

ISLAMABAD HEALTHCARE REGULATORY AUTHORITY

Minimum Service Delivery Standards For Dental Clinics

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STANDARDS AND INDICATORS

1. Responsibilities of Management

Standard 1: The clinic is identified as an entity and easily accessible.

Indicator 1: The clinic is identifiable with the name and Registration/ license number on the sign boards.

Indicator 2: The patient/client has easy access to the clinic.

Indicator 3: The dental clinic is registered/licensed with the IHRA.

Indicator 4: Door plate clearly displays name and qualifications of the dental surgeon.

Indicator 5: The staff on duty uses identity badges.

Indicator 6: Consultation hours are displayed.

Standard 2: The manager and the healthcare service providers at the clinic is/are suitably qualified.

Indicator 7: The clinic manager is duly designated and has requisite qualifications.

Indicator 8: PMC & IHRA Registration certificate of the dental surgeon is displayed

Standard 3: Clinic premises support the scope of work/services.

Indicator 9: The size/premises of the dental clinic is as per the minimum requirement.

Indicator 10: The dental clinic has adequate facilities for the comfort of the patients.

Indicator 11: The dental clinic has adequate arrangements to maintain the privacy of patients during consultation/examination/procedures.

Standard 4: The responsibilities of the management are defined.

Indicator 12: The dental clinic management intimates any change in scope or portrayal of services, the location of the HCE or the service providers etc to the IHRA.

Indicator 13: The dental clinic management addresses social and community responsibilities.

2. Facility Management and Safety

Standard 5: The dental staff is aware and complies with the relevant laws, rules, regulations, bylaws inspection requirements under the applicable codes.

Indicator 14: The clinic plans for equipment in accordance with its scope of services.

Indicator 15: The clinic management is conversant with the relevant laws and regulations.

Indicator 16: The management ensures implementation of relevant laws.

Indicator 17: There is mechanism to regularly update licenses, registrations and certifications.

Indicator 18: The staff has the knowledge about early detection and containment of fire and non-fire emergencies.

Indicator 19: Arrangement to combat fire and non-fire emergencies are in place.

Standard 6: The clinic has a program for management of dental and support service.

Indicator 20: The clinic plans for equipment in accordance with its scope of services.

Indicator 21: Dental equipment is selected by a collaborative process.

Indicator 22: Qualified and trained personal operate and maintain the equipment.

Indicator 23: Equipment is periodically inspected, serviced and calibrated to ensure its proper functioning.

3. Human Resource Management

Standard 7: There is documented personnel record of dental surgeons and staff.

Indicator 24: Personal record/credentials in respect of all staff are maintained.

Standard 8: The employees joining the dental clinic/practice are oriented to the environment, respective sections and their individual jobs.

Indicator 25: Each regular/part time employee, student and voluntary worker is appropriately oriented to the overall environment of the dental clinic/relevant section/units/service and program policies and procedures.

Indicator 26: Each regular/part time employee is made aware of the job description.

Indicator 27: Performance evaluations are based on the JDs.

Indicator 28: Each regular/part time employee is made aware of his/her rights and responsibilities and patient rights and responsibilities.

4. Information Management Systems

Standard 9: Patient clinical record is maintained at the dental clinic.

Indicator 29: Every patient's record has a unique identifier and particulars for identification.

Indicator 30: Only authorized persons make entries in the record.

Indicator 31: Every record entry is dated, time and signed.

Indicator 32: The record provides an up-to-date and chronological account of patient care.

5. Quality Assurance/Improvement

Standard 10: The dental clinic has a quality assurance/quality improvement system in place.

Indicator 33: Service provision is as per portrayal.

Indicator 34: A quality improvement system is in practice.

Standard 11: The clinic identifies key indicators to monitor the inputs, process and outcomes which are used as tools for continual improvement.

Indicator 35: Monitor includes appropriate patient assessment.

Indicator 36: Monitoring includes safety and quality control programs of the diagnostic services.

Indicator 37: Monitoring includes all invasive procedures.

Indicator 38: Monitoring includes adverse drug events.

Indicator 39: Monitoring includes use of anesthetics.

Indicator 40: Monitoring includes availability and consent of the clinic records.

Standard 12: Sentinel events are assessed and managed.

Indicator 41: The clinic has enlisted the sentinel events to be assessed and managed.

6. Assessment and Continuity of Care

Standard 13: Portrayed services conform to the legal provision.

Indicator 42: The services being provided at the clinic are displayed as per code of Ethics.

Indicator 43: specialized services being provided conform to the standards.

Indicator 44: The use and maintenance of specialized equipment conforms to the standards.

Indicator 45: Dental laboratory services, provided, conform to the respective standards.

Indicator 46: Dental radiological diagnostic services, if being provided, conform to the respective standards.

Indicator 47: Dental health education is provided as per guidelines.

Indicator 48: Preventive services are provided as per guidelines.

7. Care of Patients

Standard 14: The clinic has a well-established patient management system.

Indicator 49: The clinic has an established registration and guidance process.

Indicator 50: Standard/Ethical practice is evident from the patient record.

Indicator 51: The clinic has referral SOPs.

Indicator 52: The clinic has list of contact numbers of the referral facilities, medico legal authorities, concerned police station, ambulance/rescue services and social services organizations.

Standard 15: The clinic has essential arrangements for providing care to emergency cases.

Indicator 53: The clinic has essential arrangements to cater for emergency care.

8. Management of Medication / Dispensing

Standard 16: Prescribing practices conform to the standards.

Indicator 54: Standards for prescription writing are followed.

Indicator 55: Prescriptions are clear, legible, dated, timed, named / stamped and signed.

Indicator 56: Prescriptions are provided to the patients.

Standard 17: Storage and dispensing/usage confirms to the guidelines.

Indicator 57: Medicines/disposable/dental materials are stored as per guidelines.

Indicator 58: Expiry dates/ shelf life are checked prior to administering, as applicable.

Indicator 59: Labeling requirements are implemented.

Indicator 60: Dispensing/utilization is by an authorized person.

9. Patient Rights/Responsibilities and Education

Standard 18: There is a system for awareness/education of patients and others regarding the charter of Rights and Responsibilities for compliance.

Indicator 61: The charter of Rights and Responsibilities are displayed and patient/families are guided on it.

Standard 19: PRE-2: There is a system for obtaining consent for treatment.

Indicator 62: The dental surgeon obtains consent from patient before examination.

Indicator 63: The clinic has listed those situations where specific informed consents required from a patient or family.

Standard 20: Patient and family have a right to information about expected costs.

Indicator 64: The patient/family is informed about the cost of treatment.

Standard 21: Patients and families have a right to refuse treatment and lodge a complaint.

Indicator 65: Patients and families have a right to refuse the treatment.

Indicator 66: Patients and families have a right to complain and there is a mechanism to address the grievances.

10. Infection Control

Standard 22: The clinic has a well-designed, comprehensive and coordinated infection control system aimed at reduced/eliminating risks to patients, visitors and care providers.

Indicator 67: The infection control plan is documented which aims at preventing and reducing the risk of nosocomial infections.

Indicator 68: The clinic has designated staff and defined responsibilities for infection control and waste management activities.

Indicator 69: The clinic has appropriate consumable, collection and handling systems, equipment and facilities for control of infection.

Indicator 70: All staff involved in the creation, handling and disposal of dental/clinical waste shall receive regular training and ongoing education in the infection control and safe handling of dental waste.

Standard 23: There are documented procedures for sterilization activities in the clinic.

Indicator 71: There is adequate space available for sterilization activities.

Indicator 72: Regular validation tests for sterilization are carried out and documented.

Indicator 73: There is an established procedure for recall in case of breakdown in the sterilization system.

Bibliography

1. Minimum Service Delivery Standards for Dental Clinics, Punjab Healthcare Commission.
2. International Principles for Healthcare Standards. 3rd Edition. December 2007. Published by International Society for Quality in Healthcare (ISQua).