personnel appointed to management positions have the required qualifications.

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

Examine all key management positions for the aspects listed below. Score 1 if the aspect is compliant and 0 if not compliant. NB: For positions not available in the health establishments' structure score not applicable.

Score	Comment	
Aspects	Score	Comment
<b>Does the incumbent have suitable qualifications such as those suggested below?</b>		
1. Hospital Manager : A higher education qualification		
2. Human resources manager : Diploma or degree in human resources management		
3. Nursing services manager : Diploma or degree in nursing management		
4. Quality manager : Qualifications in health-related field		
5. Financial manager : Diploma or degree in financial management		
6. Facility infrastructure or Technical manager: Diploma or degree in facility management or engineering.		
7. Pharmacy Manager : Degree in Pharmacy		

**2.4.1.1.1.4** Job descriptions meet the requirements listed below.

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

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

Score	Comment

Unit 1 Signed by incumbent, Signed by supervisor and dated

Aspects	Score	Comment
1. Hospital Manager		
2. Human resources manager		

3. Nursing services manager		
4. Quality manager		
5. Financial manager		
6. Facility infrastructure manager		
7. Pharmacy Manager		
8. Professional nurse (randomly select one)		
9. Pharmacist (randomly select one)		
10. Administration Clerk/personnel (randomly select one file)		
11. Driver (randomly select one file)		

Unit 2 List of activities, responsibilities or key performance areas

Aspects	Score	Comment
1. Hospital Manager		
2. Human resources manager		
3. Nursing services manager		
4. Quality manager		
5. Financial manager		
6. Facility infrastructure manager		
7. Pharmacy Manager		
8. Professional nurse (randomly select one)		
9. Pharmacist (randomly select one)		
10. Administration Clerk/personnel (randomly select one file)		
11. Driver (randomly select one file)		

Unit 3 Key competencies required

Aspects	Score	Comment
1. Hospital Manager		
2. Human resources manager		
3. Nursing services manager		
4. Quality manager		

5. Financial manager		
6. Facility infrastructure manager		
7. Pharmacy Manager		
8. Professional nurse (randomly select one)		
9. Pharmacist (randomly select one)		
10. Administration Clerk/personnel (randomly select one file)		
11. Driver (randomly select one file)		

Unit 4 Lines of accountability are described

Aspects	Score	Comment
1. Hospital Manager		
2. Human resources manager		
3. Nursing services manager		
4. Quality manager		
5. Financial manager		
6. Facility infrastructure manager		
7. Pharmacy Manager		
8. Professional nurse (randomly select one)		
9. Pharmacist (randomly select one)		
10. Administration Clerk/personnel (randomly select one file)		
11. Driver (randomly select one file)		

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

**2.4.1.1.2.1** The performance management agreements of managers are available.

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

Request the performance management agreements of the managers listed below and verify whether performance agreements have been signed with their supervisors. The performance management agreements could be from the previous or current financial year. Score 1 if a signed performance agreement is available and 0 if not. Score N/A for categories of employees not appointed by the health establishment

Score	Comment



Unit 1 Signed and dated by incumbent

Aspects	Score	Comment
1. Hospital Manager		
2. Human resources manager		
3. Nursing services manager		
4. Quality manager		
5. Financial manager		
6. Facility infrastructure manager or Technical manager		
7. Pharmacy Manager		

Unit 2 Signed and dated by supervisor

Aspects	Score	Comment
1. Hospital Manager		
2. Human resources manager		
3. Nursing services manager		
4. Quality manager		
5. Financial manager		
6. Facility infrastructure manager or Technical manager		
7. Pharmacy Manager		

**2.4.1.1.2.2** Health care personnel undergo performance reviews.

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

Randomly select three different categories of healthcare personnel and verify whether performance reviews were conducted in the previous financial year. Score 1 if performance review was conducted for the healthcare personnel and score 0 if not conducted.

Score	Comment

Aspects	Score	Comment
1. Healthcare personnel 1		
2. Healthcare personnel 2		
3. Healthcare personnel 3		

**2.4.1.1.2.3** Management team undergo comprehensive reviews of their performance as stipulated in the company/group policy.

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

Select any three human resources files of management team members to verify whether performance reviews were conducted in line with the company/group policy. The list of managers may include but not limited to CEO, HR manager, Nursing service manager or Pharmacy manager. This information can be available manually or electronically.

Score	Comment	
Aspects	Score	Comment
1. File 1		
2. File 2		
3. File 3		

**2.4.1.1.2.4** Remedial action is implemented where poor performance of management team is identified.

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

Implementation/intervention reports indicating action taken to address failures in performance must be available. Reports must be dated and signed by the respective individuals and their supervisors.

Not applicable: Where all management team members have achieved their targets

Score	Comment

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

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

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

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

2005 can legally be used by employers to verify that a person is registered in terms of the Nursing Act, 2005.Score Not applicable for categories of health providers not employed in the health establishment. NB: Please note other Statutory bodies/councils will issue a virtual card which must be accepted.

Score	Comment

Unit 1 Nursing personnel

Aspects	Score	Comment
1. File 1		

2. File 2		
3. File 3		

Unit 2 Pharmacy personnel

Aspects	Score	Comment
1. File 1		
2. File 2		
3. File 3		

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

**2.4.1.1.4.1** The health establishment adheres to its selection and recruitment procedures.

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

Request the selection and recruitment procedure and select files of the last three employees recruited by the health establishment. Verify whether the appointments comply with the requirements listed in the selection and recruitment procedures (this will include but not limited to: advertisement of position, screening of applications, shortlisting of applicants, interview process and appointment of successful candidate). Score 1 if the files are compliant and 0 if not compliant.

Score	Comment

Aspects	Score	Comment
1. File 1		
2. File 2		
3. File 3		

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

**2.4.1.1.5.1** Current Group or Company human resources policies or standard operating procedures or procedures or guidelines are available.

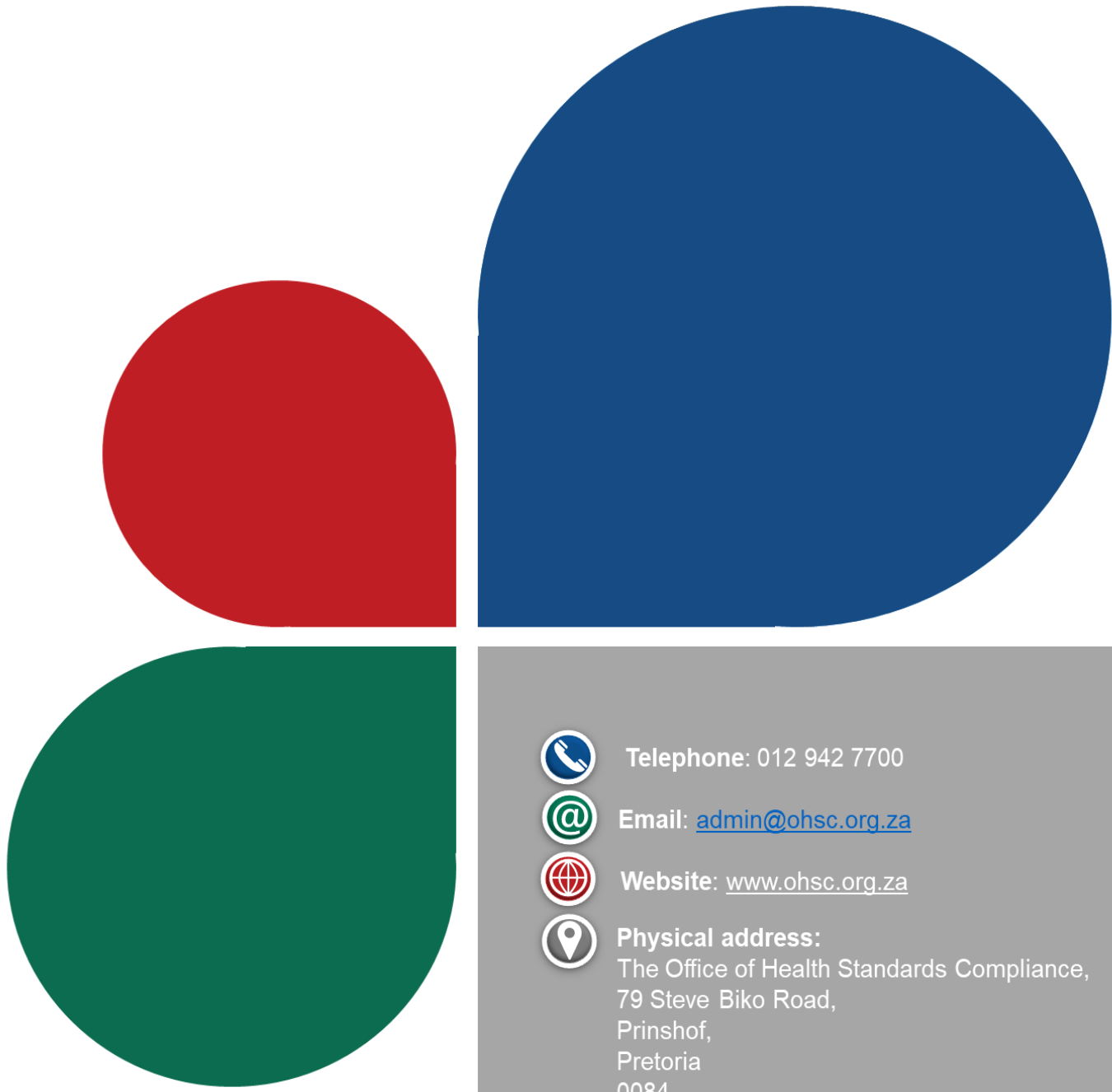
**Assessment type:** Document - **Risk rating:** Essential measure

Verify whether the documents listed below are available. The document must as minimum comply with the following requirements: Title of the document, Name of the health establishment or hospital group, signed and dated by the accounting officer or delegated person, signed and dated by the compiler or chairperson of committee that developed the document (recommended/optional), date of implementation, date of next review (Documents must be reviewed at a minimum every 5 years), summary of changes made to each version of the document (recommended/optional). NB: Document could be from the corporate head office. Score 1 if the document is available and 0 if not available.

Score	Comment

Aspects	Score	Comment

1. Leave Policy		
2. Recruitment and Selection Policy		
3. Skills Development Policy or Education and Training Policy		
4. Remuneration Policy		
5. Performance Management Policy		
6. Employment Equity Policy		
7. Disciplinary Policy		
8. Grievance Handling and Dispute Resolution Policy		
9. Occupational Health and Safety Policy		
10. Personnel Retention Policy		
11. Sexual Harassment Policy		



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