Rejuvenating Public Health Facilities

Kayakalp- Clean hospital award scheme for

Health & Wellness Centre (HWC – SC)





Objectives of Kayakalp Initiative

- To promote cleanliness, hygiene and Infection Control Practices
- To incentivize and recognize public healthcare facilities that show exemplary performance adhering cleanliness and infection control.
- To inculcate a culture of ongoing assessment and peer review of performance
- To create and share sustainable practices related to improved cleanliness

Assessment Process

- 1st and 2nd Assessment to be done by facility staff Community Health Officer or LHV (where CHO is not present). In case CHO is not present in HWCs, checklist to be filled and shared by concerned PHC MO incharge with district authorities
- Peer Assessment –To be done for all selected HWCs of district.
 BCMO/CHO/PHC MO incharge/BPM of one block level facility would undertake the assessment of HWCs in another block.
- External Assessment of facilities scoring more than 70% by RCHO/DPM/ any other trained staff present at district level.



Reward Scheme

Kayakalp winner awards for **Health and Wellness Centres** is based on number of HWCs operational in sub centres as per following details -

S.NO	Number of HWCs Operational in Sub centres in district	Award
1	10-25	One award – Rs. 1 lakh
2	26-50	1 st prize - Rs. 1 lakh Runner up – Rs. 50,00
3	>50	1 st prize - Rs. 1 lakh 1 st Runner up – Rs. 50,000 2 nd Runner up – Rs. 35,000

Certificate of Commendation plus cash award of Rs. 25,000 to HWCs scoring above 70 %

75 % for improving the amenities, upkeep and services, while 25% for facility teams as a team incentive.

Criteria for Assessment



A. Hospital upkeep - 40



B. Sanitation & Hygiene - 40



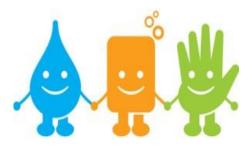
C. Waste Management - 40



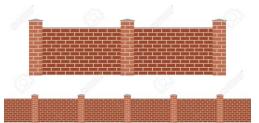
D. Infection Control - 40



E. Support Services. - 20



F. Hygiene promotions - 20



G. Beyond Boundary wall - 40

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Assessment Protocol

KAYAKALP Measurement System HWCs

Thematic areas Components Checkpoint

Broad areas or themes for assessing different aspects of "Cleanliness" like Hospital/ Facility upkeep, Sanitation & Hygiene, waste Management, Infection Control, Support services and Hygiene promotion.

7

Statement of requirement for particular aspect of Cleanliness

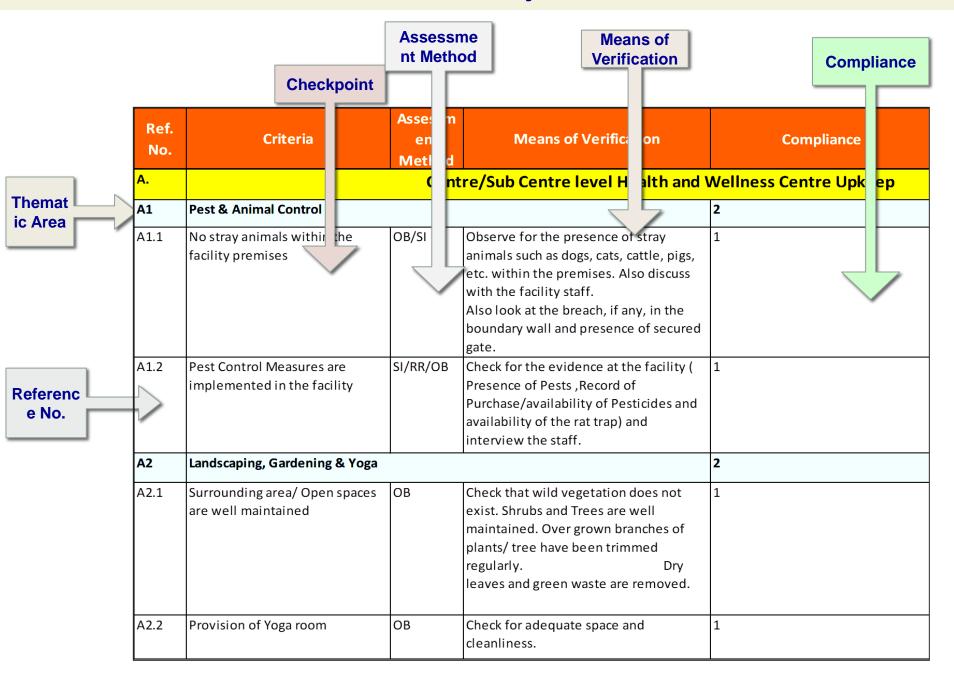
60

Tangible measurable checkpoints are those, which can be objectively observed and scored.

120

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KAYAKALP—Anatomy of Score Card



Assessment Method



OBSERVATION (OB)



RECORD REVIEW (RR)



STAFF INTERVIEW (SI)



PATIENT INTERVIEW (PI)

Compliance & Scoring Rules

Full Compliance

2

- All Requirements in Checkpoint are Meeting
- ➤ All Tracers given in Means of verification are available
- > Intent of check point is meeting

Partial Compliance

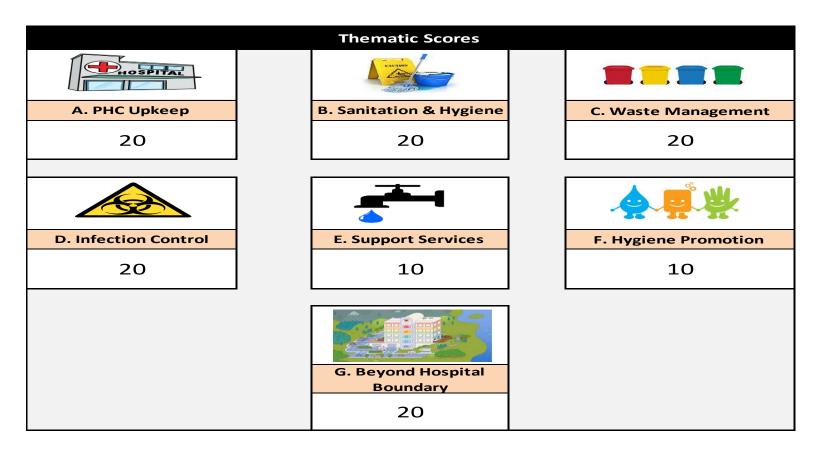
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- Some of the requirements in checkpoints are meeting
- ➤ All Least 50% of tracers in Means of verification are available
- > Intent of check point is partially meeting

Non Compliance 0

- Most of the requirements are not meeting
- Less than 50% of tracers in Means of verification are available
- Intent of Check point is not meeting

Name of Facility		Level of Assessment				
Grading	50.0%	Improvement				





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Clean Hospital Initiative





Theme A – Hospital / Facility upkeep



A1. Pest & Animal A10. Work Place A2. Landscaping, Gardening & Management Yoga A9. Water A3. Maintenance of open area Conservation Theme A HOSPITAL A8. Removal of Junk A4. Hospital Appearance Material Hospital Upkeep A7. Maintenance of A5. Infrastructure Furniture & Fixtures Maintenance

A6. Illumination কাথাকল্ম

A1. Pest Control & Animal Control

Check Point



Pest Control & Animal Control

- No stray animals within the facility premises
- Pest Control Measures are implemented in the facility
- Measures for Mosquito free environment are in place

A1.1 No stray animals within the facility premises.











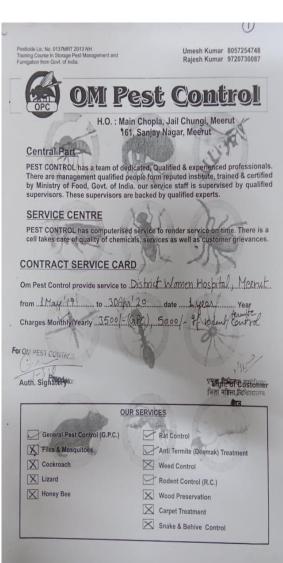
A1.2 Pest Control Measures are implemented in the facility



Check for the evidence at the facility (Presence of Pests, Record of Purchase of Pesticides and availability of the rat trap) and Interview the staff about its usage

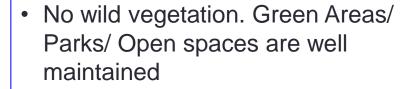


Ask the facility administration about pest control measures to control rodents and insect. Check records of engaging a professional agency for the same



A2 Landscaping, Gardening & Yoga

Check Point







Landscaping, Gardening & Yoga

Provision of Yoga room

A2.1 Surrounding area are well maintained









A2.2 Provision of Yoga room





A3 Maintenance of Open Areas









A4 Hospital/Facility Appearance



Check Point

- A4.1 Walls are well-plastered and painted
- A4.1 Name of the facility is prominently displayed at the entrance
- A4.2 Branding of HWC is done as per guidelines.

A5 Infrastructure Maintenance



Check Point

- Hospital Infrastructure is well maintained
- Hospital has a system for periodic maintenance of infrastructure at predefined interval
- Hospital has intact boundary wall and functional gates at entry

A5.1 Hospital Infrastructure is well maintained









A5.4 Intact boundary wall





A6 - ILLUMINATION AND LIGHTING IN HOSPITAL

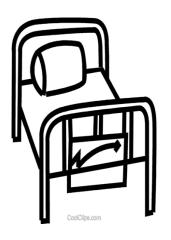
 Adequate illumination inside and outside centre

 Use of Energy efficiency measures like CFL or LED



A7 Maintenance of Furniture & Fixture

Check Point



Δ

Furniture and Fixture Maintenance

Window and doors are maintained

Furniture & fixtures are in good condition

A7.1 Window and doors are maintained









A7.2 Furniture & fixtures are in good condition





Good Practices











A8 Removal of Junk Material





No junk material within centre

Centre has System for removing junk material

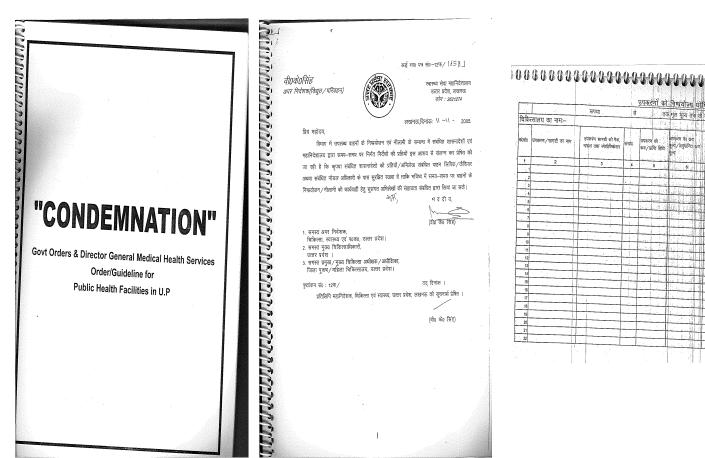
No junk material in centre







A8.2 Centre has System for removing junk material



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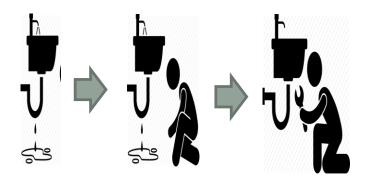
The condemnation options to be followed by the facility for disposal of various junk items from the hospital should be as per the state government's directives

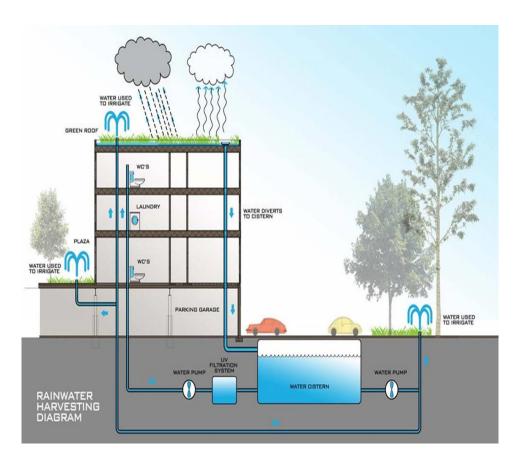
A9- WATER CONSERVATION

A9.1 Water supply system is maintained

A9.2 Facility has rain water harvesting system

Centre needs to check for any leaking taps, pipes, overflowing tanks, dysfunctional cisterns etc.





A10 Work Place Management

Check Point



- Staff periodically sort useful and unnecessary articles at work station
- The Staff arrange the useful articles, records in systematic manner
- Staff label the articles in identifiable manner

A10 Work Place Management

Identify and remove unwanted/unused items from the workplace and reduce clutter (Removal/organisation)

SUS

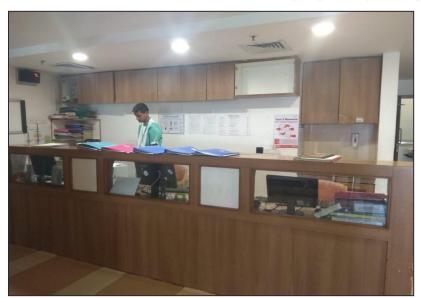
Organise everything needed in proper order for easy operation (Orderliness)

Maintain high standard of cleanliness (Cleanliness)

Train and maintain discipline of the personnel engaged (Self-discipline)

Set up the above 3S as norms in every section of the workplace (Standardise)

Illustrations of "5S"











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Theme B – Sanitation & Hygiene

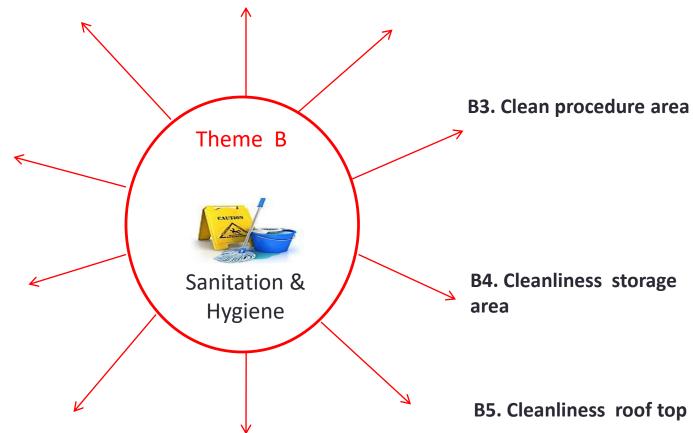


B1. Clean Circulation area

B10. Drainage and sewage management

B9. Monitoring of cleanliness activities

B8. Use of Standard methods for cleaning



B7. Use of Standard material and equipment for cleaning

B6. Cleanliness Toilets

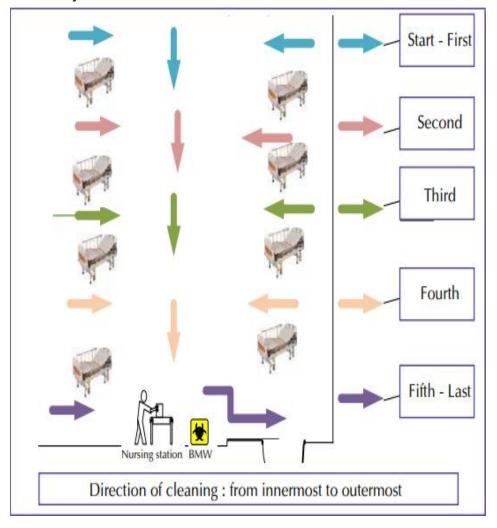
B2. Cleanliness of Clinic room

Cleanliness Protocols

Direction of cleaning (Unidirectional)







B1 Cleanliness of Circulation Area







B2 Cleanliness of clinic room

B3 Cleanliness of Procedure (Lab/Diagnostic)

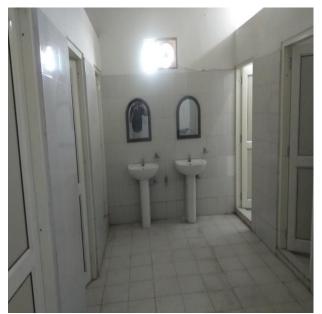






B4 Cleanliness of storage space

B6 Cleanliness of Toilets







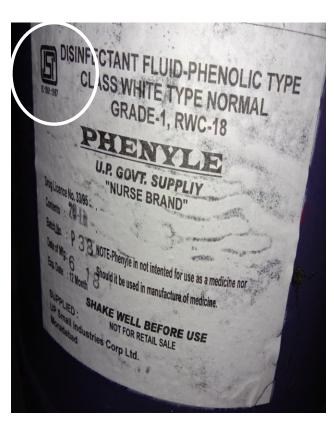
B5 Cleanliness of Rooftop



B7 Use of standards materials and Equipment for Cleaning







Use of ISI mark cleaning solution.

B8 USE of STANDARD METHOD FOR CLEANING

Two Bucket System:

Bucket 1 – Cleaning solution

Bucket 2 - Wringing the mop



B9 Monitoring of Cleanliness Activities







B10. Drainage and Sewage Management









- Presence of septic tank and soak pit.
- No overflowing or blocked drains. Drain should be covered



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Theme C – Waste Management





C.1 Segregation of BMW



Biomedical Waste Segregation



(Bio Medical Waste Management Rules, 2016)

Non-Chlorinated Plastic Bag

Items contaminated

with Cytotoxic Drugs



Human and Animal Anatomical Wastes: tissues, organs, body parts and fetus below the viability period

Soiled Waste contaminated with blood, body fluids like dressings, swabs, plaster casts, linen, pads

Blood Bags

Chemical Wastes including discarded disinfectants, chemical liquid wastes

Lab Wastes Expired/discarded Medicines

Non-Chlorinated Plastic Bag/Container



Recyclable Waste (Plastic)

- Tubing
- Bottles
- IV tube/sets
- Catheters
- Urobags
- Syringes Vacutainers
- Gloves

CATEGORY

Cardboard Boxes with Blue Colored Marking

WHITE

(Translucent)

Puncture Proof, Leak Proof, **Tamper Proof Container**

Plastic Bag



Waste Glassware

- Broken glass
- Medicine vials/ampules
- Metallic body implants

Waste Metal Sharps

- Used, discarded and contaminated needles
- Syringes with fixed needles
- Needles cut in hub-cutter
- Scalpel blades



General Waste

- · Paper, wrappers
- Leftover vegetable/ fruits/food
- Thermocol
- Disposable glasses and plates

NOTE: All plastic bags should be properly sealed, labelled and audited before disposal









C1.2 Check if the staff is aware of segregation protocols

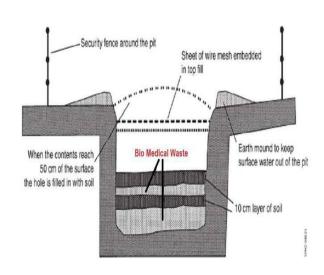


C2. Collection & Transportation of BMW

C2.1 Centre waste is collected and transported in safe manner

LAND DISPOSAL-DEEP BURIAL

▶ Wastes belonging to category 1,3,6 collected in yellow containers are disposed by this method.





The facility has linkage with a CWTF Operator or has deep burial pit (with prior approval of the prescribed authority)

C2.2 Waste is transported in closed bag





C3 Sharp Management



- Needles
- Syringes with fixed needles
- Blades
- Scalpels

* Use 1% Hypo Chloride Solution for disinfecting Glass & Metal Sharps



- Glass
 - Broken Glass
 - Ampoules
 - Lab Slides
- Metals
 - Nails
 - Metallic Body Implants
 - Scissors
- * Use 1% Hypo Chloride Solution for disinfecting Glass & Metal Sharps

C3.1 Disinfection of Broken / Discarded Glassware is done as per recommended procedure

Steps of Handling

- The glassware waste generated from the hospital needs to be first pre-treated in the hospital before handing it over to the CBMWTF or disposing in the sharp pits.
- Pre-treatment of the waste is carried out by immersing the waste in the 1% chlorine solution (having 30% residual chlorine) for at least 20 minutes or by use of autoclave. Hypochlorite must be prepared fresh before immersion.
- All the glassware needs to be collected and stored in Puncture proof and leak proof boxes or containers with blue coloured marking (2018 Amendment)



C3.2 Sharp Waste is stored in puncture proof containers







C4 - STORAGE OF BIOMEDICAL WASTE

C4.1,4.2. BMW should not be stored more than recommended time. Facility for storage of BMW







Facility has either deep burial and sharp pit

Or

linkage to CTF(requires an isolated place with separate bins for storage of BMW till the CTF person collects the waste)

C5 Disposal of Biomedical waste

C5.1 Centre has adequate facility for disposal of BMW





C5.2 Facility manages recyclable waste as per approved procedure



C6 Management Hazardous Waste



C6.1 Staff is aware of Mercury Spill Management

ISOLATE AND VENTILATE

- O Close doors or block access to the area.
- Avoid walking through the area.
- Turn off HVAC systems.
- Open windows to ventilate the affected area.

PREPARE TO RESPOND

- Use air monitoring equipment to detect the presence of mercury fumes.
- Remove Jewelry, watches and any other clothing with metal.
- Wear gloves, goggles and other appropriate clothing during response.

CLEANUP

- Use only vacuums rated for mercury during response and cleanup (regular vacuums will spread mercury).
- Use sulfur or zinc powder to amalgamate mercury and suppress its vapors.
- Dip a paintbrush in shaving cream, or another thick liquid and dab it over droplets.
- Use Index cards, eye droppers or small dustpans to collect droplets.
- Place a flashlight at floor level in an unlit room to reveal small droplets.
- Look for drops in grout lines, corners and recessed areas (mercury is heavier than dust and will hide underneath).

CONTAIN

 Place clothing, shoes and any other items that have come in contact with mercury in marked and sealed bags or containers.

DECONTAMINATE

- Use warm water and anti-dandruff shampoo that contains at least 1
 percent selenium suifide to decontaminate anyone who may have come
 in contact with mercury.
- Continue ventilating the affected area to the outside for at least 24 hours before turning on HVAC systems.

C6.2 Availability of mercury spill kit



C7. Solid General Waste Management

C7.1 Disposal of General Waste



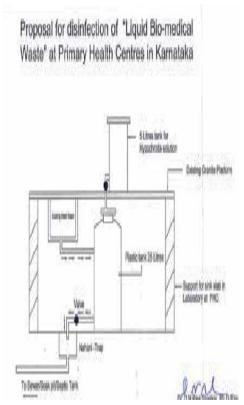
C7.2 Innovation in managing general waste



C8. Liquid Waste Management

C8.1 Provision of liquid Waste management

C8.2 Liquid waste is made safe before disposal







C-9 Equipment and Supplies for Bio Medical Waste Management

C9.1 Availability of bins & plastic bags for segregation





C9.2 Availability of needle cutter



C10 Statuary Compliances

C10.1 Centre has a valid authorization for BMW from the prescribed authority

Form - IV (See rule 13) ANNUAL REPORT

S. N	Particulars		
1.	Particulars of the occupier		
	(i) Name of the authorised person (occupier or : operator of facility) : DR KESAR SINGH KAMRA		
	(ii) Name of HCF : GOVT DISTRICT HOSPITAL		
	(iii) Address for Correspondence: SURATGARH ROAD, SRI GANGANAGAR, SRI GANGANAGAR, 335001		
	(iv) Address of CBMWTF Facility : E-TECH PROJECT HANUMANGARH AND SRI GANGANAGAR		
	(v) Tel. No, Fax. No : 0154-2465509, 9460617300		
	(vi) E-mail ID: pmosgnr@gmail.com		
	(vii) URL of Website: N.a.		
	(viii) GPS coordinates of HCF or CBMWTF : Latitude : 29.90377 N Longitude : 73.87547 E		
	(ix) Ownership of HCF or CBMWTF (State Government or Private or Semi Govt. or any other): GOVERNMENT		
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules: Authorization no. :		
	BMW/2010-2011/SWMC/BMW/41 dated 01/03/2010 Valid up to : 01/03/2010 TO 28/02/2011		
	(xi) Status of Consents under Water Act and Air Act:		
2.	Type of Health Care Facility		
	(i) Bedded Hospital No. of Beds: 370 (THREE HUNDRED SEVENTY)		
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other): HOSPITAL		
	(iii) License number and its date of expiry :		
3.	Details of CBMWTF		
	(i) Number of healthcare facilities covered by CBMWTF	N.A.	
	(ii) No of beds covered by CBMWTF	N.A.	
	(iii) Installed treatment and disposal capacity of CBMWTF	N.A.	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	N.A.	
4.	Quantity of waste generated or disposed in Kg per annum (on monthly	Yellow category	16 Kg/Day
	average basis)	Red category	25 Kg/Day
		White category	10 Kg/Day
	I	Ini	20 k-/p

C10.2 Centre maintains records, as required under the BMW Rules 2016 and Amendment





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Theme D – Infection Control Practices



Hand Hygiene **Environmental Control** Personal Protective Equipments Infection Surveillance Personal Protective Practices Theme D Disinfection & Cleaning Infection Control Program **Infection Control Isolation & Barrier Nursing Autoclaving & Sterilization** Spill Management

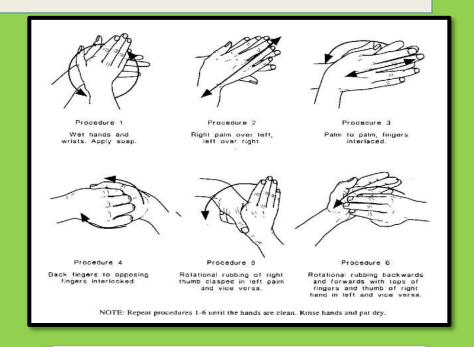
कायाकल्प Clean Hospital Initiative



D1: Hand Hygiene



D.1.1 Running water and sink

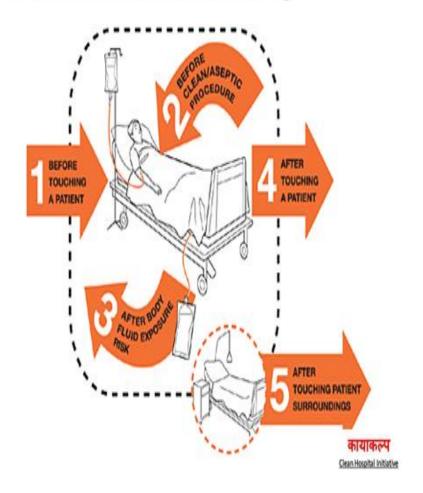


D1.2 Hand washing instructions displayed.

• 6 steps of hand washing-Adherence.

5 Moments of Hand washing

5 Moments of Hand washing



Steps of Hand washing

Step-2



Zu



Rub palms together

Rub the back of both hands

Interface fingers and rub the hands together.

Step-4



Interlock fingers and rub the back of fingers of both hands

Step-5



Rub thumb in a rotating manner followed by the area between index finger & thumb.

Step-6



Rub fingertips on palm for both hands

Step-7



Rub both wrists in a rotating manner rinse and dry thoroughly.



D2: Personal Protective Equipment



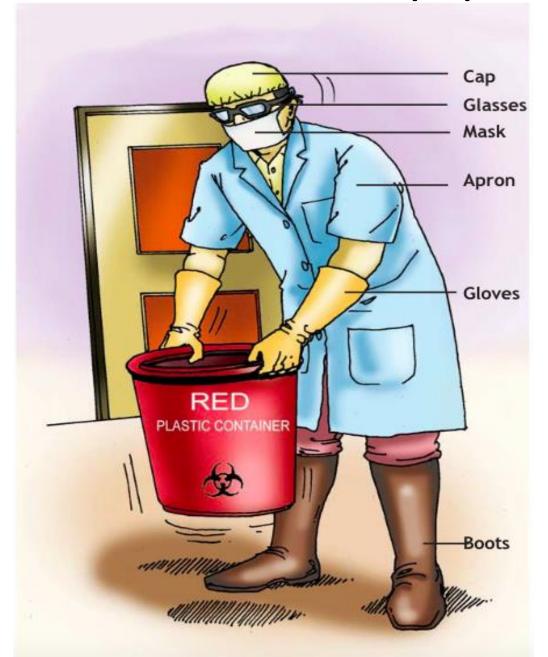
D2.1 Use of gloves during procedures and examination



D2.2 Use of Masks, gloves and aprons



Personal Protective Equipment





D3: Personal Protective Practices

D3.1 Staff aware of use of gloves.

(Correct method of wearing and removing gloves.)

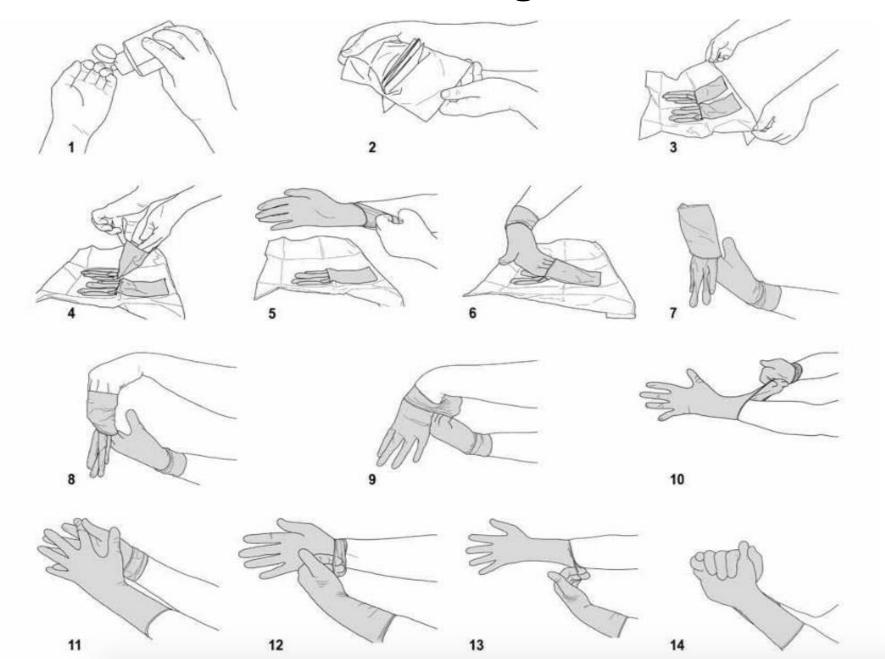
D3.2 No reuse of disposable PPEs.



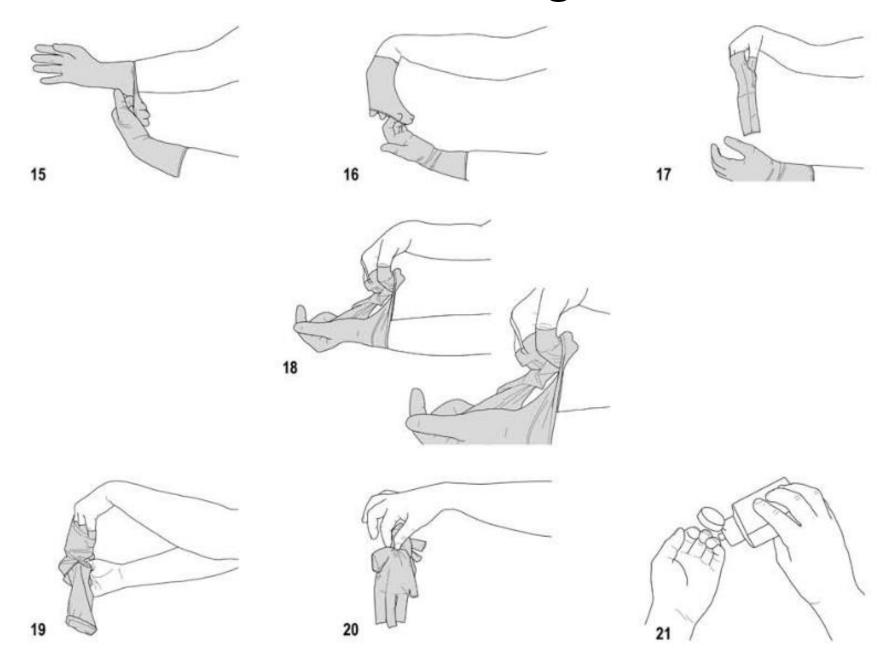




How to wear gloves

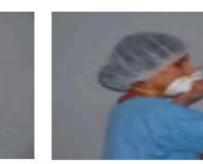


How to remove gloves



Steps in Wearing Mask











- Wash hands and dry.
- Remove the clean mask from the container with clean hands.
- Ensure the mask is fitted properly.
- If glasses are worn, fit the upper edge of the mask under the glasses.A secure fit will prevent both the escape and the inhalation of microorganisms around the edges of the mask and fogging of the eyeglasses.
- Precautions
- Avoid talking, sneezing, or coughing if possible.
- Masks cannot be worn with beards/unshaven faces.
- The mask should completely seal the face at all times to ensure effective filtering of micro-organisms



D4: Decontamination & Cleaning of Instruments.

D4.1 Staff knows how to make sodium Hypochlorite solution D4.2 Decontamination of instruments and surface like examination table, dressing table etc





PREPARATION OF 1 LITRE **BLEACHING SOUTION**



Wear utility gloves and plastic apron.



Take 1 litre of water in plastic bucket.







Make thick paste in a plastic mug with 3 level tea-spoons of bleaching powder and some water from the bucket.



Mix paste in the bucket of water to make 0.5% chlorine solution.



Maintain same ratio for larger volumes.



Steps of processing instruments and other items

Decontamination

(Soak in 1% chlorine solution 10 minutes)



Cleaning with brush,

Preferred Method detergent and water

Acceptable Method

Sterilization

HLD

Autoclave 15lbs/In2 pressure 121°C, (250°F) 20 min/30 min

Chemical soak in Glutaraldehyde (2%) for 8 hrs, Rinse with sterile water

Boiling Lid on 20 minutes Chemical
Soak in
Glutaraldehyde
(2%) for 20 min.
Rinse with boiled
for 20 min

Cool, dry and Store



D5: reprocessing of reusable instruments & equipment's.









D5.1 Adherence to protocols for items that come in contact with skin (like thermometer and stethoscope)

D 5.2 Adherence to protocols for high level disinfection

(like using boiling for 20 mts with lid on , soaking in 2% glutaraldehyde for 20 mints)



D6: Spill Management



D6.1 Staff aware of how to manage small spills.

Staff trained on spill management.

 D6.2 Spill Management Protocols are displayed.



D7: Isolation & Barrier Nursing

D7.1 Infectious patients not mixed with other patients.

D7.2 staff is aware about standard Precautions





Infection Control Program

D8: Infection Control Program

MD)

D8.1 Regular Monitoring of Infection Control Practices.

D8.2 Immunization & medical check ups of service provider







D9: Surveillance Activity

D9.1 Surveillance activity at centre (Surveillance about any abnormal increase in cases of diarrhea, fever with rash etc.)

D9.2 Facility reports all notifiable diseases & events. (Check records of IDSP & AEFI surveillance)







D10: Environmental Control.

D10.1 Cross Ventilation

(Availability of fans, exhaust, AC etc.)

D10.2 Preventive measure for airbone infection has been taken







कायाकल्प

Clean Hospital Initiative

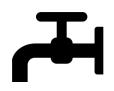


Theme E - Support Service

Laundry & **Linen Services**



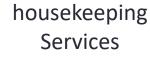
Water Sanitation





Storage space







Outreach services







E1- LAUNDRY SERVICES AND LINEN MANAGEMENT







E1.1 Available linens are clean

(Linen are clean and spotless)

E1.2 Arrangement for washing linens

(Has in-house/outsource arrangement for washing atleast once a week)



E-2 Water Sanitation





E2.1 Adequate quantity as per requirement

E2.2 Storage tank for the water and tank is cleaned periodically



E3. STORAGE SPACE







 E3.1 Medicines are arranged systematically E3.2 Cold Storage equipment are clean and managed properly



E4. Housekeeping services.





E4.1 Routine cleaning of HwC atleast once a day

(dry & wet mopping)

E4.2 Thorough cleaning of the facility fortnightly.

E5. Outreach services





B5.1 BMW generated during outreach session are transported to centre on same day

B5.2 reporting PHC monitors cleanliness & hygiene of outreach session & centre



कायाकल्प Clean Hospital Initiative



Theme F - Hygiene Promotion

Community Monitoring & Patients Participation Information,
Education &
Communication

Leadership & Team Work

Training & Capacity Building



Staff Hygiene and Dress

Code







F1: Community Monitoring & patient Participation



F1.1 Patients are made aware of their rights & responsibilities



F1.2 Patients rights & responsibilities are displayed.



F2: Information, Education & Communication



F2.1 IEC regarding importance of hygiene practices is displayed.



F2.2 IEC regarding Swachhata Abhiyaan is displayed





Use of Innovative methods for IEC-hygiene Kiosk, leaflets, SMS, video messages



F3: Leadership Teamwork

&





F3.1 Staff work as a team to improve sanitation & hygiene of the facility.

F3.2 Roles & responsibility of different staff members have been assigned & communicated has been



F4: Training, Capacity Building & Standardization



F4.1 Biomedical waste management training has been provided to staff

F4.2 Infection control training has been provided to staff



F5: Staff Hygiene and Dress Code



F5.1 Centre has dress code policy for all cadre of staff

F5.2 Monitoring of Hygiene practices







Theme G. Beyond hospital boundary

Promotion of swachhata in surrounding areas

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Cleanliness of approach road & surrounding area

Aesthetics of surrounding area

Maintenance of surrounding area



G1: Promotion of Swachhata in surrounding area



G1.1 Facility is situated in ODF block

G1.2 Local community actively participates In VISHWAS campaign



G1.3 IEC activities related to 'Swachh Bharat Abhiyan'



G1.5 Facility coordinates with other departments for improving Swachhta

G1.4 Facility coordinated with local GP & NGO's

G2: Coordination with local Institutions





- G2.1 Area around the facility is clean, neat & tidy
- G2.2 On the way signages are available
- G2.3 Approach road is clean and even
- G2.4 All drain and sewer are covered.
- G2.5 Functional street lights are available along the approach road

G3: Aesthetics and amenities of Surrounding area











G3.1. Parks and green areas of surrounding area are well maintained

G3.2. No unwanted/br oken/ torn / loose hanging posters/ billboards

G3.3. No loose hanging wires in and around the bill boards, electrical poles, etc.

G3.4.
Availability of public toilets in surrounding area

G3.5 Availability of adequate parking stand in surrounding area

G4:Maintenance of surrounding area and Waste Management











G4.1
Availability
of bins for
General
recyclable
and
biodegrada
ble wastes

G4.2 Availability of garbage storage area G4.3 Innovation s in managing waste G4.4
Surroundin
g areas
are well
maintained

G4.5
Regular
repairs and
maintained
of roads

THANK YOU