



# General Clinic Regulation Ministry of Health



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**General Clinic:** is a facility with one or more permanent General Practitioner(s) with the intention to provide basic medical care, examining patients, prescribing proper treatments and referral to the specialist if required. An Independent General Clinic can be established only in the following cases:

- a) Construction companies that require General Practitioner.
- b) Schools
- c) Hotels
- d) Rural and remote areas that require general clinic services
- e) Industrial Areas in the Emirates of Dubai e.g. Al Qoz Industrial Area

## 1. General Clinic licensing procedures

Health facility licensing procedures are described Ministry of health (MOH), website [www.moh.gov.ae](http://www.moh.gov.ae) , please visit the website for further details regarding procedure and requirements.

## 2. Administration of General Clinic

- 2.1 General Clinic should be administered in a manner to ensure high-quality health services while recognizing basic patient rights.
- 2.2 Usually a General Clinic is a solo practice clinic with one nurse, if more than one General Practitioner is employed, the facility should have policies describing organizational structure, including lines of authority, responsibilities, accountability and supervision of personnel. All such practices should have a Medical Director that establishes policies and is responsible for the activities of the facility and its staff. Each facility shall maintain a written policy with regard to the qualifications of its Medical Director. He/she shall assure that all procedures are carried out by or under the direction of qualified, skilled and experienced licensed professionals.
- 2.3 Administrative policies should be implemented so as to provide quality healthcare in a safe environment and ensure that the facility and personnel are adequate and appropriate for the type of procedures performed. Policies and procedures governing the orderly conduct of the facility should be in writing and should be reviewed annually. All applicable regulations must be observed.



### 3. Qualified Personnel

- 3.1 All healthcare professionals should have appropriate licensure by MOH and the necessary training and skills to deliver the services provided by the facility.
- 3.2 Nursing staff ratio shall be based on clinic activity. In general at least one licensed Registered Nurse (RN) with administration qualification and experience shall be in each shift.
- 3.3 At least one person with training in advanced resuscitative techniques, e.g. Advanced Cardiac Life Support (ACLS) and Paediatric Advanced Life Support Course (PALS)<sup>1</sup>, should be immediately available until all patients are discharged. All medical personnel, at a minimum, should maintain training in basic cardiopulmonary resuscitation.
- 3.4 There should be a program of on-going in-service training to all staff providing healthcare services. Such training may include case studies and staff presentations provided within the facility or may be obtained through participation in continuing education courses offered outside the facility.

### 4. Patients' Privacy and Rights

- 4.1 Patients should be treated with respect, consideration, and dignity. The patient has the right to privacy and confidentiality. Patients, or a designated person when appropriate, should be provided information concerning the patient's diagnosis, evaluation, treatment options, and prognosis.
- 4.2 Patients should be given the opportunity to participate in decisions involving their healthcare when such participation is not contraindicated. Patients have the right to refuse any diagnostic procedure or treatment and be advised of the medical consequences of that refusal. Patients have the right to request information about a physician's scope of practice and license.

### 5. Patient Records

- 5.1 A legible, complete, comprehensive, and accurate patient record must be maintained for each patient. A record should include a recent history, physical examination, any pertinent progress notes, operative reports, laboratory reports, imaging reports. Records should highlight allergies and untoward drug reactions. Specific policies should be established to address retention of active records, retirement of inactive records, timely entry of data in records, and release of information contained in records.
- 5.2 All information relevant to a patient should be readily available to authorized healthcare professionals any time the office facility is open to patients or in the



event that a patient is transferred to another facility. Patient information should be treated as confidential and protected from loss, tampering, alteration, destruction, and unauthorized or inadvertent disclosure.

- 5.3 Records should be organized in a consistent manner that facilitates continuity of care. Discussions with patients concerning the necessity, appropriateness of treatment, as well as discussion of treatment alternatives, should be incorporated into a patient's medical record as well as documentation of executed informed consent.

## 6. Emergency & Transfer Protocols

- 6.1 The General Clinic should be equipped with the appropriate medical equipment, supplies, and pharmacological agents which are required in order to provide cardiopulmonary resuscitation, and other emergency services.
- 6.2 Written policies must be in place to ensure necessary personnel, equipment, and procedures to handle medical and other emergencies that may arise in connection with services provided. At a minimum, there should be written protocols for handling emergency situations, including medical emergencies and internal disasters.
- 6.3 There should be written protocols in place for the timely and safe transfer of patients to a pre-specified alternate care facility within a reasonable proximity when extended or emergency services are needed.
- 6.4 Protocols must include a written transfer agreement with a reasonably convenient hospital(s) or all physicians performing surgery should have admitting privileges at such facility.

## 7. Reporting and Data Collection Requirements

- 7.1 Reporting should be structured in a manner to consistently encourage a free flow of information. Reporting requirements should be consistent with relevant patient confidentiality regulations implemented in MOH.
- 7.2 Health Regulation Department shall develop a set of clinical performance indicators which will enable it to measure the clinic performance in various clinical aspects. Furthermore, a General Clinic shall submit data consistent with e-Health guidelines.



## 8. Clinical Laboratory Services

8.1 Every entity that tests or examines specimens for the diagnosis, prevention or treatment of any disease or impairment, or for the assessment of the health of a human being is considered a clinical laboratory, at this stage only basic clinical laboratory testing can be provided as part of the General Clinic service and shall meet the MOH Laboratory Standards requirement and criteria.

8.2 The clinical laboratory testing shall be provided by a licensed and qualified general laboratory technician; the area for such testing shall not be less than 15 square meter. Only the following test can be provided in such facility:

- 1- Basic Hematology: CBC, DC, ESR and reticulocytes.
- 2- Microbiology: routine urine and stool exam, urine pregnancy test and Gram-stain.
- 3- Biochemistry: Blood sugar, lipid profile, kidney function tests, K, Na, Cl, Uric acid, liver function tests, Fe and Calcium.
- 4- Serology: RPR, Paul- Bunel, ASO and RF.

8.3 Clinical laboratory in general clinics are not allowed to perform the following:

1. Dip sticks testing
2. Culture,
3. Ziehl- Neelson stain,
4. H.I.V or Hepatitis serology

## 9. Radio-diagnostic Imaging Services

Basic radio-diagnostic procedures can be provided as part of the General Clinic service and shall meet the MOH radiology services requirement and criteria of including Radiation Protection license. Basic radio-diagnostic procedures shall be provided by MOH licensed radiographer.

## 10. Facilities & Equipment's

### 10.1 Facility Physical Environment

The facility should be clean and properly maintained and have adequate lighting and ventilation. The space allocated for a particular function or service should be adequate for the activities performed. The Health Facility Guidelines: Planning, Design Construction and Commissioning, which is available in MOH websites, is adopted by the MOH for evaluating design submissions for new and renovated healthcare facilities, including General Clinics.

### 10.2 Handicapped Accessibility

In compliance with the federal law number 29 for 2006 regarding Special Needs Rights, each healthcare facility shall be made accessible to accommodate disabled individuals. The following handicapped requirements are mandatory:

- a) Handicapped parking within or near the facility premises



- b) Wheelchair ramps within the building
- c) Accessible physical examination room
- d) Handicapped-accessible rest room

Special arrangements shall be made to see patients if the facility is not handicapped-accessible.

### 10.3 Equipment's and Safety

- 10.3.1 List of medical instruments and equipment required in general clinics available in appendix 2.
- 10.3.2 All equipment used in patient care, testing, or emergency situations should be inspected, maintained, and tested on a regular basis and according to manufacturers' specifications. The facility should have appropriate fire-fighting equipment, signage, emergency power capabilities, lighting, and an evacuation plan.
- 10.3.3 The facility should have the necessary personnel, equipment, and procedures to handle medical and other emergencies that may arise in connection with services provided. Appropriate emergency equipment and supplies should be readily accessible to all patient service areas.
- 10.3.4 Hazards that might lead to slipping, falling, electrical shock, burns, poisoning, or other trauma should be eliminated. The facility must comply with the Dubai Municipality (DM) regulations regarding protection of the health and safety of employees.

## 11. Infection Control

- 11.1 Procedures should be implemented to minimize the sources and transmission of infections and maintain a sanitary environment. A system should be in place to identify, manage, handle, transport, treat, and dispose of hazardous materials and wastes whether solid, liquid, or gas.
- 11.2 There must be an active program for the prevention, control, and investigation of infections and communicable diseases. The infection control program may include, but is not limited to:
  - a) A system for identifying, reporting, investigating, and controlling infections and communicable diseases of patients and staff
  - b) Implementation of corrective action plans
  - c) Mechanism for evaluation of the program



At this stage, MOH Central Committee for Control of Hospital Infection (CCCHI) is considered as reference for all healthcare sector infection control policies and procedures.

## 12. Smoking Policy

Smoking inside the general clinic is strictly prohibited for all professionals, visitors, and patients. The clinic management is responsible to implement this policy. Signboards should be fixed in the main entrance, patient, and visitors waiting area and other areas of the facility alerting individuals regarding this policy

### Appendix 1: General Specification

No	General Specification
1	General Clinic can be established in <b>an independent apartment (villa)</b> or in a <b>commercial flat</b> in a building; preferred to be located in the first floor or higher where there should be at least one lift is provided in the building.
2	<b>Proper day lighting and ventilation</b> within the clinic premises is obligatory, windows which can opened shall be fitted with a net.
3	Walls shall be painted with <b>easily washable paints</b> (light colors is preferred), with no sharp edges in wall and Clinic floors shall be made of easily washable material e.g. ceramic tiles or special medical floors.
4	<b>Clear colors contrast</b> between doors, wall color and non-medical furniture is recommended
5	<b>Corridors and Doors</b> shall be wide and permits wheelchair and trolleys (at least 90 cm for doors and 120 cm for corridors width)*
6	General clinic shall comprise at least of the following: 1- <b>Doctor room (consultation room)</b> with space area not be less than 12 square meters with washbasin and taps water 2- <b>Treatment Room</b> shall not be less than 6 square meters 3- Reception area 4- Separate <b>waiting area</b> for males and females 5- Toilets (Minimum of two) one for males and the other for females 6- Medical records / files area
7	A disabled access (wheelchair access) in the building is mandatory requirement
8	General safety requirement (e.g. Fire extinguisher, emergency exits) is mandatory requirements in the building.





## Appendix 2: Medical instruments and equipment

No	Item
1	Stethoscope.
2	Sphygmomanometers.
3	Weighing Scale with Height measurement
4	Thermometers
5	Percussion Hammer and Tuning fork.
6	Diagnostic set for ENT & Eye Exam.
7	Disposable tongue Depressors.
8	Syringes and Needles (Sterile, disposable).
9	Torch
10	X-ray viewer box
11	Dressing trolley with cotton & gauze
12	Kidney shape bowl.
13	Disposable examination Gloves.
14	Disinfectant solution, medical soap or hand disinfectant solutions
15	Blood glucose instrument (Prick method)
16	Tourniquet
17	Nebulizer Machine
18	Autoclave Machine.
19	Examination Lamp (mobile).
20	Resuscitation Drugs for shock (Cortisone, Adrenaline, Anti-Histamine injections).
21	Basic resuscitation instruments (e.g. Oxygen cylinder, face mask, laryngoscope, etc)
22	ECG Machine (optional)

## Appendix 3: Furniture

No	Required Furniture
1	Doctor desk with two chairs for patient and attendant.
2	Examinations couch.
3	Partition
4	Sufficient amount of linen or disposable medical towel paper.
5	Refrigerator to keep vaccinations and drugs.
6	Wheeled chair (optional)
7	Medical waste agreements and containers Wheeled chair (optional)
8	Prescription book, Medical Records for patients and sick leave book (later on)