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COVID-19 Fever Clinic Inspection Checklist- Final

Name of the Facility:			
Date of Inspection:	/	/	

Ref.	Description		No	N/A	Remarks
5	STANDARD ONE: REGISTRATION AND LICENSURE PROCED	URES			
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		
	Fever clinics should have a direct external access not requiring		
6.2.	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.		
6.3.	The HF should have an accessible website that offers		
0.5.	instructions to patients prior to and post visiting the facility.		
6.4.	The HF should have a hotline line number that offers 24/7		
0.4.	support services to suspected patients.		
	The HF should install and operate equipment required for		
6.8.	provision of the proposed services in accordance to the		
	manufacturer's specifications.		
6.9.	The HF should ensure easy access and mobility within the		
0.5.	treatment areas for all patient groups.		
6.10.	The HF design shall provide assurance of patients and staff		
0.20.	safety.		
	The HF shall ensure it has in place adequate lighting and		
6.12.	utilities, including temperature controls, water taps, medical		
0.22.	gases, sinks and drains, lighting, electrical outlets and		
	communications.		
9	STANDARD FIVE: INFECTION CONTROL MEASURES		
	The facility should ensure appropriate donning and doffing		
9.5.	areas for the staff as deemed necessary to ensure staff and		
	patient safety.		
9.6.	Adequate infection control supplies are provided, including		
5.0.	biohazard containers and supplies for hand hygiene.		
9.7.	HF should follow several precautions, including but not limited		
5.1.	to:		
9.7.1.	Universal masking policy for all healthcare workers and		

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	patients.		
9.8.	The HF shall have in place dedicated zones as detailed below:		
	Green Zone: Outside the facility where the security personnel		
	and liaison officers from the relevant authorities are present to		
9.8.1.	provide general services to the patients. No Personal		
	Protective Equipment (PPE) are required in the green zone.		
	Protective mask must be worn.		
	Yellow Zone: The reception area, stairs, elevators, corridors		
	between rooms, service rooms (laundry and kitchens), and staff		
9.8.2.	work locations where they operate to provide daily general		
	services for patients. Only protective mask and gloves are		
	required in the yellow zone.		
	Orange Zone: Registration/Triage area, waiting areas and		
	sample collection area for suspected COVID-19 patients -		
9.8.3.	asymptomatic to mildly symptomatic. While being there staff		
	should have on a protective mask, gloves, protective gown, and		
	eye shield.		
	Red Zone: This is the treatment rooms for confirmed and		
	highly suspected COVID-19 patients -with moderate to severe		
	symptoms. While being there, a protective mask, gloves,		
9.8.4.	protective gown, and eye shield should be worn. Doffing of PPE		
3.0.1.	should be arranged next to this zone. A maximum of one		
	patient is allowed per room, exception to be given to members		
	of the same family, especially if they have elderly or children,		
	subject the room can accommodate the family members.		
	The HF should ensure appropriate patient journey through the		
9.10.	facility is established minimizing encounters with staff and		
	other patients.		
12	STANDARD EIGHT: WASTE MANAGEMENT AND DISPOSAL		
12.2	Facilities should have a designated area for disposal, managing		
12.2	and monitoring of waste materials generated from the facility.		

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