

Clinical Care and Support



Facility:			
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• HEs Type: General Practice

Sector: Private

Specialization: Group practice and Single/Solo practice
 Created By: Health Standards Development and Training

2 Clinical Care And Support

Domain 2.1 USER RIGHTS

Sub Domain 2.1.1 4 User information

Standard 2.1.1.1 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 Users are informed about services offered in the practice.

Assessment type: Observation - Risk rating: Essential measure

Information on services provided to users must be available. Services could include but is not limited to management of minor ailments, minor surgical procedures, chronic disease management, travel health, reproductive health and provision of SONARs. The information may be available or displayed at the entrance of a practice which is the sole occupant of a building, or in the foyer or waiting room of a practice that shares a building with other businesses. The information can be on a poster, manual or electronic notice board, booklets or pamphlets or a notice indicating that the information is available on the practice's website.

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 Users are informed about the practice operating hours.

Assessment type: Observation - Risk rating: Essential measure

The information can be displayed in the practice or available in booklets or pamphlets which are made available to users or a notice indicating the information is available on the practice's website.

Not applicable: Never

Score	Comment

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.

2.1.1.3.1 A system to provide users with information on the complaints management procedure is available.

Assessment type: Observation - Risk rating: Essential measure

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"HPCSA Booklet 3 (2.12) Complaints about health services. Everyone has the right to complain about health care services, to have such complaints investigated and to receive a full response on such investigation". There must be a system in place to inform users on the procedure for lodging complaints in the practice. The system could include but is not limited to information displayed (posters or pamphlets or notice) within the practice informing users about the complaints procedure or where to access information about complaints procedure. This can be a manual or electronic system.

Not applicable: Never

Score	Comment

Criterion 2.1.1.1.4 4(2)(b) The health establishment must provide users with information relating to any fees that are payable for health care services, insofar it being practical to do so before the commencement of the provision of health care services.

2.1.1.4.1 Users are informed of indicative costs related to services provided by the practice prior to these costs being incurred.

Assessment type: Observation - Risk rating: Essential measure

This requirement refers to an indicative, not definitive cost and applies to interventions to be provided by the practice only including but not limited to assessment, investigation, management of their condition and surgical procedures. HPCSA Booklet 2 (7.6) A practitioner shall explain to the users the benefits, costs and consequences associated with each service option offered. This requirement reflects S6(1)(c) of the National Health Act. Routine costs, e.g. private consult tariff, consultation costs, can be communicated by means of a poster or notice at reception or a notice indicating the information about the costs on the practice's website. This notice can include a disclaimer indicating the user's responsibilities and additional costs should be communicated at the time that the service is recommended.

Not applicable: Never

Score	Comment

Criterion 2.1.1.1.5 4(2)(c) The health establishment must display the results of user experience of care surveys conducted within the past twelve months.

2.1.1.1.5.1 Results of the user experience of care survey are displayed.

Assessment type: Observation - Risk rating: Essential measure

The results from the most recent user experience of care survey for the practice must be visibly displayed.

Alternatively, there must be a notice informing users on how to access the user experience of care survey results for the practice. The survey must have been conducted within 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 system to prioritise users requiring urgent care is implemented.

Assessment type: Observation - Risk rating: Vital measure

Observe whether the system to prioritise users is implemented. This system could include the availability of a health care personnel (such as a doctor or a nurse or a receptionist) to identify users that require urgent care or a notice displayed in waiting areas or an electronic display or any other system.

Not applicable: Where there are no users requiring prioritisation at the time of inspection.

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Score	Comment

2.1.2.1.1.2 Healthcare personnel are familiar with the system to prioritise users.

Assessment type: Staff interview - Risk rating: Vital measure

Interview three health care personnel to establish understanding of the system to prioritise users that require urgent care in the practice. This system could include the availability of a health care personnel (such as a doctor or a nurse or a receptionist) to identify users that require urgent care or a notice displayed in waiting areas or an electronic display or any other system. Score 1 if compliant and score 0 if compliant. Where the practice has less than three health care personnel score not applicable for the other aspects

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

Assessment type: Observation - Risk rating: Essential measure

Check whether public and private emergency medical services contact numbers are available.

Not applicable: Never

Score	Comment

Criterion 2.1.2.1.3 5 The practice must provide users with information on how to access emergency care when the practice is closed.

2.1.2.1.3.1 Users are provided with emergency contact details.

Assessment type: Observation - Risk rating: Essential measure

The practice must have a system to inform users on how to access emergency care outside the operating hours of the practice. This could be the numbers of the general practitioner or emergency medical services details. A visible notice providing users with instructions on how to access emergency care. The notice can be manual or electronic.

Not applicable: Never

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Score	Comment			

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

2.1.2.2.1.1 Copies of referral documents are available at the practice making the referral.

Assessment type: Document - Risk rating: Essential measure

Request the copies of referral document (this could be a letter or form) of the three users referred out of the practice in the previous three months. The document can be manual or electronic. Score 1 if the referral document contains the aspect listed below and score 0 if the aspect listed below is not documented. Score not applicable if there were no users referred out in the previous three months. (Referral Policy for South African Health Services and Referral Implementation Guidelines, August 2020.pg 16).

Score	Comment

Unit 1 User 1

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

Unit 2 User 2

Aspects	Score	Comment
1. Name of user		
2. Name of referring practice or health care provider		
3. Name of receiving health establishment or health care provider		
4. Reason for referral		
5. Summary of clinical details.		
<u>Explanatory note</u> : This will include but is not limited to presenting complaint(s), examination findings, investigations conducted, diagnosis or provisional diagnosis, and treatment provided.		

Unit 3 User 3

Aspects	Score	Comment
1. Name of user		

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2. Name of referring practice or health care provider	
3. Name of receiving health establishment or health care provider	
4. Reason for referral	
5. Summary of clinical details.	
Explanatory note: This will include but is not limited to presenting complaint(s),	
examination findings, investigations conducted, diagnosis or provisional	
diagnosis, and treatment provided.	

Criterion 2.1.2.2.2 5 The practice must implement a system for the referral of users to other service providers.

2.1.2.2.1 Contact details of service providers in the referral chain are available.

Assessment type: Observation - Risk rating: Essential measure

Check whether the public and private hospitals and clinics are in the referral chain document. The document can also include but is not limited to specialist rooms, therapeutic support services, Non-Governmental Organisations or Non- Profit Organisations.

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 records are secured.

Assessment type: Observation - Risk rating: Essential measure

Observe if the health records are secured, this will include but not limited to a security gate which is lockable or access control measures, e.g. a tag/card, lockable cabinets. Electronic records must be safeguarded with passwords or any other security measures. Not applicable: Never

Score	Comment

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

2.2.1.1.2.1 The Protection of Personal Information Act (POPI Act) is displayed.

Assessment type: Observation - Risk rating: Essential measure

Observe whether the Protection of Personal Information Act (POPI Act) is displayed in the practice.

Not applicable: Never

Score	Comment		

2.2.1.1.2.2 Confidentiality of health records is maintained.

Assessment type: Observation - Risk rating: Essential measure

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In line with section 14 of the National Health Act. Observe how user health records are managed in various areas within the practice and determine whether unauthorised individuals would 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 whose 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. Such records should be kept in a manner that safeguards against unauthorised access to the content of the record. Electronic records must be safeguarded with passwords or any other security measures.

Not applicable: Never

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 the aspects listed below have been recorded. Score 1 if compliant and 0 if not compliant.

Score	Comment

Unit 1 User Health Record 1

Aspects	Score	Comment
1. Name and surname		
2. Unique registration number.		
Explanatory note: This may include but is not limited to alphanumeric number, file number as used by the practice. The unique number can be generated manually or electronically.		
3. Gender/Sex		
4. Identification number or date of birth or passport number or refugee number		
5. Residential address		
6. User contact details		
7. Next of kin contact details		
8. Records should be kept in non-erasable ink and erasure fluid should not be used.		
Explanatory note: The requirement is in line with HPCSA Booklet 9 section 4.2. Not applicable where electronic records are used.		

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Unit 2 User Health Record 2

Aspects	Score	Comment
1. Name and surname		
2. Unique registration number. Explanatory note: This may include but is not limited to alphanumeric number, file number as used by the practice. The unique number can be generated manually or electronically.		
3. Gender/Sex		
4. Identification number or date of birth or passport number or refugee number		
5. Residential address		
6. User contact details		
7. Next of kin contact details		
8. Records should be kept in non-erasable ink and erasure fluid should not be used. Explanatory note: The requirement is in line with HPCSA Booklet 9 section 4.2. Not applicable where electronic records are used.		

Unit 3 User Health Record 3

Aspects	Score	Comment
1. Name and surname		
2. Unique registration number. Explanatory note: This may include but is not limited to alphanumeric number, file number as used by the practice. The unique number can be generated manually or electronically.		
3. Gender/Sex		
4. Identification number or date of birth or passport number or refugee number		
5. Residential address		
6. User contact details		
7. Next of kin contact details		
8. Records should be kept in non-erasable ink and erasure fluid should not be used. Explanatory note: The requirement is in line with HPCSA Booklet 9 section 4.2. Not applicable where electronic records are used.		

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

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

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Select three health records of users who were seen at the time of inspection or records from the previous months and verify if the aspects listed below have been recorded. Score 1 if compliant and 0 if not compliant. Score not applicable for any aspects not applicable to the user. The requirement is in line with HPCSA Booklet 9 section 4.1 and section 4.2

Score	Comment

Unit 1 User Health Record 1

Aspects	Score	Comment
1. Date of consultation		
2. Time of consultation.		
3. Allergies (where applicable)		
4. Assessment of the user's condition.		
5. Clinical management plan of the user		
6. Medication prescribed (where applicable).		
7. Details of referrals (where applicable).		
8. Adverse effects to treatment or medication (where applicable).		
9. Results of investigations requested. (where applicable).		
10. Follow-up requirements are agreed with users and documented in the user record (where applicable)		
11. Records should be kept in non-erasable ink and erasure fluid should not be used.		
Explanatory note: The requirement is in line with HPCSA Booklet 9 section 4.2. Not applicable where electronic records are used.		
12. Each entry signed by health care provider.		

Unit 2 User Health Record 2

Aspects	Score	Comment
1. Date of consultation		
2. Time of consultation.		
3. Allergies (where applicable)		
4. Assessment of the user's condition.		
5. Clinical management plan of the user		
6. Medication prescribed (where applicable).		
7. Details of referrals (where applicable).		

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8. Adverse effects to treatment or medication (where applicable).	
9. Results of investigations requested. (where applicable).	
10. Follow-up requirements are agreed with users and documented in the user record (where applicable)	
11. Records should be kept in non-erasable ink and erasure fluid should not be used.	
Explanatory note: The requirement is in line with HPCSA Booklet 9 section 4.2. Not applicable where electronic records are used.	
12. Each entry signed by health care provider.	

Unit 3 User Health Record 3

Aspects	Score	Comment
1. Date of consultation		
2. Time of consultation.		
3. Allergies (where applicable)		
4. Assessment of the user's condition.		
5. Clinical management plan of the user		
6. Medication prescribed (where applicable).		
7. Details of referrals (where applicable).		
8. Adverse effects to treatment or medication (where applicable).		
9. Results of investigations requested. (where applicable).		
10. Follow-up requirements are agreed with users and documented in the user record (where applicable)		
11. Records should be kept in non-erasable ink and erasure fluid should not be used. Explanatory note: The requirement is in line with HPCSA Booklet 9 section 4.2. Not applicable where electronic records are used.		
12. Each entry signed by health care provider.		

2.2.1.2.2.2 Diagnostic investigation results are available in the user's health record.

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

Select health records of three users who have had investigations done in the previous three months and assess whether the results are available in the user's health record. Score 1 if the results are available and 0 if not available. Manual or electronic health records are acceptable.

Score	Comment

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

2.2.1.2.2.3 Diagnostic investigation results are reviewed by the doctor.

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

Select health records of three users who were seen at the practice in the previous three months and verify whether the results were reviewed by the doctor. This will include but is not limited to signing the results or using a stamp or making notes in the record acknowledging the results. If using electronic systems, notes can be made indicating results have been reviewed. This can include the reviewer's electronic signature indicating that they have accessed the result and provided instruction on further management, including no action required. Score 1 if the aspect is compliant and 0 if not compliant. Score not applicable if the investigations were not requested for the user. Manual or electronic health records are acceptable.

Score	Comment		
Aspects		Score	Comment
1. User he	alth record 1		
2. User he	alth record 2		
3. User he	alth record 3		

2.2.1.2.2.4 Users are informed about the results of diagnostic investigations.

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

Select health records of three users who have had investigations done in the previous three months and assess whether evidence that the user has been informed about the results is available in the user's health record. Score 1 if compliant and 0 if not compliant.

Score	Comment		
Aspects		Score	Comment
1. User hea	Ith record 1		
2. User hea	Ith record 2		
3. User hea	lth record 3		

2.2.1.2.2.5 Action required in response to diagnostic investigation results is documented.

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

Select records of three users who have had investigations done in the previous three months and assess whether evidence of action required has been documented in the user's health record. Score 1 if the aspect is available and 0 if it is not available. Score not applicable if the investigations did not require any further action.

Score

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

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 health records of users who were seen at the time of inspection or health records from the previous three months. Verify whether an informed consent was signed for each surgical procedure. The surgical procedures would include but is not limited Voluntary Male Medical Circumcision (VMMC), Abscess drainage, Termination of Pregnancy, Mole removal. Check whether the details listed below are recorded on the consent forms. Score 1 if is recorded and 0 if it is not recorded. Score not applicable If no surgical procedures are performed in the practice.

Score	Comment

Unit 1 User Health Record 1

Aspects	Score	Comment
1. User full name(s) and surname.		
2. The user's age, date of birth or identity number.		
3. The consent form is dated.		
4. The exact nature of the procedure or treatment.		
5. A consent form is signed by the user, the legal guardian 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.		
6. The consent form is signed by the health care provider. Explanatory note: Where this is not practicable, health care provider may delegate the function to another health care provider.		

Unit 2 User Health Record 2

Aspects	Score	Comment
User full name(s) and surname.		
2. The user's age, date of birth or identity number.		

3. The consent form is dated.		
4. The exact nature of the procedure or treatment.		
5. A consent form is signed by the user, the legal guardian 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.		
6. The consent form is signed by the health care provider. Explanatory note: Where this is not practicable, health care provider may delegate the function to another health care provider.		

Unit 3 User Health Record 3

Aspects	Score	Comment
1. User full name(s) and surname.		
2. The user's age, date of birth or identity number.		
3. The consent form is dated.		
4. The exact nature of the procedure or treatment.		
5. A consent form is signed by the user, the legal guardian 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.		
6. The consent form is signed by the health care provider. <u>Explanatory note:</u> Where this is not practicable, health care provider may delegate the function to another health care provider.		

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 for priority health conditions are available in consultation rooms.

Assessment type: Document - Risk rating: Essential measure

This will include but is not limited to clinical guidelines for HIV/AIDS, Tuberculosis (TB), Non-Communicable diseases (NCD) and Maternal Health and Child health. Guidelines can be available manually or electronically.

Not applicable: Never

Score	Comment

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: Essential 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 practice.

Score	Comment			
Aspects		Score	Comment	
Disinfectan	t and cleaning materials			
1. Chlorine	releasing agent - hypochlorite (e.g. Biocide D or Clorox)			
2. Alcohol b	ased agent (70%-90%)			
3. Detergen	ts – neutral pH			
4. Cleaning	solutions are labelled			
Cleaning ed	quipment			
5. Colour la	belled mop - Red for toilets and bathrooms			
6. Colour labelled mop - Blue for Clinical and non-clinical service areas				
7. Mop labe	elled for cleaning exterior areas (where applicable)			
8. Green bu	cket and cloths for bathroom and consulting room hand washing			
9. Red buck	et and cloths for toilet			
10. White c	loths for kitchen			
11. Blue bu	cket and cloths for clinical areas and non-clinical service areas			
12. Mop sw	12. Mop sweeper or soft-platform broom			

2.2.2.1.2 The practice is observed to be clean.

Assessment type: Observation - Risk rating: Vital measure

Observe general cleanliness in all areas of the practice. 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 Users are involved in decision-making in relation to their care.

2.2.2.2.1 Users are informed of their diagnosis.

Assessment type: Patient interview - Risk rating: Essential measure

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Interview three users who have been seen by the general practitioner and verify whether they have been informed about their diagnosis. This can be a working diagnosis where a definitive diagnosis is not yet established. Score 1 if user was informed and 0 if not informed.

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

Criterion 2.2.2.2.3 7 The practice must have systems in place to ensure users requiring resuscitation receive an immediate response by health care providers trained in resuscitation.

2.2.2.3.1 Emergency bag or trolley is stocked with medicines, medical supplies and equipment.

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

Inspect the contents of the emergency bag or 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	Comment		
spects		Score	Comment
Devices to	o open and protect airway.		
	ryngeal airway (a minimum of two different sizes one for adult and ediatric users)		
Devices to	deliver oxygen/ventilate users.		
2. Oxygen	cylinder or oxygen concentrator x1		
3. Manual	resuscitator device or bag and valve mask (adult) x1		
1. Manual	resuscitator device or bag and valve mask (paediatric) x1		
5. Oxygen	Masks - re-breather (adult) x1		
5. Oxygen	Mask - re-breather (paediatric) x1		
7. Nebulisi	ng mask (Adult) x1		
3. Nebulisi	ng mask (Paediatric) x1		
9. Pulse ox rolley) x1	imeter (must be available in the vicinity not necessarily on the		

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10. Intravenous administration sets x2 sets	
11. Intravenous cannulae (a minimum of three different sizes that accommodate both adult and paediatric users)	
12. NaCl 0,9% IV solution 1000ml (a minimum of x1 vaculiter)	
13. Ringers or Balsol IV solution 1000ml (a minimum of x1 vaculiter)	
14. Half Darrows solution 200ml or 500 ml (a minimum of x1 vaculiter)	
Medicine: Emergency treatment for anaphylaxis/initiating resuscitation	
15. Adronaling 1mg amnoulo (a minimum of v1 amnoulo)	
15. Adrenaline 1mg ampoule (a minimum of x1 ampoule)	
46.14.1.6.1.1.1.40.14.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
16. Water for injection 10ml (a minimum of x1 ampoule)	
17. Hydrocortisone 100mg/2ml (a minimum of x1 ampoule)	
18. Promethazine 25mg/ml or 2ml ampoule.	
Explanatory note: This can be stored in a schedule 5 lockable cupboard or	
Doctors bag (a minimum of x1 ampoule).	
19. Aspirin 300mg tablet (a minimum of x1 tablet)	
20. Salbutamol inhalation ampules (a minimum of x1 ampoule)	
21. Diazepam 10 mg ampoule or other suitable Benzodiazepine.	
<u>Explanatory note:</u> This can be stored in a schedule 5 lockable cupboard or Doctors	
bag) (a minimum of x1 ampoule)	
22. Dextrose 5% 50ml or 100ml or 200ml (a minimum of x1 vaculiter)	
23. Naloxone 0.4mg ampoule (a minimum of x1 ampoule)	

2.2.2.3.2 Medical supplies and equipment for emergency care are available.

Assessment type: Observation - Risk rating: Vital measure

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

Score	Comment		
Aspects		Score	Comment
1. Gloves			
2. Syringes	(a minimum of two syringes of any size,2ml or 5ml or 10ml or 20ml)		
3. Needles	(a minimum of three different sizes that accommodate both adult atric users)		
4. Alcohol	swab		

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5. Plaster to secure intravenous cannulae	
6. Resuscitation protocol or Resuscitation Algorithm	
Equipment to provide cardiac compressions	
7. Cardiac resuscitation board x1	

2.2.2.3.3 The emergency bag or emergency trolley and emergency equipment are checked.

Assessment type: Document - Risk rating: Vital measure

Request a documented practice for checking the emergency bag or emergency trolley and emergency equipment. Verify whether it is checked in line with the documented practice. This must also include checking of the defibrillator/Automated External Defibrillator. Request records from the previous month. In the event that the Automated External Defibrillator is locked and serviced by an online service centre, the documentation from the service centre must be requested for the previous month.

Not applicable: Never

Score	Comment

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

Select three different service areas in the practice and use the checklist below to check whether the hand washing facilities and items listed below are available. Score 1 if the aspect is 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

Unit 1 Area 1

Aspects	Score	Comment
Functional hand wash basin.		
Explanatory note: The basin should not be blocked, broken or have cracks.		
2. Taps are functional and not broken.		
3. Plain liquid soap or wall - mounted soap dispenser.		
4. Paper towel dispenser with disposable hand paper towels		
5. General waste container. Explanatory note: This could be disposable or reusable vessels or bins in which		
waste is placed and must have an appropriate liner.		

Unit 2 Area 2

Aspects	Score	Comment

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1. Functional hand wash basin.	
Explanatory note: The basin should not be blocked, broken or have cracks.	
2. Taps are functional and not broken.	
3. Plain liquid soap or wall - mounted soap dispenser.	
4. Paper towel dispenser with disposable hand paper towels	
5. General waste container.	
Explanatory note: This could be disposable or reusable vessels or bins in which	
,	
waste is placed and must have an appropriate liner.	

Unit 3 Area 3

Aspects	Score	Comment
Functional hand wash basin.		
Explanatory note: The basin should not be blocked, broken or have cracks.		
2. Taps are functional and not broken.		
3. Plain liquid soap or wall - mounted soap dispenser.		
4. Paper towel dispenser with disposable hand paper towels		
5. General waste container.		
Explanatory note: This could be disposable or reusable vessels or bins in which waste is placed and must have an appropriate liner.		

2.2.3.1.1.2 An alcohol-based hand rub is available.

Assessment type: Observation - Risk rating: Vital measure

Select three user care areas and observe whether alcohol-based hand rub is available. Score 1 if available and 0 if not available. Where the practice has less than three areas only assess the number of available areas and score not applicable for the other aspects.

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 user care 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. The posters must be laminated or framed. Score 1 if available and 0 if not available. Where the practice has less than three areas only assess the number of available areas and score not applicable for the other aspects.

Score	Comment		

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

Criterion 2.2.3.1.2 8(2)(c) The health establishment must ensure there is clean linen to meet the needs of users.

2.2.3.1.2.1 Clean linen is available in the practice.

Assessment type: Observation - Risk rating: Essential measure

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

Not applicable: Never

Score	Comment

2.2.3.1.2.2 There is a designated area or cupboard for storage of clean linen.

Assessment type: Observation - **Risk rating:** Essential measure Observe if there is a dedicated area for storage of clean linen.

Not applicable: Never

Score	Comment		

2.2.3.1.2.3 The practice has a designated area for the temporary storage of dirty linen.

Assessment type: Observation - Risk rating: Essential measure

This is only required where the practice uses cloth linen.

Not applicable: Where only disposable linen is used.

Score	Comment

Criterion 2.2.3.1.3 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.

2.2.3.1.3.1 Health care personnel are informed about prophylactic immunisations for high-risk infections.

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

Interview three health care personnel to establish their awareness of the procedure to follow for accessing prophylactic immunisations for high-risk infections. Score 1 if complaint and score 0 if not compliant. Where the practice has less than three health care personnel available score not applicable for the other aspects.

Score	Comment				
Aspects		Score	Comment		
1. Health care personnel 1					

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2. Health care personnel 2	
3. Health care personnel 3	

Criterion 2.2.3.1.4 8 Decontamination processes provide safe, effective decontamination of medical devices.

2.2.3.1.4.1 Health care personnel responsible for decontamination can explain the procedure.

Assessment type: Staff interview - Risk rating: Essential measure

Interview three health care personnel responsible for decontamination and ask them to describe how they perform decontamination of instruments from start to finish. Score 1 if the aspect is described and 0 if not described. Score not applicable where decontamination is outsourced or in practices that utilise single use disposable instruments.

Score	Comment

Unit 1 Health care personnel 1

Aspects	Score	Comment
1. Personal protective equipment to be worn.		
2. Clean sink or bowel to be filled with water and detergent.		
3. Detergent solution to be constituted and replaced in accordance with manufacturer's instructions.		
Explanatory note: Detergent to disinfect instruments should be used.		
4. Instruments to be fully immersed in solution.		
5. Instruments to be brushed, to remove all visible material.		
Explanatory note: These actions must be performed while holding the		
instruments under water to prevent splash injury to the health care		
provider/worker.		
6. Instruments to be rinsed.		
7. Instruments to be dried before disinfecting.		
8. Sterile packaging to be done according to procedure.		
9. In-pack chemical indicator to be placed in all sets and towels.		
10. Tracking system indicators to be marked on packs and sets.		
11. Packing is done in wraps or containers according to the manufacturer's instructions and SANS standards (ISO 11607)		
12 Starage to encure the integrity of meterials		
12. Storage to ensure the integrity of materials. Explanatory note: The manner in which sterile packs are stored must prevent		
physical damage to packages, avoid exposure of packages to moisture.		

Unit 2 Health care personnel 2

Aspects	Score	Comment
1. Personal protective equipment to be worn.		

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2. Clean sink or bowel to be filled with water and detergent.	
2. Detergent solution to be constituted and replaced in accordance with	
3. Detergent solution to be constituted and replaced in accordance with manufacturer's instructions.	
Explanatory note: Detergent to disinfect instruments should be used.	
<u>Explanatory note.</u> Detergent to distinect instruments should be used.	
4. Instruments to be fully immersed in solution.	
5. Instruments to be brushed, to remove all visible material.	
Explanatory note: These actions must be performed while holding the	
instruments under water to prevent splash injury to the health care	
provider/worker.	
6. Instruments to be rinsed.	
7. Instruments to be dried before disinfecting.	
8. Sterile packaging to be done according to procedure.	
c. Sterile publicating to be done decorating to procedure.	
9. In-pack chemical indicator to be placed in all sets and towels.	
10. Tracking system indicators to be marked on packs and sets.	
11. Packing is done in wraps or containers according to the manufacturer's	
instructions and SANS standards (ISO 11607)	
12. Storage to ensure the integrity of materials.	
Explanatory note: The manner in which sterile packs are stored must prevent	
physical damage to packages, avoid exposure of packages to moisture.	

Unit 3 Health care personnel 3

Aspects	Score	Comment
1. Personal protective equipment to be worn.		
2. Clean sink or bowel to be filled with water and detergent.		
3. Detergent solution to be constituted and replaced in accordance with manufacturer's instructions. Explanatory note: Detergent to disinfect instruments should be used.		
4. Instruments to be fully immersed in solution.		
5. Instruments to be brushed, to remove all visible material. <u>Explanatory note:</u> These actions must be performed while holding the instruments under water to prevent splash injury to the health care provider/worker.		
6. Instruments to be rinsed.		
7. Instruments to be dried before disinfecting.		
8. Sterile packaging to be done according to procedure.		
9. In-pack chemical indicator to be placed in all sets and towels.		

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10. Tracking system indicators to be marked on packs and sets.
11. Packing is done in wraps or containers according to the manufacturer's instructions and SANS standards (ISO 11607)
12. Storage to ensure the integrity of materials. Explanatory note: The manner in which sterile packs are stored must prevent physical damage to packages, avoid exposure of packages to moisture.

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

2.2.4.1.1.1 Health care waste is managed in line with 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	Comment

Unit 1 Consulting Room

Aspects	Score	Comment
1. Health care risk waste disposal bins with functional lid 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. Sharps container. Explanatory note: Sharps are disposed of in impenetrable, tamperproof containers that is not overflowing.		
5. Expired or obsolete medicine is placed in a dark green container marked with the words "Pharmaceutical waste liquid or solid. Explanatory note: The container can also be located in the Medicine storage or dispensing area.		
6. General waste container. Explanatory note: This could be disposable or reusable vessels or bins in which waste is placed and must have an appropriate liner (black, beige, white, or transparent packaging can be used)		

Unit 2 Procedure room (where applicable)

Aspects	Score	Comment
Health care risk waste disposal bins with functional lid or health care risk waste box.		

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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. Sharps container. <u>Explanatory note</u> : Sharps are disposed of in impenetrable, tamperproof containers that is not overflowing.	
5. Anatomical waste (Red bucket with sealable lid). Explanatory note: Applicable where anatomical waste is generated. Score not applicable where anatomical waste is not generated in the practice.	
6. General waste container. Explanatory note: This could be disposable or reusable vessels or bins in which waste is placed and must have an appropriate liner (black, beige, white, or transparent packaging can be used)	

Unit 3 Waiting area

Aspects	Score	Comment
General waste container. Explanatory note: This could be disposable or reusable vessels or bins in which waste is placed and must have an appropriate liner (black, beige, white, or transparent packaging can be used)		

Unit 4 Bathroom

Aspects	Score	Comment
1. Sanitary bins (box or container)		
2. General waste container. Explanatory note: This could be disposable or reusable vessels or bins in which waste is placed and must have an appropriate liner (black, beige, white, or transparent packaging can be used)		

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

2.3.1.1.1.1 The practice has a system to order medicines and medical supplies.

Assessment type: Observation - Risk rating: Essential measure

Observe if there is a system to order medicine and medical supplies in place. The system can be manual or electronic. Score 1 if compliant and 0 if not compliant.

Score	Comment		
Aspects		Score	Comment

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1. Medicines	
2. Medical supplies	

2.3.1.1.1.2 The practice monitors stock levels of medical supplies.

Assessment type: Observation - Risk rating: Vital measure

Randomly sample three 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 any other system used by the practice. 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			

2.3.1.1.3 The practice monitors stock levels of medicine.

Assessment type: Observation - Risk rating: Vital measure

Randomly sample three medicines held as stock and verify whether minimum, maximum and/or reorder levels are documented. The levels must be recorded on the bin cards, or any other system used by the practice. In non-dispensing practices, this will be the emergency medicines held as stock. The system may be manual or electronic. Score 1 if compliant and 0 if not compliant.

Score	Comment		
Aspects		Score	Comment
1. Medicin	e 1		
2. Medicin	e 2		
3. Medicin	e 3		

Criterion 2.3.1.1.2 10(2)(b) The health establishment must ensure the availability of medicines and medical supplies for the delivery of services.

2.3.1.1.2.1 Medicines are available in the practice.

Assessment type: Observation - Risk rating: Vital measure

Request the list of medicines for the practice. In non-dispensing practices, this will be the emergency medicines held as stock. Randomly sample five items and check whether the medicines are available and not expired. Document the names of the non-compliant medicine that was sampled. Should medicines be out of stock, substitutions will be accepted where medicine list or guidelines used by the practice recommends equivalent medicines for treatment. Score 1 if the sampled items are available and not expired and score 0 if not available or expired or if there is no list of medicines available.

Score	Comment

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

2.3.1.1.2.3 Cold chain for thermolabile medicines is maintained.

Assessment type: Observation - Risk rating: Vital measure

Use the checklist below to verify whether the cold chain for thermolabile medicines are maintained. Score 1 if compliant with the aspect below and 0 if not compliant. Score not applicable where the practice does not keep thermolabile medicine.

Score	Comment		
Aspects		Score	Comment
1. Medicin	e refrigerator is available. y note: The medicine fridge must not contain any food items or		
Explanator a day, 7-12 temperatu and should	perature of the refrigerator is monitored. y note: The temperature of the refrigerator must be monitored twice hours apart, and maintained between 2 and 8 degrees Celsius. The re monitoring could be done manually or using an electronic device d be recorded. Check records from the previous three months, for monitoring historic readings must be made available for review.		

2.3.1.1.2.4 Basic medical supplies (consumables) are available.

Assessment type: Observation - Risk rating: Vital measure

Observe whether the items listed below are available and not expired (where applicable). Document the names of the non-compliant items. Score 1 if the item is available and not expired (where applicable) and 0 if not available or expired.

Score	Comment		
Aspects		Score	Comment
1. Non-ster	ile gloves		
2. Sterile glo			
Explanatory	note: Only applicable where sterile procedures are performed.		
3. Disposab	le gowns or aprons		
4. N95 or K	N95 or FFP2 respirators or approved equivalent		
5. Oxygen f	ace mask or reservoir mask or nasal cannula (prongs) for oxygen		

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6. Nebuliser mask (Adult)	
7. Nebuliser mask (Paediatric)	
8. Intravenous cannulae	
9. Intravenous administration set	
10. Suture material	
11. Basic dressing pack	
12. Scalpel blades	
13. Disposable eye patches	
14. Gauze swabs	
15. Cotton wool balls	
16. Bandage crepe	
17. Alcohol swabs	
18. Syringes	
19. Needles	
20. Plaster roll or Adhesive micro-porous surgical tape	
21. Spatula	
22. Lancets	
23. Blood glucose strips	
24. Urine dipsticks	
25. Pregnancy tests	
26. Urine specimen jar or flask	
27. Vacutainer blood collection tubes. Explanatory note: Not applicable where phlebotomy is not done at the practice.	
28. Venepuncture needles. Explanatory note: Not applicable where phlebotomy is not done at the practice.	
29. Vacutainer needle holder. <u>Explanatory note:</u> Not applicable where phlebotomy is not done at the practice.	
30. Pap smear collection materials. Explanatory note: Not applicable where pap smear is not done at the practice.	

Criterion 2.3.1.1.3 10 The practice must implement controls for the management, recording and distribution of medicines listed in Schedules 5 and 6 of the Medicines and Related Substances Act.

2.3.1.1.3.1 Schedule 5 and 6 medication storage area is kept locked.

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Score	Comment			
3.1.1.3.2 ⊺	he entries in the schedule 5 and 6 drug register are complete.			
columns i sult in a no other hea	type: Document - Risk rating: Vital measure in the registers must be completed comprehensively. Any omitted inforcon-compliant score. Verify whether all sections of the register have been lith care provider to counter sign the entries. Solicing Description Desc	en completed	=	_
Score	Comment			
andomly sa orresponds	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is corresports not keep schedule 5 or schedule 6 medicine.	and verify wh	nether the quantity availa	
andomly sa orresponds	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is correspon	and verify wh	nether the quantity availa	
andomly sa orresponds ractice doe	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is corresponses not keep schedule 5 or schedule 6 medicine.	and verify wh	nether the quantity availa	
andomly sa prresponds ractice doe Score	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is correspons not keep schedule 5 or schedule 6 medicine. Comment	and verify wh	nether the quantity availant. Score not applicable v	
andomly sa prresponds ractice doe Score	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is correspons not keep schedule 5 or schedule 6 medicine. Comment The provided in the register of the regist	and verify wh	nether the quantity availant. Score not applicable v	
andomly sa prresponds ractice doe Score Aspects 1. Medicir	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is corresponds not keep schedule 5 or schedule 6 medicine. Comment The 1	and verify wh	nether the quantity availant. Score not applicable v	
Aspects 1. Medicir 2. Medicir 3. Medicir	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is corresponses not keep schedule 5 or schedule 6 medicine. Comment The 1 The 2 The 3 3.1.1.4 10 Medicines must be stored and managed in compliance with Substances Act 101 of 1965 and the relevant rules and regulations.	and verify whendence 0 if no Score	Comment Comment Acy Act 53 of 1974, the N	where the
andomly sa orresponds ractice doe Score Aspects 1. Medicir 2. Medicir 3. Medicir riterion 2.3 nd Related .3.1.1.4.1 N	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is corresponds not keep schedule 5 or schedule 6 medicine. Comment The 1 The 2 The 3 S.1.1.4 10 Medicines must be stored and managed in compliance with	and verify whendence 0 if no Score	Comment Comment Acy Act 53 of 1974, the N	where the
andomly sa orresponds ractice doe Score Aspects 1. Medicir 2. Medicir 3. Medicir riterion 2.3 nd Related 3.1.1.4.1 N ssessment	type: Observation - Risk rating: Vital measure ample three medicines from the schedule 5 and 6 medicine cupboard as with the balance recorded in the register. Score 1 if there is correspons not keep schedule 5 or schedule 6 medicine. Comment The 1 The 2 The 3 B.1.1.4 10 Medicines must be stored and managed in compliance with Substances Act 101 of 1965 and the relevant rules and regulations. Medicines in the practice are stored and managed in accordance with Compliance with Compliance with Compliance in the practice are stored and managed in accordance with Compliance with Compliance with Compliance in the practice are stored and managed in accordance with Compliance with	Score Score	Comment Com	Medicin

Score	Comment		
Aspects		Score	Comment
1 Chaluas a	r cupboards or medicine trolley allows for rotation of medicines.		
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3. Medicines are stored according to a classification system.		
<u>Explanatory note:</u> Verify the classification system used by the practice, including but not limited to storage by formulation, physiological system, alphabetical order, or another method, and confirm that the selected system is followed.		
4. There are security and access control measures in the medicine storage area <u>Explanatory note:</u> The medicine storage area will include but is not limited to a medicine trolley, medicine room, or medicine cupboard.		
5. System is in place to prevent the expiry of medicines <u>Explanatory note:</u> Observe whether there is a system to check expiry dates. This will include but is not limited to a colour-coded system for items that expire in a certain month, documentation of expiry dates in a book, First expired First out (FEFO) or any other system.		
6. No expired medicines are observed in the practice.		
7. There are no medicines stored in direct contact with the floor. Explanatory note: There are no medicines/ medicine boxes stored in direct contact with the floor. Acceptable storage methods will include but are not limited to, shelves, cupboards, or storage on wooden pallets. Not applicable: Where the practice does not store medicine for dispensing.		
8. The temperature where medicine is stored is recorded daily. Explanatory note: This is to assess whether the practice consistently monitors the temperature. Request temperature monitoring sheets from the previous three months		
9. The temperature of the medicine storage area must be between 15 and 25 degrees Celsius.		

Criterion 2.3.1.1.5 10 The practice must ensure that medication is prescribed in accordance with legislation and best practice guidelines.

2.3.1.1.5.1 Users are informed about their medicines.

Assessment type: Patient interview - Risk rating: Vital measure

Interview three users who have received medicines and verify whether they have been informed about the aspects listed below. Score 1 if user was informed and 0 if not informed. Score not applicable if the practice does not dispense medicine.

Score	Comment

Unit 1 User 1

Aspects	Score	Comment
1. The user is informed about what each medicine is for.		
2. The user is informed when to take the medicine.		

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3. The user is informed about how to take each medication (the route)	
4. The user is informed whether to take the medicine with or without food.	
5. The user is informed about the most common side-effects they could expect from the medicine	
6. The user is provided with an opportunity to ask any questions or discuss any concerns about their medicine.	

Unit 2 User 2

Aspects	Score	Comment
1. The user is informed about what each medicine is for.		
2. The user is informed when to take the medicine.		
3. The user is informed about how to take each medication (the route)		
4. The user is informed whether to take the medicine with or without food.		
5. The user is informed about the most common side-effects they could expect from the medicine		
6. The user is provided with an opportunity to ask any questions or discuss any concerns about their medicine.		

Unit 3 User 3

Aspects	Score	Comment
1. The user is informed about what each medicine is for.		
2. The user is informed when to take the medicine.		
3. The user is informed about how to take each medication (the route)		
4. The user is informed whether to take the medicine with or without food.		
5. The user is informed about the most common side-effects they could expect from the medicine		
6. The user is provided with an opportunity to ask any questions or discuss any concerns about their medicine.		

Criterion 2.3.1.1.6 10 The practice ensures that medication is dispensed in accordance with legislation, and to minimise the risk of user harm.

2.3.1.1.6.1 Medicines dispensed for users are labelled as per applicable legislation.

Assessment type: Observation - Risk rating: Vital measure

Request permission from three users to assess the medicine that has been dispensed to them on the day of the inspection. Verify whether the medicine dispensed complies with the requirements listed below. Score 1 if the aspect is compliant and 0 if not compliant. Score not applicable if the practice does not dispense medicine.

Score	Comment		

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Unit 1 User 1

Aspects	Score	Comment
1. The label includes the name of the user		
2. The label includes the name of the medicine.		
3. The label includes the strength of the medicine.		
4. The label includes the dosage of the medicine		
5. The label includes the route of administration for the medicine		
6. The label includes the frequency with which the medicine should be taken		
7. The label includes the duration for which the medicine should be taken (where applicable)		
8. The expiry date of the medicine is visible.		

Unit 2 User 2

Aspects	Score	Comment
1. The label includes the name of the user		
2. The label includes the name of the medicine.		
3. The label includes the strength of the medicine.		
4. The label includes the dosage of the medicine		
5. The label includes the route of administration for the medicine		
6. The label includes the frequency with which the medicine should be taken		
7. The label includes the duration for which the medicine should be taken (where applicable)		
8. The expiry date of the medicine is visible.		

Unit 3 User 3

Aspects	Score	Comment
1. The label includes the name of the user		
2. The label includes the name of the medicine.		
3. The label includes the strength of the medicine.		
4. The label includes the dosage of the medicine		

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5. The label includes the route of administration for the medicine	
6. The label includes the frequency with which the medicine should be taken	
7. The label includes the duration for which the medicine should be taken (where applicable)	
8. The expiry date of the medicine is visible.	

2.3.1.1.6.2 Medicines are dispensed by licensed health care providers.

Assessment type: Observation - Risk rating: Vital measure

Observe whether medicine is dispensed to users by a licensed health care provider in terms of Medicines and Related Substances Act, 1965 General Regulations section 14(4).

Not applicable: Where the practice does not dispense medication.

Score	Comment

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 Functional medical equipment is available.

Assessment type: Observation - Risk rating: Vital measure

Use the checklist below to check whether medical equipment is available and functional in the practice. Score 1 if the item listed is available and functional and score 0 if it is not available or functional.

Score	Comment				
Aspects		Score	Comment		
Essential ba	asic equipment: Explanatory note_ The basic equipment listed in this	section mu	st be available in the		
1. Stethosco	ppe				
2. Blood pre	2. Blood pressure machine (manual or electronic/digital)				
3. Stadiome	3. Stadiometer (to measure height)				
4. Adult wei	4. Adult weighing scale				
5. Baby weighing scale(where applicable)					
6. Diagnostic sets, including ophthalmic pieces (wall-mounted or portable)					
7. Tape mea	7. Tape measure				
8. Thermon	8. Thermometer				

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9. Gestation calculator (Manual or electronic).		
10. Foetal stethoscope or handheld Doppler or Sonar(where applicable)		
11. Eye chart (Snellen or equivalent), alphabet/illiterate		
12. Patella hammer		
13. Tuning fork		
14. Cusco speculum or disposable vaginal speculum.		
15. Examination couch/table		
16. Bed steps		
17. Peak flow meter-adult		
18. Peak flow meter-paediatric(where applicable)		
19. Nebuliser machine. <u>Explanatory note</u> : Not applicable in the event that oxygen is used to connect the nebulising mask to administer medication		
20. Glucometer		
Equipment for minor surgical procedures. Explanatory note: Score not applicab required in the practice.	le for equip	ment not utilised or
21. Ceiling or wall mounted or portable examination light.		
22. Suture pack		
23. Dressing cart/trolley		
24. Electrocautery machine		
25. Forceps		
26. Suture holder		
27. Swab holder		
28. Scalpel/BP handle		

Domain 2.5 FACILITIES AND INFRASTRUCTURE

Sub Domain 2.5.2 14 Management of buildings and grounds

Standard 2.5.2.1 *14(1)* The health establishment and their grounds must meet the requirements of the building regulations.

Criterion 2.5.2.1.1 14(2)(a) The health establishment must as appropriate for the type of buildings and grounds of the establishment have all the required compliance certificates in terms of the building regulations.

2.5.2.1.1.1 Fire extinguishing devices are serviced.

Assessment type: Observation - Risk rating: Vital measure

Each fire extinguishing device must be serviced annually and should have a label indicating the date that it was serviced and the date that the next service is due.

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Ν	lot	app	licat	ole:	Nev	/er

Score	Comment

Criterion 2.5.2.1.2 14(2)(b) The health establishment must as appropriate for the type of buildings and grounds of the establishment have a maintenance plan for buildings and the grounds.

2.5.2.1.2.1 The practice building is maintained.

Assessment type: Observation - Risk rating: Vital measure

Observe the condition of the various areas of the building(s) using the aspects listed below. Score 1 if compliant and score 0 if not compliant. Score not applicable if the health establishment does not have the listed areas or the aspects.

Score	Comment		
Aspects		Score	Comment
1. Walls a	re not damaged		
2. The cei	ling is not damaged.		
3. Gutters	or PVC pipes are intact and not damaged.		
4. The do	ors are in working condition and not damaged.		
5. Lights a	re functional and not broken.		
6. Windov	ws are in working condition (Glass or handles are not broken).		
7. The floo	or is not damaged.		
8. The toil	ets are functional and not broken.		

Criterion 2.5.2.1.3 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.

2.5.2.1.3.1 The practice has natural ventilation or functional mechanical ventilation.

Assessment type: Observation - Risk rating: Vital measure

Observe if all areas of the practice have passive ventilation (windows and doors that can be opened or ventilation grilles) or functional mechanical ventilation (i.e. Ducting system).

Not applicable: Never

Score	Comment

Sub Domain 2.5.3 15 Engineering services

Standard 2.5.3.1 15(1) The health establishment must ensure that engineering services are in place.

Criterion 2.5.3.1.1 15(2) The health establishment must have 24-hour electrical power, lighting, medical gas, water supply and sewerage disposal system.

2.5.3.1.1.1 The practice has a functional piped water supply system.

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Assessment type: Observation - Risk rating: Vital measure The water supply for the practice must be connected to the reticulation system. Not applicable: Never Score Comment **2.5.3.1.1.2** Emergency water supply is available. Assessment type: Observation - Risk rating: Vital measure Emergency water supply must always be available in case of water supply interruptions. Water can be made available through but not limited to containers with lids or water tanks e.g. JoJo tank, Roto tank or water supplied by service providers. Not applicable: Never Score Comment **2.5.3.1.1.3** The sewerage system is functional. Assessment type: Observation - Risk rating: Vital measure Rudimentary visual inspections of the sewerage system are carried out to check if there are no overflowing sewerage drains, leaking pipes or other potential hazards. Not applicable: Never Score Comment 2.5.3.1.1.4 An oxygen cylinder is available in the practice. Assessment type: Observation - Risk rating: Non-negotiable measure

Verify whether an oxygen cylinder with a functional gauge is available, oxygen levels must not be below the minimum level indicated in the gauge.

Not applicable: Where an oxygen concentrator is used

Score	Comment

2.5.3.1.1.5 Oxygen concentrator is available and functional.

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

Please note that where an oxygen concentrator is used, a backup electricity supply must be available to ensure that the unit will be functional during interruptions in electricity supply.

Not applicable: Where oxygen cylinders are used.

Score	Comment		

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Sub Domain 2.5.1 17 Security services

Standard 2.5.1.1 *17(1)* The health establishment must have systems to protect users, health care personnel and property from security threats and risks.

Criterion 2.5.1.1.1 17(2)(a) The health establishment must ensure that security staff are capacitated to deal with security incidents, threats and risks.

2.5.1.1.1.1 Systems are in place to ensure safety in the practice.

Assessment type: Observation - Risk rating: Essential measure

Verify whether a security system is in place. Security systems could include but are not limited to physical security personnel or functional systems (Closed Circuit Television(CCTV), security gate with controlled access, boom gates, biometrics, contracted armed response).

Not applicable: Never

Score	Comment

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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 General Practices.

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It is hereby certified that the Regulatory General Practice Inspection Tools version 1.1 was developed by the Office of Health Standards Compliance.

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