

STANDARD OPERATING PROCEDURE FOR REGISTRATION, MANAGEMENT AND CONTROL OF PRIVATE HOSPITAL NOVEMBER 2022.

1.INTRODUCTION:

A Standard Operating Procedure (SOP) is an exclusive procedure describing the necessary activities to complete tasks per Private Hospital Regulations (2009) for Registration, Management and control, the main aim of SOP's is to achieve efficiency and quality output of performance that gets the point across on legal compliance.

These procedures describing necessary steps that applicants of organizations or persons shall use to complete registration process and the management take their roles and responsibilities for the control of Private Hospitals and adhere to Private hospital (Regulations) Act CAP 151 of 2009. Completion of process enable to open and running private hospitals. The main aim of SOP's is to achieve efficiency and quality output of performance for legal compliance on registration of persons or organization so as to strengthen registration, management and control.

A completed application for registration should start with applicants the persons and organizations by proper use of HFRS application window and submit to DMOs in their area of jurisdiction, DMO's to review applications and advice accordingly on time, RMO's shall scrutinize application and forward to the Secretariat/Board for final review and consultation before listing eligible health facilities. The Secretariat-PHAB will forward eligible health facilities to the Registration Committee for finalization before Board-approval and advice to the Minister. Letter of awards for successful applications shall be given within 2 weeks after the board meeting followed by Registration Certificates.

Expectation of using SOPs is to strengthens the process of registration, time management during process of application, ease investment opportunity and cost reduction to applicants so as to increase revenue.

Purpose:

Development of this SOPs based on process of Registration of persons and organizations under the Private Hospitals (Regulations) Act 2009 and its private hospital regulations of 2018.

Scope:

This document shall be used at National, Regional and Council levels and covers the areas of private health facilities as part of health care delivery system in Tanzania. SOPs developed applies to persons and organizations applying for establishment and running

private hospitals; District Medical Officers; Regional Medical Officers; Secretariat-PHAB; HFRS system administrators; Board Committees and the Board.

2. ROLES, RESPONSIBILITIES AND PROCEDURES

i) Persons and organizations

- To ensure proper use of HFRS including adherence for the requirements given and correct attachment before submit their applications
- Shall ensure to abide with time limit allocated for new application window before closure of application.
- To respond application query from DMO on time
- Adequately process control number for making payment on time

ii) District Medical Officers,

- Shall be responsible to schedule inspection of new facility/changes made to a facility after receiving applications prior for registration and approval in accordance to window time period set
- Immediately forward applications to RMO right on time for scrutiny after thorough review for received applications or corrections made before he/she submitted to Board/Council for final review.

iii). Regional Medical Officers,

- Receive and scrutinize applications of health facilities from DMOs and request further clarifications when necessary and submit to board/council within time period set for clean applications
- RMOs to ensure no CHMT reports should be condemned/nullified after inspection of a new applications rather request for clarifications to avoid application goes back to applicants for the benefit of time management.
- In case of unavoidable circumstances applications submitted and forwarded to RMO should be sent back to applicants and this will count for DMO performance

iv) Secretariat-PHAB,

- Heads of zonal desk at Secretariat-PHAB to ensure on time review of all applications at areas of jurisdiction in the hfrs from RMOs for listing eligible health facilities before Registration Committee.

- Secretariat-PHAB shall uphold RHMTs and CHMTs reports from health facilities applications and ask for clarifications from RMOs before nullification of inspection reports which counts to RMOs performance.
- When necessary, Secretariat-PHAB should only sent back faults/issues which RMOs and DMOs overlooked which can only be returned to facility owner not otherwise.

v) The Registrar

- Shall approve/return/reject any application of facilities forwarded by secretariat and produce list of eligible health facilities ready for the Registration committee final review before Board approval
- Shall keep list of proposed registered health facilities and Produce report of all applications made from clients to the Board for approval
- Registrar shall notify successful applicants in writing two weeks after board approval
- Only successful applications that need special inspection prior to start operation Registrar shall form a team before Board approval.

vi) Registration Committee

- Scrutinize finalized applications ready for board approval within period time set.

Vii) HFRS system administrators,

- Shall set opening and closing dates for health facilities window application for registrations
- Shall ensure monitoring of registration of facilities all the time given
- Supervise from time to time opening and closing of application windows and time frame given at each stage are adhered.
- HFRS team should review and troubleshoot system problems occurs all the time

viii) The Board.

- Should exercises circular resolution to new applications for registration as per Private Hospital (Regulations) Act CAP 151 to benefit application time management and ease the investment opportunity
- Shall ensure approval granted on time and results are given out within 14 days
- To advice Minister for Health on time delivery and issue Registration Certificate for running private hospitals within 3 months.

Conclusion:

Good governance requires system strengthening as part of the process it includes registration, time management of application submitted according to Private hospital (regulations) CAP 151. Thus create good environment for investment opportunity and cost reduction to applicants all stakeholders in the SOP have to abide to their roles and responsibilities as stipulated in the SOP and those who violate should be held responsible.

Process flow and key players for registration of Health Facilities

Step	Activity	Estimated duration/ Working days	Responsibility	Remarks on improved Systems and Processes
1.	<p>Application for registration of a health facility starts with the applicants (persons and approved organizations) using the HFRS application window.</p> <p>(a) Prepare all documents required for registration in pdf format before filling online application form</p> <p>(b) Log in to the Health Facility Registration System and register the Health facility (New Registration) by filling in basic information on on the health facility (name, location, ownership, contact information,), staffing (name, cadre, certificates), Premises (service areas), infrastructure (utilities-power, water and waste management), Equipment, and Services offered</p> <p>(c) Attach the documents (sketch layout, incinerator picture or contract, BRELA Number, TIN Certificate and SAVE</p> <p>(d) Preview the Application</p> <p>(e) Submit the application.</p> <p>(f) Pay application fees and SUBMIT</p>	0	Owner of Health Facility	<p>The application is now submitted to DMOs in their area of jurisdiction The User can log in the system to</p> <ul style="list-style-type: none"> • get feedback on the application process • View and edit returned applications from DMO and Secretariat <p>Requirements for system upgrade:</p> <p>(a) applicant should get a notification by phone and/or email if the application is returned for editing or approved and sent to RMO</p> <p>(b) If applicant delay to respond the requirement from registration authority at any level within six month application shall be rejected.</p>
2.	The role of the DMO's is to review applications and advice RMO	15	District PPP Focal Person	System update needed for user guide 3 DMOs

Step	Activity	Estimated duration/ Working days	Responsibility	Remarks on improved Systems and Processes
	<p>accordingly. The DMO assisted by the District PPP Focal Person shall undertake the following activities:</p> <p>(a) Log in the HFRS and view the details submitted by the applicant for registration of new health facility, updating health facility or upgrading health facilities.</p> <p>(b) Compare the information submitted by the applicant with the Standard Guidelines for Health facilities. If the facility does not meet the minimum requirements as detailed in the Standard Guideline for Health Facilities, the application should be returned to the applicant for updating.</p> <p>(c) Organize a visit of the CHMT to conduct inspection visit to the health facility in order to verify the information submitted in the HFRS system by the applicant regarding basic information, staff, premises, infrastructure, equipment and services offered.</p> <p>(d) Prepare an inspection report with attachments of photographs of premises, equipment and other facilities e.g. incinerator</p> <p>(e) Log in the HFRS and enter findings of the inspection visit and attach the report and pictures taken at the health facility. Based on the finding of the inspection team, the DMO shall:</p> <p>(i) Reject the application if major gaps are identified in premises and infrastructure or false</p>		DMO	No inclusion of Private health facilities updating and upgrading

Step	Activity	Estimated duration/ Working days	Responsibility	Remarks on improved Systems and Processes
	<p>information was submitted</p> <p>(ii) Return the application to the applicant to revise and update the application if there are minor gaps that can be rectified</p> <p>(iii) Submit the application to RMO</p>			
3.	<p>RMO's shall scrutinize application and forward to the Secretariat/Board for final review and consultation before listing eligible health facilities. The RMO shall:</p> <p>(a) Log in the HFRS and verify the details submitted by the applicant for registration of new health facility, updating health facility or upgrading health facilities.</p> <p>(b) Review the Inspection report and recommendation of the DMO/CHMT.</p> <p>(c) Organise a visit of the RHMT to inspect the health facility in order to verify the information submitted in the HFRS system by the applicant regarding basic information, staff, premises, infrastructure, equipment and services offered.</p> <p>(d) Prepare an inspection report with attachments of photographs of premises, equipment and other facilities e.g. incinerator</p> <p>(e) Log in the HFRS and enter findings of the inspection visit and attach the report and pictures taken at the health facility. Based on the finding of the inspection team, the RMO shall:</p>	10	Regional PPP Focal Person RMO	System update needed for user guide 3 RMOs No inclusion of Private health facilities updating and upgrading

Step	Activity	Estimated duration/ Working days	Responsibility	Remarks on improved Systems and Processes
	(i) Return the application to the DMO if there are deficits that need to be rectified by the applicant (ii) Submit the application to the PHAB Secretariat			
4.	The Secretariat-PHAB shall (a) Log in the HFRS and view the applications submitted RMO to the PHAB secretariat. Each member of the PHAB secretariat has been assigned responsibility for a specific zone. (b) Verify the details submitted by the applicants for registration of new health facility, updating health facility or upgrading health facilities and compare with the Standard Guidelines for Health facilities (c) Return the application to the applicant to revise and update the application if there are minor gaps that can be rectified (d) Forward the application to the Registrar	10	Zonal Focal Persons in the PHAB Secretariat	
5.	The Registrar shall (a) Review the application and recommendations by DMO, RMO and Secretariat to see that all boxes have been ticked off (✓) and the application meets all the requirements for registration, updating or upgrading (b) Submit the eligible health facilities to the Registration Committee to review and recommend to the Board for approval or rejection.	5	Registrar	
6.	Board Registration and Inspection Committee (a) Review the application and recommendations the Secretariat	10	Board Registration and Inspection Committee	

Step	Activity	Estimated duration/ Working days	Responsibility	Remarks on improved Systems and Processes
	<p>and verify that the applications meet all the requirements for registration, updating or upgrading</p> <p>(b) Select a sample of health facilities to be visited by Board Inspection Teams. All Hospitals and Renal Dialysis Centers must be inspected before a recommendation is submitted to the Board</p> <p>(c) Submit the recommendation for approval, approval pending corrections and rejection of the application to the Board.</p>			
7.	<p>Board members shall</p> <p>(a) Receive, discuss and decide upon Board Papers submitted by the Secretariat and Reviewed by the Board Committees</p> <p>(b) Decide on recommendations of Board Committee to approve, approve pending corrections or reject the applications</p> <p>(c) Instruct the Registrar to communicate the decisions of the Board by writing to the health facilities and prepare certificates for applications that have been approved</p>		Board members	
8.	<p>Registrar</p> <p>(a) Prepare and deliver Letter of awards for successful applications within 2 weeks after the board meeting</p> <p>(b) Prepare Registration Certificates for signature of the Minister</p> <p>(c) Prepare a Board Resolution Paper with a summary of the decisions made by the Board to approve, approve pending corrections or reject the applications and includes the list of health facilities in the three categories (Approved, Approved pending Corrections and Rejected)</p>	14	Registrar	

Step	Activity	Estimated duration/ Working days	Responsibility	Remarks on improved Systems and Processes
9.	Total waiting time for registration	64		
10	Minister (a) Receive, consider and endorse decisions made by the Board (b) Sign the Registration Certificates within 90 days after the letter of awards delivered to successful applicants as recommended by the Board and submitted by the Registrar together with the Board Resolution	90	CMO Minister	