QUALITY COUNCIL OF INDIA
QCI Creating an Ecosystem for Quality

WORKPLACE ASSESSMENT FOR SAFETY AND HYGIENE(WASH)

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INTRODUCTION:-

WASH Standards is a scheme passed by Quality Council of India (QCI) aiming in helping any organization/Hospital to access and checks its readiness in order to restart and run all the operations safely amid COVID-19.

The post virus scenario will be clearly focusing on health, safety and hygiene conditions of the hospital and its staff. India's condition to rebuild its economy post COVID would be a big issue and concern requiring a plan to make sure that quality and services of hospitals are maintained and henceforth reducing the future development of recurrences and spread.

At this crucial time with the devastating effects of COVID it becomes necessary to bring specific protocols for the hospitals ensuring that they are able to operate their day to day work safely with very little or no occurrences of COVID cases.

This requires few priorities and protocols to be followed for the Hospitals as mentioned below:-

- Ensuring safe operations and workplace for safeguarding health and safety of employees, customers and public.
- Complying with all new COVID-19 related requirements from regulatory/health authorities and/or other Government bodies.
- Ensuring business continuity in operations to serve customers and protect businesses.

Objective of the Study

The study aims in assessing the workplace safety and hygiene standards following the COVID-19 outbreak

The Assessment is based on the checklist covering 15 main parameters from WASH scheme launched by QCI:

- Management Commitment
- Regulatory and other requirements
- Business Continuity
- Risk Management
- Communication
- Hygiene and Safety
- Preventive Measures
- Training and awareness
- Waste Management
- Ventilation
- Public interaction
- Supply Chain
- Transportation
- Document Requirement
- Control of Discriminatory Practices

INTENT OF ASSESSMENT

•To give the Hospital with a comprehensive report on the preparedness of its Hygiene & Safety system and processes in relation to COVID-19 risk.
•To give information valuable for identifying and improving the Hospitals weak institution's links in terms of hygiene and safety in its operations and workplace

Research Methodology &Study Design

An interview-based study using fixed set of questions concerning the 15 parameters was conducted and the concerned staff and authorities were interviewed for the same. The result so found was analyzed and interpreted to see the readiness of the hospital based on the WASH scheme.

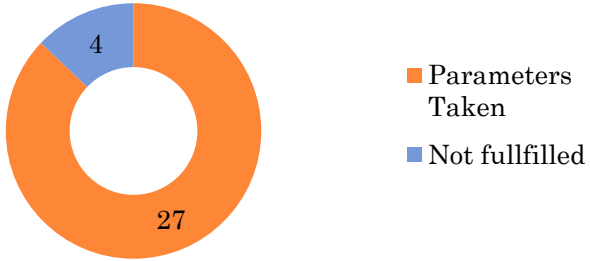
Data Collection Tools and techniques

A structured interview method was used for the study and responses were marked in order to see the compliance required in each section.

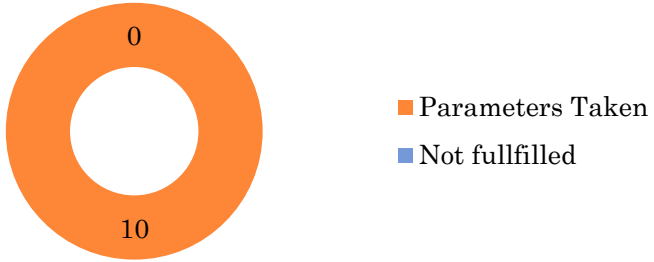
Click below for the questionnaire link:-
https://drive.google.com/file/d/1YDtHYEEW55Nux1NR3ieQQ5yWDwAs0s53/view?usp=sharing

Results & Analysis

Management commitement

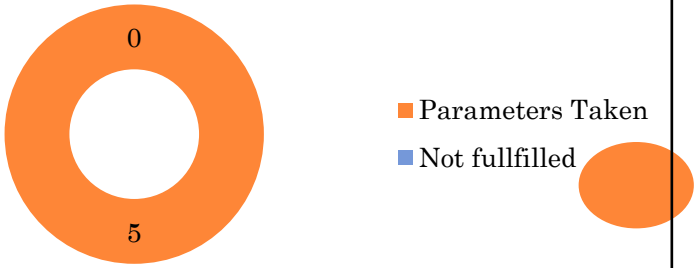


Regulatory and other requirements



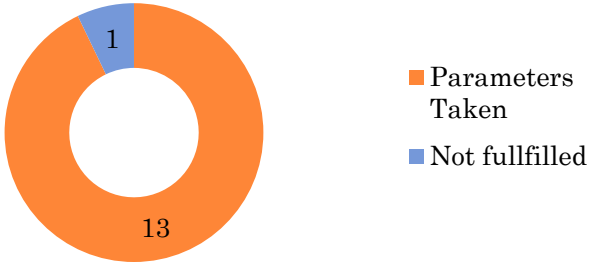
Business continuity

Risk management

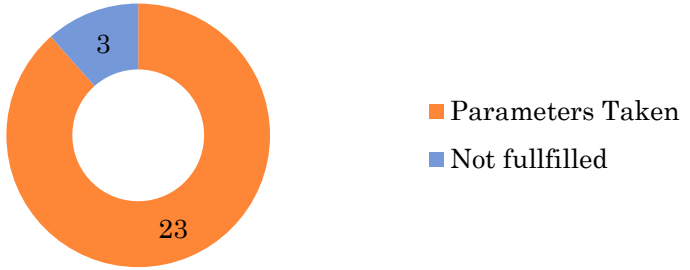


Results & Analysis

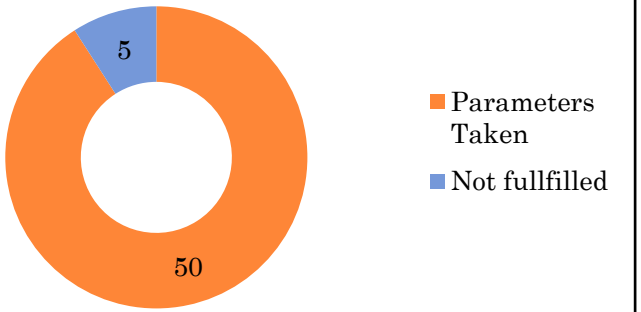
Communication



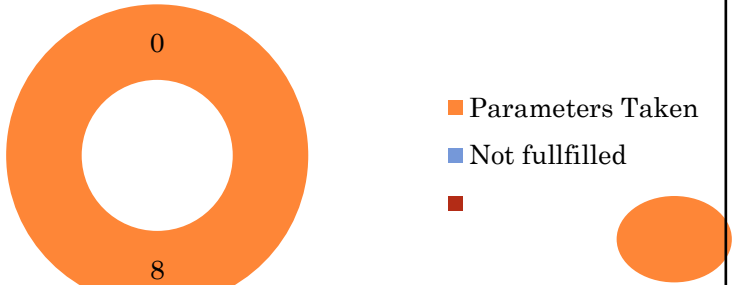
Hygiene & Safety



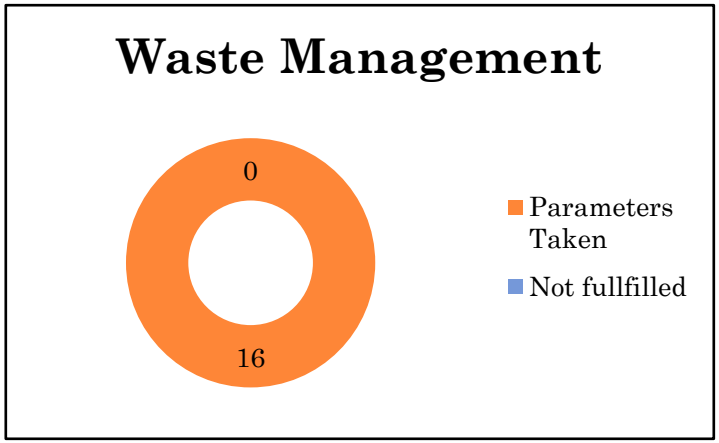
Preventive Measures

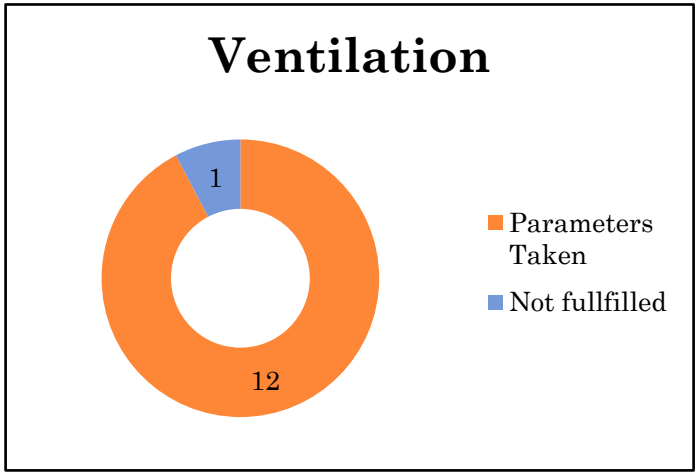


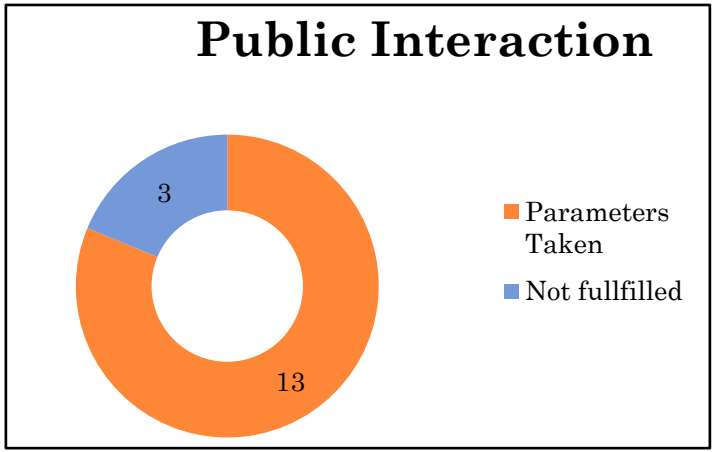
Training and awareness

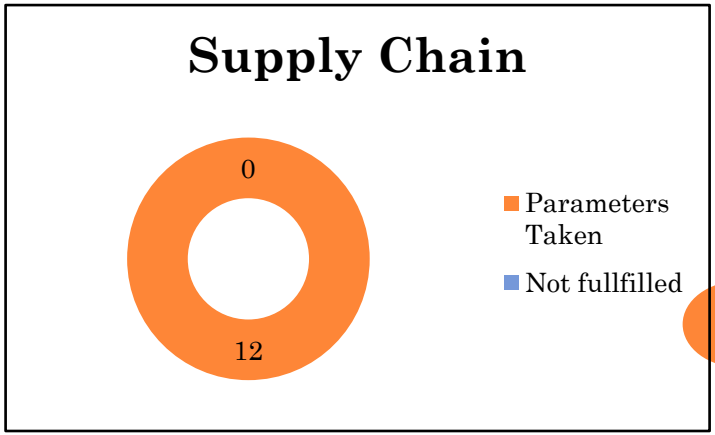


Results & Analysis

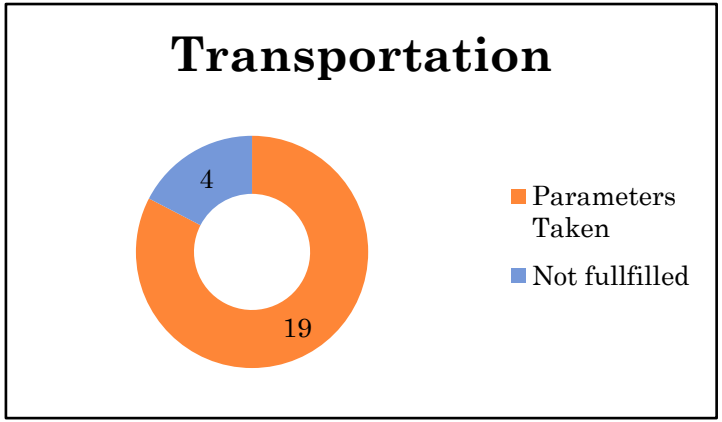


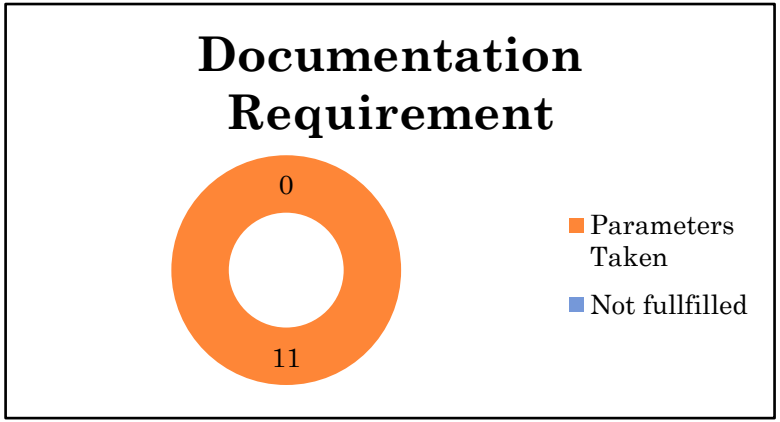


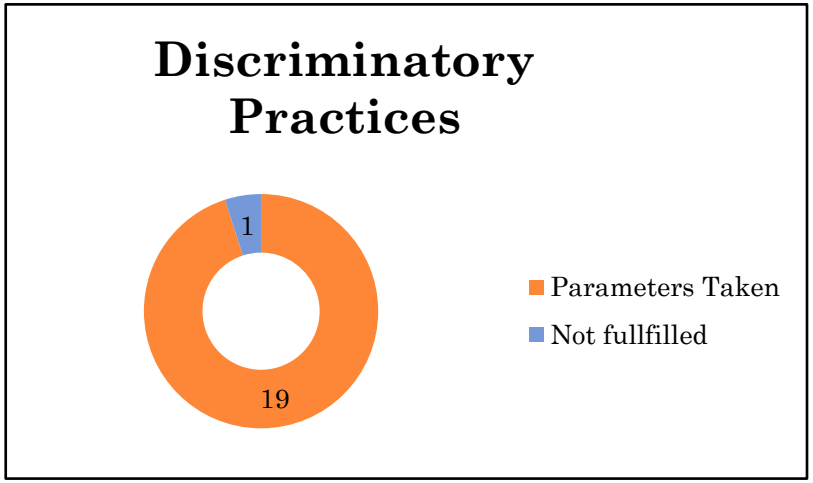




Results & Analysis







Summary For issues & Improvement

Management Commitment

•No presence of Hospital Incident Management System as such having representatives from all related departments and units.
•No sitting capacity was marked for the canteen area following social distancing norms.
•No regular screening done for hospital staff at the entry gate including Doctors,paramedics,Nurses,housekeeping workers,canteen workers etc.
•No SOP related to quarantine and checking area for what is brought into hospital present.

Communication

•A spokesperson for public information can be appointed to coordinate and maintain consistent communication with the public, the media, and health officials

Summary For issues & Improvement

Hygiene &Safety

•No social distancing followed in the canteen and in RT-PCR sample collection area
•No social distancing followed in the patient waiting area in OPD. People sitting without chair gaps, to help achieve this Cross signs can be made with red tape on alternate chair.
•Insufficient amount of Sanitizers placed at different locations in the hospitals ie.(Entrance, Reception, Waiting area etc.),Also the sanitizer's can be made foot operated

Preventive Measures

•There is no provision for isolating unwell employees of the Hospital until medical assistance comes.
•There is no designated waiting space for persons who are experiencing respiratory problems.
•No Physical barriers like plastic screen or glass screen present at the reception area of OPD
•The isolation/ wards not following negative pressure criteria
•Staff not following triple bucket mopping technique

Summary For issues & Improvement

Ventilation

•There is no check list provided to examine whether the HVAC system meets or exceeds all applicable codes, standards, guidelines, and supplier instructions.

Public Interaction

•There are no protocols or processes in place for screening and work limits for health-care workers who have been exposed to or are ill.
•No facility or programmes for managing mental health of doctors and paramedic staff
•There is no protocol in place to monitor and manage workers who are suspected or confirmed to have COVID-19, or who have been exposed to a COVID-19 patient who is confirmed, probable, or suspected.

Summary For issues & Improvement

Transportation

•No disinfection of goods container prior or after arriving at the loading location of the hospital
•Sterilization of all incoming and outgoing vehicles bringing goods etc for the hospitals using detergents and disinfection sprays rarely followed and done
•Hospital vehicle drivers /helpers not screened regularly for COVID19 symptoms
•Ambulances not disinfected or sterilized after every visit
•Not all details written on Covid 19 sample like(UN no, temperature, requirement, upright arrow mark for direction etc)

Discriminatory Policies

The policies that exist in the hospital against the rights of the employees or staff are not properly known by all, especially at lower levels.

Recommendations based on the study

Management Commitment

- A hospital incident management can be made which will help in improving their emergency management planning, response, and recovery capabilities for both planned and unforeseen occurrences specially during the COVID time
- Screening of hospital staff should be made mandatory as they can also be the cause of virus transfer
- Maximum sitting capacity to be allotted for crowded areas like canteen and waiting area

Communication

- A spokesperson on the behalf of the hospital can be appointed which can directly interact to media about the no of Covid cases and status of the hospital which would help in the easy flow of information

Hygiene &Safety

- As for the hygiene & safety point of view social distancing must be followed, for that maximum limit of people should be maintained in all the crowded places, also in the waiting area alternate chairs can be marked cross with a red tape .Telemedicine facilities can be started and non serious and critical patients treatment can be delayed
- For maintaining hygiene of the patients and staff in hospital sufficient amount of foot operated sanitizers must be placed at different locations in the hospital

Preventive Measures

- Patient coming with respiratory issues can be designated with a separate space in the hospital ensuring safety to common patients
- Placement of physical barrier like a glass or plastic barrier at the OPD reception area would help the hospital staff for a more safer communication with the patient
- Triple mopping cleaning system should be practiced in order to prevent the hygiene standard of the hospital
- A provision for isolating unwell employees of the Hospital until medical assistance comes can be made, not an essential need but desirable in order to pay respect and comfort to them
- Negative pressure must be maintained in isolation wards

Recommendations based on the study

Ventilation

- In order to ensure effective ventilation at the hospital a checklist of the necessary ranges can be provided to the head of maintenance in order to examine whether the HVAC system meets or exceeds all applicable codes, standards, guidelines, and supplier instructions

Public Interaction

- Certain mental health programs and initiative should be started specially for the front liners and hospital staff to combat the stress related to COVID and also increase the efficiency of their work
- There should be set protocols for screening and work limits for health-care workers who have been exposed to or are ill. They should be given proper rest in order to work and not overburdened
- A proper Rota of the people working in the hospital should be made and timely changed and also a protocol can be in place to monitor and manage workers who are suspected or confirmed to have COVID-19, or who have been exposed to a COVID-19 patient who is confirmed, probable, or suspected.

Transportation

- All goods and vehicles(Ambulances) entering and leaving hospital should be sterilized after every visit as it can be a source of infection. Separate rooms/spaces should be made for the goods coming in the premises, kept for sometime and then disinfected.
- Screening of the ambulance drivers should be done at the entrance of the hospital at regular basis
- While transporting Covid samples within or outside hospital information should be written on it like UN no, temperature, requirement, upright arrow mark for direction etc) and sample should follow triple packaging

Discriminatory procedures

- All Employees should be aware about their rights, for that orientation should be regularly held and employees should be encouraged for the same. It should be out in the open and not hidden and covered

Discussion:

The Wash standard assessment done in order to find the workplace safety and hygiene revealed about the hospital that out of 15 parameters taken it was doing good in about 7 parameters that are Regulatory requirements, business Continuity, Risk Management, Waste Management, Training and Awareness, Supply Chain management and Documentation Requirement part.

However, in remaining 8 parameters of Management Commitment, Hygiene and safety, Preventive measures, Communication, Ventilation, Public Interaction, Transportation, and Discriminatory Practices some or the other issues were seen.

The Hospital was standing good with respect to WASH standards with overall of about 91% compliance.

The findings of this study will further guide us towards the remaining scope of improvement about the neglected areas for the further readiness of the hospital for any alarming situation or future outbreaks.

Conclusion

The hospitals own safety, hygiene, and readiness will be a major hurdle to overcome in order to gain a better view and prepare for the upcoming waves of Covid 19.
The current Covid situation in our country has exposed the government's & Private hospital’s deteriorating administration on many fronts.
Preparation of the hospital on all fronts is critical in all aspects, and the application of WASH standards provides a good indication of how a hospital can prepare for any forthcoming challenges and close any gaps that may exist.

Thank you