PRACTICE CODE NUMBERING SYSTEM

A Division of the Board of Healthcare Funders

01 July 2026

PCNS APPLICATION CRITERIA
DAY CLINIC & UNATTACHED OPERATING THEATRE UNIT

CRITERIA FOR AWARDING A DAY CLINIC OR UNATTACHED OPERATING THEATRE UNIT APPROVED STATUS IN TERMS OF PCNS REQUIREMENTS

This document is to be submitted together with the Application form; supporting documents and completed questionnaire to pcns_admin@bhfglobal.com

THE PURPOSE OF THIS DOCUMENT IS TO IDENTIFY THE FACILITIES AND STANDARDS THAT ARE REQUIRED IN A DAY CLINIC OR UNATTACHED OPERATING THEATRE UNIT TO QUALIFY FOR CLASSIFICATION AS AN APPROVED UNATTACHED OPERATING THEATRE UNIT IN TERMS **PCNS REQUIREMENTS**

1. ADMINISTRATIVE PROCEDURES

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1.1.	Any day clinic or unattached operating theatre unit which meets the following requirements may apply for classification as an approved unattached operating theatre unit.	
	1.1.1. Is unconditionally registered by the Department of National Health and Population Development in terms of Regulation R158, Government Gazette No 6832 dated 1 February 1980 (or any amendment of substitution thereof) for all services which it offers:	
	1.1.2. Is fully equipped and adequately staffed in respect of beds, services and facilities and is in operation at the time of application.	
1.2.	A request for a questionnaire, which must be completed and submitted prior to inspection, may be obtained from:	
	Board of Healthcare Funders PCNS Department Lower Ground Floor, South Tower 1Sixty Jan Smuts Avenue Cnr. Tyrwhitt Avenue Rosebank 2196	
1.3.	A non-refundable inspection fee, as determined from time to time, shall be payable to the Board of Healthcare Funders of S.A (BHF). This fee must accompany the completed questionnaire. The day clinic or unattached operating theatre unit shall also be liable for all travelling and/or accommodation expenses reasonably incurred by the inspectors.	
1.4.	The Inspection Committee shall comprise of at least two individuals representing BHF. Facilities should arrange with the Day Clinic Association, if they require their presence at the inspection.	
1.5.	On completion of any inspection, the Inspection Committee will hold a summation conference with representatives of the clinic. The representatives of the clinic will be given full opportunity to comment on any findings or shortcomings noted by the inspectors.	
1.6.	The result of the inspection will then be evaluated by the Committee, to determine whether the clinic should be classified as an approved day clinic or an unattached operating theatre unit.	
1.7.	The Inspection Committee will then notify the clinic of the committee's decision and the reasons thereof. In the event of the Committee rejecting the application, the clinic will be advised of the defects identified during the inspection. The clinic may submit documentation within 60 days of the date of this advice to the effect that the clinic has corrected the defects identified thereof. The committee may then decide to either reclassify the facility as an approved day clinic/unattached operating theatre unit, or to recommend that a reinspection of all or part of the clinic be conducted. In the event of a re-inspection, an inspection fee will again be payable. Travelling and accommodation expenses, if applicable will also be payable.	

1.8.	In the event of the Inspection Committee rejecting any application, the Facility concerned may appeal to the Appeals Committee for reconsideration of the application. The facility may submit full reasons as to why the facility disagrees with the results of the inspection and subsequent decision of the Committee.	
1.9.	The Appeals Committee shall, within 30 days of having received the appeal from the clinic concerned, advise such clinic whether or not the appeal has been successful. Should the appeal be unsuccessful, the Committee shall, at its discretion, give reasons to the clinic as to why.	
1.10.	A clinic which has not been approved, and has not there after appealed, may apply for a re-inspection at any time. An Inspection fee will again be payable, as will travelling and accommodation expenses if applicable.	
1.11.	A clinic which is granted approved status will be entitled to charge for healthcare services as from the date on which BHF has notified the clinic accordingly.	

2. STANDARDS AND CRITERIA

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2.1.	Rules regarding inspection	
2.1.1.	No inspection will be conducted until such time as the relevant current Certificate of Registration has been issued by the by the relevant Provincial Department of Health and Population Development.	
2.1.2.	Any exemptions granted by the Department in terms of R.158 will not necessarily have any adverse effect on the inspection findings. The basic requirements are that the clinic being inspected holds a current Certificate and that it complies substantially with the minimum requirements as set out in R.158. It must be appreciated that in the case of older clinics, compliance with R.158 will often not be possible, especially as far as dimensions are concerned. As far as surveys are concerned, the standards of nursing care, equipment and facilities offered are more important than the dimensions.	
2.2.	The "Duties of Proprietor" as set out in section 25 of Regulation R.158 will also act as a guide to the Inspection Committee during the inspection.	

3. OPERATING THEATRE FACILITIES

		☑
3.1.	**Theatres**	
3.1.1.	3.1.1 At least one operating theatre shall be fully equipped to satisfy the general needs of the type of surgery being performed at the clinic.	
3.1.2.	This shall include items such as diathermy units, operating tables, dental units, operating lights and all necessary instrumentation.	
3.1.3.	Each operating theatre shall be piped for the following services, and be equipped with the necessary ancillary equipment:	
	3.1.3.1. Oxygen	
	3.1.3.2. Nitrous oxide	
	3.1.3.3. Vacuum	
3.1.4.	In the case of oxygen and vacuum, at least two piped points per theatre shall be available for each service.	
3.1.5.	An alarm panel indicating low pressure/fault on the supply of oxygen, nitrous oxide and vacuum shall be located within the visual and audible distance of the theatre staff or in the theatre itself.	
3.1.6.	All electrical outlets in each theatre must be protected by an adequate earth leakage system. At least two socket outlets must be provided in each theatre.	
3.1.7.	Adequate and hygienic scrub-up facilities to meet the needs of each operating theatre must be provided.	
3.1.8.	Adequate change-room and toilet facilities for staff and doctors shall be provided so as to afford effective management of a sterile "red-line" area within the theatre complex.	

		☑
3.2.	**Anaesthetic facilities**	
3.2.1.	At least one anaesthetic machine per theatre shall be available at all times.	
3.2.2.	The following shall constitute the minimum ancillary equipment required on each machine in addition to the basic anaesthetic machine frame:	
	3.2.2.1. Oxygen/nitrous oxide mixer, or individual Rotameters for each gas	

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3.2.2.2. Oxygen failure warning device.	
3.2.2.3. Anaesthetic agent vaporiser.	
3.2.2.4. Emergency supply cylinder for oxygen.	
3.2.2.5. A minimum of one mechanical ventilator per clinic.	
3.2.2.6. Every theatre shall contain a cardiac monitoring system.	
3.2.3. All schedules 5, 6 and 7 drugs shall be stored in an appropriate drug cupboard. The relevant drug registers shall be correctly maintained.	

3.3. Recovery room and/or ward facilities	☑
3.3.1. The clinic shall have adequate recovery facilities to meet the needs of the operating theatres.	
3.3.2. The facilities shall either comprise a recovery room separate from the ward accommodation or the ward accommodation shall constitute the recovery area.	
3.3.3. In either event, the area in which patients are recovered shall be properly equipped in accordance to the a following:	
3.3.4. The recovery trolleys/beds shall be capable of being elevated into Trendellenburg positions and have adequate means of restraining patients.	
3.3.5. Suitable screening-off facilities for patients must be provided in the ward accommodation, if applicable.	
3.3.6. Both oxygen and vacuum services shall be piped so that the number of points should not be less than one oxygen and one vacuum point for every two beds/trolleys.	
3.3.7. All necessary ancillary fittings must be provided	
3.3.8. A properly equipped emergency trolley, as described in	
3.3.9. Annexure A, must be easily accessible to the recovery room staff.	
3.3.10. At least one socket outlet must be provided for each patient position in the recovery area.	
3.3.11. All schedules 5, 6 and 7 drugs shall be stored in an appropriate drug cupboard and proper registers maintained.	
3.3.12. Refrigeration facilities shall be provided.	

3.4. Sterilising facilities	☑
3.4.1. The clinic shall be adequately equipped so as to facilitate the proper receiving, cleaning, packing and sterilising of instruments, materials, packs, dressings and sundry items.	
3.5. Sluicing facilities	
3.5.1. The clinic shall be provided with proper sluicing facilities including adequate shelving, storage for urine testing equipment and bedpans/urinals, sluice pan and receptacles for soiled linen.	

4. PLANT

	☑
4.1. Emergency power plant	
4.1.1. The clinic shall have an emergency generator which is of sufficient capacity to supply all critical facilities and areas with electricity in the event of a fault in the municipal electricity supply.	
4.1.2. If no generator is available, the clinic shall be serviced by an uninterrupted power supply (UPS) which will provide sufficient electricity to all critical facilities and areas for a period of at least 30 minutes.	
4.1.2.1. Critical facilities and areas include the following:	
4.1.2.2. Operating theatre lights.	
4.1.2.3. Strategic lights in the recovery area.	
4.1.2.4. At least one socket outlet in each operating theatre	
4.1.2.5. At least one socket outlet in the recovery area.	

4.2. Disposal of waste	☑
4.2.1. The clinic shall have a suitable method or system of disposing of waste which may not be included in the usual municipal refuse, e.g. human tissue or infected materials.	

4.3. Hot water and steam supply	☑

	☑
4.3.1. The clinic shall have on the premises an adequate and properly maintained system for providing hot water and steam if the latter is required.	

4.4. Air Conditioning Systems	☑
4.4.1. The operating theatre shall be air conditioned with a system that complies with the requirements of Regulation 23(6) of R.158.	

4.5. **Fire Protection**	☑
4.5.1. The fire protection services in the clinic shall comply with local fire department regulations.	

4.6. Vacuum System	☑
4.6.1. The vacuum system shall be adequate to provide sufficient suction to all piped outlets in the clinic.	
4.6.2. The system must have back-up facilities which can be used in the event of an extended power failure, e.g. system on emergency supply, electrical portable units off emergency socket outlets, manually operated suction pump.	

4.7. **Oxygen and Nitrous Oxide Supply Services**	☑
4.7.1. Both of these services, shall be fed by a manifold system which complies with SABS specifications.	
4.7.2. All pressure gauges shall be clean and in good operating condition.	
4.7.3. The system shall be fitted with an alarm which operates automatically in the event of low pressure in the gas supplies. Back-up supplies of both gases shall be readily available in the event of a failure in the system.	

4.8. Compressed Air Supply (if applicable)	☑
4.8.1. The compressed air supply shall be fitted with a suitable filtration unit.	

4.9. Elevator	☑
4.9.1. If the clinic is located in a multi-storey building and is not on the ground floor, the building must be equipped with an elevator. If the elevator is not of sufficient size to take a patient stretcher, a stairway large enough to comfortably accommodate a stretcher case to and from street level must be available,	

5. LINEN

	☑
5.1. Adequate storage for clean linen must be provided. An efficient and effective system of ensuring adequate stock of clean linen must be in force.	

6. STAFFING

	☑
6.1. The following shall constitute the minimum staffing level:	
6.1.1. The person in charge of the clinic shall be a registered SRN.	
6.1.2. At least one registered SRN for each theatre shall be available for scrubbing.	
6.1.3. At least one SRN or SEN per four patients shall be available in each recovery area.	
6.1.4. Where the recovery area is separate from the ward area, at least one SRN or SEN shall be available in each ward area, during all times that a patient is accommodated in each ward.	

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EMERGENCY TROLLEY

Each unit in the institution must have access to a **single fully integrated emergency trolley.** In a multi-storey building, an emergency trolley should be available on each floor.

It should contain the following basic requirements:

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• Defibrillator	
• ECG Monitoring equipment	
• Oxygen cylinder fitted with a flow meter and all the necessary ancillary fittings for administration	
• Suction, portable unit, with all necessary ancillary fittings	
• AMBU-bags or equivalent (S.M.L)	
• CPR board	
• Tracheotomy set	
• Blood Pressure monitoring	
• Appropriate facilities for the following:	
▪ Intravenous therapy	
▪ Incubation and oxygen administration	
▪ Drug administration	
• Standard drugs suitable for the resuscitation of patients in the following emergency situations:	
▪ Cardiac arrest	
▪ Respiratory arrest	
▪ Coma	
▪ Fits, convulsions, seizures, etc.	
▪ Shock, all causes	
▪ Malignant hypothermia (Theatre only)	

A daily check list should be attached to each trolley and signed by a person in authority.
The follow is a comprehensive list for the Emergency Trolley in specific categories for ease of reference.

1. Equipment:

	#	☑
1.1. AMBU bags (infant, paediatrics and adult)		
1.2. Blood Pressure apparatus	1	
1.3. CPR Board	1	
1.4. Defibrillator	1	
1.5. Diagnostic set	1	
1.6. ECG machine	1	
1.7. Foot suction unit with tubing and suction nozzle/catheter	1	
1.8. Laryngoscope set	1	
1.9. Oxygen cylinder with fittings	1	
1.10. Artery forceps	1	
1.11. E.T. tube introducers (S. M and L)	1	
1.12. Macgils forceps (S and L)	1	
1.13. Mouth gag	1	
1.14. Patella hammer	1	
1.15. Scissors	1	
1.16. Stethoscope	1	
1.17. Tongue depressor metal	1	
1.18. Torch and batteries	1	
1.19. Xylocaine spray	1	

1.20. Tracheotomy set	1	
1.21. Catheter mounts	1	

2. Disposables:

	#	☑
2.1. Butterflies – sizes 21G, 23G, 25G	6	
2.2. Insulin syringes l ml	2	
2.3. Intracaths	2	
2.4. Jelcos – sizes 14G, 16G,18G, 20G, 22G and 24G	8	
2.5. Needles – sizes 18G, 19G, 21G and 23G	12	
2.6. Scalp vein sets	2	
2.7. Syringes – sizes 2ml, 5ml, 10ml, 20ml and 50ml	20	
2.8. Cardiotrace electrode gel	1	
2.9. KY jelly sachets	2	
2.10. Remicaine jelly 20ml tube	1	
2.11. Elastoplast 75mm	1	
2.12. Micropore 24mm	1	
2.13. Tegaderm (1625 +1626)	4	
2.14. Oxygen mask (variable) – adult	1	
2.15. Oxygen mask (variable) – paed	1	
2.16. Stomach tubes (Levins) – sizes 10g,12g, 14g and 16g	2	
2.17. Suction catheters-sizes 5,8,10,12,14 and 16	5	
2.18. Alcohol swabs	15	
2.19. Aquapak / Steromist	1	
2.20. Blades (Swan Morton) – sizes 11,15 and 23	9	
2.21. Electrodes – 3 adult + 3 paediatric	6	
2.22. Tongue depressors / spatulas wooden	5	
2.23. Trachea tape	1	
2.24. Gauze		
2.25. Cotton wool balls		
2.26. Crepe bandages		

3. Airways

	#	☑
3.1. Size 00	1	
3.2. Size 0	1	
3.3. Size 1	1	
3.4. Size 2	1	
3.5. Size 3	1	
3.6. Size 4	1	
3.7. Size 5	1	

4. Endo-Tracheal tubes:

	#	☑
4.1. Cuffed: size -2.5 to 8.5	1	
4.2. Uncuffed: size 2.5 to 7.5	1	

5. Intravenous Drugs: (check expiry dates)

	#	☑
5.1. Adrenaline 1:1000	10	
5.2. Aminophylline 250mg / 10ml	10	
5.3. Atropine 0.5mg	0	
5.4. Calcium Chloride 10ml	2	
5.5. Calcium Gluconate (Sandoz) 10ml	2	

	#	☑
5.6. Dantrium (Theatre only)	10	
5.7. Decadron Shockpak 20mg / 5ml	2	
5.8. Dextrose 50% 20ml		
5.9. Dobutrex Chloride 250mg	2	
5.10. Ephedrine 50mg	10	
5.11. Impurel 0.2mg /ml	5	
5.12. Inderal 1 mg / ml	2	
5.13. Intropin / Dopamine 40mg / ml	2	
5.14. Ipradol 5mcg	5	
5.15. Isoptin 5mg / 2ml	2	
5.16. Lanoxin 0.5mg / 2ml	5	
5.17. Lasix 20mg / ml	5	
5.18. Mag, Sulphate 1g / 2ml	5	
5.19. Narcan 0.4 mg / 2ml	2	
5.20. Narcan Neonate 0.02mg / ml (Neonate)	2	
5.21. Neostigmine 2.5mg / ml (Theatre only)	5	
5.22. Nepresol 25mg	2	
5.23. Phenergan 25mg / ml	10	
5.24. Phenylephine (in fridge)	5	
5.25. Pot. Chloride 15% 10ml	5	
5.26. Remicaine 2% 5ml	10	
5.27. Remicard 100mg / 5ml	2	
5.28. Robinul 2ml (Theatre only)	5	
5.29. Sod. Bicarb 4% 20ml	5	
5.30. Sodium Chloride 10ml	5	
5.31. Solu-cortef 100mg / 2ml	5	
5.32. Tridil 25mg	1	
5.33. Tridil 50mg	1	
5.34. Valium 10mg	5	
5.35. Water for injection 10ml	10	
5.36. Water for injection 20ml	10	

6. Intravenous Fluids:

	#	☑
6.1. Darrow's half strength	1	
6.2. Glucose 5% 200ml	1	
6.3. Haesteril 6% & 10%	2	
6.4. Haemaccel 500ml	2	
6.5. NaCl glass 200ml (for Tridil)	1	
6.6. Plasmolyte-B1 litre	2	
6.7. Ringers Lactate 1 litre	2	
6.8. Sod. Chloride 0.9% 200ml	2	
6.9. Sod. Chloride 0.9% 1 litre	1	

7. Giving Sets:

	#	☑
7.1. Add-A-line	1	
7.2. Blood Admin Set AFC2020	1	
7.3. Continuflo	1	
7.4. Soln. Admin Set 15 drop / ml AFCOI 97	2	
7.5. Soln. Admin Set 60 drop / ml AFCOI 98/0136	1	
7.6. Venous Pressure Manometer AFCO2230	1	

8. Blood Tubes:

	#	☑
8.1. Assortment		

9. Gloves:

	#	☑
9.1. Sterile size 7	2	
9.2. Sterile size 5	2	
9.3. Sterile size 8	2	
9.4. Sterile size 8.5	2	
9.5. Sterile size 7, 7.5, 8 and 8.5	2	
9.6. Unsterile medium	2	
9.7. Unsterile large	2	