STANDARD FOR PERITONEAL DIALYSIS UNIT

Name of Facility:

Address:

***Notes:**

The Peritoneal Dialysis (PD) Unit can be either as
- a part of hospital; or
- an ambulatory care centre (with or without other ambulatory care services); or
- mixed facility (haemodialysis centre & ambulatory care centre)

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

PROVISION	ITEM	YES	NO	COMMENT
	STANDARD & REQUIREMENT (DOCUMENTATION)			
	Organization & Management			
S.2	Person responsible (*for body corporate only*)			
S32, R.12 **6.2, 6.3 National Peritoneal Quality Standard 2020 (NPQS)**	Person in charge (Qualified, trained & experienced) - a nephrologist who is registered with the National Specialist Register			
7.1 & 7.3 NPQS	Frequency of monitoring: **New patient:** 2 weeks after completion of PD training and then 1 month. **Long-term monitoring:** at least 3 monthly			
	Documentation in patient's record			
S.2	Board of management (*authority & responsibility*)			
R.49(1)	Infection control committee			
R.11(2)	Plan of organization in writing (*specify the authority, responsibility and functions of each category of staff)*			
R.124(1)	Establishment of nursing department if ≥ 6 SRN			
R.124(2)&(3)	Nursing departmental plan (*specify the authority, responsibility and functions of each category of staff)*			
R.130(1)(a)	RMA organizational plan (*authority, accountability & communication*)			
S.2.	**Scope of services**			
R.305(1)	Treatment for certified stable end stage renal failure patient by RMP			
R.305(2)	Treatment for each patient ≤ 23 Hours (*ACC*)			

PROVISION	ITEM	YES	NO	COMMENT
	Personnel			
R.13(1)	All healthcare professionals are registered with proper qualification, training & experience - Person in charge: Nephrologist - Staff nurse/Medical Assisstant			
R. 25(b)	Name and professional status of staff providing care			
R21(1)(a)	Written contract with RMP			
R.21(1)(i), 14(1)(a)	Professional care by RMP (*list with current APC*)			
6.4.3 NPQS	Ratio person to perform to patient; (1 privileged registered post basic renal certificate/advanced diploma/equivalent nurse: 25 patients) • Staff nurse with privileged registered post basic renal certificate/advanced diploma/equivalent nurse (name & qualification)			
303(4)	Adequate staff based on patient workload (*at least 3 months trained in dialysis treatment*)*			
R.129(3)	1 personal care aide : 14 patients (Dialysis Assistants)			
R.129(1)	Personal care aide may provide care only as specified in Seventh Schedule			
R.129(2)	Personal care aide at all times supervised by SRN.			
S.2	Other allied health professional (*if available*)			
R.17(1), (4)	List of volunteers (qualification/ training/ experience)			
R.130(2)(a), (b)	Qualification of RMA appropriate to patient care			
	RMA with renal post-basic qualification (name & qualification)			
R.131	RMA at all times supervised by RMP			
R49(4)	Appointed, trained and authorized infection control staff			
R.39(1)(a)	Patient relations officer with job description			
R.93(2)	Housekeeping supervisor			
R.123(1)&(2)	Maintenance supervisor			
S.16(1)(c)	**Policies and standard operating procedures**			
R.22	Relevant written policies, standards, procedures and guidelines are available and accessible to all personnel			
R.21(1)(j)	Policy on supervision & training for housekeeping staff			
R21(1)(g)	Policy on volunteers (if available)			
R.17(1)	Proper orientation, planning and supervision on volunteer programme for personal care duties (if available)			

PROVISION	ITEM	YES	NO	COMMENT
R.21(1)(b)	Procedure for patient admission, discharge and transfer*			
R.21(1)(c)	Procedure for patient registration, attendance and referral*			
R.317	Policy on patient selection*			
R.320(a)	Policy on patient management and transportation in case of complication on management*			
R.320(b)	Policy on patient management and transportation in case of seroconversion*			
R.320(c)	Policy on patient management and cost for transferring patients in case of centre required to be closed*			
R.38 – 41	Updated policy and procedure on grievance mechanism			
R.21(1)(h)	Policy on general maintenance			
R.21(1)(f), 49	Policy on Infection control*			
R21(1)(e)	Policy on maintenance of physical plant and equipment			
R21(1)(k)	Policy on transportation of lab specimen			
R.21(1)(d)	Policy on Incident reporting			
R.21 (2)(a)&(b)	Written policy available to all staff & review every 5 years			
S.16(1)(c)	**Clinical practice guidelines**			
R.22(1),(2)	In accordance to the facilities and services provided			
S.16(1)(c)	**Records, registers, returns and books**			
	Patient monitoring system (to review ≥ 3 records)			
	Number of patients			
R.42 – 46	**Appropriate patients' medical record** (refer 6th Schedule) (Patient identification, relevant clinical details, details on the procedures including consent form etc)			
R.14(1)(a)	Patient care or treatment under professional care by RMP			
R. 15(1)	Written orders for diagnostic procedure, medication or treatment by RMP			
R15(3)	Verbal order shall be immediately recorded by relevant staff and countersigned by RMP within 24hours			
R.47	Valid consent before any procedure shall be in writing			
R.43	Appropriate patients' medical record system facilities			
	Registers			
R. 34	Staff register			

PROVISION	ITEM	YES	NO	COMMENT
R. 35	Volunteer register (*if available*)			
R.13(3)	Temporary register for RMP with current APC			
R.30	Patient's medical record register (*record the movement*)			
R. 29	Admission and discharge register* The following particulars shall be entered into the patient's Admission and Discharge Register within 4 hours after the discharge: - The date of discharge - Diagnosis and status at discharge - If transferred, the reason for transfer Where a patient dies- - Enter time and cause of death under the outcome section			
	Statistical Returns			
R. 37(1)	Statistical returns (e-reporting) includes the following details: - Details of occupancy; - Statistical information of ICD-10 every 3 months; and - Other informations deemed necessary and required at anytime by DG.			
R.87(7)	Record of test on electrical generating system			
	Notification			
R.19(1)	**Record of incident reporting** *Shall be reported in writing to the DG or any other person authorised by DG the next working day after the incident occured or immediately after the premise has reasonable cause			
R.322(b)	**Seroconversion**			
	Any case? Please describe category			
	If yes, reported?			
	- Any respond and corrective action?Please describe			
R.322(c)	Any case as deemed necessary and required by DG			
S.67	**Assessable death**			
	Any case? Please describe category			
	If yes, reported?			
	- Any respond and corrective action? Please describe			

PROVISION	ITEM	YES	NO	COMMENT
R.322(a)	**Intradialytic death**			
	Any case? Please describe			
	If yes, reported?			
	- Any respond and corrective action?Please describe			
R.19(2)	6 monthly statistical return			
S. 74	**Program and activities on quality**			
S.74(1),(2)	Information on quality programme and activities (shall be furnished to DG as and when required by him)			
R.127(3)	Person in charge shall periodically evaluate of the adequacy in term of patient, nursing and personal care needs (with head of nursing)			
R.127(2)	Continuous evaluation plan of nursing & personal care			
R.132(2)	Continuous evaluation plan of medical assistant care			
S.72	Mortality assessment committee at facility level (optional)			
	Overall findings			
S.16(1)(c)	Complies with standards or requirements: books, records, policies, standard operating procedures, clinical practice guidelines or the management or related matters			
	INFRASTRUCTURE & EQUIPMENT			
	Location			
R.50(1)	Free from undue noise (*disturbance to patients & staff*)			
R.50(2)	Not exposed to excessive smoke, foul odours or dust.			
R.306	Avoid through traffic to any other service, diagnostic or administrative facility			
R.336(1)(b)	Avoid outpatient traffic through inpatient areas			
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			

PROVISION	ITEM	YES	NO	COMMENT
	Patient transport			
R.121(1)	Arrangement for patient transport			
R.121(2)	Ill patient shall be transported by properly equipped and staffed ambulance (*refer requirements for ambulance*)			
R.237(1)	Vehicle used to transport patients without pre-hospital or nursing care is exempted from ambulance requirements			
R.237(3)	Vehicle used both as transport and ambulances are required to comply with such requirements			
	Ramp			
R.52(6)(a)	Size ≥1.1m wide			
R.52(6)(a)	Landing ≥1.8m wide			
R.52(6)(b)	Non skid surface			
R.52(6)(c)	Handrails (*where necessary*)			
R.52(6)(d)	Guardrails (*where necessary*)			
R.52(6)(e)	Slope not exceeding 1:16			
R.52(6)(f)	Comply with Fire Services Department			
	Entrance and exit			
R.59(1)	Main entrance adjacent to lobby with minimum disturbance			
R.59(2)	Entrance designed for wheelchairs and stretchers			
	Door			
R.54(1)	Size (clear opening) ≥1.2m wide (*for patient care*)			
R.54(3)	Adequate size for large carts or bulk goods to pass through (*for entrance, store etc*)			
R.54(4)	All 2 way swing doors shall have vision panel			
R.54(5)	Exterior door - bottom clearance 0.6cm			
R.54(6)	All doors except closet doors shall not swing into the corridors			
R.78	**Area for stretchers and wheelchairs**			
	Stairway			
R.52(5)(a)	Size (clear opening) ≥1.1m wide			
R.52(5)(a)	Landing ≥1.8m wide			
R.52(5)(b)	Non-skid surface			

PROVISION	ITEM	YES	NO	COMMENT
R.52(5)(c)	Handrails (*both sides*)			
R.52(5)(d)	Guardrails (*where necessary*)			
R.52(5)(e)	Comply with Fire Services Department			
R.56(2)	No carpet			
	Elevator (Lift) * used or intended to be used for patient transportation			
R.52(3)(a)	Clear opening ≥ 1.2m			
R.52(3)(a)	Size (clear opening) ≥ 1.5m x 2.1m			
R.52(3)(a)	Capacity ≥ 1,500 kg			
R.52(4)	DOSH certification (CF)			
R.52(2)(b)	≥ 2 elevators (*if ≥ 60 chairs on other than ground floor*)			
R.52(2)(c)	≥ 3 elevators (*if ≥ 200 chairs on other than ground floor*)			
R.122(2)	Kept in good repair and operating condition			
	Corridor			
R.53(1)	Size (clear opening) ≥ 2.1m wide (*for dialysis treatment area may ≥ 1.0m)*			
R.64(1)	No beds or dialysis chairs shall be placed in corridors			
	Floor and wall			
R.56(1),57(1)	Easy to wash and clean & non skid (for floor)			
R.56(1),57(1)	Non-toxic (*safe*)			
	Ceiling			
R.58(1)(a)	Height for air-conditioned room ≥ 2.4m			
R.58(1)(b)	Height for non air-conditioned room ≥ 3.0m			
R.58(4)	Non- toxic (*safe*)			
	Window and ventilation			
R.89, 307(1)(h)	Appropriate and adequate ventilation (*window, duct or mechanical means*)			
R.89(2)	Adequate ventilation system to provide 10 ACH without recirculation in rooms/areas with excessive heat, moisture, odours & contaminants originate			
R.89(4)	Fresh air supply intakes away from any source of contaminants or odours			
R.89(5)	Air discharge exhaust located to avoid cross circulation to air supply intakes or windows			

PROVISION	ITEM	YES	NO	COMMENT
R.89(6)	Ventilation system to avoid contaminated air flow to patient, food preparation, clean or sterile areas			
R.89(7)	Air from rooms/areas likely to contain infectious micro-organisms or noxious gas shall be exhausted and not re-circulated through the normal air-conditioning system			
	Electrical supply			
R.83	Appropriate and grounding type of electrical sockets			
R.84(1)	Adequate number of electrical sockets			
R.84(3)	No adaptors, extension cords or junction boxes			
R.85	Adequate lighting fixtures for illumination in all areas			
R.87(1)	Emergency power supply for the essential systems, equipment, rooms or areas (*call system, alarm system, critical areas, etc*)			
R.87(1)&(2)	Emergency power supply for the illumination (*exit signs, nurses' station, corridor etc*)			
R.122(2)	Emergency lights are kept in good repair and operating condition			
	Available and displayed in a conspicuous area			
S.23	A copy of Licence (*for renewal of Licence*)			
R.11(1)	Organizational chart			
R.36	Duty roster			
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)	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 or medical report			
R.229(1)	Emergency call information (with contact number) - Fire and police department - RMP - Ambulance services - Hospitals within locality			
	Nurse station			
R.73(5)	1 station : 36 patients			
R.64(3)	Distance ≤ 24.4m from patients' rooms - Able to monitor all patients at one time			

PROVISION	ITEM	YES	NO	COMMENT
R.73(2)	Area for writing patients' records & charts (*at or nearby*)			
R.73(4)	**Hand washing facility** with: (*at or nearby*)			
R.68(1)	Soap, appliance and sanitary hand drying facilities			
R.68(3)	Hands-free taps			
R.73(1)(a)	Nurse call system from patients			
R.73 (1)(b) & (c), R.120	Communication system (*within & with other facilities*)			
R.122(2)	Call systems are kept in good repair and operating condition			
R.73(2)	Medication preparation room or area (*at or nearby*)			
R.73(3)	Toilet with hand washing facility for staff (*nearby*)			
R.43	**Appropriate patients' medical record system facilities**			
	Medicine preparation room or area			
R.74(1)(a)	Locked cabinet for dangerous drug			
R.74(1)(b)	Work space for preparation of medication			
R.74(1)(c)	Sink with hand washing facilities			
R.74(2)	Refrigerator with thermometer and exclusively for pharmaceutical storage			
R.74(3)	No test reagents, general disinfectants, cleaning agents and similar products in this room or area			
	Clinical examination and treatment room			
R.54	Doors size ≥1.2m (clear opening) & not swing into the corridors			
R.58	Adequate ceiling height (air condition ≥2.4m, if not ≥ 3.0m)			
R.79(1)(a)	Dimension ≥ 3.0m			
R.79(1)(a)	Area ≥ 11.1m²			
R.79(1)(b)(i)	**Hand washing facility with:**			
R.68(1)	Soap, appliance and sanitary hand drying facilities			
R.68(3)	Hands-free taps			
R.79(1)(b)(iii)	Storage for linen, supplies and equipment			
R.79(1)(b)(iv)	Examination & treatment couch			
R.79(1)(b)(v)	Screen or curtain for patient privacy			
R.79(2)(a),(b)	Located near nurses station or where patient care is provided or procedure is carried out			

PROVISION	ITEM	YES	NO	COMMENT
R.20 & 307(1)(c)	**Resuscitation facilities**			
8th Schedule (c)	Bag-valve mask (*e.g.* ambubag)			
(f)	Laryngoscope and endotracheal tubes			
(d)	ECG monitoring with defibrillator			
(g)	Suction equipment			
(b)	Oxygen			
(i) & (e)	Drugs and intravenous therapy			
	iv adrenaline			
	iv atropine sulphate			
	iv sodium bicarbonate			
	iv hydrocortisone			
	iv calcium chloride/iv 10% calcium gluconate			
	iv chlorpheniramine (piriton)			
	iv 50% dextrose			
	iv normal saline etc			
R.79	**PD Exchange area or room ***			
	Total number of **area or room**			
	Number of chair/bed			
R.54	Doors size (clear opening) ≥1.2m & not swing into the corridors			
R.58	Adequate ceiling height (air condition ≥2.4m, if not ≥ 3.0m)			
	PD chair • **Open area**: minimum of 4.5m^2 • **Room area**: minimum of 4.5m^2			
	PD bed			
R.63 (2)	• **Open area**: minimum 0.9m between side of bed and wall, minimum 1.5m between side of bed and bed, minimum 0.9m between foot of bed and wall, minimum 1.8m between foot of bed and bed, minimum corridor width 1.2m			
R.79(1)(a)	• **Room area**: minimum dimension 3.0m, minimum 11.1 m^2			
	- Each PD chair/bed should have a table, chair and drip stand - Adequate wash basins with elbow-tap			

PROVISION	ITEM	YES	NO	COMMENT
	should be provided for maintenance of good hand hygiene. Minimum of 1 wash basin for each PD area/room			
	Treatment/procedure - There shall be facilities and equipment for the treatment and care of PD patients commensurate with the clinical procedures conducted within PD facilities (e.g exit site care, change of transfer set, PET and KI/V testing)			
	Effluent disposal - The PD effluent preferably drain into the sewerage system - Sluice room for disposal of CAPD fluids			
R.79(2)	Nurses counter - Nearby - Able to monitor all patients at one time			
R.68, 307	**Hand washing facilities**			
R.68(1)	Soap, appliance and sanitary hand drying facilities			
R.68(2)	All taps are patient-friendly			
R.68(3)	Hands-free taps (*for healthcare professional*)			
R.307(1)(g)	Adequate clinical sink (preferably *1 sink:8 chairs/bed*)			
R.68,307	**Hand washing facilities**			
R.68(1)	Soap, appliance and sanitary hand drying facilities			
R.68(2)	All taps are patient-friendly			
R.68(3)	Hands-free taps (*for healthcare professional*)			
R.307(1)(g)	Adequate clinical sink (*preferably 1sink:8 chairs*)			
	Nourishment station or pantry (*optional*)			
R.80(1)	Sink with hand washing facilities			
R.80(1)	Refrigerator			
R.80(1)	Serving equipment			
R.80(1)	Storage cabinet			
R.80(2)	Source and preparation of ice used for patient service or treatment shall be clean and hygienic			
R.307(1)(a)	Adequate store room for supplies, consumables and equipment			
	Staff facilities			
R. 425	Commensurate with the type, scope and capability			

PROVISION	ITEM	YES	NO	COMMENT
R. 426	Rest room or area with pantry			
R. 428	Separate prayer room & ablution area for male &female			
R. 429	Library or resource centre for continuing healthcare professional education			
	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			
	Janitor's closet			
R.77(1)(a)	Sink (*preferably with a floor receptor with mixing taps*)			
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 linear			
R.77(1)(e)	Hand washing facility			
R.77(2)	Adequate for mop, bucket and cleaning equipment			
	Sewage and sewerage system			
R. 90	No exposed sewer line located directly above working, storing or eating surfaces or areas or where medical or surgical supplies are prepared, processed or stored			
2.1 (ii), 2.5 NPQS	Effluent disposal - The PD effluent preferably drain into the sewerage system - Sluice room for disposal of CAPD fluids			
	Refuse & hazardous waste			
R.91(1)	Kept in impervious, non-absorbent with tight-fitting lids & easily wash containers			
R.91(4)	Sufficient number of sound watertight containers with tight fitting lid			
R.92(1)	Separate handling of infectious and non-infectious waste at the point of generation			
R.92(2)	Proper disposable of infectious waste in designated containers			
R.92(3)	Handling of non infectious waste in accordance with good safety practice and related law			
R.92(4)	Handling all hazardous waste in accordance to relevant authority to protect persons and environment			

PROVISION	ITEM	YES	NO	COMMENT
R.319	Take all necessary precaution to dispose infectious waste			
R.307(1)(b)	Store area for clinical waste awaiting disposal			
R.317	Control measures to prevent cross infection			
	Toilet facilities			
R.54(2)	Clear opening for patients' toilet door ≥ 0.9m & not swing inward, neither into corridor			
R.69(2)	Disabled person-friendly (*fit in wheel chairs*) with:			
(a)	Incombustible waste-paper receptacle with removable impervious liner			
(b)	Grab bar			
(c)	Nurse call system			
(d)	Hand washing facilities			
R.69(3)	Toilet for healthcare professional			
R.427	Separate toilets for male and female staff			
R.56(2)	No carpet			
R.87	Emergency generator (*if not available shall ensure the dialysis machine has back-up power)*			
	Public Amenities			
R. 419	Commensurate with the type, scope and capability			
R. 420	Separate toilets for male and female			
R. 420	Toilet for disable (*where feasible*)			
R. 421	Easily accessible public telephone within the facility			
R. 424	Clean and separated prayer room and ablution area for male and female (*optional*)			
	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			

Comments:	
Recommendation:	

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

*** NPQS (National Peritoneal Quality Standard 2020)**