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## Hyperbaric Oxygen Therapy (HBOT) Inspection Checklist- Random

Name of the Facility: \_\_\_\_\_

Date of Inspection: \_\_\_\_/\_\_\_\_/\_\_\_\_

Ref.	Description	Yes	No	N/A	Remarks
5	<b>STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES</b>				
5.3.1	Employ a Consultant/Specialist Physician in Undersea Hyperbaric Oxygen Medicine.				
5.3.3	Install equipment for the provision of HBOT service.				
5.5	The health facility shall provide documented evidence of contracts for the following:				
5.5.1	Contract with a nearby hospital (in case not located in a hospital) in case of any complication or emergency				
5.5.2	Clinical laboratory services				
5.5.3	Equipment maintenance with manufacturing company or an authorised dealer				
5.5.4	Housekeeping services				
5.5.5	Laundry services				
5.5.6	Medical waste management as per Dubai Municipality (DM) requirements.				
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).				
5.8	The health facility 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.				

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5.9	Relocation of the HBOT chamber shall be possible only with DHA approval.				
6	<b>STANDARD TWO: HEALTH FACILITY REQUIREMENTS</b>				
6.8.	HBOT treatment room shall:				
6.8.4	Be adequately ventilated with a smoke evacuator.				
6.8.8.	Have “No smoking” signs visibly displayed.				
6.9.	Class A (Multiplace) treatment room requirements:				
6.9.10	The chamber shall have breathing equipment for all occupants, and an extra spare one.				
6.10.	Class B (Monoplace) treatment room requirements:				
6.10.11	Lighting over the Class B chamber shall be incandescent, preferably with dimmer control.				
6.10.14	There shall be screens between chambers to ensure patient privacy.				
6.11	Class B (Monoplace Chambers), it shall:				
6.11.3	Be free of cracks internally or externally.				
6.11.4	Be free of corrosion, damage, dents, gouges or other damage internally and externally.				
6.11.6	Have alarms for low-pressure gas monitoring panel, which are tested and maintained routinely.				
6.11.7	Be equipped with audible and visual alarms.				
6.11.8	Have a warning sign displaying prohibited material inside the hyperbaric chamber, which shall be posted at the chamber entrance <b>Appendix 3.</b>				
6.11.9	Have an external breathing air source in case of emergency evacuation from the chamber.				
6.11.15	Have earth grounding system with a regular documented maintenance.				
6.12	Gas cylinder storage room shall				
6.12.6	Have an external exhaust ventilation provided outside the building area.				

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6.12.8	Maintain an alarm that monitors the high and low gas pressure.				
6.12.9	Maintain documentation of staff training in emergency procedures in the event of any incident related to gas pressure release.				
6.13	The health facility shall maintain the following medical equipment and supplies:				
6.13.1	Apparatus to measure blood pressure.				
6.13.2	Electrocardiographic monitoring equipment.				
6.13.3	Resuscitation trolley equipped with relevant resuscitation equipment and apparatus, medical O2 and medications.				
6.13.4	Intravenous (IV) supplies such as syringes, needles, tape, etc.				
6.14	The health facility shall maintain a record of HBOT chamber:				
6.14.1	Installation checklist				
6.14.2	Assessment checklist				
6.14.3	Operational checklist				
6.14.4	Cleaning checklist				
6.14.5	Maintenance log				
6.14.6	Log of use of the chamber.				
<b>7</b>	<b>STANDARD THREE: HEALTHCARE PROFESSIONALS REQUIREMENTS</b>				
7.2	The team providing HBOT services could comprise of the following; elaborated in Appendix 4.				
7.2.1	Physician responsible for the HBOT service provision				
7.2.2	HBOT Chamber Operator (HBOT Technicians)				
7.2.3	Inside Attendant (IA)- for class A chamber				
7.2.4	Outside Attendant- for class A chamber				
7.2.5	Registered Nurse (RN)				
7.2.6	Safety Officer				
7.2.7	Patient Care Coordinator/Administrator				

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7.2.8	Fire Marshal.				
7.4	Chamber Operator (HBOT Technician)				
7.4.3	Since the Chamber Operator is in-charge of operating the multiplace or monoplace hyperbaric chamber(s), his/her presence is essential during the working hours of the health facility providing HBOT services.				
7.4.4	There shall be one (1) chamber operator for every two (2) monoplace chambers during all working hours of the health facility providing HBOT services.				
7.4.5	At least one additional staff, preferably the Physician responsible for HBOT in addition to the Chamber Operator must be present during the treatment.				
7.4.7	There shall be two (2) Chamber Operators for every multiplace chamber during all working hours of the facility or two (2) chamber operators where multiplace chambers are co-located and operated with a single centralised operating console, with direct visual access to the entire HBOT chamber(s).				
7.5	Inside Attendant (IA)				
7.5.1	The physician responsible for the HBOT service shall ensure that the IA is DHA Registered Nurse (RN) and/or HBOT technician who is mentally and physically fit to work in a Class A multiplace chamber with compressed air. The minimum patient to IA ratio for optimal operational safety should typically be as follows:				
a	Minimum staffing ratios for clinically stable patients to IA is 8:1. This ratio is comprised of ACLS certified healthcare professionals, who will be readily available in the event of any emergency. This ratio may be exceeded at any time based on patient acuity.				
b	For complicated patients requiring increased level of personal care, minimal patient to IA ratio is 4:1.				

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c	For critical care patient, minimum patient to IA ratio of 1:1 (ventilated patients may require 2-staff per patient).				
ii	For critically ill patients or intubated patients it is recommended that a RN experienced with hyperbaric medicine be present inside the chamber with the patient at all times. The patient: IA ratio should be 1:1.				
7.7.1	The ratio of the RN to the physician shall be 1:1.				
7.8.1	Any staff employed by the HBOT facility could be nominated as the safety officer.				
7.9.1	Any staff employed by the HBOT facility could be nominated as the fire marshal.				
7.9.2	The health facility shall ensure that the fire marshals receives formal training relevant to fire and related hazards and at least one (1) fire marshal is present on the premises during working hours.				
7.9.4	The training shall be documented and included in staff files.				
7.9.5	The fire marshal shall conduct and document fire evacuation drills at least 2-3 times a year.				
7.11	All healthcare professionals shall be trained in HBOT and have Basic Life support (BLS) and Advanced Cardiac Life Support (ACLS).				
7.12	Valid certificate of Pediatric Advanced Life Support (PALS) when applicable.				
<b>8</b>	<b>STANDARD FOUR: PRE-HBOT EVALUATION, PATIENT SELECTION AND INFORMED CONSENT</b>				
8.5	All patients or legal guardian of children or incompetent patients shall sign an informed consent form before starting the HBOT.				
8.6	The Informed Consent forms shall be in Arabic, English or other language based on community needs, in accordance to the DHA Guidelines for Patient Consent Appendix 9.				

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8.7	If a patient approaches a HBOT facility more than once for different medical conditions then a new informed consent shall be requested due to the change in medical condition and hence change in treatment plan.				
11	<b>STANDARD SEVEN: EQUIPMENT AND MAINTAINANCE</b>				
11.4	The multiplace equipment shall be continuously and accurately monitored for the following:				
11.4.1	Oxygen Concentration				
11.4.2	Carbon di Oxide Concentration				
11.4.3	Humidity				
11.4.4	Temperature				
11.4.5	Pressure.				
11.5	Equipment used for these measurements shall be periodically calibrated according to manufacturer's recommendations and requirements.				
11.6	The internal oxygen concentration for the monoplace chambers shall be continuously monitored.				
12	<b>STANDARD EIGHT: FIRE SAFETY</b>				
12.3	All the linen used inside the hyperbaric chamber shall be 100% cotton.				
13	<b>STANDARD NINE: MANAGEMENT OF HBOT PATIENTS DURING A PANDEMIC</b>				
13.1.2	Ensure staff wear appropriate PPE especially when opening the HBOT Class B chamber as they could be exposed to contaminated droplets.				
13.1.10	It is recommended that each hyperbaric facility make a list of items that are commonly touched by hands, such as faucets or door handles, and implement a schedule of frequent disinfection.				

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