

STANDARD OF PRIVATE AMBULATORY CARE CENTRE

Name of Facility:

Address:

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

PROVISION	ITEM	YES	NO	COMMENT
	INFRASTRUCTURE & EQUIPMENT			
	Location			
R.50(1)	Free from undue noise (<i>no disturbance to patients & staff</i>)			
R.50(2)	Not exposed to excessive smoke, foul odours or dust.			
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			
	Patient transport			
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			
	Ramp			
R.52(6)(a)	Size ≥ 1.1 m wide			
R.52(6)(a)	Landing ≥ 1.8 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			
R.52(6)(f)	Comply with Fire Services Department			

PROVISION	ITEM	YES	NO	COMMENT
	Entrance and exit			
R.59(1)	Main entrance adjacent to lobby with minimum disturbance			
R.59(2)	Entrance designed for wheelchairs and stretchers			
R.59(3), (4)	Separate emergency entrance (<i>accessible to pedestrian, ambulance and traffic</i>)			
R.59(3), (5)	Separate service entrance (<i>close to storage room/area, elevators and kitchen</i>)			
R.59(3)	Separate patient and visitors entrance			
R.59(6)	Separate exit for deceased (<i>no obstruction</i>)			
	Door			
R.54(1)	Size ≥ 1.2 m wide (<i>for patient care</i>)			
R.54(2)	Patients' toilet and bathroom door ≥ 0.9 m wide, not swing in, neither to corridor			
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)	Clearance at the bottom of exterior door ≤ 0.6 cm			
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 ≥ 1.1 m wide			
R.52(5)(a)	Landing ≥ 1.8 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			
	Elevator (Lift)			
R.52(3)(a)	Clear opening ≥ 1.2 m			
R.52(3)(a)	Size ≥ 1.5 m x 2.1m			
R.52(3)(a)	Capacity $\geq 1,500$ kg			
R.52(4)	DOSH certification (CF)			

PROVISION	ITEM	YES	NO	COMMENT
R.52(2)(b)	≥ 2 elevators (<i>if ≥ 60 beds on other than ground floor</i>)			
R.52(2)(c)	≥ 3 elevators (<i>if ≥ 200 beds on other than ground floor</i>)			
R.122(2)	Kept in good repair and operating condition			
	Corridor			
R.53(1)	Size ≥ 2.1m wide (<i>exceptions may be permitted for corridor limited to foot traffic in a single department</i>)			
R.53(2)	Handrails (<i>compulsory for patients with physical disabilities unit i.e. orthopaedic & rehabilitation units</i>)			
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			
R.56(1), 57(1)	Non-toxic (<i>safe</i>)			
	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 (<i>safe</i>)			
	Window and ventilation			
R.55(1)	Window in all patient rooms			
R.89(1)	All rooms and areas adequately ventilated			
R.89(2)	Adequate ventilation system to provide 10 AC/hour without recirculation in rooms/areas with excessive heat, moisture, odours & contaminants originate			
R.89(3)	Microbiology work rooms or areas shall not have any recirculation of air and shall be air-conditioned			
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			
R.89(8)	The ventilation system shall be capable of removing toxic and noxious fumes and provide adequate fresh air to the laboratory			
R.89(9)	All air supplied to sensitive room or areas shall be delivered at or near the ceiling of such room (e.g. OT)			

PROVISION	ITEM	YES	NO	COMMENT
	Electrical supply			
R.83	Appropriate and grounding type of electrical sockets			
R.84(1)	Adequate number of electrical sockets			
R.84(2)	Uninterrupted power supply to life support systems			
R.84(3)	No adaptors, extension cords or junction boxes			
R.85	Adequate lighting fixtures for illumination in all areas			
R.86	Circuit-breakers in all critical areas and located in or adjacent to the 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.87(6)	On site fuel storage to sustain emergency electrical generating equipment operation for eight hours.			
R.122(2)	Emergency lights are kept in good repair and operating condition			
	Plumbing			
R.81(1)	Designed & installed, to be easily cleaned & maintained			
R.81(4)	Installation to prevent the possibility of cross connection between safe and unsafe water supplies or back siphonage			
R.81(6)	No floor trap in clean areas, OT and critical care units			
	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 (<i>for healthcare professional</i>)			
	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			
	Refuse & hazardous waste			
R.91(1)	Kept in impervious, non-absorbent with close and 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			

PROVISION	ITEM	YES	NO	COMMENT
R.92(4)	Handling all hazardous waste in accordance to relevant authority to protect persons and environment			
	Sewage and sewerage system			
R.90	No exposed sewer line be located directly above working, storing or eating surfaces or areas or where medical or surgical supplies are prepared, processed or stored			
	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 for medical report			
R.229(1)	Emergency call information (with contact number)			
	Nurse station			
R.73(5)	1 station : 36 patients			
R.64(3)	Distance ≤ 24.4m from patients' rooms			
R.73(2)	Area for writing patients' records & charts (<i>at or nearby</i>)			
R.73(4)	Clinical hand washing facilities (<i>at or nearby</i>)			
R.73(1)(a)	With a nurse call system from patients			
R.73 (1)(b) & (c), R.120	Communication system available within & with other facilities in electronic system			
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	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			

PROVISION	ITEM	YES	NO	COMMENT
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			
	Examination and treatment room			
R.54	Doors size $\geq 1.2\text{m}$ & 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.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)	Hand washing facility			
R.79(1)(b)(ii)	Examination light			
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.49(3)(c)(v)	Contaminated equipment shall not be used for patients			
R.20	Resuscitation facilities			
8th Schedule (c)	Ventilation assistance equipment (e.g. ambubag)			
(f)	Laryngoscope and endotracheal tubes			
(d)	ECG monitoring with cardiac defibrillator			
(g)	Suction equipment			
(b)	Oxygen			
(h)	Urinary catheters			
(i)	Drugs (<i>Adrenaline, Atropine, Steroid, S.Bicarb</i>)			
(e)	Intravenous therapy			
	Blood Transfusion Facilities and Services			
S.59 (1)	Hospitals, maternity homes, surgical ambulatory centre and all facilities with regular emergency care services shall maintain proper blood storage facilities			
S.60	Hospitals, maternity homes, surgical ambulatory centre and all facilities with regular emergency care services shall maintain a minimum blood supply in its premises at all times for its daily use or in a position to obtain blood quickly			

PROVISION	ITEM	YES	NO	COMMENT
	from others licensed or Government facilities			
S.59 (3)	Blood and blood products shall be stored in refrigerators			
S.59 (1)	Hospitals, maternity homes, surgical ambulatory centre and all facilities with regular emergency care services shall maintain proper blood storage facilities			
	Nourishment station or pantry			
R.80(1)	Sink with hand washing facilities			
R.80(1)	Serving equipment (<i>between schedule meals</i>)			
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			
	Clean utility room			
R. 75(1)	At least one room per nurses' station			
R. 75(1)	A counter and space for the storage			
R. 75(2)	No hand washing sink			
R. 75(3)	Air-conditioned room			
R.115	Clean linen storage separate from laundry			
	Soiled utility room			
R.76	At least one room per nurses' station			
R.76	Work counter			
R.76	Waste receptacle			
R.76	Soiled linen receptacle			
R.76	Washing equipment			
R.76	Clinical sink			
R. 81(2)	Double compartment sinks to clean utensil and equipment with adequate counter space on both sides and depth (<i>according to its function</i>)			
	Janitor's closet			
R.77(1)(a)	Sink (<i>preferably with a floor receptor with mixing taps</i>)			
R.77(1)(b)	Hook strip for mop handle			
R.77(1)(c)	Shelf for cleaning material			

PROVISION	ITEM	YES	NO	COMMENT
R.77(1)(d)	Waste receptacle with impervious linear			
R.77(1)(e)	Hand washing facility			
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			
R.341	Patient room / ward/ care area			
	Total number of room (single, double etc)			
	Total number of bed according to the rooms			
R.62(1)	Separated for male and female (≥ 12 year-old)			
R.62(2)	Separated for paediatric (<12year-old)			
R.54	Doors size ≥ 1.2 m & not swing into the corridors			
R.58	Adequate ceiling height (air condition ≥ 2.4 m, if not ≥ 3.0 m)			
R.63(1)	Patient room dimension ≥ 3.0 m			
R.63(1)	Area for single bedded room ≥ 10.0 m ²			
R.63(2)	Clear space between sides/foot of bed from walls ≥ 0.9 m			
R.63(2)	For multiple bedded room: 1.5m between beds			
R.66(2)	Separate locker for each patient			
R.67(2) - (5)	Bed head lamp/toilet lights/night lights			
R.71	A nurse call system (<i>within easy reach of each bed</i>)			
R.66(3)	Cubicle curtains with built-in curtain tracks			
R.68	Hand washing facilities			
R.49(3)(c)(iv)	Patient with infectious and communicable diseases shall not be admitted with non - infectious or non-communicable diseases			
R.64(1)	No beds shall be placed in corridors or other than patient room areas except in case of emergency			
R.64(3)	Distance from nurses' station ≤ 24.4 m			

PROVISION	ITEM	YES	NO	COMMENT
	Toilet facilities			
R.54(2)	Clear opening for patients' toilet door \geq 0.9m & not swing inward, neither into corridor			
R.69(1)	Ratio 1 toilet: 4 beds; adjacent or within patients' room.			
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 in each patient care unit			
R.427	Separate toilets for male and female staff			
R.56(2)	No carpet			
	Bathing facilities			
R.70(1)	Ratio 1 shower : 4 beds			
R.70(2)	Grab bar			
R.70(2)	Nurse call system			
R.70(3)	Adequate space to fits in wheelchair			
R.54(2)	Clear opening for patient's bathroom door \geq 0.9m & not swing inward, neither into corridor			
56(2)	No carpet			
R.112(2)	No laundry conducted here			
	Staff facilities			
R. 425	Commensurate with the type, scope and capability			
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 (<i>optional</i>)			
	Public Amenities			
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. 420	Room or area for nappy change			

PROVISION	ITEM	YES	NO	COMMENT
R. 421	Easily accessible public telephone within the facility			
R. 422	Cafeteria does not hinder patient care activities (<i>if available</i>)			
R. 423	Breastfeeding room with nappy change facilities			
R. 424	Clean and separated prayer room and ablution area for male and female (<i>optional</i>)			
	Body-holding room			
R. 417(2)	Dedicated entrance to avoid transfer through public areas			
R. 417(1)	Separated from other rooms or areas			
R. 418(2)	Well-ventilated body-holding room			
	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			
R.122(2)	Sterilizers are kept in good repair and operating condition			
R.122(2)	Anaesthetic machines are kept in good repair and operating condition			
	STANDARD & REQUIREMENT (DOCUMENTATION)			
	Organization & Management			
S.2	Person responsible (<i>for body corporate only</i>)			
S.32,R.12	Person in charge (<i>Qualified, trained & experienced</i>)			
S.2	Board of management (<i>authority & responsibility</i>)			
S.77	Board of Management (2 from the Advisory committee)			
S.78-80	Advisory Committee (MDAC or MAC)			
R.49(1)	Infection control committee			
R.248	Pharmacy and therapeutic committee (healthcare professional and a registered pharmacist)			
R.11(2)	Plan of organization in writing (<i>specify the authority, responsibility and functions of each category of staff</i>)			
R.16(1),(2)	Appointment of head of department (<i>if ≥ 2 RMP or RDP per specialty in accordance to the type of facilities & services provided</i>)			
R.16(3)	Relevant qualification, training & experience of HOD			
S. 62 &	Transfusion committee - to advise the licensee or PIC on matter relating to blood transfusion & assist in investigation			

PROVISION	ITEM	YES	NO	COMMENT
R.300	blood transfusion reaction			
R.240(1)	Pharmaceutical services (<i>compulsory if ≥ 50 bedded</i>)			
R.240	Pharmacist as the head of pharmaceutical services (<i>compulsory if ≥ 50 bedded</i>)			
R.124(1)	Establishment of nursing department if ≥ 6 SRN			
R.124(4)	Registered nurse as the director of nursing department			
R.124(2)&(3)	Nursing departmental plan (<i>specify the authority, responsibility and functions of each category of staff</i>)			
R.130(1)(a)	RMA organizational plan (<i>authority, accountability & communication</i>)			
S.2	Scope of services			
R.340(a)	Patient admission less than 23 hours			
R.340(b)	All procedures and surgeries do not generally result in extensive blood loss, require major or prolonged invasion of body cavities, directly involve major vessels or constitute an emergency or life-threatening procedure.			
	Personnel			
R.342	In accordance to the nature and scope of facilities & services provided			
R.13(1)	All healthcare professional are registered with proper qualification, training & experience			
R. 25(b)	Name and professional status of staff providing care or treatment			
R.21(1)(a)	Written contract with the RMP & RDP			
R.21(1)(i), 14(1)(a)	Professional care by of RMP & RDP (<i>list with current APC</i>)			
S.2	Other allied health professional (<i>clinical psychologist, physiotherapist, occupational therapist etc</i>)			
R.16(4)	Adequate qualified staff to operate the department			
R.240	Pharmacist (<i>compulsory if ≥ 50 bedded</i>)			
R.125(2)(a), (b)	Ratio ≥ 1 nursing staff (<i>plus personal aide</i>) to 2 patients & ≥ 45% are SN			
R.125(2)(c)	Sufficient number of registered nurses on duty at all times, ratio for acute cases 1 SN : 1 patient			
R.125(3)	Ratio ≥ 1 nursing staff (<i>plus personal aide</i>) to 4 chronic patients (<i>long-stay, geriatric, rehabilitation, psychiatric or convalescent care or service</i>) & ≥ 40% are SN			
R.125(4)(a)	Nursing services is provided on all shifts			
R.125(4)(b)	SRN on duty at all time to plan, supervise and evaluate on nursing care			
R.125(4)(c)	Qualified nursing staff appropriate to patient care			
R.125(4)(d)	Specialized SRN on duty at all times (<i>where required</i>).			
R.126	Assistant nurse or community nurse shall be under the supervision SRN at all times			
R.129(1)	Personal care aide may provide care only as specified in Seventh Schedule			

PROVISION	ITEM	YES	NO	COMMENT
R.129(2)	Personal care aide at all times supervised by SRN.			
R.129(3)	1 personal care aide : 14 patients			
R.17(4)	List of volunteers with proper professional qualification, training and experience			
R.130(1)(c)	RMA job descriptions (<i>function, responsibility & training</i>)			
R.130(2)(a)	Qualification of RMA appropriate to patient care			
R.130(2)(b)	Specialized RMA on duty at all times (<i>where required</i>).			
R.131	RMA at all times supervised by RMP			
S.2	Technical staff (<i>medical laboratory technologist, scientific officer etc</i>) (<i>Qualified, trained & experienced</i>)			
R49(4)	Appointed, trained and authorized infection control staff			
R.39(1)	Patient relations officer with job description			
R.93(2)	Housekeeping supervisor			
R.123(1)&(2)	Maintenance supervisor			
	Policies and standard operating procedures			
R.22	Relevant written policies, standards, procedures and guidelines are available and accessible to all personnel			
R.21(1)(b)	Procedure for patient admission, discharge & transfer			
R.21(1)(c)	Procedure for patient registration, attendance & referral			
R.344(3)	Written transfer agreement with any hospital to have admitting privileges			
R.21(1)(g)	Policy on volunteers (if available)			
R.17(1)	Proper orientation, planning and supervision on volunteer programme for personal care duties			
R.21(1)(j)	Policy on supervision & training for housekeeping staff			
R.21(1)(h)	Policy on general maintenance			
R.93,95-97	Organised housekeeping services planned (<i>cleaning method, germicide selection and cleaning equipment maintenance</i>)			
R.122(1)	Policy and procedure on organised maintenance programme for safety, welfare and comfort of the occupants in the entire facility			
R.21(1)(e)	Policy on maintenance of physical plant & equipment			
R.21(1)(a),49	Policy on infection control			
S.83(1),(4)	Contract & information on Managed Care Organisation			
R.121(1)	Established arrangement for patient transport			

PROVISION	ITEM	YES	NO	COMMENT
R.21(1)(k)	Policy on transportation of laboratory specimens			
R.21(1)(d)	Policy on Incident reporting			
S.36&R.38 – 41	Updated policy and procedure on grievance mechanism			
R.(2)(a)&(b)	Written policy available to all staff & review every 5 years			
	Clinical practice guidelines			
R.22(1),(2)	In accordance to the facilities and services provided			
R.124(5)	Policy and procedure on patient's care for each category of nursing			
R.127(1)	Reviewed and revised procedures on nursing and personal care			
R.130(1)(b)	Policies and procedures to guide RMA to provide care			
R.132(1)	Reviewed and revised procedures on safe and effective patient care by RMA			
R.49(6)	Infection control directives or guidelines			
R. 249	Written policy and procedures for control, accountability, drug distribution, storage and quality assurance			
	Records, registers, returns and books			
R.34	Staff register			
R.35	Volunteer register (<i>if available</i>)			
R.13(3)	Temporary register for RMP & RDP with current APC			
R.30	Patient's medical record register (<i>record the movement</i>)			
R.33	Outpatient register			
R.29	Admission and discharge register			
R.42 – 46	Appropriate patients' medical record (refer 6 th 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 or RDP			
R. 15(1)	Written orders for diagnostic procedure, medication or treatment by RMP or RDP			
R15(3)	Verbal order shall be immediately recorded by relevant staff and countersigned by RMP or RDP within 24hours			
R.47	Valid consent before any procedure shall be in writing			
R.48	Surgeon with a RMP may sign a statement delay would endanger patient life in replacement of consent			
R.18(a)	Suitable inpatient identification on admission			
R.25(a)	Patients' right to identify staff (uniform, badges etc)			
R. 25(b)	Patients' right to know the name & professional status of staff providing care or treatment			
R.26(1)(a)	Patients' right to be informed on the estimated charges for services			

PROVISION	ITEM	YES	NO	COMMENT
R.26(3)	Patients' right to obtain the itemised billing			
R.39(2)	Documented all complaints			
R.49(1),(2), (3)	Record and minutes on infection control programme and system (meeting \geq 3x/year)			
R.49(4)(b)	Documented infection control activities (+ on outbreak)			
R.37	Statistical return (e-reporting)			
R. 19(1)	Record on incident reporting & 6 monthly statistical return			
R.87(7)	Record of test on electrical generating system (\geq 30min/weekly) and monthly test under load condition			
S. 74	Program and activities on quality			
S.74(1),(2)	Information on quality programme and activities			
R.127(3)	Periodically evaluate of the adequacy in term of patient, nursing and personal care needs (<i>with head of nursing</i>)			
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 (<i>optional</i>)			
	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			

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