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Standards for Outpatient Facilities

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The Health Policy and Standards Department (HPSD) developed this Standard in collaboration with Subject Matter Experts and would like to acknowledge and thank these health professionals for their dedication toward improving quality and safety of healthcare services in the Emirate of Dubai.

Health Regulation Sector

Dubai Health Authority

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INTRODUCTION

Health Regulation Sector (HRS) forms an integral part of Dubai Health Authority (DHA) and is mandated by DHA Law No. (14) of the year (2021) amending some clauses of law No. (6) of 2018 pertaining to the Dubai Health Authority (DHA), to undertake several functions including but not limited to:

- Developing regulation, policy, standards, guidelines to improve quality and patient safety and promote the growth and development of the health sector;
- Licensure and inspection of health facilities as well as healthcare professionals and ensuring compliance to best practice;
- Managing patient complaints and assuring patient and physician rights are upheld;
- Governing the use of narcotics, controlled and semi-controlled medications;
- Strengthening health tourism and assuring ongoing growth; and
- Assuring management of health informatics, e-health and promoting innovation.

The Standards for Outpatient Facilities aims to fulfil the following overarching DHA Strategic Priorities (2026):

- Pioneering Human-centered health system to promote trust, safety, quality and care for patients and their families.
- Make Dubai a lighthouse for healthcare governance, integration and regulation.
- Leading global efforts to combat epidemics and infectious diseases and prepare for disasters.
- Pioneering prevention efforts against non-communicable diseases.

EXECUTIVE SUMMARY

The purpose of this document is to assure the provision of the highest levels of safety and quality in DHA licensed Outpatient facilities. The standards have been developed to align with the evolving healthcare needs and international best practices. The standard includes several aspects which are required to provide effective, efficient, safe and high-quality services. This standard includes health facility registration, licensing requirements, facility requirements, healthcare professional requirements and elaborates on the minimum services. This includes but not limited to safety, pre-assessment, diagnostics, informed consent, equipment use and maintenance, medication management, health records management and infection control. Outpatient facilities are healthcare facilities that provide medical service and treatments to patient who do not require an overnight stay. These facilities are designed to offer convenient, accessible and specialized care. This Standard should be read in conjunction with the following DHA documents:

- Emergency Medication Policy.
- Standards for Non-surgical Cosmetic Procedures.
- Health Screening and Immunization of Healthcare Professionals Policy.
- Standards for Points of Care Testing.
- Standards for hyperbaric Oxygen Therapy Services.
- Clinical Privileging policy.
- Clinical laboratory accreditation policy.
- Standards for Physiotherapy Services.
- Standards for Tele-health Services.



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- Standards for Laboratory Services.
 - Standards for Diagnostic Imaging Services.
 - Manual for Licensing Health Facility.
 - Health Information Asset Management.

DEFINITIONS

Ambulatory pharmacy: is any pharmacy that practices retail within an outpatient setting/day surgical center to serve the patients only, where prescriptions medications dispensed.

Company Clinic: is an in-house clinic directly integrated into the company premises, categorized under a General Clinic. May provide one or more of the following services:

- First aid services led by a nurse.
- If General Medical services or medical speciality services will be provided it will be categorized as general clinic, speciality clinic or Polyclinic and must adhere to their requirements accordingly.
- Occupational health services.

Dental General Clinic: is an outpatient health facility that is focused on diagnoses, treatment, and management of overall oral healthcare needs by a General Dentist.

Express Clinic: is an outpatient clinic incorporated within a pharmacy. An Express clinic can be either with full outpatient set-up such as but not limited to: examination bed, physician's office, sterilization devices, medical waste, laundry etc. or one spacious room to provide the required clinical services. An Express clinic may include specialties such as Family Medicine and/or Internal Medicine.

General Clinic: is an outpatient health facility that is focused on diagnosis, treatment, and management of patient by one General Practitioner or more.

Hotel Clinic: is an in-house clinic directly integrated into the hotel facilities, categorized under a General Clinic. May provide one or more of the following services:

- First aid services led by a nurse.
- If General Medical services or medical speciality services will be provided it will be categorized as general clinic, speciality clinic or Polyclinic and must adhere to their requirements accordingly.

Healthcare Professional: is a qualified professional who is authorized and licensed by the Dubai Health Authority (DHA) to practice any healthcare professions as per the Unified Healthcare Professional Qualifications Requirement (PQR) or the United Arab Emirates.

Local Anesthesia: is the application or injection of a drug or combination of drugs to stop or prevent a painful sensation to a circumscribed area of the body where a painful procedure is to be performed.

Licensure: means issuing a license to operate a health facility to an individual, government, corporation, partnership, limited liability company, or other form of business operation that is legally responsible for the facility's operation.

Outpatient Care: is any health care delivered on an outpatient basis. Outpatient care facilities includes, but not limited to, Polyclinic, Specialty clinic, General clinic, Dental clinic, or any other health facility where health care services are provided to individuals on an outpatient basis.

Patient: is any individual who receives medical attention, care, treatment or therapy by a DHA licensed healthcare professional in a DHA licensed health facility.

Polyclinic: is an outpatient clinic that is a free-standing medical facility, designed to receive and undergo patients to necessary medical examinations and treatments, encompassing a minimum of 2 different specialities which may include diagnostics, dental and TCAM services, to patients that do not a stay overnight.

Procedures: Are medical and surgical interventions, which require Informed Consent from the patients or next of kin/ legal guardian, as per UAE Federal Laws.

People of Determination: are people with special needs or disabilities, under the National Policy for Empowering People with Special Needs. The UAE law defines a person with special needs as someone suffering from a temporary or permanent, full or partial deficiency or infirmity in his physical, sensory, mental, communication, educational or psychological abilities to an extent that limits his possibility of performing the ordinary requirements as people without special needs.

Procedure Room: is an access-controlled room for the performance of medical procedures/ minor surgical procedures that do not require an aseptic field but may require the use of sterile instruments or supplies. Procedure rooms are considered open areas. Local anaesthesia and minimal and moderate sedation may be administered in a procedure room, but anaesthetic agents used in procedure rooms do not require special ventilation or scavenging equipment.

Risk Management: is defined as 'a logical and systematic method of establishing the context, identifying, analysing, evaluating, treating, monitoring and communicating risks associated with

any activity, function or process in a way that enables the organization to minimize losses and maximize opportunities.

Specialty Clinic: is an outpatient health facility that provides a single health service to patients, this includes services in either preventative health, primary care, medical specialities and/or therapeutic outpatient services.

Topical Anaesthesia: is the application of an anaesthetic agent (spray, gel, cream or eye drops) or directly to the skin or mucous membranes, intended to produce a transient and reversible loss of sensation to a circumscribed area.

Telehealth Centre: is a facility that utilizes telecommunications technologies such as multimedia, e-mail and smart applications, by health facilities or practitioners, so as to enable safe and direct communication between the patients and health practitioners to assess their medical conditions and provide necessary treatment.

ABBREVIATIONS

ACLS	:	Advanced Cardiac Life Support
AED	:	Automated External Defibrillator
ATLS	:	Advanced Trauma Life Support
AN	:	Assistant Nurse
BLS	:	Basic Life Support
CI	:	Internal Chemical Indicators
CPC	:	Clinical Privileging Committee
DHA	:	Dubai Health Authority
DM	:	Dubai Municipality
DSC	:	Day Surgical Centre
ENT	:	Ear, Nose, Throat
FANR	:	Federal Authority for Nuclear Regulation
GP	:	General Practitioner
HBOT	:	Hyperbaric Oxygen Therapy
HIA	:	Health Information Asset
HRS	:	Health Regulation Sector
ICT	:	Information and communication technology
MOHAP	:	Ministry of Health and Prevention
NRP	:	Neonatal Resuscitation Program



- PALS** : Paediatrics Advanced Life Support
- PEARS** : Paediatric Emergency Assessment, Recognition, and Stabilization
- PM** : Preventive Maintenance
- PPE** : Personal Protective Equipment
- PQR** : Unified Healthcare Professional Qualification
- RN** : Registered Nurse

1. BACKGROUND

Outpatient facilities, known as ambulatory Clinics, are healthcare settings where medical services are provided to patients who do not require overnight stay or extended hospitalization. These facilities offer a wide range of medical services, treatments and procedures. Outpatients facilities include (but are not limited to): Polyclinics, Specialist Clinics, Primary Health Centre, General Clinics this include: Hotel and Company Clinics, Dental Clinics and Telehealth centre.

The Outpatients Facilities may accomplish the following functions in a wide range of clinical specialties:

- Consultation with medical specialists, examination and investigations.
- Follow up review consultation and ongoing case management.
- Patient screening prior to surgery (Pre-operative Services).
- Health education or counselling sessions for patients and families.
- Referral of patients to other units or disciplines for ongoing care and treatment.
- Referral for admission to a hospital for inpatient services.
- Performing simple procedures that require only local anaesthesia or no anaesthesia, like dressing change and splinting and casting.

2. SCOPE

2.1. Outpatient Facilities licensed by DHA.

3. PURPOSE

- 3.1. To ensure the highest safety and quality levels within DHA Licensed Outpatient Facilities.

4. APPLICABILITY

- 4.1. DHA licensed healthcare professionals and health facilities providing healthcare services in Outpatient Facilities.

5. STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES

- 5.1. All health facilities providing Outpatient services shall adhere to the United Arab Emirates (UAE) Laws and Dubai regulations.
- 5.2. Health facilities aiming to provide Outpatient services shall comply with the DHA licensure and administrative procedures available on the DHA website <https://www.dha.gov.ae>
- 5.3. Licensed health facilities opting to add providing Outpatient shall inform Health Regulation Sector (HRS) and submit an application to HRS to obtain permission to provide the required service.
- 5.4. The health facility should develop the following policies and procedures; including but not limited to:
- 5.4.1. Patient Assessment and referral criteria
 - 5.4.2. Patient education and Informed consent
 - 5.4.3. Patient health record

- 5.4.4. Infection control measures and hazardous waste management
- 5.4.5. Incident reporting
- 5.4.6. Patient privacy
- 5.4.7. Medication management
- 5.4.8. Emergency action plan
- 5.4.9. Patient referral/transfer
- 5.4.10. Fall risk policy
- 5.4.11. Sentinel event policy.
- 5.4.12. Pain assessment
- 5.4.13. Patient complaint
- 5.4.14. Service description and scope of service
- 5.4.15. Clinical audit, quality performance management and learning system
- 5.4.16. Staffing plan, staff management and clinical privileging.
- 5.4.17. Stay Visit Certificate
- 5.4.18. Waiting time or delay in service
- 5.4.19. Fire safety plan
- 5.4.20. Immunization (if applicable)
- 5.4.21. Sick-leave.
- 5.5. The health facility shall provide documented evidence of the following:
 - 5.5.1. Clinical laboratory services. (if applicable)
 - 5.5.2. Equipment maintenance services

- 5.5.3. Laundry services. (if applicable)
- 5.5.4. Medical waste management as per Dubai Municipality (DM) requirements.
- 5.5.5. Housekeeping services. (if applicable)
- 5.5.6. Radiology and diagnostic imaging services (if applicable)
- 5.5.7. Blood bank and/or transfusion services
- 5.5.8. NABIDH Contract.
- 5.6. The health facility shall maintain charter of patients' rights and responsibilities posted at the entrance of the premise in two languages (Arabic and English).
- 5.7. The health facility shall have in place an equipment management plan including record periodic preventive maintenance as per manufacture recommendations.
- 5.8. The health facility shall ensure it has in place adequate lighting and utilities, including temperature controls, water taps, medical gases, sinks and drains, electrical outlets and communications.
 - 5.8.1. The health facility shall inventory, label, inspect, test, maintain and improve utility systems and components. The quality of drinking water should be tested quarterly, and quality of non-potable water tested every 6 months. Dental water lines should be tested and treated according to manufacturer's guidelines'
- 5.9. It's recommended that Outpatient facilities seek international accreditation.
- 5.10. Outpatient facilities providing Tele-health services shall comply with the DHA standards for telehealth services for registration and licensing requirements.
- 5.11. Out-patient facilities includes but not limited to the following:

- 5.11.1. Polyclinics
- 5.11.2. Specialty Clinics
- 5.11.3. General Clinics this include: Hotel and Company Clinics
- 5.11.4. Express Clinics
- 5.11.5. General Dental Clinics.

6. STANDARD TWO: HEALTH FACILITY REQUIREMENTS

- 6.1. The health facility should meet the health facility requirement as per the DHA Health Facility Guidelines (HFG), Part B chapter 360 – Outpatient Units.
- 6.2. Health facilities providing outpatient services shall install and operate equipment required for provision of the proposed services in accordance to the manufacturer's specifications.
- 6.3. All Outpatient facilities shall conduct pre-construction risk assessment for any new construction, renovation or demolition activity.
- 6.4. The health facility shall ensure the following:
 - 6.4.1. Easy access to the health facility and treatment areas for all patient groups.
 - 6.4.2. Provide assurance of patients and staff safety.
 - 6.4.3. A Safe environment where the qualified personnel, facilities, equipment, and if applicable, emergency drugs and equipment are immediately available.
 - 6.4.4. Easy access to people of determination.
 - 6.4.5. Ensure patients privacy in all consultation, examination rooms and treatment rooms.

- 6.4.6. A high level of infection control in all aspects.
- 6.4.7. Visual surveillance system
- 6.4.8. Access control system
- 6.4.9. Smoking prohibition in all facilities and in the outdoor yard bordering, neighbouring or surrounding the facility.
- 6.5. The Outpatients facility should be designed to minimise the ambient noise level within the facility and transmission of sound between consult/treatment areas, staff areas and public areas.
- 6.6. Outpatient facilities are not permitted to operate on a 24-hour basis.
- 6.7. Dental, ENT, Ophthalmology specialities require dedicated rooms, ensuring that these distinct healthcare practices are not shared with others.
 - 6.7.1. Refer to the DHA Health facility Guidelines.
- 6.8. Obstetrics and Gynaecology room may be shared with orthopaedics, neurology, and urology services, as all these specialities utilize ultrasound machines.
 - 6.8.1. Patient washrooms shall be near to the ultrasound room and easily accessible, with a nursing call system.
- 6.9. Signage shall be provided to direct people unfamiliar with the facility to entrances and facility parking areas (if provided).
- 6.10. The facility shall be aware of not using carpets in examination and treatment room.
 - 6.10.1. If used in patient waiting areas and corridors, carpet should be glued or stretched tight and free of loose edges and wrinkles.

6.11. Special Consideration shall be provided to people of Determination, aligned with DHA Standards for people of Determination.

6.11.1. If the clinic has two floors, there must be a treatment room/ Dental room on the ground floor to accommodate people of determination and elderly patients in case the elevator is not operational.

6.12. Adding real or artificial plants are strictly prohibited in all outpatient facilities to prevent the spread of infection. However, exceptions apply for the reception and waiting areas where such additions are permissible as they do not involve treatment procedures.

6.13. The health facility shall have IT, Technology and Health Records services which includes and not limited to:

6.13.1. Electronic health records and patient information systems.

6.13.2. Access to electronic forms and requests for investigations and supplies.

6.13.3. Shall develop a plan to integrate electronic medical system with NABIDH project.

6.14. Assessment rooms may be shared with the regular treatment room; however, if separate, it shall ensure the availability of the following:

6.14.1. Well-equipped with accurate monitoring devices

6.14.2. Adequate space and lighting

6.14.3. Specified area for documentation

6.14.4. Hand washing station

- 6.14.5. Hazard signs for patient safety
- 6.14.6. Ventilated room
- 6.14.7. Vital signs can be shared with vaccinations room but not with non-cosmetic surgical procedures
- 6.14.8. If the facility provides hair transplant services, the procedure room must be dedicated solely to hair transplant procedures and not shared with other services.
- 6.15. Outpatient facilities shall ensure providing sterilization room with the following requirements:
 - 6.15.1. Should be physically separated from all other areas of the facility.
 - 6.15.2. Should be arranged to handle the cleaning sterilization and disinfection of all medical instruments and equipment for all the facilities services.
 - 6.15.3. Access to the sterilization room should be restricted. This room should contain High-Vacuum steam sterilizers and sterilization equipment to accommodate heat sensitive equipment.
 - 6.15.4. The clean room should contain handwashing stations.
 - 6.15.5. The use of internal chemical indicators to verify that individual packaged items have been exposed to one or more of the conditions necessary for sterilization.
 - 6.15.6. There must be a dedicated specific space (not less than 2 square meters) for cleaning and sterilization of dental instruments. Instruments sterilization and

cleaning should not be executed inside the dental room. The instrument processing area, physically or, at a minimum, spatially, into 3 distinct areas for:

- a. Decontamination (soiled items)
- b. Preparation, packaging and sterilization (clean items)
- c. Sterile storage (sterile items).

6.15.7. Ensure one-way workflow, from contaminated to clean area.

6.15.8. Hinged items must be completely open during cleaning process.

6.15.9. Internal chemical indicators (CI) should be placed inside every package at the centre of the sets where sterilant penetration is most difficult to achieve.

6.15.10. All packages must be labelled completely and correctly.

- a. Labels should identify the operator, the sterilizer, the cycle number/load number, the date of processing and the expiration date, when applicable.
- b. Peel pouches should be labelled only on the plastic side or on an autoclave tape.

6.15.11. Ensure the availability of a deep sink in the sterilization room.

6.15.12. Ensure the sterilizer chamber is evaluated by performing Quality Checks (QC).

This includes and not limited to confirming adequate air removal from the sterilizer chamber. (i.e. Bowie dick test)

6.15.13. Provide Sterilization logbook to keep track of the sterilization cycles. Relevant information such as the date, time, cycle number, instrument sterilized, operator name should be documented.

6.16. All Outpatient facilities providing vaccinations shall ensure the following requirements:

6.16.1. Patient's privacy

6.16.2. Adequate handwashing facilities for staff, and antimicrobial hand sanitizers available

6.16.3. Equipped with the necessary medical supplies, waste disposal

6.16.4. Comfortable seating for patient

6.16.5. Proper storage for vaccines with continues temperature monitoring with alarm system (for out of range temperature alarming)

6.16.6. Controlled temperature conditions

6.16.7. Aseptic procedures during administration

6.16.8. Uninterrupted Power System (UPS)

6.16.9. Vaccine carrier with digital thermometer

6.16.10. Fully stocked Emergency crash cart.

6.17. Outpatient facilities providing home healthcare services shall designate a home healthcare office and appoint a DHA licensed nurse to manages home health services.

7. STANDARD THREE: HEALTHCARE PROFESSIONALS REQUIERMENTS

7.1. All healthcare professionals in the Outpatient facilities must hold an active DHA license and work within their scope of practice.

- 7.2. The health facility shall appoint a Medical Director.
- 7.2.1. Please refer to DHA policy of roles and responsibilities of medical director.
- 7.3. Facilities shall have documented processes for determining its overall staffing needs, by number, type of staff and staff qualifications specific to their job responsibilities
- 7.4. The Medical Director shall ensure an appropriate number of trained healthcare professionals and nonclinical and support staff are available.
- 7.5. There shall be a sufficient number of registered nurses and assistant nurses on duty to plan, implement and evaluate nursing care.
- 7.6. All healthcare professionals must maintain a valid Basic Life Support certification (BLS).
- 7.7. Advanced Cardiac Life Support (ACLS) is required only from:
- 7.7.1. Cardiologist
- 7.7.2. Anaesthesiologists
- 7.7.3. Emergency specialist
- 7.7.4. Intensivists
- 7.7.5. Pulmonologist
- 7.7.6. Medical Oncologist
- 7.7.7. Hospice and palliative Medicine specialist
- 7.7.8. Interventional Radiologists
- 7.7.9. Respiratory therapist.
- 7.8. Paediatric Advanced life Support is required only from:

- 7.8.1. Paediatricians
 - 7.8.2. Paediatric sub-specialist
 - 7.8.3. Paediatric Dentists
 - 7.8.4. Anaesthesiologist, and Emergency specialist who are working with paediatric patients.
- 7.9. Continuing Professional Development (CPD) activities shall be documented, evidence of a learning and development system shall ensure the skill and competence of staff by allocation.
- 7.9.1. Outpatient facilities should provide general facility orientation for all new staff and specific orientation to the new staff member's according to their roles and responsibilities including infection control practices, emergency procedures, policies, reporting of medical errors and workplace violence prevention and maintain a record of that.
- 7.10. The Clinical Privileging Committee or Medical Director of the health facility is responsible to privilege and un-privilege all healthcare providers as per DHA policy for Clinical Privileging.
- 7.11. Refer to **Appendix 1** for list of healthcare professional requirement per outpatient facility category services.
- 7.12. For Non-surgical Procedures performed in Outpatient setting refer to Appendix 1 in the DHA Standard for Non-Surgical Cosmetics procedures.

7.13. For Surgical Procedures performed in speciality clinic and polyclinic refer to List of Permitted Procedures by Day Surgical Centre in DHA Standards for Standalone Day Surgical Procedures.

7.14. Outpatient facilities should maintain documented, standardized and current personnel information for each staff member including current job description, staff work history, immunizations and/or evidence of immunity and performance evaluation results.

8. STANDARD FOUR: LABORATORY AND DIAGNOSTIC SERVICES

8.1. Outpatient services may provide in-house lab services or through a contract with an external DHA licensed laboratory.

8.2. All DHA licensed Clinical Laboratories shall obtain accreditation as per the DHA Clinical Laboratory Accreditation Policy.

8.3. Blood collection should be done in the:

8.3.1. Phlebotomy room if there is an in-house laboratory.

8.3.2. Patient's bedside at the treatment and/or procedure rooms if the lab service is outsourced.

8.4. Phlebotomy room shall have a seating space, a work counter, a hand-washing station, and a reclining chair or gurney for patients who become unsteady.

8.4.1. Rooms should be equipped with sharp box, foot-operated medical waste bin, general waste bin and medical fridge for samples storage, ice packs, sample carrier, and sample log book if the lab is outsourced.

8.4.2. Medical fridge may be placed in the treatment room.

- 8.5. Work counters shall be sufficient to meet equipment specifications and laboratory technicians needs and have the following:
 - 8.5.1. Hand-washing stations and counter sinks
 - 8.5.2. Communications service
 - 8.5.3. Electrical service.
- 8.6. Laboratory area shall have appropriate facilities for storage and refrigeration of blood, urine, and other specimens.
- 8.7. Storage cabinets or closets for Clinical laboratory shall be provided.
- 8.8. Outpatient services providing Laboratory Services shall ensure the following:
 - 8.8.1. At least one DHA licensed laboratory technician shall be available; he/she shall be responsible for the laboratory investigations.
 - 8.8.2. One full time or part time specialist/consultant pathologist shall be supervising and managing the clinical laboratory services in the Outpatient Care Facility.
 - 8.8.3. Laboratories in Outpatient settings shall be accredited as per the DHA Clinical Laboratory Accreditation Policy.
- 8.9. For further information refer to DHA Standards for Laboratory service and DHA Health facility guidelines- laboratory unit.
- 8.10. Outpatient services may provide in-house Diagnostic Services or through a contract with an external DHA licensed diagnostic facility.
- 8.11. Outpatient facilities providing Diagnostic Services shall ensure the following:

- 8.11.1. One full time or part time specialist/consultant radiologist shall be available to supervise and manage the radiology services in the Outpatient Care facility.
- 8.11.2. One DHA licensed radiographer shall be available; he/she shall be responsible for the radiology investigations.
- 8.11.3. Outpatient Care facilities may provide specific range of diagnostic imaging services within the facility premises such as but not limited to the following:
 - a. Ultrasound
 - b. Conventional radiography (general radiology)
 - c. Computer Tomography (CT)
 - d. Magnetic Resonance Images (MRI)
 - e. Mammography.
- 8.11.4. Radiation protection requirements of the Federal Authority of Nuclear Regulation (FANR) shall be incorporated into the specifications and the building plans. The health facility may need a certified physicist or a qualified expert to specify the type, location, and amount of radiation protection to be installed in accordance with the final approved layout and equipment selections.
- 8.11.5. Sharing reception and support areas for diagnostic imaging services (e.g, reception area,) is permitted if required by the facility.
- 8.11.6. For further information refer to DHA Standards for Diagnostics Imaging Services.

9. STANDARD FIVE: MEDICATION MANAGEMENT

- 9.1. Outpatient facilities may apply to obtain a DHA “ambulatory pharmacy” license.
- 9.2. Medication use in the Outpatient care facility shall be organized to meet patient needs and comply with applicable local and federal laws and regulations in the UAE.
- 9.3. Medications shall be managed to ensure safe and effective practice.
- 9.4. All Healthcare professionals are responsible for medication use and medication safety.
- 9.5. All medications must be stored in accordance with the manufacturer requirements to ensure their efficacy and safety.
- 9.6. Expired medications must be removed and discarded according to DHA Medications Disposal and Waste Management.
 - 9.6.1. For controlled/semi-controlled drugs disposal the facility should contact the drug control section.
- 9.7. Potential medication risks are identified, Look-alike, sound-alike (LASA) medication names shall be identified and segregated.
- 9.8. For multi-used medication ensure labelling and recording the open date and expiration date of the medication.
- 9.9. A secured lockable steel cabinet(s) for controlled and semi controlled drugs.
 - 9.9.1. All Outpatient facilities must provide controlled and semi-controlled registry book.
- 9.10. Medications prescribed and/or administered shall be noted in the patient’s health record.

9.10.1. Copy of controlled and semi-controlled drug prescription is maintained in the patient's health record.

9.11. Drug incidents and medications errors shall be reported to HRS through the email: Drugcontrol@dha.gov.ae by filling the Drug Incident Report form within forty-eight (48) hours. The form is available in **Appendix 5** of the DHA pharmacy Guidelines.

9.12. All licensed Outpatient Care facilities are not allowed to sell medicinal products in the facility.

9.12.1. For Further information refer to DHA Pharmacy Guidelines.

10. STANDARD SIX: EMERGENCY MEDICATION AND EQUIPMENT'S

10.1. The health facility shall ensure the following:

10.1.1. Emergency medications are available as per the DHA policy for Emergency medications.

10.1.2. Emergency medications can be accessed quickly and easily when needed and are replaced when used, damaged, or out of date.

10.1.3. Emergency medications can be stored in emergency carts, cabinets, or bags.

10.1.4. Emergency medications and equipment's as well as oxygen cylinder must be immediately available to treat adverse reactions associated with administered medications.

10.2. As per DHA Emergency Medication Policy, hotel clinics and company clinics that are licensed under general clinics do not require to provide emergency medication.

10.3. Mandatory Emergency Equipment for each Outpatient care facility is available in

Appendix 1

10.4. The Outpatient Care facility shall maintain effective maintenance for each medical equipment as per the manufacturer recommendation. This includes the following:

- 10.4.1. Electrical safety
- 10.4.2. Checklist for maintenance schedule
- 10.4.3. Documentation of failure incidence and repairs done.

10.5. The facility shall eliminate the use of extension cords.

10.6. The Outpatient facility may provide topical and/or local anaesthesia, for the following procedures:

- 10.6.1. Minor surgical procedures performed such as wound suturing, mole removals or incision and drainage of superficial abscesses, etc.
- 10.6.2. Non-surgical cosmetic procedures as per the DHA standards for non-surgical cosmetic procedures.

10.7. Outpatient facilities may use Nitrous Oxide for dentistry services only and shall fulfil the following requirements:

- 10.7.1. Should apply to HRS to provide clinical training for Nitrous Oxide (N2O) sedation and should fulfil all criteria mentioned in the DHA Guidelines for Clinical Training Facilities.
- 10.7.2. The pediatric dentist shall be granted Clinical Privilege to provide N2O sedation by the Clinical Privileging Committee (CPC) or Medical Director of

the health facility aligned with his/her training credentials and qualifications, training, competence, practical independence and experience.

10.7.3. The Physician administering the Nitrous oxide shall be a consultant or specialist/dentist DHA license with practical training and/or a course on sedation/analgesia used and shall have:

- a. Be capable of establishing a patent airway and positive pressure ventilation
- b. Hold an active certification on Advanced Cardiac Life Support (ACLS) if treating adults or Pediatrics Advanced Life Support (PALS) if treating children.
- c. Have the ability to manage patients whose level of sedation becomes deeper than initially intended.
- d. If the above points are not met, an anaesthetist must administer the sedative medications.

10.7.4. Registered Nurse for monitoring patients receiving Nitrous Oxide assisting the treating physician shall competent the following requirements:

- a. Basic Life Support (BLS)
- b. Insertion of Intravenous (IV) lines
- c. Assessment and monitoring of patients under sedation
- d. Pain assessment and management

- e. Medicine preparation and administration which includes understanding of pharmacology of the agents that are administered
- f. ECG recording, oxygen administration, pulse oximetry to the nurse competencies.

10.7.5. Medical Equipment's required for Nitrous Oxide:

- a. Nitrous Oxide Delivering system
- b. Emergency crash cart with proper supplies and medication
- c. Oxygen supply
- d. Suction apparatus with different size suction tubes
- e. Airway equipment: appropriately sized oral airways, endotracheal tubes, laryngoscopes, oxygen masks and laryngeal masks
- f. Defibrillator
- g. Pulse oximeter
- h. Electrocardiographic (ECG) monitor
- i. Blood pressure apparatus with different size cuffs
- j. Refrigerator for pharmaceuticals.

10.7.6. Pre-anaesthesia evaluation includes

- a. Physical examination
- b. Medication history
- c. Allergy history
- d. Anaesthesia history

- e. Surgical history
 - f. Review of diagnostic investigation (e.g., laboratory, ECG, X-Ray)
 - g. Verification of NPO status
 - h. Formulation and discussion of anaesthesia plan with patient and/or legal guardian.
- 10.7.7. The following should be present and monitored in patient receiving Nitrous Oxide
- a. Normal respiration
 - b. Oxygen saturation
 - c. Heart rate
 - d. Blood pressure
 - e. Normal eye movement
 - f. Intact protective reflexes.
- 10.7.8. Informed consent from the legal guardian should be documented in the patient's record prior to administration of Nitrous Oxide.
- 10.7.9. For further information about Nitrous Oxide, Refer to DHA Guidelines for Pediatric Dentistry.
- 10.8. For sedation requirements in Day Surgery Centres, refer to appendix 3 in the DHA Standards for Standalone Day Surgery Centres.
- 10.9. The person who can use the items of crash cart shall be licensed healthcare professionals involved in management and use of emergency medications should be:

- 10.9.1. Certified in Basic Life Support (BLS) or equivalent depend on the specialty of the hospital/scope/clinical area.
- 10.9.2. For Urgent Care; professionals must maintain valid training/certification in: Cardiopulmonary Resuscitation (CPR); Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), Pediatric advanced life support (PALS) and (NRP) Neonatal Resuscitation Program
- 10.9.3. If the facility is receiving adults only; then health professional should maintain CPR; BLS and ACLS.
- 10.9.4. If the facility is receiving pediatric; then health professional should maintain CPR; BLS and PALS.
- 10.9.5. If the facility is providing NICU; then health professional should maintain the Neonatal Resuscitation Program (NRP).
- 10.9.6. For Trauma centers; then health professional should maintain Advanced Trauma Life Support (ATLS).
- 10.9.7. Appropriately trained to provide basic cardiopulmonary resuscitation in emergency cases and possess up to date evidence of capability.
- 10.9.8. Know their role in the event of a medical emergency, and ensure they are sufficiently trained and competent to carry out that role.
- 10.9.9. Experience and aware of how to use emergency medications.
- 10.10. For further information, refer to the DHA Policy for Purchase of Emergency and Essential Medications.

10.11. As per DHA Emergency medication policy, hotel clinics and company clinics that are licensed under general clinics do not require to provide emergency medication.

11. STANDARD SEVEN: INFECTION CONTROL

11.1. Outpatient care facilities must have an infection control and prevention to identify and reduce risks of acquiring and transmitting infections among patients, healthcare personnel, and visitors.

11.2. Outpatient Care facility shall provide safe care and services by focusing efforts on reducing harm to patients and staff. The most common causes of harm in health system were identified by the World Health Organization (WHO) Patient Safety Solutions. It aims to save lives and prevent medical errors.

11.3. Infection prevention control policy and procedures shall be implemented.

11.3.1. All equipment shall be supplied in adherence to Prevention and Control of Infection (PCI) Standard Requirements of Equipment and Items **Appendix 2**.

11.4. Monitoring shall be implemented to control the spread of infection.

11.5. The Infection Control Department shall report to the Medical Director.

11.6. The infection control program shall support safe practice and ensure a safe environment for customers, healthcare workers and visitors.

11.7. Healthcare professionals' immunization protocol must be followed to ensure staff and patient safety. Refer to DHA Policy for health professional screening and immunization.

- 11.8. The facility must have a contract with a specialized company to regularly collect, transport and destroy medical waste materials according to the conditions issued by Public Health Department in Dubai Municipality.
- 11.9. The facility shall provide colour coded bins that all healthcare professionals must adhere to the correct segregation of the waste as per the waste type:
- 11.9.1. Yellow for medical waste bins
 - 11.9.2. Black for general waste bins
- 11.10. Providing Medical waste, general waste and foot-operated medical waste bins in all treatment/procedures and examination rooms.
- 11.11. Safe handling and disposal of sharps, including the provision of medical devices incorporating sharps protection.
- 11.11.1. Discard sharp box when it's expired as per the facility policy or when it reaches (3/4) full.
- 11.12. A hand-washing station with a hands-free operating tap and liquid or foam dispensers shall be provided in all examination, treatment and procedures room.
- 11.12.1. Wall-mounted non-refillable soap dispensers should be provided in all examination, treatment and procedures room.
 - 11.12.2. Wall-mounted tissue dispensers should be provided in all examination, treatment and procedures room.
 - 11.12.3. Non-refillable hand sanitizer dispenser shall be provided in addition to hand-washing stations.

11.13. Sinks shall be designed with deep basins, made of porcelain, stainless steel, or solid surface materials.

11.14. Health professionals are required to consistently utilize Personal Protective Equipment (PPE) as a crucial measure to prevent the spread of the infectious diseases in healthcare setting.

11.15. All staff shall be adequately trained on basic principles and practices of Infection control.

11.16. The curtains shall be easily washable and subject to regular changes to uphold infection control, ensuing a hygienic environment for patients and staff.

11.16.1. Cleaning process of curtains shall be documented continuously.

11.17. Dental infection control measures shall be used in the facility to prevent or reduce the potential for disease transmission, measures shall include but, not limited to the following:

11.17.1. Standard precautions

11.17.2. Hand Hygiene

11.17.3. Personal protective equipment

11.17.4. Sterilization and disinfection of patient care items

11.17.5. Environmental infection control

11.17.6. Medical waste management

11.17.7. Dental unit water lines, bio-film and water quality.

11.17.8. Dental hand-pieces and other devices attached to air and water lines.

11.18. For further information please refer to DHA Communicable disease notification policy.

12. STANDARD EIGHT: HEALTH INFORMATION ASSET MANAGEMENT

12.1. Ensure Confidentiality of all HIA within the health facility.

12.2. All HIA assets within the Entity must be classified as per DHA Health Information Assets Classification policy.

12.3. All HIA assets should be labelled, processed, and stored strictly in accordance with the classification levels assigned to them.

12.4. As per ICT Health Law, All HIS records must be stored for at least Twenty-five (25) years from the date of the last health Procedure/Encounter of the Data Subject/Patient.

12.5. All Paper HIS must be digitized after maximum one (1) year of the release of this standard, and must be retained as same. The physical medical records should be destroyed after it is digitized according as per DHA policy for Health Information Asset Management.

13. STANDARD NINE: PATIENT CONSENT

13.1. As per the UAE federal laws and DHA regulations, the health facility shall provide patients with information that will enable them to participate in making informed decision regarding procedures/treatments.

13.2. As per the Federal Decree Law No. (4) Of 2016, Concerning Medical Liability, Article 5, Informed Consent may not be mandatory in the following conditions:

- 13.2.1. Immediate medical intervention is required, where consent cannot be obtained for any reason whatsoever. However, the clinical circumstances and other relevant reasons for not taking the Informed consent must be recorded.
- 13.2.2. Where the patient has a contagious disease, which represents a threat to public health and safety.
- 13.3. Different types of written consents should be obtained from the patient based on the type of procedures/treatments which include, but not limited to:
- 13.3.1. Surgical or invasive procedures
 - 13.3.2. Anaesthesia
 - 13.3.3. Use of blood and blood products
 - 13.3.4. Chemotherapy and radiation therapy
 - 13.3.5. Interventional procedures such as endoscopy, or any other high-risk procedures/treatments
 - 13.3.6. Use of telehealth services
 - 13.3.7. Informed Consent in case students are involved in any form of patient care.
- 13.4. Prior to providing Informed Consent, the treating physician should discuss with the patient the proposed procedure/treatment details, including but not limited to:
- 13.4.1. The patient's condition and diagnosis
 - 13.4.2. The proposed procedures/treatments and aftercare requirements
 - 13.4.3. The status of procedures/treatments (Approved, experiment, etc.)
 - 13.4.4. Potential benefits, side effects and risks

- 13.4.5. Recovery and expected outcome
- 13.4.6. Alternative options for the procedures/treatments (when applicable)
- 13.4.7. The name of the treating physician/team.
- 13.4.8. Patient Identification.
- 13.5. All the above points should be documented in the consent form.
- 13.6. In case the patient is incompetent or unable to give the consent, the relationship of person signing the consent should be clearly documented in the consent.
- 13.7. Consent should be in both languages' Arabic and English or any other language the community needs.
- 13.8. Informed Consent should include but not limited to the following:
 - 13.8.1. Patient full name as per the passport/Emirates ID, age, gender and patient identification number
 - 13.8.2. Name of the proposed procedure/treatment
 - 13.8.3. Name, date, time and signature of the patient or next of kin
 - 13.8.4. Name, date, time and signature of the treating physician
 - 13.8.5. Name and signature of the witness or interpreter.
- 13.9. For further information please refer to DHA Guidelines for Patient Consent.

14. STANDARD TEN: PATIENT CARE

- 14.1. A comfortable care environment shall be provided in the facility with focus on patient privacy.
- 14.2. Ensure to manage the flow of patients.

- 14.3. The patient has the right to refuse the plan of care but this has to be documented and signed by the patient.
- 14.4. For examination and procedures involving female patients, it is mandatory to have a female healthcare professional present alongside the doctor, this may be a DHA registered female nurse.
- 14.5. Outpatient Care facility management shall ensure that the health care environment is safe, functional, supportive and effective for patients, families and staff members.
- 14.5.1. The facility shall establish a fire safety plan for early detection, confining, extinguishment, rescue, evacuation and alerting the Dubai Civil Defence.
- 14.5.2. The facility should train staff to respond to fire events in building, orientation on the fire safety measures must be included to new staff induction program.
- 14.5.3. There should be evacuation maps posted in the facility to indicate current locations marked with "You are here" to provide information regarding escapes routed and emergency exists.
- 14.5.4. The facility shall be aware about the following:
- a. Location and use of fire hose reel/Fire Extinguisher/Fire blankets
 - b. Assembly points
 - c. Fire alarms/call point break glass/pull station.
- 14.6. The Outpatient Care facility shall accommodate the needs of patients from different cultures and languages; this may include, but not limited to, providing educational material through SALAMA in several languages and providing accessible translator list.



14.7. The facility shall ensure displaying emergency contact numbers for accessible communication during urgent situations.

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APPENDICES

APPENDIX 1: LIST OF REQUIREMENTS AS PER OUTPATIENT FACILITY CATEGORY

Category	Sub-category	Minimum healthcare professional requirements	Director of the facility	Minimum Emergency Medical Equipment Required
Outpatient facilities (Clinics and Centres)	<u>Polyclinic</u>	<ul style="list-style-type: none"> Full time DHA licensed Specialist/Consultant/Dentist/Physicians/GP Full time registered nurse (RN) and assistant nurse (AN) Full time general dentist (if service is provided) Part time/full time pathologist/ radiologist (if lab or diagnostic services are available) 	<ul style="list-style-type: none"> Operated by Medical Director 	<ul style="list-style-type: none"> AED Crash Cart (recommended) Oral airways with different sizes based on specialties, oxygen cylinder, Nebulizer, Suction machine with suction tubes, Nebulizer and oxygen masks.
	<u>Specialty Clinic</u>	<ul style="list-style-type: none"> Full time DHA licensed specialist/consultant physician(s). Full time registered nurse (RN) and assistant nurse (AN) 	<ul style="list-style-type: none"> Operated by doctors of the same specialty. 	<ul style="list-style-type: none"> AED Crash Cart (recommended) Oral airway with different size.

	<u>General Clinic</u>	<ul style="list-style-type: none"> • Full time GP • Full time registered nurse (RN) and assistant nurse (AN) 	<ul style="list-style-type: none"> • Operated by General practitioners 	<ul style="list-style-type: none"> • AED • Oral airways with different sizes based on specialties, oxygen cylinder, Nebulizer, Suction machine with suction tubes, Nebulizer and oxygen masks.
	<u>Express Clinics</u>	<ul style="list-style-type: none"> • Full time GP • Full time registered nurse (RN) 	<ul style="list-style-type: none"> • Operated by general practitioners 	<ul style="list-style-type: none"> • AED • Oral airways with different sizes based on specialties, oxygen cylinder, Nebulizer, Suction machine with suction tubes, Nebulizer and oxygen masks.
	<u>General Dental Clinics</u>	<ul style="list-style-type: none"> • Full time General Dentist • Full time RN 	<ul style="list-style-type: none"> • Operated by General Dentists 	<ul style="list-style-type: none"> • AED • Oral airways with different sizes based on specialties, oxygen cylinder, Nebulizer, Suction machine with

				suction tubes, Nebulizer and oxygen masks.
	<u>Hotel Clinic *</u>	<ul style="list-style-type: none"> Full time Nurse if scope of service is first aid 	<ul style="list-style-type: none"> Led by Nurse if scope of service is first aid. 	<ul style="list-style-type: none"> AED <p>If the hotel clinic has medical services the following additional requirement should be available:</p> <ul style="list-style-type: none"> Oral airways with different sizes based on specialities, oxygen cylinder, Nebulizer, Suction machine with suction tubes, Nebulizer and oxygen masks.
	<u>Company Clinic *</u>	<ul style="list-style-type: none"> Full time Nurse if scope of service is first aid. 	<ul style="list-style-type: none"> Led by Nurse if scope of service is first aid. 	<ul style="list-style-type: none"> AED. <p>If the company clinic has medical services the following additional requirement should be available:</p>

				<ul style="list-style-type: none"> Oral airways with different sizes based on specialities, oxygen cylinder, Nebulizer, Suction machine with suction tubes, Nebulizer and oxygen masks.
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*Clinics in hotels or companies providing medical services or medical speciality services will be categorized as general clinic, speciality clinic or Polyclinic and must adhere to their requirements accordingly.

**Company clinics providing occupational services shall follow the requirements as per the standard for Occupational health services.

APPENDIX 2: PCI REQUIREMENTS OF EQUIPMENT AND ITEMS.

PCI Standard Requirements of Equipment and Items			
SN	Description	Quantity	Areas and Uses
1.	Non-refillable hand sanitizer	All	All clinical area, hall ways, waiting area.
2.	Temperature/Humidity Set (Hygrometer)	1	Wherever medications are stored.
3.	Linen hamper	2	Dirty utility room/staff changing room and each female changing room in radiology (if applicable)
4.	Dirty linen trolley	As required	To transfer dirty linen (if applicable)
5.	Clean linen trolley	As required	To transfer clean linen (if applicable)
6.	Non-refillable Antimicrobial handwash solution	All	The whole facilities.
7.	Wall mounted sharp box	As required	Treatment room, vaccination room, procedure rooms, sample collection rooms and sterilization room.
8.	Infection Control posters	As required	For ads, awareness, medical waste and general waste bins.
9.	Clean utility room	As required	Closed cupboards to keep clean linen and to keep clean trolley to transfer clean linen (if applicable)
10.	Dirty Utility room	As required	Sink with hand wash facility, PPE cabinet or gloves and mask dispenser, rack for CSSD used items, linen hamper and dirty linen trolley (if applicable)
11.	Medical waste room	1	Requirements for medical waste room Bins with yellow bags will be required for the disposal of sharps, pathological/medical waste/Ventilated room/Biohazard signs/Locked room.