

Original Research Article

Evaluation of a tertiary care institute as per Kayakalp Programme guideline in the Sub Himalayan region: a descriptive study

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ABSTRACT

Background: Cleanliness and hygiene in hospitals are critical to preventing infections and also provide patients and visitors with a positive experience and encourages molding behavior related to clean environment. Comprehensive sanitation and proper biomedical waste management is a critical factor in preventing iatrogenic causation of disease in addition to promoting health and cure. Hospitals of all levels of healthcare are assessed under the kayakalp programme every year.

Methods: Observational cross sectional study was done in the Indira Gandhi Medical College Shimla in the month of April 2018 using kayakalp assessment checklist for tertiary care hospital.

Results: Scores under various thematic areas was less than the required scores for qualifying for further peer and external assessment.

Conclusions: The results compiled were appraised to the authorities of the IGMC Shimla for necessary improvements in different thematic areas of Kayakalp.

Keywords: Kayakalp, Swachh Bharat, Tertiary care, Internal assessment

INTRODUCTION

The Swachh Bharat Abhiyaan launched by the Prime Minister on 2nd October 2014, focuses on promoting cleanliness in public spaces. Public health care facilities are a major mechanism of social protection to meet the health care needs of large segments of the population. Cleanliness and hygiene in hospitals are critical to preventing infections and also provide patients and visitors with a positive experience and encourages molding behavior related to clean environment. To complement this effort, the Ministry of Health and Family Welfare, Government of India launched a National Initiative to give Awards to those public health facilities (KAYAKALP)

that demonstrate high levels of cleanliness, hygiene and infection control.¹

A patient entering the hospital is exposed to all sort of iatrogenic infections. This exposure could be minimized by comprehensive sanitation and proper biomedical waste management. In addition to these, other factors associated with this are adequate ventilation, cleaning, decontamination, personal protection and handling of food articles with care.

“Biomedical waste” has been defined as “ any waste that is generated during diagnosis, treatment, immunization of human beings or animals or in the research activities pertaining to or in the production or testing of biological

and includes categories mentioned in schedule I of the government of India's biomedical waste (Management and Handling) Rules 1998".²

Under Kayakalp each year, district/tertiary hospitals, and other health care facilities community health centres and primary health centres are primarily assessed internally and sequentially these institutions are assessed by peer evaluators. Eventually, some of the institutions which are rated qualified as per laid guidelines as the best by the peers are further nominated for external assessment. Final assessment of these selected institutions is done by the state and central level assessors for award.

Its main objective is to inculcate a culture for promotion of cleanliness, infection control and hygiene practices in the facilities by incentivizing and recognizing the facilities showing exemplary performance in adhering to Kayakalp guidelines and thereafter sustaining such practices.¹ Idea of providing incentive to the better performing institutions has provided a competitive approach to all the institutions resulting in the betterment of the same.

Objective

Internal assessment of the Indira Gandhi Medical College as per the Kayakalp Guidelines.

METHODS

This was an observational, cross sectional study done in the month of the April 2018 at Indira Gandhi Medical College, Shimla, using the Standardized Kayakalp Assessment tool available from the National Institute of Tuberculosis and Respiratory Diseases.³ Indira Gandhi Medical College provides services to around 2000 patients in the outdoor patient department and around 110 patients are admitted on daily basis. Internal assessment of the institution was done and checklist included the following main criteria:

Hospital upkeep- 130 pts, sanitation and hygiene- 150 pts, hospital support services- 40 pts, waste management- 100 pts, infection control- 100 pts, hygiene promotion- 80 pts and feedback mechanism- 50 pts

The above mentioned thematic areas were further divided into different criteria. Each criterion was further assessed on the basis of check point, means of verification and assessment method. The assessment methods used in this study are direct observation (OB), Staff Interview (SI), and Review of records and documents (RR). The scores were applied as Fully complainant (2), partially complaint (1) and non-compliant (0).

RESULTS

The following study results are described in the table which shows that the overall observed score in the institution is 309(47.5%) (Table 1).

Table 1: Score of thematic areas of Kayakalp assessment.

Ref no	Sub Heading	Min score	Max score	Observed score
A	Hospital upkeep	0	130	50
B	Sanitation and Hygiene	0	150	58
C	Hospital Support Services	0	40	29
D	Waste Management	0	100	51
E	Infection Control	0	100	57
F	Hygiene Promotion	0	80	44
G	Feedback Mechanism from Public on Cleanliness	0	50	20
Total			650	309

Hospital support services, infection control, hygiene promotion and waste management had a score of more than 50% (72.5%, 57%, 55%, 51% respectively). The score was less than 50% in the thematic areas of feedback mechanism, sanitation & hygiene and hospital upkeep (40%, 38.7%, 38.5% respectively) (Figure1).

DISCUSSION

In the Kayakalp initiative guidelines, assessment is done in 3 phases. Initial phase is performed by the staff of the facility using the Kayakalp assessment tool known as the internal assessment. Facility with an average of 70% score to be eligible for the next phase of assessment, known as the peer assessment (NHRM, 2015). When peer assessment is done and the score $\geq 70\%$ then the hospital would be eligible for external assessment and appear in for award category.

In the internal assessment done in our study, the overall score according to the tertiary care assessment checklist was 47.5%. In a study conducted by Mallappa et al in the district hospital of Kodagu district in Karnataka the overall score was found to be 46.4% , which is similar to our study.

In the thematic area of waste management our score was 51%. In a study done by Kumar et al, in the tertiary care hospital of Haldwani, Nainital, the knowledge of waste management was found to be poor which is in concordance with our study. In another study done by Somaiah et al score of the biomedical waste management was found to be 64%, which is better than our findings.

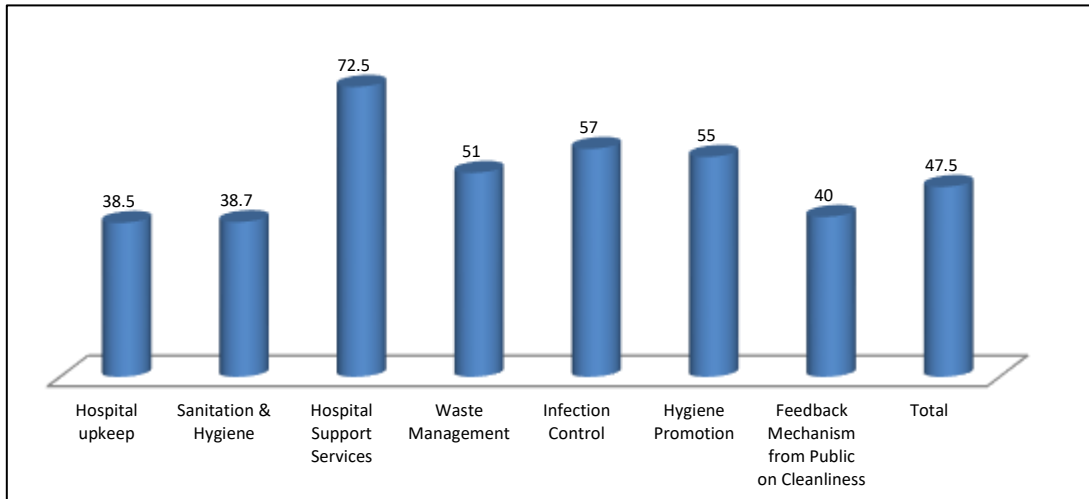


Figure 1: Thematic area wise percentage.

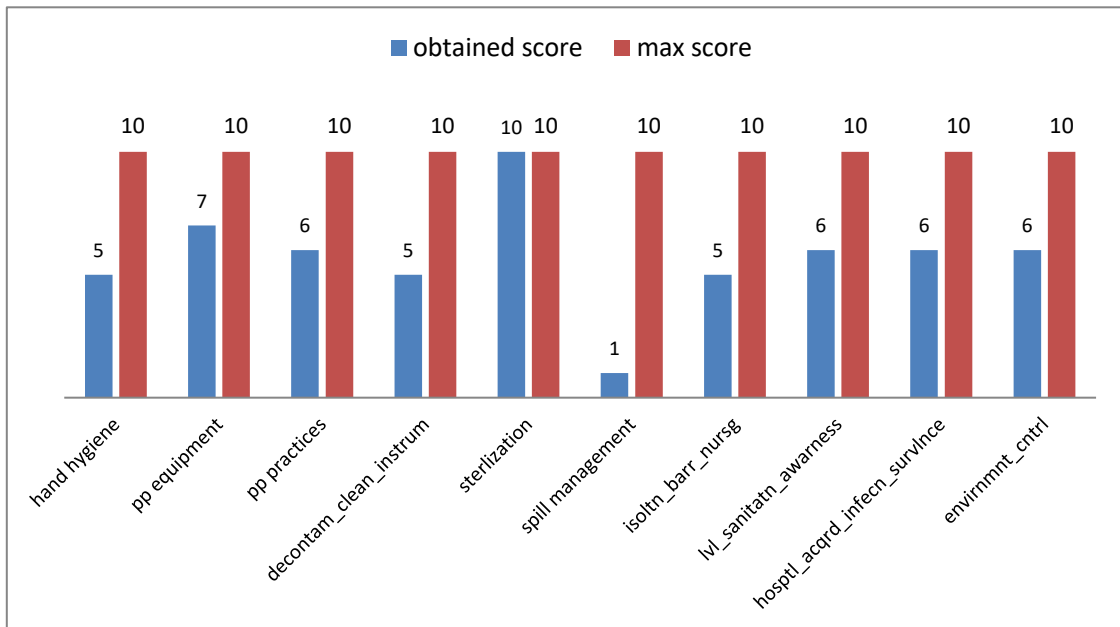


Figure 2: Infection control.

Infection control thematic area had a score of 57% which is a low score. In the recommendation by the Government of Himachal Pradesh score of <70% in the thematic area of infection control makes the institution ineligible for the further assessment irrespective of the overall aggregate.

Based on the overall score of 47.5% our institution is rendered ineligible for further assessment as per the guideline of Kayakalp Initiative.⁴

CONCLUSION

Kayakalp (Award to public health care facilities), launched as a part of Swachh Bharat Abhiyan by Government of India is a boon in up gradation of government hospitals and institutions in terms of cleanliness, hygiene and infection Control and other practices all over India. All the public

health-care facilities are assessed utilizing the same criteria, at each level nationwide, leading to healthy competition among facilities which would result in better delivery of quality health services. The low score (<70%) indicates that the institution under study needs overall improvement in the matter of Kayakalp assessment. Furthermore, it was seen that none of the thematic area had a score of $\geq 70\%$, which means that improvement is required in all the thematic area irrespective of the individual scores.

Recommendations

A comprehensive report was compiled about the same data and was sent to the medical superintendent of the above said college for updating, so that prompt and appropriate action could be taken at the earliest.

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Conflict of interest: None declared

Ethical approval: The study was approved by the Institutional Ethics Committee

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