

# IDEAL CLINIC DEFINITIONS, COMPONENTS AND CHECKLISTS



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Version 18

**health**

Department:  
Health  
**REPUBLIC OF SOUTH AFRICA**

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## ACKNOWLEDGEMENTS

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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
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 hypocalcaemic 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, cyanosis, 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
WBPHCOT:	Ward Based Primary Health Care Outreach Team
TB:	tuberculosis
WISN:	Workload Indicator Staffing Needs

# 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<sup>1</sup>, 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

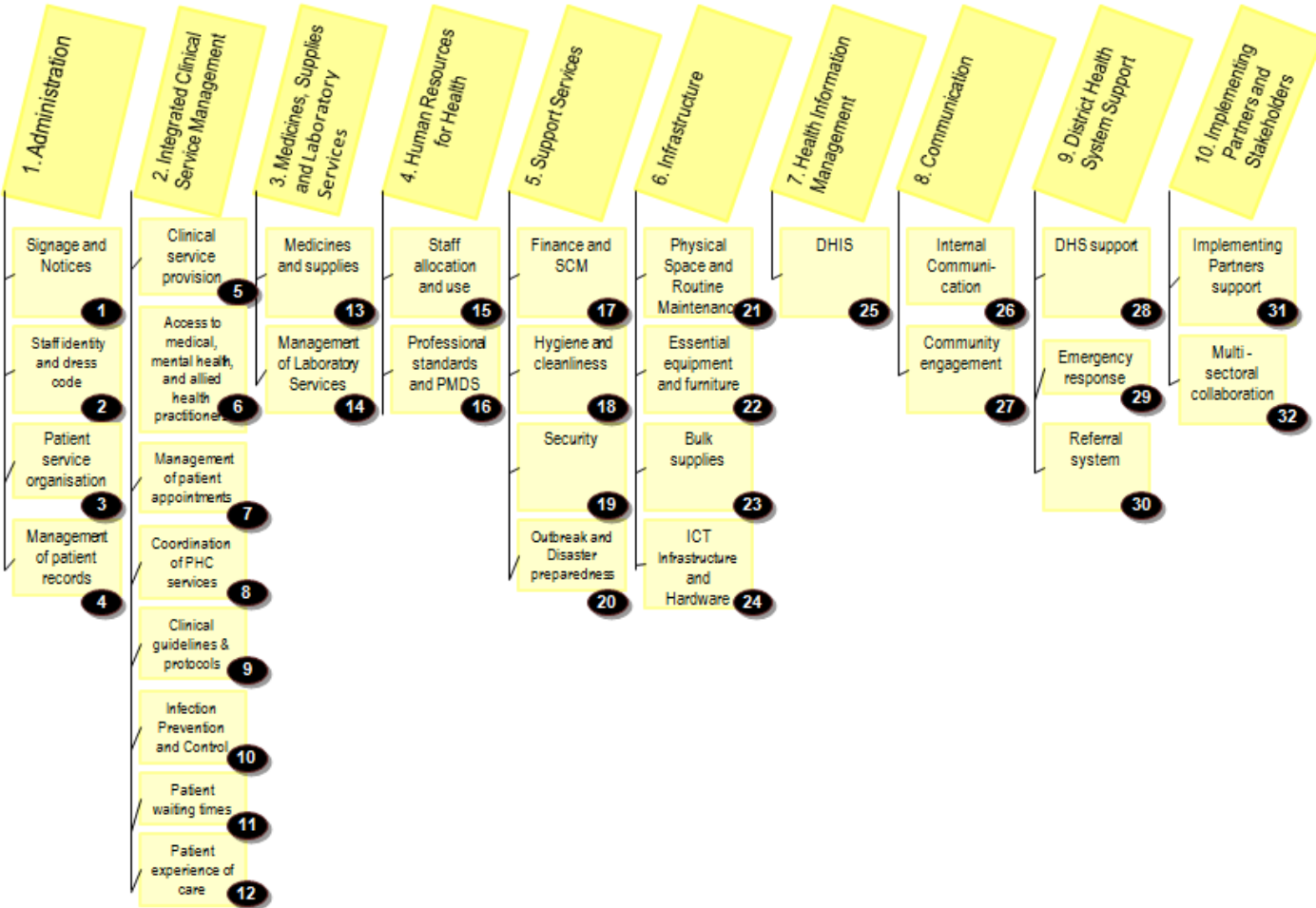
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<sup>1</sup> Physical condition and spaces, essential equipment and information and communication tools

# 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 32 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 three colours as follows:**

Green (G)		= achieved
Amber (A)		= partially achieved
Red (R)		= not achieved

Key and description for method of measurement

Key	Method of measurement (MM)
	a) Check applicable documents e.g. policies, guidelines, standard operating procedures, 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
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***

#### **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 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 18)

National Core Standards	Component	Sub-component	ELEMENTS	Weight	MM	Level of responsibility	Check list	Performance
<b>DOMAIN 1: PATIENT RIGHTS</b>	<b>1. Administration</b>	<b>1. Signage and notices:</b> 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 reflects the facility name, service hours, physical address, contact details for facility and emergency service and service package details is visibly displayed at the entrance of the premises	I	☺️	D		
		3	Sign indicating NO WEAPONS, NO SMOKING, NO ANIMALS (except for service animals), NO LITTERING and NO HAWKERS is clearly sign posted at the entrance of the facility	I	☺️	D		
		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	I	☺️	HF	Y	
		<b>2. Staff identity and dress code:</b> 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	
		<b>3. Patient service organisation:</b> Monitor the processes that enable responsive patients service						
11	Helpdesk/reception services are available	I	☺️📖	HF				
12	There is a process that prioritises the very sick, frail and elderly patients	I	?📖	HF				
13	A functional wheelchair is available	E	?☺️	HF				
<b>DOMAIN 6: OPERATIONAL MANAGEMENT</b>	<b>4. Management of patient record:</b> 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	E	☺️📖	HF	Y		
	16	District/provincial standard operating procedure/guideline for accessing, tracking, filing, archiving and disposal of patient records is available	I	📖	P			
	17	Guideline for accessing, tracking, filing, archiving and disposal of patient records is adhered to	I	☺️	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	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

22	Facility has been reorganised with designated consulting areas and staffing for acute, chronic health conditions and preventative health services.	E	☹	HF		
23	Patients are consulted, examined and counselled in privacy	I	☹	HF		
24	TB treatment success rate is at least 87% or has increased by at least 5% from the previous year	E	📖	HF		
25	TB (new pulmonary) defaulter rate < 5%	E	📖	HF		
26	Antenatal visit rate before 20 weeks gestation is at least 70% or has increased by at least 5% from the previous year	E	📖	HF		
27	Antenatal patient initiated on ART rate is at least 97% or has increased by at least 5% from the previous year	E	📖	HF		
28	Immunisation coverage under one year (annualised) is at least 86% or has increased by at least 5% from the previous year	E	📖	HF		
29	ART initiation rate within 2-weeks of at least 95% or has increased 5% from the previous year.	E	📖	HF		
30	ART retention rate on ART is at least 95% or has increased 5% from the previous year.	E	📖	HF		
31	Unconfirmed lost-to-follow-up rate <5%	E	📖	HF		
32	Quality Improvements plans are signed off by the facility manager and updated quarterly	I	📖	HF	Y	
33	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

34	Patients that require consultation with a medical practitioner have access to a medical practitioner at the facility at least once a week.	E	📖	HF		
35	Patients have access to oral health services	I	📖	D		
36	Patients have access to occupational therapy services	I	📖	D		
37	Patients have access to physiotherapy services	I	📖	D		
38	Patients have access to dietetic services	I	📖	D		
39	Patients have access to social work services	I	📖	D		
40	Patients have access to radiography services	I	📖	D		
41	Patients have access to ophthalmic service	I	📖	D		
42	Patients have access to mental health services	E	📖	D		
43	Patients have access to speech and hearing services	I	📖	D		
44	Staff dispensing medicine have access to the support of a pharmacist	I	📖	D		
45	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

46	ICSM compliant patient appointment system for patients with chronic health conditions and MCWH patient is in use	I	📖	HF		
47	Records of booked patients are retrieved not later than the day before the appointment	I	☹	HF		
48	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 programme	E	? ☹	HF		

2. Integrated Clinical Services Management (ICSM)

<b>8. Coordination of PHC services:</b> Monitor whether there is coordinated planning and execution between PHC facility, School Health Team, community-based and environmental health services						
49	Facility does referrals to and receives referrals from school health services in its catchment area	I		D		
50	Facility refers patients with chronic but stable health conditions to home- and community-based services for support	E		HF		
51	Facility refers environmental health related risks to environmental health services	I		D	Y	
<b>9. Clinical guidelines and protocols:</b> Monitor whether clinical guidelines and protocols are available, whether staff have received training on their use and whether they are being appropriately applied						
52	ICSM compliant package of clinical guidelines is available in all consulting rooms	E		HF	Y	
53	National guidelines on priority health conditions are available	I		HF	Y	
54	80% of professional nurses have been fully trained on Adult Primary Care OR Practical Approach to Care Kit	E		D		
55	80% of professional nurses have been fully trained on Integrated Management of Childhood Illness	E		D		
56	Resuscitation protocol is available	E		HF		
57	80% of professional nurses have been trained on Basic Life Support	E		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	Patient safety incident records comply with the National Guideline for Patient Safety Incident Reporting and Learning	E		HF	Y	
61	National Clinical Audit Guideline is available	E		NDoH		
62	Clinical audits are conducted quarterly on priority health conditions	E		HF		
63	80% of patient records audited are compliant	E		HF	Y	
64	Clinical audit meetings are conducted quarterly in line with the guidelines	E		HF		
65	National guidelines are followed for all notifiable medical conditions	I	?	HF		
66	Standard operating procedure for the management of patients with highly infectious diseases is available	I		HF		
<b>10. Infection prevention and control:</b> Monitor adherence to prescribed infection prevention and control policies and procedures						
67	National Policy on Infection Prevention and Control is available	E		NDoH		
68	Facility has a designated staff member who is responsible for infection prevention and control	E		HF		
69	Standard operating procedure on infection control is available	I		HF		
70	All staff have received in-service training in the past two years on infection control standard precautions that is in line with the standard operating procedure	E		HF	Y	
71	Poster on hand hygiene is displayed above the hand wash basin in every consulting room	I		HF		
72	Awareness day on hand hygiene is held annually	I		HF		
73	Poster on cough etiquette is displayed in every waiting area	I		HF		
74	Staff wear appropriate protective clothing	E	?☺	HF	Y	
75	The linen in use is clean, appropriately used and not torn	E	☺	HF	Y	

DOMA IN 2: PATIENT SAFETY AND CLINICAL GOVERNANCE AND CLINICAL CARE	2. Integrated Clinical Services Management (ICSM)	76	Sharps are disposed of appropriately	E	☺	HF	Y		
		77	An annual risk assessment for infection prevention and control compliance is undertaken by the staff member assigned to infection prevention and control	I	📖	HF			
		78	All staff have been offered prophylactic immunisations for high risk infections	I	📖	HF			
		<b>11. Patient waiting time: Monitor adherence to the facility's prescribed waiting times</b>							
		79	National Policy for the Management of Waiting Times is available	I	📖	NDoH			
		80	National target of not more than three hours for time spent in a facility is visible displayed	I	☺📖	HF			
		81	Waiting time is monitored using the prescribed tool	E	📖	HF			
		82	Average time that a patient spends in the facility is no longer than 3 hours	E	📖	HF			
		83	Patients are intermittently informed of delays and reasons for delays in service provision	I	?	HF			
		<b>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</b>							
		84	National Patient Experience of Care Guideline is available	E	📖	NDoH			
85	Results of the yearly Patient Experience of Care Survey are visibly displayed at the main waiting area	E	📖	HF					
86	An average overall score of 70% is obtained in the Patient Experience of Care Survey	E	📖	HF					
87	Results obtained from the Patient Experience of Care Survey are used to improve the quality of service provision	E	📖	HF					
88	National Guideline to Manage Complaints/Compliments/Suggestions is available	E	📖	NDoH					
89	Complaints/compliments/suggestions toolkit is available at the main entrance/exit	E	☺	HF	Y				
90	Complaints/compliments/suggestions records complies with the National Guideline to Manage Complaints/Compliments/Suggestions	E	📖	HF	Y				
91	Targets set for complaints indicators are met	E	📖	HF	Y				
DOMAIN 3: CLINICAL SUPPORT SERVICES	3. Pharmaceuticals and Laboratory Services	<b>13. Medicines and supplies: Monitor consistent availability of required good quality medicines and supplies</b>							
		92	Standard operating procedure for management and safe administration of medicines is available	I	📖	HF			
		93	Medicine room/dispensary is neat and medicines are stored to maintain quality	I	☺	HF	Y		
		94	The temperature of the medicine room/dispensary is maintained within the safety range	V	📖	HF	Y		
		95	Cold chain procedure for vaccines is maintained	V	📖	HF	Y		
		96	Medicine cupboard or trolley is neat and orderly	I	☺	HF	Y		
		97	The register for schedule 5 and 6 medicines is completed correctly	E	📖	HF			
		98	Electronic networked system for monitoring the availability of medicines is used effectively	E	☺📖	HF	Y		
		99	90% of the medicines on the tracer medicine list are available	V	☺📖	HF	Y		
		100	Re-ordering stock levels (min/max) are determined for each item on the district/facility formulary	E	☺📖	HF			
		101	There is no expired medicine on the shelves	I	☺	HF			
		102	Waste receptacles for pharmaceutical waste are available	I	☺	HF			
		103	Expired medicine is disposed of according to prescribed procedures	E	?	HF			
		104	Basic medical supplies (consumables) are available	E	📖	HF	Y		

DOMAIN 3: CLINICAL SUPPORT SERVICES	3. Pharmaceuticals and Laboratory Services	<b>14. Management of laboratory services:</b> Monitor consistent availability and use of laboratory services						
		105	Primary Health Care Laboratory Handbook is available	E		NDoH		
		106	Required functional diagnostic equipment and concurrent consumables for point of care testing are available	E		HF	Y	
		107	Required specimen collection materials and stationery are available	E		HF	Y	
		108	Specimens are collected, packaged, stored and prepared for transportation according to the Primary Health Care Laboratory Handbook	E		HF	Y	
		109	Laboratory results are received from the laboratory within the specified turnaround times	E		HF	Y	
		110	Facility is enrolled as testing point in the NHLS HIV- Proficiency Testing scheme	I		HF		
		111	Facility controls rapid test kit performances by running one negative and one positive control on a weekly basis	E		HF		
DOMAIN 6: OPERATIONAL MANAGEMENT	4. Human Resources for Health	<b>15. Staff allocation and use:</b> Monitor whether the PHC facility has the required HRH capacity and whether staff are appropriately applied						
		112	Staffing needs have been determined in line with WISN	I		D		
		113	Staff appointed is inline with WISN	I		D	Y	
		114	Facility has a dedicated manager	E		D		
		115	Work allocation schedule is signed by all staff members	I		HF		
		116	Leave policy is available	I		HF		
		117	An annual leave schedule is available	I		HF		
		<b>16. Professional standards and Performance Management Development System (PMDs):</b> Monitor whether staff are managed according to Department of Public Service Administration (DPSA) and Department of Labour prescripts						
		118	Record of staff induction is available	I		HF		
		119	All healthcare workers have current registration with relevant professional bodies	I		HF	Y	
		120	There is an individual Performance Management Agreement for each staff member	I		HF		
		121	Continued staff development needs are determined for the current financial year and submitted to the district manager	I		HF		
		122	Training records reflect planned training is conducted as per the district training programme	I		HF		
		123	The disciplinary procedure is available	I		HF		
		124	The grievance procedure is available	I		HF		
		125	Staff satisfaction survey is conducted annually	I		D		
		126	The results of the staff satisfaction survey are used to improve the work environment	I		HF		
127	Occupational Health and Safety incidents are managed and recorded in a register	E		HF				
DOMAIN 3: CLINICAL	5. Support	<b>17. Finance and supply chain management:</b> Monitor the consistent availability of a functional supply chain management system as well as the availability of funds required for optimal service provision						
		128	Facility has a dedicated budget	I		D		
		129	Facility has a standard operating procedure 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							
130	All cleaners have been trained on cleaning procedures	E		HF			
131	Cleaning schedules are available for all areas in the facility	I		HF			
132	Disinfectant, cleaning materials and equipment are available	E		HF	Y		
133	All work completed is signed off by cleaners and verified by manager or delegated staff member	I		HF	Y		
134	All service areas are clean	E		HF	Y		
135	Hand hygiene and sanitary facilities are available	E		HF	Y		
136	Standard operating procedure for managing general and health care risk waste is available	I		HF			
137	Healthcare waste is managed appropriately	E		HF	Y		
138	Storage area for healthcare waste is appropriate	E		HF	Y		
139	All toilets are clean, intact and functional	E		HF	Y		
140	Exterior of the facility is clean and well maintained	E		HF	Y		
141	A signed waste removal service level agreement between the health department and the service provider is available	E		P			
142	Waste is removed in line with the contract	E		HF			
143	Records show that pest control is done according to schedule	I		HF			
19. Security: Monitor whether systems processes, procedures are in place to protect the safety of assets, infrastructure, patients and staff of the PHC facility							
144	Safety and security standard operating procedure is available	I		HF			
145	Perimeter fencing is intact	I		HF			
146	Parking for staff is provided on the facility premises	I		HF			
147	There is a standard security guard room OR the facility has an alarm system linked to armed response	I		D	Y		
148	There is a security guard on duty OR the facility has an alarm system linked to armed response	I		D			
149	A signed copy of the service level agreement between the security company and the provincial department of health is available	I		D			
150	Security breaches are managed and recorded in a register	I		HF			
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							
151	Functional firefighting equipment is available	E		HF	Y		
152	Evacuation plan is displayed in the manager's office and the main entrance	I		HF			
153	Contact numbers of healthcare personnel required in emergencies are available in the management offices and at reception	I		HF			
154	Emergency evacuation procedure is practised annually	E		HF			
155	Deficiencies identified during the practice of the emergency evacuation drill are addressed	E		HF			
156	Standard operating procedure for outbreak notification and response are available	E		HF			

DOMAIN 7: FACILITIES AND INFRASTRUCTURE	6. Infrastructure	<b>21. Physical space and routine maintenance:</b> Monitor whether the physical space is adequate for the PHC facility workload, disabled persons and whether timely routine maintenance is undertaken						
		157	Clinic space accommodates all services and staff	E	☹️📖	HF	Y	
		158	There is access for people in wheelchairs	E	☹️	D	Y	
		159	Maintenance schedules for building (s) and grounds are available	I	📖	D		
		160	Building(s) is maintained according to schedule	I	☹️📖	D	Y	
		161	Building(s) complies with safety regulations	E	📖	D	Y	
		<b>22. Essential equipment and furniture:</b> Monitor whether essential equipment and required furniture are available						
		162	Furniture is available and intact in service areas	I	☹️	HF	Y	
		163	Essential equipment is available and functional in consulting areas	E	☹️	HF	Y	
		164	Staff are trained on the use of essential equipment	E	📖	HF		
		165	Standard operating procedure for decontamination of medical equipment is available	E	📖	HF		
		166	Standard operating procedure for reactive maintenance of medical equipment is available	I	📖	HF		
		167	Maintenance plan for essential equipment is adhered to	E	📖	HF		
		168	Resuscitation room is equipped with functional, basic resuscitation equipment	V	☹️📖	HF	Y	
		169	Emergency trolley is restored daily or after each use	V	☹️📖	HF	Y	
		170	There is an emergency sterile obstetric delivery pack	E	☹️	HF	Y	
		171	There is a sterile pack for minor surgery	E	☹️	HF	Y	
		172	Oxygen cylinder with pressure gauge is available in resuscitation/emergency room	V	☹️	HF		
		173	An up-to-date asset register is available	I	☹️📖	HF	Y	
		174	Redundant and non-functional equipment is removed from the facility	I	☹️	HF		
		<b>23. Bulk supplies:</b> Monitor whether the required electricity supply, water supply and sewerage services are constantly available						
175	Facility has a functional piped water supply	E	??	HF				
176	Facility has access to emergency water supply when needed	E	👉☹️	HF				
177	Facility has access to a functional back-up electrical supply when needed	E	??☹️	HF				
178	Sewerage system is functional	E	👉☹️	HF				
<b>24. ICT infrastructure and hardware:</b> Monitor whether systems for internal and external electronic communication are available and functional								
179	There is a functional telephone in the facility	E	??	HF				
180	There is a functional computer	I	??	HF				
181	There is functional printer connected to the computer	I	??	HF				
182	There is internet access	I	??	D				
DOMAIN 4: PUBLIC HEALTH	7. Health Information	<b>25. District Health Information System (DHIS):</b> Monitor whether there is an appropriate information system that produces information for service planning and decision making						
		183	Facility performance in response to burden of disease of the catchment population is displayed and is known to all clinical staff members	I	??☹️	HF		
		184	National District Health Information Management System policy OR Provincial SOP aligned with National Policy is available	I	📖	HF		
		185	Clinical personnel and data capturer trained on the facility level Standard Operating Guidelines for Data Management	I	📖	HF		
		186	Relevant DHIS registers are available and are kept up to date	I	??☹️	HF		
		187	Facility submits all monthly data on time to the next level	I	📖	HF		
		188	There is a functional computerised patient information system	I	👉?	D		



DOMAIN 4: PUBLIC HEALTH	8. Communication	<b>26. Internal communication:</b> Monitor whether the communications system required for improved quality for service delivery is in place						
		189	There are sub-district/district quarterly facility performance review meetings	I		D		
		190	A staff meeting is held at least quarterly within the facility	I		HF		
		191	Staff members demonstrate that incoming policies and notices have been read and are understood by appending their signatures on such policies and notifications	I		HF		
		<b>27. Community engagement:</b> Monitor whether the community participates in PHC facility activities through representation in a functional clinic committee						
		192	There is a functional clinic committee	I		P	Y	
		193	Contact details of clinic committee members are visibly displayed	I		HF		
	194	Facility has an annual open day	I		HF			
	DOMAIN 5: LEADERSHIP AND CORPORATE GOVERNANCE	9. District Health System Support	<b>28. District Health Support (DHS):</b> 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					
			195	There is a health facility operational plan in line with district health plan	I		HF	
			196	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	
			<b>29. Emergency response:</b> Monitor the effectiveness of emergency responses					
			197	There is a pre-determined EMS response time to the facility	I		D	
			198	EMS response complies with the pre-determined response time	I		D	
199			Emergency contact numbers (fire, police, ambulance) are displayed in areas where telephones are available	I		HF		
200			SOP available for the handover from facility to EMS	I		HF		
<b>30. Referral system:</b> Monitor whether patients have access to appropriate levels of healthcare								
201		National Referral Policy is available	I		NDoH			
202		Facility's standard operating procedure for referrals is available and sets out clear referral pathways to required service providers	I		HF			
203		There is a referral register that records referred patients	I		HF			
204		Copy of referral letter available in patient record	I		HF			
10. Implementing Partners and Stakeholders		<b>31. Implementing partners support:</b> Monitor the support that is provided by implementing partners						
		205	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		
		206	The list of implementing health partners shows their areas of focus and business activities	I		HF		
		<b>32. Multi-sectoral collaboration:</b> Monitor the systems in place to respond to the social determinants of health						
	207	There is an official memorandum of understanding between the PDOH and SAPS	I		P			
	208	There is an official memorandum of understanding between the PDOH and Department of Education	I		P			
	209	There is an official memorandum of understanding between the PDOH and the Department of Social Development	I		P			
210	There is an official memorandum of understanding between the PDOH and Department of Public Works	I		P				
211	There is an official memorandum of understanding between the PDOH and Department of Transport	I		P				

**Summary of Ideal Clinic categories**

<b>Weights</b>	<b>Silver</b>	<b>Gold</b>	<b>Platinum</b>
Vital (6 elements)	90%	100%	100%
Essential (87 elements)	70%	80%	90%
Important (118 elements)	69%	79%	89%
<b>AVERAGE</b>	<b>70%-79%</b>	<b>80%-89%</b>	<b>90%-100%</b>



# 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
<b>Geographical location signage from main roads</b>	
a. Both directions on each main road	
b. Within 1 km of clinic	
c. No obstructions to visibility	
<b>Facility gate entrance signage</b>	
a. Vehicles and persons will be searched	
b. Entry and parking are at own risk	
<b>Specific external locations:</b>	
a. Emergency Assembly Point	
<b>Waste storage:</b>	
a. Healthcare Risk Waste (medical waste)	
b. Healthcare General Waste	
<b>At or near to main entrance of building:</b>	
a. Ambulance parking sign OR area marked on paving	
b. Disabled parking sign OR area marked on paving	
<b>Total score</b>	
<b>Total maximum possible score (sum of all scores minus those marked NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	
	%

### Score calculation:

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## 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)	
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	
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	
Kitchen	
Patient records storage room	
Community Outreach Service	
Staff toilet(s)	
Staff room/boardroom	
<b>Total score</b>	
<b>Maximum possible score (sum of all scores minus those marked NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	<b>%</b>

**Note:** Facilities with fewer than three consulting rooms are too small to be segregated into three streams and are not be 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.

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## 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 ear rings, 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					
<b>Score</b>					
<b>Maximum possible score (sum of all scores minus those marked NA)</b>					
<b>Total score (sum of scores for 5 staff members)</b>					
<b>Total maximum possible score (sum of maximum possible minus those marked NA)</b>					
<b>Percentage (Total score ÷ Total maximum possible score) x100</b>					

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## 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	
<b>Total score</b>	
<b>Total maximum possible score (sum of all scores minus those marked NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	%

**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

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## 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). 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 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
<b>Administrative details (on cover of record)</b>					
Name and surname					
Patient file number					
Facility name					
ID/Refugee/passport number OR date of birth					
<b>Demographic details</b>					
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					
<b>Patient profile – 1<sup>st</sup> visit</b>					
Type of employment					
Social (type of employment, living conditions, social assistance, cooking method)					
Social (school grade, social assistance, nutrition, where child lives)					
Health risk factors (alcohol, smoking, other substances, physical activity, healthy eating, sexual behaviour)					
Family history of chronic conditions					
Known chronic conditions					
Surgical history					
Allergies					
<b>Clinical management</b>					
Length/Height of patient at 1 <sup>st</sup> visit					
Weight at every visit					
Body mass index (BMI) calculated at 1 <sup>st</sup> and 7 <sup>th</sup> visits					

Weight-for-height z score					
MUAC (every 3 months)					
Temperature					
Blood pressure at every visit					
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					
<b>Examination</b>					
General (JACCOL)					
Chest					
Cardiovascular					
Abdomen					
Mental state					
Central nervous system (CNS)					
Musculo-skeletal					
Diagnosis					
<b>Patient management</b>					
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 signature					
Date signed by Health Care Practitioner					
SANC/HPCSA Number					
<b>Child health records</b>					
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					
<b>Maternal health records</b>					
<b>BANC 1<sup>st</sup> visit</b>					
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 signature					
Date signed by Health Care Practitioner					
<b>BANC PLUS follow-up visits</b>					
HIV status (retest)					
General examination					
Abdomen examination					
Supplements					
Gestational graph plotted per visit					
Health Care Practitioner's name and surname					
Health Care Practitioner's signature					
Date signed by Health Care Practitioner					
<b>Delivery summary</b>					
Birth date					
Birth weight					
Apgar score					
Delivery mode					
Pregnancy outcome					
Health Care Practitioner's name and surname					
Health Care Practitioner's signature					
Date signed by Health Care Practitioner					
<b>Postnatal Care visits</b>					
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 signature					
Date signed by Health Care Practitioner					
<b>Prescription</b>					
Patient's name and surname					
ID number					
Age					
Allergies					
Name of medication					
Strength of medication					
Quantity					
Dosage					
Batch number					
Prescriber's name and surname					
Prescriber's signature					
Date signed by prescriber					
Dispenser's name and surname					
Dispenser's signature					
SANC/HPCSA number					
<b>Consent form (where applicable)</b>					
Patient's full names and surname are written on 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					
<b>Total score (sum of scores for 5 records)</b>					
<b>Total maximum possible score (sum scores for 5 records minus those marked NA)</b>					
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>					<b>%</b>



**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
90%	Green
40-89%	Amber
<40%	Red

## 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
<b>Patient record storage room adheres to the following:</b>	
Lockable with a security gate OR electronically controlled entrance (tag)	
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	
<b>Filing system for patient records adheres to the following:</b>	
Facility retained 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	
<b>Access for patient to their records</b>	
The SOP/guideline for filing, archiving and disposal of patient records describes the process to follow for patients to access their patient record	
<b>Total score</b>	
<b>Percentage (Total score ÷ 17) x 100</b>	<b>%</b>

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
90%	Green
40-89%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 21: 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		
<b>Total score</b>		
<b>Maximum possible score (sum of all scores minus those marked NA)</b>		
<b>Percentage (Total score ÷ maximum possible score) x 100</b>		%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

**CHECKLIST FOR ELEMENT 32: 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	
<b>Quality improvement plan address the following:</b>	
Elements failed on the Ideal Clinic framework	
<b>Gaps identified in the following areas are addressed:</b>	
Patient experience of care surveys (element 87)	
Complaints statistical data (element 92)	
Patient safety incident statistical data (element 60)	
Clinical record audit (element 63)	
Annual risk assessment for infection prevention and control (element 78)	
Occupational health and safety register (element 127)	
Security breaches (element 150)	
<b>Total maximum possible score (sum of all scores minus those marked NA)</b>	
<b>Total score</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	<b>%</b>

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 45: 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	
At least 10% of the sample of PEC survey include adolescent and youth aged 10-24 years	
Facility has a brief profile of adolescents and youth in its catchment area, including their challenges	
<b>Total score</b>	
<b>Percentage (Total score ÷ 8) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	<b>Green</b>
40-79%	<b>Amber</b>
<40%	<b>Red</b>

## CHECKLIST FOR ELEMENT 51: 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	
<b>Total score</b>	
<b>Percentage (Total score ÷ 4) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	<b>Green</b>
40-99%	<b>Amber</b>
<40%	<b>Red</b>

## CHECKLIST FOR ELEMENT 52: 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) – 2016/17 or Practical Approach to Care Kit (PACK), 2017		
Integrated Management of Childhood Illness Chart Booklet, 2014		
Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2014 or 2018 once available		
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Adults, 2015 <b>(only in consulting room used by the doctor)</b>		
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Paediatrics, 2017 <b>(only in consulting room used by the doctor)</b>		
Newborn Care Charts Management of Sick and Small Newborns in Hospital SSN Version 1,- 2014 <b>(only in consulting room used by the doctor)</b>		
<b>Score</b>		
<b>Maximum possible score (sum of all scores minus those marked NA)</b>		
<b>Total score for all 2 consulting rooms</b>		
<b>Total maximum possible score (sum of all consulting rooms scores minus those marked NA)</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>		%

**\* Guidelines can also be available electronically or via apps**

**\* Check that the most current guidelines are being used.**

**Score calculation:**

**Y = 1, N = 0, NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 53: 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
<b>HIV</b>	
National Consolidated Guidelines for the Prevention of Mother-to-Child Transmission of HIV and the Management of HIV in Children, Adolescents and Adults, 2015	
<b>TB</b>	
National Tuberculosis Management Guidelines, 2014	
National Guidelines for the Management of Tuberculosis in Children, 2013 OR 2014	
National Management of Drug-Resistant Tuberculosis. Policy Guidelines, 2013	
Infection Prevention and Control Guidelines for TB, MDR-TB and XDR-TB, 2015	
<b>Maternal and child health</b>	
Guidelines for Maternity Care in South Africa, 2016	
<b>Sexually Transmitted Infections</b>	
Sexually Transmitted Infections Management Guidelines, 2015	
<b>Diabetes</b>	
National Management of Type 2 Diabetes at Primary Care Level, 2014	
<b>Hypertension</b>	
National Clinical Guidelines for the management of hypertension, 2006	
<b>Score</b>	
<b>Percentage (Total score ÷ 9) x 100</b>	<b>%</b>

\* Guidelines can also be available electronically or via apps

\* Check that the most current guidelines are being used.

**Score calculation:**

Y = 1, N = 0, NA

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red



## CHECKLIST FOR ELEMENT 60: 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 ‘Y’ at measures marked with a ‘\*’.
- Annual statistical reports for categories and indicator must be available even if no incidents were reported in the past 3 months, indicating a ‘0’ in the months where no incidents were reported.

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

Item	Score
The facility/district Standard Operating Procedure for Patient Safety Incident Reporting and Learning is available	
* 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	
<b>Total score</b>	
<b>Percentage (Total score ÷ 7) x 100</b>	%

**Score calculation:**

Y = 1, N = 0

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 63: 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.

Item	Score
HIV/TB	
NCD (diabetes and hypertension)	
Maternal health (ANC &PNC)	
Well baby	
Sick child (IMCI)	
<b>Total score</b>	
<b>Percentage (Total score ÷ 5) x 100</b>	<b>%</b>

### Score calculation:

**Y = 1, N = 0**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 70: All staff have received in-service training in the last two years on infection control standard precautions that is in line 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	
<b>Healthcare professionals received training on:</b>					
Hand hygiene					
Personal Protective Equipment					
Prevention of respiratory infections					
Safe injection practices					
Sharps safety					
Environmental cleanliness					
Patient Care equipment					
Handling of linen					
Wound care					
<b>Cleaners received training on:</b>					
Hand hygiene					
Handling of linen					
Personal Protective Equipment					
Prevention of respiratory infections					
Waste management and disposal					
Environmental cleanliness					
<b>Score</b>					
<b>Maximum possible score (sum of all scores minus those marked NA)</b>					
<b>Percentage (Total score ÷ maximum possible score) x 100</b>					%

**Score calculation:**

**Y = 1, N = 0, NA= NA**

Percentage obtained	Score
90%	Green
40-89%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 74: 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 – non sterile		
Gloves – sterile		
Disposable gowns OR aprons		
Protective face shields OR goggles with surgical face masks		
<b>Score</b>		
<b>Maximum possible score (sum of all scores minus the ones marked NA)</b>		
<b>Total score for all stock available and worn by staff</b>		
<b>Total maximum possible score (sum of stock available and clothing worn by staff minus those marked NA)</b>		
<b>Percentage (Total score ÷ maximum possible score) x 100</b>	%	

### Score calculation:

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 75: The linen in use is 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.

Item	Score
Linen is clean	
Linen is appropriately used for its intended purpose	
Linen is not torn	
<b>Total score</b>	
<b>Percentage (Total score ÷ 3) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 76: 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.

Item	Score
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	
<b>Total score</b>	
<b>Percentage (Total score ÷ 4) x 100</b>	<b>%</b>

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 89: 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
Complaints/compliments/suggestions boxes are visibly placed at main entrance/exit	
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 in at least two local languages	
<b>Total score</b>	
<b>Percentage (Total score ÷ 3) x 100</b>	%

### Score calculation:

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 90: 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 ‘Y’ at measures marked with a ‘\*’.
- Annual statistical reports for categories and indicator must be available even if no complaints, compliments or suggestions were reported in the past 3 months, indicating a ‘0’ in the months where no incidents were reported.

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

Item	Score
The facility/district Standard Operating Procedure 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	
<b>Total score</b>	
<b>Percentage (Score ÷ 8) x 100</b>	<b>%</b>

**Score calculation:**

Y = 1, N = 0

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red



## CHECKLIST FOR ELEMENT 91: 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%	
<b>Total score</b>		
<b>Percentage (Score ÷ 2) x 100</b>		%

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	<b>Green</b>
40-99%	<b>Amber</b>
<40%	<b>Red</b>

## Checklist for element 93: 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	
The dispensary/medicine room is clean	
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	
No expired medicines observed in the dispensary/medicine room.	
There is evidence that a medicines stock-take was carried out in the last 12 months	
Access to the dispensary/medicine room is controlled at all times	
<b>Total score</b>	
<b>Percentage (Total score ÷ 14) x 100</b>	%

### **Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
90%	<b>Green</b>
40-89%	<b>Amber</b>
<40%	<b>Red</b>

## Checklist for element 94: 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 at least one functional, wall-mounted room thermometer	
The temperature of the pharmacy is recorded daily	
The temperature of the pharmacy is maintained within the safety range	
<b>Total score</b>	
<b>Percentage (Total score ÷ 3) x 100</b>	%

**Score calculation:**

Y = 1, N = 0, NA = NA

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 95: 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
There is a standard operating procedure for the maintenance of cold chain for vaccines	
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 °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	
<b>Total score for all</b>	
<b>Percentage (Total score ÷ 6) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 96: 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

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		
<b>Total Score</b>		
<b>Total Maximum possible score (sum of all scores minus the ones marked NA)</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	%	

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 98: 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

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 facility updates the electronic networked system at least weekly	
The capturing device and its accessories are in good working order	
The capturing device and its accessories are stored in a lockable unit	
Access to the keys for the unit where the capturing device is kept is restricted	
The facility has not been marked as non-reporting for two weeks (10 working days) or more (at the point of assessment)*	
<b>Total score for all</b>	
<b>Percentage (Total score ÷ 7) x 100</b>	<b>%</b>

\* 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.

**Score calculation:** Y = 1, N = 0

Percentage obtained	Score
> 80 %	<b>Green</b>
50 – 79 %	<b>Amber</b>
< 50 %	<b>Red</b>

## CHECKLIST FOR ELEMENT 99: 90% of the medicines on the tracer medicine list are available

**Availability of tracer medicines listed below should be measured on an electronic networked stock availability monitoring system**

**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

MEDICINE ROOM/DISPENSARY			
Oral formulations/inhalers			
	Score		Score
Abacavir 20mg/ml solution		Lopinavir, Ritonavir 200/50mg tablets	
Abacavir 60mg tablets		Lopinavir, Ritonavir 80/20mg/ml solution	
Amoxicillin 250mg OR 500mg capsules		Metformin 500mg OR 850mg tablets	
Amoxicillin 125mg/5ml OR 250mg/5ml suspension		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 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	
Hydrochlorothiazide 12.5mg OR 25mg tablets		Rifampicin + Isoniazid + pyrazinamide + ethambutol (RHZE) (150/75/400/275) tablets	
Ibuprofen 200 mg OR 400mg tablets		Salbutamol 100 mcg MDI	
Isoniazid 100mg OR 300mg tablets		Simvastatin 10mg OR 40mg tablets	
Lamivudine 10mg/ml solution		Tenofovir/emtricitabine 300/200 mg	
Lamivudine 150mg tablets		Tenofovir/emtricitabine/efavirenz 300/200/600mg tablets	
Combined oral contraceptive pill (ethinylestradiol/levonorgestrel) containing 30 mcg ethinylestradiol)		Vitamin A 50,000U OR 100,000U OR 200,000U capsules	
		Zidovudine 50mg/5ml, 200 ml suspension	

<b>Injections</b>			
	<b>Score</b>		<b>Score</b>
Benzathine benzylpenicillin 2.4MU vial		Medroxyprogesterone acetate 150mg/ml injection OR norethisterone 200mg/ml	
Ceftriaxone 500mg OR 1g vials			
<b>Topicals</b>			
	<b>Score</b>		<b>Score</b>
Chloramphenicol 1%, ophthalmic ointment			
<b>Fridge</b>			
	<b>Score</b>		<b>Score</b>
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			
<b>Emergency trolley</b>			
	<b>Score</b>		<b>Score</b>
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 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		Promethazine 25mg/2ml 2ml ampoule	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose 1L solution		Short acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate sublingual, 5 mg tablets	
Furosemide 20mg 10mg/2ml ampoule		Salbutamol 0.5% 20ml nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vial for nebulisation	
Hydrocortisone 100mg/ml 200mg/2ml vial		Sodium chloride 0.9% 1L solution	
Prednisone 5 mg tablets		Thiamine 100mg/ml 10ml vial	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml Unit dose vial for nebulisation			
<b>Total score /40</b>		<b>Total score /37</b>	
<b>Percentage (Sum of 2 Total scores ÷ 77) x 100</b>			<b>%</b>

**Score calculation:**

**Y = 1, N = 0**

<b>Percentage obtained</b>	<b>Score</b>
<b>&gt; 90%</b>	<b>Green</b>
<b>80 - 89%</b>	<b>Amber</b>
<b>&lt; 80%</b>	<b>Red</b>



## CHECKLIST FOR ELEMENT 104: 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 paed 60 drops/ml		Gloves exam n/sterile medium /box	
Blade stitch cutter sterile/pack		Gloves exam n/sterile small /box	
Blood collecting vacutainer (holding barrel/bulldog)		Gloves surg sterile latex sz 6 OR 6.5 OR small/box	
Blood lancets (haemolance)		Gloves surg sterile latex sz 7 OR 7.5 OR medium/box	
Urinary (Foley’s) catheter silicone/latex 14f		Gloves surg sterile latex sz 8 OR large/box	
Urinary (Foley’s) catheter silicone/latex 18f		Intravenous cannula (Jelco) 18g green/box	
Urine drainage bag		Intravenous cannula (Jelco) 20g pink/box	
Simple face mask OR reservoir mask OR nasal cannula (prongs) for oxygen, adults		Intravenous cannula (Jelco) 22g blue/box	
Simple face mask OR reservoir mask OR nasal cannula (prongs) for oxygen, paediatric		Intravenous cannula (Jelco) 24g yellow/box	
Face mask for nebuliser OR face mask with nebuliser chamber for adult		Needles: 18 (pink) OR 20 (yellow)/box	
Face mask for nebuliser OR face mask with nebuliser chamber for paediatric		Needles: 21 (green)/box	
Nasogastric feeding tube 600mm fg8		Needles: 23 (blue)/box OR 22 (black)/box	
Nasogastric feeding tube 1000mm fg10 OR 12		* Syringes 3-part 2ml/box	
Disposable aprons		* Syringes 3-part 5ml/box	
Eye patches (disposable)		* Syringes 3-part 10 or 20ml/box	
Disposable razors		Insulin syringe with needle/box	
		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	
<b>Only applicable if the facility uses older HB model</b>			
Haemolysis applicator sticks		HB chamber glass-grooved	
HB meter clip		HB cover glass-plain	
<b>Only applicable if facility uses an Automatic External Defibrillator (AED)</b>			
Replacement pads for AED - adult		Replacement pads for AED – paediatric	
<b>Only applicable if facilities have a permanent doctor</b>			
Disposable Amnihook		Dental syringe and needle for LA	

Ultrasound gel medium viscosity					
<b>Sub-total 1 for surgical supplies</b>			<b>Sub-total 2 for surgical supplies</b>		
<b>Sub-total 1 Maximum score (sum of all scores minus those NA)</b>			<b>Sub-total 2 Maximum score (sum of all scores minus those NA)</b>		
<b>DRESSINGS SUPPLIES</b>					
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				
<b>Sub-total 1 for dressing supplies</b>			<b>Sub-total 2 for dressing supplies</b>		
<b>Total score for surgical and dressing supplies</b>					
<b>Total maximum score for surgical supplies (sum of all scores minus those marked NA) and dressing supplies</b>					
<b>Percentage (Total scores ÷ Total maximum score) x 100</b>					

**Score calculation:**

$Y = 1, N = 0, NA = NA$

Percentage obtained	Score
90%	Green
40-89%	Amber
<40%	Red

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

## CHECKLIST FOR ELEMENT 106: 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
<b>Laboratory equipment and consumables</b>	
Hb meter	
Blood glucometer	
Spare batteries for blood glucometer	
Glass slides for cervical smears	
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	
<b>Total score for all (Total score laboratory equipment + consumables + stationery)</b>	
<b>Total maximum possible score (sum of all scores minus those marked NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 107: 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) = as indicated

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)	
Vacutainer tube: Purple Top (EDTA)	
Microtainer tube: Purple Top (EDTA Paeds)	
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	
<b>Pap smear collection materials</b>	
Liquid - based Cytology (LBC) vials (NA if facility uses traditional pap smear method)	
Combi - brush (NA if facility uses traditional pap smear method)	
Cervex – 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)	
<b>Early Infant diagnosis (EID) collection material</b>	
DBS PCR Kit OR EDTA Microtainer tube	
<b>NHLS stationery</b>	
N1 - PHC Request Form	
N2 - Cytology Request Form	
N3 - PHC Order Book Material for specimen collection	
N4 - PHC Facility Specimen Register	
<b>SMS printer</b>	
Thermal paper roll	
<b>Total Score</b>	
<b>Total maximum possible score (sum of all scores minus those marked NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	

**Score calculation:**

Y = 1, N = 0

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 108: 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 specimen 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 band 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
<b>General</b>									
Specimens are clearly labelled									
Each laboratory request form is correctly completed									
There is at least one functional wall mounted thermometer in area for lab specimens are stored for courier collection									
The temperature of the storage area for lab specimens is recorded daily									
<b>Group A specimens</b>									
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)									
<b>Score</b>									
<b>Maximum possible score (sum of all scores minus those marked NA)</b>									
<b>Total score for all samples</b>									
<b>Total maximum possible score (sum of all sample scores minus those marked NA)</b>									
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>									
									%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 109: 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	MCS (Microscopy, culture band sensitivity)	24-72 hours			
7	Sputum: TB	5 days-6 weeks			
8	Sputum: Xpert MTB/RIF	24 hours			
9	Stool	24 hours			
10	Urine	24 hours			
<b>Score</b>					
<b>Maximum possible score (sum of all scores minus those marked NA)</b>					
<b>Total score for all 3 samples checked</b>					
<b>Total maximum possible score (sum of all samples checked minus those marked NA)</b>					
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>					%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red



## CHECKLIST FOR ELEMENT 113: Staff appointed is inline with WISN

**Use the checklist below to check whether the staff appointed at the facility is in line with WISN**

**Scoring** - in column for score mark as follows:

**Y** (Yes) = in line with WISN, **N** (No) = not in line with WISN, **NA** = if facility is not designated to provide the service (oral health or allied health workers)

Category of staff	Score
Facility manager	
Clinical Nurse Practitioners	
Professional nurses	
Enrolled nurses	
Enrolled nursing assistants	
Medical Practitioner	
Pharmacist	
Pharmacist assistants	
Administrative officers	
Cleaners	
Grounds men	
<b>Total score</b>	
<b>Total maximum possible score (sum of total scores minus the ones marked NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40 -99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 119: 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** = if category of staff is not appointed at the facility

Category of staff	Score	Category of staff	Score
<b>Nurses</b>			
Clinical Nurse Practitioners		Enrolled nurses	
Professional nurses		Nursing assistants	
<b>Medical officers</b>			
Medical Officer – full time		Medical officer- sessional - private GP	
Medical officer- sessional			
<b>Oral health</b>			
Dentists – full time		Dental therapist	
Dentist – sessional		Oral hygienist	
Dentist – sessional – private			
<b>Pharmacy</b>			
Pharmacist		Pharmacist assistants	
<b>Allied health professionals</b>			
Nutritionist/Dietician		Social workers	
Physiotherapist		Optometrist	
Occupational therapist		Speech and hearing therapist	
Psychologist			
<b>Total scores</b>			
<b>Total maximum possible scores (sum of total scores minus the ones marked NA)</b>			
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>			

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40 -99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 132: 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 equipment (e.g sodium perborate powder OR phthalaldehyde)	
Chlorine compounds (e.g Biocide D or Clorox)	
Sanitary all-purpose cleaner	
Detergent-based solutions	
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	
Spray bottle for disinfectant solution	
Window cleaning squeegee	
Mop sweeper or soft-platform broom	
Floor polisher	
Total score	
Total maximum possible score (sum of total scores minus those marked NA)	
Percentage (Total score ÷ Total maximum possible score) x 100	

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 133: 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
Consultation rooms (randomly select 2 rooms)		
Vital rooms		
Waiting area		
Public toilets (randomly select 2toilets)		
Staff toilets (randomly select 2 toilets)		
Staff room(s)		
<b>Total score</b>		
<b>Total maximum possible score (sum of total scores minus the ones marked NA)</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>		

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 134: 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
<b>CONSULTING ROOMS:</b>	<b>Consulting room 1</b>	<b>Consulting room 2</b>
Windows clean		
Window sills clean		
Floor is clean		
Wall skirting 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		
<b>Score for consultation rooms</b>		
<b>Maximum possible score for consultation rooms (sum of all scores minus NA)</b>		
<b>Percentage for consulting rooms (Score ÷ Total maximum possible score) x100</b>		%
<b>VITAL SIGNS ROOMS:</b>	<b>Vital signs room 1</b>	<b>Vital signs room 2</b>
Windows clean		
Window sills clean		
Floor is clean		
Wall skirting 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		
<b>Score for vital signs rooms</b>		
<b>Maximum possible score for vital rooms (sum of all scores minus NA)</b>		
<b>Percentage for vital signs rooms (Score ÷ Total maximum possible score) x 100</b>		%
<b>WAITING AREAS:</b>	<b>Waiting area 1</b>	<b>Waiting area 2</b>
Windows clean		
Window sills clean		
Floor is clean		
Wall skirting 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		
<b>Score for waiting areas</b>		
<b>Maximum possible score for waiting areas (sum of all scores minus NA)</b>		
<b>Percentage for waiting rooms (Total score ÷ Total maximum possible score) x 100</b>		%

**Summary for cleanliness of service areas**

AREA	Score	Maximum possible score
Consultation rooms		
Vital signs rooms		
Waiting areas		
<b>Total score ÷ Total maximum possible score</b>		
<b>PERCENTAGE (Total score ÷ Total maximum possible score) x 100</b>		%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
90%	Green
40-89%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 135: 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, score available areas

Item	Area 1	Area 2
<b>Toilet</b>	<b>Toilet 1</b>	<b>Toilet 2</b>
Functional hand wash basin with taps		
Running water		
Toilet paper		
Liquid hand wash soap/sanitiser		
Disposable hand paper towels		
<b>Consultation room</b>	<b>Consultation room 1</b>	<b>Consultation room 2</b>
Functional hand wash basin with taps		
Running water		
Liquid hand wash soap/sanitiser		
Disposable hand paper towels		
<b>Vital signs room</b>	<b>Vital signs room 1</b>	<b>Vital signs room 2</b>
Functional hand wash basin with taps		
Running water		
Liquid hand wash soap/sanitiser		
Disposable hand paper towels		
<b>Score</b>		
<b>Maximum possible score (sum of all scores minus the ones marked NA)</b>		
<b>Total score for all areas</b>		
<b>Total maximum possible score (sum of all 3 areas minus those marked NA)</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>		%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 137: 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					
Bins available for general waste					
Bins for general waste are lined with appropriate coloured bags					
<b>Total score</b>					
<b>Total maximum possible score (sum of all minus those marked NA)</b>					
<b>Percentage (Total score ÷ maximum possible score) x 100</b>					%

\* 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"

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red



## CHECKLIST FOR ELEMENT 138: Storage area for healthcare waste is appropriate

**Use the checklist below to check whether storage areas for healthcare 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	
Healthcare risk waste storage area	Score
Healthcare risk waste is stored in an access-controlled area	
Health care waste storage area is clean and free from rodents	
Healthcare storage area is well ventilated	
Healthcare risk waste containers must be stored on shelves	
Area has access to water to hose the area	
Area has adequate drainage for the water	
Total score	
<b>Percentage (Total score ÷ 8) x 100</b>	<b>%</b>

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 139: 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
<b>Cleanliness of toilets</b>			
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			
<b>Intact and functional</b>			
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			
<b>Score</b>			
<b>Maximum possible score (sum of all scores minus those marked NA)</b>			
<b>Total score for all 3 toilets</b>			
<b>Total maximum possible score (sum of all 3 toilets (minus those marked NA))</b>			
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>			

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 140: 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	
<b>Total score</b>	
<b>Total maximum possible score (sum of all scores minus NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 147: 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)	
<b>Security guard room</b>	
Kitchenette – sink with cupboard underneath	
Table	
Chair	
Functioning lights	
<b>Security equipment for security officer(s) and accompanying stationery</b>	
Baton	
Handcuffs OR Cable ties	
Incident book	
Metal detector	
Telephone OR two-way radio OR dedicated cellphone	
<b>Total score</b>	
<b>Total maximum possible score (sum of all scores minus NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 151: 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<sup>2</sup> 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 <sup>2</sup> 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	
<b>Total score</b>	
<b>Percentage (Total ÷ 4) x 100</b>	<b>%</b>

### Score calculation:

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
41-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 157: 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
<b>INTERIOR SPACE</b>	
<b>General</b>	
Main waiting area	
Help desk/Reception/patient registration	
Toilets	
<b>Clinical Service Areas</b>	
Sub-waiting area	
Vitals area /room	
Consulting room	
Counselling room	
Emergency/resuscitation room	
<b>Health Support services (Allied health)</b>	
Treatment room	
<b>Support /administration areas</b>	
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	
<b>Exterior space</b>	
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.)	
<b>Total score</b>	
<b>Total maximum possible score (sum of all scores minus NA)</b>	
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>	

**Score calculation:**

**Y = 1, N = 0, NA=NA**

<b>Percentage obtained</b>	<b>Score</b>
<b>100%</b>	<b>Green</b>
<b>41-99%</b>	<b>Amber</b>
<b>&lt;40%</b>	<b>Red</b>

## CHECKLIST FOR ELEMENT 158: There is access for people with wheelchairs

**Use the checklist below to check accessibility for users 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 wheelchairs	
In the toilet/s with access for persons in wheelchairs handrails are installed	
<b>Total score</b>	
<b>Percentage (Total score ÷7) x 100</b>	<b>%</b>

**Score calculation: has no incline**

**Y = 1, N = 0,**

Percentage obtained	Score
100%	<b>Green</b>
40-99%	<b>Amber</b>
<40%	<b>Red</b>



## CHECKLIST FOR ELEMENT 160: 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		
<b>EXTERIOR OF BUILDING(S)</b>		
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		
<b>Score for exterior of buildings</b>		
<b>Maximum possible score for exterior of building/s (sum of all scores minus NA)</b>		
<b>Percentage for exterior of building/s (Score ÷ Maximum possible score) x 100</b>		%
<b>INTERIOR OF BUILDING(S)</b>		
<b>WAITING AREAS</b>	<b>Score Waiting area</b>	<b>Score Waiting area</b>
Walls – paint in good condition		
Ceiling		
a. Paint in good condition		
b. Intact		
Lights		
a. Present		
b. Functional		

<b>Ventilation</b>		
Adequate natural (windows) OR mechanical ventilation (ceiling fans/air conditioner)		
<b>Score for waiting areas</b>		
<b>Maximum possible score for waiting areas (sum of all scores minus NA)</b>		
<b>Percentage for waiting areas(Score ÷ Maximum possible score) x 100</b>		%
<b>TOILETS</b>	<b>Score abluion 1</b>	<b>Score abluion 2</b>
Wall-mounted paper towel dispenser(s)		
Wall-mounted hand soap dispenser(s)		
Wall tiles in good condition		
Walls – paint in good condition		
<b>Ceiling</b>		
a. Paint in good condition		
b. Intact		
<b>Lights</b>		
a. Present		
b. Functional		
<b>Windows</b>		
a. Window panes intact (glass not broken)		
b. Handles working		
c. Windows open and close		
<b>Doors</b>		
a. Intact		
b. Handles working		
c. Open and close		
<b>Hand wash basins</b>		
a. Intact		
b. Taps functional (with running water)		
Floor intact		
<b>Score for abluion facilities</b>		
<b>Maximum possible score for abluion facilities (sum of all scores minus (NA)</b>		
<b>Percentage for abluion facilities (Score ÷ Maximum possible score) x 100</b>		%
<b>CONSULTATION ROOMS</b>	<b>Score Consultation room 1</b>	<b>Score Consultation room 2</b>
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)		
Ventilation		
Adequate natural (windows) OR mechanical ventilation (ceiling fans OR air conditioners)		
<b>Score for consultation rooms</b>		
<b>Maximum possible score for consultation rooms (sum of all scores minus NA)</b>		
<b>Percentage for consultation rooms (Score ÷ Maximum possible score) x 100</b>		%
<b>VITAL SIGNS ROOMS:</b>	<b>Score Vital signs room 1</b>	<b>Score Vital signs room 2</b>
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		
c. Windows open and close		
<b>Doors</b>		
a, Intact		
b. Handles working		
c. Open and close		
<b>Hand wash basins</b>		
a. Intact		
b. Taps functional		
<b>Ventilation</b>		
Adequate natural (windows) OR mechanical ventilation (ceiling fans OR air conditioners)		
<b>Score for vital signs rooms</b>		
<b>Maximum possible score for vital signs rooms (sum of all scores minus NA)</b>		
<b>Percentage for vital signs rooms (Total score ÷ Maximum possible score) x 100</b>		
		%

AREA	Score	Maximum possible score
<b>Exterior of building(s)</b>		
<b>Interior of building(s)</b>		
Waiting areas		
Ablution facilities		
Vital signs rooms		
Consultation rooms		
<b>Total Score</b>		
<b>Total maximum possible score (sum of all scores minus NA)</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>		%

**Score calculation:**

Y = 1, N = 0, NA = NA

Percentage obtained	Score
80%	Green
40-79%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 161: 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	
<b>Total score</b>	
<b>Percentage (Total ÷ 3) x 100</b>	%

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 162: 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
<b>Waiting areas</b>	<b>Waiting area 1</b>	<b>Waiting area 2</b>
Seating		
a. Adequate seating for all patients		
b. Chairs / benches intact		
Notice boards available		
<b>Consulting rooms</b>	<b>Consultation room 1</b>	<b>Consultation room 2</b>
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)		
<b>Total score for waiting areas and consulting rooms</b>		
<b>Total maximum possible score (sum of all waiting areas and consulting rooms minus those marked NA)</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>		

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
90%	Green
40-89%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 163: 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
<b>CONSULTATION ROOMS</b>				
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				
Clinical thermometers				
<b>Score for consultation rooms</b>				
<b>Maximum possible score (sum of all scores minus those marked NA)</b>				
<b>Percentage (Score ÷ Maximum possible score) x 100</b>	<b>%</b>			
<b>VITAL SIGNS ROOM (Note if facility is too small to have a vital signs room, check for equipment in consultation rooms)</b>				
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				
<b>Score for vital signs rooms</b>				
<b>Maximum possible score (sum of all scores minus those marked NA)</b>				
<b>Percentage (Score ÷ Maximum possible score)x 100</b>				%
<b>CHILD HEALTH ROOM</b>				
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				
<b>Score for child health room</b>				
<b>Maximum possible score (sum of all scores minus those marked NA)</b>				
<b>Percentage (Score ÷ Maximum possible score) x 100</b>				%

AREA	Score	Maximum possible score
Consultation rooms		
Vital signs rooms		
Child health rooms		
<b>Total score/Total maximum possible score</b>		
<b>Percentage (Total score ÷ Total maximum possible score) x 100</b>		%

**Score calculation:**

**Y = 1, N = 0, NA = NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 168: 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 ceiling mounted anglepoise-style examination lamp	
Nebuliser OR face mask with nebuliser chamber for adult and paediatric	
Functional electric powered OR manual suction devices and suction catheters	
Drip stand	
Dressing trolley	
Cardiac arrest board	
Bin (general waste )	
Suture material	
Thermal (space) blanket	
Gloves exam n/sterile gloves: small, medium and large at least one pair of each size	
Gloves surgical sterile latex: 6 OR 6.5, 7 OR 7.5 and 8, at least one pair of each size	
Protective face shields OR Goggles with face mask	
Disposable plastic aprons	
Disposable non-sterile face masks	
Resuscitation algorithms	
Resuscitation documentation register	
Wall-mounted liquid hand soap dispenser	
Wall-mounted hand paper dispenser	
<b>Total score</b>	
<b>Percentage (Total ÷ 22) x 100</b>	<b>%</b>

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 169 – 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 are 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

Item	Score
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 straight blades for laryngoscope size 1	
Spare bulbs for laryngoscope	
Spare batteries for laryngoscope sizes	
Endotracheal tubes – uncuffed size 2mm OR 2.5mm	
Endotracheal tubes – uncuffed size 3mm OR 3.5mm	
Endotracheal tubes – uncuffed size 4.0mm OR 4.5mm	
Endotracheal tubes – cuffed size 5.0mm	
Endotracheal tubes – cuffed size 6.0mm	
Endotracheal tubes – cuffed size 7.0mm	
Endotracheal tubes – cuffed size 8.0mm	
Water-soluble lubricant/lubricating jelly	
Tape to hold tie endotracheal tube in place	
Patella hammer	
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	
Adult-size introducer, intubating stylet or bougie for endotracheal tubes	
Paediatric size introducer, intubating stylet or bougie for endotracheal tubes	
Magill’s forceps for adults	
Magill’s forceps for paediatric	
Laryngeal masks (supraglottic airways): adult	
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 OR reservoir mask OR nasal cannula (prongs) for oxygen, adults	

Simple face mask OR reservoir mask OR nasal cannula (prongs) for oxygen, 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	
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)	
Sharps container	
Admin set 20 drops/ml 1.8m /pack	
Admin set paed 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: 14f	
Urinary (Foley's ) catheters: 18f	
Urinary bag specified in the surgical supply list	
Nasogastric tubes: 600mmfg8	
Nasogastric tubes: 1000mmfg10 or 12	
Medication/vaculitre stickers	
<b>Present individually or in combined multifunctional diagnostic monitoring set</b>	
Pulse oximeter with adult & paediatric probes	
Non invasive electronic blood pressure monitoring device including paediatric, adult & large adult cuff sizes	
Clinical thermometer (in °C, non-mercury)	
<b>Emergency medicines (also check expiry dates)</b>	
Activated Charcoal	
Adrenaline 1mg/ml (Epinephrine) ampoule	
Amlodipine 5mg OR 10mg tablets	
Aspirin tablets	
Atropine 0.5mg OR 1mg ampoule	
Calcium gluconate 10% ampoule	

Furosemide 20mg ampoule	
Hydrocortisone 100mg/ml vial	
Insulin, short acting (stored in the medicine fridge) vial	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml unit dose vial for nebulisation	
Isosorbide dinitrate, sublingual, 5mg tablets	
Lidocaine/Lignocaine IM 1% OR 2% vial	
Magnesium sulphate 50%, 1g/2ml ampoule (minimum of 14 ampoules required for one treatment course)	
Midazolam (1mg/ml OR 5mg/ml) OR Diazepam 5mg/ml ampoule	
Nifedipine 10mg capsules	
Prednisone 5 mg tablets	
Promethazine 25mg ampoule	
Short-acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate	
Salbutamol nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vials for	
Thiamine 100mg vial	
Water for injection	
<b>IV Solutions</b>	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose solution	
Pediatric solutions e.g. ½ strength Darrows solution AND neonatalyte solution	
Sodium Chloride 0.9% solution	
<b>Total score</b>	
<b>Percentage (Total score ÷ 88) x 100</b>	

**Score calculation:**

**Y = 1, N = 0**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 170: 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
<b>NON-NEGOTIABLE</b>		
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	
<b>EXTRAS (not part of sterilised pack)</b>		
Basin	1	
Stainless-steel round bowl, large	1	
Green towels	4	
Disposable apron	2	
Gauzes	5	
Vaginal tampons	1	
Sanitary towels	2	
Round cotton wool balls	1 pack	
Umbilical cord clamps	2	
<b>Total score</b>		
<b>Percentage (Total score ÷ 18) x 100</b>		%

**Score calculation:**

**Y = 1, N = 0, NA=NA**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red

## CHECKLIST FOR ELEMENT 171: 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
<b>MINOR STITCH / SUTURING TRAY</b>		
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	
<b>Total score</b>		<b>/12</b>
<b>Percentage (Total score ÷ 13) x 100</b>		<b>%</b>

### Score calculation:

**Y = 1, N = 0**

Percentage obtained	Score
100%	<b>Green</b>
40-99%	<b>Amber</b>
<40%	<b>Red</b>

## CHECKLIST FOR ELEMENT 173: 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			
<b>Total score</b>			
<b>Percentage (Total score ÷ 6) x 100</b>	<b>%</b>		

### Score calculation:

**Y = 1, N = 0**

Percentage obtained	Score
100%	<b>Green</b>
40-99%	<b>Amber</b>
<40%	<b>Red</b>



## CHECKLIST FOR ELEMENT 192: 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
<b>Nomination process</b>	
Agenda	
Attendance register	
Clinic and Community Health Centre (CHC) Committee guidelines	
Copy of submission to the sub-district	
<b>Formal Appointment</b>	
Signed appointment letters from Office of the MEC or delegated person	
Adopted and signed constitution as per provincial guidelines	
Code of conduct for Clinic/CHC Committee	
<b>Training</b>	
Attendance register for orientation and training conducted in the past 12 months	
<b>Services Planning, Monitoring, Evaluation and meetings</b>	
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	
<b>Complaints, Compliments and Suggestion Management (check record of the past 6 months)</b>	
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	
<b>Accountability and Communication</b>	
Contact details of Clinic/CHC Committee members clearly displayed in reception area	
Minutes of the Ward Committee meeting indicate that a member of the Clinic/CHC Committee gave feedback at the Ward Committee meeting on health-related matters	
<b>Total score</b>	
<b>Percentage (Total score ÷ 20) x 100</b>	
	%

**Score calculation:**

**Y = 1, N = 0,**

Percentage obtained	Score
100%	Green
40-99%	Amber
<40%	Red