

**SAMPLE Senarai Semak Pemeriksaan Pasca Pendaftaran Klinik Perubatan Akta Kemudahan dan Perkhidmatan Jagaan Kesihatan Swasta 1998 dan Peraturan-Peraturan Kemudahan dan Perkhidmatan Jagaan Kesihatan Swasta (Klinik Perubatan Swasta atau Klinik Pergigian Swasta) 2006**

MEDICAL CLINIC ID No. : .....

REGISTRATION No. : ..... DATE OF REGISTRATION : .....

NAME OF PREMISES : .....

ADDRESS OF PREMISES : .....

TYPE OF SERVICES :  General Outpatient  
 Specialist Services Specify .....

OPERATING HOURS : .....

TYPE OF PRACTICE :  Solo  Group

NATURE OF BUSINESS VENTURE :  SP  BC  Society  Partnership

NAME OF HOLDER OF COR : .....

NAME OF PERSON IN CHARGE : .....

DATE AND TIME OF INSPECTION : .....

NAME OF INSPECTOR(S) : .....

Please ( ✓ ) in the appropriate boxes

**PART I – DOCUMENTS INSPECTION**

REG.	ITEMS	COMPLY		COMMENTS
		Yes	No	
<b>ORGANISATION &amp; MANAGEMENT</b>				
<b>R.8. Person in Charge</b>				
	Current APC			
	Qualification			
<b>R.9. Other Healthcare Professional Staff</b>				
	Current APC			
	Qualification			
<b>R.20. Minimum Information Captured in Attendance, Referral and Death Register</b>				
<b>R.22. Staff Register with Qualification, Full Registration No., Address and Tel. No.</b>				
	RMP – Permanent/Temporary (including Locum)			
	Other Staff			
<b>R.30. Appropriate Patient Medical Record System with Minimum Information</b>				
<b>POLICY AND PROCEDURE</b>				
<b>R.14. Written Policy</b>				
(1)	Provision of written policies on–			
(b)	Procedure of patients registration, attendance and referrals			
(c)	Incident reporting			
(d)	Infection control including notification			
(h)	Transportation of laboratory specimens			
REG.	ITEMS	COMPLY		COMMENTS

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	Yes	No	
R.27. Patient Grievance Procedure			
R.71. Organised Maintenance Programme			
R.108. Fee Schedule			
<b>OTHERS</b>			
R.35. Arrangement for Vector Control			
R.54. Arrangement or Agreement for the Management of Hazardous Waste			

**PART II – FACILITIES AND SERVICES INSPECTION**

SECT/ REG.	ITEMS	COMPLY		COMMENTS
		Yes	No	
<b>ORGANISATION AND MANAGEMENT</b>				
S.28.	Certificate of Registration (COR)			
R.7.	Organisation Chart			
R.15.	Policy Statement			
(a)-	Staff Identification/Billing Procedures/			
(c)	Patient's Rights			
R.24.	Duty Rosters of HC Professional Staff			
R.74.	Emergency Call Information			
<b>SPECIAL REQUIREMENTS FOR PHARMACEUTICAL SERVICES</b>				
R.82.	Storage and Maintenance of Poison and Dangerous Drugs			
	In accordance to the Dangerous Drugs Act 1952			
R.83.	Stored and Dispensed Medications Appropriately Labelled			
R.84.	No Expired Drugs in Premises			
R.86.	Maintenance of Cold Chain for Vaccines			
<b>SPECIAL REQUIREMENTS FOR RADIOLOGICAL OR DIAGNOSTIC IMAGING SERVICES</b>				
R.93.	Valid Atomic Energy Licence for Radiological or Diagnostic Imaging Services			
<b>GENERAL PROVISIONS FOR STANDARDS OF PRIVATE MEDICAL CLINICS</b>				
R.34.	Location of Private Medical Clinics			
R.41.	Appropriate Signage and Labeling			
R.37.	Doors			
(1)	Entrance/Consultation and treatment room doors $\geq$ 1.2m			
(2)	Toilet doors $\geq$ 0.9m and not swing inwards			
(6)	No doors (except closet doors) swing into the corridors			
<b>STANDARDS FOR OUTPATIENT FACILITIES AND SERVICES</b>				
R.90.	General requirements			
(1)	Not a thoroughfare			
(2)	Type of facilities commensurate with type of services			
(3)	Minimum basic facilities provided–			
(a)	Adequate waiting area			
(b)	Administrative/Financial facility/area			
SECT/ REG.	ITEMS	COMPLY		COMMENTS
		Yes	No	

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(c)	Toilet			
(e)	Dirty/Clean utility room/area			
<b>R.91. Medical Outpatient Services</b>				
(1)	No. of consultation room(s)			
(a)	Minimum dimension of 3.0m and minimum area of 11.1m <sup>2</sup>			
(b)	Facilities available			
	(i) Handwashing facilities			
	(ii) Examination light			
	(iii) Storage of supplies and equipment			
	(iv) Dressing cubicle or area			
	(v) Screen			
	(vi) Film illuminator			
(2)	Treatment room			
(a)	Minimum dimension of 2.4m and minimum area of 8.0 m <sup>2</sup>			
(b)	Facilities available			
	(i) Handwashing facilities			
	(ii) Examination light			
	(iii) Storage of supplies and equipment			
	(iv) Dressing cubicle or area			
	(v) Screen			
	(vi) Film illuminator			
(3)	Minor surgery room			
(a)	Minimum dimension of 2.4 m and minimum area of 8.0 m <sup>2</sup>			
(b)	Facilities available			
	(i) Scrub sink			
	(ii) Liquid detergent dispenser			
	(iii) Operating light			
	(iv) Storage room or area			
	(v) Screen			
	(vi) Film illuminator			
(5)	Adequate and sufficient sterilising facility			
(6)	Adequate linen and equipment storage room or area			
<b>R.75. Basic Emergency Care Services (Referring to 5<sup>th</sup> Schedule)</b>				
(9)	Provision of basic emergency equipment, apparatus, materials–			
(a)	An emergency call system			
(b)	Oxygen			
(c)	Airways and manual breathing bag			
(d)	IV supplies			
(e)	Electrocardiogram			
(g)	Suction equipment			
(h)	In-dwelling urinary catheters			
(i)	Drugs and other emergency medical equipment/supplies deemed necessary			
<b>R.45. Plumbing</b>				
(2)	Sinks for cleaning utensils and equipment			
<b>R.51. Adequate Ventilation</b>				
<b>R.52. No Exposed Sewer Line at Work/Clinical Area</b>				
<b>SECT/ REG.</b>	<b>ITEMS</b>	<b>COMPLY</b>		<b>COMMENTS</b>
		<b>Yes</b>	<b>No</b>	
<b>R.54. Appropriate Management of Hazardous</b>				

