SSGMC
SOUTH SUDAN GENERAL MEDICAL COUNCIL

South Sudan General Medical Council
Health Facilities Inspection Checklist

SECTION 1: HEALTH FACILITY INFORMATION			
Facility Name:		Registration No:	
Facility Type	☐ Clinic	☐ Hospital	☐ Medical Center/Complex
Location:			
State:		County:	
Payam:		Boma:	
Prominent Landmark for Location:			
Phone Number:		E mail:	
Number of Beds:		Number of Admission per Month:	
Name of Contact Person(Medical Director):			
Qualification of Contact Person:			
Registration No:	Phone No:	Email:	

SECTION 2: AVAILABLE CLINICAL SERVICES				
S/N	**Services**	**Yes**	**No**	**Remarks**
1.	Medical Outpatient Consultation			
2.	Medical Inpatient Services			
3.	Pediatrics Outpatient Consultation			
4.	Pediatrics Inpatient Services			
5.	General Surgery Outpatient Consultation			
6.	General Surgery Inpatient Services			

7.	General Surgery Operations			
8.	OBGYN Outpatient Consultation			
9.	OBGYN inpatient Services			
10.	OBGYN Surgeries including C/S			
11.	Normal and Assisted Deliveries			
12.	Orthopedic and Trauma Outpatient Consultation			
13.	Orthopedic and Trauma Inpatient Services			
14.	Orthopedic and Trauma Operations			
15.	Rehabilitation Services (Physiotherapy)			
16.	Ophthalmology Outpatient Consultation			
17.	Eye Operations			
18.	ENT Outpatient Consultation			
19.	ENT Operations			
20.	Psychiatric Outpatient Consultation			
21.	Psychiatric Inpatient Services			
22.	Dermatology Outpatient Consultation			
23.	Oncology Services			
24.	Pharmacy			

SECTION3: AVAILABLE LABORATORY SERVICES

A. Routine Investigations

S/N	Services	Yes	No	Remark

1.	Blood Film for Malaria			
2.	ICT for Malaria			
3.	Urine Analysis			
4.	Stool Analysis			
5.	TWBC			
6.	ESR			
7.	Hemoglobin			
8.	Pregnancy Test			

B. Chemistry Investigations

S/N	Services	Yes	No	Remark
1.	Random Blood Sugar			
2.	GTT			
3.	HbA1C			
4.	Uric Acid			
5.	Serum Cholesterol			
6.	Triglycerides			
7.	Renal Function Test			
8.	Liver Function Test			
9.	Cardiac Profile			
10.	Lipid Profile			
11.	Semen Analysis			

C. Hematology

S/N	Services	Yes	No	Remark
1.	Blood transfusion services			
2.	Complete Blood Count			
3.	PT			
4.	PTT			
5.	Blood grouping			
6.	INR			

D. Immunology Investigations

S/N	Services	Yes	No	Remark
1.	Widal Test for Enteric Fever			
2.	Widal Test for Brucella			
3.	Rheumatoid Factor			
4.	ASO Titre			
5.	C reactive protein			
6.	VDRL			
7.	RPR			
8.	HIV			
9.	HBsAg			
10.	HCV			
11.	H. Pylori Ab			
12.	H.Pylori Ag			

E. Hormones and Tumor Markers

S/N	Services	Yes	No	Remark
1.	TSH			
2.	T3			
3.	T4			
4.	FSH			
5.	LH			
6.	AMH			
7.	Prolactin			
8.	PSA			
9.	CEA			
10.	AFP			
11.	Ca125			

SECTION 4: AVAILABLE DIAGNOSTIC IMAGING SERVICES				
S/N	**Services**	**Yes**	**No**	**Remark**
1.	Ultrasound			
2.	Doppler Ultrasound			
3.	EEG services			
4.	ECG Services			
5.	Echocardiography Services			
6.	X-Ray Services			
7.	CT- Scan Services			
8.	MRI-Services			

9.	Diagnostic/Therapeutic Endoscopy			

SECTION 5: HUMAN RESOUCES (HR)

HR 1: Human Resource Filing System

S/N	Standard	Yes (1)	No (0)
1.	Personnel filing system has been established		
2.	Check to see if the personnel files cabinet can be locked and find out who have access to the key.		
3.	Check each file for personnel information: a) National ID, CV, telephone and emergency contact person information.		
4.	b) Qualification Certificates		
5.	c) Valid professional license (SSGMC Registration or equivalent).		
6.	d) Valid Work Permit (foreigners).		
7.	e) Valid Residency Permit (foreigners).		
8.	f) Employment Contract		
9.	g) Job Description		

HR 2: Human Resource Qualifications

S/N	Standard	Yes (1)	No (0)
10.	All specialists/consultants have appropriate qualifications to carry out their duties		
11.	All General Practitioners have appropriate qualifications to carry out their duties		
12.	All Laboratory Technologists/Technicians have appropriate qualification to carry out their duties		
13.	All Pharmacists/Pharmacy Technicians have appropriate qualifications to carry		

	out their duties		
14.	All Midwifes have appropriate qualifications to carry out their duties		
15.	All Nurses have appropriate qualifications to carry out their duties		
16.	All scrub nurses have appropriate qualifications to carry out their duties		
17.	All Anesthetists/ Anesthesiologist have appropriate qualifications to carry out their duties		
18.	All Physiotherapists have appropriate qualifications to carry out their duties		
HR 3: Staffing Norms			
S/N	**Standard**	**Yes (1)**	**No (0)**
19.	There is a sufficient number of qualified staff to meet the need of patients and services provided based on the facility case load		
20.	Availability of staff duty roaster		
HR6: Facility Dress Code			
S/N	**Standard**	**Yes (1)**	**No (0)**
21.	Dress code policy is developed for staff to present a professional image to the Public		
22.	Staff adhere to the facility dress code		
Total Score out of 22			
OVERALL ASSESSMENT SCORE (sections 5-11) out of 154			

Recommendation: .....

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OWNERSHIP OF THE HEALTH FACILITY

Name:		ID Number:	
	Phone Number:	Email:	
	Date:	Signature:	

INSPECTION TEAM				
S/N	Name	Title	Phone	Signature
1.				
2.				
3.				
4.				
5.				

NB; Kindly attached the list of all health care providers in the facility indicating their qualifications and whether they are licensed or not.