

Safety Committee

Convening of NABH Safety / Disaster Committee meeting Oct to Dec 2018

- 1 The meeting of NABH Safety and Disaster Committee for month of Oct to December 2018 will be held on **Saturday 19th Jan 2019** at time **12.30 pm**, Venue – Office of Chief Medical Supdt .
- 2 Kindly convene meeting as per agenda given. All members of the committee and invited members are requested to attend the meeting along with details of quality key performance indicators and reports pertaining to their areas of responsibility including the following
 - Conduct of Mock drills , Fire plan,
 - Records of Critical Equipment downtime, Calibration / Maintenance programs ,
 - Details of Safety related Adverse/Sentinel events.
 - Electricity, Water supply, water testing reports
 - Training event reports.
- 3 Facility rounds points will also be discussed
- 4 Minutes of meeting will be recorded and submitted to core committee management with copy to all concerned for action as required.


Dr P Isaac
Chief Quality Co-ord


Medical Director / Dean

Copy to

Dr BK Somani, Chairperson Safety Committee
Dr Girish Gadekar, Chairperson Disaster Committee
Copy to: Core committee members -for info pl.
HOD PSM
Security Head
Chief CMO
Quality cell reps
Matron
I/C Construction Dept
I/C Electrical Dept
I/C Bio-maint dept
I/C Time office
I/C Hygiene and Sanitation Dept
Security Supervisor
Fire officer
Safety Officer


Dr. Rajesh B. Goel
Registrar
MGM INSTITUTE OF HEALTH SCIENCES
(DEEMED UNIVERSITY u/s 3 of UGC Act,1956)
NAVI MUMBAI- 410 209



MAHATMA GANDHI MISSION HOSPITAL & MCRI
AURANGABAD

Safety / Disaster Committee Meeting (January 2019)

Date: 18/01/2019

Time: 12:00 Noon

Venue: CMS Office

Attendance Sheet

SR.NO.	NAME	DEPT	SIGN
1)	Dr. B.K. Somani	Medical Superintendent	[Signature]
2)	Dr. H.A. Mudaliyaan	Dy. M.S.	[Signature]
3)	S.M. Kashyap	Construction	[Signature]
4)	S.B. Patil	T.O.	[Signature]
5)	S.B. Wandhekar	House-keeping	[Signature]
6)	Mr. B.K. SAVANT	Nursing	[Signature]
7)	Ganesh Kudrige	EHS	[Signature]
8)	Mohan Tadhar	BED	[Signature]
9)	Dr. Sunil C. Dhole	Quality Dept.	[Signature]
10)	Dr. P. Israni	Quality Dept.	[Signature]
11)	S.K. Sami	F/O	[Signature]
12)	B.N. Bawaskar	Construction Dept.	[Signature]

MAHATMA GANDHI MISSION HOSPITAL AND MCRI
Aurangabad

MGM/QD /18-

19/01/19

Minutes of Meeting – Safety Committee (Maintenance Committee) Jan 2019

1 The Safety Committee meeting for month of Oct To Dec 2019 was held on 18/01/19 at 12.30 Noon in office of CMS . The meeting was chaired by Dr Aparna Kakkad CMS and attended by following members.

i) Dr. B.K. Somani	-	MS
ii) Dr Mrs Mudaliar	-	Dy MS
iii) Dr. P. Isaac	-	Chief Quality Co ord
iv) Dr Sunil Dorle	-	QD Coord
v) Mr Mohan Jadhav	-	Bio Med Engineer
vi) Mr kasif	-	Civil engineer
vii) Mr Jadhav	-	electrical engineer
viii) Mr Patil SB	-	Time Office
ix) Mr BK Sawant	-	Nursing suptd
x) Mr Wandekar	-	Sanitary inspector
xi) Mr S K Sami	-	Fire safety officer

2 Minutes of meeting of last Safety committee meeting dated 28/5/18 was read and progress reviewed. ATR submitted as under

SR. NO	Points for action	Action Taken	SUGGESTIONS	REMARK
1	Security CCTV coverage To be installed In gate number 2 and 8,	Action completed		Point closed
2	Drinking water Water testing policy to be made Cleaning of tanks Maintenance of aquaguards not done Provision of drinking water in Casualty	No details of maintenance pgme for Aquaguards Aquaguard sanctioned and procured but not installed -	Water testing policy has been reviewed policy to be submitted to QD Complete action on installation and maintenance of aquaguards	Civil engineer for action Chief CMO to follow up
3	Safety grills Safety grills for upper floors of hospital building under progress, delays reported Hospital furniture painting still not done	Civil engineer has reported that 90% work completed in block 4 MCRI	Monthly Progress report on works be submitted to medical suptd by civil engineer	Review point Civil engineer / maint dept
4	Condemnation policy Stock verification policy Timely disposal of scrap Scrap disposal is not done timely Scrap is piled up in condemnation stores Scrap yard is disorganized	Condemnation done but disposal of scrap not carried out, due to lack of coordination between central stores and time office	Scrap disposal will be carried out once a month on the last Wednesday of every month along with cleaning of the scrap yard Completion report to be submitted to MS	Central stores IC Time office Incharge for action
5	Fire safety Code red drill is to be done six monthly and is overdue	Not done	Security head to plan mock drill	Security head

SR NO	AGENDA POINT	ACTION SUGGESTED	RESPONSIBILITY
1	Fire safety Points <ul style="list-style-type: none"> • Training in use of non ferrous extinguishers is to be planned • Stocking of inflammable chemicals is observed by fire officer in pathology dept • Requirement of fire extinguishers to be made and implemented in new records section 	<ul style="list-style-type: none"> • Security head to organize training as required • Alternate site for stocking may be done after identifying proper location by HOD Pathology 	Security head Mr Ganesh HOD Pathology Fire officer
2	Security Point <p>a) Excessive use of tobacco by MGM staff is observed with tobacco chewing and spitting in staircases and corners of the buildings particularly by CI iv employee</p> <p>b) Use of safety belts on wheel chairs and stretchers is lacking, the newly employed contractual staff are not trained in safety</p> <p>c) railing along staircase from dean office to 2nd floor is incomplete and has been identified as a security risk for falls</p>	<p>It was recommended that all class IV employees be checked by security supervisor/ HR rep for possession of tobacco products, which will be removed and not used while on duty in hospital premises.</p> <p>b) list of new employees and contractual staff be given by HR dept , for induction training, HR along with QD to organize training of new staff</p> <p>c) Staircase railing near dean office needs to be improved by placing additional bars as safety measure which has been discussed and approved earlier.</p>	HR head Security Head HR dept QD Civil maint to initiate works
3	Emergency codes announced (Sep to Dec 2018) Code Red- nil Code Blue -27 Code Violet- 13 Code Pink - 3	Recommended to conduct mock drills for emergency codes Analyse incidents of code violet as a clinical audit , Recommend and issue CAPA to reduce incidents of code violet	Security head for action
	Safety related Incident reports Falls reported Total -3 Near misses 2, Falls due to giddiness, fainting attack dehydration in one case and slippery floors in others	Purchase of anti skit mats has been approved but not yet implemented in all toilets, Action to reduce spillage in toilets and bathrooms also to be implemented details of near misses to be discussed for CAPA	Safety committee/ All concerned Quality cell
5	Water supply Water testing done, reports submitted are satisfactory , Time office incharge submitted that drinking water lines are not separate	lay out of water supply lines to be checked and aquaguards installed as required for drinking water	Civil engineer

Dr P Isaac
Chief Quality Cood

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Dr B K Somani
Medical Suptd



Mahatma Gandhi Mission

MGM MEDICAL COLLEGE HOSPITAL AND MCRI

MGM Campus, N-6, cidco, Aurangabad.

Ref No : MGM/QD /QD 19 -74

Date: 24th June 19

CIRCULAR

Convening of NABH Safety / Disaster Committee Meeting

The meeting of NABH Safety and Disaster Committee is scheduled on **Thursday 27/6/19 at time 12.00 Noon , Venue – Office of Chief Medical Supdt .**

All members of the committee and invited members are requested to attend the meeting along with details of quality key performance indicators and reports pertaining to their areas of responsibility including Conduct of Mock drills , Fire plan, Records of Critical Equipment downtime, Calibration / Maintenance programs , and details of Safety related Adverse/Sentinel events. Electricity, Water supply, water testing reports and training event reports. Facility rounds points will also be discussed.

Minutes of meeting will be recorded and submitted to core committee management with copy to all concerned for action as required.


Dr Jitendra Rathod
Chief Quality Co-ord


Medical Director / Dean

Copy to

Dr B.K Somani, Chairperson Safety Committee
Dr Girish Gadekar, Chairperson Disaster Committee
Copy to: Core committee members - for info please
Col Dr Raghvan – Medical Superintendent
HOD PSM
Security Head
Quality cell reps
Matron
I/C Construction Dept
I/C Electrical Dept
I/C Bio-Maint dept
I/C Time office
I/C Hygiene and Sanitation Dept
Security Supervisor
Fire officer


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MAHATMA GANDHI MISSION HOSPITAL & MCRI
AURANGABAD

Safety Committee Meeting

Date: 27.06.19

Time: 12:00 PM

Venue: CMS Office

Attendance Sheet

SR.NO.	NAME	DEPT	SIGN
1	Dr. Aparna Kalehead	CMS	
2	Dr. B. K. Somani	MS	
3	Col. Dr. Raghwan	M.S.	
4	Dr. Jitendra Rathod	G.D.	
5	Dr. Sureil Dhole	G.D.	
6	Shaikh Abrar	ADMIN - T.O	
7	S.K. Sami	Fire Officer	
8	S. B. Wandhekar	H.K/Shifting	
9	Ganesh Kachhriya	FHS	
10	Mohan Jadhav	GED	
11	Dr. S. V. S. B. Prof. Head	Common medicine	
12	S. M. Karni	Construction	
13	Mr. Rahul Deshmukh	G.D.	
14	Col. R. K. Shewasbaw	Security Head	
15	Mr. B. K. SAVANT	MARON	
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24			



MGM'S MEDICAL COLLEGE HOSPITAL & MCRI AURANGABAD

N-6, Cidco Aurangabad Ph No 0240-6601100

Ref No: MGM/QD /19-

Date: 28th June 2019

Minutes of Meeting – Safety Committee (Maintenance Committee) June 2019

The Safety Committee meeting for the last quarter was held on 27th June 19 at 12.30 noon in the office of The Medical Superintendent. The meeting was chaired by Dr B K Somani M.S and attended by the following members:

i) Dr. B.K. Somani	-	MS
ii) Dr H R Raghavan	-	MS
iii) Col Shrivastava	-	Security Head
iv) Dr. Jitendra Rathod	-	Chief Quality Co ord
v) Mr Rahul Deshmukh	-	Quality Co ord
vi) Dr Sunil Dorle	-	Administrator
vii) Mr Mohan Jadhav	-	Bio Med Engineer
viii) Mr Kasif	-	Civil Enginner
ix) Mr Abrar Shaikh	-	Time Office
x) Dr Mrs Salve S B	-	HOD PSM
xi) Mr Ganesh Kudriya	-	Safety Officer
xii) Mr B K Sawant	-	Nursing suptd
xiii) Mr Wandekar	-	Sanitary inspector
xiv) Mr S K Sami	-	Fire safety officer

Action taken report of meeting conducted at last quarter

SR. NO	Points for action	Action Taken	REMARK
1	Drinking water: a) Water testing policy to be made b) Maintenance of aquaguards not done c) Provision of drinking water in Casualty d) Cleaning of overhead tank	Drinking water policy is amended for weekly cleaning of water cooler along with check list at each cooler location. Responsibility is given to House Keeping supervisor for cleaning, monitoring and recording.	Action Completed Partially FCR will follow
2	Safety grills Safety grills for upper floors of hospital building under progress, delays reported	80% of safety grill work is completed remaining 20 % will be completed within one month time as reported by Construction Engineer (Mr. Kasif)	Action Partially Completed


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		including patient transportation with wheel chair and stretchers. House keeping Supervisors said that many wheel chairs and stretchers safety belts are not functioning. So it was decided that requirement for the safety belt shall be analyzed and they will be replaced as per the requirement	General Administrator and House keeping Supervisor (2 weeks)
	c) Railing along staircase from dean office to 2 nd floor is incomplete and has been identified as a security risk for falls	Action is not done	Civil Engineer is instructed to complete the action within 15 days


Agenda Points

Sr. No	Agenda Points	Action Suggested	Responsibility
1	Down time of the Dr Lift and functioning of other lifts: It was observed that Dr lifts are repeatedly not working as it is down from the 5th June 19 (due to non availability of bearing)	Issues of non availability of lift will be resolved within 15 days (As separate meetings was already conducted)	Medical Superintendent Electrical Department
2	Fire Drill / Fire Panel Training: Last fire drill was conducted on Feb 2019 There are two types of fire panel (Old & New) are existing. Administrative staff and security guards are un aware about functioning and use of fire panel	Fire drill to be planed in month of July-August 19 Training on functioning and use of fire panel to be given to all administrators and security guards. Map of Fire Zone to be displayed at each panel location	Security Head Safety Officer & Fire Officer (15 Days)
3	Incidences of Fall: Total 6 incidences of fall from Feb to May 19 out of this 3 incidences occurred in washroom	It was decided to place antiskid mat for washroom's but it is not found to be cost effective so it is decided to place doormat of appropriate size in the washroom where antiskid tiles are not available (As pilot project it is decided to place a mat in two washrooms of orthopedic wards)	Safety Officer General Administrator

4	Casualty Security Issues : It was observed that security guards at causality are not appropriate in number as well as they are incompetent for handling heavy traffic at casualty	Additional competent security guards are need be deployed as per the work load. One security supervisor to be posted in the casualty for night hours.	Security Head
5	Scrap Yard : As existing scrap yard is converted to Yoga Centre there is requirement of a new scrap yard	It is decided to identify and suggest appropriate location for scrap yard which will be further taken up with the management	Medical Superintendent
6	Water Testing : It was observed from water testing report of previous month that water is contaminated with e-coli.	It is decided to review entire system of collection , storage , distribution of water and procedure of collecting the sample from different location under the guidance of Dr Raghavan	Medical Superintendent & Sanitary Inspector
7	Oxygen Cylinder ; Oxygen Cylinder empty and filled are stored at inappropriate place and location.	It is decided to take management approval of new location identified for storing of oxygen cylinder (In front of time office in old parking lobby near old main entrance gate)	Bio Medical Engineering General Administrator For follow up
	Drainage Line Cleaning : Pre Monsoon cleaning is done by construction department but there is no procedure for regular drainage line cleaning.	It is suggested to appoint agency for routine drainage line cleaning (this will be taken for management review and approval along with other available options such as in house cleaning)	General Administrator
9	PA System : Existing PA system mike was sent for repair and stand by hand mike was provided. This leads to unavailability of announcement system at ground floor and basement	Issue is discussed with representative of vendor and he replied that original mike will be replaced within 8 to 10 days.	Electrical Dept for Follow up
10	CCTV Surveillance : There is no dedicated full time department for CCTV surveillance	It is recommended that to have full time dedicated surveillance room (will be taken for management review) IT department should give detail report of number of existing cameras and functioning cameras & reason for not functioning	Security Head IT Department


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11	Safety Grill : At the 7 th Floor ICU waiting Hall.	It is decided to fix safety grill at 7 th Floor ICU waiting hall near common washroom	Construction Dept
12	Any Other : Security Head Col Shrivastava identified that there is no safety mat at UPS room of radiology department	It has been advised that safety officer and electrical engineer collectively survey the requirement of safety mat and present the report	Safety Officer Electrical Dept (15 Days)


Chief Quality Co ord


Medical Superintendent

Copy To:

Core Committee

Maintenance Departments

HR Dept

HOD PSM Dept

IT Department

Security Head

Construction Dept

Bio Maintenance

Safety Officer

Fire Officer

General Administrator

Hospital Sanitation Dept


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NAVI MUMBAI- 410 209

MGM/MCH/QD 18 - 390

CIRCULAR

Quality Dept
Dated 25/8/18

Convening of NABH Safety / Disaster Committee meeting June / July 2018

- 1 The meeting of NABH Safety and Disaster Committee for month of May to July 2018 will be held on **Tuesday 28th August 2018 at time 12.30 pm , Venue – Office of Chief Medical Supdt .**
- 2 Kindly convene meeting as per agenda given. All members of the committee and invited members are requested to attend the meeting along with details of quality key performance indicators and reports pertaining to their areas of responsibility including the following
 - Conduct of Mock drills , Fire plan,
 - Records of Critical Equipment downtime, Calibration / Maintenance programs ,
 - Details of Safety related Adverse/Sentinel events.
 - Electricity, Water supply, water testing reports
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- 3 Facility rounds points will also be discussed
- 4 Minutes of meeting will be recorded and submitted to core committee management with copy to all concerned for action as required.


Dr P Isaac
Chief Quality Co-ord


Medical Director / Dean

Copy to

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Dr Girish Gadekar, Chairperson Disaster Committee
Copy to: Core committee members -for info pl.
HOD PSM
Security Head
Chief CMO
Quality cell reps
Matron
I/C Construction Dept
I/C Electrical Dept
I/C Bio-maint dept
I/C Time office
I/C Hygiene and Sanitation Dept
Security Supervisor
Fire officer


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MAHATMA GANDHI MISSION HOSPITAL & MCRI
AURANGABAD

Safety Committee Meeting

DATE: 28/08/2018

TIME: 12.30 PM

VENUE: CMS OFFICE

Attendance Sheet

SR.NO.	NAME	DEPT	SIGN
1	Dr. B.K. Somani	M.S.	
2	Dr. H.V. Mudaliyar	DY M.S.	
3	Dr. P. Isaac	C.Q.D.	
4	Dr. ^{RK} Col. Shrivastava	Security Head	
5	Dr. Salve S.B. Prof & Head	Comm Med	
6	Mr. B.K. SAVANT	Nursing	
7	Mr. B.S. Wagh	Security Officer	
8	Mr. M.S. Jadhav	Bio. Engg dept	
9	S.K. Sami	I/O	
10	Shital K. Sawant	construction (Electrical dept)	
11	S.M. Keshav	construction	
12	Dr. Sunil Dorle	Hosp. Admin	
13	Wandhekar S.B.	House-keeping	
14	Bawaskar B.N.	const. Dept	
15	Ganesh Kudrige	FMS	
16			
17			
18			
19			
20			

FMS 08/10/18

MAHATMA GANDHI MISSION HOSPITAL AND MCRI
Aurangabad

MGM/QD /18-

30/8/18

Minutes of Meeting – Safety Committee (Maintenance Committee) Aug 2018

1 The safety Committee meeting for month of June, July 2018 was held on 28/8/ 2018 at 12.30 Noon in office of CMS . The meeting was chaired by Dr B K Somani Medical Superintendent and attended by following members.

i) Dr. B.K. Somani	-	MS
ii) Dr Mrs Mudaliar	-	Dy MS
iii) Dr. P. Isaac	-	Chief Quality Co ord
iv) Dr Mrs Shobha Salve	-	Prof PSM
v) Col RK Shrivastava	-	Security Manager
vi) Rahul Deshmukh	-	QD
vii) Mr Mohan Jadhav	-	Bio Med Engineer
viii) Mr kasif	-	Civil engineer
ix) Mr Jadhav	-	electrical engineer
x) Mr Patil SB	-	Time Office
xi) Mr Wandekar	-	Sanitary inspector
xii) Mr S K Sami	-	Fire safety officer

2 Minutes of meeting of last Safety committee meeting dated 28/5/18 was read and progress reviewed. ATR submitted as under

SR. NO	Points for action	Action Taken	SUGGESTIONS	REMARK
1	Security CCTV coverage To be installed In gate number 2 and 8,	Still not done Under progress as complete CCTV system is being overhauled.	Security Officer/Mr Rajesh Bhoyar to follow up and Fwd progress report	Review point
2	Drinking water Water testing policy to be made Cleaning of tanks Maintenance of aquaguards not done Provision of drinking water in Casualty	Water testing policy has been reviewed No details of maintenance pgme for Aquaguards Aquaguard sanctioned and procured but not installed	Dr S Salve of PSM Dept has asked for water supply layout map of the hospital CMO to Initiate action to install water filter by civ engineer	Civil engineer for action Chief CMO to follow up
3	Safety grills Safety grills for upper floors of hospital building under progress, delays reported Hospital furniture painting still not done	Civ Maint engineer has confirmed that design has been approved and work will take approx 1 month per block, work will be completed in 4-5 months	Monthly Progress report on works be submitted to medical suptd by civil engineer	Review point Civil engineer /maint dept
4	Back up support for Liquid O2 plant approved but not installed	Back up support completed and installed	-	Point closed
5	Sanitary pad dispenser available but not in use	Sanitary pad dispenser is in use, ICN is checking and refilling the pads in all locations of hospital as required	-	Point closed

6	Condemnation policy Stock verification policy Timely disposal of scrap Scrap disposal is not done timely Scrap is piled up in condemnation stores Scrap yard is disorganized	Condemnation done but disposal of scrap not carried out, due to lack of coordination between central stores and time office	Scrap disposal will be carried out once a week on every Friday, Scrap dealer will be informed accordingly and Time office will coordinate with central stores and arrange adequate manpower	Central stores IC Time office Incharge for action
7	Points Security Officer Unauthorized persons are still supplying meals to resident doctors Dining area of resident doctors is dirty without proper furniture or supervision	Recommended to have nominated persons with delegated responsibilities of food member and Mess secretary from the resident doctors quarters to ensure proper supply of tasty hygienic hot meals in the dining hall mess for resident doctors	Time office to check cleanliness and furniture requirements for resident doctors dining hall Dr Dinesh Rao to coordinate PG Resident doctor leaders for proper catering services	MS Time office Dr Dinesh Rao Adm Officer for action

3 Agenda for meeting covered points as under

SR NO	AGENDA POINT	ACTION SUGGESTED	RESPONSIBILITY
1	Fire safety Points <ul style="list-style-type: none"> Fire sensors were not working during fire drill, Checking of fire sensors is to be done under maintenance program Code red drill is to be done six monthly and is planned for next month Training in use of non ferrous extinguishers is to be planned Stocking of inflammable chemicals is observed by fire officer in pathology dept 	<ul style="list-style-type: none"> Mr Ganesh has confirmed that fire sensor smoke detectors have been checked and are all working except in four locations, work, action in hand with service providers will be completed in 3 months Security head to plan mock drill, code red and organize training as required Alternate site for stocking may be done after identifying proper location by HOD Pathology 	Civ engineer Mr Ganesh Security head HOD Pathology Fire officer
2	Security Points Requirement of visitors passes is submitted by security Head Excessive use of tobacco by MGM staff is observed with tobacco chewing and spitting in staircases and corners of the buildings particularly by CI iv employee Security officer reported that much scrap construction material of civ maint dept is lying near gate no 1	Laminated visitors passes is to be made by Yashwant Graphics after approval, temporary passes be issued till permanent passes are made available Security Head Col Shrivastava has recommended that all class IV employees be checked by security supervisor/ HR rep for possession of tobacco products, which will be removed and not used while on duty in hospital premises. Construction dept head to arrange removal of condemn material within 8 to 10 days	Security Officer HR head Security Head Construction dept incharge for action


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3	Repair of wheel chairs Reported that repair of wheel chairs is not organized timely	It was decided that requirement for wheel chair spares including wheels be projected by Ravi of Maint dept and procured by Bio Maint dept who are responsible for repairs of wheel chairs Recommended that only that inspection for quality control also be done by Maint engineer	Bio Maint Engineer
4	Safety related Incident reports Falls reported Total -4 Near misses 2, Falls due to giddiness, fainting attack dehydration in one case and slippery floors in others Running Ceiling fan fell down in plastic surgery ward, No one injured Electrical engineer submitted that preventive maintenance electrical has been done	Purchase of anti skit mats has been approved but not yet implemented in all toilets/ Action to reduce spillage in toilets and bathrooms also to be implemented Electrical dept to submit preventive maintenance schedule and progress report to Med suptd	Safety committee/ All concerned Maintenance civil/electrical
	CODE VIOLET Incident of Code violet reported in MCRI OPD following death of patient after relatives complained about excessive billing	Proactive follow up of pending hospital bills on credit , and treating consultant to be involved in counseling process Implement Emergency code Violet and include in training program for preventive action	Security head and Quality dept for action

Dr P Isaac

Chief Quality Cood

Dr B K Somani

Medical Suptd

Copy to

Core Committee

All Members

Maintenance Depts

HR Dept

Matron Office

Chief CMO

HOD PSM Dept& HS Dept

Central stores IC


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NAVI MUMBAI- 410 209

MGM/NABH/QD 18/191

CIRCULAR

Quality Dept
Dated 24/2/18

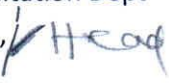
Convening of NABH Safety / Disaster Committee meeting

- 1 With Reference to Dean office letter No MGM/NABH-MR/16-64 dated 10/11/16 regarding NABH Committee meetings. The meeting of NABH Safety and Disaster Committee for month of December 17 to January 2018 will be held on **Tuesday 27/2/18 at time 12 pm , Venue – Office of Medical Supdt .**
- 2 Kindly convene meeting as per agenda given. All members of the committee and invited members are requested to attend the meeting along with details of quality key performance indicators and reports pertaining to their areas of responsibility including Conduct of Mock drills , Fire plan, Records of Critical Equipment downtime, Calibration/ Maintenance programs , and details of Safety related Adverse/Sentinel events. Electricity, Water supply, water testing reports and training event reports.
- 3 Minutes of meeting will be recorded and submitted to core committee management with copy to all concerned for action as required.


Dr P Isaac
Chief Quality Co-ord


Dr. A.G Shroff
Medical Director

Copy to

Dr BK Somani, Chairperson Safety Committee
Dr Girish Gadekar, Chairperson Disaster Committee
Copy to: Core committee members -for info pl.
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I/C Hygiene and Sanitation Dept
Security Supervisor, 
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MAHATMA GANDHI MISSION HOSPITAL AND MCRI
Aurangabad

MGM/QD /18-

07/3/18

Minutes of Meeting – Safety Committee (Maintenance Committee) Nov 17 to Jan 2018

1 The safety Committee meeting for month of Nov 17 to Jan 2018 was held on 28/5/ 2018 at 12.30 Noon in office of CMS . The meeting was chaired by Dr B K Somani Medical Superintendent and attended by following members.

i) Dr A Kakkad	-	CMS
ii) Dr. B.K. Somani	-	MS
iii) Dr. P. Isaac	-	Chief Quality Co ord
iv) Col RK Shrivastava	-	Security Manager
v) Rahul deshमुख	-	QD
vi) Mr Mohan Jadhav	-	Bio Med Engineer
vii) Mr Jadhav	-	electrical engineer
viii) Mr Patil SB	-	Time Office
ix) Mr Sahaji	-	Sanitary inspector
x) Mr S K Sami	-	Fire safety officer

2 Minutes of meeting of last Safety committee meeting dated 12/11/17 was read and progress reviewed. ATR submitted as under

SR. NO	Points for action	Action Taken	SUGGESTIONS	REMARK
1	Policy for pest control to be documented and implemented	policy has been made but problems faced in implementation which is not documented	Feedback by HS dept be given to MED suptd and Quality dept	Closed
3	Security CCTV coverage To be installed In gate number 2 and 8	Not yet done	Security Officer to follow up and Fwd progress report	Review point
4	Fire safety point Requirement of minor fire fighting equipments to be rationalized for ladies hostel	Verbal compliance given	Safety officer to submit completion report	Review point
7	Drinking water Water testing policy to be made Cleaning of tanks Maintenance of aquaguards Provision of drinking water in Casualty	Community medicine rep not present No details of maintenance pgme for Aquaguards	Chief CMO	Point to be Reviewed for Drinking water
8	Maintenance program Maintenance pgme followed for bio maintenance dept , Calibration tracker checked next due is in 2018	Tracker maintained	Follow up action required	Maintenance dept
	Non functional critical equipments be awaiting replacement be removed to maintenance department if possible	Completed	Tagged as unserviceable	Closed

SR NO	AGENDA POINT	ACTION SUGGESTED	RESPONSIBILITY
1	Drinking water <i>Water testing and provision of safe drinking water to be monitored</i> Reports of Water testing by PSM/ and repeat microbiological testing is not submitted to Medical suptd	All water testing reports will be submitted by Civil engineer to medical suptd <i>Bio maintenance engineer to maintain records of maintenance program for water filters</i>	Maintenance Engineer Sanitary Inspector
2	Points submitted by Administrative/ Security Officer Unauthorized persons are supplying meals to resident doctors Safety grills to be installed for windows of upper floors which is a security grill Scrap material is not disposed off timely and is piled up in condemnation stores Scrap yard is disorganized Needle stick injuries are reported in BMW handlers, training of staff required Hospital furniture are rusted and require maintenance Racks placed above patient beds in CCU should be repainted	List of authorized vendors to be made and passes issued for entry avoid unauthorized entry of dabbawallas without passes and use canteen mess and dining hall Civil maintenance engineer to prepare works order with prioritization and financial effect and submit for approval of management Scrap condemn items to be disposed off weekly by central stores incharge Training of waste handlers in safety practices by ICN to be organized Powder coating to be done for IV stands Trolleys bedside lockers etc	Security Officer Civil engineer MRM POINT Central stores IC HR dept to organize trg of BMW handlers Maint dept
3	Fire Safety points Stocking of chemicals in histopathology , chemicals was done by placing on paper files as reported by fire officer Fire mock Drill point Medical gas channels colour coded should be shut during a real fire event however the fire officer and trained personnel are not aware of this procedure	Chemicals to be stocked as per protocols for hazardous materials and MSDS lists be updated Maintenance engineer to train all	HOD pathology Civil engineer Chief security officer and Maintenance engineer

4	Mock Drills Fire Evacuation Drill Code red Mock Drill and fire evacuation drill held on 16 th January 18 along with Code green successfully Observations submitted by security officer Fire sensors were not working Training and sensitization on roles and responsibilities	Security officer and Civ engineer to supervise conduct code Red drill regularly Check functioning of smoke detectors, sprinklers and fire exits Training of staff Fwd details of foldable stretchers/ wheelchairs etc recommended	Security officer Civ Engineer Fire officer
5	Falls reported Number of falls as under including two staff persons , mostly accidental falls, while shifting and giddiness while getting up Side railing not used in paed ward Nov 3 falls and one near miss Dec- 3 falls and one near miss Jan - 1 fall and 2 near miss No sentinel report during the period of report	Compliance of actions recommended by quality dept Safety committee to conduct Facility rounds to identify hazards and risk analysis Action follow up on hazards identified during safety/ facility rounds by Maint dept Vulnerable patients should be kept on beds near duty station for close observation and not left unattended	Safety committee/ All concerned Maintenance civil/electrical Matron to instruct all nursing staff
6	Equipment maintenance and Calibration Programs Electrical maintenance schedule is not observed. the schedule should be presented with details of work done as per schedule Back up support for liquid Oxygen plant with additional 12 Oxygen Jumbo back up cylinders is approved but delay observed in procurement	Update all maintenance programs of civil / electrical maintenance periodically using a tracker system Supply of additional oxygen jumbo cylinders to be followed up by Maintenance dept / Central stored incharge	Maintenance dept heads Civil /Electrical/ BioMedical Bio maint engineer Incharge Central stores for action
7	Sanitary pad dispenser machine Sanitary pad dispenser and pad destroyer machine Installed in ObsGyn ward and some toilets but not in use	Maintenance dept to monitor and follow up on use of machine and plan refill of vending machines in consultation with HOD concerned	Point will be reviewed by safety committee Maintenance dept and HOD concerned


Dr P Isaac
Chief Quality Cood


Dr B K Somani
Medical Suptd

Copy to Core Committee
All Members
Maintenance Depts
HR Dept
Matron Office
Chief CMO
HOD PSM Dept& HS Dept


Dr. Rajesh B. Goel
Registrar
MGM INSTITUTE OF HEALTH SCIENCES
(DEEMED UNIVERSITY u/s 3 of UGC Act, 1956)
NAVI MUMBAI- 410 209

MGM/MCH /QD 18 /332

CIRCULAR

Quality Dept
Dated 28/5/18

Convening of NABH Safety / Disaster Committee meeting

- 1 With Reference to Dean office letter No MGM/NABH-MR/16-64 dated 10/11/16 regarding NABH Committee meetings. The meeting of NABH Safety and Disaster Committee for month of Feb 2018 to April 2018 will be held on **Tuesday 29/5/18 at time 12.30 pm , Venue – Office of Chief Medical Supdt .**
- 2 Kindly convene meeting as per agenda given. All members of the committee and invited members are requested to attend the meeting along with details of quality key performance indicators and reports pertaining to their areas of responsibility including Conduct of Mock drills , Fire plan, Records of Critical Equipment downtime, Calibration / Maintenance programs , and details of Safety related Adverse/Sentinel events. Electricity, Water supply, water testing reports and training event reports.
- 3 Facility rounds points will also be discussed
- 4 Minutes of meeting will be recorded and submitted to core committee management with copy to all concerned for action as required.


Dr P Isaac
Chief Quality Co-ord


Medical Director / Dean

Copy to

Dr BK Somani, Chairperson Safety Committee
Dr Girish Gadekar, Chairperson Disaster Committee
Copy to: Core committee members -for info pl.
HOD PSM
Security Head
Chief CMO
Quality cell reps
Matron
I/C Construction Dept
I/C Electrical Dept
I/C Bio-maint dept
I/C Time office
I/C Hygiene and Sanitation Dept
Security Supervisor
Fire officer


Dr. Rajesh B. Goel
Registrar
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MAHATMA GANDHI MISSION HOSPITAL & MCRI
AURANGABAD

TOPIC: SAFETY/DISASTER COMMITTEE MEETING

DATE: 29/05/2018

TIME: 12.30 AM

VENUE: CMS OFFICE

ATTENDANCE SHEET

SR.NO.	NAME	DEPT	SIGN
1	Dr. B.K. Somani	M.S.	
2	Dr. H.V. Mudaliar	Dy. M.S.	
3	Dr. Col. Shrivastava	Sec. Head.	
4	Dr. P. Isaac	Q.D.	
5	Mr. Shrirang Patil	Time office	
6	Mr. Rahul Deshmukh	Q.D.	
7	Dr. Sgive S.B	Comm M.L.	
8	Dr. H.V. Mr. Bhagwan Wagh	Security	
9	Dr. Qureshi Akmal Akram	CMO Casualty	
10	Mr. B.K. SAVANT	Nursing	
11	Wandhekar S.B.	House Keeping	
12	Kadam S.M.	Housekeeping	
13	B.N. Bawaskar	Const. Dept	
14	P.P. Jagtap	Elect. Construction	
15	M.S. Jadhav	Biomedical Engg.	
16	Ganesh Kudrige	EHS officer	
17	S.M. Kasur	(Cement) Engineer	
18	S.K. Sami	Fire officer	
19			

MAHATMA GANDHI MISSION HOSPITAL AND MCRI
Aurangabad

MGM/QD /18-

31/5/18

Minutes of Meeting – Safety Committee (Maintenance Committee) May 2018

1 The safety Committee meeting for month of Feb to April 2018 was held on 29/5/ 2018 at 12.30 Noon in office of CMS . The meeting was chaired by Dr B K Somani Medical Superintendent and attended by following members.


i) Dr. B.K. Somani	-	MS
ii) Dr Mrs Mudaliar	-	Dy MS
iii) Dr. P. Isaac	-	Chief Quality Co ord
iv) Dr Mrs Shobha Salve	-	Prof PSM
v) Col RK Shrivastava	-	Security Manager
vi) Rahul Deshmukh	-	QD
vii) Mr Mohan Jadhav	-	Bio Med Engineer
viii) Mr kasif	-	Civil engineer
ix) Mr Jadhav	-	electrical engineer
x) Mr Patil SB	-	Time Office
xi) Mr Wandekar	-	Sanitary inspector
xii) Mr S K Sami	-	Fire safety officer


2 Minutes of meeting of last Safety committee meeting dated 12/11/17 was read and progress reviewed. ATR submitted as under

SR. NO	Points for action	Action Taken	SUGGESTIONS	REMARK
1	Security CCTV coverage To be installed In gate number 2 and 8	Under progress as complete CCTV system is being overhauled.	Security Officer to follow up and Fwd progress report	Review point
2	Fire safety point Requirement of minor fire fighting equipments to be rationalized for ladies hostel	compliance given	-	Closed
3	Drinking water Water testing policy to be made Cleaning of tanks Maintenance of aquaguards not done Provision of drinking water in Casualty	Water testing policy to be reviewed No details of maintenance pgme for Aquaguards -	Mr Wandekar to revise water testing policy in consultation with Dr Salve of PSM dept Chief CMO advised to project requirement	Point to be Reviewed Chief CMO to follow up
4	Safety grills for upper floors of hospital building Hospital furniture painting not done	Completed only for Nephrology ward and toilet Maint dept for action	Progress report on works be submitted to medical suptd by civil engineer	Review point Civil engineer /maint dept
5	Back up support for Liquid O2 plant approved but not installed	Under procurement by central stores	Follow up by central stores	Review point
6	Sanitary pad dispenser available but not in use	ICN to monitor use of pads and refill of machines	ICN to give feedback to Med suptd	Review point

SR NO	AGENDA POINT	ACTION SUGGESTED	RESPONSIBILITY
1	Condemnation policy Stock verification policy Timely disposal of scrap Scrap disposal is not done timely Scrap and is piled up in condemnation stores Scrap yard is disorganized <i>Compartment for scrap segregation and disposal</i>	Condemnation to be done quarterly, list of items for condemnation be submitted to DyMS by Bio maint and departments concerned Stock verification be done Half yearly Scrap disposal will be done weekly or earlier as required compartments to be made in C Block scrap yard for segregation and disposal under intimation to Central stores	Maintenance Engineer Sanitary Inspector Time office in charge Central stores incharge for action
2	Points Security Officer Unauthorized persons are still supplying meals to resident doctors Slow progress in Safety grills work for windows of upper floors is observed which is a security risk Hospital furniture are rusted and require maintenance, Painting work not initiated Racks placed above patient beds in CCU should be repaint	Recommended that point be discussed during management review meeting However security guard to check and record entry of visitors in resident doctor quarters. Identification cards be given to authorized visitors. Recommended that a delegated person to perform duties of warden of Male resident doctors hostel as existing for ladies hostel Civil maintenance engineer to prioritize works and give progress report to Medical suptd Initiate works and give progress report to Med Suptd	Security Officer MRM POINT Civil engineer Maint dept
3	Fire Safety points Stocking of chemicals in histopathology, chemicals was done by placing on paper files as reported by fire officer No feedback given on progress Testing of Fire sensors Fire sensors were not working during fire drill testing of fire sensors not done	Fire officer to report to Security head on fire hazards observed Safety officer Mr Ganesh to follow up with the service providers for testing of smoke detector sensors and reporting to Electrical engineer and Security head for action including Training and sensitization on roles and responsibilities	Fire officer Mr Ganesh Safety officer Security officer Civ Engineer Fire officer
4	Water testing Water testing policy to be prepared under PSM dept and water tank cleaning reports to be followed by civ engineer and Security head	Issue copy of water testing policy and tank cleaning policy to civ maintenance and security head for followup action	Mr Wandekar Sanitary inspector

5	Incident reports Falls reported Feb 3 March 2 April 2 Near misses 2, Feb 1 and March 1, mostly accidental falls due to slippery floors and one due to giddiness while awaiting sonography One sentinel report during the period of report sustained fracture femur due to fall in bathroom. Antiskid mats not placed in all toilets Death of one patient due to suicidal jump from fifth floor Nephrology ward toilet	Vulnerable patients should be kept on beds near duty station for close observation and not left unattended Purchase of anti skit mats has been approved but not yet implemented in all toilets, Action to reduce spillage in toilets and bathrooms also to be implemented Patients should be prioritised for investigation. Safety grill work for windows of upper floors to be completed on priority.	Safety committee/ All concerned Matron to instruct all nursing staff Maintenance civil/electrical Civil maint for action
6	Implementation of CODE VIOLET Incident of manhandling of a doctor by violent relatives of a patient in Obs Gyn ICU discussed	Implementation of Emergency code Violet is recommended Policy to be made and included in training program	Security head and Quality dept for action


Dr P Isaac
Chief Quality Cood


Dr B K Somani
Medical Suptd

Copy to

Core Committee
All Members
Maintenance Depts
HR Dept
Matron Office
Chief CMO
HOD PSM Dept& HS Dept
Central stores IC


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