Private Health Facility Inspection and Evaluation Checklist for South Australia

Government of South Australia
SA Health

☐ **New Private Hospital** (overnight stay) ☐ **New Private Day Procedure Centre** (same day treatment) ☐ **Alteration/Extension of licensed premises**

Name of Facility: …… **Date of inspection:** …….

Facility representative: ……

Feedback and questions can be directed to: healthlicensing@sa.gov.au or phone 8463 6134

SECTION A - Infection Prevention and Control	YES	NO	N/A	Comments
1. Handwashing facilities are available throughout the facility in accordance with the requirements of the Australasian Healthcare Facility Guidelines.				
2. Liquid soap is available at the hand basin.				
3. Paper towel is available at the hand basin.				
4. Waste bins are located close to the hand basin.				
5. Alcohol-based hand rubs are available at point of care.				
6. Appropriate personal protective equipment (PPE) is available in procedure rooms (gloves, gowns/aprons, eye & face protection).				
7. Appropriate sized sharps containers are available – these are secured to a trolley, wall mount or point of use tray.				
8. Waste management plan is in place including management of medical waste bins.				
9. Air sampling test results meet requirements.				
10. A room/area for cleaning reusable medical equipment is available in accordance with AS/NZ 4187:2014 & Gastroenterological Society of Australia. (GESA) guidelines.				

SECTION A - Infection Prevention and Control	YES	NO	N/A	Comments
11. A storage area is available for clean/sterile reusable equipment & consumables in accordance with AS/NZ 4187. a. Sterile stock areas HEPA filtered b. Humidity controlled = ……% humidity. c. Protected from sunlight d. Room temp = …….^{o}C e. Evidence of stock rotation f. Do packs have protection from damage? g. Are dust covers present? h. Suitable storage shelving: i. Bottom of shelving is ……cm off the floor j. Outside cardboard boxes are used for storing sterile stock k. Sterile stock storage cupboard doors are vented?				
12. Window finishes (blinds, curtains, frosting etc.).				
13. Dust capture points.				
14. Furnishings - Infection control assessment only.				
15. Floor coverings.				
16. Linen.				
17. Single use items.				
18. Multiple use solutions or medications.				
19. Cleaning solutions.				
20. General Overall Cleanliness of facility				
21. Water distribution operation, and maintenance plan is in place.				

ASSESSMENT SUMMARY		
Problem areas identified (cite item number/s)		
Any other problem areas identified		
Remedial actions agreed		
Timeline agreed (Review date)		
Overall Assessment decision		
All requirements met?	**YES**	**NO**
Inspector's Name: …… **Inspector's Signature:** ……		

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SECTION B - Infrastructure	YES	NO	N/A	Comments
1. General access				
2. Emergency access				
3. Emergency procedures – plans and procedures for emergency personnel and required equipment.				
4. Is there a fire safety risk assessment and management plan in place? Confirm placement of extinguishers.				
5. Managing the deteriorating patient.				
6. Appropriate escalation and retrieval plans are in place including access to relevant equipment.				
7. After hours patient contact and referral services for patients.				
8. Consent – is there a process for informed consent for patients.				
9. Patient privacy -including post op recovery.				
10. Are patient information sheets available?				

SECTION B - Infrastructure	YES	NO	N/A	Comments
11. Drug storage including storage, administration and disposal.				
12. Record management				
13. Operating or Procedure rooms are air-conditioned.				
14. Room numbering and room identification is clearly identifiable.				
15. Prevention of scalding				
16. Toilets -staff and patients				
17. Staff change rooms				
18. Communication and call bells.				
19. Duress alarms				
20. Security				
21. Has the facility has been accredited according to the National Safety and Quality Health Service Standards? Is evidence available?				
22. Has the facility been assessed for compliance with AS 4187? Is evidence available?				
23. Is there a Worker Health and Safety Plan / Occupational Health and Safety Plan?				
24. Reverse osmosis (if present.)				
25. Plumbing certification. Including commissioning water testing results if applicable.				
26. Electrical Certification				

ASSESSMENT SUMMARY		
Problem areas identified (cite item number/s)		
Any other problem areas identified		
Remedial actions agreed		
Timeline agreed (Review date)		
Overall Assessment decision		
All requirements met?	**YES**	**NO**
Inspector's Name: …… **Inspector's Signature:** ……		

Private Health Facility Inspection and Evaluation Checklist – Additional Information

Not all item numbers have additional information

SECTION A - Infection Prevention and Control

1. Handwashing facilities are available throughout the facility in accordance with the requirements of the Australasian Healthcare Facility Guidelines (AusHFG).

a. Placement of hand basins and set up are in accordance with to AS 1071:2015
b. Hand washbasins need to be selected so as to reduce the risk of splashing in areas where direct patient care is provided.
c. The combination of hand washbasin and tapware needs to be coordinated so that water discharge from the tap outlet is not directly onto the waste outlet / sealed trap of the basin.
d. Hand wash basins should be installed to ensure a snug fit with wall or countertop, with junctions sealed to prevent water leaks.
e. Water being present around hand washbasins or sinks encourages the development of mould and bacteria in any substrate material. Where countertops occur, these need to be properly sealed and maintained.
f. Integral splashbacks can also help to eliminate the need for junctions that require caulking.
g. Mirrors should not be installed at hand scrub stations or at hand washing stations in food preparation areas, nurseries, clean and sterile supply areas, or other areas where infection control can be compromised by hair grooming.
h. Tapware suitable for the type of basin; the water discharge point should be a minimum 260mm above the bottom of the hand wash basin for clinical hand washing.

Hand Cream and Lotion

i. Locate a moisturising cream/lotion dispenser at or near each hand basin.
j. Dispensers should be no refillable.
k. Hand cream/lotion should be compatible with all hand hygiene products.

Refer to AS 1071:2015 and AusHFG for requirements.

2. Liquid soap is available at the hand basin

a. Soap dispensers should be a non-refillable type.
b. Positioned so that spills from the dispenser can be captured / spills onto floors should be avoided.
c. All basins should be provided with near neutral pH soap.
d. Clinical basins and scrub troughs should, in addition, be provided with antimicrobial liquid soap. Soap dispensers are to be the closed-cartridge type and are to be mounted on or above the splashback.

Refer to AS 1071:2015 and AusHFG for requirements.

3. Paper towel is available at the hand basin

Hand Drying

a. Single use cloth or paper towels will be provided at all hand basins.
b. Locate towel dispensers adjacent to the splashback to prevent splash contamination.
c. Dispensers should be smooth-surfaced and easy to clean to prevent dust or soil contamination. Paper towel may be used in public amenities /beverage bays.

d. Hot air hand dryers are not recommended for installation in clinical areas of healthcare facilities. High speed hand dryers may be considered in non-clinical areas, such as public toilets.

Refer to AS 1071:2015 and AusHFG for requirements.

4. Waste bins are located close to the hand basin.

a. Locate waste receptacles at each hand basin for disposal of single use towels.
b. The bins should be of adequate size, non-touch design and easy to clean.

Refer to the Australian Guidelines for the Prevention and Control of Infection in Healthcare (2010) https://www.nhmrc.gov.au/guidelines-publications/cd33

5. Alcohol-based hand rubs (ABHR) are available at point of care

Hand Hygiene Australia recommends making ABHR available:

a. at the foot of every patient bed or adjacent wall;
b. affixed to mobile work trolleys (e.g. intravenous, drug and dressing trolleys);
c. in high staff traffic areas (e.g. staff station, utility rooms and at the entrance to patient rooms);
d. other multi-use patient care areas such as consultation rooms;
e. at the entrance of each inpatient unit, outpatient clinic and other departments; and
f. in public areas such as waiting rooms, receptions areas, hospital foyers, and near elevator doors in high traffic areas.
g. Dispenser systems should minimise the possibility of 'dripping' to avoid potential damage to wall and floor coverings.

6. Appropriate personal protective equipment (PPE) is available in procedure rooms (gloves, gowns/aprons, eye & face protection)

Gloves

a. A disposable glove dispenser, sufficient to hold all glove sizes (usually three sizes), should be located near areas where staff are likely to come into contact with blood and body fluids.
b. The dispenser should allow restocking without the need to touch new gloves, and be located away from the splashback to prevent splash contamination.
c. Glove dispensers will be located in areas such as inpatient bed rooms, emergency treatment bays and dialysis bays where staff are identified as being at risk of exposure to blood and body fluids at the point of care.

Information regarding PPE is available from SA Health at
https://www.sahealth.sa.gov.au/wps/wcm/connect/8776f5804a4632a38e90cfb0cfc4074a/Guideline_Personal+Protective+Equipment+PPE+Selection_Policy_Oct2015.pdf?MOD=AJPERES&CACHEID=8776f5804a4632a38e90cfb0cfc4074a

9. Air sampling test results meet requirements.

a. Heating, ventilation and air conditioning (HVAC) system is in place.
b. Review of relevant guidelines including: AusHFG – Standard Components for procedure rooms.
c. AusHFG must be consulted for recommended HVAC systems including :
    I. number of air exchanges;
    II. pressure gradients;
    III. air flow;

IV. HEPA filters;
V. Humidity and temperature controls.

Refer to Guidelines for Environmental Infection Control in Health-care Facilities (HICPAC CDC)

10. A room/area for cleaning reusable medical equipment is available in accordance with AS/NZ 4187:2014 & Gastroenterological Society of Australia (GESA) guidelines

a. Spatial requirements should comply with AusHFG room layout recommendations.
b. Work flows in the reprocessing should facilitate one way directional flow as well as separation of dirty and clean tasks instruments – Refer to AS 4187:2014 requirements.
c. Suitable water supply must be available

Refer to requirements of AS 4187:2014 and AusHFG.

11. A storage area is available for clean/sterile reusable equipment & consumables in accordance with AS/NZ 4187:2014

Sterile stock should be stored in accordance with AS 4187:2014

Sterile Supplies:

a. Sterile supplies should be handled with care and stored in a manner that maintains the integrity of packs and prevents contamination from any source (dust, vermin, sunlight, water, condensation etc.).
b. Ensure temperature and light control in storage areas are easily cleaned.
c. Store supplies off the floor, with the lowest shelf at least 300 millimetres above floor level so as to avoid mechanical damage during cleaning.
d. Storage room temperature should be between 18-22 C
e. Relative humidity: 35-68%

Air-conditioning and ventilating conditions as per AS1668.2:2012 Refer to: *AusHFG Part B: HPU 190 Sterile Supply Unit; and Standards Australia, AS/NZS 4187:2014 Reprocessing of Reusable Medical Devices in HSOs.*

13. Dust capture points

a. There are no potential dust accumulation points.
b. Bulkheads should meet the top of cupboards and there should be no gap between cupboards and the ceiling.

14. Furnishings

Infection control assessment only including but not limited to: beds, chairs, procedure chairs, recovery chairs etc.

15. Floor coverings

a. Smooth, impervious, non-slip, water resistant with integral skirtings
b. The floor and wall construction should be free from gaps / spaces.
c. Carpet may be installed in zones such as interview rooms / offices.
d. Carpet should not be directly under hand washing basins.

16. Linen

a. If re- usable linen is used, laundering should occur as per AS/NZ Standards AS 4146:2000

b. If waterproof covers are used on bedding, mattresses, wedges etc. these need to be cleaned between patient uses.

17. Single use items

Single use items must not be re-used – refer to AS/NZ 4187:2014

18. Multiple use solutions or medications.

Practice should be in accordance with manufacturer's recommendations.

Multiple use bottles should be avoided to reduce the risk of cross contamination or reduced efficacy of solutions.

19. Cleaning solutions

a. Cleaning products utilised for instrument decontamination should be reviewed against AS/NZ 4187:2014
b. Detergent/disinfectant wipes should be used for surface decontamination of fixtures and fittings.
c. A cleaning schedule must be in place.
d. Spills kits

20. General overall cleanliness of the facility.

Evidence of a cleaning program or schedule. Refer to SA Health Cleaning Standard for South Australian Healthcare Facilities 2014.
https://www.google.com.au/search?q=SA+health+cleaning+standard&sourceid=ie7&rls=com.microsoft:en-AU:IE-Address&ie=&oe=&safe=active&gfe_rd=cr&ei=o6svWeerL6Hr8AfXpaagAQ&gws_rd=ssl

21. Water distribution operation, and maintenance (including legionella control) plan is in place.

Refer to SA Health:
http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/protecting+public+health/water+quality/legionella+regulations+and+guidelines/legionella+related+risk+management+in+care+facilities

SECTION B – Infrastructure

2. Emergency Access

Access point for ambulance – investigate if able to accommodate SAAS barouche access in the event of an emergency.

a. entrance of the facility
b. doorways
c. lifts
d. other

5. Managing the deteriorating Patient, including but not limited to:

a. O2 and suction access – note if wall or mobile cylinder
b. Resus trolley
c. Defibrillator /life pack
d. Recovery
e. Operating room
f. Other areas if indicated

15. Prevention of scalding

a. The proprietor must ensure that a system is in place to prevent patient scalding.
b. Information required re temperature from water outlets. – review the water temperature in line with enhealth legionella guidelines.
c. A shower should be available at the facility.

16. Staff change rooms

a. A hand basin should be available
b. Lockers should be available
c. Reusable or disposable scrubs should be available

17. Communication and Call Bells.

a. Call bells should be available in patient areas
b. Emergency call system should be available