

Conditions to be fulfilled by every interested hospital for empanelment under AB PMJAY & CMHIS:

1. Must have valid Registration/ Licence under the NHCE Act (for Hospitals within Nagaland or CE Act or Equivalent Act for Hospitals outside Nagaland)
2. Must provide documentary evidence of compliance with all applicable statutory and regulatory requirements prescribed by local/state health authorities
3. Private hospitals must provide ROHINI ID provided by Insurance Information Bureau (IIB) and public hospitals must provide HFR & HPR as per the requirement of IRDAI and ABDM.
4. Must fulfilled Minimum standards of facilities and services particularly for Private hospitals within Nagaland and hospitals outside Nagaland;
5. Must fulfilled Minimum requirement of personnel particularly for Private hospitals within Nagaland and hospitals outside Nagaland;
6. Must maintain and provide Electronic medical records or Electronic Health records of every patient as may be determined and issued by Central/State Govt;
NB: Public hospital must put in place Electronic Billing System within 6 (six) of empanelment, if not in place at the time of empanelment.
7. Must ensure compliance to Standard Treatment guidelines as may be issued by Central/State Govt.
8. Hospital outside the State must have NABH/NABL accreditation.
NB:
 - a. The hospitals already empanelled but not accredited shall obtain Entry Level accreditation within 6 (six) months wef 1st May 2025, failing which the hospital will be de-empanelled.
 - b. The hospitals already empanelled but with Entry Level accreditation shall obtain full accreditation within 1 year wef 1st May 2025, failing which the hospital will be de-empanelled.

Criteria for Empanelment:

1. For empanelment under the scheme, health care providers should meet the basic minimum eligibility requirements as detailed in Annexure A & B. As these are minimum standards, no exceptions can be provided on these.
2. For the Minimum Standards for empanelment, Hospitals are Categorized as follows:
 - a. Hospital Level 1 (A)-
General Medical services with indoor admission facility provided by recognized allopathic medical graduate(s) and may also include general dentistry services provided by recognized BDS graduates.
Example: PHC, Government and Private Hospitals and Nursing Homes run by MBBS Doctors etc.
 - b. Hospital Level 1(B) –
This level of hospital shall include all the general medical services provided at level 1(A) above and specialist medical services provided by Doctors from one or more basic specialties namely General Medicine, General Surgery, Paediatrics, Obstetrics & Gynaecology and Dentistry, providing indoor and OPD services.

NB: Level 1(A) and Level 1(B) Hospitals shall also include support systems required for the respective services like Pharmacy, Laboratory, etc.

Example: General Hospital, Single/ Multiple basic medical Specialties provided at Community Health Centre, Sub Divisional Hospital, and Private Hospital of similar scope, Nursing Home, Civil / District Hospital in few places etc.

c. Hospital Level 2 (Non-Teaching)

- (i) This level may include all the services provided at level 1(A) and 1(B) and services through other medical specialties given as under, in addition to basic medical specialty given under 1(B) like: a). Orthopaedics, b). ENT, c). Ophthalmology, d). Dental, e). Emergency with or without ICU f). Anaesthesia, g). Psychiatry, h). Skin, i). Pulmonary Medicine, j). Rehabilitation, etc.

- (ii) And support systems required for the above services like Pharmacy, Laboratory, Imaging facilities, Operation Theatre etc.

Example: District Hospital, Corporate Hospitals, Referral Hospital, Regional/ State Hospital, Nursing Home and Private Hospital of similar scope etc.

d. Hospital Level 3 (Non-Teaching) Super-specialty services –

This level may include all the services provided at level 1(A), 1(B) and 2 and services of one or more of the super specialty with distinct departments and/or also Dentistry if available. It will have other support systems required for services like pharmacy, Laboratory, and Imaging facility, Operation Theatre etc.

Example: Corporate Hospitals, Referral Hospital, Regional/State Hospital, Nursing Home and Private Hospital of similar scope etc.

e. Hospital Level 4 (Teaching) –

- a. This level will include all the services provided at level 2 and may also have Level 3 facilities. It will however have the distinction of being teaching / training institution and it may or may not have super specialties.
- b. Tertiary healthcare services at this level can be provided through specialists and may be super specialists (if available).
- c. It will have other support systems required for these services.
- d. It shall also include the requirement of NMC/other registering body for teaching hospitals and will be governed by their rules.

ANNEXURE A
Minimum Standard for hospital (level 1A &1B)

1. Scope

The scope of services that may be provided at a hospital (level 1A &1B) practising Allopathy – Modern system of Medicine may include patient-care services in any or all of the following specialities:

- 1.1. General Medicine
- 1.2. Obstetrics & Gynaecology (Non-surgical)
- 1.3. Paediatrics
- 1.4. Community Health and Family Medicine
- 1.5. General Dentistry
- 1.6. Basic Support services
 - a) Registration / help desk and billing
 - b) Diagnostic Services: (Can be owned/ outsourced/ Tie up)
Collection centre/ Laboratory/ X-ray/ USG
 - c) Waste Management Services (General and Biomedical)

2. Infrastructure

2.1.	Signage
2.1.1	The Hospital shall display appropriate signage which shall be in at least two languages. A board stating “24 hours emergency available” is desirable.
2.1.2	The building shall have a board displaying the name of the hospital at a prominent location.
2.1.3	Directional signage shall be placed within the facility to guide the patient(s). The directional signages should be permitted outside in the nearby vicinity of the hospital/Nursing Home to facilitate easy access
Following informative signage shall be displayed:	
2.1.4	Name of the care provider with registration number.
2.1.5	Registration details of the hospital as applicable.
2.1.6	Availability of fee structure of the various services provided (refer to CEA 2010 rules & regulation).
2.1.7	Timings of the facility and services provided.
2.1.8	Mandatory information such as under PNDT Act etc.
2.1.9	Important contact numbers such as Blood Banks, Fire Department, Police and Ambulance Services available in the nearby area.
Following safety signage shall be displayed:	
2.1.11	Safety Hazard and Caution signs, for e.g. hazards from electrical shock, inflammable articles, radiation etc shall be displayed at appropriate places, and as applicable under law.
2.1.12	Appropriate Fire exit signage.
2.1.13	Signage for “No Smoking” at prominent places.
2.2.	Other requirements
2.2.1	Access to the hospital shall be comfortable for the patient and/or attendants/visitors.
2.2.2	Access shall be provided within the requirements of “Persons with Disabilities Act” and shall be easy for all those whose mobility may be restricted due to whatever cause.

2.2.3	The hospital shall be developed and maintained to provide safe, clean and hygienic environment for patients, their attendants, staff and visitors
2.2.4	The hospital shall have 24hr provision of potable water for drinking & hand hygiene. It shall also have 24 hr supply of electricity, either through direct supply or from other sources.
2.2.5	The hospital shall have clean public toilet(s).
2.2.6	Furniture and fixtures shall be available in accordance with the activities and workload of the hospital. They shall be functional and properly maintained.
	<i>The minimum space requirements shall be as per Annexure A1</i>
	<i>Indicative list of furniture and fixtures is as per Annexure A2</i>

3. Medical Equipment and Instruments:

3.1	The hospital shall have adequate medical equipment and instruments, commensurate to the scope of service and number of beds.
3.2	There shall be established system for maintenance of critical equipment.
3.3	Equipment shall be kept in good working condition through a process of periodic inspection, cleaning and maintenance. Annual maintenance.
	<i>For indicative list of medical equipment and instruments, Please refer to Annexure A3.</i>

4. Drugs, Medical devices and Consumables:

4.1	The hospital shall have adequate drugs, medical devices and consumables commensurate to its scope of services and number of beds.
4.2	Emergency drugs and consumables shall be available at all times.
4.3	Drug storage shall be in a clean, well lit, and safe environment and shall be in consonance with applicable laws and regulations.
4.4	The facility shall have defined procedures for storage, inventory management and dispensing of drugs in pharmacy and patient care areas.
	<i>For indicative list of drugs, medical devices and consumables please refer to Annexure A4.</i>

5. Human Resource Requirement

5.1	The hospital shall have qualified and/or trained medical and nursing staff as per the scope of service provided and the medical/nursing care.
5.2	The support/paramedical staff shall be qualified and/or trained as per the scope of services provided, and as per requirement
5.3	For every staff (including contractual staff), there shall be personal record containing the appointment order, documentary evidence of qualification and/or training (and professional registration where applicable).
	<i>For human resource requirements please refer to Annexure A5.</i>

6. Support Services:

6.1	The Hospital shall have a Registration/ Help-desk & Billing counter.
6.2	The diagnostic services, whether in house or outsourced, shall be commensurate with the scope of service of the hospital.
6.3	Segregation, collection, transportation, storage and disposal of general waste shall be done as per applicable local laws
6.4	Segregation, collection, transportation, storage and disposal of biomedical waste shall be done as per Bio medical waste handling rules.

6.5	The Hospital shall arrange transportation of patients for transfer/referral/investigations etc. in safe manner. The arrangement can be out sourced or self owned.
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7. Legal/Statutory Requirements

7.1	Compliance with local regulations and law.
	<i>Indicative list of legal requirement is as per Annexure A6.</i>

8. Record Maintenance and reporting:

8.1.	The minimum medical records to be maintained and nature of information to be provided by the Hospitals shall be as prescribed by the Clinical Establishment Act
8.2.	Medical Records shall be maintained in physical or digital format.
8.3.	The hospital shall ensure confidentiality, security and integrity of records.
8.4.	The medical records of IPD patients shall be maintained in consonance with National or local law, MCI guidelines, and court orders.
8.5.	The Hospital shall maintain health information and statistics in respect of national programmes, notifiable diseases and emergencies/disasters/ epidemics and furnish the same to the district authorities in the prescribed formats and frequency.
	<i>For content of medical record refer to Annexure A7</i>

9. Basic Processes

9.1.	The hospital shall register all patients who visit the hospital except if the required service is not available in the facility, in which case the patient is guided to the appropriate nearest facility.
9.2.	Patient shall be guided and informed regarding <u>Patients' rights & responsibilities</u> , cost estimates, third party services (e.g. Insurance) etc. Annexure A8.
9.3.	The billing shall be as per the Hospital tariff list, which shall be available to patients in a suitable format.
9.4.	Each patient shall undergo an initial assessment by qualified and/or trained personnel.
9.5.	Further management of patient shall be done by a registered medical practitioner on the basis of findings of initial assessment; for example, OPD treatment, admission, transfer/referral, investigation etc.
9.6.	The hospital shall ensure adequate and proper spacing in the patient care area so as to prevent transmission of infections.
9.7.	Regular cleaning of all areas with disinfectant shall be done .
9.8.	Housekeeping/sanitary services shall ensure appropriate hygiene and sanitation in the establishment.
9.9.	At the time of admission of patient, general consent for admission shall be taken.
9.10.	In case of non-availability of beds or where clinical need warrants, the patient shall be referred to another facility along with the required clinical information or notes.
9.11.	Reassessments of the admitted patients shall be done at least once in a day and/or according to the clinical needs and these shall be documented.
9.12.	Any examination, treatment or management of female patient shall be done in the presence of an employed female attendant/female nursing staff, if conducted by male personnel inside the hospital and vice versa

9.13.	The patient and family shall be treated with dignity, courtesy and politeness.
9.14.	The Hospital shall provide care of patient as per Standard Treatment Guidelines that may be notified by the Central /State Government (Desirable)
9.15.	The Clinical Establishment shall undertake to provide within the staff and facilities available, such medical examination and treatment as may be required to stabilize the emergency medical condition of any individual who comes or is brought to such clinical establishment.
9.16.	Prescription shall include name of the patient, date, name of medication, dosage, route, frequency, duration, name, signature and registration number of the medical practitioner in legible writing.
9.17.	Drug allergies shall be ascertained before prescribing and administration; if any allergy is discovered, the same shall be communicated to the patient and recorded in the case sheet as well.
9.18.	Patient identity, medication, dose, route, timing, expiry date shall be verified prior to administration of medication.
9.19.	Patients shall be monitored after medication administration and adverse drug reaction/events if any shall be recorded and reported.
9.20.	The hospital shall follow standard precautions like practicing hand hygiene, use of personal protection equipment etc.so as to reduce the risk of healthcare associated infections.
9.21.	Security and safety of patients, staff, visitors and relatives shall be ensured by provision of appropriate safety installations and adoption of appropriate safety measures.
9.22.	The patient and/or family members are explained about the disease condition, proposed care, including the risks, alternatives and benefits. They shall be informed on the expected cost of the treatment. They shall also be informed about the progress and any change of condition.
9.23.	Informed consent shall be obtained from the patient/ next of kin/ legal guardian as and when required as per the prevailing Guidelines / Rules and regulations in the language patient can understand (for e.g. before Invasive procedures, Blood transfusion, HIV testing, etc.). Annexure A9
9.24.	A Discharge summary shall be given to all patients discharged from the hospital.
9.25.	Discharge/Death summary shall also be given to patient and/or attendant in case of transfer LAMA/DAMA or death
9.26.	The discharge summary shall include the points as mentioned in the annexure in an understandable language and format. <i>For content of discharge summary refer to Annexure A10.</i>

ANNEXURE A1
Minimum space requirements in a hospital level 1

A. Minimum space requirements in a hospital level 1 shall be as follows:

Note: Structural changes should be applicable to the Nursing home / Hospitals constructed after the implementation since it is not possible to change the existing structures, especially with restrictions of building bye-laws

Area (Desirable)		
Wards		
1.	Ward bed and surrounding space	6sqm/ bed; Desirable: in addition circulation space of 30% as indicated in total area shall be provided for Nursing station, Ward store, Sanitary etc
Minor Operation Theatre/Procedure room		
2.	OT for minor procedures (where applicable)	10.5sqm(Desirable)
Labour room		
3.	Labour Table and surrounding space	10.5 sqm/ labour table
4.	Other areas- nursing station, doctors' duty room, store, Clean and dirty utility, Circulating area, Toilets	10.5 sqm for clean utility and store and 7 sqm for dirty utility and 3.5 sqm for toilet
5.	Bio-medical Waste	5 sqm
Other functional areas (laboratory, diagnostics, front office/reception, waiting area, administrative area etc.) should be appropriately sized as per the scope of service and patient load of the hospital		

B. Other requirements:

1. Wards:

- The ward shall also have designated areas for nursing station, doctors' duty room, store, clean and dirty utility, janitor room, toilets and this shall be provided from circulation area.
- For a general ward of 12 beds, a minimum of 1 working counter and 1 hand wash basin shall be provided.
- Distance between beds shall be 1.0 metres (Desirable).
- Space at the head end of bed shall be 0.25 metres.
- Door width shall be 1.2 metres (Desirable) and corridor width 2.5 metres (Desirable).

2. Labour room:

- The obstetrical unit shall provide privacy, prevent unrelated traffic through the unit and provide reasonable protection of mothers from infection and from cross-infection.
- Measures shall be in place to ensure safety and security of neonates.
- Resuscitation facilities for neonates shall be provided within the obstetrical unit and convenient to the delivery room.
- The labour room shall contain facilities for medication, hand washing, charting, and storage for supplies and equipment.
- The labour room shall be equipped with oxygen and suction

3. Emergency room (if available)

- Emergency bed and surrounding space shall have minimum 10.5 sq m/ bed area (Desirable).

ANNEXURE A2
FURNITURE AND FIXTURES

S.N	ARTICLES
2.	Examination Table
3.	Writing tables
4.	Chairs
5.	Almirah
6.	Waiting Benches
7.	Medical/Surgical Beds
8.	Labour Table- if applicable
9.	Wheel Chair/Stretcher
10.	Medicine Trolley, Instrument Trolley
11.	Screens/curtains
12.	Foot Step
13.	Bed Side Table
14.	Baby Cot- if applicable
15.	Stool
16.	Medicine Chest
17.	Examination Lamp
18.	View box
19.	Fans
20.	Tube Light/ lighting fixtures
21.	Wash Basin
22.	IV Stand
23.	Colour coded bins for BMW

****This is an indicative list and the items shall be provided as per the size of the hospital and scope of service.***

ANNEXURE A3
EQUIPMENTS

1. EMERGENCY EQUIPMENT

S. No.	Name of Emergency Equipment
1	Resuscitation equipment including Laryngoscope, endotracheal tubes, suction equipment, xylocaine spray, oropharyngeal and nasopharyngeal airways, Ambu Bag-Adult & Paediatric (neonatal if indicated)
2	Oxygen cylinders with flow meter/ tubing/catheter/face mask/nasal prongs
3	Suction Apparatus
4	Defibrillator with accessories (Desirable)
5	Equipment for dressing/bandaging/suturing
6	Basic diagnostic equipment- Non mercury Blood Pressure Apparatus, Stethoscope, weighing machine, thermometer (Non mercury)
7	ECG Machine
8	Pulse Oximeter (Desirable)
9	Nebulizer with accessories

2. Other equipment and consumables, which shall also be available in good working condition as per the scope of services and bed strength (some of the emergency equipment are already mentioned above).

Department	Equipment	Level 1A	Level 1B	Level 2	Level 3
NON MEDICAL					
1) Administration					
	Office equipment	Yes	Yes	Yes	Yes
	Office furniture	Yes	Yes	Yes	Yes
2) Electricity					
	Emergency lights	Yes	Yes	Yes	Yes
3) Water Supply					
	Hand-washing sinks/taps/bowls on stands in all areas	Yes	Yes	Yes	Yes
	Storage tank	Yes	Yes	Yes	Yes
	Water purification chemicals or filter	Yes	Yes	Yes	Yes
	Water source for drinking water	Yes	Yes	Yes	Yes
4) Waste Disposal					
	Buckets for contaminated waste in all treatment areas	Yes	Yes	Yes	Yes
	Drainage system	Yes	Yes	Yes	Yes
	Rubbish bins in all rooms	Yes	Yes	Yes	Yes
	Sanitation facilities for patients	Yes	Yes	Yes	Yes
	Separate Bio-medical waste disposal	Yes	Yes	Yes	Yes
	Sharps containers in all treatment areas	Yes	Yes	Yes	Yes
5) Safety					
	Fire extinguisher	Yes	Yes	Yes	Yes
6) Vehicle (Own/Outsourced)					

	Vehicle 4 wheeler	Desirable	Desirable	Yes	Yes
	Ambulance	Yes	Yes	Yes	Yes
7) Medical Stores					
	Lockable storage	Yes	Yes	Yes	Yes
	Refrigeration	Yes	Yes	Yes	Yes
8) Kitchen (Own/Outsourced)					
	Cooking pots and utensils	Yes	Yes	Yes	Yes
	Cooking stove	Yes	Yes	Yes	Yes
	Food refrigeration	Yes	Yes	Yes	Yes
	Plates, cups & cutlery	Yes	Yes	Yes	Yes
	Storage	Yes	Yes	Yes	Yes
	Washing and drying area facilities	Yes	Yes	Yes	Yes
9) Laundry (Own/Outsourced)					
	Detergent/soap	Yes	Yes	Yes	Yes
	Washing and rinsing equipment/ bowls	Yes	Yes	Yes	Yes
	Housekeeping Brooms, brushes and mops	Yes	Yes	Yes	Yes
10) Housekeeping (Own/Outsourced)					
	Buckets	Yes	Yes	Yes	Yes
	Soap and disinfectant	Yes	Yes	Yes	Yes
MEDICAL					
11) Outpatient Rooms					
	Non Mercury Blood Pressure Apparatus and stethoscope	Yes	Yes	Yes	Yes
	Container for sharps disposal	Yes	Yes	Yes	Yes
	Desk and chairs	Yes	Yes	Yes	Yes
	Examination gloves	Yes	Yes	Yes	Yes
	Examination table	Yes	Yes	Yes	Yes
	Hand washing facilities	Yes	Yes	Yes	Yes
	Light source	Yes	Yes	Yes	Yes
	Minor surgical instruments	No	Yes	Yes	Yes
	Ophthalmoscope	No	No	Yes (as applicable)	Yes
	Otoscope	No	No	Yes (as applicable)	Yes
	Patellar hammer	Yes	Yes	Yes	Yes
	Receptacle for soiled pads, dressings, etc.	Yes	Yes	Yes	Yes
	Separate biohazard disposal	Yes	Yes	Yes	Yes
	Sterile equipment storage	Yes	Yes	Yes	Yes
	Sutures	Yes	Yes	Yes	Yes
	Thermometer(Non mercury)	Yes	Yes	Yes	Yes
	Torch with extra batteries	Yes	Yes	Yes	Yes
	Weighing scale	Yes	Yes	Yes	Yes
12) Women and Child health examination room					
	Non Mercury Blood Pressure Apparatus and stethoscope	Yes	Yes	Yes	Yes
	Contraceptive supplies	Yes	Yes	Yes	Yes

	Birth register	Yes	Yes	Yes	Yes
	Examination gloves	Yes	Yes	Yes	Yes
	Examination table with stirrups	Yes	Yes	Yes	Yes
	Fetal stethoscope	No	Yes	Yes	Yes
	Doppler	No	No	No	Yes
	Hand washing facility	Yes	Yes	Yes	Yes
	Height measure	Yes	Yes	Yes	Yes
	IUD insertion set	Yes	Yes	Yes	Yes
	Pregnant woman Register	Yes	Yes	Yes	Yes
	Speculum and vaginal examination kit	Yes	Yes	Yes	Yes
	Syringes and needles	Yes	Yes	Yes	Yes
	Tape measure	Yes	Yes	Yes	Yes
	Tococardiograph	No	Yes	Yes	Yes

13) Labour room

	Baby scales	Yes	Yes	Yes	Yes
	Non Mercury Blood Pressure Apparatus and stethoscope	Yes	Yes	Yes	Yes
	Clean delivery kits and cord ties	Yes	Yes	Yes	Yes
	Curtains if more than one bed	Yes	Yes	Yes	Yes
	Delivery bed and bed linen	Yes	Yes	Yes	Yes
	Fetal stethoscope	Yes	Yes	Yes	Yes
	Hand washing facility	Yes	Yes	Yes	Yes
	Instrument trolley	Yes	Yes	Yes	Yes
	IV treatment sets	Yes	Yes	Yes	Yes
	Latex gloves and protective clothing	Yes	Yes	Yes	Yes
	Linens for newborns	Yes	Yes	Yes	Yes
	Mucus extractor	Yes	Yes	Yes	Yes
	Oral airways, various sizes	Yes	Yes	Yes	Yes
	Oxygen cylinder /concentrator	Yes	Yes	Yes	Yes
	Partograph charts	Yes	Yes	Yes	Yes
	Self inflating bag and mask - adult and neonatal size	Yes	Yes	Yes	Yes
	Suction machine	Yes	Yes	Yes	Yes
	Suturing sets	Yes	Yes	Yes	Yes
	Thermometer (Non mercury)	Yes	Yes	Yes	Yes
	Tray with routine & emergency drugs, syringes and needles	Yes	Yes	Yes	Yes
	Urinary catheters and collection bags	Yes	Yes	Yes	Yes
	Vacuum extractor set	Yes	Yes	Yes	Yes
	Work surface near bed for newborn resuscitation	Yes	Yes	Yes	Yes

14) Inpatient Wards

	Basic examination equipment (stethoscope, Non mercury BP Apparatus (etc)	Yes	Yes	Yes	Yes
	Beds, washable	Yes	Yes	Yes	Yes
	mattresses and linen				
	Curtains	Yes	Yes	Yes	Yes

	Dressing sets	Yes	Yes	Yes	Yes
	Dressing trolley/Medicine trolley	Yes	Yes	Yes	Yes
	Gloves	Yes	Yes	Yes	Yes
	IV stands	Yes	Yes	Yes	Yes
	Medicine storage cabinet	Yes	Yes	Yes	Yes
	Oxygen cylinder and concentrator	Yes	Yes	Yes	Yes
	Patient trolley on wheels	Yes	Yes	Yes	Yes
	PPE kits	Yes	Yes	Yes	Yes
	Suction machine	Yes	Yes	Yes	Yes
	Urinals and bedpans	Yes	Yes	Yes	Yes
15) Operation Theatre, If available					
	Adequate storage	Yes	Yes	Yes	Yes
	Ambu resuscitation set with adult and child masks	Yes	Yes	Yes	Yes
	Defibrillator			Yes	Yes
	Electro cautery	No	Yes	Yes	Yes
	Fixed operating lights	No	No	No	Yes
	Fixed suction machine	No		No	Yes
	Hand washing facilities	Yes	Yes	Yes	Yes
	Instrument tray	Yes	Yes	Yes	Yes
	Instrument trolley	Yes	Yes	Yes	Yes
	Laryngoscope set	No		Yes	Yes
	Mayo Stand	Yes	Yes	Yes	Yes
	Mobile operating light	Yes	Yes	Yes	Yes
	Ophthalmic Operating Microscope	No	No	Yes (as applicable)	Yes (as applicable)
	Oral airways, various sizes	No		Yes	Yes
	Oxygen cylinder and concentrator	Yes	Yes	Yes	Yes
	Patient trolley on wheels	Yes	Yes	Yes	Yes
	Portable suction machine	Yes	Yes	Yes	Yes
	Safety Box	No		Yes	Yes
	Sphygmomanometer (Non Mercury) and stethoscope	Yes	Yes	Yes	Yes
	Stool adjustable height	No	Yes	Yes	Yes
	Operating table	No	Yes	Yes	Yes
	IV Therapy Equipment	No			
	Anesthesia Equipment Anesthetic trolley/machine	No	Yes	Yes	Yes
	CO2 Monitor	No		Yes	Yes
	O2 Monitor	No		Yes	Yes
	Endoscopic equipment and necessary accessories	No	No	No	Yes
	Bronchoscope	No	No	Desirable	Yes
	Colonoscope	No	No	Desirable	Yes
	Endoscope	No	No	Desirable	Yes
	Fiber Optic Laryngoscope	No	No	Desirable	Yes
16) Central Supply					
	Amputation set	No	No	No	Yes
	Caesarean/hysterectomy set	No	No	Yes	Yes

	Dilatation and curettage set	No	No	Yes	Yes
	Endoscopic instrument cleaning machines and solutions	No	No	No	Yes
	Hernia set	No	No	Yes	Yes
	Laparotomy set	No	No	Yes	Yes
	Linens	Yes	Yes	Yes	Yes
	Locked storage	Yes	Yes	Yes	Yes
	Operating drapes	No	Yes	Yes	Yes
	Ophthalmic instrument	No	No	Yes	Yes
	Protective caps, aprons, shoes and gowns etc.	Yes	Yes	Yes	Yes
	Pelvic/fistula repair set	No	No	No	Yes
	Sterile gloves	Yes	Yes	Yes	Yes
	Sterilization equipment for instrument and linens	Yes	Yes	Yes	Yes
	Surgical supplies (e.g., sutures, dressings, etc.)	Yes	Yes	Yes	Yes
	Thoracocentesis set	No	No	No	Yes
	Thoracostomy set with appropriate tubes and water seal bottles	No	No	No	Yes
	Thoracotomy set	No	No	No	Yes
	Thyroid/Parathyroid set	No	No	No	Yes
	Tracheostomy set	No	No	Yes	Yes
	Tubal ligation set	No	No	Yes	Yes
	Vascular repair set	No	No	Yes	Yes
17) Other equipment as per the specialized services available shall also be there					

ANNEXURE A4
DRUGS, MEDICAL DEVICES AND CONSUMABLES

a. List of Emergency Drugs and consumables (Essential in all hospitals)

Sl. No.	Name of the Drug		
	<i>INJECTIONS</i>		
1.	INJ. DIAZEPAM 10 MG	19.	TAB. SORBITRATE
2.	INJ. FRUSEMIDE 20 MG	20.	TAB. ASPIRIN
3.	INJ. ONDANSETRON 8 MG/4ML	21.	INJ. TETANUS
4.	INJ. RANITIDINE		<i>OTHER</i>
5.	INJ NOR ADRENALINE 4 MG	22.	NEB. SALBUTAMOL 2.5 ML
6.	INJ. PHENYTOIN 50 MG	23.	NEB. BUDESONIDE
7.	INJ DICLOFENAC 75 MG	24.	LIGNOCAINE JELLY 2%
8.	INJ. DERIPHYLLINE	25.	ACTIVATED CHARCOAL
9.	INJ CHLORPHENIRAMINE MALEATE	26.	CALCIUM (INJ or TAB)
10.	INJ. HYDROCORTISONE 100 MG		<i>FLUIDS</i>
11.	INJ. ATROPINE 0.6 MG	27.	RL 500 ML
12.	INJ. ADRENALINE 1 MG	28.	NS 500 ML
13.	INJ. KCL	29.	NS 250 ML
14.	STERILE WATER	30.	NS 100 ML
15.	INJ. SODA BICARBONATE	31.	DNS 500 ML
16.	INJ. DOPAMINE	32.	DEXTROSE 5% 500 ML
17.	INJ. NALAXONE 400 MCG	33.	DEXTROSE 10% 500 ML
18.	INJ. LIGNOCAINE 50 ML	34.	PEDIATRIC IV INFUSION SOLUTION 500 ML

b. The other drugs and consumables shall be available as per the scope of services, bed strength and patient turnover.

ANNEXURE A5
HUMAN RESOURCE

The Human Resource requirement for any hospital depends on the scope of services provided by the hospitals, bed strength and workload of the hospital.

However, on the basis of level of care provided the minimum staffing requirements for Hospital level 1 shall be as follows:

1.	Doctor	Qualified doctor shall be available round the clock on site(Desirable for 1A). Level 1A shall have a MBBS qualified doctor. (Qualified doctor is a MBBS approved as per state government rules & regulations as applicable from time to time). Level 1B shall have MBBS doctor with required post-graduation qualification.
2.	Nurses	Qualified nurses per unit per shift shall be available as per requirement laid down by“The Indian Nursing Council, 1985”, occupancy rate and distribution of bed.(Desirable)
3.	Pharmacist (If in house pharmacy available)	1 in a hospital
4.	Lab Technician (if in house laboratory service available)	1 in a hospital (minimum DMLT) BSc, MSc ,MLT(Desirable)
5.	X-ray Technician (if in house X-ray facility available)	1 in a hospital (minimum Diploma in X Ray Technician course)
6.	Multi Task staff	Minimum 1

Requirement of other staff (Support and administrative) will depend on the scope of the hospital.

ANNEXURE 6

LIST OF LEGAL REQUIREMENTS

Below is the list of legal requirements to be complied with by a hospital as applicable by the local/state health authority (**all may not be applicable**):

Sl. No.	Name of Document	Valid From	Valid Till	Send for renewal by	Remark (Expired/valid/NA)
1.	Registration under Nursing Home Act/ Medical Establishment Act				
2.	Bio-medical Waste Management Licenses				
	Authorization of HCO by PCB				
	MOU with Vendor				
3.	AERB Licenses (As per AERB regulations)				
4.	NOC from Fire Department				
5.	Ambulance				
	Commercial Vehicle Permit				
	Commercial Driver License				
	Pollution Control Licenses				
6.	Building Completion Licenses				
7.	Lift license for each lift				
8.	DG Set Approval for Commissioning*				
9.	Diesel Storage Licenses*				
10.	Retail and bulk drug license (pharmacy)				
11.	Food Safety Licenses*				
12.	Narcotic Drug Licenses*				
13.	Medical Gases Licenses/ Explosives Act*				
14.	Clinical Establishments and Registration (if applicable)				
15.	Blood Bank Licenses				
16.	MoU / agreement with outsourced human resource agencies as per labor laws				
17.	Spirit License				
18.	Electricity rules				
19.	Provident fund/ESI Act				
20.	MTP Act				
21.	PNDT Act				
22.	Sales Tax registration				
23.	PAN				
24.	No objection certificate under Pollution Control Act (Air/Water)				
25.	Arms Act, 1950 (if guards have weapons)				

* (as per regulations of State)

ANNEXURE A7
CONTENT OF MEDICAL RECORD

Medical record shall contain, at the least, the following information:

S. No.	Content
1.	Name & Registration number of treating doctor
2.	Name, demographic details & contact number of patient
3.	Relevant Clinical history, Assessment and re-assessment findings, nursing notes and Diagnosis
4.	Investigation reports
5.	Details of medical treatment, invasive procedures, surgery and other care provided
6.	Applicable consents
7.	Discharge summary
8.	Cause-of-death certificate & Death Summary (where applicable)

ANNEXURE A8
Patients' Rights and Responsibilities:

A. Patients' Rights

A patient and his/her representative has the following rights with respect to the Hospital-

1. To adequate relevant information about the nature, cause of illness, proposed investigations and care, expected results of treatment, possible complications and expected costs;
2. To information on the Rates charged for each type of service provided and facilities available. Clinical Establishment shall display the same at a conspicuous place in the local as well as in English language.
3. To access a copy of case papers, patient records, investigations reports and detailed bill.
4. To informed consent prior to specific tests/treatment (e.g. surgery, chemotherapy)
5. To seek second opinion from an appropriate clinician of patients' choice, with records and information being provided by treating hospital
6. To confidentiality, human dignity and privacy during treatment.
7. To have ensured presence of a female person, during physical examination of a female patient by a male practitioner.
8. To non-discrimination about treatment and behaviour on the basis of HIV status
9. To choose alternative treatment if options are available

B. Patients' Responsibilities

1. Provide all health related information
2. Cooperate with Doctors during examination, treatment
3. Follow all instructions
4. Pay hospitals agreed fees on time
5. Respect dignity of doctors and other hospital staff
6. Never resort to violence

ANNEXURE A9
INFORMED CONSENT/CONSENT GUIDELINES

The informed consent shall at the least contain the following information in an understandable language and format (desirably which a lay person can easily understand)

Sl. No.	Content
1.	Name of the patient/ guardian (in case of minor/mentally disabled).
2.	Registration number of patient
3.	Date of admission
4.	Name & Registration number of treating doctor
5.	Name of procedure/operation/investigation/blood transfusion/anaesthesia and potential complications should be explained
6.	Signature of patient/guardian with date and time

ANNEXURE A10
DISCHARGE SUMMARY

The discharge summary shall at the least contain the following information in any understandable language and format:

Sl.no.	Content
1.	Name & Registration number of treating doctor
2.	Name, demographic details & contact number of patient, if available
3.	Date of admission and discharge
4.	Relevant clinical history, assessment findings and diagnosis
5.	Investigation results,
6.	Details of medical treatment, invasive procedures, surgery and other care provided
7.	Discharge advice (medications and other instructions).
8.	Instruction about when and how to obtain urgent care.

ANNEXURE B
Minimum Standard for hospital (level 3)

1. **Hospital** Level 2 is the clinical establishment that provide secondary healthcare services by various health professionals such as doctors, nurses, allied health workers, dentists, pharmacists, and pathology and imaging professionals. It can be a general hospital providing multi-speciality services having facility for surgery, anaesthesia, and emergency management. Secondary health care is provided by public and private health care organisations both.

These hospitals may provide following services as per the requirement of the community viz. General Medicine, General Paediatrics, General Surgery, Obstetrics & Gynaecology, Orthopaedics, Emergency Medicine, Critical Care Medicine (e.g. HDU, ICU), ENT, Ophthalmology, Dermatology, Community Health, Palliative Medicine, Geriatric Care, Family Medicine, Dentistry including sub specialities, Blood Storage Centre/Blood Bank etc.

2. **Scope**

The scope of services that may be provided at a hospital level 2 practising Allopathy – Modern system of Medicine may include patient-care services in any or all of the following specialities, but not necessarily limited to:

- A. Clinical Services:

- 2.1. General Medicine
 - 2.2. General Surgery
 - 2.3. Obstetrics and Gynaecology
 - 2.4. Paediatrics including new born care
 - 2.5. Orthopaedics
 - 2.6. Anaesthesiology
 - 2.7. Emergency Medicine & Trauma
 - 2.8. Critical Care Medicine (e.g. HDU, ICU)
 - 2.9. ENT
 - 2.10. Ophthalmology
 - 2.11. Psychiatry
 - 2.12. Dermatology
 - 2.13. Community Health
 - 2.14. Palliative Medicine
 - 2.15. Geriatric Care
 - 2.16. Family Medicine
 - 2.17. Dentistry including sub specialities
 - 2.18. Physical Medicine & Rehabilitation
 - 2.19. Transfusion Medicine/Blood Storage Centre/Blood Bank
 - 2.20. Other emerging sub-specialities in any of the above fields.

B. Support services:

- 2.21. Registration / help desk and billing
- 2.22. Diagnostic Services:
 - a. Laboratory
 - b. Imaging Services
 - c. Non-imaging services
- 2.23. Pharmacy and Stores
- 2.24. CSSD / Sterilization Area
- 2.25. Linen management
- 2.26. Kitchen & Dietary Services
- 2.27. Waste Management Services (General and Biomedical)
- 2.28. Medical Gas Supply, Storage & Distribution
- 2.28. Ambulance services

3. Infrastructure Requirements:

3.1	Signage
3.1.1	The Hospital shall display appropriate signage which shall be in at least two languages
3.1.2	The building shall have a board displaying the name of the hospital at a prominent location
3.1.3	Directional signage shall be placed within the facility to guide the patient.
Following informative signage shall be displayed:	
3.1.4	Name of the care provider with registration number
3.1.5	Registration details of the hospital as applicable.
3.1.6	Availability of fee structure of the various services provided (refer to CEA 2010 rules & regulation CG 4 Annexe).
3.1.7	Timings of the facility and services provided.
3.1.8	Mandatory information such as under PNDT Act etc. prominently as applicable.
3.1.9	Important contact numbers such as Blood Banks, Fire Department, Police and Ambulance Services available in the nearby area.
3.1.10	Patients' rights & responsibilities.
Following safety signage shall be displayed:	
3.1.11	Safety Hazard and Caution signs, for e.g. hazards from electrical shock, inflammable articles, radiation etc. at appropriate places, and as applicable under law.
3.1.12	Appropriate Fire exit signage.
3.1.13	Signage for "No Smoking".
3.2.	Other requirements
3.2.1	Access to the hospital shall be comfortable for the patient and/or attendants/visitors.
3.2.2	Access shall be provided within the requirements of "Persons with Disabilities Act" and shall be easy for all those whose mobility may be restricted due to whatever cause.
3.2.3	The hospital shall be developed and maintained to provide safe, clean and hygienic environment for patients, their attendants, staff and visitors
3.2.4	The hospital shall have 24hr provision of potable water for drinking & hand hygiene. It shall also have 24hr supply of electricity, either through direct supply or from other sources.

3.2.5	The building shall be planned as such that sensitive areas, such as wards, consulting and treatment rooms and operation theatres are placed away from the outdoor source of noise. The hospital shall be well illuminated and ventilated
3.2.6	The hospital shall have clean public toilet(s) separate for males and females.
3.2.7	The hospital shall have mechanism for timely maintenance of the hospital building and equipment.
3.2.8	The hospital shall have appropriate internal and external communication facilities.
3.2.9	Furniture and fixtures shall be available in accordance with the activities and workload of the hospital. They shall be functional and properly maintained.
	<i>For minimum space requirements refer to Annexure B1</i>
	<i>For indicative list of furniture and fixtures refer to Annexure B2</i>

4. Medical Equipment and Instruments:

4.1	The hospital shall have adequate medical equipment and instruments, commensurate to the scope of service and number of beds
4.2	There shall be established system for maintenance of critical Equipment
4.3	All equipment shall be kept in good working condition through a process of periodic inspection, cleaning and maintenance. An equipment log-book shall be maintained for all the major equipment.
	<i>For indicative list of medical equipment and instruments refer to Annexure B3.</i>

5. Drugs, Medical devices and Consumables:

5.1	The hospital shall have adequate drugs, medical devices and consumables commensurate to the scope of services and number of beds
5.2	Emergency drugs and consumables shall be available at all times.
5.3	Drug storage shall be in a clean, well lit, and safe environment and shall be in consonance with applicable laws and regulations.
5.4	The facility has defined procedures for storage, inventory management and dispensing of drugs in pharmacy and patient care areas
	<i>For indicative list of drugs, medical devices and consumables refer to Annexure B4.</i>

6. Human Resource Requirements:

6.1	The hospital shall have qualified and/or trained medical staff as per the scope of service provided and the medical care shall be provided as per the requirements of professional and regulatory bodies
6.2	The hospital shall have qualified and/or trained nursing staff as per the scope of service provided and the nursing care shall be provided as per the requirements of professional and regulatory bodies
6.3	The support/paramedical staff shall be qualified and/or trained as per the scope of services provided, and as per the requirement of the respective professional or regulatory bodies.
6.4	For every staff (including contractual staff), there shall be personal record containing the appointment order, documentary evidence of qualification and/or training (and professional registration where applicable).

6.5	Periodic skill enhancement/update/refresher training shall be provided for all categories of the staff as relevant to their job profile, as prescribed by professional bodies and as per local law/regulations.
	<i>For Human resource requirements refer to Annexure B5</i>

7. Support Services:

Registration/Help desk and Billing:	
7.1	The Hospital shall have a Registration/ Help-desk & Billing counter, and the scope of this shall also include provision of patient guidance in matters like services available, cost estimation, healthcare insurance etc.
Diagnostic Services:	
7.2	Diagnostic services may be in-house or outsourced. For minimum standards for diagnostic services refer to CEA standards for Imaging and laboratory services.
7.3	Whether in house or outsourced, the services shall fulfil the requirements of safe and timely patient care.
7.4	The diagnostic services, whether in house or outsourced, shall be commensurate with the scope of services
Pharmacy Services	
7.5	Pharmacy services in a hospital can be in-house or outsourced.
7.6	All applicable legal requirements shall be complied with.
7.7	Medicine storage shall be in a clean, well lit, and safe environment, and as per manufacturer's requirements
CSSD / Sterilization Area	
7.8	Provision for instrument and linen sterilization and storage of sterile items shall be made available as per the scope of services.
7.9	Validation of Sterilization shall be done for ensuring the effectiveness of sterilization process
Linen management:	
7.10	Soiled linen shall be collected, transported and washed separately in clean and hygienic environment.
7.11	Where linen is contaminated, appropriate decontamination shall be carried prior to despatch for washing.
Waste Management Services:	
7.12	Segregation, collection, transportation, storage and disposal of biomedical waste shall be as per Bio medical waste handling rules.
7.13	Waste management guidelines shall be followed in the case of Mercury & other toxic materials as per applicable local laws.
7.14	Segregation, collection, transportation, storage and disposal of general waste shall be as per applicable local laws
Medical Gas	
7.15	Oxygen for medical use shall be available. In addition other gases like Nitrous oxide, Carbon dioxide etc. may be available in consonance with the scope of services and bed strength.
7.16	Medical gases shall be stored and handled in a safe manner.
7.17	All applicable legal requirements shall be complied with.
7.18	Appropriate back-up and safety measures shall be in place to ensure patient safety at all times

Ambulance services	
7.19	The establishment shall have provision of transporting patients for transfer/referral/investigations etc in safe manner.
7.20	Ambulance Services may be in-house or outsourced. The Ambulance services shall comply with the applicable local laws, even if they are outsourced.
	<i>For ambulance checklist please refer to Annexure B6.</i>

8. Legal/Statutory Requirements:

8.1	Every application must be accompanied with the documents confirming compliance with local regulations and law.
	<i>Indicative list is as per Annexure B7.</i>

9. Record Maintenance and reporting:

9.1	The minimum medical records to be maintained and nature of information to be provided by the Hospitals shall be as prescribed in CG 2 Annexe as per Section 12 (1) (iii) of this Act
9.2	Medical Records may be maintained in physical or digital format.
9.3	Confidentiality, security and integrity of records shall be ensured at all times
9.4	The medical records of IPD patients shall be maintained in consonance with National or local law, MCI guidelines, and court orders.
9.5	Every Hospital shall maintain health information and statistics in respect of national programmes, notifiable diseases and emergencies/disasters/ epidemics and furnish the same to the district authorities in the prescribed formats and frequency.
	<i>Content of medical record shall be as per Annexure B7</i>

10. Basic Processes:

Registration / help desk and billing services	
10.1.	The hospital shall register all patients who visit the hospital except if the required services are not available in the facility, in which case the patient is guided to the appropriate nearest facility. (Please also see Emergency Services)
10.2.	Once registered, depending on the clinical need, patient is guided to appropriate service area like OPD, ER etc.
10.3.	Patient shall be guided and informed regarding Patients' rights & responsibilities, cost estimates, third party services (e.g. Insurance) etc.
10.4.	The billing shall be as per the Hospital tariff list, which shall be available to patients in a suitable format.
Assessment and Plan of care	
10.5.	Each patient shall undergo an initial assessment by qualified and/or trained personnel.
10.6.	Further management of patient shall be done by a registered medical practitioner on the basis of findings of initial assessment; for example, OPD treatment, admission, transfer/referral, investigation etc.
10.7.	At the time of admission of patient, General Consent for admission shall be taken. <i>Please refer to Annexure 8.</i>
10.8.	In case of non-availability of beds or where clinical need warrants, the patient shall be referred to another facility along with the required clinical information or notes. There shall be appropriate arrangement for safe transport of patient.

10.9.	Reassessments of the admitted patients shall be done at least once in a day and/or according to the clinical needs and these shall be documented.
10.10.	Any examination, treatment or management of female patient shall be done in the presence of an employed female attendant/female nursing staff, if conducted by male personnel inside the hospital and vice versa.
Informed Consent Procedure	
10.11.	Informed consent shall be obtained from the patient/ next of kin/ legal guardian as and when required as per the prevailing Guidelines / Rules and regulations in the language patient can understand (for e.g., before Invasive procedures, anaesthesia, Blood transfusion, HIV testing, Research, etc).
Care Of Patient	
10.12.	The Hospital shall provide care of patient as per the best clinical practices and reference may be made to Standard Treatment Guidelines that may be notified by the Central/ State Government/National & International professional bodies.
10.13.	Patient and/or families shall be educated on preventive, curative, promotive and rehabilitative aspects of care either verbally, or through printed materials.
10.14.	All the relevant documents pertaining to any invasive procedures performed shall be maintained in the record, including the procedure safety checklist.
10.15.	Monitoring of patient shall be done during and after all the procedures and same shall be documented (for example, after anaesthesia, surgical procedures, blood transfusion, etc.).
10.16.	Staff involved in direct patient care shall receive basic training in CPR
Emergency Services:	
10.17.	Emergency patients shall be attended on priority. The Emergency department shall be well equipped with trained staff.
10.18.	If emergency services are not available in the hospital, the hospital shall provide first aid to the patients and arrange appropriate transfer/referral of the patient.
Medication Prescription, Administration And Monitoring	
10.19.	Prescription shall include name of the patient, date, name of medication, dosage, route, frequency, duration, name, signature and registration number of the medical practitioner in legible writing
10.20.	Drug allergies shall be ascertained before prescribing and administration; if any allergy is discovered, the same shall be communicated to the patient and recorded in the Case sheet as well.
10.21.	Patient identity, medication, dose, route, timing, expiry date shall be verified prior to administration of medication
10.22.	Safe injection practices shall be followed as per WHO guidelines.
10.23.	High Risk Medicines shall be identified and verified by two trained healthcare personnel before administration.
10.24.	Patients shall be monitored after medication administration and adverse drug reaction/events if any shall be recorded and reported (please refer http://cdsco.nic.in/adr3.pdf).
Infection Control	
10.25.	The hospital shall follow standard precautions like practicing hand hygiene, use of personal protection equipment, etc to reduce the risk of healthcare associated infections.

10.26.	The hospital shall ensure adequate and proper spacing in the patient care area so as to prevent transmission of infections.
10.27.	Regular cleaning of all areas with disinfectant shall be done as per prescribed & documented procedure.
10.28.	Prescribed & documented Infection Control Practices shall be followed in High risk areas like Operation theatre, ICU, HDU, etc as per good clinical practice guidelines.
10.29.	Housekeeping/ sanitary services shall ensure appropriate hygiene and sanitation in the establishment.
Safety of the patient, staff, visitors and relative in a hospital	
10.30.	Security and safety of patients, staff, visitors and relatives shall be ensured by provision of appropriate safety installations and adoption of appropriate safety measures. E.g. identification of mother and baby in obstetric facility, etc
10.31.	The Hospital shall undertake all necessary measures, including demonstration of preparedness for fire and non-fire emergencies, to ensure the safety of patients, attendants, staff and visitors. (Please also see section on Infrastructure and Security and Fire)
10.32.	All applicable fire safety measures as per local law shall be adopted. This includes fire prevention, detection, mitigation, evacuation and containment measures. Periodic training of the staff and mock drills shall be conducted and the same shall be documented.
10.33.	In case of any epidemic, natural calamity or disaster, the owner/keeper of every Hospital shall, on being requested by the designated supervising Authority, cooperate and provide such reasonable assistance and medical aid as may be considered essential by the supervising authority at the time of natural calamity or disastrous situation
Patient Information and Education	
10.34.	The patient and/or family members shall be explained about the disease condition, proposed care, including the risks, alternatives and benefits. They shall be informed regarding the expected cost of the treatment. They shall also be informed about the progress and any change of condition.
10.35.	Patient and/or family are educated about the safe and effective use of medication, food drug interaction, diet, and disease prevention strategies.
Discharge	
10.36.	A Discharge summary shall be given to all patients discharged from the hospital. <i>For content of discharge summary refer to <u>Annexure B9</u>.</i>
10.37.	The discharge summary shall include the points as mentioned in the annexure in an understandable language and format
10.38.	Discharge summary shall also be given to patient and/or attendant in case of transfer LAMA/DAMA or death.

ANNEXURE B1

Minimum space requirements in a hospital level 2:

A. Minimum space requirements in a hospital level 2 shall be as follows

Total Area		
1.	Total Area of hospital level 1 including 30% area for circulation space for corridors, lobby, reception area	40 sq mt/bed as carpet area
Wards		
2.	Ward bed and surrounding space	6sq mt/ bed; in addition circulation space of 30% as indicated in total area shall be provided for Nursing station, Ward store, Sanitary etc
Intensive Care Unit (if available)		
3.	For medical/surgical ICU/HDU bed and surrounding space	10.5 sq mt/ bed; in addition circulation space of 30% as indicated in the total area shall be provided for nursing station, doctors' duty room, store, clean and dirty utility, circulating area for movement of staff, trolley, toilet etc.
Minor Operation Theatre/Procedure room		
4.	OT for minor procedures (where applicable)	10.5 sq mt; in addition circulation space of 30% as indicated in total area shall be provided for nursing station, scrub station, clean and dirty utility, dressing room, toilet etc.
Labour room		
5.	Labour Table and surrounding space	10.5 sq mt/ labour table
6.	Other areas- nursing station, doctors' duty room, store, Clean and dirty utility, Circulating area, Toilets	10.5 sq mt for clean utility and store and 7 sq mt for dirty utility and 3.5 sq mt for toilet.
Operation Theatre (OT)		
7.	Operating Room Area	24.5 sq mt per operating room.
Emergency & Casualty (if separate):		
8.	Emergency bed and surrounding space	10.5 sq m/ bed
9.	Other areas- nursing station, doctors' duty room, store, Clean and dirty utility, Dressing area, Toilets	Nurse station out of circulation. Doctor duty room of 7sqm and a toilet of 3.5sqm. Store of 7sqm
Pharmacy		
10.	Pharmacy	The size should be adequate to contain 5 percent of the total clinical visits to the OPD in one session at the rate of 0.8 m2 per patient.
Bio-medical Waste		
11.	<50 beds	5 sq m
12.	50-100 beds	10 sq m
13.	>100 beds	20 sq m
Other functional areas (laboratory, diagnostics, front office/reception, waiting area, administrative area etc) should be appropriately sized as per the scope of service and patient load of the hospital.		

B. Other requirements:

1. Wards:

- a. The ward shall also have designated areas for nursing station, doctors' duty room, store, clean and dirty utility, janitor room, toilets and this shall be provided from circulation area.
- b. For a general ward of 12 beds, a minimum of 2 WC and 1 hand wash basin shall be provided.
- c. Distance between beds shall be 1.0 metres
- d. Space at the head end of bed shall be 0.25 metres.
- e. Door width shall be 1.2 metres and corridor width 2.5 metres

2. Intensive Care Unit (if available)

- a. The unit is to be situated in close proximity of operation theatre, acute care medical and surgical ward units.
- b. Suction, oxygen supply and compressed air should be provided for each bed.
- c. Adequate lighting and uninterrupted power supply shall be provided.
- d. Adequate multi-sockets with 5 ampere and 15 ampere sockets and/or as per requirement to be provided for each bed.
- e. Nurse call system for each bed.
- f. ICU shall have designated area for nursing station, doctors' duty room, store, clean and dirty utility, circulating area for movement of staff, trolley, toilet, shoe change, trolley bay, janitor closet etc

3. Labour room

- a. The obstetrical unit shall provide privacy, prevent unrelated traffic through the unit and provide reasonable protection of mothers from infection and from cross-infection.
- b. Measures shall be in place to ensure safety and security of neonates.
- c. Resuscitation facilities for neonates shall be provided within the obstetrical unit and convenient to the delivery room.
- d. The labour room shall contain facilities for medication, hand washing, charting, and storage for supplies and equipment.
- e. The labour room shall be equipped with oxygen and suction

4. Operation Theatre

- a. The operation theatre complex shall have appropriate zoning.
- b. The operation theatre complex shall provide appropriate space for other areas- nursing station, doctors' duty room, scrub station, sterile store, Clean and dirty utility, Dress change room, Toilets:-
 - (i) Sterile area – consists of operating room sterile store and anesthesia room
 - (ii) Clean zone- consists of equipment/medical store, scrub area, pre and/or post-operative area and linen bay
 - (iii) Protective zone- consists of change room, doctors room and toilets
 - (iv) Dirty area
 - (v) Due considerations are to be given to achieve highest degree of asepsis to provide appropriate environment for staff and patients.
- c. Doors of pre-operative and recovery room are to be 1.5 m clear widths.
- d. Air Conditioning to be provided in all areas. Window AC and split units should preferably be avoided as they are pure re circulating units and become a source of infection.

- e. Appropriate arrangements for air filtration to be made.
- f. Temperature and humidity in the OT shall be monitored.
- g. Oxygen, Nitrous Oxide, suction and compressed air supply should be provided in all OTs.
- h. All necessary equipment such as shadow-less light, Boyle's apparatus shall be available and in working condition.
- i. Uninterrupted power supply to be provided.

Note: For Eye Hospitals only where procedures are done in local and/or regional anaesthesia, Minor OT criteria may be applicable.

5. Emergency room

- a. Emergency bed and surrounding space shall have minimum 10.5 sq m/ bed area.

6. Clinical Laboratory

- a. The laboratory area shall be appropriate for activities including test analysis, washing, biomedical waste storage and ancillary services like Storage of records, reagents, consumables, stationary etc eating area for staff.
- b. For detail please refer to NABH CEA LAB

7. Imaging

- a. The department shall be located at a place which is easily accessible to both OPD and wards and also to emergency and operation theatre.
- b. As the department deals with the high voltage, presence of moisture in the area shall be avoided.
- c. The size of the department shall depend upon the type of equipment installed.
- d. The department/room shall have a sub-waiting area preferably with toilet facility and a change room facility, if required.
- e. For detail please refer to NABH CEA IMAGING

8. Central Sterilization and Supply

- a. Department (CSSD) — Sterilization, being one of the most essential services in a hospital, requires the utmost consideration in planning.
- b. Centralization increases efficiency, results in economy in the use of equipment and ensures better supervision and control.
- c. The materials and equipment dealt in CSSD shall fall under three categories:
 - (i) those related to the operation theatre department,
 - (ii) common to operating and other departments, and
 - (iii) pertaining to other departments alone.

9. Other Departments

- a. Other departments shall have appropriate infrastructure commensurate to the scope of service of the hospital.

ANNEXURE B2
FURNITURE AND FIXTURES

S.N	ARTICLES
2.	Examination Table
3.	Writing tables
4.	Chairs
5.	Almirah
6.	Waiting Benches
7.	Medical/Surgical Beds
8.	Labour Table- if applicable
9.	Wheel Chair/Stretcher
10.	Medicine Trolley, Instrument Trolley
11.	Screens/curtains
12.	Foot Step
13.	Bed Side Table
14.	Baby Cot- if applicable
15.	Stool
16.	Medicine Chest
17.	Examination Lamp
18.	View box
19.	Fans
20.	Tube Light/ lighting fixtures
21.	Wash Basin
22.	IV Stand
23.	Colour coded bins for BMW

****this is an indicative list and the items shall be provided as per the size of the hospital and scope of service.***

ANNEXURE B3 **EQUIPMENTS**

1. Emergency Equipment

Sr No	Name of Emergency Equipment
1	Resuscitation equipment including Laryngoscope, endotracheal tubes, suction equipment, xylocaine spray, oropharyngeal and nasopharyngeal airways, Ambu Bag-Adult & Paediatric (neonatal if indicated)
2	Oxygen cylinders with flow meter/ tubing/catheter/face mask/nasal prongs
3	Suction Apparatus
4	Defibrillator with accessories
5	Equipment for dressing/bandaging/suturing
6	Basic diagnostic equipment- Blood Pressure Apparatus, Stethoscope,, weighing machine, thermometer
7	ECG Machine
8	Pulse Oximeter
9	Nebulizer with accessories

2. Other equipment which shall also be available in good working condition as per the scope of services and bed strength (some of the emergency equipment are already mentioned above).

NB: Any change or addition of new equipment (major equipment) must be intimated to the NHPS within 1 (one) month should be intimated to the NHPS within 1 (one) month.

Department	Equipment	Level 1	Level 2	Level 3
NON MEDICAL				
1) Administration				
	Office equipment	Yes	Yes	Yes
	Office furniture	Yes	Yes	Yes
2) Electricity				
	Emergency lights	Yes	Yes	Yes
3) Water Supply				
	Hand-washing sinks/taps/bowls on stands in all areas	Yes	Yes	Yes
	Storage tank	Yes	Yes	Yes
	Water purification chemicals or filter	Yes	Yes	Yes
	Water source for drinking water	Yes	Yes	Yes
4) Waste Disposal				
	Buckets for contaminated waste in all treatment areas	Yes	Yes	Yes
	Drainage system	Yes	Yes	Yes
	Incinerator or burial pit	Yes	Yes	Yes
	Protective boots and utility gloves	Yes	Yes	Yes
	Rubbish bins in all rooms	Yes	Yes	Yes
	Sanitation facilities for patients	Yes	Yes	Yes
	Separate Bio-medical waste disposal	Yes	Yes	Yes
	Sharps containers in all treatment areas	Yes	Yes	Yes

5) Safety				
	Fire extinguisher			
6) Vehicle				
	Vehicle 4—wheel drive	No	Yes	Yes
	Ambulance 4-wheel drive	No	No	Yes
7) Medical Stores				
	Lockable storage	Yes	Yes	Yes
	Refrigeration	Yes	Yes	Yes
8) Kitchen				
	Cooking pots and utensils	No	Yes	Yes
	Cooking stove	No	Yes	Yes
	Food refrigeration	No	Yes	Yes
	Plates, cups & cutlery	No	Yes	Yes
	Storage	No	Yes	Yes
	Washing and drying area facilities	Yes	Yes	Yes
9) Laundry				
	Detergent/soap	Yes	Yes	Yes
	Washing and rinsing equipment/ bowls	No	Yes	Yes
	Housekeeping Brooms, brushes and mops	Yes	Yes	Yes
10) Housekeeping				
	Buckets	Yes	Yes	Yes
	Soap and disinfectant	Yes	Yes	Yes
MEDICAL				
11) Outpatient Rooms				
	Blood pressure machine and stethoscope	Yes	Yes	Yes
	Container for sharps disposal	Yes	Yes	Yes
	Desk and chairs	Yes	Yes	Yes
	Examination gloves	Yes	Yes	Yes
	Examination table	Yes	Yes	Yes
	Hand washing facilities	Yes	Yes	Yes
	Light source	Yes	Yes	Yes
	Minor surgical instruments	No	Yes	Yes
	Ophthalmoscope	No	Yes (as applicable)	Yes
	Otoscope	No	Yes (as applicable)	Yes
	Patellar hammer	No	Yes	Yes
	Receptacle for soiled pads, dressings, etc	Yes	Yes	Yes
	Separate biohazard disposal	Yes	Yes	Yes
	Sterile equipment storage	Yes	Yes	Yes
	Sutures	Yes	Yes	Yes
	Thermometer	Yes	Yes	Yes
	Torch with extra batteries	Yes	Yes	Yes
	Weighing scale	Yes	Yes	Yes
12) Women and Child health examination room				

	BP machine and stethoscope	Yes	Yes	Yes
	Contraceptive supplies	Yes	Yes	Yes
	Child register	Yes	Yes	Yes
	Examination gloves	Yes	Yes	Yes
	Examination table with stirrups	Yes	Yes	Yes
	Fetal stethoscope	No	Yes	Yes
	Doppler	No	No	Yes
	Hand washing facility	Yes	Yes	Yes
	Height measure	Yes	Yes	Yes
	IUD insertion set	Yes	Yes	Yes
	Pregnant woman Register	Yes	Yes	Yes
	Speculum and vaginal examination kit	Yes	Yes	Yes
	Syringes and needles	Yes	Yes	Yes
	Tape measure	Yes	Yes	Yes
	Tococardiograph	No	Yes	Yes
13) Labour room				
	Baby scales	Yes	Yes	Yes
	BP machine and stethoscope	Yes	Yes	Yes
	Clean delivery kits and cord ties	Yes	Yes	Yes
	Curtains if more than one bed	Yes	Yes	Yes
	Delivery bed and bed linen	Yes	Yes	Yes
	Fetal stethoscope	Yes	Yes	Yes
	Hand washing facility	Yes	Yes	Yes
	Instrument trolley	Yes	Yes	Yes
	IV treatment sets	Yes	Yes	Yes
	Latex gloves and protective clothing	Yes	Yes	Yes
	Linens for newborns	Yes	Yes	Yes
	Mucus extractor	Yes	Yes	Yes
	Oral airways, various sizes	Yes	Yes	Yes
	Oxygen tank and concentrator	Yes	Yes	Yes
	Partograph charts	Yes	Yes	Yes
	Self inflating bag and mask - adult and neonatal size	Yes	Yes	Yes
	Suction machine	Yes	Yes	Yes
	Suturing sets	Yes	Yes	Yes
	Thermometer	Yes	Yes	Yes
	Tray with routine & emergency drugs, syringes and needles	Yes	Yes	Yes
	Urinary catheters and collection bags	Yes	Yes	Yes
	Vacuum extractor set	Yes	Yes	Yes
	Work surface near bed for newborn resuscitation	Yes	Yes	Yes
14) Inpatient Wards				
	Basic examination equipment (stethoscope, BP machine, etc)	Yes	Yes	Yes
	Beds, washable mattresses and linen	Yes	Yes	Yes
	Curtains	Yes	Yes	Yes
	Dressing sets	Yes	Yes	Yes

	Dressing trolley/Medicine trolley	Yes	Yes	Yes
	Gloves	Yes	Yes	Yes
	IV stands	Yes	Yes	Yes
	Medicine storage cabinet	Yes	Yes	Yes
	Oxygen tank and concentrator	Yes	Yes	Yes
	Patient trolley on wheels	Yes	Yes	Yes
	PPE kits	Yes	Yes	Yes
	Suction machine	Yes	Yes	Yes
	Urinals and bedpans	Yes	Yes	Yes
15) Operation Theatre				
	Adequate storage	No	Yes	Yes
	Ambu resuscitation set with adult and child masks		Yes	Yes
	Defibrillator	No	No	Yes
	Electro cautery	No	No	Yes
	Fixed operating lights	No	No	Yes
	Fixed suction machine	No	No	Yes
	Hand washing facilities	No	Yes	Yes
	Instrument tray	No	Yes	Yes
	Instrument trolley	No	Yes	Yes
	Laryngoscope set	No	Yes	Yes
	Mayo Stand	No	Yes	Yes
	Mobile operating light	No	Yes	Yes
	Ophthalmic Operating Microscope	No	Yes (as applicable)	Yes (as applicable)
	Oral airways, various sizes	No	Yes	Yes
	Oxygen tank and concentrator	No	Yes	Yes
	Patient trolley on wheels	No	Yes	Yes
	Portable suction machine	No	Yes	Yes
	Safety Box	No	Yes	Yes
	Sphygmomanometer and stethoscope	No	Yes	Yes
	Stool adjustable height	No	Yes	Yes
	Operating table	No	Yes	Yes
	IV Therapy Equipment	No		
	Anesthesia Equipment Anesthetic trolley/machine	No	Yes	Yes
	CO2 Monitor	No	Yes	Yes
	O2 Monitor	No	Yes	Yes
	Endoscopic equipment and necessary accessories	No	No	Yes
	Bronchoscope	No	No	Yes
	Colonoscope	No	No	Yes
	Endoscope	No	No	Yes
	Fiber Optic Laryngoscope	No	No	Yes
16) Central Supply				
	Amputation set	No	No	Yes
	Caesarean/hysterectomy set	No	Yes	Yes

	Dilatation and curettage set	No	Yes	Yes
	Endoscopic instrument cleaning machines and Solutions	No	No	Yes
	Hernia set	No	No	Yes
	Laparotomy set	No	Yes	Yes
	Linens	Yes	Yes	Yes
	Locked storage	Yes	Yes	Yes
	Operating drapes	No	Yes	Yes
	Ophthalmic instrument	No	Yes	Yes
	Protective hats, aprons, shoes and gowns etc	Yes	Yes	Yes
	Pelvic/fistula repair set	No	No	Yes
	Sterile gloves	Yes	Yes	Yes
	Sterilization equipment for instruments and linens	Yes	Yes	Yes
	Surgical supplies (e.g., sutures, dressings, etc)	Yes	Yes	Yes
	Thoracentesis set	No	No	Yes
	Thoracostomy set with appropriate tubes and water seal bottles	No	No	Yes
	Thoracotomy set	No	No	Yes
	Thyroid/Parathyroid set	No	No	Yes
	Tracheostomy set	No	Yes	Yes
	Tubal ligation set	No	Yes	Yes
	Vascular repair set	No	Yes	Yes
17) Other equipment as per the specialized services available shall also be there				

ANNEXURE B4
DRUGS, MEDICAL DEVICES AND CONSUMABLES

a. List of Emergency Drugs and consumables (Essential in all hospitals)

Sl. No.	Name of the Drug
	<i>INJECTIONS</i>
1.	INJ. DIAZEPAM 10 MG
2.	INJ. FRUSEMIDE 20 MG
3.	INJ. ONDANSETRON 8 MG/4ML
4.	INJ. RANITIDINE
5.	INJ NOR ADRENALINE 4 MG
6.	INJ. PHENYTOIN 50 MG
7.	INJ DICLOFENAC 75 MG
8.	INJ. DERIPHYLLINE
9.	INJ CHLORPHENIRAMINE MALEATE
10.	INJ. HYDROCORTISONE 100 MG
11.	INJ. ATROPINE 0.6 MG
12.	INJ. ADRENALINE 1 MG
13.	INJ. KCL
14.	STERILE WATER
15.	INJ. SODA BICARBONATE
16.	INJ. DOPAMINE
17.	INJ. NALAXONE 400 MCG
18.	INJ. LIGNOCAINE 50 ML
19.	TAB. SORBITRATE
20.	TAB. ASPIRIN
21.	INJ. TETANUS
22.	INJ. ADENOSINE
	<i>OTHER</i>
23.	NEB. SALBUTAMOL 2.5 ML
24.	NEB. BUDESONIDE
25.	LIGNOCAINE JELLY 2%
26.	ACTIVATED CHARCOAL
27.	CALCIUM (INJ or TAB)
	<i>FLUIDS</i>
28.	RL 500 ML
29.	NS 500 ML
30.	NS 250 ML
31.	NS 100 ML
32.	DNS 500 ML
33.	DEXTROSE 5% 500 ML
34.	DEXTROSE 10% 500 ML
35.	PEDIATRIC IV INFUSION SOLUTION 500 ML

b. The other drugs and consumables shall be available as per the scope of services, bed strength and patient turnover.

c. Medical devices shall be available as per the scope of services, bed strength and patient turnover.

ANNEXURE B5

HUMAN RESOURCE

The Human Resource requirement for any hospital shall be as per the scope of services provided by the hospital.

Hospital employs varieties of personnel with different levels of skill and competency mix. Health Workforce is the most critical component of the hospital resources. This is not only because it consumes 60 to 70% of the recurrent budget allocation but also because of the skills, competency, capacity and commitment of the human resources that determine the efficiency, effectiveness and quality of medical care.

The requirement mentioned below is the minimum requirement for upto 50 bedded Hospital Level 2 and it shall be prorated as required:

Sl. No.	Human Resource	Requirement
1.	Doctor	MBBS doctor shall be available round the clock on site per unit. And 1 Doctor with specialization in the subject concerned as per scope of service (Full-Time / Part-Time or visiting)
2.	Nurses	Qualified nurses per unit per shift shall be available as per requirement laid down by “The Indian Nursing Council, 1985”, occupancy rate and distribution of bed. Qualified nurse is a nursing staff approved as per state government rules & regulations as applicable from time to time).
3.	Pharmacist (If in house pharmacy available)	1 in a hospital
4.	Lab Technician (if in house laboratory service available)	1 in a hospital (minimum DMLT)
5.	X-ray Technician (if in house X-ray facility available)	1 in a hospital (minimum Diploma in X Ray Technician course)
6.	Multi-purpose Worker	Minimum 2 (minimum 12 th pass)

NB:

- a. *Requirement of other staff (support and administrative) will depend on the scope of the hospital.
- b. The Particulars (Registration Certificate issued by the Competent Council/ Authority) of the Doctors, Nurses & Allied Health Professionals must to be provided.
- c. Any change or addition of above-mentioned category of manpower must be intimated to the NHPS within 1 (one) month.

ANNEXURE B6
LIST OF LEGAL REQUIREMENTS

Below is the list of legal requirements to be complied with by a hospital a applicable by the local/state health authority (all may not be applicable):

Sl.	Name of Document	Valid From	Valid Till	Send for renewal by	Remark (Expired/valid/NA)
1.	Registration under Nursing Home Act/ Medical Establishment Act				
2.	Bio-medical Waste Management Licenses				
	Authorization of HCO by PCB				
	MOU with Vendor				
3.	AERB Licenses				
4.	NOC from Fire Department				
5.	Ambulance				
	Commercial Vehicle Permit				
	Commercial Driver License				
	Pollution Control Licenses				
6.	Building Completion Licenses				
7.	Lift license for each lift				
8.	DG Set Approval for Commissioning				
9.	Diesel Storage Licenses				
10.	Retail and bulk drug license (pharmacy)				
11.	Food Safety Licenses				
12.	Narcotic Drug Licenses				
13.	Medical Gases Licenses/ Explosives Act				
14.	Clinical Establishments and Registration (if applicable)				
15.	Blood Bank Licenses				
16.	Boilers Licenses				
17.	MoU / agreement with outsourced human resource agencies as per labor laws				
18.	Spirit Licence				
19.	Electricity rules				
20.	Provident fund/ESI Act				
21.	MTP Act				
22.	PNDT Act				
23.	Salex Tax registration				
24.	PAN				
25.	No objection certificate under Pollution Control Act (Air/Water)				
26.	Wireless operation certificate from Indian P&T				
27.	Arms Act, 1950 (if guards have weapons)				

ANNEXURE B7
CONTENT OF MEDICAL RECORD

Medical record shall contain, at the least, the following information:

Sl. No.	Content
1.	Name & Registration number of treating doctor
2.	Name, demographic details & contact number of patient
3.	Relevant Clinical history, Assessment and re-assessment findings, nursing notes and Diagnosis
4.	Investigation reports
5.	Details of medical treatment, invasive procedures, surgery and other care provided
6.	Applicable consents
7.	Discharge summary
8.	Cause-of-death certificate & Death Summary (where applicable)

ANNEXURE B8
INFORMED CONSENT/CONSENT GUIDELINES

The informed consent shall at the least contain the following information in an understandable language and format.

Sl. No.	Content
1.	Name of the patient/ guardian (in case of minor/mentally disabled).
2.	Registration number of patient
3.	Date of admission
4.	Name & Registration number of treating doctor
5.	Name of procedure/operation/investigation/blood transfusion /anaesthesia/ potential complications
6.	Signature of patient/guardian with date and time

ANNEXURE B9
Discharge Summary

The discharge summary shall at the least contain the following information in an understandable language and format.

Sl. No.	Content
1.	Name & Registration number of treating doctor
2.	Name, demographic details & contact number of patient, if available
3.	Date of admission and discharge
4.	Relevant clinical history, assessment findings and diagnosis
5.	Investigation results,
6.	Details of medical treatment, invasive procedures, surgery and other care provided
7.	Discharge advice (medications and other instructions).
8.	Instruction about when and how to obtain urgent care.

REFERENCE:

- a. Levels of Hospitals:
<http://clinicalestablishments.gov.in/WriteReadData/650.pdf>
- b. Minimum Standards for various Levels of Hospitals
<http://clinicalestablishments.gov.in/En/1070-draft-minimum-standards.aspx>
- c. Standard Treatment Guidelines:
 - 1. https://pmjay.gov.in/standard_treatment_guidelines
 - 2. <http://clinicalestablishments.gov.in/En/1068-standard-treatment-guidelines.aspx>