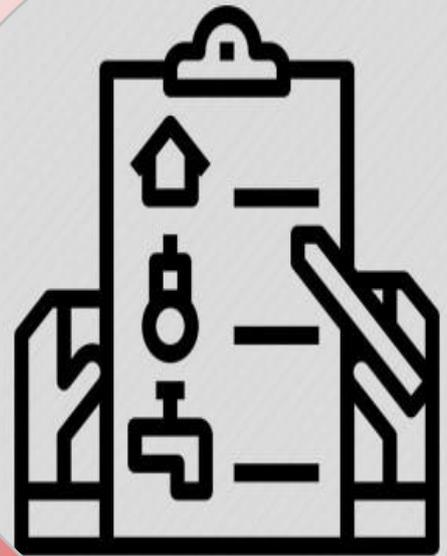


Regulatory District Hospital Inspection Tool v1.3



Operating Theatre Unit



Facility:
Date:

- **Tool Name:** Regulatory District Hospital Inspection tool v1.3 - Final
- **HEs Type:** Hospitals
- **Sector:** Public
- **Specialization:** District
- **Created By:** Health Standards Development and Training

21 Operating Theatre Unit

Domain 21.2 CLINICAL GOVERNANCE AND CLINICAL CARE

Sub Domain 21.2.1 6 User health records and management

Standard 21.2.1.1 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 21.2.1.1.1 6(4)(b) The health establishment must record information relating to the examination and health care interventions of users.

21.2.1.1.1.1 The operation register is completed comprehensively for all users undergoing surgery.

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

Verify whether all columns in the operation register are completed for every user for the previous four weeks. If information is incomplete for any of the users, score the measure as non-compliant. The register can be manual or electronic. Not applicable:

Never

Score	Comment

21.2.1.1.1.2 A register for all anatomical specimens sent to the laboratory is available.

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

A register must be available for all anatomical specimens sent to the laboratory for investigation. Entries made in the register must be complete. The register can be manual or electronic. Not applicable: Never

Score	Comment

Sub Domain 21.2.2 7 Clinical management

Standard 21.2.2.1 7(1) The health establishment must establish and maintain clinical management systems, structures and procedures that give effect to national policies and guidelines.

Criterion 21.2.2.1.1 7 Healthcare providers are informed on the health establishment and their specific responsibilities.

21.2.2.1.1.1 Health care personnel have been informed about the Standard Operating Procedures of the unit and health establishment.

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

Documented evidence that personnel have been informed about the Standard Operating Procedures of the unit and health establishment must be available. This could include but is not limited to distribution lists which include personnel signatures to indicate they have read and understood the document (which must be dated and signed), proof of attendance at meetings where policies, guidelines, standard operating procedures are discussed, or similar evidence for electronic distribution. Score 1 if such evidence is available and score 0 if it is not available.

Score	Comment	
Aspects	Score	Comment
1. Identifying users		
2. Management of emergency resuscitations		
3. Standard precautions		
4. Terminal cleaning/disinfection		
5. Management of adverse events		
6. Storage of Schedule 5 and 6 medicines		
7. Reporting of adverse drug reactions		
8. Administration of blood		
9. Management of needlestick and sharps injuries		

Standard 21.2.2.2 7(2) (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

Criterion 21.2.2.2.1 7 The health establishment implements process to ensure environmental cleanliness.

21.2.2.2.1.1 All work completed is verified by the cleaning supervisor or delegated health care personnel

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

Daily inspections will ensure the cleanliness of the theatre. The person responsible for overseeing the cleaning service must inspect the department 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 (including, but not limited to checklists/tick sheets) listing all cleaning tasks must be completed for each room or area. Not applicable: Never

Score	Comment

21.2.2.2.1.2 Cleaning personnel are able to explain how they carry out terminal cleaning or disinfection of the theatre and equipment.

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

Interview three cleaning personnel to verify whether they can explain how to carry out terminal cleaning. Cleaning personnel must be able to explain the content of the standard operating procedure which describes how this is done. Score 1 if they can explain the procedure and 0 if they cannot explain the procedure.

Score	Comment

Unit 1 Cleaner 1

Aspects	Score	Comment
1. Personal protective clothing used		
2. Equipment to be used		
3. Type of detergent		
4. Procedure for handling linen from contaminated theatre		
5. Procedure for handling medical waste		
6. Criteria for cleaning entire theatre		
7. Removal and discarding of used personal protective equipment		

Unit 2 Cleaner 2

Aspects	Score	Comment
1. Personal protective clothing used		
2. Equipment to be used		
3. Type of detergent		
4. Procedure for handling linen from contaminated theatre		
5. Procedure for handling medical waste		
6. Criteria for cleaning entire theatre		
7. Removal and discarding of used personal protective equipment		

Unit 3 Cleaner 3

Aspects	Score	Comment
1. Personal protective clothing used		
2. Equipment to be used		
3. Type of detergent		
4. Procedure for handling linen from contaminated theatre		
5. Procedure for handling medical waste		
6. Criteria for cleaning entire theatre		
7. Removal and discarding of used personal protective equipment		

21.2.2.2.1.3 The unit is observed to be clean.

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

Inspector to observe general cleanliness of the unit including but not limited to whether the unit is free of dirt, dust and stains.

Not applicable: Never

Score	Comment

Criterion 21.2.2.2.2 7 Implementation of standard operating procedures must be monitored.

21.2.2.2.2.1 The storage of sterile packs ensures the integrity of materials

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

The manner in which sterile packs are stored must prevent physical damage to packages, avoid exposure of packages to moisture.

Packages should not be stored in a manner that will crush, bend, puncture, or compress them. Therefore, packs should not be wet or have water damage, they should be intact (not opened or torn). Not applicable: Never

Score	Comment

21.2.2.2.2.2 Bacterial swabs are performed in accordance with infection control guidelines.

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

Evidence of laboratory results for particle counts from theatre must be available if major reconstruction has been carried out, where a theatre has been commissioned, or where there has been an infection outbreak in the previous 12 months within the health establishment. Not applicable: Where a theatre has not been commissioned, no major reconstruction has been carried out and/or there have been no infection outbreaks in the previous 12 months

Score	Comment

Criterion 21.2.2.2.3 7 The management of used and soiled linen must meet infection prevention and control requirements.

21.2.2.2.3.1 The theatre department has a designated, access-controlled area for the storage of dirty linen

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

The area used to store dirty linen must have a door, which is kept shut. Not applicable: Never

Score	Comment

21.2.2.2.3.2 Dirty linen trolleys are not overflowing

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

Linen must be collected frequently enough to avoid excessive accumulation of dirty linen. Not applicable: Never

Score	Comment

Criterion 21.2.2.2.4 7 Infection prevention and control messages must be communicated.

21.2.2.2.4.1 A sign at the entrance to the theatre to limit all unauthorised entry is available.

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

Verify whether there is a sign on the door that limits all unauthorised entry. Not applicable: Never

Score	Comment

Criterion 21.2.2.2.5 7 The health establishment must have a functional quality management system

21.2.2.2.5.1 Quality improvement plans are developed by health care personnel.

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

Request the quality improvement plan of the unit from the previous six months. Verify whether the aspects listed below are documented. Score if aspect is documented and 0 if not. NB: Score not applicable where no gaps have been identified.

Score	Comment

Aspects	Score	Comment
1. Gaps identified		
2. Activities required or implemented to address gaps		
3. Healthcare personnel responsible		
4. Time frames		

21.2.2.2.5.2 Corrective action has been taken to improve the quality of service provided where gaps are identified.

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

Evidence must be available that the action specified in the quality improvement plan was implemented. Not applicable: Where there were no gaps identified.

Score	Comment

Criterion 21.2.2.2.6 7 The physical environment in the operating theatre department must comply with user safety requirements.

21.2.2.2.6.1 The ambient temperature is maintained between 20 and 24 degrees Celsius

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

The temperature in theatre must be checked twice a day and documented. Inspect the records for the previous three months to confirm that the temperature has been maintained between 20 and 24 degrees Celsius. Not applicable: Never

Score	Comment

21.2.2.2.6.2 The humidity is maintained between 30% and 60%.

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

The humidity level in theatre must be checked daily and documented. Inspect the records for the previous three months to confirm that the humidity has been maintained between 30% and 60%. Not applicable: Never

Score	Comment

Criterion 21.2.2.2.7 7 Communication systems must be available and functional to facilitate adequate user care, and safety of user and health care personnel.

21.2.2.2.7.1 Functional, accessible telephones are available in all operating rooms

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

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

Score	Comment

Criterion 21.2.2.2.8 7 The health establishment must implement systems to ensure that blood and blood products are available and administered safely.

21.2.2.2.8.1 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 theatre, the emergency unit or the intensive care unit in which to store the blood. Not applicable: Where emergency blood is not kept in the unit

Score	Comment

21.2.2.2.8.2 Administration of blood is recorded.

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

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

Score	Comment

Unit 1 Healthcare record 1

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

7. User's vital signs recorded and documented prior to administration.		
8. User's vital signs recorded and documented during administration of blood		
9. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were transfused, any reaction, and observations.		

Unit 2 Healthcare record 2

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

Unit 3 Healthcare record 3

Aspects	Score	Comment
1. Clinical indication for blood or blood products		
2. Type of blood product required.		
3. Informed consent		

4. Confirmation of type of blood product prior to administration		
5. User's documentation checked prior to administration. Explanatory note: The unit of blood has a tag that has user details, donor details, blood type, date when blood was donated, rhesus factor, and expiry date. These details must be cross-checked with the user information prior to administration.		
6. Confirmation of user's identity user prior to administration.		
7. User's vital signs recorded and documented prior to administration.		
8. User's vital signs recorded and documented during administration of blood		
9. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were transfused, any reaction, and observations.		

Criterion 21.2.2.2.9 7 Systems must be in place to facilitate user identification.

21.2.2.2.9.1 All users wear identity bands or any other means of identification.

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

Select three users in the ward and verify whether they are wearing identity bands or have any identification. Score 1 if users are wearing identification and 0 if not.

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

Criterion 21.2.2.2.10 7 Communication during user handover must be standardised to advance user safety.

21.2.2.2.10.1 User safety checks are applied to all users transferred to theatre

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

Select the health records of three users who are transferred to theatre at the time of inspection. Verify whether the aspects listed below were documented. Score 1 if the aspect was documented and 0 if not documented

Score	Comment

Unit 1 Healthcare record 1

Aspects	Score	Comment
1. User's name Explanatory note: Users must be encouraged to participate in this identification process. This may include, but need not be limited to, users volunteering their personal information for confirmation.		
2. Date of birth		
3. Procedure to be conducted, including site/side (where relevant)		
4. Results of investigations available in health record (if any)		
5. Consent available in health record and completed correctly.		
6. Time of last oral intake		
7. Medicines administered and time of administration.		
8. Potential safety risks (if any)		
9. Special care needs (if any)		
10. Allergies		
11. Name and signature of health care provider who received user.		
12. Name and signature of health care provider who handed user over to theatre.		

Unit 2 Healthcare record 2

Aspects	Score	Comment
1. User's name Explanatory note: Users must be encouraged to participate in this identification process. This may include, but need not be limited to, users volunteering their personal information for confirmation.		
2. Date of birth		
3. Procedure to be conducted, including site/side (where relevant)		
4. Results of investigations available in health record (if any)		
5. Consent available in health record and completed correctly.		
6. Time of last oral intake		
7. Medicines administered and time of administration.		
8. Potential safety risks (if any)		
9. Special care needs (if any)		
10. Allergies		
11. Name and signature of health care provider who received user.		
12. Name and signature of health care provider who handed user over to theatre.		

Unit 3 Healthcare record 3

Aspects	Score	Comment
1. User's name Explanatory note: Users must be encouraged to participate in this identification process. This may include, but need not be limited to, users volunteering their personal information for confirmation.		
2. Date of birth		
3. Procedure to be conducted, including site/side (where relevant)		

4. Results of investigations available in health record (if any)		
5. Consent available in health record and completed correctly.		
6. Time of last oral intake		
7. Medicines administered and time of administration.		
8. Potential safety risks (if any)		
9. Special care needs (if any)		
10. Allergies		
11. Name and signature of health care provider who received user.		
12. Name and signature of health care provider who handed user over to theatre.		

21.2.2.2.10.2 Users are monitored in the recovery room until they are transferred to units.

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

Select the health records of three users in the recovery room. Verify whether the aspects listed below are being monitored. Score 1 if the aspect is compliant is 0 if not compliant

Score	Comment

Unit 1 User health record 1

Aspects	Score	Comment
1. Blood pressure		
2. Pulse		
3. Temperature		
4. Saturation		
5. Respiration rate		
6. Blood loss (where applicable)		
7. Urine output (where applicable)		

8. Level of consciousness		
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Unit 2 User health record 2

Aspects	Score	Comment
1. Blood pressure		
2. Pulse		
3. Temperature		
4. Saturation		
5. Respiration rate		
6. Blood loss (where applicable)		
7. Urine output (where applicable)		
8. Level of consciousness		

Unit 3 User health record 3

Aspects	Score	Comment
1. Blood pressure		
2. Pulse		
3. Temperature		
4. Saturation		
5. Respiration rate		
6. Blood loss (where applicable)		
7. Urine output (where applicable)		
8. Level of consciousness		

21.2.2.2.10.3 User safety checks are conducted for users undergoing surgery.

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

Select peri-operative documents of three users who have had surgery at the time of inspection. Verify whether the aspects listed below have been checked and documented. Score 1 if the aspect is compliant and 0 if not compliant. NB: The information could be documented in a checklist or as notes made in the user health record.

Score	Comment

Unit 1 Healthcare record 1

Aspects	Score	Comment
Before induction of anaesthesia:		
1. User identity confirmed		
2. User procedure and site confirmed		
3. Site marked		
4. Precautions taken to maintain skin integrity		
5. Baseline vital signs – pre-anaesthesia		
6. Anaesthesia safety check completed		
7. Pulse oximeter on user and functioning		
8. Allergies documented (if any)		
9. Antibiotic prophylaxis given (where applicable)		
Before user leaves the operating room:		
10. Name of procedure performed is confirmed.		
11. Instrument, sponge and needle were counted and are correct		
12. Specimen/s labelled (where applicable)		

Unit 2 Healthcare record 2

Aspects	Score	Comment
Before induction of anaesthesia:		
1. User identity confirmed		
2. User procedure and site confirmed		
3. Site marked		

4. Precautions taken to maintain skin integrity		
5. Baseline vital signs – pre-anaesthesia		
6. Anaesthesia safety check completed		
7. Pulse oximeter on user and functioning		
8. Allergies documented (if any)		
9. Antibiotic prophylaxis given (where applicable)		
Before user leaves the operating room:		
10. Name of procedure performed is confirmed.		
11. Instrument, sponge and needle were counted and are correct		
12. Specimen/s labelled (where applicable)		

Unit 3 Healthcare record 3

Aspects	Score	Comment
Before induction of anaesthesia:		
1. User identity confirmed		
2. User procedure and site confirmed		
3. Site marked		
4. Precautions taken to maintain skin integrity		
5. Baseline vital signs – pre-anaesthesia		
6. Anaesthesia safety check completed		
7. Pulse oximeter on user and functioning		
8. Allergies documented (if any)		

9. Antibiotic prophylaxis given (where applicable)		
Before user leaves the operating room:		
10. Name of procedure performed is confirmed.		
11. Instrument, sponge and needle were counted and are correct		
12. Specimen/s labelled (where applicable)		

Criterion 21.2.2.2.11 7 The management of emergency resuscitations must be guided and monitored to improve user outcomes.

21.2.2.2.11.1 Emergency trolley is stocked with medicines and equipment.

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

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

Score	Comment	
Aspects	Score	Comment
Devices to open and protect airway		
1. Laryngoscope handle		
2. Curved blade for laryngoscope size 2 (adult)		
3. Curved blade for laryngoscope size 3 (adult)		
4. Curved blade for laryngoscope size 4 (adult)		
5. Straight blade for laryngoscope size 1 (paediatric)		
6. Endotracheal tubes - uncuffed size 2.5mm (paediatric)		
7. Endotracheal tubes - uncuffed sizes 3mm (paediatric)		
8. Endotracheal tubes - uncuffed size 3.5mm (paediatric)		

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

34. Nasopharyngeal airway size 5		
35. Plaster or ties for endotracheal tubes		
36. Xylocaine spray or Lubricating gel		
Equipment for difficult Intubation		
37. Introducer		
38. Laryngeal mask airway size 1		
39. Laryngeal mask airway size 2		
40. Laryngeal mask airway size 3		
41. Laryngeal mask airway size 4		
42. Laryngeal mask airway size 5		
43. Magill forceps (adult)		
44. Magill forceps (paediatric)		
Devices to deliver oxygen/ventilate users		
45. Manual resuscitator device or bag and valve mask (adult)		
46. Manual resuscitator device or bag and valve mask (paediatric)		
47. Oxygen masks		
48. Oxygen supply – ready for use (portable). Explanatory note: An oxygen cylinder fitted with regulator indicating cylinder pressure and adjustable flowrate must be available. Oxygen levels must not be below the minimum level indicated in the oxygen cylinder gauge		
Equipment to diagnose and treat cardiac dysrhythmias		
49. Automated external defibrillator (AED) or defibrillator with pads, paddles and electrodes		
50. Cardiac arrest board		
Devices to gain intravascular access		
51. Intravenous administration sets		
52. IV Cannula		
Medicine		
53. Emergency medicines according to local protocol are available and have not expired.		

21.2.2.2.11.2 Medical supplies and equipment for resuscitation are available.

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

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

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

21. Nasogastric tubes size 12 (adult / paediatric)		
22. Nasogastric tubes size 14 (adult)		
23. Nasogastric tubes size 16 (adult)		
24. Nasogastric tubes size 18 (adult)		
25. Suction catheter 6F (neonate)		
26. Suction catheter 8F (paediatric)		
27. Suction catheter 10F (paediatric)		
28. Suction catheter 12F (adult)		
29. Suction catheter 14F (adult)		
30. Suction devices (portable)		
31. Yankhauer suction		
32. Resuscitation algorithm		

21.2.2.2.11.3 The emergency trolley in the unit is checked.

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

This must be done at the change of each shift and after each use. The checks must be documented in a book kept with the trolley. Check records from the previous three months. Not applicable: Never

Score	Comment

Criterion 21.2.2.2.12 7 Medical equipment management systems must be in place to minimise the risk of patient safety incidents related to medical equipment.

21.2.2.2.12.1 Health care personnel receive training in the use of medical equipment

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

This includes, but is not limited to, orientation records, in-service training or training by the supplier of new equipment. Training must be provided for equipment that health care personnel will be required to use in the course of performing their duties. Request records from the previous 12 months Not applicable: Where there was no new equipment introduced in the past 12 months.

Score	Comment

Sub Domain 21.2.3 8 Infection prevention and control programmes

Standard 21.2.3.1 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 21.2.3.1.1 8(2)(a) The health establishment must ensure that there are hand washing facilities in every service area.

21.2.3.1.1.1 Hand washing facilities are available in the scrub/gowning room.

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

Inspect the hand washing facilities for three theatres to verify whether the items listed below are available. Score 1 if the item is available and 0 if not available

Score	Comment

Unit 1 Scrub/gowning room 1

Aspects	Score	Comment
1. Splash-limiting stainless-steel basins		
2. Solid, waterproof splash-back panel for sink		
3. Non-touch taps (elbow/foot operated or automated)		
4. Taps high enough to allow hands and forearms to be washed in an upright position under tap		
5. Hot and cold running water		
6. Wall mounted soap dispenser		
7. Antimicrobial liquid soap in non-touch container (elbow operated or automated)		
8. Alcohol based hand rub. Explanatory note: Item does not necessarily have to be in the hand washing basin/facility area.		
9. Wall mounted clock		
10. Wall-mounted paper towel dispenser		
11. Bins		

Unit 2 Scrub/gowning room 2

Aspects	Score	Comment
1. Splash-limiting stainless-steel basins		
2. Solid, waterproof splash-back panel for sink		
3. Non-touch taps (elbow/foot operated or automated)		
4. Taps high enough to allow hands and forearms to be washed in an upright position under tap		
5. Hot and cold running water		
6. Wall mounted soap dispenser		
7. Antimicrobial liquid soap in non-touch container (elbow operated or automated)		
8. Alcohol based hand rub. Explanatory note: Item does not necessarily have to be in the hand washing basin/facility area.		
9. Wall mounted clock		
10. Wall-mounted paper towel dispenser		
11. Bins		

21.2.3.1.1.2 Hand washing facilities are available

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

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

Score	Comment

Unit 1 Personnel changing areas

Aspects	Score	Comment
1. Hand washing basin. Explanatory note: The basin must not be blocked, broken, have deep cracks causing leaking of water, or have hairline cracks.		

2. Poster on correct hand washing technique		
3. Poster on correct use of alcohol- based hand rub. Explanatory note: Posters must be placed at strategic places and above alcohol dispensers in the health establishment as stipulated in page 33 of Practical Manual for Implementation of IPC Strategic framework March 2020		
4. Taps. Explanatory note: Taps must be elbow-operated in user care areas, but not in toilets		
5. Running water		
6. Plain liquid soap		
7. Wall mounted soap dispenser		
8. Paper towels		
9. Paper towel dispenser		
10. Bin		
11. Alcohol based hand rub. Explanatory note: Item does not necessarily have to be in the hand washing basin/facility area.		

Unit 2 Anaesthetic workroom

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

9. Paper towel dispenser		
10. Bin		
11. Alcohol based hand rub. Explanatory note: Item does not necessarily have to be in the hand washing basin/facility area.		

Unit 3 Instrument cleaning area

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

Criterion 21.2.3.1.2 8(2)(c) The health establishment must ensure there is clean linen to meet the needs of users.

21.2.3.1.2.1 The theatre manager has determined the linen requirements for theatre

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

It is necessary to determine the linen requirements for the theatre, to ensure sufficient linen is available. Sufficient linen must be available for surgical procedures and for recovery rooms, including blankets to keep users warm. Not applicable: Never

Score	Comment

21.2.3.1.2.2 Linen rooms or storage cupboards are adequately stocked and well organised

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

Inspect the area where linen is stored to determine whether the aspects listed below are compliant. Score 1 if the aspect is compliant and 0 if not compliant. Score 0 if the theatre does not have a designated area with a door that can be kept closed

Score	Comment	
Aspects	Score	Comment
1. Designated area for storage of linen		
2. Area is locked.		
3. Linen is stored on shelves.		
4. Area is well organised.		
5. Clean linen is available		

Criterion 21.2.3.1.3 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.

21.2.3.1.3.1 Personal protective equipment is worn

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

Using the checklist below, verify whether protective clothing and equipment are worn. Score 1 if the items are worn and 0 if not worn. Score NA where at the time of the inspection, health care personnel are not working in a situation in which they are required to wear protective clothing

Score	Comment

Unit 1 Personnel changing areas: Available

Aspects	Score	Comment
1. Disposable gowns or aprons		
2. Protective face shields or goggles		
3. Face masks		

4. N95 or KN95 or FFP2 respirators		
5. Caps		
6. Footwear		

Unit 2 Anaesthetic workroom: Worn

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

Unit 3 Theatre: Worn

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

Unit 4 Cleaner: Worn

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

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

Sub Domain 21.2.4 9 Waste management

Standard 21.2.4.1 9(1) The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

Criterion 21.2.4.1.1 9(2)(a) The health establishment must have appropriate waste containers at the point of waste generation.

21.2.4.1.1.1 The theatre department has appropriate containers for the disposal of all types of waste.

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

Verify whether the waste containers listed below are available. Health care risk 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 theatre department, score NA.

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

Criterion 21.2.4.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.

21.2.4.1.2.1 Sharps are safely managed and discarded.

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

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

Score	Comment

Unit 1 Clinical area 1

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps transported in receiver when sharps containers not in immediate vicinity of procedure. Explanatory note: This is applicable in situations where procedures are carried out in areas where it is not practical to have a sharps container available. Score NA if this is not observed during the inspection.		
3. Sharps containers have correctly fitting lids.		
4. 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 sharp's container.		
5. Syringes with attached needles are discarded in their entirety.		

Unit 2 Clinical area 2

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps transported in receiver when sharps containers not in immediate vicinity of procedure. Explanatory note: This is applicable in situations where procedures are carried out in areas where it is not practical to have a sharps container available. Score NA if this is not observed during the inspection.		
3. Sharps containers have correctly fitting lids.		
4. 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 sharp's container.		
5. Syringes with attached needles are discarded in their entirety.		

Unit 3 Clinical area 3

Aspects	Score	Comment
1. Sharps containers available at site of use		
2. Sharps transported in receiver when sharps containers not in immediate vicinity of procedure. Explanatory note: This is applicable in situations where procedures are carried out in areas where it is not practical to have a sharps container available. Score NA if this is not observed during the inspection.		

3. Sharps containers have correctly fitting lids.		
4. 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 sharp's container.		
5. Syringes with attached needles are discarded in their entirety.		

21.2.4.1.2.2 A register for all anatomical waste indicating the date of placement and date of removal for disposal is available

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

A register must be available for the identification of anatomical waste to prevent loss of body parts.

Entries made in the register must be complete. Not applicable: Never

Score	Comment

21.2.4.1.2.3 There is a temporary healthcare risk waste storage area.

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

In all areas where waste is held for collection and removal to the central storage area, a designated area for temporary storage of waste must be available. Some health establishments will have a purpose-built temporary waste storage area, others will utilise a specific area within the available space. Score 1 if the aspect is compliant and 0 if not compliant or where there is no designated area.

Score	Comment

Aspects	Score	Comment
1. Space available to store waste containers		
2. Area is well ventilated		
3. Area is well lit		
4. Area has impervious floor surfaces (waterproof or resistant, not cracked)		
5. Refrigerator maintained at -2 degrees Celsius. Explanatory note: Score NA where the refrigerator for waste is not kept in the unit		

6. All waste in refrigerator is appropriately containerised. Explanatory note: Score NA where the refrigerator for waste is not kept in the unit.		
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Sub Domain 21.2.5 21 Adverse events

Standard 21.2.5.1 21(1) The health establishment must have a system to monitor and report all adverse events.

Criterion 21.2.5.1.1 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.

21.2.5.1.1.1 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 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 3

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

Domain 21.3 CLINICAL SUPPORT SERVICES

Sub Domain 21.3.1 10 Medicines and medical supplies

Standard 21.3.1.1 10(1) The health establishment must comply with the provisions of the Pharmacy Act, 1974 and the Medicines and Related Substances Act, 1965.

Criterion 21.3.1.1.1 10(2)(a) The health establishment must implement and maintain a stock control system for medicine and medical supplies.

21.3.1.1.1.1 The stock control system shows minimum and maximum levels and/or reorder levels for medicine

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

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

Score	Comment

21.3.1.1.1.2 Medical supplies stock levels on the shelves correspond with 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 compliant and 0 if not compliant.

Score	Comment

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

21.3.1.1.1.3 The entries in the schedule 5 and/or 6 drug register are complete and correct

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

All columns in the provincially provided registers must be completed comprehensively. Any omitted information noted during the review of the register will receive a non-compliant score. The inspector must confirm that all sections of the register have been completed correctly.

Score	Comment

21.3.1.1.1.4 The schedule 5 and/or 6 medicines held in the theatre correspond with the quantities documented in the drug register

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

Select three medicines from the schedule 5 and 6 medicine cupboard and verify whether the quantity available corresponds with the balance recorded in the register. Score 1 if there is correspondence 0 if not. Score not applicable where schedule 5 and 6 medicines are not held in the ward.

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

21.3.1.1.1.5 The stock control system shows minimum and maximum levels and/or reorder levels for medical supplies

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

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

Score	Comment

21.3.1.1.1.6 Physical stock of medicine corresponds with 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. Score 1 if compliant and 0 if not compliant.

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

Criterion 21.3.1.1.2 10(2)(b) The health establishment must ensure the availability of medicines and medical supplies for the delivery of services.

21.3.1.1.2.1 Basic medical supplies (consumables) are available

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

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

Score	Comment	
Aspects	Score	Comment
1. Intravenous administration set 20 drops/ml.		
2. Intravenous administration set 60 drops/ml.		
3. Blood administration set 10 drops/ml.		
4. Urinary (Foley's) catheter silicone/latex 10f		
5. Urinary (Foley's) catheter silicone/latex 12f		
6. Urinary (Foley's) catheter silicone/latex 14f		
7. Urinary (Foley's) catheter silicone/latex 18f		
8. Urine drainage bag		

9. Simple face mask or reservoir mask or nasal cannula (prongs) for oxygen, adults		
10. Face mask for nebuliser or face mask with nebuliser chamber (adult)		
11. Nasogastric feeding tube 600mm fg10		
12. Nasogastric feeding tube 1000mm fg12		
13. Nasogastric feeding tube 1000mm fg14		
14. Nasogastric feeding tube 600mm fg16		
15. Nasogastric feeding tube 600mm fg18		
16. Disposable aprons		
17. Disposable eye patches		
18. HB strips/slides		
19. Ultrasound gel medium viscosity (where doppler or ultrasound machines are available)		
20. Gloves exam non-sterile large /box		
21. Gloves exam non-sterile medium /box		
22. Gloves exam non-sterile small /box		
23. Gloves surgical sterile size 6 or 6.5		
24. Gloves surgical sterile size 7 or 7.5		
25. Gloves surgical sterile size 8		
26. Facemasks		
27. Particulate respirator (e.g., N95 or KN95 or FFP2 respirators)		
28. Goggles, glasses protective or face shield		

29. Gown, isolation (Single use, disposable, made of nonwoven material)		
30. Intravenous cannula 18g green/box		
31. Intravenous cannula 20g pink/box		
32. Intravenous cannula 22g/blue/box		
33. Intravenous cannula 24g yellow/box		
34. Needles: 18 (pink) or 20 (yellow)/box		
35. Needles: 21 (green)/box		
36. Syringes 3-part 2ml/box		
37. Syringes 3-part 5ml/box		
38. Syringes 3-part 10 or 20ml/box		
39. Insulin syringe with needle/box		
40. Basic disposable dressing pack (should contain at the very least cotton wool balls, swabs, disposable drape)		
41. Gauze swabs plain non-sterile 100x100x8ply (pack)		
42. Gauze paraffin 100x100 (box)		
43. Bandage crepe		
44. Adhesive micro-porous surgical tape 24/25mm or 48/50mm		
45. Gauze absorbent grade 1 burn (pack)		
46. 70% isopropyl alcohol prep pads 24x30 1ply or 2 ply (box)		
47. Plaster roll 2.5cm or 5cm or 7.5cm or 10 cm		
48. Cotton wool balls 1g (500s)		

49. Stockinette 100mm or 150mm (roll)		
50. Blade stitch cutter sterile/pack		

21.3.1.1.2.2 Medicines issued from the emergency cupboard are documented

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

All medicines taken from the emergency cupboard must be documented, including the date of issue, the health care provider taking the medicine and the user for whom the medicine is required. This information must be kept in the emergency cupboard.

Not applicable: Where the unit does not use an emergency cupboard

Score	Comment

Sub Domain 21.3.3 12 Blood services

Standard 21.3.3.1 12(1) Hospitals and CHCs must ensure that users have access to blood and blood products when required.

Criterion 21.3.3.1.1 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.

21.3.3.1.1.1 All adverse blood reactions are reported to relevant forum.

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 have occurred

Score	Comment

21.3.3.1.1.2 Action is taken where adverse blood reactions were reported

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

Documented evidence reflecting the actions that were taken following the investigation must be available. All necessary actions identified during the investigation to avoid similar incidents (i.e., where the adverse blood reaction was avoidable) must be implemented. Not applicable: Where no adverse blood reactions were reported

Score	Comment

Sub Domain 21.3.2 13 Medical equipment

Standard 21.3.2.1 13(1) Health establishments must ensure that the medical equipment is available and functional in compliance with the law.

Criterion 21.3.2.1.1 13(2)(b) The health establishment must ensure that equipment is in accordance with the essential equipment list in all clinical service areas.

21.3.2.1.1.1 Specialist theatres are equipped in accordance with their inventory lists

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

Request the inventory list for the specialist theatre. Verify that all equipment listed is available and functional. Not applicable:

Where there are no specialist theatres

Score	Comment

21.3.2.1.1.2 Functional essential equipment is available

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

Inspect in the operating theatre department to verify whether the equipment listed below is available and functional. Score 1 if the equipment is available and functional and 0 if not available or not functional

Score	Comment	
Aspects	Score	Comment
Theatre equipment:		
1. Anaesthesia machine		
2. Anaesthesia trolley, mobile		
3. Anaesthesia ventilator with hypoxic guard rota meter		
4. Anaesthetic breathing circuits, circle (adult)		
5. Anaesthetic breathing circuits, T-piece (paediatric)		
6. Blood warmer		
7. Capnography machine. Explanatory note: Capnography is the monitoring of the concentration or partial pressure of carbon dioxide (CO ₂) in the respiratory gases.		
8. Drip stand, mobile		
9. Laryngoscope – two handles and complete set of blades (adult and paediatric)		
10. Forced air warmers.		

11. Haemoglobinometer		
12. Nerve stimulator		
13. Nitrous oxide concentrator		
14. Oxygen concentrator		
15. Oxygen flow meter		
16. Oxygen regulator		
17. Oxygen cylinder stand		
18. Oxygen set, with humidifier, ready for use		
19. Rapid infusers		
20. Pulmonary resuscitator, manual, masks all sizes (adult)		
21. Pulmonary resuscitator, manual, masks all sizes (infant)		
22. Sharps containers		
23. Vaporisers, halothane, isoflurane and sevoflurane		
24. Vitals monitor, suitable for anaesthetic monitoring, including electrocardiograph (ECG), non-invasive blood pressure (NIBP), temperature and saturation monitors.		
25. Bowl or wash basin on stand		
26. Bucket, kickabout		
27. Lockable cabinet for medicine		
28. Cart with dressings, large		
29. Cart with instruments, large		
30. Mayo cart with instruments		

31. Diagnostic set, portable, battery operated		
32. Electrosurgical unit, general purpose		
33. Infusion pump		
34. Mobile surgical light, with battery backup		
35. Nerve stimulator		
36. Pendant surgical light, ceiling mounted		
37. Liquid warmer		
38. Patella hammer		
39. Surgeon's stool, adjustable with anti-static cushion		
40. Suction unit, 1ℓ bottle or disposable bag, wall outlet		
41. Emergency suction unit, battery or foot operated		
42. Mobile suction unit, 1 x 2ℓ bottle or disposable bag, electrical		
43. Ring cutter complete with blades		
44. Theatre light, ceiling mounted		
45. Temperature meter		
46. Theatre table, complete with mattress, removable arm rest and lithotomy poles, hydraulic		
47. Tourniquet		
48. Scale for swab weighing		
49. Apron rack for X-ray room		
50. X-ray aprons		

51. C-arm		
52. Laparoscopy system, complete, equipment and instrumentation		
53. Sterilising unit, steam, tabletop, non-vacuum		
54. Medicine refrigerator		
Recovery room:		
55. Monitor, electrocardiograph (ECG), non-invasive blood pressure (NIBP) machine, oxygen saturation (SaO2) machine		
56. Defibrillator, complete, mounted on mobile trolley, adult/paediatric paddles		
57. Diagnostic set, portable, battery operated		
58. Difficult airway trolley		
59. Glucometer		
60. Haemoglobinometer		
61. Instruments for removal of foreign bodies		
62. Drip stand, double hook		
63. Drip hanger, wall/ceiling mounted.		
64. Oxygen concentrator		
65. Oxygen cylinder with regulator ready for use		
66. Oxygen cylinder stand		
67. Oxygen flow meter		
68. Patella hammer		
69. Refrigerator and compressor		
70. Resuscitator, manual, masks all sizes (infant)		
71. Resuscitator, manual, masks all sizes (adult)		
72. Nebuliser (Explanatory note: This can be a nebulising machine or a nebuliser mask connected to oxygen point)		
73. Stethoscope		
74. Mobile hospital stretcher with oxygen and drip rod		

75. Emergency suction unit, foot operated, portable		
76. Surgical suction unit, two bottles, medium		
77. Electronic thermometer		
78. Sterile light handles		
Resuscitation equipment		
79. Defibrillator		
80. Introducer		
81. Mobile or portable suction apparatus		
82. Resuscitator, pulmonary, manual, complete (adult)		
83. Resuscitator, pulmonary, manual, complete (paediatric)		
84. Specialised endotracheal (ET) tubes		
85. Standard difficult airway set.		

Domain 21.4 GOVERNANCE AND HUMAN RESOURCES

Sub Domain 21.4.1 20 Occupational health and safety

Standard 21.4.1.1 20(1) The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

Criterion 21.4.1.1.1 20(2)(b) Awareness of safety and security issues must be promoted

21.4.1.1.1.1 The emergency evacuation plan is prominently displayed

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

The evacuation plan must include but is not limited to route/directions to be followed during evacuation, emergency exits and assembly point(s). This must be visibly displayed. Not applicable:

Never

Score	Comment

21.4.1.1.1.2 The healthcare personnel are familiar with the emergency evacuation procedure

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

Interview three health care personnel to establish whether they are able to explain the evacuation procedure as illustrated in the evacuation plan. Score 1 if they explain the procedure as illustrated in the evacuation plan and 0 if not. Where no evacuation plan is available, this measure must be scored 0.

Score	Comment

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

21.4.1.1.1.3 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

Domain 21.5 FACILITIES AND INFRASTRUCTURE

Sub Domain 21.5.1 14 Management of buildings and grounds

Standard 21.5.1.1 14(1) The health establishment and their grounds must meet the requirements of the building regulations.

Criterion 21.5.1.1.1 14(2)(b) The health establishment must as appropriate for the type of buildings and grounds of the establishment have a maintenance plan for buildings and the grounds.

21.5.1.1.1.1 No obvious safety hazards are observed during the visit

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

Inspect the surroundings for maintenance-related safety hazards in the unit. This will include but is not limited to loose electrical wiring, collapsing ceiling, roof or doors and any other type of safety hazards that represent a risk to the health and safety of personnel, users and visitors Not applicable: Never

Score	Comment

Sub Domain 21.5.2 15 Engineering services

Standard 21.5.2.1 15(1) The health establishment must ensure that engineering services are in place.

Criterion 21.5.2.1.1 15(2) The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.

21.5.2.1.1.1 The theatre has a functional system to supply piped oxygen

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

Verify whether piped oxygen is available and functional in all theatres and recovery areas. Not applicable: Never

Score	Comment

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21.5.2.1.1.2 A functional system is in place to supply piped suction

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

Verify whether piped suction is available and functional in all theatres and recovery areas. 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 District Hospitals.

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It is hereby certified that the Regulatory District Hospital 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 Siphwe Mndaweni

Signature:



Chief Executive Officer: OHSC

Date:

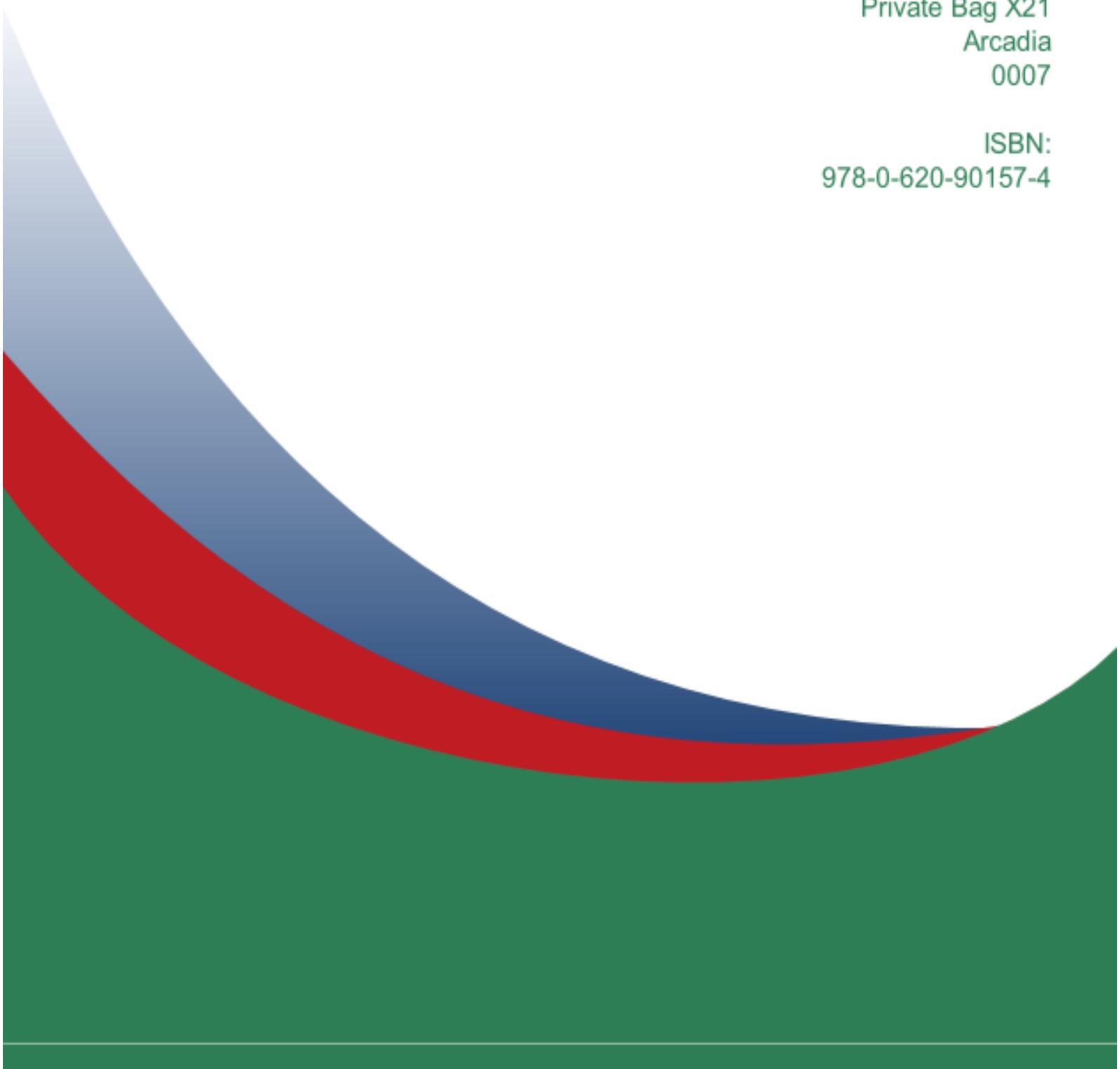
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A decorative graphic at the bottom of the page consists of three curved, overlapping bands. The top band is light blue, the middle band is red, and the bottom band is green. The bands curve from the left side towards the right, creating a sense of movement and depth.