

Association of Healthcare Providers (India)

Application Form & Criteria for AHPI Awards for Excellence in Healthcare-2026

For

Best Single Specialty Hospital having above 100 Beds

Note: Applying Hospitals should go through in detail the criteria given below based on which the Awards selection will be done. Along with the Application Form, the Hospitals will need to prepare and submit a presentation showing how well they are complying with the criteria

*Application Forms submitted to be stamped & signed by Head of the Hospital, scanned and then uploaded along with the Presentation in PPT, on or before **15th August 2026***

GENERAL INFORMATION ON APPLYING HOSPITAL		
REGISTERED NAME		
YEAR OF ESTABLISHMENT		
ADDRESS		
Name of Organisation Head (MD/ Owner/ Medical Director)		
Tel Nos.	Landline:	Mobile:
Email ID		
Website	URL Name: www.	

Important Notes:

- Awards are open only for Tamil Nadu based Hospitals, which are operational for over 3 Years
- Nomination Fee is INR 5,000 plus GST as applicable
- Fees can be remitted through link provided

Awards Criteria for Selection

Best Single Specialty Hospital having 100 Beds and above

S. No.	Assessment criteria	Evidences Required in ppt
1	Legal compliances	
	All applicable legal compliances are in place	Licenses copies like for Registration CEA; Fire NOC; PCB-Air, water; PCB-BMW; AERB-Imaging; USG-PCPNDT; Pharmacy License;
2	Scope of services	
	Scope of services are defined, displayed (bilingually)	Display photo of Sign Board
3	Registration and admission	
a)	Well defined registration and admission process is in place	UHID generation; OPD Nos.; IP Nos. -6 month data
4	Transfer/Referral	
a)	Well defined transfer and referral policy (internal and external) is in place and implemented	Referral policy copy
5	Clinical Effectiveness	
a)	Clinical protocols are defined to provide effective, efficient and consistent care	Clinical protocols-Reference documents
b)	There is a Quality Assurance Program in place for Lab and Radiology with meetings held regularly.	Records of such meetings-last 3 months
c)	There is an updated formulary in the organization and the clinicians adhere to the current formulary	Copy of approved formulary
d)	There is a designated safety officer/(s) who coordinates implementation of the clinical aspects of patient -safety program	Letter of appointment of patient safety officer
e)	There is a Clinical Audit Program, outlining audit requirements for all clinical areas.	Copy of Clinical Audit Program
f)	Credentialing and privileging of all clinical staff is done by the organization	Records of Credentialing & Privileging of 5 clinicians
g)	Key indicators of clinical performance are evaluated and responded to.	Trends of infection rates, medication errors, Bed occupancy rates, Average Length of stay
6	Safety, Risk Assessment &	

	Management	
a)	Ramp with access to every floor	Yes / No
b)	Needle Prick Injuries reported in last six months.	Nos. reported
c)	Training for all Staff on BLS/ALS	Yes / No
d)	Training for all Staff on Fire Safety?	Yes / No
e)	Food Safety Certification for Canteen	Yes / No
f)	Hospital conducts electrical safety audit once in a year	Electrical safety audit-2024-25 Filled audit report
7	Facility Management	
a)	The organisation has policy and procedure in place to provide a safe and secure environment.	Documented policy & procedure
b)	The organisation has a maintenance programme for medical equipment and same is implemented	Records of Maintenance for Medical equipment
c)	The organisation has plans for fire and non-fire emergencies within the facilities and same is implemented	Mock drill records for Fire (Code Red) & Non-fire (Code Blue/Code Pink)
8	Environment-Friendly	
a)	Hospital has natural open space with tree-cover for the patients, staff and families of patients	Evidence of open space with tree cover
b)	Hospital ensures enough natural light in all parts of the facility i.e. ICUs, Wards etc	Evidence of natural light in ICUs, Wards;
9	Optimum usage and conservation of water resources	
a)	Hospital has a provision of safe drinking water all the time and there is a plan for water usage for the whole facility which includes measurement, reduction and verification.	No. of safe drinking kiosks; Write-up on water conservation efforts in 250 words
b)	Rain water Harvesting is enabled in the hospital	Photos of Rain water harvesting done in the hospital
c)	Presence of a waste water treatment plant	Photos of waste water treatment plant
10	Optimum usage and conservation of energy resources	

a)	Hospital has a strategy for optimization of energy saving and usage.	Plans for energy saving & optimum usage of energy
b)	Hospital has developed a plan for usage of renewable energy self-supply to reduce impact on environment.	Plans for usage of renewable energy
c)	Hospital has a policy of using energy efficient equipment.	Policy copy; Photos of energy efficient equipment usage in the facility
d)	Use of LED bulb or solar or other renewable energy source	Photos showing use of LED bulb / Solar power
11	Patient satisfaction	
	Patient satisfaction is measured using objective means and feedback into the system with demonstrable improvement. Trend Analysis carried out over last 2 years reviewed to show improvement	PSS Score-last 1 years (2024-25)-Trend Analysis; CAPA towards improvement
12	Adequacy and availability of manpower	
	The organization has manpower planning in place to ensure adequately trained manpower are available in each department, commensurate with the scope of services.	Copy of manpower planning sheet covering all departments
13	Employee Welfare	
a)	% of Total Budget allocated to Staff welfare	Staff welfare budget as % of Total Budgeted expenses
b)	% of Budget allocated for Staff Training	Staff Training budget as % of Total Budgeted expenses
c)	Is Staff Satisfaction being taken regularly	Yes / No; If Yes, PSS score %
14	Employee health	
a)	% of Staff covered in Annual Health Check:	in %
b)	Occupational hazards are addressed by the organization, including Adult Vaccination as appropriate.	Staff vaccination done as % of Total No. of staff
15	Dietary Services	
a)	Hospital has an in-house dietician	Yes / NO

	b) Nutritional therapy is provided to the patients consistently and in a safe manner	Yes / NO; If Yes, copy of nutritional therapy
16	Management of Waste	
	a) Hospital has a protocol for receiving, handling, storing and safe disposal of all kinds of waste including recyclables, hazardous, bio medical and e-waste.	Copy of BMW handling protocol
	b) Hospital complies with all bio-medical waste management rules and ensures biological waste is disposed as recommended by national regulations.	Use of hospital website for display of BMW generated, category-wise
17	Information Management & Communication	
	a) Processes in place for management of patient data and information including confidentiality, integrity and security of data	Documented policy & procedure
	b) Complete and accurate medical record of patients in place which reflects continuity of care	Documented policy & procedure
	c) Periodic review of medical records is in place and appropriate corrective and preventive measures taken for deficiencies pointed out	Medical record audit with CAPA on observations
18	Quality Accreditation	
	Do you have Quality Accreditation? Entry Level / Full NABH	Copy of the Accreditation Certificate & Validity