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Day Surgery Centers Inspection Checklist- Final

Name of the Facility: _____

Date of Inspection: ____/____/____

Ref.	Description	Yes	No	N/A	Remarks
5	STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES				
5.6.	All Day Surgical Centres (DSC) are mandated to be accredited within two (2) years of licensure and to upload their accreditation certificate to the facility's Sheryan account.				
5.8.	DSC do not require to have a mortuary in-house, but will require to have a policy for mortuary management				
5.9.	The DSC shall maintain a policy and procedures on medication management, medication storage and monitoring of medication inventory and expiration dates consistent with applicable federal and local legislation and regulations.				
5.10.	The DSC shall have in place internal policies and procedures including but not limited to:				
5.10.1.	Service Description and Scope of Services.				
5.10.2.	Patient acceptance/referral criteria.				
5.10.3.	Lab and diagnostic services and turn-around timeframes for reporting noncritical and critical results.				
5.10.4.	Patient assessment and admission criteria.				
5.10.5.	Patient education, communication and informed consent.				
a.	Consent should include the need for higher sedation within the same facility or following transfer to a				

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	higher-level facility				
5.10.6.	Staffing plan, staff management and clinical and privileging.				
5.10.7.	Clinical Audit.				
5.10.8.	Patient health record, confidentiality and privacy as per DHA Policy for Health Information Assets Management.				
5.10.9.	Infection control				
5.10.10.	Incident reporting.				
5.10.12.	Reprocessing of reusable equipment, safe use of chemicals used for cleaning and disinfecting.				
5.10.13.	Medical and hazardous waste management as per the Dubai Municipality (DM) requirements.				
a.	There should be an allocated medical waste storage and collection area that is well ventilated and secured from public and patient access.				
b.	The medical waste storage and collection area shall be adequately labelled with a hazard sign to prevent unexpected entry from patients or the public.				
5.10.14.	Monitoring medical, electrical and mechanical equipment, visual inspections for apparent defects and maintenance by the competent entity with valid testing certificates.				
5.10.15.	Laundry and housekeeping services.				
5.10.16.	Patient belongings.				
5.10.17.	Quality, Performance Management and Learning System				
5.10.18.	Violence against Staff/Zero Tolerance.				
5.11.	The health facility should 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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5.13.	All DSC must have a written agreement for patient referral and emergency transfer to a nearby hospital setting. The transfer agreement shall detail the transfer plan/protocol of patients and meet Dubai transfer timeframes for emergency patients as per DHA Policy for Patient Referral and Inter-facility Transfer.				
6	STANDARD TWO: HEALTH FACILITY REQUIREMENTS				
6.7.	The Health Facility shall ensure that access to non-treatment and treatment areas are safe for all patient groups.				
6.8.	DSC should have a contract with the following types of healthcare facilities:				
6.8.1.	A nearby hospital for: referral of urgent and emergency cases, ward and ICU Admissions (if required), Assessment and follow up with professionals, specialties and services not available or not within the scope of the DSC.				
6.9.	The health facility design shall provide assurance of patients and staff safety.				
6.13.	All DSC facilities are required to have an Operating Theatre (OT) equipped to manage permitted surgeries.				
6.14.	Class B Day Surgical Centres will have sufficient medical equipment to manage permitted endoscopic procedures:				
6.14.1.	Procedural sedation shall be performed in designated areas where the patient can be resuscitated if sedation is deeper than intended.				
6.15.	Class A and B (without endoscopy) do not require a ventilator and will have the required medical equipment to manage permitted surgeries:				
6.15.1.	Emergency Medical Service (EMS) call system;				

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6.15.2.	Pulse oximeter				
6.15.3.	Automated External Defibrillator (AED)				
6.15.4.	A surgical sterilizing area available in the clinic or outsourced.				
6.15.5.	Emergency crash cart that includes all emergency supplies and medications.				
6.16.	Class B (with endoscopy), CM and C Day Surgical Centres will have the required medical equipment to manage permitted surgeries:				
6.16.1.	Emergency Medical Service (EMS) call system;				
6.16.2.	Pulse oximeter, and hemodynamic monitoring equipment shall include but not limited to the following:				
a.	ECG				
b.	Heart rate				
c.	Blood pressure				
d.	Central venous pressure				
e.	Temperature, peripheral venous oxygen saturation				
f.	ABG				
6.16.3.	One portable ventilator is required for (1) one to (4) four OTs (backup); and				
6.16.4.	One ventilator is required for two beds in the recovery bay.				
6.22.	DSC shall assure the safe and appropriate practice system for sample collection, storage, blood transportation and other samples.				
6.23.1.	Class A DSC categories must provide:				
a.	Point of Care Testing for glucose, Dipstick urinalysis and Pregnancy test.				
6.23.2.	Class B DSC categories must provide:				
a.	Point of Care Testing for glucose, Prothrombin time/international normalized ratio (PT/INR),				

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	Dipstick urinalysis and Pregnancy test.				
6.23.3.	Class C-M and C DSC categories must provide:				
a.	Point of Care Testing (glucose, Prothrombin time/international normalized ratio (PT/INR), Dipstick urinalysis and Pregnancy test.				
b.	Arterial Blood Gas (ABG)				
6.23.4.	CM and C DSC categories must provide essential onsite radiology services.				
a.	Radiology (or mobile x-ray) should include plain x-rays and chest x-rays.				
6.24.	DSC class CM and C providing solely Ophthalmology services shall have a Point of Care Testing (POCT) for glucose, Dipstick urinalysis and Pregnancy test. Any lab or radiology services may be contracted with an external provider.				
6.25.	Inhouse radiology services is optional for DSC class CM and C providing solely Vascular services.				
6.26.	The health facility shall install and operate equipment required for the provision of proposed services in accordance with the manufacturer's specifications.				
6.28.	The DSC shall maintain a copy of operator and safety manuals of all medical equipment and inventory list with equipment location. All Medical Equipment should be registered and documented properly in the inventory which will be updated every time a new equipment arrives prior to use.				
6.29.	The inventory includes all in use medical equipment only and no medical equipment which is not in use, or not maintained should be stored in the facility.				
6.29.1.	The medical equipment Inventory include the following:				
a.	Device name				

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b.	Description of the device				
c.	The name of the factory				
d.	The supplying company (agent)				
e.	Year of purchase				
f.	Section (location)				
g.	Serial number				
h.	Duration of preventive maintenance work (PM)				
i.	Last date maintenance & the next				
j.	Periodic maintenance reports (qualitative and quantitative tests)				
6.33.	All DSC shall have a Business Continuity Plan to ensure the core functions of the centre are met.				
6.34.	DSC must put in place a written policy that adheres to DHA requirements for patient rights and responsibilities as per the Ministerial Decision No. (14) of 2021 concerning the Patient Rights and Duties Charter				
6.34.1.	Information on patients' rights and responsibilities shall be communicated and displayed in at least two languages (Arabic and English) at the entrance, reception, and waiting for the area(s) of the premises and website.				
8	STANDARD FOUR: PRE-OPERATIVE EVALUATION AND INFORMED CONSENT				
8.1.	All Day Surgical Centres must have in place a written Surgical Care Pathway (Appendix 5).				
9	STANDARD FIVE: PATIENT SAFETY, MONITORING AND DISCHARGE				
9.7.	The DSC shall put in place procedures to rescue patients who are sedated deeper than intended.				
9.9.	A discharge plan shall start from patient admission and include various personnel, information and resources.				
10	STANDARD SIX: CRITICAL CARE AND EMERGENCY MANAGEMENT				

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10.1.	DSC shall have written policies and procedures must be established and implemented. They should define and describe the scope of critical care services that ensure safe and competent delivery of the patients' services.				
10.4.	DSC Class B that uses anaesthetics only for permitted endoscopic procedures shall have a room for post-operative recovery.				
10.5.	DSC Class B (with endoscopy), CM and C must have a room for post-operative recovery or for patients that require extended recovery or for critical patients awaiting emergency transfer.				
10.5.3.	Pharmaceutical agents, oxygen, oral suction, laryngoscope, Ambu-bag shall be readily available in the health facility.				
10.5.4.	Emergency equipment shall include portable ventilators (with different ventilation mode (IPPV, SIMV, spontaneous, PS), tracheostomy set, defibrillator machine, pulse oximetry and vital signs monitor (ECG), Infusion pumps, blood gas analyser with capability for electrolytes measuring and emergency crash cart that includes all emergency supplies and medications.				
10.6.	At a minimum, DSC shall have a clear protocol and provision for essential emergency management for illness and/or injection injuries that occurred for the patient, healthcare professionals, employees or visitors, which needs immediate emergency care and assistance before transport to another health facility.				
10.10.	Emergency devices, equipment and supplies must be available for immediate use for treating life-threatening conditions shall include but not limited				

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	to the following:				
10.10.1.	Defibrillator (except for DSC class A and class B without endoscopy)				
10.10.2.	Emergency cart with emergency medicines.				
10.10.3.	Resuscitation kit, cardiac board and oral airways.				
10.10.4.	Laryngoscope with blades.				
10.10.5.	Diagnostic set.				
10.10.6.	Patient trolley with an IV stand.				
10.10.7.	Nebulizer.				
10.10.8.	Refrigerator for medication.				
10.10.9.	Floor Lamp (Operating light mobile).				
10.10.10.	Sets of instruments shall include suturing set, dressing set, foreign body removal set or minor set and cut down set.				
10.10.11.	Disposable supplies shall include the following:				
a.	Suction tubes (all sizes)				
b.	Tracheostomy tube (all sizes)				
c.	Intravenous cannula (different sizes)				
d.	IV sets				
e.	Syringes (various sizes)				
f.	Dressings (gauze, sofratulle)				
g.	Crepe bandages (all sizes)				
h.	Splints (Thomas splints, cervical collars, finger splints).				
10.10.12.	Fluids (e.g. D5W, D10W, Lactated Ringers, Normosol R, Normosol M, Haemaccel) and Glucometer.				
10.10.13.	Sufficient electrical outlets to satisfy monitoring equipment requirements, including clearly labelled outlets connected to an emergency power supply.				
10.10.14.	A reliable source of oxygen.				
10.10.15.	Portable vital signs monitor (ECG, Pulse-Oximetry,				

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	Temperature, NIBP, EtCO2).				
10.10.16.	Suction apparatus.				
10.10.17.	One portable ventilator is required for (1) one to (4) four OTs (backup)				
Note:	EtCo2, ventilators and defibrillator are not required in DSC level A and level B (without endoscopy).				
10.10.18.	Storage areas for general medical/surgical emergency supplies, medications and equipment shall be under staff control and out of the path of normal traffic.				
10.10.19.	Policy for maintaining personal items and food in the emergency area shall be established and maintained by the health facility.				
10.11.	Well-equipped ambulance services shall be ready and nearby with licensed, trained and qualified Emergency Medical Technicians (EMT) for patient transportation if required.				
10.11.1.	The service can be outsourced with a written contract with an emergency services provider licensed in Dubai.				
10.11.2.	Ambulance services shall meet Dubai emergency transfer timeframes.				
10.12.	The facility shall have Uninterrupted Power Supply (UPS) or Power Generator.				
Appendix 1:	SUMMARY OF DAY SURGICAL CENTRE CLASSIFICATIONS AND MINIMUM REQUIREMENTS- Class A				
A.	Class A:				
5	Operating theatre				
6	Point of Care Testing				
8	Onsite Sterilizing area *9 (Sterilizing area can be outsourced in DSC Class A and B)				
Appendix 1:	SUMMARY OF DAY SURGICAL CENTRE CLASSIFICATIONS AND MINIMUM REQUIREMENTS- Class B				

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B.	Class B:				
7	Operating theatre				
8	Point of Care Testing				
10	Onsite Sterilizing area *9 (Sterilizing area can be outsourced in DSC Class A and B)				
Appendix 1:	SUMMARY OF DAY SURGICAL CENTRE CLASSIFICATIONS AND MINIMUM REQUIREMENTS- Class CM				
C.	Class CM				
7	Operating theatre				
9	Point of Care Testing *5 (With additional Arterial Blood Gas Testing.)				
10	Onsite radiology *7 (Class A and B may have contract with external radiology if required. Onsite or contracted radiology services is optional for DSC Class CM and C providing solely Ophthalmology or Vascular services)				
12	Onsite Sterilizing area				
Appendix 1:	SUMMARY OF DAY SURGICAL CENTRE CLASSIFICATIONS AND MINIMUM REQUIREMENTS- Class C				
D.	Class C:				
7	Operating theatre				
9	Point of Care Testing *5 (With additional Arterial Blood Gas Testing.)				
10	Onsite radiology *7 (Class A and B may have contract with external radiology if required. Onsite or contracted radiology services is optional for DSC Class CM and C providing solely Ophthalmology or Vascular services)				
12	Onsite Sterilizing area				
APPENDIX 2:	OPERATING THEATRE (OT) SPECIFICATION MATRIX- DSC Class A & B (without endoscopy)				
A2.1.1.	OT: • Min. 1 OT • Size: 20-30 m2				

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A2.1.2.	Recovery Room: Recommended				
A2.1.3.	Equipment: • OT table: Required • Anaesthesia Machine: Not required • Ventilator in Recovery: Optional (1 ventilator for every 2 beds in the recovery bay) • Mobile x-ray: Optional • Crash Cart Trolley: Required. • ABG machine: Optional				
APPENDIX 2:	OPERATING THEATRE (OT) SPECIFICATION MATRIX- DSC Class B (with endoscopy)				
A2.2.1.	OT: • Min. 1 endoscopy room • Size 25-30 m2				
A2.2.2.	Recovery Room: Mandatory				
A2.2.3.	Equipment: • OT table: Required • Anaesthesia Machine: Not required • Ventilator in Recovery: Optional (1 ventilator for every 2 beds in the recovery bay) • Portable Ventilator: Required (1 portable ventilator for 1-4 OTs (backup). • Mobile x-ray: Optional. • Crash Cart Trolley: Required. • Endoscope set with Cabinet: Required. • Scopes storage cabinets (HEPA): optional • ABG machine: Optional				
APPENDIX 2:	OPERATING THEATRE (OT) SPECIFICATION MATRIX- DSC Class C- M				
A2.3.1.	OT: • Min. 2 OTs • Size 30 m2 each				
A2.3.2.	Recovery Room: Mandatory				
A2.3.3.	Equipment: • OT table: Required • Anaesthesia Machine: Required • Ventilator in Recovery: Required (1 ventilator for every 2 beds in the recovery bay) • Portable Ventilator: Required (1 portable ventilator for 1-4 OTs (backup). • Mobile x-ray: Required • Crash Cart Trolley: Required • ABG machine: Required				
APPENDIX 2:	OPERATING THEATRE (OT) SPECIFICATION MATRIX- DSC Class C				
A2.4.1.	OT: • Minimum 2 OTs • Size: 36 m2 each				
A2.4.2.	Recovery Room: Mandatory				
A2.4.3.	Equipment: • OT table: Required • Anaesthesia				

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	<p>Machine: Required • Ventilator in Recovery: Required (1 ventilator for every 2 beds in the recovery bay) • Portable Ventilator: Required (1 portable ventilator for 1-4 OTs (backup). • Mobile x-ray: Required • Crash Cart Trolley: Required. • ABG machine: Required</p>				
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