

WRITTEN CLINIC POLICY (SAMPLE)

1 PROCEDURE OF PATIENTS REGISTRATION, ATTENDANCE AND REFERRALS

All new patients shall be registered in patient register.

Follow up patients shall be registered in the follow-up continuation sheet upon arrival.

All patients who are referred shall have their available information recorded in the referral and death register.

2 PROVISION MEDICAL RECORD

Patients and clinic's staffs shall be made aware of the strict confidentiality of the medical records and information contained in them.

No staff should divulge any information to any third party

All patient information shall be strictly private and confidential

Each patient will have individual medical record. Data will include name, registration number, identification card number, age, gender, weight, height, history of allergy or chronic illness and each visit findings of weight, height (for growing-age patients), last menstrual period (Fertile age female patients), blood pressure, temperature (if appropriate) laboratory/x-ray results if relevant, treatment plan, presumptive or definitive diagnosis and return appointment if needed.

Medical records are kept according to the legal requirement of record keeping of the country. The record is to be kept 7 years after the last one year of the record's active use for normal cases A record can be moved to a deceased file once the clinic has the legally valid evidence of the patient's death.

The person in-charge is responsible to review records in the clinic periodically for quality control.

It is the responsibility of the holder of certificate or person in charge to comply with DG directives with regards to preservation of patient's medical record when he intends to cease operation.

The healthcare professional that had provided any health care to a patient shall be allowed to access or inspect patient's medical record for defence in any civil action brought against him.

3 PATIENTS GRIEVANCE MECHANISM PLAN

All patients will be informed of their right to air grievances. All patients grievances shall be investigated within 14 days upon which if the patients will get the reply if the complainant is dissatisfied with reply the complainant may refer the matter to Ministry Of Health.

4 PATIENTS' RIGHTS

Patients has the right to be

- Informed the estimated services charges prior of care or treatment.
- Provided with information of the nature of his medical condition, any proposed treatment, investigation or procedure and related charges of the processes that might take place before the patient gives consent.
- Treated decently.
- Able to request for referral to other healthcare facilities at any time they wish.
- given the medical report within reasonable time upon patient's request and payment of a reasonable fee.
- Able to make any complaints or suggestions to the clinic or relevant agencies

5 FEE SCHEDULE

All fees charged to the patients is following the list as in the Seventh Schedule as follows

(Please refer to seventh schedule in the regulation book)

BILLING

Consultation fees with medications:

RM XX – RM YY

Consultation fees without medications:

RM AA – RM BB

Procedures:

RM CC – RM DD

Investigations:

RM EE – RM FF

6 STAFF IDENTIFICATION

Staff identification is through the name card and the pictures on the organization chart at the waiting area.

7 INCIDENT REPORTING

In the event of unforeseeable or unanticipated incident in the premise i.e. patient's death, fires or robbery, assault or battery of patients and malfunction or intentional or accidental misuse of patient care equipment during treatment or diagnosis of patients shall be reported to the person in charge immediately

Person in-charge will write report to the Authority in Ministry of Health and/or police within 10 working days or immediately.

The report will include information on date and time and the possible reason or factors involved, statement of incident happened, signature of witness, person involved and person in-charge during incidents.

Original and copies of report with relevant attachments shall be kept in separate file for safe keeping and future reference. A receipt of the report shall be requested.

8 INFECTION CONTROL

Person-in-charge is fully responsible in establishing the infection control system and practice in the clinic and shall fully comply to the guidelines by Ministry Of Health.

1. Controlling system

All notifiable diseases treated in the clinic must be notified to the Authority Using the Standard Notification form by Ministry Of Health within the required period.

Any staff detected to have or a carrier of any infectious or communicable disease must take off any duty from the clinic until permitted to so by a registered doctor. Any contaminated equipment during treatment of infectious disease patient must not be used until it is properly disinfected.

2. Practise among Staff

A valid updated contract and the monitoring record with the relevant Private Clinical Waste Disposal Company must be well kept by the Person in-charge or the Assistants.

Practise standard precautions;

1. Proper Hand-washing
2. Appropriate use of gloves, mask, eye protection, gown, face-shield, boots.
3. Housekeeping and manage spillage properly.
4. Disinfect & sterilize patient- care equipment.
5. Manage soiled and contaminated linen properly.
6. Dispose sharps and infectious waste properly.

9 STERILE SUPPLIES

All sterile supplies will be stored properly. No sterile supplies will be stored on counter or open surface. All supplies sterilized within the clinic will be labelled with date of sterilization and expiration date. No outdated sterile supplies will be used. A schedule for regular inspection will be posted, initialled by the person inspecting the supplies and kept for monitoring and quality control.

10 EMERGENCY AND DISASTER PREPAREDNESS

The clinic shall provide medical emergency procedures as a first response to common life threatening injuries and acute illnesses on patients who come to the clinic.

It is the policy of the clinic to have an effective plan to save the patients in any disaster or fire. All staff will receive training on how to respond to emergencies.

A suitable area of the clinic will be prepared to receive and provide basic life support for emergency patients.

The nature and scope of such emergency care services rendered by this clinic is:

- Basic life support.
- Any other measures as per the available person-in-charge's and clinic's abilities
- Notify ambulance service to transfer patient to nearest hospital if necessary

Once the patient is stable enough to leave, the relevant hospital will be notified of the forthcoming emergency. Any referral to of patient to another healthcare facility shall be recorded into the Referral Register

11 TRANSPORTATION OF LAB SPECIMEN

The entire samples from patients to be transported to the laboratory, shall be kept in appropriate bottles and containers as per the requirements of the laboratory.

All specimens shall be kept in the appropriate place before it is transported,

12 MAINTENANCE & HOUSEKEEPING

The person-in-charge is fully responsible to ensure the cleanliness and order of the clinic at all time.

No drinking or eating inside the clinic premise by patients. Staff shall only eat at the rest area. No food is allowed at the clinical areas or medication refrigerator.

Mops will be cleaned only at the janitor's area and done so every time being used. Mops and cleaning equipments shall be kept strictly in the janitor's closet.

13. WASTE MANAGEMENT:

The medical waste will be transported in a leak proof, tightly sealed, fully enclosed container. Waste must be properly handled, containerized prior to disposal. Used and unused sharps should be disposed in an appropriate sharps container that is puncture resistant, leak proof and able to be tightly sealed to prevent the sharps from spilling.

14. ELECTRICAL & PLUMBING FACILITIES

The assistants shall record any malfunction of air-conditioning system, lighting, power outlets and plumbing facilities. They shall then inform the person in charge immediately and call relevant company for repair or service. Any work carried out by and billing to any private company, shall be recorded.

INCIDENT REPORTING

1. Any unforeseeable or unanticipated incident that has occurred at any private clinic shall be reported in writing to the Director General of Health or any other person authorized by the DG.
2. It shall be reported the next working day or the day after the incident occurred.
3. The unforeseeable or unanticipated incident shall include :-
 - 3.1 deaths of patients of the private clinic from unexplained cause or under suspicious circumstances that are required to be reported to the police.
 - 3.2 fires in the private clinic resulting in death or personal injury.
 - 3.3 assault or battery of patients in the private clinic by staff.
 - 3.4 malfunction or intentional or accidental misuse of patient care equipment that occurs during treatment or diagnosis of patient in the private clinic. This can have an adverse effect on the patient or staff.
4. A private clinic shall retain all reports on investigations and findings in any incident as required by the law.
5. The Director General may request any further information if necessary.
6. The holder of COR or PIC shall not discriminate or retaliate against anybody who in good faith provides any information.

EMERGENCY CARE SERVICES

Disaster preparedness

1. The holder of COR or PIC shall maintain a written plan on disaster preparedness.
2. All the staff should understand the plan.
3. The plan shall be readily available for inspection.
4. All staff shall assist relevant authorities in evacuation of mass casualties during disasters located within their vicinity.

Emergency call information

1. Emergency call information shall be exhibited at a conspicuous part of a clinic.
2. Emergency call information shall include the following information:-
3. Tel no. of fire and police departments.
4. Information and contact no.'s of all staff to be contacted in case of an emergency.
5. Telephone no.'s of hospitals within the locality
6. Telephone no.' s of ambulance services.

Basic emergency care services

1. All clinics shall have a well defined care system in providing basic outpatient emergency care services.
2. The nature and scope of such emergency care services shall be in accordance of their capabilities.
3. All private clinics shall provide immediate emergency care services which include life saving procedures.
4. Assesment of a patients condition to determine the nature, urgency and severity of the patients immediate medical need shall be done by a registered medical officer.
5. There should be proper SOP's to follow when providing emergency treatment.
6. There shall be proper record keeping.
7. Prior to transferring a case to another healthcare facility they should be notified of the impending transfer.

8. Emergency resuscitative and life support procedures pending transfer of the critically ill shall be provided.

Grievance Mechanism

1. Patients/relatives can complain orally or in writing
2. Identify staff who will be responsible to take or accept any grievance
3. All complains need to be received and documented immediately
4. All complains to be forwarded to holder of COR or PIC by the next working day
5. The holder of COR or PIC shall cause for an investigation to be made and provide a reply to the complaints within fourteen days from date of receipt of complain.
The reply should include:
 - i) result of the investigation
 - ii) if the complaint is dissatisfied with the reply he may refer the matter to the DG in writing