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COVID-19 Assessment Centers Inspection Checklist- Final

Name of the Facility:			
Date of Inspection:	/	/	

Ref.	Description	Yes	No	N/A	Remarks
5	STANDARD ONE: REGISTRATION AND LICENSURE PROCEDU	JRES			
5.3.	The HF should develop the following Standard Operating				
5.5.	Procedures (SOPs); but not limited to:				
5.3.1.	Patient Identification Policy.				
5.3.2.	Patient acceptance criteria. (as mentioned in Standard Four)				
5.3.3.	Patient assessment and admission.				
5.3.4.	Patient education and Informed consent.				
5.3.5.	Patient health record policy.				
5.3.6.	HASANA data entry procedure.				
5.3.7.	COVID-19 sample collection and transfer procedures.				
5.3.8.	Result reporting policy.				
5.3.9.	Infection control measures and hazardous waste management				
5.5.9.	procedures.				
5.3.10.	Incident reporting policy.				
5.3.11.	Patient privacy policy.				
5.3.12.	Personal Protective Equipment (PPE) management policy.				
5.3.13.	Quality and Patient Safety Plan.				
5.3.14.	Medication management.				
5.3.15.	Emergency action plan.				
5.3.16.	Patient discharge/transfer.				
	The HF should maintain a charter of patients' rights and				
5.5.	responsibilities posted at the entrance of the premise in two				
	languages (Arabic and English).				

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6	STANDARD TWO: HEALTH FACILITY REQUIREMENTS	
	COVID-19 Assessment Centres should have a direct external	
6.2.	access not requiring patients to travel through a hospital,	
	healthcare facility or a community area.	
	Careful consideration should be given to ensure patients	
6.2.1.	presenting to the facility do not have contact with other	
	vulnerable patients.	
	COVID-19 Assessment Centres should have a short stay ward	
6.3.	for patients requiring care prior to referral to the next level of	
	care.	
6.4.	The HF should have an accessible website that offers	
0.4.	instructions to patients prior to and post visiting the facility.	
6.5.	The HF should have a hotline line number that offers 24/7	
0.5.	support services to suspected patients.	
	The HF should install and operate equipment required for	
6.7.	provision of the proposed services in accordance to the	
	manufacturer's specifications.	
6.8.	The HF should ensure easy access and mobility within the	
0.0.	treatment areas for all patient groups.	
6.9.	The HF design shall provide assurance of patients and staff	
0.9.	safety.	
	The HF shall ensure it has in place adequate lighting and	
6.11.	utilities, including temperature controls, water taps, medical	
0.11.	gases, sinks and drains, lighting, electrical outlets and	
	communications.	
10	STANDARD SIX: INFECTION CONTROL MEASURES	
	The facility should ensure appropriate donning and doffing	
10.5	areas for the staff as deemed necessary to ensure staff and	
	patient safety.	
10.6	Adequate infection control supplies are provided, including	
10.0	biohazard containers and supplies for hand hygiene.	

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10.7	HF should follow several precautions, including but not limited		
10.7	to:		
10.7.1	Universal masking policy for all healthcare workers and patients.		
	The HF should ensure appropriate patient journey through the		
10.8	facility is established minimizing encounters with staff and other		
	patients.		
13	STANDARD NINE: WASTE MANAGEMENT AND DISPOSAL		
13.2	Facilities should have a designated area for disposal, managing		
13.2	and monitoring of waste materials generated from the facility.		

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