Licensing of Private Health Facilities

Circumstances that ‘stop the clock’ for an approval of a licence in principle:

- Failure to provide complete application form with properly completed attachment forms
- The NSW Ministry of Health (MoH) will review the 1:100 architectural plans supplied, and recommend modifications as required. This process can delay plan approval if modifications are extensive, or if the applicant suggests alternative solutions which require further review.
- An assessment that the applicant is not fit and proper to operate a private health facility (including National Criminal Record Check), which will involve offering the applicant an opportunity to submit evidence to the contrary;
- Consultation with the relevant Local Health Network (LHD), and relevant Branches in the MoH, results in the need to seek further information or submissions from the applicant in response to recommendations from the LHD or MoH; and
- A large number of submissions received from third parties following public advertisement of the proposed private health facility, which require proper consideration and which need to be referred to the applicant to seek further information or submissions in response to objections.

Circumstances that ‘stop the clock’ for the issue of a licence:

Failure at final inspection, carried out to ensure that the private health facility has been built in accordance with the approved plans and complies with the conditions of the Approval in Principle and all relevant Legislation, including:

- Compliance with relevant building codes/Australian Health Facility Guidelines
- Compliance with licensing standards
- Establishment of Medical Advisory Committee/Credentialing Committee
- Appointment of suitably qualified Director of Nursing
- Establishment of a quality improvement program.

Failure to provide, at the onsite commissioning inspection, all building, fire and other relevant certification:

- Copy of the certificate of classification from an authorised certifier under the Local Government Act, for the use of the premises as a BCA Class 9(a) health care building.
- Certification from the relevant manufacturer or registered professional, (Certified that it has been installed and meets the relevant Australian Standard):
  - New equipment (equipment in the CSSD, dirty utility rooms, operating theatres, monitors etc.)
  - Fire retardancy for new furnishings, curtains and floorings
  - Warm water system (thermostatic mixing valves)
  - Nurse and emergency call bells
  - Medical gases
  - Air-conditioning
  - Backup power supply
  - Infant cots
  - Laminar flow cabinets installed at chemotherapy clinics
  - EPA certification of lead lining in operating theatres.
• Letter of notification from the applicant concerning the appointment of the Director of Nursing of the facility, indicating that the person nominated meets legislative requirements & include a copy of current Authority to Practise

• Letter of notification from the applicant of the Medical Advisory Committee (MAC) Membership details.

• Letter of confirmation from the applicant that the nursing staff have the relevant qualifications and experience for all specialties.

• For a mental health class facility, an environmental risk assessment with action plan and timeframes from a recognised mental health professional.

• Letter of confirmation from the applicant that the MAC has approved the admission criteria for each class.

• Letter of confirmation from the applicant that there is resuscitation equipment for use in advanced life support that complies with the Standards for Resuscitation: Clinical Practice and Education published by the Australian Resuscitation Council and the Australian College of Critical Care Nurses in March 2008

• Letter from accredited cardiologist that the Guidelines on Support Facilities for Coronary Angiography and Percutaneous Coronary Intervention (PCI) published by the Cardiac Society of Australia and New Zealand are adhered to, where applicable.

• Letter from a recognised sterilizing/reprocessing consultant confirming that the reprocessing complies with the Australian and New Zealand Standard AS/NZS 4187, where applicable.

• Copy of current formal agreement with a nearby hospital or Local Health District capable of providing a higher level of patient care in the event of an emergency transfer – relevant to new facilities and class. In the case of cardiac catheterisation class, access to a hospital with cardiac surgery, or intensive care class private health facility, or a public hospital to which the patient may be transferred for cardiac surgery in less than 1 hour.

• Letter from an anaesthetist or sedationist credentialed to the facility confirming compliance of the facility with the Australian and New Zealand College of Anaesthetists publications, where applicable.

• Letter signed by a registered anaesthetist or sedationist stating the level and type of anaesthetic to be used for the procedures or treatment specified.

• Copy of the notification letters from the applicant to the ambulance and fire authorities reopening of the new facility.

• A letter from a paediatric physician agreeing to be available for consultation while paediatric patients are accommodated at the private health facility, where applicable.