

**Office of the Additional Chief Secretary, PWD  
Office of the Secretary, Medical Education  
Government of Rajasthan**

**Circular**

Date – 5<sup>th</sup> May, 2025

Circular No. - 102

**Subject: Standard Operating Procedure (SOP) for Patient Safety and  
Maintenance of Hospitals attached to Medical Colleges in Rajasthan**

Hospitals attached to medical colleges provide critical patient care services 24x7 365 days in a year in specialty and super-specialty topics ranging from emergency, casualty to various surgical procedures and care of critically ill patients.

To ensure continuous availability of services and patient safety in the hospital buildings, following standard operating procedure (SOPs) is specified for strict adherence:

1. PWD will set up a chowki in every hospital attached to medical colleges. Space will be provided by concerned hospital. These chowkis will be manned by plumbers and electricians 24x7 in 3 shifts, and masons, carpenters and welders during day time. This manpower will be hired by PWD. In case of shared premises between the hospitals, a common chowki will be established.
2. A dedicated 24x7 helpline phone number will be advertised across all hospitals which will be manned by Sampark Helpline operators who will take down any complaint related to maintenance and other patient grievances.
3. Concerned hospital will provide 2% of the building value annually to the concerned PWD division as an annual maintenance fund. Funds will be provided by RMRS and payment will be made by concerned PWD division. Building value will be calculated by multiplying the total built-up area of the hospital by current going market rate for building construction. (@ Rs 28000/sqm for year 2025-26).
4. 70% of this maintenance fee will be spent on civil maintenance and 30% on electrical maintenance. If in a particular hospital, this ratio needs to be altered based on ground realities, Superintendent of the hospital can alter it with permission of Chairperson RMRS on written suggestion by the civil and electrical divisions doing the maintenance.
5. Certain equipment in a hospital needs Annual Maintenance Contract (AMC - where labour is included but material is separate) and Comprehensive Annual Maintenance Contract (where labour and material both are included) like -

  
(प्रवीण गुप्ता)  
अति. मुख्य सचिव  
सार्वजनिक निर्माण विभाग

  
(Ambrish Kumar)  
Secretary



- i. Chiller and VRV/ VRF AC plants
- ii. DG sets
- iii. Window and Split ACs
- iv. Ducting based air cooler systems
- v. Transformers and sub-stations
- vi. Oxygen pipelines
- vii. Lifts and elevators
- viii. Fire alarm system
- ix. Fire-fighting system
- x. CCTV system
- xi. Any other system which needs AMC/ CAMC as decided by Electrical division in consultation with Superintendent

All above AMCs will be done by PWD.

6. These AMCs/ CAMCs will also be done by the electrical division of PWD and funds will be provided by the respective hospital Superintendent from budgetary allocation or RMRS as needed.
7. All maintenance complaints will be raised through the centralised helpline phone number / website/ mobile app and each complaint will get channelised to the concerned site supervisor of the contractor who will work under the supervision of JEn/ AEn of PWD. As per SOP framed by both the departments. Verification of the complaint rectification will be done by the Medical Officer incharge of hospital maintenance and payment to contractor will be done by the PWD after verification.
8. PWD will also conduct an annual survey of the hospital building and issue a building fitness certificate. If any preventive maintenance need is noticed during this annual survey, PWD will prepare an estimate and seek Admn & Financial sanction from the concerned hospital Superintendent and carry out these works on priority.
9. To ensure patient safety and usability of the hospital buildings, particular attention is drawn to the following aspects of building maintenance on priority:
  - i. Leakage free fresh-water and sewerage plumbing.
  - ii. Roof treatment to prevent any seepage of rain-water
  - iii. Plaster repair on ceilings and walls to prevent any safety hazard from loose plaster
  - iv. Leak proof bathroom fittings in all toilets and bathrooms
  - v. All loose wires to be properly covered in conduits
  - vi. Electrical switchboards to have proper joinery and to be covered with proper lids and secured to prevent accidents
  - vii. Transformers and electrical cabling/ wiring to be matched with actual connected and used electrical load
  - viii. All peepul and ficus trees growing wild on roofs and wall crevices to be removed along with roots to prevent structural damage and prevent seepage

  
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 (Ambrish Kumar)  
 Secretary



- ix. Window parapets etc. to be cleaned and repaired to prevent accidents from falling debris
  - x. Broken glass panes and wire-meshes to be fixed
  - xi. Exhaust fans to be installed with louvres (instead of wire-meshes) to ensure proper operation and reduced noise
  - xii. All broken switches and switch-boards to be fixed
  - xiii. All broken tiles on floors, dados and bathrooms to be fixed immediately
  - xiv. Broken and dysfunctional room/ bathroom doors and windows to be repaired and made functional
  - xv. All ceiling fans, wall fans and lights to be made functional
  - xvi. Cracks in ceilings and walls to be plastered and made water-tight to prevent rain-water seepage
  - xvii. Any other type of maintenance as needed
10. Any existing contracts for maintenance of hospital buildings done by the Hospital Superintendent should be transferred to the concerned Civil/ Electrical division of PWD. All future contracts will be done by PWD.
  11. Concerned Xen civil / Electrical will also see them technically and guide them as member to improve the current AMC system.
  12. Any Hospital Engineer (Civil/ Electrical) posted in a hospital will also be working under the technical supervision of the concerned XEn PWD under whose jurisdiction the hospital falls.
  13. Lack of funds should NEVER be cited as a reason for any gap in upkeep of buildings and electrical fixtures. Hospitals being part of an essential service to save human lives which are in constant use 24x7 need to be kept in good shape. Concern hospital will be solely responsible for providing funds on time. Any lapses in maintenance will be dealt with severely and disciplinary action against both Hospital Superintendent, senior most Accounts Officer posted in the Hospital and the concerned XEn/ AEn/ JEn of PWD Civil and Electrical divisions will be initiated without any delay.
  14. Schedule for this activity for year 2025-26 is attached in the Annexure 1 below-

(Praveen Gupta)

ACS, PWD

(प्रवीण गुप्ता)

अति. मुख्य सचिव

सार्वजनिक निर्माण विभाग

(Ambrish Kumar)

Secretary, Medical Education

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## Annexure - 1

### I. Emergent Works

No.	Activity	Deadline
1	Team formation of PWD Civil, Electrical AEN/JEN/EE and Medical College/Hospitals representative	08.05.2025
2	Conduct survey & compile emergent works required + abstract estimates	12.05.2025
3	Prepare BOQ & float NIT (subject to receiving A&F online)	19.05.2025
4	Likely date of receiving NIT	21.05.2025
5	Opening of tenders & issuing work order	25.05.2025
6	Start of emergent works	29.05.2025

### II. Day-to-Day Repair Works Rate Contract

No.	Activity	Deadline
1	Prepare BOQ for rate contracts	09.05.2025
2	Call for NIT for rate contracts	14.05.2025
3	Receive tenders for rate contracts	23.05.2025
4	Issue work order & start of works	28.05.2025

### III. Preventive Maintenance Works

No.	Activity	Deadline
1	Preparation of estimates (building-wise) & submission to Medical Nodal Officer of each building	30.05.2025

### IV. Submission of Consolidated Report

No.	Activity	Deadline
1	Emergency work requirements	25.05.2025
2	Day-to-day works (BOQ for rate contracts)	25.05.2025
3	Preventive maintenance requirements	25.05.2025
4	Handover list of unsafe buildings	30.05.2025

*M* 15.5.25  
(Ambrish Kumar)  
Secretary



**Copy to forwarded for information and necessary action please:-**

1. ACS to Hon'ble CM.
2. SA to Hon'ble HM.
3. Sr. DS to Chief Secretary.
4. DS to ACS Finance.
5. PS to ACS PWD.
6. DS to Secretary ME.
7. PS to Secretary, PWD.
8. Commissioner, Medical Education.
9. All Division commissioners.
10. District Collectors and chairman RMRS.
11. Chief Engineer and Additional Secretary, PWD.
12. Chief Engineer( Building), PWD.
13. Chief Engineer, RajMES.
14. Additional Chief Engineer, All Division, PWD.
15. Superintendent Engineer, All Districts.
16. All PMC and All Superintendents attached Hospitals.
17. Guard file.

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Medical Education Department