South Australia

# SOUTH AUSTRALIAN HEALTH COMMISSION (PRIVATE HOSPITALS) REGULATIONS 2000

## **REGULATIONS UNDER THE SOUTH AUSTRALIAN HEALTH COMMISSION ACT 1976**

South Australian Health Commission (Private Hospitals) Regulations 2000

being

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<sup>1</sup> Came into operation 31 August 2000: reg. 2.

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## PART 1 PRELIMINARY

#### Citation

**1.** These regulations may be cited as the South Australian Health Commission (Private Hospitals) Regulations 2000.

## Commencement

2. These regulations come into operation on 31 August 2000.

#### Revocation

**3.** The South Australian Health Commission (Private Hospitals) Regulations 1985 (see Gazette 14 March 1985 p. 851), as varied, are revoked.

#### Interpretation

4. In these regulations, unless the contrary intention appears-

"the Act" means the South Australian Health Commission Act 1976;

"licence" means a licence granted under section 57D of the Act;

"licensee" means a person to whom a licence has been granted under section 57D of the Act;

"the revoked regulations" means the South Australian Health Commission (Private Hospitals) Regulations 1985.

### PART 2 LICENSING

### **Application for licence**

5. (1) Pursuant to section 57C(2)(a) of the Act, the following manner and form is prescribed for a licence application:

- (a) the application, and all information contained in the application, must be in writing; and
- (b) the application must request the grant of a licence to the applicant and must be forwarded by the applicant to the Minister.

(2) Pursuant to section 57C(2)(b) of the Act, a licence application must contain the following additional information:

- (a) the particulars set out in Schedule 1; and
- (b) a detailed plan of the premises that are to be used as a private hospital.

#### Limit on number of hospital beds

**6.** For the purposes of sections 57D(1a) and 57E(5) of the Act, 5 169 is prescribed as the limit on the number of hospital beds that may be provided by recognised hospitals or private hospitals in the region specified by regulation 5a of the revoked regulations as in force on 15 December 1994.

#### Annual return

7. Pursuant to section 57G of the Act—

- (a) the prescribed day for the purposes of subsection (2) is 30 April; and
- (b) the prescribed information for the purposes of subsection (2)(b) is that set out in Schedule 2.

#### **Transfer of licence**

**8.** (1) Pursuant to section 57H(2)(a) of the Act, the following manner and form is prescribed for a licence transfer application:

- (a) the licensee must give notice in writing to the Minister—
  - (i) indicating that he or she intends to transfer the licence; and
  - (ii) naming the proposed transferee; and
  - (iii) indicating the proposed date of the transfer; and
- (b) the proposed transferee must forward to the Minister an application in writing—
  - (i) requesting the transfer of the licence to the proposed transferee; and
  - (ii) containing the information prescribed for the purposes of section 57H(2)(b) of the Act.

(2) Pursuant to section 57H(2)(b) of the Act, the prescribed information is that set out in Schedule 3.

#### Fees

<b>9.</b> (1) The following fees are prescribed for the purposes of the indicated sections of the Act:		
( <i>a</i> )	licence application fee (s. 57C(2)) \$133.50;	
<i>(b)</i>	fee for grant of licence (s. 57D(2)) \$133.50;	
( <i>c</i> )	annual licence fee (s. 57G(2)) \$133.50;	
( <i>d</i> )	application fee for transfer of licence (s. 57H(2))	

(2) The Minister may exempt a person from the payment of all or any part of a fee prescribed by this regulation.

#### PART 3 STANDARDS

#### **Standards for private hospitals**

**10.** The standards of construction, facilities and equipment, and other standards, set out in this Part are prescribed for private hospitals.

### Access

**11.** (1) A private hospital in which patients are accommodated above ground floor level must have—

- (a) an internal staircase fitted with suitable hand rails; and
- (b) a lift of sufficient size to take a bed and 2 attendants.

(2) In every private hospital all corridors used for bed, trolley or barouche traffic must be not less than 1 800 mm in width clear of handrails and any other permanent intrusions.

(3) In every private hospital—

- (a) doorways to water closets, bathrooms and shower cubicles intended for access of wheelchairs must have a clear opening of not less than 900 mm; and
- (b) where corridors are 1 800 mm in width, the doorway opening to wards must not be less than 1 200 mm in width.

(4) In every private hospital all rooms occupied by patients must be clearly identified by a number or the names of the patients occupying the room at the time.

## **Room sizes**

**12.** (1) Every room in a private hospital occupied or intended to be occupied by one patient must have a floor area of at least 9.3 square metres.

(2) Every room in a private hospital occupied or intended to be occupied by more than one patient must have—

- (a) at least 8.4 square metres of floor space for each adult patient;
- (b) at least 7.5 square metres of floor space for each child up to 14 years of age;
- (c) at least 3.9 square metres of floor space for each child nursed in a cot.

#### **Ablution facilities**

13. Every private hospital must have at least the following sanitary facilities:

- (a) on each floor one water closet for each ten or portion of ten patients, at least one of which must be suitable for use by a person using a wheelchair; and
- (b) on each floor one shower cubicle for each ten or portion of ten patients, at least one of which must be suitable for use by a person using a wheelchair; and

- (c) on each floor a bathroom, containing an island or peninsula plunge bath, with minimum floor dimensions of—
  - (i)  $3\ 000\ \text{mm} \times 2\ 400\ \text{mm}; \text{ or }$
  - (ii) in the case of a bathroom also containing a pedestal pan and hand basin, 3 000 mm  $\times$  3 000 mm; and
- (d) on each floor one hand basin for each ten or portion of ten patients; and
- (e) grab rails fitted in shower cubicles, water closets and bathrooms; and
- (f) separate change room facilities for staff that include water closets, shower cubicles and hand basins.

## Electrical, cooking and laundry facilities

14. In every private hospital there must be the following electrical, cooking and laundry facilities:

- (a) artificial lighting that is adequate for the needs of the hospital, and facilities for emergency lighting and power where required for patient safety; and
- (b) facilities for heating and cooling, which are so constructed, operated and permanently positioned that they are not hazardous to patients because of moving parts or accessible heated elements; and
- (c) a kitchen equipped with facilities for—
  - (i) food preparation; and
  - (ii) cooking, including an exhaust canopy fitted with an exhaust fan and grease filters; and
  - (iii) handling and serving food; and
  - (iv) the washing of dishes and utensils, including a sink and drainer large enough to contain cooking and food preparation utensils; and
  - (v) hand washing; and
  - (vi) separate storage for perishable food, frozen foods, dry foods, crockery, utensils and cutlery; and
  - (vii) refuse holding and disposal; and
  - (viii) ventilation; and
- (*d*) a laundry that—
  - (i) at all times, has a water supply that can deliver both hot and cold water; and

(ii) contains industrial type appliances to launder and disinfect bed linen, blankets, clothing, napery and other similar articles.

### Storage and cleaning facilities

**15.** In every private hospital there must be the following facilities for storage and cleaning:

- (a) storage space specifically allocated for storage of ward linen, extra bedding, patients' baggage, appliances and equipment, including a general store for reserve furniture and equipment; and
- (b) waste receptacles for temporary storage of used dressings, human tissue and other waste; and
- (c) on each floor a pan room that must contain—
  - (i) storage racks of impervious material; and
  - (ii) a slop hopper or combination drainer and flushing bowl; and
  - (iii) facilities for disinfecting equipment; and
  - (iv) hand washing facilities; and
- (d) on each floor a cleaner's room that must contain—
  - (i) a cleaner's sink; and
  - (ii) facilities for storage of cleaning appliances and compounds; and
- (e) on each floor a clean utility room that must contain—
  - (i) a sink and drainer with hand washing facilities; and
  - (ii) a work bench,

and unless supplied elsewhere-

- (iii) facilities for the storage of equipment and supplies kept in that room; and
- (iv) facilities for disinfecting or sterilising ward equipment; and

(f) on each floor a soiled utility room that must contain—

- (i) storage facilities for equipment stored or kept in that room; and
- (ii) a sink and drainer and hand washing facilities; and
- (iii) waste and soiled linen receptacles; and
- (iv) a work bench.

## Ward facilities

16. In every private hospital there must be the following facilities:

- (a) hand washing facilities in or adjacent to wards and rooms occupied by patients, with taps operated by wrist, elbow or foot action; and
- (b) on each floor a ward food preparation room that must contain—
  - (i) a storage cupboard; and
  - (ii) a sink and drainer; and
  - (iii) a refrigerator; and
  - (iv) facilities for heating food and drinks; and
- (c) a patient to nurse communication system at each bed, in bathrooms, water closets and shower cubicles, with—
  - (i) the indicator panel clearly visible from the nurses' station; and
  - (ii) the cancellation of calls only able to be made from the point of origin; and
- (d) on each floor a nurses' station that must contain—
  - (i) a desk and chair; and
  - (ii) a work bench and cupboards; and
  - (iii) a record storage area; and
  - (iv) a master panel for the communication system.

#### **Maternity facilities**

17. Where a private hospital proposes to receive patients for maternity care, it must have at least the following facilities (which are additional to the general requirements set out in this Part):

- (a) delivery rooms that are adequate for the needs of the midwifery beds provided by the hospital, with each delivery room—
  - (i) to have minimum floor dimensions of  $4\,800 \text{ mm} \times 3\,900 \text{ mm}$  and a minimum ceiling height of 2 700 mm, or equivalent effective area; and
  - (ii) to be designed and constructed so that no person can enter the room from any other part of the hospital except through one door or point of entrance; and
  - (iii) to have a delivery bed; and
- (b) surgical hand washing facilities with a high quality water supply adjacent to each delivery room; and

10.

- (c)a soiled utility room situated adjacent to each delivery room, containing-
  - (i) a work bench with an impervious top; and
  - (ii) a sink and drainboard; and
  - (iii) waste and soiled linen receptacles; and
  - (iv) a slop hopper, or combination drainer and flushing bowl; and
- a clean utility room situated adjacent to each delivery room, containing-(d)
  - a work bench with an impervious top; and (i)
  - (ii) a sink and drainboard; and
  - facilities for hand washing; and (iii)
  - emergency sterilising equipment; and (iv)
  - (v) unless suitably provided elsewhere, general sterilising equipment; and
- (e) one shower, water closet and hand basin adjacent to or conveniently accessible to the delivery room; and
- (f)general nurseries containing basinets with at least 1.8 square metres of floor space for each basinet: and
- an isolation nursery or nurseries containing basinets with at least 2.7 square metres of (g)floor space for each basinet; and
- in each nursery a hand basin, a babies' bath and bench, storage for linen and other (*h*) supplies, facilities for temporary storage or disposal of soiled and waste materials; and
- on each floor, facilities for preparation and refrigerated storage of babies' foods and *(i)* cleansing of equipment used for preparation and feeding of babies; and
- where delivery rooms, labour wards or nurseries are air-conditioned, the conditioned air (j) is to be either directly supplied to these areas or when recycled, the air is to be filtered; and
- (*k*) separate change room facilities for staff that include water closets, shower cubicles and hand basins

#### Surgical facilities

18. (1) Where a private hospital proposes to receive patients for surgical procedures, it must have an operating theatre suite that complies with the requirements set out in this regulation (which are additional to the general requirements set out in this Part).

(2) Each theatre suite must have the following:

- (a) an operating room with minimum floor dimensions of 6 000 mm  $\times$  5 400 mm and a minimum ceiling height of 2 700 mm or equivalent effective working space; and
- (b) provision for the safe storage and use of all anaesthetic agents in operating theatres and all other areas of the hospital; and
- (c) surgical hand washing facilities with a high quality water supply provided adjacent to the operating room; and
- (d) provision for the supply of filtered and conditioned air; and
- (e) a soiled utility room, containing—
  - (i) a work bench with an impervious top; and
  - (ii) a sink and drainingboard; and
  - (iii) waste and soiled linen receptacles; and
  - (iv) a slop hopper, or combination drainer and flushing bowl; and
- (f) a clean utility room that must contain—
  - (i) a work bench with an impervious top; and
  - (ii) facilities for handwashing; and
  - (iii) emergency sterilising equipment; and
  - (iv) unless suitably provided elsewhere, general sterilising equipment; and
- (g) separate change room facilities for staff that include water closets, shower cubicles and hand basins; and
- (*h*) a recovery room situated within the theatre suite.

(3) Operating suites must be designed and constructed so that no person can enter the suite from any other part of the hospital except through one door or point of entrance.

#### **Exemptions**

**19.** The Minister may, by notice in writing, exempt conditionally or unconditionally any premises or proposed premises from any of the requirements of this Part.

## PART 4 MISCELLANEOUS

### Licensee to keep register

**20.** A licensee must keep a register in which is recorded in relation to every patient admitted to the hospital—

- (a) the full name, age, sex and usual place of residence of the patient; and
- (b) the patient's date of admission; and
- (c) the name and address of the patient's medical attendant; and
- (d) the name and home address of the patient's next of kin; and
- (e) the date of discharge, or in the event of death, the date of the patient's death; and
- (f) in the case of a maternity patient, the patient's date and time of confinement and the sex and weight of any infant.

#### **SCHEDULE 1**

1. The name or proposed name of the private hospital and the address of the premises or proposed premises of the private hospital.

2. Where the applicant is a natural person, the name, address and occupation of the applicant.

3. Where the applicant is a body corporate, the name of the applicant, the address of its registered office, its date of incorporation, the State or Territory in which it is incorporated and the names, addresses and occupations of its secretary and directors.

4. Where the applicant is an incorporated association, the name of the applicant, its address and date of incorporation, the State or Territory in which it is incorporated and the names, addresses and occupations of its public officer and the members of its management committee.

5. The names, addresses and occupations of those persons who are on the board of management of the private hospital.

6. Where a board of management has not been appointed, a statement as to whether or not one will be appointed, and where one will be appointed, the names, addresses and occupations of those persons who are intended to be members.

7. The name and address of any person who has been appointed manager or administrator of the private hospital.

8. The name, address and occupation of any person, other than a person referred to in clauses 2 to 7 (inclusive) who—

- (a) has any pecuniary interest, whether direct or indirect, in or from the running of the private hospital; or
- (b) is involved, either directly or indirectly, in the management and control of the private hospital.

9. A statement as to whether or not the applicant or any other person referred to in clauses 2 to 8 (inclusive) has been refused a licence to operate a private hospital, nursing home, rest home or hostel, whether in the State or in any other State or a Territory of the Commonwealth, and, if so, the name of any such person, the date of the refusal and the circumstances giving rise to such refusal.

10. A statement as to whether or not the applicant or any other person referred to in clauses 2 to 8 (inclusive) has been convicted or found guilty of any criminal offence in the State or in any other State or a Territory of the Commonwealth during the period of 5 years immediately preceding the date of the application, and, if so, the name of any such person, details of the offence, the circumstances giving rise to the offence, the date of the conviction or finding and details of any penalty imposed or other disciplinary action taken.

11. A statement as to whether or not a licence to operate a private hospital, nursing home, rest home or hostel in the State or in any other State or a Territory of the Commonwealth has been revoked or cancelled or has been the subject of any enquiry relating to revocation or cancellation by reason of the conduct of the applicant or any other person referred to in clauses 2 to 8 (inclusive), and, if so, the name of such person, details of the circumstances giving rise to the revocation, cancellation or enquiry, the date of the revocation, cancellation or enquiry, and details of any penalty imposed or other disciplinary action taken.

12. A statement setting out the principal purposes for which the private hospital will be used, including details of such services.

13. A statement setting out those services that will be provided on a regular basis to same day patients.

14. A statement setting out those services that will be available on a regular basis to outpatients.

15. The number of beds to be provided.

16. Where it is intended to designate a number of beds for a particular purpose, a statement as to the number of such beds and the services for which they have been designated.

17. A statement indicating whether or not any of the following services will be provided:

( <i>a</i> )	dietetics;
( <i>b</i> )	occupational therapy;
( <i>c</i> )	podiatry;
( <i>d</i> )	pharmacy;
( <i>e</i> )	physiotherapy;
( <i>f</i> )	social work;
(g)	speech pathology;
( <i>h</i> )	outreach nursing;
<i>(i)</i>	community services;
(j)	any other like services.
18. A	statement indicating whethe

18. A statement indicating whether or not any of the following facilities will be provided and, if so, the number to be provided:

- (*a*) operating theatres;
- (b) post operating recovery rooms;
- (c) obstetric delivery rooms;
- (*d*) premature baby unit;
- (e) high dependency unit;
- (f) outpatients' department;
- (g) day surgery facilities;
- (*h*) rehabilitation facilities;
- (*i*) consulting rooms for medical practitioners;
- (*j*) pathology;
- (*k*) any other like service.

19. A statement as to whether or not the following specialist diagnostic equipment will be provided and, if so, the number that will be provided:

(a) x-ray units;

(*b*) ultra sound;

(c) C.T. scanner;

(d) nuclear magnetic resonance imagining equipment.

20. A statement as to the proposed role of the private hospital with reference to the following matters:

(a) the existing and future needs that the applicant considers the private hospital will meet;

(b) the target population the needs of which the proposed private hospital intends to meet;

(c) the number of people in the State or region of the State that the private hospital will service.

21. A statement as to the way in which the private hospital will satisfy the needs referred to in clause 20.

22. A statement setting out the arrangements that are to be made to operate, manage and control the private hospital with particular reference to the following:

- (*a*) management, operation and staffing;
- (*b*) the system to be used for medical records;
- (c) the procedure for patient care review;
- (d) the delineation of medical privileges.

#### **SCHEDULE 2**

1. The period to which the return relates.

2. The name and address of the private hospital.

3. Where the licensee is a private person, the name and address of the licensee.

4. Where the licensee is a body corporate, its name and the address of its registered office.

5. Where the licensee is an incorporated association, its name and address.

6. A statement as to whether or not there has been any change during the period to which the return relates in the identity of—

(a) in the case of a body corporate, the secretary or directors; or

(b) in the case of an incorporated association, the public officer or members,

and where any such change has occurred the name, address and occupation of any new person appointed.

7. A statement as to whether or not there has been any change in the membership of the board of management of the private hospital during the period to which the return relates and, if so, details of any such change.

8. A statement as to whether or not there has been any change in the identity of the manager or administrator of the private hospital during the period to which the return relates and, if so, details of any such change.

9. A statement as to whether or not there has been any change, during the period to which the return relates, in the identity of a person who—

- (a) has any pecuniary interest, whether direct or indirect, in or from the running of the private hospital; or
- (b) is involved either directly or indirectly in the management and control of the private hospital,

and, if so, details of any such change.

10. A statement as to whether or not, during the period to which the return relates, there has been any change in the purpose for which the private hospital is used and, if so, details of any such change.

11. A statement as to whether or not, during the period to which the return relates, there has been any change in the number of approved beds provided at the private hospital and, if so, details of any such change.

12. A statement as to whether or not, during the period to which the return relates, there has been any change in the number of beds designated for a particular type of service and, if so, details of any such change.

13. A statement as to whether or not, during the period to which the return relates, there has been any change in the clinical services provided as part of or ancillary to the principal services provided at the private hospital and, if so, details of any such change.

14. A statement as to whether or not, during the period to which the return relates, there has been any change in the facilities provided at the private hospital and, if so, details of any such change.

15. A statement as to whether or not, during the period to which the return relates, there has been any change in the specialist diagnostic equipment provided at the private hospital and, if so, details of any such change.

# 18.

#### **SCHEDULE 3**

1. The name and address of the private hospital the licence of which is to be transferred.

2. Where the licensee is a natural person, the name and address of the licensee.

3. Where the licensee is a body corporate, its name and the address of its registered office.

4. Where the licensee is an incorporated association, its name and address.

5. Where the proposed transferee is a natural person, the name, address and occupation of the proposed transferee.

6. Where the proposed transferee is a body corporate, its name, the address of its registered office, its date of incorporation, the State or Territory in which it is incorporated and the names, addresses and occupations of its secretary and directors.

7. Where the proposed transferee is an incorporated association, its name, address and date of incorporation, the State or Territory in which it is incorporated and the names, addresses and occupations of its public officer and the members of the management committee.

8. A statement as to whether or not a body of management has been or is to be appointed by the proposed transferee and, if so, the names, addresses and occupations of the members or proposed members.

9. A statement as to whether or not a manager or administrator has been appointed by the proposed transferee and, if so, the name and address of the manager or administrator.

10. The name, address and occupation of any person other than a person referred to in clauses 5 to 9 (inclusive) who-

- (a) has any pecuniary interest, whether direct or indirect, in or from the running of the private hospital; or
- (b) is involved either directly or indirectly in the management and control of the private hospital.

11. A statement as to whether or not the proposed transferee or any other person referred to in clauses 5 to 10 (inclusive) has at any time been refused a licence to operate a private hospital, nursing home, rest home or hostel in the State or in any other State or a Territory of the Commonwealth, and, if so, the name of such person, the circumstances surrounding the refusal and the date of the refusal.

12. A statement as to whether or not the proposed transferee or any other person referred to in clauses 5 to 10 (inclusive) has been found guilty of or convicted of any criminal offence in the State or in any other State or a Territory of the Commonwealth within the period of 5 years immediately preceding the date of the application to transfer, and, if so, the name of such person, and the circumstances giving rise to the offence, the date of the finding or conviction and details of the penalty imposed or other disciplinary action taken.

13. A statement as to whether or not a licence to operate a private hospital, nursing home, rest home or hostel in the State or in any other State or a Territory of the Commonwealth has been revoked or cancelled or the subject of an enquiry relating to revocation or cancellation by reason of the conduct of the proposed transferee or any other person referred to in clauses 5 to 10 (inclusive), and, if so, the name of such person, details of the circumstances giving rise to the revocation, cancellation or enquiry, the date of the refusal, cancellation or enquiry and details of any penalty imposed or other disciplinary action taken.

14. The date of the proposed transfer.