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COVID-19 Fever Clinic Inspection Checklist- Random

Name of the Facility: _____

Date of Inspection: ____/____/____

| Ref. | Description | Yes | No | N/A | Remarks |
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| 5 | STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES | | | | |
| 5.4. | The HF shall maintain documented evidence of the following: | | | | |
| 5.4.1. | Transfer of critical/complicated cases when required. | | | | |
| 5.4.2. | Patient discharge. | | | | |
| 5.4.3. | Clinical laboratory services. | | | | |
| 5.4.4. | Equipment maintenance services. | | | | |
| 5.4.5. | Laundry services. | | | | |
| 5.4.6. | Medical waste management as per Dubai Municipality (DM) requirements. | | | | |
| 5.4.7. | Surveillance of all protected exposed and non-protected exposed staff. | | | | |
| 5.5. | The HF should maintain a charter of patients' rights and responsibilities posted at the entrance of the premise in two languages (Arabic and English). | | | | |
| 6 | STANDARD TWO: HEALTH FACILITY REQUIREMENTS | | | | |
| 6.3. | The HF should have an accessible website that offers instructions to patients prior to and post visiting the facility. | | | | |
| 6.4. | The HF should have a hotline line number that offers 24/7 support services to suspected patients. | | | | |
| 6.5. | The HF should screen patients for fever and COVID-19 like symptoms before entering the facility. | | | | |

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| 6.8. | The HF should install and operate equipment required for provision of the proposed services in accordance to the manufacturer's specifications. | | | | |
| 6.10. | The HF design shall provide assurance of patients and staff safety. | | | | |
| 6.12. | The HF shall ensure it has in place adequate lighting and utilities, including temperature controls, water taps, medical gases, sinks and drains, lighting, electrical outlets and communications. | | | | |
| 6.15. | HF should maintain availability of Person In-charge for each working shift in the clinic. | | | | |
| 7 | STANDARD THREE: HEALTHCARE PROFESSIONALS REQUIREMENTS | | | | |
| 7.1. | Only DHA licensed HCP are permitted to provide services at the facility. | | | | |
| 7.2. | HF should ensure that all HCP and personnel completed their COVID-19 Vaccination. | | | | |
| 7.3. | The Privileging Committee and/or Medical Director of the health facility shall privilege the physician aligned with his/her education, training, experience and competencies. The privilege shall be reviewed and revised on regular intervals. The privileged physician shall comply with the following: | | | | |
| 7.3.3. | HCP should be well trained and/or experienced with the management of suspected COVID-19 cases. | | | | |
| 7.3.5. | Healthcare workers should be dedicated to fever clinics to minimise risk of transmission and exposure to other patients and healthcare workers. | | | | |
| 7.3.5.1. | Staff should not alternate between the fever clinic and other clinical areas where vulnerable patients are managed. | | | | |
| 8 | STANDARD FOUR: FEVER CLINIC PATIENT SELECTION AND ASSESSMENT | | | | |
| 8.2. | The fever clinic should have a set of minimum required baseline lab work up for the presenting patients as follows: | | | | |
| 8.2.1. | Complete blood count | | | | |
| 8.2.2. | Renal function and Electrolytes | | | | |
| 8.2.3. | Random Glucose | | | | |

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| 8.2.4. | Liver function test including ALT/AST | | | | |
| 8.2.5. | ECG | | | | |
| 8.2.6. | CRP | | | | |
| 8.2.7. | Chest X ray | | | | |
| 9 | STANDARD FIVE: INFECTION CONTROL MEASURES | | | | |
| 9.2. | Standard precautions, particularly good hand hygiene practice, attention to appropriate environmental cleaning, and disinfection, should be strictly implemented by all staff working in the fever clinic. | | | | |
| 9.3. | HF should implement cleaning and disinfection of environmental services in the context of COVID-19. | | | | |
| 9.5. | The facility should ensure appropriate donning and doffing areas for the staff as deemed necessary to ensure staff and patient safety. | | | | |
| 9.6. | Adequate infection control supplies are provided, including biohazard containers and supplies for hand hygiene. | | | | |
| 9.7.2. | Activate daily monitoring for all facility staff before starting their work and it should be documented, including but limited to: | | | | |
| a. | Measuring temperature | | | | |
| b. | Reporting symptoms | | | | |
| c. | History of contact with COVID-19 patient. | | | | |
| 9.7.4. | Maintain physical distance between patients at the waiting area. | | | | |
| 9.9. | The HF should ensure that assigned staff and patients in each zone do not interact with each other. | | | | |
| 10 | STANDARD SIX: HASANA REPORTING | | | | |
| 10.2 | The HF should assign dedicated staff for data entry on HASANA. | | | | |
| 12 | STANDARD EIGHT: WASTE MANAGEMENT AND DISPOSAL | | | | |
| 12.4 | Facilities should dispose of the biohazard containers according to facility and regulatory requirements. | | | | |

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| 12.5 | Needles must be discarded in biohazard containers that are closable, puncture-resistant, leak-proof on sides and bottom, labelled, and color-coded (e.g., sharps container). Then dispose of the biohazard containers according to facility and regulatory requirements. | | | | |
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