



IDEAL COMMUNITY HEALTH CENTRE™

DEFINITIONS, COMPONENTS AND CHECKLISTS



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European Union



USAID
FROM THE AMERICAN PEOPLE

ABBREVIATIONS

APC:	Adult Primary Care
ART:	Antiretroviral treatment
AYFS:	Adolescent and Youth Friendly Services
BANC:	Basic Antenatal Care
CCMDD:	Central Chronic Medicine Dispensing and Distribution
CDU:	Chronic Dispensing Unit
CHC:	Community health centre
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
ESMOE:	Essential Steps in the Management of Obstetric Emergencies
HIV:	Human Immunodeficiency Virus
HRH:	Human Resource for Health
ICSM:	Integrated Clinical Services Management
IMCI:	Integrated Management of Childhood Illnesses
IPC:	Infection Prevention and Control
JACCOL	Jaundice, Anemia, Clubbing, Cyanosis, Oedema and Lymphadenopathy (medical examinations)
MUAC:	Mid-Upper Arm Circumference
MCSRH:	Maternal, Child, and Sexual Reproductive Health
MCWH:	Mother, Child and Women's Health
Min/max:	Minimum/maximum
MMC:	Medical male circumcision
MOU:	Midwife Obstetric Unit
NCD:	Non-communicable diseases
NGO:	Non-Governmental Organisation
NHLS:	National Health Laboratory Services
PACK:	Practical Approach to Care Kit
PCR:	Polymerase Chain Reaction
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
PSI:	Patient safety incidents
SOP:	Standard Operating Procedure/Protocol
SVS:	Stock Visibility System
TB:	Tuberculosis
TOP:	Termination of pregnancy
WBPHCOT:	Ward Based Primary Health Care Outreach Team

DEFINITION OF IDEAL COMMUNITY HEALTHCARE CENTRE

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 Community health centre (CHC) should function optimally thus requiring a combination of elements to be present in order to render it an “Ideal CHC”.

An Ideal CHC is a CHC with good infrastructure¹, adequate staff, adequate medicine and supplies, good administrative processes and sufficient bulk supplies that use 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 CHC 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 CHC”.

An Ideal CHC should have a full time doctor, a 24 hour MOU, a 24 hour emergency unit, provide Health Support services (physical rehabilitation by physical therapist and occupational therapist, speech and hearing therapy, dietetics, social worker support) and Oral Health services.

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

Developing and sustaining the ‘ideal’ CHC involves that a number of components are in place and functions 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

Each of the above components is made up of different numbers of sub-components, each having a number of specific elements that need to be in place.

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

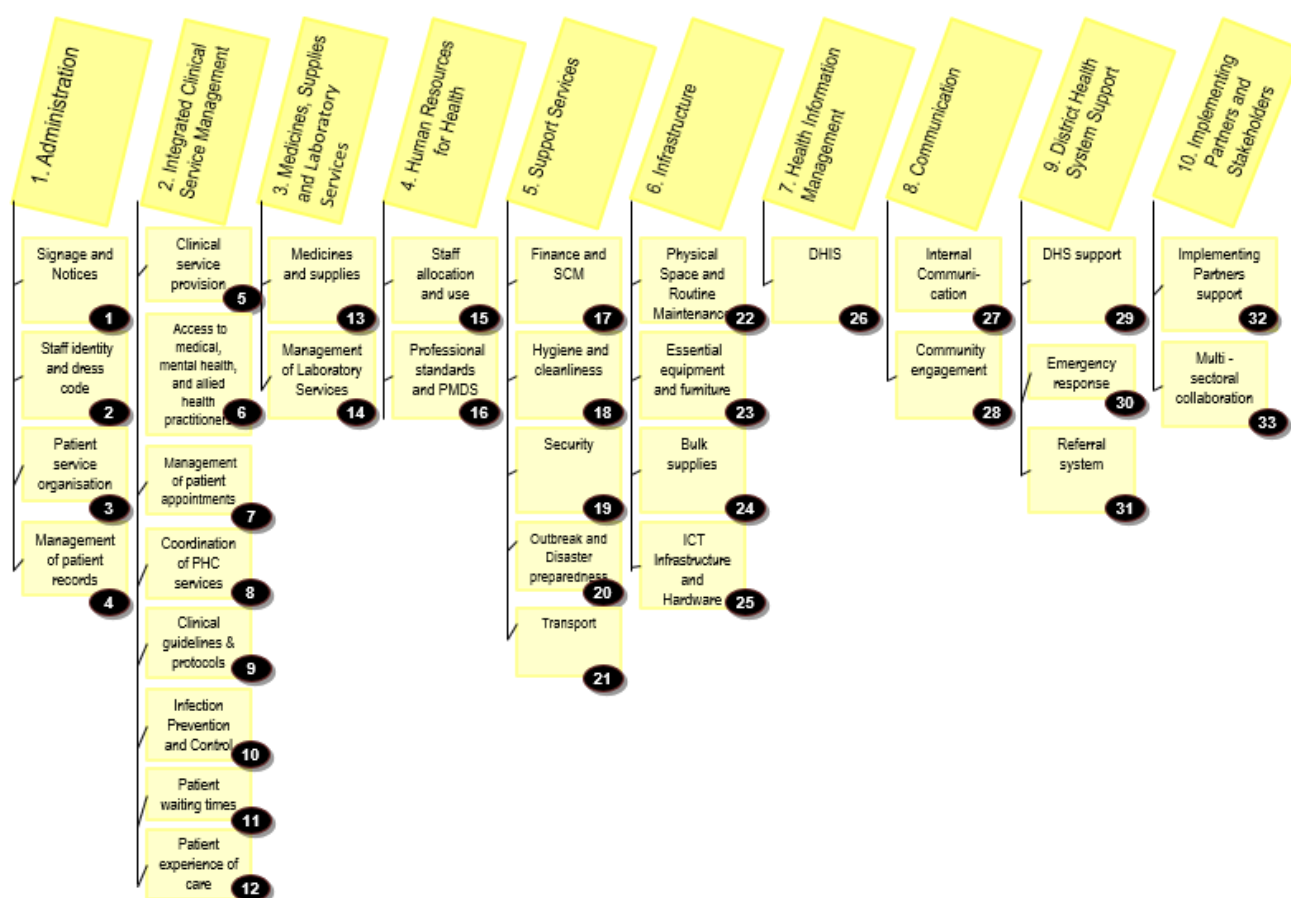
IDEAL COMMUNITY HEALTH CENTRE REALISATION AND MAINTENANCE

COMPONENTS AND SUB-COMPONENTS

Realising and maintaining the Ideal CHC involves a number of components. Each of the components is made up of sub-components which consist of a number of elements that need to be in place.

These are:

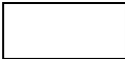





10 Components and 33 Sub-Components



IDEAL COMMUNITY HEALTH CENTRE REALISATION AND MAINTENANCE COMPONENTS, SUB-COMPONENTS AND ELEMENTS

This framework 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.

There are six main service areas in a CHC, i.e. 8 hour service area, the Rehabilitation treatment area, Oral Health services, Pharmacy, 24 hour Emergency Unit and the Midwife Obstetric Unit (MOU). To distinguish between the service areas the element number column is colour coded according to the service area as follows:




8 hour service area ²	
Rehabilitation treatment area	
Oral Health services	
24 hour Emergency unit	
Midwife Obstetric Unit	
Pharmacy ³	

If an element is applicable to more than one service area, the column for the element number is coloured with all the colours of the service areas that are applicable for the element. For elements that are applicable to more than one service area, but the measures on the checklist for that element is substantially different for the various areas, separate elements are added for each area.

Colour coding of text:

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

Key and description for method of measurement

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

² All elements for the 8 hour service will also be applicable for CHCs that has a 12 hour service

³ All elements for the Pharmacy (except elements 110 to 112) will also be applicable for CHCs that only has a dispensary

Key and description for level of responsibility

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

Key and description for weights

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

Performance is scored in line with two colours as follows:

Green  = Achieved (Yes)

Red  = Not achieved (No)

For elements without a checklist

Binary scoring: 1 or 0

Achieved (**Green**): Yes = 1

Not-achieved (**Red**): No = 0

For elements with a checklist

Fractional scoring: e.g. 10/20 measures compliant on checklist, score = 0.5

Achieved (**Green**): NNV = 1; V \geq 0.8; E \geq 0.6; I \geq 0.5

Not-achieved (**Red**): NNV < 1; V < 0.8; E < 0.6; I < 0.5

WEIGHTING OF THE IDEAL CHC ELEMENTS

The Ideal CHC elements are divided into three weight categories namely vital, essential and important.

Definition of weight categories

Non-negotiable Vital

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

Vital

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

Essential

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

Important

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

IDEAL COMMUNITY HEALTH CENTRE REALISATION AND MAINTENANCE COMPONENTS, SUB-COMPONENTS AND ELEMENTS - VERSION 1

Component	Sub Component	ELEMENTS	Weight	MM	Level of responsibility	Check list	Performance
1. Administration	1. Signage and notices: Monitor whether there is communication about the facility and the services provided						
	1	All external signage in place	I	😊	P	Y	
	2	Facility information board displayed at the entrance of the premises reflects relevant information for the facility	E	😊	D	Y	
	3	Disclaimer sign is clearly sign posted at the entrance of the facility	E	😊	D	Y	
	4	Vision, mission and values of the province/district are visibly displayed	I	😊	D		
	5	Facility organogram with contact details of the facility manager is displayed on a central notice board	I	😊	HF		
	6	Patients' Rights Charter is displayed in at least two local languages	I	😊	HF	Y	
	7	All service areas within the facility are clearly signposted	I	😊	HF	Y	
	2. Staff identity and dress code: Monitor whether staff uniform, protective clothing and mode of staff identification are in accordance with policy prescripts						
	8	There is a prescribed dress code for all service providers	I	📖	P		
	9	All healthcare professional staff members comply with prescribed dress code	I	?😊	HF	Y	
	10	All staff members wear an identification tag	I	😊	HF	Y	
	3. Patient service organisation: Monitor the processes that enable responsive patients service						
	11	Signposted helpdesk/reception services are available	E	😊📖	HF		
	12	There is a process that prioritises the very sick, frail and elderly patients at the 8 hour service area	V	?📖	HF	Y	
	13	SOP for triaging of patients in the 24 hour Emergency unit is available	V	?📖	HF	Y	
	14	Triage system is visibly displayed	E	😊📖	HF		
	15	There is a designated individual responsible for the management of queues at the 24 hour Emergency Unit	E	😊	HF		
	16	Functional wheelchair is available	E	?😊	HF	Y	
	4. Management of patient record: Monitor whether patients' records content is organised according to Integrated Clinical Services Management (ICSM) prescripts, whether the prescribed stationery is used and whether the patient records are managed appropriately						
	17	There is a single patient record irrespective of health conditions	I	😊📖	HF		
	18	Patient record content adheres to ICSM prescripts at the 8 hour service area	V	😊📖	HF	Y	
	19	Patient record content adheres to ICSM prescripts at the 24 Hour Emergency Unit	V	😊📖	HF	Y	
	20	Maternity Case Record including partogram is completed	V	😊📖	HF	Y	
	21	Mothers are provided with a discharge summary report	E	😊📖	HF	Y	

1. Administration	22	District/provincial SOP/guideline for filing, archiving and disposal of patient records is available	E		P	Y	
	23	District/provincial SOP guideline for filing, archiving and disposal of patient records is adhered to	E		HF	Y	
	24	There is a single location for storage of all active patient records	I		HF		
	25	Patient records are filed in close proximity to patient registration desk	I		HF		
	26	Retrieval of a patient's file takes less than ten minutes	I		HF		
	27	Records are not left unattended in public areas and only accessible to facility staff and patients	V		HF	Y	
	28	Records are not left unattended in clinical service areas	E		HF	Y	
	29	Priority stationery (clinical and administrative) is available at the facility in sufficient quantities	I		HF	Y	
	5. Clinical service provision: Monitor whether clinical integration of clinical care services allowing for four discrete streams (acute, chronic, MCSRH and health support services) of service delivery is adhered to as per service package and whether this results in improvement in the quality of health service delivering						
	30	Facility has been reorganised with designated consulting areas and staffing for acute, chronic health conditions, preventative and promotive health services and health support services	E		HF		
2. Integrated Clinical Services Management (ICSM)	31	Patients are consulted, examined and counselled in privacy	I		HF	Y	
	32	TB treatment success rate is at least 90% or has increased by at least 5% from the previous year	E		HF		
	33	DS-TB Client Lost to follow up rate < 5%	E		HF		
	34	Ante-natal visit rate before 20 weeks gestation is at least 75% or has increased by at least 5% from the previous year	E		HF		
	35	ART child viral load suppressed rate (12 months) is at least 66,7% or has increased by at least 5% from the previous year	E		HF		
	36	Immunisation coverage under one year (annualised) is at least 90% or has increased by at least 5% from the previous year	E		HF		
	37	Quality Improvement plan address all areas, is signed and updated quarterly	E		HF	Y	
	38	Six monthly district/sub-district clinical performance review report with action plan from clinical quality supervisors are available	E		D		
	39	Quarterly maternal and perinatal morbidity and mortality meetings are attended	E		D		
	40	Patients are formally handed over at the end of each shift	E		HF	Y	
	41	Correct handover procedure was followed between the facility and EMS	E		HF	Y	
	42	Patients who have been triaged as requiring immediate, very urgent care are seen within the target time frames	E		HF	Y	
	43	Protocols and guidelines regarding examination and stabilization of patients is adhered to	E		HF	Y	
	6. Access to medical, mental health, allied health practitioners and adolescent friendly services: Monitor patient and staff access to clinical expertise at PHC level						
	44	Facility has a doctor at all times	V		D		
	45	Patients have access to oral health services	I		D		
	46	Patients have access to health support services	I		D	Y	
	47	Patients have access to eye health services	I		D		
	48	Patients have access to mental health services	E		D		

2. Integrated Clinical Services Management (ICSM)	49	Patients have access to TOP	I		D		
	50	Patients have access to MMC	I		D		
	51	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						
	52	ICSM compliant patient appointment system for patients with chronic health conditions or requiring MCSRH and health support services is used	I		HF		
	53	Records of booked patients are retrieved not later than the day before the appointment	I		HF		
	54	Pre-dispensed medication for clinically stable chronic patients is prepared for collection not later than the day before collection date/or patients are enrolled on the CCMDD/CDU programme	E	?	HF		
	8. Coordination of PHC services: Monitor whether there is coordinated planning and execution between PHC facility, School Health Team, community-based and environmental health services						
	55	Facility does referrals to and receives referrals from school health services in its catchment area	I		D		
	56	Facility refers patients with chronic but stable health conditions to home- and community-based services for support	E		HF		
	57	Facility refers environmental health related risks to environmental health services	I		D	Y	
	9. Clinical guidelines and protocols: Monitor whether clinical guidelines and protocols are available, whether staff have received training on their use and whether they are being appropriately applied						
	58	ICSM compliant package of clinical guidelines is available in all consulting rooms	E		HF	Y	
	59	National guidelines on priority health conditions are available in the facility	E		HF	Y	
	60	Resuscitation protocol is available	E		HF		
	61	SOP for refusal of treatment available	E		HF		
	62	SOP for handover between shifts available	E		HF	Y	
	63	SOP for safe administration of medicine is available	V		HF	Y	
	64	SOP for informed consent available	V		HF	Y	
	65	SOP for identification of patients is available	V		HF	Y	
	66	80% of professional nurses have been fully trained on Adult Primary Care OR Practical Approach to Care Kit	E		D		
	67	80% of professional nurses have been fully trained on Integrated Management of Childhood Illness	E		D		
	68	80% of professional nurses have been trained on Basic Life Support	V		D		
	69	Professional nurses at the facility are trained on BANC Plus	E		D	Y	
	70	80% of professional nurses at the MOU are trained on ESMOE	E		D		
	71	50% of professional nurses are trained on Mother Baby Friendly Initiative	E		D		
	72	CHC professional nurses performing Termination of Pregnancy procedure are trained	E		D		
	73	National Guideline for Patient Safety Incident Reporting and Learning is available	E		NDoH		

2. Integrated Clinical Services Management (ICSM)	74	Facility/district SOP for Patient Safety Incident Reporting and Learning is available	E		HF	Y	
	75	Patient safety incident records comply with the National Guideline for Patient Safety Incident Reporting and Learning	V		HF	Y	
	76	All SAC 1 adverse events are reported to the next level of management within 24 hours	V		HF		
	77	National Clinical Audit Guideline is available	E		NDoH		
	78	Clinical audits are conducted annually on priority health conditions	E		HF	Y	
	79	80% of records audited are compliant	E		HF	Y	
	80	Clinical audit meetings are conducted quarterly in line with the guidelines	E		HF		
	81	National guidelines are followed for all notifiable medical conditions	V		HF	Y	
	82	SOP for the management of patients with highly infectious diseases is available	V		HF	Y	
	10. Infection prevention and control: Monitor adherence to prescribed infection prevention and control policies and procedures						
	83	National Infection Prevention and Control strategic framework is available	E		NDoH		
	84	Facility has a functional Infection Prevention and Control programme	E		HF	Y	
	85	SOP on standard precautions is available	V		HF	Y	
	86	All staff have received in-service training in the last two years on standard precautions that is in-line with the SOP	V		HF	Y	
	87	Posters on hand hygiene is displayed	E		HF	Y	
	88	Awareness day on hand hygiene is held annually	I		HF		
	89	Poster on cough etiquette is displayed in every waiting area	I		HF	Y	
	90	Staff wear appropriate personal protective clothing	V		HF	Y	
	91	Linen in use is sufficient, clean, appropriately used and not torn	E		HF	Y	
	92	Dirty, soiled and infectious linen are collected in a wheeled cart or trolley	E		HF	Y	
	93	Sharps are disposed of appropriately	V		HF	Y	
	94	Register for human tissue is available	E		HF		
	95	An annual risk assessment for infection prevention and control compliance is undertaken by the designated staff member assigned to the infection prevention and control	I		HF		
	96	All staff are made aware of the provincial letter/memo/circular that inform staff of the procedure to follow for prophylactic immunisations	E		HF	Y	
	11. Patient waiting time: Monitor adherence to the facility's prescribed waiting times						
	97	National Guideline for the Management of Waiting Times is available	I		NDoH		
	98	National target of not more than three hours for total time spent in a facility is visibly displayed at the reception of the 8 hour service areas	E		HF		

2. Integrated Clinical Services Management (ICSM).	99	Waiting time for 24 hour Emergency unit is visibly posted in the waiting area	E	☹️📖	HF		
	100	Waiting time tools to record waiting time is available	E	📖	HF		
	101	Waiting time survey report is available	E	📖	HF		
	102	Average time that a patient spends in the facility is no longer than 3 hours at the 8 hour service areas	E	📖	HF		
	12. Patient experience of care: Monitor whether an annual patient experience of care survey is conducted and whether patients are provided with an opportunity to complain about or compliment the facility and whether complaints are managed within the prescribed time						
	103	National Patient Experience of Care Guideline is available	E	📖	NDoH		
	104	Results of the annual Patient Experience of Care Survey are visibly displayed at the main waiting area	E	📖	HF	Y	
	105	An average overall score of 80% is obtained in the Patient Experience of Care Survey	E	📖	HF		
	106	National Guideline to Manage Complaints/Compliments/Suggestions is available	E	📖	NDoH		
	107	Complaints/compliments/suggestions toolkit is available at the main entrances/exits	E	📖☺️	HF	Y	
	108	Complaints/compliments/suggestions records comply with the National Guideline to Manage Complaints/Compliments/Suggestions	E	📖	HF	Y	
	109	Targets set for complaint indicators are met	E	📖	HF	Y	
3. Medicines, Supplies and Laboratory Services	13. Medicines and supplies: Monitor consistent availability of required good quality medicines and supplies						
	110	License for Pharmacy issued by the Director-General of the National Department of Health is available	V	📖	D		
	111	Certificate of recording of registration of the pharmacy with the South African Pharmacy Council and proof that payment of the annual fee is up to date	V	📖	HF		
	112	Certificate of registration of the responsible pharmacist of the facility with the South African Pharmacy Council available	E	📖	D		
	113	Proof of registration of all other pharmacist/s or pharmacist/s assistant with the South African Pharmacy Council available	E	📖	HF		
	114	Authorisation for prescribing and dispensing by professional nurse available (Section 56l.6 authorisation)	E	📖	D		
	115	Duty roster indicates that a pharmacist is available during operational hours	E	📖	HF		
	116	There is access control at the pharmacy/dispensary at all times	E	☹️	HF		
	117	Legible signage at the entrance of the unit indicates the days and times when service are offered	I	☹️	HF		
	118	There is a process that prioritises the very sick, frail and elderly patients is implemented	I	?☹️	HF	Y	
	119	There is a 'No unauthorised entry' sign on the door	E	☹️	HF		
	120	SOP for the management of availability of medicines is available	E	📖	HF	Y	
	121	Goods received voucher available and completed according to SOP	E	📖	HF		
	122	Hand hygiene facilities are available	V	☹️	HF	Y	
	123	Cleaning schedule is available	E	📖	HF		
	124	Cleaning is carried out in accordance with the schedule	V	📖	HF		
	125	All work completed is signed off by cleaners and verified by manager or delegated staff member	E	📖	HF		
	126	Pharmacy/dispensary and waiting area are clean	V	☹️	HF	Y	

3. Medicines, Supplies and Laboratory Services	127	Medicines are stored to maintain quality in the pharmacy/dispensary	I	☹	HF	Y	
	128	Medicine room/cupboard/trolley is neat	I	☹	HF	Y	
	129	Temperature of the pharmacy/dispensary is maintained within the safety range	V	📖	HF	Y	
	130	Cold chain procedure for vaccines is maintained	V	📖	HF	Y	
	131	Medicines dispensed for patients are labeled in accordance with applicable legislation	V	📖	HF	Y	
	132	The register for schedule 6 medicine is completed correctly	V	📖	HF		
	133	Schedule 6 medicine in stock correspond with the balance recorded in the register	V	📖	HF		
	134	An electronic stock management system is used to manage medicine inventory	E	☹📖	HF	Y	
	135	Stock take conducted in the past 12 months	V	📖	HF		
	136	Medicines on the tracer medicine list are available	V	☹📖	HF	Y	
	137	Re-ordering stock levels (min/max) are determined for each item on the formulary	V	☹📖	HF		
	138	Expired medicine is disposed of according to prescribed procedures	E	?	HF	Y	
	139	There is no expired medicine on the shelves	V	☹	HF		
	140	Waste receptacles for pharmaceutical waste are available	V	☹	HF		
	141	Health care waste is managed appropriately	E	☹	HF	Y	
	142	Basic medical supplies (consumables) are available	V	📖	HF	Y	
	143	Basic consumables are available for the Rehabilitation treatment area	E	📖	HF	Y	
	144	Basic medical supplies (consumables) are available for the Oral Health services	E	📖	HF	Y	
	14. Management of laboratory services: Monitor consistent availability and use of laboratory services						
	145	The Primary Health Care Laboratory Handbook is available	E	📖	NDoH		
	146	Required functional diagnostic equipment and concurrent consumables for point of care testing are available	V	☹	HF	Y	
	147	Required specimen collection materials and stationery are available	V	☹	HF	Y	
	148	Specimens are collected, packaged, stored and prepared for transportation according to the Primary Health Care Laboratory Handbook	E	☹	HF	Y	
	149	Laboratory results are received from the laboratory within the specified turnaround times	E	📖	HF	Y	
	150	Facility is enrolled as testing point in the NHLS HIV- Proficiency Testing scheme	I		HF		
	151	Facility controls rapid test kit performances by running one negative and one positive control on a weekly basis	E		HF		




4. Human Resources for Health	15. Staff allocation and use: Monitor whether the PHC facility has the required HRH capacity and whether staff are appropriately applied						
	152	Staffing needs have been determined in line with workload requirements	V	?	D		
	153	Staff appointed in line with determined requirements	V		D	Y	
	154	Facility has a dedicated manager	E		D		
	155	Work allocation schedule is signed by all staff members	I		HF		
	156	Leave policy is available	I		D		
	157	An annual leave schedule is available	I		HF		
	16. Professional standards and Performance Management Development System (PMDS): Monitor whether staff are managed according to Department of Public Service Administration (DPSA) and Department of Labour prescripts						
	158	Record of staff induction is available	I		HF		
	159	All healthcare workers have current registration with relevant professional bodies	V		HF	Y	
	160	Performance Management guidelines are adhered to	E		HF	Y	
	161	Continued staff development needs are determined for the current financial year and submitted to the district manager	I		HF		
	162	Training records reflect planned training is conducted as per the district training programme	I		HF		
	163	The disciplinary procedure is available	I		HF		
	164	The grievance procedure is available	I		HF		
	165	Staff satisfaction survey is conducted annually	I		D		
	166	The results of the staff satisfaction survey are used to improve the work environment	I		HF		
	167	SOP for management of occupational health and safety incidents is available	E		HF	Y	
	168	Health and Safety representative appointed (NA is staff establishment is less than 20 staff members)	E		HF		
	169	Health and Safety committee appointed (NA is less than 2 safety reps)	E		HF		
	170	Occupational Health and Safety incidents are managed and recorded in a register	E		HF	Y	
	171	Occupational health and safety risk assessment has been conducted in the past two years	E		HF		
	172	Risk mitigation interventions are implemented for identified occupational health and safety incidents	E		HF		
5. Support Services	17. Finance and supply chain management: Monitor the consistent availability of a functional supply chain management system as well as the availability of funds required for optimal service provision						
	173	Facility has a dedicated budget	I		D		
	174	Facility has a SOP for obtaining general supplies	E		HF		
	18. Hygiene and cleanliness: Monitor whether the required systems and procedures are in place to ensure consistent cleanliness in and around a facility						
	175	All cleaners are trained on cleaning	V		HF		
	176	Cleaning schedules are available for all areas in the facility	E		HF	Y	
	177	Cleaning is carried out in accordance with the schedule	V		HF		

5. Support Services		178	All work completed is signed off by cleaners and verified by manager or delegated staff member	E		HF	Y	
		179	Disinfectant, cleaning materials and equipment are available	V		HF	Y	
		180	Service areas are clean	V		HF	Y	
		181	Hand hygiene and sanitary facilities are available	V		HF	Y	
		182	SOP for managing general and health care waste is available	V		HF	Y	
		183	Health care waste is managed appropriately	V		HF	Y	
		184	Central storage area for health care waste is appropriate	E		D	Y	
		185	All toilets are clean, intact and functional	V		HF	Y	
		186	Exterior of the facility is clean and well maintained	E		HF	Y	
		187	A signed waste removal service level agreement between the health department and the service provider is available	E		P		
		188	Health care risk waste is removed in line with the contract	V		HF		
		189	The service level agreement for waste removal and disposal of waste is monitored	E		HF		
		190	Breaches in waste removal contract are escalated to the relevant authority	E		HF		
		191	Records show that pest control is done according to schedule	V		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							
		192	Safety and security SOP is available	E		HF	Y	
		193	Perimeter fencing is intact	I		HF		
		194	Parking for staff in provided on the facility premises	I		D		
		195	There is a standard security guard room OR the facility has an alarm system linked to armed response	I		D	Y	
		196	There is a security guard on duty OR the facility has an alarm system linked to armed response	I		D		
		197	Security services rendered according to contract OR provincial security policy	E		HF	Y	
		198	Signed copy of the service level agreement between the security company and the provincial department of health is available	E		D		
		199	Security breaches are managed and recorded in a register	E		HF	Y	
		200	There is a security system at the entrance of the units	E		D	Y	
	20. Outbreak and Disaster preparedness: Monitor whether firefighting equipment is available and whether staff know how to use it and whether disaster drills are conducted							
		201	Functional firefighting equipment is available	V		D	Y	

5. Support Services	202	Evacuation plan is displayed in designated areas	I		HF	Y	
	203	Contact numbers of healthcare personnel required in emergencies are available in designated areas	I		HF	Y	
	204	The emergency evacuation procedure is practiced annually	E		HF		
	205	Deficiencies identified during the practice of the emergency evacuation drill are addressed	E		HF		
	206	SOP for outbreak notification and response are available	E		HF		
	21. Transport: Monitor whether staff and patients are transported safely						
	207	All official vehicles used to render services or transport patients are licensed	E		D		
	208	All official vehicles used to render services or transport patients are serviced according to manufacturer's schedule	E		D		
	209	All staff driving official vehicles to render services or transport patients have a valid driver's license	E		D		
	210	All staff driving official vehicles to render services or transport patients have a valid professional driving permits where applicable	E		D		
6. Infrastructure	22. Physical space and routine maintenance: Monitor whether the physical space is adequate for the PHC facility workload, disabled persons and whether timely routine maintenance is undertaken						
	211	CHC space accommodates all services and staff at the 8 hour service area	E		D	Y	
	212	CHC space accommodates all services and staff at the 24 hour Emergency Unit	E		D	Y	
	213	CHC space accommodates all services and staff at the MOU	E		D	Y	
	214	Clinical service areas have natural ventilation or functional mechanical ventilation	V		D	Y	
	215	There is access for people in wheelchairs	E		D	Y	
	216	Maintenance schedule for building (s) and grounds are available	V		D		
	217	Building(s) is maintained	E		D	Y	
	218	Building(s) is compliant with safety regulations	V		D	Y	
	23. Essential equipment and furniture: Monitor whether essential equipment and required furniture are available						
	219	Staff are trained on the use of essential equipment	E		HF		
	220	SOP for reactive maintenance of medical equipment is available	I		HF		
	221	Maintenance plan for essential equipment is adhered to	E		HF		
	222	Furniture is available and intact at the 8 hour service areas	I		HF	Y	
	223	Essential equipment is available and functional at 8 hour consulting areas	V		HF	Y	
	224	Furniture is available and intact at the Rehabilitation treatment area	E		HF	Y	
	225	Essential equipment is available and functional at the Rehabilitation treatment area	V		HF	Y	
	226	Furniture is available and functional at Oral health services	E		HF	Y	
	227	Essential equipment is available and functional at Oral Health services	V		HF	Y	

6. Infrastructure	228	Furniture is available and intact at the 24 hour Emergency Unit	I	☹	HF	Y	
	229	Essential equipment is available at the 24 hour Emergency Unit	V	☹	HF	Y	
	230	Sterile packs for minor surgery are available	V	☹	HF	Y	
	231	Resuscitation room is equipped with functional basic equipment for resuscitation	V	☹📖	HF	Y	
	232	Emergency trolley is stocked with medicines, medical supplies and equipment	NNV	☹📖	HF	Y	
	233	Furniture is available and intact in the MOU	E	☹	HF	Y	
	234	Essential equipment is available and functioning in MOU	V	☹	HF	Y	
	235	Sterile obstetric delivery packs are available	V	☹	HF	Y	
	236	Emergency trolley in the MOU is stocked with medicines, medical supplies and equipment	NNV	☹📖	HF	Y	
	237	Essential equipment is available and functioning in the TOP and MMC procedure rooms	V	☹	HF	Y	
	238	Functional oxygen cylinders with a pressure gauge is available	NV	☹	HF	Y	
	239	Oxygen available in the cylinder is above the minimum level	NV	☹	HF	Y	
	240	Imaging service unit is accredited	E	📖	HF		
	241	An up to date asset register is available	I	☹📖	HF	Y	
	242	Redundant and non-functional equipment is removed from the facility	I	☹	HF		
	24. Bulk supplies: Monitor whether the required electricity supply, water supply and sewerage services are constantly available						
	243	Facility has a functional piped potable water supply	V	?👉	D		
	244	Facility has emergency water supply	V	👉☹	D		
	245	Facility has a functional back-up electrical supply available in designated areas	V	?☹	D	Y	
	246	The sewerage system is functional	V	👉☹	D		
	25. ICT infrastructure and hardware: Monitor whether systems for internal and external electronic communication are available and functional						
	247	There is a functional telephone in the facility in designated areas	E	?👉	D	Y	
	248	There is a functional computer	I	?👉	HF		
	249	There is functional printer connected to the computer	I	?👉	HF		
	250	There is internet access	I	?👉	D		
7. Health Information Management	26. District Health Information System (DHIS): Monitor whether there is an appropriate information system that produces information for service planning and decision making						
	251	Facility performance in response to burden of disease of the catchment population is displayed and is known to all clinical staff members	I	?☹	HF		
	252	National District Health Information Management System policy available OR Provincial SOP aligned with National Policy is available	I	📖	HF		
	253	Clinical personnel and data capturer trained on the facility level Standard Operating Guidelines for Data Management	I	📖	HF		

	254	Relevant DHIS registers are available and are kept up to date	I	☹️	HF		
	255	Facility submits all monthly data on time to the next level	I	📖	HF		
	256	Electronic health patient registration system is functional	E	👉	D		
8. Communication	27. Internal communication: Monitor whether the communications system required for improved quality for service delivery is in place						
	257	There are sub-district/district quarterly facility performance review meetings	I	📖	D		
	258	A staff meeting is held at least quarterly within the facility	I	📖	HF		
	259	Staff members demonstrate that incoming policies and notices have been read and are understood by appending their signatures on such policies and notifications	E	📖	HF	Y	
	28. Community engagement: Monitor whether the community participates in PHC facility activities through representation in a functional clinic committee						
	260	There is a functional clinic committee	E	📖	P	Y	
	261	Contact details of clinic committee members are visibly displayed	I	☹️	HF		
	262	The facility hosts an annual open day	I	📖	HF		
9. District Health System Support	29. District Health Support (DHS): Monitor the support provided to the facility through guidance from district management, regular Ideal CHC status measurement by the PPTICRM as well as through visits from the district support and health programme managers						
	263	There is a health facility operational plan in line with district health plan	I	📖	HF		
	264	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 CHC Realisation status for the end of year report	E	📖	D		
	30. Emergency response: Monitor the effectiveness of emergency responses						
	265	There is a pre-determined EMS response time to the facility	E	📖	D		
	266	Register for emergency transport requests is available	E	📖	D	Y	
	267	Remedial action taken when predetermined EMS response time is not adhered to	E	📖	D		
	268	Emergency contact numbers (fire, police, ambulance) are displayed in areas where telephones are available	V	📖	HF	Y	
	269	SOP available for the handover of patients between the facility and EMS	E	📖	HF	Y	
	31. Referral system: Monitor whether patients have access to appropriate levels of health care						
	270	National Referral Policy is available	I	📖	NDoH		
	271	District SOP for the referral system is available	E	📖	HF	Y	
	272	There is a referral register that records referred patients	E	📖	HF	Y	
	273	Copy of referral form available in the patient record	E	📖	HF	Y	
10. Implementing Partners and Stakeholders	32. Implementing partners support: Monitor the support that is provided by implementing partners						
	274	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		
	275	The list of implementing health partners shows their areas of focus and business activities	I	📖	HF		
	33. Multi-sectoral collaboration: Monitor the systems in place to respond to the social determinants of health						
	276	There is an official memorandum of understanding between the NDOH and SAPS	I	📖	NDoH		
	277	There is an official memorandum of understanding between the PDOH and Department of Education	I	📖	P		

		278	There is an official memorandum of understanding between the PDOH and the Department of Social Development	I		P		
		279	There is an official memorandum of understanding between the PDOH and Department of Public Works	I		P		
		280	There is an official memorandum of understanding between the PDOH and Department of Transport	I		P		

Summary of Ideal CHC categories

Weights	Silver	Gold	Platinum
Non-negotiable Vitals (4 elements)	100%	100%	100%
Vital (65 elements)	60-69%	70-79%	≥80%
Essential (134 elements)	50-59%	60-69%	≥70%
Important (77 elements)	50-59%	60-69%	≥70%

CHECKLIST FOR ELEMENT 1: All 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) = if present, **N** (No) = if not present, **NA** (Not applicable) = for small facilities or where certain services are not rendered.

External signage	Score
Geographical location signage from main roads	
a. Both directions on each main road	
b. Within 1 km of CHC	
c. No obstructions to visibility	
Facility gate entrance signage	
a. Vehicles and pedestrians will be searched	
b. Entry and parking are at own risk	
c. Directional signage for MOU	
d. Directional signage for 24 hour Emergency Services	
e. Directional signs for deliveries	
Specific external locations:	
a. Emergency Assembly Point	
Waste storage:	
a. Health care Risk Waste (medical waste)	
b. Health care General Waste	
At or near to main entrance of building:	
a. Ambulance parking sign OR area marked on paving	
b. Disabled parking sign OR area marked on paving	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

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

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

Scoring - in column for score mark as follows:

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

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

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

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

Scoring - in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 6: Patients' Rights Charter is displayed in at least two local languages

Use the checklist below to check whether the Patients' Rights Charter is displayed in at least two local languages in the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present, **NA** (not applicable) = area not in facility

Area	Score
All waiting areas in the 8 hours service area	
24 Hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

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) = if the facility does not have the area/service

Internal Branding	Score
Help Desk/Reception	
Complaints/suggestions/compliments box	
Pharmacy/ dispensary	
Time and days services are offered at the pharmacy/dispensary are displayed at the entrance of the pharmacy/dispensary	
Chronic Medicine Collection (CCMDD/CDU)	
24 Hour Emergency Unit	
Midwife Obstetric Unit	
Oral Health Services	
X-rays (if applicable)	
Facility Manager – door identifier	
Emergency exit(s)	
Exit(s)	
Assembly points	
Stairs (if applicable)	
Patient Toilets	
Directional arrows to toilets	
Disabled toilet pictogram	
Female toilet pictogram	
Male toilet pictogram	
Directional signs for 8 hours service areas - Colour-coded signage for each of the 4 streams of care service areas	
Acute/minor ailments (orange)	
Chronic Diseases (blue)	
MCWH (deep green)	
Health Support Services (yellow)	
Functional room signage (each area/room should be labeled)	
Vital signs	

Counselling room/s	
Consultation room/s	
Dressing room	
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)	
Dirty utility room/sluite	
Laundry	
Cleaner's room	
Linen room	
Staff Kitchen	
Patient records storage room	
Community Outreach Service (if applicable)	
Staff toilet(s)	
Staff room	
Boardroom/multi-purpose meeting room	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

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

Use the checklist below to check that the staffs on duty are dressed according to prescribed dress code

Scoring - in column for score mark as follows:

Check - randomly select healthcare professional staff members to review.

Y (Yes) = if present and adhered to, **N** (No) = if not present or not adhered to, **NA** (Not applicable) = if the facility does not have all the service areas

Item	Staff member 8 hour service	Staff member 8 hour service	Staff member 24 hour Emergency unit	Staff member 24 hour Emergency unit	Staff member MOU	Staff member MOU
Nails short						
Jewellery minimal (plain wedding band, small ear rings, no necklaces)						
Dress/skirts OR pants (dress/skirt should not be shorter than knee length)						
Tailored clothes (not too tight nor too loose)						
Distinguishing devices worn						
Total						
Total maximum possible score (sum of all scores minus those marked NA)						
Score (Total ÷ Total maximum possible score)						

CHECKLIST FORELEMENT 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 in each service area as indicated to review.

Y (Yes) = if present and adhered to, **N** (No) = if not present or not adhered to, **NA** (Not applicable) = if there are not enough staff on duty/appointed to evaluate, check those on duty OR the facility does not have all the service areas

Staff member	Score 8 hour service	Score Rehabilitation service area	Score Oral Health	Score Pharmacy/ dispensary	Score 24 Hour Emergency Unit	Score MOU
Staff member 1						
Staff member 2						
Staff member 3						
Staff member 4						
Staff member 5						
Total						
Total maximum possible score (sum of all scores minus those marked NA)						
Score (Total ÷ Total maximum possible score)						

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

CHECKLIST FOR ELEMENT 12: There is a process that prioritises the very sick, frail and elderly patients at the 8 hour service area

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

Scoring - in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 13: SOP for triaging of patients in the 24 Hour Emergency unit is available

Use the checklist below to check whether the SOP covers the following topics.

Scoring - in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility does not have a 24 hour Emergency unit

Item	Score
Describe the designation of the healthcare provider/s who should conduct the triage	
Location or area where the triage should be conducted	
Equipment and material required in the triage area	
Triage process is described for different categories of patients	
Documentation of triage findings	
Total	
Score ÷ 5	

CHECKLIST FOR ELEMENT 16: Functional wheelchair is available

Use the checklist below to check whether there is a wheelchair available at the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present, **NA** (not applicable) = if the facility does not have the service area

Area	Score
8 hours service area	
24 Hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 18: Patient records adheres to ICSM prescripts at the 8 hour service area

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

Scoring - in column for score mark as follows:

Check - randomly select seven records of patients who were seen in the past three months. Audit the last visit. The type of record to be audited is indicated in the table below.

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

Weight-for-height z score							
MUAC (every 3 months)							
Temperature							
Blood pressure at every visit							
Respiratory rate							
Pulse rate at every visit							
Blood sugar as per guidelines							
Urine dipstick as per guidelines							
Basic screening where indicated (HIV, TB, STI, Diabetes)							
Current chronic condition							
Adherence to medication							
Reported side effects of medication							
Other hospital/doctor visits							
Presenting complaints							
Examination							
General (JACCOL)							
Respiratory							
Cardiovascular							
Gastro intestinal							
Mental state							
Central nervous system (CNS)							
Musculo-skeletal							
Diagnosis							
Patient management							
Investigation/tests requested							
Date of investigation/test requested							
Results of investigations/test recorded							
Health education provided							
Treatment prescribed							
Rehabilitation (where applicable)							
Referral (where applicable)							
Date of next visit indicated (where applicable)							
Health Care Practitioner's name and surname							
Health Care Practitioner's qualification							
Health Care Practitioner's signature							
Date signed by Health Care Practitioner							
HPCSA Number							
Child health records							
History of immunisations							
Deworming treatment							
Vit A supplementation							
Developmental screening (6, 14, 6, 9, 18 months and 3, 5-6 years)							
Growth charts completed							
Basic screening completed according to Road to Health Charts							
Maternal health records							
BANC 1st visit							
Obstetric history							
Previous obstetric history and family							
Gestational age							
General examinations							
Abdomen – FHH examination							
Vaginal examination							

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

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

CHECKLIST FOR ELEMENT 19: Patient records adheres to ICSM prescripts at the 24 hour Emergency Unit

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

Scoring - in column for score mark as follows:

Check - randomly select three records of patients who were seen in the past three months. Audit the last visit. The type of record to be audited is indicated in the table below.

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 or the facility does not have a 24 hour Emergency unit

Type of information/notes	Record 1 adult	Record 2 adult	Record 3 Child
Administrative details (on cover of record)			
CHC's name			
Name and surname			
Patient file number			
ID/Refugee/passport number OR date of birth			
Demographic details			
Residential address			
Personal contact details			
Next of kin contact details			
Employment contact details (if employed)			
Marital status			
Patient profile – first visit			
Type of employment			
Social (type of employment, living conditions, social assistance, cooking method)			
Health risk factors (alcohol, smoking, other substances, physical activity, healthy eating, sexual behaviour)			
Family history of chronic conditions			
Known chronic conditions			
Surgical history			
Allergies			
Clinical management			
Length/Height of patient at the 1 st visit			
Weight at every visit			
Body mass index (BMI) calculated at the 1 st and 7 th visits			
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			
Examination			
General (JACCOL)			

Respiratory			
Cardiovascular			
Gastro intestinal			
Mental state			
Central nervous system (CNS)			
Musculo-skeletal			
Diagnosis			
Patient management			
Investigation/tests requested			
Date of investigation/test requested			
Results of investigations/test recorded			
Health education provided			
Treatment prescribed			
Rehabilitation (where applicable)			
Referral (where applicable)			
Date of next visit indicated (where applicable)			
Health Care Practitioner's name and surname			
Health Care Practitioner's qualification			
Health Care Practitioner's signature			
Date signed by Health Care Practitioner			
SANC/HPCSA Number			
Prescription			
Patient's name and surname			
ID number			
Age			
Allergies			
Name of medication			
Strength of medication			
Quantity			
Dosage			
Dosage form			
Batch number (applicable for immunizations)			
Prescriber's name and surname			
Prescriber's qualification			
Prescriber's signature			
Date signed by prescriber			
Dispenser's name and surname (<i>Date of issue of prescription</i>)			
Dispenser's signature			
HPCSA number			
Consent form (where applicable)			
Patient's full names and surname are written on the consent form			
The user's age or date of birth or identity number is documented in the consent form			
The exact nature of the operation/procedure/treatment is written on the consent form			
The consent form is signed by the patient or parent/guardian			
The consent form is signed by the health care provider			
The consent form is dated			
The information is legible			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 20: Maternity Case Record including partogram is completed

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 female patients seen in the past three months in the MOU. Audit the last visit.

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, or the facility does not have a MOU

Type of information/notes	Record 1	Record 2	Record 3	Record 4	Record 5
Administrative details (on cover of record)					
CHC's name					
Name and surname					
Patient file number					
ID/Refugee/passport number OR date of birth					
Demographic details					
Residential address					
Personal contact details					
Name and surname of parents or guardian (if applicable)					
Contact details of parents or guardian (if applicable)					
Next of kin contact details					
Employment contact details (if employed)					
Marital status					
Patient profile					
Type of employment					
Social (type of employment, living conditions, social assistance, cooking method)					
Social (school grade, social assistance, nutrition, where child resides)					
Health risk factors (alcohol, smoking, other substances, physical activity, healthy eating, sexual behaviour)					
Family history of chronic conditions/congenital disorders					
Known chronic conditions					
Surgical history					
Allergies					
Antenatal record					
Planned pregnancy					
Booked under 20 weeks					
Booked after 20 weeks					
LNMP (Last normal menstrual period)					
EDD (expected date of delivery)					
Future contraception selected					
Infant feeding discussed					
Risk assessment					
Clinical management					
Height of patient					

Weight					
Body mass index (BMI) calculated					
Temperature					
Blood pressure					
Pulse rate					
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					
Examination					
General (JACCOL)					
Respiratory					
Cardiovascular					
Gastro intestinal					
Vaginal examination					
Mental state					
Diagnosis					
Patient management					
Investigations/tests - PAP smear					
Investigations/tests – Syphilis					
Investigations/tests – Rhesus					
Investigations/tests – Hb					
Investigations/tests – HIV					
Gestational growth chart completed with each visit from 20 weeks onwards					
Symphysis fundal height (SFH) at each visit					
Intrauterine growth restriction (IUGR) assessed					
Maternal and foetal risks listed					
Foetal movements felt					
Foetal presentation from 36 weeks					
Partogram completed fully: (Each assessment section to be fully completed)					
Observation chart for antenatal problem admissions completed fully					
Observation chart completed fully (if diagnosis of labour is doubtful)					
Labour: Initial Assessment Completed					
Decision: assessment, diagnosis and management					
Foetal heart rate					
Method of placenta delivery					
Findings on placenta examination					
Findings on membranes examination					
State of perineum					
State of uterus					
Blood loss checked					
Feeding initiated					
Maternal and foetal risks listed					
Admission findings counter signed					
Assessment of Newborn form completed:					
a. Birth time					
b. Birth date					
c. Risk factors to baby					
d. Konakion administered					

e. Eye prophylaxis administered					
Health Care Practitioner's name and surname					
Health Care Practitioner's qualification					
Health Care Practitioner's signature					
Date signed by Health Care Practitioner					
HPCSA Number					
Consent form (where applicable)					
Patient's full names and surname are written on the consent form					
The user's age or date of birth or identity number is documented in the consent form					
The exact nature of the operation/procedure/treatment is written on the consent form					
The consent form is signed by the patient or parent/guardian					
The consent form is signed by the health care provider					
The consent form is dated					
The information is legible					
Total					
Total maximum possible score (sum of all scores minus those marked NA)					
Score (Total ÷ Total maximum possible score)					

CHECKLIST FOR ELEMENT 21: Mothers are provided with a discharge summary report

Use the checklist below to verify that the discharge report describes the information as listed

Scoring – in column for score mark as follows:

Check – randomly select tow discharge reports

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility does not have a MOU

Item	Score Discharge report 1	Score Discharge report 2
Name and Surname of Patient		
Date of birth		
Identity number or passport number		
Date of delivery		
Date of discharge		
Type of delivery		
Name of the facility to which the patient was admitted		
Examination on discharge conducted		
Family Planning (contraception) discussed		
Feeding options discussed		
Medicine and treatment given		
Postnatal advice on discharge		
Information regarding baby:		
Gender		
Weight		
Head circumference		
Length		
BCG given		
Polio given		
Name and surname of health care provider		
Health care provider's qualification		
Signature of health care provider completing the report		
Date signed by health care provider		
Total		
Score (Total ÷ 34)		

CHECKLIST FOR ELEMENT 22: District/Provincial SOP/guideline for archiving and disposal of patient records is aligned to the National guideline

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 23: 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 filing, archiving and disposal of patient records

Scoring - in column for score mark as follows:

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

Item	Score
Patient record storage room adheres to the following:	
Lockable with a security gate OR electronically controlled entrance (tag)	
There is a 'No unauthorised entry' sign on the door	
Shelves OR cabinets to store files	
Lowest shelf OR cabinets start at least 100 mm off the floor and the top of shelving is not less than 320 mm from the ceiling to allow airflow	
Aisle and shelves OR Cabinets labeled correctly according to SOP	
Counter or sorting table or dedicated shelves to sort files	
Light is functional and allows for all areas of the room to be well lit	
Room is clean and dust free	
Filing for patient records adheres to the following:	
Facility has a patient record for patients that consulted at the facility	
Standardised unique record registration number assigned to files	
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 that were issued for the day are returned to the patient records storage room/registry by the end of the day	
Annual register available of archived records	
Annual register available of disposed records	
Copy of disposal certificates available. Copies must correspond with entries in disposal register	
Access for patient to their records	
The SOP/guideline for filing, archiving and disposal of patient records describes the process to follow for patients to access their patient record	
Total	
Score (Total ÷ 17)	

CHECKLIST FOR ELEMENT 27: Records are not left unattended in public areas and only accessible to facility staff and patients

Use the checklist below to check whether records are not left unattended at the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present, **NA** (not applicable) = if the facility does not have the service area

Area	Score
8 hours service area	
24 Hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 28: Records are not left unattended in clinical service areas

Use the checklist below to check whether records are left unattended at the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present, **NA** (not applicable) = if the facility does not have the service area

Area	Score
8 hours service area	
24 Hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FORELEMENT 29: 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 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		
Maternity Case Record with Partogram		
Refusal of treatment forms		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 31: Patients are consulted, examined and counselled in privacy

Use the checklist below to check whether patients are consulted, examined and counselled in privacy

Scoring - in column for score mark as follows:

Y (Yes) = complaint, **N** (No) = not compliant, **NA** (not applicable) = if the facility does not have the service area

Area	Score
Consultation room in 8 hours service area	
Rehabilitation treatment area	
Oral Health	
24 hour Emergency unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 37: 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** (not applicable) = if no gaps were identified in the specific area (verify whether there were no improvements needed by checking the results of the relating element)

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

CHECKLIST FOR ELEMENT 40: Patients are formally handed over at the end of each shift

Use the checklist below to check whether formal handover of patients is done

Scoring - in column for score mark as follows:

Check – Select two records of patients in each of the areas as indicated who were handed over between shifts.

Y (Yes) = Compliant, **N** (No) = no compliant, **NA** (not applicable) = if the facility does not have the service area

Item	24 Hour Emergency unit		MOU	
	Score Record 1	Score Record 2	Score Record 1	Score Record 2
Time of patient handover is documented				
Obstetric history (gravidity and parity)				
Antenatal history				
Vital signs				
Stage of labour				
Progress of labour				
Time next examination is due				
Treatment required during the next shift				
Signature to confirm handover done				
Condition of patient is documented after handover				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				

CHECKLIST FOR ELEMENT 41: Correct handover procedure was followed between the facility and EMS

Use the checklist below to check whether the correct procedure was followed between the facility and EMS

Scoring - in column for score mark as follows:

Check – Select two records of patients in each area as indicated who were transferred via EMS according to EMS register. Note if the facility does not have a 24 hour Emergency unit, assess in the 8 hour emergency unit.

Y (Yes) = compliant; **N** (No) = not compliant; **NA** = if no patients were transferred via EMS or process is NA

Item	24 Hour Emergency unit/8 hour service area		MOU	
	Score Record 1	Score Record 2	Score Record 1	Score Record 2
Arrival time of EMS				
Handover time				
Method of transfer of patient from facility to Ambulance				
Confirmation of patient identity				
Clinical condition				
Vital signs				
Clinical condition of the baby (where applicable)				
Method of transfer of patient from facility to ambulance, i.e. walking, stretcher or wheelchair				
Treatment provided				
Treatment required during transfer				
Monitoring required during transfer				
The receiving facility expecting the patient				
Name of the health care provider who telephonically accepted the transfer at the receiving hospital				
Previous/known medical history (treatment given to user, how the patient was managed by EMS prior to arriving at the facility)				
Transfer letter and/or maternity records to be handed over to the receiving facility (where applicable)				
The name and designation of the health care provider receiving the patient				
Signatures of transferring and receiving personnel				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				

CHECKLIST FOR ELEMENT 42: Patients who have been triaged as requiring immediate, very urgent care, are seen within the target time frames

Use the checklist below to check whether patients have been triaged as required

Scoring - in column for score mark as follows:

Check – randomly select records of three patients who were triaged as requiring immediate, urgent or very urgent care. Compare the time the patient was triaged with the time the patient was seen to evaluate whether the patient was seen within the triage time scale as indicated on the triage algorithm.

Y (Yes) = if patient was seen within the target time frame, **N** (No) = if patient was not seen within the target time frame; **NA** (not applicable) = if the facility does not have a 24 hour Emergency unit area

Item	Score
Record 1	
Record 2	
Record 3	
Total	
Score (Total ÷ 3)	

CHECKLIST FOR ELEMENT 43: Protocol and guidelines regarding examination and stabilisation of patients is adhered to

Use the checklist below to check whether patients have been stabilised according to guidelines and protocols

Scoring - in column for score mark as follows:

Check – randomly select records of three patients who were triaged as requiring immediate, very urgent care.

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

Item	Score	Score	Score
	Record 1	Record 2	Record 3
Triage category or score			
Initial clinician's assessment			
Medical history			
Physical examination			
Investigations ordered			
Provisional diagnosis			
Final diagnosis (N/A where final diagnosis has not been made prior to transfer)			
Interventions made to stabilize the patient			
All vital signs have been monitored			
Transfer arrangements for the receiving facility			
Total			
Score (Total ÷ 30)			

CHECKLIST FOR ELEMENT 46: Patients have access to health support services

Use the checklist below to check whether patients have access to health support services

Scoring - in column for score mark as follows:

Y (Yes) = if patients have access onsite or via referral (referral facilities for each service must be describe in the facility's), **N** (No) = if patients don't have access on site or via referral

Item	Score
Occupational therapy services	
Physiotherapy services	
Dietetic services	
Social work services	
Speech and hearing services	
Total	
Score (Total ÷ 5)	

CHECKLIST FOR ELEMENT 51: Adolescent and youth friendly 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 18-24 years	
Facility has a brief profile of adolescents and youth in its catchment area, including their challenges	
Total	
Score (Total ÷ 7)	

CHECKLIST FOR ELEMENT 57: 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 is available at the facility	
No stagnant water outside the perimeters of the facility	
No overgrown vegetation outside the perimeters of the facility	
No litter outside the perimeters of the facility	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 58: The 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 consulting rooms in the areas as indicated

Y (Yes) = present, **N** (No) = not present, **NA** (not applicable) = if the facility does not have the service area

Item	Score 8 hour service	Score 24 Hour Emergency unit	Score MOU
Adult Primary Care guide (APC) – 2019 or Practical Approach to Care Kit (PACK), 2019 or latest version			
Integrated Management of Childhood Illness Chart Booklet, 2019 or latest version			
Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2020 or latest version			
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Adults, 2019 or latest version (only in consulting room used by the doctor)			
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Paediatrics, 2017 or latest version (only in consulting room used by the doctor)			
Newborn Care Charts Management of Sick and Small Newborns in Hospital SSN Version 1,- 2014 or latest version (only in consulting room used by the doctor)			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

* Guidelines can also be available electronically or via apps

CHECKLIST FOR ELEMENT 59: 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 at the areas as indicated

Y (Yes) = present, **N** (No) = not present, **NA** (not applicable)

= if the facility does not have the service area or provide the service

Item	Score 8 hour service	Score 24 Hour Emergency unit	Score MOU
Child, Youth and School Health			
South African Infant and Young Child feeding Policy (2013) (updated with circular in 2017) or latest version			
Non-Communicable diseases			
National User Guide on the Prevention and Treatment of Hypertension in Adults at PHC Level (2021) or latest version			
HIV			
Antiretroviral Treatment Clinical Guidelines for the Management of HIV in Adults, Pregnancy, Adolescents, Children, Infants and Neonates (2019) or latest version			
National HIV Testing Services Policy (2016) or latest version			
National Medical Male Circumcision Guidelines (2016) or latest version			
Standard Operating Procedures for Adherence Guidelines for HIV, TB and NCD (2020) AGL SOPs* or latest version			
National guidelines for the management of Viral Hepatitis (2019) or latest version			
TB			
National Tuberculosis Management Guidelines (2014) or latest version			
National Guidelines for the Management of Tuberculosis in Children (2013) or latest version			
Management of Rifampicin Resistance - A Clinical Reference Guide (2019) or latest version			
Women, Maternal and Reproductive Health			
Guidelines for Maternity Care in South Africa (2016) or latest version			
Cervical Cancer Prevention and Control Policy (2017) or latest version			
Clinical Guidelines for Breast Cancer Control and Management (2019) or latest version			
National Contraceptives clinical guidelines (2019) or latest version			
National Consolidated guidelines for the management of HIV in adults, adolescents, children and infants and prevention of mother-to-child transmission (2020) or latest version			
Maternal, Perinatal and Neonatal health policy (2021) or latest version			
Clinic Guideline for Genetics Services (2021) or latest version			
National Clinical Guidelines for Safe Conception and Infertility (2021) or latest version			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

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

CHECKLIST FOR ELEMENT 62: SOP for handing over between shifts

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

Scoring –in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility does not have the service area

Item	Score MOU	Score 24 hour Emergency unit
Procedure describes who must conduct the handovers		
Describe the handover process (is it face to face/documented)		
Minimum details to be provided at handover (summary of patient condition, procedure and treatment required)		
When handovers should take place (frequency)		
Total		
Score ÷ 4		

CHECKLIST FOR ELEMENT 63: SOP for safe administration of medicine

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

Scoring –in column for score mark as follows:

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

Item	Score
Check validity of prescription before administration	
Verification of medicine to be administered	
Route of administration	
Parental medicine	
Schedule 5 and 6 administration	
Reporting of medication errors	
Recording of medication administration	
Total	
Score ÷ 7	

CHECKLIST FOR ELEMENT 64: SOP for informed consent is available

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

Scoring –in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 65: SOP for identification of patients is available

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

Scoring –in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (Not applicable) = If the facility does not have a MOU

Item	Score
Procedure for identification including determination of correct information	
Method of identification (e.g. wrist band) and information to be included (name, surname, telephone number, allergies)	
Applying the identification band/item	
Removal of identification band/item	
Specific precautions for managing at risk patients such as babies and intellectually challenged patients	
Total	
Score ÷ 5	

CHECKLIST FOR ELEMENT 69: Professional nurses at the facility are trained on BANC Plus

Use the checklist below to check whether professional nurses are trained in BANC Plus

Scoring –in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available; **NA** (Not applicable) = if the facility has fewer areas than listed for review

Item	Score
50% of nurses are trained on BANC Plus in the 8 hour service area	
50% of nurses are trained on BANC Plus in the 24 hour Emergency unit	
80% of nurses are trained on BANC Plus in the MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 74: Facility/district SOP for patient safety incident reporting and learning is available

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

Scoring –in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 75: 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 (PSI)**

Scoring - In column for score mark as follows:

Check patient safety records for the past three months.

Note:

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

Y (Yes) = available, **N** (No) = not available or *Compliance* report does not show 100% for “Null” reporting, **NA** (Not Applicable) = if facility did not record and patient safety incidents in the past three months

Item	Score
Patient Safety Incident Register	
Completed Patient safety incident form with investigation report is available for all patient safety incident cases that have been closed on the Patient Safety Incident Register	
Statistical report for classifications of agents involved	
Statistical report for classifications of incident type	
Statistical report for classifications of incident outcome	
Statistical report for Indicators for patient safety incidents	
Total score	
Percentage (Total score÷ 6) x 100	%

CHECKLIST FOR ELEMENT 78: Clinical audits are conducted annually on priority health conditions

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

Scoring - In column for score mark as follows:

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

Item	Score
HIV/TB	
NCD (diabetes and hypertension)	
Maternal health (ANC &PNC)	
Well baby	
Sick child (IMCI)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 79: 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) = compliant, **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 adult is still to come; assess the previous financial year's records for that condition. **NA** (Not applicable) = if the facility does not provide treatment for the specific health condition.

Item	Score
HIV/TB	
NCD (diabetes and hypertension)	
Maternal health (ANC &PNC)	
Well baby	
Sick child (IMCI)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 81: National guidelines are followed for all notifiable medical conditions

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 82: SOP for the management of patients with highly infectious diseases is available

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 84: Facility has a functional Infection Prevention and Control programme

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

Scoring – in column for score mark as follows:

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

Item	Score
Facility has a designated staff member who is responsible for IPC	
Terms of reference of the IPC committee is available	
Designation of committee members is set out in the terms of reference	
IPC committee meet at a minimum quarterly (check attendance registers)	
Total	
Score (Total ÷ 4)	

CHECKLIST FOR ELEMENT 85: SOP for standard precautions is available

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 86: All staff have received in-service training on infection control standard precautions that is in-line with the SOP in the last two years

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

Scoring - in column for score mark as follows:

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

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

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

CHECKLIST FOR ELEMENT 87: Posters on hand hygiene is displayed

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

Scoring - In column for score mark as follows:

Check – Randomly select the areas as indicated

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

Area	Sub-area	Score Poster for hand hygiene technique displayed near the hand wash basin	Score Poster for alcohol-based hand rub technique displayed on a notice board (or wall where there is no notice board)
8 Hour Service area	Vital area		
	Consultation room		
	Rehabilitation treatment area		
	Oral health		
	Toilet 1 (3 streams of care)		
	Toilet 2 (3 streams of care)		
	Toilet in Rehabilitation treatment area		
	Toilet in Oral Health		
24 Hour Emergency Unit	Resuscitation		
	Consultation area		
	Observation area		
	Patient Toilet		
	Toilet for the disabled		
	Staff Toilet		
MOU	Antenatal ward		
	Delivery suite		
	Postnatal ward		
	Patient Toilet		
	Toilet for the disabled		
	Staff Toilet		
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 89: Poster on cough etiquette is displayed in every waiting area

Use the checklist below to check whether the poster on cough etiquette is displayed in every main waiting area

Scoring - In column for score mark as follows:

Check – Randomly select the areas as indicated

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

Area	Sub-area	Score
8 Hour Service area	Waiting area at 3 streams of care	
	Waiting area at Rehabilitation treatment area	
	Waiting area at Oral health services	
24 Hour Emergency Unit	Waiting area at the 24 Hour Emergency Unit	
MOU	Waiting areas at the MOU	
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 90: 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:

Check – Randomly select the areas as indicated

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 OR the facility does not have the area

Item	8 Hour Service Area				24 hour Emergency unit		MOU	
	Consultation rooms		Oral Health services		Score -stock available	Score - worn by staff	Score -stock available	Score - worn by staff
	Score -stock available	Score - worn by staff	Score -stock available	Score - worn by staff				
Gloves – non sterile								
Gloves – sterile								
Disposable gowns OR aprons								
Protective face shields OR goggles								
Surgical face masks								
N95 Respirators								
Total								
Total maximum possible score (sum of all scores minus those marked NA)								
Score (Total ÷ Total maximum possible score)								

CHECKLIST FOR ELEMENT 91: The Linen in use is sufficient, clean, appropriately used and not torn

Use the checklist below to check whether the linen is sufficient, clean, appropriately used
and not torn in the areas as indicated

Scoring - In column for score mark as follows:

Check – Randomly select the areas as indicated

Y (Yes) = compliant, **N** (No) = not compliant, **NA** (Not applicable) = if the facility has fewer areas than listed for review OR where the type of linen listed (cloth/disposable) is not used.

Item	8 Hour Service area		24 Hour Emergency Unit			MOU		
	Consultation Room 1	Consultation Room 2	Resuscitation	Consultation area	Observation area	Antenatal ward	Delivery suite	Postnatal ward
All examination couches are covered with linen								
Cloth linen (i.e. couch cover, two draw sheets, two sheets, two pillowcases) is available for each consultation room								
Disposable linen – at least 30 draw sheets per consultation room								
Linen is clean								
Linen is appropriately used for its intended purpose								
Linen is not torn								
Mattresses have a washable cover								
Mattress covers are clean								
Mattresses are intact								
Total								
Total maximum possible score (sum of all scores minus those marked NA)								
Score (Total ÷ Total maximum possible score)								

CHECKLIST FOR ELEMENT 92: Dirty, soiled and infectious linen are collected in a wheeled cart or trolley

Use the checklist below to check whether a trolley is used to collect dirty, soiled and infectious linen at the area as indicated

Scoring - in column for score mark as follows:

Y (Yes) = if present, **N** (No) = if not present, **NA** (not applicable) = if the facility has fewer areas as indicated for review

Area	Score
8 hours service area	
24 Hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 93: Sharps are disposed of appropriately

Use the checklist below to check whether sharps are disposed of appropriately in the areas as indicated

Scoring - In column for score mark as follows:

Check – Randomly select the areas as indicated

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

Item	8 Hour Service area			24 Hour Emergency Unit			MOU		
	Consultation Room 1	Consultation Room 2	Oral Health	Resuscitation	Consultation area	Observation area	Antenatal ward	Delivery suite	Postnatal ward
Health care risk waste is properly segregated									
Sharps are disposed of in impenetrable, tamperproof containers									
Sharps containers are disposed of when they reach the limit mark									
Sharps containers are placed on work surface or in wall mounted brackets									
Used needles are not recapped before disposal									
Total									
Total maximum possible score (sum of all scores minus those marked NA)									
Score (Total ÷ Total maximum possible score)									

CHECKLIST FOR ELEMENT 96: All staff are made aware of the letter/memo/circular that informs staff of the procedure to follow for prophylactic immunisations

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

Scoring - In column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 104: Results of the annual patient experience of care survey are visibly displayed at the main waiting area

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

Scoring - In column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 107: Complaints/compliments/ suggestions toolkit is available at the main entrance/exit

**Use the checklist below to check whether the complaint forms, box and poster are available
at the areas as indicated**

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant, **NA** (Not Applicable) = if the facility does not have the service area.

Item	Score 8 Hour Service Area	Score 24 Hour emergency unit	Score MOU
Lockable complaints/compliments/suggestions boxes are visibly placed at main entrance/exit			
Complaints box is mounted (fixed to the wall or flat surface)			
Official complaint/compliment/suggestion forms and pen are at the box at the main entrance/exit			
A standardised poster describing the process to follow to lodge a complaint, give a compliment or make a suggestion is visibly displayed at the entrance of the facility			
A standardised poster describing the process to follow to lodge a complaint, give a compliment or make a suggestion is visibly displayed in a second language commonly spoken official languages			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 108: Complaints/compliments /suggestions records comply with the National Guideline to Manage Complaints/Compliments/ Suggestions

**Use the checklist below to check the availability of records required for effective
Complaint/compliment/suggestion Management**

Scoring - in column for score mark as follows:

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

Note:

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

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

Item	Score
The facility's/district's SOP to Manage Complaints/Compliments/Suggestions is available	
* Complaints letters (check the last 5 complaints resolved)	
* Complaints redress letters/minutes (check the last 5 complaints resolved)	
* Complaints register	
* Compliments register	
* Suggestion register	
* Statistical report for indicators and classifications for complaints	
*Statistical report for indicators and classifications for compliments	
*Statistical report for indicators and classifications for suggestions	
Total	
Score (Total ÷ 8)	

CHECKLIST FOR ELEMENT 109: Targets set for complaint 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; Not applicable (NA) = if no complaints were recorded in the previous quarter

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

CHECKLIST FOR ELEMENT 118: There is a process that prioritises the very sick, frail and elderly patients at the 8 hour service area

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

Scoring - in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 120: SOP for management of availability of medicines is available

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 122: Hand hygiene and sanitary facilities are available at the Pharmacy/dispensary

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:

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

Item	Score
Poster on hand hygiene is displayed near all hand wash basins	
Functional hand wash basin	
Taps are functional with running water (*)	
Liquid hand wash soap	
Disposable hand paper towels	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 126: Pharmacy/dispensary and waiting area are clean

Use the checklist below to check whether the areas are clean

Scoring – in column for score mark as follows:

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

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

Area and measures	Score	Score
CONSULTING ROOMS:	Pharmacy/dispensary room	Waiting area
Windows are clean		
Window sills are clean		
Floor is clean		
Wall skirtings are free of dust		
Countertops are clean		
Door handles are clean		
Walls are clean		
Bins are not overflowing		
Bins are clean		
Areas are odour-free		
Areas are free of cobwebs		
Total		
Score (Total ÷ 22)		

CHECKLIST FOR ELEMENT 127: Medicines are stored to maintain quality in the pharmacy/dispensary

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) = compliant, N (No) = not compliant

Item	Score
There are no cracks, holes or signs of water damage in the pharmacy	
There is sufficient space in the pharmacy to store medicines needed in the facility	
There are no medicines stored in direct contact with the floor	
There is no evidence of pests in the pharmacy	
Medicines are stored neatly on shelves	
Medicines are stored according to a classification system	
Brazier bins (storage organisers) are neatly labeled	
Medicines are packed according to FEFO (First Expired, First Out) principles	
Total	
Score (Total ÷ 8)	

CHECKLIST FOR ELEMENT 128: Medicine room/cupboard/trolley is neat and orderly

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

Scoring - in column for score mark as follows:

Check – Randomly select the areas as indicated

Y (Yes) = comply, **N** (No) = do not comply, **NA** (Not applicable) = if the facility has fewer areas as indicated for review

Item	8 Hour Service area		24 hour Emergency Unit			MOU	
	Consultation room	Oral Health	Resuscitation area	Consultation area	Observation area	Delivery suite	Antenatal/postnatal ward
Surfaces inside the medicine room/cupboard/trolley are clean							
Medicines are neatly grouped together according to a classification system e.g. by dosage form (tablets/capsules, liquids, ointments, drops etc.) in alphabetical order and by generic name							
Medicine packets/bottles are clean and dust free							
There are no loose tablets or vials lying around							
There are no used unsheathed needles lying around or placed in open vials							
Total							
Total maximum possible score (sum of all scores minus those marked NA)							
Score (Total ÷ Total maximum possible score)							

CHECKLIST FOR ELEMENT 129: Temperature of the pharmacy/dispensary is maintained within the safety range

Use the checklist below to check whether the medicine in the pharmacy is maintained within the safety range

Scoring - in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 130: Cold chain procedure for vaccines is maintained

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

Scoring - in column for score mark as follows:

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

Item	Score
Facility has a vaccine or medicine refrigerator with a thermometer	
The temperature of the refrigerator is recorded twice daily, 7 hours apart (check one month's record)	
The temperature of the refrigerator is maintained between 2-8 °C (check one month's record)	
There is a cooler box for storage of vaccines if needed	
Ice packs are available for use as needed	
There is a functional thermometer for use in the cooler box	
Total	
Score (Total ÷ 6)	

CHECKLIST FOR ELEMENT 131: Medicines dispensed for patients are labelled in accordance with applicable legislation

Use the checklist below to check whether medicine dispensed to patients are labelled in accordance with applicable legislation

Scoring - in column for score mark as follows:

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

Randomly check dispensed medication provided to 3 patients

Item	Medicine label 1	Medicine label 2	Medicine label 3
Labels of dispensed medicines are clear and legible			
The label is attached to the medicine and does not obstruct or cover the expiry date			
The label contains the name of the medicine			
The label contains the strength of the medicine			
The label contains the dosage of the medicine			
The label contains the name of the patient			
The label contains the directions for use of the medicine			
The label contains the name and address of the facility supplying the medicines			
The label contains the date the medicine was dispensed			
Total			
Score (Total ÷ 7)			

CHECKLIST FOR ELEMENT 134: An electronic stock management system is used to manage medicine inventory

Use the checklist below to check whether the electronic stock management system is used to manage medicine inventory

Scoring – in column for score mark as follows:

Y (Yes) = compliant, **N** (No) = non-compliant, **NA** (Not applicable) = if facility uses another system than the Stock visibility System (SVS)

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

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

CHECKLIST FOR ELEMENT 136: Medicines on the tracer medicine list are available

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

Scoring – Where an electronic networked stock availability monitoring system is not available, use the scoring columns in the list below to score availability as follows:

Check available stock in the pharmacy/medicine room/dispensary

Y (Yes) = available, not expired; **N** (No) = not available OR available but expired; **NA** (Not Applicable) = where the medicine is required for a specific service provided at the CHC, e.g. treatment of HIV/TB and the CHC do not provide the specific service as they only provide services for screening of HIV/TB; * = Only required at midwife obstetric units; ** = Required for facilities, where there is a permanent doctor; *** = Relevant where malaria cases are prevalent.

MEDICINE ROOM/DISPENSARY			
Oral formulations/inhalers			
	Score		Score
Abacavir 20mg/ml solution OR Abacavir 60 mg dispersible tablets OR Abacavir/Lamivudine 120/60 mg dispersible tablets		Lopinavir, Ritonavir 200/50mg tablets OR Atazanavir, Ritonavir 300/100mg OR tazanavir 150mg capsules WITH Ritonavir 100mg capsules	
Abacavir 300mg tablets		Lopinavir, Ritonavir 80/20mg/ml solution OR Lopinavir, Ritonavir 40/10mg capsules (pellets) OR sachets (granules)	
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	
Dolutegravir 50 mg capsule		Paracetamol 500mg tablets	
Enalapril 5mg or 10mg tablets		Prednisone 5mg tablets OR Prednisolone 5mg tablets	
Ethambutol 400mg tablets		Pyrazinamide 500mg tablets	
Ferrous lactate/gluconate liquid/syrup		Pyridoxine 25mg tablets	
Ferrous sulphate (dried) /fumarate tablets providing ± 55 to 65mg elemental iron		Rifampicin + Isoniazid (RH) 300mg/150mg OR 150/75mg tablets	
Folic acid 5 mg tablets		Rifampicin + Isoniazid (RH) 60/60 tablets OR Rifampicin + Isoniazid (RH) 75/50 tablets OR Rifampicin + Isoniazid (RH) + pyrazinamide (RHZ) 75/50/150 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 20mg OR 40mg tablets	
Lamivudine 10mg/ml syrup/solution		Tenofovir/emtricitabine 300/200 mg tablets	
Lamivudine 150mg tablets		Tenofovir/emtricitabine/efavirenz 300/200/600mg tablets	
Combined oral contraceptive pill containing 30 mcg ethinylestradiol		Tenofovir/ lamivudine /dolutegravir 300/300/50mg tablets	

ethinylestradiol/levonorgestrel OR ethinylestradiol/norethisterone OR ethinylestradiol/gestodene OR ethinylestradiol/norgestimate		Vitamin A 50,000U OR 100,000U OR 200,000U capsules	
		Zidovudine 50mg/5ml, solution/suspension	
Injections			
	Score		Score
Benzathine benzylpenicillin 1.2MU OR 2.4MU vial		Medroxyprogesterone acetate 150mg/ml OR Norethisterone 200mg/ml injections	
Ceftriaxone 250mg OR 500mg OR 1g vials		Gentamicin 80mg/2ml 2ml ampoule OR Fosfomycin 3g granules	
Topicals			
	Score		Score
Chloramphenicol 1%, ophthalmic ointment			
Fridge			
	Score		Score
BCG vaccine		Pneumococcal Conjugated Vaccine (PCV)	
Insulin, short acting		Polio vaccine (oral)	
Measles vaccine		Rotavirus vaccine	
Hexavalent: DTaP-IPV-HB-Hib vaccine		Tetanus toxoid (TT) vaccine	
Oxytocin 5 OR 10 IU/ml		Ergometrine 0.5mg OR oxytocin/ ergometrine 5U/0.5mg combination*	
Emergency trolley			
	Score		Score
Activated Charcoal		Lidocaine/Lignocaine IM 1% OR 2% 20ml vial	
Adrenaline 1mg/ml (Epinephrine) 1ml ampoule		Magnesium sulfate 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	
Artesunate 60mg injection***		Nifedipine 5mg OR 10mg capsules	
Aspirin 100mg OR 300mg tablets		Paediatric solution e.g. ½ strength Darrows (200ml or 500ml) solution AND neonatalyte 200ml solution	
Atropine 0.5mg OR 1mg ampoule		Prednisone 5 mg tablets OR Prednisolone tablets	
Calcium Gluconate 10% 10ml ampoule		Promethazine 25mg/2ml 2ml ampoule OR Promethazine 25mg/1ml ampoule	
Naloxone 0.4mg/1ml 1 ml ampoule**		Short acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate sublingual, 5 mg tablets	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose 1L solution		Salbutamol 0.5% 20ml nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vial for nebulisation OR Salbutamol 100 mcg MDI OR Fenoterol 1.25mg/2ml Unit dose vial for nebulisation	
Furosemide 20mg OR 10mg/2ml ampoule		Sodium chloride 0.9% 1L solution	
Hydrocortisone 100mg/ml OR 200mg/2ml vial		Streptokinase 1.5 MIU injection**	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml Unit dose vial for nebulization		Thiamine 100mg/ml 10ml vial	
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 138: Expired medicine is disposed of according to prescribed procedures

Use the checklist below to check whether expired medicine is disposed of according to prescribed procedures

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (not applicable) = if the facility does not have any expired obsolete medicine

Item	Score
Expired or obsolete medicine is put in a dark green container	
Container is marked with the words "Pharmaceutical waste liquid or solid"	
The correct documentation is attached to the container	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Totals ÷ Total maximum possible scores)	

CHECKLIST FOR ELEMENT 141: Health care waste is managed appropriately in the pharmacy/dispensary

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

Scoring – in column for score mark as follows:

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

Item	Score
General waste is disposed of separately in a black/beige/white or transparent plastic bag	
Sharps are disposed of in impenetrable, tamperproof containers	
Sharps container contains only sharps	
Sharps containers are disposed of when they reach the limit mark	
Sharps containers are placed on work surface or in wall mounted brackets	
Used needles are not recapped before disposal	
Total	
Score (Total ÷ 6)	

CHECKLIST FOR ELEMENT 142: Basic medical supplies (consumables) are available

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

Scoring - in column for score mark as follows:

Check- available stock in storage room in the areas as indicated

Y (Yes) = available, **N** (No) = not available, **NA** (not applicable) = if the facility does not have all the areas and if the supply is not applicable to the specific area and items marked with an ** for facilities that do not have a permanently appointed doctor.

Item	Score 8 Hour service	Score 24 Emergency Hour Unit	Score MOU
Intravenous administration set 20 drops/ml			
Intravenous admin set paed 60 drops/ml			
Blade stitch cutter sterile/pack			
Urinary (Foley's) catheter silicone/latex 8f			
Urinary (Foley's) catheter silicone/latex 10f			
Urinary (Foley's) catheter silicone/latex 12f			
Urinary (Foley's) catheter silicone/latex 14f			
Urinary (Foley's) catheter silicone/latex 16f			
Urinary (Foley's) catheter silicone/latex 18f			
Urinary (Foley's) catheter silicone/latex 20f			
Urinary (Foley's) catheter silicone/latex 22f			
Catheter suction resp 500mm 06f			
Catheter suction resp 500mm 08f			
Catheter suction resp 500mm 10f			
Catheter suction resp 500mm 12f			
Catheter suction resp 500mm 14f			
Catheter thoracic silicone st20			
Catheter thoracic silicone st24			
Catheter thoracic silicone st28			
Catheter thoracic silicone st30			
Catheter thoracic silicone st32			
Drainage sys chest u/water adult			
Urine drainage bag			
Simple face mask for oxygen for adults			
Reservoir mask for oxygen for adults			
Nasal cannula (prongs) for adults			
Simple face mask for oxygen, paediatric			
Reservoir mask for oxygen for paediatric			
Nasal cannula (prongs) for paediatric			
Simple face mask for oxygen for adults			
Reservoir mask for oxygen for adults			
Nasogastric feeding tube 600mm fg5			
Nasogastric feeding tube 600mm fg8			
Nasogastric feeding tube 1000mm fg10 OR 12			
Disposable aprons			
Eye patches (disposable)			
Disposable razors/disposable shaving set			

Disposable Amnihook			
Ultrasound gel medium viscosity			
Gloves exam n/sterile large /box			
Gloves exam n/sterile medium /box			
Gloves exam n/sterile small /box			
Gloves surg sterile sz 6 OR6.5 OR Small/box			
Gloves surg sterile sz 7OR 7.5 OR medium/box			
Gloves surg sterile sz 8 OR large/box			
Endotracheal tubes – uncuffed size 2.5mm**			
Endotracheal tubes –uncuffed size 3.0mm **			
Endotracheal tubes – uncuffed size 3.5mm **			
Endotracheal tubes – uncuffed size 4mm **			
Endotracheal tubes –uncuffed size 4.5mm **			
Endotracheal tubes – cuffed size 3.0mm **			
Endotracheal tubes – cuffed size 4.0mm **			
Endotracheal tubes – cuffed size 5.0mm **			
Endotracheal tubes – cuffed size 6.0mm **			
Endotracheal tubes – cuffed size 7.0mm **			
Endotracheal tubes – cuffed size 8.0mm **			
Tube stomach washout 24fg			
Tube, stomach washout 26fg			
Tube, stomach washout 28fg			
Tube stomach washout 30fg			
Sheath incontinence 25mm			
Sheath incontinence 30mm			
Sheath incontinence 35mm			
Intravenous cannula 18g green/box			
Intravenous cannula 20g pink/box			
Intravenous cannula 22g blue/box			
Intravenous cannula 24g yellow/box			
Needles: 18 (pink) OR 20 (yellow)/box			
Needles: 21 (green)/box			
Needles: 22 (black)/box			
Needles: 23 (blue)/box			
Needles: 25 /box			
* Syringes 3-part 2ml/box			
* Syringes 3-part 5ml/box			
* Syringes 3-part 10 ml/box			
* Syringes 3-part 20ml/box			
Insulin syringe with needle /box			
Dental syringe and needle for LA			
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			
Vaginal Cusco speculum (disposable)			
Only applicable if the facility uses older HB model			
Haemolysis applicator sticks			
HB meter clip			
HB chamber glass-grooved			
HB cover glass-plain			
Only applicable if facility uses an Automatic External Defibrillator (AED)			
Replacement pads for AED – adult			
Replacement pads for AED - paediatric			
Dressing Supplies			

Item	Pack size	Score 8 Hour service	Score 24 Emergency Hour Unit	Score MOU
Plaster roll	1			
Bandage crepe	1			
Gauze paraffin 100x100 /box	1			
Gauze swabs plain n/s 100x100x8ply/pack	100			
Gauze abs grade 1 burn /pack	1			
Basic disposable dressing pack (should contain as a minimum cotton wool balls, swabs, 2 forceps, disposable drape)	1			
Cotton wool balls 1g 500`s				
Sanitary towels maternity /pack	12			
Stockinette 100mm OR150mm/roll	1			
Adhesive micro-porous surgical tape 24/25mm or 48/50mm	1			
70% isopropyl alcohol prep Pads 24x30 1ply OR 2 ply /box	200			
Skin traction kit - adult (elast 0468)				
Skin traction kit - child (elast 0469)				
Sodium carboxymethylcel (intrasite) 15g				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Total ÷ Total maximum possible score)				

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

CHECKLIST FOR ELEMENT 143: Basic consumables are available for the Rehabilitation treatment area

Use the checklist below to check the availability of consumable for the rehabilitation treatment area

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 does not provide the service

Item	Score	Item	Score
Batteries: hearing aid		EVA foam	
Bicarbonate of soda sachets		Foam HD compressed	
Breadboard - one-handed		Foam high-density	
Cable ties, nylon, medium		Masonite	
Cable ties, nylon, long		Oil: arnica	
Cardboard A4 coloured		Paper: print-out, tympanometer	
Coloured writing instruments		Pelvic strap 5cm	
Contact adhesive		Pelvic strap 3cm	
Cerumen curette: replacement curettes		Pressure garment material (Elastonet)	
Cerumen curette: replacement globe		Sewing kit	
Cushion: wheelchair, thin, positioner		Splinting material 6 sizes	
Cushion: wheelchair, thick, pressure care		Splinting material: thermoplastic tape	
Cushion cover: basic stretchable		Superglue (cyanoacrylate)	
Cushion cover: waterproof		Toothbrush, large	
Ear mould impression material and scoop		Towelling	
Ear mould impression material catalyst		Varnish (wood)	
Ear mould impression Otolight: replacement globe		Velcro circles (hook and loop)	
Ear mould impression Otolight: replacement tips		Velcro hook tape 2 sizes	
Ear mould impression Otostops 3 sizes		Velcro loop tape 2 sizes	
Exercise band latex		Washboard one-handed	
Feeding cup		Waterproof wood glue	
Feeding spoon		Wheelchair gloves	
Ferrule: rubber 4 sizes		Wheelchair spares kit	
Sub total 1		Sub total 2	
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 144: Basic medical supplies (consumables) are available for the Oral Health Services

Use the checklist below to check the availability of consumable for the Oral Health Services

Scoring - in column for score mark as follows:

Check available stock in storage room

Y (Yes) = available, **N** (No) = not available, **NA** = if providing tooth extraction only, section for preventative dentistry is NA

SURGICAL SUPPLIES			
Item	Score	Item	Score
Exodontia (tooth extraction) and minor oral surgery			
Apron, dental, plastic Adult		Hydrogen peroxide	
Apron, dental, plastic child		Hypodermic needles (disposable)	
Surgical blades No.11 and No. 12		Saline solution, 500ml	
Chlorhexidine oral rinse 0,2%		Saliva ejectors (disposable)	
Cotton wool balls		Sutures surgical	
Dry socket alveolar paste		Topical anaesthetic	
Ethyl chloride		Local anaesthetic (without and without vasoconstrictor)	
Haemostat sponge			
Conservative (preventive) dentistry			
Fissure sealants		Cotton wool pellets	
Amalgam capsules		Polyester strips (composite)	
Composite		Glass ionomers	
Fluoride gel		Polishing strips	
Varnish cavity liner		Polishing kit	
Prophylaxis paste		Dental floss	
Cements /liners (kalzinol, Dycal etc.)		Fluoride trays	
Articulating paper		Acid etch and bonding agent	
School outreach			
Toothpaste, dental, fluoride		Toothbrushes	
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 146: 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 and if the facility has fewer areas as indicated for review

Item	Score 8 hour service	Score 24 hour Emergency unit	Score MOU
Laboratory equipment and consumables			
Hb meter			
Blood glucometer			
Spare batteries for blood glucometer			
Lancets			
Blood glucose strips			
Urine dipsticks			
Urine specimen jar OR flask			
Malaria rapid test (where applicable in facilities in KZN, GP, MP and LP)			
Rapid HIV test			
Rh 'D' (Rhesus factor) test			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FORELEMENT 147: Required specimen collection materials and stationery are available

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

Scoring - in column for score mark as follows:

Y (Yes) = available, **N** (No) = not available, **NA** (Not applicable) = for measures marked with “*” if facility uses liquid based cytology method OR traditional pap smear consumable not required and if the facility has fewer areas as indicated for review.

Item	Score 8 hour service	Score 24 hour Emergency unit	Score MOU
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 (EDTAPaeds)			
Microtainer tube: Yellow Top (SST-Paeds)			
Sterile specimen jars			
Swabs with transport medium			
Sterile Tubes (without additive) for MCS (Microscopy, culture and sensitivity)			
Venipuncture needles (Green OR Black)			
Specimen Plastic Bags			
Pap smear collection materials			
Liquid - based Cytology (LBC) vials (NA if facility uses traditional pap smear method) *			
Combi - brush (NA if facility uses traditional pap smear method) *			
Cervix – brush (NA if facility uses traditional pap smear method) *			
Fixative (NA if facility uses liquid based cytology method) *			
Wooden spatula (NA if facility uses liquid based cytology method) *			
Slide holder OR brown envelope (NA if facility uses liquid based cytology method)) *			
Microscope slides (NA if facility uses liquid based cytology method) *			
Early Infant diagnosis (EID) collection material			
DBS PCR Kit OR EDTA Microtainer tube (where PCR is performed at the laboratory)			
NHLS stationery			
N1 - PHC Request Forms			

N2 - Cytology Request Form			
N3 - PHC Order Book for Specimen Collection Materials			
N4 - PHC Facility Specimen Register			
SMS printer			
Thermal paper roll (NA only if facility has real-time access to Labtrak/TrakCareWebview))			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 148: Specimens are collected, packed, stored and prepared for transportation according to the Primary Health Care Laboratory Handbook

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

Scoring - in column for score mark as follows:

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

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

Table 1: Grouping of specimens

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

Item	Group A			Group B			Group C		
	Score sample 8 hour service1	Score sample 24 hour	Score sample MOU	Score sample 8 hour service1	Score sample 24 hour	Score sample MOU	Score sample 8 hour service1	Score sample 24 hour	Score sample MOU
General									
Specimens are clearly labeled									
Each laboratory request form is correctly completed									
There is at least one functional wall mounted thermometer in area where lab specimens are stored for courier collection									
The temperature of the storage area for lab specimens is recorded daily									
Group A specimens									
Samples are kept away from direct sunlight									

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

CHECKLIST FOR ELEMENT 149: The laboratory results are received from the laboratory within the 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 OR the facility does not have all the service areas as indicated.

No	Item	Turnaround time	Score sample 8 hour service	Score sample 24 hour Emergency Unit	Score sample MOU
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 to 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 the result (4-6			
6	Pus MCS (Microscopy, culture and sensitivity)	24-72 hours			
7	Sputum: TB	Between 5 days and 6 weeks			
8	Sputum: Xpert MTB/RIF	40 hours			
9	Stool (MCS)	24 – 72 hours			
10	Urine (MCS)	24 – 72 hours			
	Total				
	Total maximum possible score (sum of all scores minus those marked NA)				
	Score (Totals ÷ Total maximum possible scores)				

CHECKLIST FOR ELEMENT 153: Staff appointed in line with determined requirements

Use the checklist below to check whether the staff is appointed in line with determined requirements

Scoring - in column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant, **NA** = if the staff category is not required according to the needs determined

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

CHECKLIST FOR ELEMENT 159: All health care 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) = not have current registration, **NA** (Not applicable) = if category of staff is not appointed at the facility

Category of staff	Score
Nurses	
Professional nurses	
Enrolled nurses	
Nursing assistants	
Clinical Nurse Practitioners	
Advanced midwife	
Medical officers	
Medical officer – full time	
Medical officer – sessional	
Medical officer – sessional – private GP	
Oral health	
Dentist – full time	
Dentist - sessional	
Dental assistant - sessional private	
Dental therapist	
Dental assistant	
Oral hygienist	
Pharmacy	
Pharmacist	
Pharmacist assistant – basic	
Pharmacist assistant – post basic	
Allied health professionals	
Nutritionists/dietitians	
Physiotherapists	
Occupational therapists	
Psychologist	
Social workers	
Optometrists	
Speech and hearing therapists	

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

CHECKLIST FOR ELEMENT 160: Performance Management guidelines are adhered to

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

Scoring – in column for score mark as follows:

Check – randomly select three files for review

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

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

CHECKLIST FOR ELEMENT 167: SOP for management of occupational health and safety incidents is available

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

Scoring –in column for score mark as follows:

Check – the content of the SOP

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

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

CHECKLIST FOR ELEMENT 170: Occupational Health and Safety incidents are managed and recorded in a register

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

Scoring – in column for score mark as follows:

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

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

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

CHECKLIST FOR ELEMENT 176: Cleaning schedule are available for all areas in the facility

Use the checklist below to check whether a cleaning schedule is available for all areas in the facility

Scoring – in column for score mark as follows:

Y (Yes) = available; **N** (No) = not available; **NA** (Not applicable) = if the facility does not have the area

Item	Score
8 hour service area	
MOU	
24 hour Emergency unit	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Totals ÷ Total maximum possible scores)	

CHECKLIST FOR ELEMENT 178: 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:

Check – Randomly select the areas as indicated

Y (Yes) = signed off, **N** (No) = not signed off, **NA** (Not applicable) = if the facility does not have the area

	Area	Score Signed by cleaner	Score Signed by supervisor
8 Hour Service Area	Consultation rooms (randomly select 3 rooms)		
	Vital rooms		
	Health Support area (Rehabilitation treatment area)		
	Oral Health Service		
	Waiting area		
	Public toilets (randomly select 3 toilets)		
	Staff toilets (randomly select 3 toilets)		
	Staff rooms		
24 hour Emergency Unit	Resuscitation area		
	Observation area		
	Consultation area		
	Waiting area		
	Public toilets (randomly select 3 toilets)		
	Staff toilets		
	Staff rooms		
	Doctor's rest rooms		
MOU	Antenatal ward		
	Postnatal ward		
	Delivery suite		
	Waiting area		
	Public toilets		
	Patient ablution facilities		
	Staff toilets		
	Staff rooms		
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FORELEMENT 179: 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 8 hour service	Score 24 Emergency unit	Score MOU
High level disinfection for medical equipment (e.g. Sodium Perborate Powder OR Ortho-phthalaldehyde)			
Chlorine releasing agent - hypochlorite (e.g. Biocide D or Clorox)			
Alcohol-based agent (70%-90%)			
Detergents – neutral pH			
Wet polymer (floor polish)			
Protective polymer(strippers)			
All cleaning materials clearly labeled			
Materials Safety Data Sheets for all cleaning products			
Cleaning equipment	Score 8 hour service	Score 24 Emergency unit	Score MOU
Two way bucket system for mopping floors (bucket for clean water and bucket for dirty water) OR Janitor trolley			
Colour labelled mop – Red for toilets and bathrooms			
Colour labelled mop – Blue for clinical areas and non-clinical service areas			
Mop labelled for cleaning exterior areas			
Green bucket and cloths for bathroom and consulting room basins			
Red bucket and cloths for toilet			
White cloths for kitchen			
Blue bucket and cloths for clinical areas and non-clinical service areas			
Labelled spray bottle for disinfectant solution			
Window cleaning squeegee			
Mop sweeper or soft-platform broom			
Floor polisher			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 180: Facility is clean

Use the checklist below to check whether the areas are clean

Scoring - in column for score mark as follows:

Randomly select two service areas as indicated in the column for the score

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

Area and standards	Scores 8 Hour Service Area					24 hour Emergency unit				MOU		
Clinical area	Vital area	Consulting room 1	Consulting room 2	Health Support (Rehabilitation)	Oral Health Service	Consulting area 1	Resuscitation area 1	Observation area 1	Triage area	Antenatal ward	Post natal ward	Delivery suite
Windows are clean												
Window sills are clean												
Floor is clean												
Wall skirtings are free of dust												
The countertops are clean												
The door handles are clean												
Mirrors are clean												
Walls are clean												
Bins are not over flowing												
Bins are clean												
The areas are odour-free												
All areas free of cobwebs												
NON-CLINICAL AREAS:	Main Waiting area	Sub-Waiting area 1	Reception	Staff room		Waiting area	Nurses station	Manager office		Waiting area	Unit managers office	Staff room
Windows are clean												
Window sills are clean												
Floor is clean												
Wall skirtings are free of dust												
The countertops are clean												
The door handles are clean												
Walls is clean												

Bins are not over flowing												
Bins are clean												
The areas are odour-free												
All areas free of cobwebs												
Total												
Total maximum possible score (sum of all scores minus those marked NA)												
Score (Totals ÷ Total maximum possible scores)												

CHECKLIST FOR ELEMENT 181: Hand hygiene 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 in the areas as indicated

Scoring - in column for score mark as follows:

Check - Randomly select the areas as indicated

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

Item	Score 8 Hour Service Area				Score 24 hour Emergency Unit				Score MOU		
Toilet	Toilet 1 (3 streams of care)	Toilet 2 (3 streams of care)	Toilet in Health Support area	Toilet in Oral Health	Patient Toilet	Toilet for disabled	Staff toilet		Patient Toilet	Toilet for disabled	Staff toilet
Functional hand wash											
Taps functional with running water (*)											
Toilet paper											
Liquid hand wash soap											
Disposable hand paper towels											
Clinical Areas	Vital signs room	Consultation room	Health support: Treatment room	Oral Health: Treatment room	Triage	Consultation area 1	Resuscitation area	Observation area	Antenatal ward	Postnatal ward	Delivery suite
Functional hand wash basin											
Taps functional with running water (*)											
Liquid hand wash soap (*)											
Alcohol based hand rub											
Disposable hand paper towels											
Total											
Total maximum possible score (sum of all scores minus those marked NA)											
Score (Totals ÷ Total maximum possible scores)											

CHECKLIST FOR ELEMENT 182: SOP for managing general and health care risk waste is available

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

Scoring - In column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 183: Health care waste is managed appropriately

Use the checklist below to check whether health care waste is managed appropriately at the areas as indicated

Scoring - in column for score mark as follows:

Check – Randomly select the areas as indicated

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 8 Hour Service Area				Score 24 hour Emergency Unit				Score MOU		
	Patient Toilet	Toilet for disabled	Staff Toilet		Patient Toilet	Toilet for disabled	Staff toilet		Patient Toilet	Toilet for disabled	Staff toilet
Sanitary disposal bins with functional lids											
* Sanitary disposal bins/boxes lined with appropriate colour plastic bags											
Sanitary disposal bins/boxes are clean and not overflowing											
Clinical Areas	Waiting area	Consultation room	Health support: Treatment room	Oral Health: Treatment room	Waiting areas	Consultation area 1	Resuscitation area	Observation area	Antenatal ward	Postnatal ward	Delivery suite
Health care risk waste disposal bins with functional lids OR health care risk waste box available											
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 white, black, transparent or beige coloured bags											
Anatomical waste (Red bucket with sealable lid)											
Total											
Total maximum possible score (sum of all scores minus those marked NA)											
Score (Totals ÷ Total maximum possible scores)											

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

CHECKLIST FOR ELEMENT 184: Central storage area for health care waste is appropriate

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

Scoring - in column for score mark as follows:

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

General waste storage area	Score
General waste is stored in a designated area	
General waste is stored in appropriate containers which are neatly packed or stacked	
General waste is not burned or buried in the health establishment premises but collected for disposal at a designated area/landfill	
Health care risk waste storage area	Score
Health care risk waste is stored in an access-controlled area	
Health care waste storage area is clean and free from rodents	
Health care storage area is well ventilated	
Health care risk waste containers must be stored on shelves/pallets	
Area has access to water to hose the area	
Area has adequate drainage for the water (must be connected to a municipal sewerage system)	
Storage area is enclosed and protected from natural elements (rain, wind and sun)	
Area is marked with international biohazard symbol toilet	
Total	
Score (Total ÷ 10) x 100	%

CHECKLIST FOR ELEMENT 185: 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 the areas as indicated

Y (Yes) = intact, **N** (No) = not intact, **NA** (not applicable) = if the facility has fewer areas as indicated for review

Item	Score 8 Hour Service Area			Score 24 hour Emergency Unit			Score MOU		
	Patient Toilet	Toilet for disabled	Staff Toilet	Patient Toilet	Toilet for disabled	Staff toilet	Patient Toilet	Toilet for disabled	Staff toilet
Toilet									
Cleanliness of toilets									
Windows are clean									
Window sills are clean									
Floor is clean									
Basins are clean									
Walls are clean									
Toilets/urinals clean									
Sanitary bins clean and not over flowing									
The areas are odour-free									
All areas free of cobwebs									
Intact and functional									
The toilet bowl seat and cover/squat pan is intact									
The toilet bowl is stain free									
The toilet flush/sensor flush is functional									
The toilet cistern cover is complete and in place									
The urinals are intact and functional									
The urinal/flush sensor is functional									
Total									
Total maximum possible score (sum of all scores minus those marked NA)									
Score (Totals ÷ Total maximum possible scores)									

CHECKLIST FOR ELEMENT 186: The exterior of the facility is 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:

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	
Corridors are clean	
Grass is cut	
Paving is free of weeds	
Flower beds are well kept and free of weeds	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Totals ÷ Total maximum possible scores)	

CHECKLIST FOR ELEMENT 192: Safety and security SOP is available

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

Scoring – in column for score mark as follows:

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

Item	Score
High risk areas and the specific security needs for these areas	
Access control within the facility	
Reporting of security incidents (format for register for security breaches)	
Training of personnel on the management of alarms (where applicable)	
Provision of guarding services	
Patrolling of the health facility	
Equipment for security personnel	
Documentation of response time for security breaches/incidents	
Total	
(Total ÷ 8) x 100	

CHECKLIST FOR ELEMENT 195: There is a standard security guard room OR the facility has an alarm system linked to armed response

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 197: Security services rendered according to contract or provincial security policy/facility SOP

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

Scoring – in column for score mark as follows:

Y (Yes) = complaint; **N** (No) = not compliant; **NA** (Not applicable) = for whichever option is not in operation at the facility

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

* If the security officers are Private Security Industry Regulatory Authority (PSIRA) -accredited, they are acknowledged to have received training.

CHECKLIST FOR ELEMENT 199: Security breaches are managed and recorded in a register

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 200: There is a security system at the entrance of the units

Use the checklist below to verify that there is a security system at the entrance of the 24 hour Emergency unit and the MOU

Scoring - In column for score mark as follows:

Y (Yes) = compliant, **N** (No) = not compliant, **NA** (not applicable) = if the facility does not have the service area

Item	Score
24 hour Emergency unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FORELEMENT 201: Functional 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 m² floor area OR the facility has no water supply

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

CHECKLIST FOR ELEMENT 202: Evacuation plan is displayed in designated areas

Use the checklist below to check whether evacuation plan is displayed in the areas as indicated

Scoring – in column for score mark as follows:

Y (Yes) = available, **N** (No) = not available; **NA** (not applicable) = if the facility does not have the service area

Area	Score
Main waiting areas	
Manager's office	
Entrance to the 8 hour service	
Entrance to the 24 hour Emergency Unit	
Entrance to the MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 203: Contact numbers of healthcare personnel required in emergencies are available in designated areas

Use the checklist below to check whether the contact numbers of healthcare personnel required in emergencies are available in designated areas

Scoring – in column for score mark as follows:

Y (Yes) = available, **N** (No) = not available, **NA** (Not applicable) = if the facility does not have the service area

Area	Score
Manager's office at 8 hour service	
24 hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 211: CHC space accommodates all services and staff at the 8 hour service area

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:

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

Item	Score
INTERIOR SPACE	
General	
Main waiting area	
Help desk/Reception/patient registration	
Toilets	
8 hour Clinical Service Areas	
Sub-waiting area	
Vitals area /room	
Consulting room	
Counselling room	
Treatment room	
Health Support services	
Rehab treatment room	
Oral health treatment room	
MMC	
TOP	
Support /administration areas	
Multipurpose meeting room	
Facility manager office	
Staff tea room with kitchenette	
Pharmacy/dispensary	
<ul style="list-style-type: none"> Shelves available 	
Medicine collection kiosk (CCMDD)	
Surgical stores store-room	
Lockable cleaning material store room OR cupboard	
Laundry – is the service outsourced (score Y/N)	
Laundry available – if not outsourced, score Y/N, if outsourced score NA	
Oral Health store room	
Dirty utility room	

Linen room OR cupboard	
Exterior space	
Sputum booth	
Parking spaces	
a. Staff	
b. Disabled	
Waste storage room	
a. Health care general waste area	
b. Health care risk waste area	
Garden store room - is the service outsourced (score Y/N)	
Garden room available - if not outsourced, score Y/N, if outsourced score NA	
Drying area (for mops, etc.)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Totals ÷ Total maximum possible scores)	

CHECKLIST FOR ELEMENT 212: CHC space accommodates all services and staff at the 24 hour Emergency Unit

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) = Only for CDCs that don't have a 24 hour Emergency unit'

Item	Score
INTERIOR SPACE	
General	
Main waiting area	
Help desk/Reception/patient registration	
Toilets	
Clinical Service Areas	
Triage	
Consulting room	
Counselling room	
Observation area	
Emergency/resuscitation room	
Support /administration areas	
Unit manager office	
Staff tea room with kitchenette	
Medicine store room/cupboard/trolley	
Surgical stores store-room	
Lockable cleaning material store room OR cupboard	
Dirty utility room/slucie room	
Linen room OR cupboard	
Disaster stores room	
Doctor's rest room	
Exterior space	
Parking spaces	
Staff parking space	
Disabled parking space	
Ambulance parking space	
Total	
Score (Total ÷ 21)	

CHECKLIST FOR ELEMENT 213: CHC space accommodates all services and staff at the MOU

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) = Only for CDCs that don't have a 24 hour Emergency unit'

Item	Score
INTERIOR SPACE	
General	
Main waiting area	
Help desk/Reception/patient registration	
Toilets	
Clinical Service Areas	
Antenatal ward	
Postnatal ward	
Delivery suite	
Support /administration areas	
Unit manager office	
Staff tea room with kitchenette	
Medicine store room/trolley/cupboard	
Surgical stores store-room	
Lockable cleaning material store room OR cupboard	
Sluice	
Clean utility room	
Linen room OR cupboard	
Exterior space	
Staff parking space	
Disabled parking space	
Ambulance parking space	
Drying area (for mops, etc.)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 214: All clinical areas have adequate natural (windows) or functional mechanical ventilation (ceiling fans/air conditioner)

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

Scoring – in column for score mark as follows:

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

Y (Yes) = available; **N** (No) = not available; **NA** (not applicable) = if the facility does not have the service area

Area	Score 8 hour service area	Score 24 hour Emergency unit	Score MOU
Waiting area			
Vital signs rooms			
Consultation room			
Antenatal section			
Delivery suite			
Postnatal section			
Triage area			
Resuscitation area			
Observation area			
Total score			
Total maximum possible score (sum of all scores minus NA)			
Percentage (Total score ÷ Total maximum possible score) x 100			

CHECKLIST FOR ELEMENT 215: There is access for people with wheelchairs

Use the checklist below to check the accessibility for patients in wheelchairs at the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant, **NA** (not applicable) = if the facility does not have the service area

Item	Score 8 Hour Service	Score 24 Hour Emergency unit	Score MOU
Terrain must be compacted and smooth from gate to main entrance			
At least one entrance to the 8 hour service area has a ramp to allow access for persons in wheelchairs unless the entrance to the facility has no incline			
Ramp at one of the entrances to the 8 hour service area has handrails unless the entrance to the facility has no incline			
Elbow taps in toilet with access for persons in wheelchairs			
At least one toilet has access for persons in wheelchairs			
In the toilet/s with access for persons in wheelchair, door handles are at the height of a wheelchair			
In the toilet/s with access for persons in wheelchairs handrails are installed			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 217: The building/s is maintained according to schedule

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:

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 does not have the service area 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 exterior		
EXTERIOR OF BUILDING(S)			
Walls - paint in good condition			
Roof intact			
Gutters and down pipes			
a. Intact			
b. Paint in good condition			
Doors and gates			
a. Working condition			
b. Handles working			
c. Open and close			
Lights			
a. Present			
b. Functional			
Paving is intact			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			
INTERIOR OF BUILDING(S)			
WAITING AREAS	Score Waiting area 8 hour service	Score Waiting area 24 Hour Emergency Unit	Waiting area MOU
Walls - paint in good condition			
Ceiling			
a. Paint in good condition			
b. Intact			

Lights			
a. Present			
b. Functional			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			
TOILETS	Score Toilet in 8 hour service area	Score Toilet in 24 Hour Emergency Unit	Score Toilet in MOU
Wall mounted paper towel dispenser(s)			
Wall mounted hand soap dispenser(s)			
Wall tiles in good condition			
Walls - paint in good condition			
Ceiling			
a. Paint in good condition			
b. Intact			
Lights			
a. Present			
b. Functional			
Windows			
a. Window panes intact (glass not broken)			
b. Handles working			
c. Windows can open and close			
Doors			
a. Intact			
b. Handles working			
c. Open and close			
Hand wash basins			
a. Intact			
b. Taps functional (with running water)			
c. Not blocked			
Floor intact			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			
CLINICAL AREA	Score Clinical area in 8	Score Clinical area in 24	Score

	hour service area	Hour Emergency Unit	Clinical area in MOU
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 can open and close			
d. Window covering (curtains/blinds) clean and intact (blinds)			
Doors			
a. Intact			
b. Handles working			
c. Open and close			
Hand wash basins			
a. Intact			
b. Taps functional (with running water)			
c. Not blocked			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)		%	
VITAL SIGNS ROOMS:	Score Vital signs room 1	Score Vital signs room 2	
Wall mounted paper towel dispenser(s)			
Wall mounted hand soap dispenser(s)			
Walls - paint in good condition			
Floor intact			
Ceiling			
a. Paint in good condition (not peeling/faded)			
b. Intact (not broken)			

Lights		
a. Present		
b. Functional		
Windows		
a. Glass not broken		
b. Handles working		
c. Windows can open and close		
Doors		
a. Intact		
b. Handles working		
c. Open and close		
Hand wash basins		
a. Intact		
b. Taps functional		
c. Not blocked		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Totals ÷ Total maximum possible scores)		

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

CHECKLIST FOR ELEMENT 218: Building is compliant 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, **NA** (not applicable) = if the facility does not have the service area

Item	Score		
Fire compliance certificates			
Electrical compliance certificates			
Area	8 Hour service	24 Hour Emergency	MOU
Emergency exits must be clear of all obstructions			
Entrance is free from any obstruction or hazards			
Emergency vehicle entrance is free from any obstruction or hazards (must score at least one of the three areas indicated)			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 222: Furniture is available and intact at 8 hour service areas

Use the checklist below to check whether facility service areas are equipped with sufficient functional furniture in the 8 hour service area

Scoring – in column for score mark as follows:

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

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

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

CHECKLIST FOR ELEMENT 223: Essential equipment is available and functional at the 8 hour services

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	Vitals room	Consul-tation room 1	Consul-tation room 2	Child health room
Stethoscope				
Non-invasive Baumanometer (wall mounted/ portable)				
Adult, paediatric and large cuffs (3) for Baumanometer				
Diagnostic sets -including ophthalmic pieces (wall mounted or portable)				
Patella hammer				
Tuning fork (only required in one consultation room)				
Tape measure				
Vaginal Cusco speculum				
Clinical thermometers				
Wall mounted or portable angle poise style examination lamp				
Blood glucometer				
Peak flow meter				
Adult clinical scale up to 150 kg				
HB meter				
Height measure				
Urine specimen jars				
Baby scale				
Bassinet on stand				
Total				
Total maximum possible score (sum of all scores minus those marked NA)				
Score (Totals ÷ Total maximum possible scores)				
AREA	Score	Maximum possible score		
Consultation rooms				
Vital signs rooms				
Child health rooms				
Total score/Total maximum possible score				
Percentage (Total score ÷ Total maximum possible score) x 100				%

CHECKLIST FOR ELEMENT 224: Furniture is available and intact in the Rehabilitation treatment area

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

Scoring – in column for score mark as follows:

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

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

Item	Score	Score
Waiting areas	Waiting area 1	
Notice boards/snaplock frames available		
Seating		
a. Adequate seating for all patients		
b. Chairs / benches intact		
Treatment area	Treatment area 1	Treatment area 2
Desk		
a. Available		
b. Intact (including the drawers)		
Chair (clinician)		
a. Available		
b. Intact		
At least 1x chair (patient)		
a. Available		
b. Intact		
Tilting examination couch		
a. Available		
b. Intact		
Bedside footstool		
a. Available		
b. Intact		
Instrument trolley		
a. Available		
b. Intact		
Bar fridge		
a. Available		
b. Intact		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Totals ÷ Total maximum possible scores)		

CHECKLIST FOR ELEMENT 225: Essential equipment is available and functional at the health support service treatment areas

Use the checklist below to check whether essential equipment is available and functional in rehabilitation treatment area

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 provides only one of the services OR if they have a visiting team only

Item	Score	Item	Score
PHYSICAL THERAPY			
Equipment – Clinical		Equipment - General	
Aluminium crutches – adult		Allen key set	
Aluminium crutches – paediatric		Clamps: adjustable (pair)	
Balance pad		Claw hammer	
Basin, portable, large		Cordless Drill	
Bobath Ball: 85cm		Drill bit set	
Bobath Ball: 65cm		Electric foam cutter	
Bobath Ball: 45cm		Electric frying pan	
Bobath roller: 50cm		Electric jigsaw	
Bobath roller: 30cm		Extension lead (on reel)	
Construction Play equipment		Eyelet punch	
Hot water bottle		Hacksaw	
Mat: gym		Hacksaw blades	
Mirror: hand-held with cover		Heat gun	
Mirror: hand-held with handle		Measuring rule: folding	
Nebuliser: ultrasonic		Multi-plug	
Patella hammer		Pliers set	
Soccer ball		Revolving punch	
Standing frame –large		Screwdriver set	
Standing frame –medium		Shifting spanner	
Standing frame –small		Spanner set (swivel-head)	
Stethoscope		Tape measure (industrial)	
Tape measure: soft, retractable		Tool box	
Torch		Utility knife	
Toys: multisensory		Workbench, portable	
Transfer board			
Walking frame: adult			
Walking frame: paediatric		Instruments	
Walking stick: adult		Scissors: splinting	
Walking stick: paediatric		Scissors: standard, adult	
Wedges: set		Scissors: standard, child	
Weights: ankle and wrist			
Wheelchair: 25 x30cm			

Wheelchair: 30x30 cm			
Wheelchair: 30x40cm			
Wheelchair: 36x40cm			
Wheelchair: 41cm wide			
Wheelchair: 46cm wide			
Wheelchair: 51cm wide			
SPEECH THERAPY			
Equipment – Clinical		Instruments	
Audiometer portable		Cerumen management kit	
Cards - themed, speech therapy		cup: ear	
HiPro box		Curette: cerumen, plastic, adult	
Noisemakers		Curette: cerumen, plastic, paed	
OAE/AABR screener portable		Curette, cerumen, lighted, magnified	
Otolight		Ear loop, Bileau, small	
Otoscope, portable		Forceps, crocodile	
Portable screening tympanometer		Syringe, impression	
Sub total 1		Sub total 2	
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 226: Furniture is available and intact at the Oral Health services

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

Scoring – in column for score mark as follows:

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

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

Item	Score	Score
Waiting areas	Waiting area 1	
a. Notice boards/snaplock frames available		
Seating		
a. Adequate seating for all patients		
b. Chairs / benches intact		
Treatment area	Treatment area 1	Treatment area 2
Desk		
a. Available		
b. Intact (including the drawers)		
2x Dental operators' stool (round stool on wheels)		
a. Available		
b. Intact		
Lockable medicine trolley/cupboard		
a. Available		
b. Intact		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Totals ÷ Total maximum possible scores)		

CHECKLIST FOR ELEMENT 227: Essential equipment is available and functional at the Oral Health services

Use the checklist below to check whether essential equipment is available and functional at the Oral Health services

Scoring – in column for score mark as follows:

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

Item	Quantity	Score	Item	Quantity	Score
Equipment					
Amalgam separator	1		Paediatric Booster seats		
Amalgamator: digital	1		Plastic dental instrument trays		
Autoclave: cassette-type, desktop	1		Stool: dentist	1	
Cidex container with lid			Stool: dental assistant	1	
Compressor, 2-4 surgeries, fixed	1		Suction: central, wet (commonest type)	1	
Cuspidor/spittoon/water unit	1				
Dental chair: basic	1		Suction: central, dry (optional in water-scarce areas)	1	
Dental chair (For outreach portable with portable light)	1		Suction: dry, mobile (for outreach and back-up)	1	
Dental delivery system with hand-pieces (fixed)	1		Ultrasonic cleaner	1	
Dental delivery system with hand-pieces (Mobile – for outreach)	1		Water distillation	1	
Dental light: LED	1				
Dental curing light (corded or cordless)	1		X-ray: wall-mounted	1	
Dental scaler: air	1		X-ray: digital oral imaging plate with computer and cabling.	1	
Headband light					
Hand-pieces					
3-in-one syringe (included in dental delivery system)	1		Slow handpiece	2	
Air motor (high-speed turbine)	1		Slow handpiece motor	2	
Contra-angle handpiece	1		Straight handpiece	1	
Dental elevators					
Cryers elevator left	4		Straight elevator Small	4	
Cryers elevator right	4		Warwick-James elevator left	2	
Straight elevator Large	4		Warwick-James elevator right	2	
Straight elevator Medium	4		Warwick-James elevator straight	2	
Dental extraction forceps					
Forceps: Cheatle			Forceps: tooth extracting Upper roots 44 N	2	
Forceps: Cheatle container/holder			Forceps: tooth extracting Upper	2	

			roots 29 S		
Forceps: tooth extracting Lower bicuspid	6		Forceps: tooth extracting Upper roots 76	2	
Forceps: tooth extracting Lower molars	6		Forceps: tooth extracting Upper roots small	2	
Forceps: tooth extracting Lower roots and crowded incisors	2		Forceps: tooth extracting Lower molars, child	6	
Forceps: tooth extracting upper Anteriors and canines	6		Forceps: tooth extracting Lower teeth and roots, child	6	
Forceps: tooth extracting Upper bicuspid and roots	6		Forceps: tooth extracting Lower canines Adult	6	
Forceps: tooth extracting Upper molars left	6		Forceps: tooth extracting Lower Anteriors Adult	6	
Forceps: tooth extracting Upper Molars right 90	6		Forceps: tooth extracting Upper incisors and canines, child	6	
Forceps: tooth extracting Upper Molars right 89	6		Forceps: tooth extracting Upper Molars, child	6	
Forceps: tooth extracting Upper roots 29	2		Forceps: tooth extracting Upper teeth and roots, Molars, child	6	
Conservative Instruments					
Amalgam carrier plastic right angle	3		Excavator 125/126	4	
Amalgam carrier plastic straight	2		Excavator 129/130	4	
Amalgam carver	6		Excavator 133/134	4	
Amalgam plugger	4		Flat plastic	6	
Ball burnisher 2.5-3.0mm	6		Handle Mouth Mirror	30	
Bib holders	2		Kidney dishes large	4	
Bur Blocks	2		Kidney dishes small	4	
Bur brushes	2		Matrix retainer Siqueland Narrow/tofflemire	4	
Cement spatula	2		Matrix retainer Siqueland Wide/tofflemire	4	
Chip syringe			Mouth Mirrors to it Handle Mouth Mirror	30	
Cotton and Dressing Tweezers	20		Mounth models		
Cotton pellet holder	2		Needle holder	2	
Cotton wool holder (small bowl)	2		Sickel		
Dappen dishes	6		Tofflemier holder		
Dental Explorers/Probes Straight	30		Thymosin		
Dental syringe Aspirating	30		Waste receiver	2	
Periodontal					
Dental probe: periodontal	4		Scaler, dental: H6/7	6	
Periodontal hoe SG 5F	6				
Other					
Artery forceps	2		Scissors ligature	2	
Handle scalpel	2		Slab: mixing, glass	2	
Mouth	4		Tongue forceps	2	

gag					
Needle holder	2		Trimmer: gingival margin U3/U4	4	
Protective glasses	4		Trimmer: gingival margin Ui/U2	4	
Rongeur: dental No.4	4				
Rongeur: dental No. 5S	4		Wire ligature forceps	2	
Total					
Total maximum possible score (sum of all scores minus those marked NA)					
Score (Totals ÷ Total maximum possible scores)					

CHECKLIST FOR ELEMENT 228: Furniture is available and intact at the 24 Hour Emergency Unit

Use the checklist below to check whether facility service areas are equipped with sufficient functional furniture in the 24 Hour Emergency Unit

Scoring - in column for score mark as follows:

Randomly select the number of areas to review as indicated in the column for scores

Y (Yes) = available/intact, **N** (No) = not available/not intact, **NA** (not applicable) = if the facility does not have the service area

Review all areas in the 24 Hour Emergency Unit. Scoring: In column for total score mark as follow: Yes (when facility adheres to prompt) = 1, No (when facility does not adhere to prompt) =0, NA = if the facility has fewer areas as indicated for review) and as indicated

Item	Score		
Waiting areas	Waiting area 1		
Notice boards/snaplock frames available			
Seating			
a. Adequate seating for family/friends			
b. Chairs / benches intact			
Reception/nurses station			
Desk			
a. Available			
b. Intact (including the drawers)			
Chair			
a. Available			
b. Intact			
Clinical areas	Triage	Observation	Consultation
1Chair per patient			
a. Available			
b. Intact			

Hospital beds/trolley			
a. Available according approved bed capacity			
b. Intact (check ALL)			
Bedside footstool (NA if bed or trolley height is adjustable)			
a. Available			
b. Intact			
Bedside locker			
a. Available			
b. Intact			
Lockable Scheduled Medicine cupboard			
a. Available			
b. Intact			
Dressing trolley			
a. Available (1 per area)			
b. Intact (including the drawers)			
Non-clinical area			
Dirty utility/slucice area			
a. Slop-hopper			
b. In working order			
Medicine storeroom/cupboard/trolley			
a. Medicine fridge			
b. In working order			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 229: Essential equipment is available and functional at the 24 Hour Emergency Unit

Use the checklist below to check whether essential equipment is available and functional in the resuscitation, consultation and observation areas in the 24 Hour Emergency Unit

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 does not have the service area)

Item	Score		
	Resuscitation area 1	Consultation area 1	Observation area 1
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			
Blood glucometer			
Peak flow meter			
Adult clinical scale up to 150 kg			
HB meter			
Height measure			
Urine specimen jars			
Baby scale			
Bassinet			
Wall mounted or portable angle poise examination lamp			
Ceiling mounted examination light			
Totals			
Score (Total ÷ 16)			

AREA	Score
Resuscitation area 1	
Consultation area 1	
Observation area 1	
Total	
Score (Total ÷ 3)	

CHECKLIST FOR ELEMENT 230: 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:

Check – If the facility does not have a 24 hour emergency unit, assess the 8 hour service

Y (Yes) = available and functioning, **N** (No) = not available or not functioning

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

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

CHECKLIST FOR ELEMENT 231: Resuscitation room is equipped with functional basic furniture and resuscitation equipment (24 Hour Emergency Unit)

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

Scoring – in column for score mark as follows:

Check – room where resuscitation is performed (if the facility does not have a 24 hour emergency unit, assess the resuscitation room in the 8 hour service)

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

Item	Score
Emergency trolley is restored daily or after each use	
Emergency trolley with lockable medicine drawer and accessories	
Examination bed OR Patient trolley with fowlers position OR 2-part obstetric delivery bed OR Patient trolley or stretcher which can be adjusted into a fowlers position	
Chlorhexidine or Alcohol swabs	
Protective face shields OR goggles	
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	
Disposable plastic aprons	
Disposable non-sterile face masks	
Syringes 3-part: 2ml	
Syringes 3-part: 5ml	
Syringes 3-part: 10ml OR 20ml	
Cather tip syringe 50ml	
Needles: 18 (pink) OR 20 (yellow)	
Needles: 21 (green)	
Needles: 23 (blue) OR 22 (black)	
Tourniquet	
Stethoscope	
Nasogastric tubes: (a minimum of three different sizes that accommodate both adult and paediatric users)	
Nasal cannula (prongs) for adults	
Nasal cannula (prongs) for paediatric	
Wall or ceiling mounted or mobile angle poise style examination lamp	
Paediatric Broselow tape OR Pawper tape	
Resuscitation algorithms	
Resuscitation documentation register	
Total	
Score (Total ÷ 25)	

CHECKLIST FOR ELEMENT 232: Emergency trolley is stocked with medicines, medical supplies and equipment

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

Scoring –in column for score mark as follows:

Check – whether the equipment and medication area available on the emergency trolley (or on other surfaces in the resuscitation room); and also **check expiry date of medication. Mark expired medication as “N”**. If the facility does not have a 24 hour Emergency unit, assess the Emergency trolley in the 8 hour service.

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

NOTE:

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

Item	Score
EQUIPMENT FOR ALL FACILITIES (with and without a permanently appointed doctor)	
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	
Simple face mask for oxygen for adults	
Simple face mask for oxygen, paediatric	
Automatic External Defibrillator (AED) OR ECG monitor and defibrillator	
Defibrillator pads for AED OR Electrodes for ECG monitor and defibrillator	
Conductive gel (NA if the facility uses an AED)	
Intravenous cannula 18g green and appropriate strapping	
Intravenous cannula 20g pink and appropriate strapping	
Intravenous cannula 22g blue and appropriate strapping	
Intravenous cannula 24g yellow and appropriate strapping	
Admin set 20 drops/ml 1.8m /pack	
Admin set paed 60 drops/ml 1.8m /pack	
Laryngeal masks (supraglottic airways): (a minimum of three different sizes that accommodate both adult and paediatric users)	
Cardiac arrest board	
Strapping to secure Intravenous cannulae	
Oropharyngeal airways (Guedel) size 00	

Oropharyngeal airways (Guedel) size 0	
Oropharyngeal airways (Guedel) size 1	
Oropharyngeal airways (Guedel) size 2	
Oropharyngeal airways (Guedel) size 3	
Oropharyngeal airways (Guedel) size 4	
Oropharyngeal airways (Guedel) size 5	
Functional electric powered OR manual suction devices	
Suction catheters: sizes 8F	
Suction catheters: sizes 10F	
Suction catheters: sizes 12F	
Suction catheters: sizes 14F	
Rescue scissors (to cut clothing)	
Pulse oximeter with adult & paediatric probes	
Nebuliser OR face mask with nebuliser chamber for adult	
Nebuliser OR face mask with nebuliser chamber for paediatric	
EQUIPMENT FOR FACILITIES WITH A PERMANENT APPOINTED DOCTOR	
Laryngoscope handle with functional batteries	
Adult curved blades for laryngoscope size 2	
Adult curved blades for laryngoscope size 3	
Adult curved blades for laryngoscope size 4	
Paediatric laryngoscope handle	
Paediatric straight blades for laryngoscope size 00	
Paediatric straight blades for laryngoscope size 0	
Paediatric straight blades for laryngoscope size 1	
Spare bulbs for laryngoscope (NA if the laryngoscope has a built in bulb)	
Spare batteries for laryngoscope handle	
Endotracheal tubes – uncuffed size 2.5mm	
Endotracheal tubes –uncuffed size 3.0mm	
Endotracheal tubes – uncuffed size 3.5mm	
Endotracheal tubes – uncuffed size 4mm	
Endotracheal tubes –uncuffed size 4.5mm	
Endotracheal tubes – cuffed size 3.0mm	
Endotracheal tubes – cuffed size 4.0mm	
Endotracheal tubes – cuffed size 5.0mm	
Endotracheal tubes – cuffed size 6.0mm	
Endotracheal tubes – cuffed size 7.0mm	
Endotracheal tubes – cuffed size 8.0mm	
Tape to hold tie endotracheal tube in place	
Adult-size introducer, intubating stylet or bougie for endotracheal tubes	
Paediatric size introducer, intubating stylet or bougie for endotracheal tubes	
Magill's forceps (adult)	
Magill's forceps (paediatric)	
Lubricating gel	

Emergency medicines (also check expiry dates) – APPLICABLE TO ALL FACILITIES	
Activated Charcoal	
Adrenaline 1mg/ml (Epinephrine) 1ml ampoule	
Amlodipine 5mg OR 10mg tablets	
Aspirin 100mg OR 300mg tablets	
Atropine 0.5mg OR 1mg ampoule	
Calcium gluconate 10% 10ml ampoule	
Furosemide 20mg OR 10mg/2ml ampoule	
Hydrocortisone 100mg/ml OR 200mg/2ml vial	
Insulin, short acting (stored in the medicine fridge) vial	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml unit dose vial for nebulisation	
Lidocaine/Lignocaine IM 1% OR 2% 20ml vial	
Magnesium sulphate 50%, 1g/2ml ampoule (minimum of 14 ampoules required for one treatment course)	
Midazolam (1mg/ml 5 ml ampoule OR 5mg/ml 3ml ampoule) OR Diazepam 5mg/ml 2ml ampoule	
Nifedipine 5mg/10mg capsules	
Prednisone 5 mg tablets	
Promethazine 25mg/2ml ampoule OR Promethazine 25mg/1ml ampoule	
Short-acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate sublingual, 5mg tablets	
Salbutamol 0.5% 20ml nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vial for nebulisation OR Salbutamol 100 mcg MDI OR Fenoterol 1.25mg/2ml	
Thiamine 100mg/ml 10ml vial	
Water for injection	
IV Solutions	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose 1L solution	
Pediatric solutions e.g. ½ strength Darrows (200ml or 500ml) solution AND neonatalyte 200ml solution	
Sodium Chloride 0.9% solution 1L solution	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 233: Furniture is available and intact in the MOU

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

Scoring - in column for score mark as follows:

Randomly select the number of areas to review as indicated in the column for scores

Y (Yes) = available/intact, **N** (No) = not available/not intact, **NA** (not applicable) = if the facility does not have the service area

Review all areas in the MOU. Scoring: In column for total score mark as follow: Yes (when facility adheres to prompt) = 1, No (when facility does not adhere to prompt) =0, NA (if there are fewer areas the facility) = NA

Item	Score		
Waiting areas	Waiting area 1		
Notice boards/snaplock frames available			
Seating			
a. Adequate seating for family/friends			
b. Chairs / benches intact			
Reception/nurses station			
Desk			
a. Available			
b. Intact (including the drawers)			
Chair			
a. Available			
b. Intact			
Service area	Antenatal ward	Delivery suite	Postnatal ward
1Chair per patient			
a. Available			
b. Intact			
Anesthetist stool			
a. Available			
b. Intact			
Hospital beds			
a. Available according approved bed capacity			
b. Intact (check ALL)			
Over-bed patient trolley			
a. Available			

b. Intact			
Obstetric tilting couch			
a. Available			
b. Intact			
Bedside footstool			
a. Available			
b. Intact			
Bedside locker			
a. Available			
b. Intact			
Lockable Scheduled Medicine cupboard			
a. Available			
b. Intact			
Dressing trolley			
a. Available (1 per ward)			
b. Intact (including the drawers)			
Double bowl stand with two bowls			
a. Available			
b. Intact			
Non-clinical area			
Dirty utility/sluice area			
a. Freezer (for anatomical waste e.g. placenta and penile foreskin)			
b. In working order			
Medicine storeroom/cupboard/trolley			
a. Medicine fridge			
b. In working order			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR ELEMENT 234: Essential equipment in the MOU

Use the checklist below to check whether essential equipment is available and functional in the Midwife Obstetric Unit

Scoring - in column for score mark as follows:

Randomly select the 2 consulting rooms in the Midwife Obstetric Unit

Y (Yes) = available, **N** (No) = not available; **NA** (not applicable) = if the facility does not have the service area

Item	Delivery suite	Antenatal/ postnatal ward	Sluice	Clean utility area
Stethoscope				
Foetal Stethoscope				
Non-invasive Baumanometer (wall mounted/ portable)				
Adult, large cuffs (3) for Baumanometer				
Paediatric cuffs for Baumanometer				
Diagnostic sets -including ophthalmic pieces (wall mounted or portable)				
Peak flow meter				
Patella hammer				
Tape measure				
Clinical thermometers				
Ceiling mounted or portable - examination lamp				
Adult clinical scale up to 150 kg				
Baby scale				
Bassinet with trolley and mattress				
Blood glucometer				
HB meter				
Height measure				
Urine specimen jars				
CTG Machine (cardiotocographic) OR Doppler foetal monitor				
Incubator Transport				
Infant warmer: radiant				
Suction Unit Mobile Electrical 2x 2lit Bottle				
Bowl Lotion S/Steel 150mm				
Rescue scissors				
Autoclave Stand alone (mobile) Approx 100 lit				
Tray Instruments washing with lid 183mm x 140 x 17 mm				
Total				
Score (Total ÷)				

CHECKLIST FORELEMENT 235: Sterile obstetric delivery packs are available

Use the checklist below to check whether there are emergency sterile obstetric packs available

Scoring - in column for score mark as follows:

Check – If the facility does not have a MOU, assess in the 8 hour service

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

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

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

CHECKLIST FOR ELEMENT 236: Emergency trolley in the MOU is stocked with medicines, medical supplies and equipment

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

Scoring –in column for score mark as follows:

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

Y (Yes) = available and functional or within expiry; **N** (No) = not available or not functional or expired; **NA** = as indicated and if the facility does not have a MOU

NOTE:

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

Item	Score
EQUIPMENT FOR ALL FACILITIES (with and without a permanently appointed doctor)	
Manual bag valve mask/ manual resuscitator OR self-inflating bag with compatible masks for adults	
Manual bag valve mask/ manual resuscitator OR self-inflating bag with compatible masks for paediatric	
Simple face mask for oxygen, paediatric	
Simple face mask for oxygen for adults	
Automatic External Defibrillator (AED) OR ECG monitor and defibrillator	
Defibrillator pads for AED OR Electrodes for ECG monitor and defibrillator	
Conductive gel (NA if the facility uses an AED)	
Intravenous cannula 18g green and appropriate strapping	
Intravenous cannula 20g pink and appropriate strapping	
Intravenous cannula 22g blue and appropriate strapping	
Intravenous cannula 24g yellow and appropriate strapping	
Admin set 20 drops/ml 1.8m /pack	
Admin set paed 60 drops/ml 1.8m /pack	
Laryngeal masks (supraglottic airways): (a minimum of four different sizes that accommodate both adult and paediatric users)	
Cardiac arrest board	

Strapping to secure Intravenous cannulae	
Oropharyngeal airways (Guedel) size 00	
Oropharyngeal airways (Guedel) size 0	
Oropharyngeal airways (Guedel) size 1	
Oropharyngeal airways (Guedel) size 2	
Oropharyngeal airways (Guedel) size 3	
Oropharyngeal airways (Guedel) size 4	
Oropharyngeal airways (Guedel) size 5	
Functional electric powered OR manual suction devices	
Suction catheters: sizes 8F	
Suction catheters: sizes 10F	
Suction catheters: sizes 12F	
Suction catheters: sizes 14F	
Rescue scissors (to cut clothing)	
Pulse oximeter with adult & paediatric probes	
Nebuliser OR face mask with nebuliser chamber for adult	
Nebuliser OR face mask with nebuliser chamber for paediatric	
EQUIPMENT FOR FACILITIES WITH A PERMANENT APPOINTED DOCTOR	
Laryngoscope handle with functional batteries	
Adult curved blades for laryngoscope size 2	
Adult curved blades for laryngoscope size 3	
Adult curved blades for laryngoscope size 4	
Paediatric laryngoscope handle	
Paediatric straight blades for laryngoscope size 00	
Paediatric straight blades for laryngoscope size 0	
Paediatric straight blades for laryngoscope size 1	
Spare bulbs for laryngoscope (NA if the laryngoscope has a built in bulb)	
Spare batteries for laryngoscope handle	
Endotracheal tubes – uncuffed size 2.5mm	
Endotracheal tubes –uncuffed size 3.0mm	
Endotracheal tubes – uncuffed size 3.5mm	
Endotracheal tubes – uncuffed size 4mm	
Endotracheal tubes –uncuffed size 4.5mm	
Endotracheal tubes – cuffed size 3.0mm	
Endotracheal tubes – cuffed size 4.0mm	
Endotracheal tubes – cuffed size 5.0mm	
Endotracheal tubes – cuffed size 6.0mm	
Endotracheal tubes – cuffed size 7.0mm	
Endotracheal tubes – cuffed size 8.0mm	
Tape to hold tie endotracheal tube in place	
Adult-size introducer, intubating stylet or bougie for endotracheal tubes	

Paediatric size introducer, intubating stylet or bougie for endotracheal tubes	
Magill's forceps (adult)	
Magill's forceps (paediatric)	
Lubricating gel	
Emergency medicines (also check expiry dates) – APPLICABLE TO ALL FACILITIES	
Activated Charcoal	
Adrenaline 1mg/ml (Epinephrine) 1ml ampoule	
Amlodipine 5mg OR 10mg tablets	
Aspirin 100mg OR 300mg tablets	
Atropine 0.5mg OR 1mg ampoule	
Calcium gluconate 10% 10ml ampoule	
Furosemide 20mg OR 10mg/2ml ampoule	
Hydrocortisone 100mg/ml OR 200mg/2ml vial	
Insulin, short acting (stored in the medicine fridge) vial	
Ipratropium 0.25mg/2ml OR 0.5mg/2ml unit dose vial for nebulisation	
Lidocaine/Lignocaine IM 1% OR 2% 20ml vial	
Magnesium sulphate 50%, 1g/2ml ampoule (minimum of 14 ampoules required for one treatment course)	
Midazolam (1mg/ml 5 ml ampoule OR 5mg/ml 3ml ampoule) OR Diazepam 5mg/ml 2ml ampoule	
Nifedipine 5mg/10mg capsules	
Prednisone 5 mg tablets	
Promethazine 25mg/2ml ampoule OR Promethazine 25mg/1ml ampoule	
Short-acting sublingual nitrates e.g. glyceryl trinitrate SL OR isosorbide dinitrate sublingual, 5mg tablets	
Salbutamol 0.5% 20ml nebulising solution OR 2.5mg/2.5ml OR 5mg/2.5ml Unit dose vial for nebulisation OR Salbutamol 100 mcg MDI OR Fenoterol 1.25mg/2ml	
Thiamine 100mg/ml 10ml vial	
Water for injection	
Oxytocin 5 OR 10IU/ml AND Ergometrine 0.5mg OR oxytocin/ergometrine 5U/0,5	
IV Solutions	
50% dextrose (20ml ampoule or 50ml bag) OR 10% dextrose 1L solution	
Pediatric solutions e.g. ½ strength Darrows (200ml or 500ml) solution AND neonatalyte 200ml solution	
Sodium Chloride 0.9% solution 1L solution	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 237: Essential equipment is available and functioning in the TOP and MMC procedure room

Use the checklist below to check whether essential equipment is available and functional in the TOP and MMC procedure room

Scoring - in column for score mark as follows:

Randomly select the areas as indicated in the TOP and MMC

Y (Yes) = available, **N** (No) = not available, **NA** (not applicable) = service not delivered

Item	Score	
	TOP	MMC
Stethoscope		
Non-invasive Baumanometer (wall mounted/ portable)		
Adult and large cuffs (2) for Baumanometer		
Diagnostic sets -including ophthalmic pieces (wall mounted or portable)		
Tape measure		
Clinical thermometers		
Blood glucometer		
Adult clinical scale up to 150 kg		
HB meter		
Height measure		
Freezer for products of conception and foreskins		
Gynaecology examination couch with stirrups		
Tilting examination couch		
Wall mounted or portable angle poise style examination lamp		
Total		
Total maximum possible score (sum of all scores minus those marked NA)		
Score (Total ÷ Total maximum possible score)		

AREA	Score	Maximum possible score
TOP		
MMC		
Total		
Total maximum possible score (sum of all scores minus those marked NA)	%	
Score (Total ÷ Total maximum possible score)		

CHECKLIST FOR ELEMENT 238: Functional oxygen cylinders with a pressure gauge is available

Use the checklist below to check whether there are oxygen cylinders with pressure gauge available and functional in the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = present, **N** (No) = not present, **NA** (not applicable) = if the facility does not have the service area

Area	Score
8 hour service area	
24 Hour Emergency unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 239: Oxygen cylinders are filled above the minimum level

Use the checklist below to check whether the oxygen cylinders with pressure gauge is filled in the areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = present, **N** (No) = not present, **NA** (not applicable) = if the facility does not have the service area

Area	Score
8 hour service area	
24 Hour Emergency unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 241: Up to date asset register available

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

Scoring - in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 245: Facility has a functional back-up electricity supply available in designated areas

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

Scoring - in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (Not Applicable) = if the facility does not have the service area

Area	Score
Back-up electricity supply is maintained in accordance with the manufacturer's instructions (check service records)*	
Back-up electricity supply is tested for functionality in accordance with the manufacturer's instructions*	
24 Hour Emergency Unit/Resuscitation room is connected to the back-up electricity supply	
MOU is connected to the back-up electricity supply	
Pharmacy is connected to the back-up electricity supply (At a minimum the vaccine and medicine fridge must be connected to the back-up supply)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

* The manufacturer's instructions must be available, as well as maintenance records indicating that maintenance has been carried out in accordance with the manufacturer's instructions. In cases where the manufacturer's instructions are not available, a guiding document developed by the health establishment's engineering/maintenance unit must be available.

CHECKLIST FOR ELEMENT 247: There is a functional telephone in the facility in designated areas

Use the checklist below to check whether there is a functional telephone in the services areas as indicated

Scoring - in column for score mark as follows:

Y (Yes) = present, **N** (No) = not present, **NA** (not applicable) = if the facility does not have the service area

Area	Score
8 hour service area	
24 Hour Emergency unit	
MOU	
Pharmacy/dispensary	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 259: Staff members demonstrate that incoming policies/guidelines/SOPs/ notices have been read and are understood by appending their signatures on such policies/guidelines/SOPs/ notices

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

Scoring – in column for score mark as follows:

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

Y (Yes) = signed; **N** (No) = did not sign; **NA** (not applicable) = if the facility does not provide the service

Item	Score
ICSM compliant package of clinical guidelines	
Adult Primary Care guide (APC) – 2019 or Practical Approach to Care Kit (PACK), 2019	
Integrated Management of Childhood Illness Chart Booklet, 2019	
Standard Treatment Guidelines and Essential Medicines List for Primary Health Care, 2020	
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Adults, 2019	
Standard Treatment Guidelines and Essential Medicines List for Hospital Level, Paediatrics, 2017	
Newborn Care Charts Management of Sick and Small Newborns in Hospital SSN Version 1 - 2014	
Child, Youth and School Health	
South African Infant and Young Child feeding Policy (2013) (updated with circular in 2017)	
Non-Communicable diseases	
National User Guide on the Prevention and Treatment of Hypertension in Adults at PHC Level (2021)	
HIV	
Antiretroviral Treatment Clinical Guidelines for the Management of HIV in Adults, Pregnancy, Adolescents, Children, Infants and Neonates (2019)	
National HIV Testing Services Policy (2016)	
National Medical Male Circumcision Guidelines (2016)	
Standard Operating Procedures for Adherence Guidelines for HIV, TB and NCD (2020) AGL SOPs*	
National guidelines for the management of Viral Hepatitis (2019)	
TB	
National Tuberculosis Management Guidelines (2014)	
National Guidelines for the Management of Tuberculosis in Children (2013)	
Management of Rifampicin Resistance - A Clinical Reference Guide (2019)	
Women, Maternal and Reproductive Health	
Guidelines for Maternity Care in South Africa (2016)	

Cervical Cancer Prevention and Control Policy (2017)	
Clinical Guidelines for Breast Cancer Control and Management (2019)	
National Contraceptives clinical guidelines (2019)	
National Consolidated guidelines for the management of HIV in adults, adolescents, children and infants and prevention of mother-to-child transmission (2020)	
Maternal, Perinatal and Neonatal health policy (2021)	
Clinic Guideline for Genetics Services (2021)	
National Clinical Guidelines for Safe Conception and Infertility (2021)	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 260: 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) = if present, **N** (No) = if not present

Item	Score
Formal Appointment	
Signed appointment letters from Office of the MEC or delegated person	
Provincial/district constitution adopted and signed	
Provincial/district Code of conduct adopted and signed	
Training	
Attendance register for orientation and training conducted for the current term	
Services Planning, Monitoring, Evaluation and meetings	
List of community needs as determined by the Clinic/CHC Committee in past 12 months	
Agendas indicating that community needs and progress against operation plan was discussed at least twice in the past 12 months	
Signed minutes indicating that the Clinic/CHC Committee was informed on the progress against the facility's operational plan at least twice in the past 12 months	
Current year plan indicating the scheduled meetings (at least two within the next 12 months)	
Attendance registers shows that meetings held formed a quorum	
Minutes of Clinic/CHC Committee meetings indicate that statistical data on population health indicators are discussed	
Minutes of Clinic/CHC Committee meetings indicate that the clinic's human resources situation is discussed	
Minutes of Clinic/CHC Committee meetings indicate that situation relating to equipment and, supplies is discussed	
Complaints, Compliments and Suggestion Management (check record of the past 6 months)	
Minutes indicate that the management of complaints, compliments and suggestions are discussed at Clinic/CHC Committee meetings	
Accountability and Communication	
Contact details of Clinic/CHC Committee members visibly displayed in reception area	
Total	
Score (Total ÷ 20) x 100	

CHECKLIST FOR ELEMENT 266: Register for emergency transport requests is available

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

Scoring – in column for score mark as follows:

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (Not applicable) = the facility does not have the service areas

Item	Score 8 hour service	Score 24 Hour Emergency unit	Score MOU
Date of the request			
Details (name, surname, date of birth/age/ID number) of the user for whom the request was made.			
Reason for referral			
Time the ambulance requested			
Time the ambulance arrived			
Total			
Total maximum possible score (sum of all scores minus those marked NA)			
Score (Total ÷ Total maximum possible score)			

CHECKLIST FOR ELEMENT 268: Emergency contact numbers (fire, police, ambulance) are displayed in areas where telephones are available

Use the checklist below to check whether the emergency contact numbers are where telephones as available

Scoring – in column for score mark as follows:

Y (Yes) = available, **N** (No) = not available; **NA** (Not Applicable) = the facility does not have the service areas

Area	Score
Manager's office at 8 hour service	
24 hour Emergency Unit	
MOU	
Total	
Total maximum possible score (sum of all scores minus those marked NA)	
Score (Total ÷ Total maximum possible score)	

CHECKLIST FOR ELEMENT 269: Protocol/SOP available for the handover from facility to EMS

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 271: District referral SOP is available

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

Scoring – in column for score mark as follows:

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

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

CHECKLIST FOR ELEMENT 272: There is a referral register that records referred patients

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

Scoring – in column for score mark as follows:

Check – Use the referral register

Y (Yes) = compliant; **N** (No) = not compliant; **NA** (Not applicable) = the facility does not have the service areas

Item	Score 8 hour service	24 hour emergency unit	MOU
Name of referred patient			
Name of referring facility			
Name of referring health care practitioner			
Name of receiving facility			
Reason for referral			
Date referred			
Totals			
Total maximum possible scores (sum of all scores minus those marked NA)			
Scores (Totals ÷ Total maximum possible scores)			

CHECKLIST FOR MEASURE 273: Copy of referral form available in the patient record

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

Scoring – in column for score mark as follows:

Check – Use the referral register and randomly select two records of patients that were referred in each area as indicated.

Y (Yes) = compliant; **N** (No) = not compliant, **NA** (Not Applicable) = the facility does not have the service area.

	8 Hour Service		24 Hour Emergency Unit		MOU	
Item on referral form	Score Record 1	Score Record 2	Score Record 1	Score Record 2	Score Record 1	Score Record 2
Name of patient						
Name of referring facility						
Name of referring health care practitioner						
Name of receiving facility						
Summary of clinical details*						
Total						
Total maximum possible score (sum of all scores minus those marked NA)						
Score (Total ÷ Total maximum possible score)						

* This will include but not limited to: Presenting complaints, Examination and findings, Investigations conducted, Diagnosis and treatment provided, List of all medicine currently being taken by the patient and any special equipment required'.