

## قائمة التقييم للمستشفيات (عناية مركزة اطفال حديثي ولادة)

حاصل على اعتماد سباهي CBAHI ACCREDITED					اسم المستشفى HOSPITAL NAME
<input type="checkbox"/> لا ينطبق NOT APPLICABLE	<input type="checkbox"/> لا NO	<input type="checkbox"/> نعم YES			
					سبب الزيارة VISIT REASON
			رقم التواصل CONTACT NUMBER	اسم مدير المستشفى HOSPITAL DIRECTOR NAME	
			المؤهل DEGREE	اسم المدير الطبي MEDICAL DIRECTOR NAME	
مصنف من قبل هيئة التخصصات الصحية CERTIFIED OF THE SCFHS					التخصص SPECIALITY
<input type="checkbox"/> لا ينطبق NOT APPLICABLE	<input type="checkbox"/> لا NO	<input type="checkbox"/> نعم YES			
					البريد الالكتروني للمستشفى HOSPITAL E-MAIL
	الوقت TIME		التاريخ DATE		اليوم DAY

NICU VISIT STATISTIC					
TOTAL HOSPITAL BEDS	RESPIRATORY THERAPY	NURSES	NICU RESIDENT PHYSICIAN	NICU SPECIALISTS	NICU CONSULTANTS
ISOLATION ROOMS	Outborn PATIENTS	NON-VENTILATED PATIENTS	VENTILATED PATIENTS	OCCUPIED BEDS	NICU BEDS

### Assessment Tool:

#### Evaluation Score:

- Met
- Not Met
- N/A – Not Applicable

- OBS – Observation
- DR – Document- Records
- DE – Document Evidence
- INT – Interview
- PF – Personnel File

## HOSPITAL COMMISSIONING CHECKLISTS OPERATIONAL READINESS STANDARDS ICU ADULT

ICU Adult			
Code	Checklist Elements	Tool	Score
1	Appointed director/In charge NICU certified Consultant	PF	
2	NICU physicians have formal education/ training and experience in intensive care medicine with preferably 2 years of work experience in NICU	PF	
3	NICU located in an easy access\connectivity with obgyne, Operation Theater, Radiology, Laboratories and Pharmacy Departments.	OBS	
4	Has clear pathway to pharmacy, radiology and Lab departments	OBS	
5	Number of NICU beds is at least 10: 1000 of total delivery Number/year	OBS	
6	One negative pressure isolation room per 10 beds required	OBS	
7	The department All entries should be secured with controlled access (CCTV and staff access card)	OBS/DE	
8	Janitor room	OBS	
9	Nutrition room/ Breast Feeding	OBS	
10	Counseling/meeting room	OBS/DE	
11	Nursing station	OBS/DE	
12	Medication room	OBS/DE	
13	Storage for NICU Equipment	OBS/DE	
14	Utility room, clean / Dirty	OBS/DE	
15	Central nursing station, integrated with a central monitoring system and the ability to visualize and monitor all patients or at least priority patients	OBS	
16	Wash Sink 1:4 bed ratios in open design, enough width and depth (one sink/room for each single room)	OBS	
17	Glucometer: two (02) per 6-12 bed NICU + One (01) backup	OBS	
18	Availability of Oxygen (2 outlets with 2 flow meters and air 2 outlets ,1 vacuum and 1 mixed gas outlet based on the availability gas types)	OBS	
19	Supply from the manifold division (with a back-up supply from emergency central cylinder bank)	OBS	
20	Each patient bed location is provided with a minimum of 7 electrical receptacles (single, duplex, or quadruplex type or any combination thereof) at least 7 labelled as emergency receptacles according to National electrical code (NEC code) and National Fire Protection Association (NFPA)	OBS	
21	Intubation set and difficult intubation cart/kits/Policy	OBS	
22	NICU bed with integrated weight scale	OBS	
23	Patient calling alarm	OBS/DE	
24	Monitors with the minimum of the following waves: noninvasive and invasive monitoring of arterial blood pressure, central arterial pressure, respiratory rate, oxygen saturation, ECG lead and heart rate. One monitor for every bed + 25% equipment backup	OBS	

25	NICU Ventilators, One for every bed + 20% backup	OBS	
26	2 Non-invasive ventilators, or 2 conventional ventilators with capability of non-invasive ventilator moods for each 6 patients	OBS	
27	At least two transport ventilators with monitor + 1 backup	OBS	
28	Infusion pumps four to eight (4 to 8) per bed in NICU/ Suring pump 2-4 per bed	OBS	
29	Availability of hearing, cardiac, metabolic screening test	OBS/DE	
30	High flow nasal cannula (1:10 per beds)	OBS	
31	Portable thermometer	OBS	
32	Crash cart with defibrillator: at least one in 10 beds NICU + I in reserve	OBS	
33	Videolaryngoscope	OBS	
34	Portable Ultrasound	OBS	
35	One portable x-ray machine + PACS (Picture archiving and communication system) preferred as per SOS	OBS	
36	Trays / trolleys: drug carts	OBS	
37	Portable suction regulator (one for crash cart and one for the unit)	OBS	
38	Blood gas machine inside the unite	OBS	
39	Heating / cooling system for patients	OBS	
40	Air mattress	OBS	
41	12 lead portable ECG	OBS	
42	Otoscope/ophthalmoscope	OBS	
43	IV stand	OBS	
44	Respiratory therapy ratio 1:6 patient for each shift	OBS	
45	Physiotherapy	OBS	
46	Clinical nutritionist, ratio 1:20 patient per day	OBS	
47	Clinical pharmacist 1:20 patient per day	OBS	
48	Admission and discharge criteria	OBS/DE	
49	Evidence of multidisciplinary approach in patient care	OBS	
50	Availability of resuscitator warmer 1 per every room	OBS	
51	DNR policy	OBS/DE	
52	VAE, CLABSI and CAUTI bundles	OBS	
53	Modular system design	OBS	
54	Incubator washing room	OBS	
55	Breast Feeding store area and refrigerator and warmer	OBS	
56	Brest feeding express area	OBS	
57	Availability of basic and critical medication and consumables	OBS	
58	Availability of incubator 1 for every bed	OBS	
59	Availability of phototherapy machine 1:4 beds including minimum 1 intensive phototherapy per 15 beds	OBS	

60	Availability of care retinopathy of prematurity exam	OBS/DE	
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Summary visit note			
	End date to correction	ISSUES	CODE
1			
2			
3			
4			
5			
6			

**OTHER NOTES:**

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Commitment members		Date	Sign
1			
2			
3			
4			
5			
Institution Director signature		Date	Sign