



ASSESSMENT CHECKLIST FOR  
WOMEN FRIENDLY CARE AT  
DISTRICT HOSPITAL



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**Location of the facility:** ... ..

**Date of visit** : ... ..

**Name of the Assessors:** ... ..

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**OGSB**



## **Areas to observe**

- 1. Basic facilities of the hospital***
- 2. Quality of Care***
- 3. Mother Baby Package service***
- 4. Management of Violence against women***
- 5. Gender Equity***
- 6. Facility Management***
- 7. Pathological Lab and Other examination***
- 8. Performance indicator***
- 9. Equipment, logistics, supply and registers***
- 10. Protocols for EOC (from DHIS-2)***

## 1. Basic Facilities of the Hospital

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
1. Specific <b>female waiting area</b> with comfortable temperatures marked in the outdoor, indoor, emergency with sitting arrangement				
2. Availability of a <b>separate registration desk</b> for the female patient (Ticket counter)				
3. Availability of <b>separate drug dispensing counter</b> for females (Pharmacy)				
4. Availability of <b>separate toilet</b> with adequate cleanliness for females (no bad or pungent odours)				
5. Availability of <b>safe drinking water</b> for the patient (outdoor, indoor and emergency)				
6. <b>Display board showing</b> location and availability of services (near main entrance)				
7. Conduction of regular <b>health education sessions</b> (outdoor/waiting area - at least one session per day) with proper documentation				
8. <b>Adequate light and ventilation</b> of the female examination room in the outdoor				
9. <b>Availability of female doctor/health care providers</b> for providing treatment to the female patient				
10. <b>Maintenance of privacy of female patient's</b> in the outdoor examination room with curtains for windows and doors with additional use of the screen in examination table and examination did one by one)				
11. <b>Privacy of the labour room</b> by a proper curtain in the door and windows and also by side screen (Where applicable) along with the screen between labour tables				
12. <b>Privacy for the female patients attending emergency</b> (Separate examination table with proper screen for privacy)				
13. <b>Adequate security arrangement for the female patients</b> and female service providers (in all locations of the facility)				
14. The hospital should have a good sewerage system				
15. Overall cleanliness of the <b>facilities and surrounding environment</b>				
16. <b>Flower garden</b> within the campus with child playground				
<b>Total</b>				

## 2. Quality of Care

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
1. <b>Waiting time</b> should be less than 30 minutes for receiving treatment (ANC, VIA, EPI, FP) (verify with the patients and attendants with adequate time)				
2. <b>Use of respectful and soft language (with dignity)</b> to the patient by the service providers (Female indoor, Labor and ANC, VIA, EPI, FP outdoor) (verify with the patients and attendants)				
3. Provision of the adequate necessary information and <b>providing correct responses to all</b> the queries to the patient/attendants in a cordial environment (verify with the patient/caretakers)				
4. Availability of <b>Emergency drugs</b> with tray, Instrument tray, Sterilized Gauze and cotton, in the emergency room				
5. <b>Availability of Oxygen, Sucker and Nebulizer</b> with emergency life savings drug in the <b>emergency room</b>				
6. <b>Admission</b> in the hospital is completed within 30 minutes from consultation after receiving the patient in the hospital (verify with the patients and attendants)				
7. Proper filling of <b>patient history</b> , examination and treatment sheet				
8. Availability and use of <b>emergency light in the emergency, labour room and OT</b>				
9. Enforce strict restrictions for attendants/visitors for entry into the examination/labour room				
10. Availability and practice of sterilization facilities for OT, outdoor, indoor and emergency				
11. <b>Infection prevention measures (decontamination, sterilization, waste disposal) are available and are being practised (outdoor, emergency, indoor, labour room and OT)</b>				
12. Availability of comprehensive EOC services at the facility – 24 hours/7 days				
13. Maternal and perinatal death reviews are in place for taking corrective measure				
14. Availability of blood transfusion facility – 24/7 hours				
15. Availability of ambulance services – 24/7 hours				
16. Standard Hospital waste management system is in practice				
17. Availability of <b>suggestion box/Satisfaction booth for the patients and attendants</b>				
18. Proper record keeping in the outdoor patient registrar and emergency patient registrar both for outdoor and emergency patients in the registrar				
<b>Total</b>				

### 3. Mother Baby Package Service

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
<b>3.1. Antenatal care</b>				
1. <b>Identification of emergency patients</b> on a priority basis and treatment prioritizes				
2. <b>Relevant health education and counselling are given to</b> each attending pregnant woman and family members				
3. <b>Examination of blood grouping, VDRL, HbsAg, CBC and</b> urine for sugar and albumin are done routinely				
4. Iron, calcium and Folic acid tablets throughout the pregnancy for daily supply.				
5. <b>Danger signs during pregnancy</b> and delivery discussed/ <b>IEC materials displayed</b>				
6. <b>A birth plan</b> for each woman is prepared				
7. Follow up of visit according to a WHO protocol (4 Visits minimum)				
8. <b>ANC/PNC card</b> and <b>ANC/PNC registers</b> are available and filled up properly				
9. <b>Logistics</b> (BP machine, stethoscope, wt. machine, measuring tape and examination beds) are available to provide ANC/PNC				
10. <b>Separate room and privacy maintained</b> for providing ANC/PNC				
<b>3.2 Emergency obstetric care</b>				
1. <b>EmONC team formed</b> and in place for providing 24 hours service				
2. <b>EmONC review monthly meetings</b> are held regularly (in the last 3 months)				
3. <b>Emergency admission procedure is simple and rapid</b>				
4. <b>Waiting area and information</b> for male relatives are available				
5. Separate post-operative bed/ward				
6. <b>Separate OT equipped for providing EmONC services</b>				
7. Change and scrub room, autoclave room with autoclaving facilities are in place				
8. Availability of sterile three delivery kits in the labour room (according to requirements)				
9. Partition between the labour tables for privacy in the labour room				
10. Necessary and emergency drugs are available for providing EOC services in labour room and OT				
11. Blood transfusion services are available				
12. Proper history <b>writing of labour patient</b> at indoor				

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
13. OT, Indoor and Delivery registers are maintained properly				
14. Use of Partograph (recent 10 delivery)				
15. <b>EmONC protocols</b> are visible and being practised at the facility (at least 1 guideline available in the Labor room)				
16. <b>Referral system is in</b> place and functional with register				
17. Practice active management of third stage of labour for each delivery and delayed cord clamping (until pulsation stops)				
18. <b>Cleanliness</b> of the Labour room and OT				
19. Ready filled <b>Magnesium Sulphate in Eclampsia</b> with eclampsia kits				
20. Ready filled <b>PPH kits</b>				
<b>3.3 Post partum care and contraceptives services</b>				
1. <b>Examination/checking for vital signs</b> , uterine size and tenderness, blood loss, perineum, breast and lochial discharge				
2. <b>Skin to skin</b> contact immediately after birth for 1 hour				
3. Active help is given <b>for breastfeeding within 1 hour</b>				
<b>4. Investigation into the cause of Perinatal loss is done</b>				
5. <b>Counseling</b> of mother and family members on postnatal care is routinely provided				
6. Adequate information and counselling on the contraceptives including the LAM (Lactation Amenorrhea method) is routinely provided				
7. Adequate method-mix of contraceptives are available at all times				
8. <b>Vit. A</b> is given routinely at discharge				
9. Post Abortion Care services are available				
<b>1. Cleanliness of hands, surface, cloths, cord and instruments are maintained</b>				
<b>2. Warmth (temperature) maintained</b>				
<b>3. Care of eye and ear maintained</b>				
4. Sterile Resuscitation kits ready (ventilation within the last 20 minutes) HBB				
<b>5. Immediate skin to skin contact for 1 hour with mother and baby is being practised** Delayed cord clamping</b>				
6. Help being provided routinely with exclusive breastfeeding within 01 hour. **				
<b>7. Display Management protocol hanging in the service area</b>				
8. Service providers know about <b>newborn danger sign</b>				

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
9. Referral slip, register and protocol is available				
10. Last neonatal death review form is available				
<b>3.5 Breastfeeding (Baby-Friendly Hospital)</b>				
1. Written breastfeeding policy communicated to all staff				
2. IEC material on display (Female indoor and Outdoor)				
3. Service provider <b>received training on breastfeeding</b> in last 1 year				
4. Pregnant women/family attending hospital informed on <b>breastfeeding practices</b>				
5. <b>Mother helped to breastfeed</b> within one hour of birth with correct position and attachment				
6. Mothers and infants remain <b>together 24 hours a day ??</b>				
7. <b>Breastfeeding on demand encouraged</b>				
8. <b>No artificial teats</b> or pacifiers are given to breastfeeding babies				
9. Mother has shown how to breastfeed to maintain lactation, if separated				
10. <b>No food or drink advised other</b> than breast milk unless medically indicated				
11. <b>BFHI committee existing</b> and meeting regularly on a quarterly basis (3 month interval)				
12. Mothers were referred to BFMC (Lactation Management Center) having BF problems				
13. <b>BMS code/law displayed (whether maintaining 10 steps)</b>				
<b>Total</b>				



## 4. Management of Violence Against women

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
<b>A. Training of personnel</b>				
1. At least 2-doctors are trained on VAW				
2. At least 2-staff nurse are trained on VAW				
<b>B. Service Delivery</b>				
1. Proper reception and special attention of survivor				
2. Reassurance of survivor for developing mental strength of survivor.				
3. Prompt treatment of the survivor.				
4. Proper documentation and sending information to police for legal support. (DHIS2 reporting)				
5. Arrangement of adequate security for the survivor.				
6. Co-ordination with other agencies like Police, Social welfare, Local administration, NGO and other forum				
7. Functioning prompt referral (if needed) system for treatment and rehabilitation				
<b>C. Examination of Survivor</b>				
1. Separate examination room				
2. Privacy during the examination of survivor				
3. Presence of female care providers (preferred female doctor)				
4. Informing consent taking system for examination of the survivor (reviewing documents)				
5. Proper collection of evidence (Record review)				
6. Proper lighting for the examination				
7. Necessary instrument/equipment available for examination.				
8. Maintenance of confidentiality (Video)				
<b>D. Necessary logistics</b>				
1. Adequate light, ventilation and water supply in the examination room				
2. Availability of examination table and Spotlight				
3. Availability of screen for privacy				
4. Use of Speculum, Sponge holding forceps, swab stick, scissors, Sterile gloves and test tube				
5. Availability of Chlorine solution for disinfection				
6. Availability of soap and clean towels				
7. Availability of emergency drugs (emergency contraception, antibiotics for STDs)				
<b>E. Records</b>				
1. Separate recording and reporting forms and registers				
2. Confidentiality and secured preservation of the records				
3. Correctly filling up the proper forms and registers.				
<b>Total</b>				

## 5. Gender Equity

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
1. Yearly MSR budget distribution plan among the department based on need and special emphasis on the Gynae and Obs. and paediatrics department before the beginning of the financial year				
2. Allocation of MSR among the department/wards based on the developed plan (MSR budget <b>distribution plan</b> )				
4. Proper understanding of the service providers about gender equity (Ascertained by conducting discussion and interviews among the service providers)				
7. Less waiting time for the attending female outdoor patients especially for pregnant and <b>very sick women</b> (in comparison with male patients)				
8. <b>Poor women patients are respected and properly acknowledged</b> by the service providers (By conducting interviews among the attending women patients)				
10. Bed occupancy rate of female patients is more than the of male patients (statistician)				
11. Female service providers (Female doctors and Nursing staff) are given important responsibilities				
12. 50% of the female service providers are working in different committees are significant				
<b>Total</b>				

## 6. Facility Management (skip)

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
<b>6.1 Activities of different committees</b>				
1. 3 committees (stakeholder committee, special committee for VAW and WFH implementation committee) has been formed, functioning and minutes of meetings being recorded				
2. 50% representation of female in the stakeholder committees ensured				
3. Orientation of the stake holder committee members completed				
4. Documentation of the meetings is preserved and doable decisions (at least 50%) are also being implemented (By documentation review).				
5. Holding 6 meetings of the Stake Holder Committee for the last 1-year.				
6. Recorded survivors of violence are given medico-legal, legal and rehabilitation support (By documentation review)				
7. Accreditation documents are being used for institutional self appraisal and necessary correction is made by the implementation committee (By documentation review)				
8. Resources are collected by the stakeholder committee from the local community and utilized for the development of the hospital				
9. Stakeholder committee provided support for identifying problems and their solution for the hospital care improvement				
<b>6.2 Human Resource Management</b>				
1. Female doctor attending the outdoor				
2. Availability of skilled HR <ul style="list-style-type: none"> <li>➤ Consultant (Gynae &amp; Obs.) and Consultant (Anesthesia) is posted, residential and available [applicable for DHs]</li> <li>➤ EOC trained doctor in (Gynae and Obs.) and (Anesthesia) is posted, residential and available [applicable for UHCs]</li> </ul>				
3. EOC trained nurses available indoor				

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
4. Blood Bank MO/In-charge/Blood Bank technician is posted				
5. EOC team has been formed to provide round the clock service (by reviewing roaster)				
6. Trained Pediatrician on neonatology is available				
<b>6.3 Logistics Management</b>				
1. Timely development of procurement plan and timely procurement of logistics				
2. Proper storage facilities for drugs and equipment				
3. Maintenance of records for logistic management at emergency, outdoor, indoor, lab, X-ray and blood bank				
4. System for maintenance of equipment in place				
5. Proper supervision, review and monitoring of logistics by facility managers and concerned officials				
6. Review of logistic expenditure on a quarterly basis				
7. Yearly holding of Condemnation board for the disposal of condemned material				
8. FEFO maintained in the logistics management				
<b>Total</b>				

## 7. Pathological lab. and other examination.

Areas need to be examined to ascertain the status	Yes	Partial	No	Remarks
1. Routine blood test TC, DC, ESR, Hb%, Bilirubin and Platelet count				
2. Routine Urine Test (Albumin, Sugar, Pus cell)				
3. Blood for ABO grouping and Rhesus typing.				
4. Blood Screening for HIV, HbsAg, Hepatitis-C, VDRL, MP.				
5. Urine for Pregnancy test				
6. Blood Urea and Creatinine and Sugar.				
7. Serum Electrolyte				
8. Vaginal Swab for R/E, C/S, Gram Staining				
9. Pap's smear of Cervix for cytology/VIA				
10. Ultrasonography				
11. X-Ray, ECG				
<b>Total</b>				

## 8. Performance Indicator

Indicators	Record from DHIS-2 Compare before and after			Remarks
	Last year/quarter	This year/quarter	Improved or not ( <input type="checkbox"/> / <input type="checkbox"/> )	
1. Total number of female patients attended in the outdoor. DHIS-2				
2. Total number of male patients attended in the outdoor (last 12 months) DHIS-2 OPD report				
3. No. of ANC 4 at facility (EmONC report)				
4. No. of PNC-2 at facility (EmONC report)				
5. No of PPH patient treated (EmONC)				
6. No of Eclampsia patient treated (EmONC)				
7. No. of still born/months in the facility				
8. No. of newborn case fatality rate				
9. % of newborn breastfeed on within 1 hour (EmONC)				
10. No of female victim managed and provided support (GBV report DHIS-2)				
11. Normal delivery (EmONC)				
12. No of C/S (EmONC)				
13. Institutional MMR (DHIS-2 indicator)				
14. Percentage of maternal death audit conducted.				
15. Percentage of Neonatal death audit conducted.				
<b>Total</b>				

## 9. Equipment, Logistics, Supplies and Registers

Sl. No	Items	Status (ticks for yes)	Reamarks
<b>Essential MNH Equipment</b>			
1.	Ambulance	Present and in running condition	
		Present but out of order	
		Absent	
2.	Anesthesia machine	Present and in running condition	
		Present but out of order	
		Absent	
3.	Functioning Oxygen Cylinder (6 per Anesthesia Machine)	Present, No..... Type.....	
		Absent	
4.	Functioning Nitrous oxide cylinder (3 per Anesthesia Machine)	Present, No..... Type.....	
		Absent	
5.	Functioning Laryngoscope (Adult & pediatric)	Present and in running condition	
		Present but out of order	
		Absent	
6.	Endotracheal tubes including neonatal Endotracheal tube (2, 2.5, 3.0)	Present and in running condition	
		Present but out of order	
		Absent	
7.	Spinal Needles	Present adequate number	
		Present but inadequate number	
		Absent	
8.	Functioning Ambu bag (Adult & Paediatrics)	Present	
		Absent	
9.	Functioning DE & C Set	Present	
		Absent	
10.	Functioning Caesarian section set	Present	
		Absent	
11.	Functioning Delivery set	Present	
		Absent	
12.	Functioning Vacuum extractor	Present	
		Absent	
13.	Functioning delivery forceps	Present	
		Absent	
14.	Functioning Autoclave	Present	
		Absent	
15.	Functioning sterilizer	Present	
		Absent	
16.	Functioning OT table	Present	
		Absent	
17.	Functioning OT light	Present	
		Absent	
18.	Functioning Suction apparatus	Present	
		Absent	
19.	Diathermy machine	Present	
		Absent	

Sl. No	Items	Status (ticks for yes)	Remarks
20.	Blood grouping and cross matching reagents	Present and adequate	
		Present but inadequate	
		Absent	
21.	Blood bag & Transfusion Sets	Present and adequate	
		Present but inadequate	
		Absent	
22.	Doctor's gown, mask and cap (Reusable)	Present and adequate	
		Present but inadequate	
		Absent	
23.	Gloves (different sizes) Pre-packed (Sterile) Unsterile (Autoclaved)	Present and adequate	
		Present but inadequate	
		Absent	
24.	Patient's gowns	Present and adequate	
		Present but inadequate	
		Absent	
25.	Hepa filter	Present and adequate	
		Present but inadequate	
		Absent	

## Drugs

### a) Anesthetic Drugs:

Sl. No	Items	Status (Tick for YES)	Remarks
25.	Inj. Thiopentone	Present & adequate	
		Present but inadequate	
		Absent	
26.	Inj. Fentanyl	Present & adequate	
		Present but inadequate	
		Absent	
27.	Inj. Suxamethonium	Present & adequate	
		Present but inadequate	
		Absent	
28.	Inj. Norcuron (Vecuronium)	Present & adequate	
		Present but inadequate	
		Absent	
29.	Inj. Atracurium	Present & adequate	
		Present but inadequate	
		Absent	
30.	Inj. Neostigmine	Present & adequate	
		Present but inadequate	
		Absent	
31.	Inj. Atropine	Present & adequate	
		Present but inadequate	
		Absent	
32.	Inj. Ketamine	Present & adequate	
		Present but inadequate	
		Absent	
33.	Inj. Pethidine	Present & adequate	
		Present but inadequate	
		Absent	



Sl. No	Items	Status (Tick for YES)	Remarks
34.	Inj. Bupivacaine (heavy)	Present & adequate	
		Present but inadequate	
		Absent	
35.	Inj. Lignocaine (plain & with adrenaline)	Present & adequate	
		Present but inadequate	
		Absent	
36.	Halothane	Present & adequate	
		Present but inadequate	
		Absent	

**b) Emergency drugs:**

37.	Inj. Adrenaline	Present & adequate	
		Present but inadequate	
		Absent	
38.	Inj. Ephedrine	Present & adequate	
		Present but inadequate	
		Absent	
39.	Inj. Hydrocortisone	Present & adequate	
		Present but inadequate	
		Absent	
40.	Inj. Aminophylline	Present & adequate	
		Present but inadequate	
		Absent	
41.	Inj. Dexamethasone	Present & adequate	
		Present but inadequate	
		Absent	
42.	Inj. oxytocin	Present & adequate	
		Present but inadequate	
		Absent	
43.	Inj. Magnesium sulphate	Present & adequate	
		Present but inadequate	
		Absent	
44.	Inj. Ergometrine	Present & adequate	
		Present but inadequate	
		Absent	
45.	Inj. Diazepam	Present & adequate	
		Present but inadequate	
		Absent	
46.	Tab. Misoprostol	Present & adequate	
		Present but inadequate	
		Absent	
47.	Inj. Tranexamic Acid	Present & adequate	
		Present but inadequate	
		Absent	
48.	Inj. Nalepsin	Present & adequate	
		Present but inadequate	
		Absent	
49.	Inj. Adrenaline 1:10000	Present & adequate	
		Present but inadequate	
		Absent	

**c) Intravenous fluids:**

50.	Hartmann's solution	Present & adequate	
		Present but inadequate	
		Absent	
51.	Normal saline	Present & adequate	
		Present but inadequate	
		Absent	
52.	Dextrose saline 10%	Present & adequate	
		Present but inadequate	
		Absent	
531.	Dextrose in aqua	Present & adequate	
		Present but inadequate	
		Absent	
54.	Cholera Saline	Present & adequate	
		Present but inadequate	
		Absent	
55.	Plasma volume expanders (Haemaccel, HES)	Present & adequate	
		Present but inadequate	
		Absent	

**d) Antibiotics:**

56.	Inj. Ciprofloxacin	Present & adequate	
		Present but inadequate	
		Absent	
57.	Inj. Gentamycin	Present & adequate	
		Present but inadequate	
		Absent	
58.	Ampicillin	Present & adequate	
		Present but inadequate	
		Absent	
59.	Azythromycin	Present & adequate	
		Present but inadequate	
		Absent	
60.	Metronidazole	Present & adequate	
		Present but inadequate	
		Absent	

**e) Others:**

61.	I V cannula (different sizes) (18G, 20G,	Present & adequate	
		Present but inadequate	
		Absent	
62.	Infusion sets	Present & adequate	
		Present but inadequate	
		Absent	
63.	Disposable syringes (1 cc, 3 cc, 5cc)	Present & adequate	
		Present but inadequate	
		Absent	
64.	Foley's catheters & urine bags	Present & adequate	
		Present but inadequate	
		Absent	

65.	Lignocaine jelly	Present & adequate	
		Present but inadequate	
		Absent	
66.	Antiseptic materials (Povidone iodine, hibiscrub, hexisol etc.)	Present & adequate	
		Present but inadequate	
		Absent	
67.	Antiseptic ointment (Neobacrin, povidone oint. etc.)	Present & adequate	
		Present but inadequate	
		Absent	
68.	Micro Burret	Present & adequate	
		Present but inadequate	
		Absent	
69.	Ng Tube 5 & 6 (for neonatal Catheter)	Present & adequate	
		Present but inadequate	
		Absent	

**MIS and reporting:**

70.	OT register/Indoor/Delivery registers	Available & maintained	
		Available but not properly maintained	
		Not available	
71.	ANC/PNC registers & ANC/PNC card	Available & maintained	
		Available but not properly maintained	
		Not available	
72.	EmONC reporting formats	Available & maintained	
		Available but not properly maintained	
		Not available	
73.	EmONC Emergency stock register	Available & maintained	
		Available but not properly maintained	
		Not available	
<b>Total</b>			

## 10. Protocols practiced for EOC (from DHIS-2)

Sl.No.	Protocol	Practiced	Not-Practiced	Remarks
1.	Vaginal bleeding in early pregnancy 1			
2.	Vaginal bleeding in early pregnancy 2			
3.	Ante partum hemorrhage			
4.	Eclampsia and pre-eclampsia			
5.	Convulsion in pregnancy			
6.	Malpresentation and Malposition			
7.	Unsatisfactory progress of labour			
8.	Obstetrics shock			
9.	Ruptured uterus			
10.	Postpartum hemorrhage			
11.	Post abortion care			
12.	Delivery options after CS			
13.	Newborn resuscitation			
14.	Immediate newborn care			
15.	I treat patients and their families in the way I would like to be treated.			
<b>Total</b>				

<b>SL No</b>	<b>Observed Area</b>	<b>Obtained Score</b>	<b>Remarks</b>
1	Basic facilities of the hospital		
2	Quality of Care		
3	Mother Baby Package service		
4	Management of Violence against women		
5	Gender Equity		
6	Facility Management		
7	Pathological Lab and Other examination		
8	Performance indicator		
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<b>Total Score</b>			