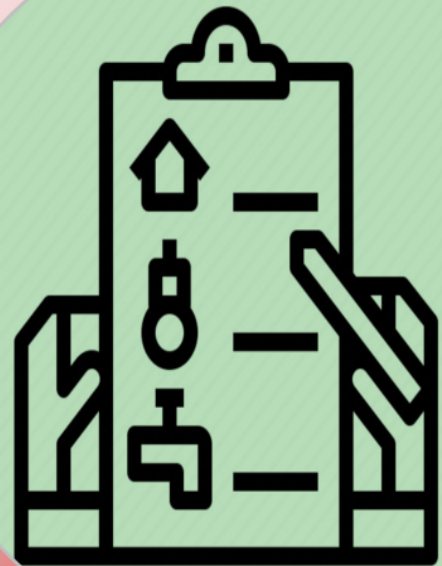




Office of Health Standards Compliance
Ensuring quality and safety in health care

Regulatory Central Hospital Inspection Tool v1.0



Opthalmology Ward



Facility:
Date:

- **Tool Name:** Regulatory Central Hospital Inspection Tool v1.0
- **HEs Type:** Hospitals
- **Sector:** Public
- **Specialization:** Central
- **Created By:** Health Standards Development and Training

57 Ophthalmology Ward

Domain 57.2 CLINICAL GOVERNANCE AND CLINICAL CARE

Sub Domain 57.2.1 6 User health records and management.

Standard 57.2.1.1 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 57.2.1.1.1 6(2)(b) The health establishment must ensure confidentiality of health records.

57.2.1.1.1.1 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 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. Electronic records must be safeguarded with passwords or any other security measures.

Not applicable: Never

Score	Comment

Standard 57.2.1.2 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 57.2.1.2.1 6(4)(b) The health establishment must record information relating to the examination and health care interventions of users.

57.2.1.2.1.1 A clinical assessment and management plan for the user is recorded.

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

Select three health records of users who have been admitted in the unit for at least three days at the time of inspection or health records from the previous month 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 User health record 1

Aspects	Score	Comment
1. Vital signs		

2. Physical examination findings		
3. Date of each entry		
4. Time of each entry		
5. Investigations requested (where applicable)		
6. Results of investigations requested		
7. Provisional diagnosis		
8. Treatment plan		
9. Nursing care plan		
10. Medicines administered		
11. Progress notes		
12. Designation of signatory		
13. Each entry signed by health care provider making entry.		

Unit 2 User health record 2

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

Unit 3 User health record 3

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

Standard 57.2.1.3 6(5) The health establishment must have a formal process to be followed when obtaining informed consent from the user.

Criterion 57.2.1.3.1 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).

57.2.1.3.1.1 Informed consent forms are completed correctly.

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

Select three health records of users who were seen at the time of inspection or health records from the previous three months and an informed consent for an operation, procedure or treatment was signed. Check whether the details listed below are recorded on the consent forms. Score 1 if it is recorded and 0 if it is not recorded.

Score	Comment

Unit 1 User health record 1

Aspects	Score	Comment
1. Names and surname of user		
2. Age, Identity number or date of birth of user		
3. The exact nature of operation/ procedure or treatment, including side, where relevant.		

4. Consent form is signed by user, the legal guardian (for minors) or any person legally responsible for the user. Explanatory note: Signatory providing consent is legally entitled to give informed consent in accordance with section 7 of the National Health Act 61 of 2003, HPCSA, Booklet 4 and Section 129 of the Children's Act 38 of 2005.		
5. Consent form is signed by health care provider obtaining the consent. Explanatory note: This must be a health care provider legally entitled to obtain the consent in accordance with HPCSA booklet 4, section 4.		
6. Consent form is dated.		
7. All entries on form are legible.		

Unit 2 User health record 2

Aspects	Score	Comment
1. Names and surname of user		
2. Age, Identity number or date of birth of user		
3. The exact nature of operation/ procedure or treatment, including side, where relevant.		
4. Consent form is signed by user, the legal guardian (for minors) or any person legally responsible for the user. Explanatory note: Signatory providing consent is legally entitled to give informed consent in accordance with section 7 of the National Health Act 61 of 2003, HPCSA, Booklet 4 and Section 129 of the Children's Act 38 of 2005.		
5. Consent form is signed by health care provider obtaining the consent. Explanatory note: This must be a health care provider legally entitled to obtain the consent in accordance with HPCSA booklet 4, section 4.		
6. Consent form is dated.		
7. All entries on form are legible.		

Unit 3 User health record 3

Aspects	Score	Comment
1. Names and surname of user		
2. Age, Identity number or date of birth of user		
3. The exact nature of operation/ procedure or treatment, including side, where relevant.		

4. Consent form is signed by user, the legal guardian (for minors) or any person legally responsible for the user. Explanatory note: Signatory providing consent is legally entitled to give informed consent in accordance with section 7 of the National Health Act 61 of 2003, HPCSA, Booklet 4 and Section 129 of the Children's Act 38 of 2005.		
5. Consent form is signed by health care provider obtaining the consent. Explanatory note: This must be a health care provider legally entitled to obtain the consent in accordance with HPCSA booklet 4, section 4.		
6. Consent form is dated.		
7. All entries on form are legible.		

Standard 57.2.1.4 6(6) The health establishment must issue a discharge report to users in accordance with section 10 of the Act.

Criterion 57.2.1.4.1 6 Comprehensive discharge reports must be provided to users to ensure continuity of care.

57.2.1.4.1.1 Users are issued with a discharge report.

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

Select the health records of three users who were discharged at the time of inspection or health records from the previous month and verify whether copies of the discharge report includes the aspects listed below. Score 1 if compliant and 0 if not compliant or if there is no discharge report available.

Score	Comment

Unit 1 User health record 1

Aspects	Score	Comment
1. Name and surname of user		
2. Date of birth or identity number or passport or patient registration/unique identifier.		
3. Date of admission		
4. Date of discharge		
5. Provisional diagnosis/reason for admission		
6. Name of unit to which user was admitted (this may be a name or alphanumeric details)		
7. Final diagnosis on discharge		
8. Medicine and treatment		
9. Details of referrals and/or follow-up appointments (where applicable)		
10. Relevant health education given.		
11. Signature of health care provider completing report.		

Unit 2 User health record 2

Aspects	Score	Comment
1. Name and surname of user		
2. Date of birth or identity number or passport or patient registration/unique identifier.		
3. Date of admission		
4. Date of discharge		
5. Provisional diagnosis/reason for admission		
6. Name of unit to which user was admitted (this may be a name or alphanumeric details)		
7. Final diagnosis on discharge		
8. Medicine and treatment		
9. Details of referrals and/or follow-up appointments (where applicable)		
10. Relevant health education given.		
11. Signature of health care provider completing report.		

Unit 3 User health record 3

Aspects	Score	Comment
1. Name and surname of user		
2. Date of birth or identity number or passport or patient registration/unique identifier.		
3. Date of admission		
4. Date of discharge		
5. Provisional diagnosis/reason for admission		
6. Name of unit to which user was admitted (this may be a name or alphanumeric details)		
7. Final diagnosis on discharge		
8. Medicine and treatment		
9. Details of referrals and/or follow-up appointments (where applicable)		
10. Relevant health education given.		
11. Signature of health care provider completing report.		

Sub Domain 57.2.2 7 Clinical management.

Standard 57.2.2.1 7(2) (b) A health establishment must establish and maintain systems, structures and programmes to manage clinical risk.

Criterion 57.2.2.1.1 7 Standardised procedures to identify and mitigate clinical risk must be implemented during the care of vulnerable users. 57.2.2.1.1.1 Risk assessments are conducted on users.

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

Select three health records of users admitted in the unit at the time of inspection or health records from the previous month. Verify whether risk assessments are conducted. The formal risk assessments including but not limited to Waterlow or Norton scale. Score 1 if the aspect is compliant and 0 if not compliant.

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

Criterion 57.2.2.1.2 7 Systems must be in place to facilitate user identification.

57.2.2.1.2.1 All users admitted in the unit wear identity bands.

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

Select three users in the unit and verify whether they are wearing identity bands in accordance with standard operating procedure. 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 57.2.2.1.3 7 The management of emergency resuscitations must be guided and monitored to improve user outcomes.

57.2.2.1.3.1 Emergency trolley is stocked with medicines, medical supplies 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 (where applicable) and score 0 if the aspect is not available, not functional or expired (where applicable). Score paediatric items not applicable where paediatric users are not admitted in the unit.

Score	Comment		
Aspects		Score	Comment

Devices to open and protect airway.		
1. Laryngoscope handle (as determined by the user profile seen in the unit)		
2. Straight blades for laryngoscope (a minimum of two different sizes as determined by the user profile seen in the unit and resuscitation protocol)		
3. Curved blade for laryngoscope (a minimum of two different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
4. Endotracheal tubes- paediatric (a minimum of three different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
5. Endotracheal tubes- adult (a minimum of three different sizes as determined by the user profile seen in the unit and resuscitation protocol).		
6. Oropharyngeal airway (a minimum of three different sizes that accommodate both adult and paediatric users).		
7. Plaster or ties for endotracheal tubes.		
8. Lubricating gel		
Equipment for difficult Intubation.		
9. Laryngeal mask airway (a minimum of three different sizes that accommodate both adult and paediatric users)		
10. Magill forceps (adult).		
11. Magill forceps (paediatric).		
12. Introducer.		
Devices to deliver oxygen/ventilate users.		
13. Manual resuscitator device or bag and valve mask (adult)		
14. Manual resuscitator device or bag and valve mask (paediatric)		
15. Oxygen masks- re breather (adult).		
16. Oxygen Mask- re breather (paediatrics)		
17. Portable oxygen cylinder. Explanatory note: An oxygen cylinder fitted with a regulator to adjust the flowrate must be available.		
Devices to gain intravascular access.		
18. Intravenous administration sets.		
19. IV Cannulae (a minimum of three different sizes that accommodate both adult and paediatric users)		
Equipment to diagnose and treat cardiac dysrhythmias.		
20. Automated external defibrillator (AED) with pads or defibrillator with conducting gel, pads, paddles and electrodes.		

21. Cardiopulmonary resuscitation board		
Medicine.		
22. Emergency medicines according to local protocol are available and have not expired.		

57.2.2.1.3.2 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 (where applicable) and score 0 if the aspect is not available, not functional or expired (where applicable). Score paediatric items not applicable where paediatric users are not admitted in the unit.

Score	Comment	
Aspects	Score	Comment
1. Chlorhexidine or Alcohol swabs		
2. Eye protection		
3. Facemask		
4. Gloves		
5. Spare batteries for laryngoscope		
6. Spare bulb (where applicable)		
7. Syringes (a minimum of syringes of five different sizes).		
8. Catheter tip syringe 50ml		
9. Needles (a minimum of five different sizes)		
10. Scissors		
11. Tourniquet		
12. Stethoscope		
13. Nasogastric tube (a minimum of four different sizes).		
14. Suction catheters (a minimum of four different sizes)		
15. Suction devices (portable)		
16. Yankhauer suction		
17. Nasal cannula		
18. Blood administration set		

57.2.2.1.3.3 The emergency trolley and emergency equipment 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. This will include but is not limited to checking of the defibrillator/Automated External Defibrillator. Request documented records of checking from the previous month.

Not applicable: Never

Score	Comment

Criterion 57.2.2.1.4 7 Medical equipment management systems must be in place to minimise the risk of patient safety incidents related to medical equipment.

57.2.2.1.4.1 Health care personnel receive training in the use of medical equipment.

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

This includes, but is not limited to, orientation records demonstrating that in-service training or training by the supplier of new equipment has been conducted. Training must be provided for each health care personnel for each item of equipment they will be required to use in the course of performing their duties.

Not applicable: Where there was no new equipment introduced in the past twelve months.

Score	Comment

Criterion 57.2.2.1.5 7 Procedures to minimise the risk of health care-associated infections must be implemented.

57.2.2.1.5.1 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: Where sterile packs are not kept in the unit.

Score	Comment

Criterion 57.2.2.1.6 7 The management of used and soiled linen must meet infection prevention and control requirements.

57.2.2.1.6.1 The unit has a designated, access-controlled area for the storage of dirty linen.

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

Dirty linen must be stored in closed bags in a designated area (dirty linen room). The door of the dirty linen room must be kept closed and access to the room must be restricted. Reference: Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework 2020, page 70.

Not applicable: Never

Score	Comment

Criterion 57.2.2.1.7 7 The health establishment must have a functional quality management system.

57.2.2.1.7.1 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. Score not applicable where no gaps have been identified.

Score	Comment	
Aspects	Score	Comment
1. Gaps identified		
2. Activities required to address gaps		
3. Health care personnel responsible		
4. Time frames		

57.2.2.1.7.2 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

Sub Domain 57.2.3 8 Infection prevention and control programmes.

Standard 57.2.3.1 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 57.2.3.1.1 8(2)(a) The health establishment must ensure that there are hand washing facilities in every service area.

57.2.3.1.1.1 Hand washing facilities are available.

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

Select three areas in the unit and inspect the handwashing facilities for the items listed below. Score 1 If the item is available and 0 if not available.

Score	Comment

Unit 1 Area 1

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

5. Paper towel dispenser with disposable hand paper towels		
6. General waste container. Explanatory note: Containers used for the temporary storage of general waste should be leak proof, intact, corrosive resistant and have a tight-fitting lid. The container must be lined with the appropriate colour coded liner. (Practical Manual: Implementation of the National Infection Prevention and Control Strategic Framework page 82 and page 84).		

Unit 2 Area 2

Aspects	Score	Comment
1. Functional hand wash basin. Explanatory note: The basin should not be blocked, broken, or have cracks.		
2. Taps are functional and not broken. Explanatory Note: Taps must be elbow or non-touch operated in user care areas.		
3. Plain liquid soap.		
4. Wall mounted soap dispenser		
5. Paper towel dispenser with disposable hand paper towels		
6. General waste container. Explanatory note: Containers used for the temporary storage of general waste should be leak proof, intact, corrosive resistant and have a tight-fitting lid. The container must be lined with the appropriate colour coded liner. (Practical Manual: Implementation of the National Infection Prevention and Control Strategic Framework page 82 and page 84).		

Unit 3 Area 3

Aspects	Score	Comment
1. Functional hand wash basin. Explanatory note: The basin should not be blocked, broken, or have cracks.		
2. Taps are functional and not broken. Explanatory Note: Taps must be elbow or non-touch operated in user care areas.		
3. Plain liquid soap.		
4. Wall mounted soap dispenser		
5. Paper towel dispenser with disposable hand paper towels		
6. General waste container. Explanatory note: Containers used for the temporary storage of general waste should be leak proof, intact, corrosive resistant and have a tight-fitting lid. The container must be lined with the appropriate colour coded liner. (Practical Manual: Implementation of the National Infection Prevention and Control Strategic Framework page 82 and page 84).		

57.2.3.1.1.2 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			

57.2.3.1.1.3 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 57.2.3.1.2 8(2)(c) The health establishment must ensure there is clean linen to meet the needs of users.

57.2.3.1.2.1 The unit manager has determined the linen requirements for the unit.

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

It is necessary to determine the linen requirements for the unit, 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 stay in the unit. 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. A document indicating linen requirements for the unit must be available.

Not applicable: Never

Score	Comment		

57.2.3.1.2.2 Linen rooms or storage cupboards are adequately stocked and well organised.

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

Inspect the area where linen is stored to determine whether the aspects listed below are compliant. Score 1 if the aspect is compliant and 0 if not compliant.

Score	Comment		

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

Criterion 57.2.3.1.3 8(2)(d) The health establishment must ensure that health care personnel are protected from acquiring infections through the use of personal protective equipment and prophylactic immunisations.

57.2.3.1.3.1 Personal protective equipment is worn.

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

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

Score	Comment

Unit 1 Clinical Area 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 Clinical Area 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		

Unit 3 Cleaner

Aspects	Score	Comment
1. Domestic 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 57.2.4 9 Waste management.

Standard 57.2.4.1 9(1) The health establishment must ensure that waste is handled, stored, and disposed of safely in accordance with the law.

Criterion 57.2.4.1.1 9(2)(a) The health establishment must have appropriate waste containers at the point of waste generation.

57.2.4.1.1.1 The unit 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 Health care 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 unit, score not applicable.

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

Criterion 57.2.4.1.2 9(2)(b) The health establishment must implement procedures for the collection, handling, storage and disposal of waste.

57.2.4.1.2.1 Sharps are safely managed and discarded.

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

Select three clinical areas and verify whether sharps and needles are correctly managed. 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 sharp's 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 sharp's 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 sharp's container.		
4. Syringes with attached needles are discarded in their entirety		

57.2.4.1.2.2 There is a temporary health care 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 57.2.5 21 Adverse events.

Standard 57.2.5.1 21(1) The health establishment must have a system to monitor and report all adverse events.

Criterion 57.2.5.1.1 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.

57.2.5.1.1.1 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. 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 Health care 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 Health care 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 57.3 CLINICAL SUPPORT SERVICES

Sub Domain 57.3.1 10 Medicines and medical supplies.

Standard 57.3.1.1 10(1) The health establishment must comply with the provisions of the Pharmacy Act, 1974 and the Medicines and Related Substances Act, 1965.

Criterion 57.3.1.1.1 10(2)(a) The health establishment must implement and maintain a stock control system for medicine and medical supplies.

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

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

Randomly sample five items held as stock and verify whether minimum, maximum and/or reorder levels are documented. The levels must be recorded on the bin cards or equivalent. The system may be manual or electronic. Score 1 if compliant and 0 if not compliant.

Score	Comment

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

57.3.1.1.1.2 Stock levels of medicine on the shelves correspond with recorded stock levels in the stock control system.

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

Randomly sample five items held as stock and verify whether their availability corresponds with the balance indicated on the bin cards or equivalent. The system may be manual or electronic. Score 1 if compliant and 0 if not compliant.

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

57.3.1.1.1.3 The entries in the schedule 5 and 6 drug register are complete.

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

All columns in the registers must be completed comprehensively. Any omitted information noted during the review of the register will receive a non-compliant score. Verify whether all sections of the register have been completed.

Not applicable: Never

Score	Comment

57.3.1.1.1.4 Schedule 5 and 6 medicines in stock correspond with the balance recorded in the register.

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

Randomly sample 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 and 0 if not.

Score	Comment

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

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

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

Randomly sample five items held as stock and verify whether minimum, maximum and/or reorder levels are documented. The levels must be recorded on the bin cards or equivalent. The system may be manual or electronic. Score 1 if compliant and 0 if not compliant.

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

57.3.1.1.1.6 Physical stock of medical supplies corresponds with stock on the stock control system.

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

Randomly sample five items held as stock and verify whether their availability corresponds with the balance indicated on the bin cards or equivalent. The system may be manual or electronic. Score 1 if there is correspondence and 0 if not.

cards or equivalent. The system may be manual or electronic. Score 1 if there is correspondence and 0 if not.		
Score	Comment	
Aspects	Score	Comment
1. Item 1		
2. Item 2		
3. Item 3		
4. Item 4		
5. Item 5		

Criterion 57.3.1.1.2 10(2)(b) The health establishment must ensure the availability of medicines and medical supplies for the delivery of services.

57.3.1.1.2.1 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 sampled items are available and not expired (where applicable). Document the name 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
Surgical supplies		
1. Item 1		
2. Item 2		
3. Item 3		
4. Item 4		
5. Item 5		
Dressing supplies		
6. Item 1		
7. Item 2		
8. Item 3		
9. Item 4		
10. Item 5		
Laboratory supplies		
11. Item 1		
12. Item 2		
13. Item 3		
14. Item 4		
15. Item 5		
Other supplies		
16. Item 1		
17. Item 2		
18. Item 3		

19. Item 4		
20. Item 5		

Sub Domain 57.3.2 13 Medical equipment.

Standard 57.3.2.1 13(1) Health establishments must ensure that the medical equipment is available and functional in compliance with the law.

Criterion 57.3.2.1.1 13(2)(b) The health establishment must ensure that equipment is in accordance with the essential equipment list in all clinical service areas.

57.3.2.1.1.1 Functional essential medical equipment is available.

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

Request the list of medical equipment for the unit, randomly sample ten different items and check whether the sampled equipment is available and functional. Document the name of the non-compliant equipment that was sampled. Score 1 if the sampled item is available and functional or 0 if not available or not functional or if the list is not available.

Score	Comment	
Aspects	Score	Comment
1. Equipment 1		
2. Equipment 2		
3. Equipment 3		
4. Equipment 4		
5. Equipment 5		
6. Equipment 6		
7. Equipment 7		
8. Equipment 8		
9. Equipment 9		
10. Equipment 10		

Domain 57.5 FACILITIES AND INFRASTRUCTURE

Sub Domain 57.5.1 15 Engineering services.

Standard 57.5.1.1 15(1) The health establishment must ensure that engineering services are in place.

Criterion 57.5.1.1.1 15(2) The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.

57.5.1.1.1.1 Piped oxygen or Oxygen cylinder is available in the unit.

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

This is to ensure that users have access to oxygen when required. Verify whether piped oxygen or oxygen cylinder is available and functional in the unit.

Not applicable: Never

Score	Comment

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57.5.1.1.1.2 Piped or portable suction is available in the unit.

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

This is to ensure that users have access to suction when required. Verify whether piped or portable suction is available and functional in the unit.

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 Central Hospitals.

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It is hereby certified that the Regulatory Central Hospital Inspection Tools version 1.0 was developed by the Office of Health Standards Compliance.

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