



# UCMB ACCREDITATION PROGRAM

## HEALTH FACILITY (LOWER LEVEL UNITS)

### APPLICATION FOR ACCREDITATION FOR 2020

<i>Name in full -in capital letters of the applicant and signatory</i>	<i>Position held in the unit</i>
<i>Name of the Unit (it needs to be the same of the License issued by the Registrar)</i>	
<i>Diocese</i>	<i>District</i>
<i>Name of the Chairperson of the Health Unit Management Committee</i>	<i>Title</i>
<i>Name of the secretary of the Health Unit Management Committee</i>	<i>Title</i>
<i>Name of the administrator/treasurer of the Health Unit Management Committee</i>	<i>Title</i>

The undersigned states the Health Unit here above named wishes to operate in line with the Mission Statement and Policy of the RCC Health services. S/he also states that the Health unit has satisfied the requirements for accreditation for year 2020, as listed in the reverse page of this form.

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On behalf of the Unit the undersigned requests UCMB to issue a Certificate of Accreditation for year 2020.

Date \_\_\_\_\_ Signature \_\_\_\_\_

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**ENDORSEMENT OF THE DIOCESAN HEALTH CO-ORDINATOR**

I state that the above named health unit has satisfied ALL the Statutory and ALL the incremental criteria established by the Health Commission. In addition the Unit has also satisfied the following additional criteria established by the Diocesan health Board (*if applicable*):

\_\_\_\_\_

\_\_\_\_\_

I therefore recommend that a Certificate of Accreditation be issued to the Unit

Date \_\_\_\_\_ Name \_\_\_\_\_ Signature \_\_\_\_\_

# CRITERIA OF ACCREDITATION PROGRAM FOR 2020

**Please Tick the option that best describes the situation in the Health Unit**

	STATUTORY CRITERIA	YES	NO
	The Unit has a regular license for operation for year 2019 issued by the Registrar of the Medical and Dental Practitioners' Council.		
	The Unit has paid its annual contribution for year 2019 to UCMB.		
	The Unit has filled the annual activity and finance report for FY 2018/19 on the HMIS 107 plus financial staffing Form		
	The Unit has a Charter whose copy is deposited at UCMB		
	The Unit has a Manual of Employment for staff		
	The Unit has a Manual of Management of Finances		

## **CARRIED FORWARD FROM THE PAST**

No	Incremental criterion as approved by Health Commission	Yes	NO	NA
1	The Unit has a working Management Committee. ( see the composition and minutes)			
2	The Units has and uses a Patients' Registers. (OPD, IP, ANC MCH, HIV/AIDs, CHILD HEALTH et al)			
3	The Unit has at least one professional staff at Enrolled level.			
4	The Monthly Summary Report forms were completed appropriately over the last 3 months.			
5	The facility provides adequate infection prevention/control in the area of disposal of sharps and needles – observed by DHC			
6	The facility has the Uganda Clinical Guidelines 2016 – observed by DHC			
7	The facility has soap and water in/near consulting rooms – observed by DHC.			
8	The facility has a clean waiting area – observed by the DHC.			
9	The facility has sectioned off examination area to protect the patients' privacy – observed by DHC.			
10	The facility has clean latrines/toilets – observed by DHC.			
11	The HU has stocks the essential / tracer medicines at the moment of submission of the accreditation request ( )			
12	Medicine shelves are well lebeled and stock cards are up to date and correspond to physical stock			
13	The HU provides immunization during a fixed day each week			
14	The HU carries out outstations immunization <i>a) Exceptions to this criterion are only accepted for HUs which are not provided with vaccines by the district</i>			
15	The HU has a clean and well protected examination couches			
16	The HU staff conducts group health education sessions at least 4 times per month for previous 3 months.			
17	Each clinically staff of the HU has a valid practicing license obtained from the Uganda Nurses and Midwifery Council			
18	The Health Unit has reliable and functioning clean water supply from protected source			
19	The Health Unit must have shown to have more than 6 SUO per qualified staff per day and more than 18 SUO per unit per day, for two years in a row.			
20	The health unit providing delivery services has had no medicine stock outs for EmOC drugs throughout the year (Parenteral antibiotics, anticonvulsants, oxytocine – at least one per category)			
21	The Health Unit provides ANC services.			
22	There is a functional placenta pit within the compound of the health unit that carries out deliveries			
23	There is a gazzated rubbish pit and garbage bins within the compound, that are over flowing and properly used.			
24	There is a waste management system in the health facility ( e.g mini incinerator)			