





# Kayakalp Incentive Scheme for Public Healthcare Facilities



**Quality and Patient Safety Division** 

**National Health Systems Resource Centre** 

## **Snapshot of revision in Kayakalp Assessment Tool**

Sr. No.	Revision	Remark
1.	WASH Score	100 marks, Compliance in External Assessment
2.	Support Services-Criteria E6 (New addition)	Patient Convenience
3.	Beyond Hospital Boundary-G	Number of criteria reduced to 5 from earlier 10 criteria
4.	Eco-friendly facility-H	Number of checkpoints reduced to 45 from earlier 50 checkpoints

## Thematic Area-G: Beyond Hospital Boundary

Ref. No	Earlier (2021)	Change in Ref.	Change /Rephrasing (2024)
G1.	Promotion of Swachhata in the surrounding area	G1.	Promotion of Swachhata in the surrounding area
G2	Coordination with local institutions	G2.	Alternative Financing and Support Mechanism
G3	Alternative Financing and Support Mechanism	G3.	Cleanliness and aesthetics of Surrounding areas
G4	Leadership & Governance in surrounding area	G4.	General Waste Management in surrounding
G5	Approach road to Health Facility	G5.	Maintenance of the Surrounding Area
G6	Cleanliness of surrounding area	NA	Removed
G7	Public amenities in surrounding	NA	Removed
G8	Aesthetics of Surrounding areas	NA	Removed
G9	General Waste Management	NA	Removed
G10	Maintenance of the Surrounding	NA	Removed

## **Kayakalp Checklist Snapshot**



### **Type of Assessment Tools**

Name of Checklist	Applicable to
Section A- DH, SDH and CHC	DH, SDH/ Taluka Hospitals, CHC and UCHCs
Section B- Primary Health Centre with Beds	24*7 PHCs/ AAM PHC, UPHC/ AAM- UPHC with IPD and Labour room
Section C- Primary Health Centre without Bed	APHC, UPHC/ AAM- UPHC
<b>Section D</b> - Ayushman Arogya Mandir –Sub Centre	AAM- Sub Health Centre



Observation (OB)



Staff Interview (SI)



Patient Interview (PI)



Record Review (RR)

#### Assessment Method

## **Compliance & Scoring Methodology**

Full Compliance 2

- > All Requirements in Checkpoint are Meeting
- > All Tracers given in Means of verification are available

Partial Compliance



- > Some of the requirements in checkpoints are meeting
- 50% -99% of tracers in Means of verification are available

Non-Compliance



- > Most of the requirements are not meeting
- Less than 50% of tracers in Means of verification are available



#### Kayakalp Tool Kit – Score Card

Ver: KK/DH-SDH-CHC/0724

Kayakalp Clean Hospitals

Checklist for Assessment( DH, SDH and CHC)

The Cleanliness Score Card						
Name of Facility Kayakalp Scorecard		Eco-Friendly Scorcard	State & District			
Date	100	100	Level of Assessment			

#### Kayakalp Tool Kit – Score Card



#### **Eco-friendly Health facility**

## Best eco-friendly health facility (DH & SDH/CHC) is given based on three specific criteria:

Thematic Area/Criteria	Attribute	Number of Checkpoints	Score
Thematic Area-H	Eco-friendly facility	45	90
Thematic Area-C	Waste Management	50	100
Criterion-A9	Water Conservation	5	10
	Total	100	200

## **Revised Kayakalp Measurement System**

	DH/SDH/ CHC	PHC with bed	PHC Without Bed	AAM-SC
Thematic Area (Existing)	8	7	7	7
Revised thematic Area	8	7	7	7
Criteria (Existing)	65	56	54	54
<b>Revised Criteria</b>	61	57	55	55
Checkpoints (Existing)	350	180	120	120
Revised Checkpoints	320	183	122	122

### DH, SDH/CHC Checklist Thematic Area-A(Hospital/Facility Upkeep)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
A1.5	Pest & Animal Control	Measures for Mosquito free environment are in place	Usage of Mosquito nets by the patients	Usage of insecticide treated (LLIN) Mosquito nets by the patients.
A2.5	Landscaping & gardening	Provision of Herbal Garden	Medicinal plants and Trees & Plants generating more oxygen (E.g., Neem, Peepal, Aloe Vera, Tulsi etc.)	Trees & Plants generating more oxygen (E.g., Neem, Peepal, Aloe Vera, Tulsi etc.)
A3.1	Maintenance of open areas	There is no abandoned/ dilapidated building within the premises	Check for presence of any 'abandoned building' within the facility premises and give full compliance if the existing abandoned building is identified and marked	Check for presence of any 'abandoned building' within the facility premises. Note: give full compliance if the existing abandoned building is identified and marked and not in use

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
A3.2	Maintenance of open areas	No water logging in open areas and the facility buildings are vector- breeding proof	Check for water accumulation in open areas because of faulty drainage, leakage from the pipes, etc. and also look for tyres, flower pots for accumulation of stagnant water	Check for water accumulation in open areas because of faulty drainage, leakage from the pipes, rainwater etc. and also Look for tyres, flower pots etc., for accumulation of stagnant water
A4.4	Hospital/Facility appearance	Uniform and signage system in the Hospital	All signages (directional & departmental) are in local language and follow uniform colour scheme.	<ul> <li>Check for:</li> <li>1. All signage's (directional &amp; departmental) and information displayed are in local language</li> <li>2. and All signages follow uniform colour scheme.</li> </ul>
A5.4	Infrastructure Maintenance	Hospital has intact boundary wall and functional gates at entry	Check that there is a proper boundary wall of adequate height without any breach. Wall is painted in uniform colour	Check that there is a proper boundary wall of adequate height without any breach. The Wall is painted in uniform colour. Check that there is no rusting of the gates. All the gates (entry, exit or any other gate) are painted and functional.

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
A5.5	Infrastructure Maintenance	Hospital has adequate facility for parking of vehicles	Check that there is a demarcated space for parking of the vehicles as well as for the Ambulances and vehicles are parked systematically	<ul> <li>(a) Check that there is a demarcated fringe space for parking space for of the vehicles as well as for the ambulances, patients, visitors and staff vehicles.</li> <li>(b) Check vehicles are parked systematically</li> </ul>
A6.1	illumination	Adequate illumination in Circulation Area	Check for Adequate lighting arrangements through Natural Light or Electric Bulbs	Check for Adequate lighting arrangements in the waiting area, lobby, corridors, lift landing area, staircase,etc., through Natural Light or Electric Bulbs. Minimum illumination should be 100-150 Lux.
A6.2	illumination	Adequate illumination in outdoor and Indoor Patient Care Areas	No Change	No Change
A6.3	illumination	Adequate illumination in Procedure Areas (Labour Room/OT)	Check for Adequate lighting arrangements. The illumination should be 300 Lux in procedure areas. Toilets should have at least 100 lux light	Check for Adequate lighting arrangements in OT, Labour Room, Laboratory, other clinical departments, etc., as applicable. The illumination should be 300 Lux in procedure areas. Toilets should have at least 100 lux light

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
A6.4	illumination	Adequate illumination in front of hospital and access road	Check that hospital front, entry gate and access road are well illuminated	Check that hospital front, entry gate, parking and access road are well illuminated
A6.5	illumination	Adequate illumination in auxiliary area	Check that auxiliary area of the facility like Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices are well illuminated	Check that auxiliary area of the facility like Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices, Toilets, Bathing area, etc. are well illuminated
A8.5	Removal of Junk Material	Hospital has documented and implemented Condemnation policy along with condemnation of old ambulances/vehicles.	Check if Hospital has drafted its condemnation policy or have got one from the state. Check whether they are complying with it. Check the condemnation of old ambulances and vehicles inside the premises of the hospital	<ul> <li>Check if:</li> <li>1. Hospital has drafted its condemnation policy or has got one from the state.</li> <li>2. Check whether they are complying with it.</li> <li>3. Check the condemnation of old ambulances, vehicles, broken furniture, etc., not lying inside the hospital premises of the hospital</li> </ul>
A9.1	Water conservation	Piped water supply is adequate in Quantity & Quality	No Change	No Change

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
A9.5	Water Conservation	The hospital has innovative practices for water conservation	Check any innovative practices such as: 1. Landscaped area is planted with drought tolerant plants (e.g., Cactus, Palm, bougain villea, snake plant, lavender etc.) 2. Usage of grey water for irrigation and toilet flushing etc.	<ul> <li>Check any innovative practices such as:</li> <li>1. Landscaped area is planted with drought tolerant plants (e.g., Cactus, Palm, bougain villea, snake plant, lavender etc.)</li> <li>2. Usage of grey water for irrigation and toilet flushing etc.</li> <li>3. Installation of Sensor based/auto stop taps at washbasins.</li> <li>4. Recycling of waste water.</li> <li>5. Installation of dual flush in toilets.</li> </ul>
A10.1	5S for Workplace management	Staff periodically sort useful and unnecessary articles at work station	Ask the staff, how frequently they sort and remove unnecessary articles from their work place like Nursing stations, work bench, dispensing counter in Pharmacy, etc. Check for presence of unnecessary articles	Ask the staff, how frequently they sort and remove unnecessary articles from their work place like Nursing stations, workstation, dispensing counter in Pharmacy, etc. Check for presence of unnecessary articles
A10.2	5S for Workplace management	The Staff arrange the useful articles, records in systematic manner	Check if drugs, instruments, records are not lying-in haphazard manner and kept near to point of use in arranged manner. The place has been demarcated for keeping different articles	<ul> <li>Check if-:</li> <li>1. Medicines, drugs, instruments, records are not lying in haphazard manner and kept near to point of use in arranged manner.</li> <li>2. The place has been demarcated for keeping different articles</li> </ul>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
A10.3	5S for Workplace management	Staff label the articles in identifiable manner	Check that drugs, instruments, records, etc. are labelled for facilitating easy identification	Check that medicines, drugs, instruments, records, etc. are labelled for facilitating easy identification

#### DH, SDH/CHC Checklist Thematic Area-B(Sanitation & Hygiene)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
B5.1	Cleanliness of Auxiliary areas (Kitchen, Laundry, Mortuary, Administrative office)	No dirt/Grease/Stains/ Garbage in Auxiliary Area	Check for the floors and walls of Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices, for any visible or tangible dirt, grease, stains, etc.	Check for: 1. the floors and walls of Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices, for any visible or tangible dirt, grease, stains, etc. 2. Parking area is visibly clean
B6.5	Cleanliness of toilets	Floors of Toilets are Dry and crack free	Check some of the toilets randomly for dryness of floors and without residue water accumulation	Check some of the toilets randomly for dryness of floors, absence of cracks and without residue water accumulation
B7.1	Use of standard materials and equipment for cleaning	Availability of Detergent Disinfectant solution/Hospital Grade Phenyl for Cleaning purpose Hospital is using environmentally Preferable Cleaning products, materials and equipment	<ol> <li>Check for good quality Hospital cleaning solution preferably a ISI mark. Composition and concentration of solution is written on label</li> <li>Check the cleaning products and materials that are environmentally friendly and that are less toxic but still maintain the high level of cleanliness are used in the facility (with eco- friendly logo)</li> <li>Check with cleaning staff if they are getting adequate supply. Verify the consumption records</li> </ol>	<ol> <li>Check for good quality Hospital cleaning solution preferably a ISI mark. Composition and concentration of solution is written on label</li> <li>Check the cleaning products and materials that are environmentally friendly and that are less toxic but still maintain the high level of cleanliness are used in the facility (with eco- friendly logo)</li> <li>Check with cleaning staff if they are getting adequate supply. Verify the consumption records</li> </ol>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
B7.5	Use of standard materials and equipment for cleaning	Availability of Cleaning Equipment	Check the availability of mops, brooms, collection buckets etc. as per requirement. Hospital with a size of more than 300 beds should have mopping machine	<ul> <li>Check the:</li> <li>1. Availability of mops, brooms, collection buckets etc. as per requirement.</li> <li>2. Storage area/Janitor room for cleaning equipment is clean and dry.</li> <li>3. Hospital with a size of more than 300 beds should have mopping machines &amp; a the routine maintenance schedule for mopping machine is available.</li> </ul>
B8.1	Use of standard methods cleaning	Use of Three bucket system manual or mechanised system for cleaning	Check if cleaning staff uses three bucket system for cleaning First mop the area with the warm water and detergent solution • After mopping clean the mop in plain water and squeeze it • Repeat this procedure for the remaining area • Mop area again using sodium hypochlorite 1% after drying the area Ask the cleaning staff about the process	<ul> <li>Check if cleaning staff uses three bucket system (manual cleaning) for cleaning.</li> <li>First mop the area with the warm water and detergent solution</li> <li>After mopping clean the mop in plain water and squeeze it</li> <li>Repeat this procedure for the remaining area</li> <li>Mop area again using sodium hypochlorite 1% after drying the area</li> <li>Ask the cleaning staff about the process</li> <li>OR 2. Look for the availability of electrical scrubber drier, mechanical sweepers, vacuum cleaner wet &amp; dry, high-pressure jet cleaners for the functionality of mechanised cleaning machine.</li> </ul>
B8.2	Use of standard methods cleaning	Use unidirectional method and out word mopping	No Change	No Change

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
B9.1	Monitoring of cleanliness activities	Use of Housekeeping Checklist in Toilets	Check that Housekeeping Checklist is displayed in Toilet and updated. Check Housekeeping records if checklists are daily updated for at least last one month	Check that for: 1. Housekeeping Checklist is displayed in the Toilet and updated daily (check records for at least one month). Check Housekeeping records if checklists are daily updated for at least last one month 2. Cleaning schedule for each area has been prepared, approved and disseminated to the concerned persons.
B9.3	Monitoring of cleanliness activities	Use of Housekeeping Checklist in Procedure Areas	Check that Housekeeping Checklist is displayed in Labour room, OT Dressing room etc. Check Housekeeping records if checklist is daily updated for at least last one month.	Check that Housekeeping Checklist is displayed in Labour room, OT Dressing room etc. Check Housekeeping records if checklist is are daily updated for at least last one month.
B9.4	Monitoring of cleanliness activities	A person is designated for monitoring of Housekeeping and Bio medical waste management Activities	Check if a staff-member from the hospital has been designated to monitor the housekeeping activities and verify them with counter signature on housekeeping checklist	Check if 1. A trained staff-member from the hospital has been designated to manage and monitor the housekeeping activities and Biomedical waste management activities. 2. verify them with Housekeeping checklist is counter signature on housekeeping checklist signed by the person. 3. Availability and adherence of Duty Roster by cleaning and housekeeping staff

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
B10.2	Drainage & Sewage management	Gradient of Drains is conducive for adequate for maintaining flow	Check that the drains have adequate slope and there is no accumulation of water or debris in it	Check that the drains have adequate slope and there is no accumulation and back-flow of water or debris in it
B10.3	Drainage & Sewage management	Availability of Sewage Treatment System/ Effluent Treatment System	Check if Hospital sewage has proper connection with municipal drainage system. If access to municipal system is not accessible, hospital should have a septic tank with in the premises	Check Hospital sewage is connected with functional Effluent Treatment Plant or Sewage Treatment Plant (as per requirement)

#### DH, SDH/CHC Checklist Thematic Area-C(Waste Management)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
C1.2	Implementation of Biomedical Waste Rules 2016	The facility has implemented Biomedical Waste Rules, 2016*	Interview the concerned personnel and verify following actions - 1. Change in colour scheme 2. Linkage with CWTF, if located within 75 kms OR Approval for Deep Burial pit 3. 'On-site' pre-treatment of laboratory waste before handing over to the CTF Operator	Interview the concerned personnel and verify following actions - 1. Change in colour scheme 2. Linkage with CBWTF, if located within 75 kms OR Approval for Deep Burial pit 3. 'On-site' pre-treatment of laboratory waste before handing over to the CTF Operator
C1.4	Implementation of Biomedical Waste Rules 2016	The facility has started undertaking actions, which are to be complied as per current guidelines	Check the records and interview the personnel to ascertain that the hospital has started actions for followings - 1. Procurement of Non- chlorinated bags 2. Development of Website and uploading of Annual Report 3. Actions for meeting emission standards as given in BMW Rules 2016 and its amendments.	Check the records and interview the personnel to ascertain that the hospital has started actions for followings - 1. Procurement of Non- chlorinated bags 2. Development of Website and uploading of Annual Report 3. Actions for meeting emission standards as given in BMW Rules 2016 and its amendments.
C2.1	Segregation, Collection & Transportation of Biomedical waste	Segregation of BMW is done as per BMW management rule, 2016 <del>and its</del> subsequent amendments	Anatomical waste and soiled dressing material are segregated in yellow bins & bags General and infectious waste are not mixed	Biomedical waste is segregated at the point of generation as per Biomedical Waste Management Rules, 2016* Anatomical waste and soiled dressing material are segregated in yellow bins & bags General and infectious waste are not mixed

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
C2.2	Segregation, Collection & Transportation of Biomedical waste	Work instructions for segregation and handling of Biomedical waste has been displayed prominently	Check availability of instructions for segregation of waste in different colour coded bins and instructions are displayed at point of use	Check availability of instructions for segregation of waste in different colour coded bins and instructions are displayed at <del>point of</del> use all waste generation points as per recent rules and guidelines.
C2.3	Segregation, Collection & Transportation of Biomedical waste	The facility has linkage with a CBWTF Operator or has deep burial pit (with prior approval of the prescribed authority)	Check record for functional linkage with a CWTF. In absence of such linkage, check existence of deep burial pit, which has approval of the prescribed authority	Check record for functional linkage with a CBWTF. In absence of such linkage, check existence of deep burial pit, which has approval of the prescribed authority
C3.1	Sharp Management	Disinfection of Broken/Discarded Glassware is done as per recommended procedure	Check if syringes are disposed off without mutilation or without cutting needles	Check such waste is pre-treated either with 1-2% Sodium Hypochlorite for 30 minutes or by autoclaving/microwave/ hydroclave and sent for recycling
C3.2	Sharp Management	Glassware is stored as per protocol given in Schedule I of the BMW Rules 2016 and its subsequent amendments	Verify that all glassware is stored in a puncture proof and leak proof boxes or containers with blue coloured marking and later sent for recycling	Verify that all glassware is stored in a puncture proof and leak proof boxes or containers with blue coloured marking and later sent for recycling at CBWTF level

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
C3.3	Sharp Management	The Staff uses hub needle cutters for cutting the syringe hub	Observe that hub cutters are available at every point of waste generation and also being used	Observe that hub needle cutters are available at every point of waste generation and also being used
C4.2	Storage of Biomedical waste	The Storage facility is located away from the patient area and has connectivity of a motorable road	Look at the location and its connectivity through a road for CWTF vehicle to reach the storage area without any hindrance The storage area does not pose any threat to patients, indoor & outdoor both	Look at the location and its connectivity through a road for CBWTF vehicle to reach the storage area without any hindrance The storage area does not pose any threat to patients, indoor & outdoor both
C5.1	Disposal of Biomedical waste	The Health Facility has adequate arrangements for disposal of Biomedical waste	The Health facility within 75 KM of CTF have a valid contract with a Common Treatment facility for disposal of Bio medical waste. Or The facility should have Deep Burial Pit and Sharp Pit within premises of Health facility. Such deep burial pit should approve by the Prescribed Authority	The Health facility within 75 KM of CBWTF have a valid contract with a Common Treatment facility for disposal of Bio medical waste. Or The facility should have Deep Burial Pit and Sharp Pit within premises of Health facility. Such deep burial pit should approve by the Prescribed Authority and constructed as pe the specifications given in Schedule- II, Standards for deep burial given in Bio Medical Waste Management Rules 2016
C5.2	Disposal of Biomedical waste	Recyclable waste is disposed as per procedure given in the BMW Rules 2016* and its subsequent amendments	Check if Recyclable waste (catheter, syringes, gloves, IV tubes, Ryle's tube, etc.) is shredded/ mutilated after treatment (options autoclaving/ microwave/hydroclave) and then sent back to registered recyclers. Alternatively, it can also be sent for energy recovery or road construction Ascertain that waste is never sent for incineration or land-fill site	Check if Recyclable waste (catheter, syringes, gloves, IV tubes, Ryle's tube, etc.) is shredded/ mutilated after treatment (options autoclaving/ microwave/hydroclave) and then sent back to registered recyclers at CBWTF level. Alternatively, it can also be sent for energy recovery or road construction Ascertain that waste is never sent for incineration or land- fill site

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
C5.3	Disposal of Biomedical waste	Discarded/ contaminated linen is disposed as per procedure given in the Bio-Medical Waste Management Rules, 2016*	Located away from the main building and water source, A pit or trench should be approx. two meters deep. It should be half filled with waste, then covered with lime within 50 cm of the surface, before filling the rest of the pit with soil Secured from animals If waste disposed through CTF, then a deep burial pit is not required. (Give Full Compliance)	Check that discarded linen, mattress & bedding contaminated with blood or body fluid is subjected to disinfection by non-chlorinated disinfection (e.g. Phenolics, Hydrogen Peroxide) followed by incineration. Alternatively it can be shredded or mutilated.
C5.4	Disposal of Biomedical waste	Disposal of Expired or discarded medicine is done as per protocol given in Schedule I of BMW Rules 2016* and its subsequent amendments	Check, if there is a system of sending discarded medicines back to manufacturer or disposed by incineration	Check, if there is a system of sending discarded medicines back to manufacturer or disposed by incineration at CBWTF level
C5.5	Disposal of Biomedical waste	Disposal of PPEs (goggles, face- shield, splash proof apron, plastic coverall, hazmat suit, nitrite gloves etc.) are disposed as per procedure given in the Bio Medical Waste Management rules 2016* and its subsequent amendments including infectious disease like COVID 19	Check that disposal procedures are as per the latest BMW Rules that includes infectious disease like COVID 19	<ol> <li>Check that disposal of PPEs (goggles, face-shield, splash proof apron, plastic coverall, hazmat suit, nitritie gloves etc.) procedures are as per the latest BMW Rules that includes infectious disease like COVID 19</li> <li>Staff is aware of special disposal precaution to be taken for infectious diseases like COVID</li> </ol>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
C7.1	Solid General Waste Management	Recyclable and Biodegradable Wastes have segregated collection	Check availability of two types of bins for collecting Recyclables and Biodegradables - Kerb collection point, wards, OPD, Patient Waiting Area, Pharmacy, Office, Cafeteria	Check availability of two types of bins for collecting Recyclables and Biodegradables - Kerb collection point, wards, OPD, Patient Waiting Area, Pharmacy, Office, Cafeteria and Kitchen etc.
C9.1	Equipment & supplies for Biomedical waste management	Availability of foot operated Bins and non- chlorinated other bins with liners for segregated collection of waste at point of use	Check for availability foot operated bins with liners of appropriate size at each point of generation for Biomedical and General waste and its supply record	<ol> <li>Check for availability foot operated bins and non- chlorinated plastic bags/with liners of appropriate size at each point of generation for Biomedical and General waste and its supply record</li> <li>Check for adequate availability of bins and liners</li> </ol>
C9.2	Equipment & supplies for Biomedical waste management	Availability of Needle <del>/ Hub</del> cutter and puncture proof boxes	No Change	No Change
C9.3	Equipment & supplies for Biomedical waste management	Availability and supply of personal protective equipment	Please look at availability of PPE (cap, mask, gloves, boots, goggles) for waste handlers and its supply record	<ol> <li>Please look at availability of PPE (cap, mask, gloves, boots, goggles) for cleaning and waste handlers and its supply record</li> <li>Check that there is no stockout of PPE</li> </ol>
C10.5	Statutory Compliances	The Health Facility maintains records, as required under the Biomedical Waste Rules 2016 and its subsequent amendments	No Change	No Change

#### DH, SDH/CHC Checklist Thematic Area-D(Infection Control)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
D1.4	Hand Hygiene	Availability of Alcohol Based hand rub and its usage	Check the availability alcohol-based hand-rub in all patient care areas and they are accessible for visitors, patients and staff. Ask for its regular supply	Check the availability alcohol-based hand-rub in all patient care & service areas and they are accessible for visitors, patients and staff. Ask for its regular supply
D1.5	Hand Hygiene	Staff is aware of when to hand wash	Ask staff about the situations, when hand wash is mandatory (5 moments of hand washing)	Ask staff about the 5 moments of hand washing (before touching a patient, before a procedure, after a procedure or body fluid exposure risk, after touching a patient, after touching the patient's surrounding) situations, when hand wash is mandatory (5 moments of hand washing)
D5.1	Disinfection & Sterilization of instruments	Adherence to Protocols for autoclaving	Check about awareness of recommended temperature, duration and pressure for autoclaving instruments - 121 degree C, 15 Pound Pressure for 20 Minutes (30 Minutes if wrapped) Linen - 121 C, 15 Pound for 30 Minutes	<ol> <li>Check about awareness of recommended temperature, duration and pressure for autoclaving instruments - 121 degree C, 15 Pound Pressure for 20 Minutes (when instruments are not wrapped) or 30 minutes (if instruments are wrapped)(30 Minutes if wrapped)</li> <li>Linen - 121 C, 15 Pound for 30 Minutes</li> <li>Flash sterilisation- unwrapped object at 132oC for 3 minutes at 27-28 lbs of pressure</li> </ol>
D5.2	Disinfection & Sterilization of instruments	Adherence to Protocol for High Level disinfection	Check with the staff about the process of High-Level disinfection using Boiling or Chlorine solution	Check with the staff about the process of High-Level disinfection using Boiling or Chlorine Glutareldehyde solution

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
D6.1	Spill Management	Staff is aware of how manage small spills management of small spills	No Change	No Change
D7.3	Isolation & Barrier Nursing	Maintenance of adequate bed to bed distance in wards	A distance of 3.5 Foot is maintained between two beds in wards	<ul> <li>Check for:</li> <li>1. A distance of 3.5 Foot is maintained between two beds in wards</li> <li>2. Each bed has only one patient</li> </ul>
D8.4	Infection Control Program	Immunization of Service Providers	Check for: 1. Hospital staff has been immunized against TT, Hepatitis B 2. Food handlers/kitchen staffs have been immunised against Typhoid	Check for: 1. Hospital staff has been immunized against TT Td, Hepatitis B 2. Food handlers/kitchen staffs have been immunised against Typhoid
D10.4	Environment Control	Surface cleaning and safe fogging of Labour Room and OT	Check surface of OT are cleaned daily and fogging is done by using safe product containing H2O2 (Hydrogen Peroxide), silver compounds	Check surface of OT are cleaned daily and fogging is done by using safe product containing H2O <sup>2</sup> (Hydrogen Peroxide), silver compounds

### DH, SDH/CHC Checklist Thematic Area-E(Support Services)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
E1.1	Laundry Services & Linen management	The facility has adequate stock (including reserve) of linen	Check the stock position and its turn- over during last one year in term of demand and availability	Check the stock position and its turn-over during last one year in term of demand and availability. At least 5 sets per bed should be available. Periodic stock taking is done and records are maintained for the same.
E1.2	Laundry Services & Linen management	Hygiene and quality of linen is maintained	Observe the condition of linen in use in the wards, Accident & Emergency Department, other patient care area, etc.	<ul> <li>(1) Bed sheets, pillow covers, drapes etc are stain free and clean</li> <li>(2) Observe the condition of linen is use in the A&amp;E, wards, maternity ward, Labour Room, OT, etc.</li> <li>(3) Linen not torn or damaged</li> </ul>
E1.3	Laundry Services & Linen management	Bed-sheets and linen are changed daily	Check, if the bedsheets and pillow cover have been changed daily. Please interview the patients as well	Check, if the bedsheets and pillow cover have been changed daily or between each patient. Please interview the patients as well
E1.4	Laundry Services & Linen management	Soiled and clean linen is removed, segregated and disinfected, as per procedure are transported in separate trolleys	Check, how is the soiled linen handled at the facility. It should be removed immediately and sluiced and disinfected immediately	<ul> <li>(1) Check soiled/infected linen and clean linen are segregated and transported in separate trolleys.</li> <li>(2) Check, how is the soiled linen handled at the facility. It should be removed immediately and sluiced and disinfected immediately, segregated and sluiced/disinfected</li> </ul>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
E1.5	Laundry services & Linen management	Patients' dress <del>is</del> are clean and not torn	No Change	No Change
E2.1	Water sanitation	The facility receives adequate quantity of water as per requirement	At least 200 litres of water per bed per day is available (if municipal supply). or the water is available on 24x7 basis at all points of usage	<ul> <li>Check for:</li> <li>1. At least 200 litres of water per bed per day is available (if municipal supply).</li> <li>2. or the water is available on 24x7 basis at all points of usage</li> <li>3. Hospital has pumping or boosting arrangements</li> </ul>
E2.2	Water sanitation	There is storage tank for the water and tank is cleaned periodically	The hospital should have capacity to store 48 hours water requirement Water tank is cleaned at six monthly interval and records are maintained	The hospital should have capacity to store at least three days of 48 hours water requirement Water tank is cleaned at six three monthly interval and records are maintained. Check the area around water tap is fenced making the tap stand area inaccessible by the animals.
E3.3	Kitchen Services	The Kitchen is clean, smoke- free and fly- proof	There is proper ventilation in the kitchen. Doors and Windows are fly-proof. No fly nuisance is noticed inside the kitchen	There is proper ventilation in the kitchen. Doors and Windows are fly-proof. No fly or rodent nuisance is noticed inside the kitchen. Check that the dish/utensils washing area is clean.

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
E6.1	Patient Convenience	Availability of adequate number of toilets	Not Mentioned	Check for: 4 or more toilets in outpatient setting & one toilet per 20 beds in IPD
E6.2	Patient Convenience	Availability of adequate number of bathrooms	Not Mentioned	At least one shower or bathing area is available per 40 patients in IPDs
E6.3	Patient Convenience	Availability of separate toilet for staff & patient	Not Mentioned	Look for separate toilet for staff in proximity to the duty area
E6.4	Patient Convenience	Availability of hand hygiene stations near the toilets	Not Mentioned	Check for the availability of functional hand hygiene area within 5 meters of the toilet
E6.5	Patient Convenience	Menstrual hygiene needs are addressed	Not Mentioned	At least one toilet has provision for sanitary napkins to ensure menstrual hygiene needs

### DH, SDH/CHC Checklist Thematic Area-F(Hygiene Promotion)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
F1.1	Community monitoring and Patient participation	Members of RKS <mark>/JAS(Jan Arogya Samiti)</mark> and Local Governance bodies monitor the cleanliness of the hospital at pre- defined intervals	No Change	No Change
F2.2	Information, Education and Communication	IEC regarding Swachhata Abhiyan and National Clean Air Programme/ water pollution/reuse of water etc. is displayed within the facilities' premises along with relevant IECs pertaining to National Clean Air Programme/ water pollution/reuse of water etc.	No Change	No Change
F2.4	Information, Education and Communication	IEC regarding water sanitation and air pollution related illnesses are is displayed in the hospital premises	No Change	No Change
F3.1	Leadership and Team work	Cleanliness and Infection control committee is constituted at the facility	Check constitution of committee and its functioning	<ul> <li>Check for:</li> <li>1. Constitution of committee and its functioning</li> <li>2. The cleanliness and infection control committee has representation of all cadre of staff including</li> <li>Group 'D' and cleaning staffs</li> <li>3. Roles and responsibility of different staff members have been assigned.</li> <li>4. Staff's awareness on roles and responsibilities</li> </ul>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
F3.2	Leadership and Team work	The Facility has a system of reviewing and improving the gaps identified for cleanliness and Biomedical waste management, including WASH	Verify with the records: Check for: 1. Committee have representation from all cadre of staff 2. Role and responsibilities are defined for all staff	<ol> <li>The committee check the cleanliness and Biomedical Waste management compliance regularly</li> <li>All the non-compliance are enumerated, and improvement plans are prepared and actions are taken.</li> </ol>
F3.3	Leadership and Team work	The management of the hospital ensures procurement of supplies and and follow the Green & Sustainable Procurement Policy(SPP)	Ask different members about their roles and responsibilities 1 Check the commitment and culture for green healthcare and conservation of natural resources in the facility 2. Please check the implementation pertaining to LED lamps, energy star rating of BEE products, disinfectants.	Ask different members about their roles and responsibilities 1. Check the implementation in terms of procurement of PPE and energy-efficient light resources (LED lamps, energy star rating of BEE products etc) and disinfectants 2. Check the commitment and culture for green healthcare and conservation of natural resources in the facility as per guidelines
F3.4	Leadership and Team work	Hospital leadership review the progress of the cleanliness drive on weekly basis	Check about regularity of meetings and monitoring activities regarding cleanliness drive	Check about regularity of meetings and monitoring activities regarding cleanliness drive
F3.5	Leadership and Team work	Hospitals leadership identifies good performing staff members and departments	Check with hospital administration if there is any such good practice	Check with hospital administration if there is any such good practice. Feedback is given to the non-performers with defined timelines for improvement

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
F4.2	Training & Capacity building & Standardization	Bio medical waste Management training has been provided to the staff	Verify with the training records	Verify with the training records. Training is provided at the time of induction, based on results of training need assessments, and whenever there is any updation in guidelines.
F4.3	Training & Capacity building & Standardization	Infection control Training has been provided to the staff	Verify with the training records	Verify with the training records. Training is provided at the time of induction, based on results of training need assessments, and whenever there is any updation in guidelines.
F4.4	Training & Capacity building & Standardization	Hospital has documented Standard Operating procedures for Cleanliness and Upkeep of Facility and guidelines/SOPs are available to educate and help them towards implementation of go green concept healthcare facilities.	Check availability of SOP with the users (based on the Green Building Guidelines/National Programme for Climate Change & Human Health Guidelines)	Check availability of SOP with the users (based on-as per the Green Building Guidelines/National Programme for Climate Change & Human Health Guidelines)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
F5.1	Staff Hygiene & Dress code	Check Hospital have adequate staff for maintaining cleaning activities	Ask staff about the policy. Check if it is documented	Check facility has adequate staff for maintaining cleanliness, hygiene and bio- medical waste management activities as per work load.
F5.2	Staff Hygiene & Dress code	Nursing staff adhere to designated dress code	Observation	<ol> <li>Ask staff about the policy. Check if it is documented</li> <li>Check staff adhere to designed dress code.</li> </ol>
## DH, SDH/CHC Checklist Thematic Area-G(Beyond Hospital Boundary)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
G1.1	Promotion of Swachhata in surrounding area	Local community actively participates during Swachhata Pakhwara <del>(fortnight)</del>	Local community is actively involved in administration of "Swachhata Pledge" and distribution of caps/T- shirts, badge with cleanliness message and logos of "Swachh Bharat Abhiyan" and "Kayakalp"	Local community is actively involved in administration of "Swachhata Pledge" and distribution of caps/T- shirts/booklets/ pamphlets, posters/ wall writing for promotion of use of toilets/ hand washing/ safe drinking water/ tree plantation, distribution of badge with cleanliness message and logos of "Water Conservation", "Air & Noise Pollution", "Swachh Bharat Abhiyan" and "Kayakalp"
G1.2	Promotion of Swachhata in surrounding area	Community is made aware about importance of Swacchta by organising physical activities/ cultural programs	Advertisement in news- papers/electronic media, distribution of booklets/ pamphlets, posters/wall writing for promotion of use of toilets, hand washing, safe drinking water and tree plantation, etc.	Like rallies, marathon, Swachhata walk, human Chain, street plays/Nukar Natak/ folk arts/folk-music/ drawing competitions etc.
G1.3	Promotion of Swachhata in surrounding area	The Facility undertakes intersectoral activities for improving sanitation and hygiene in the surroundings	Like rally, marathon, Swachhata walk, human Chain, etc.	Look for evidence of coordination with departments such as Education (school programs on hygiene promotions), Water and Sanitation (making area ODF), PWD (Repair & Maintenance), Forest Department (Plantation Drive) etc., which contributes strengthening towards of hygiene & sanitation

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
G1.4	Promotion of Swachhata in surrounding area	The Facility coordinates with the local Municipal corporation, market welfare associations, Resident Welfare associations, etc. for improving the sanitation and hygiene	Like street plays/Nukar Natak/folk arts/folk-music, etc.	Look for evidence of collective action such as cleaning of drains, maintenance of parking space, orderly arrangement of hawkers (outside the facility), rickshaw, auto, taxi, construction & maintenance of public toilets, improving street- lighting, removing cattle nuisance, etc.
G1.5	Promotion of Swachhata in surrounding area	A person is designated to supervise and monitor activities related to cleanliness, sanitation and hygiene in surrounding area	Like essay writing/poem/ slogan writing/painting etc.	Person may be regular/ contractual or voluntary. Full time or Part time.
G2.1	Coordination with local institutions	The Facility endeavours to attract support under the Corporate social responsibility & initiative	Look for evidence of collective action such as cleaning of drains, maintenance of parking space, orderly arrangement of hawkers (outside the facility), rickshaw, auto, taxi, construction & maintenance of public toilets, improving street- lighting, removing cattle nuisance, etc.	Look for evidence that Corporate organisations have supported health facilities in its cleanliness drive
G2.2	Coordination with local institutions	The Facility endeavours to attract support from Philanthropic Organisations	Check for evidence of coordination with NGOs for improving sanitation and hygiene in the vicinity of the facility. Also look at collaborative action for maintenance of Public Conveniences, etc.	Look for evidence that philanthropic organizations including religious bodies, trusts, NGOs, Rotary clubs, Lion club, etc. have supported the health facility in its cleanliness efforts.

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
G2.3	Alternative Financing & Support Mechanism	The Facility endeavours to attract support from the local public representatives	Look for evidence of collective action such as cleaning of drains, Swachhata Pakhwara, maintenance of parking space, orderly arrangement of hawkers (outside the facility), removing cattle nuisance, etc.	Look for evidence that local leaders such as MPs, MLAs, Municipal counsellors, Panchayat members, individual donations, etc. have supported the health facility in its cleanliness drive efforts either in cash or in kind.
G2.4	Alternative Financing & Support Mechanism	The facility engages the local Community for reducing household pollutions in the vicinity	Look for evidence of collective action such as cleaning of drains, Swachhata Pakhwara, IEC Campaign, Plantations drive, etc. in near vicinity of the health facility	Look for evidence that the facility has engaged in reducing household level pollution in near vicinity of the health facility – Presence of community bins for segregated collection of general (biodegradable & recyclable), Roll-out of PM Ujjwala Scheme in nearby slum, etc.
G2.5	Alternative Financing & Support Mechanism	Facility support the local school/ college in improving their cleanliness	Look for evidence of coordination with departments such as Education (school programs on hygiene promotions), Water and Sanitation (making area ODF), PWD (Repair & Maintenance), Forest Department (Plantation Drive) etc., which contributes strengthening towards of hygiene & sanitation	Look for evidence that local School/College has implemented 'Swachh Bharat-Swachh Vidyalaya' initiative through coordinated efforts

Ref. No.	Criteria	Checkpoint	MoV (2021	MoV (2024)
G3.1	Cleanliness and esthetics of surrounding areas	Area around the Facility is clean, neat & tidy		Check for: 1. any litter/garbage/ outgrown weeds/moss in the surrounding area, footpaths and pavements 2. No water logging in surrounding area
G3.2	Cleanliness and esthetics of surrounding areas	Functional street lights are available along the approach road		Check for street lights and their functionality. 1- Trees or other buildings should not be blocking the lights 2- Observe the Low-glare fixtures/light-sensitive arrangements
G3.3	Cleanliness and esthetics of surrounding areas	Public toilets & urinal in surrounding areas are clean		Check for separate toilets for male and female and toilets have regular water supply. Check that no foul smell come from the toilets
G3.4	Cleanliness and esthetics of surrounding areas	No unwanted/ broken/ torn / loose hanging posters/ billboards/loose hanging wires around the electric pole.		Check that hospital surrounding are not studded with irrelevant and out dated posters, slogans, wall writings, graffiti, etc. Check for any loose hanging wires
G3.5	Cleanliness and esthetics of surrounding areas	Exterior of hospital boundary wall is painted and maintained		<ol> <li>(1) The exterior of the boundary wall is clean, free from solid waste, stagnant water, no animal and human faeces in and around the boundary wall</li> <li>(2) It is of uniform colour— no unwanted posters on the exterior of the boundary wall.</li> <li>(3) Exterior of the boundary walls are painted innovatively, displaying messages of cleanliness, bygiene &amp; Go Green concept etc.</li> </ol>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
G4.1	General waste management in surrounding	Availability of bins for general recyclable and biodegradable wastes		Check the availability adequate number of bins for Biodegradable and recyclable general waste in the surrounding areas of the Hospital
G4.2	General waste management in surrounding	Segregation of general waste is done		Check content of recyclable and Biodegradable bins to ascertain their usage
G4.3	General waste management in surrounding	Availability of Garbage Storage area		Garbage storage area is away from residential/commercial areas and is covered/fenced. It is not causing public nuisance.
G4.4	General waste management in surrounding	Daily collections of general waste by Municipal corporation		Municipal corporation vehicles pick up garbage from the storage area on daily basis. Look for piling of garbage.
G4.5	General waste management in surrounding	Innovations in managing general waste		Check, if certain innovative practices have been introduced for managing general waste e.g. Vermicomposting, Re-cycling of papers, Waste to energy, Compost Activators, etc.

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
G5.1	Maintenance of Surrounding area	Vector control measures are taken for disease prevention.		Regular fogging, DDT Spray, Gambusia (mosquito fish) in ponds and other water bodies.
G5.2	Maintenance of Surrounding area	Regular repairs and maintainance of roads, footpaths and pavements		Check when was the last repair done, details of the repair and current condition of the road- pot-holes, broken footpath etc.
G5.3	Maintenance of Surrounding area	Presence of safe drinking water facility outside the health facility		Check for its presence & functionality and safety & potability of water.
G5.4	Maintenance of Surrounding area	Functional street lights are available along the approach road		Check for street lights and their functionality. 1-Trees or other buildings should not be blocking the lights. 2-Observe the Low-glare fixtures/ light sensitive arrangements
G5.5	Maintenance of Surrounding area	Availability of clean Public toilets in surrounding Area		Check for separate toilets for male and female and they are conveniently located and clean. Check for regular water supply, dry floor and no foul smell from toilets.

## DH, SDH/CHC Checklist Thematic Area-H(Eco-friendly facility)

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
H1.1	Energy Efficient Facility	Energy audit is being conducted in the facility on annual basis	Check that the energy audit report contains: 1. Recommendation for improving energy efficiency 2. Cost benefit analysis 3. Action plan to reduce energy consumption	<ul> <li>Check that the energy audit report contains:</li> <li>1. Recommendation for improving energy efficiency</li> <li>2. Cost benefit analysis</li> <li>3. Action plan to reduce energy consumption</li> <li>4. Awareness campaign on energy conservation</li> </ul>
H1.6	Energy Efficient Facility	No energy consuming equipment are switched-on when not in use	Check for: 1. Air-conditioners, lights, fans, Laptop, Desktop computers etc. randomly 2. Automatic sensor system installed for the electrical appliances	Check for: 1. Air-conditioners, lights, fans, Laptop, Desktop computers etc. randomly are not left on when not in use 2. Automatic sensor system installed for the electrical appliances
H2.1	Pollution	Air Quality Index or pollution parameter monitors are displayed in shared spaces in hospital	Check for public display system in common spaces such as reception areas/ waiting area indicating the Temperature, Humidity, Particulates Matter (PM), CO2	Check for a scrolling display system in shared spaces such as reception areas/ waiting areas, indicating the Temperature, Humidity, Particulates Matter(PM), CO2
H2.2	Pollution	Air Quality Index or pollution parameter monitors are displayed in shared spaces in critical care units	Check for public display system in critical area of the hospital like ICU, OT, SNCU etc indicating the Temperature, Humidity, Particulates Matter (PM), CO2	Check for a scrolling display system in critical care units like ICU, OT, Paediatric Care Unit, etc., indicating the Temperature, Humidity, Particulates Matter(PM), CO2

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
H2.5	Air and Noise Pollution	Natural Ventilation is being maintained at the hospital premises	Check that all windows are operable and the facility take full advantage of prevailing cross ventilation	Check that all windows are operable and The facility take full advantage of prevailing cross ventilation. Cross ventilation areas (windows, ventilators, corridors etc.) are not obstructed with storage or condemn material.
H2.9	Air and Noise Pollution	Facility has taken measures to reduce noise pollution	<ul> <li>Check for:</li> <li>1. Timely oiling, greezing of wheel chairs, stretchers etc.</li> <li>2. Medical equipment alarms are adjusted to less annoying level</li> <li>3. Measures are being taken to manage crowding in waiting area, emergency, OPDs etc.</li> </ul>	<ul> <li>Check for:</li> <li>1. Timely oiling, greezing of wheel chairs, stretchers, entry and exit gates etc.</li> <li>2. Medical equipment alarms are adjusted to a less annoying level</li> <li>3. Measures are being taken to control noise in crowded areas like manage crowding in waiting area, emergency, and OPDs etc.</li> </ul>
H2.10	Air and Noise Pollution	Availability of noise and emissions- controlled DG Sets	Check for: 1. The maximum permissible sound pressure level for new diesel generator (DG) sets with rated capacity up to 1000 KVA, manufactured on or after the 1st January, 2005 shall be 75 dB(A) at 1 metre from the enclosure surface 2 The installed DG set in the hospital is in compliance with norms given in CPCB Guideline-System and procedure for compliance with noise limits for diesel generator sets up to 1000KVA 3. The diesel generator sets should be provided with integral acoustic enclosure 4. Please check for silencer and air filter	Check for: 1. The maximum permissible sound pressure level for new diesel generator (DG) sets with rated capacity up to 1000 KVA, manufactured on or after the 1st January, 2005 shall be 75 dB(A) at 1 metre from the enclosure surface 2. The installed DG set in the hospital is in compliance with norms given in CPCB Guideline-System and procedure for compliance with noise limits for diesel generator sets up to 1000KVA 2. The diesel generator sets should be provided with integral acoustic enclosure 3. Please check for silencer and air filter

Criteria Checkpoint MoV (2021)

MoV (2024)

H3.1	Reduce, Reuse and Recycle the waste	Availability of waste management policy that seeks to reduce, reuse and recycle waste	Check for: 1 An established waste management policy to reduce, reuse and recycle of waste 2. The staff is aware, trained and practicing	Check for: 1 An established waste management policy to reduce, reuse and recycle of waste 2. The staff is aware, trained and practicing 3Rs
H3.2	Reduce, Reuse and Recycle the waste	Hospital procure the materials that generates less waste and are recyclable	Check for: 1. Procurement policy of the document which encourage to procure items that generate less waste and are recyclable 2. Work orders/tenders for the evidences of the same	Check for: 1. Procurement policy of the document which encourage to procure of items that generate less waste and are recyclable 2. Work orders/tenders for the evidences of the same
H3.3	Reduce, Reuse and Recycle the waste	Usage of washable surgical and nursing clothing after proper sterilization	Check that the facility is using washable surgical and nursing gowns, drapes and towels instead of disposable one after proper sterilization	Check that the facility is using washable surgical and nursing gowns, drapes and towels instead of disposable one after proper sterilization after proper sterilisation
H3.4	Reduce, Reuse and Recycle the waste	The facility has policy to encourage the reuse of PPE	Check that the facility is using reusable gloves and masks after adequate sterilization	<ol> <li>Check facility has a defined policy on rational use of PPE rationally. The Policy has identified the areas of hospitals, activities and risk of infections.</li> <li>The policy clearly defines the PPE which can be re-usable after disinfection (shoe covers, face shields, goggles, coverall etc).</li> <li>The specification of material (impermeable/ fabric/plastic is defined.</li> <li>Check the material is procured as per specification and disinfections practices are adhered for re-usable PPEs.</li> </ol>

Ref. No.	Criteria	Checkpoint	MoV (2021)	MoV (2024)
H4.1	Save Earth and Environment	Check facility undertakes Save Earth and Environment campaign to raise the awareness of staff and community	Check that the facility celebrated the World environment day on 5th June and Earth day on 22nd April by some effective campaigns to raise awareness	Check that the facility celebrates World Environment Day (5th June) or Earth Day or both (22nd April) through innovative ways to rise the awareness of their stakeholders or taking Hospital climate change challenges/pledge etc.
H4.2	Save Earth and Environment	No use of <del>single use</del> plastic <del>bags</del> in the facility	Check that facility is not using single use plastic bags to carry medicine, food articles/packaging materials used in drug warehouse etc.	Check that facility is not using single use plastic bags to carry medicine, food articles/packaging materials. <del>used in drug warehouse etc.</del> . Check facility has eliminated the use of plastic bottles for water and other beverages, plastic cutlery etc.
H4.5	Save Earth and Environment	The facility is using eco- friendly stationaries items	Check for the usage of eco- friendly pen, pencils, jute files, folder, cartridge etc.	Check for the usage of eco- friendly pen, pencils, jute files, folder, cartridge etc. for routines (meetings etc) and other activitirs (conferences etc)
H4.9	Save Earth and Environment	The facility endeavour to meet climate- neutral goals as per the Global goals	The facility is promoting virtual platform for conducting meeting, trainings etc.	<ol> <li>(1) Check that hospital top management &amp;staff is aware of Climate change and its impact as per SDG 13 (Climate Action).</li> <li>(2) Check hospital estimates of its carbon footprints#</li> <li>(3) The facility endeavour to measure (quality of emission, prominent spots) &amp; reduce (identify potential reductions), and prepare itself for alignment with carbon neutrality standards (Such as PAS 2060)</li> </ol>

Criteria Checkpoint MoV (2021)

MoV (2024)

H4.10	Save Earth and Environment	The facility is managing e-waste properly	Check the facility: 1. e-waste like old electronic item such as tube lights, mobile phones, computers, keyboards, headphones, batteries etc not dumped into the dustbin with other garbage 2. e-waste is sorted based on its size and toxicity 3. Practice of exchanging/ drop off at e-waste bins/ using e-waste collection system from the hospital	Check the facility: 1. e-waste like old electronic item such as tube lights, mobile phones, computers, keyboards, headphones, batteries etc not dumped into the dustbin with other garbage are disposed of as per e-waste rules 2016 and its subsequent amendments 2. e-waste is sorted based on its size and toxicity 3. Practice of exchanging/handling over the e-waste back to manufacturer/ drop off at e-waste bins/ using e-waste collection system from the hospital
H5.1	Health and Well Being	The Health Facility has indoor plants, those are having oxygen emitting quality	Check that Patient care area have direct clear view of sky/natural habitants/ garden/terrace garden etc.	Check the facility has indoor plants such as Areca Palm/ money plant/Peace Lily (Spathiphyllum)/Aloe Vera etc.or any other locally available plants, which are having oxygen emitting quality
H5.2	Health and Well Being	Availability of stress- relieving spaces in the facility for patients, visitor and staff	Check for: At least 20% of the open spaces should be well maintained with garden, park without any unwanted herbs, shrubs	Check availability & maintenance of stress relieving spaces like open green spaces, aquariums, mindful music, place for Prayer /Yoga /Meditation etc.

Criteria Checkpoint MoV (2021) **MoV (2024)** Ref. No. Availability of Check the facility has indoor plants such as Check the engagement of staff in indoor and outdoor H5.3 Health and recreation room for Areca Palm/money plant/ Peace Lily physical activities like badminton, Cricket, Chess and Well Being health and well-being (Spathiphyllum)/ Aloe Vera etc. or any other dart board etc. locally available plants, which are having oxygen of staff emitting quality Check the followings: (a) Availability of healthy snack vending machine/ Promotion and H5.4 Health and adoption of healthy 1. The doorway wide enough for a outlet for staff and visitors Well Being (b) Check that the snacks and beverages sold by the eating habits wheelchair user to pass through (min. 80 cm/32 inches wide) contractural canteen/in- house canteen are health & of 2. The door opens outwards, allowing safe and low fat, sugar and sodium content easy access in an emergency (c) Awareness Campaign- ""EAT FIT"" for food 3. Grab rails on both sides of the toilet with adulteration, food fortification and reduction of salt, elevated toilet seat sugar and fat 4. Check mirror, sink, towel, soap, bins etc. within reach for wheelchair users Facility is accessible to Check for: Check for: H5.5 Health and all without any 1. Easy access to the main entrance of the 1. Specially abled toilets are present inside the Well Being physical barriers building premises of the hospital and are functional 2. Non-slippery ramps, with handrails on 2. At least one toilet provides the means to manage at least one side (as applicable) menstrual hygiene needs 3. Braille and audio assistance in lifts for visually 3. Non-slippery ramps, with handrails on at least one side (as applicable) impaired people. (as applicable) 4. Uniformity in floor level for hindrance- free 4. Braille and audio assistance in lifts for visually movement in common areas & exterior areas impaired people (as applicable) 5. Visual warning signage in common areas & 5. Visual warning signage in common areas & exterior exterior areas areas

## National & State Felicitation



## Thank You

