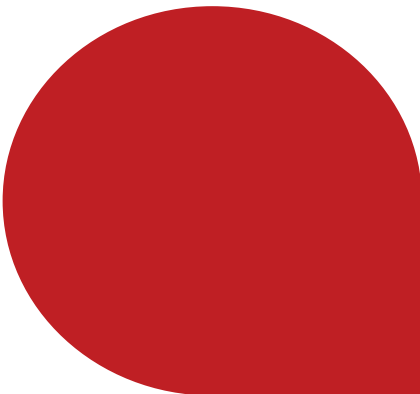




Office of Health Standards Compliance  
Ensuring quality and safety in health care



**v1.4.1**

# Clinical Services

**Regulatory Clinic inspection tool**

Facility:
Date:

- **Tool Name:** Regulatory Clinic Inspection Tool v1.4.1
- **HEs Type:** Clinics/ PHC
- **Sector:** Public
- **Specialization:** Clinic
- **Created By:** Health Standards Development and Training

## 2 Clinical Services

### Domain 2.1 USER RIGHTS

#### Sub Domain 2.1.1 4 User information

**Standard 2.1.1.1 4(1)** The health establishment must ensure that users are provided with adequate information about the health care services available at the health establishment and information about accessing those services.

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

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

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

Observe if there is a designated helpdesk or reception in the health establishment.

Not applicable: Never

Score	Comment

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

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

The signage must be at the entrance of the health establishment and indicate the services offered in the health establishment. The information can be displayed on a board or screen and must be clearly legible.

Not applicable: Never

Score	Comment

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

**2.1.1.1.2.1** The service hours of the health establishment are visibly displayed at the entrance of the health establishment.

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

The operating times must be displayed at the entrance of the health establishment. The information can be displayed on a board or screen and must be clearly legible.

Not applicable: Never

Score	Comment

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

**2.1.1.1.3.1** The complaints toolkit is available.

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

Check whether the complaint toolkit is available and complies with the aspects listed below. Score 1 if compliant and score 0 if not compliant.

Score	Comment	
Aspects	Score	Comment
1. The complaints box is visibly placed in the health establishment.		
2. The complaints box is lockable.		
3. The complaints box is mounted to the wall or flat surface.		
4. Standardized complaints forms are readily available next to the box or upon request.		
5. The poster describing the process for lodging a complaint is posted next to or nearby the complaints box.		
6. The poster describing the process for lodging a complaint is available in at least two official languages commonly spoken in the area.		

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

**2.1.1.1.4.1** Results of the user experience of care survey are visibly displayed.

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

The results from the most recent user experience of care survey must be visibly displayed. The survey must have been conducted in the previous twelve months.

Not applicable: Never

Score	Comment

**Sub Domain 2.1.2 5** Access to care

**Standard 2.1.2.1 5(1)** The health establishment must ensure that users are attended to in a manner which is consistent with the nature and severity of their health condition.

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

**2.1.2.1.1.1** The process to prioritize very sick, frail and elderly users is implemented.

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

Implementation of the process to prioritize vulnerable users must be evident on observation of the waiting room. This can include a poster or information provided to users about the process or observing users who have been prioritized in the waiting area.

Not applicable: Never

Score	Comment

**2.1.2.1.1.2** Health care personnel responsible for user prioritisation can explain how users are prioritised.

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

Interview three health care personnel responsible for user prioritisation. Assess if they can explain the procedure to prioritise very sick, frail and elderly health care users according to the standard operating procedure. Score 1 if the procedure is correctly explained and 0 if not correctly explained.

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

**Criterion 2.1.2.1.2 5(2)(b)** The health establishment must ensure access to emergency medical transport for users requiring urgent transfer to another health establishment, and that they are accompanied by a health care provider.

**2.1.2.1.2.1** Emergency Medical Service contact number(s) are displayed.

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

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

Score	Comment

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

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

**2.1.2.2.1.1** Health care providers can explain what information they provide to users being referred.

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

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

Score	Comment

Unit 1 Health care provider 1

Aspects	Score	Comment
1. Reason for referral		
2. The health establishment or service or department referred to.		
3. Follow up action post referral visit (e.g. return to clinic).		

Unit 2 Health care provider 2

Aspects	Score	Comment
1. Reason for referral		
2. The health establishment or service or department referred to.		
3. Follow up action post referral visit (e.g. return to clinic).		

Unit 3 Health care provider 3

Aspects	Score	Comment
1. Reason for referral		
2. The health establishment or service or department referred to.		
3. Follow up action post referral visit (e.g. return to clinic).		

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

**2.1.2.2.2.1** Copies of referral documents or forms are available at the initiating health establishment.

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

Request the copies of referral document or form of the last three users referred out of the health establishment in the previous three months. Score 1 if the referral document or form contains the aspect listed below and score 0 if the aspect listed below is not documented.

Score	Comment

Unit 1 User Health record 1

Aspects	Score	Comment
1. Name of user		

2. Name of referring health establishment		
3. Name of referring health care provider		
4. Name of receiving health establishment		
5. Reason for referral		
6. Summary of clinical details. Explanatory note: This will include but not limited to presenting complaints, examination and findings, investigations conducted, diagnosis and treatment provided.		

Unit 2 User Health record 2

Aspects	Score	Comment
1. Name of user		
2. Name of referring health establishment		
3. Name of referring health care provider		
4. Name of receiving health establishment		
5. Reason for referral		
6. Summary of clinical details. Explanatory note: This will include but not limited to presenting complaints, examination and findings, investigations conducted, diagnosis and treatment provided.		

Unit 3 User Health record 3

Aspects	Score	Comment
1. Name of user		
2. Name of referring health establishment		
3. Name of referring health care provider		
4. Name of receiving health establishment		
5. Reason for referral		

6. Summary of clinical details. Explanatory note: This will include but not limited to presenting complaints, examination and findings, investigations conducted, diagnosis and treatment provided.		
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**Sub Domain 2.1.3 22** Waiting times

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

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

**2.1.3.1.1.1** The national waiting time target for time spent in the health establishment is visibly displayed.

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

The aim of this requirement is to give users an indication of how long they should expect to wait in the health establishment and to assist the personnel to work within the scope of the target waiting time. The document reflecting the national waiting time target of must be displayed in an area which is easily visible to users waiting to receive care.

Not applicable: Never

Score	Comment

**Domain 2.2 CLINICAL GOVERNANCE AND CLINICAL CARE**

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

**Standard 2.2.1.1 6(1)** The health establishment must ensure that health records of health care users are protected, managed and kept confidential in line with section 14, 15 and 17 of the Act.

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

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

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

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

Score	Comment	
Aspects	Score	Comment
<b>User health record storage room adheres to the following:</b>		
1. The storage room contains shelves or cabinets to store files.		
2. The aisle and shelves or cabinets are labelled.		
3. The storage room contains a counter or sorting table or dedicated shelves to sort files.		

4. The lighting is functional and allows for all areas of the room to be well lit.		
5. The storage room is clean and dust free.		
<b>Filing system for user health records adheres to the following:</b>		
6. The user health records are filed-back into the filing system. Explanatory note: Request a list of users seen in the previous week, select three users and ask for their health records to verify whether they were returned to the reception to be filed back into the filing system after use. This excludes the maternity case records. Electronic health records must be saved and backed-up in accordance with the standard operating procedure of the health establishment		
7. A standardised, unique record registration number is assigned to each user health record. Explanatory note: The system used to allocate the unique registration number can include but is not limited to the user's surname, identity document number or date of birth or registration number/letters or a combination of the two. The unique number can be generated manually or electronically in cases where an electronic patient registration system is in place		
8. A tracking system is in place to check that all user health records issued for the day are returned to the reception for filing by the end of the day. Explanatory note: this could be but is not limited to a tracking tool where user health records are checked against the user registration list for the day to ascertain the return of each record to reception		
9. An annual register of archived user health records is available		
10. An annual register of disposed user health records is available		
11. A copy of destruction certificates is available - copies must correspond with entries in the disposal register		

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

**2.2.1.1.2.1** Confidentiality of health records is maintained.

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

In line with section 14 of the National Health Act. Observe how user health records are managed in various areas within the health establishment (this will include but not limited to public areas, clinical areas) and determine whether unauthorised individuals would not be able to access the information in the health records. This will include the health records of users waiting to be seen, users who have already been seen but their records have not yet been returned to the records storage area/room, health records being used for clinical audit or other administrative purposes, or health records outside the records storage area/room for any other



reason. The user health records should be kept in a manner which safeguards against unauthorised access to the content of the record. Electronic records must be safeguarded with passwords.

Not applicable: Never

Score	Comment

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

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

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

Observe if there is a sign that reads 'No unauthorized entry' on the door of the user health records storage room or area. All internal signs must as a minimum be laminated. Text on signs must be typed, no handwritten signs must be accepted. Signs do not need to be framed, but laminating must not be damaged or peeling off. If frames are not used- posters must be neatly fastened to the wall. Any other sign, e.g. 'Staff only', will be scored non-compliant.

Not applicable: Never

Score	Comment

**2.2.1.1.3.2** The health records storage area is secured.

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

Observe if the health records storage area or facility is secured this will include but not limited to a security gate which is lockable and/or access control measures, e.g. a tag/card, lockable cabinets.

Not applicable: Where there is no dedicated health records storage area.

Score	Comment

**Standard 2.2.1.2 6(3)** The health establishment must create and maintain a system of health records of users in accordance with the requirements of section 13 of the Act.

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

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

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

Select three health records of users who were seen at the time of inspection or records from the previous month and verify if aspects listed below have been recorded. Include health records for the following categories: adult acute/minor ailment, adult chronic, maternal health, sick child and well-baby. Score 1 if the aspect is recorded and score 0 if not recorded. Score not applicable for the category not selected.

Score	Comment

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Unit 1 Adult acute / minor ailment

Aspects	Score	Comment
1. Name and surname		
2. User file number		
3. Gender		
4. Health establishment name		
5. ID or refugee number or passport number or date of birth		
6. Residential address		
7. Personal contact details		
8. Next of kin contact details		

Unit 2 Adult chronic

Aspects	Score	Comment
1. Name and surname		
2. User file number		
3. Gender		
4. Health establishment name		
5. ID or refugee number or passport number or date of birth		
6. Residential address		
7. Personal contact details		
8. Next of kin contact details		

Unit 3 Maternal Health

Aspects	Score	Comment
1. Name and surname		
2. User file number		
3. Gender		
4. Health establishment name		
5. ID or refugee number or passport number or date of birth		

6. Residential address		
7. Personal contact details		
8. Next of kin contact details		

Unit 4 Sick child (IMCI)

Aspects	Score	Comment
1. Name and surname		
2. User file number		
3. Gender		
4. Health establishment name		
5. ID or refugee number or passport number or date of birth		
6. Residential address		
7. Name and surname of parents or guardian		
8. Next of kin contact details		

Unit 5 Well baby

Aspects	Score	Comment
1. Name and surname		
2. User file number		
3. Gender		
4. Health establishment name		
5. ID or refugee number or passport number or date of birth		
6. Residential address		
7. Name and surname of parents or guardian		
8. Next of kin contact details		

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

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

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

Select three health records of users who were seen at the time of inspection or records from the previous month and verify if aspects listed below have been recorded. Include health records for the following categories: adult acute/minor ailment, adult chronic, sick child, well-baby and maternal health. Score 1 if the aspect is recorded and score 0 if not recorded. Score not applicable for the category not selected.

Score	Comment

Unit 1 Adult acute / minor ailment

Aspects	Score	Comment
1. Presenting complaint		
2. Vital signs		
3. Physical examination		
4. Diagnosis/findings		
5. User management plan		
6. Clinician details		
7. Date of entry		
8. Time of entry		
9. Signature of clinician		

Unit 2 Adult chronic

Aspects	Score	Comment
1. Presenting complaint		
2. Vital signs		
3. Physical examination		
4. Diagnosis/findings		
5. User management plan		
6. Clinician details		
7. Date of entry		
8. Time of entry		
9. Signature of clinician		

Unit 3 Sick child

Aspects	Score	Comment
1. Presenting complaint		
2. Vital signs		

3. Physical examination		
4. Diagnosis/findings		
5. User management plan		
6. Clinician details		
7. Date of entry		
8. Time of entry		
9. Signature of clinician		

Unit 4 Well baby

Aspects	Score	Comment
1. History of immunisations.		
2. Presenting complaint (if any)		
3. Physical examination		
4. Growth charts completed		
5. Basic screening completed according to Road to Health Charts		
6. User management plan		
7. Clinician details		
8. Date of entry		
9. Time of entry		
10. Signature of clinician		

Unit 5 Maternal health care

Aspects	Score	Comment
1. Basic antenatal care 1st visit		
2. Basic antenatal care PLUS follow-up visits		
3. Delivery summary (where applicable)		
4. Postnatal Care visits (where applicable)		
5. Diagnosis/Findings		
6. User management plan		
7. Clinician details		

8. Date of entry		
9. Time of entry		
10. Signature of clinician		

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

**Criterion 2.2.1.3.1 6 A documented procedure which describes the information to be collected and discussed during the process to obtain informed consent is implemented, in accordance with Chapter 2 of the National Health Act (Section 7).**

**2.2.1.3.1.1** Informed consent forms are completed correctly.

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

Select three completed informed consent forms of users who were seen at the time of inspection or from the previous month and verify whether the aspects listed below are recorded. Score 1 if the aspect is recorded and score 0 if not recorded.

Score	Comment

Unit 1 User health record 1

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

Unit 2 User health record 2

Aspects	Score	Comment
1. User's full name(s) and surname		
2. The user's age or date of birth or identity number		
3. The exact nature of the procedure or treatment		
4. The name of the person who signed the consent form if not signed by the user. Explanatory note: Not applicable where the user signed the consent form.		

5. The consent form is signed by the user or parent/guardian		
6. The consent form is signed by the health care provider		
7. The consent form is dated		

Unit 3 User health record 3

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

**Sub Domain 2.2.2 7 Clinical management**

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

**Criterion 2.2.2.1.1 7(2)(a)** The health establishment must ensure that clinical policies and guidelines for priority health conditions issued by the national department are available and communicated to health care personnel.

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

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

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

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

Score	Comment

Unit 1 Consulting room 1

Aspects	Score	Comment

<b>Consulting room used by the doctor</b>		
1. Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2020 or latest.		
2. Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Adults, 2019 or latest (only in consultation room used by the doctor)		
3. Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Paediatrics, 2017 or latest (only in consultation room used by the doctor)		
4. New-born Care Charts Management of Sick and Small Newborns in Hospital SSN Version 1, 2014 or latest (only in consultation room used by the doctor)		
5. Adult Primary Care guide (APC) – 2019/2020 or Practical Approach to Care Kit (PACK), 2019 /2020 or latest		

Unit 2 Consulting room 2

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

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

**Criterion 2.2.2.2.1 7** The health establishment implements process to ensure environmental cleanliness.

**2.2.2.2.1.1** Disinfectants, cleaning materials and equipment are available.

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

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

<b>Score</b>	<b>Comment</b>	
<b>Aspects</b>	<b>Score</b>	<b>Comment</b>
<b>Disinfectant and cleaning materials</b>		
1. Chlorine releasing agent - hypochlorite (e.g. Biocide D or Clorox)		
2. Alcohol based agent (70%-90%)		



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

**2.2.2.2.1.2** The health establishment is observed to be clean.

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

Inspector to observe general cleanliness in all areas of the health establishment. Cleanliness could include but not limited to whether the area is free of dirt and dust.

Not applicable: Never

Score	Comment

**Criterion 2.2.2.2.2 7 The management of emergency resuscitations must be guided and monitored to improve user outcomes.**

**2.2.2.2.2.1** Emergency trolley is stocked with medicines, medical supplies and equipment.

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

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

Score	Comment	
Aspects	Score	Comment
<b>Devices to open and protect airway</b>		
1. Laryngeal mask airway (a minimum of three different sizes that accommodate adult and paediatric users)		
<b>Devices to deliver oxygen/ventilate users</b>		
2. Manual resuscitator device or bag and valve mask (adult)		
3. Manual resuscitator device or bag and valve mask (paediatric)		
4. Oxygen masks- re breather (adult)		
5. Oxygen Mask- re breather (paediatrics)		
6. Nebuliser mask- Adult		
7. Nebuliser mask- Paediatric		
<b>Devices to gain intravascular access</b>		
8. Intravenous administration sets		
9. Intravenous Cannulae (a minimum of three different sizes that accommodate both adult and paediatric users)		
10. Strapping to secure Intravenous cannulae		
<b>Medicine</b>		

11. Emergency medicines according to local protocol are available and have not expired.		
<b>Equipment to diagnose and treat cardiac dysrhythmias</b>		
12. Automated external defibrillator (AED) or defibrillator with pads, paddles, conductive gel and electrodes. Explanatory note: Score not applicable if the health establishment has been listed as one of the facilities excluded from keeping these items. The health establishment must be listed in the letter signed by relevant authority and communicated to NDOH. Relevant authority refers to provincial department of health, district health authority or municipal authority.		
13. Cardiopulmonary Resuscitation board		

**2.2.2.2.2.2** The emergency trolley is checked in accordance with agreed unit practice.

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

Request a documented practice for checking the emergency trolley and verify whether it is checked as documented. Request documented records of checking the emergency trolley from the previous month.

Not applicable: Never

Score	Comment

**2.2.2.2.2.3** The emergency or resuscitation room or area is equipped with functional, basic resuscitation equipment.

**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. Emergency trolley with lockable medicine drawer and accessories		
2. Patient trolley or stretcher which can be adjusted into a fowlers position		
3. Chlorhexidine or Alcohol swabs		

4. Eye protection		
5. Facemasks		
6. Gloves		
7. Syringes (a minimum of three syringes of any size, 2ml or 5ml or 10ml or 20ml)		
8. Catheter tip syringe 50ml		
9. Needles (a minimum of three different sizes that accommodate both adult and paediatric users)		
10. Scissors		
11. Tourniquet		
12. Stethoscope		
13. Oropharyngeal airway (a minimum of three different sizes)		
14. Nasogastric tube (a minimum of three different sizes that accommodate both adult and paediatric users)		
15. Suction catheter (a minimum of four different sizes that accommodate both adult and paediatric users)		
16. Suction devices (portable)		
17. Nasal cannula		

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

**Standard 2.2.3.1 8(1)** The health establishment must maintain an environment, which minimises the risk of disease outbreaks, the transmission of infection to users, health care personnel and visitors.

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

**2.2.3.1.1.1** Hand washing facilities are available.

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

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

Score	Comment

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Unit 1 Consultation room 1

Aspects	Score	Comment
<p>1. Functional hand wash basin.</p> <p>Explanatory note: The basin should not be blocked, broken, or have cracks.</p>		
<p>2. Taps are functional and not broken</p> <p>Explanatory Note: Taps must be elbow or non-touch operated in user care areas.</p>		
<p>3. Plain liquid soap.</p>		
<p>4. Wall mounted soap dispenser.</p>		
<p>5. Paper towel dispenser with disposable hand paper towels</p>		
<p>6. General waste container.</p> <p>Explanatory note: This could be a wall mounted or a disposable or reusable vessel placed at the point of waste generation for the purpose of receiving waste. It may include but not limited to a bin, bucket, box, etc. The container must be lined with the appropriate colour coded liner. Not applicable: Never</p>		

Unit 2 Consultation room 2

Aspects	Score	Comment
<p>1. Functional hand wash basin.</p> <p>Explanatory note: The basin should not be blocked, broken, or have cracks.</p>		
<p>2. Taps are functional and not broken.</p> <p>Explanatory Note: Taps must be elbow or non-touch operated in user care areas.</p>		
<p>3. Plain liquid soap.</p>		
<p>4. Wall mounted soap dispenser.</p>		
<p>5. Paper towel dispenser with disposable hand paper towels</p>		

<p>6. General waste container.</p> <p>Explanatory note: This could be a wall mounted or a disposable or reusable vessel placed at the point of waste generation for the purpose of receiving waste. It may include but not limited to a bin, bucket, box, etc. The container must be lined with the appropriate colour coded liner. Not applicable: Never</p>		
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Unit 3 Vital signs or observation room

Aspects	Score	Comment
<p>1. Functional hand wash basin.</p> <p>Explanatory note: The basin should not be blocked, broken, or have cracks.</p>		
<p>2. Taps are functional and not broken.</p> <p>Explanatory Note: Taps must be elbow or non-touch operated in user care areas.</p>		
<p>3. Plain liquid soap.</p>		
<p>4. Wall mounted soap dispenser.</p>		
<p>5. Paper towel dispenser with disposable hand paper towels</p>		
<p>6. General waste container.</p> <p>Explanatory note: This could be a wall mounted or a disposable or reusable vessel placed at the point of waste generation for the purpose of receiving waste. It may include but not limited to a bin, bucket, box, etc. The container must be lined with the appropriate colour coded liner. Not applicable: Never</p>		

2.2.3.1.1.2 Alcohol based hand rub is available.

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

Select three areas and observe whether alcohol-based hand rub is available. Score 1 if available and 0 if not available.

Score	Comment	
Aspects	Score	Comment
1. Area 1		
2. Area 2		
3. Area 3		

**2.2.3.1.1.3** Posters on hand hygiene are displayed.

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

Select three areas and observe whether posters on hand hygiene are displayed. This could be a single hand hygiene poster or individual posters for hand washing or correct use of alcohol-based hand rub.

Score 1 if available and 0 if not available

Score	Comment	
Aspects	Score	Comment
1. Area 1		
2. Area 2		
3. Area 3		

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

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

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

The health establishment must provide a room or an area to accommodate users with contagious infections while awaiting transfer to a higher level of care. This can include but is not limited to an emergency room.

Not applicable: Never

Score	Comment

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

**2.2.3.1.3.1** Clean linen is available in the health establishment.

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

Check whether clean linen is available as determined by the unit requirements. This can be cloth or disposable linen.

Not applicable: Never

Score	Comment

**Criterion 2.2.3.1.4 8(2)(d)** The health establishment must ensure that health care personnel are protected from acquiring infections through the use of personal protective equipment and prophylactic immunisations.

**2.2.3.1.4.1** Personal protective equipment is worn.

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

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

Score	Comment

Unit 1 Consultation room 1

Aspects	Score	Comment
1. Non-sterile or sterile gloves		
2. Disposable gowns or aprons		
3. Protective face shields or goggles		
4. Face masks or N95 or KN95 or FFP2 respirators or approved equivalent		

Unit 2 Consultation room 2

Aspects	Score	Comment
1. Non-sterile or sterile gloves		
2. Disposable gowns or aprons		
3. Protective face shields or goggles		
4. Face masks or N95 or KN95 or FFP2 respirators or approved equivalent		

**Sub Domain 2.2.4 9 Waste management**

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

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

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

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

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

Score	Comment

Unit 1 Staff Toilet



Aspects	Score	Comment
1. Sanitary disposal bins with a fitting lid or healthcare risk waste box with a lid.		
2. Sanitary disposal bins or boxes lined with red plastic bags. Explanatory note: If the disposable boxes used for sanitary waste have gel granules in the bottom of the box to treat the waste, no bag is required, and the health establishment can score 1		
3. Sanitary disposal bins or boxes are clean and not overflowing		
4. Bins available for general waste		
5. Bins for general waste are lined with appropriate coloured bags (Black, beige, white or transparent packaging can be used.)		

#### Unit 2 Public Toilet

Aspects	Score	Comment
1. Sanitary disposal bins with a fitting lid or healthcare risk waste box with a lid.		
2. Sanitary disposal bins or boxes lined with red plastic bags. Explanatory note: If the disposable boxes used for sanitary waste have gel granules in the bottom of the box to treat the waste, no bag is required, and the health establishment can score 1		
3. Sanitary disposal bins or boxes are clean and not overflowing		
4. Bins available for general waste		
5. Bins for general waste are lined with appropriate coloured bags (Black, beige, white or transparent packaging can be used.)		

#### Unit 3 Clinical Area

Aspects	Score	Comment
1. Health care risk waste disposal bins with functional lids or health care risk waste box		
2. Health care risk waste disposal bins or boxes lined with red colour plastic bags		

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

Unit 4 Waiting Area

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

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

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

Observe if the waste containers listed below are available. Score 1 if the waste container is available and score 0 if it is not available.

Where a particular type of waste is not generated in the unit, score NA (not applicable).

Score	Comment	
Aspects	Score	Comment
1. Infectious non-anatomical waste (red)		
2. Sharps (yellow) - Sharps are disposed of in impenetrable, tamperproof containers		
3. General waste (black, beige, white or transparent packaging can be used)		
4. Anatomical waste (Red bucket with sealable lid)-applicable where anatomical waste is generated this includes but not limited to male medical circumcision waste or placenta following baby deliveries.		
5. Sanitary bins (box/container with red bag)		

**Criterion 2.2.4.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.**

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

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

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

Score	Comment

Unit 1 Consultation room 1

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

Unit 2 Consultation room 2

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

Unit 3 Consultation room 3

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

**Sub Domain 2.2.5 21** Adverse events

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

**Criterion 2.2.5.1.1 21(2)(b)** The health establishment must have systems in place to report adverse incidents to a structure in the health establishment or responsible authority that monitors these events.

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

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

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

Score	Comment

Unit 1 Health care personnel 1

Aspects	Score	Comment
1. Types of adverse events that might happen in the unit (give three examples)		
2. Manner in which adverse events are reported 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 Health care personnel 2

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

Unit 3 Health care personnel 3

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

**Domain 2.3 CLINICAL SUPPORT SERVICES**

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

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

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

**2.3.1.1.1.1** Basic medical supplies (consumables) are available.

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

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

Score	Comment	
Aspects	Score	Comment
<b>Surgical supplies</b>		
1. Item 1		
2. Item 2		
3. Item 3		

4. Item 4		
5. Item 5		
<b>Dressing supplies</b>		
6. Item 1		
7. Item 2		
8. Item 3		
9. Item 4		
10. Item 5		
<b>Laboratory supplies</b>		
11. Item 1		
12. Item 2		
13. Item 3		
14. Item 4		
15. Item 5		
<b>Personal protective equipment (PPE)</b>		
16. Item 1		
17. Item 2		
18. Item 3		
19. Item 4		
20. Item 5		

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

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

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

Score	Comment	
Aspects	Score	Comment
1. Health care record 1		

2. Health care record 2		
3. Health care record 3		

**Sub Domain 2.3.2 13 Medical equipment**

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

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

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

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

Use the checklist below to check whether essential equipment is available and functional in the areas listed below. Score 1 if the item is available and functional and 0 if it is not available or not functional. If the health establishment is too small to have a vital signs room, check for equipment in consulting rooms.

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

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



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

**2.3.2.1.1.2** There is an emergency sterile obstetric delivery pack.

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

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

Score	Comment	
Aspects	Score	Comment
<b>Included in the pack</b>		
1. Stitch scissor- 1		
2. Episiotomy scissor-1		
3. Cord scissor-1		
4. Dissecting forceps non-toothed (plain)-1		
5. Dissecting forceps toothed-1		
6. Artery forceps, straight, long-2		
7. Needle holder-1		
8. Small bowl-2		
9. Kidney dishes OR receivers (big)-2		

<b>Extras - not part of pack</b>		
10. Basin-1		
11. Stainless-steel round bowl, large-1		
12. Green towels-4		
13. Disposable apron-2		
14. Gauzes-5		
15. Vaginal tampons-1		
16. Sanitary towels-2		
17. Round cotton wool balls-1 pack		
18. Umbilical cord clamps-2		

**2.3.2.1.1.3** There is a sterile pack for minor surgery.

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

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

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

**Domain 2.5 FACILITIES AND INFRASTRUCTURE**

**Sub Domain 2.5.1 14** Management of buildings and grounds

**Standard 2.5.1.1 14(1)** The health establishment and their grounds must meet the requirements of the building regulations.

**Criterion 2.5.1.1.1 14(2)(d)** The health establishment must as appropriate for the type of buildings and grounds of the establishment have ventilation systems that maintain the inflow of fresh air, temperature, humidity and purity of the air within specified limits set for different service areas such as theatres, kitchen and isolation units.

**2.5.1.1.1.1** The health establishment has natural ventilation or functional mechanical ventilation.

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

Observe if all areas of the health establishment have passive ventilation (windows and doors that can be opened and ventilation grilles) or functional mechanical ventilation (i.e. Ducting system). Score 1 if the aspect is compliant and 0 if it is not compliant.

Not applicable: Never

Score	Comment

**Sub Domain 2.5.2 15** Engineering services

**Standard 2.5.2.1 15(1)** The health establishment must ensure that engineering services are in place.

**Criterion 2.5.2.1.1 15(2)** The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.

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

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

An oxygen cylinder fitted with a regulator to adjust the flowrate must be available

Not applicable: Never

Score	Comment

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

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

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

Not applicable: Never

Score	Comment

### Official Sign-Off

The National Health Act, 2003 (Act No. 61 of 2003) provides for quality requirements and standards in respect of health services provided by health establishments to the public. The main objective is to promote and protect the health and safety of the users of health services and contribute to improved outcomes and improved population health.

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

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- National Department of Health for their input and comments on the inspection tools.

**It is hereby certified that the Regulatory Clinic Inspection tools version 1.4.1 was updated by the Office of Health Standards Compliance.**



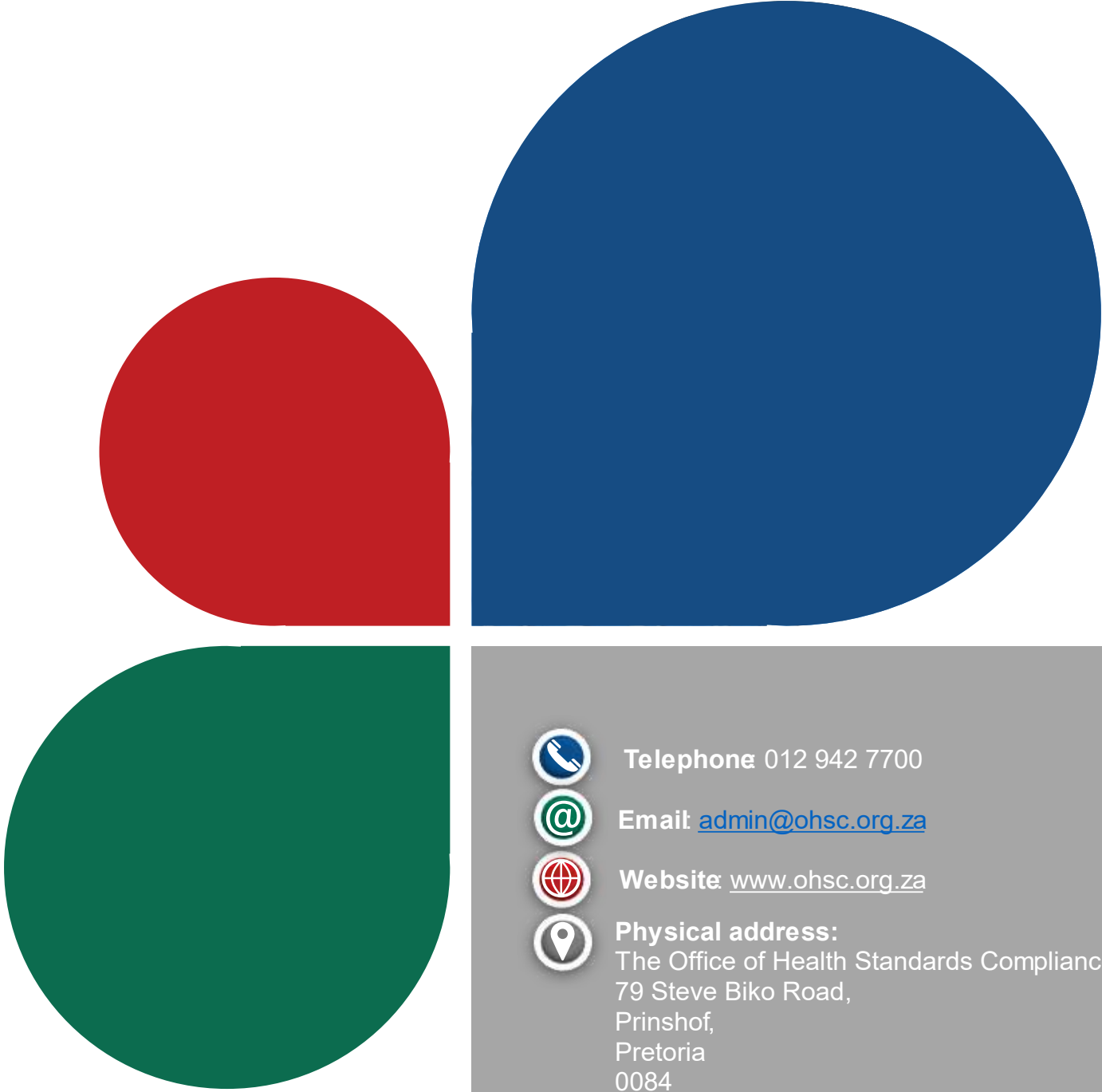
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