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STANDARD OPERATING PROCEDURES



DEPARTMENT OF FACILITY MAINTENANCE

SMVMCH

VALIDITY: THIS MANUAL IS VALD FOR 3 YEARS



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1. PURPOSE:

To provide the guidelines for effective maintenance of facilities available in Sri Manakula Vinayagar Medical College and Hospital.

2. SCOPE:

Maintenance department is responsible for maintaining and smooth functioning of the hospital premises. Maintenance department has the following divisions as listed below.

- a) General maintenance, Civil Maintenance plumbing and sanitation.
- b) Water Management
- c) Carpentry and painting.


3. RESPONSIBILITY:

Maintenance engineer, Supervisor and technicians (plumbers and tank operators) are responsible for proper maintenance of facility.

4. PROCEDURES:

4.1. DEPARTMENTAL RESPONSIBILITIES:

- a) Departmental in charge will Plan, Schedule and control the work done in the respective department.
- b) Going for facility rounds once a week to check plumbing and sanitation to ensure that preventive maintenance is as per schedule
- c) Organizing repairs of major and minor breakdowns.
- d) *Monthly cleaning of overhead tank, drinking water tank (RO), floor sump and dialysis tank (RO).*

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4.2. PLUMBERS:

- a) *Periodical checking of water level for OHT and underground sump.*
- b) To observe the performance of pumps.
- c) To attend all plumbing and sanitary problems.
- d) To check the proper maintenance of RO plants.
- e) Cleaning the rainwater pipe lines.
- f) Cleaning the terrace areas monthly once.
- g) To check drainage system.

4.3. CARPENTER:


- a) *Attend day to day problems pertaining to carpentry works.*
- b) *Make rounds in all wards every week and attend to complaints related to carpentry works.*

4.4. PROCEDURE FOR ATTENDING COMPLAINTS:

In case of any complaint we received through direct telephonic information and software.

4.5. PREVENTIVE MAINTENANCE:

- a) Preventive maintenance is carried out to minimize the potential causes for breakdown.
- b) Preventive maintenance is carried out as per check list and the details are recorded in the preventive maintenance check list for future reference.

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4.6. PATIENT SAFETY DEVICES:

The following are installed for the patient safety throughout the hospital and it's verified and inspected periodically.


- a) Grab bar in toilets.
- b) Bed rails.
- c) Safety belts on wheel chairs.
- d) Side rails on stretchers.
- e) Bed side call bells (special ward).
- f) Hand rails.

4.7. SIGN BOARDS:

- a) List of services offered by our hospital is displayed in hospital reception.
- b) Boards for fire exit, safe assembly point, drinking water, mobile and smoking restriction are displayed in required areas of hospital.
- c) Speed limits, no parking, no horn, water not suitable for drinking (garden) are displayed around the hospital.
- d) Emergency evacuation plan is displayed in all floors for easy evacuation of patients, visitors and staffs.

4.8. WAITING LOUNGE FACILITIES:

- a) Patient waiting lounges are provided with comfortable seating arrangement.
- b) Patient's lounges are well ventilated and illuminated.
- c) *Near the waiting lounge the portable drinking water is available.*
- d) The toilet facilities are also comfortably arranged at designated areas.

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e) Wheel chairs and stretchers are in place at the designated places in all locations to help physically challenged patients.

4.9. PROVISION FOR SAFE WATER:

The hospital daily water requirement is approximately 4 lakhs litres. To cater to these bulk requirements the hospital is taking water from Bore Well. Lorry water is purchased from vendor in case of deficiency from bore well.

4.10. CLEANING PROCESS and INFECTION CONTROL:


The over head **cleaning process** will be done once in three months. Process of cleaning is as follows: Dewatering → Sludge Removal → High Pressure brushing → Water Cleaning → Bleaching powder cleaning → Fresh water cleaning and drying.

4.11. REVERSE OSMOSIS PLANT (RO) PLANT FOR DRINKING:

- a) One RO Plant is available in hospital.
- b) RO water is supplied in ground floor (behind Paediatric Out Patient Department and patient attenders dining area)
- c) The Drinking RO water is tested (As per IS 10500 Standard) once in every 3 months from college lab (community medicine) / external agency. These reports are maintained in maintenance department. The Dialysis unit RO water is tested for endotoxin levels every month from external agency and report of the same is maintained in dialysis unit.

4.12. SMOKING POLICY:

Smoking is prohibited in the hospital premises. No smoking sign boards are displayed in several places in the premises. The securities on duty ensure implementation of the policy in compliance with Government of India rules and regulations.


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4.13. SEWAGE TREATMENT PLANT

- a) Common Sewage treatment plant is available for entire campus. All sewage waters are treated and re-circulated to gardens
- b) STP plant is situated in north west side of campus
- c) The following records are maintained in STP Department
 1. STP plant monitoring log
 2. Air blower monitoring log sheet
 3. STP treated water reading note

4.14. BUILDING MAINTENANCE AND CIVIL WORKS:

- a) The building maintenance involves masonry construction, minor modifications, repairs, plumbing works, painting, polish, carpentry works etc.
- b) *The head of the maintenance department will discuss with the administrative officer regarding maintenance jobs to be carried out and necessary permission and approval is obtained.*
- c) A schedule is prepared for the maintenance works and workers are assigned the jobs with required material. A shift supervisor will monitor and co-ordinates for the completion of the jobs.
- d) Civil works are carried out on the basis of written request from individual departments; the request will detail the nature of work. If the work can be executed with in the available resources of Maintenance will be completed.

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4.15. INCIDENT REPORTING AND CORRECTIVE ACTION:

- a) In the event of an incident occurring, incident report is made and appropriate action is initiated.
- b) A corrective action is taken for it, by making an alternative arrangement. Ongoing procedure will not be interrupted.


5. ANNEXURE:

The following drawings are maintained by maintenance department with document control.

- 5.1. Site Layout.
- 5.2. Floor plans.
- 5.3. Floor wise Emergency evacuation plan.
- 5.4. Sign boards.

6. RECORDS, REGISTERS AND FILES:


S.NO	RECORD NAME	RECORD NO	LOCATION	RETENTION PERIOD
1.	Preventive Maintenance Checklist –weekly	SMVMCH/FMS/PMC/01	FMS	3 years
2.	Water Test Reports.	SMVMCH/FMS/WTR/02	FMS	3 years
3.	Duty Roaster	SMVMCH/FMS/DR/03	FMS	3 years
4.	Breakdown Call log	SMVMCH/FMS/BCLR/04	FMS	3 years

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S.NO	RECORD NAME	RECORD NO	LOCATION	RETENTION PERIOD
	Register			
5.	List of emergency contact numbers	SMVMCH/FMS/LECN/05	FMS	3 years
6.	Movement Register	SMVMCH/FMS/MR/06	FMS	3 years

7. REFERENCES:

7.1 Guidebook for NABH Accreditation 5th Edition Apr 2020.

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HYPERSPERSE MDC220 (RO water chemical)

1. PURPOSE:

HYPERSPERSE MDC220 (RO water chemical) is a light yellow mild amber liquid is a chemical used in this RO water to purify the water.

2. DESCRIPTION:

Hypersperse™ MDC220 is a highly effective liquid to control scale precipitates and reduce particulate fouling within membrane separation systems. Use of this product provides longer run times and extended element life resulting in reduced operating and capital costs. Classified for use in producing potable water.(Classified to ANSI/NSF Standard 60). Effectively controls scales including calcium sulfate, barium sulfate, and strontium sulfate.

3. DEFINITION:

Application For maximum effectiveness, Hypersperse MDC220 should be added prior to the static mixer or cartridge filter housing. The maximum dosage is 10 mg/L. Maximum dilution is 10% with RO permeate or DI water.

4. HANDLING:

Normal chemical handling

5. STORAGE:

Keep containers closed when not in use. Protect from freezing. Do not store at elevated temperatures. Use proper containers.