

DEPARTMENT OF HEALTH

NO. 567

15 JUNE 2017

CORRECTION NOTICE

**GUIDELINES FOR THE LICENSING OF
RESIDENTIAL AND DAY CARE FACILITIES FOR
PEOPLE WITH MENTAL AND/OR INTELLECTUAL DISABILITIES**

The attached documents are Annexures to the Guidelines for Licensing of Residential and Day Care Facilities for People with Mental and/or Intellectual Disabilities *published in Government Gazette No. 40860, published on 26 May 2017*, without this **Annexures**.

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ANNEXURE A**APPLICATION FOR LICENSING OF RESIDENTIAL AND DAY CARE FACILITIES FOR MENTAL HEALTH CARE USERS**

1. PARTICULARS OF THE APPLICANT			
Name of the APPLICANT			
Identity number:			
Physical address:			
Postal address:			
2. Name of the BODY/ORGANIZATION TO MANAGE THE FACILITY:			
Physical address of the body/organization:			
Postal address of the facility:			
Telephone number:		Cell number:	
Fax number:		Email:	
Registration Number, date of registration and annual renewal letter (if applicable)			
3. Background and history of organization			
4. Type of services and purpose of the programmes/ activity/ service			
5. Group homes	Halfway Houses	Supported Independent living	Day Care (specify type of service)

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6.1 Specify the target group who will receive the service: (age, gender, psychiatric or intellectual disability)				
6.2 Is this service or facility receiving funding from any other government department? YES or NO?, If yes, please specify the department and the amount				
7. STAFF (STAFF PROVISION): Organogram/ structure of staff establishment				
Nr of staff	Designation/ Job Title	Qualifications/ Training	Professional Registration (if applicable)	Remuneration
8. BUILDING, SITE AND EQUIPMENT :If leased, should not be for less than five(5) years				
8.1 Size of the:	ERF/Site	Building (single storey only)	Recreational area: indoor outdoor	
8.2 Type		Number	Floor space	Nr of users to be accommodated
Bedrooms	Females			
	Males			
Accessible Bathrooms	Females			
	Males			
Accessible Washbasins	Females			
	Males			

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8.2 Type		Number	Floor space	Nr of users to be accommodated
Accessible Showers	Females			
	Males			
Accessible toilets	Females			
	Males			
GENERAL SPACES (To be fully equipped and stocked according to prescribed norms and standards)				
8.2 Type		Number	Floor space	Equipment available & functional
Work Station				
Staff/Visitors toilets				
Visitors area				
Examination/ treatment rooms/Sick bay				
Ramps (with rails and correct gradient)				
Kitchen				
Dining room				
Sluice rooms				
Waste management (general)				
Laundry and ironing room				
Appropriate Storage facilities				
Administrative office/reception				
Multipurpose rooms				
All rooms adequately and appropriately furnished considering cultural contexts		YES		NO

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9. Medicines and medical supplies		
9.1 Basic medical equipment :		
(a) blood pressure machine,		
(b) glucometer,		
(c) thermometer,		
(d) scale)		
9.2. Where will you get your medication and medical supplies?		
9.3. Where is your medicines and medical supplies stored		
9.4 How do you dispose of medical waste?		
10. What activities will be part of your recreational and leisure programme?		
INDOORS:		
OUTDOORS:		
11. What activities will you offer as part of your stimulation and/or rehabilitation programme		

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12 SUPPORTING DOCUMENTS: The following document must accompany the application: Please tick checklist

Copy of constitution of NPO

Zoning or re-zoning certificate (added)

Copy of facility plans

Occupancy certificate (structure)

Certificate of acceptability for food handling

Health certificate

Copy of board members details and identity documents

Valid registration documents for all professionals

Clearance certificates for board members and staff members

Copy of Business Plan with costing for proposed activities

Property: owned or leased (attach proof of ownership/ lease agreement)

Bank account and 3 month bank statement

SAPS clearance certificate

Copy of tax clearance certificate

13 GENERAL REMARKS BY THE APPLICANT IN SUPPORT OF THE APPLICATION:**SUBMITTED BY:****PRINT NAME:****SIGNATURE:****DATE:****RECEIVED BY:****PRINT NAME:****SIGNATURE:****DATE:**

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ANNEXURE B



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

NORMS AND STANDARDS FOR LICENSING OF COMMUNITY RESIDENTIAL AND DAY CARE FACILITIES

DELIVERY OF SERVICES

FUNCTIONAL AREA	NORM	STANDARD	YES	NO	COMMENT
Type of facility	Day Care	This is a non-residential facility that offers day time activities and social contact for mental health care users and persons with intellectual disability, including development and stimulation/training programmes (incl. self-help skills)			
	Community Residential Care : A residential facility that provides long term care, treatment and rehabilitation to mental health care users who are not able to live with their families and/or independently. The infrastructure standards for residential facilities remain the same, but will be adapted according to the number of users, the type of service and the needs of the users				
	Half way House	<ul style="list-style-type: none"> A halfway house is a transitional residence for mental health care users who had been either cared for in their communities or formerly institutionalised, designed to facilitate 			

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FUNCTIONAL AREA	NORM	STANDARD	YES	NO	COMMENT
		the readjustment and gradual reintegration into community life			
	Group home	<ul style="list-style-type: none"> Group homes provide supported accommodation to mental health care users who cannot live independently due to their temporary/permanent mental incapacity, social integration or occupational placement challenges. It also provides the opportunity for mental health care users who have been previously institutionalised to gradually reintegrate into community living 			
	Supported Independent/assisted Living Units	This term refers to the ongoing support in the form of individual or group supervision and instruction in basic skills of everyday living that mental health care users receive in the community.			
	Halfway House, Group homes and Supported Independent Living Units	ALL BUILDINGS MUST BE SINGLE STOREY Bedrooms: - 2-3 bedrooms accommodation, floor space at least 18 m ² per bedroom or according to the General Principles of Universal Design Policy (2005). OR			

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FUNCTIONAL AREA	NORM	STANDARD	YES	NO	COMMENT
		<ul style="list-style-type: none"> - Hostel type/Dormitory style accommodation at least 15m² per resident – except head of bed all sides 0,6m from walls and unobstructed space between beds of 1,2m or according the General Principles of Universal Design Policy (2005). OR - Maximum of 4 beds per room. Floor area not less than 7,5m² per bed or according to minimum Local Government By- Laws requirement OR - minimum floor area of any user's room, must be 10m² and single rooms shall have a minimum wall length of 2.6m as per Regulation 158 			
		<ul style="list-style-type: none"> • Doors wide enough to accommodate wheelchairs, mobility devices and beds 			
		<ul style="list-style-type: none"> • No stairs 			
		<ul style="list-style-type: none"> • Ramps for wheelchairs and mobility devices 			
		<ul style="list-style-type: none"> • Toilets, baths and showers are wheelchair and mobility devices 			
		<ul style="list-style-type: none"> • Non-slippery floors 			
		<ul style="list-style-type: none"> • Emergency routes clearly identified, visible during the night and all emergency exists accessible for wheelchairs and other mobility devices. 			

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		<ul style="list-style-type: none"> • Closed circuit television cameras is recommended but cameras must be positioned in a way that they do not violate the privacy of mental health care users 			
Physical environment to be determined by the type of service to be delivered	Work station	<ul style="list-style-type: none"> • One centrally placed work station and accessible to all the users. 			
		<ul style="list-style-type: none"> • Counter and work surfaces 			
		<ul style="list-style-type: none"> • Facility Based Telephone for internal and external communication (landline or cellular) 			
	Staff rest rooms and toilets	<ul style="list-style-type: none"> • Lockers for all staff 			
		<ul style="list-style-type: none"> • Hand wash basins with soap for the prevention of cross infections 			
		<ul style="list-style-type: none"> • Toilets for the staff and their visitors 			
	Examination/treatment rooms	Examination/treatment rooms must have:			
		<ul style="list-style-type: none"> • Privacy of users to be ensured 			
		<ul style="list-style-type: none"> • Well-ventilated area. 			
		<ul style="list-style-type: none"> • Electrical plug point for emergency equipment 			
		<ul style="list-style-type: none"> • Enough shelving and cupboards for various stock items 			
		<ul style="list-style-type: none"> • Wash hand basin with hot and cold running water 			
		<ul style="list-style-type: none"> • Non-slip and non-shining floor. 			
		<ul style="list-style-type: none"> • Painted in light coloured, washable paint. 			
		<ul style="list-style-type: none"> • Equipped for first aid and emergency situations. 			

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		<ul style="list-style-type: none"> • Lock-up facility for all medication and scheduled drugs with separate areas for medicines and bandages. 			
	Passages/ Steps/ Staircase/ Ramps	<ul style="list-style-type: none"> • Outside passages covered for protection against elements 			
		<ul style="list-style-type: none"> • Corridors a least 1,8m wide and ideally provided with hand railing along the length of at least one wall. 			
		<ul style="list-style-type: none"> • All corridors and ramps must have a non-slip floor surface and adequately lit and fitted with effective hand rails. 			
		<ul style="list-style-type: none"> • All steps must not be higher than 130mm or narrower than 355mm. 			
	Bathrooms	<ul style="list-style-type: none"> • Bathroom facilities must be provided in the ratio of one [1] bath or shower to at least every ten [10] residents. 			
		<ul style="list-style-type: none"> • Constant supply of thermostatically controlled hot and cold water to all baths and showers. 			
		<ul style="list-style-type: none"> • Back up supply of water available and functional 			
		<ul style="list-style-type: none"> • Bath positioned in such a way that users have adequate access and effective handgrips installed. 			
		<ul style="list-style-type: none"> • Emergency bells or communication systems to be in place. 			
		<ul style="list-style-type: none"> • At least one [1] hand wash basin with constant thermostatically controlled hot and cold water supply must be provided in each bathroom complex. 			
		<ul style="list-style-type: none"> • Walls and ceiling of the bathroom complex must be painted with light colored durable, washable paint. 			

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		<ul style="list-style-type: none"> Floors must be covered with a non-slip, non-shining surface. 			
	Hand wash basins	<ul style="list-style-type: none"> A towel rail adjacent to the washbasin must be provided in every hand washing area. Rims of the basin must be 830mm above floor level. Towel rails positioned in such a way that it is not mistaken as a grab rail Grab rails installed adjacent to hand wash basins Constant supply of thermostatically controlled hot and cold water must be supplied to all washbasins. 			
	Toilets	<ul style="list-style-type: none"> One [1] toilet for at least every ten [10] residents of each gender. A floor area of not less than 2,9m², a minimum width of 1,6m and a door with a width not less than 800mm. Space between door and toilet. Height of the toilet pans may not be less than 460mm and more than 480mm from the floor. Effective support rails must be provided in the toilets A urinal must be provided in the toilet complex where a facility is developed to be used by more than one male resident. Toilet roll holder must be placed in easy reach of the user of the toilet – the roll holder may not be placed towards the back of the person sitting 			

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		in the toilet			
		• Non-shining flooring and easy to clean			
		• Painted in a light colored durable and washable paint			
		• Toilet areas must be well ventilated			
	Toilets for visitors	Community residential facilities must be:			
		• Separate toilet facilities for male and female visitors.			
		• Hand wash basin supplied with constant hot and cold water.			
	Sluice rooms	Sluice rooms in residential and frail care facilities must :			
		• Have a minimum floor area of 15m ² and a minimum width of 5m ²			
		• Be well ventilated.			
		• Be equipped with impervious shelves			
		• Provide with a constant supply of hot and cold water			
		• Be equipped with a combination slop hopper sink with a wash facility for bedpans / urinals.			
		• Equipped with an impervious receptacle of adequate capacity with a close-fitting lid for soiled dressings to be removed by recognized medical waste service provider.			
		• Reasonably accessible from bedrooms for people with disabilities.			
		• Equipped with a hand wash basin for staff hand washing			

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		<ul style="list-style-type: none"> • Wall area behind slop hopper sink and hand wash basin must be supplied with a back splash plate or area must be tiled. • Be painted in a washable, durable light coloured paint • Floors must be washable • Storage space for cleaning materials 			
	Laundry and ironing room	<p>The laundry and ironing room in residential facilities must have:</p> <ul style="list-style-type: none"> • Well-ventilated laundry area • Accessible and adequately equipped for washing and ironing • Laundry and ironing room must be accessible and adequately equipped for washing and ironing • Shelving must be of an impervious material • Walls must be painted with durable, washable and light colored paint. • If the laundry is an outside contractor, it must be approved laundry by a registered service provider. • There must be a separate storage area with slated shelves for clean linen. 			
	Kitchen	<p>Kitchen must have:</p> <ul style="list-style-type: none"> • A minimum floor area of 16m² for at least 32 residents. • The floor area must be calculated at 0,5m² per resident or according to Local Government By-Laws minimum requirements to a maximum size of 			

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		90m ²			
		• Washing-up area separate from the food preparation area.			
		• Hand wash basin for staff hand washing.			
		• Separate food prep basin			
		• Separate pot wash basin			
		• Adequate and constant hot and cold water to all basins.			
		• Impervious, easy to clean work surfaces in all areas.			
		• A safe source of power for cooking purposes.			
		• A suitable means for the effective extraction of heat fumes and gases.			
		• Smooth and even washable wall surfaces.			
		• A facility to maintain perishable food at a temperature below 10°C.			
		• Sufficient suitable storage space for crockery, cutlery and kitchen utensils.			
		• Fire blanket available in the kitchen			
	Dining hall	A dining area must have:			
		• A minimum floor area of 1,5m ² per resident with adequate passages and aisles in the dining area according to the Local Government By-Laws.			
		• Approved, suitable and safe artificial heating system in the dining areas.			
		• Non-slip, non-shining floors.			

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		<ul style="list-style-type: none"> Well-ventilated area 			
	Recreation Area / Lounges	<ul style="list-style-type: none"> The floor area of not less than 1,5m² per resident as per the Local Government By-Laws. This area must be designed and situated in such a way that it can also be used for occupational therapy 			
	Storage facilities	<ul style="list-style-type: none"> There must be adequate storage facilities for linen, furniture, suitcases, cleaning detergents, medicines and any harmful substances 			
	Administration Office	<ul style="list-style-type: none"> The facility must have suitable, furnished administrative offices on the premises. 			
	Proper and adequate ventilation/heating/cooling/lighting	<ul style="list-style-type: none"> The office must have proper and adequate ventilation/heating/cooling and lighting Must have adequate cross ventilation Must have proper lighting, not glazing Safe heating and cooling system in the rooms and the dining areas. (heating system position in such a way not to jeopardize the safety of the resident and not damaging any of the structures of the building). 			
	Secure and safe environment	<p>Secure and safe environment must have the following:</p> <ul style="list-style-type: none"> Security in accordance with local conditions Windows and doors must be adequately protected or guarded to 			

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		ensure the safety of residents.			
		• Emergency exits and routes practical and clearly identified and visible at night.			
		• Controlled access to facility			
		• Support railings on one side of corridors			
		• Non-slip and non-shining flooring surfaces			
		• All carpets suitably and safely secured to the floor			
		• Loose coverings must be removed			
		• Security of personal effects of staff and residents			
		• Security and control over medication			
		• Existence of emergency and disaster plan			
		• Fire-fighting equipment in accordance with Occupation, Health and Safety Act 85 of 1993 – Fire protection certificate issued by Fire Department			
		• Appropriate 24-hour communication system (internal and external)			
		• Individual lockers for staff personal items			
		• Individual lockable cupboards for each resident			
		• Smoke detectors			
	Therapeutic environment	• Programmes for prevention of injuries and infections			

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	Functional, sufficient furniture and equipment	<ul style="list-style-type: none"> • Access to an area to undertake private discussions and interviews. 			
		<ul style="list-style-type: none"> • There must be beds with mattress, chair and private, safe and lockable cupboard for each resident 			
		<ul style="list-style-type: none"> • Care equipment, e g crutches, wheel chairs, bedpans etc. 			
		<ul style="list-style-type: none"> • Adequate clean bed linen, blankets, pillows and toweling per bed 			
		<ul style="list-style-type: none"> • Catering equipment must be available 			
		<ul style="list-style-type: none"> • Laundry equipment must be available 			
		<ul style="list-style-type: none"> • Maintenance equipment 			
		<ul style="list-style-type: none"> • Furniture and equipment for staff requirements 			
		<ul style="list-style-type: none"> • There must be staff rest rooms 			
		<ul style="list-style-type: none"> • Appropriate first aid emergency equipment 			

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		<ul style="list-style-type: none"> ○ Sanitation ○ Clean drinkable water ○ Cooking and catering facilities ○ Laundry facilities /washing facilities ○ Nursing facilities ○ Recreational facilities / areas ○ Fencing ○ Secure environment appropriate for the needs of the individual, ○ Store facilities ○ Grounds are wheelchair or mobility device accessible ○ Supply of electricity or alternate power source ○ Designated smoking area 			
Legal status for development and delivery of services	Service providers are registered	<ul style="list-style-type: none"> • Registration certificate of residential facility or day care facility and service providers must be publicly displayed 			
	Admission policy in accordance with statutory requirements	The admission policies must be in accordance with the following requirements: <ul style="list-style-type: none"> • Medical report on current status(physical and mental) • Comprehensive multi-disciplinary report • Admission policy and code of conduct to be in line with Mental Health Care Act • Information on the organization and services rendered provided • Information accessible to all 			

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		<ul style="list-style-type: none"> Standardized Admission Policy and Procedure Standardized Admission Form 			
Capacity building	Support for caregivers including family	The facilities must provide awareness/outreach programmes			
	Volunteer programmes	Volunteer programmes must: <ul style="list-style-type: none"> Measure the response e.g. donations, visits, volunteers Volunteer projects developed, costed, with timelines and roles and responsibilities 			
	An informed and supportive community	There must be information sharing and awareness sessions and partnership with the communities			
Care programme	Comfortable clean, healthy and satisfied residents	Residential care must include: <ul style="list-style-type: none"> Individualized care management plan for all residents Adherence to approved health/clinical, nursing and pharmaceutical laws, protocols, policies and procedures Nutrition and hydration according to dietary requirement Users must be appropriately dressed, presentable and clean 			
	FOR RENEWALS	<ul style="list-style-type: none"> physical and mental well being of users 			
	Daily activities	Supported and residential facilities must ensure optimal mobility of residents during the day which must include:			

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		<ul style="list-style-type: none"> • Socialization through social and functional activities 			
		<ul style="list-style-type: none"> • Residents should be out of bed during the active hours (where possible). 			
		<ul style="list-style-type: none"> • Daily activities will include stimulation, recreation, leisure and ADL, pre-vocational and life skills training 			
		<ul style="list-style-type: none"> • Quarterly Multi-disciplinary team reports 			
Supported programme	Facilitate the provisioning of affordable, safe and accessible living facilities	Supported and residential facilities must provide the following:			
		<ul style="list-style-type: none"> • Programmes to provide optimal independent living 			
		<ul style="list-style-type: none"> • Affordable accommodation by means of rates concessions 			
		<ul style="list-style-type: none"> • Cultural sensitive environment 			
		<ul style="list-style-type: none"> • Programmes to support their families and spouse/partners to provide care and support 			
		<ul style="list-style-type: none"> • Accessibility of community care and support services 			
Information on access to health and social welfare services	Provision of affordable, accessible and appropriate health and social welfare services	<ul style="list-style-type: none"> • Community re-integration programmes 			
		Supported living/residential facilities must have:			
		<ul style="list-style-type: none"> • access to primary health care services affordable curative care, i.e. hospitals and day hospitals 			
		<ul style="list-style-type: none"> • accessibility to social welfare services 			
		<ul style="list-style-type: none"> • accessibility to multi-purpose services 			

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Information on access to transport	Access to transport	supported living/residential facilities must:			
		• Promote the accessibility of public transport			
		• Lobbying for friendly and safe transport system/programmes			
Support to caregivers	Support to caregivers	• Transport available to access support services			
		Supported living/residential facilities must have:			
		• Programmes to train, develop and support caregivers			
Provision of assistive devices	Access to assistive devices	• Information and referral systems to support caregivers			
		• Dissemination of information on health and social welfare services for caregivers.			
		Supported living/residential facilities must have:			
		• Information on access to lending depots			
		• Information on access to available assistive devices			
		• Information on maintenance of Assistive devices			
		• Training programmes in the correct use of assistive devices			
		• Directory / data bank of lending depots			
		• Link with the local health (district) office that provides and repairs devices			

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Provision of food	Provision of hygienic food and serving facilities	Supported living/residential facilities must have:			
		• Suitable premises and facilities for the preparation and storage of foodstuffs			
		• Sufficient and appropriate crockery and cutlery			
		• Eating facilities to be clean and free of offensive smells			
		• Separate hand wash basin / bowl for staff with hot and cold water, soap and disposable hand towels			
		• Adequate functional storage of raw and prepared foods			
		• Adequate appropriate cold room and freezer for food storage at 10 degrees or less			
	Provision of nutritional food	• Separate facilities for the storage of cleaning materials and refuse			
		Supported living/residential facilities must:			
		• Have an approved menu / dietary menu addressing all dietary needs of residents			
		• Providing 3 nutritional meals per day, and an additional 1.5 lt fluids during the day plus 0.5 liters at night, and including at least 1 snack in the evening for special diets e.g. Diabetics			
		• A pre-planned cycle of varied and balanced meals			
		• Special diets in accordance with			

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		medical needs of the residents			
		<ul style="list-style-type: none"> Accommodation of cultural and religious preferences where feasible. 			

GOVERNANCE

FUNCTIONAL AREA	NORM	STANDARD	YES	NO	COMMENT
USER INVOLVEMENT	User forum	Supported/residential facilities must have the following:			
		<ul style="list-style-type: none"> regular meetings with users 			
		<ul style="list-style-type: none"> development plans for users in assisting in the management of the facility 			
Statutory requirements	Residential facilities should adhere to statutory requirements	Supported/residential facilities and day care facilities must adhere to the following statutory requirements:			
		<ul style="list-style-type: none"> Must be registered according to the Policy guidelines on residential facilities for people with disabilities. 			
		<ul style="list-style-type: none"> Registration certificates of the facilities must be displayed. 			
		<ul style="list-style-type: none"> There must be training programs to ensure working knowledge 			
		<ul style="list-style-type: none"> All professionals working in residential facilities must be registered with their applicable registration bodies 			

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Protection and promotion of the rights of people with disabilities	Rights of people with disabilities must be protected through the following:			
	<ul style="list-style-type: none"> Keeping of all legislative registers in terms of all relevant local, regional and, international obligations which SA signatory to Complete MHCA documents 			
	For example (Complaints register, restraints register, convicted person register, medication Registers, Code of Conduct of Caregivers)			
	Contracts between the service provider/organization and the HOD to ensure that the services are provided should include the following:			
	<ul style="list-style-type: none"> Date of occupation 			
	<ul style="list-style-type: none"> Type of accommodation 			
	<ul style="list-style-type: none"> Services to be provided which include boarding & lodging which includes at least three nutritionally balanced meals per day taking into account health status of the resident 			
	<ul style="list-style-type: none"> Specific clinical indicators identified 			
	<ul style="list-style-type: none"> Nursing and ensuring medical attention 			
	<ul style="list-style-type: none"> Bed & bath linen 			
	<ul style="list-style-type: none"> Laundry services 			
	<ul style="list-style-type: none"> Cleaning services 			
	<ul style="list-style-type: none"> Security services 			
	<ul style="list-style-type: none"> Payment of services rendered 			
	<ul style="list-style-type: none"> Details of user's assets, liabilities, income & expenditure 			

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		<ul style="list-style-type: none"> the fee and tariff structure 			
		<ul style="list-style-type: none"> mandatory facility inspection by provincial or district health teams to monitor compliance to contract, legislation, indicators and business plan 			
		<ul style="list-style-type: none"> Financial details of the users must be made available to management board on request 			
		<ul style="list-style-type: none"> Rules regulating the running of the assisted/residential and frail care facilities 			
		<ul style="list-style-type: none"> Procedure during termination of the agreement including the responsibility of the user and his/her family 			
		<ul style="list-style-type: none"> Procedure when a user dies 			
		<ul style="list-style-type: none"> Confidentiality 			
		<ul style="list-style-type: none"> Cost of damage to assets of the facility by a user. 			
Financial management	Accountability management of	Supported living/residential and day care facilities must have:			
		<ul style="list-style-type: none"> Annual budget is approved in accordance with the organization's constitution 			
		<ul style="list-style-type: none"> Financial statements are submitted at meetings of the service provider, at least every two months 			
		<ul style="list-style-type: none"> The official responsible for the financial management is adequately trained and qualified 			
		<ul style="list-style-type: none"> Financial policy and delegation are approved by the service provider 			
		<ul style="list-style-type: none"> The payment of accounts and receipt of income is done in accordance with financial policy 			

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		<ul style="list-style-type: none"> • All external and internal audit reports must be submitted to the service provider and must be in the minutes of the meetings of the service provider. • Monthly minutes of operational meetings/communication with staff • Annual report and financial statements to department. 			
Asset management	Utilization and management of assets	Supported living/Residential and day care facilities must adhere to the prescripts of asset management:			
		<ul style="list-style-type: none"> • Preventative maintenance program approved by service provider 			
		<ul style="list-style-type: none"> • Asset register to differentiate between government assets and assets acquired through other means 			
		<ul style="list-style-type: none"> • Assets are comprehensively insured 			
		<ul style="list-style-type: none"> • Regular inspections performed and reported at meetings of the service provider 			
Human resource management	Skilled Human resource management	<ul style="list-style-type: none"> • Evaluation procedures in place 			
		Supported living/ residential and day care facilities must have:			
		<ul style="list-style-type: none"> • Human resource policy approved by service provider to ensure best practices exist • Staff recruitment policy approved by service provider • Relevant Acts and Regulations, Policies and Procedures must be available and adhered to 			

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		<ul style="list-style-type: none"> • Job description to be kept in each staff member's file 			
		<ul style="list-style-type: none"> • Contract of employment which includes of the rights of people with disabilities 			
		<ul style="list-style-type: none"> • Personal file of each staff member kept 			
		<ul style="list-style-type: none"> • Staff records e.g. leave / sick leave, family responsibility leave up to date 			
		<ul style="list-style-type: none"> • Training programmes for staff implemented 			
		<ul style="list-style-type: none"> • Induction program in place 			
		<ul style="list-style-type: none"> • Evaluation program in place 			
		<ul style="list-style-type: none"> • Grievance procedure available 			
		<ul style="list-style-type: none"> • Disciplinary code available 			
	Staffing model for all facilities	<p>The staff component in supported living/ residential facilities must have is to be determined by the service provider regarding the services to be rendered.</p> <p>The following category staff is required for a 30 bed facility</p>			
		<ul style="list-style-type: none"> • 1 Manager 			
		<ul style="list-style-type: none"> • 1 Administrative Assistant(s) residents 			
		<ul style="list-style-type: none"> • 1 PN, 2 ENA 			
		<ul style="list-style-type: none"> • Sessional OT/SW/PT 			
		<ul style="list-style-type: none"> • 1:10 Caregivers for psychiatric disabilities 			
		<ul style="list-style-type: none"> • 1:5 caregivers for severe to profound ID 			
		<ul style="list-style-type: none"> • 1 Household supervisor 			
		<ul style="list-style-type: none"> • 5 General workers (laundry, kitchen/ cleaner) 			
		<ul style="list-style-type: none"> • 1 Cook(s) 			
		<ul style="list-style-type: none"> • 1 Handyman/driver/gardener 			

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Rights and Responsibilities of	People with disabilities are treated with dignity and respect	Supported/residential and day care facilities must have: <ul style="list-style-type: none"> • Declaration on the Rights of persons with disabilities signed, explained and displayed • Programmes must promote and maintain the status of MHCU 			
	Protection against abuse, neglect, ill-treatment and exploitation	Supported/residential and day care facilities must have: <ul style="list-style-type: none"> • Register on abuse - MHCA 02 to be completed • Procedure for management of abuse, neglect, ill-treatment and exploitation to be adhered to • Train staff and implement the protocol on abuse of MHCU • Training programmes for caregivers • Training programmes for survivors to deal effectively with abuse (survivors empowerment program) • Personal safety and security awareness programmes • Recipients / family adhere to the spirit and letter of the admission contract • Recipients / family respect the social, cultural and religious beliefs of their fellow recipients of service / residents • Recipients and / or their family remain active and self-reliant as far as possible • Recipients/family freely participate in all programmes • Recipients/ family do not engage in practices that may endanger and / or 			

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		disturb the lives, health and well-being of others			
Data information system	Collection of reliable and valid information for an informed public on available services in the residential facilities	Supported/residential and day care facilities must have:			
		• Reliable baselines information on all programmes and services rendered by the facilities.			
		• Demographic profiles of the community in which the facilities are located			
		• Situational analysis of the community in which the facilities are located.			
Nursing care administration	Provision of acceptable standards for continuous care	• Directory of service providers in the vicinity of the facility.			
		Supported/residential and day care facilities must:			
		• Provide the vision, mission statement, goals and objectives available to all categories of staff			
		• Provide appropriate deployment and utilization of staff, including adequate supervision from trained professionals			
		• Provide appropriate staffing and scheduling to ensure the effective and efficient management of care and support programs			
		• Provide continuous professional development program supervision			
		• Maintenance of registers			
		• Documentation in accordance with legislation			
		• Manage risks in the facility			

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		<ul style="list-style-type: none"> • Provide effective quality assurance program and policy in • Implement assessment programmes to determine any possible risk factors that need to be taken in consideration when developing individual care plans • Set goals for care plans for all residents • Implement individual development plans 			
Individualised development plan	Individual development plan	All the residents in supported/residential and day care facilities must have the following information:			
		<ul style="list-style-type: none"> • A personal record of each person in the facility 			
		<ul style="list-style-type: none"> • Each person /family confirms that there is an individualized development plan and that they participate in its development' 			
		<ul style="list-style-type: none"> • An accessible development plan has been explained and understood MHCU and/or the family 			
		<ul style="list-style-type: none"> • Regular individual plans regularly reviewed and do participate in changing their IDPs 			
		<ul style="list-style-type: none"> • The IDP reflects the development the goals and expectations as outlined in the broader care plan 			
		<ul style="list-style-type: none"> • A record of the name and details of the immediate family member or responsible person to be consulted in cases of emergency or health care decision making 			

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		<ul style="list-style-type: none"> • An assessment document completed within 48 hours of admission to the service, to be reviewed monthly or more frequently, if indicated. 			
		<ul style="list-style-type: none"> • A care plan to be updated in conjunction with regular assessments and identification of lifestyle risks 			
		<ul style="list-style-type: none"> • Relevant records and documentation in accordance with legislative requirement. 			
		<ul style="list-style-type: none"> • Reality Orientation Programs 			
		<ul style="list-style-type: none"> • Regular programmes appropriate for the needs and limitations for the persons being cared for. • safekeeping of records 			
Provision of specialized services	Specific care and support programmes	Community residential facilities must provide specific care and support programmes: Each resident including information relating to:			
		<ul style="list-style-type: none"> • Personal hygiene needs 			
		<ul style="list-style-type: none"> • Nutritional and fluid requirements and assistance 			
		<ul style="list-style-type: none"> • Mobility and transfers 			
		<ul style="list-style-type: none"> • Night time special requirements (e.g. Applying cot sides at night to prevent falls) 			
		<ul style="list-style-type: none"> • Bathing 			
		<ul style="list-style-type: none"> • Excretory needs 			
		<ul style="list-style-type: none"> • Medication management, administration and regular review. 			
		<ul style="list-style-type: none"> • Prevention of pressure sores, including mobilization, turning, pressure care. • Access to immunization according to recommended guidelines. 			

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		• Safety needs			
		• Stimulation programmes			
		• Rehabilitation services and a programme			
		• Physiotherapy and occupational services where applicable.			
		• Palliative care (respect and dignity of the terminally ill residents in the facilities)			
		• Protocol in place when transferring older persons with disabilities to a facility for frail care services			
Sports and recreation	Sport and recreational activities	Rehabilitation services			
		• Provision of assistive devices			
		• Physiotherapy and occupational therapy services			
		• Regular programmes appropriate for the needs and limitations for the persons being cared for.			
		• All persons to be out of bed at least twice a day and appropriately dressed.			
		• Participation in organized activities, including but not limited to reading, radio and TV, religious and cultural activities			
Health and safety	Cleaning services	• Program for normal and deep cleaning to be in place			
		• All contracted service providers to be registered with the Department as a service provider			
		• Cleaning schedule for the cleaning of all areas of the facility must be in place			
		• Adhere to applicable regulations, Policies and Procedures regarding Infection Control.			

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		<ul style="list-style-type: none"> • Policies and Procedures regarding infection control to be in place and available to all staff 			
	Infection Control	<ul style="list-style-type: none"> • Keep statistical data on all infections 			
		<ul style="list-style-type: none"> • Pest control policies and programmes must be in place 			
	Medical waste control	<ul style="list-style-type: none"> • Management of medical waste according to local government regulations 			
		<ul style="list-style-type: none"> • Operational control of the service 			
		<ul style="list-style-type: none"> • Policies in place regarding the storage of waste material until collection as well as the collection protocol 			
		<ul style="list-style-type: none"> • Hygiene management of all areas and pest control 			
Emergency services	Emergency services	Supported living/residential and day care facilities for people with disabilities must have:			
		<ul style="list-style-type: none"> • Accessibility of emergency services - Telephone number of emergency services prominently displayed 			
		<ul style="list-style-type: none"> • Proof of arrangements with emergency services with regard to management of emergencies 			
		<ul style="list-style-type: none"> • Emergency plan approved by relevant authorities 			
		<ul style="list-style-type: none"> • Access control protocol in place 			
		<ul style="list-style-type: none"> • Safety officers appointed 			
		<ul style="list-style-type: none"> • Evaluation procedures for OH&S (Occupation Health and Safety) in place 			
		<ul style="list-style-type: none"> • Proof of arrangement with doctors on call, local hospital, ambulance service, contact numbers for support services South African Police Service and nearest family member 			

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		<ul style="list-style-type: none"> • Firefighting equipment available, optimally placed and annually serviced, inspected and reported on. 			
		<ul style="list-style-type: none"> • Fire drills must be done and documented at least twice a year with residents 			
		<ul style="list-style-type: none"> • Staff trained in the effective use of the firefighting equipment OH&S (Occupational Health and Safety) 			

TYPES OF SERVICES AND LEVELS OF CARE**ANNEXURE C**

The levels of care required by users will determine the particular service they require and will directly impact the resource allocation, infrastructure, and staffing needs.

Users can be categorised as requiring 100% care, this is 24 hour care and high care, or as requiring partial assistance with some activities and finally, as being independent, but requiring some support through their recovery process.

100% or 24 hour care	Partial assistance	Independent
Users will need 24 hour care and full assistance with feeding, bathing, dressing, turning, positioning, stimulation, etc	Users require partial assistance in the form of reminders, physical assistance and guidance through their daily activities	Users are able to perform most daily activities, including work and social activities, independently, but may require some external support and guidance
Users may require constant supervision and one-to-one care in managing their behaviour and ensuring the safety of themselves, others and property	Users may be verbal and able to perform activities of daily living, but display poor quality in the performance of these duties.	Users may need support in decision making, goal planning and execution
	Users can participate in daily activities but may require assistance with certain tasks. Some supervision is required in the execution of daily tasks and activities	Users can engage in individual and group support structures and require assistance with higher cognitive problem solving

Day care services/centres for mental health care users

Component	Children with severe to profound intellectual disability (maximum 15)	Adults with Severe to profound intellectual disability (maximum 15)	Adults with Severe psychiatric disabilities (maximum 15)
HR	Trained Caregivers, 1 Cleaners 1 Admin/ Manager 1 Driver/ maintenance 1 cook/kitchen aid Access support services MDT in districts 1 trained caregiver :5 users 1 PN	Trained Caregivers, 1Cleaner 1 Admin/ Manager 1 Driver/ maintenance 1 Cook/kitchen aid Access support services MDT in districts 1 trained caregiver:5 users 1 PN	Trained Caregivers, 1 Cleaners, 1 Admin/ Manager 1 Driver/maintenance 1 Cook/kitchen aid Access support services MDT in districts 1 trained caregiver:10 users 1 PN
Training	All caregivers trained in first aid, management of difficult behaviour, handling of medication and side effects, feeding and positioning. Ongoing training to be provided on clinical and administrative	All caregivers trained in first aid, management of difficult behaviour, handling of medication and side effects, feeding and positioning. Ongoing training to be provided	All caregivers trained in first aid, management of difficult behaviour, handling of medication and side effects. Identification of early warning signs. able to access emergency services. Ongoing training to be provided
Infrastructure	Access control Accessible facilities Facilities in residential home:	Access control Accessible facilities Facilities in residential home: Special	Access control Accessible facilities Facilities in residential home: Special

	Special consent use approval (municipality) or as stipulated by the municipality -fire extinguisher	consent use approval (municipality) or as stipulated by the municipality -fire extinguisher	consent use approval (municipality) or as stipulated by the municipality -fire extinguisher
	Room	Quantity	Description
Facility infrastructure requirements	Reception and administration space	1	Desk, telephone, administrative shelves
	User toilets		Gender separated
	Hand basins	1	
Single storey	Dining room	1	Mixed, for all residents (include tables and chairs for nr of residents)
	Kitchen	1	Food preparation area
	Pantry	1	Food storage area
	Scullery	1	Built-in dish wash area
	Recreational area	1	Shared area
	Office	1	
	Treatment room	1	
	Work/ activity area	3	With electricity outlets
	Storeroom	1	With shelves
	Staff rest room and toilet	1	Fitted with seating and telephone
	Educational area	1	Appropriate seating and tables
	Rehabilitation area	1	OT, Physio

	General office	1	For all staff, sessional staff, educators, volunteers, etc
Programme	Programme with diverse activities, incl. ADL, stimulation programmes, recreation and leisure. Programme developed, graded and monitored by MDT, can be implemented by caregivers	Programme with diverse activities, incl. ADL, stimulation programmes, recreation and leisure. Programme developed, graded and monitored by MDT, can be implemented by caregivers	Programme with diverse activities, incl. ADL, vocational and life skills training, recreation and leisure. Programme developed, graded and monitored by MDT, can be implemented by caregivers
Funding	Subsidised income Care dependency grant - % towards fees Costing model to be developed	Subsidised income Disability grant - % towards fees Costing model to be developed	Subsidised income Disability grant - % towards fees Costing model to be developed
Governance	Meet all legislative requirements	Meet all legislative requirements	Meet all legislative requirements
Clinical management	- administration of medication with accurate recordkeeping -access to emergency medical services -adherence to norms and standards	administration of medication with accurate recordkeeping -access to emergency medical services adherence to norms and standards	administration of medication with accurate recordkeeping -access to emergency medical services adherence to norms and standards

Group homes and Halfway houses

Specifications for group homes and halfway houses, as provided by IUSS facility guide for mental health.

Room	Quantity	description
Individual bedrooms with clothes cupboards	30% of rooms	The rooms should be positioned with separation of male and female residences
Double rooms	70% of rooms	
Ablution areas	Bathrooms with showers only	Shared bathrooms, gender separated
	Toilets (nr to be calculated-1:10)	Gender separated
	Hand basins	Numbers to be calculated(1:10)
Shared laundry area	1	Heavy duty washing machine and tumble dryer
		Fully equipped with drainage and an outside wash line
		Ironing area
		Linen room
Shared dining area	1	Tables and chairs
Shared kitchen	1	Fridge, stove, microwave, double sink, lockable cupboards and work tops for food preparation
Refuse area	1	Locakable space for kitchen and household waste
Large household store		Lockable storage for donations, furniture or extra bulk
Pantry	1	Lockable food storage
Scullery	1	Built in wash basin with drip trays, dish washing area

Shared lounge area	1	Shared area with a fitted TV
Rehabilitation area	1	Installed with plugs for equipment, can be used as a work area, with tables
Store room	2	1 installed with shelves
Administrative office	1	Office furniture, desk, lockable shelves, computer, and a safe
Family lounge	1	Small reception lounge
Administrative area	1	Meeting room, admission area
Physical activity room/gym	optional	
Shared laundry area		Washing lines
Care taker or housemother	1	Sleeping and ablution area

Home-based care

Home based care refers to services offered at the homes of the people with mental disorders, providing psychosocial support in the areas of living, learning, socialising and working.

These services can be provided by ward based community outreach teams or by current day care service providers, and would generally require 1:1 care. Care may include, monitoring compliance to medication, assisting with feeding, bathing and dressing, collecting medication, etc.

Funds for this services is mainly for transportation costs and salaries for community health workers.

Supported independent /assisted living

This refers to the ongoing support in the form of individual or group supervision and instruction in basic skills of everyday living, which mentally ill persons receive in the community.

Supported or assisted living is a housing option providing social development programmes in order to encourage the independent functioning of people with disabilities and to facilitate deinstitutionalisation. This option could be community based or attached to a residential facility.

This could be where a mental health care user has access to a social worker, or care worker for assistance with some decision making, problem solving, etc. This could be that the user could live in a facility with minimal support and supervision, but within a protective environment.

Protective workshops

Protective workshops provides a protected environment outside of the open labour market, offering vocational services, e.g. vocational guidance, vocational training and selective placement, designed to secure and maintain suitable employment for mentally ill persons who cannot be integrated into the open labour market.

These services are currently funded by the Department of Social Development

Support groups

Support groups provides invaluable emotional, spiritual, physical and psychological support to individuals and families. Benefits include having contact with others who are experiencing similar challenges in their lives, obtaining useful information and developing different ways of dealing with the demands of mental illness.

Support groups are useful for providing information and guidance regarding illness, gaining insight into one's self, networking and to access referral systems.

The support group provides a sense of belonging and enables the expression and sharing of feelings, as well as concerns. Most importantly, it provides and encourages a sense of hope and positive living. In follow up care, the support group may promotes adherence to treatment.

Groups that meet to provide ongoing regular support for people with mental disorders. Through these groups persons with mental disabilities are enabled to increase their functioning so that they can be successful and satisfied with living, working, socialising and learning environments of their choice with the least amount of professional intervention.

These groups are not only for group discussions, but can also be used as activity or social and recreation groups. It could also include advocacy and peer led or self-help groups.

Support groups require initial and ongoing training of facilitators and as well as funding for venue, refreshments and transport.

The services should be supervised by the multi-disciplinary team from the district.

Residential Services: Facilities that offer accommodation, housing or support in homes or facilities like board and care homes to persons with mental disabilities.

Component	Children with severe to profound intellectual disability (maximum 15)	Adults with Severe to profound intellectual disability (maximum 15)	Adults with Severe psychiatric disabilities (maximum 15)
	<p>Maximum of 36 beds per unit , not more than 6 patients per room</p> <p>Facilities built in accordance to SABS standards(section 14 of Regulation 158)</p> <p>minimum floor area of any user's room, must be 10m² and single rooms shall have a minimum wall length of 2.6m as per Regulation 158</p> <p>Beds must be provided by daylight</p>	<p>Maximum of 36 beds per unit , not more than 6 patients per room</p> <p>Facilities built in accordance to SABS standards(section 14 of Regulation 158</p> <p>minimum floor area of any user's room, must be 10m² and single rooms shall have a minimum wall length of 2.6m as per Regulation 158</p> <p>Beds must be provided by daylight</p> <p>Clean utility room with minimum floor area of 5 m²</p>	<p>Maximum of 36 beds per unit , not more than 6 patients per room</p> <p>Facilities built in accordance to SABS standards(section 14 of Regulation 158</p> <p>minimum floor area of any user's room, must be 10m² and single rooms shall have a minimum wall length of 2.6m as per Regulation 158</p> <p>Beds must be provided by daylight</p> <p>Clean utility room with minimum floor area of 5 m²</p>

	<p>Clean utility room with minimum floor area of 5 m²</p> <p>Treatment room with minimum of 10m²</p> <p>Separate storage space for linen, pharmaceuticals, equipment, user's belongings and food</p> <p>Dirty utility room of 5-7m²</p> <p>A soiled linen and waste room, could be part of dirty utility room, space should then be 9m²</p> <p>Cleaners room containing shelves or low level sink. This could also be incorporated with the dirty utility room.</p> <p>Staff toilet x1 for each 36 users, which contains hand wash basin.</p> <p>10% of beds to be single rooms</p> <p>Separate recreational and dining area to be provided(minimum of 10m² for 5 users, and 1 m² added for each</p>	<p>Treatment room with minimum of 10m²</p> <p>Separate storage space for linen, pharmaceuticals, equipment, user's belongings and food</p> <p>Dirty utility room of 5-7m²</p> <p>A soiled linen and waste room, could be part of dirty utility room, space should then be 9m²</p> <p>Cleaners room containing shelves or low level sink. This could also be incorporated with the dirty utility room.</p> <p>Staff toilet x1 for each 36 users, which contains hand wash basin.</p> <p>10% of beds to be single rooms</p> <p>Separate recreational and dining area to be provided(minimum of 10m² for 5 users, and 1 m² added for each additional 10 users</p> <p>Special safety features i.r.o. electric plugs and switches,</p>	<p>Treatment room with minimum of 10m²</p> <p>Separate storage space for linen, pharmaceuticals, equipment, user's belongings and food</p> <p>Dirty utility room of 5-7m²</p> <p>A soiled linen and waste room, could be part of dirty utility room, space should then be 9m²</p> <p>Cleaners room containing shelves or low level sink. This could also be incorporated with the dirty utility room.</p> <p>Staff toilet x1 for each 36 users, which contains hand wash basin.</p> <p>10% of beds to be single rooms</p> <p>Separate recreational and dining area to be provided(minimum of 10m² for 5 users, and 1 m² added for each additional 10 users</p> <p>Special safety features i.r.o.</p>
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	<p>additional 10 users</p> <p>-separation between children and adults (eating, sleeping, bathing)</p> <p>Direct vision of all beds from central work station or from adjacent corridor</p> <p>Special safety features i.r.o. electric plugs and switches, heaters, door locks and hot water supply</p> <p>A play area adjacent or visible, and easily accessible from workstation</p> <p>1 Electrical socket outlet for every 3 beds</p>	<p>heaters, door locks and hot water supply</p> <p>A play area adjacent or visible, and easily accessible from workstation</p> <p>1 Electrical socket outlet for every 3 beds</p>	<p>electric plugs and switches, heaters, door locks and hot water supply</p> <p>A play area adjacent or visible, and easily accessible from workstation</p> <p>1 Electrical socket outlet for every 3 beds</p>
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Boarding House:

A residential care facility where mentally ill people are regularly supplied with meals and lodging for pay.

These users live independently and should be followed up at outpatients departments and make use of other day care services.



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

**Assessment Tool for Residential and Day Care Facilities Providing Care, Treatment And
Rehabilitation Services for Mental Health Care Users**

ASSESSMENT TOOL FOR RESIDENTIAL AND DAY CARE FACILITIES PROVIDING CARE, TREATMENT AND REHABILITATION SERVICES FOR MENTAL HEALTH CARE USERS

IDENTIFYING PARTICULARS			
NAME OF CENTRE:			
PHYSICAL AND POSTAL ADDRESS:			
NAME OF CENTRE MANAGER:			
CONTACT TEL. & FAX			
DATE:	Nr. of MHCUs <18 []	Nr. of MHCUs >18 []	
Licensed with Department of Health in terms of Section 43 of the Regulations to the Mental Health Care Act (Act 17 of 2002):		YES	NO.....

ASSESSMENT TOOL FOR RESIDENTIAL AND DAY CARE FACILITIES PROVIDING CARE, TREATMENT AND REHABILITATION SERVICES FOR MENTAL HEALTH CARE USERS					
Sub-Component	Elements	Yes	No	Partial	Comments
1. Signage & Notices	Exterior Environment				
	All way -findings signage in place				
	Display the board reflecting Facility name, physical address, contact details is visibly displayed at the entrance				
	The NPO Organogram with contact details of a facility manager is displayed on a central notice board.				
	All services in the facility are clearly signposted				
	There is a lockable gate				
	There is staff/personnel managing the gate/ Bell				
	There is a perimeter fence / wall				
	Perimeter fence / wall is intact				
	The exterior is aesthetically pleasing and clean				
	Trees trimmed and grass is cut				
	Paving is free of weeds				
	Flower beds well-kept and free of weeds				
	The facility's premises clean (e.g. free from dirt & litter)				

**ASSESSMENT TOOL FOR RESIDENTIAL AND DAY CARE FACILITIES PROVIDING CARE, TREATMENT AND REHABILITATION SERVICES FOR
MENTAL HEALTH CARE USERS**

	Exterior walls of the facility clean, no peeling paint, cracks on wall				
	Burglar doors and windows available				
	Designated smoking area / smoking restricted to certain sections / areas				
	There is emergency water supply in the facility				
	There is functional back-up electricity supply				
	The sewerage system is functional				
	Building entrance (stairs, ramps, disability access)				
	Availability of rails if entrance has stairs/ramps (not applicable if surface is flat)				
Additional Comments					
Sub-Component	Elements	Yes	No	Partial	Comments
2. Leadership and Governance	Facility has a valid registration as an NPO from DSD available				
	Valid Licence in terms of Regulation 43 of MHC Act is available				
	Facility has a valid occupancy certificate				
	Facility has a certificate of acceptability for food handling				
	Facility has a health certificate				
	Monthly/quarterly facility reports on required indicators and outcomes				
	Records of quarterly audit by designated provincial officials are available				
	Facility has appointed facility manager				
	Availability of Board of directors (list of members) and designations				
	Is the board active – records of meeting minutes				
	Staff compliment available as per agreement				
	Job description for each individual person is available on personal file				
	Health professional staff are registered with the relevant statutory bodies				
	Incident reports are available				
	Availability of relevant policies, guidelines and SOP's				

**ASSESSMENT TOOL FOR RESIDENTIAL AND DAY CARE FACILITIES PROVIDING CARE, TREATMENT AND REHABILITATION SERVICES FOR
MENTAL HEALTH CARE USERS**

	Complaints/compliments/suggestion boxes and procedures for the users and relatives are visibly placed in the facility				
	There is a functional facility based telephone/cellular phone (at reception /managers office)				
Additional comments					
3. Staff Identity & dress code	Prescribed dress code				
	All staff members comply with dress code				
	All staff members wear identification tag				
Additional Comments					
4. Staff Training	Duty roster / schedule of staff				
	Attendance registers for all staff available				
	Staff receive basic in-service training (records/ evidence)				
	Personnel indicate they have received training on the use of medical equipment within their scope of practice				
	Personnel indicate they receive training on procedures in the event of death of MHCUs				
	Personnel indicate they have knowledge of the facility's disaster management plan & their roles				
	Personnel have knowledge of dealing with disease outbreaks				
	All personnel have received training in first aid				
Additional comments					
Sub-Component	Elements	Yes	No	Partial	Comments
5. Records & Filing	Records / Filing Room available				

**ASSESSMENT TOOL FOR RESIDENTIAL AND DAY CARE FACILITIES PROVIDING CARE, TREATMENT AND REHABILITATION SERVICES FOR
MENTAL HEALTH CARE USERS**

Room	There is a single record per user containing the following: personal details, original ID, family contact details, etc.				
	Health records are kept, archived, disposed, stored and retrieved according to the applicable legislation				
Additional comments					
6. Infection Prevention and Control(IPC)	All relevant staff wear appropriate protective clothing				
	Pest control measures are in place				
	Transmission precautions for communicable diseases is in place (cough, skin eruption / rash, etc...)				
	Linen in use is clean				
	The linen is appropriately used for its intended purpose				
	Waste is properly segregated				
	Waste is stored in access-controlled rooms/area				
	Waste is disposed of in line with SOP				
	Sharps are disposed of in impenetrable, tamperproof containers				
	Cleaning material is available and stored appropriately				
	All service areas are clean				
Additional comments					
7. Rest Rooms-toilets	Gender separated toilets				
	Toilet space is according to SABS standards				
	Functional toilet seat with a lid				
	All toilets are clean, intact and functional				
	Hand wash basin with cold and hot (must be thermostatically controlled) water				
	Soap and hand paper towels available				
	Toilet paper and hand soap available				

**ASSESSMENT TOOL FOR RESIDENTIAL AND DAY CARE FACILITIES PROVIDING CARE, TREATMENT AND REHABILITATION SERVICES FOR
MENTAL HEALTH CARE USERS**

	Presence of / at least one toilet for persons with disabilities				
Additional comments					
Sub-Component	Elements	Yes	No	Partial	Comments
8. Rest Rooms- bathrooms	There is constant supply of clean running water				
	Gender separated bathrooms				
	Availability of a shower / bath				
	Carpets or wooden skirting in ablution rooms				
	Availability of a shatterproof mirror in each bathroom				
Additional comments					
9. Food and Meals	Menu approved by a Nutritionist / a dietician				
	The menu for specific dietary needs, e.g. diabetic diet, hypertensive diet and etc. available ??? follow up with nutrition				
	Meals served three times per day and an evening snack				
	Staff available to assist MHCUs during meal times				
	Food prep area separate from dishwashing and garbage areas				
	Food handlers / catering staff wear relevant protective clothing				
	Carpets or wooden skirting in the kitchen				
	Kitchen next to the dining hall, if further away presence of a food trolley				
	Relevant appliances available:				
	A fridge				
	A stove				
	A kettle				
	Cutlery and crockery				
	A rubbish bin				

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	A microwave oven				
	General dining room facility available				
	Dining hall furniture available (table & chairs)				
Additional comments					
10. Rooms & Corridors	Corridors clean				
	Corridors have handrails along both sides				
	Ramps provided for in all accommodation and therapeutic areas				
	Adequate lighting provided for at entrances and ramps				
Additional comments					
Sub-Component	Elements	Yes	No	Partial	Comments
11. Rooms & Corridors	Adequate lighting – must be provided in every room				
	Electrical-plumbing and mechanical fittings must be vandal-proof (all electricity wall sockets must be covered)				
	Rooms comply with minimum space requirements (reference R158 pg 56).				
	Rooms -Temperature control mechanisms available - heater				
	Rooms – Temperature control mechanisms available - fan/ air-conditioner				
	Adequate ventilation is observed				
	Floors of all rooms and corridors are of concrete finish to a smooth washable surface or covered with washable material.				
Additional comments					
12. Bedrooms	Doors comply with SABS standards				
	Room contain more than 12 beds				
	Bed size – appropriate bed size and height				
	Each bed have a lockable bedside locker & a chair				

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	Each MHCU has individual closet				
Additional comments					
13. Laundry Room	Laundry has relevant equipment;				
	A washing machine				
	A dryer				
	Iron				
	Iron board/surface				
	Carpet or wooden skirting in laundry room, cleaning utility room, soiled linen room				
	Separation of clean, dirty and soiled linen				
Additional comments					
14. Recreational Area	Indoor recreational and leisure facilities available				
	Outdoor recreational and leisure facilities available				
	Family / visitors lounge with furniture (including reception area for the visitors) is available				
	Communal lounge available with the following;				
	A television set				
	A DVD player				
	A music player				
Additional comments					
Sub-Component	Elements	Yes	No	Partial	Comments
15. Rehabilitation Programmes	Room with water and electricity available for execution of rehabilitation programme to accommodate total number of users				
	Activity plan available				

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	Evidence of interventions available on user files				
	Tables and chairs adequate for number of users				
	Equipment and material available and stored appropriately				
Additional comments					
16. Treatment Room	90% of tracer medicines are available				
	Medicine expired				
	Expired medicine is disposed of according to prescribe procedures				
	Basic medical Equipment available:				
	Oxygen cylinder(fixed/portable)				
	Blood pressure monitor				
	Glucometer				
	Thermometer				
	Examination couch is available				
	Dressing trolley available				
	Emergency trolley is available ???				
	Treatment room allows for plugging of equipment,				
	Basic surgical supplies (consumables) are available				
	Position of uninterrupted power supply is inaccessible for patients				
	Availability of First Aid Kit/Box				
Additional Comments					
17. Reproductive and Preventive health care service	MHCU have access to contraceptives or family planning services				
	MHCU have access to flu vaccines as per protocol				
	MHCU have access to Post Exposure Prophylaxis (PreP)				
Additional Comments					

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18. Disaster Preparedness	Fire fighting equipment is available				
	Records of mock fire drills with users and staff				
	Emergency evacuation procedure is practiced annually				
	Smoke detection - detector should be linked to the reception				
	Emergency exits clearly marked				
Additional comments					
19. Records & Filing Room	Records / Filing Room available				
	There is a single record per user containing the following: personal details, original ID, family contact details etc.				
Additional comments					
Sub-Component	Elements	Yes	No	Partial	Comments
20. Records & Filing Room	Health records are kept, archived, disposed, stored and retrieved according to the applicable legislation				
Additional comments					
21. Referral system	There is up to date SOP for referral, transportation of MHCUs and emergency.				
	Copy of referral form used by the facility includes user's details, reason for referral or transfer, users health status, current medication, details of receiving official and name of receiving institution.				
	Personnel know how & when to call for an emergency user transport				
	Contact details for emergencies should be visible				
Additional comments					

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MENTAL HEALTH CARE USERS

GENERAL COMMENTS

COMPLETED BY PROVINCIAL DEPARTMENT

NAME:

DESIGNATION:

SIGNATURE

DATE:

COMPLETED BY FACILITY REPRESENTATIVE

NAME:

DESIGNATION:

SIGNATURE

DATE: