Facility:

Date:

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

16 Paediatric Ward

Domain 16.1 USER RIGHTS

Sub Domain 16.1.1 ***4*** User information

Standard 16.1.1.1 ***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 16.1.1.1.1 ***4(2)(a)(iii)*** **The health establishment must provide users with information relating to visiting hours where relevant.**

16.1.1.1.1.1 Visiting hours are indicated at the entrance to the unit

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

Visiting hours must be displayed at the entrance of the unit. Not applicable: Where the visiting hours in the ward are the same as the general visiting hours displayed at the entrance to the health establishment.

Score	Comment

Criterion 16.1.1.1.2 ***4(2)(a)(iv)*** **The health establishment must provide users with information relating to the complaints, compliments and suggestions management system.**

16.1.1.1.2.1 A complaints toolkit is available

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

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

Score	Comment

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

Domain 16.2 CLINICAL GOVERNANCE AND CLINICAL CARE

Sub Domain 16.2.1 ***6*** User health records and management

Standard 16.2.1.1 ***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 16.2.1.1.1 ***6(2)(b)*** **The health establishment must ensure confidentiality of health records.**

16.2.1.1.1.1 Confidentiality of health records is maintained.

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

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

Score	Comment

Standard 16.2.1.2 ***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 16.2.1.2.1 ***6(4)(b)*** **The health establishment must record information relating to the examination and health care interventions of users.**

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

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

Request the records of three users who have been admitted in the unit for at least three days at the time of inspection and verify compliance with statutory requirements for record keeping. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment

Unit 1 Healthcare record 1

Aspects	Score	Comment
1. Vital signs		
2. Physical examination findings		
3. Investigations requested (where applicable)		
4. Results of investigations requested.		
5. Provisional diagnosis		
6. Treatment plan		
7. Nursing care plan		
8. Date of each entry		
9. Time of each entry		
10. Each entry signed by health care provider making entry.		
11. Designation of signatory		

12. Daily day-time progress notes		
13. Daily night-time progress notes		
14. Medicines administered (signed, dated, time of administration and dose recorded)		

Unit 2 Healthcare record 2

Aspects	**Score**	**Comment**
1. Vital signs		
2. Physical examination findings		
3. Investigations requested (where applicable)		
4. Results of investigations requested.		
5. Provisional diagnosis		
6. Treatment plan		
7. Nursing care plan		
8. Date of each entry		
9. Time of each entry		
10. Each entry signed by health care provider making entry.		
11. Designation of signatory		
12. Daily day-time progress notes		
13. Daily night-time progress notes		
14. Medicines administered (signed, dated, time of administration and dose recorded)		

Unit 3 Healthcare record 3

Aspects	**Score**	**Comment**
1. Vital signs		
2. Physical examination findings		
3. Investigations requested (where applicable)		
4. Results of investigations requested.		
5. Provisional diagnosis		
6. Treatment plan		

7. Nursing care plan		
8. Date of each entry		
9. Time of each entry		
10. Each entry signed by health care provider making entry.		
11. Designation of signatory		
12. Daily day-time progress notes		
13. Daily night-time progress notes		
14. Medicines administered (signed, dated, time of administration and dose recorded)		

Standard 16.2.1.3 ***6(5)*** The health establishment must have a formal process to be followed when obtaining informed consent from the user.

Criterion 16.2.1.3.1 ***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).**

16.2.1.3.1.1 Health care providers correctly complete forms used for informed consent

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

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

Score	Comment

Unit 1 Healthcare record 1

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

6. Consent form is signed by health care provider who will perform procedure or delegated person.		
7. Consent form is dated.		
8. All entries on form are legible. *Reference: • https://www.hpcsa.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf*		

Unit 2 Healthcare record 2

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

Unit 3 Healthcare record 3

Aspects	**Score**	**Comment**
1. Signatory providing consent was legally entitled to give informed consent. Explanatory note: As described in the National Health Act, this may be a person authorised by the court (e.g. a curator), or in order of priority, the user's spouse, partner, parent, grandparent, major child, or brother or sister. In an emergency, lifesaving procedures may be authorised by the health care provider, if “the treatment is limited to what is immediately necessary to save life or avoid significant deterioration in the user's health” HPCSA, Booklet 4. In the case of a child, the age to give consent is over 12 years in accordance with sections 129(2)(a)(b) and 129(3)(a)(b)(c).		

2. Exact nature of operation/procedure or treatment, including site and side, where relevant		
3. User’s full names appear on consent form.		
4. Age of user		
5. Consent form is signed by user, his/her legal guardian (for minors) or person legally responsible for the user (adults with diminished mental capacity)		
6. Consent form is signed by health care provider who will perform procedure or delegated person.		
7. Consent form is dated.		
8. All entries on form are legible. *Reference: • https://www.hpcsa.co.za/Uploads/Professional_Practice/Ethics_Booklet.pdf*		

Standard 16.2.1.4 ***6(6)*** The health establishment must issue a discharge report to users in accordance with section 10 of the Act.

Criterion 16.2.1.4.1 ***6*** **Comprehensive discharge reports must be provided to users to ensure continuity of care.**

16.2.1.4.1.1 The health records of discharged users include a discharge report

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

Select the health records of three users who have been discharged in the previous week and verify whether the discharge report contains the aspects listed below. Score 1 if the aspect is present and 0 if not present. NB: Score Not applicable for aspects not relevant to discharge records under review.

Score	Comment

Unit 1 Healthcare record 1

Aspects	Score	Comment
1. Name and surname of user		
2. Date of birth		
3. Identity number or passport number		
4. Date of admission		
5. Date of discharge		
6. Provisional diagnosis/reason for admission		
7. Name of ward to which user was admitted (this may be a name or alphanumeric details)		
8. Final diagnosis on discharge		

9. Medicine and treatment given (including procedures carried out during admission)		
10. Details of referrals and/or follow-up appointments		
11. Relevant health education given.		
12. Signature of health care provider completing report.		

Unit 2 Healthcare record 2

Aspects	**Score**	**Comment**
1. Name and surname of user		
2. Date of birth		
3. Identity number or passport number		
4. Date of admission		
5. Date of discharge		
6. Provisional diagnosis/reason for admission		
7. Name of ward to which user was admitted (this may be a name or alphanumeric details)		
8. Final diagnosis on discharge		
9. Medicine and treatment given (including procedures carried out during admission)		
10. Details of referrals and/or follow-up appointments		
11. Relevant health education given.		
12. Signature of health care provider completing report.		

Unit 3 Healthcare record 3

Aspects	**Score**	**Comment**
1. Name and surname of user		
2. Date of birth		
3. Identity number or passport number		
4. Date of admission		
5. Date of discharge		
6. Provisional diagnosis/reason for admission		
7. Name of ward to which user was admitted (this may be a name or alphanumeric details)		

8. Final diagnosis on discharge		
9. Medicine and treatment given (including procedures carried out during admission)		
10. Details of referrals and/or follow-up appointments		
11. Relevant health education given.		
12. Signature of health care provider completing report.		

Sub Domain 16.2.2 ***7*** Clinical management

Standard 16.2.2.1 ***7(1)*** The health establishment must establish and maintain clinical management systems, structures and procedures that give effect to national policies and guidelines.

Criterion 16.2.2.1.1 ***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.**

16.2.2.1.1.1 Health care personnel have been informed about clinical policies and guidelines

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

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

Score	Comment

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

Criterion 16.2.2.1.2 *7* Healthcare providers are informed on the health establishment and their specific responsibilities.

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

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

Documented evidence that personnel have been informed about the Standard Operating Procedures of the unit and health establishment must be available. This could include but is not limited to distribution lists which include personnel signatures to indicate they have read and understood the document (which must be dated and signed), proof of attendance at meetings where policies, guidelines ,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. Confidentiality of user health records		
2. Obtaining informed consent		
3. Identification of users		
4. Care of terminally ill users		
5. Conducting and acting on risk assessment of users		
6. Management of emergency resuscitations		
7. Management of users with contagious infections		
8. Standard precautions		
9. Accessing medicines after hours		
10. Reporting of adverse drug reactions		
11. Safe administration of blood		
12. Management of needle stick and sharps		

Standard 16.2.2.2 *7(2)* (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

Criterion 16.2.2.2.1 *7* The health establishment implements process to ensure environmental cleanliness.

16.2.2.2.1.1 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 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

16.2.2.2.1.2 The unit is observed to be clean.

Assessment type: Observation - **Risk rating:** Vital measure
Inspector to observe general cleanliness of the unit including but not limited to whether the unit is free of dirt, dust and stains. Not applicable: Never

Score	Comment

Criterion 16.2.2.2.2 *7* The health establishment must report information on health care-associated infections and notifiable diseases to the appropriate public health agencies.

16.2.2.2.2.1 National guidelines are followed for all notifiable medical conditions

Assessment type: Document - **Risk rating:** Vital measure
Assess whether the health establishment complies with the requirements for recording and reporting of notifiable diseases listed below. The evidence may be obtained electronically or manually. Score 1 if compliant and 0 if not compliant

Score	Comment

Aspects	Score	Comment
1. Notifiable medical conditions are to be recorded in the notification booklet or entered electronically into a web-based system. Explanatory note: The health establishment must be aware of the number of cases of different notifiable diseases presenting, to identify emerging trends as early as possible and report them to the relevant authority. Examine the register or electronic system to verify whether all diagnosed notifiable diseases have been recorded.		
2. All notifiable diseases are reported using the prescribed form or electronically in a web-based system.		
3. Proof of submission of completed forms is available. Explanatory note: Inspect submissions from the previous six months. The health establishment must produce evidence that the report has been sent to the public agency. Reporting may be done via either a paper-based or an electronic notification. Form(s) may be sent via SMS, WhatsApp, email or fax. For a paper-based notification, complete the NMC Case Notification Form and email to NMCsurveillanceReport@nicd.ac.za, or fax to 086 639 1638, or send via SMS or WhatsApp to the NMC hotline 072 621 3805. Send a copy to the NMC focal person at sub-district/district level (details given on the NMC Notification booklet cover page). The NMC focal person at health facility or sub-district level must ensure that the forms are captured electronically or via the NMC app; Download the NMC app from http://www.nicd.ac.za/notifiable-medical-conditions/ or via a cell phone app store.		

Criterion 16.2.2.2.3 *7* Implementation of standard operating procedures must be monitored.

16.2.2.2.3.1 The storage of sterile packs ensures the integrity of materials

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

The manner in which sterile packs are stored must prevent physical damage to packages, avoid exposure of packages to moisture. Packages should not be stored in a manner that will crush, bend, puncture, or compress them. Therefore, packs should not be wet or have water damage, they should be intact(not opened or torn). Not applicable: Never

Score	Comment

Criterion 16.2.2.2.4 *7* The management of used and soiled linen must meet infection prevention and control requirements.

16.2.2.2.4.1 The ward 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

16.2.2.2.4.2 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 16.2.2.2.5 *7* The health establishment must have a functional quality management system

16.2.2.2.5.1 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		

16.2.2.2.5.2 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 16.2.2.2.6 *7* Communication systems must be available and functional to facilitate adequate user care, and safety of user and health care personnel.

16.2.2.2.6.1 Functional, accessible telephones are available in the ward.

Assessment type: Observation - **Risk rating:** Essential measure
Maintaining and sustaining communication is essential for user safety. Telephones must be functional and available in the ward. Not applicable: Never

Score	Comment

Criterion 16.2.2.2.7 *7* Standardised procedures to identify and mitigate clinical risk must be implemented during the care of vulnerable users.

16.2.2.2.7.1 Safety precautions are in place to prevent harm to children and infants

Assessment type: Observation - **Risk rating:** Vital measure
Verify whether the following safety measures are in place in the ward. Score 1 if the safety measure is present and 0 if not present

Score	Comment

Aspects	Score	Comment
1. Covers on power points		
2. Barriers to prevent entry into potentially dangerous areas such as bathrooms or treatment rooms		
3. Cot sides		
4. Child-resistant cupboard doors and drawers		
5. Safe water temperature		

6. Doors with high handles		
7. Window safety catches Explanatory note: Windows must not open wide enough to allow children to climb out or fall out.		

Criterion 16.2.2.2.8 *7* The health establishment must implement systems to ensure that blood and blood products are available and administered safely.

16.2.2.2.8.1 Administration of blood is recorded.

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

Select the health records of three users admitted 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 completed and signed.		
4. Confirmation and checking of type of blood product prior to administration		
5. User’s documentation checked prior to administration. Explanatory note: The unit of blood has a tag that has user details, donor details, blood type, date when blood was donated, rhesus factor and expiry date. These details must be cross-checked with the user information prior to administration.		
6. Confirmation of user’s identity prior to administration		
7. User’s vital signs recorded and documented prior to administration.		
8. User’s vital signs recorded and documented during administration of blood		
9. User’s vital signs recorded and documented for 12 hours after administration		
10. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were administered, any reaction, and observations.		

Unit 2 Healthcare record 2

Aspects	Score	Comment

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

Unit 3 Healthcare record 3

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

9. User’s vital signs recorded and documented for 12 hours after administration		
10. Details of transfusion recorded. Explanatory note: This must include the start and finish time, how many units were administered, any reaction, and observations.		

Criterion 16.2.2.2.9 *7* Systems must be in place to facilitate user identification.

16.2.2.2.9.1 All users admitted in the health establishment wear identity bands or any other 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 16.2.2.2.10 *7* The management of emergency resuscitations must be guided and monitored to improve user outcomes.

16.2.2.2.10.1 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. Straight blade for laryngoscope size 1 (paediatric)		
3. Endotracheal tubes - uncuffed size 2.5mm (paediatric)		
4. Endotracheal tubes - uncuffed sizes 3mm (paediatric)		
5. Endotracheal tubes - uncuffed size 3.5mm (paediatric)		

6. Endotracheal tubes - uncuffed sizes 4.0mm (paediatric)		
7. Endotracheal tubes - uncuffed size 4.5mm (paediatric)		
8. Endotracheal tubes - uncuffed sizes 5.0mm (paediatric)		
9. Endotracheal tubes - uncuffed sizes 5.5mm (paediatric)		
10. Endotracheal tubes - cuffed sizes 3.0mm (paediatric)		
11. Endotracheal tubes - cuffed sizes 3.5mm (paediatric)		
12. Endotracheal tubes - cuffed sizes 4.0mm (paediatric)		
13. Endotracheal tubes - cuffed sizes 4.5mm (paediatric)		
14. Endotracheal tubes - cuffed sizes 5.0mm (paediatric)		
15. Endotracheal tubes - cuffed sizes 5.5mm (paediatric)		
16. Endotracheal tubes - cuffed sizes 6.0mm (paediatric)		
17. Endotracheal tubes - cuffed sizes 6.5mm (paediatric)		
18. Oropharyngeal airway size 0 (infant)		
19. Oropharyngeal airway size 1 (small child)		
20. Oropharyngeal airway size 2 (child)		
21. Nasopharyngeal airway size 3		
22. Nasopharyngeal airway size 4		
23. Plaster or ties for endotracheal tubes		
24. Xylocaine spray or Lubricating gel		
Equipment for difficult Intubation		
25. Introducer		
26. Laryngeal mask airway size 2		
27. Laryngeal mask airway size 3		
28. Magill forceps (paediatric)		
Devices to deliver oxygen/ventilate users		
29. Manual resuscitator device or bag and valve mask (paediatric)		
30. Oxygen masks		

31. 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		
32. Automated external defibrillator (AED) or defibrillator with pads, paddles and electrodes		
33. Cardiac arrest board		
Devices to gain intravascular access		
34. Intravenous administration sets		
35. IV Cannulae		
Medicine		
36. Emergency medicines according to local protocol are available and have not expired.		

16.2.2.2.10.2 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. Cather tip syringe 50ml		
11. Needles size 16 G		
12. Needles pink 18 G		
13. Scissors		
14. Tourniquet		
15. Stethoscope		
16. Nasogastric tubes size 5 (paediatric)		
17. Nasogastric tubes size 6 (paediatric)		
18. Nasogastric tubes size 8 (paediatric)		
19. Nasogastric tubes size 10 (paediatric)		
20. Suction catheter 8F (paediatric)		
21. Suction catheter 10F (paediatric)		
22. Suction devices (portable)		
23. Yankhauer suction		
24. Resuscitation algorithm		

16.2.2.2.10.3 The emergency trolley in the unit is checked.

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

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

Score	Comment

Criterion 16.2.2.2.11 *7* Medical equipment management systems must be in place to minimise the risk of patient safety incidents related to medical equipment.

16.2.2.2.11.1 Healthcare personnel receive training in the use of medical equipment.

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

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

Score	Comment

Sub Domain 16.2.3 *8* Infection prevention and control programmes

Standard 16.2.3.1 ***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 16.2.3.1.1 ***8(2)(a)*** **The health establishment must ensure that there are hand washing facilities in every service area.**

16.2.3.1.1.1 Hand washing facilities are available

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

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

Score	Comment

Unit 1 User care area

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

Unit 2 Personnel toilet

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 User toilet

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

Criterion 16.2.3.1.2 ***8(2)(b)*** **The health establishment must provide isolation units or cubicles where users with contagious infections can be accommodated.**

16.2.3.1.2.1 Isolation room meets the requirements listed below.

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

Inspect the isolation rooms to verify whether they contain the aspects listed below. Score 1 if the aspect is present and 0 if not present. Score NA if, at the time of the inspection, no users requiring isolation have been admitted.

Score	Comment

Aspects	Score	Comment
General requirements to be inspected at all times.		
1. Single room with door that closes. Explanatory note: In the case of an outbreak, multiple users may be accommodated in the same room, as long as the room is used exclusively to care for users with the outbreak disease, i.e. “Cohorting” of patients. Sporadic, individual cases must be nursed in a room that accommodates a single user only.		
2. Rooms used for infections requiring airborne precautions have adequate ventilation. Explanatory note: This will be a minimum of a window that opens, but preferably negative pressure ventilation. Rooms used for users with viral haemorrhagic fevers have ventilation ensuring at least 6-12 air changes per hour.		
3. Hand wash basin with elbow-operated taps		
4. Bin with a close-fitting lid		
5. Separate toilet facilities. Explanatory note: This may be a dedicated commode, or urinal and bedpan.		
Requirement to be inspected only if there is a user isolated in the room.		
6. Alcohol based hand rub inside room.		
7. Disinfectant outside of room to disinfect surfaces		
8. Disposable gloves		
9. Bio-hazardous tape for labelling of specimens prior to transporting		
10. Poster/Signs to affix outside of the room. Explanatory note: This will include the different types of transmission precautions i.e. airborne, contact or droplet and posters regarding visiting restrictions.		
11. Alcohol based hand rub outside room.		
12. People traffic in and out of room to be controlled (i.e. limited number of visitors and personnel)		

13. Appropriate measures for discarding infected linen.		
14. Appropriate measures for disinfection of equipment		

16.2.3.1.2.2 Isolation rooms are inspected by the infection prevention and control team following terminal cleaning.

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

The infection prevention and control team must confirm that terminal cleaning has been performed satisfactorily prior to the admission of another user into the room used for isolation. Evidence of this inspection must be available in the ward. Not applicable: Where no users requiring isolation have been admitted in the previous 12 months

Score	Comment

Criterion 16.2.3.1.3 *8(2)(c)* The health establishment must ensure there is clean linen to meet the needs of users.

16.2.3.1.3.1 The ward manager has determined the linen requirements for the ward

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

It is necessary to determine the linen requirements for the ward, to ensure sufficient linen is available, i.e. the number of linen items required to ensure that all users have clean linen and are warm enough during their admission. It is also necessary to determine how many linen items must be available in the linen storage area for routine linen changes, and to respond to episodes of dirtying or soiling of linen. This may change with the type of users admitted to the ward, including, but not limited to, users admitted with continence issues or with actively bleeding or suppurating wounds. Not applicable: Never

Score	Comment

16.2.3.1.3.2 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 ward 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 16.2.3.1.4 *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.

16.2.3.1.4.1 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, personnel are not in a situation in which they are required to wear protective clothing.

Score	Comment

Unit 1 Clinical Area 1: Worn

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

Unit 2 Isolation room: Worn

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

Unit 3 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 16.2.4 ***9*** Waste management

Standard 16.2.4.1 ***9(1)*** The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

Criterion 16.2.4.1.1 ***9(2)(a)*** **The health establishment must have appropriate waste containers at the point of waste generation.**

16.2.4.1.1.1 The ward has appropriate containers for disposal of all types of waste

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

Verify whether the waste containers listed below are available. Health care 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 ward, score NA.

Score	Comment

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

Criterion 16.2.4.1.2 ***9(2)(b)*** **The health establishment must implement procedures for the collection, handling, storage and disposal of waste.**

16.2.4.1.2.1 Sharps are safely managed and discarded in the ward

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

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

Score	Comment

Unit 1 Clinical area 1

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

Unit 2 Clinical area 2

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

Unit 3 Clinical area 3

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

16.2.4.1.2.2 There is a temporary healthcare risk waste storage area.

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

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

Score	Comment

Aspects	Score	Comment
1. Space available to store waste containers		
2. Area is well ventilated		
3. Area is well lit		
4. Area has impervious floor surfaces (waterproof or resistant, not cracked)		

Sub Domain 16.2.5 ***21*** Adverse events

Standard 16.2.5.1 ***21(1)*** The health establishment must have a system to monitor and report all adverse events.

Criterion 16.2.5.1.1 ***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.**

16.2.5.1.1.1 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 16.3 CLINICAL SUPPORT SERVICES

Sub Domain 16.3.1 ***10*** Medicines and medical supplies

Standard 16.3.1.1 ***10(1)*** The health establishment must comply with the provisions of the Pharmacy Act, 1974 and the Medicines and Related Substances Act, 1965.

Criterion 16.3.1.1.1 ***10(2)(a)*** **The health establishment must implement and maintain a stock control system for medicine and medical supplies.**

16.3.1.1.1.1 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

16.3.1.1.1.2 Stock levels on the shelves correspond with recorded stock levels in the stock control system

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

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

Score	Comment

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

4. Item 4		
5. Item 5		

16.3.1.1.1.3 The entries in the schedule 5 and 6 drug register are complete and correct

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

All columns in the provincially provided registers must be completed comprehensively. Any omitted information noted during the review of the register will receive a non-compliant score. The inspector must confirm that all sections of the register have been completed correctly. Not applicable: Where schedule 5 and 6 medicines are not held in the ward

Score	Comment

16.3.1.1.1.4 The schedule 5 and 6 medicines held in the ward correspond with the quantities documented in the drug register

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

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

Score	Comment

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

16.3.1.1.1.5 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

16.3.1.1.1.6 Physical stock for medical supplies 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. The system may be manual or electronic.

Score	Comment

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

Criterion 16.3.1.1.2 *10(2)(b)* The health establishment must ensure the availability of medicines and medical supplies for the delivery of services.

16.3.1.1.2.1 Medical supplies (consumables) are available.

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

Verify whether the medical supplies listed below are available in the storeroom Score 1 if the item is available and not expired if applicable 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 6f		
5. Urinary (Foley's) catheter silicone/latex 8f		
6. Urinary (Foley's) catheter silicone/latex 10f		
7. Urinary (Foley's) catheter silicone/latex 12f		
8. Urine drainage bag		
9. Simple face mask or reservoir mask or nasal cannula (prongs) for oxygen(paediatric)		
10. Face mask for nebuliser or face mask with nebuliser chamber(paediatric)		
11. Nasogastric feeding tube 600mm fg 6		

12. Nasogastric feeding tube 600mm fg8		
13. Nasogastric feeding tube 600mm fg10		
14. Nasogastric feeding tube 1000mm fg12		
15. Disposable aprons		
16. Disposable eye patches		
17. HB strips/slides		
18. Ultrasound gel medium viscosity (where doppler or ultrasound machines are available)		
19. Gloves exam non-sterile large /box		
20. Gloves exam non-sterile medium /box		
21. Gloves exam non-sterile small /box		
22. Gloves surgical sterile size 6 or 6.5		
23. Gloves surgical sterile size 7 or 7.5		
24. Gloves surgical sterile size 8		
25. Facemasks		
26. Particulate respirator masks (e.g. N95 or KN95 or FFP2 respirators)		
27. Goggles, glasses protective or face shield		
28. Gown, isolation (Single use, disposable, made of nonwoven material)		
29. Intravenous cannula 18g green/box		
30. Intravenous cannula 20g pink/box		
31. Intravenous cannula 22g/blue/box		
32. Needles: 18 (pink) or 20 (yellow)/box		
33. Needles: 21 (green)/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. Basic disposable dressing pack (should contain at the very least cotton wool balls, swabs, disposable drape)		
39. Gauze swabs plain non-sterile 100x100x8ply (pack)		

40. Gauze paraffin 100x100 (box)		
41. Bandage crepe		
42. Adhesive micro-porous surgical tape 24/25mm or 48/50mm		
43. Gauze absorbent grade 1 burn (pack)		
44. 70% isopropyl alcohol prep pads 24x30 1ply or 2 ply (box)		
45. Plaster roll 2.5cm or 5cm or 7.5cm or 10 cm		
46. Cotton wool balls 1g (500s)		
47. Stockinette 100mm or 150mm (roll)		
48. Blade stitch cutter sterile/pack		

Sub Domain 16.3.3 ***12*** Blood services

Standard 16.3.3.1 ***12(1)*** Hospitals and CHCs must ensure that users have access to blood and blood products when required.

Criterion 16.3.3.1.1 ***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.**

16.3.3.1.1.1 All adverse blood reactions are reported to relevant forum.

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

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

Score	Comment

16.3.3.1.1.2 Action is taken where adverse blood reactions were reported.

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

Documented evidence reflecting the action taken following the investigation to prevent similar incidents must be available must be available. If no incidents were reported, zero reporting must be done. Not applicable: Where no adverse blood reactions were reported.

Score	Comment

Sub Domain 16.3.2 ***13*** Medical equipment

Standard 16.3.2.1 ***13(1)*** Health establishments must ensure that the medical equipment is available and functional in compliance with the law.

Criterion 16.3.2.1.1 ***13(2)(b)*** **The health establishment must ensure that equipment is in accordance with the essential equipment list in all clinical service areas.**

16.3.2.1.1.1 Functional essential equipment for the paediatric ward is available

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

Inspect the ward 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
1. Diagnostic set (portable or wall mounted)		
2. Cuffs for blood pressure machine (paediatric)		
3. Blood pressure monitor (electronic or manual)		
4. Pulse oximeter		
5. Glucometer		
6. Haemoglobinometer		
7. Height meter		
8. Scale (paediatric)		
9. Examination couch		
10. Drip hanger, wall or ceiling mounted.		
11. Drip stand mobile with double hook		
12. Electrocardiograph (ECG) machine		
13. Infusion pump		
14. Mobile examination light		
15. Thermometer		
16. Spirometer, mechanical (paediatric)		
17. Examination table, with pad		
18. Weights for traction, set.		
19. Cast cutter, complete with vacuum cleaner		
20. Wheelchair, with drip rod		
21. Cot bed, complete with mattress		
22. Nebuliser(Explanatory note: This can be a nebulising machine or a nebuliser mask connected to oxygen point)		

Domain 16.4 GOVERNANCE AND HUMAN RESOURCES

Sub Domain 16.4.1 *20* Occupational health and safety

Standard 16.4.1.1 *20(1)* The health establishment must comply with the requirements of the Occupational Health and Safety Act, 1993.

Criterion 16.4.1.1.1 *20(2)(b)* Awareness of safety and security issues must be promoted

16.4.1.1.1.1 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

16.4.1.1.1.2 The healthcare personnel are familiar with the emergency evacuation procedure

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

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

Score	Comment

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

Criterion 16.4.1.1.2 *20* The health establishment must have a disaster management plan in place, which is updated annually and in response to personnel turnover.

16.4.1.1.2.1 The actions to be taken when the disaster management response is activated are visibly displayed

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

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

Score	Comment

Domain 16.5 FACILITIES AND INFRASTRUCTURE

Sub Domain 16.5.2 *14* Management of buildings and grounds

Standard 16.5.2.1 *14(1)* The health establishment and their grounds must meet the requirements

of the building regulations.

Criterion 16.5.2.1.1 ***14(2)(b)*** **The health establishment must as appropriate for the type of buildings and grounds of the establishment have a maintenance plan for buildings and the grounds.**

16.5.2.1.1.1 No obvious safety hazards are observed during the visit.

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

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

Score	Comment

Criterion 16.5.2.1.2 ***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.**

16.5.2.1.2.1 The unit has natural ventilation or functional mechanical ventilation.

Assessment type: Observation - **Risk rating:** Essential 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, including, but not limited to, windows or ventilation grilles. Verify whether the ward has passive ventilation (windows, doors that can be opened and ventilation grilles) or functional mechanical ventilation (i.e. a ducting system). Not applicable: Never

Score	Comment

Sub Domain 16.5.3 ***15*** Engineering services

Standard 16.5.3.1 ***15(1)*** The health establishment must ensure that engineering services are in place.

Criterion 16.5.3.1.1 ***15(2)*** **The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.**

16.5.3.1.1.1 The ward has a functional system to supply piped oxygen to clinical areas.

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

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

Score	Comment

16.5.3.1.1.2 A functional system is in place to supply piped suction to clinical areas.

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

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

Score	Comment

Sub Domain 16.5.1 ***17*** Security services

Standard 16.5.1.1 ***17(1)*** The health establishment must have systems to protect users, health care personnel and property from security threats and risks.

Criterion 16.5.1.1.1 ***17(2)(a)*** **The health establishment must ensure that security staff are capacitated to deal with security incidents, threats and risks.**

16.5.1.1.1.1 Security measures are implemented to safeguard children and infants.

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

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

Score	Comment