STANDARDS OF PRIVATE COMMUNITY MENTAL HEALTH CENTRE

Name of Facility: _____

Address: _____

_____

If comply tick (√) Yes, if not tick (√) No. Please add comment for any explanation.

	ITEM	YES	NO	COMMENT
	INFRASTRUCTURE & EQUIPMENT			
	Location			
R.50(1)	Free from undue noise (*no disturbance to patients & staff*)			
R.50(2)	Not exposed to excessive smoke, foul odours or dust.			
R.339(5)	Physically separated from other facility and service (functional zoning)			
R.51	Construction prevents entrance and harbourage of rodents and insects			
	Signs and labels			
R.60	Proper signage and labelling system			
S.108	Not to mislead the public on the type or nature of facilities or services			
	Patient transport			
R.121(1)	Arrangement for patient to be transported to other healthcare facility or service for consultation and medical or dental treatment or investigation as may be necessary.			
R.121(2)	If intends to provide a service whereby ill persons can be transported, it shall have ambulances which must be appropriately identified, properly equipped and meet all applicable requirements under Chapter 3 of Part XVII of the regulation.			
R.59(6)	**Entrance and exit** (no obstruction)			
	Security & safety			
R.34, P.U.(A)206	Security system provided in an unobtrusive manner and easily supervised by staff			
	Door			
Policy	Size ≥0.9m wide (*for patient use*)			
Policy	Patients' toilet and bathroom door ≥ 0.7m wide			
R.54(4)	All 2-way swing doors shall have vision panel			
R.54(6)	All doors except closet doors shall not swing into the corridors			

	ITEM	YES	NO	COMMENT
R.32(1), P.U.(A)206	Made of safe and non-hazardous material			
R.32(2), P.U.(A)206	Able to be locked and accessible by the staff in an emergency			
R.78	**Area for stretchers and wheelchairs**			
	Corridor			
R.53(1), Policy	Size ≥ 1.0m wide			
R.64(1)	No beds shall be placed in corridors			
	Floor and wall			
R.56(1), 57(1)	Easy to wash and clean, non-skid for floor & non-toxic (*safe*)			
	Ceiling			
R.58(1)(a)	Height for air-conditioned room ≥ 2.4m			
R.58(1)(b)	Height for non-conditioned room ≥ 3.0m			
R.58(4)	Non- toxic (*safe*)			
	Window and ventilation			
R.89(1)	All rooms and areas adequately ventilated			
R.89(6)	Ventilation system to avoid contaminated air flow to patient, food preparation, clean or sterile areas			
R.33(a), P.U.(A)206	Panels made of safe and non-hazardous material			
R.33 P.U.(A)206	Windows have restricted degree of opening and use aesthetic and non-prison-like grilles			
	Electrical supply			
R.83	Appropriate type, quantity, location and height of electricalsockets and all sockets shall be of grounding type.			
R.84(1)(b)	Adequate number of electrical sockets at the head of eachbed in patient rooms			
R.84(3)	No adaptors, extension cords or junction boxes			
R.85	Adequate lighting fixtures for illumination in all areas			
R.87(1),(2)	Emergency power supply for the illumination (*exit signs, nurses' station, corridor etc.*) or portable emergency lights			
R.122(2)	Emergency lights are kept in good repair and operating condition			
R.36, P.U.(A)206	Provide recessed lights in all patient care areas or to provide SOP to ensure patient's safety			
	Plumbing			
R.81(1)	Designed & installed, to be easily cleaned & maintained			

	ITEM	YES	NO	COMMENT
R.81(4)	Installation to prevent the possibility of cross connection between safe and unsafe water supplies or back siphonage			
	Water supply			
R.82(1),(2)	Safe and sufficient water supply according to standards approved by relevant authority			
R.82(3)	Water tank with material approved by relevant authority and properly maintained			
	Available and displayed in a conspicuous area			
S.23	A copy of License (for renewal of License)			
R. 11(1)	Organizational chart			
R.36	Duty roster			
R.229(1)	Emergency call information (with contact number)			
R.24(1)(a),(2)	Policy statement on staff identification			
R.24(1)(b),(2)	Policy statement on billing procedures			
R.24(1)(c),(2)	Policy statement on valid consent-requirement & manner			
R.24(1)(d),(2), P.U.(A)138 R.43-45, P.U.(A)206	Policy statement on patient's right for information on medical treatment and care & grievance procedure			
R.24(1)(d),(2)	Policy statement on patient's right for medical report			
R.46, P.U.(A)206	**Documents to be available for reference (by patients,relatives or friends)**			
4th Schedule,(1)	Mental Health Act 2001			
(2)	Mental Health Regulation 2010			
(3)	National Mental Health Policy			
(4)	Patient's information sheet on statement of patient's rights			
	Nurse station/Registration counter			
Policy	Located within good visibility of the unit entrance and patient recreational areas			
R.73(4) & 68(3)	Clinical hand washing facilities (*at or nearby*) and hands-free taps (*for healthcare professional*)			
R.73 (1)(b) & (c), R.120	Communication system available within & with other facilities in electronic system			
R.73(2)	Medication preparation area (*at or nearby*) (if applicable)			
R.73(3)	Toilet with hand washing facility for staff (*nearby*)			
R.43, P.U.(A)138	**Appropriate patients' medical record system facilities**			

	ITEM	YES	NO	COMMENT
	Medicine preparation area/ Cabinet			
R.74(1)(a)	Locked cabinet for dangerous drug (if available)			
R.74(2)	Refrigerator with thermometer and exclusively for pharmaceutical storage (if available)			
R.20, Policy	**Resuscitation facilities/Emergency box**			
	Ambu bag			
	Intravenous therapy: Drip set dan branula, Normal Saline, D50%			
	Drugs (as specified by the PIC)			
	Nourishment station or pantry			
R.80(1)	Sink with hand washing facilities			
R.80(1)	Serving equipment			
R.80(1)	Refrigerator			
R.80(1)	Storage cabinet			
R.80(2)	Source and preparation of ice used for patient service or treatment shall be clean and hygienic			
Policy	**Clean utility room/Cabinet**			
Policy	**Janitor's closet/Area**			
R.77(1)(a)	Sink (*preferably with a floor receptor*) - nearby			
R.77(1)(b)	Hook strip for mop handle			
R.77(1)(c)	Shelf for cleaning material			
R.77(1)(d)	Waste receptacle with impervious liner			
R.77(2)	Adequate space for mop, bucket & cleaning equipment			
	Housekeeping			
R.93	Housekeeping services properly operated & maintained to provide a pleasant, safe and sanitary environment			
R.96	Availability & properly maintained equipment for cleaning			
R.98	Cleaning compound and hazardous substance are labelled and stored in safe places			
R.100	No dry dusting and sweeping			
	Consultation rooms			
Policy	Door size ≥0.9m			
R.337(1)(a)	Dimension ≥ 2.4m			

	ITEM	YES	NO	COMMENT
R.337(1)(a)	Area ≥ 8m²			
R.337(1)(b)(i)	Hand washing facilities			
R.337(1)(b)(iii)	Storage of supplies and equipment			
	Examination/Treatment/Therapy/Counseling Room			
R.54, Policy	Door size ≥ 0.9m			
R.58	Adequate ceiling height (air condition ≥ 2.4m, if not ≥ 3.0m)			
R. 337(2)(a), Policy	Dimension ≥ 2.4m			
R. 337(2)(a), Policy	Area ≥ 8.0m²			
R.337(2)(b)(i)	Clinical sink			
R.337(2)(b)(iii)	Storage for linen, supplies and equipment			
R.79(1)(b)(iv)	Examination & treatment couch			
R.49(3)(c)(v)	Contaminated equipment shall not be used for patients			
	Patient room / ward/ care area			
	Total number of room (single, double etc.)			
	Total number of bed according to the rooms			
R.62(1), P.U.(A)138 R.12(d), P.U.(A)206	Separated for male and female (≥ 12year-old)			
R.62(2), P.U.(A)138 R.12(d) & 18 P.U.(A)206	Separated for pediatrics (<12year-old)			
R.54, Policy	Doors size ≥0.9m & not swing into the corridors			
	Single-Bedded Room:			
R.63(1), Policy	Room dimension ≥ 2.4m			
R.63(1), Policy	Area for single bedded room ≥ 8.0m²			
	Multiple-Bedded Room:			
R.63(2), Policy	Clear space between beds: 1.0m			
R.66(2) R.42(1), P.U.(A) 206	Separate locker for each patient			
R.354(2)(c)	Adequate space for movement of beds in and out of the room or ward			
R.64(1), P.U.(A)138	No beds shall be placed in corridors or other than patient room areas except in case of emergency			

	ITEM	YES	NO	COMMENT
	Toilet facilities			
R.54(2) Policy	Clear opening for patients' toilet door ≥ 0.7m			
(a)	Incombustible waste-paper receptacle with removable impervious liner			
(d)	Hand washing facilities			
R.56(2)	No carpet			
P.U.(A)138	**Overall findings**			
S.16(1)(a)	Complies with the building layout plan, design construction and specification to which the approval to establish or maintain relates			
S.16(1)(b)	Equipment, apparatus, instrument, material, article, sample or substance or any other thing found in the premises, or any matter connected therewith			
R.122(2)	Infrastructure and all equipment are kept in good repair and operating condition			
	STANDARD & REQUIREMENT (DOCUMENTATION)			
	Organization & Management			
S.32, Act 586, R.12, P.U.(A)138 **Policy**	Person in charge (PIC) (Qualified, trained & experienced) Psychiatrist (Private/Government) **Notes:** ▪ Name & address of PCMHC stated at place of practice in APC ▪ Government Specialist to get permission from Head of Department or Hospital Director ▪ To provide SOP for emergency care plan			
R.16(2)(a) &(b), R.39(2)&(3) P.U.(A)206	Multidisciplinary team consisting of: ▪ a psychiatrist or RMP ▪ a visiting clinical psychologist or counselor ▪ a visiting occupational therapist (if applicable) ▪ a visiting physiotherapist (if providing services for geriatric patients) ▪ SRN or RMA			
R.116(1)	Valid contract or arrangement with commercial laundry services *(in house/ outsourced) (if applicable)*			
R.263(c)	Food Handling Certificate for premise with dietary service *(if applicable)*			
	Valid contract or arrangement on pest control			
S.2, Act 615	**Scope of services**			
S.37(3) R.40(1), P.U.(A) 206	Patient admission not more than 24 hours			
R.40(2), P.U.(A) 206	Any person posing a danger to himself or safety of others shall not be lodged			
R.40(4), P.U.(A) 206	No physical means of restrains or seclusion shall be used			
	WRITTEN POLICIES AND STANDARD OPERATING PROCEDURE (SOP) ***All SOP must be verified by Psychiatrist (private/government)**			
	(A) ON INFECTION CONTROL			
	(B) ON POLICY STATEMENT			

	ITEM	YES	NO	COMMENT
	(C) ON ORDERS FOR MEDICATION & DOCUMENTATION			
	(D) ON EMERGENCY MANAGEMENT			
	(E) ON SAFETY AND PRIVACY OF PATIENT			
	Overall findings			
R401, R414. (1)	All the written policies and procedure should be validated by person in charge (Psychiatrist) and all services should carried out as per SOP			
S.16(1)(c), Act586	Complies with standards or requirements: books, records, policies,standard operating procedures, clinical practice guidelines or the management or related matters			

Comments:			
Recommendation:			
Prepared by: **(Name & Stamp)**		**Verified by:** **(Name & Stamp)**	
Date :		**Date:**	