



Chhatrapati Shahu Maharaj Shikshan Sanstha's

Ayurved Mahavidyalaya & Rugnalaya

POLICIES AND PROCEDURES ON CONTINUOUS QUALITY IMPROVEMENT



Kanchanwadi, Paithan Road, Chhatrapati Sambhajinagar, Maharashtra-431011



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CHHATRAPATI SHAHU MAHARAJ SHIKSHAN SANSTHA'S

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01/07/2023
01/08/2023
Designation: Quality Manager Name : Dr. Vitonde Y.A Signature : William Coordinator
Name : Dr. J.S. Deshmukh Signature :
Designation: Medical Superintendent & Principal
Name : Dr. S.G. Deshmukh
Signature : Azelhunka

Kanchanwadi, Chhatranatioga

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Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya,

Principal

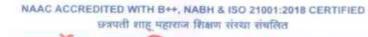
D11 (M.S.) कांचनवाडी, पडण राह, छत्रपता स्थानीमा प्रमुख्य Sambhailnagac

2379035 Fax (0240) 2646222 ssayui@gmail.com. Website: www.csmssayurved.com

Address Kanchanwadi Padhan Road.

Sambhajinagar Email: principal@csm ved com, princip

ahavidyalaya









Estd: 1989 NC/SM College Code: AYU0153 MUH5 College Code: 3401

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AMENDMENT SHEET

Sr. No.	Section No. & Page No.	Details of the amendment	Reasons	Signature of the preparatory authority	Signature of the approval authority
1	Section no 5.4 Page no07	Annual training calender 2024 prepared	92		
2	Section no 6.1 Page no07	NABH Accreditation for Hospitals, 30 Nov 2021	•		
3	Section no 10 Page no13-14	Nursing Quality Improvement Programme	Newly Added Nursing Quality improvement		

Principal

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya, Kanchanwadi, Chhatrapati Sambhajinagar.

Jeelman





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Quality Manager is responsible for issuing the amended copies to the copyholder should acknowledge the same and he/she should return the obsolete copies to the Quality Manager.

The amendment sheet, to be updated (as and when amendments received) and referred for details of amendments issued.

The manual is reviewed once a year and is updated as relevant to the hospital policies and procedures.

Review and amendment can happen also as corrective actions to the non-conformities raised during the self-assessment or assessment audits by NABH.

The authority over control of this manual is as follows:

Preparation	Approval	Issue
Quality Manager	Principal/ MS Chhatrapati Shahu Maharaj Shikshan Sansthas Ayurved Mahavidyalaya & Rugnalaya, Chh. Sambhajinagar.	Accreditation coordinator

The procedure of manual with original signatures of the above on the title page is considered as 'Master Copy' and the photocopies of the master copy for the distribution are considered as 'Controlled Copy'.

Principal

testimen

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya, Kanchanwadi, Chhatrapati Sambbajinagar.

Kanchanwadi, Chhatrapati Sambhajinagar.

Address: Kanchanwadi, Parthan Road, Chr.

Maharaj S

अध्याप्तर के अपने 31 011 (M.S.) कांचनवाडी, पैठण रोड, छत्रपती संमाजीनगर -४३१ ०११ (एम.एस.)

Tet.: (0240) 646484, 2379035 Fax: (0240) 2546222.

Email: principal@csmssayurved.com, principalcsmssayu@gmail.com, Website: www.csmssayurved.com



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Distribution of the Manual:

Sr. No	Designation	
1	Principal/ Medical Superintendent	
2	Deputy Medical Superintendent	
3	Accreditation Coordinator	

Jeehm men







MUHS College Code : 3401

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Principal
Chhatrapati Shahu Maharaj Shikshan Sanstha's
Ayurved Mahavidyalaya & Rugnalaya,
Kanchanwadi, Chhatrapati Sambhajinagar.





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POLICY & PROCEDURES ON CONTINUOUS QUALITY IMPROVEMENT

1.1 PURPOSE:

- 1.1 To guide and ensure the continuous improvement of quality services provided by Chhatrapati Shahu Maharaj Shikshan Sansthas Ayurved Hospital & College, Kanchanwadi, Chhatrapati Sambhajinagar.
- 1.2 To identify appropriate tools for continuous improvement.
- The quality improvement program is comprehensive & covers all major elements. 1.3

2.0 SCOPE:

- 2.1 Hospital Wide - All Inpatient care areas.
- Applicable to all employees of the hospital. 2.2

3.0 RESPONSIBILITY:

- 3.1 Consultants/ Doctors.
- All hospital staff. 3.2
- Core/ Quality assurance Committee. 3.3

4.0 ABBREVIATION:

- NABH: National Accreditation Board for Hospital and Healthcare providers. 4.1
- 4.2 CQI: Continuous Quality Improvement.

5.0 DEFINATION:

- Quality Indicators: Quality indicators means to judge the real performance of certain 5.1 clinical as well as managerial parameters selected for monitoring and evaluation.
- 5.2 Sentinel Events: An unexpected occurrence involving death or serious physical or psychological injury, or the risk there of to a patient, visitors, or an employee.

Principal

Keehmen

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya,

कांचनवाडी, पैठण Kanchanwadi, Chhatrapati Sambhajinagar.

Fax: (0240) 2646222 all.com, Website: www.csmssayurved.com

Tel.: (0240

Sambhajinagar.

Email : principal@csmssay

Address: Kanchanwadi, Paithan Road, Chhatrag

Kanchanwadi

Chhatrapati

Maharaj Shi



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- 5.3 Quality Improvements: It is an ongoing response quality assessment data about a service in ways that improve the process by which services are provided to the patients.
- 5.4 Annual training calender 2024 prepared.
- 5.5 Risk Management: Clinical and administrative activities to identify, evaluate and reduce the risk of injury.

6.0 REFERENCE:

NABH: Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya Accreditated for 3 years from 30.11.2021 & going on renewal process.

7.0 POLICY:

- 7.1 Organization has designated a person, as NABH coordinator - Dr. Deshmukh J.S. to meet the quality standards.
- 7.2 Quality improvement and patient safety program is implemented by Quality & safety Team.
- 7.3 The Hospital management makes available adequate resources required for quantity improvement and patient safety program.
- 7.4 There is established system of clinical audit.

7.5 Quality Policy:

- We hereby assure quality healthcare to patients through reliable healthcare service, 7.5.1 available medicines and maintainable equipment.
- We ensure efficiency of operations and effectiveness of treatment through our 7.5.2 competent human resources.
- 7.5.3 We review this policy for continuing suitability, adequacy and effectiveness.

7.5.4 We achieve this through the quality objectives and targets set for various departments.

Principal

Leshmen

Chhatrapati Shahu Maharai Shikshan Sanstha's

11. (M.S.) कांपनवाडी, पंजा राज्य स्थापना (Mahayidyalaya & Rugnalaya, 379035 Fax : (0240) 264622 Kanchanwadi, Chhatrapati Sambhajinagar.

yu@gmail.com, Website : www.csmssayurved.com

Kanchanwadi,

Chhatrapati Address : Kanchanwadi, Paithan Road.

Sambhajinagar.

Email : principality



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7.6 Safety Policy:

- 7.6.1 The patient safety program is developed implemented & maintained by multidisciplinary committee called Safety Committee.
- 7.6.2 The policy covers major elements related safety & risk management.

8.0 PROCEDURE:

Quality

- 8.1 Approach To Planning, Designing, Measuring, Improving Quality.
- 8.1.1 Planning: Planning for the improvement of patient care and health outcomes includes a hospital wide approach.
- 8.1.2 Designing: Processes, functions or services are designed effectively based on: Mission and Vision of Chhatrapati Shahu Maharaj Shikshan Sansthas Ayurved Hospital & College needs and expectations of patients, staff and others.

8.1.3 Internal Communications:

- 8.1.3.1 The top management has defined and implemented an effective and efficient process for communicating the Quality Policy, Objectives, Quality management requirements and accomplishments.
- 8.1.3.2 This helps the hospital to improve the performance and directly involves its people in the hospital as a means of involving them.
- 8.1.3.3 The management actively encourages feedback and communication from the people in the hospital as a means of involving them.

8.1.5 Documentation:

8.1.5.1 Quality Manual:

Quality Manual contains the structure and functions of the continuous quality improvement program.

Waharaj Sh

Kanchanwadi, Chhatrapati Principal

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya, Kanchanwadi, Chhatrapati Sambhajinagar.

ambhaimasas (१) M.S.) कांचनवाडी, पेडम रोड, छन्नपती संभाजीनगर -४३९ ०१९ (एम.एस.)

Address : Kanchanwadi, Paithan Road, Chhatra Tet.: (02/ Email : principal@carnasayurve

9035 Fax: (0240) 2646222.

@gmail.com, Website: www.csmssayurved.com



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8.2 Principal/Quality Manager/NABH Coordinator at Chhatrapati Shahu Maharaj Shikshan Sansthas Ayurved College & Hospital, Kanchanwadi, Chhatrapati Sambhajinagar have the overall authority, responsibility and commitment to communicate, implement, control and supervise the compliance of various departments with the accreditation standards.

The roles and responsibility of the NABH coordinator include:

- 8.2.1 Establishing and maintaining the Quality Improvement and patient Safety Program.
- 8.2.2 Documents control.
- 8.2.3 Schedule and conduct Internal Audits.
- 8.2.4 Schedule and conduct, management of review meeting.
- 8.2.5 Ensuring corrective and preventive action arising from the above.

8.3 Document Control:

- 8.3.1 Documents such as regulations, standard, policies & SOP's manuals and other normative documents as well as drawings, software from part of the Hospital Quality Management System.
- 8.3.2 A copy of each of these controlled documents shall be archived for future reference and the documents will be retained in their respective department. The documents are maintained in paper or electronic media as appropriately required.
- 8.3.3 Documents are identified and established as two levels namely:
 - 1 Quality Manual
 - 2 Hospital Policies & Procedures
- 8.3.4 The Heads of the Departments of the respective departments will review all documents issued to personnel as a part of management system annually and they will approve it for the use. The Head of department will resolve issues of the finalized document.

Principal

technon

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya, Kanchanwadi, Chhatrapati Sambhajinagar.

Kanchanwadi, Chhatrapati Sambhajinagar.

Address : Kanchanwadi, Paithan Road, Chhatrapati San (एम.एस.)

Email: principal@csmssayurved.com, principaliser ssayu@gmail.com, Website: www.camasayurved.com

Maharaj Sh



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8.3.5 The Head of Quality ensures that:

- Authorized editions of appropriate documents are available at all locations where operations essential to the effective functioning of the hospital are performed.
- Documents are periodically reviewed and revised where necessary to ensure suitability and compliance with applicable requirements.

8.4 Preventive Actions:

- The NABH Coordinator will be perpetually vigilant and identify potential sources of non-compliance and areas that need improvement.
- These may include trend analysis of specific marks such as turn-around time, risk analysis etc.
- Where preventive actions are required a plan is prepared and implemented.
- All preventive actions must have control mechanism and monitor for efficacy in reducing any occurrence of non-compliance or producing opportunities for improvement.

8.5 Corrective Action:

The NABH Coordinator takes all necessary corrective action when any deviation is detected in Quality Management System.

8.6 Root Cause Analysis:

Deviations are detected by:

- Patient complaints/feedbacks.
- Non-Compliance receipt of items/samples.
- Non-compliance at Internal/external Quality Audit Management Review.

The NABH coordinator conducts the detailed analysis of the nature and root cause of noncompliance along with the responsible persons from the respective sections.

Principal

Jushmah

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya, Kanchanwadi, Chhatrapati Santohajinagar.

Address : Kanchanwadi, Paithan Road

Email: principal@

Chhatrapati (र्ज.)
Sambhajinagar (र्ज.) 431 011. (M.S.) कांधनवाडी, पैतम रोड, छत्रपती संभाजीनगर -४३९ ०९९ (एम.एस.)
(0240) 2379248 (र्ज.) 464, 2379035 Fax: (0240) 2646222.

ved.com (csp.) dcsmssayu@gmail.com, Website: www.csmssayurved.com

devisional and a

Maharaj Shi

Kanchanwadi,



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8.7 Selection and Implementation of corrective Actions:

- Potential corrective actions are identified and the one that is most likely to eliminate
 the problem is chosen for implementation.
- Corrective action is taken into consideration the magnitude and degree of impact of the problem.
- All changes from corrective action is documented and implemented.

8.8 Monitoring of Corrective Actions:

The NABH Coordinator will monitor the outcome parameters to ensure that corrective actions taken have been effective in eliminating the problem.

8.9 Procedures for Internal Quality Audit:

- Internal audits will be conducted by the internal audit team members once in six months.
- Internal audit team members will be trained on NABH standards internally by a trained person who trains the other members of the team.
- Audit starts with the opening meeting. All departmental heads will be informed about the purpose of audit, audit timings and duration of audits etc.
- All minor correction will be suggested by the auditor to the departmental staff.
- Audit gets over with the closing meeting overall observation will be summarized by the chief auditor. Audit observation shall be handed over to Principal/ MS for improvements.
- The Audit reports will be forwarded to the concerned Departmental Heads.

Corrective and preventive actions will be taken by the department staff based on the audit observation. Reports of the corrective and preventive actions will be submitted to the CQI Incharge or NABH Coordinator by the concerned Head of the department.

Principal

Chhatrapati Shahu Maharai Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya,

O11. (M.S.) कांचनवाडी, पंडण रोड, अन्य Kanchanwadi, Chhatrapati, Sambhajinagar.

Address : Kanchanwadi, Palthan Road, 0

Sambhajinagar 240) 2379248 2

Kanchanwadi,

Chhatrapati

ssayu@gmail.com; Website : www.csmssayurved.com

2379035 Fax: (0240) 2646222.

Email : principal@csms

Svidivalava



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9.0 Safety Procedures:

- There is designated individual for coordination & implementation of patient safety program staff is given training for it.
- Facility Inspection rounds are taken & documented.
- Patients safety program is updated at least once in a year.

10. Nursing Quality Improvement Programme:

Safety: Avoiding injuries to patients from the care that is intended to help them.

Patient-centered: Providing care that is respectful and responsive to individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions.

Timely: Reducing wait times and potentially harmful delays for both those who receive care and give care.

Efficient: Avoiding waste of equipment and supplies.

Equitable: Providing care that does not vary in quality because of person characteristics such as age, gender, geographic location and socioeconomic status.

Engage nurses at all levels in the development and execution of focused initiatives designed for the care team on an annual basis as part of the Chhatrapati Shahau Maharaj Shikshan Sansthas Ayurved Mahavidyalaya, Rugnalaya, Kanchanwadi, Chhatrapati Sambhajinagar.

Focused initiatives will be developed based on the following criteria:

- High risk events
- Sentinel events
- Hand wash practices
- Use of Personal Protection Equipment
- Problem-prone events
- Impact on satisfaction (patient, family, physician or staff)
- Impact on patient outcome
- Operation theater etiquettes and OT assistance.
- Relationship to staffing effectiveness
- Relationship to community needs and changes

Principal

Les homes

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaya & Rugnalaya,

8 (0240) 2646222 (mail.com, Website : ww S.) कायनवाडी, पैठण रोह, छत्रपती Kanchanwadi, Chhatrapati Sambhajinagar.

Sambhajinagar mail.com, Website: www.csmssayuryad.com

Kanchanwadi. Chhatrapati >

Tahu Haharaj Shike

Address Kanchanwadi, Paithan Road, Chhat Email: principal@csmssay



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- · Relationship to changes in environment of care
- Duration of benefit
- Exposure to needle stick injuries
- Biomedical waste segregation while performing Panchakarma procedures like Snehana, Swedana, Vamana, Virechana, Raktamokshan, Basti and Nasya.
- Hand overs

Medication administration safety

Create passion and discipline for the translation of evidence into practice that will optimize patient outcomes.

Train nurses at all levels to take the knowledge gained to develop plans to change nursing practice at the bedside.

Management of the units/clinics/departments and is responsible for ensuring that the Quality, safety, and Personal Improvement programs are given high priority and support the programs by:

- Allocating adequate resources and sufficient time for staff participation in quality improvement training.
- Personal Improvement patient safety, and risk management initiatives, activities and educational programs.
- Identifying sources for errors and educate staff.
- Designing safe, reliable, capable systems among nursing staff.
- Holding staff accountable for quality and safety initiatives through monitoring, evaluation and coaching.

Principal

Deshmush

Chhatrapati Shahu Maharaj Shikshan Sanstha's Ayurved Mahavidyalaga & Rugnalaya, Kanchanwadi, Chhatrapati Sambhajinagar.

Address : Kanchanwadi, Paithan Road, Chhatrapati Sambha

Sambhajinagar.

Kanchanwadi,

Chhatrapati

क्षेत्रनवाडी, पैठण रोड, छत्रपती संभाजीनगर -४३५ ०१५ (एम.एस.)

(0240) 2646222.

com, Website: www.camasayurved.com

Tel.: (0240) 2379248

Email: principal@csmssayurved.com, principal