


# ASSET MANGEMENT SYSTEM (AMS)

## FACILITY ASSESSMENT TOOLS

Hospital Services Management  
Directorate General of Health Services  
Health Services Division  
Ministry of Health & Family Welfare



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## Facility Readiness to Introduce Software based Asset Management System (AMS)

### 1. Basic Information

1.1	Name of the facility	:			
1.2	Division	:		District	:
1.3	No. of Beds	:			
1.4	Year of Establishment	:			
1.5	Year of upgradation to current bed capacity	:			
1.6	Bed occupancy rate (last CY)	:			
1.7	No. of OPD patients/day	:			
1.8	No. of departments	:			
	Mention the name of the departments	:			
1.9	No. of types of assets	:			
	Mention the types of the assets	:			

### 2. Organizational determinants

2.1	Human resources (Put tick marks on available personnel)	:	<input type="checkbox"/> RMO	<input type="checkbox"/> Store Keeper
			<input type="checkbox"/> Statistical Officer/ Assistant	
			<input type="checkbox"/> CO (designated)	
2.2	Specific job description available for each position	:	<input type="checkbox"/> RMO	<input type="checkbox"/> Store Keeper
			<input type="checkbox"/> Statistical Officer/ Assistant	
			<input type="checkbox"/> CO (designated)	
2.3	Functional mechanism for condemnation	:	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Moderate
			<input type="checkbox"/> Not satisfactory	
2.4	Hospital information management culture	:	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Moderate
			<input type="checkbox"/> Not satisfactory	

### 3. Financial determinants

3.1	Average Annual Budget of the hospital (in lac BDT)	:	<input type="checkbox"/> Revenue Budget:	
			<input type="checkbox"/> Development Budget:	
			<input type="checkbox"/> Budget for Acquisition of Asset (Rev+Dev):	
3.2	Availability of Budget for electronic and manual data management (at least 5% of the total annual expenditure)	:	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Moderate
			<input type="checkbox"/> Not satisfactory	

#### 4. Technical / Infrastructure determinants

4.1	Availability of IT infrastructure	:	<input type="checkbox"/> Computer <input type="checkbox"/> Internet connection	<input type="checkbox"/> Handheld devices
4.2	Availability of Manual Stock registers and ledgers	:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.3	The data on Registers and ledgers are updated	:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.4	Store Management in the hospital	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate
4.5	Adequacy of the logistics data	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate
4.6	Availability of electronic database for Medical assets (at least in excel format)	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate
4.7	Capacity for computerized software management	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate
4.8	Availability of asset tag (Physical identification number)	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate

#### 5. Behavioral determinants

5.1	Staffs' knowledge and skill on hospital asset management	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate
5.2	Staffs' attitude and motivation to introduce software based AMS	:	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not satisfactory	<input type="checkbox"/> Moderate

#### Weight for Scoring

<b>Satisfactory</b>	5
<b>Moderate</b>	3
<b>Not satisfactory</b>	1

### Questionnaire for Hospital Management:

Sl. No.	Questions	Answer (Put the tick $\checkmark$ mark in following column)		Remarks
		YES	NO	
1.	What assets do you own? (Gov't/Own/Donation/CMSD)	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Have you maintained any record keeping system for fixed assets?	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Do you have any Fixed Assets Register? (Please answer the following questions)	<input type="checkbox"/>	<input type="checkbox"/>	
3.a	Have you maintained any kind of Fixed Asset Register (Manual/Digital register)?	<input type="checkbox"/>	<input type="checkbox"/>	
3.b	Do you know what Type of Asset, Procurement Year and Procuring Entity?	<input type="checkbox"/>	<input type="checkbox"/>	
3.c	Can you differentiate/Identifying type of assets (medical, IT and office equipment)	<input type="checkbox"/>	<input type="checkbox"/>	
3.d	Are you able to determine lifecycle of assets?	<input type="checkbox"/>	<input type="checkbox"/>	
3.e	Where are these located?	<input type="checkbox"/>	<input type="checkbox"/>	
3.f	Are these being used?	<input type="checkbox"/>	<input type="checkbox"/>	
3.g	Who/which unit is using it?	<input type="checkbox"/>	<input type="checkbox"/>	
3.h	Is the asset in working condition?	<input type="checkbox"/>	<input type="checkbox"/>	
3.i	If not, has it been sent for repair/maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	
3.j	If yes, has it been received back from servicing agency?	<input type="checkbox"/>	<input type="checkbox"/>	
3.k	If yes, has it been assigned to its previous user?	<input type="checkbox"/>	<input type="checkbox"/>	
3.l	If not, who is the new person/unit which the asset has now been assigned to?	<input type="checkbox"/>	<input type="checkbox"/>	
3.m	Is the asset unserviceable and needs to be disposed of?	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Do you maintain physical identification mark on the asset?	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Do you have supplier contact details information?	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Do you maintain high cost equipment warranty information?	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Do you have any policy for Fixed Asset Management?	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Have you maintained any standard/ uniform practice for repair/maintenance (Hospital itself/CMSD/NEMEW/vendor)?	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Do you know/measure useful life of asset?	<input type="checkbox"/>	<input type="checkbox"/>	

Sl. No.	Questions	Answer (Put the tick $\checkmark$ mark in following column)		Remarks
		YES	NO	
10.	Do you follow methodology to carry out revaluation, subsequent expenditures, repair cost including accessories	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Have you maintained a depreciation methodology (For example - Straight line, Reducing balance method)?	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Do you have any Asset retirement (disposal) policies? Yes/No (If "Yes" give us the copy)	<input type="checkbox"/>	<input type="checkbox"/>	

