

**STANDARD FOR HAEMODIALYSIS UNIT****Name of Facility:****Address:***If comply tick (✓) Yes, if not tick (✓) No. Please add comment for any explanation.*

PROVISION	ITEM	YES	NO	COMMENT
	<b>INFRASTRUCTURE &amp; EQUIPMENT</b>			
	<b>Location</b>			
R.50(1)	Free from undue noise ( <i>disturbance to patients &amp; staff</i> )			
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			
	<b>Signs and labels</b>			
R.60	Proper signage and labelling system			
S.108	Not to mislead the public on the type or nature of facilities or services			
	<b>Patient transport</b>			
R.121(1)	Arrangement for patient transport			
R.121(2)	Ill patient shall be transported by properly equipped and staffed ambulance ( <i>refer requirements for ambulance</i> )			
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			
	<b>Ramp</b>			
R.52(6)(a)	Size $\geq 1.1\text{m}$ wide			
R.52(6)(a)	Landing $\geq 1.8\text{m}$ wide			
R.52(6)(b)	Non skid surface			
R.52(6)(c)	Handrails ( <i>where necessary</i> )			
R.52(6)(d)	Guardrails ( <i>where necessary</i> )			
R.52(6)(e)	Slope not exceeding 1:16			

PROVISION	ITEM	YES	NO	COMMENT
R.52(6)(f)	Comply with Fire Services Department			
	<b>Entrance and exit</b>			
R.59(1)	Main entrance adjacent to lobby with minimum disturbance			
R.59(2)	Entrance designed for wheelchairs and stretchers			
	<b>Door</b>			
R.54(1)	Size (clear opening) $\geq 1.2\text{m}$ wide ( <i>for patient care</i> )			
R.54(3)	Adequate size for large carts or bulk goods to pass through ( <i>for entrance, store etc</i> )			
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	<b>Area for stretchers and wheelchairs</b>			
	<b>Stairway</b>			
R.52(5)(a)	Size (clear opening) $\geq 1.1\text{m}$ wide			
R.52(5)(a)	Landing $\geq 1.8\text{m}$ wide			
R.52(5)(b)	Non-skid surface			
R.52(5)(c)	Handrails ( <i>both sides</i> )			
R.52(5)(d)	Guardrails ( <i>where necessary</i> )			
R.52(5)(e)	Comply with Fire Services Department			
R.56(2)	No carpet			
	<b>Elevator (Lift)</b> * used or intended to be used for patient transportation			
R.52(3)(a)	Clear opening $\geq 1.2\text{m}$			
R.52(3)(a)	Size (clear opening) $\geq 1.5\text{m} \times 2.1\text{m}$			
R.52(3)(a)	Capacity $\geq 1,500\text{ kg}$			
R.52(4)	DOSH certification (CF)			
R.52(2)(b)	$\geq 2$ elevators ( <i>if <math>\geq 60</math> chairs on other than ground floor</i> )			
R.52(2)(c)	$\geq 3$ elevators ( <i>if <math>\geq 200</math> chairs on other than ground floor</i> )			
R.122(2)	Kept in good repair and operating condition			

PROVISION	ITEM	YES	NO	COMMENT
	<b>Corridor</b>			
R.53(1)	Size (clear opening) $\geq$ 2.1m wide ( <i>for dialysis treatment area may <math>\geq</math> 1.0m</i> )			
R.64(1)	No beds or dialysis chairs shall be placed in corridors			
	<b>Floor and wall</b>			
R.56(1),57(1)	Easy to wash and clean & non skid (for floor)			
R.56(1),57(1)	Non-toxic ( <i>safe</i> )			
	<b>Ceiling</b>			
R.58(1)(a)	Height for air-conditioned room $\geq$ 2.4m			
R.58(1)(b)	Height for non air-conditioned room $\geq$ 3.0m			
R.58(4)	Non- toxic ( <i>safe</i> )			
	<b>Window and ventilation</b>			
R.89, 307(1)(h)	Appropriate and adequate ventilation ( <i>window, duct or mechanical means</i> )			
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			
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			
	<b>Electrical supply</b>			
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 ( <i>call system, alarm system, critical areas, etc</i> )			
R.87(1)&(2)	Emergency power supply for the illumination ( <i>exit signs, nurses' station, corridor etc</i> )			
R.122(2)	Emergency lights are kept in good repair and operating condition			

PROVISION	ITEM	YES	NO	COMMENT
	<b>Available and displayed in a conspicuous area</b>			
S.23	A copy of Licence ( <i>for renewal of Licence</i> )			
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 for medical report			
R.229(1)	Emergency call information (with contact number) <ul style="list-style-type: none"> <li>- Fire and police department</li> <li>- RMP</li> <li>- Ambulance services</li> <li>- Hospitals within locality</li> </ul>			
	<b>Nurse station</b>			
R.73(5)	1 station : 36 patients			
R.64(3)	Distance $\leq$ 24.4m from patients' rooms <ul style="list-style-type: none"> <li>- Able to monitor all patients at one time</li> </ul>			
R.73(2)	Area for writing patients' records & charts ( <i>at or nearby</i> )			
R.73(4)	<b>Hand washing facility</b> with: ( <i>at or nearby</i> )			
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 ( <i>within &amp; with other facilities</i> )			
R.122(2)	Call systems are kept in good repair and operating condition			
R.73(2)	Medication preparation room or area ( <i>at or nearby</i> )			
R.73(3)	Toilet with hand washing facility for staff ( <i>nearby</i> )			
R.43	<b>Appropriate patients' medical record system facilities</b>			
	<b>Medicine preparation room or area</b>			
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			

PROVISION	ITEM	YES	NO	COMMENT
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			
	<b>Clinical examination and treatment room</b>			
R.54	Doors size $\geq 1.2\text{m}$ (clear opening) & not swing into the corridors			
R.58	Adequate ceiling height (air condition $\geq 2.4\text{m}$ , if not $\geq 3.0\text{m}$ )			
R.79(1)(a)	Dimension $\geq 3.0\text{m}$			
R.79(1)(a)	Area $\geq 11.1\text{m}^2$			
R.79(1)(b)(i)	<b>Hand washing facility with:</b>			
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			
R.20 & 307(1)(c)	<b>Resuscitation facilities</b>			
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			
	<i>iv adrenaline</i>			
	<i>iv atropine sulphate</i>			
	<i>iv sodium bicarbonate</i>			
	<i>iv hydrocortisone</i>			
	<i>iv calcium chloride/iv 10% calcium gluconate</i>			
	<i>iv chlorpheniramine (piriton)</i>			
	<i>iv 50% dextrose</i>			
	<i>iv normal saline etc</i>			

PROVISION	ITEM	YES	NO	COMMENT
<b>R.307</b>	<b>Dialysis room or area*</b>			
	Total number of room/category			
	<b>Normal category (non infectious)</b>			
	Number of dialysis chair/bed			
<b>R.54</b>	Doors size (clear opening) $\geq 1.2\text{m}$ & not swing into the corridors			
<b>R.58</b>	Adequate ceiling height (air condition $\geq 2.4\text{m}$ , if not $\geq 3.0\text{m}$ )			
<b>R.308</b>	Area $\geq 4.5\text{m}^2/\text{patient}$			
<b>R.312</b>	<b>Dialysis machine*</b>			
	Number of dialysis machine			
<b>(1)</b>	Comply with the design requirement & standard as set out by DG			
	Type/Brand of machine:			
	Number of machine:			
	Alarm system:			
	Back-up system:			
<b>R.68, 307</b>	<b>Hand washing facilities</b>			
<b>R.68(1)</b>	Soap, appliance and sanitary hand drying facilities			
<b>R.68(2)</b>	All taps are patient-friendly			
<b>R.68(3)</b>	Hands-free taps ( <i>for healthcare professional</i> )			
<b>R.307(1)(g)</b>	Adequate clinical sink (preferably <i>1 sink:8 chairs</i> )			
<b>R.317(5)</b>	<b>Isolation for Hepatitis C</b>			
	Number of dialysis chair/bed			
<b>R.54</b>	Doors size (clear opening) $\geq 1.2\text{m}$ & not swing into the corridors			
<b>R.58</b>	Adequate ceiling height (air condition $\geq 2.4\text{m}$ , if not $\geq 3.0\text{m}$ )			
<b>R.308</b>	Area $\geq 4.5\text{m}^2/\text{patient}$			
<b>R.312</b>	<b>Dialysis machine*</b>			
	Number of dialysis machine			
<b>(1)</b>	Comply with the design requirement & standard as set out by DG			
	Type/Brand of machine:			
	Number of machine:			
	Alarm system:			
	Back-up system:			
<b>R.68,307</b>	<b>Hand washing facilities</b>			
<b>R.68(1)</b>	Soap, appliance and sanitary hand drying facilities			

PROVISION	ITEM	YES	NO	COMMENT
R.68(2)	All taps are patient-friendly			
R.68(3)	Hands-free taps ( <i>for healthcare professional</i> )			
R.307(1)(g)	Adequate clinical sink ( <i>preferably 1sink:8 chairs</i> )			
R.317(5)	<b>Isolation room for Hepatitis B</b>			
	Number of dialysis chair/bed			
R.54	Doors size (clear opening) $\geq 1.2\text{m}$ & not swing into the corridors			
R.58	Adequate ceiling height (air condition $\geq 2.4\text{m}$ , if not $\geq 3.0\text{m}$ )			
R.308	Area $\geq 4.5\text{m}^2/\text{patient}$			
R.312	<b>Dialysis machine*</b>			
	Number of dialysis machine			
(1)	Comply with the design requirement & standard as set out by DG			
	Type/Brand of machine:			
	Number of machine:			
	Alarm system:			
	Back-up system:			
R.68, 307	<b>Hand washing facilities</b>			
R.68(1)	Soap, appliance and sanitary hand drying facilities			
R.68(2)	All taps are patient-friendly			
R.68(3)	Hands-free taps ( <i>for healthcare professional</i> )			
R.307(1)(g)	Adequate clinical sink ( <i>proposed 1sink:8 chairs</i> )			
R.317(5)	<b>Isolation room for HIV or other categories (if available)</b>			
	Number of dialysis chair/bed			
R.54	Doors size (clear opening) $\geq 1.2\text{m}$ & not swing into the corridors			
R.58	Adequate ceiling height (air condition $\geq 2.4\text{m}$ , if not $\geq 3.0\text{m}$ )			
R.308	Area $\geq 4.5\text{m}^2/\text{patient}$			
R.312	<b>Dialysis machine*</b>			
	Number of dialysis machine			
(1)	Comply with the design requirement & standard as set out by DG			
	Type/Brand of machine:			
	Number of machine:			

PROVISION	ITEM	YES	NO	COMMENT
	Alarm system:			
	Back-up system:			
<b>R.68,307</b>	<b>Hand washing facilities</b>			
<b>R.68(1)</b>	Soap, appliance and sanitary hand drying facilities			
<b>R.68(2)</b>	All taps are patient-friendly			
<b>R.68(3)</b>	Hands-free taps ( <i>for healthcare professional</i> )			
<b>R.307(1)(g)</b>	Adequate clinical sink ( <i>preferably 1 sink:8 chairs</i> )			
<b>R.314</b>	<b>Dialysate fluids</b>			
<b>(1)</b>	The composition meet the need of the premise			
<b>(2)</b>	Each batch has a valid certificate of analysis from approved laboratory by DG			
<b>R.315</b>	<b>Dialyser</b>			
	Comply with the design requirement & standard as set out by DG			
	Type:			
	Brand:			
	<b>Reprocessing room</b> ( <i>if dialysers are reused</i> )			
<b>R.310</b>	Separated from dialysis area and patient care			
<b>R.317(6)</b>	Disposables are processed separately for each category of patient*			
	Non hepatitis patients			
	Hepatitis B patients			
	Hepatitis C patients			
	HIV or other category of patients			
<b>R.89(5)</b>	Air discharge exhaust located to avoid cross circulation to air supply intakes or windows			
<b>R.89(7)</b>	Air from rooms or areas likely to contain infectious micro-organisms shall be exhausted and not re-circulated through the normal air-conditioning system			
	<b>Dialyser reprocessing machine</b> ( <i>if dialysers are reused</i> )			
<b>R.312(2)</b>	Approved by DG ( <i>the reprocessing machine shall be a fully automated integrated unit</i> )			
<b>R.312(2)</b>	Located in a reprocessing room			
<b>R.317(7)(a)</b>	Dedicated machine for each category of patient*			
	Non hepatitis patients			



PROVISION	ITEM	YES	NO	COMMENT
	Hepatitis B patients			
	Hepatitis C patients			
	HIV or other category of patients			
	<b>Dialyser storage</b> (if dialysers are reused)			
<b>R.317(7)(b)</b>	Separate storage dialysers' container for each patient & category*			
	Non hepatitis patients			
	Hepatitis B patients			
	Hepatitis C patients			
	HIV or other category of patients			
	<b>Plumbing</b>			
<b>R.81(1)</b>	Designed & installed, to be easily cleaned & maintained			
<b>R.81(4)</b>	Installation to prevent the possibility of cross connection between safe and unsafe water supplies or back siphonage			
	<b>Water supply</b>			
<b>R.82(1),(2)</b>	Safe and sufficient water supply according to standards approved by relevant authority ( <i>preferably enough for usage ≥ 2 days</i> )  *at least 300L x number of machine x number of shifts			
<b>R.82(3)</b>	Raw water tank is properly maintained and made up of material approved by relevant authority: <ul style="list-style-type: none"> <li>- Stainless steel-grade 316</li> <li>- High-density polyethylene (HDPE)</li> </ul>			
	<b>Water treatment room</b>			
<b>R.307(1)(e)&amp; 309(1)</b>	Separated room			
<b>R.309(2)</b>	Pipes for treated water made of acrylonitrile butyldiene styrene (ABS) material, cross-linked polyethylene (PEX), stainless steel (high grade 316L) and as approved by the DG			
	Arrangement of the systems may as follows: 1) Multimedia/Sediment column – undissolved particles (500-5microns) 2) Carbon column 1 3) Carbon column 2    } Chlorine, Chloramine 4) Softener column - remove Calcium, Magnesium 5) Brine tank - regenerate Sodium Chloride 6) RO module - microbiological barrier (bacteria, endotoxin, pyrogens and viruses) 7) Central Delivery System (CDS) tank (indirect) - RO water storage tank (for reprocessor machine only)			

PROVISION	ITEM	YES	NO	COMMENT
	Water sample ports shall be available for sampling at the following points: <ul style="list-style-type: none"> <li>- Post carbon column 1/ Post carbon column 2/ Post softener column/pre RO module/ Immediate post RO module (optional)</li> <li>- First point in the distribution loop</li> <li>- Last point in the distribution loop</li> <li>- Last point of the dialyser-reprocessor loop</li> </ul>			
<b>R.313</b>	<b>Water treatment system</b>			
	Reverse osmosis or deioniser			
	Type/Brand:			
	<b>Nourishment station or pantry (<i>optional</i>)</b>			
<b>R.80(1)</b>	Sink with hand washing facilities			
<b>R.80(1)</b>	Refrigerator			
<b>R.80(1)</b>	Serving equipment			
<b>R.80(1)</b>	Storage cabinet			
<b>R.80(2)</b>	Source and preparation of ice used for patient service or treatment shall be clean and hygienic			
<b>R.307(1)(a)</b>	Adequate store room for supplies, consumables and equipment			
	<b>Staff facilities</b>			
<b>R. 425</b>	Commensurate with the type, scope and capability			
<b>R. 426</b>	Rest room or area with pantry			
<b>R. 428</b>	Separate prayer room & ablution area for male &female			
<b>R. 429</b>	Library or resource centre for continuing healthcare professional education			
	<b>Housekeeping</b>			
<b>R.93</b>	Housekeeping services properly operated & maintained to provide a pleasant, safe and sanitary environment			
<b>R.96</b>	Availability & properly maintained equipment for cleaning			
<b>R.98</b>	Cleaning compound and hazardous substance are labelled and stored in safe places			
<b>R.100</b>	No dry dusting and sweeping			
	<b>Janitor's closet</b>			
<b>R.77(1)(a)</b>	Sink ( <i>preferably with a floor receptor with mixing taps</i> )			

PROVISION	ITEM	YES	NO	COMMENT
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(1)(e)	Hand washing facility			
R.77(2)	Adequate for mop, bucket and cleaning equipment			
	<b>Sewage and sewerage system</b>			
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			
	<b>Refuse &amp; hazardous waste</b>			
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 disposal 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			
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			
	<b>Toilet facilities</b>			
R.54(2)	Clear opening for patients' toilet door $\geq 0.9\text{m}$ & not swing inward, neither into corridor			
R.69(2)	Disabled person-friendly ( <i>fit in wheel chairs</i> ) 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			

PROVISION	ITEM	YES	NO	COMMENT
R.87	Emergency generator ( <i>if not available shall ensure the dialysis machine has back-up power</i> )			
	<b>Public Amenities</b>			
R. 419	Commensurate with the type, scope and capability			
R. 420	Separate toilets for male and female			
R. 420	Toilet for disable ( <i>where feasible</i> )			
R. 421	Easily accessible public telephone within the facility			
R. 424	Clean and separated prayer room and ablution area for male and female ( <i>optional</i> )			
	<b>Overall findings</b>			
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			
	<b>STANDARD &amp; REQUIREMENT (DOCUMENTATION)</b>			
	<b>Organization &amp; Management</b>			
S.2	<b>Person responsible</b> ( <i>for body corporate only</i> )			
R. 12, 301(2) & 302	<b>Person In Charge</b> ( <i>Qualified, trained &amp; experienced</i> )-Registered medical practitioner ( <i>renal training &amp; experiences ≥ 200H</i> )			
	Frequency of visit: Day-to-day medical care			
	Ensure that each patient been reviewed by a nephrologist			
	Documentation in patient's record			
R.13(1), 301(2)	<b>Affiliated Nephrologists</b>			
	Frequency of visit: at least 3 monthly			
	Review of patients shall include but not limited to: <ul style="list-style-type: none"> <li>- Clinical examination</li> <li>- Review of blood test results</li> <li>- Other test results</li> </ul>			
	Advise on the facilities, equipment and staffing requirements			
	Plan for patient's dialysis requirement, dietary and fluid intake and vascular access			
	Advise on policies and standards for hemodialysis treatment			
	Recommend changes or modification to treatment as deemed necessary from time to time in order to maintain the quality of care			

PROVISION	ITEM	YES	NO	COMMENT
	Documentation in patient's record			
<b>S.2</b>	<b>Board of management</b> ( <i>authority &amp; responsibility</i> )			
<b>R.49(1)</b>	<b>Infection control committee</b>			
<b>R.11(2)</b>	<b>Plan of organization</b> in writing ( <i>specify the authority, responsibility and functions of each category of staff</i> )			
<b>R.124(1)</b>	Establishment of <b>nursing department</b> if $\geq 6$ SRN			
<b>R.124(2)&amp;(3)</b>	<b>Nursing departmental plan</b> ( <i>specify the authority, responsibility and functions of each category of staff</i> )			
<b>R.130(1)(a)</b>	<b>RMA organizational plan</b> ( <i>authority, accountability &amp; communication</i> )			
<b>S.2.</b>	<b>Scope of services</b>			
<b>R.305(1)</b>	Treatment for certified <b>stable</b> end stage renal failure patient by RMP			
<b>R.305(2)</b>	Treatment for each patient $\leq 23$ Hours (ACC)			
	<b>Personnel</b>			
<b>R.13(1)</b>	All healthcare professional are <b>registered</b> with proper qualification, training & experience <ul style="list-style-type: none"> <li>- Person in charge</li> <li>- Nephrologist</li> <li>- Staff nurse/Medical Assisstant</li> </ul>			
<b>R. 25(b)</b>	<b>Name and professional</b> status of staff providing care			
<b>R21(1)(a)</b>	<b>Written contract</b> with RMP			
<b>R.21(1)(i), 14(1)(a)</b>	<b>Professional care by RMP</b> ( <i>list with current APC</i> )			
<b>R.303(1) &amp; 304(1)(b)</b>	Ratio <b>person to perform</b> to patient; <b>1:6 per shift</b> ( <i>6 months trained in dialysis treatment</i> )*			
	Staff nurse with renal post-basic qualification (name & qualification)			
	Staff nurse with experience in hemodialysis care at least 5 years (name & duration of experience)			
	Other staff nurses and duration of experience			
<b>304(1)(c)</b>	Staff with <b>CPR trained</b> $\geq 1$ per shift*			
<b>303(4)</b>	<b>Adequate staff</b> based on patient workload ( <i>at least 3 months trained in dialysis treatment</i> )*			
<b>R.129(3)</b>	1 personal care aide : 14 patients (Dialysis Assistants)			
<b>R.129(1)</b>	<b>Personal care aide</b> may provide care only as specified in Seventh Schedule			
<b>R.129(2)</b>	Personal care aide at all times supervised by SRN.			
<b>S.2</b>	Other <b>allied health professional</b> ( <i>if available</i> )			

PROVISION	ITEM	YES	NO	COMMENT
R.17(1), (4)	List of <b>volunteers</b> (qualification/ training/ experience)			
R.130(2)(a), (b)	Qualification of RMA appropriate to patient care			
	<b>RMA</b> with renal post-basic qualification (name & qualification)			
	<b>RMA</b> with experience in hemodialysis care at least 5 years (name & duration of experience)			
	Other RMA and duration of experience			
R.131	<b>RMA at all times supervised by RMP</b>			
R49(4)	Appointed, trained and authorized <b>infection control staff</b>			
R.39(1)(a)	<b>Patient relations officer</b> with job description			
R.93(2)	<b>Housekeeping supervisor</b>			
R.123(1)&(2)	<b>Maintenance</b> supervisor			
S.16(1)(c)	<b>Policies and standard operating procedures</b>			
R.22	Relevant written policies, standards, procedures and guidelines are <b>available and accessible to all personnel</b>			
R.21(1)(j)	Policy on supervision & training for <b>housekeeping staff</b>			
R21(1)(g)	Policy on <b>volunteers</b> (if available)			
R.17(1)	Proper orientation, planning and supervision on volunteer programme for personal care duties (if available)			
R.21(1)(b)	Procedure for <b>patient admission, discharge and transfer*</b>			
R.21(1)(c)	Procedure for <b>patient registration, attendance and referral*</b>			
R.317	Policy on <b>patient selection</b> (on category of patient e.g. non hepatitis only)*			
R.320(a)	Policy on <b>patient management and transportation in case of complication on management*</b>			
R.320(b)	Policy on <b>patient management and transportation in case of seroconversion*</b>			
R.320(c)	Policy on <b>patient management and cost for transferring patients in case of centre required to be closed*</b>			
R.38 – 41	Updated policy and procedure on <b>grievance mechanism</b>			
R.21(1)(h)	Policy on <b>general maintenance</b>			
R.21(1)(f), 49	Policy on <b>Infection control*</b>			
R21(1)(e)	Policy on <b>maintenance</b> of physical plant and equipment			
R21(1)(k)	Policy on <b>transportation of lab specimen</b>			
R.21(1)(d)	Policy on <b>Incident reporting</b>			

PROVISION	ITEM	YES	NO	COMMENT
R.21 (2)(a)&(b)	Written policy <b>available</b> to all staff & <b>review every 5 years</b>			
S.16(1)(c)	<b>Clinical practice guidelines</b>			
R.22(1),(2)	In accordance to the facilities and services provided			
S.16(1)(c)	<b>Records, registers, returns and books</b>			
	<b>Patient monitoring system (to review <math>\geq 3</math> records)</b>			
	Number of patients according category (non hepatitis, hepatitis B, hepatitis C)			
R.42 – 46	<b>Appropriate patients' medical record</b> (refer 6 <sup>th</sup> Schedule) (Patient identification, relevant clinical details, details on the procedures including consent form etc)			
R.14(1)(a)	Patient care or treatment under <b>professional care by RMP</b>			
R. 15(1)	<b>Written orders</b> for <b>diagnostic procedure, medication or treatment by RMP</b>			
R15(3)	<b>Verbal order</b> shall be immediately <b>recorded</b> by relevant staff and <b>countersigned by RMP within 24hours</b>			
R.47	<b>Valid consent</b> before any procedure shall be in writing			
R.316(1)	<b>Patient treatment record</b>			
(a)	Treatment date			
(b)	Predialysis blood pressure			
(b)	Predialysis weight			
(c)	Blood flow rate			
(d)	Post dialysis blood pressure			
(d)	Post dialysis weight			
(e)	Relevant biochemical test			
(f)	Other relevant assays ordered by a nephrologists*			
R.305	Clinically stable patient			
R.317(2), (3), (4)	<b>Screened before treatment and every 6 months* (preferably every 3 months)</b>			
	- HBsAg			
	- HBsAb			
	- Anti HCV			
	- HIV antibody			
	<b>Record: Water Quality and Dialysate Fluids</b>			
	<b>RO system Daily log:</b>			

PROVISION	ITEM	YES	NO	COMMENT
	<ul style="list-style-type: none"> <li>- Testing for <b>chlorine/chloramine</b> (post carbon column)</li> <li>- Testing for <b>hardness</b> (post softener column)</li> <li>- <b>UV light</b> intensity (for indirect feed)</li> </ul> <p>*Shall be done <b>every morning</b> prior to starting hemodialysis treatment</p>			
<b>R.313</b>	<b>Water Quality</b> *All centres shall have a water treatment system that delivers water quality that meets the ISO 23500:2011 Standards			
	- Aluminium $\leq 0.01\text{mg/l}$			
	- Lead $\leq 0.005\text{mg/l}$			
	- Copper $\leq 0.1\text{mg/l}$			
	- Chloramines $\leq 0.1\text{mg/l}$			
	- Others			
<b>R.313(3)</b>	<b>Raw and treated water analysis every 6 months*</b>  Site of testing: <ul style="list-style-type: none"> <li>- Raw water point</li> <li>- Pre RO</li> <li>- Post RO</li> </ul>			
<b>R.313(4)</b>	<b>Microbiological test on treated water monthly*</b>			
	Maximum allowed: <ul style="list-style-type: none"> <li>- CFU level <math>&lt; 100\text{ CFU/ml}</math></li> <li>- Endotoxin level <math>&lt; 0.25\text{ EU/ml}</math></li> </ul> Action level: <ul style="list-style-type: none"> <li>- CFU level <math>&gt; 50\text{ CFU/ml}</math></li> <li>- Endotoxin level <math>&gt; 0.125\text{ EU/ml}</math></li> </ul> <p><i>*if action level are observed, disinfection and retesting shall be done immediately to restore the quality into acceptable level</i></p> <b>Sites of Sampling</b> <ul style="list-style-type: none"> <li>• Post RO membrane</li> <li>• First point of distribution loop</li> <li>• End point of distribution loop (last machine port)</li> <li>• Reprocessing bay</li> </ul>			
<b>R.313(5)</b>	<b>Record on water analysis*</b> <ul style="list-style-type: none"> <li>- All the results shall be properly documented and made available for inspection.</li> </ul>			
<b>R.314</b>	<b>Valid analysis certificate</b> for each batch of <b>dialysate</b> (electrolytes and microbiological) *  Each package shall have the following informations labelled: <ul style="list-style-type: none"> <li>• Address of manufacturer;</li> <li>• Contents;</li> </ul>			



PROVISION	ITEM	YES	NO	COMMENT
	<ul style="list-style-type: none"> <li>Concentration of electrolytes;</li> <li>Dialysate concentration ratio; and</li> <li>Date of manufacture and expiry.</li> </ul>			
	<p><b>*On site dialysate preparation is not recommended</b></p> <p>If provided, on site dialysate preparation shall comply with:</p> <ul style="list-style-type: none"> <li>ISO 23500:2011 Standards; and</li> <li>SOP on dialysate preparation and dispensing</li> </ul> <p>Name and qualification of personnel</p> <p>Results of dialysate analysis:</p> <ul style="list-style-type: none"> <li>Contents;</li> <li>Concentration of electrolytes; and</li> <li>Dialysate concentration ratio.</li> </ul>			
	<b>Registers</b>			
<b>R. 34</b>	<b>Staff register</b>			
<b>R. 35</b>	<b>Volunteer register</b> ( <i>if available</i> )			
<b>R.13(3)</b>	<b>Temporary register</b> for RMP & RDP with current APC			
	<b>Vaccination and Immunization of Staff</b>			
<b>R.317(2)</b>	<p><b>All eligible staff</b> are vaccinated and immunised against hepatitis and other diseases as deemed necessary by DG*</p> <ul style="list-style-type: none"> <li>- All the vaccination record shall be properly documented and made available for inspection.</li> </ul>			
<b>R.30</b>	Patient's medical record register ( <b><i>record the movement</i></b> )			
<b>R. 29</b>	<p><b>Admission and discharge register*</b></p> <p>The following particulars shall be entered into the patient's Admission and Discharge Register within 4 hours after the discharge:</p> <ul style="list-style-type: none"> <li>- The date of discharge</li> <li>- Diagnosis and status at discharge</li> <li>- If transferred, the reason for transfer</li> </ul> <p>Where a patient dies-</p> <ul style="list-style-type: none"> <li>- Enter time and cause of death under the outcome section</li> </ul>			
	<b>Statistical Returns</b>			
<b>R. 37(1)</b>	<p>Statistical returns (e-reporting) includes the following details:</p> <ul style="list-style-type: none"> <li>- Details of occupancy;</li> <li>- Statistical information of ICD-10 every 3 months; and</li> <li>- Other informations deemed necessary and required at anytime by DG.</li> </ul>			

PROVISION	ITEM	YES	NO	COMMENT
	<b>National Renal Registry(NRR)</b> report card *All centres shall submit data to NRR in a specified format			
	1. <b>Patient census</b>			
	2. <b>Centre Performance</b>			
	Anemia Management			
	Nutritional Status			
	BP and Lipids			
	Renal Bone Disease			
	Hepatitis Seroconversion			
	HD Practices			
	Patient Mortality			
	<b>Notification</b>			
<b>R.19(1)</b>	<b>Record of incident reporting (IR 1 &amp; IR 2)</b>  *Shall be reported in writing to the DG or any other person authorised by DG the next working day after the incident occurred or immediately after the premise has reasonable cause			
<b>R.322(b)</b>	<b>Seroconversion (IR 1)</b>			
	Any case? Please describe category			
	If yes, reported?			
	- Any respond and corrective action?Please describe			
<b>R.322(c)</b>	Any case as deemed necessary and required by DG			
<b>S.67</b>	<b>Assessable death</b>			
	Any case? Please describe category			
	If yes, reported?			
	- Any respond and corrective action? Please describe			
<b>R.322(a)</b>	<b>Intradialytic death</b>			
	Any case? Please describe			
	If yes, reported?			
	- Any respond and corrective action?Please describe			
<b>R.19(2)</b>	6 monthly statistical return (IR 2)			
<b>S. 74</b>	<b>Program and activities on quality</b>			

PROVISION	ITEM	YES	NO	COMMENT
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)			
	<b>Overall findings</b>			
S.16(1)(c)	Complies with standards or requirements: books, records, policies, standard operating procedures, clinical practice guidelines or the management or related matters			

<b>Comments:</b>			
<b>Recommendation:</b>			
<b>Prepared by:</b>		<b>Verified by:</b>	
(Name & Stamp)		(Name & Stamp)	
<b>Date :</b>		<b>Date:</b>	