

SANJAY GANDHI MEMORIAL HOSPITAL  
GOVERNMENT OF NCT OF DELHI  
S- BLOCK, MANGOLPURI, DELHI-110083

F. No. 3(6) Misc. /RKS/SGMH/2010/ 9102-7

Dated: 28/08/17

**MOM of 'Rogi Kalyan Samiti' held on 18.08.2017**

In reference to meeting notice vide no. F. No. 3(6) Misc./RKS/SGMH/2010/ 8535-42 dated 16.08.2017, a meeting of 'Rogi Kalyan Samiti' of Sanjay Gandhi Memorial Hospital, Mangolpuri Delhi was convened under the Chairmanship of Ms. Rakhi Birla, the Hon'ble Dy. Speaker of Delhi Vidhan Sabha and Member of Legislative Assembly, from Mangolpuri Constituency on 18.08.2017 at 12:00 Noon in the conference room at 4<sup>th</sup> floor, administrative building of hospital as per the agenda given below. The list of those present in the meeting is enclosed at Annexure-1.

**Agenda of Meeting:**

1. To review the working of hospital in general.
2. Cleanliness.
3. Security.
4. Medicines & Consumables availability.
5. Diagnostics facility.
6. Equipment (New).
7. Equipment maintenance.
8. Free Radiology Tests by Private Labs/ Hospitals- scheme.
9. Free Surgeries in Private Hospital – scheme.
10. Installation of information Boards.
11. Functioning of attached Poly Clinics.

The meeting started with the formal well come of the Chairperson and all participants by Medical Superintendent followed by the introduction of all participants.

At the outset, the Chairperson informed every-one that she has perceived a sea change in the functioning of hospital after taking over the office by present MS and praised him and his team for the all the good work performed by the team.

The Medical Superintendent of hospital has given an over view of the actions / activities initiated / undertaken and mile stones achieved in a brief span of about two and half months of joining as MS of hospital. It was informed that due to various administrative reasons many works / decisions were pending as there was no regular incumbent on the post of MS for quite some time during last financial (2016-17).



It was also informed that Hon'ble Chief Minister Delhi has visited the hospital on 25.05.2017 followed by visit of Chief Secretary of Delhi. Some short comings were highlighted during these visits, following which, immediate short and long-term corrective measures were planned and under taken to fill the gaps noted during these visits.

Thereafter, Members raised various issues one by one as per agenda, which were discussed and decisions were taken as per the following details: -

1. **Regarding preparedness to deal the fever cases due to Dengue, Chikungunya and Malaria:** It was informed that the hospital is well prepared to deal the fever cases due to Dengue, Chikungunya and Malaria. A room has been identified in Medicine OPD which can be immediately converted into 'Fever Clinic', the movement there is rise in fever cases. A special ward with 10 beds has also been kept ready with adequate functional infrastructure, the human resource has been identified to depute in it, availability of medicines including Paracetamol & ORS, blood products & other consumables have been ensured. The actions have already been taken under preparedness plan.

It was decided that hospital administration will keep a close watch on situation of fever cases due to Dengue, Chikungunya and Malaria, and if required, will take immediate corrective actions if situation warrants. (Action: By Nodal Officer Dengue, Swine Flu).

2. **Regarding payment and dues of out sourced staff, contractual staff and payments of suppliers:** It was informed that payment of most of the staff have been made. Dues of suppliers have also been approved and have been sanctions issued. Where ever there is discrepancy in billing / procedures, the same has been asked to rectify at the earliest so that these may be processed further and payments may be made.

It was decided that hospital administration will orient all vendors to follow the correct procedure while submitting bills for payment to avoid delays and expedite the payment process (Action: by DMS-B).

3. **There is long queue of patients at OPD Registration & Pharmacy Counters, increase number of counters:**

(A) **OPD Registration:** It was informed that; 09 OPD registration counters used to function till recently, out of which 4 were in old OPD block, 4 were in Gynae / Paeds. (MCH-OPD) and one in casualty for emergency / indoor admissions. By and large theses OPD



reviewed, the punctuality in window opening time re-stressed and some re-arrangements in functioning of these counters have been made. Now the registration windows open sharp at 08:30 A.M. and the computers system has been updated, some local queue management tactics have been adapted, as a result waiting time of patients has been reduced to about 30 mts. It was also informed that services of OPD registration is out sourced to a vendor. The tenure of present vendor is going to over on 31.08.2017. The tendering for new vendor is already under way.

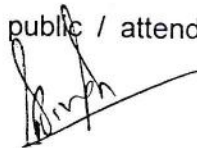
It was decided that; if feasible, additional OPD registration counters may be added by hospital administration, to further reduce the waiting time of registration. **(Action: By MO I/c OPD Registration).**

**(B) Pharmacy Counters:** It was informed that there used to be 09 pharmacy counters in hospital, 5 in old OPD block and 4 in new MCH Block, these are manned by pharmacists. Recently one pharmacist is transferred in; from other hospital, as a result one more pharmacy counter has been functionalized in old OPD block and total pharmacy counters there are now 06. Further, it was informed the 'tea-break' time in pharmacy has been cancelled, trainee pharmacists are also being used to assist pharmacists in distribution of medicines as result waiting time has been drastically reduced from 2 to 2<sup>1/2</sup> hours to 30 to 40 minutes.

It was decided that; if feasible, additional Pharmacy Counters may be added by hospital administration to further reduce the waiting time at pharmacy counters. **(Action: By MO I/c Pharmacy).**

4. **Ambulance- numbers to be increased:** It was informed that there are 02 ambulances in SGMH, out of which one is under condemnation and one is functional. SGMH is also designated hub for station of CATs ambulances. Two / Three ambulances are usually stationed here. Whenever needed, ambulances are made available on immediate basis in hospital for transport of seriously ill / sick patients only. But ambulances are not meant for transport of dead body, for which a separate hears vans of MCD are used. It was informed that attendants demand ambulances for transport of dead body, which is declined by hospital / CATS. Sometimes, this used to be cause of resentment among the relatives / attendants of dead person.

It was decided that boards displaying the information on correct use of ambulances may be placed at appropriate places for information of general public / attendants. **(Action: By CCMO)**



5. Overcrowding in casualty during evening hours and to increase the staff and facility:

(A) Increase the staff: It was informed that there is shortage of various categories of staff in hospital. Efforts have been made in this direction by present team, now 4 Specialist and 5 MO have joined the hospital to ease out the human resource front. Nursing Staff is also likely to be posted in hospital, the concerned file is under process in Delhi Sachivalya. (Action: by Hospital Management, DMS - A)

(B) AR Study: It was also informed that An AR study has been under taken in August 2018 by a team from GOI which assessed the gaps in various categories of human resource and assessed their work load and infrastructure status of hospital and gave valuable inputs. Additional requirement of human resource with proper justification has been submitted to GOI as a follow up action of the visit. As informed the team shall be submitting its report to Delhi Govt. with its recommendations.


It was decided that steps will be taken by hospital management for implementing the recommendations of committee when made available. (Action: To be pursued by Hospital management, DMS-D).

(C) Increase in space & facility in emergency: It was informed that there is sufficient though limited space available in casualty to take care of patients reporting there. But due to rising population in the catering area, there is increasing foot falls in casualty. To ease out the situation, security and support staff is asked to take appropriate crowd management measures. At the same time co-operation from the visiting patients and attendants is also expected and same is requested by on duty staff.

It was decided that constant efforts are required in this regard by on duty staff in casualty. (Action: CCMO & Security In-charge).

(D) It was also informed that a proposal is already under process for constructing a new multistory trauma block in the hospital premises, designs have been prepared and further work is on, this will add up another 363 beds in hospital.

It was decided that hospital management will expedite the activity on this front. (Action: By MO I/c PWD Work).






6. Installation of CCTV in sensitive area like emergency gate, main gate, child emergency etc.: It was informed that action on this point has already begun, a review was taken on the status of functioning of CCTV in hospital premises, it was found that many CCTV are not functional, server is not updated, AMC awarded to vendor has expired, a meeting was also held with area SHO on the status of security measures in hospital premises. As discussed with and suggested by SHO, the additional locations for installation of CCTV cameras in hospital premises have been considered including the emergency gate, main gate and other areas.

It was decided that hospital management will complete the process of installation of CCTV as per requirement at the earliest. (Action: By MO I/c Security).

7. The benefit of tests and surgeries under newly introduced scheme through DAK is not being availed by common public in large numbers: It was informed that high end tests not available / performed in hospital and persons waiting for surgeries (for more than a month's date) are regularly availing the benefit. Initially the number of such beneficiaries were less about 40 to 65 for high end tests and 5 to 7 surgeries but gradually the number picked up and at present around 169 tests and 35 surgeries are being performed under the scheme.

Similarly, the beneficiary under the EWS scheme has also picked up, as per the data 3428 patients were referred in 2016-17 and in 2017-18 till this time about 1977 patients have been referred to the identified private hospitals.

It was decided that re-orientation of HOD's and other staff will be under taken to disseminate the information on above schemes by common public in accordance of the framework of these schemes. (Action: By Nodal Officer DAK / EWS).

8. 4 to 5 CATS ambulances are stationed in hospital premises but the patients / attendants are not able take benefit of these: It was already taken at point no. 4 above.
9. The cleanliness to be increased: It was informed that after taking over by the new team, special emphasis has been given on this point, frequent meetings of concerned persons supervisors & outsource staff were held to stress upon this point, frequent field inspections/visits were taken to ensure the appropriate and adequate cleanliness on time, the outcome of the above efforts was that there is perceptible improvement in the overall cleanliness.
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It was decided that constant efforts are required to be made for proper cleanliness of hospital. The hospital management will look in to it to further improve it. **(Action: By MO I/c House Keeping & Sanitation).**

**10. Complete all the pending work of PWD in hospital:**

**(A)** It was informed that the status of pending work of PWD was reviewed, some works are under process of sanction, the works were already expedited.

**(B)** New addition of hospital block: It was informed that work has already begun for construction of a new multistory trauma block in hospital premises with addition of 376 beds. Site has been surveyed, drawing has been prepared by architect of PWD and is under scrutiny.

It was decided that hospital management will expedite the activity on this front. **(Action: By MO I/c PWD Work).**

**(C)** Horticulture Work: The Asstt. Director Horticulture informed that trimming of trees and plantation drive in hospital will be undertaken. The disposal of leaves falling on road sides and weed management will be planned and implemented.

It was decided that Horticulture Deptt. will take immediate steps in this direction. **(Action: Horticulture Deptt.).**

**11. Fixing of sign boards displaying various cautions like behavior with women, on bribery, etc.:** It was informed that hospital has already displayed many signboards on various aspects of patient care, as regards the above said boards, it was informed that hospital is in the process of implementing quality indicators in hospital like 'Mera Asptal', NABH, 'Kayakalp' and NQAS to improve the quality aspect of patients care and over all working of hospital. A quality team has been constituted. The team is working on various aspects of quality related issues. The locations and signages details have been worked out by the team and it is in the process of procuring these. It was also informed that orientation / training on 'soft skills' has been imparted to various categories of hospital staff to take proper care while dealing with the female patients, elderly or persons with special needs.

It was decided that there should be regular orientation of staff on soft skills. **(Action: By Nodal Officer Quality & Nodal Officer Training).**

**12. Non availability of medicines, consumables and non-performing of many path. & radiology tests:** It was informed that till recently many tests and medicines were not available due to various administrative reasons- delay in tendering process etc. The



situation was reviewed, tests kits were arranged for most of the tests. The medicines were also procured / arranged, now the situation is much improved, the hospital pharmacy has most of the drugs, as per hospital EDL, most of the tests are being performed, measures have been taken to ensure continuous uninterrupted supply of medicines from pharmacy counters. It was also informed that Hon'ble CM has held a meeting recently where issue of undue delay in tendering was discussed and it was decided that to over-come the delay, RC of other Delhi Govt. Hospital may also be used. The over-all situation of medicines and tests are much improved now.

It was decided that hospital management will ensure the continuous availability all above requirements. **(Action: by HOD Pathology & Medicine).**

**13. Repair and maintenance of equipment:** It was informed that a status of functioning of equipment of various departments was reviewed. It was noted that there was some pendency on this front, the work was expedited, approvals and sanctions were issued and things now moving the over-all percentage of functioning equipment has improved a lot.

It was decided that hospital management will ensure that all equipments are functional, if not feasible they may be condemned and alternative arrangements have been made. **(Action: By MO I/c R & M).**

The meeting ended with vote of thanks by Medical Superintendent.

This issues with the approval Chairperson.



(Dr. P. S. Nayyer)  
Medical Superintendent  
& Member Secretary, RKS

Enclosure: - List of participants at annexure - I

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Copy to: -

1. P.S. to Chairperson, Rogi Kalyan Samiti, Sanjay Gandhi Memorial Hospital.
2. All Members of Rogi Kalyan Samiti, Sanjay Gandhi Memorial Hospital.
3. All DMS - A, B, C & D of Sanjay Gandhi Memorial Hospital.
4. All HODs, of Sanjay Gandhi Memorial Hospital.
5. Dy. Nursing Superintendent, Sanjay Gandhi Memorial Hospital.
6. MO I/c's concerned.
7. P.S. to MD, DSHM, 6<sup>th</sup> floor, Vikas Bhawan II, Civil lines Delhi-54.

**Dated:**



(Dr. P. S. Nayyer)  
Medical Superintendent  
& Member Secretary, RKS

Attendance of members in the meeting conveyed by chairmen, RKS SGMH on 18/08/2017.

S.No.	Name of member	Designation
1	Dr Meenakshi Member	CDMO (NW)
2	A Ali Khan	Member
3	Mahesh Kumar	Sr Account Officer
4	Kamla Devi	DNS
5	Dr Kishor Rajurkar	HOD OBGY
6	Dr Nishi Gupta	Specialist Surgery
7	Dr Sumita Saha Kanwar	HOD Medicine
8	Dr Divpreet Sahni	Nodal Officer
9	Dr Anand Narnotiya	CAMO (North DMC)
10	P Anand Rao	DO NW I&II
11	Jasveer Singh	Asstt Dir. Hort PWD
12	Amarjeet Singh	AE (E) SGMH
13	Anil Kumar Mishra	AE(Civil)
14	G.S. Kohli	EE(C)
15	Arun Gupta	SDM HQ Kanjhawala
16	Dr Pratibha Nanda	MS(MCH)
17	Amit Kumar	EE PWD
18	Deepak Naik	Architect (CPKA)
19	Dr V.K. Gupta	HOD Eye
20	Dr Jitender Singh	Sr Spl Ortho
21	Sharad Kumar Jaiswal	JE(E)
22	Dr Vipin Dabas	CMO
23	Mohinder Paul	
24	Joginder Pant	
25	Raj Kumar Gautam	President Dalit Raksha
26	Manoj Kr Mishra	Dresser
27	Ankur Kumar	MLA Representative
28	Navdeep Kumar	RKS Member
29	J.P. Morya	RKS Member
30	Dr Paras Passi	SR Medicine
31	Yogesh Sharma	MLA Rep
32	Bhupender Singh	Member
33	Asha Vijayran	Member
34	Hemant	PA
35	Madan Lal	Member
36	Dr A.K. Saini	(DMS A)
37	Dr M.M. Kohli	DMS
38	Dr P.S. Nayyer	MS