

Logo	Centre name Address	Doc No	AAPC/CM/02
		Issue No	AAPC/II/01
		Date	23/10/2021
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Safety Committee			

SUMMARY	This document provides instruction and guidance to Hospital staff on various issues pertaining to Hospital safety management committee.
DISTRIBUTION	To all departments, units and wards through the Hospital Manual

Composition

SI	Members of the committee	Names of the committee members
1.	Chairman	Doctor Name
2.	Doctor In Charge - Panchkarma	Doctor Name
3.	Operations Head & Accreditation Co-Ordinator	Doctor Name
4.	Administrator - Bio Medical Engineering Dept	Therapist Name
5.	Facility maintenance	Housekeeper Name
6.	Staff Nurse Representatives	Therapist Name
7.	House Keeping	Housekeeper Name

Prepared By	Approved By
Doctor Name	Doctor Name

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Frequency

Once in a Quarter

Responsibilities and Functions

- Development and dissemination of various patient and employee safety protocols for the Hospital as a whole and departments in specific.
- Promote a culture of safety throughout the Hospital through staff education programs and training's; and internal campaigns through workplace posters, awards and incentives.
- Conduct patient education materials for educating patients and families on their role in ensuring safety at the Hospital.
- Conduct a thorough safety inspection of the campus once a year; to mapping potential safety risks to patients and employees.
- Conduct root-cause analysis for all reported safety related incidents and ensure appropriate corrective and preventive actions.
- Analyze all reported Sentinel Events (safety related) and plan and ensure corrective and preventive actions.
- Review and update the list of sentinel events (safety related) periodically based on the emerging studies published in international journals, information data bases of organizations like NABH.
- Issue and circulate sentinel event (safety related) alerts to all departments / units of the Hospital.
- Compile performance statistics for safety related indicators and analyze the same for trends. The report of the analysis done shall be submitted to the Hospital Quality Improvement Committee

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AMENDMENT RECORD

AMENDMENT		DOCUMENT SECTION NO	DETAILS OF AMENDMENT	EDITION STATUS	REV. STATUS
NO	DATE				

Prepared By	Approved By
Doctor Name	Doctor Name