

Private Hospitals Unit News

Issue 4, July 2005

New design guidelines

The new *Victorian Design Guidelines for Hospitals and Day Procedures Centres* (DG) were released on the 1 April 2005. They represent the minimum design guidelines for the private and public hospitals and day procedure centres in Victoria and can be accessed electronically or downloaded from www.health.vic.gov.au/privatehospitals/pubs.htm

DG provides considerable information in terms of:

- Health Facility Briefing & Planning e.g. Standard components (part B)
- Access, Mobility and OH&S requirements (Part C)
- Infection Control (Part D)
- Building Services and Environmental Design (Part E)
- Generic Room Data Sheets, Room Layout Sheets and Functional Relationships Diagrams (Enclosures)

Compliance with the DG is in addition to the obligation to comply with all Statutory and Legislative requirements (e.g. Building Code of Australia, Building Regulations, relevant Australian Standards, etc) thus advice from suitably qualified design and building practitioners is highly recommended.

Changes to the Approval in Principle (AIP) process

The recently released DG resulted in the following changes being made to the AIP process:

- All applications received after the 1 April 2005 are assessed using the new DG
- A Description of the Project form is required
- To simplify the requirements for Adequacy of Health Services a standardised form has been introduced
- A schedule of accommodation is required
- An informal preliminary review of the proposed plans is offered by PHU staff in order to identify any obvious non-compliance areas before a formal AIP has been submitted.

For further information, please contact PHU directly on 03 9616 2164 or refer to the Client Resource section at www.health.vic.gov.au/privatehospitals/resources.htm

NBV on line verifications

Proprietors must ensure that relevant staff particulars (e.g. current registration number) are kept up-to-date in the staff register, as specified in Regulation 36. This is in addition to the process adopted for verifying annual nurse registration certificates.

From the Director, Programs



Welcome to the fourth edition of the private hospitals newsletter. The newsletter aims to provide information of relevance and interest to the proprietors of Victorian private hospitals and day procedure centres.

A new section on coronial recommendations has also been included.

Copies will be sent to proprietors and also be available at:

www.health.vic.gov.au/privatehospitals

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Private Hospitals and Private Day Procedure Centres Advisory Groups

Two advisory groups – the Private Hospitals Advisory Group and the Private Day Procedure Centres Advisory Group – have been established to provide a forum for the Department of Human Services (the Department) and representatives of the Private Hospital Industry or Private Day Procedure Centres to explore opportunities, issues and future directions with respect to healthcare in Victoria.

Notification of appointments

The **Notification of appointment form** has been revised and is to be used for notifying the Department of any changes or appointments to the positions of CEO, DON, Infection Control, Complaint Liaison officer and Board Directors.

Annual inspection findings

Microbiological testing of endoscopy equipment

GENCA Guidelines on Infection control in Endoscopy (page 69 – section 3.1) prescribes that all endoscopes processed in an automated reprocessor (e.g. Soluscope, Medivator) shall be monitored every four (4) weeks. Proprietors are encouraged to review their current endoscopes monitoring schedule and revise to comply with current GENCA guidelines.

Validation of sterilisers, including statim sterilisers

AS 4187:2003 prescribes the requirement for annual validation of **all** sterilisers at a facility (e.g. including Statim) and provides the format of the validation report.

Chemical residue testing for automatic instrument washers

AS 4187:2003 (Table 7.2) prescribes the requirement for **daily** chemical residue testing (pH testing) for automatic instrument washers. Please note that this is different to the protein residue tests (such as TOSI, Browns, etc). Proprietors are encouraged to contact their infection control practitioner/instrument washer manufacturer for further advice on the process of undertaking the required water pH test.

Coroner's recommendations

Case No 197/04 – the coroner recommends a note of caution to Nursing and Medical staff at Maternity Hospitals when looking after mothers with a history of epilepsy. Protocols for re-commencement of relevant therapy post-delivery, as well as adequate measures for supervision should be considered.

Case No 2805/01 – the coroner re-emphasises the need for appropriate clinical record keeping for both nursing and medical entries. Particularly in this case, deficiencies highlighted included: documentation of baseline observations on admission, treatment plan, orders and diagnosis, as well as inconsistent and haphazard clinical pathways notes.

In addition the clinical pathway used did not capture additional co-morbidities, specific to this the patient.

Websites of interest

- The Department of Health and Ageing has released minimum requirements for recognition of private hospital-based rehabilitation services. For a copy please refer to the PHI 26/05 Private Health Insurance Circular on the following website www.health.gov.au/internet/wcms/publishing.nsf/Content/health-privatehealth-providers-phicirculars2005-2605
- Changes to *Cemeteries and Crematoria Act 2003* and *Cemeteries and Crematoria Regulations 2005* are effective from 1 July 2005. Accordingly, Doctors will be required to certifying death using the latest Medical Certificate of Cause of Death. For more information on this and other hospital relevant topics refer to the Victorian Government Hospital circulars at www.health.vic.gov.au/hospitalcirculars

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