

SUMMARY SHEET (Secondary A Hospital)

Province :

Hospital Name

Date of Assessment :

दिन महिना साल

Event:

Completed by:

Section Number	Section Name	No. of standards	Max score	Obtained Score	Obtained percentage
SECTION I : Governance and Management Standards (20% Weightage)					
1.1	Governance	27	27		
1.2	Organizational Management	15	15		
1.3	Human Resources Management and Development	17	19		
1.4	Financial Management	17	17		
1.5	Medical Records and Information Management	14	14		
1.6	Quality Management	15	17		
SECTION I : Total Governance and Management Standards		105	109		
SECTION II : Clinical Management (60% Weightage)					
2.1	OPD Service	31	73		
2.2	Speical Clinic	67	75		
2.3	Emergency Service	36	44		
2.4	Dressing Injections and Procedures Room	12	20		
2.5	Pharmacy Service	35	39		
2.6	Inpatient Service (General Ward)	34	96		
2.7	Delivery Service	33	39		
2.7	Maternity Inpatient Service (General Ward)	27	33		
2.8	Surgery/ Operation Service	44	59		
2.9	Diagnostic and Laboratory Services	70	99		
2.10	Dental Services	18	22		
2.11	Post-Mortem and Morturay Service	14	16		
2.12	Medico-legal Services	11	13		
2.13	One stop crisis management center (OCMC)	27	33		
2.14	Physiotherapy (Physical Rehabilitation)	19	21		
SECTION II: Clinical Service Management Standards		478	682		
SECTION III : Hospital Support Services Standards (20% Weightage)					
3.1	Central Supply Sterile Department (CSSD)	17	19		
3.2	Laundry	17	19		
3.3	Housekeeping	13	15		
3.4	Repair, Maintenance and Power System	12	12		
3.5	Water Supply	4	4		
3.6	Hospital Waste Management	17	17		
3.7	Safety and Security	15	17		
3.8	Transportation and Communication	8	8		
3.9	Store (Medical and Logistics)	7	7		
3.10	Hospital Canteen	16	16		
3.11	SSU	12	14		
SECTION III: Hospital Support Services Standards		138	148		
Total		721	939		
Overall MSS Score (Weightage Average Score)					

Area	Code	Verification			
Governance	1.1				
Components		Standards	Self	Joint	Max Score
1.1.1 Formation of Hospital Management Committee (HMC)	1.1.1	Hospital Management Committee is formed			1
1.1.2 Capacity building of HMC	1.1.2	All HMC members have received an orientation on HMC functions			1
1.1.3 Availability of Medical Superintendent	1.1.3	Medical Superintendent is fulfill as per organogram			1
1.1.4 Functional HMC	1.1.4.1	HMC meetings called upon by member secretary / Medical Superintendent headed by chairperson conducted at least 3 times per year or as per need			1
	1.1.4.2	HMC meetings have covered at least following agenda (See minutes of last meetings):			
	1.1.4.2.1	Hospital services and utilization			1
	1.1.4.2.2	Hospital's financial issues			1
	1.1.4.2.3	Patient rights issues e.g. patient facilities, analysis of complaints received, patient security			1
	1.1.4.2.4	Management issues- HR issues, security issues			1
	1.1.4.2.5	Infrastructure/ Equipment issues			1
	1.1.4.2.6	Coordination issues with local governance-rural municipality/ municipality, provincial, federal, DoHS, MoHP			1
1.1.5 Support in health financing	1.1.5.1	Hospital implements health insurance program			1
	1.1.5.2	All targeted women receive Aama Surakhsya program incentives on time (in last quarter)			1
1.1.6 Annual plan & budget	1.1.6	Annual plan & budget is approved by HMC before the fiscal year starts			1
1.1.7 Storage of HMC documents	1.1.7	There is a separate locker for HMC documents.			1
1.1.8 Accountability	1.1.8.1	Updated citizens charter is displayed			1
	1.1.8.2	Notices of public concern are displayed publicly			1
	1.1.8.3	Complaint boxes are kept in a visible place			1
	1.1.8.4	Information officer opens complaint box at least once a week and issues are timely addressed			1
	1.1.8.5	Hospital has a website or social media account like- Facebook, Viber or Twitter- available and functional with latest information			1
	1.1.8.6	Hospital has geriatrics friendly infrastructure (like side rails for mobilization and support)			1
	1.1.8.7	Hospital has friendly environment for people with disability (like ramps)			1

1.1.9 Grievance and complain handling	1.1.9.1	Mechanism for grievance and complain handling institutionalized			1
	1.1.9.2	Grievance and complains are effectively addressed			1
1.1.10 Hospital has Operational Manual	1.1.10	Hospital has its own operational manual with clear information on how the hospital operates its' services			1
1.1.11 Hospital produces an Annual Report	1.1.11	Hospital Annual Report is available in website			1
1.1.12 Conduct social audit	1.1.12	Social audit is conducted for last year by third party			1
Standard 1.1		Total Score			27
		Percentage = Total Score / 27 x 100			

Area	Code	Verification			
Organizational Management	1.2	Verification			
Components		Standards	Self	Joint	Max Score
1.2.1 Organizational structure	1.2.1.1	Organogram of hospital showing departments/units with number of staffs is displayed			1
	1.2.1.2	Organogram of hospital is reviewed every 2 years and forwarded to higher authority			1
1.2.2 Work division and delegation of authorities	1.2.2	Written delegation of authorities is maintained			1
1.2.3 Maintaining client flow system	1.2.3	Navigation chart with services and departments guiding clients to access services			1
1.2.4 Queue system	1.2.4	Hospital implements token and / or queue system for users (separate for elderly, disable and pregnant)			1
1.2.5 E-Attendance	1.2.5	All staffs of hospital use electronic attendance			1
1.2.6 Dress code for all staffs	1.2.6.1	All clinical, technical and administrative staffs have apron / uniform which is worn on duty			1
	1.2.6.2	All hospital staffs carry personal ID cards when on duty			1
1.2.7 Maintaining effective team work environment	1.2.7.1	Hand-over meetings are conducted daily and also in concerned department			1
	1.2.7.2	Morning conference is conducted everyday			1
	1.2.7.3	Regular meetings are conducted as follows (see meeting minutes):			
	1.2.7.3.1	Intra- departmental meeting every two weeks			1
	1.2.7.3.2	Inter-departmental meeting once a month			1
	1.2.7.3.3	Staff meeting once a month			1
	1.2.7.4	Staff quarters are provided and adequate for the staffs			1
1.2.7.5	Separate space allocated for breast feeding for staffs/ Separate space in duty room designated for breast feeding			1	
Standard 1.2		Total Score			15
		Percentage = Total Score / 16 x 100			

Area	Code				
Human Resource Management and Development	1.3	Verification			
Components		Standards	Self	Joint	Max Score
1.3.1 Personnel administration policy of hospital	1.3.1	Personnel administration guideline of HMC is available (for all staffs including locally hired staff) and practiced accordingly			1
1.3.2 Human resource records	1.3.2	Individual records of all staffs including contract staffs are maintained and updated.			1
1.3.3 Staffing	1.3.3.1	Staffs available for service in hospital as per organogram (See Annex 1.3a Functional Organogram Section I: At the end of this standard)			3
	1.3.3.2	Maaga Akriti form (माग आकृति फारम) correspondence to fulfill vacant positions to concerned authority as per guideline			1
1.3.4 Job description	1.3.4	All staffs including HMC staffs are given a job description when they are recruited/ posted to the hospital (permanent and contract staff)			1
1.3.5 Review of performance	1.3.5.1	Performance appraisal (का. स. मु.) of all staffs is done as per guideline			1
1.3.6 Motivating staff and occupational safety	1.3.6.1	A training plan for the hospital is developed based on the training needs of the staff identified at the performance appraisal			1
	1.3.6.2	For training and related activities, at any point of time, the acceptable work absenteeism is <10% of staff			1
	1.3.6.3	There is activity conducted to motivate staff (staff retreat, rewards, recognition of performances, etc.) at least once a year.			1
	1.3.6.4	Hospital has system for addressing occupational hazard like needle stick injury, radiation exposure, vaccination			1
1.3.7 Continuous professional development (CPD)/ Continuous medical education (CME)	1.3.7.1	Hospital conducts CPD / CME classes to technical staff weekly			1
	1.3.7.2	Written record of attendance, subjects presented and discussed during CPD/CME			1
	1.3.7.3	Separate space with furniture, audio-visual aids and internet for CPD/CME/meeting are available.			1
1.3.8 Library facility available	1.3.8.1	Hospital has its own library with sitting arrangement for readers			1
	1.3.8.2	A list of national health guidelines and treatment protocols available and inventory managed for readers accessing it			1
	1.3.8.3	Computers with printing and photocopy facility available			1
	1.3.8.6	Access to internet facility with institutional access to at least one of the international health related domain like HINARI			1
Standard 1.3		Total Score			19
		Percentage = Total Score / 19 x 100			

Annex 1.3a Functional Organogram for Secondary Hospitals

Functional Organogram for Secondary Hospitals			Self	Joint	Max Score
For Governance and Management					
1.	Medical Superintendent	1			1
2.	Hospital Management officer	1			1
3.	Information officer	1			1
5.	Medical recorder	1			1
4.	Accountant for hospital	1			1
6.	Health Insurance Team	As per Health Insurance Board			1
For Clinical Services					
7.	Doctor: OPD Patients	1:35-50			1
8.	Screening counter	1 paramedics: 4 OPDs (at least one nurse in gynae/obs OPD)			1
9.	Special clinics	2 mid-level health workers: 1 Special Clinic* For safe abortion services, at least one trained and certified medical officer / MDGP for the first trimester and second trimester safe abortion services			1
10.	ER beds: Health Workers	5 ER Beds: Doctor on duty (1): Nurse (1): Paramedics (1): Office Assistant (1) : Tahere should be 1:1 nurse patient ratio in red area, 1:3 in yellow area and 1:6 in green area.			1
11.	Pharmacy staffs as per pharmacy service guideline 2072	At least one is available At least one assistant pharmacist with one helper in each shift with monthly duty roster to provide 24 hour service.			1
12.	Nursing and support staff in inpatient per shift	Nurse patient ratio 1:6 in general ward, 1:4 in pediatric ward, 1:2 in high dependency or intermediate ward or post-operative ward with one trained ward attendant per shift in each ward			1
13.	Nursing staff in labor and maternity per shift	Nurse /SBA Trained/Midwife and mother ratio 1:2 in pre labor; 2:1 per delivery table and 1:6 in post natal ward with at least one ASBA trained medical officer on duty and one office assistant are available in each shift			1
14	Surgery team per surgery	For one surgery, at least a team is composed of: MS/MDGP with one trained medical officer, two OT trained nurse (one scrub and one circulating), one Anesthesiologist/MDGP, one anesthesia assistant and one office assistant (for cleaning and helping)			1
		For overall management of operation theatre, there is one OT nurse (with minimum bachelors degree) assigned as OT in-charge			
		At least one nurse in pre-anesthesia area for receiving and transferring of the patient			
		At least two ICU trained nurses for post anesthesia care for receiving patient after OT			
15	Laboratory	At least 2 medical technologist, 3 lab staffs (1 Lab Technician 1 Lab Assistant and 1 Helper) in each shift			1
16	X-ray	At least 2 staffs- 1 technician and 1 helper in each shift.			1
17	USG	USG trained medical practitioner and mid-level health worker in each USG room			1
18	Dental services	Dental Hygienest/ Dentist: OPD patients- 1:20 per day for the quality of care			1

19	Mortuary and medico-legal services	Trained medical officer for mortuary and medico-legal services at least one			1
20	Physiotherapy	At least 1 physiotherapist trained in Bachelor in Physiotherapy (BPT), 2 Certificate in physiotherapy (CPT) or Diploma in physiotherapy (DPT) and 1 office assistant treating 20 OPD patient per day.			1
21	OCMC	At least one medical officer working in the hospital trained in medico-legal issues is available			1
		At least three staff nurse working in the hospital (including 1 trained psycho social counselor) assigned for OCMC			
For Hospital Support Services					
22	CSSD	Separate staffs assigned for CSSD under leadership of trained nursing staff.			1
23	Laundry and housekeeping	There is a special schedule for collection and distribution of linens with visible duty roster for staffs of laundry and housekeeping			1
24	BMET	Human resource trained in BMET or DBEE is designated for repair and maintainance of biomedical equipment			1
25	Security	The hospital has trained security personnel round the clock.			1
26	SSU	Facilitators at least 2 to 10 facilitators under the unit chief			1
Total Obtained Score					26
Total Percentage= Total Obtained Score/ 26 x100					

Each row gets a score of 1 in each row if it is available otherwise 0.

Scoring Chart	
Total percentage	Score
0%-50%	0
50%-70%	1
70%-85%	2
85%-100%	3
Score for Standard 1.3.3.1	

Area	Code	Verification			
Financial management	1.4				
Components		Standards	Self	Joint	Max Score
1.4.1 Account department of hospital	1.4.1.1	Dedicated account department of hospital with space and furniture			1
	1.4.1.2	At least one accountant available for hospital financial management			1
1.4.2 Formulation and approval of Annual Hospital Budget	1.4.2.1	An annual hospital budget is developed incorporating the revenue from services, government grants, and support provided by other organizations.			1
	1.4.2.2	Internal income is reviewed during budgeting every year.			1
1.4.3 Service fees	1.4.3	The service fees of the hospital are fixed by HMC every year.			1
1.4.4 Daily income	1.4.4	Daily income is deposited in the bank every day.			1
1.4.5 Financial review and audit	1.4.5.1	Budget absorption rate of last fiscal year is as per national target			1
	1.4.5.2	Internal audit, financial and physical progress review is done at least once each trimester (once in every 4 months).			1
	1.4.5.3	Final audit/ external audited accounts are available for last year.			1
1.4.6 Electronic database	1.4.6.1	The hospital uses central electronic billing system			1
	1.4.6.2	The hospital uses TABUCS/ LMBIS for accounting including local income and expenses by HMC.			1
1.4.7 Hospital prepares financial reports	1.4.7.1	The hospital prepares and keeps monthly financial report.			1
	1.4.7.2	Trimester financial report is produced (every 4 months) and financial status tracked and discussed in meetings			1
	1.4.7.3	Annual financial report is submitted to HMC.			1
1.4.8 Clearing financial irregularities	1.4.8.1	Financial irregularities are responded within 35 days			1
	1.4.8.2	Clearance of financial authorities is done as per national target			1
1.4.9 Inventory inspection	1.4.9	Inventory inspection is done once in a year and managed accordingly			1
Standard 1.4	Total Score				17
	Percentage = Total Score / 17 x 100				

Area	Code	Verification			
Medical Records and Information Management	1.5				
Components		Standards	Self	Joint	Max Score
1.5.1 Managing medical records and use of electronic database	1.5.1.1	Client registration is digitized using standard software			1
	1.5.1.2	Referral in and out records are kept using the standard form (HMIS 1.4) and register.			1
	1.5.1.3	Electronic health record system that generates the HMIS monthly report (HMIS 9.4) is in place			1
1.5.2 Infrastructure and supplies for information management	1.5.2.1	There is a functional Medical Record Section			1
	1.5.2.2	All patients' records are kept in individual folders in racks or held digitally.			1
	1.5.2.3	There is a set of functional computer and printer available for maintaining medical records.			1
1.5.3 Evidence generation and utilization	1.5.3.1	Hospital monthly reports (HMIS 9.4) of the last three months are shared to the national database			1
	1.5.3.2	Hospital services utilization statistics are analyzed at least every month and shared with all the HODs and in-charge via email, paper and/or dashboard. (Check last three months status)			1
	1.5.3.3	Statistics including OPD morbidity pattern data, IPD data, surveillance data are analyzed and discussed in staff meeting and CPD/CME (Check the status in the last meeting)			1
	1.5.3.4	Key statistics of service utilization is displayed in respective Departments/ Wards			1
	1.5.3.5	Medico-legal incidents and services are recorded			1
1.5.4 Focal person for information management	1.5.4.1	Medical recorder is trained on ICD and DHIS2			1
	1.5.4.2	An information officer is specified to communicate with patients/clients, their relatives, media and other stakeholders.			1
	1.5.4.3	Contact details of information officer is displayed in hospital premises with photo and phone number.			1
Standard 1.5		Total Score			14
		Percentage = Total Score / 14x 100			

Area	Code	Verification			
Quality Management	1.6				
Components		Standards	Self	Joint	Max Score
1.6.1 Hospital Quality Health Service Delivery and Management Strengthening (QHSDMS) Committee	1.6.1.1	Hospital (QHSDMS) Committee is formed according to MSS Implementation Guideline.			1
	1.6.1.2	Hospital (QHSDMS) Committee meetings are held at least every 4 months			1
1.6.2 Display of patients' rights and responsibilities	1.6.2	The hospital has a statement of patient rights and responsibilities, which is posted in public places in the hospital.			1
1.6.3 Addressing issues in report of social audit	1.6.3	The findings of social audit like client exit interview are shared in whole staff meeting			1
1.6.4 Assessing hospital quality	1.6.4	The hospital has assessed the hospital quality using the MSS tool at least every 4 months			1
1.6.5 Planning to improving quality	1.6.5	The hospital has developed specific plans to improve quality based on the MSS assessment.			1
1.6.6 Hospital uses QI tools	1.6.6	Hospital uses QI tools for assessment of the major priority government programs (less than 50%=0, 50-70% =1, 70-85% = 2, 85-100% =3)			3
1.6.7 Implementing QI plan	1.6.7.1	Hospital has implemented the specific activities based on the MSS plan.			1
	1.6.7.2	Hospital has implemented specific activities based on gap analysis of QI tools			1
1.6.8 Clinical Audit	1.6.8.1	The hospital has functional MPDSR committee (in program district)			1
	1.6.8.2	There are regular reviews, reporting and dissemination of morbidity and mortality (M&M) including			
	1.6.8.2.1	Investigations and complications of treatment including medication error			1
	1.6.8.2.2	Hospital acquired infections (HAI)			1
	1.6.8.3	Mortality audit of every death in the hospital is done and reported			1
	1.6.8.4	Hospital implements Robson's classification (hospitals with CEONC services)			1
	1.6.8.5	Hospital implements baby friendly initiative			1
Standard 1.6		Total Score			17
		Percentage = Total Score/17 x 100			

Area	Code	Verification			
OPD Service [1]	2.1				
Standards		Standards	Self	Joint	Max Score
2.1.1 Time for patients	2.1.1.1	OPD is open from 10 AM to 3 PM (See Checklist 2.1 At the end of this standard for scoring).			3
	2.1.1.2	Tickets for routine OPD are available till 2 pm			1
	2.1.1.3	EHS services from 3PM onwards and tickets available from 2PM onwards			1
2.1.2 Adequate Staffing	2.1.2.1	Doctor: OPD Patients- 1:35-50 per day for quality of care			1
	2.1.2.2	One screening counter with 1 paramedics			1
2.1.3 Maintaining patient privacy	2.1.3	Patient privacy maintained with separate rooms, curtains hung, maintaining queuing of patients with paging system in OPD (See Checklist 2.1 At the end of this standard for scoring).			3
2.1.4 Patient counseling	2.1.4.1	Counseling is provided to patients about the type of treatment being given and its consequences (See Checklist 2.1 At the end of this standard for scoring).			3
	2.1.4.2	Appropriate IEC materials (posters, leaflets etc.) as an IEC corner available in the OPD waiting area.			1
2.1.5 Physical facilities	2.1.5.1	Adequate rooms and space for the practitioners and patients are available (See Checklist 2.1 At the end of this standard for scoring).			3
	2.1.5.2	Light and ventilation are adequately maintained. (See Checklist 2.1 At the end of this standard for scoring)			3
	2.1.5.3	Required furniture, supplies and space are available			
	2.1.5.3.1	General Medicine OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3
	2.1.5.3.2	Obstetrics and Gynecology OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3
	2.1.5.3.3	Pediatrics OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3
	2.1.5.3.4	General surgery OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3
2.1.5.3.5	Orthopedics OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3	

2.1.6 Equipment, instrument and supplies	2.1.6	Equipment, instrument and supplies to carry out the OPD works are available and functioning			
	2.1.6.1	General OPD (See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
	2.1.6.2	Obstetrics and Gynecology OPD (See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
	2.1.6.3	Pediatrics OPD (See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
	2.1.6.4	General surgery OPD(See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
	2.1.6.5	Orthopedics OPD (See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
2.1.7 Duty rosters	2.1.7	Duty rosters of all OPDs are developed regularly and available in appropriate location.			1
2.1.8 Facilities for patients	2.1.8.1	Availability of waiting space with sitting arrangement is available for at least 150 persons in waiting lobby (for total OPDs)			1
	2.1.8.2	Safe drinking water is available in the waiting lobby throughout the day.			1
	2.1.8.3	There are at least four toilets with hand-washing facilities (2 for males and 2 for females separate, one each universal toilet)			1
	2.1.8.4	Hand-washing facilities are available for patients			1
2.1.9 Recording and reporting	2.1.9	OPD register available in every OPD with ICD 10 classification for diagnosis recorded (electronic health recording system) (See checklist 2.1 At the end of this standard for scoring)			3
2.1.10 Infection prevention	2.1.10.1	Masks and gloves are available and used (See Checklist 2.1 At the end of this standard for scoring)			3
	2.1.10.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP) (See Checklist 2.1 At the end of this standard for scoring)			3
	2.1.10.3	Hand-washing facility with running water and soap or hand sanitizer is available for practitioners (See Checklist 2.1 At the end of this standard for scoring)			3
	2.1.10.4	Needle cutter is used (See Checklist 2.1 At the end of this standard for scoring)			3
	2.1.10.5	Chlorine solution is available and utilized for decontamination (See Checklist 2.1 At the end of this standard for scoring).			3
Standard 2.1		Total Score			73
		Total Percentage (Total Score/ 73 x100)			

Checklist 2.1 OPD Services (1= General Medicine, 2= Obstetrics/ Gynecology, 3= Pediatrics, 4= General Surgery, 6= Orthopedics)

Code	Service Standards	Score									
		1	2	3	4	5	Total Score	Percentage	Scoring	Direction to use	
2.1.1.1	OPD is open from 10 AM to 3 PM*										Go to Standard 2.1.1.2
2.1.3	Patient privacy maintained with separate rooms, curtains hung, maintaining queuing of patients with paging system in OPD										Go to Standard 2.1.4.1
2.1.4.1	Counseling is provided to patients about the type of treatment being given and its consequences										Go to Standard 2.1.4.2
2.1.5.1	Adequate rooms and space for the practitioners and patients are available										Go to Standard 2.1.5.2
2.1.5.2	Light and ventilation are adequately maintained										Go to Standard 2.1.5.3
2.1.9	OPD register available in every OPD and ICD 10 classification for diagnosis recorded (electronic health recording system)										Go to Standard 2.1.10
2.1.10.1	Masks and gloves are available and used										Go to Standard 2.1.10.2
2.1.10.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)										Go to Standard 2.1.10.3
2.1.10.3	Hand-washing facility with running water and soap or hand sanitizer is available for practitioners										Go to Standard 2.1.10.4

2.1.10.4	Needle cutter is used									Go to Standard 2.1.10.5
2.1.10.5	Chlorine solution is available and utilized for decontamination									Score Standard 2.1

Total percentage = Total score / No. of OPD x 100; Each row gets a score of 1 in each row if is available otherwise 0

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3

Plot score based on scoring chart in obtained marks of respective standards

***Specialized OPDs can be scheduled 2-3 days a week based on available human resource and patients' flow**

Annex 2.1a Furniture and Supplies for OPD

(1= General Medicine, 2= Obstetrics/ Gynecology, 3= Pediatrics, 4= General Surgery, 5= Orthopedics)

SN	General Items	Required No.	Score				
			1	2	3	4	5
1	Working desk	1 for each practitioner					
2	Working Chairs	1 for each practitioner					
3	Patient chairs	2 for each working desk					
4	Examination table	1 in each OPD room					
5	Foot Steps	1 in each OPD room					
6	Curtain separator for examination beds	In each examination bed					
7	Shelves for papers	As per need					
8	Weighing scale	Adult and Child					
Total Score							
Total Percentage = Total Score/8 X 100							

Each row gets a score of 1 in each row if is available otherwise 0

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.1.5.3.1	
Score for Standard 2.1.5.3.2	
Score for Standard 2.1.5.3.3	
Score for Standard 2.1.5.3.4	
Score for Standard 2.1.5.3.5	

Annex 2.1b Basic Equipment and Instruments for OPD

(1= General Medicine, 2= Obs/Gyne, 3= Pediatrics, 4= General Surgery, 5= Orthopedics)

S.No.	Basic equipment and instruments	Required No.	Score				
			1	2	3	4	5
1.	Stethoscope*	1 for each practitioner					
2.	Sphygmomanometer* (non-mercury) (*Pediatric size in pediatric OPD)	1 for each practitioner					
3.	Thermometer (digital)	2 in each table					
4.	Jerk hammer	1 for each practitioner					
5.	Flash light	1 for each practitioner					
6.	Disposable wooden tongue depressor	As per need					
7.	Hand sanitizer	1 in each table					
8.	Examination Gloves	As per need					
9.	X-Ray View Box	1 in each OPD					
10.	Measuring tape	1 in each table					
11.	Tuning fork	1 in each table					
12.	Proctoscope	1					
13.	Otoscope	1					
14.	Duck's Speculum	1					

15.	Aeyer's Spatula/ Slides (Pap Smear/ VIA materials)	1					
16.	Betadine/Swab	1					
17.	Fetoscope	1					
18.	Abdominal drape for patient	As per need					
19.	Pediatric Paracetamol	At least one syrup					
20.	Oral Rehydration Solution	At least one sachet					
21.	Goniometer	1 in each table					
22.	Plaster cutter	1					
Total score							
Maximum Score			13	16	13	13	13
Total percentage= Total Score/ Maximum Score x 100							

Each row gets a score of 1 in each row if is available otherwise 0

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.1.6.1	
Score for Standard 2.1.6.2	
Score for Standard 2.1.6.3	
Score for Standard 2.1.6.4	
Score for Standard 2.1.6.5	

Area	Code				
Special Clinics	2.2	Verification			
Immunization and Growth Monitoring Clinic	2.2.1				
Components		Standards	Self	Joint	Max Score
2.2.1.1 Time for patients	2.2.1.1	Immunization and growth monitoring service is available from 10 AM to 3 PM.			1
2.2.1.2 Staffing	2.2.1.2	Adequate numbers of healthcare workers are available (at least 2 mid-level health workers are assigned)			1
2.2.1.3 Maintaining patient privacy	2.2.1.3	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients).			1
2.2.1.4 Patient counseling	2.2.1.4.1	Counseling is provided to caretaker about the type of vaccine, its schedule, nutritional status of child.			1
2.2.1.5 Instrument, equipment and supplies available	2.2.1.4.2	Appropriate IEC/BCC materials on vaccine, schedule and child growth and nutrition are available in clinic			1
	2.2.1.5	Immunization and growth monitoring instrument, equipment and supplies are available (See Annex 2.2.1a Immunization and growth monitoring At the end of this standard)			3
2.2.1.6 Physical facilities	2.2.1.6.1	Adequate rooms and space for health worker and patients are available with at least one working table, chair for health worker and two patients' chair			1
	2.2.1.6.2	Light and ventilation are adequately maintained.			1
2.2.1.7 Recording and reporting	2.2.1.7.1	Patient's card (Health card, growth chart) and register available and services recorded			1
	2.2.1.7.2	An adverse event following immunization, complication, severe under-nutrition and referral to other sites recorded and reported			1
2.2.1.8 Infection prevention	2.2.1.8.1	Masks and gloves are available and used			1
	2.2.1.8.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.2.1.8.3	Hand-washing facility with running water and soap is available for practitioners.			1
	2.2.1.8.4	Needle cutter is used.			1
	2.2.1.8.5	Chlorine solution is available and utilized.			1
Standard 2.2.1		Total Score			17
		Total Percentage (Total Score/ 17 x100)			

Annex 2.2.1a Instruments, equipment and Supplies for Immunization and Growth Monitoring

SN	Name	Required Quantity	Self	Joint
1	Weighing scale (Infantometer and Secca Scale)	At least one each		
2	Stadiometer	At least one		
3	MUAC tape	2		
4	Cold chain box set	At least one set		
5	Immunization as per national protocol	At least two vial/ampule each		
6	Different size syringe for immunization (1,2,3,5,10 ml)	At least 10 each		
7	Cotton in swab container	As per needed		
8	Container for clean water	As per needed		
Total score				
Percentage = Total score/ 8 x 100				

Each row gets a score of 1 in each row if is available otherwise 0

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.2.1.5	

Area	Code				
Special Clinics	2.2	Verification			
Family planning Clinic	2.2.2				
Components		Standards	Self	Joint	Max Score
2.2.2.1 Time for patients	2.2.2.1	Family planning service is available from 10 AM to 3 PM.			1
2.2.2.2 Space	2.2.2.2	A separate area dedicated for FP counseling and services			1
2.2.2.3 Staffing	2.2.2.3	Adequate numbers of healthcare workers are available (at least 2 mid-level health workers are assigned)			1
2.2.2.4 Maintaining patient privacy	2.2.2.4	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients).			1
2.2.2.5 Patient counseling	2.2.2.5.1	Counseling is provided to users for family planning methods			1
	2.2.2.5.2	Appropriate IEC/BCC materials on family planning including DMT tool used for counseling			1
2.2.2.6 Supplies available	2.2.2.6	Supplies for Family Planning Services available (See Annex 2.2.2a Supplies for FP services At the end of this standard)			3
2.2.2.7 Equipment and supplies available	2.2.2.7	Functional BP set, stethoscope, thermometer, and weighing scale available			1
2.2.2.8 Physical facilities	2.2.2.8.1	Adequate rooms and space for health worker and patients are available with at least one working table, chair for health worker and two patients' chair and one examination bed			1
	2.2.2.8.2	Light and ventilation are adequately maintained.			1
2.2.2.9 Recording and reporting	2.2.2.9.1	Patient's health card and register available and services recorded			1
	2.2.2.9.2	FP related complication, defaulter and contraceptive failure are recorded and reported			1
2.2.2.10 Infection prevention	2.2.2.10.1	Masks and gloves are available and used			1
	2.2.2.10.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.2.2.10.3	Hand-washing facility with running water and soap is available for practitioners.			1
	2.2.2.10.4	Needle cutter is used.			1
	2.2.2.10.5	Chlorine solution is available and utilized.			1
Standard 2.2.2	Total Score				19
	Total Percentage (Total Score/ 19 x100)				

Annex 2.2.2a Supplies for Family Planning

SN	Name	Required Quantity	Self	Joint
1.	Condoms	As per needed		
2.	Combined oral contraceptive pills	As per needed		
3.	IUD	As per needed		
4.	IUD Insertion and removal Set	At least 2		
5.	Implants	As per needed		
6.	Implants insertion and removal set	At least 2		
7.	Injection Depo provera	As per needed		
8.	Emergency contraceptive pills	As per need		
9.	Sterile surgical gloves (different sizes)	2 each of different size		
Total score				
Percentage = Total score/ 9 x 100				

Each row gets a score of 1 in each row if is available otherwise 0

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.2.2.6	

Area	Code	Verification			
ATT, ART clinic	2.2.3				
Components		Standards	Self	Joint	Max Score
2.2.3.1 Time for patients	2.2.3.1	Clinic is open from 10 AM to 3 PM.			1
2.2.3.2 Staffing	2.2.3.2	Adequate numbers of healthcare workers are available in OPD (at least 2 mid-level health workers are assigned)			1
2.2.3.3 Maintaining patient privacy	2.2.3.3	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients).			1
2.2.3.4 Patient counseling	2.2.3.4.1	Counseling is provided to patients about the type of treatment being given and its consequences.			1
2.2.3.5 Medicine available	2.2.3.4.2	Appropriate IEC/BCC materials on TB, HIV/AIDS (posters, leaflets) are available in the OPD waiting area.			1
	2.2.3.5	Medicines for TB, HIV/AIDS as per government treatment protocol available in OPD			1
2.2.3.6 Equipment and supplies available	2.2.3.6	OPD has functional BP set, stethoscope, thermometer and weighing scale			1
2.2.3.7 Physical facilities	2.2.3.7.1	Adequate rooms and space for health worker and patients are available with at least one working table, chair for health worker and two patients' chair			1
	2.2.3.7.2	Light and ventilation are adequately maintained.			1
2.2.3.8 Facilities for patients	2.2.3.8.1	Safe drinking water with mug or glass is available for taking medicine			1
	2.2.3.8.2	Hand-washing facilities are available for patients.			1
2.2.3.9 Recording and reporting	2.2.3.9.1	Patient's card (TB, ART) and register available and services recorded			1
	2.2.3.9.2	Drug resistance, complication and referral to other sites recorded and reported			1
2.2.3.10 Infection prevention	2.2.3.10.1	Masks and gloves are available and used			1
	2.2.3.10.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.2.3.10.3	Hand-washing facility with running water and soap is available for practitioners.			1
	2.2.3.10.4	Needle cutter is used			1
	2.2.3.10.5	Chlorine solution is available and utilized.			1
Standard 2.2.3	Total Score				18
	Total Percentage (Total Score/ 18 x100)				

Area	Code				
Special Clinics	2.2	Verification			
Safe Abortion Services	2.2.4				
Components		Standards	Self	Joint	Max Score
2.2.4.1 Time for patients	2.2.4.1	Safe abortion services is available from 10 AM to 3 PM.			1
2.2.4.2 Space	2.2.4.2	A separate area dedicated for Safe Abortion counseling and services, area is washable and has separate instrument processing space for decontamination			1
2.2.4.3 Staffing	2.2.4.3.1	At least one medical officer or gynecologist trained and certified in first trimester SAS is available			1
	2.2.4.3.2	For surgical abortion, at least one medical officer or gynecologist or MDGP trained and certified in second trimester SAS is available			1
2.2.4.4 Maintaining patient privacy	2.2.4.4	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients).			1
2.2.4.5 Patient counseling	2.2.4.5.1	Counseling is provided to users on Safe Abortion Services, complication and family planning post abortion along with clear discharge instructions			1
	2.2.4.5.2	Appropriate IEC/BCC materials on safe abortion services and post abortion family planning services –Medical Abortion Chart, CAC counseling flip chart, second trimester counseling flipchart, DMT Tools used for counseling			1
2.2.4.6 WHO Safe Surgery Checklist available	2.2.4.6	WHO safe surgery checklist is available and used for safe abortion services including written informed consent			1
2.2.4.7 Instruments, equipments and Supplies available	2.2.4.7.1	Instruments, equipments and supplies for Safe Abortion Services available (See Annex 2.2.2a Instruments, equipments and supplies for Safe Abortion services At the end of this standard)			3
	2.2.4.7.2	Functional BP set, stethoscope, thermometer, and weighing scale available			1
2.2.4.8 Physical facilities	2.2.4.8.1	Adequate rooms and space for health worker and patients are available with at least one working table, chair for health worker and two patients' chair, one examination bed, one procedure table and one foot step			1
	2.2.4.8.2	Light and ventilation are adequately maintained.			1

2.2.4.9 Recording, reporting and histological examination	2.2.4.9.1	Patient's health card and register available and services recorded along with complications if any			1
	2.2.4.9.2	Product of conception is sent for histopathological examination and reports followed up			1
2.2.4.10 Infection prevention	2.2.4.10.1	Utility Gloves, Gumboot, Mask, Plastic Apron, Caps are available and used			1
	2.2.4.10.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.2.4.10.3	Hand-washing facility with running water and soap is available for practitioners.			1
	2.2.4.10.4	Needle cutter is used.			1
	2.2.4.10.5	Chlorine solution is available and utilized.			1
Standard 2.2.4		Total Score			21
		Total Percentage (Total Score/ 21 x100)			

Annex 2.2.4a Instruments, equipments and supplies for Safe Abortion services

SN	Name	Required Quantity	Self	Joint
1.	Shelf for storage	At least 1		
2.	Reliable Light source (goose neck light)	At least 1		
3.	Oxygen concentrator/ Oxygen filled cylinder with flow meter and mask	At least 1 Set		
4.	Light view box with glass/ plastic container and sieve for POC check	At least 1 each		
5.	Intubation set adult	1 set		
6.	IV stand	At least 1		
7.	Surgical drum (2)	As per needed		
8.	Sterilized Chettle forceps with jar	At least 2		
9.	Bivalve Speculum (3 sized- small, medium and large)	At least 3 each		
10.	Stainless steel container with cover for storing instruments	At least 2		
11.	Cheate's forceps with jar	At least 2		
12.	Instrument trolley	At least 2		
13.	Abdominal drapes	As per need		
14.	MVA aspirator	At least 2		
15.	MVA cannula sizes 4-12	At least 2 each		
16.	MVA cannula number (14 & 16)	At least 2 each		
17.	MVA set	At least 2 Set		
18.	D&E set	At least 2 Set		
19.	Suture set with Long needle holder	At least 2		
20.	Combi-pack (Mifepristone and Misoprostol)			
21.	Misoprostol only to treat incomplete abortion			
22.	Antibiotics (Injection Metronidazole 500mg/100ml, Tab Azithromycin 500mg)	As per need		

23.	Uterotonics (Injection Oxytocin, Tablet Misoprotol, Injection ergometrine)	As per need		
24.	Injection Xylocaine 1% /2% without adrenaline	2 vail each		
25.	Injection Atropine	10 ampules		
26.	Injection Adrenaline	10 ampules		
27.	Injection Hydrocortisone	At least 3 vail		
28.	Injection Dexamethasone	At least 3 vail		
29.	Distilled Water (100ml)	At least 2 bottles		
30.	Gloves (disposable) for P/V examination	At least 2 box		
31.	Surgical gloves different size	At least 2 each		
32.	Betadine Solution	At least 1 bottle		
33.	Disposable syringes 2 ml, 5 ml, 10 ml, 20 ml	At least 5 each		
34.	ET tubes of different size	At least 2 of each size		
35.	IV fluids (Normal Saline 0.9%, Ringers; Lactate, Dextrose 5% Normal Saline 0.9%)	At least 5 each		
36.	IV Infusion set	At least 5		
37.	IV canula (18 Gz, 20Gz)	At least 2 each		
38.	Foley's catheter and Urobag,	At least 2 set		
39.	Sutures of different size	At least 5 each		
40.	Soft brush for cleaning equipments	At least 2		
41.	Bucket or Basin	2-3 each of different size		
42.	IP flex available for processing MVA aspirator and cannula	One		
Total score				
Percentage = Total score/ 42 x 100				

Each row gets a score of 1 in each row if is available otherwise 0

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.2.4.7.1	

Area	Code	Verification			
Emergency Service	2.3				
Components		Standards	Self	Joint	Max Score
2.3.1 Time for patients	2.3.1	Emergency room/ward is open 24 hours			1
2.3.2 Staffing (per shift in ER)	2.3.2.1	For 5-10 ER beds (Doctor: Nurse: Paramedics: Office Assistant = 1:1:1:1)			1
	2.3.2.2	The doctor, nurse and paramedics are trained in PTC, ETM, BLS and ACLS [1]training			1
2.3.3 Physical facilities	2.3.3.1	10% of the total hospital beds are allocated for ER of which 1% for red, 2% for yellow, 3% for green and 1 % for black color coded			1
	2.3.3.2	Adequate furniture and supplies (See Annex 2.3a Furniture and General Supplies for ER At the end of this standard)			3
	2.3.3.3	Light and ventilation are adequately maintained.			1
	2.3.3.4	Designated area for nursing station centrally placed in ER and all beds visible from nursing station			1
	2.3.3.5	Space allocated for duty room and changing room separate for male and female staffs with facilities of tea room			1
	2.3.3.6	Separate toilets for staffs at least one each-male, female and universal			1
	2.3.3.7	Separate land line/ mobile phone for emergency			1
2.3.4 Instruments/ equipment	2.3.4	Instruments and equipment to carry out the ER works are available and functioning (See Annex 2.3b ER Instruments and Equipment At the end of this standard)			3
2.3.5 Medicines and supplies	2.3.5.1	Medicines and supplies to carry out the ER works are available (See Annex 2.3c Medicines and Supplies for ER At the end of this standard)			3
	2.3.5.2	Emergency stock of medicines and supplies for mass casualty management			1
2.3.6 Triage	2.3.6.1	Hospital maintains a triage system in the ER with 24 hours triage service			1
	2.3.6.2	Triage category board and information to the public (Red, Yellow, Green Board) (descriptive flex)			1
2.3.7 Emergency protocol in place	2.3.7.1	In red area one of the bed is Resuscitation bed with availability of emergency crash trolley with emergency lifesaving drugs, cardiac monitor, non-invasive ventilator, oxygen concentrator			1
	2.3.7.2	Development of 001 or Blue code call system whenever any patient visited in Emergency collapses and need immediate and urgent emergency care			1

	2.3.7.3	Emergency disposition of the patient either in observation ward or definite care ward or referral or discharge within 3-6 hours			1
	2.3.7.4	Critical patient transfer from emergency to OT or Inter-hospital transfer is accompanied at least by paramedics or Nurse for handover of patient			1
2.3.8 Maintaining patient privacy	2.3.8	Appropriate methods have been used to ensure patient privacy (separate rooms, curtains hung)			1
2.3.9 Security	2.3.9	The hospital has maintained security system for ER for 24 hours with CCTV coverage			1
2.3.10 Mass casualty/ disaster preparedness	2.3.10.1	The hospital has mass casualty management protocol, and all staffs are updated with well labelled direction, prepositioning clipboards			1
	2.3.10.2	Disaster area identified with adequate furniture to carry out Triage in case of disaster			1
	2.3.10.3	Hospital carried out at least one mock preparedness once a year			1
	2.3.10.4	There must be disaster store in ER with required medicines, supplies and equipment (See Annex 2.3d List of medicine, supplies and equipment for Disaster Store At the end of this standard)			3
2.3.11 Duty rosters	2.3.11	Duty rosters of the ER are developed regularly and available in appropriate location			1
2.3.12 Maintaining inventory	2.3.12	Separate inventories for emergency lifesaving drugs/equipment and narcotics are maintained			1
2.3.13 Securing narcotic drugs	2.3.13	Narcotic drugs are kept separately and securely with mandatory recording system			1
2.3.14 Facilities for patients	2.3.14.1	Safe drinking water is available 24 hours			1
	2.3.14.2	Hand-washing facility with running water and liquid soap			1
	2.3.14.3	There are at least 3 toilets with hand-washing facilities (1 for males, 1 for females, and 1 universal) for every 10 ER beds and for additional beds increase proportionately for male and female			1
2.3.15 Decontamination area	2.3.15	Decontamination area specified and practiced			1
2.3.16 Infection prevention	2.3.16.1	Staff wear mask and gloves at work			1
	2.3.16.2	There are clearly labelled colored bins for waste segregation and disposal as per HCWM Guideline 2014 (MoHP)			1
	2.3.16.3	Needle cutter is used			1
	2.3.16.4	Chlorine solution is available and utilized for decontamination			1
Standard 2.3		Total Score			44
		Total Percentage (Total Score/ 46 x100)			

Annex 2.3a Furniture and General Supplies for ER

S.No.	Furniture and General Supplies	Required Quantity	Self	Joint
1.	Wheel chair	2 for every 5 ER beds		
2.	Trolley	1 for every 5 ER beds		
3.	Stretcher	1 for every 5 ER beds		
	Information board	1		
5.	Foot Step	2 for every 5 ER beds		
	Working Table/Station with 2 chairs	1		
	Stool (for visitor) each bed	1		
8.	Medicine Rack	1		
9.	Supplies Rack	1		
10.	Waste Bins (color coded and labelled as per HCWM guideline 2014 (MoHP))	1 set for every 5 ER beds		
11.	Poisoning Chart	1		
12.	Telephone set/Mobile	1		
13.	Reference Books with cupboard	1		
14.	Cup Board for narcotics	1		
15.	Screen	As per need		
16.	Cart/Trolley with medicines for emergency procedures	1		
17.	IV stand	At least one per bed		
18.	Bed Pan	2 for every 5 bed		
19.	Urinal	2 for every 5 bed		
Total Score				
Total Percentage = Total Score/19 X 100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.3.3.2	

Annex 2.3b ER Equipment and Instrument

SN	Equipment /Instruments	Required No.	Self	Joint
1.	ECG machine (12 Leads)	1		
2.	Defibrillator	1		
3.	Foot / Electric Suction Machine	2		
4.	Portable ventilator/ Non-invasive ventilator	1		
5.	Positive Airway Pressure machine with accessories	1		
6.	Nebulizer set	1		
7.	Cardiac monitors with non-invasive BP cuffs	1 (For 5 beds)		
8.	BP set and Stethoscope (each treatment room)	2		
9.	Pulse oximeter	1		
10.	Glucometer with strips	1		
11.	Duck Speculum	2		
12.	Protoscope	2		
13.	Otoscope set	1		
14.	Nasal Speculum	1		
15.	Laryngoscope with batteries and blades	2		
16.	ET tubes of different sizes	At least 2 each		
17.	Torch Light	2		
18.	Geudel Airway	2		
19.	Ambu Bag (Adult and Pediatric)	2		
20.	Bougie	2		
21.	Endotracheal tube of different sizes	6		
22.	Different size mask	6		
23.	Laryngeal mask airway (Adult and Pediatric)	1 each		
24.	Oxygen tubes and masks	10 each		
25.	Suture Set	4		
26.	Catheterization set	2		
27.	Dressing set	2		
28.	Water sealed drainage set	1		
29.	N/G tube Aspiration set	1		
30.	Ear Irrigation Set	1		
31.	Cervical collar	4		
32.	Spinal backboard	1		
33.	Splints	3		
34.	Arm Slings	3		
35.	Portable Light	2		
Total Score				
Total Percentage = Total Score/35X 100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.3.4	

Annex 2.3c Medicines and supplies for ER (required number proportionate to ER beds 1:2)

SN	Name	Self	Joint
1.	Atropine Injection		
2.	Adrenaline Injection		
3.	Xylocaine 1% and 2% Injections with Adrenaline		
4.	Xylocaine 1% and 2 % Injections without Adrenaline		
5.	Xylocaine Gel		
6.	Diclofenac Injection		
7.	Hyoscine Butylbromide Injection		
8.	Diazepam injection		
9.	Morphine Injection / Pethidine Injection		
10.	Hydrocortisone Injection		
11.	Antihistamine Injection		
12.	Dexamethasone Injection		
13.	Ranitidine/Omeperazole Injection		
14.	Frusemide Injection		
15.	Dopamine injection		
16.	Noradrenaline injection		
17.	Digoxin injection		
18.	Verapamil injection		
19.	Amidarone injection		
20.	Glyceryl trinitrate injection/ tab		
21.	Labetolol injection		
22.	Magnesium Sulphate injection (loading dose)		
23.	Sodium bicarbonate injection		
24.	Calcium Gluconate injection		
25.	Ceftriaxone Injection		
26.	Metronidazole Injection		
27.	Charcoal Power		
28.	Normal Saline Injection		
29.	Ringers' Lactate Injection		
30.	Dextrose 5% Normal Saline Injection		
31.	Dextrose 5% Injection		
32.	Dextrose 25%/50% Injection (ampoule)		
33.	IV Infusion set (Adult/Pediatric)		
34.	IV Canula (16, 18, 20, 22, 24, 26 Gz)		
35.	Foley's Catheter (different French)		
36.	Disposable syringes (1 ml, 3 ml, 5 ml, 10 ml, 20 ml, 50 ml)		
37.	Disposable Gloves (Size- 6, 6.5, 7, 7.5)		
38.	Distilled Water		
39.	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)		
Total Score			
Total Percentage = Total Score/39 X100			

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.3.5.1	

Annex 2.3d List of equipment, instrument, medicine and supplies for Disaster Store

S.No.	Equipment and Instruments	Required Number	Self	Joint
1.	Stretcher/ trolley	5		
2.	Spinal boards	5		
3.	Wheel chairs	5		
4.	Medicine trolley	2		
5.	Portable suction machine	2		
6.	Nebulizer machine	2		
7.	Fluid warmer	2		
8.	Bp instrument	10		
9.	Stethoscope	10		
10.	Saturation probe	5		
11.	Thermometer	5		
12.	Suture sets	5		
13.	Dressing sets	5		
MEDICINES				
14.	Tetanus Toxoid Injection	50		
15.	Diclofenac Paracetamol Injection	50		
16.	Tramadol Injection	50		
17.	Ondensterone Injection	50		
18.	Cefazoline Injection	20		
19.	Metronidazole Injection	20		
20.	Ketorolac Injection	20		
21.	Transemic Acetate Injection	20		
22.	Atropine Injection	50		
23.	Adrenaline Injection	50		
24.	Midazolam Injection	20		
25.	Xylocaine 2% Injection	20		
26.	Vitamin B-complex Injection	20		
27.	Succinylcholine Injection	20		
28.	Normal Saline /Ringers' Lactate/ Dextrose 5% Normal Saline Injection	20 each		
29.	Hemaecel Injection	5		
Intubation articles				
30.	Ambu bag (adult,paed.)	10		

31.	Resuscitation masks (adult, pediatric, newborn)	10 each		
32.	Endo-tracheal(ET) tubes different size	5 each		
33.	Airways	5		
34.	Laryngoscope	5		
35.	ECG Leads	30		
SUPPLIES				
36.	Triage tags	100		
37.	Extra I/V stand	20		
38.	Portable oxygen cylinder	5		
39.	Plastic aprons	10		
40.	Gowns	10		
41.	Extra Mattress	50		
42.	Blankets	50		
43.	Screens	3		
44.	Scissors	5		
45.	Splints	15		
46.	Cervical collar(hard/soft)	20		
47.	Arm slings	20		
48.	Pelvic binder	5		
49.	Bandages	50		
50.	Crepe bandage	20		
51.	Elastoplast	20		
52.	Leuckoplast	20		
53.	Nebulizer kit set	2		
54.	Oxygen masks	10		
55.	Pressure Monitoring (PMO) line (for infusion)	10		
56.	Chest tube set (No.28,32)	10		
57.	Drainage bag	20		
58.	Foleys catheter/ urobag	20 each		
59.	Surgical gloves Different Size	30 of each size		
60.	Examination gloves	2 boxes		
61.	Utility gloves	10		
62.	Betadine /spirit	10		
63.	IVCannulas of all size, IV set and Buret Set	20 each		
64.	Syringes of different size (3ml,5ml, and 10ml) / (20ml, 50ml)	50 each/ 20 each		
65.	Suction tubes different size	5 each		
66.	Yanker suction	1		
67.	Sterile gauze, cotton, dressing pads.	1 medium size steel drum each		
68.	Hand Sanitizer	20		
69.	Torch lights	5		
70.	Note book	10		
71.	Ball pens	10		
Total score				
Total percentage = Total Score/ 71 x100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.3.10.4	

Area	Code				
Dressing and injections, Routine procedures (DIRP)	2.4	Verification			
Components		Standards	Self	Joint	Max Score
2.4.1 Working space	2.4.1	A separate room for dressing and injection service is available			1
2.4.2 Furniture & general supplies	2.4.2	Adequate furniture and general supplies are available (See Annex 2.4a Furniture and General Supplies for ER Minor OT At the end of this standard).			3
2.4.3 Services available	2.4.3	Minimum dressing services and routine procedures are available (See Annex 2.4b List of Minimum Services from ER Minor OT At the end of this standard).			3
2.4.4 Disposable supplies	2.4.4	Medicines and supplies needed for surgical procedures available (See Annex 2.4c Medicine and Supplies for Minor OT At the end of this standard).			3
2.4.5 Sterile supplies	2.4.5.1	Sterile supply for Minor OT are available (See Annex 2.4d Sterile Supplies for Minor OT At the end of this standard).			3
	2.4.5.2	Separate containers for sterile gauze and cotton balls are available.			1
2.4.6 Infection prevention and waste disposal	2.4.6.1	Mask, gloves, plastic apron, boots and goggles are available and used whenever required.			1
	2.4.6.2	At least three color coded waste bins as per HCWM guideline are available and used			1
	2.4.6.3	Supplies trolley with needle cutter is available and used			1
	2.4.6.4	Hand-washing facility with running water and soap			1
	2.4.6.5	Chlorine solution is available and utilized for decontamination			1
2.4.7 Documentation	2.4.7	Proper records of all procedures are kept and reported.			1
Standard 2.4		Total Score			20
		Total Percentage (Total Score/ 27 x100)			

Annex 2.4a Furniture, Equipment, Instruments and Supplies for DIRP

SN	General items	Required No.	Self	Joint
1.	Treatment beds	1		
2.	Working Table	1		
3.	Chairs	1		
4.	Bowl with Chlorines Solution (set)	1		
5.	Bucket with soap water	1		
6.	Needle cutter	1		
7.	Flash Light	1		
8.	Portable Lamp	1		
9.	Wall clock	1		
Total Score				
Total percentage= Total/ 9 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.4.2	

Annex 2.4b List of Minimum Services for DIRP

S.No.	Services/ Procedure Available	Self	Joint
Minor			
1.	Simple dressing change		
2.	Skin suture removal		
3.	Splinting		
4.	Multiple wound dressing		
5.	Large wounds requiring padding		
6.	Dressing change under local Anesthesia		
7.	Incision and drainage		
8.	Catheterization (insertion and removal)		
Total score			
Total Percentage= Total score/8 x 100			

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.4.3	

Annex 2.4c Medicines and supplies for DIRP

SN	Supplies	Required No.	Self	Joint
1.	Lignocaine Hydrochloride 1%	2-3		
2.	Lignocaine Hydrochloride 2%	2-3		
3.	Lignocaine Hydrochloride 2% with adrenaline	2-3		
4.	Povidone Iodine Solution	2-3		
5.	Hydrogen Peroxide Solution	1		
6.	Cottone Bandage	As per the need		
7.	Silk 2-0	As per the need		
8.	Polypropylene (Prolene) 2-0, 3-0, 4-0	As per the need (2-3)		
9.	Catheter of different size	2 of each size		
10.	Sprit	2		
11.	Disposable Syringes 1 ml, 3 ml, 5 ml, 10 ml	As per the need		
12.	Sterile gloves different size	As per the need		
13.	Disposable gloves	As per the need		
14.	Masks	As per the need		
Total Score				
Total Percentage = Total Score/14 X 100				

Each row gets a score of 1 if all the required number is available otherwise 0

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.4.4	

Annex 2.4d Sterile Supplies for DIRP

S.No.	General Items	Required number	Self	Joint
1.	Sterile Dressing Set (must be in wrapper)	5-10		
2.	Sterile Suture Sets (must be in wrapper)	2-3		
3.	Sterile suture removal set (must be in wrapper)	2-3		
4.	Sterile Catheter set (must be in wrapper)	2-3		
5.	Sterile Cheatle forceps with jar	2		
6.	Sterile cotton balls in steel drum	1 drum		
7.	Sterile gauge piece in steel drum	1 drum		
8.	Sterile gauge pads	1 drum		
9.	Sterile extra instruments in separate tray	as per need		
Total Score				
Total Percentage= Total Score/9x100				

Each row gets a score of 1 if all the required number is available otherwise 0

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.4.5.1	

Area	Code	Verification			
Components		Standards	Self	Joint	Max Score
Hospital Pharmacy Service	2.5				
2.5.1 Pharmacy unit available	2.5.1	Hospital has designated pharmacy department			1
2.5.2 Governance committee for hospital pharmacy services	2.5.2.	Governance committee for hospital are formed based on hospital pharmacy-service guideline:			
	2.5.2.1	Drug and Therapeutic committee (DTC)			1
	2.5.2.2	Hospital pharmacy operation committee			1
2.5.3 Hospital formulary Heading: Availability of medicines and supplies	2.5.3.1	Hospital has prepared formulary list based on Nepalese National Formulary (NNF) approved by DTC			1
	2.5.3.2	Hospital formulary includes all medicines and supplies as per services provided by hospital			1
	2.5.3.3	Hospital has all ,medicines and supplies available as per approved hospital formulary list			1
2.5.4 Good procurement practice	2.5.4.1	Annual procurement plan for medicines and supplies for pharmacy services is available			1
	2.5.4.2	Procurement is done based on public procurement guideline			1
	2.5.4.3	Product specification for each medicine and related supplies of approved formulary list is available			1
	2.5.4.4	Technical criteria on quality assurance of procured medicines is included in standard bidding document			1
	2.5.4.5	Certificate of analysis (CoA) from manufacturer of each batch of procured medicine is available			1
	2.5.4.6	Selling price of the drugs does not exceed 20% of the procurement price			1
2.5.5 Pharmacy service hours	2.5.5	The pharmacy is open 24x7			1
2.5.6 Staffing as per hospital pharmacy service guideline 2072	2.5.6.1	Pharmacy department is led by at least one clinical pharmacist			1
	2.5.6.2	Pharmacy has at least 3 pharmacist, 6 assistant pharmacist and 2 office assistants			1
	2.5.6.3	Duty roster of pharmacy to cover 24 hours service is prepared and visibly placed			1
2.5.7 Display of list of free medicines	2.5.7	The list of free medicines is displayed in a clearly visible place.			1
2.5.8 Availability of medicines for specific programs	2.5.8	All of the required medicines and supplies for specific programs are available in pharmacy (less than 50%= 0; 50-70 =1, 70-85=2 85-100= 3)			3

2.5.9 Inpatient pharmacy services available	2.5.9	Hospital pharmacy directly supplies inpatient medicine and supplies to wards and OT			1
2.5.10 Electronic record keeping	2.5.10	Pharmacy uses computer with software for inventory management and medicine use			1
2.5.11 Pharmacy stock available	2.5.11	Number of items of hospital formulary stocked in pharmacy (less than 50%= 0; 50-70 =1, 70-85=2 85-100= 3)			3
2.5.12 Display and storage of medicines	2.5.12.1	All the medicines and supplies are displayed in clean racks following either alphabetical orders and generic names or grouping as use			1
	2.5.12.2	Temperature of pharmacy is monitored and recorded and is maintained in range of (25+/- 2°C)			1
	2.5.12.3	Functional freeze +/-4°C for thermolabile medicine			1
2.5.13 Information to patients	2.5.13.1	Pharmacy department has its allocated separate information and counseling unit with reference books or e-books			1
	2.5.13.2	Information regarding the medicines is provided to the patients.			1
	2.5.13.3	IEC materials (posters, leaflets, national hospital formulary) about the appropriate use for medicines are available in the pharmacy area.			1
2.5.14 Generic prescription	2.5.14	Hospital has pre-printed list of medicines for generic prescription available			1
2.5.15 Dispensing medicines	2.5.15.1	Medicine is dispensed using electronic billing with barcode system			1
	2.5.15.2	Each medicine is given with written instructions on how to take			1
2.5.16 First In First Out (FIFO)	2.5.16	FIFO system is maintained using standard stock book/cards.			1
2.5.17 Pharmacy Inventory	2.5.17	Every month, all medicines and supplies are counted, out- of-date discarded, and tallied with the medical store.			1
2.5.18 Drug utilization review and quantification of data	2.5.18.1	Pharmacy department operates pharmacovigilance activities and adverse drug reaction (ADR) Reporting			1
	2.5.18.2	Pharmacy department conducts studies on drug utilization and quantification			1
2.5.19 Pharmaceutical waste disposal	2.5.19	Pharmaceutical waste (expired or unused pharmaceutical products, spilled contaminated pharmaceutical products surplus drugs, vaccines or sera, etc) management is done based on HCWM guideline 2014 (MoHP) or returned to the supplier on time			1
Standard 2.5	Total Score				39
	Total Percentage (Total Score/39 x100)				

Area	Code	Verification			
Inpatient Service[1]	2.6				
Components		Standards	Self	Joint	Max Score
2.6.1 Space for work	2.6.1.1	Separate space for nursing station is available in each ward (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.1.2	Separate changing room available for male and female staffs (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.1.3	Separate store room is available (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.2 Furniture and supplies available and functioning	2.6.2	Furniture and supplies to carry out the inpatient services are available and functioning			
	2.6.2.1	Medicine Ward (See Annex 2.6a Furniture and supplies for inpatient wards At the end of this standard)			3
	2.6.2.2	Surgery Ward (See Annex 2.6a Furniture and supplies for inpatient wards At the end of this standard)			3
	2.6.2.3.1	Pediatrics Ward (See Annex 2.6a Furniture and supplies for inpatient wards At the end of this standard)			3
	2.6.2.3.2	Separate area dedicated for play room with play materials for different pediatric age groups			1
2.6.3 Medicine and supplies available	2.6.3	Medicine and supplies to carry out the inpatient services are available in wards			
	2.6.3.1	Medicine Ward (See Annex 2.6b medicine and supplies for inpatient wards At the end of this standard)			3
	2.6.3.2	Surgery Ward (See Annex 2.6b medicine and supplies for inpatient wards At the end of this standard)			3
	2.6.3.3	Pediatrics Ward (See Annex 2.6b medicine and supplies for inpatient wards At the end of this standard)			3
2.6.4 Nursing station	2.6.4	There is a set of at least one table and two chairs in the nursing station and shelves for storage of charts and inpatient forms and formats (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.5 Nursing staff and support for inpatient service	2.6.5	Adequate numbers of nursing staff are available in ward per shift (nurse patient ratio 1:6 in general ward, 1:4 in pediatric ward, 1:2 in high dependency or intermediate ward or post-operative ward or burn/plastic) and at least one trained office assistant/ward attendant per shift in each ward (See Checklist 2.6 At the end of this standard for scoring)			3

2.6.6 Duty rosters	2.6.6	Duty roster of doctors, nurses, paramedics and support staffs kept visibly in nursing station (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.7 Communication	2.6.7	Telephone facility is available with list of important contact numbers and hospital codes visibly kept (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.8 Emergency management of inpatients	2.6.8.1	All staffs in wards are trained for BLS and oriented about emergency code 001 or blue code (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.8.2	At least one emergency trolley with emergency medicine available in ward			
	2.6.8.2.1	Medicine Ward (See Annex 2.6c Emergency Trolley for Inpatient At the end of this standard)			3
	2.6.8.2.2	Surgery Ward (See Annex 2.6c Emergency Trolley for Inpatient At the end of this standard)			3
	2.6.8.2.3	Pediatrics Ward (See Annex 2.6c Emergency Trolley for Inpatient At the end of this standard)			3
	2.6.8.3	At least one defibrillator in immediate accessible area (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.9 Safe Abortion Service (SAS) available	2.6.9	Safe abortion service (SAS) is available as per National SAS Implementation Guideline			1
2.6.10 Physical facilities for patient	2.6.10.1	Separate area designated for admission of male and female inpatients in wards (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.10.2	There are adequate separate toilets for male and female patients in each ward (1 for 6 female bed and 1 for 8 male beds) and also adequate wash basins/sinks for the patients. (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.10.3	Safe drinking water is available 24 hours for inpatients(See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.10.4	Hours/ Time allocated for visitors to meet the inpatients and controlled traffic to prevent cross infection (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.10.5	Separate space is available for patients' visitors (KuruwaGhar).			1
2.6.11 Communication	2.6.11	Basic information regarding admitted patients is displayed in a separate board (See Checklist 2.6 At the end of this standard for scoring)			3

2.6.12 IEC/BCC Materials	2.6.12	Appropriate IEC/BCC materials (posters, leaflets etc.) are available in the inpatient ward with focus on infection prevention (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.13 Recording and reporting	2.6.13	Admission and discharge registers are available and are being filled completely (HMIS 8.1 and 8.2) (See Checklist 2.6 At the end of this standard for scoring)			3
2.6.14 Infection prevention	2.6.14.1	PPE[2] are available and used whenever required (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.14.2	Each ward has hand sanitizer in visible place for health workers to use before and after touching patients (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.14.3	There are well labelled color-coded bins for waste segregation and disposal as per HCWM[3] guideline 2014 (MoHP) (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.14.4	Hand-washing facility with running water and liquid soap is available and being practiced (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.14.5	Needle cutter is used (See Checklist 2.6 At the end of this standard for scoring)			3
	2.6.14.6	Chlorine solution is available and utilized for decontamination (See Checklist 2.6 At the end of this standard for scoring)			3
Standard 2.6		Total Score			96
		Total Percentage (Total Score/ 96x100)			

Checklist 2.6 Inpatient Services								
(1= Medicine Ward 2= Surgery ward 3= Pediatrics Ward 4= Orthopedics ward 5=Psychiatry Ward 6= ENT ward 7= PNC and Gynecology Ward, 8= Geriatrics Ward)								
Code	Service Standards	1	2	3	Total Score	Percentage	Scoring	Direction to Use
2.6.1.1	Separate space for nursing station is available in each ward							Go to Standard 2.6.1.2
2.6.1.2	Separate changing room available for male and female staffs							Go to Standard 2.6.1.3
2.6.1.3	Separate store room is available							Go to Standard 2.6.2
2.6.4	There is a set of at least one table and two chairs in the nursing station and shelves for storage of charts and inpatient forms and formats							Go to Standard 2.6.5
2.6.5	Adequate numbers of nursing staff are available in ward per shift (nurse patient ratio 1:6 in general ward) and at least one trained office assistant/ward attendant per shift in each ward							Go to Standard 2.6.6
2.6.6	Duty roster of doctors, nurses, paramedics and support staffs kept visibly in nursing station							Go to Standard 2.6.7
2.6.7	Telephone facility is available with list of important contact numbers and hospital codes visibly kept							Go to Standard 2.6.8
2.6.8.1	All staffs in wards are trained for BLCS and oriented about emergency code 001 or blue code							Go to Standard 2.6.8.2
2.6.8.3	At least one defibrillator in immediate accessible area							Go to Standard 2.6.9
2.6.10.1	Separate area designated for admission of male and female inpatients in ward							Go to Standard 2.6.10.2
2.6.10.2	There are adequate separate toilets for male and female patients in each ward (1 for 6 female bed and 1 for 8 male beds)							Go to Standard 2.6.10.3
2.6.10.3	Safe drinking water is available 24 hours for inpatients							Go to Standard 2.6.10.4
2.6.10.4	Hours/ Time allocated for visitors to meet the inpatients and followed accordingly							Go to Standard 2.6.10.6
2.6.10.5	Separate space is available for patients' visitors (KuruwaGhar).							Go to Standard 2.6.11

2.6.11	Basic information regarding admitted patients is displayed in a separate board							Go to Standard 2.6.11.2
2.6.12	Appropriate IEC/BCC materials (posters, leaflets etc.) are available in the inpatient ward with focus on infection prevention							Go to Standard 2.6.13
2.6.13	Admission and discharge registers are available and are being filled completely (HMIS 8.1 and 8.2)							Go to Standard 2.6.14
2.6.14.1	PPE are available and used whenever required							Go to Standard 2.6.14.2
2.6.14.2	Each ward has hand sanitizer in visible place for health workers to use before and after touching patients							Go to Standard 2.6.14.3
2.6.14.3	There are well labelled color-coded bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)							Go to Standard 2.6.14.4
2.6.14.4	Hand-washing facility with running water and liquid soap is available and being practiced							Go to Standard 2.6.14.5
2.6.14.5	Needle cutter is used							Go to Standard 2.6.14.6
2.6.14.6	Chlorine solution is available and utilized for decontamination							Score Standard 2.6

Each row gets a score of 1 if available otherwise 0.

Total Percentage = Total Score/ No of wards (8) x100

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3

Plot the scoring based on the scoring chart and fill in the respective standards in tool and checklist

**Annex 2.6a Furniture and Supplies for inpatient wards
(1= Medicine Ward 2= Surgery ward 3= Pediatrics Ward)**

SN	General Items	Required Number	Score		
			1	2	3
1.	Working table	1-2			
2.	Chairs	2			
3.	Cup board	2			
4.	Shelves	1			
5.	Bed side table	per bed-1			
6.	Stools (for visitor)	per bed 1			

7.	Patient Beds (Metal bed / adjustable head/ mechanical ratchet, 3 X 6 ft.)	As per sanctioned bed			
8.	IV stand	As per bed			
9.	Medicine trolley	1			
10.	Dressing trolley	1			
11.	Wall Clock	2			
12.	Oxygen Concentrator	1 per 5 bed			
13.	Suction machine (foot/electric)	1			
14	Laryngoscope with blade and batteries	1			
15	Score-inflating bag air mask – adult, child, neonate size	1 set			
16	BP set and stethoscope (Non-Mercury)	2 sets			
17	Thermometer	3-5			
18	Baby and adult weighing scale	1 each			
19	Steel drum with sterile cotton	1			
20	Steel drum with sterile gauze and pad	1			
21	Scissors	2			
22	Cheatle Forceps with Jar	2			
23	Catheter set	2			
24	Dressing set	2			
25	Mattress with bedcover, pillow with pillow cover, blanket with cover	1 set per bed			
26	Torch with extra batteries and bulb	2-3			
27	Inpatient registreas per ICD code	As per need			
28	Inventory Records	As per need			
29	Cardex files	As per bed			
30	Waste bins color coded based on HCWM 2014 (MoHP)	1 set per room			
Total Score					
Total percentage= Total Score/Maximum Score x 100					

Each row gets a score of 1 if the mentioned medicines are available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.6.2.1	
Score for Standard 2.6.2.2	
Score for Standard 2.6.2.3.1	

**Annex 2.6b Medicine and Supplies for Inpatient Ward
(1= Medicine Ward 2= Surgery ward 3= Pediatrics Ward)**

S.No.	Medicine and supplies	Required No.	Score		
			1	2	3
1.	Normal Saline Injection	15			
2.	Dextrose 5% Injection	15			
3.	Ringers' Lactate Injection	15			
4.	Dextrose 5% Normal Saline Injection	15			
5.	Distilled Water	10			
6.	IV Infusion Set	10			
7.	IV Set	5			
8.	IV Canula (16,18,20,22,24,26Gz)	5 each			
9.	Gloves (Utility)	1 box			
10.	Mask, Cap, Gowns	As per need			
11.	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 30 ml, 50 ml	As per need			
Total Score					
Total Percentage = Total Score/ 11 x 100					

Each row gets a score of 1 if the mentioned medicines are available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.6.3.1	
Score for Standard 2.6.3.2	
Score for Standard 2.6.3.3	

**Annex 2.6c Medicines and Supplies for ER Trolley for Inpatient Ward
1= Medicine Ward, 2= Surgery Ward, 3= Pediatrics Ward**

SN	Name	Required No	Score		
			1	2	3
1.	Atropine Injection	10			
2.	Adrenaline Injection	3			
3.	Xylocaine 1% and 2% Injections with Adrenaline	2			
4.	Xylocaine 1% and 2 % Injections without Adrenaline	2			
5.	Xylocaine Gel	2			
6.	Diclofenac Injection	5			
7.	Hyoscine Butylbromide Injection	5			
8.	Diazepam injection	2			
9.	Morphine Injection / Pethidine Injection	2			

10.	Hydrocortisone Injection	4			
11.	Pheniramine	4			
12.	Dexamethasone Injection	4			
13.	Ranitidine/Omeperazole Injection	4			
14.	Frusemide Injection	5			
15.	Dopamine injection	2			
16.	Noradrenaline injection	2			
17.	Digoxin injection	2			
18.	Verapamil injection	2			
19.	Amidarone injection	2			
20.	Glyceryltrinitrate injection	1			
21.	Labetolol injection	1			
22.	Sodium bicarbonate injection	2			
23.	Ceftriaxone Injection	4			
24.	Metronidazole Injection	4			
25.	Dextrose 25%/50% ampoule	2			
26.	IV Infusion set (Adult/Pediatric)	2			
27.	IV Canula (16, 18, 20, 22, 24, 26 Gz)	2 each			
28.	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 20 ml, 50 ml	5 each			
29.	Disposable Gloves (Size 6, 6.5, 7, 7.5)	3 each			
30.	Distilled Water	3			
31.	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)	5			
			Score		
Total Total Percentage = Total Score/31 X100					

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.6.8.2.1	
Score for Standard 2.6.8.2.2	
Score for Standard 2.6.8.2.3	

Area	Code	Verification			
Maternity Services	2.7				
Delivery Services	2.7.1				
Components		Standards	Self	Joint	Max Score
2.7.1.1 Availability of delivery service	2.7.1.1.1	Separate pre-labor room/ labor room with privacy is available.			1
	2.7.1.1.2	Delivery service is available round the clock			1
	2.7.1.1.3	At least one delivery bed is assigned for every 15 maternity beds			1
	2.7.1.1.4	Labor room has adequate space for accommodating team of health workers during emergencies and easy access to OT			1
2.7.1.2 Trained Human Resource for Delivery Services	2.7.1.2.1	Hospital delivery service has adequate and trained staffing			
	2.7.1.2.1.1	Nurse: pregnant women ratio 1:2 in pre-labor; 2:1 per delivery table and 1:6 in post-natal ward			1
	2.7.1.2.1.2	At least one ASBA trained medical officer on duty			1
	2.7.1.2.1.3	At least one office assistant is available per shift			1
	2.7.1.2.2	All staffs- nursing, medical practitioner designated for delivery services are trained skilled birth attendants			1
2.7.1.3 Duty rosters	2.7.1.3	Duty roster to cover 24 hours shift is developed and placed in visible place			1
2.7.1.4 Appropriate use of partograph for decision making	2.7.1.4	Partograph available and being used rationally			1
2.7.1.5 KMC done for low birth weight babies	2.7.1.5	At least 2 KMC chairs available for providing KMC to premature and preterm babies			1
2.7.1.6 Birth certificate prepared and released	2.7.1.6	A formally signed standard birth certificate is issued.			1
2.7.1.7 Patient counseling	2.7.1.7.1	Pre-labor/ during labor patient and patients' family are adequately given counseling on labor, possible complications and written consent taken			1
	2.7.1.7.2	Health education on PNC, danger signs of mother and child, Immunization, nutrition, hygiene and family planning is given			1
	2.7.1.7.3	Postpartum family planning and breastfeeding- early, exclusive and extended counseling is done prior to discharge.			1
2.7.1.8 IEC/BCC [1] materials	2.7.1.8	Appropriate IEC/BCC materials (posters, leaflets etc.) on postnatal care, breastfeeding- early, exclusive and extended, nutrition, immunization are used and available for users			1

2.7.1.9 Furniture, equipment, instrument, medicine and supplies for labor room	2.7.1.9.1	Separate store room for delivery service related logistics			1
	2.7.1.9.2	The facility has adequate equipment, instrument and general supplies for delivery services (See Annex 2.7.1a Furniture, equipment, instrument and general supplies for labor room At the end of this standard)			3
	2.7.1.9.3	Labor room has medicines and supplies available for delivery services (See Annex 2.7.1b medicines and supplies for Labor Room At the end of this standard)			3
	2.7.1.9.4	Labor room has emergency cart with medicines and supplies available (See Annex 2.7.1c Medicines and Supplies for ER[2] Trolley Labor Room At the end of this standard)			3
2.7.1.10 Facilities for patients	2.7.1.10.1	Safe drinking water is available 24 hours.			1
	2.7.1.10.2	Separate toilet for patient is available in pre-labor room and accessible to patient after delivery			1
	2.7.1.10.3	There should be maternity waiting homes[3]where there is more than 20 deliveries per day and the waiting home must be taken round by every shift with at least one visit (by nurse)			1
2.7.1.11 Infection prevention	2.7.1.11.1	Personal protective equipment are available and used whenever required.			1
	2.7.1.11.2	Washable labor room			1
	2.7.1.11.3	Separate slipper designated for labor room and hand sanitizer placed in visible place for use			1
	2.7.1.11.4	There are at well labelled color-coded bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.7.1.11.5	Hand-washing facility with running water and liquid soap is available			1
	2.7.1.11.6	Needle cutter is used.			1
	2.7.1.11.7	Liquid sodium hypochloride (0.5% Chlorine solution) is available and utilized for decontamination.			1
	2.7.1.11.8	Dry gauze and cotton are stored separately in clean containers.			1
	2.7.1.11.9	Separate bowls/ bucket for placenta and plastic			1
	2.7.1.11.10	Placenta pit is used to dispose placenta.			1
Standard 2.7.1		Total Score			39
		Total Percentage = Total Score/ 39 x100			

Annex 2.7.1a Furniture, equipment, instrument and general supplies for labor room

S.No.	Items	Required Number	Self	Joint
1.	Delivery bed	At least 1 for every 15 beds		
2.	Clean bed linen	Each bed		
3.	Curtains	As per need		
4.	Clean surface (for alternative delivery position)	Available		
5.	Newborn Resuscitation table	1		
6.	Light source	1		
7.	Room Heater	1		
8.	Baby heater	1 per delivery bed		
9.	Refrigerator for labor room	1		
Equipment and Instruments				
10.	BP Set and Stethoscope	1		
11.	Body Thermometer (Non- mercury)	1		
12.	Room thermometer	1		
13.	Fetoscope	2		
14.	Fetal stethoscope	1		
15.	Baby weighing scale	1		
16.	Score-inflating bag air mask - neonatal size	1		
17.	Mucus extractor with suction tube/(Penguin)	2		
18.	Doppler	1		
19.	Vaginal speculum (Sims)	2		
20.	Neonatal resuscitation kit	1		
21.	Adult resuscitation kit	1		
22.	Sterile Delivery Instrument Set (Check each set)	4 sets per delivery beds		
22.1	Sponge forceps	2		
	Artery forceps	2		
	S/S bowl (Galli pot)	1		
	S/S bowl (receive placenta) (1-2 litre)	1		
	Cord cutting Scissors (blunt end)	1		
	Cord ties/ cord clamp	2		
	Plastic sheet/ rubber sheet	1		
	Gauze swabs	4		
	Cloth squared	3		
	Kidney tray	1		
	Peripad/ big dressing pad	2		
	Leggings	2		
	Perineal sheet	1		
	Baby receiving towel	1		
Sterile gown	1			
23.	Suture set (Check each set)	2 sets per delivery beds		
23.1	Needle holder	1		

	Sponge holder	1		
	Suture cutting scissors	1		
	Dissecting forceps (tooth and plain)	2		
	Artery forceps	1		
	Galliport	2		
24.	Episiotomy set (Check each set)	2 sets		
24.1	Episiotomy scissors	1		
	Needle holder	1		
	Suture cutting scissor	1		
	Dissecting forceps(tooth and plain)	2		
	Artery forceps	1		
25.	Vacuum set	2		
26.	Forceps set for delivery	1		
Total Score				
Total percentage= Total Score/26x100				

Each row gets a score of 1 if the mentioned medicines are available otherwise 0.

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard2.7.1.9.2	

Annex 2.7.1b Medicines and Supplies for Labor Room

S.No.	Medicines and supplies	Required No.	Self	Joint
Medicines				
1.	Oxytocin injection (keep in 2-8°C)	20 amp		
2.	Tranexamic acetate injection	10 amp		
3.	Ergometrine injection	10 amp		
4.	Magnesium sulphate injection	50 amp		
5.	Calcium gluconate injection	10 amp		
6.	Diazepam injection	10		
7.	Labetolol injection	10		
8.	Ampicillin injection	10		
9.	Gentamycin injection	5		
10.	Metronidazole injection	5		
11.	Lignocaine injection	2		
12.	Adrenaline injection	5		
13.	Ringers' lactate injection	10		
14.	Normal saline injection	10		
15.	Dextrose 5% injection	10		
16.	Water for injection	5		
17.	Eye antimicrobial (1% silver nitrate or Tetracycline 1% eye ointment)	2		
18.	Povidone iodine	5		
19.	Tetracycline 1% eye ointment	2		
20.	Paracetamol Tablet	20		
21.	Nefidipine SL Tablet 5 mg	4 tab		
22.	Misoprostol Tablet	5 tabs		
Supplies				
23.	Syringes and needles	20		
24.	IV set	10		
25.	Spirit (70% alcohol)	1 bottle		
26.	Steel drum with cotton	1		
27.	Urinary catheter(plain and folys)	5 each		
28.	Sutures for tear or episiotomy repair (2.0 chromic catgut)	12 PC		
29.	Bleach (chlorine-base compound)	2 packets		
30.	Clean (plastic) sheet to place under mother	4		
31.	Sanitary pads	1 box		
32.	Peri-pads Sterile	As per need		
33.	Clean towels for drying and wrapping the baby	5		
34.	Cord ties (sterile)	50		
35.	Blanket for the baby	5		
36.	Baby feeding cup	3		
37.	Impregnated bed net	2		
38.	Utility Gloves	10 pairs		
39.	Sterile Gloves	50 pairs		
40.	Long plastic apron	2		

41.	Goggles	2		
42.	Container for sharps disposal	1		
43.	Needle cutter	1		
44.	Receptacle for soiled linens	1		
45.	Bucket for soiled pads and swabs	2		
46.	Bucket for placenta (5 ltr.)	2		
47.	Well labelled color coded bins as per HCWM guideline 2014 (MoHP)	1 set		
48.	Wall Clock	1		
49.	Torch with extra batteries and bulb	1-2		
50.	Maternity register	1-2		
51.	Birth certificate	as per need		
52.	Partograph	As per need		
Total Score				
Total percentage= Total Score/52 x 100				

Each row gets a score of 1 if the mentioned medicines are available otherwise 0.

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for standard 2.7.1.9.3	

Annex 2.7.1c Medicines and Supplies for ER Trolley Labor Room

SN	Name	Required No	Self	Joint
1.	Atropine Injection	10 amp		
2.	Adrenaline Injection	3vial		
3.	Xylocaine 1% and 2% Injections with Adrenaline	2vial		
4.	Xylocaine 1% and 2 % Injections without Adrenaline	2vial		
5.	Xylocaine Gel	2 tube		
6.	Diclofenac Injection	5 amp		
7.	Hyoscine Butylbromide Injection	5amp		
8.	Diazepam injection	2 amp		
9.	Morphine Injection / Pethidine Injection	2 amp		
10.	Hydrocortisone Injection	4vial		
11.	Chlorpheniramine meliate Injection	4amp		
12.	Dexamethasone Injection	4vial		
13.	Ranitidine/Omeperazole Injection	4 amp		
14.	Frusemide Injection	5 amp		
15.	Dopamine injection	2 amp		
16.	Noradrenaline injection	2 amp		
17.	Digoxin injection	2 amp		
18.	Verapamil injection	2 amp		
19.	Amidarone injection	2 amp		
20.	Glyceryl trinitrate/nitroglycerine injection	10 tab/ 5amp		
21.	Labetolol injection	5 amp		
22.	Magnesium sulphate injection	30 amp		
23.	Calcium gluconate injection	2 amp		
24.	Sodium bicarbonate injection	2 amp		
25.	Ceftriaxone Injection	4 vials		
26.	Metronidazole Injection	4 bottles		
27.	Dextrose 25%/ 50% Injection	2 ampule each		
28.	IV Infusion set (Adult/Pediatric)	2		
29.	IV Canula (16, 18, 20, 22, 24, 26 Gz)	2 each		
30.	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 20 ml, 50 ml	5 each		
31.	Disposable Gloves (Size 6, 6.5, 7, 7.5)	3 each		
32.	Water for injection 10 ml	10 amp		
33.	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)	5		

34.	PPH management Set · (IV canula: 16/18G, IV fluids as per treatment protocol, IV set, Foley's catheter, Urobag) · Condom tamponade set- Sponge holder:2, Sim's speculum:1, Foley's catheter:1, Condom:2, IV fluids: NS1, IV set, Thread, Cord Clamp), · Inj Oxytocin, Tab Misoprostol,	At least 1		
35.	Eclampsia management Set (Knee hammer, IV canula: 16/18G, IV fluids, IV set, Foley's catheter, Urobag, ambu bag, Oxygen, Inj MgSO4: 46 ampoules, Inj lignocaine 2%, Inj Calcium gluconate, Distilled water, Disposable syringe 20ml-1, 10ml-8, Cap Nifedipin- 5mg 4 Cap)	At least 1		
Total Score				
Total Percentage =Total Score/35X100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.7.1.9.4	

Area	Code				
Maternity Services	2.7	Verification			
Maternity Inpatient Service	2.7.2				
Components		Standards	Self	Joint	Max Score
2.7.2.1 Space for work	2.7.2.1.1	Separate space for nursing station is available			1
	2.7.2.1.2	Separate changing room available for male and female staffs			1
	2.7.2.1.3	Separate store room is available			1
	2.7.2.1.4	Separate space dedicated for pre-labor, labor and post-labor patients			1
2.7.2.2 Furniture and supplies available and functioning	2.7.2.2	Furniture and supplies to carry out the inpatient services are available and functioning (See annex 2.7.2a Furniture and supplies for maternity inpatient wards At the end of this standard) (including nursing station)			3
2.7.2.3 Medicine and supplies available	2.7.2.3	Medicine and supplies to carry out the inpatient services are available General Ward (See Annex 2.7.2b medicine and supplies for maternity inpatient wards At the end of this standard)			3
2.7.2.4 Nursing and support staff for inpatient service	2.7.2.4.1	Adequate numbers of nursing staff are available in ward per shift (nurse patient ratio 1:6 in general ward)			1
	2.7.2.4.2	At least one trained office assistant per shift in each ward			1
2.7.2.5 Duty rosters	2.7.2.5	Duty roster of doctors, nurses, paramedics and support staffs kept visibly in nursing station			1
2.7.2.6 Communication	2.7.2.6	Telephone facility is available with list of important contact numbers and hospital codes visibly kept			1
2.7.2.7 Emergency management of inpatients	2.7.2.7.1	All staffs in wards are trained for BLS and oriented about emergency code 001 or blue code			1
	2.7.2.7.2	At least one emergency trolley with emergency medicine available in ward (Annex 2.7.2c Medicine and Supplies for ER Trolley for Maternity In patient Ward At the end of this standard)			3
	2.7.2.7.3	At least one defibrillator in immediate accessible area			1
2.7.2.8 Physical facilities for patient	2.7.2.8.1	Separate area designated for admission of male and female inpatients in general ward			1

	2.7.2.8.2	There are adequate toilets for male and female patients in each ward (1 for 6 female bed)			1
	2.7.2.8.3	Safe drinking water is available 24 hours for inpatients			1
	2.7.2.8.4	Hours/ Time allocated for visitors to meet the inpatients and controlled traffic to prevent cross infection			1
	2.7.2.8.5	Separate space is available for patients' visitors (Kuruwa Ghar).			1
2.7.2.9 Communication	2.7.2.9	Basic information regarding admitted patients is displayed in a separate board			1
2.7.2.10 IEC/BCC Materials	2.7.2.10	Appropriate IEC materials (posters, leaflets etc.) are available in the inpatient ward with focus on infection prevention			1
2.7.2.11 Recording and reporting	2.7.2.11	Admission and discharge registers are available and are being filled completely (HMIS 8.1 and 8.2)			1
2.7.2.12 Infection prevention	2.7.2.12.1	Personal Protective equipment are available and used whenever required			1
	2.7.2.12.2	Each ward has hand sanitizer in visible place for health workers to use before and after touching patients			1
	2.7.2.12.3	There are well labelled color-coded bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.7.2.12.4	Hand washing facility with running water and liquid soap is available and being practiced			1
	2.7.2.12.5	Needle cutter is used			1
	2.7.2.12.6	Chlorine solution is available and utilized for decontamination			1
Standard 2.7.2	Total Score				33
	Total Percentage (Total Score/ 33 x100)				

Annex 2.7.2a Furniture and Supplies for Maternity Inpatient wards

SN	General Items	Required No.	Self	Joint
1.	Working table	1-2		
2.	Chairs	2		
3.	Cup board	2		
4.	Shelves	1		
5.	Bed side table	per bed-1		
6.	Stools (for visitor)	per bed 1		
7.	Patient Beds (Metal bed / adjustable head/ mechanical ratchet, 3 X 6 ft.)	As per sanctioned bed		
8.	IV stand	As per bed		
9.	Medicine trolley	1		
10.	Dressing trolley	1		
11.	Wall Clock	2		
12.	Oxygen Concentrator	1 per 5 bed		
13.	Suction machine (foot/electric)	1		
14.	Laryngoscope with blade and batteries	1		
15.	ET tubes of different sizes	At least 2 each		
16.	Score-inflating bag air mask – adult, child, neonate size	1 set		
17.	BP set and stethoscope (Non-Mercury)	2 sets		
18.	Thermometer	3-5		
19.	Baby and adult weighing scale	1 each		
20.	Steel drum with sterile cotton	1		
21.	Steel drum with sterile gauze and pad	1		
22.	Scissors	2		
23.	Cheatele Forceps with Jar	2		
24.	Catheter set	2		
25.	Dressing set	2		
26.	Mattress with bedcover, pillow with pillow cover, blanket with cover	1 set per bed		
27.	Torch with extra batteries and bulb	2-3		
28.	Inpatient register as per ICD code	As per need (1)		
29.	Inventory Records	As per need (1)		
30.	Cardex files	As per bed		
31.	Waste bins color coded based on HCWM guideline 2014 (MoHP)	1 set per room		
Total Score				
Total percentage= Total Score/31x 100				

Each row gets a score of 1 if the mentioned medicines are available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.7.2.2	

Annex 2.7.2b Medicine and Supplies for Maternity Inpatient Ward

S.No.	Medicine and supplies	Required No.	Self	Joint
1.	Normal Saline Injection	15		
2.	Dextrose 5% Injection	15		
3.	Ringers' Lactate Injection	15		
4.	Dextrose 5% Normal Saline Injection	15		
5.	Distilled Water	10		
6.	IV Infusion Set	10		
7.	IV set	5		
8.	IV Catheter 18G,20G,22G,24G,26G	5 each		
9.	Gloves (Utility)	1 box		
10.	Mask, Cap, Gowns	As per need		
11.	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 30 ml, 50 ml	As per need		
Total Score				
Total Percentage = Total Score/ 11 x 100				

Each row gets a score of 1 if the mentioned medicines are available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.7.2.3	

Annex 2.7.2c Medicines and Supplies for ER Trolley Maternity Inpatient Ward

SN	Name	Required No	Self	Joint
1.	Atropine Injection	10		
2.	Adrenaline Injection	3		
3.	Xylocaine 1% and 2% Injections with Adrenaline	2		
4.	Xylocaine 1% and 2% Injections without Adrenaline	2		
5.	Xylocaine Gel	2		
6.	Diclofenac Injection	5		
7.	Hyoscine Butylbromide Injection	5		
8.	Diazepam injection	2		
9.	Morphine Injection / Injection Pethidine	2		
10.	Hydrocortisone Injection	4		
11.	Antihistamine Injection	4		
12.	Dexamethasone Injection	4		
13.	Ranitidine/Omeperazole Injection	4		
14.	Frusemide Injection	5		
15.	Dopamine injection	2		
16.	Noradrenaline injection	2		
17.	Digoxin injection	2		
18.	Verapamil injection	2		
19.	Amidarone injection	2		
20.	Glyceryl trinitrate/ notroglycerine	1o tab/ 5 amp		
21.	Labetolol injection	1		
22.	Magnesium sulphate injection	30		
23.	Calcium gluconate injection	2		
24.	Sodium bicarbonate injection	2		
25.	Ceftriaxone Injection	4		
26.	Metronidazole Injection	4		
27.	Dextrose 25% / 50% Injection	2 ampule each		
28.	IV Infusion set (Adult/Pediatric)	2		
29.	IV Canula (16, 18, 20, 22, 24, 26 Gz)	2 each		
30.	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 20 ml, 50 ml	5 each		
31.	Disposable Gloves 6, 6.5, 7, 7.5	3 each		
32.	Distilled Water	3		
33.	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)	5		
Total Score				
Total Percentage = Total Score/33 X100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.7.2.7.2	

Area	Code	Verification			
Surgery / Operation Services	2.8				
Components		Standards	Self	Joint	Max Score
2.8.1 Time for surgical services/ operations	2.8.1.1.1	Routine minor and intermediate surgeries available on scheduled days			1
	2.8.1.1.2	Routine major surgeries available on scheduled days			1
	2.8.1.2	Emergency surgeries available round the clock			1
	2.8.1.3	At least four functional operating rooms			1
2.8.2 Staffing	2.8.2.1	For one surgery, at least a team is composed of: MS/MDGP with one trained medical officer, two OT trained nurse (one scrub and one circulating), one Anesthesiologist/MDGP, one anesthesia assistant and one office assistant (for cleaning and helping)			1
	2.8.2.2	For overall management of operation theatre, there is one OT nurse (with minimum bachelors degree) assigned as OT in-charge			1
	2.8.2.3	At least two nurses in pre-anesthesia area for receiving and transferring of the patient and			1
	2.8.2.4	At least two ICU trained nurses for post anesthesia care for receiving patient after OT			1
2.8.3 Surgical services available	2.8.3.1	General Surgeries (See Annex 2.8a List of Minimum Surgeries Available At the end of this standard)			3
	2.8.3.2	Casaerian Section			1
	2.8.3.3	Orthopedic Surgeries (See Annex 2.8c List of Minimum Orthopedics Surgeries Available At the end of this standard)			3
2.8.4 Patient counseling and	2.8.4.1	Indications and reviews the clinical history and physical examination is documented			1
	2.8.4.2	Pre-anesthesia checkup done for routine surgeries and documented			1
	2.8.4.3	Informed consent is taken before surgery; patients and caretakers are given appropriate counseling about the surgery			1
2.8.5 WHO safe surgery checklist	2.8.5	The WHO Safe Surgery Checklist is available in OT and used			1
2.8.6 Patient preparation	2.8.6	Preoperative instructions for patient preparation are given and practiced with routine pre-anesthesia check up			1

2.8.7 Operation Theatre/Room	2.8.7.1	OT has appropriate physical set up (See Annex 2.8e Physical Set Up for OT At the end of this standard)			3
	2.8.7.2	Each operating room has general equipment, instruments and supplies available (See Annex 2.8f Furniture, Equipment, Instruments and Supplies for OT At the end of this standard)			3
	2.8.7.3	Each operating room has medicines and supplies available (See Annex 2.8g General Medicine and Supplies for OT At the end of this standard)			3
	2.8.7.4	Surgical sets for minimum list of the surgical services available (See Annex 2.8h Surgical sets for Minimum list of the surgical procedures At the end of this standard)			3
2.8.8.1 Availability of anesthesia Services	2.8.8.1	Anesthesia service is provided following the standards operating procedure			
	2.8.8.1.1	Local anesthesia			1
	2.8.8.1.2	Regional anesthesia			1
	2.8.8.1.3	Spinal anesthesia			1
	2.8.8.1.4	General anesthesia			1
2.8.8.2 Equipment, instruments and supplies for anesthesia	2.8.8.2	Equipment, instrument and supplies for anesthesia available (See Annex 2.8i Equipment, Instrument and Supplies for Anesthesia At the end of this standard)			3
2.8.8.3 Medicine and supplies for anesthesia	2.8.8.3	Medicine and supplies for anesthesia available (See Annex 2.8j Medicine and Supplies for Anesthesia At the end of this standard)			3
2.8.8.4 Staffing and supervision	2.8.8.4.1	Anesthesia should be provided, led, or overseen by an anesthesiologist			1
2.8.9 Pre anesthesia and post-operative care	2.8.9.1	Dedicated space for pre-anesthesia assessment and post-anesthesia recovery with patient bed, IV stand, IV cannula, fixing tapes, infusion sets, burette sets, syringes, three-way stop cocks and at least one cardiac monitor			1
	2.8.9.2	Separate area designated for post-operative care to stabilize the patient after surgery			1
	2.8.9.3	Staffs are specified for the post-operative care including close monitoring of the vital signs and observation of patient			1
	2.8.9.4	Patients' pain management is prioritized, measures well documented and analgesic effect followed up			1
	2.8.9.5	Patient undergoing surgical procedure is done pre- anesthetic check-up, continuously monitored during and at least 2 hours post-anesthesia			1
	2.8.9.6	Adequate information shared for patient care and patient followed by at least one nurse/doctor for hand over or transfer of patient within or outside the hospital			1

2.8.10 Recording	2.8.10.1	Recording is done for all surgeries procedure including observation, management and complications if any			1
	2.8.10.2	Records of all anesthetic procedures are kept and reported			1
2.8.11		Infection prevention protocol is strictly followed by all staffs in operation theatre/room			
2.8.11.1 Hand hygiene	2.8.11.1	Hand-washing and scrubbing facility with running water and soap is available and being practiced with elbow tap			1
2.8.11.2 Appropriate PPE	2.8.11.2	Gowns and sterile drapes for patients and sterile gown for surgery team are available and used whenever required.			1
2.8.11.3 Fumigation	2.8.11.3	Fumigation is done at least once a week in the OT on Saturdays and as per need			1
2.8.11.4 Disinfection of instruments	2.8.11.4	High Level Disinfection (e.g. Cidex) facility is available and being practiced.			1
2.8.11.5 High Wash	2.8.11.5	High wash is done at least once a month in OT			1
2.8.11.6 Appropriate segregation of waste	2.8.11.6	Separate colored waste bins based on HCWM guideline 2014 (MoHP) are available and used			1
2.8.11.7 Disposal of sharps	2.8.11.7	Needle cutter is used.			1
2.8.11.8 Cleaning	2.8.11.8	Chlorine solution is available and utilized for decontamination.			1
Standard 2.8	Total Score				59
	Total Percentage= Total Score/ 59 x 100				

Annex 2.8a General Surgeries Available

S.No.	List of the surgeries available (minimum)	Self	Joint
Minor			
1.	Incision & Drainage under Local Anesthesia		
2.	Excision of cysts, ganglion, lump, lymphnode, lipoma, skin papilloma, corn under LA		
3.	Excision of ingrowing toe nail under digital block		
4	Breast Abscess aspiration		
5	Wound debridement		
6	Skin suturing < 5cm size		
7	Foreign Body removal under LA		
8	Repair split ear		
9	True cut biopsy		
10	Chest tube insertion under LA		
11	Circumcision Under LA		

12	Eversion of sac for hydrocele (EVS)		
13	Haemorrhoid banding		
Intermediate			
14	Herniotomy under IVA		
15	Mesh Repair / Darn Repair (under LA/SA)		
16	Amputation		
17	Split Skin Graft(SSG)		
18	Large wound dressing / debridement under IVA/SA		
19	Chest tube insertion under IVA		
20	Circumcision under IVA		
21	I & D under IVA eg. Perineal abscess		
22	Release of tongue tie		
23	Fistulotomy		
24	Haemorrhoidectomy		
25	Vasectomy		
Major			
26	Exploratory laparotomy		
27	Appendectomy		
28	Exploration for obstructed hernia		
29	Mesh repair incisional hernia		
30	Minilap		
31	Vaginal Hysterectomy		
32	Abdominal Hysterectomy		
33	Open Cholecystectomy		
Total score			
Total Percentage= Total score/33 x 100			

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.3.1	

Annex 2.8b Types of Orthopedics Surgeries Available

S.N.	Minimum list of Orthopedic Surgeries	Self	Joint
1.	POP + Immobilization without anesthesia		
2.	POP + cast under anesthesia		
3.	Hip Spica cast		
4.	Joint aspiration		
5.	Skin traction		
6.	Gallows traction		
7.	Skeletal Traction		
8.	Reduction of shoulder, elbow, small joints dislocation		

9	Reduction of hip and knee dislocation		
10	Trigger finger Release		
11	DeQuervain's Release		
Total score			
Total Percentage= Total score/11 x 100			

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.3.3	

Annex 2.8c Physical Set Up for OT

SN	Physical Set Up	Self	Joint
1.	Separate room designated for OT with recovery room		
2.	Space designated for changing room for male and female staffs separately		
3.	Lockers for storage of the belongings of staffs		
4.	Separate shelves for storage of clean and dirty shoes at the entrance of the OT area demarked with red line		
5.	Space designated with sink facilitated with elbow tap for scrubbing		
6.	Designated space for tea room		
7.	Separate bathroom with at least one universal toilet for OT		
8.	Scrub basins with running water		
9.	Utility basins (at least 4)		
Total Score			
Total percentage= Total Score/ 9 x 100			

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.7.1	

Annex 2.8.d Furniture, Equipment, Instruments and Supplies for each OT Room

SN	General Equipment and Instruments for OT	Standard Quantity	Self	Joint
1.	Wheel chair foldable, adult size	1		
2.	Stretcher	1		
3.	Patient trolley	1		
4.	Cupboards and cabinets for store	1		
5.	Working desk for anesthesia, nursing station, gowning	1 each		
6.	OT Table- universal type/ with wedge to position patient	At least 2		
7.	Examining table	1		
8.	Mayo Stand with tray	2		
9.	Operation theatre lights	1		
10.	Ultra violet light source	1		
11.	Electronic suction machine/ Foot-operated suction machine	1-2		
12.	Refrigerator / cold box	1		
13.	Fumigation Macine	1		
14.	Anesthesia Machine with cardiac monitor	1		
15.	Defibrillator	1		
16.	Cautery/ Diathermy machine	1		
17.	Oxygen concentrator/ oxygen cylinder	1		
18.	Baby Warmer	1		
19.	Baby weight machine	1		
20.	Anesthesia trolley	2		
21.	Instrument trolley	2		
22.	BP instrument with stethoscope	1		
23.	Cardiac Monitor	1 for each OT table		
24.	Digital Thermometer	1		
25.	Steel Drum for gloves	1		
26.	Steel Drum for Cotton	1		
27.	Tourniquet, latex rubber, 75 cm	2		
28.	Kidney tray (600cc)	2		
29.	Covered instrument trays	4		
30.	Mackintosh sheet	1		
31.	Lead gown	2 sets		
32.	Bowl stand	2		
33.	Chele forceps in jar	2		
34.	Drapes for abdominal site (laparotomy sheet, table cover, hook towel, mayo cover, plastic sheet, tetra)	As per need		
35.	Drapes for perineal region (Laparotomy sheet, table cover, hook towel, mayo cover, plastic sheet, tetra, leggings)	As per need		
36.	Packing towel double wrapper	As per need		
37.	Sterile gloves (6,6.5,7,7.5,8)	5/5/5/5/5/5		
38.	Towels/ eye hole	As per need		
39.	Masks and caps, gown	As per need		

40	Torch light and batteries	1 set		
41	Foot steps	2		
42	Wall clock	1		
43	Waste bucket for scrub nurse	1		
44	IV stand	2		
45	Leak proof sharp container	1		
46	Generator back up for OT	1		
47	Color coded waste bins (based on HCWM guideline 2014 (MoHP))	1 set per OT table		
48	OT dress for staffs	at least 5 sets		
49	OT slippers	At least 5 pairs		
Total Score				
Total percentage= Total/ 49x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.7.2	

Annex 2.8e Medicine and Supplies for OT

SN	Emergency Drugs (including neonates) for OT	Standard Quantity for 1 patient	Self	Joint
1.	Midazolam Injection	5 vials		
2.	Hydrocortisone Powder for Injection	100mg 2 vial		
3.	Frusamide Injection	2 ampules		
4.	Dopamine Injection	5 vials		
5.	Transemic Acetate Injection	2 ampules		
6.	Hydralazine Injection	5 vials		
7.	Calcium Gluconate Injection	10ml X 2 ampules		
8.	Magnesium sulphate Injection	0.5 gms X 28		
9.	Oxytocin Injection	10 Ampules		
10.	Dextrose (25%) / (50%) Injection	2 ampules		
11.	Naloxone Injection	1 ampule		
12.	Aminophylline Injection	2 ampules		
13.	Chlorpheniramine Injection	2 ampules		
14.	Mephentine Injection	1 vial		
15.	IV Fluids- Ringers Lactate / Normal Saline/ Dextrose 5% Normal Saline/ Dextrose 5%	6 bottles each		
16.	IV infusion Set	4		
17.	IV Canula 22G/20G/18G	4 each		
Total Score				
Total Percentage = Total Score/17 X 100				

Each row gets a score of 1 if all the required number is available otherwise 0

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.7.3	

Annex 2.8f Minimum List of Surgical Sets

S.No.	Items	Required number	Self	Joint
1.	Catheter set	At least 5 Set		
2.	Suture set	At least 5 Set		
3.	Dressing set of different size (small, medium, large)	At least 2 each		
4.	Incision and drainage set	At least 5 Set		
5	Appendectomy set	At least 2 Set		
6	Caesarian section set	At least 5 Set		
7	Manual Vacuum Aspiration Set with Canulla and Aspirator of different size	At least 2 Set		
8	Hernia repair set	At least 2 Set		
9	Laparotomy set	At least 2 Set		
10	Vasectomy set	At least 2 Set		
11	Minilap set	At least 2 Set		
12	Open cholecystectomy set	At least 2 Set		
13	Orthopedics Basic Surgical Set	At least 2 Set		
14	Radiolucent OT table with orthopedic attachment including C-arm (for orthopedic surgery)	1		
15	K wire set: K- wires, SSW, plier, wire twister, wire cutter, wire binder, T- handle	1vset		
16	Flash Autoclave (for orthopedics)	1		
Total Score				
Total Percentage= Total Score/16x100				

Each row gets a score of 1 if all the required number is available otherwise 0

Scoring Chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.7.4	

Annex 2.8g Equipment, Instruments and Supplies for Anesthesia

S.No.	List of equipment, instruments and supplies for anesthesia	Required Number	Self	Joint
1.	Supply of oxygen (e.g., oxygen concentrator, cylinders or pipeline) with regulator and flow meter	At least 2 oxygen concentrator		
2.	Oropharyngeal airways (Size 000, 00, 0, 1, 2, 3, 4)	At least 2 each		
3.	Anesthesia face masks (Size 0, 1, 2, 3, 4)	At least 2 each		
4.	Laryngoscope, Mc Coy's curved blade and Miller's straight blade (small, medium and large sizes for both adult and pediatric patients)	At least two		
5.	Endotracheal tubes, cuffed, uncuffed, different sizes (Sizes 2.5 - 8.0 ID)	At least two of each size		
6.	Intubation aids (Magillsforcep of small and large size, bougie, stylets of small and large size)	As per need		
7.	Suction device and suction catheters of different sizes (Size 8 -16 Fr)	As per need		
8.	Adult and pediatric score inflating bags (Size 2L, 1L, 0.5L)	As per need		
9.	Bain's breathing circuit	At least 2		
10.	Pediatric breathing circuit: Ayre's T-piece	At least 2		
11.	Equipment for intravenous infusions and injection of medications for adult and pediatric patients (IV stand, IV canula, fixing tapes, infusion sets, blood transfusion sets, burette sets, syringes, three-way stop cocks)	As per need		
12.	Equipment for spinal anesthesia or regional blocks (e.g., a set of spinal needle 25/26 G, small bowl, 5-10ml syringe, sponge holding forceps, kidney tray, large eye towel, cotton pieces, gauze pieces)	As per need		
13.	Examination (non-sterile) gloves	As per need		
14.	Sterile gloves	As per need		
15.	Pulse oximeter	At least 2		
16.	Access to a defibrillator	At least 1		
17.	Stethoscope	At least 2		
18.	Sphygmomanometer with appropriate sized cuffs for adult and pediatric patients	As per need		
19.	Non-invasive blood pressure monitor with appropriate sized cuffs for adult and pediatric patients	As per need		
20.	Anesthesia machine with inspired oxygen concentration monitor, anti-hypoxia device to prevent delivery of a hypoxic gas mixture, system to prevent misconnection of gas sources (e.g., tank yokes, hose connectors), automated ventilator with disconnect alarm.	At least 1		
21.	Electrocardiogram - three leads	As per need		
22.	Temperature monitor (intermittent)	As per need		
Total Score				
Total percentage = Total score/ 22 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.8.2	

Annex 2.8h Medicines for Anesthesia

S.No.	List of Medicines	Required Number	Self	Joint
Preoperative medications				
1.	Ranitidine Injection	5		
2.	Metoclopramide Injection	5		
3.	Aluminium hydroxide or magnesium trisilicate suspension	5		
4.	Atropine Injection	10		
5.	Diazepam Tablet	5		
Intraoperative medications				
6.	Ketamine Injection	3		
7.	Midazolam Injection	3		
8.	Opioid analgesics injections (Morphine, Pethidine, Fentanyl)	2 each		
9.	Lignocaine 2% Injection for IV infusion	2		
10.	Lignocaine Inj 1%, 2% with or without Adrenaline 1:200000	2		
11.	Thiopental Powder 500mg	As per need		
12.	Propofol Injection	As per need		
13.	Appropriate inhalational anesthetic (e.g., Halothane, Isoflurane, Sevoflurane)	As per need		
14.	Succinylcholine Injection	As per need		
15.	Appropriate non-depolarizing muscle relaxant (pancuronium, vecuronium, rocuronium, atracurium)	As per need		
16.	Neostigmine Injection	As per need		
17.	Atropine Injection / Glycopyrolate Injection	10/10		
18.	Bupivacaine Heavy 0.5%	2		
Intravenous fluids				
19.	Water for injection	As per need		
20.	Normal saline / Ringer's lactate	As per need		
21.	5% Dextrose / Dextrose normal saline	As per need		
22.	1/5Dextrose 1/3Normal saline	As per need		
23.	Mannitol 20% Injection	As per need		
24.	Haemaccel Injection / Gelafusine Injection / Voluven Injection	As per need		
Resuscitative medications				
25.	Dextrose 25%/ 50% Injection	5 each		
26.	Mephenteramine or Ephedrine Injection	5		

27.	Dopamine injection	5		
28.	Noradrenaline injection	5		
29.	Amiodarone injection	5		
30.	Hydrocortisone injection	5		
31.	Dexamethasone injection	5		
32.	Chlorpheniramine injection	5		
33.	Calcium gluconate injection	5		
34.	Beta-blockers (Metoprolol, Labetolol, Esmolol) Injection	As per need		
35.	Naloxone Injection	5		
Post-operative medications				
36.	Morphine Injection	As per need		
37.	Pethidine Injection	As per need		
38.	Tramadol Injection	As per need		
39.	Pentazocine Injection	As per need		
40.	Paracetamol Injection 1gm, Suppository 125mg	As per need		
41.	Diclofenac Injection	As per need		
42.	Ketorolac Injection	As per need		
43.	Promethazine Injection	As per need		
44.	Ondansetron Injection	As per need		
45.	Gabapentin Injection	As per need		
Other medications				
46.	Magnesium Injection	As per need		
47.	Salbutamol Injection (for inhalation)	As per need		
48.	Ipratropium bromide Injection (for inhalation)	As per need		
49.	Furosemide Injection	As per need		
50.	Glyceryl trinitrate/nitroglycerine Injection	As per need		
51.	Sodium nitroprusside Injection	As per need		
52.	Heparin Injection	As per need		
53.	Aminophylline Injection	As per need		
Total Score				
Total percentage = Total score/ 53 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring chart	
Total percentage	Score
	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.8.8.3	

Area	Code				
Diagnostics and laboratory	2.9	Verification			
Laboratory	2.9.1.1				
Components		Standards	Self	Joint	Max Score
2.9.1.1.1 Time for patients	2.9.1.1.1.1	Laboratory is open from 10 AM to 3 PM for routine services and separate emergency lab service available round the clock			1
	2.9.1.1.1.2	Basic investigations are available (See Annex 2.9.1a List of investigations for Laboratory At the end of this standard)			3
	2.9.1.1.1.3	Histopathology service in coordination with other health facilities			1
2.9.1.1.2 Staffing	2.9.1.1.2	At least 2 medical technologist, 3 lab staffs (1 lab Technician, 1 Lab Assistant and 1 Helper) in each shift			1
2.9.1.1.3 Instruments and equipment	2.9.1.1.3	Instruments and equipment to carry out all parameters of tests are available and functioning (See Annex 2.9.1.1b Equipment and Instrument for Lab At the end of this standard)			3
2.9.1.1.4 Physical facilities	2.9.1.1.4.1	Separate space with working desk and chair designated for specific laboratory procedures like- hematology, biochemistry, microbiology, serology			1
	2.9.1.1.4.2	Light and ventilation are adequately maintained.			1
	2.9.1.1.4.3	Designated area well labelled for reception of sample and dispatch of reports			1
2.9.1.1.5 Duty rosters	2.9.1.1.5	Duty rosters of lab are developed regularly and available in appropriate location.			1
2.9.1.1.6 Facilities for patients	2.9.1.1.6.1	Waiting space with sitting arrangement is available for at least 15 persons in waiting lobby.			1
	2.9.1.1.6.2	At least one each male, female and universal toilet for patients using laboratory services			1
	2.9.1.1.6.3	Safe drinking water is available in the waiting lobby throughout the day.			1
2.9.1.1.7 Recording and reporting	2.9.1.1.7.1	Sample is adequately recorded with requisition form with detail information of patients			1
	2.9.1.1.7.2	Standard reporting sheets are being used and all reports are recorded in a standard register (HMIS 9.4).			1
	2.9.1.1.7.3	Report have adequate information of patient and checked by designated person before release			1

2.9.1.1.8 Supplies storage and stock	2.9.1.1.8.1	At least three months buffer stock of laboratory supplies is available.			1
	2.9.1.1.8.2	Reagents are stored at appropriate temperature in store and lab			1
2.9.1.1.9 Blood storage and supply (if hospital has its own blood bank Goto standards 2.9.2)	2.9.1.1.9.1	Blood storage is done based on Nepal Blood Bank and Transfusion Service Guideline			1
	2.9.1.1.9.2	Blood storage has required instrument and equipment (See Annex 2.9.1.1c At the end of this standard)			3
2.9.1.1.10 Infection prevention	2.9.1.1.10.1	Biohazard signs and symbols are used at appropriate places visibly			1
	2.9.1.1.10.2	All staffs know how to respond in case of spillage and other incidents			1
	2.9.1.1.10.3	Masks and gloves are available			1
	2.9.1.1.10.4	There are colored bins for waste segregation based on HCWM guideline 2014 (MoHP) and infectious waste is sterilized using autoclave before disposal			1
	2.9.1.1.10.5	Hand-washing facility with running water and soap is available for practitioners			1
	2.9.1.1.10.6	Needle cutter is used			1
	2.9.1.1.10.7	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.1.1		Total Score			32
		Total Percentage (Total Score/ 32 x100)			

Annex 2.9.1.1a List of Investigations for Laboratory

SN	Test	Self	Joint
Hematology			
1.	Hb		
2.	Total Leucocyte count		
3.	Differential leucocyte count		
4.	ESR		
5.	Blood grouping for non transfusion		
6.	Blood grouping for transfusion		
7.	Bleeding time		
8.	PT		
9.	APTT		
10.	Platelet count		
11.	MCV		
12.	MCH		
13.	MCHC		
14.	Hematocrit (PCV)		
15.	Malaria RDT or microscopy		
16.	Absolute count		
17.	Reticulocyte		
18.	Peripheral smear examination		

Chemistry and Endocrinology			
19	Blood Sugar		
20	Urea		
21	Creatinine		
22	Billirubin total		
23	Billirubin direct		
24	Serum Uric acid		
25	Total Protein		
26	Serum albumin		
27	SGOT		
28	SGPT		
29	Alkaline phosphatase		
30	Triglyceride		
31	Total Cholesterol		
32	HDL		
33	LDL		
34	Serum sodium		
35	Serum potassium		
36	HbA1c		
37	Urine microalbumin		
38	Urine albumin creatinine ratio		
39	Cardio-Biomarker (Troponin T/I, CK,CKP MB)		
40	Thuroid function test		
Microbiology			
41	Sputum AFB		
42	KOH mount		
43	Routine bacteriology culture (blood, urine, pus, body fluid, swab)		
44	Antibiotic susceptibility		
45	Gram stain		
Serology			
46	RPR		
47	Widal		
48	ASO		
49	RA factor		
50	CRP		
51	rK39 (kit)		
52	Montoux test		
53	TPHA (rapid)		
54	HbsAg (rapid)/ CLIA/ ELISA		
55	HCV(rapid)		
56	HIV(rapid)		
Miscellaneous			
57	Urine routine and microscopy		
58	Urine Pregnancy Test		
59	Stool routine and microscopy		
60	Stool for occult blood		

61	Stool for reducing substance		
62	Urine ketone bodies		
63	CSF and body fluid examination (sugar, protein, total and differential count, malignant cells)		
64	Semen analysis (total count and motility)		
65	Pap smear examination		
66	Fluid cytology		
67	Fine Niddle Aspiration Cytology (FNAC)		
Total Score			
Total Percentage = Total Score/ 67 x 100			

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.9.1.1.1.2	

Annex 2.9.1.1b Equipment and Instrument for Laboratory

S.N.	Name of Instruments	Required Quantity	Self	Joint
1.	Microscope	3		
2.	Fully automated biochemistry analyser	1		
3.	Fully automated hematology analyser	1		
4.	ELISA/CLIA/ECL	1 for ELISA 2 for others		
5.	Incubator	1		
6.	Biosafety cabinet (for microbiology)	1		
7.	Chemical Balance	1		
8.	Electrolyte Analyzer	1		
9.	Hot air Oven	1		
10.	Refrigerator	2-Jan		
11.	Centrifuge	2-Jan		
12.	Counting Chamber	2-Jan		
13.	DLC counter	2-Jan		
14.	Pipettes, Glassware/ kits	As per need		
15.	Computer with printer	1		
16.	Water Bath	1		
17.	Disposable test tubes	As per need		
18.	Different Closed vacuum set(for sample) hematology, biochemistry	1		
19.	Autoclave for waste disposal 9250 liter, per vacuum with horizontal outlet	As per need		
20.	Geimsa and PAP stain	1		
Total Score				
Total percentage = Total Score/ 20 x 100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.9.1.1.3	

Annex 2.9.1.1c Equipment and Instrument for Blood Bank

S.N.	Name of Instruments	Required Quantity	Self	Joint
1.	Blood bank refrigerator 2 to 4 C	2		
2.	Ordinary centrifuge	3		
3.	Deep freezer (-20°C to -30°C)	1		
4.	Generator 60 KVA	As per need		
Total score				
Total percentage= Total Score/ 4 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score 2.9.1.1.9.2	

Area	Code	Verification (*Applicable if hospital has its own blood bank)			
Blood Bank*	2.9.1.2				
Components		Standards	Self	Joint	Max Score
2.9.1.2.1 Time for patients	2.9.1.2.1	Blood bank is open / facility is available round the clock			1
2.9.1.2.2 Staffing	2.9.1.2.2	Adequate numbers of trained healthcare workers are available in blood bank (at least 2 blood bank staffs to cover shifts including ER)			1
2.9.1.2.3 Physical facilities	2.9.1.2.3.1	Adequate rooms and space for the staffs and patients are available (area of more than 10 meter squares)			1
	2.9.1.2.3.2	Light and ventilation are adequately maintained.			1
	2.9.1.2.3.3	The required furniture and supplies are available (See Annex 2.9.1.2a Blood Bank Furniture and Supplies At the end of the standard)			3
	2.9.1.2.3.4	Thermometers are attached to all equipment requiring temperature control and temperatures are recorded daily			1
2.9.1.2.4 Instruments and equipment	2.9.1.2.4	Instruments and equipment are calibrated, available and functioning with record of smear kept (See Annex 2.9.1.2b Equipment and Instrument for Blood Bank At the end of the standard)			3
2.9.1.2.5 Duty rosters	2.9.1.2.5	Duty rosters of lab are developed regularly and available in appropriate location.			1
2.9.1.2.6 Facilities for patients	2.9.1.2.6.1	Comfortable waiting space with sitting arrangement is available for at least 15 persons in waiting lobby.			1
	2.9.1.2.6.2	Safe drinking water is available in the waiting lobby throughout the day.			1
2.9.1.2.7 Recording and reporting	2.9.1.2.7.1	Sample is adequately recorded with requisition form with detail information of patients			1
	2.9.1.2.7.2	Standard reporting sheets are being used and all reports are recorded in a standard register or NBBTS software and computerized bill available to patients			1
	2.9.1.2.7.3	Report have essential information of patient and checked by designated person before release			1
	2.9.1.2.7.4	BTSC submits regular reports to NPHL/NBBTS of provided proficiency panels related to TTIs			1

2.9.1.2.8 Supplies storage and stock	2.9.1.2.8.1	At least three months buffer stock of laboratory supplies is available.			1
	2.9.1.2.8.2	Blood bags, transfusion sets, blood and blood components, reagents are stored at appropriate temperature in store and lab			1
2.9.1.2.9 Infection prevention	2.9.1.2.9.1	Biohazard signs and symbols are used at appropriate places			1
	2.9.1.2.9.2	All staffs know how to respond in case of spillage and other incidents			1
	2.9.1.2.9.3	Masks and gloves are available			1
	2.9.1.2.9.4	Bio-waste disposal is done based on HCWM guideline 2014 (MoHP)			1
	2.9.1.2.9.5	Hand-washing facility with running water and soap is available for practitioners			1
	2.9.1.2.9.6	Needle cutter is used			1
	2.9.1.2.9.7	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.1.2		Total Score			27
		Total Percentage (Total Score/27x100)			

Annex 2.9.1.2a Blood Bank Furniture and Supplies

S.N.	Furniture and supplies	Required Quantity	Self	Joint
1.	Working desk with two chairs	1 set		
2.	Patient chair for blood collection	1		
3.	Blood bag single and/or component	As per need		
4.	IV canula 16 G	As per need		
5.	BP cuff	1		
6.	Stethoscope	1		
7.	Weighing machine (for patient and for blood)	As per need		
8.	Band aid, cotton and spirit	As per need		
9.	Needle cutter	as per need		
10.	Reagents Kits for ABO/Rh serology/cross-matching requirement	as per need		
11	Glass ware for blood grouping (ABO/Rh)	as per need		
Total score				
Total percentage= Total Score/ 11 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score 2.9.1.2.3.3	

Annex 2.9.1.2 b Equipment and Instrument for Blood Bank

S.N.	Name of Instruments	Required Quantity	Score	Joint
1.	Blood bank refrigerator 2 to 4 C	2		
2.	Ordinary centrifuge	3		
3.	Deep freezer (-20°C to -30°C)	1		
4.	Deep freezer (-80°C)	1		
5.	Platelet Shaker	1		
6.	Autoclave	1		
7.	Computer with printer	1		
8.	Gamma radiation chamber	1 (optional*)		
9.	Microscope	1		
10.	Auto pipettes (20, 50, 100 µl)	2 each		
11.	Incubator	2		
12.	Water Bath	3		
13.	Hot Air Oven	2		
14.	Generator 60 KVA	as per need		
Total score				
Total percentage= Total Score/ 14 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score 2.9.1.2.4	

Area	Code	Verification			
X-ray	2.9.2				
Components		Standards	Self	Joint	Max Score
2.9.2.1 Time for patients	2.9.2.1.1	X-ray service is open from 10 AM to 3 PM			1
	2.9.2.1.2	Emergency x-ray service is available round the clock			1
2.9.2.2 Staffing	2.9.2.2	Adequate numbers of trained healthcare workers are available in x-ray (at least 2 staffs to cover shifts including ER) with on call radiologist			1
2.9.2.3 Patient counseling	2.9.2.3	Counseling is provided to patients about radiation hazard, site and position for x-ray			1
2.9.2.4 Information education and communication materials for patients	2.9.2.4	Radiation sign, appropriate Radiation awareness posters, leaflets are available in the department and OPD waiting area.			1
2.9.2.5 Instruments and equipment	2.9.2.5.1	General X ray unit (with minimum 125KV and 300ma X-ray machine) with floatation table top and vertical bucky			1
	2.9.2.5.2	Complete CR system with CR cassette at least 5 of 14 x 17 inch and 3 of 10x12inch.			1
2.9.2.6 Physical facilities	2.9.2.6.1	X ray room of at least 4x4sqm with wall of at least 23cm of brick or 6cm RCC or 2mm lead equivalent.			1
	2.9.2.6.2	Light and ventilation are adequately maintained.			1
	2.9.2.6.3	The required furniture and supplies including radiation protective measures for patients, visitors and staffs are available including magnetic gown			1
2.9.2.7 Duty rosters	2.9.2.7	Duty rosters of X-ray are developed regularly and available in appropriate location.			1
2.9.2.8 Facilities for patients	2.9.2.8	Waiting space with sitting arrangement is available for at least 5 persons in waiting lobby.			1
2.9.2.9 Recording and reporting	2.9.2.9.1	X-ray is adequately recorded as per requisition form with detail information of patients, date of x-ray and site and view			1
	2.9.2.9.2	Report have adequate information of patient and checked by designated person before release			1
2.9.2.10 Information to patients	2.9.2.10	Biohazard signs and symbols are used at appropriate places			1
2.9.2.11 Infection prevention	2.9.2.11.1	Radiological waste is disposed based on HCWM guideline 2014 (MoHP)			1
	2.9.2.11.2	Hand-washing facility with running water and soap is available for practitioners			1
	2.9.2.11.3	Needle cutter is used			1
	2.9.2.11.4	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.2		Total Obtained Score			19
		Total Percentage (Total Score/ 19 x100)			

Area	Code	Verification			
Ultrasonography (USG)	2.9.3				
Components		Standards	Self	Joint	Max Score
2.9.3.1 Time for patients	2.9.3.1	USG is open from 10 AM to 3 PM for obstetrics, abdominal, pelvic and superficial structure like testis, thyroid			1
2.9.3.2 Staffing	2.9.3.2	USG trained medical practitioner and mid-level health worker in each USG room			1
2.9.3.3 Patient counseling	2.9.3.3	Counseling is provided to patients about site and indication of USG			1
2.9.3.4 Maintaining patients' privacy	2.9.3.4	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients)			1
2.9.3.5 Instruments and equipment	2.9.3.5	USG machine (advanced) with different probes, computer and printer with USG papers , gel and wipes is available and functional			1
2.9.3.6 Physical facilities	2.9.3.6.1	Adequate space for practitioner and patient for USG with working table and examination bed one per each USG machine			1
	2.9.3.6.2	Proper light and ventilation maintained.			1
2.9.3.7 Facilities for patients	2.9.3.7	Waiting space with sitting arrangement is available for at least 15 persons in waiting lobby.			1
2.9.3.8 Recording and reporting	2.9.3.8.1	USG is adequately recorded as per requisition form with detail information of patients, date of USG			1
	2.9.3.8.2	Report have adequate information of patient, information of area of examination and radiological opinion, further referral and checked by designated person before release			1
2.9.3.9 Infection prevention	2.9.3.9.1	Hand-washing facility with running water and soap is available for practitioners			1
	2.9.3.9.2	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.3		Total Score			12
		Total Percentage (Total Score/ 12 x100)			

Area	Code	Verification			
Electrocardiogram (ECG)	2.9.4				
Components		Standards	Self	Joint	Max Score
2.9.4.1 Service available	2.9.4.1	ECG service is available for patients in OPD, Emergency and Indoor			1
2.9.4.2 Space	2.9.4.2	Separate space is dedicated for ECG Service			1
2.9.4.3 Patient counseling	2.9.4.3	Counseling is provided to patients about procedure and indication of ECG			1
2.9.4.4 Maintaining patient privacy	2.9.4.4	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients)			1
2.9.4.5 Instruments, equipment and supplies	2.9.4.5	Functional ECG machine (12 lead with power back up), paper, gel, wipes and hand sanitizer are available in ECG trolley			1
2.9.4.6 Recording and reporting	2.9.4.6.1	ECG is adequately recorded as per requisition form with detail information of patients, date of ECG			1
	2.9.4.6.2	Reporting folder of ECG should have adequate information of patient, including analysis of 12 lead ECG with final impression of ECG diagnosis done by designated person before release			1
2.9.4.7 Infection prevention	2.9.4.7.1	Hand-washing facility with running water and liquid soap is available for practitioners			1
	2.9.4.7.2	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.4		Total Score			9
		Total Percentage (Total Score/ 9 x100)			

Area	Code	Verification			
Dental Service	2.10				
Components	Std No.	Standards	Self	Joint	Max Score
2.10.1 Time for patients	2.10.1.1	Dental service is available from 10 AM to 3 PM			1
	2.10.1.2	Tickets for routine dental service are available till 2 pm			1
	2.10.1.3	EHS services from 3PM onwards and tickets available from 2PM onwards			1
2.10..2 Adequate Staffing	2.10..2	Dental Hygienist/Dentist : OPD Patients- 1:20 per day for quality of care			1
2.10.3 Maintaining patient privacy	2.10.3	Patient privacy maintained with separate rooms, curtains hung, maintaining queuing of patients			1
2.10.4 Patient counseling	2.10.4.1	Counseling is provided to patients about the type of treatment being given and its consequences			1
	2.10.4.2	Appropriate IEC materials (posters, leaflets etc.) as an IEC corner available in the OPD waiting area.			1
2.10.5 Physical facilities	2.10.5.1	At least 1 rooms with adequate space for the practitioners and patients is dedicated for Dental Service			1
	2.10.5.2	Light and ventilation are adequately maintained			1
	2.10.5.3	Required furniture, supplies and space are available (See Annex 2.10a Furniture and Supplies for Dental Services At the end of this standard)			3
2.10.6 Equipment, instrument and supplies	2.10.6.1	Equipment, instrument and supplies to carry out Dental Services (See Annex 2.10b Basic Equipment and Instrument for Dental Services at the end of this standard) are available and functioning			3
2.10.7 Duty rosters	2.10.7	Duty rosters developed regularly and available in appropriate location.			1
2.10.8 Recording and reporting	2.10.8	OPD register available in every OPD and ICD 10 classification for diagnosis recorded (electronic health recording system)			1
2.10.9 Infection prevention	2.10.9.1	Masks and gloves are available and used			1
	2.10.9.2	There are well labelled colored bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.10.9.3	Hand-washing facility with running water and soap is available for practitioners			1
	2.10.9.4	Needle cutter is used			1
	2.10.9.5	Chlorine solution is available and utilized for decontamination			1
Standard 2.10	Total Score				22
	Percentage = Total Score/ 22 x100				

Annex 2.10 a : Furniture and Supplies for Dental Services

SN	General Items	Required No.	Self	Joint	Max Score
1	Working desk	1 for each practitioner			1
2	Working Chairs	1 for each practitioner			1
3	Patient chairs	2 for each working desk			1
4	Examination table	1 in each OPD room			1
5	Foot Steps	1 in each OPD room			1
6	Curtain separator for examination beds	In each examination bed			1
7	Shelves for papers	As per need			1
8	Weighing scale	Adult and Child			1
Total Score					8
Total Percentage = Total Score/8 X 100					

Each row gets a score of 1 in each row if is available otherwise 0

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.10.5.3	

Annex 2.10 b : Basic Equipment and Instrument for Dental Services

S.No.	Instruments and Equipment for Dental OPD	Required numbers	Self	Joint	Max Score
Diagnostic					
1	Mouth mirror	10			1
2	Explorer	10			1
3	St. Probe	5			1
4	Tweezers	10			1
5	Periodontal probe	2			1
6	Kidney tray small and large	5			1
7	Plastic tray	10			1
Extraction forceps					
8	Upper premolar	1			1
9	Upper molar (right)	2			1
10	Upper molar (left)	1			1
11	Upper third molar	1			1
12	Lower cowhorn forceps	3			1
13	Lower third molar	1			1
14	Lower root forceps	1			1
Elevators					

15	Compland elevators (small and large)	10			1
16	Cryers	1 set			1
17	Pointed elevator	2			1
18	Apexoelevator	2			1
Surgical					
19	Bp handle	2			1
20	Needle holder	3			1
21	Artery forceps	2			1
22	Toothed forceps	2			1
23	Scissors (suture cutting)	1			1
24	21 no wire	2 packets			1
25	Wire cutter	1			1
Restorative					
26	Airotor handpiece	2			1
Burs					
27	Round burs (smalland large)	5			1
28	Straight bur	2			1
29	Inverted cone bur	2			1
30	Composite finishing bur	1			1
31	Cement spatula	1			1
32	Plastic spatula	1			1
33	Glass slab	1			1
34	Mixing paper pad	1			1
35	Cement carrier	5			1
36	Condenser (round)	5			1
37	Ball burnisher	2			1
38	Spoon excavators	5			1
39	Toffle wire matrix retainer	1			1
40	Matrix band (steel)	2 packets			1
41	Matrix band (plastic)	1 packets			1
42	Wedge	1 packets			1
43	Dycal tip	2			1
Dental materials					
44	Gic (restorative)	1 set			1
45	Miracle mix	1 set			1
46	Composite filling set	As per need			1
47	Etchant	1			1
48	Bonding agent	1			1
49	Composite = shades a ₁ a ₂ a ₃ b ₁ b ₂	1 each			1
50	Bonding agent applicator	1 packet			1
51	Dycal	1 set			1
52	Cavit(temporary restorative)	1			1
53	Zinc phosphate (restorative)	1 set			1
54	Vaseline	1			1
Scaling					
55	Suction tips	2 packets			1

56	Curette (universal curette)	3			1
Pedo forceps					
57	Upper anterior	2			1
58	Upper root	1			1
59	Upper molar	2			1
60	Lower anterior	2			1
61	Lower molar	2			1
Additional instruments/supplies					
62	Local anesthesia (2% lidocane with adrenaline)	1 box			1
63	Syringe 1ml 2ml 3ml	1 packet each			1
64	Gauge	1 packet			1
65	Cotton roll	1 packet			1
66	Normal saline	1 bottle			1
67	Betadine	1 bottle			1
68	Micromotor (slow speed round bur)	1(2)			1
69	H ₂ O ₂	1 bottle			1
70	Dental floss	1 packet			1
71	Surgical gloves	As per need			1
72	Loose gloves	As per need			1
Total score					72
Percentage= Total score/ 72 x 100					

Each row gets a score of 1 in each row if is available otherwise 0

Scoring chart	
Total percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.10.6.1	

Area	Code	Verification			
Postmortem	2.11				
Components		Standards	Self	Joint	Max Score
2.11.1.1 Physical facility	2.11.1.1.1	Designated area for mortuary room, changing room and store room and bathroom			1
	2.11.1.1.2	Body dissection table (at least one) is available and used			1
	2.11.1.1.3	Organ dissection table (at least one) is available and used			1
	2.11.1.1.4	Adequate ventilation and light and odor management			1
2.11.2 Availability of postmortem services	2.11.2	Examination of the dead body in any unnatural death and suspicious death (Post-mortem examination or autopsy) available from 9 am to 5pm			1
2.11.3 Staffing	2.11.3	At least one MD forensic and one trained medical officer for autopsy and clinical medico-legal services			1
2.11.4 Supplies and instruments	2.11.4	Adequate supplies and instruments for forensic services (See Annex 2.11a Supplies and instrument for post mortem At the end of this standard)			3
2.11.5 Mortuary van	2.11.5	Mortuary van is available 24 hours (at least one)			1
2.11.6 Recording and reporting	2.11.6	Standardized medico-legal examination formats available			1
2.11.7 Infection prevention	2.11.7.1	Staff wear mask and gloves at work.			1
	2.11.7.2	There are colored bins for waste segregation and disposal based on HCWM guideline 2014 (MoHP)			1
	2.11.7.3	Hand-washing facility with running water and soap is available and being practiced.			1
	2.7.11.4	Chlorine solution is available and utilized.			1
	2.11.7.5	Proper disposal of anatomical waste in placenta pit after autoclaving			1
Standard 2.11	Total Score				16
	Total Percentage (Total Score/ 16 x100)				

Annex 2.11a Supplies and instrument for post mortem services

S.No.	Supplies and instrument	Required Number	Self	Joint
1	Refrigeration chamber or cool room for body preservation	2-4 bodies capacity		
2	Dissection set of instruments for autopsy	2 sets		
3	Magnifying lens; 20 and 40 times	1 each		
4	Measuring tape	2		
5	Weighing machine for organs and if possible for dead body	1		
6	Camera for photography	1		
7	Glass tubes for blood collection and tissue collection; reasonable numbers for regular use	as per need		
8	Glass slides; reasonable number for regular use	as per need		
9	EDTA	as per need		
10	Sodium Floride -200 or 500 gm	1		
11	Formalin solution	as per need		
12	Plastic made wide mouth containers of 500 ml capacity ; reasonable numbers for regular need	as per need		
13	Sodium chloride (table salt); reasonable amount for regular use	as per need		
14	Autopsy gown	2 sets		
15	Gum boots	2 pairs		
16	Gloves and masks	as per need		
17	Computer with printer for report preparation	1		
18	Cleaning agents; soap, detergents	as per need		
19	Sealing materials; specific seal tape or wax seal and seal print	as per need		
20	Autopsy and skeletal remains SOP, Reference Manual	as per need		
Total score				
Percentage= Total score/20 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.11.4	

Area	Code	Verification			
Medico-legal services	2.12				
Components		Standards	Self	Joint	Max Score
2.12.1 Physical facility	2.12.1	Designated area for medico-legal examination with examination bed and working desk with chair			1
2.12.2. Availability of medico-legal services	2.12.2	Medico-legal services are available 24 hours			1
2.12.3 Staffing	2.12.3	Trained medical officer for medico-legal services at least one			1
2.12.4 Supplies and instruments	2.12.4.1	Adequate supplies and instruments for medico-legal services (See Annex 2.12a Supplies and instrument for medico legal services At the end of this standard)			3
	2.12.4.2	Preservation of sample ensured before dispatching for test			1
2.12.5 Patient counseling	2.12.5	Post-traumatic counseling is done to the victims of medico-legal issues like sexual offence			1
2.12.6 Recording and reporting	2.12.6	Standardized medico-legal examination formats available			1
2.12.7 Infection prevention	2.12.7.1	Staff wear mask and gloves at work.			1
	2.12.7.2	There are well labelled colored bins for waste disposal based on HCWM guideline 2014 (MoHP)			1
	2.12.7.3	Hand-washing facility with running water and soap is available and being practiced.			1
	2.12.7.4	Chlorine solution is available and utilized.			1
Standard 2.12		Total Score			13
		Total Percentage (Total Score/ 13 x100)			

Annex 2.12a Supplies and instrument for clinical medico-legal services

S.No.	Supplies and instrument	Required number	Self	Joint
1	Weight machine and height scale	1 each		
2	BP set, stethoscope and torch light	1 each		
3	Examination kits; sexual offence cases (rape victim examination kit)	as per need		
4	Gloves and masks	as per need		
5	Magnifying lens; 20 and 40 times	1 each		
6	Measuring tape	As per need		
7	Camera for photography	1		
8	Paper envelopes of different sizes for collection of samples and packing	as per need		

9	Glass tubes for collection of blood urine; reasonable number for regular use	as per need		
10	X ray plate view box	1		
11	EDTA and Sodium fluoride 500 gm	As per need		
12	Glass slides; reasonable number for regular use	as per need		
13	Cupboards for store and necessary other furniture for examination room	as per need		
14	Sealing materials as for autopsy room	as per need		
15	Computer and printer for report preparation as in autopsy	1		
16	SOPs and Reference Manuals for age estimation, sexual offence case examination, injury examination, drunkenness examination, mental state examination and torture victim examination.	1		
Total score				
Percentage= Total score/16 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.12.4.1	

Area	Code				
One stop crisis management center (OCMC)	2.13	Verification			
Components		Standards	Self	Joint	Max Score
2.13.1 OCMC coordination committee exists (multi-sectoral)	2.13.1	Quarterly meeting minute of coordination committee			1
2.13.2 Functionality of case management committee	2.13.2	Monthly meeting minute of case management committee			1
2.13.3 Timely service for patients	2.13.3.1	Prioritized services for GBV victims/survivors exists			1
	2.13.3.2	Treatment for GBV survivors/affected by GBV is available 24 hours			1
2.13.4 Physical facilities for OCMC services	2.13.4	Separate space allocated for OCMC services with adequate physical facilities (See Annex 2.13a Physical facilities for OCMC At the end of this standard)			3
2.13.5 Staffing	2.13.5.1	At least one Medical officer working in the hospital trained in medico-legal issues is available			1
	2.13.5.2	At least two Staff nurse working in the hospital and 1 trained psycho social counselor			1
2.13.6 Timely examination from medico-legal aspects and treatment of GBV survivors/ affected by GBV	2.13.6.1	Health check-up, medico-legal examination including documentation (See Annex2.13b Instruments and supplies for treatment in OCMC At the end of this standard)			3
	2.13.6.2	Preservation of samples as legal evidence done for future use (See Annex 2.13c Instruments and supplies for evidence collection in OCMC At the end of this standard)			3
	2.13.6.3	Pregnancy test and emergency contraceptive services, tests for HIV/HBV available			1
2.13.7 Use of GBV clinical protocol	2.13.7.1	Whole site orientation on GBV clinical protocol conducted			1
	2.13.7.2	Availability and use of the treatment as per the protocol and OCMC guideline			1
2.13.8 Psycho-social counselling of GBV Survivors/ affected by GBV and rehabilitation	2.13.8.1	Mental health and psychosocial counselling services available			1
	2.13.8.2	If the female survivor requires to stay more days or requires advance psychosocial counseling including livelihood training, she/he shall be referred to nearby appropriate safe home/ rehabilitation centers			1

2.13.9 Referral services in place	2.13.9.1	Provide required referral and other services (as per the health service guideline and protocol). (Beyond health: security, legal, shelter, rehabilitation)			1
	2.13.9.2	Health related referral services e.g. Safe abortion services			1
2.13.10 Information, education and empowerment for GBV survivors/ affected by GBV	2.13.10.1	Detailed information concerning the services being provided by OCMC to the survivors of GBV (Citizen charter, leaflets, community radio etc)			1
	2.13.10.2	Information is being given in an integrated manner (Safe home related, OCMC, Police women children service unit)			1
2.13.11 Recording and reporting	2.13.11.1	Details of the events registered in the OCMC, services (health and non-health) being provided to the survivors, listing of the referred organizations shall be documented to be classified and analyzed in due course.			1
	2.13.11.2	Confidentiality shall be maintained at all stages of documentation.			1
	2.13.11.3	Report to concerned authority (DCC and MoHP) in monthly report service format			1
	2.13.11.4	Documentation of the current status of GBV survivors of at least last 1 year is done			1
2.13.12 Infection prevention	2.13.12.1	Masks and gloves are available and used			1
	2.13.12.2	There are colored bins for waste segregation and disposal based on HCWM guideline 2014 (MoHP)			1
	2.13.12.3	Hand-washing facility with running water and soap is available for practitioners.			1
	2.13.12.4	Needle cutter is used.			1
	2.13.12.5	Chlorine solution is available and utilized.			1
Standard 2.13		Total Score			33
		Total Percentage (Total Score/ 33 x100)			

Annex 2.13a Physical Facilities for OCMC

SN	General Items	Required No.	Self	Joint
1	Rooms for treatment room/examination room, office and guard room	1 each		
2	Toilet allocated for OCMC services	as per need		
3	Curtains to maintain confidentiality during the forensic examination	as per need		
4	Examination table	1		
5	Desk	1		
6	Chairs	3		
7	Cupboard to keep clients' information with filing cabinet	1		
8	Movable table lamp	1		

9	toilet and bathroom for clients' use (water, bucket, mug, soap, towel)	as per need		
10	Hand washing facility for service provider	as per need		
11	Refrigerator and lockable cupboard for specimen store	1		
12	Telephone	1		
13	Computer and printer	1set		
14	Boiler (for tea)	1 set		
Total score				
Percentage= Total score/14 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.13.4	

Annex 2.13b Instruments and supplies for treatment in OCMC

SN	General Items	Required No.	Self	Joint
1	Sphygmomanometer (B.P. Instrument)	1		
2	Stethoscope	1		
3	Torch Light	1		
4	Tongue Depressor	as per need		
5	Tourniquet	1		
6	Sterilized Gloves as required	as per need		
7	Sterilized Syringe and Needles as required	as per need		
8	Cotton and Bandage as required	as per need		
9	Sterilized Vial for sample collection	as per need		
10	Different sized Reflecting Mirrors (big, medium and small)	1 each		
11	Sterilized Speculum	1		
12	Glutaradehyde solution for high level of infection prevention	as per need		
13	Chlorine powder to sterilize the used materials/tools	as per need		
14	Protoscope /Anscope	1		
15	Pregnancy Test Kit	as per need		
16	Specimen collection materials for communicable Sexually Transmitted Infections	as per need		
17	Lubricant, Clean Water, Normal Saline	as per need		
18	Tray for sharp instruments, such as scissors, knife etc.	as per need		
19	Height Measuring Scale	1		
20	Weight Measuring Scale	1		
Total score				
Total Percentage = Total Score/ 20 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.13.6.1	

Annex 2.13c Instruments and supplies for evidence collection in OCMC

SN	General Items	Required No.	Self	Joint
1	Cotton/material to collect sperm, Blood, Saliva etc. from survivor	as per need		
2	Container/vessel to keep the collected specimen	as per need		
3	Materials to swab	as per need		
4	Microscopeslide	as per need		
5	Vialsforbloodcollection	as per need		
6	Vials to collect urine for pregnancy test	as per need		
7	Paper or plastic seat	as per need		
8	Paper bag to hold clothes and other items	as per need		
9	Air spatula and slide for pap smear	as per need		
10	Fixing solutions: hair spray, alcohol etc	as per need		
11	Analgesic : Normal medications like Paracetamol, Ibuprofen etc. for pain relief	as per need		
12	Emergency Contraceptives: Pills and IUCD	as per need		
13	Thread for Suturing	as per need		
14	Immunization for Tetanus and Hepatitis	as per need		
15	STI Preventive	as per need		
16	Bed Sheet and Blankets for examination table	as per need		
17	Towel	as per need		
18	Clothes for Survivor (if her clothes are torn or stained).	as per need		
19	Gown to be worn during the examination	as per need		
20	Sanitary Pads and Tampons for internal use	as per need		
21	Documentation forms and recording forms	as per need		
22	Camera and Film for evidence collection	1		
23	Colposcope or Magnifying Glass	1		
Total score				
Total Percentage = Total Score/ 23 x 100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.13.6.2	

Area	Code	Verification			
Physiotherapy (Physical Rehabilitation)	2.14				
Components		Standards	Self	Joint	Max Score
2.14.1 Space	2.14.1	Separate room for OPD physiotherapy with at least 10 physiotherapy beds with 5 exercise beds and 5 electric beds			1
2.14.2 Time for patients	2.14.2.1	Physiotherapy OPD is open from 10 AM to 5 PM.			1
	2.14.2.2	Inpatient physiotherapy service is available based on the requisition			1
2.14.3 Staffing	2.14.3	At least 1 physiotherapist trained in Masters in Physiotherapy (MPT), 2 trained in Bachelors in Physiotherapy (BPT), and 2 Certificate in physiotherapy (CPT) or Diploma in physiotherapy (DPT) and 1 trained office assistant treating 20 patients per day on OPD basis			1
2.14.4 Maintaining patient privacy	2.14.4	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients).			1
2.14.5 Patient counseling	2.14.5	Counseling is provided to patients about the type of treatment being given and its consequences.			1
2.14.6 IEC/BCC materials	2.14.6	Appropriate IEC/BCC materials (posters, leaflets etc.) are available in the OPD waiting area.			1
2.14.7 Instruments and equipment	2.14.7	Instruments and equipment to carry out the Physiotherapy works are available and functioning (See Annex 2.14a Instruments and equipment physiotherapy At the end of this standard).			3
2.14.8 Physical facilities	2.14.8.1	Adequate rooms and space for the practitioners and patients are available.			1
	2.14.8.2	Light and ventilation are adequately maintained.			1
2.14.9 Duty rosters	2.14.9	Duty rosters of OPD are developed regularly and available in appropriate location.			1
2.14.10 Facilities for patients	2.14.10.1	Safe drinking water is available in the waiting lobby throughout the day.			1
	2.14.10.2	Hand-washing facilities are available for patients.			1
2.14.11 Recording and reporting	2.14.11.1	Recording and reporting throughout treatment and follow up is done			1
2.14.12 Infection prevention	2.14.12.1	Masks and gloves are available and used			1
	2.14.12.2	There are colored bins for waste disposal based on HCWM guideline 2014 (MoHP)			1
	2.14.12.3	Hand-washing facility with running water and soap is available for practitioners.			1
	2.14.12.4	Needle cutter is used			1
	2.14.12.5	Chlorine solution is available and utilized.			1
Standard 2.14		Total Score			21
		Percentage = Total Score / 21 x 100			

Annex 2.14a Instruments and equipment physiotherapy

SN	Instruments and equipment	Required No.	Self	Joint
1	Traction unit	2		
2	IFT(Interferential treatment)	4		
3	Ultrasound(treatment) unit	4		
4	TENS (Transcutaneous nerve stimulation)	4		
5	Muscle stimulator	3		
6	Parallel bar	1		
7	Quadriceps Table	1		
8	Therabands	5		
9	Heel exerciser	1		
10	CPM machine knee and elbow	1		
11	Physio ball 55" 65" and 90"	3		
12	Moist heat unit	1		
13	Wax unit	1		
14	Foot step	1		
15	Pulley Set	2		
16	Shoulder wheel	2		
17	Dumbell set	2		
18	Static Cycle	1		
19	Weight Cuffs set	2		
20	Shortwave diathermy	1		
21	Mobilization table / bed	2		
Total Score				
Total Percentage= Total Score/21 x100				

Each row gets a score of 1 if the mentioned test is available otherwise 0.

Scoring	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 2.14.7	

Area	Code	Verification			
CSSD	3.1				
Components		Standards	Self	Joint	Max Score
3.1.1 Space	3.1.1.1	Separate central supply sterile department (CSSD) is available with running water facility			1
	3.1.1.2	There are separate rooms designated for dirty utility, cleaning, washing and drying and sterile area for sterilizing, packaging and storage			1
3.1.2 Staffing	3.1.2	Separate staffs assigned for CSSD and is led by CSSD trained personal			1
3.1.3 Equipment and supplies for CSSD	3.1.3	Equipment and supplies for sterilization available and functional round the clock (See Annex 3.1a CSSD Equipment and Supplies At the end of this standard)			3
3.1.4 Preparing consumables	3.1.4	Wrapper, gauze, cotton balls, bandages are prepared.			1
3.1.5 Preparing for sterilization	3.1.5.1	All used instruments are cleaned using brush chemical/detergents in a separate room.			1
	3.1.5.2	All instruments and equipment are dried in a separate place			1
	3.1.5.3	All instruments are packed in double wrappers			1
3.1.6 Sterilization	3.1.6	All wrapped instruments are indicated with thermal indicator and autoclaved in a separate room.			1
3.1.7 Storage	3.1.7	All sterile packs with sticker of sterilization date are stored in separate cupboards			1
3.1.8 Collection and Distribution	3.1.8.1	System for single door collection and different route for distribution of the sterile supply exist and is practiced			1
	3.1.8.2	Sterile supplies are distributed using basket supply system or on-demand supply system			1
3.1.9 Inventory	3.1.9	All instruments and wrappers are recorded and inventory maintained			1
3.1.10 Infection prevention	3.1.10.1	Staffs use personal protective equipment at work			1
	3.1.10.2	There are well labelled colored bins for waste disposal based on HCWM[1] guideline 2014 (MoHP)			1
	3.1.10.3	Hand-washing facility with running water and liquid soap is available and being practiced.			1
	3.1.10.4	Chlorine solution is available and utilized for decontamination			1
Standard 3.1	Total Score				19
	Percentage = Total Score / 19 x 100				

Annex 3.1a CSSD Equipment and Supplies

SN	Items	Required No.	Self	Joint
1.	Working Table	3		
2.	Trolley for Transportation	2		
3.	Steel Drums	10		
4.	Storage Shelves	2		
5.	Autoclave Machine (250 liter, pre-vacuum, with horizontal outlet)	2		
6.	Double Wrappers	As per need		
7.	Timer	2		
8.	Thermal Indicator Tape	As per need		
9.	Cap, Mask, Gown, Apron	As per need		
10.	Gloves	1 box		
11.	Cotton Rolls	As per need		
12.	Cotton Gauze	As per need		
13.	Scissors	2		
14.	Gauze cutter	2		
15.	Buckets	5		
16.	Scrub Brush	As per need		
17.	Hamper bag (cloth sack for collection of wrappers)	As per need		
Total Score				
Total Percentage = Total Score/17 X 100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 3.1.3	

Area	Code	Verification			
Laundry	3.2				
Components		Standards	Self	Joint	Max Score
3.2.1 Space	3.2.1.1	Separate laundry room is available.			1
	3.2.1.2	Separate space allocated for clean and dirty linens			1
3.2.2 Staffing	3.2.2	There is a special schedule for collection and distribution of linens with visible duty roster for staffs			1
3.2.3 Equipment/ Supplies	3.2.3	Adequate equipment and supplies are available for laundry (See Annex 3.2a Equipment and Supplies for Laundry At the end of this standard).			3
3.2.4 Segregation and decontamination of linens	3.2.4.1	Linens are segregated (soiled, unsoiled, colorful, white, blood stained) before wash			1
	3.2.4.2	Separated linens are decontaminated before wash			1
3.2.5 Cleaning	3.2.5	All linens are washed using a washing machine.			1
3.2.6 Drying	3.2.6.1	Space available for drying linens like blankets in direct sunlight.			1
	3.2.6.2	Linen dryer is available and used			1
3.2.7 Packing	3.2.7	All linens are ironed and packed properly.			1
3.2.8 Storage	3.2.8	Linens are properly stored in separate cupboard.			1
3.2.9 Distribution	3.2.9	All linens are distributed using a proper method (basket supply system and on-demand supply system).			1
3.2.10 Inventory	3.2.10	All linens are recorded and inventory maintained.			1
3.2.11 Infection prevention	3.2.11.1	Staff wear mask and gloves at work.			1
	3.2.11.2	There are well labelled colored bins for waste disposal based on HCWM[1] guideline 2014 (MoHP)			1
	3.2.11.3	Hand-washing facility with running water and soap is available and being practiced.			1
	3.2.11.4	Chlorine solution is available and utilized for decontamination			1
Standard 3.2	Total Score				19
	Percentage = Total Score/ 19 x 100				

Annex 3.2a Equipment and Supplies for Laundry

SN	List of equipment and supplies	Required No.	Self	Joint
1.	Working table	1		
2.	Ironing Table	1		
3.	Storage Shelves	2		
4.	Trolley for Transportation	2		
5.	Washing Machine (at least 10 kg capacity with semi/full dryer)	2		
6.	Iron Machine	1		
7.	Buckets/ Basins	5		
8.	Stirrer (wooden)	2		
9.	Boots	2 pairs		
10.	Cap, Mask, Gowns	As per need		
11.	Ropes (for drying)	As per need		
12.	Scrub Brush	As per need		
13.	House/ Utility Gloves	As per need		
14.	Washing Powder	As per need		
15.	Chlorine Liquid/ Powder	As per need		
Total Obtained Score				
Total Percentage = Total Obtained Score/15 X 100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 3.2.3	

Area	Code	Verification			
Housekeeping	3.3				
Components		Standards	Self	Joint	Max Score
3.3.1 Space for storage	3.3.1	Separate space is allocated for storage of the housekeeping basic supplies			1
3.3.2 Staffing	3.3.2.1	Allocation of the staff for cleaning with visible duty roster			1
	3.3.2.2	There is checklist of cleaning in each department with contact number of assigned working personnel			1
3.3.3 Basic Supplies	3.3.3	Basic supplies are available (See Annex 3.3a Housekeeping Basic Supplies At the end of this standard)			3
3.3.4 Cleaning	3.3.4.1.1	The hospital premises are visibly clean and dust free			1
	3.3.4.1.2.1	All hospital toilets are clean with no offensive smell			1
	3.3.4.1.2.2	All toilets are cleaned at least three times a day			1
	3.3.4.3	All doors and windows of hospital are dust-free and cleaned once a day.			1
	3.3.4.4	All floors of the hospital are clean and cleaned at least twice a day (like- before registration in morning and after OPD closes)			1
	3.3.4.5	All walls of the hospital are clean and are tiled or painted with enamel up to 4 feet			1
	3.3.4.6	Every ward/unit must have high wash twice a month and fumigation as per need			1
3.3.5 Drainage of chlorine solution	3.3.5	Separate drainage system or pit is maintained for drainage of chlorine solution			1
3.3.6 Garden	3.3.6	Garden and trees should cover at least 25% of the hospital premises			1
Standard 3.3		Total Score			15
		Percentage = Total Score / 15 x 100			

Annex 3.3a Housekeeping Basic Supplies

SN	General Items	Required No.	Self	Joint
1.	Working Table and Chair	1		
2.	Telephone	1		
3.	Housekeeping Storage Room	1		
4.	Shelves	2		
5.	Cupboards	2		
6.	Log Book for Records	1		
7.	Vacuum Cleaner	1		
8.	Sickle	As per need		
9.	Spade	As per need		
10.	Shovel	As per need		
11.	Ropes	As per need		

12.	Scrub Brush	As per need		
13.	Broom	As per need		
14.	Buckets	As per need		
15.	Jars	As per need		
16.	Sprinkle Pipe	As per need		
17.	Soaps	As per need		
18.	Washing Powder	As per need		
19.	Additional Bed Covers for Replacement	As per need		
20.	Additional Pillow	As per need		
21.	Pillow cover	As per need		
22.	Blankets	As per need		
23.	Personal Protective Items	As per need		
24.	Window screens (jaali)	In all windows		
25.	Mosquito nets	As per need		
26.	Flower Pots	As per need		
Total Score				
Total Percentage = Total Score/26 X 100				

Each row gets a score of 1 if all the required number is available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 3.3.3	

Area	Code	Verification			
Repair, Maintenance and Power system	3.4				
Components		Standards	Self	Joint	Max Score
3.4.1 Staffing	3.4.1.1	Human resource trained in biomedical engineer is designated for repair and maintenance			1
	3.4.1.2	Staffs assigned to cover 24 hours shift with visible duty roster for staffs.			1
3.4.2 Preventive Maintenance	3.4.2.1	Hospital has regular preventive maintenance practices (calibration, servicing of equipment) and corrective maintenance)			1
	3.4.2.2	Biomedical equipment inventory of all equipment and instrument is updated			1
	3.4.2.3	Separate room for storage of repairing tools and instrument			1
	3.4.2.4	Availability of spare parts for repair and maintenance of biomedical equipment and instruments			1
	3.4.2.5	Record keeping of repair and maintenance of biomedical equipment and instruments			1
	3.4.2.6	Specification of annual maintenance cost of major equipment			1
3.4.3 Availability of power sources	3.4.3.1	Hospital has main-grid power supply with three-phase line			1
	3.4.3.2	Hospital has alternate power generator capable of running x-ray and other hospital equipment			1
	3.4.3.3	Proper inventory of fuel is maintained.			1
	3.4.3.4	Hospital has solar system installed (at least for essential clinical services and administrative function).			1
Standard 3.4		Total Score			12
		Percentage = Total Score / 12 x 100			

Area	Code	Verification			
Water supply	3.5				
Component		Standards	Self	Joint	Max Score
3.5.1 Water supply	3.5.1	There is regular water supply system – boring or well or from drinking water supply dedicated for hospital			1
3.5.2 Water Storage	3.5.2.1	Water storage tank is covered to prevent contamination and cleaned on a regular basis			1
	3.5.2.2	Water storage tank has the reserve capacity to supply water for two full days in case of interruptions in main water supply			1
3.5.3 Water quality	3.5.3	Water quality test is done every year and report is available as per Nepal Drinking Water Quality Standards, 2005			1
Standard 3.5		Total Score			4
		Percentage = Total Score / 4 x 100			

Area	Code	Verification			
Hospital Waste Management	3.6	Verification			
Components		Standards	Self	Joint	Max Score
3.6.1 Work plan prepared and implemented	3.6.1	There is work plan prepared and implemented by hospital for hospital waste management			1
3.6.1 Staffing	3.6.2.1	There is allocation of staff for HCWM from segregation to final disposal			1
	3.6.2.2	Whole site coaching/ orientation on health care waste management is done			1
3.6.3 Space	3.6.3	There is separate area/space designated for solid waste storage and management with functional hand washing facility			1
3.6.4 Segregation of waste on collection	3.6.4	Different colored bins (for risk and non-risk waste) are used during collection of waste			1
3.6.5 Personal protection	3.6.5	Staff use cap, mask, gloves, boot, and gown while collecting waste.			1
3.6.6 Public information	3.6.6	Information regarding proper use of waste bins is displayed publicly and basic information of HCWM is displayed in hospital premises			1
3.6.7 Medication trolley with waste segregation buckets	3.6.7	Medication trolley has well labeled buckets for segregation of waste during procedures			1
3.6.8 Transportation of waste within the hospital	3.6.8	Hospital uses transportation trolleys separate for risk and non-risk waste			1
3.6.9 Disposal and recycle/reuse of waste	3.6.9.1	Infectious waste is sterilized using autoclave before disposal			1
	3.6.9.2	Collection of recyclable/reusable items such as plastic bottles, paper, decontaminated sharps is practiced and sold to vendor/municipality			1
	3.6.9.3	Composting of bio-degradable waste is practiced			1
	3.6.9.4	Collection of waste by the local municipality/ rural municipality after sterilization /decontamination			1
	3.6.9.5	Placenta pit used for disposal of human anatomical waste such as placenta, human tissue			1
	3.6.9.6	Biogas plant in place and energy generated used for hospital support services			1
3.6.10 Pharmaceutical and radiological waste management	3.6.10	Pharmaceutical waste and radiological waste treated and disposed based on the HCWM guideline 2014 (MoHP)			1
3.6.11 Liquid waste management	3.6.11	Hospital liquid waste management is done			1
Standard 3.6		Total Score			17
		Percentage = Total Score / 17 x 100			

Area	Code	Verification			
Safety and Security	3.7				
Component		Standards	Self	Joint	Max Score
3.7.1 Staffing of security personnel	3.7.1.1	Hospital has trained security personnel round the clock.			1
	3.7.1.2	All security staffs are oriented with hospital codes like 001- call for help for crashing patients, 007- call for disaster in ER			1
	3.7.1.3	All security staffs have participated in emergency drills			1
3.7.2 Office space allocated for security personnel	3.7.2	A separate office for security with communication system is available			1
3.7.3 Amenities	3.7.3	Basic amenities for safety and security are available (See Annex 3.7a Safety and Security Basic Amenities Section At the end of this standard)			3
3.7.4 Patient safety	3.7.4	The hospital has replaced all mercury apparatus with other appropriate technologies.			1
3.7.5 Continuous surveillance of hospital premises	3.7.5	CCTV coverage of major areas and control under Medical Superintendent and security in-charge			1
3.7.6 Hospital has disaster mitigation system	3.7.6.1	The hospital has fire extinguisher in all blocks including the fire extinguishing system			1
	3.7.6.2	The hospital has installed safety alarm system including smoke detector			1
	3.7.6.3	The hospital has prevented lightening by ensuring earthing system in electrification.			1
	3.7.6.4	Disaster preparedness orientation has been given to all staff at least every six months.			1
	3.7.6.5	Exit signs are displayed to escape during disaster in all departments and wards			1
	3.7.6.6	An assembly zone has been specified for disaster			1
	3.7.6.7	Hospital has functional rapid response team			1
	3.7.6.8	Medicine stock for post disaster response is available			1
Standard 3.7	Total Score				17
	Percentage = Total Score / 17 x 100				

Annex 3.7a Safety and Security Basic Amenities

SN	General Items	Required No.	Self	Joint
1	Flash light	1		
2	Whistle	1		
3	List of Important Phone Numbers	1		
4	Key Box	1		
5	Emergency Alarm	1		
6	Fire extinguisher at least one in each block	1		
Obtained Score				
Total Percentage = Total Score/6 X 100				

Each row gets a score of 1 if all the mentioned items are available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 3.7.3	

Area	Code	Verification			
Transportation and Communication	3.8				
Components		Standards	Self	Joint	Max Score
3.8.1 Transportation	3.8.1.1	24-hour ambulance service is available.			1
	3.8.1.2	Hospital has its own well-equipped ambulance at least 2			1
	3.8.1.3	The hospital has access to utility van			1
3.8.2 Communication	3.8.2.1	The hospital has telephone with intercom (EPABX) network.			1
	3.8.2.2	Internal communication (paging) system has been installed in all major service stations.			1
	3.8.2.3	A notice board is available and being utilized.			1
	3.8.2.4	List of important phone numbers including emergency contacts like ambulance, fire brigade, blood banks, hospital administration, hospital staffs is available in the reception, emergency and administration office			1
	3.8.2.5	There should be a public contact or information center in prime location of hospital with 24 hours staff availability			1
Standard 3.8		Total Score			8
		Percentage = Total Score / 8 x 100			

Area	Code	Verification			
Store (Medical and Logistics)	3.9				
Components		Standards	Self	Joint	Max Score
3.9.1 Space	3.9.1	Separate space allocated for store for hospital- medicine and logistics			1
3.9.2 Buffer stock in medical store	3.9.2.1	A separate hospital medical store with 3 months' buffer stock is available			1
	3.9.2.2	Minimum and Maximum stock levels for each item are calculated and used when re-ordering stock			1
3.9.3 Inventory	3.9.3.1	Electronic database system is used in the hospital medical store.			1
	3.9.3.2	Hospital submits quarterly reports to LMIS utilizing either paper report or web-based (eLMIS-7)			1
3.9.4 Disposal of expired medicine	3.9.4	Disposal of expired medicine as per HCWM guideline 2014 (MoHP) is practiced in every six month			1
3.9.5 Auction of logistics	3.9.5	Auction of identified old logistics is done annually			1
Standard 3.9		Total Score			7
		Percentage = Total Score / 7 x 100			

Area	Code	Verification			
Components		Standards	Self	Joint	Max Score
Hospital Canteen and Dietetics	3.10				
3.10.1 Time for patients/ visitors and staff	3.10.1	Hospital has canteen in its premises with 24 hours service			1
3.10.2 Information to patients/ visitors and staffs	3.10.2	A list of food items with price list approved by Hospital Management Committee is available			1
3.10.3 Physical facilities	3.10.3.1	Visibly clean floors and space allocated for cooking, cleaning and storage of stock			1
	3.10.3.2	Light and ventilation are adequately maintained.			1
	3.10.3.3	All walls of the canteen are clean and are tiled or painted with enamel up to 4 feet			1
	3.10.3.4	Safe drinking water is available 24 hours			1
3.10.4 Uniform for canteen staffs	3.10.4	Dress code is maintained			1
3.10.5 Food for inpatients	3.10.5	The inpatients who are identified needy or covered by SSU are provided with food at least four times a day and the food contains carbohydrate, fats, proteins and at least one vegetable item			1
3.10.6 IEC/ BCC materials	3.10.6	Appropriate IEC/ BCC materials (posters, leaflets, television) are available in the canteen for balanced diet			1
3.10.7 Facilities for staffs, patients and visitors	3.10.7	Comfortable space with sitting arrangement is available for at least 50 people			1
3.10.8 Infection prevention and food hygiene	3.10.8.1	Separate area designated for washing dishes and visibly clean.			1
	3.10.8.2	There are colored bins for waste segregation and disposal based on HCWM guideline 2014 (MoHP)			1
	3.10.8.3	Hand-washing facility with running water and soap is available			1
	3.10.8.4	Mesh/ net to cover food and refrigerator used to store food used to cover food			1
	3.10.8.5	Rat proofing and daily scrubbing of the canteen is done			1
	3.10.8.6	Use of refrigerator for storage of food			1
Standard 3.10	Total Score				16
	Percentage = Total Score / 16x 100				

Area	Code	Verification			
Social Service Unit	3.11				
Components		Standards	Self	Joint	Max Score
3.11.1 Time for patients	3.11.1.1	SSU open from 8am to 7pm			1
	3.11.1.2	Management committee to manage 24 hours SSU services for patients			1
3.11.2 Physical facilities for SSU services	3.11.2	Separate space allocated for SSU is accessible to patients (See Annex 3.11a Physical Facilities SSU At the end of this standard)			3
3.11.3 Staffing	3.11.3	Allocation of staffs for SSU under unit chief a team of 2 to 10 facilitators			1
3.11.4 Identify and display target group and services covered	3.11.4	Refer to 'deprived citizen treatment fund guideline 2071' to identify target group, and display target group and services covered			1
3.11.5 Referral mechanism in place	3.11.5.1	Referral of patients based on treatment protocol			1
	3.11.5.2	Documentation of referral based on 'deprived citizen treatment fund guideline 2071'			1
	3.11.5.3	SSU allocates fund for transportation for referral			1
3.11.6 Recording and reporting	3.11.6.1	Meetings of SSU every two months to review and discuss problems			1
	3.11.6.2	Daily display of names of persons receiving free and partially free services from the unit			1
	3.11.6.3	Record information on free and partially free service recipients on the formats to records section of the concerned hospital			1
	3.11.6.4	Prepare and submit monthly, trimester and annual report to concerned authority			1
Standard 3.11		Total Score			14
		Percentage = Total Score / 14 x 100			

Annex 3.11a Physical Facilities SSU

SN	General Items	Required No.	Self	Joint
1.	Separate space for SSU	Available		
2.	Desk	2		
3.	Chairs	3		
4.	Cupboard to keep clients' information with filing cabinet	1		
5.	Recording and reporting forms	as per need		
6.	Telephone	1		
7.	Computer and printer	1		
Total Score				
Percentage= Total Score / 7x 100				

Each row gets a score of 1 if all the mentioned items are available otherwise 0.

Scoring Chart	
Total Percentage	Score
0-50	0
50-70	1
70-85	2
85-100	3
Score for Standard 3.11.2	0