

Government of Jammu and Kashmir
Health and Medical Education Department,
Civil Secretariat, Srinagar/Jammu.

Subject:- Criteria for improvement of toilets and upkeep of Hospitals across the Union Territory of J&K-**implementation of deliverables thereof.**

Circular No. 52 -JK(HME) of 2022

Dated: 27.07.2022

The Chief Secretary of Union Territory of Jammu and Kashmir has allotted deliverables to all the Administrative Departments including Health and Medical Education Department which are required to be completed within the prescribed time frame.

A review meeting in this regard was held under the Chairmanship of Principal Secretary to Government, Health and Medical Education Department on 20.07.2022. After due deliberation upon the deliverables, it has been decided that the criteria for improvement of toilets and upkeep of Hospitals needs to be devised and circulated among all the Healthcare Institutions of the Union Territory of Jammu and Kashmir for strict compliance in order to keep the hospitals upkeep at every time.

On the above instructions, the criteria as indicated in "**Annexure-A**" to this circular has been devised for improvement of toilets and upkeep of Hospitals for circulation among all the HODs of the Health and Medical Education Department for strict compliance.

Accordingly, it is impressed upon all the Heads of the Departments (HoDs) of the Health and Medical Education Department to implement the aforesaid criteria in all healthcare Institutions of the UT of J&K, on immediate basis, in order to achieve the target of improvement of toilets and upkeep of Hospitals within two months, to meet out the timelines as prescribed in the deliverables.



Besides, it is also impressed upon all the HoDs of the Health and Medical Education Department to submit their action taken/compliance report in this regard to the Administrative Department as per the timelines prescribed above.

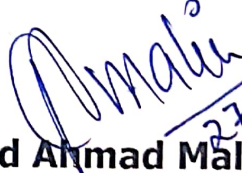
Sd/
(Manoj Kumar Dwivedi)IAS
Principal Secretary to Government,
Health and Medical Education Department.

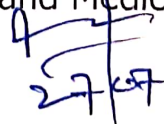
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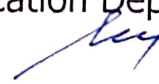
Dated: 27 -07-2022

Copy to the:-

1. Commissioner, Food and Drugs Administration, J&K.
2. Principal Government, Medical College, Srinagar, Jammu/Anantnag/ Baramulla/ Rajouri/Doda/Kathua.
3. Principal, Government Dental College, Jammu/Srinagar.
4. Principal Government Unani/Ayurvedic Medical College, Ganderbal/Akhnoor.
5. Director General, Family Welfare, MCH & Immunization, J&K/ Director, Health Services, Jammu.
6. Director Coordination, New Medical Colleges, J&K, Jammu.
7. Director, Archives, Archaeology and Museum, J&K.
8. Director, Health Services, Kashmir.
9. Director, AYUSH, J&K.
10. OSD to Advisor (B) to the Hon'ble Lieutenant Governor.
11. All concerned Officers.
12. Private Secretary to Principal Secretary to the Government, Health and Medical Education Department.
13. Concerned File.


(Javid Ahmad Malik)JKAS
Under Secretary to the Government,
Health and Medical Education Department.


27/07



"Annexure-A" to Circular No. 52-JK(HME) of 2022 Dated 27.07.2022.

S.No.	Criteria	Means of Verification
1.1	No dirt/Grease/Stains in the Circulation area	Check that floors and walls of Corridors, Waiting area, stairs, roof top for any visible or tangible dirt, grease, stains, etc.
1.2	No Cobwebs/Bird Nest/ Dust on walls and roofs of corridors	Check that roof, walls, corners of Corridors, Waiting area, stairs, roof top for any Cobweb, Bird Nest, etc.
1.3	Corridors are cleaned at least twice in the day with wet mop	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records
1.4	Corridors are rigorously cleaned with scrubbing / flooding once in a month	Ask the staff about cleaning schedule and activities
1.5	Surfaces are conducive of effective cleaning	Check if surfaces are smooth enough for cleaning
2	Cleanliness of Toilets	
2.1	No dirt/Grease/Stains/ Garbage in Toilets	Check some of the toilets randomly in indoor and outdoor areas for any visible dirt, grease, stains, water accumulation in toilets
2.2	No foul smell in the Toilets	Check some of the toilets randomly in indoor and outdoor areas for foul smell
2.3	Toilets have running water and functional cistern	Ask cleaning staff to operate cistern and water taps
2.4	Sinks and Cistern are cleaned every two hours or whenever required	Ask cleaning staff for frequency of cleaning and verify it with house keeping records
2.5	Floors of Toilets are Dry	Check some of the toilets randomly for dryness of floors and without residue water accumulation
3	Use of standards materials and Equipment for Cleaning	
3.1	Availability of Detergent Disinfectant solution / Hospital Grade Phenyl for Cleaning purpose	Check for good quality Hospital cleaning solution preferably a ISI mark. Composition and concentration of solution is written on label. Check with cleaning staff if they are getting adequate supply. Verify the consumption records.
3.2	Cleaning staff uses correct	Check, if the cleaning staff is aware

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	concentration of cleaning solution	of correct concentration and dilution method for preparing cleaning solution. Ask them to demonstrate. Verify it with the instruction given solution bottle.
3.3	Availability of carbolic Acid/Baciloid for surface cleaning in procedure areas- OT, Labour Room	Check for adequacy of the supply. Verify with the records of stock outs, if any
3.4	Availability of Buckets and carts for Mopping	Check if adequate numbers of Buckets and carts are available. General and critical areas should have separate bucket and carts.
3.5	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 mechanized mopping machine.
4	Use of Standard Methods Cleaning	
4.1	Use of Three bucket system for cleaning	Check if cleaning staff uses three bucket system for cleaning. One bucket for Cleaning solution, second for plain water and third one for wringing the mop. Ask the cleaning staff about the process
4.2	Use unidirectional method and out word mopping	Ask cleaning staff to demonstrate the how they apply mop on floors. It should be in one direction without returning to the starting point. The mop should move from inner area to outer area of the room.
4.3	No use of brooms in patient care areas	Check if brooms are stored in patient care areas. Ask cleaning staff if they are using brooms for sweeping in wards, OT, Labour room. Brooms should not be used in patient care areas.
4.4	Use of separate mops for critical and semi critical areas and procedures surfaces	Check if cleaning staff is using same mop for outer general areas and critical areas like OT and labour room. The mops should not be shared between critical and general area. The clothes used for cleaning procedure surfaces like OT Table and

		Labour Room Tables should not be used for mopping the floors.
4.5	Disinfection and washing of mops after every cleaning cycle	Check if cleaning staff disinfect, clean and dry the mop before using it for next cleaning cycle.
	Monitoring of Cleanliness Activities	
5.1	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
5.2	A person is designated for monitoring of Housekeeping 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.
5.3	Monitoring of adequacy and quality of material used for cleaning	Check if there is any system of monitoring that adequate concentration of disinfectant solution is used for cleaning. Hospital administration take feedback from cleaning staff about efficacy of the solution and take corrective action if it is not effective.
	Drainage and Sewage Management	
6.1	Availability of closed drainage system	Check if there is any open drain in the hospital premises. Hospital should have a closed drainage system. If, the hospital's infrastructure is old and it is not possible create closed draining system, the open drains should properly covered.
6.2	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
6.3	Availability of connection with Municipal Sewage System/ or Soak Pit	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.
6.4	No blocked/ over-flowing drains	Observe that the drains are not

	in the facility	overflowing or blocked
6.5	All the drains are cleaned once in a week	Check with the cleaning staff about the frequency of cleaning of drains. Verify with the records.
7	Implementation of Biomedical Waste Rules 2016	
7.1	The Hospital leadership is aware of Biomedical Waste Rules 2016 including key changes as amendments.	A copy of the Biomedical waste management rules is available at the facility.
7.2	The facility has implemented Biomedical Waste Rules	Interview the concerned personnel and verify following actions – a. Change in colour scheme b. Linkage with CWTF, if located within 75 kms OR Approval for Deep Burial pit 'On-site' pre-treatment of laboratory waste before handing over to the CTF Operator
7.3	The facility has started undertaking actions for bar coding system	Please check the records and interview the personnel to ascertain that the hospital has started actions for procurement of Bar coded bags & containers
7.4	The facility is undertaking actions, which were to be complied by March 2019	Please check the records and interview the personnel to ascertain that the hospital has started actions for followings – a. Procurement of Non-chlorinated bags b. Development of Website and uploading of Annual Report c. Actions for meeting emission standards as given in BMW Rules 2016.
7.5	An existing committee or newly constituted committee for review and monitoring of BMW management at DH/CHC level	Check the record to ensure that the committee has met at least at six monthly interval and BMW status has been reviewed
7.6	Segregation of BMW is done as per BMW management rule, 2016	Anatomical waste and soiled dressing material are segregated in yellow bins & bags. General and

		infectious waste are not mixed
7.7	Disinfection of Broken / Discarded Glassware is done as per recommended procedure	Check if such waste is pre-treated either with 1-2 % Sodium Hypochlorite (having 30% residual chlorine) for 20 minutes or by autoclaving/ microwave/ hydroclave
7.8	Dedicated Storage facility is available for biomedical waste and its has biohazard symbol displayed	Check if the health facility has dedicated room for storage of Biomedical waste before disposal/handing over to Common Treatment Facility.
7.9	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 approved by the Prescribed Authority
7.10	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
7.11	General Waste is not mixed with infected waste	Check bins to ascertain that such mixing does not take place
7.12	The Health Facility has a valid authorization for Bio Medical waste Management from the prescribed authority	Check for availability of the authorization certificate and its validity
7.13	The Health Facility submits Annual report to pollution control board	Check the records that reports have been submitted to the prescribed authority on or before 30th June every year.
Infection Control		
8.1	Availability of Sink and running water at point of use	Check for washbasin with functional tap, soap and running water availability at all points of use including nursing stations, OPD clinics, OT, labour room etc.
8.2	Display of Hand washing Instructions	Check that Hand washing instructions are displayed preferably at all points of use
8.3	Adherence to 6 steps of Hand	Ask facility staff to demonstrate 6

	washing	steps of normal hand wash
8.4	Availability of Alcohol Based hand rub	Check for availability alcohol based hand-rub. Ask staff about its regular supply
8.5	Staff is aware of when to hand wash	Ask staff about the situations, when hand wash is mandatory (5 moments of hand washing).
8.6	Use of Gloves during procedures and examination	Check, if the staff uses gloves during examination, and while conducting procedures
8.7	Use of Masks and Head cap	Check, if staff uses mask and head caps in patient care and procedure areas
8.8	Use of Heavy Duty Gloves and gumboot by waste handlers	Check, if the housekeeping staff and waste handlers are using heavy duty gloves and gum boots
8.9	Use of aprons/ Lab coat by the clinical staff	Check the usage of protective attire e.g. Apron by the doctor and nurses, lab coat by the lab technicians, gown in OT, etc.
8.10	Adequate supply of Personal Protective Equipment (PPE)	Check with staff whether they have adequate supply of personal protective equipment. Verify the records for any stock outs.
8.11	The staff is aware of use of gloves, when to use (occasion) and its type	Check with the staff when do they wear gloves, and when gloves are not required. The Staff should also know difference between clean & sterilized gloves and when to use
8.12	Correct method of wearing and removing gloves	Ask the staff to demonstrate correct method of wearing and removing Gloves
8.13	Correct Method of wearing mask and cap	Check, if the staff knows correct method of wearing mask
8.14	No re-use of disposable personal protective equipment	Check that disposable gloves and mask are not re-used. Reusable Gloves and mask are used after adequate sterilization.
8.15	The Staff is aware of Standard Precautions	Ask the staff about five Standard Precautions
8.16	Infection Control Committee is constituted and functional in the Hospital	Check for the enabling order and minutes of the meeting
8.17	Regular Monitoring of infection control practices	Check, if there is any practice of daily monitoring of infection control practice

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		like hand hygiene and personal protection
8.18	Regular Medical check-ups of food handlers and housekeeping staff	Check for the records and lab investigations of Food handlers and housekeeping staff
8.19	Hospital has dress code policy for all cadre of staff	Ask staff about the policy. Check if it is documented
8.20	Nursing staff adhere to designated dress code	Observation
8.21	Support and Housekeeping staff adhere to their designated dress code	Observation
8.22	There is a regular monitoring of hygiene practices of food handlers and housekeeping staff	Check with the hospital administration
8.23	Identity cards and name plates have been provided to all staff	Observation
8.24	Local community actively participates during Swachhata Pakhwara (fortnight)	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".
8.25	Implementation of IEC activities related to 'Swachh Bharat Abhiyan'	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.
8.26	The Facility coordinates with the local Municipal corporation/ PRI for improving the sanitation and hygiene	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.
8.27	The Facility coordinates with other Department for improving sanitation and hygiene in the surroundings	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

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		contributes strengthening towards of hygiene & sanitation
8.28	Availability of Public toilets in surrounding Area	Check for separate toilets for male and female and they are conveniently located and clean.
8.29	Availability of urinals in surrounding area	Check that urinals are conveniently located and they are clean
8.30	Public toilets & urinal in surrounding areas are clean	Check for regular water supply, dry floor and no foul smell from toilets.
8.31	Presence of safe drinking water facility outside the health facility	Check for its presence & functionality and safety & potability of water.
8.32	Availability of adequate parking stand	Check for parking stand for auto/rickshaw/taxi etc., and they are not parked haphazardly.
9. Pest & Animal Control		
9.1	No stray animals within the facility premises	Observe for the presence of stray animals such as dogs, cats, cattle, pigs, etc. within the premises. Also discuss with the facility staff.
9.2	Cattle-trap is installed at the entrance	Check at the entrance of facility that cattle trap has been provided. Also look at the breach, if any, in the boundary wall
9.3	Pest Control Measures are implemented in the facility	Ask the facility administration about pest control measures to control rodents and insect. Check records of engaging a professional agency for the same
9.4	Anti-termite Treatment of the wooden furniture and fixtures is undertaken periodically	Check if the facility has a scheduled programme for anti-termite treatment at least once in a year
9.5	Measures for Mosquito free environment are in place	Check for: <ul style="list-style-type: none"> a. Usage of Mosquito nets by the patients b. Availability of adequate stock of Mosquito nets c. Wire Mesh in windows d. Desert Coolers (if in use) are cleaned regularly/ oil is sprinkled e. No water collection for mosquito breeding within the premises

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