

Standard Operating Procedures for the Inspection of Healthcare Facilities and Nursing Homes/Infirmaries.

The following represents the requirements for conducting the inspections of the captioned facilities in light of the COVID-19 pandemic. These operations are classified as high risk establishments for the spread of COVID-19, and as such special attention should be given to ensure that they meet the required MOHW standards.

The Institutional Health inspection form as well as the MOHW checklist for these institutions should be used for the assessment of these facilities. There are eleven (11) 'non – critical' items in the checklist (which are shaded on the checklist) for which additional time may be required for their completion, and should not prevent the satisfactory classification of the facilities.

Arrangements should be made for these to be addressed within the shortest possible time and a work plan should be developed with stated (preferably agreed) deadlines.

All other requirements outlined in the checklist must be in place in order for a satisfactory classification of the facility.

Inspection Frequency

- 1. *Compliance Inspections* To the extent possible these facilities should receive weekly inspections until satisfactory status is achieved.
- **2.** *Routine Inspections* After the satisfactory status is achieved, routine inspections should be conducted at least bi-weekly (2 times monthly).
- 3. *Daily Self –Assessment* a designated facility representative should complete the requisite checklist for this activity during each work day.

Inspection procedure

1. Preparation for the Inspection

a. Officers must ensure they have the requisite items and PPE to conduct the inspections.



- b. Contact should be made with the facility management to ensure an appropriate representative(s) is/are available when the inspection is being conducted.
- c. Remind the representative(s) of the documents that will be needed for the Health team's perusal.

2. Pre-inspection briefing meeting:

- a. To be held with all parties that will be involved in conducting the inspection of the facility.
- b. The aim of this meeting is to ensure:
 - i. all persons understand the part they will play during the inspection process
 - ii. there is clarity in terms of the interpretation of the checklist, inspection form and related guidelines.
- c. Team leaders should be identified and their duties outlined during this meeting.

3. Briefing meeting

- a. Upon arrival at the facility a briefing meeting should be held with the company representative.
- b. All health team members should be introduced and the representative(s) advised of the approach to be taken for the inspection and that their presence will be needed throughout the assessment of the facility.
- c. Obtain the relevant documents, making note of those that are not available.

4. Inspection

- Conducted in a manner that will limit major disruption to the operation of the facility
- b. Done in a methodological manner, ensuring social distancing measures are observed at all times.



5. Debriefing meeting

- a. This should be conducted by the team leader upon completion of the inspection.
- b. The breaches identified should be highlighted and the recommendations for remedial actions outlined.
- c. Where applicable, mutually agreed completion dates should be established during this meeting

6. Report Submission

- a. The reports of these inspections should be submitted to the Director EHU and then forwarded to the Director HPPB for presentation to the NHEOC after being reviewed by the CPHI and the MO(H).
- b. Completed reports should be submitted within 36 hours of the inspection being conducted.
- c. The management of the facility should be presented with a copy of the inspection report and the work-plan (if indicated) within 36 48 hours of the inspection.
- d. Completed Daily Self-Assessment Checklist for the facility should be submitted at the end of each day to the MOH/NEOC.
- e. When the NHEOC is dissolved, monthly summary reports for routine inspections should be submitted to the Director EHU and copied to the Director HPPB and the relevant Environmental Health Specialist.
- f. When the NEOC is dissolved, the following should obtain:
 - reports should be submitted to the Parish MO(H) with a copy to the CPHI.
 - 2. a system of recording, storing and developing a monthly summary of these reports should be established and maintained.
 - Quarterly Reports should be submitted to the Director EHU with a copy to the Director HPBB and the relevant Environmental Health Specialist.



Decision regarding status of the facility and conditions under which closure is recommended by the health department:

- a. **Satisfactory status** all critical items would have to be met along with any of the "non-critical" item areas.
- b. Unsatisfactory status where any critical item area is not met.
- **c. Recommendation for closure** in cases where a facility does not meet one or more of the critical items on the checklist.
 - a. The recommendation for closure should be made to the CPHI, if same is warranted, it will be further discussed with the MO(H) for a decision to be made.
 - b. Upon making the decision that closure is warranted this recommendation should be forwarded to the Director HPPB for further discussion with the relevant individuals within the MOHW and the decision will be taken whether or not the closure should be effected and same will be communicated to the MO(H).

Guidance Documents for Checklist

The following represents the MOHW Guidance Documents to be used when applying the related MOHW Checklist:

- MOH Infection Prevention Control Protocol
- MOHW Environmental Health Cleaning and Sanitation Guidelines for Healthcare Facilities/Nursing Homes/Infirmaries
- MOH Guidelines for Community and Private Health Facilities (Standards and Regulation Division)
- MOHW GUIDELINES:
 - Important things to know about wearing mask
 - o Infection Prevention and Control Recommendations for Employers:
 - o Interim Guidance for COVID- 19



 Interim Guidance for Cleaning and Disinfection of Public Transportation Facilities for COVID-19.