

SUMMARY SHEET (PRIMARY HOSPITALS)

Province :

Hospital Name:

Date of Assessment :

Reason:

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: Governance and Management Standards		105	109		
SECTION II:	Clinical Management (60% Weightage)				
2.1	OPD Service	28	60		
2.2	Special Clinic	67	74		
2.3	Emergency Service	35	41		
2.4	Dressing Injections and Procedures Room	12	20		
2.5	Pharmacy Service	36	40		
2.6	Inpatient Service (General Ward)	28	34		
2.7	Delivery Service	33	39		
2.7	Maternity Inpatient Services (General Ward)	27	33		
2.8	Surgery/ Operation Service	42	58		
2.9	Diagnostic and Laboratory Services	66	70		
2.10	Dental Services	18	22		
2.11	Post-Mortem and Mortuary Service	14	16		
2.12	Medico-legal Services	11	13		
SECTION II: Clinical Service Management Standards		418	520		
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	16	16		
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	15	15		
SECTION III: Hospital Support Services Standards		124	132		
Total		647	761		

Section I: Governance and Management Standards

Area	Code	Verification			
Governance	1.1				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
	1.1.4.2.7	Review of decisions and recommendations of staff meeting and QI Committee meetings discussions			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 Surakhnya 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 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			1
Standard 1.1	Total Score				27
	Percentage = Total Score / 27 x 100				

Area	Code	Verification			
Organizational Management	1.2				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 / 15 x 100			

Area	Code	Verification			
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
Human Resource Management and Development	1.3				
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 (□□□ □□□□□ □□□□) 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 (□□. □. □□.) 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 space designated for 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 1.3 a : Functional Organogram (Standard 1.3.3.1)

Functional Organogram for Primary Hospitals			Self-Assessment	Joint Assessment	Maximum Score
SN For Governance and Management					
1	Medical Superintendent	1			1
2	Hospital Management officer	1			1
3	Information officer	1			1
4	Medical recorder	1			1
5	Accountant for hospital financial management	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			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 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)			1
11	Pharmacist	At least one pharmacists is available At least one assistant pharmacist and one helper in each shift with monthly duty roster to provide 24 hour pharmacy service			1
12	Nursing and support staff for inpatient services 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 ne ASBA trained medical officer on duty and one office assistant are available in each shift			1
14	Surgery team per surgery	MDGP with one trained medical officer, two OT trained nursing/ one anesthesia assistant supervised by MDGP or anesthesiologist and one office assistant			1
15	Laboratory	At least 2 medical technologists available and 3 lab staffs (1 Lab Technician, 1 Lab Assistant and 1 Helper) in each shift			1
16	X-ray	At least 2 staff-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 Hygienist/Dentist: OPD Patients- 1:20 per day for quality of care			1
19	Mortuary and medico-legal service	Trained medical officer for mortuary and medico-legal service at least one			1

For Hospital Support Services					
20	CSSD	Separate staffs assigned for CSSD under leadership of trained personal			1
21	Laundry and housekeeping	There is a special schedule for collection and distribution of linens with visible duty roster for staff's laundry and housekeeping			1
22	BMET	Human resource trained in BMET or DBEE is designated for maintenance and repair of medical equipment			1
23	Security	The hospital has trained security personnel round the clock.			1
				Total Score	23
				Total Percentage = Total Score/ 23 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 1.3.3.1	

Area	Code	Verification			
Financial Management	1.4				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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			
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
1.5.1 Managing medical records and use of electronic database	1.5.1.1	Client registration is digitalized 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 / 14 x 100			

Area	Code	Verification			
Quality Management	1.6				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
1.6.1 Hospital QI Committee	1.6.1.1	Hospital QI committee is formed according to 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, 70-90% = 2, 90-100% =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			

Section II: Clinical Service Management Standards

Area	Code	Verification			
OPD Service	2.1				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 2 PM 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 (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	At least 3 rooms with adequate space for the practitioners and patients are dedicated for OPD services			1
	2.1.5.2	Among OPD rooms at least one room is dedicated for maternity services			1
	2.1.5.3	Light and ventilation are adequately maintained (See Checklist 2.1 At the end of this standard for scoring)			3
	2.1.5.4	Required furniture, supplies and space are available			
	2.1.5.4.1	General Medicine OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3
	2.1.5.4.2	Obstetrics/Gynecology OPD (See Annex 2.1a Furniture and supplies for OPD At the end of this standard)			3
	2.1.5.4.3	General Surgery 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 Medicine OPD (See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
	2.1.6.2	Obstetrics/Gynecology OPD (See Annex 2.1b Basic Equipment and Instrument for OPD At the end of this standard)			3
	2.1.6.3	General Surgery 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 50 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 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 and 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			60
		Percentage = Total Score/ 60 x100			

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

Code	Standards	Score						Direction to use
		1	2	3	Total Score	%	Score	
2.1.1.1	OPD is open from 10 AM to 3 PM							Go to standard 2.1.1.2
2.1.3	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients)							Go to standard 2.1.4
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
2.1.5.3	Light and ventilation are adequately maintained							Go to standard 2.1.5.4
2.1.9	OPD register available in every OPD and ICD 11 classification for diagnosis recorded (electronic health recording system)							Go to Standard 2.1.10.1
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 labeled 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 obtained 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 and to the space of obtained marks of respective standards

Annex 2.1 a: Furniture and Supplies for OPD

SN	General Items	Required No.	Score		
			General Medicine	Obstetric/ Gynecology	General Surgery
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					
Maximum score			8	8	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 2.1.5.4.1	
Score for Standard 2.1.5.4.2	
Score for Standard 2.1.5.4.3	

Annex 2.1 b: Basic Equipment and Instruments for OPD

SN	Basic equipment and instruments	Required No.	Score		
			General Medicine	Obstetric/ Gynecology	General Surgery
1	Stethoscope	1 for each practitioner			
2	Sphygmomanometer* (non-mercury)(*Both adult and pediatric size in medicine and surgery 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 or VIA materials)	1			
16	Betadine/Swab	1			
17	Fetoscope	1			
18	Abdominal drape for patients	As per need			
Total score					
Maximum score			13	16	13
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	

Area	Code	Verification			
Special Clinics	2.2				
Immunization and Growth Monitoring Clinic	2.2.1				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
	2.2.1.4.2	Appropriate IEC/BCC materials on vaccine, schedule and child growth and nutrition are available in clinic			1
2.2.1.5 Instrument, equipment and supplies available	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	Adverse immunization reactions, 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 labeled 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
		Percentage = Total Score/ 17 x100			

Annex 2.2.1 a: Instruments, equipment and Supplies for Immunization and Growth Monitoring (Standard 2.2.1.5)

SN	Name	Required Quantity	Score	Max Score
1	Weighing scale (Infantometer and Secca Scale)	At least one each		1
2	Stadiometer	At least one		1
3	MUAC tape	2		1
4	Cold chain box set	At least one set		1
5	Vaccines as per national protocol	At least two vial/ampule each		1
6	Different size syringe for immunization (1,2,3,5,10 ml)	At least 10 each		1
7	Cotton in swab container	As per needed		1
8	Container for clean water	As per needed		1
Total score				8
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	Verification			
Special Clinics	2.2				
Family planning Clinic	2.2.2				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 family planning 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 labeled 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
		Percentage = Total Score/ 19 x100			

Annex 2.2.2 a : Supplies for Family Planning (Standard 2.2.2.6)

SN	Name	Required Quantity	Self-Assessment	Joint Assessment	Max Score
1	Condoms	As per needed			1
2	Combined oral contraceptive pills	As per needed			1
3	IUD	As per needed			1
4	IUD Insertion and removal Set	At least 2			1
5	Implants	As per needed			1
6	Implants insertion and removal set	At least 2			1
7	Injection Depo provera	As per needed			1
8	Emergency contraceptive pills	As per need			1
9	Sterile surgical gloves (different sizes)	2-3			1
Total score					9
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			
Special Clinics	2.2				
ATT, ART clinic	2.2.3				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
	2.2.3.4.2	Appropriate IEC/BCC materials on TB, HIV/AIDS (posters, leaflets) are available in the OPD waiting area.			1
2.2.3.5 Medicine available	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 labeled 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
		Percentage = Total Score/ 18 x100			

Area	Code	Verification			
Special Clinics	2.2				
Safe Abortion Services	2.2.4				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
	2.2.4.3.1	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, equipment and Supplies available	2.2.4.7.1	Instruments, equipment and supplies for Safe Abortion Services available (See Annex 2.2.4 a Instruments, equipment 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

2.2.4.9 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			20
		Percentage = Total Score/ 19 x100			

Annex 2.2.4 a : Instruments, equipment and supplies for Safe Abortion services

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

22	Antibiotics (Injection Metronidazole 500mg/100ml, Tab Azithromycin 500mg)	As per need			1
23	Uterotonics (Injection Oxytocin, Tablet Misoprotol, Injection ergometrine)	As per need			1
24	Injection Xylocaine 1% /2% without adrenaline	2 vail each			1
25	Injection Atropine	10 ampules			1
26	Injection Adrenaline	10 ampules			1
27	Injection Hydrocortisone	At least 3 vail			1
28	Injection Dexamethasone	At least 3 vail			1
29	Distilled Water (100ml)	At least 2 bottles			1
30	Gloves (disposable) for P/V examination	At least 2 box			1
31	Surgical gloves different size	At least 2 each			1
32	Betadine Solution	At least 1 bottle			1
33	Disposable syringes 2 ml, 5 ml, 10 ml, 20 ml	At least 5 each			1
34	ET tubes of different size	At least 2 of each size			1
35	IV fluids (Normal Saline 0.9%, Ringers; Lactate, Dextrose 5% Normal Saline 0.9%)	At least 5 each			1
36	IV Infusion set	At least 5			1
37	IV canula (18 Gz, 20Gz)	At least 2 each			1
38	Foley's catheter and Urobag,	At least 2 set			1
39	Sutures of different size	At least 5 each			1
40	Soft brush for cleaning equipments	At least 2			1
41	Bucket or Basin	2-3 each of different size			1
42	IP flex available for processing MVA aspirator and cannula	One			1
Total score					42
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 (ER) Service	2.3				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 ER beds (Doctor on duty: Nurse: Paramedics: Office Assistant = 1:1:1:1)			1
	2.3.2.2	The doctor, nurse and paramedics should take 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) (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 labeled 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 carries out at least one mock drill and disaster preparedness once a year			1
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 during work			1
	2.3.16.2	There are clearly labeled 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			41
		Percentage = Total Score/ 41 x100			

* If less than 5 ER bed, same ratio of health workers is needed; doctor can be on call

[\[1\]PTC- Primary Trauma Care, ETM- Emergency Trauma Management, BLS- Basic Life Support, ACLS- Advanced Cardiac Life Support](#)

Annex 2.3 a : Furniture and General Supplies for ER

SN	Furniture and General Supplies	Required Quantity	Self-Assessment	Joint Assessment	Max Score
1	Wheel chair	2 for every 5 ER beds			1
2	Trolley	1 for every 5 ER beds			1
3	Stretcher	1 for every 5 ER beds			1
4	Information board	1			1
5	Foot Step	2 for every 5 ER beds			1
6	Working Table/Station with 2 chairs	1			1
7	Stool (for visitor) each bed	1			1
8	Medicine Rack	1			1
9	Supplies Rack	1			1
10	Waste Bins (color coded and labelled as per HCWM guideline)	1 set for every 5 ER beds			1
11	Poisoning Chart	1			1
12	Telephone set/Mobile	1			1
13	Reference Books with cupboard	1			1
14	Cup Board for narcotics	1			1
15	Screen	As per need			1
16	Cart/Trolley with medicines for emergency procedures	1			1
17	IV stand	At least one per bed			1
18	Bed Pan	2 for every 5 bed			1
19	Urinal	2 for every 5 bed			1
Total Score					19
Total Percentage =Total Score/19 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 2.3.3.2	0

Annex 2.3 b : ER Equipment and Instrument

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

29	Ear Irrigation Set	1		1
30	Cervical collar	4		1
31	Spinal backboard	1		1
32	Splints	3		1
33	Arm Slings	3		1
34	Portable Light	2		1
Total Score				34
Total Percentage =Total Score/34X 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 2.3.4	

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

SN	Name	Self-Assessment	Joint Assessment	Max Score
1	Atropine Injection			1
2	Adrenaline Injection			1
3	Xylocaine 1% and 2% Injections with Adrenaline			1
4	Xylocaine 1% and 2 % Injections without Adrenaline			1
5	Xylocaine Gel			1
6	Diclofenac Injection			1
7	Hyoscine Butylbromide Injection			1
8	Diazepam injection			1
9	Morphine Injection / Pethidine Injection			1
10	Hydrocortisone Injection			1
11	Antihistamine Injection			1
12	Dexamethasone Injection			1
13	Ranitidine/Omeperazole Injection			1
14	Frusemide Injection			1
15	Dopamine injection			1
16	Noradrenaline injection			1
17	Digoxin injection			1
18	Verapamil injection			1
19	Amidarone injection			1
20	Glyceryl trinitrate injection/ tab			1
21	Labetolol injection			1
22	Magnesium Sulphate injection (Loading dose)			1
23	Sodium bicarbonate injection			1
24	Calcium Gluconate injection			1
25	Ceftriaxone Injection			1
26	Metronidazole Injection			1
27	Charcoal Power			1

28	Normal Saline Injection			1
29	Ringers' Lactate Injection			1
30	Dextrose 5% Normal Saline Injection			1
31	Dextrose 5% Injection			1
32	Dextrose 25%/50% Injection (ampoule)			1
33	IV Infusion set (Adult/Pediatric)			1
34	IV Canula (16, 18, 20, 22, 24, 26 Gz)			1
35	Foley's Catheter (different French)			1
36	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 20 ml, 50 ml			1
37	Disposable Gloves (Size- 6, 6.5, 7, 7.5)			1
38	Distilled Water			1
39	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)			1
Total Score				39
Total Percentage =Total Score/39 X100				

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 2.3.5.1	

Area	Code	Verification			
Dressing and Injections, Routine Procedures (DIRP)	2.4				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
2.4.1 Working space	2.4.1	A separate room for routine 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 DIRP 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 for DIRP At the end of this standard).			3
2.4.4 Disposable supplies	2.4.4	Medicines and supplies needed for dressing, injection and routine procedures are available (See Annex 2.4c Medicine and Supplies for DIRP At the end of this standard).			3
2.4.5 Sterile supplies	2.4.5.1	Adequate quantity of sterilized packs for wound dressing are available (See Annex 2.4d Sterile Supplies for DIRP 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 2014 (MoHP) 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
		Percentage = Total Score/ 20 x100			

Annex 2.4 a : Furniture and General Supplies for DIRP

SN	General Items	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Treatment Beds (Mattress/ Pillow)	1			1
2	Working Table	1			1
3	Chairs	1			1
4	Bowl with chlorine solution (set)	1			1
5	Bucket with soap water	1			1
6	Needle cutter	1			1
7	Flash light	1			1
8	Portable Lamp	1			1
9	Wall Clock	1			1
Total Score					9
Total 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 2.4.2	

Annex 2.4 b: List of Minimum Services for DIRP

SN	Services/ Procedures Available	Self-Assessment	Joint Assessment	Max Score
1	Simple dressing change			1
2	Skin suture removal			1
3	Splinting			1
4	Multiple wound dressing			1
5	Large wounds requiring padding			1
6	Dressing change under local anesthesia			1
7	Incision and drainage			1
8	Catheterization (insertion and removal)			1
Total Score				8
Total percentage = Total Score / 8 x100				

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 2.4.3	

Annex 2.4 c: Medicines and Supplies for DIRP

SN	Supplies	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Lignocaine Hydrochloride 1%	2-3			1
2	Lignocaine Hydrochloride 2%	2-3			1
3	Lignocaine Hydrochloride 2% with adrenaline	2-3			1
4	Povidine Iodine Solution	2-3			1
5	Hydrogen Peroxide Solution	1			1
6	Cotton bandages	As per need			1
7	Silk 2-0	As per need			1
8	Polypropylene (Prolene) 2-0, 3-0, 4-0	As per need (2-3)			1
9	Catheter of different size	2 of each size			1
10	Sprit	2			1
11	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml	As per need			1
12	Sterile gloves different size	As per need			1
13	Disposable Gloves	As per need			1
14	Masks	As per need			1
Total Score					14
Total Percentage = Total Score/14 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 2.4.4	

Annex 2.4 d: Sterile Supplies for DIRP

SN	General items	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Sterile Dressing Set (must be in wrapper)	5-10			1
2	Sterile Suture Sets (must be in wrapper)	2-3			1
3	Sterile Suture Removal Set (must be in wrapper)	2-3			1
4	Sterile Catheter Set (must be in wrapper)	2-3			1
5	Sterile Cheatle Forceps with Jar	2			1
6	Sterile cotton balls in steel drum	1 drum			1
7	Sterile gauge pieces in steel drum	1 drum			1
8	Sterile gauge pads	1 drum			1
9	Sterile extra instruments in separate tray	As per need			1
Total Score					9
Total 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 2.4.5.1	

Area	Code	Verification			
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
Hospital Pharmacy Service	2.5				
2.5.1 Pharmacy unit available	2.5.1	Hospital has designated pharmacy unit			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	2.5.3.1	Hospital has prepared formulary list based on Nepalese National Formulary (NNF) approved by DTC			1
Heading: Availability of medicines and supplies	2.5.3.2	Hospital pharmacy has all free drugs available round the clock (*refer to free drug list of government for hospitals)			1
	2.5.3.3	Hospital formulary list includes all medicines and supplies as per services provided by hospital			1
	2.5.3.4	Hospital has all, medicines and supplies available as per approved hospital formulary list			1
	2.5.4.1	Annual procurement plan for medicines and supplies for pharmacy services is available			1
2.5.4 Good procurement practice	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 tender document			1
	2.5.4.5	Certificate of analysis (CoA) from manufacturer of each batch of procured medicine is available			1
	2.5.3.4	Selling price of the drugs does not exceed 20% of the procurement price			1
	2.5.4 Pharmacy service hours	2.5.4	The pharmacy is open 24x7		
2.5.5 Staffing as per hospital pharmacy service guideline 2072	2.5.5.1	Pharmacy unit is led by at least one pharmacist			1
	2.5.5.2	Pharmacy has at least one assistant pharmacist and one office assistants in each shift			1
	2.5.5.3	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, 70-90=2 90-100= 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
2.5.12 Pharmacy stock available	2.5.12	Number of items of hospital formulary stocked in pharmacy (less than 50%= 0; 50-70 =1, 70-90=2 90-100= 3)			3
2.5.13 Display and storage of medicines	2.5.13.1	All the medicines and supplies are displayed in clean racks following either alphabetical orders and generic names or grouping as use			1
	2.5.13.2	Temperature of pharmacy is monitored and recorded and is maintained in range of (25+/-2°C)			1
	2.5.13.3	Functional freeze +/-4°C for thermolabile medicine			1
2.5.14 Information to patients	2.5.14.1	Pharmacy department has its allocated separate information and counseling unit with reference books or e-books			1
	2.5.14.2	Information regarding the medicines is provided to the patients.			1
	2.5.14.3	IEC materials (posters, leaflets, national hospital formulary) about the appropriate use for medicines are available in the pharmacy area.			1
2.5.15 Generic prescription	2.5.15	Hospital has pre-printed list of medicines for generic prescription available			1
2.5.16 Dispensing medicines	2.5.16.1	Medicine is dispensed using electronic billing with barcode system			1
	2.5.16.2	Each medicine is given with written instructions on how to take			1
2.5.17 First Expiry First Out (FEFO)	2.5.17	FEFO system is maintained using standard stock book/cards.			1
2.5.18 Pharmacy Inventory	2.5.18	Every month, all medicines and supplies are counted, out- of-date discarded, and tallied with the medical store.			1
2.5.19 Drug utilization review and quantification of data	2.5.19.1	Pharmacy department operates pharmacovigilance activities and adverse drug reaction (ADR) Reporting			1
	2.5.19.2	Pharmacy department conducts studies on drug utilization and quantification			1
2.5.20 Pharmaceutical waste disposal	2.5.20	Pharmaceutical waste (expired or unused pharmaceutical products, spilled contaminated pharmaceutical products surplus drugs, vaccines or sera, etc) management is done based on HCWM guideline or returned to the supplier on time			1
Standard 2.5		Total Score			40
		Percentage = Total Score/40 x100			

Area	Code	Verification			
Inpatient Service (General Ward)	2.6				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
2.6.1 Space for work	2.6.1.1	Separate space for nursing station is available in each ward			1
	2.6.1.2	Separate changing room available for male and female staffs			1
	2.6.1.3	Separate store room is available			1
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 (See Annex 2.6a Furniture and supplies for inpatient wards at the end of this standard)			3
2.6.3 Medicine and supplies available	2.6.3	Medicine and supplies to carry out the inpatient services are available General 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			1
2.6.5 Nursing and support staff 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) and at least one trained office assistant/ward attendant per shift in each ward			1
2.6.6 Duty rosters	2.6.6	Duty roster of doctors, nurses, paramedics and support staffs kept visibly in nursing station			1
2.6.7 Communication	2.6.7	Telephone facility is available with list of important contact numbers and hospital codes visibly kept			1
2.6.8 Emergency management of inpatients	2.6.8.1	All staffs in wards are trained for BLCS and oriented about emergency code 001 or blue code			1
	2.6.8.2	At least one emergency trolley with emergency medicine available in 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			1
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 general ward			1
	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)			1
	2.6.10.3	Safe drinking water is available 24 hours for inpatients			1
	2.6.10.4	Separate waiting area for visitors			1
	2.6.10.5	Hours/ Time allocated for visitors to meet the inpatients and controlled traffic to prevent cross infection			1
	2.6.10.6	Separate space is available for patients' visitors (□□□□□□ □□)			1
2.6.11 Communication	2.6.11	Basic information regarding admitted patients is displayed in a separate board			1
2.6.12 IEC/BCC Materials	2.6.12	Appropriate IEC materials (posters, leaflets etc.) are available in the inpatient ward with focus on infection prevention			1
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)			1
2.6.14 Infection prevention	2.6.14.1	PPE are available and used whenever required			1
	2.6.14.2	Each ward has hand sanitizer in visible place for health workers to use before and after touching patients			1
	2.6.14.3	There are well labeled color-coded bins for waste segregation and disposal as per HCWM guideline 2014 (MoHP)			1
	2.6.14.4	Hand washing facility with running water and liquid soap is available and being practiced			1
	2.6.14.5	Needle cutter is used			1
	2.6.14.6	Chlorine solution is available and utilized for decontamination			1
Standard 2.6		Total Score			34
		Percentage = Total Score/ 34 x100			

Annex 2.6 a : Furniture and Supplies for inpatient wards

SN	General Items	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Working table	1-2			1
2	Chairs	2			1
3	Cup board	2			1
4	Shelves	1			1
5	Bed side table	per bed-1			1
6	Stools (for visitor)	per bed 1			1
7	Patient Beds (Metal bed / adjustable head/ mechanical ratchet, 3 X 6 ft.)	As per sanctioned bed			1
8	IV stand	As per bed			1
9	Medicine trolley	1			1
10	Dressing trolley	1			1
11	Wall Clock	2			1
12	Oxygen Concentrator	1 per 5 bed			1
13	Suction machine (foot/electric)	1			1
14	Laryngoscope with blade and batteries	1			1
15	Self-inflating bag air mask – adult, child, neonate size	1 set			1
16	BP set and stethoscope (Non-Mercury)	2 sets			1
17	Thermometer	3-5			1
18	Baby and adult weighing scale	1 each			1
19	Steel drum with sterile cotton	1			1
20	Steel drum with sterile gauge and pad	1			1
21	Scissors	2			1
22	Cheatle Forceps with Jar	2			1
23	Catheter set	2			1
24	Dressing set	2			1
25	Mattress with bedcover, pillow with pillow cover, blanket with cover	1 set per bed			1
26	Torch with extra batteries and bulb	2-3			1
27	Inpatient register as per ICD code	As per need (1)			1
28	Inventory Records	As per need (1)			1
29	Cardex files	As per bed			1
30	Waste bins color coded based on HCWM	1 set per room			1
Total Score					30
Total percentage= Total Score/30 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 2.6.2	

Annex 2.6 b : Medicine and Supplies for Inpatient Ward

SN	Medicine and supplies	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Normal Saline Injection	15			1
2	Dextrose 5% Injection	15			1
3	Ringers' Lactate Injection	15			1
4	Dextrose 5% Normal Saline Injection	15			1
5	Distilled Water	10			1
6	IV Infusion Set	10			1
7	IV set	5			1
8	IV Canula (16,18,20,22,24,26Gz)	5 each			1
9	Gloves (Utility)	1 box			1
10	Mask, Cap, Gowns	As per need			1
11	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 30 ml, 50 ml	As per need			1
Total Score					11
Total Percentage = Total Score/ 11 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 2.6.3	

Annex 2.6 c: Medicines and Supplies for ER Trolley for Inpatient Ward

SN	Name	Required No	Self-Assessment	Joint Assessment	Max Score
1	Atropine Injection	10			1
2	Adrenaline Injection	3			1
3	Xylocaine 1% and 2% Injections with Adrenaline	2			1
4	Xylocaine 1% and 2 % Injections without Adrenaline	2			1
5	Xylocaine Gel	2			1
6	Diclofenac Injection	5			1
7	Hyoscine Butylbromide Injection	5			1
8	Diazepam injection	2			1
9	Morphine Injection / Pethidine Injection	2			1
10	Hydrocortisone Injection	4			1
11	Antihistamine Injection	4			1
12	Dexamethasone Injection	4			1
13	Ranitidine/Omeperazole Injection	4			1
14	Frusemide Injection	5			1
15	Dopamine injection	2			1
16	Noradrenaline injection	2			1
17	Digoxin injection	2			1
18	Verapamil injection	2			1
19	Amidarone injection	2			1
20	Glyceryltrinitrate injection	1			1
21	Labetolol injection	1			1
22	Sodium bicarbonate injection	2			1
23	Ceftriaxone Injection	4			1
24	Metronidazole Injection	4			1
25	Dextrose 25%/50% ampoule	2/2			1
26	IV Infusion set (Adult/Pediatric)	2			1
27	IV Canula (16, 18, 20, 22, 24, 26 Gz)	2 each			1
28	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 20 ml, 50 ml	5 each			1
29	Disposable Gloves (size 6, 6.5, 7, 7.5)	3 each			1
30	Distilled Water	3			1
31	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)	5			1
Total Score					31
Total Percentage =Total Score / 31 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 2.6.8.2	

Area	Code	Verification			
Maternity Services	2.7				
Delivery Services	2.7.1				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 Patients' 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 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[2] 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* (only for program districts)
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 labeled 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
		Percentage = Total Score/ 39 x100			

[\[1\] IEC/BCC= Information Education and Communication/ Behavior Change Communication](#)

[\[2\] Only for selected remote mountainous area as defined by government](#)

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

SN	Items	Required Number	Self-Assessment	Joint Assessment	Max Score
1	Delivery bed	At least 1 for every 15 beds			1
2	Clean bed linen	Each bed			1
3	Curtains	As per need			1
4	Clean surface (for alternative delivery position)	Available			1
5	Newborn Resuscitation table	1			1
6	Light source	1			1
7	Room Heater	1			1
8	Baby heater	1 per delivery bed			1
9	Refrigerator for labor room	1			1
Equipment and Instruments					
10	BP Set (Non mercury) and Stethoscope	1			1
11	Body Thermometer (Non-mercury)	1			1
12	Room thermometer	1			1
13	Fetoscope	2			1
14	Fetal stethoscope	1			1
15	Baby weighing scale	1			1
16	Self-inflating bag air mask - neonatal size	1			1
17	Mucus extractor with suction tube/(Penguin)	2			1
18	Doppler	1			1
19	Vaginal speculum (Sims)	2			1
20	Neonatal resuscitation kit	1			1
21	Adult resuscitation kit	1			1
22	Sterile Delivery Instrument Set (Check each set)	4 sets per delivery beds			1
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			1
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			1
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			1
26	Forceps set for delivery	1			1
Total Score					26
Total percentage= Total Score/26x100					

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 2.7.1.9.2	

Annex 2.7.1 b: Medicines and Supplies for Labor Room

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

41	Goggles	2			1
42	Container for sharps disposal	1			1
43	Needle cutter	1			1
44	Receptacle for soiled linens	1			1
45	Bucket for soiled pads and swabs	2			1
46	Bucket for placenta (5 ltr.)	2			1
47	Well labelled color-coded bins as per HCWM guideline	1 set			1
48	Wall Clock	1			1
49	Torch with extra batteries and bulb	2-Jan			1
50	Maternity register	2-Jan			1
51	Birth certificate	as per need			1
52	Partograph	as per need			1
Total Score					52
Total percentage= Total Score/52 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 2.7.1.9.3	

Annex 2.7.1 c: Medicines and Supplies for ER Trolley Labor Room

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

31	Disposable Gloves 6, 6.5, 7, 7.5	3 each			1
32	Water for injection 10 ml	10 amp			1
33	Sodium chloride-15%w/v and Glycerin-15% w/v (for enema)	5			1
34	PPH management Set <ul style="list-style-type: none"> (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			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			1
Total Score					35
Total Percentage =Total Score/35X100					

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 2.7.1.9.4	

Area	Code	Verification			
Maternity Services	2.7				
Maternity Inpatient Service	2.7.2				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 postnatal 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 2.7.2 a 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 2.7.2 b medicine and supplies for maternity inpatient wards At the end of this standard)			3
2.7.2.4 Nursing and support staff for maternity inpatient service	2.7.2.4.1	Nurse patient ratio 1:6 per general bed			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 (See Annex 2.7.2 c Medicine and Supplies for ER Trolley for Maternity Inpatient 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	Hand sanitizer is in visible place for health workers to use before and after touching patients			1
	2.7.2.12.3	There are well labeled 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/sharps 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
		Percentage = Total Score/ 33 x100			

Annex 2.7.2 a: Furniture and Supplies for Maternity Inpatient wards

SN	General Items	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Working table	1-2			1
2	Chairs	2			1
3	Cup board	2			1
4	Shelves	1			1
5	Bed side table	per bed-1			1
6	Stools (for visitor)	per bed 1			1
7	Patient Beds (Metal bed / adjustable head/ mechanical ratchet, 3 X 6 ft.)	As per sanctioned bed			1
8	IV stand	As per bed			1
9	Medicine trolley	1			1
10	Dressing trolley	1			1
11	Wall Clock	2			1
12	Oxygen Concentrator	1 per 5 bed			1
13	Suction machine (foot/electric)	1			1
14	Laryngoscope with blade and batteries	1			1
15	Self-inflating bag air mask – adult, child, neonate size	1 set			1
16	BP set and stethoscope (Non-Mercury)	2 sets			1
17	Thermometer (Non-mercury)	3-5			1
18	Baby and adult weighing scale	1 each			1
19	Steel drum with sterile cotton	1			1
20	Steel drum with sterile gauze and pad	1			1
21	Scissors	2			1
22	Cheatele Forceps with Jar	2			1
23	Catheter set	2			1
24	Dressing set	2			1
25	Mattress with bedcover, pillow with pillow cover, blanket with cover	1 set per bed			1
26	Torch with extra batteries and bulb	2-3			1
27	Inpatient register as per ICD code	As per need			1
28	Inventory Records	As per need			1
29	Cardex files	As per bed			1
30	Waste bins color coded based on HCWM	1 set per room			1
Total Score					30
Total percentage= Total Score/30 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 2.7.2.2	0

Annex 2.7.2 b: Medicine and Supplies for Maternity Inpatient Ward

SN	Medicine and supplies	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Normal Saline Injection	15			1
2	Dextrose 5% Injection	15			1
3	Ringers' Lactate Injection	15			1
4	Dextrose 5% Normal Saline Injection	15			1
5	Distilled Water	10			1
6	IV Infusion Set	10			1
7	IV set	5			1
8	IV Canula (16G,18G,20G,22G,24G,26G)	5 each			1
9	Gloves (Utility)	1 box			1
10	Mask, Cap, Gowns	As per need			1
11	Disposable syringes 1 ml, 3 ml, 5 ml, 10 ml, 30 ml, 50 ml	As per need			1
Total Score					11
Total Percentage = Total Score/ 11 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 2.8.3	

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

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

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 2.7.2.7.2	

Area	Code	Verification			
Surgery / Operation Services	2.8				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 two functional operating rooms/theater			1
2.8.2 Staffing	2.8.2.1	For overall management of operation theatre, there is one OT nurse (with minimum bachelors degree) assigned as OT in-charge			1
	2.8.2.2	For one surgery, at least a team is composed of: MDGP with one trained medical officer, two OT trained nursing, one anesthesia assistant supervised by MDGP, two nurses for pre-anesthesia and postsurgical care, and one office assistant (for cleaning and helping)			1
2.8.3 Surgical services available	2.8.3.1	General Surgeries (See Annex 2.8 a List of Minimum Surgeries Available At the end of this standard)			3
	2.8.3.2	Caesarian section			1
	2.8.3.3	Orthopedic Surgeries (See Annex 2.8 b List of Minimum Orthopedics Surgeries Available At the end of this standard)			3
2.8.4 Patient counseling and use of WHO safe surgery checklist	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			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 2.8c 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 2.8d 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 2.8e 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 2.8f Surgical sets for Minimum list of the surgical procedures at the end of this standard)			3
2.8.8.1 Availability of anesthesia service	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 2.8g 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 2.8h 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
	2.8.8.4.2	When anesthesia is provided by non-physician anesthesiologists, these providers should be directed and supervised by anesthesiologists/ MDGP			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

	2.8.9.4	Patient undergoing surgical procedure is done pre- anesthetic check-up, continuously monitored during and at least 2 hours post-anesthesia			1
	2.8.9.5	Adequate information shared for patient care and patient followed by at least one nurse/HA 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 surgery's 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 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 MoHP 2014 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			58
		Percentage = Total Score/ 58 x 100			

Annex 2.8 a: General Surgeries Available

SN	List of the surgeries available (minimum)	Self-Assessment	Joint Assessment	Max Score
Minor				
1	Incision & Drainage under Local Anesthesia			1
2	Excision of cysts, ganglion, lump, lymphnode, lipoma, skin papilloma, corn under LA			1
3	Excision of ingrowing toe nail under digital block			1
4	Wound debridement			1
5	Skin suturing < 5cm size			1
6	Foreign Body removal under LA			1
7	Repair split ear			1
8	True cut biopsy			1
9	Circumcision Under LA			1
10	Haemorrhoid banding			1
Intermediate				
11	Herniotomy under IVA			1
12	Mesh Repair / Darn Repair (under LA/SA)			1
13	Eversion of sac for hydrocele (EVS)			1
14	Chest tube insertion under LA			1
15	Amputation			1
16	Split Skin Graft(SSG) (less than 1% TBSA)			1
17	Large wound dressing / debridement under IVA/SA			1
18	Chest tube insertion under IVA			1
19	Circumcision under IVA			1
20	I & D under IVA eg. Breast abscess, perineal abscess			1
21	Release of tongue tie			1
22	Fistulotomy			1
23	Haemorrhoidectomy			1
24	Vasectomy			1
Major				
25	Exploratory laparotomy			1
26	Appendectomy			1
27	Exploration for obstructed hernia			1
28	Mesh repair incisional hernia			1
29	Minilap			1
30	Vaginal hysterectomy			1
31	Abdominal hysterectomy			1
Total score				31
Total Percentage= Total score/31 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 2.8.3.1	

Annex 2.8 b : Orthopedic Surgeries Available

S.No.	List of the Orthopedic surgeries available (minimum)	Self-Assessment	Joint Assessment	Max Score
1	POP + Immobilization without anesthesia			1
2	POP + cast under anesthesia			1
3	Hip Spica cast			1
4	Joint aspiration			1
5	Skin traction			1
6	Gallows traction			1
7	Skeletal Traction			1
8	Reduction of shoulder, elbow, small joints dislocation			1
9	Reduction of hip and knee dislocation			1
10	Trigger finger Release			1
11	DeQuervain's Release			1
Total score				11
Total Percentage= Total score/11 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 2.8.3.3	

Annex 2.8 c: Physical Set Up for OT

SN	Physical Set Up	Self-Assessment	Joint Assessment	Max Score
1	Separate room designated for OT with recovery room			1
2	Space designated for changing room for male and female staffs separately			1
3	Lockers for storage of the belongings of staffs			1
4	Separate shelves for storage of clean and dirty shoes at the entrance of the OT area demarked with red line			1
5	Space designated with sink facilitated with elbow tap for scrubbing			1
6	Designated space for tea room			1
7	Separate bathroom with at least one universal toilet for OT			1
8	Scrub basins with running water			1
9	Utility basins (at least 4)			1
Total Score				9
Total 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 2.8.7.1	

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

SN	General Equipment and Instruments for OT	Standard Quantity for Each OT Room	Self-Assessment	Joint Assessment	Max Score
1	Wheel chair foldable, adult size	1			1
2	Stretcher	1			1
3	Patient trolley	1			1
4	Cupboards and cabinets for store	1			1
5	Working desk for anesthesia, nursing station, gowning	1 each			1
6	OT Table- universal type/ with wedge to position patient	1			1
7	Radioluscent OT table with orthopedic attachment including C-arm (for orthopedic surgeries)	1			1
8	Flash autoclave (for sterilization of orthopedic sets)	1			1
9	Examining table	1			1
10	Mayo Stand with tray	2			1
11	Operation theatre lights	1			1
12	Ultra violet light source	1			1
13	Electronic suction machine/ Foot-operated suction machine	1/1			1
14	Refrigerator / cold box	1			1

15	Fumigation machine	1			1
16	Anesthesia machine with cardiac monitor	1			1
17	Cautery/Diathermy machine	1			1
18	Oxygen concentrator/ Oxygen Cylinder	1			1
19	Baby warmer	1			1
20	Baby weight machine	1			1
21	Anesthesia trolley	2			1
22	Instrument trolley	2			1
23	BP instrument with stethoscope	1			1
24	Cardiac Monitor	1			1
25	Digital Thermometer	1			1
26	Steel Drum for gloves	1			1
27	Steel Drum for Cotton	1			1
28	Tourniquet, latex rubber, 75 cm	2			1
29	Kidney tray (600cc)	2			1
30	Covered instrument trays	4			1
31	Mackintosh sheet	1			1
32	Lead gown	2 sets			1
33	Bowl stand	2			1
34	Cheatele forceps in jar	2			1
35	Drapes for abdominal site (laparotomy sheet, table cover, hook towel, mayo cover, plastic sheet, tetra)	As per need			1
36	Drapes for perineal region (Laparotomy sheet, table cover, hook towel, mayo cover, plastic sheet, tetra, leggings)	As per need			1
37	Packing towel double wrapper	As per need			1
38	Sterile gloves (6,6.5,7,7.5,8)	5/5/5/5/5/5 each			1
39	Towels/ eye hole	As per need			1
40	Masks and caps	As per need			1
41	Torch light and batteries	1 set			1
42	Foot steps	2			1
43	Wall clock	1			1
44	Waste bucket for scrub nurse	1			1
45	IV stand	2			1
46	Leak proof sharp container	1			1
47	Generator back up for OT	1			1
48	Color coded waste bins (based on HCWM guideline MoHP 2014)	1 set per OT			1
49	OT dress for staffs	At least 5 set			1
50	OT slippers	At least 5 pairs			1
Total Score					50
Total percentage= Total/ 50 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 2.8.7.2	

Annex 2.8 e: Medicine and Supplies for OT

SN	Emergency Drugs (including neonates) for OT	Standard Quantity for 1 patient	Self-Assessment	Joint Assessment	Max Score
1	Midazolam Injection	5 vials			1
2	Hydrocortisone Powder for Injection	2 vial			1
3	Frusemide Injection	2 ampules			1
4	Dopamine Injection	5 vials			1
5	Transemic Acetate Injection	2 ampules			1
6	Hydralazine Injection	5 vials			1
7	Calcium Gluconate Injection	10ml X 2 ampules			1
8	Magnesium sulphate Injection	0.5 gms X 28			1
9	Oxytocin Injection	10 Ampules			1
10	Dextrose (25%) / (50%) Injection	2 ampules each			1
11	Naloxone Injection	1 ampule			1
12	Aminophylline Injection	2 ampules			1
13	Chlorpheniramine Injection	2 ampules			1
14	Mephentine Injection	1 vial			1
15	IV Fluids- Ringers Lactate / Normal Saline/ Dextrose 5% Normal Saline/ Dextrose 5%	6 bottles each			1
16	IV infusion Set	4			1
17	IV Canula 22G/20G/18G	4 each			1
Total Score					17
Total Percentage = Total Score/17 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 2.8.7.3	

Annex 2.8 f: Minimum List of Surgical Sets

S.No.	Items	Required number	Self-Assessment	Joint Assessment	Max Score
1	Catheter set	At least 5			1
2	Suture set	At least 5			1
3	Dressing set of different size (small, medium, large)	At least 2 each			1
4	Incision and drainage set	At least 5			1
5	Appendectomy set	At least 2			1
6	Caesarian section set	At least 5			1
7	Manual Vacuum Aspiration Set with Canulla and Aspirator of different size	At least 2			1
8	Hernia repair set	At least 2			1
9	Laparotomy set	At least 2			1
10	Vasectomy set	At least 2			1
11	Minilap set	At least 2			1
12	Orthopedics Basic Set	At least 2			1
13	K-wire set	At least 2			1
Total Score					13
Total Percentage= Total Score/15x100					

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 2.8.7.4	

Annex 2.8 g: Equipment, Instruments and Supplies for Anesthesia

S.No.	List of equipment, instruments and supplies for anesthesia	Required Number	Self-Assessment	Joint Assessment
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, McCoy'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, un-cuffed, different sizes (Sizes 2.5 - 8.0 ID)	At least two of each size		
6	Intubation aids (Magills forceps 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 self-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 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 2.8.8.2	

Annex 2.8 h: Medicines for Anesthesia

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

31	Dexamethasone injection	5			1
32	Chlorpheniramine injection	5			1
33	Calcium gluconate injection	5			1
34	Beta-blockers (Metoprolol, Labetolol, Esmolol) Injection	As per need			1
35	Naloxone Injection	5			1
Post-operative medications					
36	Morphine Injection	As per need			1
37	Pethidine Injection	As per need			1
38	Tramadol Injection	As per need			1
39	Pentazocine Injection	As per need			1
40	Paracetamol Injection 1gm, Suppository 125mg	As per need			1
41	Diclofenac Injection	As per need			1
42	Ketorolac Injection	As per need			1
43	Promethazine Injection	As per need			1
44	Ondansetron Injection	As per need			1
45	Gabapentin Injection	As per need			1
Other medications					
46	Magnesium Injection	As per need			1
47	Salbutamol Injection (for inhalation)	As per need			1
48	Ipratropium bromide Injection (for inhalation)	As per need			1
49	Furosemide Injection	As per need			1
50	Glyceryl trinitrate/nitroglycerine Injection	As per need			1
51	Sodium nitroprusside Injection	As per need			1
52	Heparin Injection	As per need			1
53	Aminophylline Injection	As per need			1
Total Score					53
Total percentage = Total score/ 53 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 2.8.8.3	

Area	Code	Verification			
Diagnostics and laboratory	2.9				
Laboratory and blood bank	2.9.1				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
2.9.1.1 Time for patients	2.9.1.1.1	Laboratory is open from 10 AM to 3 PM and emergency laboratory services available round the clock			1
	2.9.1.1.2	Basic investigations are available (See Annex 2.9.1a List of investigations for Laboratory At the end of this standard)			3
	2.9.1.1.3	Histopathology service in coordination with other health facilities			1
2.9.1.2 Staffing	2.9.1.2	At least 2 Medical Technologist available and 3 lab staffs (1 Lab Technician, 1 Lab Assistant and 1 Helper) in each shift			1
2.9.1.3 Instruments and equipment	2.9.1.3.1	Instruments and equipment to carry out all parameters of tests are available and functioning (See Annex 2.9.1b Equipment and Instrument for Lab At the end of this standard)			3
	2.9.1.3.2	Instrument are maintained and calibrated as per manufacturer instructions			1
	2.9.1.3.3	Quality control sera and standards are run regularly and record kept			1
2.9.1.4 Physical facilities	2.9.1.4.1	Separate space with working desk and chair designated for specific laboratory procedures like-hematology, biochemistry, microbiology, serology			1
	2.9.1.4.2	Light and ventilation are adequately maintained.			1
	2.9.1.4.3	Designated area well labelled for reception of sample and dispatch of reports			1
2.9.1.5 Duty rosters	2.9.1.5	Duty rosters of lab are developed regularly and available in appropriate location.			1
2.9.1.6 Facilities for patients	2.9.1.6.1	Waiting space with sitting arrangement is available for at least 15 persons in waiting lobby.			1
	2.9.1.6.2	At least one each male, female and universal toilet for patients using laboratory services with running water and wash basin			1
	2.9.1.6.3	Safe drinking water is available in the waiting lobby throughout the day.			1

2.9.1.7 Recording and reporting	2.9.1.7.1	Sample is adequately recorded with requisition form with detail information of patients			1
	2.9.1.7.2	Standard reporting sheets are being used and all reports are recorded in a standard register (HMIS 9.4).			1
	2.9.1.7.3	Report have adequate information of patient and checked by designated person before release			1
2.9.1.8 Supplies storage and stock	2.9.1.8.1	At least three months buffer stock of laboratory supplies is available.			1
	2.9.1.8.2	Reagents are stored at appropriate temperature in store and lab			1
2.9.1.9 Walking Blood Bank available	2.9.1.9	List of donor is available in laboratory for contact during emergency need of the blood			1
2.9.1.10 Infection prevention	2.9.1.10.2	Biohazard signs and symbols are used at appropriate places visibly			1
	2.9.1.10.3	All staffs know how to respond in case of spillage and other incidents			1
	2.9.1.10.4	Masks and gloves are available			1
	2.9.1.10.5	There are colored bins for waste segregation and disposal based on HCWM guideline 2014 (MoHP) and infectious waste is sterilized using autoclave before disposal			1
	2.9.1.10.6	Hand-washing facility with running water and soap is available for practitioners			1
	2.9.1.10.7	Needle cutter is used			1
	2.9.1.10.8	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.1		Total Score			31
		Percentage = Total Score/ 31 x100			

Annex 2.9.1 a: List of Investigations for Laboratory

S.N	Test	Routine	Max Score
Hematology			
1	Hb		1
2	Total Leucocyte count		1
3	Differential leucocyte count		1
4	ESR		1
5	Blood grouping for non transfusion		1
6	Blood grouping for transfusion		1
7	Bleeding time		1
8	PT		1
9	APTT		1
10	Platelet count		1
11	MCV		1
12	MCH		1
13	MCHC		1
14	Hematocrit (PCV)		1
15	Malaria RDT or microscopy		1
16	Absolute count		1
17	Reticulocyte		1
18	Peripheral smear examination		1
Chemistry and Endocrinology			
19	Blood Sugar		1
20	Urea		1
21	Creatinine		1
22	Billirubin total		1
23	Billirubin direct		1
24	Serum Uric acid		1
25	Total Protein		1
26	Serum albumin		1
27	SGOT		1
28	SGPT		1
29	Alkaline phosphatase		1
30	Triglyceride		1
31	Total Cholesterol		1
32	High Density Lipoprotein (HDL)		1
33	Low Density Lipoprotein (LDL)		1
34	Serum sodium		1
35	Serum potassium		1
36	Urine microalbumin		1
Microbiology			
37	Sputum AFB		1
38	KOH mount		1
39	Routine bacteriology culture (blood, urine, pus, body fluid, swab)		1
40	Antibiotic susceptibility		1
41	Gram stain		1

Serology			
42	RPR		1
43	Widal		1
44	ASO		1
45	RA factor		1
46	CRP		1
47	rK39 (kit)		1
48	Montoux test		1
49	TPHA (rapid)		1
50	HbsAg (rapid)		1
51	HCV(rapid)		1
52	HIV(rapid)		1
Miscellaneous			
53	Urine routine and microscopy		1
54	Urine Pregnancy Test		1
55	Stool routine and microscopy		1
56	Stool for occult blood		1
57	Stool for reducing substance		1
58	Urine ketone bodies		1
Total Score			58
Total percentage=Total score/58 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 2.9.1.2	

Annex 2.9.1 b: Equipment and Instrument for Laboratory

S.N.	Name of Instruments	Required Quantity	Self-Assessment	Joint Assessment	Max Score
1	Microscope	3			1
2	Clorimetry	1			1
3	Semi-automated hematology analyser	1			1
4	ELISA/CLIA/ECL	1 for ELISA 2 for others			1
5	Incubator	1			1
6	Biosafety cabinet (for microbiology)	1			1
7	Chemical Balance	1			1
8	Electrolyte Analyzer	1			1
9	Hot air Oven	1			1
10	Refrigerator	1-2			1
11	Centrifuge	1-2			1
12	Counting Chamber	1-2			1
13	DLC counter	1-2			1
14	Pipettes, Glassware/kits	As per need			1
15	Computer with printer	1			1
16	Water Bath	1			1
17	Disposable test tubes	As per need			1
18	Open tubes for sample-hematology, biochemistry	As per need			1
19	Autoclave for waste disposal (250 liter, pre-vacuum with horizontal outlet)	1			1
Total Score					19
Total percentage = Total Score/ 19 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 2.9.1.4	

Area	Code	Verification				
		Components	Std No.	Standards	Self-Assessment	Joint Assessment
X-ray	2.9.2					
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	2.9.2.2.1	Adequate numbers of trained healthcare workers are available in x-ray (at least 2 staffs to cover shifts including ER)			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 tilting table 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	Comfortable 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 Score			19	
		Percentage = Total Score/ 19 x100				

Area	Code	Verification			
Ultrasonography (USG)	2.9.3				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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	Comfortable 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
		Percentage = Total Score/ 12 x100			

Area	Code	Verification			
Electrocardiogram (ECG)	2.9.4				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 Patient counseling	2.9.4.2	Counseling is provided to patients about procedure and indication of ECG			1
2.9.4.3 Maintaining patient privacy	2.9.4.3	Appropriate techniques have been used to ensure the patient privacy (separate rooms, curtains hung, maintaining queuing of patients)			1
2.9.4.4 Instruments, equipment and supplies	2.9.4.4	Functional ECG machine (12 lead with power back up), paper, gel, wipes and hand sanitizer are available in ECG trolley			1
2.9.4.5 Recording and reporting	2.9.4.5.1	ECG is adequately recorded as per requisition form with detail information of patients, date of ECG			1
	2.9.4.5.2	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
2.9.4.6 Infection prevention	2.9.4.6.1	Hand-washing facility with running water and liquid soap is available for practitioners			1
	2.9.4.6.2	Chlorine solution and bleach is available and utilized for decontamination			1
Standard 2.9.4		Total Score			8
		Percentage = Total Score/ 8 x100			

Area	Code	Verification				
		Components	Std No.	Standards	Self-Assessment	Joint Assessment
Dental Service	2.1					
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 2.10 a 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 2.10 b 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 11 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-Assessment	Joint Assessment	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
	Foot Steps	1 in each OPD room			1
5	Curtain separator for examination beds	In each examination bed			1
6	Shelves for papers	As per need			1
7	Weighing scale	Adult and Child			1
Total Score					8
Total Percentage = Total Score/7 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-Assessment	Joint Assessment	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 a1 a2a3b1b2	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 sline	1 bottle			1
67	Betadine	1 bottle			1
68	Micromotor (slow speed round bur)	1(2)			1
69	H2o2	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 Service	2.11				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
2.11.1 Physical facility	2.11.1	Designated area for mortuary room, changing room and store room and bathroom			1
	2.11.1.2	Body dissection table (at least one) is available and used			1
	2.11.1.3	Organ dissection table (at least one) is available and used			1
	2.11.1.4	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	Trained medical officer for mortuary service at least one			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	Access to mortuary van is available 24 hours			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 well labelled 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
	2.11.7.4	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
		Percentage = Total Score/ 16 x100			

Annex 2.11 a: Supplies and instrument for post mortem services

SN	Supplies and instrument	Required Number	Self-Assessment	Joint Assessment	Max Score
1	Refrigeration chamber or cool room for body preservation	2-4 bodies capacity			1
2	Dissection set of instruments for autopsy	2 sets			1
3	Magnifying lens; 20 and 40 times	1 each			1
4	Measuring tape	2			1
5	Weighing machine for organs and if possible, for dead body	1			1
6	Camera for photography	1			1
7	Glass tubes for blood collection and tissue collection; reasonable numbers for regular use	as per need			1
8	Glass slides; reasonable number for regular use	as per need			1
9	EDTA	as per need			1
10	Sodium Floride -200 or 500 gm	1			1
11	Formalin solution	as per need			1
12	Plastic made wide mouth containers of 500 ml capacity; reasonable numbers for regular need	as per need			1
13	Sodium chloride (table salt); reasonable amount for regular use	as per need			1
14	Autopsy gown	2 sets			1
15	Gum boots	2 pairs			1
16	Gloves and masks	as per need			1
17	Computer with printer for report preparation	1			1
18	Cleaning agents; soap, detergents	as per need			1
19	Sealing materials; specific seal tape or wax seal and seal print	as per need			1
20	Autopsy SOP, Reference Manual	as per need			1
Total score					20
Percentage= Total score/20 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 2.11.4	

Area	Code	Verification			
Medico-legal services	2.12				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
2.11.7 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 segregation and 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
		Percentage = Total Score/ 13 x100			

Annex 2.12 a: Supplies and instruments for clinical medico-legal services

SN	Supplies and instrument	Required number	Self-Assessment	Joint Assessment	Max Score
1	Weight machine and height scale	1 each			1
2	BP set, stethoscope and torch light	1 each			1
3	Examination kits; sexual offence cases (rape victim examination kit)	as per need			1
4	Gloves and masks	as per need			1
5	Magnifying lens; 20 and 40 times	1 each			1
6	Measuring tape	As per need			1
7	Camera for photography	1			1
8	Paper envelopes of different sizes for collection of samples and packing	as per need			1
9	Glass tubes for collection of blood urine; reasonable number for regular use	as per need			1
10	X ray plate view box	1			1
11	EDTA and Sodium fluoride 500 gm	As per need			1
12	Glass slides; reasonable number for regular use	as per need			1
13	Cupboards for store and necessary other furniture for examination room	as per need			1
14	Sealing materials as for autopsy room	as per need			1
15	Computer and printer for report preparation as in autopsy	1			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			1
Total score					16
Percentage= Total score/16 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 2.12.6.2	

SECTION III: Hospital Support Services Standards

Area	Code	Verification			
CSSD	3.1				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 <u>waste segregation and disposal based on HCWM[1] guideline 2014 (MoHP)</u>			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			

[\[1\] HCWM: Health Care Waste Management](#)

Annex 3.1 a: CSSD Equipment and Supplies

SN	Items	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Working Table	3			1
2	Trolley for Transportation	2			1
3	Steel Drums	10			1
4	Storage Shelves	2			1
5	Autoclave Machine (250 liter, pre-vacuum, with horizontal outlet)	2			1
6	Double Wrappers	As per need			1
7	Timer	2			1
8	Thermal Indicator Tape	As per need			1
9	Cap, Mask, Gown, Apron	As per need			1
10	Gloves	1 box			1
11	Cotton Rolls	As per need			1
12	Cotton Gauze	As per need			1
13	Scissors	2			1
14	Gauze cutter	2			1
15	Buckets	5			1
16	Scrub Brush	As per need			1
17	Hamper bag (cloth sack for collection of wrappers)	As per need			1
Total Score					17
Total Percentage = Total Score/17 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 3.1.3	

Area	Code	Verification			
Laundry	3.2				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 3.2 a 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 segregation and 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			

[\[1\] HCWM: Health Care Waste Management](#)

Annex 3.2 a: Equipment and Supplies for Laundry

SN	List of equipment and supplies	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Working table	1			1
2	Ironing Table	1			1
3	Storage Shelves	2			1
4	Trolley for Transportation	2			1
5	Washing Machine (at least 10 kg capacity with semi/full dryer)	2			1
6	Iron Machine	1			1
7	Buckets/ Basins	5			1
8	Stirrer (wooden)	2			1
9	Boots	2 pairs			1
10	Cap, Mask, Gowns	As per need			1
11	Ropes (for drying)	As per need			1
12	Scrub Brush	As per need			1
13	House/ Utility Gloves	As per need			1
14	Washing Powder	As per need			1
15	Chlorine Liquid/ Powder	As per need			1
Total Obtained Score					15
Total Percentage = Total Obtained Score/15 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 3.2.3	

Area	Code	Verification			
Housekeeping	3.3				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 3.3 a 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 3.3 a: Housekeeping Basic Supplies

SN	General Items	Required No.	Self-Assessment	Joint Assessment	Max Score
1	Working Table and Chair	1			1
2	Telephone	1			1
3	Housekeeping Storage Room	1			1
4	Shelves	2			1
5	Cupboards	2			1
6	Log Book for Records	1			1
7	Vacuum Cleaner	1			1
8	Sickle	As per need			1
9	Spade	As per need			1
10	Shovel	As per need			1
11	Ropes	As per need			1
12	Scrub Brush	As per need			1
13	Broom	As per need			1
14	Buckets	As per need			1
15	Jars	As per need			1
16	Sprinkle Pipe	As per need			1
17	Soaps	As per need			1
18	Washing Powder	As per need			1
19	Additional Bed Covers for Replacement	As per need			1
20	Additional Pillow	As per need			1
21	Pillow cover	As per need			1
22	Blankets	As per need			1
23	Personal Protective Items	As per need			1
24	Window screens (jaali)	In all windows			1
25	Mosquito nets	As per need			1
26	Flower Pots	As per need			1
Total Score					26
Total Percentage = Total Score/26 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 3.3.3	

Area	Code	Verification			
Repair, Maintenance and Power system	3.4				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
3.6.2 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 waste storage and management with functional hand washing facility			1
3.6.4 Segregation of waste from source to final disposal	3.6.4	Different colored bins (for risk and non-risk waste) are used from source to final disposal			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			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
3.6.10 Pharmaceutical and radiological waste management	3.6.10	Pharmaceutical waste and radiological waste is 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			16
		Percentage = Total Score / 16 x 100			

Area	Code	Verification			
Safety and Security	3.7				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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 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 3.7 a Safety and Security Basic Amenities

SN	General Items	Self	Joint	Max Score
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				6
Total Percentage = Total Score/6 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 3.7.4	

Area	Code	Verification			
Transportation and Communication	3.8				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum 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
	3.9.2.3	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) practiced in every six months.			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			
Hospital Canteen	3.10				
Components	Std No.	Standards	Self-Assessment	Joint Assessment	Maximum Score
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 IEC/ BCC materials	3.10.5	Appropriate IEC/ BCC materials (posters, leaflets, television) are available in the canteen for balanced diet			1
3.10.6 Facilities for staffs, patients and visitors	3.10.6	Comfortable space with sitting arrangement is available for at least 50 people			1
3.10.7 Infection prevention and food hygiene	3.10.7.1	Separate area designated for washing dishes and visibly clean.			1
	3.10.7.2	There are colored bins for waste segregation and disposal based on HCWM guideline 2014 (MoHP)			1
	3.10.7.3	Hand-washing facility with running water and soap is available			1
	3.10.7.4	Mesh/ net used to cover food			1
	3.10.7.5	Rat proofing and daily scrubbing of the canteen is done			1
	3.10.7.6	Use of refrigerator for storage of food			1
Standard 3.10		Total Score			15
		Percentage = Total Score / 15 x 100			