IDEAL CLINIC™ DEFINITIONS, COMPONENTS AND CHECKLISTS

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Version 19

health

Department:
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European Union

ACRONYMS & ABBREVIATIONS

APC:	Adult Primary Care
App	application
AYFS:	Adolescent and Youth Friendly Services
ART:	antiretroviral treatment
BANC	basic antenatal care
BMI	body mass index
CCMDD:	Central Chronic Medicine Dispensing and Distribution
CDU:	Chronic Dispensing Unit
MUAC:	Mid-Upper Arm Circumference
CoGTA:	Cooperative Governance and Traditional Affairs
DCST:	District Clinical Specialist Team
DHIS:	District Health Information System
DHS:	District Health System
DPSA:	Department of Public Service and Administration
EML:	Essential Medicines List
FHH	familial hypocalciuric hypercalcaemia
HIV:	Human Immunodeficiency Virus
HPCSA	Health Professions Council of South Africa
HRH:	Human Resources for Health
ICSM:	Integrated Clinical Services Management
IPC:	Infection Prevention and Control
JACCOL	Medical examination to detect: jaundice, anaemia, clubbing, cynanosis, oedema and lymphadenopathy
MCWH:	Maternal, child, and women's health
Min/max:	minimum/maximum
NCD:	non-communicable diseases
NGO:	non-governmental organisation
NHLS:	National Health Laboratory Services
PACK:	Practical Approach to Care Kit
PDoH:	provincial Department of Health
PEC:	patient experience of care
PHC:	primary health care
PMDS:	Performance Management and Development System
PPTICRM:	Perfect Permanent Team for Ideal Clinic Realisation and Maintenance
SANC	South African Nursing Council
SOP:	standard operating procedure/protocol
SVS:	Stock Visibility System
WBPHCOT:	Ward Based Primary Health Care Outreach Team
TB:	Tuberculosis

DEFINITION OF IDEAL CLINIC

Getting our Primary Health Care facilities to function optimally, starting with clinics

The purpose of a health facility is to promote health and to prevent illness and further complications through early detection, treatment and appropriate referral. To achieve this, a clinic should function optimally thus requiring a combination of elements to be present in order to render it an "Ideal Clinic".

An Ideal Clinic is a clinic with good infrastructure[1], adequate staff, adequate medicine and supplies, good administrative processes and sufficient bulk supplies, that uses applicable clinical policies, protocols, guidelines as well as partner and stakeholder support, to ensure the provision of quality health services to the community. An Ideal Clinic will cooperate with other government departments as well as with the private sector and non-governmental organisations to address the social determinants of health. Primary Health Care (PHC) facilities must be maintained to function optimally and remain in a condition that can be described as the "Ideal Clinic".

Integrated clinical services management (ICSM) is a health-system strengthening model that builds on the strengths of South Africa's HIV programme to deliver integrated care to patients with chronic and/or acute diseases or requiring preventative services by taking a patient-centric view encompassing the full value chain of continuum of care and support. ICSM will be a key focus within an Ideal Clinic.

Developing and sustaining the "ideal" PHC clinic requires a number of components to be in place and functioning well. These components include:

1. Administration
2. Integrated Clinical Services Management
3. Medicines, Supplies and Laboratory Services
4. Human Resources for Health
5. Support Services
6. Infrastructure
7. Health Information Management
8. Communication
9. District Health System Support
10. Implementing Partners and Stakeholders

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[1]Physical condition and spaces, essential equipment and information and communication tools

Ideal Clinic realisation and maintenance: Components and sub-components

Realising and maintaining the Ideal Clinic involves a number of components. Each of these components is made up of sub-components which in turn consist of a number of elements, all of which need to be in place. These are:

10 components and 33 sub-components
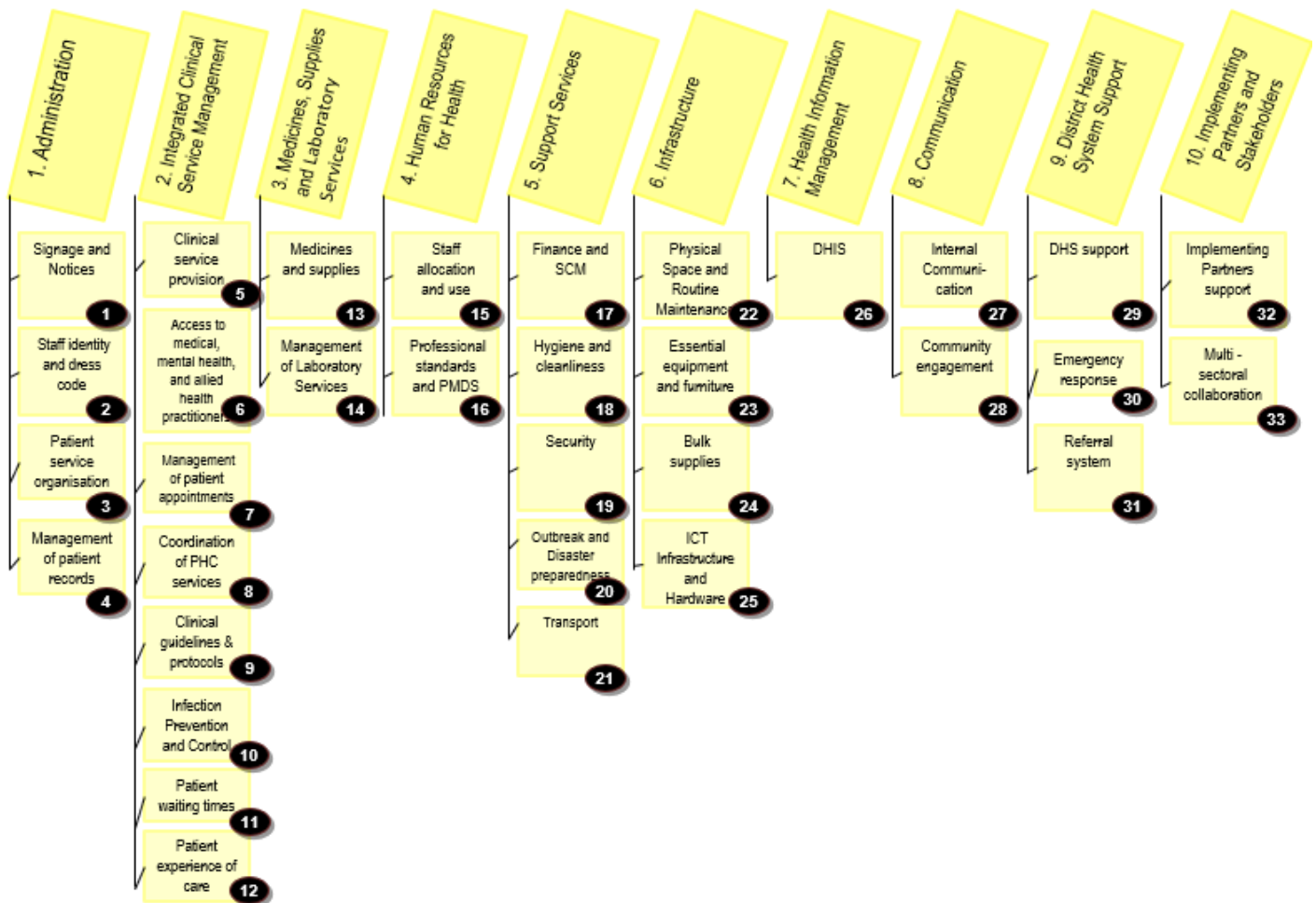
Ideal Clinic realisation and maintenance: Components, sub-components and elements

This document/tool contains a carefully selected set of elements that speaks to quality and safety. The tool is to be used to determine the status of a health facility's performance against these elements.

Performance is scored in line with two colours as follows:

Green   = Achieved (Yes)

Red   = Not achieved (No)

- Scoring for elements without checklists: Achieved (Green) = 1; Not achieved (Red) = 0
- Scoring for elements with checklists: Achieved (Green) = Average score of 100%; Not achieved (Red) = Average core of <100% with the exception of the checklist for the availability of tracer medicine where Achieved (Green) = Average score of $\geq$ 90%; Not achieved (Red) = Average core of <90%

Colour coding of text:

Text coloured in green indicates the elements that will be regulated according to the Norms and Standards Regulations applicable to different categories of health establishments.

Key and description for method of measurement

Key	Method of measurement (MM)
📖	a) Check applicable documents e.g. policies, guidelines, SOP, data, etc.
?	b) Ask staff members and/or clients for their views or level of understanding
☺	c) Objective observations and/or conclusion
👆	d) Test the functionality of equipment/systems

Key and description for level of responsibility

Key	Description
NDoH	National Department of Health
P	Province
D	District
HF	Health facility

Key and description for weights

Key	Description
NNV	Non-negotiable Vitals
V	Vital
E	Essential
I	Important

Weighting of the Ideal Clinic elements

The Ideal Clinic elements are weighted according to three categories: vital, essential and important.

Definition of weight categories

Non-negotiable Vital

These are elements that can cause loss of life or prolonged period of recovery.

Vital

Extremely important (vital) elements that require immediate and full correction. These are elements that affect direct service delivery to and clinical care of patients and without which there may be immediate and long-term adverse effects on the health of the population.

Essential

Very necessary (essential) elements that require resolution within a given time period. These are process and structural elements that indirectly affect the quality and safety of clinical care given to patients.

Important

Significant(important) elements that require resolution within a given time period. These are process and structural elements that affect the quality of the environment in which healthcare is given to patients.

Ideal Clinic realisation and maintenance: Components, sub-components and elements (Version 19)

Component	Sub-component		ELEMENTS	Weight	MM	Level of responsibility	Check list	Performance
1. Administration			**1. Signage and notices:** Monitor whether there is communication about the facility and the services provided					
		1	All external signage in place	I	☺	P	**Y**	
		2	Facility information board displayed at the entrance of the premises reflects relevant information for the facility	E	☺	D	**Y**	
		3	Disclaimer sign is clearly sign posted at the entrance of the facility	E	☺	D	**Y**	
		4	Vision, mission and values of the province/district are visibly displayed	I	☺	D		
		5	Facility organogram with contact details of the facility manager is displayed on a central notice board	I	☺	HF		
		6	Patients' Rights Charter is displayed in all waiting areas in at least two local languages	I	☺	HF		
		7	All service areas within the facility are clearly signposted	E	☺	HF	**Y**	
			2. Staff identity and dress code: Monitor whether staff uniform, protective clothing and mode of staff identification are in accordance with policy prescripts					
		8	There is a prescribed dress code for all service providers	I	📖	P		
		9	All healthcare professional staff members comply with prescribed dress code	I	?☺	HF	**Y**	
		10	All staff members wear an identification tag	I	☺	HF	**Y**	
			3. Patient service organisation: Monitor the processes that enable responsive patients service					
		11	Sign posted help desk/reception services are available	E	☺📖	HF		
		12	There is a process that prioritises the very sick, frail and elderly patients	V	?📖	HF	**Y**	
		13	A functional wheelchair is available	E	?☺	HF		
			4. Management of patient record: Monitor whether patient records content is organised according to Integrated Clinical Services Management (ICSM) prescripts, whether the prescribed stationery is used and whether patient records are managed appropriately					
		14	There is a single patient record irrespective of health conditions	I	☺📖	HF		
		15	Patient record content adheres to ICSM prescripts	V	☺📖	HF	**Y**	
		16	District/provincial SOP/guideline for filing, archiving and disposal of patient records is available	E	📖	P	**Y**	
		17	District/provincial SOP/ guideline for filing, archiving and disposal of patient records is adhered to	E	☺	HF	**Y**	
		18	There is a single location for storage of all active patient records	I	☺	HF		
		19	Patient records are filed close to patient registration desk	I	?☺	HF		
		20	Retrieval of a patient's file takes less than 10 minutes	I	?☺	HF		

		21	Records are not left unattended in public areas and are only accessible to facility staff and patients	V	☺	HF	
		22	Records are not left unattended in clinical service areas	E	☺	HF	
		23	Priority stationery (clinical and administrative) is available at the facility in sufficient quantities	I	📖	HF	**Y**
2. Integrated Clinical Services Management (ICSM)	**5. Clinical service provision:** Monitor whether clinical integration of clinical care services allowing for three discrete streams (acute, chronic and MCWH) of service delivery is adhered to as per service package and whether this results in improvements in key population health and service indicators						
		24	Facility has been reorganised with designated consulting areas and staffing for acute, chronic health conditions and preventative health services.	E	☺	HF	
		25	Patients are consulted, examined and counselled in privacy	I	☺	HF	
		26	TB treatment success rate is at least 87% or has increased by at least 5% from the previous year	E	📖	HF	
		27	TB (new pulmonary) defaulter rate < 5%	E	📖	HF	
		28	Antenatal visit rate before 20 weeks gestation is at least 70% or has increased by at least 5% from the previous year	E	📖	HF	
		29	Antenatal patient initiated on ART rate is at least 97% or has increased by at least 5% from the previous year	E	📖	HF	
		30	Immunisation coverage under one year (annualised) is at least 86% or has increased by at least 5% from the previous year	E	📖	HF	
		31	Quality Improvements plans are signed off by the facility manager and updated quarterly	E	📖	HF	**Y**
		32	Six monthly district/sub-district clinical performance review report with action plan from clinical quality supervisors are available	E	📖	D	
	6. Access to medical, mental health, allied health practitioners, pharmacists and adolescent friendly services: Monitor patient and staff access to clinical expertise at PHC level						
		33	Patients that require consultation with a medical practitioner have access to a medical practitioner at the facility at least once a week.	E	📖	HF	
		34	Patients have access to oral health services	I	📖	D	
		35	Patients have access to occupational therapy services	I	📖	D	
		36	Patients have access to physiotherapy services	I	📖	D	
		37	Patients have access to dietetic services	I	📖	D	
		38	Patients have access to social work services	I	📖	D	
		39	Patients have access to radiography services	I	📖	D	
		40	Patients have access to ophthalmic service	I	📖	D	
		41	Patients have access to mental health services	E	📖	D	
		42	Patients have access to speech and hearing services	I	📖	D	
		43	Staff authorised to dispense medicine have access to the support of a pharmacist	I	📖	D	
		44	Adolescent and Youth Friendly Health Services are provided	I	📖	D	**Y**
	7. Management of patient appointments: Monitor whether an ICSM patient appointment system is adhered to						
		45	ICSM compliant patient appointment system for patients with chronic health conditions and MCWH patient is in use	I	📖	HF	
		46	Records of booked patients are retrieved not later than the day before the appointment	I	☺	HF	

	47	Pre-dispensed medication for clinically stable chronic patients is prepared for collection not later than the day before collection date or patients are enrolled on the CCMDD/CDU programme	E	? ☺	HF		
	8. Coordination of PHC services: Monitor whether there is coordinated planning and execution between PHC facility, School Health Team, community-based and environmental health services						
	48	Facility does referrals to and receives referrals from school health services in its catchment area	I	📖	D		
	49	Facility refers patients with chronic but stable health conditions to home- and community-based services for support	E	📖	HF		
	50	Facility refers environmental health related risks to environmental health services	I	📖	D	**Y**	
	9. Clinical guidelines and protocols: Monitor whether clinical guidelines and protocols are available, whether staff have received training on their use and whether they are being appropriately applied						
2. Integrated Clinical Services Management (ICSM)	51	ICSM compliant package of clinical guidelines is available in all consulting rooms	E	📖	HF	**Y**	
	52	National guidelines on priority health conditions are available	E	📖	HF	**Y**	
	53	80% of professional nurses have been fully trained on Adult Primary Care OR Practical Approach to Care Kit	E	📖	D		
	54	80% of professional nurses have been fully trained on Integrated Management of Childhood Illness	E	📖	D		
	55	Resuscitation protocol is available	E	📖	HF		
	56	SOP for informed consent available	E	📖	HF	**Y**	
	57	80% of professional nurses have been trained on Basic Life Support	V	📖	D		
	58	50% of professional nurses at the facility are trained on BANC Plus	E	📖	D		
	59	National Guideline for Patient Safety Incident Reporting and Learning is available	E	📖	NDoH		
	60	Facility/district SOP for Patient Safety Incident Reporting and Learning is available	E	📖	HF	**Y**	
	61	Patient safety incident records comply with the National Guideline for Patient Safety Incident Reporting and Learning	V	📖	HF	**Y**	
	62	All SAC 1 adverse events are reported to the next level of management within 24 hours	V	📖	HF		
	63	National Clinical Audit Guideline is available	E	📖	NDoH		
	64	Clinical audits are conducted annually on priority health conditions	E	📖	HF	**Y**	
	65	80% of patient records audited are compliant	E	📖	HF	**Y**	
	66	Clinical audit meetings are conducted quarterly in line with the guidelines	E	📖	HF		
	67	National guidelines are followed for all notifiable medical conditions	V	?📖	HF	**Y**	
	68	SOP for the management of patients with highly infectious diseases is available	V	📖	HF	**Y**	
	10. Infection prevention and control: Monitor adherence to prescribed infection prevention and control policies and procedures						
	69	National Infection Prevention and Control strategic framework is available	E	📖	NDoH		
	70	Facility has a designated staff member who is responsible for infection prevention and control	E	📖	HF		
	71	SOP for standard precautions is available	V	📖	HF	**Y**	

		72	All staff have received in-service training in the past two years on standard precautions that is inline with the SOP	V	📖	HF	**Y**	
		73	Posters on hand hygiene is displayed	I	📖	HF	**Y**	
		74	Awareness day on hand hygiene is held annually	V	📖	HF		
		75	Poster on cough etiquette is displayed in every waiting area	I	📖	HF		
		76	Staff wear appropriate protective clothing	V	?☺	HF	**Y**	
		77	The linen in use is sufficient, clean, appropriately used and not torn	E	☺	HF	**Y**	
2. Integrated Clinical Services Management (ICSM)		78	Dirty, soiled and infectious linen are collected in a wheeled cart or trolley	I	☺	HF		
		79	Sharps are disposed of appropriately	V	☺	HF	**Y**	
		80	An annual risk assessment for infection prevention and control compliance is conducted	I	📖	HF		
		81	All staff are made aware of the provincial letter/memo/circular that inform staff of the procedure to follow for prophylactic immunisations	E	📖	HF	**Y**	

11. Patient waiting time: Monitor adherence to the facility's prescribed waiting times

		82	National Guideline for the Management of Waiting Times is available	I	📖	NDoH		
		83	National target of not more than three hours for time spent in a facility is visibly displayed	E	☺📖	HF		
		84	Waiting time tools to record waiting time is available	E	📖	HF		
		85	Waiting time survey report is available	E	📖	HF		
		86	Average time that a patient spends in the facility is no longer than 3 hours	E	📖	HF		

12. Patient experience of care: Monitor whether an annual patient experience of care survey is conducted and whether patients are provided with an opportunity to complain about or compliment the facility and whether complaints are managed within the prescribed time

		87	National Patient Experience of Care Guideline is available	E	📖	NDoH		
		88	Results of the annual Patient Experience of Care Survey are visibly displayed at the main waiting area	E	📖	HF	**Y**	
		89	An average overall score of 80% is obtained in the Patient Experience of Care Survey	E	📖	HF		
		90	National Guideline to Manage Complaints/Compliments/Suggestions is available	E	📖	NDoH		
		91	Complaints/compliments/suggestions toolkit is available at the main entrance/exit	E	☺	HF	**Y**	
		92	Complaints/compliments/suggestions records complies with the National Guideline to Manage Complaints/Compliments/Suggestions	E	📖	HF	**Y**	
		93	Targets set for complaints indicators are met	E	📖	HF	**Y**	

13. Medicines and supplies: Monitor consistent availability of required good quality medicines and supplies

		94	There is a 'No unauthorised entry' sign on the door	E	☺	HF		
3. Pharmaceuticals and Laboratory		95	SOP for the management of availability of medicines is available	E	📖	HF	**Y**	
		96	Hand hygiene facilities are available	V	☺	HF	**Y**	
		97	Cleaning schedule for the Medicine room/dispensary is available	E	📖	HF		
		98	Cleaning is carried out in accordance with the schedule	V	📖	HF		
		99	All work completed is signed off by cleaners and verified by manager or delegated staff member	E	📖	HF		
		100	Medicine room/dispensary and waiting area are clean	V	☺	HF	**Y**	

		101	Medicine room/dispensary is neat and medicines are stored to maintain quality	I	😊	HF	**Y**	
		102	The temperature of the medicine room/dispensary is maintained within the safety range	V	📖	HF	**Y**	
		103	Cold chain procedure for vaccines is maintained	V	📖	HF	**Y**	
		104	Medicine cupboard or trolley is neat and orderly	I	😐	HF	**Y**	
		105	The register for schedule 5 and 6 medicines is completed correctly	V	📖	HF		
		106	Schedule 5 and 6 medicine in stock correspond with the balance recorded in the register	V	📖	HF		
3. Pharmaceuticals and Laboratory Services		107	Electronic networked system for monitoring the availability of medicines is used effectively	E	😊📖	HF	**Y**	
		108	Stock take conducted in the medicine room/dispensary in past 12 months	V	📖	HF		
		109	90% of the medicines on the tracer medicine list are available	V	😊📖	HF	**Y**	
		110	Re-ordering stock levels (min/max) are determined for each item on the district/facility formulary	V	😊📖	HF		
		111	There is no expired medicine on the shelves	V	😐	HF		
		112	Waste receptacles for pharmaceutical waste are available	V	😐	HF		
		113	Health care waste is managed appropriately	E	😐	HF	**Y**	
		114	Expired medicine is disposed of according to prescribed procedures	E	?	HF		
		115	Basic medical supplies (consumables) are available	V	📖	HF	**Y**	

14. Management of laboratory services: Monitor consistent availability and use of laboratory services

		116	Primary Health Care Laboratory Handbook is available	E	📖	NDoH		
		117	Required functional diagnostic equipment and concurrent consumables for point of care testing are available	E	😐	HF	**Y**	
		118	Required specimen collection materials and stationery are available	E	😐	HF	**Y**	
		119	Specimens are collected, packaged, stored and prepared for transportation according to the Primary Health Care Laboratory Handbook	E	😐	HF	**Y**	
		120	Laboratory results are received from the laboratory within the specified turnaround times	E	📖	HF	**Y**	
		121	Facility is enrolled as testing point in the NHLS HIV- Proficiency Testing scheme	I	📖	HF		
		122	Facility controls rapid test kit performances by running one negative and one positive control on a weekly basis	E	📖	HF		

15. Staff allocation and use: Monitor whether the PHC facility has the required HRH capacity and whether staff are appropriately applied

4. Human Resources		123	Staffing needs have been determined in line with workload requirements	V	?📖	D		
		124	Staff appointed in line with determined requirements	V	📖	D	**Y**	
		125	Facility has a dedicated manager	E	📖	D		
		126	Work allocation schedule is signed by all staff members	I	📖	HF		
		127	Leave policy is available	I	📖	D		
		128	An annual leave schedule is available	I	📖	HF		

4. Human Resources for Health		**16. Professional standards and Performance Management Development System (PMDS):** Monitor whether staff are managed according to Department of Public Service Administration (DPSA) and Department of Labour prescripts						
		129	Record of staff induction is available	I	📖	HF		
		130	All healthcare workers have current registration with relevant professional bodies	E	📖	HF	**Y**	
		131	Performance Management guidelines are adhered to	E	📖	HF	**Y**	
		132	Continued staff development needs are determined for the current financial year and submitted to the district manager	I	📖	HF		
		133	Training records reflect planned training is conducted as per the district training programme	I	📖	HF		
		134	The disciplinary procedure is available	I	📖	HF		
		135	The grievance procedure is available	I	📖	HF		
		136	Staff satisfaction survey is conducted annually	I	📖	D		
		137	The results of the staff satisfaction survey are used to improve the work environment	I	📖	HF		
		138	SOP for management of occupational health and safety incidents is available	E	📖	HF	**Y**	
		139	Health and Safety representative appointed (NA is staff establishment is less than 20 staff members)	E	📖	HF		
		140	Health and Safety committee appointed (NA if less than 2 safety reps)	E	📖	HF		
		141	Occupational Health and Safety incidents are managed and recorded in a register	V	📖	HF	**Y**	
		142	Occupational health and safety risk assessment has been conducted in the past two years	E	📖	HF		
		143	Risk mitigation interventions are implemented for identified occupational health and safety risks	E	📖	HF		
5. Support		**17. Finance and supply chain management:** Monitor the consistent availability of a functional supply chain management system as well as the availability of funds required for optimal service provision						
		144	Facility has a dedicated budget	I	📖	D		
		145	Facility has a SOP for obtaining general supplies	E	📖	HF		
		18. Hygiene and cleanliness: Monitor whether the required systems and procedures are in place to ensure consistent cleanliness in and around a facility						
		146	All cleaners have been trained on cleaning procedures	V	📖	HF		
		147	Cleaning schedules are available for all areas in the facility	E	📖	HF		
		148	Cleaning is carried out in accordance with the schedule	V	📖	HF		
		149	Disinfectant, cleaning materials and equipment are available	V	📖	HF	**Y**	
		150	All work completed is signed off by cleaners and verified by manager or delegated staff member	E	📖	HF	**Y**	
		151	All service areas are clean	V	☺	HF	**Y**	
		152	Hand hygiene facilities are available	V	☺	HF	**Y**	
		153	SOP for managing health care waste is available	V	📖	HF	**Y**	
		154	Health care waste is managed appropriately	V	?☺	HF	**Y**	
		155	Central storage area for health care waste is appropriate	V	☺	D	**Y**	
		156	All toilets are clean, intact and functional	V	?☺	HF	**Y**	

		#	Description					
		157	Exterior of the facility is clean and well maintained	E	☺	HF	**Y**	
		158	Signed waste removal service level agreement between the health department and the service provider is available	E	📖	P		
		159	Health care risk waste is removed in line with the service level agreement	V	?📖	HF		
		160	The service level agreement for waste removal and disposal of waste is monitored	E	📖	HF		
		161	Breaches in waste removal contract are escalated to the relevant authority	E	📖	HF		
		162	Records show that pest control is done according to schedule	V	📖	HF		
5. Support		**19. Security:** Monitor whether systems processes, procedures are in place to protect the safety of assets, infrastructure, patients and staff of the PHC facility						
		163	Safety and security SOP is available	E	📖	HF	**Y**	
		164	Perimeter fencing is intact	I	☺	HF		
		165	Parking for staff is provided on the facility premises	I	☺	D		
		166	There is a standard security guard room OR the facility has an alarm system linked to armed response	I	☺	D	**Y**	
		167	There is a security guard on duty OR the facility has an alarm system linked to armed response	I	☺	D		
		168	Security services rendered according to contract OR provincial security policy/facility SOP	E	☺📖	HF	**Y**	
		169	A signed copy of the service level agreement between the security company and the provincial department of health is available	E	?📖	D		
		170	Security breaches are managed and recorded in a register	E	📖	HF	**Y**	
		20. Outbreak and Disaster preparedness: Monitor whether firefighting equipment is available and whether staff know how to use it and whether disaster drills are conducted						
		171	Functional firefighting equipment is available	V	☺☝	D	**Y**	
		172	Evacuation plan is displayed in the manager's office and the main entrance	I	📖	HF		
		173	Contact numbers of healthcare personnel required in emergencies are available in the management offices and at reception	I	📖	HF		
		174	Emergency evacuation procedure is practised annually	E	📖	HF		
		175	Deficiencies identified during the practice of the emergency evacuation drill are addressed	E	📖	HF		
		176	SOP for outbreak notification and response are available	E	📖?	HF		
		21. Transport: Monitor whether staff and patients are transported safely						
		177	All official vehicles used to render services or transport patients are licensed annually	E	📖	D		
		178	All official vehicles used to render services or transport patients are serviced according to manufacturer's schedule	E	📖	D		
		179	All staff driving official vehicles to render services or transport patients have a valid driver's license	E	📖	D		
		180	All staff driving official vehicles to render services or transport patients have a valid professional driving permits where applicable	E	📖	D		
6.		**22. Physical space and routine maintenance:** Monitor whether the physical space is adequate for the PHC facility workload, disabled persons and whether timely routine maintenance is undertaken						
		181	Clinic space accommodates all services and staff	E	☺📖	D	**Y**	
		182	Clinical service areas have natural ventilation or functional mechanical ventilation	V	☺	D	**Y**	
		183	There is access for people in wheelchairs	E	☺	D	**Y**	

No	Description					
184	Maintenance schedules for building (s) and grounds are available	V	📖	D		
185	Building(s) is maintained according to schedule	E	😊📖	D	**Y**	
186	Building(s)complies with safety regulations	V	📖	D	**Y**	

23. Essential equipment and furniture: Monitor whether essential equipment and required furniture are available

No	Description					
187	Furniture is available and intact in-service areas	I	😊	HF	**Y**	
188	Essential equipment is available and functional in consulting areas	V	😊	HF	**Y**	
189	Staff are trained on the use of essential equipment	E	📖	HF		
190	SOP for reactive maintenance of medical equipment is available	I	📖	HF		
191	Maintenance plan for essential equipment is adhered to	E	📖	HF		
192	Resuscitation room is equipped with functional, basic resuscitation equipment	V	😊📖	HF	**Y**	
193	Emergency trolley is restored daily or after each use	NNV	😊📖	HF	**Y**	
194	There is an emergency sterile obstetric delivery pack	V	😊	HF	**Y**	
195	There is a sterile pack for minor surgery	V	😊	HF	**Y**	
196	Functional oxygen cylinder with pressure gauge is available in resuscitation/ emergency room	NNV	😊	HF		
197	Oxygen available in the cylinder is above the minimum level	NNV	😊	HF		
198	Imaging service unit is accredited	E	📖	HF		
199	An up-to-date asset register is available	I	😊📖	HF	**Y**	
200	Redundant and non-functional equipment is removed from the facility	I	😊	HF		

24. Bulk supplies: Monitor whether the required electricity supply, water supply and sewerage services are constantly available

No	Description					
201	Facility has a functional piped potable water supply	V	?🖐	D		
202	Facility has access to emergency water supply when needed	V	🖐😊	D		
203	Facility has access to a functional back-up electrical supply when needed	V	?😊	D	**Y**	
204	Sewerage system is functional	V	🖐😊	D		

25. ICT infrastructure and hardware: Monitor whether systems for internal and external electronic communication are available and functional

No	Description					
205	There is a functional telephone in the facility	E	?🖐	D		
206	There is a functional computer	I	?🖐	HF		
207	There is functional printer connected to the computer	I	?🖐	HF		
208	There is internet access	I	?🖐	D		

26. District Health Information System (DHIS): Monitor whether there is an appropriate information system that produces information for service planning and decision making

No	Description					
209	Facility performance in response to burden of disease of the catchment population is displayed and is known to all clinical staff members	I	?😊	HF		
210	National District Health Information Management System policy OR Provincial SOP aligned with National Policy is available	I	📖	HF		
211	Clinical personnel and data capturer trained on the facility level Standard Operating Guidelines for Data Management	I	📖	HF		
212	Relevant DHIS registers are available and are kept up to date	I	?😊	HF		
213	Facility submits all monthly data on time to the next level	I	📖	HF		
214	There is a functional computerised patient information system	I	?🖐	D		

Row group labels (left vertical column): **6. Infrastructure** (items 184–208), **7. Health Information Management** (items 209–214)

8. Communication	**27. Internal communication:** Monitor whether the communications system required for improved quality for service delivery is in place						
		215	There are sub-district/district quarterly facility performance review meetings	I	📖	D	
		216	A staff meeting is held at least quarterly within the facility	I	📖	HF	
		217	Staff members demonstrate that incoming policies/guidelines/SOPs/ notices have been read and are understood by appending their signatures on such policies/guidelines/SOPs/notifications	E	📖	HF	**Y**
	28. Community engagement: Monitor whether the community participates in PHC facility activities through representation in a functional clinic committee						
		218	There is a functional clinic committee	E	📖	P	**Y**
		219	Contact details of clinic committee members are visibly displayed	I	☺	HF	
		220	Facility hosts an annual open day	I	📖	HF	
9. District Health System Support	**29. District Health Support (DHS):** Monitor the support provided to the facility through guidance from district management, regular Ideal Clinic status measurement by the PPTICRM as well as through visits from the district support and health programme managers						
		221	There is a health facility operational plan in line with district health plan	I	📖	HF	
		222	District PPTICRM visits all facilities at least once a year and those targeted to be Ideal in the specific year at least twice a year to ensure that weaknesses have been corrected and to record the Ideal Clinic Realisation status for the end of year report	E	?📖	D	
	30. Emergency response: Monitor the effectiveness of emergency responses						
		223	There is a pre-determined EMS response time to the facility	E	?📖	D	
		224	Register for emergency transport requests is available	E	📖	D	**Y**
		225	Remedial action taken when predetermined EMS response time is not adhered to	E	📖	D	
		226	Emergency contact numbers (fire, police, ambulance) are displayed in areas where telephones are available	V	📖	HF	
		227	SOP available for the handover between facility and EMS	E	📖	HF	**Y**
	31. Referral system: Monitor whether patients have access to appropriate levels of healthcare						
		228	National Referral Policy is available	I	📖	NDoH	
		229	District SOP for the referral system is available	E	📖	HF	**Y**
		230	There is a referral register that records referred patients	E	📖	HF	**Y**
		231	Copy of referral form available in the patient record	E	📖	HF	**Y**
10. Implementing Partners and Stakeholders	**32. Implementing partners support:** Monitor the support that is provided by implementing partners						
		232	An up to date list of all organisations that provide health related services in the catchment area and implementing health partners is available	I	📖	HF	
		233	The list of implementing health partners shows their areas of focus and business activities	I	?📖	HF	
	33. Multi-sectoral collaboration: Monitor the systems in place to respond to the social determinants of health						
		234	There is an official memorandum of understanding between the PDOH and SAPS	I	📖	P	
		235	There is an official memorandum of understanding between the PDOH and Department of Education	I	📖	P	
		236	There is an official memorandum of understanding between the PDOH and the Department of Social Development	I	📖	P	
		237	There is an official memorandum of understanding between the PDOH and Department of Public Works	I	📖	P	
		238	There is an official memorandum of understanding between the PDOH and Department of Transport	I	📖	P	

Summary of Ideal Clinic categories

Weights	Silver	Gold	Platinum
Non-negotiable Vitals (3 elements)	100%	100%	100%
Vital (53 elements)	60-69%	70-79%	≥80%
Essential (104 elements)	50-59%	60-69%	≥70%
Important (78 elements)	50-59%	60-69%	≥70%

ELEMENT CHECKLISTS

CHECKLIST FOR ELEMENT 1: External signage in place

Use the checklist below to check the facility's external signage

Scoring–in column for score mark as follows:

Y (Yes) = present; **N** (No) = not present; **NA** (Not applicable) = for small facilities or where certain services are not rendered

External signage	Score
Geographical location signage from main roads	
a. Both directions on each main road	
b. Within 1 km of clinic	
c. No obstructions to visibility	
Facility gate entrance signage	
a. Vehicles and persons will be searched	
b. Entry and parking are at own risk	
Specific external locations:	
a. Emergency Assembly Point	
Waste storage:	
a. Health care Risk Waste (medical waste)	
b. Health scare General Waste	
At or near to main entrance of building:	
a. Ambulance parking sign OR area marked on paving	
b. Disabled parking sign OR area marked on paving	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 2: Facility information board displayed at the entrance of the facility reflects relevant information for the facility

Use the checklist below to check the facility's information board

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present

Information	Score
Facility's name	
Service hours of the facility	
Physical address of the facility	
Contact details of the facility	
Contact details of the emergency services	
Service package	
Total	
Score (Total ÷ 6)	

CHECKLIST FOR ELEMENT 3: Disclaimer sign is clearly sign posted at the entrance of the facility

Use the checklist below to check whether the disclaimer sign of the facility displays the disclaimers as indicated

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present

Information	Score
No weapons	
No smoking	
No animals (except for service animals)	
No littering	
No Hawkers	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 7: All service areas within the facility are clearly signposted

Use the checklist below to check whether all service areas within the facility are clearly signposted

Scoring –in column for score mark as follows:

Y (Yes) = if present; **N** (No) = if not present; **NA** (Not applicable) = signage is NA to the specific facility due to the services rendered or the size of the facility (small facilities) or type of services rendered

Internal branding	Score
Help Desk/Reception	
Complaints/suggestions/compliments box	
Medicine storage room/dispensary/pharmacy	
Chronic Medicine Collection (CCMDD)	
Emergency room	
Facility Manager – door identifier	
Emergency exit(s)	
Exit(s)	
Assembly points	
Stairs (if applicable)	
Patient Toilets	
Directional arrows to toilets	
Disabled toilet pictogram	
Female toilet pictogram	
Male toilet pictogram	
Directional signs for service areas - Colour-coded signage for each of the 3 streams of care service areas	
Acute/minor ailments (orange)	
Chronic Diseases (blue)	
MCWH (deep green)	
Health Support Services (Allied health services) (yellow)	
Medicine storage room/ dispensary/pharmacy	
Functional room signage (each area/room should be labelled)	
Vital signs	
Counselling room/s	
Consultation room/s	
Fire-fighting signs:	

At each hose, fire hose pictogram	
At each extinguisher, fire extinguisher pictogram	
Support/admin areas (room name sign on each door)	
Storeroom(s)	
Sluice room	
Laundry	
Cleaner's room	
Linen room	
Kitchen	
Patient records storage room	
Community Outreach Service	
Staff toilet(s)	
Staff room/boardroom/multipurpose room	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

Note: Facilities with fewer than three consulting rooms are too small to be segregated into three streams and are not expected to have dedicated consulting areas for acute, chronic health conditions and preventative health services with accompanying signage. However, healthcare offered at these facilities should still adhere to ICSM principles. This means that patients should be treated holistically and not sent from one section to another because of co-morbidities. Signage for the three streams should therefore be marked as NA.

CHECKLIST FOR ELEMENT 9: All staff members comply with prescribed dress code

Use the checklist below to check that staff on duty is dressed according to the prescribed dress code

Scoring –in column for score mark as follows:

Check – randomly select five healthcare professional staff members to review

Y (Yes) = present and adhered to; **N** (No) = not present or not adhered to; **NA** (Not applicable) = if there are not enough staff on duty/appointed to evaluate five staff members, check those on duty, marking the remaining columns NA

Item	Staff member 1	Staff member 2	Staff member 3	Staff member 4	Staff member 5
Nails short					
Jewellery minimal (plain wedding band, small earrings, no necklaces)					
Dress/skirt OR pants (dress/skirt should not be shorter than knee length)					
Tailored clothes (not too tight nor too loose)					
Distinguishing devices worn					
Total					
Total maximum possible score (sum of all scores minus those marked NA)					
Score (Total ÷ Total maximum possible score)					

CHECKLIST FOR ELEMENT 10: All staff members wear an identification tags

Use the checklist below to check that the staff on duty wear official identification tags

Scoring – in column for score mark as follows:

Check – randomly select five staff members to review

Y (Yes) = present and adhered to; **N** (No) = not present or not adhered to; **NA** (Not applicable) = if there are not enough staff on duty/appointed to evaluate five staff members, check those on duty and mark remaining lines NA

Staff member	Score
Staff member 1	
Staff member 2	
Staff member 3	
Staff member 4	
Staff member 5	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

Note: Identification tag must include the emblem of the facility/district or provincial department of health, full names/initials and surname of the staff member

CHECKLIST FOR ELEMENT 12: There is a process that prioritises the very sick, frail and elderly patients

Use the checklist below to check whether there is a process that prioritises the very sick, frail and elderly

Scoring - in column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant

Item	Score
The process to fast track very sick, frail and elderly users to the front of the queue is implemented. (The process to implement the fast-tracking of vulnerable users must be evident on observation of the waiting room. This should at a minimum include a poster or information provided to users about the process)	
SOP to prioritise the very sick, frail and elderly patients is available	
The SOP to prioritise the very sick, frail and elderly patients covers the following aspects:	
Prioritization procedure for the facility is described	
The procedure is displayed in at least two official languages in the waiting area indicating the prioritisation process	
In-service training for ALL staff on prioritisation process	
Delegate the function of prioritisation process to a designated staff member	
Conduct random spot checks during the day to determine whether the very sick, frail, and elderly patients are prioritised	
Total	
Score (Total ÷ 7)	

CHECKLIST FOR ELEMENT 15: Patient records adhere to ICSM prescripts

Use the checklist below to check whether patient records comply with ICSM prescripts

Scoring –in column for score mark as follows:

Check – randomly select five records of patients who were seen in the past three months. Include records for the following conditions: one adult acute/minor ailment, one adult chronic, one adult maternal health, one sick child and one well baby record to cover records of patients consulted at all three streams of care (Chronic, MCWH and Acute). Audit the last visit. Ensure that one of the five records selected is for a patient that was referred to another health facility (use the referral register to track such a file), this is to assess Element 204: Copy of referral letter available in the patient record.

Y (Yes) = recorded; **N** (No) = not recorded; **NA** (Not applicable) = if patient did not receive relevant treatment/measure does not apply to the particular type of record selected

Type of information/notes	Adult acute/ minor ailment	Adult chronic	Adult maternal health	Sick child (IMCI)	Well baby
Administrative details (on cover of record)					
Clinic's name					
Name and surname					
Patient file number					
ID/Refugee/passport number OR date of birth					
Demographic details					
Residential address					
Personal contact details				■	■
Name and surname of parents or guardian	■	■	■		
Contact details of parents or guardian	■	■	■		
Next of kin contact details					
Employment contact details (if employed)				■	■
Marital status					
Gender					
Patient profile – 1ˢᵗ visit					
Type of employment					■
Social (type of employment, living conditions, social assistance, cooking method)				■	■
Social (school grade, social assistance, nutrition, where child resides)	■	■	■		
Health risk factors (alcohol, smoking, other substances, physical activity, healthy eating, sexual behaviour)				■	■
Family history of chronic conditions					■
Known chronic conditions					
Surgical history					
Allergies					
Clinical management					
Length/Height of patient at 1ˢᵗ visit					
Weight at every visit					
Body mass index (BMI) calculated at 1ˢᵗ and 7ᵗʰ visits				■	■

Weight-for-height z score	■	■	■		
MUAC (every 3 months)	■	■			
Temperature					■
Blood pressure at every visit				■	■
Respiratory rate					■
Pulse rate at every visit					■
Blood sugar as per guidelines					■
Urine dipstick as per guidelines				■	■
Basic screening where indicated (HIV, TB, STI, Diabetes)					
Current chronic condition					■
Adherence to medication					■
Reported side effects of medication					■
Other hospital/doctor visits					■
Presenting complaints					■

Examination					
General (JACCOL)					■
Respiratory					■
Cardiovascular					■
Gastrointestinal					■
Mental state					■
Central nervous system (CNS)					■
Musculo-skeletal					■
Diagnosis					■

Patient management					
Investigation/tests requested					
Date of investigation/test requested					
Results of investigations/test recorded					
Health education provided					
Treatment prescribed					
Rehabilitation (where applicable)					
Referral (where applicable)					
Date of next visit indicated (where applicable)					
Health Care Practitioner's name and surname					
Health Care Practitioner's qualification					
Health Care Practitioner's signature					
Date signed by Health Care Practitioner					
HPCSA Number (where applicable)					

Child health records					
History of immunisations	■	■	■		
Deworming treatment	■	■	■		
Vit A supplementation	■	■	■		
Developmental screening (6,14 weeks and 6, 9, 18 months and 3, 5-6 years)	■	■	■		
Growth charts completed	■	■	■		
Basic screening completed according to Road to Health Charts	■	■	■		

Maternal health records

BANC 1st visit

Obstetric history	■	■		■	■
Previous obstetric history and family	■	■		■	■
Gestational age	■	■		■	■
General examinations	■	■		■	■
Abdomen – FHH examination	■	■		■	■
Vaginal examination	■	■		■	■
HIV status	■	■		■	■
Pregnancy risk screening	■	■		■	■

Health education provided, including information on MomConnect			
Health Care Practitioner's name and surname			
Health Care Practitioner's qualification			
Health Care Practitioner's signature			
Date signed by Health Care Practitioner			
BANC PLUS follow-up visits			
HIV status (retest)			
General examination			
Abdomen examination			
Supplements (for the mother)			
Feeding practices for baby discussed			
Gestational graph plotted per visit			
Health Care Practitioner's name and surname			
Health Care Practitioner's qualification			
Health Care Practitioner's signature			
Date signed by Health Care Practitioner			
Delivery summary			
Birth date			
Birth weight			
Apgar score			
Delivery mode			
Pregnancy outcome			
Health Care Practitioner's name and surname			
Health Care Practitioner's qualification			
Health Care Practitioner's signature			
Date signed by Health Care Practitioner			
Postnatal Care visits			
General examination (3-6 days post delivery)			
General examination (6 weeks post delivery)			
Health education			
Health Care Practitioner's name and surname			
Health Care Practitioner's qualification			
Health Care Practitioner's signature			
Date signed by Health Care Practitioner			
Prescription			
Patient's name and surname			
ID number			
Age			
Allergies			
Name of medication			
Strength of medication			
Quantity			
Dosage			
Dosage form			
Batch number (applicable for immunizations)			
Prescriber's name and surname			
Prescriber's qualification			
Prescriber's signature			
Date signed by prescriber			
Dispenser's name and surname			
Dispenser's signature			
SANC/HPCSA number			
Consent form (where applicable)			
Patient's full names and surname are written on the consent form			

The user's age or date of birth or identity number is documented in the consent form					
The exact nature of the operation/procedure/treatment is written on the consent form					
The consent form is signed by the patient or parent/guardian					
The consent form is signed by the health care provider					
The consent form is dated					
The information is legible					
Total					
Total maximum possible score (sum of all scores minus those marked NA)					
Score (Total ÷ Total maximum possible score)					

CHECKLIST FOR ELEMENT 16: District/Provincial SOP/guideline for filing, archiving and disposal of patient records is aligned to the National guideline

Use the checklist below to verify that the SOP/guideline describes the topics as listed

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Accessing of patient records	
Tracking of patient records	
Filing of patient records	
Storage of patient records	
Archiving of patient records	
Disposal of patient records	
Total	
Score (Total ÷ 6)	

CHECKLIST FOR ELEMENT 17: Guideline for accessing, tracking, filing, archiving and disposal of patient records is adhered to

Use the checklist below to determine whether the facility adheres to the SOP for accessing, tracking, filing, archiving and disposal of patient records

Scoring –in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Patient record storage room adheres to the following:	
Lockable with a security gate OR electronically controlled entrance (tag)	
There is a 'No unauthorised entry' sign on the door	
Shelves OR cabinets to store files	
Lowest shelf OR cabinets start at least 100 mm off the floor and the top of shelving is not less than 320 mm from the ceiling to allow airflow	
Aisle and shelves OR Cabinets labelled correctly according to SOP	
Counter or sorting table or dedicated shelves to sort files	
Light is functional and allows for all areas of the room to be well lit	
Room is clean and dust free	
Filing system for patient records adheres to the following:	
Facility retains patient records in use	
Standardised unique record registration number is assigned to files. One of the following methods is consistently used: patient's surname, identity document number or date of birth, or a set of facility-assigned and recorded numbers)	
Record registration number is clearly displayed on the cover of the patient record	
All patient records are filed as per SOP	
A tracking system is in place to check that all patient records issued for the day are returned to the patient records storage room/registry by the end of the day	
Annual register available of archived records	
Annual register available of disposed records	
Copy of disposal certificates available. Copies must correspond with entries in disposal register	
Access for patient to their records	
The SOP/guideline for filing, archiving and disposal of patient records describes the process to follow for patients to access their patient record	
Total	
Score (Total ÷ 18)	

CHECKLIST FOR ELEMENT 23: Priority stationery is available at the facility in sufficient quantities

Use the checklist below to check stationery availability

Scoring – in column for score mark as follows:

Y (Yes) = present; **N** (No) = not present; **NA** (not applicable) = if stationery is not applicable to the facility

Stationery type	Facility minimum required quantity (Record must be available stipulating the facility's minimum required quantities)	Score
Goods and supplies order forms/books		
Patient record for adults		
Patient record for children		
Road to Health Booklet for Boys and Girls		
Appointment Cards – General		
Patient information registers/Tick sheet		
WBPHCOT referral forms		
General referral forms		
Sick note		
Refusal of treatment forms		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 31: Quality Improvement plan address all areas, is signed and updated quarterly

Use the checklist below to check whether the facility's quality improvement plan address all areas, is signed and updated quarterly

Scoring - in column for score mark as follows:

Y (Yes) = Compliant, **N** (No) = no compliant, **NA** = if no gaps were identified in the specific area (verify whether there were no improvements needed by checking the results of the relating element)

Item	Score
Quality improvement plan is updated quarterly	
Quality improvement plan is signed by the facility manager	
Quality improvement plan address the following:	
Elements failed on the Ideal Clinic framework	
Gaps identified in the following areas are addressed:	
Patient experience of care surveys	
Complaints	
Patient safety incidents	
Clinical record audit	
Annual risk assessment for infection prevention and control	
Occupational health and safety register	
Security breaches	
Loss to follow-up of HIV and TB patients	
Tracer list medicine stock-out	
Laboratory specimen collection material stock-out	
Waiting Time	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 44: Adolescent and Youth Friendly Health services are available

Use the checklist below to check whether the facility renders services that are adolescent and youth friendly

Scoring –in column for score mark as follows:

Y (Yes) = if present and compliant; **N** (No) = if not present or not compliant

Item	Score
The National Adolescent and Youth Health Policy is available	
A poster indicating that the facility allocates dedicated time to consult adolescents and youth after school hours is visibly posted in the reception area and in consulting room(s) where AYFS are provided	
Facility's AYFS poster displays its comprehensive integrated package of AYFS services provided	
The facility's staff development plan makes provision for all healthcare professionals to be trained in AYFS	
The training register/record reflect that the healthcare professionals providing comprehensive integrated package of services to young people are trained on AYFS	
Facility's clinic committee includes a representative of the adolescent and youth sector aged 16-24 years	
Facility has a brief profile of adolescents and youth in its catchment area, including their challenges	
Total	
Score (Total ÷ 7)	

CHECKLIST FOR ELEMENT 50: Facility refers environmental health related risks to environmental health services

Use the checklist below to check whether the facility has access to and refers environmental health risks to environmental health services

Scoring – in column for score mark as follows:

Y (Yes) = if available and compliant; **N** (No) = if not available or not compliant

Item	Score
Contact details of the environmental health services are available at the facility	
No stagnant water outside the perimeters of the facility	
No overgrown vegetation outside the perimeters of the facility	
No litter outside the perimeters of the facility	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 51: ICSM compliant package of clinical guidelines is available in all consulting rooms

Use the checklist below to check the availability of ICSM compliant package of clinical guidelines

Scoring –in column for score mark as follows:

Check – randomly select two consulting rooms

Y (Yes) = present; **N** (No) = not present; **NA** (not applicable) = at least one copy of EML for hospitals must be in doctor's room, therefore only one consulting room needs to have one; mark other consulting room as NA

Item	Score Consulting room 1	Score Consulting room 2
Adult Primary Care guide (APC) – 2019 or Practical Approach to Care Kit (PACK), 2019		
Integrated Management of Childhood Illness Chart Booklet, 2019		
Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2018		
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Adults, 2019 **(only in consulting room used by the doctor)**		■
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Paediatrics, 2017 **(only in consulting room used by the doctor)**		■
Newborn Care Charts Management of Sick and Small Newborns in Hospital SSN Version 1,- 2014 **(only in consulting room used by the doctor)** (under review**)**		■
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

* Guidelines can also be available electronically or via apps
* Check that the most current guidelines are being used.

CHECKLIST FOR ELEMENT 52: National guidelines on priority health conditions are available in the facility

Use the checklist below to check the availability of national guidelines

Scoring – in column for score mark as follows:

Check – whether a copy of the guidelines and policies are available in an office that is accessible to staff

Y (Yes) = present; **N** (No) = not present

Item	Score
Antiretroviral Treatment Clinical Guidelines for the Management of HIV in Adults, Pregnancy, Adolescents, Children, Infants and Neonates (2019)	
National Tuberculosis Management Guidelines (2014)	
National Guidelines for the Management of Tuberculosis in Children (2014)	
Management of Rifampicin resistance - A clinical reference guide (2019)	
Guidelines for Maternity Care in South Africa (2016) (under review)	
BANC Plus (2017) (under review)	
Essential Steps in the Management of Obstetric Emergencies (ESMOE) Guidelines (2019)	
South African Infant and Young Child feeding Policy (2013) (updated with circular in 2017)	
Total	
Score (Total ÷ 8)	

*Guidelines can also be available electronically or via apps
* Check that the most current guidelines are being used.

CHECKLIST FOR ELEMENT 56: SOP for informed consent is available

Use the checklist below to check whether the SOP covers the topics as listed

Scoring –in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Signatory providing consent must be legally entitled	
Exact nature of the procedure or treatment must be communicated to the patient	
Patient's full names must appear on the consent form	
Age/date of birth or identity number of the patient must be reflected on the consent form	
Consent form must be signed by the health care provider who will perform the procedure	
The consent form must be dated	
All entries on the form must be legible	
Total	
Score ÷ 7	

CHECKLIST FOR ELEMENT 60: Facility/district SOP for patient safety incident reporting and learning is available

Use the checklist below to check whether the SOP covers the aspects as listed

Scoring –in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available

Item	Score
Terms of reference of the patient safety committee which reviews PSIs is clearly documented	
Designation of members of the committee	
Identifying patient safety incidents	
Immediate action	
Prioritisation	
Notification	
Investigation	
Classification	
Analysis	
Implementation of recommendations	
Learning	
Total	
Score ÷ 11	

CHECKLIST FOR ELEMENT 61: Patient Safety Incident management records comply with the National Guideline for Patient Safety Incident Reporting and Learning

Use the checklist below to check the availability of records required for the effective management of /Patient Safety Incidents

Scoring –in column for score mark as follows:

Check –patient safety records for the past three months.

Note:

- In cases where no incidents occurred in the past three months. The *Patient Safety Incident Compliance* report for the facility as generated from the national web-based information system must show 100% compliance for "Null" reporting for the facility for the past 3 months, facility then score 'NA' for the measures as listed

Y (Yes) = available; **N** (No) = not available; **NA** (Not Applicable) = if facility did not record patient safety incidents in the past three months

Item	Score
Patient Safety Incident Register	
Completed Patient safety incident form with investigation report is available for all patient safety incident cases that have been closed on the Patient Safety Incident Register	
Statistical report for classifications of agents involved	
Statistical report for classifications of incident type	
Statistical report for classifications of incident outcome	
Statistical report for indicators for patient safety incidents	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 64: Clinical audits are conducted annually on priority health conditions

Use the checklist below to check whether clinical audits are conducted for all the priority health conditions annually

Scoring - In column for score mark as follows:

Y (Yes) = audit conducted, **N** (No) = audit not conducted. If the condition has not been audited in the current financial year as the next due date for audit is still to come; assess the previous financial year's records for that condition. **NA** (Not applicable) = if the facility does not provide treatment for the specific health condition.

Item	Score
HIV/TB	
NCD (diabetes and hypertension)	
Maternal health (ANC &PNC)	
Well baby	
Sick child (IMCI)	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 65: 80% of records audited are compliant

Use the checklist below to check whether 80% of the records that were audited for the priority health conditions are compliant according to defined measures

Scoring - In column for score mark as follows:

Y (Yes) = scored 80% or more, **N** (No) = scored less than 80%. Audit the current financial year records, if the condition has not been audited in the current financial year as the next due date for audit is still to come; assess the previous financial year's records for that condition. **NA** (Not applicable) = if the facility does not provide treatment for the specific health condition.

Item	Score
HIV/TB	
NCD (diabetes and hypertension)	
Maternal health (ANC &PNC)	
Well baby	
Sick child (IMCI)	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 67: National guidelines are followed for all notifiable medical conditions

Use the checklist below to determine whether the National guidelines are followed for all notifiable medical conditions

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Notifiable Medical Conditions booklet available or have access to the web-based application to report Notifiable Medical Conditions	
All notifiable diseases are reported using the prescribed form or the web-based application	
Proof of submission of completed forms available	
Total	
Score (Total ÷ 3)	

CHECKLIST FOR ELEMENT 68: SOP for the management of patients with highly infectious diseases is available

Use the checklist below to check whether the topics as listed are described in the SOP

Scoring – in column for score mark as follows:

Y (Yes) = present; **N** (No) = not present

Item	Score
Room identified or dedicated area to isolate patients with suspected highly infectious disease.	
Procedure for terminal cleaning of the identified room to isolate patients with suspected highly infectious disease is detailed	
Personal Protective equipment required for treatment of infectious patients and cleaning of the room is listed	
Total	
Score (Total ÷ 3)	

CHECKLIST FOR ELEMENT 71: SOP for standard precautions is available

Use the checklist below to check whether the content of the SOP describes the items as listed

Scoring – in column for score mark as follows:

Y (Yes) = present; **N** (No) = not present

Item	Score
Hand hygiene	
Personal Protective Equipment	
Patient placement	
Appropriate use of antiseptics, disinfectant and detergents	
Respiratory hygiene and cough etiquette	
Injection safety, prevention of injuries from sharp instruments, post- exposure prophylaxis, medical surveillance and medical surveillance	
Environmental cleanliness	
Health care waste management	
Decontamination of medical devices	
Handling of linen and laundry	
Principles of asepsis	
Total	
Score (Total ÷ 11)	

CHECKLIST FOR ELEMENT 72: All staff have received in-service training in the last two years on standard precautions that is inline with the SOP

Use the checklist below to check whether staff has received in-service training on infection prevention and control in the past 2 years

Scoring – in column for score mark as follows:

Check – randomly select two health care professional and two cleaners from the facility's staff establishment. If the facility has less than four staff members on their staff establishment, check all the staff

Y (Yes) = staff member was trained; **N** (No) = staff member was not trained; **NA** (Not applicable) = if there are fewer than 4 staff members

Topics included in training	Healthcare Professional 1	Healthcare Professional 2	Cleaner 1	Cleaner 2
Healthcare professionals received training on:				
Hand hygiene				
Personal Protective Equipment				
Patient placement				
Appropriate use of antiseptics, disinfectant and				
Respiratory hygiene and cough etiquette				
Injection safety, prevention of injuries from sharp				
Environmental cleanliness				
Health care waste management				
Decontamination of medical devices				
Handling of linen and laundry				
Principles of asepsis				
Cleaners received training on:				
Hand hygiene				
Handling of linen and laundry				
Personal Protective Equipment				
Respiratory hygiene and cough etiquette				
Environmental cleanliness				
Health care waste management				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				

CHECKLIST FOR ELEMENT 73: Posters on hand hygiene is displayed

Use the checklist below to check whether posters on hand hygiene is displayed

Scoring –in column for score mark as follows:

Check – randomly select the areas as indicated and check whether the posters are available

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility has fewer areas than indicated.

Item	Score Viral area	Score Consulting room	Score Toilet
Poster for hand hygiene technique displayed near hand wash basin			
Poster for alcohol-based hand rub technique displayed on the notice board (or wall where there is no notice board)			■
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 76: Staff wear appropriate personal protective clothing

Use the checklist below to check whether protective clothing is available and worn

Scoring –in column for score mark as follows:

Y (Yes) = available and worn; **N** (No) = not available or not worn; **NA** (not applicable) = if staff is not in a situation where they need to wear protective clothing at the time of the audit

Item	Score -stock available	Score - worn by staff
Gloves – nonsterile		
Gloves – sterile		
Disposable gowns OR aprons		
Protective face shields OR goggles		
Surgical face masks		
N95 Respirators		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 77: The linen in use is sufficient, clean, appropriately used and not torn

Use the checklist below to check whether the linen is clean, appropriately used and not torn

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant. NA = Where the type of linen listed (cloth/disposable) is not used.

Item	Score
All examination couches are covered with linen	
Cloth linen (i.e. couch cover, two draw sheets, two sheets, two pillowcases) is available for each consultation room	
Disposable linen – at least 30 draw sheets per consultation room	
Linen is clean	
Linen is appropriately used for its intended purpose	
Linen is not torn	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 79: Sharps are disposed of appropriately

Use the checklist below to check whether sharps are disposed of appropriately

Check - randomly check two consulting rooms

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant; **NA** (not applicable) = if the facility only has one consulting room

Item	Score Consulting room 1	Score Consulting room 2
Health care risk waste is properly segregated		
Sharps are disposed of in impenetrable, tamperproof containers		
Sharps containers are disposed of when they reach the limit mark		
Sharps containers are placed on work surface or in wall mounted brackets		
Used needles are not recapped before disposal		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 81: All staff are made aware of the letter/memo/circular that informs staff of the procedure to follow for prophylactic immunisations

Use the checklist below to check whether staff are made aware of the SOP on access to prophylactic immunisations for high risk infections

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant.

Item	Score
Staff signed acknowledgment of the letter/memo/circular that sets out the guidelines for prophylactic immunisations	
Letter/memo/circular from the provincial head of health or the delegated staff member at the provincial office contains the following information:	
Procedure to follow for prophylactic immunisations	
Who will bear the cost of immunizations	
Recommended vaccinations as determined by the disease profile of the health facility or region	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 88: Results of the annual patient experience of care survey are visibly displayed at the main waiting area

Use the checklist below to check whether the results of the patient experience of care survey are displayed at the main waiting area

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant.

Item	Score
Access to services - Level of user experience with accessibility of health care services	
Availability and use of medicines - Level of user experience with availability and use of medicines	
User safety - Level of user experience with physical safety while in the health establishment	
Cleanliness and infection prevention and control - Level of user experience with cleanliness of a health establishment and infection prevention and control practices in the health establishment	
Values and attitudes - Level of user experience of personnel values and attitudes	
User waiting time - Level of user experience with waiting time for services in the health establishment	
Total	
Score (Total ÷ 6)	

CHECKLIST FOR ELEMENT 91: Complaints/compliments /suggestions toolkit is available at the main entrance/exit

Use the checklist below to check whether the complaint forms, box and poster is available at the main entrance

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant.

Item	Score
Lockable complaints/compliments/suggestions boxes are visibly placed at main entrance/exit	
Complaints box is mounted (fixed to the wall or flat surface)	
Official complaint/compliment/suggestion forms and pen are at the box at the main entrance/exit	
A standardised poster describing the process to follow to lodge a complaint, give a compliment or make a suggestion is visibly displayed at the entrance of the facility	
A standardised poster describing the process to follow to lodge a complaint, give a compliment or make a suggestion is visibly displayed in a second language commonly spoken official languages	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 92: The complaints/compliments/suggestions records complies with the National Guideline to Manage Complaints/Compliments/ Suggestions

Use the checklist below to check the availability of records required for effective Complaint/Compliment/Suggestion Management

Scoring – in column for score mark as follows:

Check –complaints/compliments/suggestion records for the past three months for statistical data. For complaint letters and redress letter/minutes, check the last five resolved complaints for evidence

Note:

- In cases where no complaints, compliments or suggestions occurred in the past three months. The *Complaints Compliance Report* for the facility as generated from the national web-based information system must show 100% compliance for "Null" reporting for the facility for the past 3 months, facility then score 'NA' at measures marked with a '*'.

Y (Yes) = available; **N** (No) = not available; **NA** (Not applicable) = facility did not receive any complaints/compliments/suggestion in the past 3 months

Item	Score
The facility/district SOP to Manage Complaints/Compliments/Suggestions is available	
* Complaints letters (check the last 5 complaints resolved)	
* Complaints redress letters/minutes (check the last 5 complaints resolved)	
* Complaints register	
* Compliments register	
* Suggestion register	
* Statistical report for indicators and classifications for complaints	
* Statistical report for indicators and classification for compliments	
* Statistical report for indicators and classification for suggestions	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 93: Targets set for complaints indicators are met

Use the checklist below to check whether the targets set for the complaints indicators were met

Scoring - in column for score mark as follows:

Check – the previous quarter's data

Y (Yes) = complaint, **N** (No) = not compliant

Item	Target	Score
Complaint resolution rate	90%	
Complaint resolution rate within 25 working days	90%	
Total		
Score (Total ÷ 2)		

CHECKLIST FOR ELEMENT 95: SOP for management of availability of medicines is available

Use the checklist below to check whether the SOP for management of availability of medicines describes the topics as listed

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Cleaning and appearance of the medicine room/dispensary	
Storage and organisation of the medicine room/dispensary	
Security and control of access to the medicine room/dispensary (within and outside normal working hours)	
Cold chain management	
Emergency cupboard/trolley management	
Management of medicines in the consulting room	
Pest Control	
Calculation and use of minimum, maximum and re-order stock levels	
Completion and management of stock (bin) cards	
Stock taking (counting) procedure	
Management of short-dated stock	
Procurement (ordering) of medicines	
Ordering and delivering schedule for stock	
Receipt of medicines into the medicine room/dispensary (ordered or borrowed stock)	
Managing return of stock to the depot	
Issuing of medicines to the consulting rooms and emergency trolley	
Managing stock transfers between facilities	
Medicine availability monitoring procedure/guide	
Separation and handling of expired, obsolete, unusable or patient-returned medicines (Schedule 0 – 4 medicines)	
Disposal of expired, obsolete, unusable and patient-returned medicines (Schedule 0 – 4 medicines)	
Managing recall of medicines	
Storage and control of Schedule 5 and Schedule 6 medicines	
Separation and disposal of expired, obsolete and unusable medicines (schedule 5 and schedule 6 medicines)	
Total	
Score (Total ÷ 23)	

Note: The topics listed for the SOP can be covered in separate SOPs, it does not need to be one document

CHECKLIST FOR ELEMENT 96: Hand hygiene facilities are available at the medicine /dispensary room

Use the checklist below to check whether there is running water, liquid hand wash soap and disposable hand paper towels

Scoring - in column for score mark as follows:

Y (Yes) = available, **N** (No) = not available, NA = (*) During drought episodes taps can be closed. Dispensary/medicine room must then have alcohol-based hand rub available. If alcohol-based hand rub is available mark the measure for liquid had wash soap as compliant.

Item	Score
Functional hand wash basin	
Taps are functional with running water (*)	
Liquid hand wash soap	
Disposable hand paper towels	
Poster on hand hygiene is displayed near the hand wash basin	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 100: Medicine/ dispensary room and waiting area are clean

Use the checklist below to check whether the areas are clean

Scoring – in column for score mark as follows:

Check – the medicine/dispensary room and the waiting area for the medicine/dispensary room

Y (Yes) = compliant; **N** (No) = not compliant, **NA** = Facility do not have all the areas

Area and measures	Score	Score
CONSULTING ROOMS:	**Medicine/dispensary room**	**Waiting area**
Windows are clean		
Window sills are clean		
Floor is clean		
Wall skirtings are free of dust		
Countertops are clean		
Door handles are clean		
Walls are clean		
Bins are not overflowing		
Bins are clean		
Areas are odour-free		
Areas are free of cobwebs		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 101: Medicine room/dispensary is neat and medicines are stored to maintain quality

Use the checklist below to check how the facility stores medicine to ensure that quality medicines are available

Scoring – in column for score mark as follows:

Y (Yes) = if present and compliant; **N** (No) = if not present or not compliant

Item	Score
Access to the dispensary/medicine room is controlled at all times	
There are no cracks, holes or signs of water damage in the dispensary/medicine room	
There is sufficient space in the dispensary/medicine room to store medicines needed in the facility	
There are no medicines stored in direct contact with the floor	
There is no evidence of pests in the dispensary/medicine room	
Medicines are stored neatly on shelves	
Medicines are stored according to a classification system	
Brazier bins (storage organisers) are neatly labelled	
Medicines are packed according to FEFO (First Expired, First Out) principles	
Total	
Score (Total ÷ 9)	

CHECKLIST FOR ELEMENT 102: Temperature of the medicine room/dispensary is maintained within the safety range

Use the checklist below to check whether the medicine in the medicine room/dispensary is maintained within the safety range

Scoring - in column for score mark as follows:

Y (Yes) = comply, **N** (No) = do not comply

Item	Score
There is a functional air conditioner	
There is at least one functional, wall-mounted room thermometer	
The temperature of the medicine room/dispensary/pharmacy is recorded daily	
The temperature of the medicine room/dispensary/pharmacy is maintained within the safety range	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 103: Cold chain procedure for vaccines is maintained

Use the checklist below to check whether the cold chain for vaccines is maintained

Scoring – in column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant

Item	Score
Facility has a vaccine or medicine refrigerator with a thermometer	
The temperature of the refrigerator is recorded twice daily, 7 hours apart (check one month's record)	
The temperature of the refrigerator is maintained between 2-8 ^{o}C (check one month's record)	
There is a cooler box for storage of vaccines if needed	
Ice packs are available for use as needed	
There is a functional thermometer for use in the cooler box	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 104: Medicine cupboard or trolley is neat and orderly

Use the checklist below to check whether the medicine cupboard or trolley is neat and orderly

Scoring – in column for score mark as follows:

Check – randomly select two consultation rooms (if the facility has only one, score this) and check whether the medicine cupboard or trolley complies with measures

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility does not dispense medicine from the consulting rooms or the facility only has only one consulting room

Item	Score Consultation room 1	Score Consultation room 2
Surfaces inside the cupboard/trolley are clean		
Medicines are neatly grouped together according to a classification system e.g. by dosage form (tablets/capsules, liquids, ointments, drops etc.) in alphabetical order and by generic name		
Medicine packets/bottles are clean and dust free		
There are no loose tablets or vials lying around		
There are no used unsheathed needles lying around or placed in open vials		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 107: Electronic networked system for monitoring the availability of medicine is used effectively

Use the checklist below to check whether the electronic networked system for monitoring the availability of medicines is used appropriately

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** = as indicated

Item	Score
The facility has functional electronic networked system for monitoring the availability of medicines	
The approved list of medicines to be updated is visible in the medicine room	
The capturing device is in good working order	
The accessories for the capturing device are in good working order (only applicable to SVS)	
The capturing device and its accessories are stored in a lockable unit (only applicable to SVS)	
Access to the keys for the unit where the capturing device is kept is restricted (only applicable to SVS)	
The facility has not been marked as non-reporting for two weeks (7 working days) or more (at the point of assessment) * (only applicable to SVS)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

* For facilities using the stock visibility system (SVS) the source for this information will be the website used to view captured medicine availability data and the Primary Health Care Facility Dashboard associated with it.

CHECKLIST FOR ELEMENT 109: 90% of the medicines on the tracer medicine list are available

Use the checklist below the check whether the tracer medicines listed are available

Scoring – in column for score mark as follows:

Check – available stock in the medicine room/dispensary

Y (Yes) = available, not expired; **N** (No) = not available OR available but expired; **NA** (Not Applicable) = where the medicine is required for a specific service provided at the clinic, e.g. treatment of HIV/TB and the clinic do not provide the specific service as they only provide services for screening of HIV/TB.

MEDICINE ROOM/DISPENSARY			
Oral formulations/inhalers			
	Score		Score
Abacavir 20mg/ml solution OR Abacavir 60 mg dispersible tablets		Lopinavir, Ritonavir 200/50mg tablets OR Atazanavir 150mg capsules WITH Ritonavir 100mg capsules	
Abacavir 300mg tablets		Lopinavir, Ritonavir 80/20mg/ml solution	
Amoxicillin 250mg capsules		Metformin 500mg tablets	
Amoxicillin 500mg capsules		Metformin 850mg tablets	
Amoxicillin 125mg/5ml OR 250mg/5mlsuspension		Methyldopa 250 mg tablets	
Azithromycin 250mg OR 500mg tablets		Metronidazole 200mg OR 400mg tablets	
Beclomethasone/Budesonide 100mcg OR 200 mcg metered dose inhaler (MDI)		Nevirapine 200mg tablets	
Carbamazepine 200mg tablets OR Lamotrigine 25mg tablets		Nevirapine 50mg/5ml suspension	
Co-trimoxazole 200/40mg per 5ml suspension		Oral rehydration solution	
Co-trimoxazole 400/80mg tablets		Paracetamol 120mg/5ml syrup	
Efavirenz 200 mg capsules		Paracetamol 500mg tablets	
Efavirenz 50mg capsules		Prednisone 5mg tablets	
Enalapril 5mg or 10mg tablets		Pyrazinamide 500mg tablets	
Ferrous lactate/gluconate liquid/syrup		Pyridoxine 25mg tablets	
Ferrous sulphate (dried) /fumarate tablets providing ± 55 to 65mg elemental iron		Rifampicin + Isoniazid (RH) 300mg/150mg OR 150/75mg tablets	
Folic acid 5 mg tablets		Rifampicin + Isoniazid (RH) 60/60 tablets OR Rifampicin + Isoniazid (RH) 75/50 tablets	
Hydrochlorothiazide 12.5mg OR 25mg tablets		Rifampicin + Isoniazid (RH) 60/60 tablets OR Rifampicin + Isoniazid (RH) + pyrazinamide (RHZ) 75/50/150 tablets	
Ibuprofen 200 mg OR 400mg tablets		Rifampicin + Isoniazid + pyrazinamide + ethambutol (RHZE) 150/75/400/275 tablets	
Isoniazid 100mg OR 300mg tablets		Salbutamol 100 mcg MDI	

	Score		Score
Lamivudine 10mg/ml solution		Simvastatin 10mg OR 20mg OR 40mg tablets	
Lamivudine 150mg tablets		Tenofovir/emtricitabine 300/200 mg tablets	
Combined oral contraceptive pill containing 30 mcg ethinylestradiol ethinylestradiol/levonorgestrel OR ethinylestradiol/norethisterone OR ethinylestradiol/gestodene OR ethinylestradiol/norgestimate		Tenofovir/emtricitabine/efavirenz 300/200/600mg tablets	
		Tenofovir/lamotrigine/dolutegravir 300/300/50mg tablets	
		Vitamin A 50,000U OR 100,000U OR 200,000U capsules	
		Zidovudine 50mg/5ml, 200 ml suspension	

Injections

	Score		Score
Benzathine benzylpenicillin 1.2MU OR 2.4MU vial		Medroxyprogesterone acetate 150mg/ml injection OR norethisterone 200mg/ml	
Ceftriaxone 250mg OR 500mg OR 1g			

Topicals

	Score		Score
Chloramphenicol 1%, ophthalmic ointment			

Fridge

	Score		Score
BCG vaccine		Pneumococcal Conjugated Vaccine (PCV)	
Insulin, short acting		Polio vaccine (oral)	
Measles vaccine		Rotavirus vaccine	
Hexavalent: DTaP-IPV-HB-Hib vaccine		Tetanus toxoid (TT) vaccine	
Oxytocin 5 OR 10 IU/ml AND Ergometrine 0.5mg OR oxytocin/ ergometrine 5U/0.5mg combination			

Emergency trolley

	Score		Score
Activated Charcoal		Lidocaine/Lignocaine IM 1% OR 2% 20ml vial	
Adrenaline 1mg/ml (Epinephrine) 1ml ampoule		Magnesium sulphate 50%, 1g/2ml ampoule (minimum of 14 ampoules required for one treatment)	
Amlodipine 5mg OR 10mg tablets		Midazolam (1mg/ml 5ml ampoule OR 5mg/ml) 3ml ampoule) OR Diazepam 5mg/ml 2ml ampoule	
Aspirin 100mg OR 300mg tablets		Nifedipine 10mg capsules	
Atropine 0.5mg OR 1mg ampoule		Paediatric solution e.g. ½ strength Darrows (200ml or 500ml) solution AND neonatalyte 200ml solution	
Calcium Gluconate 10% 10ml ampoule		Prednisone 5 mg tablets	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose 1L solution		Promethazine 25mg/2ml 2ml ampoule	
Furosemide 20mg 10mg/2ml ampoule		Short acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate sublingual, 5 mg tablets	

Hydrocortisone 100mg/ml 200mg/2ml vial		Salbutamol 0.5% 20ml nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vial for nebulisation OR Salbutamol 100 mcg MDI	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml Unit dose vial for nebulisation		Sodium chloride 0.9% 1L solution	
		Thiamine 100mg/ml 10ml vial	
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 113: Health care waste is managed appropriately in the medicine/dispensary room

Use the checklist below to check whether health care waste is managed appropriately

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
General waste is disposed of separately in a black/beige/white or transparent plastic bag	
Pharmaceutical waste is stored separately in a container or box for removal to the disposing health facility	
Total	
Score (Total ÷ 2)	

CHECKLIST FORELEMENT 115: Basic medical supplies (consumables) are available

Use the checklist below to check availability of medical and dressing supplies

Scoring –in column for score mark as follows:

Check – available stock in storage room

Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) = if the facility uses consumables for older HB models, AEDs and for the section named "Only applicable if the facility have a permanent doctor"

SURGICAL SUPPLIES			
Item	**Score**	**Item**	**Score**
Intravenous administration set 20 drops/ml		Gloves exam n/sterile large /box	
Intravenous administration set paeds 60 drops/ml		Gloves exam n/sterile medium /box	
Blade stitch cutter sterile/pack		Gloves exam n/sterile small /box	
Urinary (Foley's) catheter silicone/latex 10f		Gloves surg sterile sz6 OR6.5 OR small/box	
Urinary (Foley's) catheter silicone/latex 12f		Gloves surg sterile sz 7OR 7.5 OR medium/box	
Urinary (Foley's) catheter silicone/latex 14f		Gloves surg sterile sz 8 OR large/box	
Urinary (Foley's) catheter silicone/latex 18f		Intravenous cannula 18ggreen/box	
Urine drainage bag		Intravenous cannula 20g pink/box	
Simple face mask for oxygen for adults		Intravenous cannula 22g blue/box	
Reservoir mask for oxygen for adults		Intravenous cannula 24g yellow/box	
Nasal cannula (prongs) for adults		Needles: 18 (pink) OR 20 (yellow)/box	
Simple face mask for oxygen, paediatric		Needles: 21 (green)/box	
Reservoir mask for oxygen for paediatric		Needles: 23 (blue)/box OR 22 (black)/box	
Simple face mask for oxygen for adults		* Syringes 3-part 2ml/box	
Reservoir mask for oxygen for adults		* Syringes 3-part 5ml/box	
Face mask for nebuliser OR face mask with nebuliser chamber for adult		* Syringes 3-part 10 or 20ml/box	
Face mask for nebuliser OR face mask with nebuliser chamber for paediatric		Insulin syringe with needle/box	
Nasogastric tubes: 400mm - 600mm fg 8		Suture chromic g0/0 or g1/0 1/2 75cm	
Nasogastric tubes: 800 - 1200mm fg10 or 12		Suture nylon g2/0 or g3/0 3/8 45cm	
Disposable aprons		Suture nylon g4/0 3/8 45cm	
Eye patches (disposable)			
Disposable razors			
Vaginal Cusco speculum (disposable)			
Only applicable if the facility uses older HB model			
Haemolysis applicator sticks		HB chamber glass-grooved	
HB meter clip		HB cover glass-plain	
Only applicable if facility uses an Automatic External Defibrillator (AED)			
Replacement pads for AED - adult		Replacement pads for AED – paediatric	

Only applicable if facilities have a permanent doctor					
Disposable Amnihook			Dental syringe and needle for LA		
Ultrasound gel medium viscosity					
Sub-total 1 for surgical supplies			**Sub-total 2 for surgical supplies**		
Sub-total 1 Maximum score (sum of all scores minus those NA)			**Sub-total 2 Maximum score (sum of all scores minus those NA)**		
DRESSINGS SUPPLIES					
Item	**Pack size**	**Score**	**Item**	**Pack size**	**Score**
Plaster roll	1		Sanitary towels maternity /pack	12	
Bandage crepe	1		Stockinette 100mm OR150mm/roll	1	
Gauze paraffin 100x100 /box	1		Adhesive micro-porous surgical tape 24/25mm or 48/50mm	1	
Gauze swabs plain n/s 100x100x8ply/pack	100		70% isopropyl alcohol prep pads 24x30 1ply OR 2 ply /box	200	
Basic disposable dressing pack(should contain a minimum of: cotton-wool balls, swabs, 2 forceps, disposable drape)	1		Gauze abs grade 1 burn /pack		
Cotton wool balls 1g 500`s	1				
Sub-total 1 for dressing supplies			**Sub-total 2 for dressing supplies**		
Total for surgical and dressing supplies					
Total maximum score for surgical supplies (sum of all scores minus those marked NA) and dressing supplies					
Score (Totals ÷ Total maximum)					

* Syringe three part consists of the barrel, the plunger and the rubber piston

CHECKLIST FORELEMENT 117: Required functional diagnostic equipment and concurrent consumables for point of care testing are available

Use the checklist below to check the availability of laboratory equipment and consumables in the various areas where they are used

Scoring –in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) = only for malaria rapid strips – in areas where malaria is not prevalent, malaria rapid strips to be marked NA

Item	Score
Laboratory equipment and consumables	
Hb meter	
Blood glucometer	
Spare batteries for blood glucometer	
Lancets	
Blood glucose strips	
Urine dipsticks	
Urine specimen jar OR flask	
Malaria rapid test (where applicable in facilities in KZN, GP, MP and LP)	
Rapid HIV test	
Rh 'D' (Rhesus factor) test	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 118: Required specimen collection materials and stationery

Use the checklist below to check whether specimen collection materials and stationery are available

Scoring –in column for score mark as follows:

Y (Yes) = available, **N** (No) = not available, **NA** (Not applicable) = for measures marked with '*' if facility uses liquid based cytology method OR traditional pap smear consumable not required

Item	Score
Vacutainer tube: Blue Top (Sodium Citrate)	
Vacutainer tube: Red OR Yellow Top (SST)	
Vacutainer tube: Grey Top (Sodium Fluoride)	
Vacutainer tube: White Top (PPT or EDTA)	
Vacutainer tube: Purple Top (EDTA)	
Microtainer tube: Purple Top (EDTAPaeds)	
Microtainer tube: Yellow Top (SST-Paeds)	
Sterile specimen jars	
Swabs with transport medium (NA if there is not a permanent doctor)	
Sterile Tubes (without additive) for MCS (Microscopy, culture and sensitivity) (NA if there is not a permanent doctor)	
Venipuncture needles (Green OR Black)	
Specimen Plastic Bags	
Pap smear collection materials	
Liquid - based Cytology (LBC) vials (NA if facility uses traditional pap smear method)	
Combi - brush (NA if facility uses traditional pap smear method)	
Cervix – brush (NA if facility uses traditional pap smear method)	
Fixative (NA if facility uses liquid based cytology method)	
Wooden spatula (NA if facility uses liquid based cytology method)	
Slide holder OR brown envelope (NA if facility uses liquid based cytology method)	
Microscope slides (NA if facility uses liquid based cytology method)	
Early Infant diagnosis (EID) collection material	
DBS PCR Kit OR EDTA Microtainer tube	
NHLS stationery	
N1 - PHC Request Form	
N2 - Cytology Request Form	
N3 - PHC Order Book for Specimen Collection Material	
N4 - PHC Facility Specimen Register	
SMS printer	
Thermal paper roll (NA only if facility has real-time access to Labtrak/TrakCareWebview)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 119: Specimens are collected, packed, stored and prepared for transportation according to the Primary Health Care Laboratory Handbook

Use the checklist below to check whether specimens are handled according to the PHC Laboratory Handbook

Scoring – in column for score mark as follows:

Check – three samples from each of the groups of specimens (A to C) as listed in Table 1 and check whether they comply with the guidelines provided

Y (Yes) = handled correctly; **N** (No) = not handled correctly; **NA** (not applicable) = NA if the facility does not have the specific group of specimens listed in Table 1 in storage.

Table 1: Grouping of specimens

Group A	Group B	Group C
Blood Pleural effusion Sputum Stool Urine	Pap smear	MCS (Microscopy, culture and sensitivity)

Item	Group A			Group B			Group C		
	Score sample 1	Score sample 2	Score sample 3	Score sample 1	Score sample 2	Score sample 3	Score sample 1	Score sample 2	Score sample 3
General									
Specimens are clearly labelled									
Each laboratory request form is correctly completed									
There is at least one functional wall mounted thermometer in area where lab specimens are stored for courier collection									
The temperature of the storage area for lab specimens is recorded daily									
Group A specimens									
Samples are kept away from direct sunlight									

Where the room temperature exceeds 25°C, samples are stored in the fridge (at +- 5°C)									
Length of storage does not exceed 24 hours, stored at room temperature (+- 20-25°C)									
Group B specimens									
Stored at room temperature									
Stored inside a slide carrier (envelope)									
Group C specimens									
Samples placed into the transport medium provided (where appropriate)									
Samples kept away from direct sunlight									
Where room temperature exceeds 25°C, samples are stored in the fridge (+- 5°C)									
Length of storage does not exceed 24 hours, stored at room temperature (+-20-25°C)									
Total									
Total maximum possible score (sum of all scores minus those marked NA)									
Score (Total ÷ Total maximum possible score)									

CHECKLIST FORELEMENT 120: Laboratory results are received within specified turnaround times

Use the checklist below to check whether the turnaround times for laboratory results are in line with specifications

Scoring –in column for score mark as follows:

Check – register for sending and receiving laboratory results, check three records

Y (Yes) = results received within specified turnaround time; **N** (No) = results NOT received within specified turnaround time; **NA** (not applicable) = if the specific result (listed under point 1 to 9) is not in the record

No	Item	Turnaround time	Score record 1	Score record 2	Score record 3
1	All blood results except those listed in number 2 and 3	24 hours			
2	Blood results: Cholesterol, CRP (C-reactive protein), FT4 (Free Throxine 4), HbA1c (Glycated Haemoglobin), Phenytoin, lipase, PSA (Prostate specific hormone), Red Cell Folate, Triglycerides, TSH (Thyroidstimulating hormone), Vitamin B12, CD4 Count, RPR (Rapid Plasma Reagin test for syphilis), Hepatitis A, B or C	24-48 hours			
3	Blood results: HIV PCR for infants	48-120 hours			
4	Blood results: Viral load	48-120 hours			
5	Pap smear	Variable depending on result (4-6 weeks)			
6	Pus MCS (Microscopy, culture and sensitivity)	24-72 hours			
7	Sputum: TB	5 days-6 weeks			
8	Sputum: Xpert MTB/RIF	40- hours			
9	Stool (MCS)	24 - 72 hours			
10	Urine (MCS)	24 -72 hours			
	Total				
	Total maximum possible score (sum of all scores minus those marked NA)				
	Score (Total ÷ Total maximum possible score)				

CHECKLIST FOR ELEMENT 124: Staff appointed in line with the determined requirement

Use the checklist below to check whether the staff appointed at the facility is appointed according to the determined requirement

Scoring - in column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant, **NA** (Not applicable) = if staff is not required according to determined need

Category of staff	Score
Medical practitioner	
Pharmacy	
Pharmacist	
Pharmacist assistant – basic	
Pharmacist assistant – post basic	
Nurses	
Clinical Nurse Practitioners	
Advanced midwife	
Professional nurses	
Enrolled nurses	
Enrolled nursing assistants	
Oral health	
Dentist	
Dental assistant	
Dental therapist	
Oral hygienist	
Allied health professionals	
Occupational therapists	
Physiotherapists	
Speech and hearing therapists	
Social workers	
Nutritionists/dietitians	
Optometrists	
Psychologist	
Management	
Facility manager	
Support Staff	
Administrative officers	
Cleaners (general assistants)	
Grounds men	
Security officers	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Totals ÷ Total maximum possible scores)	

CHECKLIST FOR ELEMENT 130: All healthcare workers have current registration with relevant professional bodies

Use the checklist below to check whether staff appointed at the facility is registered with relevant professional bodies

Scoring - in column for score mark as follows:

Y (Yes) = have current registration, **N** (No) = do not have current registration, **NA** (Not applicable) = if category of staff in not appointed at the facility

Category of staff	Score	Category of staff	Score
Nurses			
Clinical Nurse Practitioners		Enrolled nurses	
Professional nurses		Nursing assistants	
Medical officers			
Medical Officer – full time		Medical officer- sessional - private GP	
Medical officer- sessional			
Oral health			
Dentists – full time		Dental therapist	
Dentist – sessional		Dental assistant	
Dentist – sessional – private		Oral hygienist	
Pharmacy			
Pharmacist		Pharmacist assistants	
Allied health professionals			
Nutritionist/Dietician		Social workers	
Physiotherapist		Optometrist	
Occupational therapist		Speech and hearing therapist	
Psychologist			
Totals			
Total maximum possible scores (sum of total scores minus the ones marked NA)			
Score (Totals ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 131: Performance Management guidelines are adhered to

Use the checklist below to check whether Performance Management guidelines are adhered to

Scoring –in column for score mark as follows:

Check – randomly select three files for review

Y (Yes) = completed; **N** (No) = not completed; **NA** (Not applicable) = if the facility has less than three staff members or the staff member is working less than a year

Item	Score Record 1	Score Record 2	Score Record 3
Performance management agreement signed for the current financial year			
Key performance areas and activities aligned with the facility's operational plan			
Personal Development Plan completed			
Evaluation is conducted six monthly			
Annual assessment report for previous financial year completed			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 138: SOP for management of occupational health and safety incidents is available

Use the checklist below to check whether the topics as listed is covered in the SOP

Scoring –in column for score mark as follows:

Check – the content of the SOP

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Standardised form to be completed to report an occupational health and safety incident	
Process for submitting completed forms	
Format for register to record occupational health and safety incidents	
Analysis of incidents to establish trends	
Total	
Score ÷ 4	

CHECKLIST FOR ELEMENT 141: Occupational Health and Safety incidents are managed and recorded in a register

Use the checklist below to check whether the Occupational Health and Safety register is completed

Scoring – in column for score mark as follows:

Check – the register for entries of incidents six month prior to the status determinations

Y (Yes) = completed; **N** (No) = not completed; **NA** (Not applicable) = if the facility had no occupational health and safety incidents

Item	Score
Summary of description of incident	
Summary of investigation conducted	
Outcome of investigation	
Recommendation/s	
Date recommendations implemented	
Personnel who experience needle stick injuries received post-exposure prophylaxis	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 149: Disinfectant, cleaning materials and equipment are available

Use the checklist below to check whether the disinfectant, cleaning materials and equipment are available

Scoring –in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available; **NA** (Not applicable) = e.g.:
- Mop for exterior areas for facilities that do not have exterior areas to clean.
- Polish, stripper and floor polisher in facilities where the floor surface does not require polishing.

Disinfectant and cleaning Material	Score
High-level disinfection for medical devices (e.g. sodium perborate powder OR ortho-phthalaldehyde)	
Chlorine releasing agent - hypochlorite (e.g. Biocide D or Clorox)	
Alcohol based agent (70%-90%)	
Detergents – neutral pH	
Wet polymer (floor polish)	
Protective polymer(strippers)	
All cleaning materials clearly labelled	
Materials Safety Data Sheets for all cleaning products	
Cleaning equipment	**Score**
Two-way bucket system for mopping floors (bucket for clean water and bucket for dirty water) OR Janitor trolley	
Colour labelled mop – Red for toilets and bathrooms	
Colour labelled mop – Blue for clinical areas and non-clinical service areas	
Mop labelled for cleaning exterior areas	
Green bucket and cloths for bathroom and consulting room basins	
Red bucket and cloths for toilet	
White cloths for kitchen	
Blue bucket and cloths for clinical areas and non-clinical service areas	
Labelled spray bottle for disinfectant solution	
Window cleaning squeegee	
Mop sweeper or soft-platform broom	
Floor polisher	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 150: All work completed is signed by cleaners and verified by manager or delegated staff member

Use the checklist below to check whether all work is signed by cleaners and verified by manager or delegated staff member

Scoring - in column for score mark as follows:

Y (Yes) = signed off, **N** (No) = not signed off, **NA** (not applicable) = if there are fewer areas in the clinic

Area	Score area 1		Score area 2	
	Signed by cleaner	Signed by supervisor	Signed by cleaner	Signed by supervisor
Consultation rooms (randomly select 2 rooms)				
Vital rooms			███████████████	
Waiting area				
Public toilets (randomly select 2toilets)				
Staff toilets (randomly select 2 toilets)				
Staff room(s)				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				

CHECKLIST FORELEMENT 151: All service areas are clean

Use the checklist below to check whether the various service areas are clean

Scoring –in column for score mark as follows:

Check – randomly select two service areas as indicated in the column for the score

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if there are fewer areas in the clinic than listed

Area and measures	Score	Score
CONSULTING ROOMS:	**Consulting room 1**	**Consulting room 2**
Windows clean		
Window sills clean		
Floor is clean		
Wall skirtings are free of dust		
The countertops are clean		
The door handles are clean		
Mirrors are clean		
Walls are clean		
Bins are not overflowing		
Bins are clean		
The areas are odour-free		
All areas free of cobwebs		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		
VITAL SIGNS ROOMS:	**Vital signs room 1**	**Vital signs room 2**
Windows clean		
Window sills clean		
Floor is clean		
Wall skirtings are free of dust		
The countertops are clean		
The door handles are clean		
Mirrors are clean		
Walls are clean		
Bins are not overflowing		

Bins are clean		
The areas are odour-free		
All areas free of cobwebs		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		
WAITING AREAS:	**Waiting area 1**	**Waiting area 2**
Windows clean		
Window sills clean		
Floor is clean		
Wall skirtings are free of dust		
The countertops are clean		
The door handles are clean		
Walls are clean		
Bins are not over flowing		
Bins are clean		
The areas are odour-free		
All areas free of cobwebs		
Totals		
Total maximum possible scores (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 152: Hand hygiene and sanitary facilities are available

Use the checklist below to check whether there is running water, toilet paper, liquid hand wash soap and disposable hand paper towels

Scoring –in column for score mark as follows:

Check – randomly select two toilets, two consulting rooms and two vital signs room to review

Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) if the facility has fewer areas than listed for review or (*) During drought episodes taps can be closed, facility must then have alcohol-based hand rub available.

Item	Area 1	Area 2
Toilet	**Toilet 1**	**Toilet 2**
Functional hand wash basin		
Taps functional with running water (*)		
Toilet paper		
Liquid hand wash soap		
Disposable hand paper towels		
Consultation room	**Consultation room 1**	**Consultation room 2**
Functional hand wash basin		
Taps functional with running water (*)		
Liquid hand wash soap		
Alcohol based hand rub		
Disposable hand paper towels		
Vital signs room	**Vital signs room 1**	**Vital signs room 2**
Functional hand wash basin		
Taps functional with running water (*)		
Liquid hand wash soap		
Alcohol based hand rub		
Disposable hand paper towels		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 153: SOP for managing general and health care risk waste is available

Use the checklist below to verify that the SOP describes the topics as listed

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant.

Item	Score
Segregation containers	
Handling of segregated waste	
Storage of segregated waste	
Collection	
Disposal of waste	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 154: Health care waste are managed appropriately

Use the checklist below to check whether health risk care waste is managed appropriately

Scoring - in column for score mark as follows:

Y (Yes) = available/with lid and appropriately lined; **N** (No) = not available or no lid or not appropriately lined; **NA** (not applicable) = if the facility has fewer than listed areas

Item	Score				
	Staff Toilet	Public Toilet	Clinical area 1	Clinical area 2	Waiting area
Sanitary disposal bins with functional lids OR health care risk waste box					
* Sanitary disposal bins/boxes lined with appropriate colour plastic bags					
Sanitary disposal bins/boxes are clean and not overflowing					
Health care risk waste disposal bins with functional lids OR health care risk waste box					
Health care risk waste disposal bins/boxes lined with red colour plastic bags					
Health care risk waste disposal bins/boxes contain only health care waste					
Health care risk waste disposal bins/boxes are not overflowing					
Anatomical waste (Red bucket with sealed lid) applicable where male medical circumcisions or deliveries are done					
Bins available for general waste					
Bins for general waste are lined with black, white, transparent or beige coloured bags					
Total					
Total maximum possible score (sum of all scores minus those marked NA)					
Score (Total ÷ Total maximum possible score)					

* If disposable boxes for sanitary waste is used where gel granules in the bottom of the box treat the waste, no bag is required, and facility can score "Y"

CHECKLIST FOR ELEMENT 155: Central Storage area for healthcare waste is appropriate

Use the checklist below to check whether storage areas for health care waste is appropriate

Scoring - in column for score mark as follows:

Y (Yes) = comply; **N** (No) = do not comply

General waste storage area	Score
General waste is stored in a designated area	
General waste is stored in appropriate containers which are neatly packed or stacked	
General waste is not burned or buried in the health establishment premises but collected for disposal at a designated area/landfill	
Health care risk waste storage area	**Score**
Health care risk waste is stored in an access-controlled area	
Health care waste storage area is clean and free from rodents	
Health care storage area is well ventilated	
Health care risk waste containers are not stored directly on the floor, i.e. it is stored on shelves or pallets or wheelie bins	
Area has access to water to hose the area	
Area has adequate drainage for the water (must be connected to a municipal sewerage system)	
Central storage area is enclosed and protected from natural elements (rain, wind and sun)	
Area is marked with international biohazard symbol	
Total	
Score (Total ÷ 11)	

CHECKLIST FOR ELEMENT 156: All toilets are clean, intact and functional

Use the checklist below to check whether the toilets are functional

Scoring – in column for score mark as follows:

Check – randomly select three toilets to review

Y (Yes) = intact; **N** (No) = not intact; **NA** (not applicable) = if the facility has fewer than three toilets or has no urinals

Item	Score Toilet 1	Score Toilet 2	Score Toilet 3
Cleanliness of toilets			
Windows clean			
Window sills clean			
Floor is clean			
Basins are clean			
Walls are clean			
Toilets/urinals are clean			
Sanitary bins clean and not overflowing			
The areas are odour-free			
All areas free of cobwebs			
Intact and functional			
The toilet bowl seat and cover/squat pan is intact			
The toilet bowl is stain free			
The toilet flush/sensor flush is functional			
The toilet cistern cover is complete and in place			
The urinals are intact and functional			
The urinal/flush sensor is functional			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 157: Exterior of the facility and the grounds are clean and well maintained

Use the checklist below to check whether the exterior of the facility is clean and well maintained

Scoring – in column for score mark as follows:

Check – observe the general exterior environment of the facility

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility's structural make-up does not allow for gardens e.g. in a multi-storey building in a city, at least one prompt must be scored, e.g. "There is no dirt and litter around facility premises"

Prompts	Score
The facility's premises are clean (e.g. free from dirt and litter)	
Exterior walls of the facility are clean	
Verandas are clean	
Grass is cut	
Paving is free of weeds	
Flower beds are well kept and free of weeds	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 163: Safety and security SOP is available

Use the checklist below to verify that the SOP describes the topics as listed

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
High risk areas and the specific security needs for these areas	
Access control within the facility	
Reporting of security incidents (format for register for security breaches)	
Training of personnel on the management of alarms (where applicable)	
Provision of guarding services	
Patrolling of the health facility	
Equipment for security personnel	
Documentation of response time for security breaches/incidents	
Total	
Score (Total ÷ 8)	

CHECKLIST FOR ELEMENT 166: There is a standard security guard room OR the facility has an alarm system linked to armed response

Use the checklist below to check whether facility security adheres to standard guidelines

Scoring –in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility's structural make-up does not allow for its own security guard room e.g. in a multi-storey building in a city or at very small facilities. Security services should, however, still be available therefore measures listed under equipment and stationery must be scored.

Item	Score
Does the facility have an alarm system linked to armed response (if Yes, checklist for security guardroom and security equipment must not be assessed. If No, assess checklist for security guardroom and security equipment)	
Security guard room	
Kitchenette – sink with cupboard underneath	
Table	
Chair	
Functioning lights	
Security equipment for security officer(s)and accompanying stationery	
Baton	
Handcuffs OR Cable ties	
Incident book	
Metal detector	
Telephone OR two-way radio OR dedicated cell phone	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 168: Security services rendered according to contract

Use the checklist below to check whether the security services are rendered according to contract

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = measures marked with * if the facility has an alarm system linked to armed response

Item	Score
If armed response is available	
Response time indicated in register for security breaches	
If there were breaches did they respond in time?	
If security guards are available	
Security guards wear uniform *	
Security guards have received training *	
Duty patrol register updated *	
There is an access control system in the facility *	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 170: Security breaches are managed and recorded in a register

Use the checklist below to check whether security breaches are managed and recorded in a register

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** = if the facility had no security breaches in the past three months. Zero reporting must be done in such cases.

Item	Score
A designated person monitors the service level agreement for security services	
Security breaches are recorded in a register	
Remedial actions to address security breaches identified are implemented	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 171: Functional firefighting equipment is available

Use the checklist below to check whether firefighting equipment is available

Scoring –in column for score mark as follows:

Y (Yes) = available and intact; **N** (No) = not available and intact; **NA** (not applicable) = for fire hose if the facility has less than 250 m^2 floor area OR the facility has no water supply

Item	Score
Fire extinguishers	
Fire hoses and reels unless it is a single-storey building of less than 250 m^2 in floor area OR the facility has no water supply	
Two 9 kg or equivalent fire extinguishers where the facility has no water supply	
Firefighting equipment is maintained according to schedule	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 181: Clinic space accommodates all services and staff

Use the checklist below to check whether internal and external areas offer sufficient space for task performance

Scoring – in column for score mark as follows:

Check – whether the following areas are present and sufficient

Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) = for small facilities that cannot accommodate all recommended areas

Item	Score
INTERIOR SPACE	
General	
Main waiting area	
Help desk/Reception/patient registration	
Toilets	
Clinical Service Areas	
Sub-waiting area	
Vitals area /room	
Consulting room	
Counselling room	
Emergency/resuscitation room	
Health Support services (Allied health)	
Treatment room	
Support /administration areas	
Multipurpose meeting room	
Facility manager office	
Staff tea room with kitchenette	
Medicine store room /dispensary/Pharmacy	
• Shelves available	
Medicine collection kiosk (CCMDD)	
Surgical stores store-room	
Lockable cleaning material store room OR cupboard	
Laundry	
Dirty utility room	
Linen room OR cupboard	
Exterior space	
Parking spaces	
a. Staff	
b. Disabled	
c. Ambulance	
Waste storage room	
a. Domestic/general waste area	
b. Medical/bio-hazardous waste area	
Garden store room	
Drying area (for mops, etc.)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 182: All clinical areas have adequate natural (windows) or functional mechanical ventilation (ceiling fans/air conditioner)

Use the checklist below to check whether the various areas have adequate ventilation

Scoring – in column for score mark as follows:

Check – randomly select the number of areas to review as indicated in the column for scores
Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) = if the facility has fewer than the listed areas

Area	Score	
WAITING AREA:	**Score Waiting time area 1**	**Score Waiting time area 2**
Have adequate ventilation		
VITAL SIGNS ROOMS:	**Score Vital signs room 1**	**Score Vital signs room 2**
Have adequate ventilation		
CONSULTATION ROOM	**Score Consultation room 1**	**Score Consultation room 2**
Have adequate ventilation		
Total score		
Total maximum possible score (sum of all scores minus NA)		
Percentage (Total score ÷ Total maximum possible score) x 100		

CHECKLIST FOR ELEMENT 183: There is access for people with wheelchairs

Use the checklist below to check accessibility for patients in wheelchairs

Scoring –in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Terrain must be compacted and smooth from gate to main entrance	
At least one main entrance has a ramp to allow access for persons in wheelchairs unless the entrance to the facility has no incline	
Ramp at one main entrance has handrails unless the entrance to the facility has no incline	
Elbow taps in toilet with access for persons in wheelchairs	
At least one toilet has access for persons in wheelchairs	
In the toilet/s with access for persons in wheelchair, door handles are at the height of a wheelchair s	
In the toilet/s with access for persons in wheelchairs handrails are installed	
Total	
Score (Total ÷7)	

CHECKLIST FOR ELEMENT 185: Building(s) is maintained

Use the checklist below to check whether the various internal and external areas are in good condition

Scoring –in column for score mark as follows:

Check – randomly select the number of areas to review as indicated in the column for scores

Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) = if the facility has fewer than the listed areas or measure is not applicable to the specific facility because of the structural make-up of the facility e.g. in a multi storey building in a city

Area and measures	Scores Building exteriors	
EXTERIOR OF BUILDING(S)		
Walls – paint in good condition		
Roof intact		
Gutters		
a. Intact		
b. Paint in good condition		
Doors and gates		
a. Working condition		
b. Handles working		
c. Open and close		
Lights		
a. Present		
b. Functional		
Paving is intact		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		
INTERIOR OF BUILDING(S)		
WAITING AREAS	**Score Waiting area**	**Score Waiting area**
Walls – paint in good condition		
Ceiling		
a. Paint in good condition		
b. Intact		
Lights		
a. Present		

	b. Functional		
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

TOILETS	**Score ablution 1**	**Score ablution 2**
Wall-mounted paper towel dispenser(s)		
Wall-mounted hand soap dispenser(s)		
Wall tiles in good condition		
Walls – paint in good condition		
Ceiling		
a. Paint in good condition		
b. Intact		
Lights		
a. Present		
b. Functional		
Windows		
a. Window panes intact (glass not broken)		
b. Handles working		
c. Windows open and close		
Doors		
a. Intact		
b. Handles working		
c. Open and close		
Hand wash basins		
a. Intact		
b. Taps functional (with running water)		
c. Not blocked		
Floor intact		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CONSULTATION ROOMS	**Score Consultation room 1**	**Score Consultation room 2**
Wall-mounted paper towel dispenser(s)		
Wall-mounted hand soap dispenser(s)		
Walls – paint in good condition		
Floor in good condition		

Ceiling		
a. Paint in good condition		
b. Intact		
Lights		
a. Present		
b. Functional		
Windows		
a. Window panes intact (glass not broken)		
b. Handles working		
c. Windows open and close		
d. Window covering (curtains/blinds) clean and intact (blinds)		
Doors		
a. Intact		
b. Handles working		
c. Open and close		
Hand wash basins		
a. Intact		
b. Taps functional (with running water)		
c. Not blocked		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		
VITAL SIGNS ROOMS:	**Score Vital signs room 1**	**Score Vital signs room 2**
Wall-mounted paper towel dispenser(s)		
Wall-mounted hand soap dispenser(s)		
Walls – paint in good condition		
Floor intact		
Ceiling		
a. Paint in good condition (not peeling/faded)		
b. Intact (not broken)		
Lights		
a. Present		
b. Functional		
Windows		
a. Glass not broken		
b. Handles working		
d. Windows open and close		

Doors		
a, Intact		
b. Handles working		
c. Open and close		
Hand wash basins		
a. Intact		
b. Taps functional		
c. Not blocked		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

AREA	Score	Maximum possible score
Exterior of building(s)		
Interior of building(s)		
Waiting areas		
Ablution facilities		
Vital signs rooms		
Consultation rooms		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 186: Building complies with safety regulations

Use the checklist below to check whether the building is compliant with safety regulations

Scoring –in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available

Item	Score
Fire compliance certificates	
Electrical compliance certificates	
All emergency exits are kept free of obstacles	
Entrance is free from any obstruction or hazards	
Emergency vehicle entrance is free from any obstruction or hazards	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 187: Furniture is available and intact in service areas

Use the checklist below to check whether facility service areas are equipped with sufficient functional furniture

Scoring –in column for score mark as follows:
Check – randomly select the areas to review as indicated in the column for scores
Y (Yes) = available and intact; **N** (No) = not available or not intact; **NA** (not applicable) = where the facility has fewer than the listed areas

Item	Score	Score
Waiting areas	**Waiting area 1**	**Waiting area 2**
Seating		
a. Adequate seating for all patients		
b. Chairs / benches intact		
c. Notice boards available		
Consulting rooms	**Consultation room 1**	**Consultation room 2**
Desk		
a. Available		
b. Intact (including the drawers)		
Chair (clinician)		
a. Available		
b. Intact		
At least 1 chair (patient)		
a. Available		
b. Intact		
Tilting examination couch		
a. Available		
b. Intact		
Bedside footstool		
a. Available		
b. Intact		
Wall-mounted or portable anglepoise-style examination lamp		
a. Available		
b. Intact		
Lockable medicine cupboards		
a. Available		
b. Intact		
Dressing trolley (at bedside for examination equipment)		
a. Available		
b. Intact (including the drawers)		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 188: Essential equipment is available and functional in consulting areas

Use the checklist below to check whether essential equipment is available and functional in consultation/vital signs and child health rooms

Scoring – in column for score mark as follows:

Check – randomly select the number of areas to review as indicated in the scoring columns

Y (Yes) = available and functional; **N** (No) = not available or not functional; **NA** (not applicable) = if the facility has fewer than the listed areas

Item	Score Consul-tation room 1	Score Consul-tation room 2	Score Vitals room	Score Child health rooms
CONSULTATION ROOMS				
Stethoscope				
Non-invasive Baumanometer (wall mounted/ portable)				
Adult, paediatric and large cuffs (3) for Baumanometer				
Diagnostic sets including ophthalmic pieces (wall mounted or portable)				
Patella hammer				
Tuning fork (only required in one consultation room)				
Tape measure				
Vaginal Cusco speculum				
Clinical thermometers				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				
VITAL SIGNS ROOM (Note if facility is too small to have a vital signs room, check for equipment in consultation rooms)				
Non-invasive electronic Baumanometer (wall mounted/ portable)				
Adult, paediatric and large cuffs (3) for Baumanometer				
Blood glucometer				
Peak flow meter				
Adult clinical scale up to 150 kg				
Stethoscope				
HB meter				
Clinical thermometer				
Height measure				
Tape measure				

Bin (general waste)				
Urine specimen jars				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				
CHILD HEALTH ROOM				
Baby scale				
Bassinet				
Stethoscope				
Blood glucometer				
Non-invasive Baumanometer (wall mounted/ portable)				
Paediatric cuff for Baumanometer				
Diagnostic sets including ophthalmic pieces (wall mounted or portable)				
Patella hammer				
Tape measure				
Clinical thermometers				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				

AREA	Score	Maximum possible score
Consultation rooms		
Vital signs rooms		
Child health rooms		
Totals		
Total maximum possible scores (sum of all scores minus those marked NA)		
Scores (Totals ÷ Total maximum possible scores)		

CHECKLIST FOR ELEMENT 192: Resuscitation room is equipped with functional, basic resuscitation equipment

Use the checklist below to check whether the emergency/resuscitation room complies with measures for functional basic equipment

Scoring –in column for score mark as follows:

Check – room where resuscitation is performed

Y (Yes) = available and functional; **N** (No) = not available or not functional

Item	Score
Emergency trolley with lockable medicine drawer and accessories	
Examination couch/2-part obstetric delivery bed	
Wall or mobile or ceiling mounted anglepoise-style examination lamp	
Nebuliser OR face mask with nebuliser chamber for adult and paediatric	
Functional electric powered OR manual suction devices	
Drip stand	
Dressing trolley	
Cardiac arrest board	
Bin (general waste)	
Thermal (space) blanket	
Gloves exam n/sterile gloves: small, medium and large at least one pair of each size	
Gloves surgical sterile: 6 OR 6.5, 7 OR 7.5 and 8, at least one pair of each size	
Protective face shields OR Goggles	
Disposable plastic aprons	
Disposable non-sterile face masks	
Resuscitation algorithms	
Resuscitation documentation register	
Wall-mounted liquid hand soap dispenser	
Wall-mounted hand paper dispenser	
Total	
Score (Total ÷ 21)	

CHECKLIST FOR ELEMENT 193: Emergency trolley is restored daily or after each use

Use the checklist below to check whether the emergency trolley is sufficiently stocked with unexpired medication

Scoring –in column for score mark as follows:

Check –whether the equipment and medication area available on the emergency trolley (or on other surfaces in the resuscitation room); and also *check expiry date of medication. Mark expired medication as "N"*

Y (Yes) = available and functional or within expiry; **N** (No) = not available or not functional or expired; **NA** = as indicated

NOTE:
- Equipment is divided into equipment for facilities that have a permanently appointed doctor and those who do not have a permanently appointed doctor. Facilities that do not have a permanently appointed doctor must mark **NA** at the section indicated for equipment for facilities with a permanently appointed doctor.
- Facility can only score **NA** for AED/ECG if the facility has a signed letter by the Provincial Head of Health indicating that the facility is excepted from this measure.

Item	Score
EQUIPMENT FOR ALL FACILITIES **(with and without a permanently appointed doctor)**	
Water-soluble lubricant/lubricating jelly	
Oropharyngeal airways (Guedel) size 00	
Oropharyngeal airways (Guedel) size 0	
Oropharyngeal airways (Guedel) size 1	
Oropharyngeal airways (Guedel) size 2	
Oropharyngeal airways (Guedel) size 3	
Oropharyngeal airways (Guedel) size 4	
Oropharyngeal airways (Guedel) size 5	
Magill's forceps for adults	
Magill's forceps for paediatric	
Manual bag valve mask/ manual resuscitator OR self-inflating bag with compatible masks for adults	
Manual bag valve mask/ manual resuscitator OR self-inflating bag with compatible masks for paediatric	
Simple face mask for oxygen for adults	
Reservoir mask for oxygen for adults	
Nasal cannula (prongs) for adults	
Simple face mask for oxygen, paediatric	
Reservoir mask for oxygen for paediatric	
Nasal cannula (prongs) for paediatric	
Face mask for nebuliser OR face mask with nebuliser chamber for adult	
Face mask for nebuliser OR face mask with nebuliser chamber for paediatric	
Automatic External Defibrillator (AED) OR ECG monitor and defibrillator	
Defibrillator pads for AED OR Electrodes for ECG monitor and defibrillator	
Conductive gel (NA if the facility uses a AED)	
Intravenous cannula 18g green and appropriate strapping	

Intravenous cannula 20g pink and appropriate strapping	
Intravenous cannula 22g blue and appropriate strapping	
Intravenous cannula 24g yellow and appropriate strapping	
Syringes 3-part: 2ml	
Syringes 3-part: 5ml	
Syringes 3-part: 10ml OR 20ml	
Syringes: insulin syringes	
Needles: 18 (pink) OR 20 (yellow)	
Needles: 21 (green)	
Needles: 23 (blue) OR 22 (black)	
Suture chromic g0/0 or g1/0 1/2 75cm	
Suture nylon g2/0 or g3/0 3/8 45cm	
Suture nylon g4/0 3/8 45cm	
Suction catheters: sizes 8F	
Suction catheters: sizes 10F	
Suction catheters: sizes 12F	
Suction catheters: sizes 14F	
Sharps container	
Admin set 20 drops/ml 1.8m /pack	
Admin set paeds 60 drops/ml 1.8m /pack	
Stethoscope	
Haemoglobin meter	
Blood glucometer with testing strips and spare batteries	
Diagnostic set and batteries including ophthalmic pieces (wall mounted or portable)	
Rescue scissors (to cut clothing)	
Paediatric Broselow tape OR Pawper tape	
Wound care (gauze, bandages, cotton wools, plasters, alcohol swabs and antiseptic solutions)	
Urinary (Foley's) catheters: 8f	
Urinary (Foley's) catheters: 10f	
Urinary (Foley's) catheters: 12f	
Urinary (Foley's) catheters: 14f	
Urinary (Foley's) catheters: 16f	
Urinary (Foley's) catheters: 18f	
Urinary bag specified in the surgical supply list	
Nasogastric tubes: 400mm - 600mm fg 8	
Nasogastric tubes: 800 - 1200mm fg10 or 12	
Medication/vacolitre stickers	
Present individually or in combined multifunctional diagnostic monitoring set	
Pulse oximeter with adult & paediatric probes	
Non invasive electronic blood pressure monitoring device including paediatric, adult& large adult cuff sizes	
Clinical thermometer (in ^{0}C, non-mercury)	
EQUIPMENT FOR FACILITIES WITH A PERMANENT APPOINTED DOCTOR	

Laryngoscope handle with functional batteries	
Adult curved blades for laryngoscope size 2	
Adult curved blades for laryngoscope size 3	
Adult curved blades for laryngoscope size 4	
Paediatric laryngoscope handle	
Paediatric straight blades for laryngoscope size 00	
Paediatric straight blades for laryngoscope size 0	
Paediatric straight blades for laryngoscope size 1	
Spare bulbs for laryngoscope (NA if the laryngoscope has a built in bulb)	
Spare batteries for laryngoscope handle	
Endotracheal tubes – uncuffed size 2mm	
Endotracheal tubes – uncuffed size 2.5mm	
Endotracheal tubes –uncuffed size 3.0mm	
Endotracheal tubes – uncuffed size 3.5mm	
Endotracheal tubes – uncuffed size 4mm	
Endotracheal tubes –uncuffed size 4.5mm	
Endotracheal tubes – cuffed size 3.0mm	
Endotracheal tubes – cuffed size 4.0mm	
Endotracheal tubes – cuffed size 5.0mm	
Endotracheal tubes – cuffed size 6.0mm	
Endotracheal tubes – cuffed size 7.0mm	
Endotracheal tubes – cuffed size 8.0mm	
Tape to hold tie endotracheal tube in place	
Adult-size introducer, intubating stylet or bougie for endotracheal tubes	
Paediatric size introducer, intubating stylet or bougie for endotracheal tubes	
Laryngeal masks (supraglottic airways): adult (size 3 OR 4 Or 5)	
Emergency medicines (also check expiry dates) – *APPLICABLE TO ALL FACILITIES*	
Activated Charcoal	
Adrenaline 1mg/ml (Epinephrine)1ml ampoule	
Amlodipine 5mg OR 10mg tablets	
Aspirin 100mg OR 300mg tablets	
Atropine 0.5mg OR 1mg ampoule	
Calcium gluconate 10% 10ml ampoule	
Furosemide 20mg OR 10mg/2ml ampoule	
Hydrocortisone 100mg/ml OR 200mg/2ml vial	
Insulin, short acting (stored in the medicine fridge) vial	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml unit dose vial for nebulisation	
Lidocaine/Lignocaine IM 1% OR 2% 20ml vial	
Magnesium sulphate 50%, 1g/2ml ampoule (minimum of 14 ampoules required for one treatment course)	
Midazolam (1mg/ml 5 ml ampoule OR 5mg/ml 3ml ampoule) OR Diazepam 5mg/ml 2ml ampoule	
Nifedipine 5mg/10mg capsules	
Prednisone 5 mg tablets	
Promethazine 25mg/2mlampoule OR Promethazine 25mg/1ml	

Short-acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate sublingual, 5mg tablets	
Salbutamol 0.5% 20ml nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vials for nebulisation	
Thiamine 100mg/ml 10ml vial	
Water for injection	
IV Solutions	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose 1L solution	
Pediatric solutions e.g. ½ strength Darrows (200ml or 500ml) solution AND neonatalyte200ml solution	
Sodium Chloride 0.9% solution 1L solution	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 194: There is an emergency sterile obstetric delivery pack

Use the checklist below to check whether there is sterile emergency packs available.

Scoring –in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available

Note: sterile packs must be labelled with the contents of the pack

Item	Quantity	Total score
NON-NEGOTIABLE		
Stitch scissor	1	
Episiotomy scissor	1	
Cord scissor	1	
Dissecting forceps non-toothed (plain)	1	
Dissecting forceps toothed	1	
Artery forceps, straight, long	2	
Needle holder	1	
Small bowl	2	
Kidney dishes OR receivers (big)	2	
EXTRAS (not part of sterilised pack)		
Basin	1	
Stainless-steel round bowl, large	1	
Sterile green towels	4	
Sterile gown		
Disposable apron	2	
Gauzes	5	
Vaginal tampons	1	
Sanitary towels	2	
Round cotton wool balls	1 pack	
Umbilical cord clamps	2	
Total		
Score (Total ÷ 18)		

CHECKLIST FOR ELEMENT 195: There is a sterile pack for minor surgery

Use the checklist below to check whether equipment for minor surgery is available

Scoring –in column for score mark as follows:

Y (Yes) = available and functional; **N** (No) = not available or not functional

Note: sterile packs for minor surgery must be labelled indicating the contents of the pack

Item	Quantity	Score
MINOR STITCH / SUTURING TRAY		
Small stitch tray	1	
Stitch scissor	1	
Toothed forceps	1	
Non-toothed forceps	1	
Bard-Parker surgical blade handle to fit accompanying blades (blades do not form part of sterilised pack but must be available)	1	
Mosquito, straight	2	
Mosquito, curved	2	
Artery forceps, straight	2	
Artery forceps, curved	2	
Needle holder	1	
Swab holder	1	
Total		
Score (Total ÷ 11)		

CHECKLIST FOR ELEMENT 199: An up-to-date asset register is available

Use the checklist below to check whether the asset register is up to date

Scoring – in column for score mark as follows:

Y (Yes) = present; **N** (No) = not present

Item	Item 1	Item 2	Item 3
Randomly select three items from the asset register and verify that each is present in the facility			
Randomly select three items from the facility and verify that each is present in the asset register			
Total			
Score (Total ÷ 6)			

CHECKLIST FOR ELEMENT 203: Facility has a functional back-up electricity supply when needed

Use the checklist below to check whether the back-up electricity supply is functional and available in the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (Not Applicable) = if the facility has fewer areas as indicated for review

Area	Score
Back-up electricity supply is maintained in accordance with the manufacturer's instructions	
Back-up electricity supply is tested for functionality in accordance with the manufacturer's instructions	
Lights and plugs in the resuscitation room is connected to the back-up electricity supply	
Medicine/dispensary room connected to the back-up electricity supply (At a minimum the vaccine and medicine fridge must be connected to the back-up supply)	
Total	
Score (Total ÷4)	

CHECKLIST FOR ELEMENT 217: Staff members demonstrate that incoming policies/guidelines/SOPs/ notices have been read and are understood by appending their signatures on such policies/guidelines/SOPs/ notices

Staff should sign for all incoming policies/guidelines/SOP/notices. This checklist lists the clinical guidelines relating to the National priority health conditions

Scoring – in column for score mark as follows:

Check – whether staff has signed to acknowledge that they have taken note and understood the content of the guidelines

Y (Yes) = signed; **N** (No) = did not sign

Item	Score
Adult Primary Care guide (APC) – 2019 or Practical Approach to Care Kit (PACK), 2019	
Integrated Management of Childhood Illness Chart Booklet, 2019	
Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2018	
Antiretroviral Treatment Clinical Guidelines for the Management of HIV in Adults, Pregnancy, Adolescents, Children, Infants and Neonates (2019)	
National Tuberculosis Management Guidelines (2014)	
National Guidelines for the Management of Tuberculosis in Children (2014)	
Management of Rifampicin resistance - A clinical reference guide (2019)	
Guidelines for Maternity Care in South Africa (2016) (under review)	
BANC Plus (2017) (under review)	
Essential Steps in the Management of Obstetric Emergencies (ESMOE) Guidelines (2019)	
South African Infant and Young Child feeding Policy (2013) (updated with circular in 2017)	
Total	
Score (Total ÷ 11)	

CHECKLIST FOR ELEMENT 218: There is a functional clinic committee

Use the checklist below to check whether the documents are available as evidence that the clinic committee is functional

Scoring –in column for score mark as follows:

Y (Yes) = present; **N** (No) = not present

Item	Score
Formal Appointment	
Signed appointment letters from Office of the MEC or delegated person	
Provincial/district constitution adopted and signed	
Provincial/district code of conduct adopted and signed	
Training	
Attendance register for orientation and training conducted for the current term	
Services Planning, Monitoring, Evaluation and meetings	
List of community needs as determined by the Clinic/CHC Committee in past 12 months	
Agendas indicating that community needs and progress against operation plan was discussed at least twice in the past 12 months	
Signed minutes indicating that the Clinic/CHC Committee was informed on the progress against the facility's operational plan at least twice in the past 12 months	
Current year plan indicating scheduled meetings (at least two within the next 12 months)	
Attendance registers show that meetings held formed a quorum	
Minutes of Clinic/CHC Committee meetings indicate that statistical data on population health indicators are discussed	
Minutes of Clinic/CHC Committee meetings indicate that the clinic's human resources situation is discussed	
Minutes of Clinic/CHC Committee meetings indicate that situation relating to equipment and, supplies is discussed	
Complaints, Compliments and Suggestion Management (check record of the past 6 months)	
Proof that Clinic/CHC Committee took part in opening complaints boxes according to stipulated schedule (signed register)	
Minutes indicate that the management of complaints, compliments and suggestions are discussed at Clinic/CHC Committee meetings	
Accountability and Communication	
Contact details of Clinic/CHC Committee members clearly displayed in reception area	
Total	
Score (Total ÷ 15)	

CHECKLIST FOR ELEMENT 224: Register for emergency transport requests is available

Use the checklist below to check that the details for emergency transport requests have been recorded

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Date of the request	
Details (name, surname, date of birth/age/ID number) of the user for whom the request was made.	
Reason for referral	
Time the ambulance requested	
Time the ambulance arrived	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 227: SOP available for the handover between facility and EMS

Use the checklist below to verify that the SOP describes the topics as listed

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Documentation of EMS arrival time	
Documentation of handover time	
Method of transfer of patient from facility to ambulance	
Identification of patients	
Maternal clinical condition	
Monitoring of maternal vital signs	
Documentation of clinical condition of baby (where relevant)	
Documentation of treatment and interventions	
Monitoring of patient during transfer	
The receiving facility expecting the patient	
Name of the health care provider who accepted the transfer at the facility expecting the patient	
Documentation of known medical history	
Transfer letter and/or maternity records to be handed over to the receiving facility	
The name and designation of the health care provider receiving the patient	
Signatures of transferring and receiving personnel	
Target time frames for the completion of patient hand over	
Total	
Score (Total ÷ 16)	

CHECKLIST FOR ELEMENT 229: District referral SOP is available

Use the checklist below to verify that the SOP describes the topics as listed

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
District referral network	
Referral register	
Standardised patient referral form	
Standardised patient referral feedback form	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 230: There is a referral register that records referred patients

Use the checklist below to verify that the referral register contains the details as listed below

Scoring – in column for score mark as follows:

Check – Use the referral register

Y (Yes) = compliant; **N** (No) = not compliant

Item	Score
Name of referred patient	
Name of referring facility	
Name of referring health care practitioner	
Name of receiving facility	
Summary clinical details	
Reason for referral	
Date referred	
Totals	
Scores (Totals ÷ 7)	

CHECKLIST FOR ELEMENT 231: Copy of referral form available in the patient record

Use the checklist below to verify that the referral forms were completed in full

Scoring – in column for score mark as follows:

Check – Use the referral register and randomly select three records of patients that were referred

Y (Yes) = compliant; **N** (No) = not compliant

Item on referral form	Score Record 1	Score Record 2	Score Record 3
Name of patient			
Name of referring institution			
Name of referring health care practitioner			
Name of receiving institution			
Summary of clinical details			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			