Internal Quality Assurance Cell
Sanjay Gandhi Post Graduate Institute of Medical Sciences
Raebareli Road, Lucknow - U. P.

MINUTES OF MEETING

Sub.: IQAC meeting regarding strengthening of Continuous quality enhancement across administrative, clinical, and support services, reg.

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened on 17-02-2025 at Board Room, 3rd Floor, Administrative Block, to identify overall institutional needs, wherein the Committee emphasized the enhancement of regulatory compliance, operational efficiency, and overall quality standards across hospital services.

Following members/officials participated in the meeting:

1. Dr. R. Harsvardhan, Prof. Incharge, Nodal Officer/ Head IQAC
2. Dr. Saurabh Singh, Asst. Prof., Hospital Administration
3. Dr. Gaurav Jha, SR In-Charge, AB-PMJAY, Department fo Hospital Administration
4. Dr. Anmol Jain, SR In-Charge, BMW Cell, Department fo Hospital Administration
5. Dr. Kris Agarwal, SR In-Charge, HICC, Department of Hospital Administration
6. Dr. Mahwish Suhaib, JR (NA) In-charge BMW, Hospital Administration
7. Ms. Juin Dutta Ghosh, SNO, Quality Cell, Department of Hospital Administration
8. Mr. Dhikhil C. D., SNO, Department of Hospital Administration & In-charge, BMWM Plant

Objective of the meeting was:

1. To identify the need for strengthening Bio-Medical Waste segregation-at-source practices through systematic, ward-level training of nursing and housekeeping staff.

The following were the salient points discussed:

SL. No.	Need Identified	Discussion / Rationale	Plan of Action
1.	In-Service Training on Hand Hygiene and BMW Management	Strict adherence to infection control guidelines and proper waste management significantly reduces hospital-acquired infections, requiring regular training for nursing staff	Organize an in-service training program in EMRTC Building, for nursing officers posted in EMRTC, covering hand hygiene demonstrations, BMW overviews, and interactive sessions
2.	Resolution of Pending AB-PMJAY Claim Queries	A high volume of pending claim queries under the Ayushman Bharat–Pradhan Mantri Jan Arogya Yojana requires systematic tracking and time-bound closure to ensure smooth scheme execution	Designate NA-JR to resolve all pending Uttar Pradesh queries as soon as possible, under the direct supervision and monitoring of SR In-Charge, AB-PMJAY Cell

3.	Streamlining Death Certification and Registration	Delays in certifying deaths and issuing death slips lead to unnecessary distress for bereaved families, necessitating strict compliance with statutory amendment acts	Instruct all duty doctors in ICUs, wards, and the emergency department to immediately certify deaths and issue slips per the Registration of Births and Deaths (Amendment) Act, 2023, and convene a coordination meeting to further improve compliance
4.	Civil Registration System (CRS) Process Improvement	Deliberating on existing challenges in birth and death registration is necessary to streamline documentation, ensure timely reporting, and improve statutory compliance	Convene a formal review meeting under the stewardship of Dr. R. Harsvardhan in Department of Hospital Administration, with designated resident and administrative stakeholders
5.	Milk Booth Services and Contractual Compliance	Managing institutional utility services such as milk booths inside the premises requires proper execution of service provider agreements and financial receipt records	Review and coordinate contractual execution terms under agreement no. 952/2024-25 and related advance payment receipts with the Office of Milk Producers Cooperative Union Limited (Parag) through the Joint Director (Admn) / In-charge Contract Cell
6.	Clinical Risk Mitigation and Infection Surveillance	Continuous surveillance and multi-departmental cooperation are vital for monitoring infection control protocols and maintaining high standards of clinical safety	Engage designated surveillance committee members, infection control nurses (ICNs), and resident in-charges to execute practical demonstrations and maintain rigorous documentation during training and clinical audits
7.	Administrative Coordination and Statutory Record Maintenance	Efficient hospital administration relies on prompt communication, inter-sectoral coordination, and rigorous adherence to official memorandums and government directives	Direct all departmental heads, nodal officers, and dispatch sections to route communications through proper guard files, ensure compliance with time-bound targets, and maintain transparent reporting lines across all medical units

The meeting ended with a vote of thanks to all attendees.

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Dr. R. Harsvardhan, Nodal Officer
Department of Hospital Administration

Dr. Saurabh Singh, Asst. Prof.,
Hospital Administration

Dr. Gaurav Jha, SR In-Charge, AB-PMJAY

Dr. Anmol Jain, SR In-Charge, BMW Cell

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MINUTES OF MEETING

Sub.: IQAC meeting regarding strengthening of Continuous quality enhancement across administrative, clinical, and support services, reg.

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened on 20-11-2024 at Board Room, 3rd Floor, Administrative Block, to identify overall institutional needs, wherein the Committee emphasized the enhancement of regulatory compliance, operational efficiency, and overall quality standards across hospital services.

Following members/officials participated in the meeting:

1. Dr. R. Harsvardhan, Prof. Incharge, Nodal Officer/ Head IQAC
2. Dr. Saurabh Singh, Asst. Prof., Hospital Administration
3. Mr. M.N. Shukla, J.E., Mechanical, SGPGIMS
4. Dr. Kris Agarwal, SR In-Charge, NABH, Department of Hospital Administration
5. Dr. Harshit Verma, NA-JR In-Charge, Apex Trauma Centre
6. Dr. Amarjeet Mitra, NA-JR In-Charge, Apex Trauma Centre
7. Ms. Juin Dutta Ghosh, SNO, Quality Cell, Department of Hospital Administration

Objective of the meeting was:

1. To identify the need for strengthening Bio-Medical Waste segregation-at-source practices through systematic, ward-level training of nursing and housekeeping staff.

The following were the salient points discussed:

SL. No.	Need Identified	Discussion / Rationale	Plan of Action
1.	NAAC Criterion 6 Review & AQAR Submission	The preparation and timely submission of the Criterion 6 Annual Quality Assurance Report (AQAR) for the academic year July 2024 to June 2025 require dedicated task delegation, orientation, and review mechanisms.	Convene a meeting of the NAAC Task Force Criterion 6 on June 12, 2025 at 04:00 PM in the Seminar Room, Department of Hospital Administration, to define task elements and review support required
2.	Commissioning of Integrated Emergency Control Room (IECR)	Professional and streamlined operational management of clinical and non-clinical concerns in emergency medicine requires an integrated control center under joint supervision.	Establish the Integrated Emergency Control Room (IECR), manned by duty officers from the Department of Hospital Administration and Emergency Medicine for inter-sectoral coordination

3.	Gap Assessment for NABH Pre-Entry Certification at Apex Trauma Centre (ATC)	Achieving NABH Pre-Entry Level Certification for the Apex Trauma Centre requires systematic evaluation of fire compliance, legal requirements, records, SOPs, and departmental infrastructure through dedicated teams.	Deploy designated teams to execute a structured 30-day gap assessment across all ATC zones and submit weekly progress reports
4.	Emergency Contact Signages in MRA Hostels	An institutional NAAC Committee inspection conducted revealed a lack of emergency contact number signages in the MRA Complex hostels, which is essential for urgent student/resident safety	Issue a priority request to the Mechanical Engineering Department (Mr. R.D. Sharma and Mr. M.N. Shukla) to design, prepare, and display clear emergency contact signages (civil, electrical, fire, security, plumber) across all MRA hostel areas
5.	Data Compilation for FICCI Healthcare Excellence Awards	SGPGIMS is registered for the prestigious FICCI Healthcare Excellence Awards 2025, which recognize operational efficiency and healthcare delivery, necessitating urgent collection of comparative operational parameters	Request Mr. Surrender Singh, SMSSO, to compile and submit hard and soft copy data (bed counts, critical care stats, operation theaters, and overall/critical occupancy percentages for 2023–24 and 2024–25) on priority
6.	Emergency Duty Roster & Operational Audit Framework	To ensure the newly commissioned IECR operates effectively, a structured duty mechanism and periodic internal evaluation are necessary for continuous service improvement	Assign PG-HAs, NAJRs, and Senior Residents as Duty Officers, establish a clear reporting matrix, and mandate a quarterly internal audit of IECR activities
7.	Structural Zoning & Checklist Execution for Trauma Quality Standards	Comprehensive quality evaluation under NABH standards requires explicit focus on objective elements, architectural compliance, training records, and committee functions across specialized zones.	Mandate that all teams thoroughly review checklist points covering emergency departments, ICUs, utility plants, biomedical waste management, and administrative blocks, ensuring no area remains unassessed.

The meeting ended with a vote of thanks to all attendees.

Dr. R. Harsvardhan, Nodal Officer
Department of Hospital Administration

Dr. Saurabh Singh, Asst. Prof.,
Hospital Administration

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MINUTES OF MEETING

Sub.: IQAC meeting regarding strengthening of Continuous quality enhancement across administrative, clinical, and support services, reg.

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened on 23-08-2024 at Board Room, 3rd Floor, Administrative Block, to identify overall institutional needs, wherein the Committee emphasized the enhancement of regulatory compliance, operational efficiency, and overall quality standards across hospital services.

Following members/officials participated in the meeting:

1. Dr. R. Harsvardhan, Prof. Incharge, Nodal Officer/ Head IQAC
2. Dr. Gaurav K. Jha, SR In-charge, ADR Cell, Department of Hospital Administration
3. Dr. Kris Agarwal, SR In-Charge, NABH, Department of Hospital Administration
4. Ms. Juin Dutta Ghosh, SNO, Quality Cell, Department of Hospital Administration
5. Mr. Dhikhil C. D., SNO, Department of Hospital Administration
6. Mr. Manu Thambi, SNO, Department of Hospital Administration
7. Mr. D.K. Pandey, ASO, SGPGIMS

Objective of the meeting was:

1. To identify the need for strengthening Bio-Medical Waste segregation-at-source practices through systematic, ward-level training of nursing and housekeeping staff.

The following were the salient points discussed:

SL. No.	Need Identified	Discussion / Rationale	Plan of Action
1.	Legal Compliance & Security Signages	Incidents of violence against medical personnel and property damage compromise safety and institutional functioning. The UP Medicare Service Persons Act, 2013 provides legal safeguards that require campus-wide visibility	Install standard warning signages across key areas: New OPD, PMSSY Block, EMRTC, and Old Building & Ward Block
2.	Pharmacovigilance Review	Regular causality assessment of Adverse Drug Reactions (ADRs) reported to the AMC is mandatory to ensure ongoing clinical safety and pharmacovigilance	Convene the AMC Causality Assessment meeting at the 4th Floor Seminar Hall, Dept. of Hospital Administration
3.	AB-PMJAY Operational Review	Addressing operational bottlenecks and reviewing service delivery under Ayushman Bharat–Pradhan	Convene a formal review meeting involving key administrative officers, district

		Mantri Jan Arogya Yojana is critical for smooth patient coverage.	coordinators, insurance agency representatives, and medical coordinators to deliberate upon operational issues and review overall scheme execution.
4.	NABH Readiness for Apex Trauma Centre	Achieving NABH Pre-Entry Level Certification for the Apex Trauma Centre requires systematic evaluation and addressing quality standards and operational gaps.	Convene an NABH review meeting for ATC on June 25, 2025 at 10:00 AM in the chamber of Assistant Professor, Department of Hospital Administration
5.	Clinical & Inpatient Quality Gap Closure (Team A)	Quality audits identified specific clinical gaps in OPD, Emergency, Minor OT, Radiology, Wards, and ICUs requiring direct administrative oversight.	Deploy Team A (Dr. Anitta Jose Ellinkel & Dr. Kritika Singh) to oversee gap closure in the OPD, Emergency Dept., Minor OT, Radiology, Plaster Room, MRD, Security Control Room, HRF, and assigned inpatient wards/ICUs.
6.	Ancillary & Support Services Gap Closure	Non-clinical support infrastructure including CSSD, laundry, fire safety, and electrical installations requires targeted operational standardization.	Deploy Team B (Dr. Mahwish Suhaib & Dr. Rounak Pathak) to address gaps in CSSD, Laundry, CCTV Room, Fire Control Room, Parking, Electrical Dept., Gas Manifold, Lifts, and Administrative Block.
7.	Patient Amenities & Transport Gap Closure	Public interfaces, transport/ambulance cells, and environmental safety management require dedicated monitoring for total NABH compliance	Deploy to cover Vehicle Cell/Ambulances, Patient Relative Waiting Area, BMW Management Plant, Mortuary, Registration/Cash Counters, and Canteen.

The meeting ended with a vote of thanks to all attendees.

Dr. R. Harsvardhan
Prof. Incharge, Nodal Officer/ Head IQAC

Dr. Gaurav K. Jha, SR In-charge, ADR Cell, Department of Hospital Administration

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Mr. D.K. Pandey, ASO