



सत्यमेव जयते

भारत सरकार
Government of India
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
Ministry of Health & Family Welfare
वर्धमान महावीर मेडिकल कॉलेज एवं
सफदरजंग अस्पताल, नई दिल्ली
Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi



No. NABH/Meetings/QC/2020/

Dated: 06/05/ 2020

Minutes of Meeting

A meeting of the all Departments of the Hospital was held on 06/03/2020 at 2:30 PM to discuss departmental preparedness for NABH Pre-entry level certification in MS office Committee room, (V Floor).

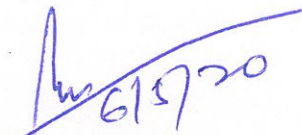
At the outset, all the Departmental representatives were welcomed by Medical superintendent and initiated discussions.

1. The Officer In-charge quality cell briefed the attendees on Hospital readiness for Entry level application to NABH and progress made to date and briefed that the Hospital will submit the documents to NABH in April 2020 for Pre Entry Level desktop audit. It was also stressed upon HODs/Nodal Officers for fulfilment of requirements on priority for smooth NABH assessment for entry level certification.
2. Then all designated nodal officers/ HODs of each department were requested to present the progress report of their department on power point (4-5 slides) regarding NABH Pre-entry preparedness.
3. The format of nursing initial assessment form, discharge summary and consent form are finalised and pilot study was done in few areas of the hospital.
4. The list of LASA, High risk and emergency drugs are finalised and implemented at few areas of the hospital.
5. The training of various dept. regarding orientation of NABH standards has been initiated by the Quality cell.

6. Safdarjung website, a new NABH page will be developed and all the hospital manuals, common formats and activities related to NABH will be put under NABH heading.
7. The following department presented the progress report of their department towards NABH: Paediatrics, Radiology, Ophthalmology, Obs & Gynec, Burn & Plastic and oncology.
8. The code pink is lacking in both paediatrics and Obs & Gynec dept and in a process to develop it.
9. Radiology- Critical alerts are defined and monitored now. TAT is yet to be defined and monitored. The lead doors are procured. Its supply and installation is pending.
10. Ophthalmology- Adverse drug reaction is not reported. There is need of development of quality team in the dept for smooth functioning.
11. Endocrinology and Burn & Plastic - KPIs are yet to be identified and monitored.
12. The fire training and mock drill is required for all. All depts were requested to contact CPWD (Electrical) and maintain record of the same.

The meeting concluded with thanks to chair and all participants.

This issues with approval of Medical Superintendent.


(Dr. K C Tamaria)
Officer I/C, Quality Cell

Copy to for information and needful:

1. Principal, VMMC & Safdarjung Hospital.
2. All Addl MS.
3. All HODs
4. Officer In-Charges stores
(Medcal/Surgical/M&E/Sanitation/Security/NEB/SSB/MRD).
5. PS to MS
6. Officer I/C, Server Room with request to create a page on Hospital website and upload the minutes.
7. Guard File.
8. Executive Engineer (Electrical Division), CPWD.