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 Bio-Medical Waste Management through segregation-at-source training, reg.

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened on 22-08-2025 at Board Room, 3rd Floor, Administrative Block, to identify quality and safety-related needs for strengthening Bio-Medical Waste (BMW) management practices through effective segregation of waste at the source. The Committee emphasized the need for improved compliance, staff awareness, reduction of environmental hazards and more efficient hospital waste management.

Following members/officials participated in the meeting:

1. Dr. R. Harsvardhan, Prof. Incharge, Nodal Officer/ Head IQAC
2. Mrs. Manorama Charan, CNO
3. Dr. Anmol Jain, SR In-charge, BMWM Cell, Department of Hospital Administration
4. Dr. Mahwish Suhaib, In-charge BMW Training & JR (NA), Hospital Administration
5. Mr. Dhikhil C. D., SNO, Department of Hospital Administration & In-charge, BMWM Plants
6. Mr. Manu Thambi, SNO, Department of Hospital Administration & In-charge, Biomedical Waste Recycling Activities
7. Mr. Om Prakash, Senior Sanitation Officer
8. Mr. S. K. Padam, Sanitation Officer

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.	**Need to strengthen segregation of Bio-Medical Waste at the point of generation**	The IQAC identified source segregation as a critical component of effective BMW management. Inadequate segregation at the point of generation can reduce efficiency of downstream waste handling and may increase occupational and environmental hazards.	A structured programme for on-site training on BMW segregation-at-source may be initiated for nursing and housekeeping staff in different wards and clinical areas.
2.	**Need for uniform practices across clinical areas**	The Committee discussed the need for standardized BMW segregation practices across departments and wards so that staff follow a common	A uniform training approach and standardized educational content may be developed and delivered by the BMW

		process irrespective of the clinical area.	Management Cell across departments, with department-wise scheduling to ensure coverage.
3.	**Need to improve staff awareness, competency and compliance**	The IQAC considered that continuous awareness and practical orientation of frontline staff are necessary to improve adherence to BMW segregation procedures and to sustain compliance in routine patient-care settings.	On-site training sessions may specifically target nursing and housekeeping staff, with emphasis on practical segregation practices, common errors and correct handling at the source.
4.	**Need to minimize environmental and occupational hazards associated with improper BMW segregation**	The Committee emphasized that proper segregation can help minimize environmental hazards and improve safety of healthcare workers, sanitation personnel and others involved in waste handling.	Training may emphasize the safety implications of improper segregation and the importance of correct waste disposal practices as part of occupational safety and infection-prevention measures.
5.	**Need for planned, ward-wise and time-bound implementation with minimal disruption to patient care**	The IQAC identified the need to conduct training in an organized manner without adversely affecting patient-care services. A planned schedule would facilitate systematic coverage of wards and enable monitoring of completion.	A department/ward-wise training roster may be prepared in coordination with respective departments, with sessions scheduled on specific dates and conducted with minimal disruption to patient-care activities.
6.	**Need for monitoring and sustained improvement in BMW segregation practices**	The Committee noted that one-time sensitization may not be sufficient and that compliance should be reinforced through follow-up and monitoring by the BMW Management Cell and concerned departmental personnel.	The BMW Management Cell may maintain records of training conducted and periodically review segregation practices in the concerned areas. Identified gaps may be communicated to departments for corrective action and reinforcement training where required.

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

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

Mrs. Manorama Charan, CNO

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

Dr. Anmol Jain,
SR In-charge, BMWM Cell,
Department of Hospital Administration

Dr. Mahwish Suhaib
In-charge BMW Training & JR (NA),
Hospital Administration

Mr. Dhikhil C. D., SNO,
Department of Hospital Administration &
In-charge, BMWM Plants

Mr. Manu Thambi, SNO,
Department of Hospital Administration &
In-charge, Biomedical Waste
Recycling Activities

Mr. Om Prakash,
Senior Sanitation Officer

Mr. S.K. Padam,
Sanitation Officer

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

MINUTES OF MEETING

Sub.: IQAC meeting regarding Digitalization of OPD Services at Apex Trauma Centre, reg.

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened under the chairpersonship of Prof. R. Harsvardhan, Chairman, IQAC alongwith Chief, ATC on 05.04.2026 at 11:00 AM to deliberate upon measures for strengthening the quality, efficiency and patient-centric delivery of OPD services through digitalization.

Following members participated in the meeting:

1. Prof. R. Harsvardhan, Prof. Incharge/ Nodal Officer & Head, IQAC
2. Prof. Arun Kr. Srivastava, Chief, ATC
3. Shri. Prakash Singh, JD (MM), SGPGIMS
4. Dr. Romil Saini, Asst. Prof., Psychiatry
5. Dr. Jai Kishun, Addl. Prof., BHI
6. Dr. Siddharth Rai, Addl. Prof., PMR
7. Dr. Kuldeep Vishwakarma, Addl. Prof., Oral & Maxillofacial Surgery
8. Dr. Anitta J. Ellenkil, SR I/c ATC, Hospital Administration

Objective of the meeting was:

1. Digitalization of OPD Services in the ATC

The following were the salient points discussed:

SL. No.	Issues Identified	Queries Raised/Discussion	Plan of Action
1.	**Requirement of Digital Tablets for OPD Consultants in ATC**	The Committee deliberated on the need for digital tablets (medical/health grade tablets with stylus pen) in view of the proposed paperless OPD initiative. It was discussed that digital devices could facilitate efficient clinical documentation, real-time entry of consultation findings and streamlined patient-care services. The possibility of providing tablets to faculty members providing OPD consultation, with an additional device for each specialty/department where required, was also considered to ensure continuity and ease of accessibility.	It was decided that the Faculty In-Charge, OPD shall undertake an assessment of the requirement of digital tablets for implementation of the OPD digitalization/paperless OPD initiative. A comprehensive specialty-wise and user-wise requirement list shall be prepared for procurement and subsequent implementation.
2.	**Software Integration with HIS Portal**	The Committee discussed the need for a digital documentation system aligned with the existing OPD workflow.	It was resolved that suitable hardware/software solutions and service providers may be identified and demonstrations arranged for technical and operational evaluation.
3.	**Management, Documentatio**	The Committee deliberated on the need to ensure accurate clinical records, data security,	It was decided that the technical specifications for

	n and Handling of Medico-Legal OPD Cases	legal admissibility of digital documentation and compliance with applicable medico-legal and institutional protocols. The importance of secure server-based architecture and continuity of documentation during network disruption or low-bandwidth situations was also discussed.	the proposed digital OPD system should comprehensively incorporate requirements related to clinical documentation, data security, medico-legal compliance, interoperability and operational continuity. Provision for temporary local storage and subsequent synchronization with the HIS server may be evaluated.

The meeting ended with directions to ensure time-bound compliance of the above decisions and to facilitate phased implementation of the OPD Digitalization/Paperless OPD initiative, subject to technical feasibility and satisfactory evaluation.

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

Prof. Arun Kr. Srivastava
Chief, ATC

Shri. Prakash Singh
JD (MM), SGPGIMS

Dr. Romil Saini
Asst. Prof., Psychiatry

Dr. Jai Kishun
Addl. Prof., BHI

Dr. Siddharth Rai
Addl. Prof., PMR

Dr. Kuldeep Vishwakarma
Addl. Prof., Oral & Maxillofacial Surgery

Dr. Anitta J. Ellenkil
SR I/c ATC, Hospital Administration

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

MINUTES OF MEETING

Sub.: IQAC meeting regarding identification of needs for strengthening and expansion of Emergency Services at Apex Trauma Centre, reg.

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened on 01-11-2025 at 11:00 AM to identify quality-related infrastructural and operational needs of the Emergency Department at Apex Trauma Centre.

Following members participated in the meeting:

1. Prof. Radha Krishan Dhiman, Chairman, IQAC
2. Prof. Shaleen Kumar, Dean, Co-Chairman, IQAC
3. Prof. R. Harshvardhan, Chairperson, Prof. Incharge/Nodal Officer and Head, IQAC
4. Dr. Rohit Sinha, Assistant Nodal Officer, IQAC
5. Dr. Nidhi Tejan, Assistant Nodal Officer, IQAC
6. Dr. Amit Kumar Singh, Faculty I/c ED, ATC Member, Faculty I/c ED
7. Mr. P. K Agarwal, AE, Civil, ATC

Objective of the meeting was:

1. To identify the infrastructural and operational needs for strengthening and expansion of Emergency Services, with emphasis on increasing bed capacity, improving patient flow and reducing congestion for quality patient care.

The following were the salient points discussed:

SL. No.	Need Identified	Discussion / Rationale	Plan of Action
1.	**Need for augmentation of Emergency Department capacity**	The IQAC identified the need to augment the existing Emergency Department infrastructure and bed capacity in view of increasing patient load. It was considered necessary to improve accessibility and facilitate timely and efficient emergency care without compromising the functioning of existing services.	The feasibility of infrastructural expansion of the Emergency Department may be assessed by reviewing the existing ED and surrounding areas. A suitable expansion area may be identified through site assessment and analysis of the available site plan.
2.	**Need for rationalization and reorganization of existing ED spaces**	The IQAC identified the need for rational reorganization of existing functional spaces to facilitate expansion of the Emergency Department. Relocation of non-clinical/ancillary areas may be considered where required so that additional clinical space can be created while	The existing payment/cash counters, investigation counter and plaster room may be reviewed for possible relocation.

		maintaining smooth and unidirectional patient movement.	
3.	**Need to improve patient flow and reduce crowding**	The IQAC emphasized the need to improve patient movement within the Emergency Department and reduce avoidable congestion. Appropriate planning of entry/exit movement, stretcher movement and holding areas was considered important for better patient experience and operational efficiency.	Suitable stretcher-holding/transfer zones may be identified and marked as part of the expansion plan.
4.	**Need for adequate dedicated functional spaces**	The IQAC identified the need for adequate functional spaces within the Emergency Department to support comprehensive and organized emergency services. Provision for medico-legal examination facilities, particularly for female patients where feasible, was also considered relevant.	The proposed expansion plan may assess and incorporate suitable additional functional spaces, including a dedicated room for medico-legal examination of female patients, subject to technical feasibility and availability of appropriate space.
5.	**Need for safety-compliant and technically feasible expansion**	The IQAC emphasized that any expansion of emergency services should be undertaken without compromising fire safety, engineering requirements, existing clinical services or institutional standards. Technical feasibility and requisite clearances should be considered before finalization of the expansion plan.	A detailed site assessment may be undertaken with the concerned Civil Engineering and other relevant technical personnel.

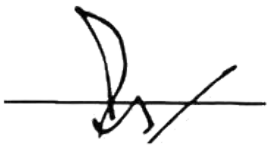
The meeting concluded with the decision that the above identified needs may be taken up for detailed technical assessment and necessary action by the concerned authorities, so as to facilitate improvement in emergency patient care, patient flow and operational efficiency.

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

Prof. Radha Krishan Dhiman
Chairman, IQAC

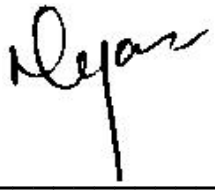
Prof. Shaleen Kumar
Dean Co-Chairman, IQAC

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



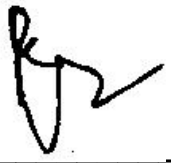
Prof. R. Harshvardhan
Chairperson, Prof. Incharge/Nodal Officer and Head, IQAC

Dr. Rohit Sinha
Assistant Nodal Officer, IQAC



Dr. Nidhi Tejan
Assistant Nodal Officer, IQAC

Dr. Amit Kumar Singh
Faculty I/c ED, ATC Member
Faculty I/c ED



Mr. P. K Agarwal
AE, Civil, ATC

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

MINUTES OF MEETING

Sub.: IQAC meeting regarding need for implementation of SAMARTH eGov Suite for digital governance and institutional management

With regard to the subject mentioned as above, a meeting of the Internal Quality Assurance Cell (IQAC) was convened on 05.04.2026 at Meeting Room, IQAC cell, Ground Floor, Administrative Block, to deliberate upon the need for adoption of an integrated digital platform for institutional administration and academic management. The Committee discussed the need for greater integration of institutional processes, improved transparency and tracking, standardized workflows and efficient management of services through a comprehensive digital system.

Following members participated in the meeting:

1. Dr. R. Harsvardhan, Prof. Incharge/ Nodal Officer & Head, IQAC
2. Col. Varun Bajpai, Executive Registrar
3. Dr. Prabhakar Mishra, Professor, BHI
4. Dr. Jai Kishun, Additional Professor, BHI
5. Dr. Nidhi Tejan, Assistant Nodal Officer, IQAC

Objective of the meeting was:

1. To assess the need for adoption of an integrated digital platform for academic, administrative and institutional management and to initiate the process for implementation of SAMARTH eGov Suite.

The following were the salient points discussed:

SL. No.	Need Identified	Discussion / Rationale	Plan of Action
1.	**Need for an integrated digital platform for institutional management**	The IQAC identified the need to move towards an integrated digital framework capable of supporting academic, administrative and institutional processes through standardized and traceable workflows. It was considered desirable to reduce fragmentation of information and improve coordination across functional areas.	The feasibility of implementing the SAMARTH eGov Suite may be explored as an institutional digital platform. The concerned representatives may obtain detailed information regarding scope, modules, implementation requirements and the institutional onboarding process.
2.	**Need to improve transparency, accountability**	The Committee discussed the need for improved visibility and tracking of institutional activities and records, including responsibility assignment, status	The proposed system may be evaluated for role-based access, standardized workflows and tracking across relevant institutional functions.

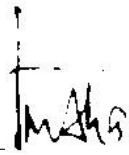
	and tracking of institutional processes	monitoring and availability of information to authorized users.	Institutional requirements may be mapped with the available SAMARTH modules.
3.	**Need for designated institutional nodal officers and coordinated implementation**	The IQAC felt that implementation of a comprehensive digital platform would require clearly identified institutional representatives for coordination, communication with the implementation team and supervision of module-wise activities.	Appropriate institutional nodal/associate nodal officers and module representatives may be identified and their responsibilities defined for coordinated implementation and communication.
4.	**Need for orientation and understanding of the SAMARTH onboarding process**	The Committee considered it necessary that designated representatives understand the scope of SAMARTH, onboarding procedure, implementation requirements and role allocation before formal initiation.	Designated representatives may attend an orientation/webinar with the SAMARTH implementation team to understand the onboarding procedure and implementation framework.
5.	**Need for formal onboarding and submission of required institutional information**	The Committee discussed that successful adoption would require submission of institutional information and role-wise details in the prescribed format, followed by formal communication with the SAMARTH team.	The prescribed onboarding form/application received from the SAMARTH team may be completed with required institutional and nodal-officer details, verified and submitted to the SAMARTH team for further action.
6.	**Need for phased implementation and monitoring**	The IQAC emphasized that implementation of a multi-module digital platform should be undertaken in a coordinated and phased manner with institutional oversight and periodic review.	Progress of SAMARTH onboarding and subsequent module implementation may be reviewed by the designated institutional representatives/committee, with necessary coordination among concerned academic, administrative, finance and other stakeholders.

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

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

Col. Varun Bajpai,
Executive Registrar

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



Dr. Prabhakar Mishra,
Professor, BHI



Dr. Jay Kishun,
Addl. Professor, BHI



Dr. Nidhi Tejan,
Assistant Nodal Officer, IQAC