

Chapter: 1 - Access, Assessment and Continuity of Care (AAC)

Group Leader: Dr. Y. Mutheeswaraiyah,
Professor & Head
Department of General Surgery

Co –Ordinator: Mrs.G. Siresha, Medical Records Officer

Task code (Standard)	Summary of Standards	Group Members
AAC 1	The organization defines and displays the healthcare services that it provides	<ol style="list-style-type: none"> 1. Mr. V. Rajasekhar, PRO (Lead Member) 2. Mr. N.V.S. Prasad, MSW 3. Mr. R. Nagaraja, Sr. Photo Artist
AAC 2	The organization has a well-defined registration and admission process	<ol style="list-style-type: none"> 1. Smt.G.Sireesha, MRO (Lead Member) 2. Sri.K.GiriBabu, AMRO 3. Smt.N. Hemalatha, H/N, OPD
AAC 3	There is an appropriate mechanism for transfer (in and out) or referral of patients	<ol style="list-style-type: none"> 1. Dr. K. RohithGupta, Asst. Prof., Dept. of EMD (Lead Member) 2. Dr. P.Subramamyam, Asst. Prof., Dept. of EMD 3. Mrs. C. Sunitha, NS Gr-I 4. Smt.C.DhanaRekha, H/N,EMD,
AAC 4	Patients cared for by the organization undergo an established initial assessment	<ol style="list-style-type: none"> 1. Dr.A.Sandeep Kumar Reddy, Asst. Prof., Dept. of Medicine(Lead Member) 2. Dr.P.Suresh Babu, Deptof General Surgery 3. Mrs. I. Kanthamma, NS Gr-II
AAC 5	Patients cared for by the organization undergo a regular reassessment	<ol style="list-style-type: none"> 1. Dr.A.Sandeep Kumar Reddy, Asst. Prof., Dept. of Medicine (Lead Member) 2. Dr.P.Suresh Babu, Asst. Prof., Dept. of General Surgery 3. Mrs.E. Bhuvaneshwari NS Gr-II 4. Smt.N. Hemalatha, H/N, OPD
AAC 6	Laboratory services are provided as per the scope of services of the organization	<ol style="list-style-type: none"> 1. Dr. M. M.Suchitra, Professor, Dept. of Biochemistry (Lead Member) 2. Dr. V. Siva Kumar, Asst. Prof., Dept. of Pathology 3. Dr.N. Ramakrishna, Asst. Prof., Dept of Microbiology
AAC 7	There is an established laboratory quality assurance programme	<ol style="list-style-type: none"> 1. Dr. M. M. Suchitra, Professor, Dept. of Biochemistry(Lead Member) 2. Dr. V. Siva Kumar, Asst. Prof., Dept. of Pathology 3. Dr. N. Ramakrishna, Asst. Prof., Dept. of Microbiology

Task code (Standard)	Summary of Standards	Group Members
AAC 8	There is an established laboratory safety programme	<ol style="list-style-type: none"> 1. Dr. M. M. Suchitra, Professor, Dept. of Biochemistry (Lead Member) 2. Dr. V. Siva Kumar, Asst. Prof., Dept. of Pathology 3. Dr. N. Ramakrishna, Asst. Prof., Dept. of Microbiology
AAC 9	Imaging services are provided as per the scope of services of the organization	<ol style="list-style-type: none"> 1. Dr. S. Sarala, Professor, Dept. of Radiology (Lead Member) 2. Mr.S. Balaraju, RSO, Radiotherapy 3. Dr. R. RamyaPraya, Asst. Prof., Dept. of Nuclear Medicine 4. Dr.VC. Venkatesh, Lecture, Dept. of Radiology
AAC 10	There is an established quality assurance programme for imaging services	<ol style="list-style-type: none"> 1. Dr. S. Sarala, Professor, Dept. of Radiology (Lead Member) 2. Dr. R. RamyaPraya, Asst. Prof., Dept. of Nuclear Medicine 3. Dr.Harshith Sony, Lecture, Dept. of Radiology
AAC 11	There is an established safety programme in the imaging services	<ol style="list-style-type: none"> 1. Dr. S. Sarala, Professor, Dept. of Radiology (Lead Member) 2. Mr.S. Balaraju, RSO, Radiotherapy 3. Mr.M.V. Rangarao, Technician Gr.I. 4. Mr.D. Chandra Sekhar, Tech. Nuclear Medicine
AAC 12	Patient care is continuous and multidisciplinary.	<ol style="list-style-type: none"> 1. Dr. A. Sandeep Kumar Reddy, Asst. Prof., Dept. of Medicine(Lead Member) 2. Mrs. K. Madhavi, Professor & Principal i/c, College of Physiotherapy 3. Mrs.E. Bhuvanewari NS Gr.II 4. Mrs.J. Sarada Devi, NS Gr.II 5. Mrs. G. Indiramma, NS. Gr.II
AAC 13	The organization has an established discharge process.	<ol style="list-style-type: none"> 1. Dr. A. LokeswarReddy, Chief MEDCO (Lead Member) 2. Dr. K. Vivekanand, CMRO (Billing) 3. Mrs. C. Sunitha, NS Gr.I 4. Mrs.G. Indiramma, NS. Gr.II 5. Mr. B. Prakash, Security Officer
AAC 14	Organization defines the content of the discharge summary.	<ol style="list-style-type: none"> 1. Dr. A. Lokeswar Reddy, Chief MEDCO , (Lead Member) 2. Dr. K. Vivekanand, CMRO (Billing) 3. Mrs. C. Sunitha, NS Gr.I 4. Mrs. G.Indiramma, NS. Gr.II

Chapter: 2 - Care of Patients (COP)

Group Leader: Dr. Aloka Samantaray,
Professor & Head, Dept. of Anesthesiology

Co-ordinator: Dr.Rohit Gupta
Asst. Professor Department of EMD

Task code (Standard)	Summary of Standards	Group Members
COP 1	Uniform care to patients is provided in all settings of the organization and is guided by written guidance, and the applicable laws and regulations	1. Dr.V. Chandrasekhar, Asst. Prof., Dept. of Community Medicine, (Lead Member) 2. Dr.A. Lokeswar Reddy, ChiefMEDCO
COP 2	Emergency services are provided in accordance with written guidance, applicable laws and regulations.	Dr. A. Krishna Simha Reddy Professor, Dept. of Emergency Medicine,
COP 3	Ambulance services ensure safe patient transportation with appropriate care.	1. Dr.P. Subramanyam, Asst. Professor Dept.of EMD, (Lead Member) 2. Mr. B. Prakash, Security Officer 3. Mr.Elango Reddy, Fire Safety Officer
COP 4	The organization plans and implements mechanisms for the care of patients during community emergencies, epidemics and other disasters.	1. Dr.P. Subramanyam, Asst.Professor, Dept.of EMD. 2. Dr. D.S. Sujith Kumar, Assoc. Professor, Dept. of Community Medicine.
COP 5	Cardio-pulmonary resuscitation services are provided uniformly across the organization.	Dr.N.Hemanth, Professor, Dept.of Anaesthesiology
COP 6	Nursing care is provided to patients in the organization in consonance with clinical protocols.	Dr. M.Nagarathna,Assoc. Professor, College of Nursing,
COP 7	Clinical procedures are performed safely	Dr.P.Hemalatha, Asso. Professor Dept.of Anaesthesiology
COP 8	Transfusion services are provided as per the scope services of the organization, safely.	Dr. B.Suresh Babu,Asst. Professor, Dept.of Transfusion Medicine
COP 9	The organization provides care in intensive care and high dependency units in a systematic manner.	Dr. V. Sameeraja, Asst.Professor, Dept.of Medicine,
COP 10	Organization provides safe obstetric care.	Dr.B. Akila, Asst.Professor, Dept.of OBG
COP 11	Organization provides safe Pediatric services.	Dr. P. Puneeth, Assoc. Professor&HoD i/c,Dept.of Paediatrics
COP 12	Procedural sedation is provides consistently and safely	Dr.A.Krishna SimhaReddy,Professor, Dept. of Emergency Medicine
COP 13	Anesthesia services are provided in a consistent and safe manner	Dr. R. Sri Devi, Asst.Professor, Dept.of Anaesthesiology
COP 14	Surgical services are provided in a carried out safely.	1. Dr. S. B. Amarnath, Assoc. Professor, Dept. of ENT (Lead Member) 2. Dr. S. Shameem, Asst.Professor, Dept.of Anaesthesiology

Task code (Standard)	Summary of Standards	Group Members
COP 15	The organ transplant programme is carried out safely.	1. Dr.Ram, Prof & Head, Dept.of Nephrology, 2. Dr.Ch.Konda Reddy, Dept.of Urology
COP 16	The organization identifies and manages patients who are at higher risk of morbidity/mortality.	Dr.P.Janaki Subhadra, Professor, Dept. of Anaesthesiology
COP 17	Pain management for patients is done in a consistent manner.	Dr. M. Madhusudhan, Assoc. Prof., Dept. of Anaesthesiology
COP 18	Rehabilitation services are provided to the patients in a safe, collaborative and consistent manner.	Mr. K. Senthil Kumar, Asst.Professor College of Physiotherapy.
COP 19	Nutritional therapy is provided to patients consistently and collaboratively.	Mrs. K. Geetha, Asst. Dietician,
COP 20	End of life care is provided in a compassionate and considerate manner.	Dr.B.V Subramanian, Professor & Head, Dept. of R.T Dr.D.V.S.Kiran, Asst.Professor, Dept.of Medical Oncology

Chapter: 3 Management of Medication (MOM)

Group Leader : Dr. A. Umamaheswar Rao,
Prof. & HoD, Pharmacology

Co-ordinator: Dr. K. R. Subash, Professor,
Pharmacology & Mr.L.Satheesh, AD Stores

Task code (Standard)	Summary of Standards	Group Members
MOM 1	Pharmacy services and usage of medication is done safely.	Dr.K.Vijaya Chandra Reddy, Assoc. Prof, Pharmacology
MOM 2	The organization develops, updates and implements a hospital formulary.	Dr.M.Sravan, Clinical Pharmacist
MOM 3	Medications are stored appropriately and are available where required.	1. Mr.L.Satheesh, A.D (Stores) 2. Dr.Peta.Subramanyam, Sr.Pharmacist
MOM 4	Medication are prescribed safely and rationally	Dr.M.Babu, Asst. Prof, Dept. of Medicine
MOM 5	Medication orders are written in a uniform manner.	Dr.P.Anuhya, Clinical Pharmacist
MOM 6	Medication are dispensed in a safe manner.	1. Mr.L.Satheesh A.D (Stores) 2. Dr.Peta.Subramanyam, Sr.Pharmacist 3. Mrs.T.Prabhavathi, A.D (Nursing)
MOM 7	Medication are administered safely.	1. Mrs. T. Prabhavathi, A.D (Nursing) 2. Mrs C. Suneetha, Nursing Suptd., Grade-I 3. Mrs. E. Bhuvanewari NS Gr.II 4. Mrs. J. Sarada Devi, NS Gr.II 5. Mrs. G. Indiramma, NS. Gr.II 6. Mrs. I. Kanthamma, NS Gr.II
MOM 8	Patients are monitored after medication administration.	1. Mrs. T. Prabhavathi, A.D (Nursing) 2. Mrs C. Suneetha, Nursing Suptd., Grade-I 3. Mrs. E. Bhuvanewari NS Gr.II 4. Mrs. J. Sarada Devi, NS Gr.II 5. Mrs. G. Indiramma, NS. Gr.II 6. Mrs. I. Kanthamma, NS Gr-II
MOM 9	Narcotic drugs and psychotropic substances, chemotherapeutic agents and radioactive agents are used safely.	1. Dr.T.C.Kalawat, Prof & HoD, Dept. Nuclear Medicine. 2. Dr.T.Bhargavi, Assoc. Prof, Medical Oncology
MOM 10	Implantable prosthesis and medical devices are used in accordance with laid down criteria.	Dr. K. Venkat, Assoc. Prof, Dept. of Neurosurgery
MOM 11	Medical supplies and consumables are stored appropriately and are available where required.	1. Mr.L.Satheesh, A.D (Stores) & 2. Dr.Peta.Subramanyam, Sr.Pharmacist

Chapter: 4 - Patients Rights and Education (PRE)

Group Leaders : Dr. Rukmangadha,
Professor, of Pathology

Co-ordinator : Mr. NVS. Prasad, MSW

Task code (Standard)	Summary of Standards	Group Members
PRE 1	The organization protects and promotes patient and family rights and informs them about their responsibilities during care.	1. Dr.Anju Ade, Professor, Dept. Community Medicine, 2. Mr. K. Giribabu, AMRO 3. Smt. N. Hemalatha, H/N, OPD
PRE 2	Patient and family rights support individual beliefs, values and involve the patient and family in decision making processes.	1. Dr. N.Sharvani, Asso. Professor, Dept. of Physiology (Lead Member) 2. Mr. V. Rajasekhar, PRO 3. Smt. N. Hemalatha, H/N, OPD
PRE 3	The patient and/or family members are educated to make informed decisions and are involved in the care planning and delivery process.	1. Dr. N.Sharvani, Asso. Professor, Dept. of Physiology (Lead Member) 2. Mrs. P. Sunitha, Head Nurse 3. Mrs.D. Sailaja, Head Nurse 4. Mrs. D. Kalavathi, Head Nurse 5. Mrs. V. Annie Besant, Head Nurse 6. Mrs. Y. Nirmala, Head Nurse
PRE 4	Informed consent is obtained from the patient or family about their care.	1. Dr. K. Venkat, Assoc. Prof, Dept. of Neurosurgery 2. Mrs.S. Shakira, OT Head Nurse 3. Mrs. V. Radha Rani, OT Head Nurse 4. Mr. B. Prasad, Computer Assistant
PRE 5	Patient and families have a right to information and education about their healthcare needs.	1. Dr. K. Prathiba, Assoc. Prof. of Anatomy 2. Mrs. S. Vahede, Head Nurse, 3. Mrs. T. Suseela, Head Nurse, 4. Mrs. T.L. Varalakshmi, Head Nurse, 5. Mrs. A. Dhanabhagyam, Head Nurse, 6. Mrs. K. Saraswathi, Head Nurse, 7. Mrs. A. Premakumari, Head Nurse,
PRE 6	Patients and families have a right to information on expected costs.	1. Dr. K. Vivekanand, CMRO 2. Mrs. S. Santhana Lakshmi, Suptd., Credit Cell 3. Mr. M.L. Govindarajulu, Suptd., Billing Section 4. Mr. M. Hari, Sr. Asst., Credit Cell
PRE 7	The organization has a mechanism to capture patient's feedback and redress of complaints.	1. Dr. N. Rukmangadha, Professor & HoD of Pathology, 2. Mr.V. Pranaya Teja, Network Engineer, 3. Mr. S. Niranjan, Computer Asst. 4. Mr.N. Dilip, Computer Asst.
PRE 8	The organization has a system for effective communication with patients and / or families.	1. Dr. C.V. Praveen Kumar Reddy, Professor, Dept. of Plastic Surgery, 2. Mrs. E. Bhuvanewari NS Gr.II 3. Mrs. J. Sarada Devi, NS Gr.II 4. Mrs. G. Indiramma, NS. Gr.II 5. Mrs. I. Kanthamma, NS Gr.II

Chapter: 5 Hospital Infection Control (HIC)

Group Leader :Dr. R. Jayaprada,
Assoc. Prof. of Microbiology

Co-Ordinator : Dr. N. Ramkrishna,
Asst. Prof. of Microbiology

Task code (Standard)	Summary of Standards	Group Members
HIC 1	The organization has comprehensive and coordinated Hospital Infection Prevention and Control (HIC) programme aimed at reducing/eliminating risks to patients, visitors and providers of care and community.	<ol style="list-style-type: none"> 1. Dr. R. Jayaprada, Associate Professor, Dept. of Microbiology 2. Dr. V. Chandra Sekhar, Asst. Professor, Dept. of Community Medicine 3. Mrs. M. Lakshmidevi, HICN 4. Mrs. A. Shoba Rani, HICN 5. Mrs.K. Karpugam, HICN 6. Mrs. A. Reddamma, HICN
HIC 2	The organization provides adequate and appropriate resources for infection prevention and control	<ol style="list-style-type: none"> 1. Dr. K.V. KotiReddy, RMO 2. Dr. G. SwethaRao, Asst. Professor, Dept. of Psychiatry 3. Mrs.E. Bhuvaneswari, NS Gr-II 4. Mrs.S. Shakira, Head Nurse
HIC 3	The organisation implements the infection prevent in and control programme in clinical areas.	<ol style="list-style-type: none"> 1. Dr. K. M. Bhargav, Asst. Professor, Dept. of Medicine 2. Dr.M. Bhagya Lakshmi, Asst. Professor, College of Nursing 3. Mrs.G. Indiramma, NS Gr-II 4. Mrs. J. Saradadevi, NS Gr-II 5. Mrs. I. Kanthamma, NS Gr-II
HIC 4	The organisation implements the infection prevention and control programme in support services.	<ol style="list-style-type: none"> 1. Dr. S. Yamini, Asst. Professor, Dept. of Microbiology 2. Mr. TVP. Kumar, AE (Tech.) 3. Mrs. T. Prabhavathi, AD Nursing 4. Mrs. M. Sunitha Devi, Chief Dietician 5. Mrs. A. Umamaheswari, Sanitary Dept. 6. Mr. M. KanthaRao, Sanitary Supervisor
HIC 5	The organisation takes actions to prevent healthcare associated infection (HAI) in patients.	<ol style="list-style-type: none"> 1. Dr. A.V. ChaitanyaBhanu, Jr.Resident, Dept. of Dentistry. 2. Dr. S. Noble Ujeesh, Sr. Resident, Dept. of Microbiology 3. Mrs.Y. Nirmala, Head nurse (RICU) 4. Mrs.T. Suseela, Head Nurse (MICU) 5. Mrs.K. Rajitha, Staff Nurse, (NABH cell)

Task code (Standard)	Summary of Standards	Group Members
HIC 6	The organisation performs surveillance to capture and monitor infection prevention and control data.	<ol style="list-style-type: none"> 1. Dr. N. Ramakrishna, Asst. Professor, Dept. of Microbiology 2. Mrs.V. Radha Rani, Head Nurse 3. Mrs. D. Mary Susella , Head Nurse 4. Mrs. A. Shoba Rani, Head Nurse
HIC 7	Infection prevention measures include sterilization and /or disinfection of instruments, equipment and devices.	<ol style="list-style-type: none"> 1. Dr. R. Jayaprada, Associate Professor, Dept. of Microbiology 2. Mrs. T. Prabhavathi, AD Nursing 3. Mrs.B. Prameela, Staff Nurse, (CSSD) 4. Mr.T.Gangadhara, Sr. Autoclave Tech.
HIC 8	The organisation takes action to prevent or reduce healthcare associated infection in its staff.	<ol style="list-style-type: none"> 1. Dr. V. Sameeraja, Asst. Professor, Dept. of Medicine 2. Dr. G. VisweswaraRao,Asst. Professor, Dept. of Community Medicine 3. Mrs.J.M. Malathi, Head Nurse 4. Mrs. C. Reddy Vasantha, Head Nurse

Chapter 6 : Patient Safety and Quality Improvement

Group Leader : Dr V S Kiranmayi,
Dept. of Biochemistry

Co-ordinator : Dr R. Arun,
Dept. of Transfusion Medicine

Task code (Standard)	Summary of Standards	Group Members
PSQ 1	The organization implements a structured patient-safety programme.	1. Dr.Pallavi Chalivendra, Asst. Prof., Dept. of Pharmacology. 2. Mr P.P. Reddy, Driver, PRO office
PSQ 2	The organization implements a structured quality improvement and continuous monitoring programme.	1. Dr B. Deepthi, Asst. Prof., Dept. of Pathology. 2. Mrs.V. Radha Rani, Head Nurse
PSQ 3	The organization identifies key indicators to monitor the structures process and outcomes, which are used as tools for continual improvement activities.	1. Dr B. Hari Prasad, Assoc. Prof., Dept. of General Surgery 2. Dr N. Lakshmana, Asst. Prof., Dept. of Biochemistry 3. Mrs. B. Kokilamma, Asst. Prof., CON
PSQ 4	The organization uses appropriate quality improvement tools for its quality improvement activities.	1. Dr D. Ravisankar, Assoc. Prof., Dept. of Community Medicine 2. Mr P. Ravi, Lab Technician, Dept. of Endocrinology
PSQ 5	There is an established system for clinical audit.	Dr R. Arun, Assoc. Prof., Dept. of Transfusion Medicine
PSQ 6	The patient safety and quality improvement programme are supported by the management.	1. Dr A. Surekha, Assoc. Prof., Dept. of Dermatology. 2. Mr G. Srinivas, Sr. Assist., Accounts Dept.
PSQ 7	Incidents are collected and analyzed to ensure continual quality improvement.	1. Dr.Pranabandu Das, Assoc. Professor, Dept. of Radiation Oncology. 2. Mrs C. Suneetha, Nursing Suptd., Grade-I

Chapter : 7 - Responsibilities of Management (ROM)

Group Leader : Dr.K.V.Sreedhar Babu,
Professor & Head of Transfusion Medicine

Co-ordinator : Dr. M. Yerramma Reddy,
Dy. Registrar

Task code (Standard)	Summary of Standards	Group Members
ROM 1	The organization identifies those responsible for governance and their roles are defined.	1. Dr.K.V.SreedharBabu, Professor & Head of Transfusion Medicine, 2. Dr. M. Yerramma Reddy, Dy. Registrar, Purchase
ROM 2	The organization is ethically managed by the leaders.	1. Dr.D.S. MadhuBabu, Professor Head, Dept. of Dentistry 2. Mrs. C. Ushakiran, Assistant Professor, College of Nursing
ROM 3	The organization is headed by a leader who shall be responsible for operating the organization on a day-to-day basis.	1. Dr. V. Chandra Sekhar, Assistant Professor, Department of Community Medicine 2. Mr. D. Anandbabu, AD, O/o The Director cum VC 3. Mrs. P. Nagaprasuna, Supdt, Establishment Section
ROM 4	The organization displays professionalism in its functioning	1. Dr. D. Srivani,Assistant Professor, Department of Anatomy 2. Mrs. G.P. Majula, AD, Establishment Section
ROM 5	Management ensures that patient-safety aspects and risk-management issues are an integral part of patient care and hospital management.	1. Dr.VinodBhan, Professor, Department of CT Surgery 2. Mr. A. NagendraBabu, Supdt., GM Office 3. Mr. Mohan, PA, GM Office 4. Mr.K. Narasimha Reddy, AE (Electrical)

Chapter : 8 - Facilities Management and Safety (FMS)

Group Leader : Dr. R. Ram, Medical Superintendent

Co-ordinator : Mrs. M. Prasana Lakshmi, Dy. Director (GM)

Mr. E. Dowriswamy, Sr. BME

Task code (Standard)	Summary of Standards	Group Members
FMS 1	The organization has a system in place to provide a safe and secure.	<ol style="list-style-type: none"> 1. Dr. K. Madhavi, Professor, college of Physiotherapy, 2. Mr.Elango Damodaran, Fire Safety Officer, 3. Mr.P.S. Prakash Babu,AE Civil SVIMS 4. Mr. K. Bannerjee, Sr. Fitter
FMS 2	The organization's environment and facilities operate in a planned manner and promotes environment friendly measures.	<ol style="list-style-type: none"> 1. Mrs. M. Prasana Lakshmi, Dy. Director (GM), 2. P.S. PrakashBabu,AE Civil SVIMS 3. Mr. K. Narasimha Reddy, AE (Electrical)
FMS 3	The organization environment and facilities operate to ensure the safety of patients, their families, staff and visitors.	<ol style="list-style-type: none"> 1. P.S. PrakashBabu,AE Civil SVIMS 2. Mr. B. Prakash, Security Officer 3. Mr. K. Narasimha Reddy, AE Electrical 4. Mrs. C. Sunitha, Nursing Supt. Gr-I , 5. 4.Dr. EGTV Kumar, Sr. Tech.
FMS 4	The organization has a programme for the facility, engineering support services and utility system.	<ol style="list-style-type: none"> 1. Mrs. M. Prasana Lakshmi, Dy. Director 2. Mrs. T. Prabhavathi, AD Nursing, 3. Mr. S. Maheshwarnath, AC Plant Tech. 4. Mr. K. Narasimha Reddy, AE Electrical 5. Mrs. C. Sunitha, Nursing Supt. Gr-I, . 6. Mr. K. Bannerjee,Sr. Fitter, 7. Mrs. B. Prameela, Staff Nurse, CSSD,
FMS 5	The organization has a programme for medical equipment management.	Mr. E. Dowriswamy, Sr. BME
FMS 6	The organization programme for medical gases, vacuum and compressed air.	Mrs. M. Prasana Lakshmi, Dy. Director (GM) and Gas Room Operating Staff Members
FMS 7	The organization has a plan for fire and non-fire emergencies within the facilities.	<ol style="list-style-type: none"> 1. Mr.ElangoDamodaran,Fire Safety Officer & Fire Safety Team, 2. Mr. K. Narasimha Reddy, AE Electrical 3. Mr. B. Prakash,Security Officer 4. Mr. K. KanthaRao, Sanitary Supervisor 5. Mr. NVS. Prasad,MSW 6. Mrs. M. Prasana Lakshmi, Dy. Director (GM) and Staff Members 7. (GM) and Staff Members 8. Mr. TVP. Kumar, AE Water Workers 9. Mrs. T. Prabhavathi, AD Nursing

Chapter: 9 Human Resource Management (HRM)

Group Leader: Mr. G. Suresh Kumar,
A.D-I (Estt. Sec.)

Co-ordinator: Smt. G. P. Manjula,
A.D -II (Estt.Sec.)

Task code (Standard)	Summary of Standards	Group Members
HRM 1	The organization has a documented system of human resource planning.	1. Dr. K. V. SreedharBabu, Registrar 2. Mr.G. Suresh Kumar, A.D-I (Estt. Sec.) 3. Mrs.G.P. Manjula, A.D-II (Estt. Sec.) 4. Mrs.P. Naga Prasuna, Supdt., 5. Mrs.V. Aruna, Supdt., 6. Mr.M. VenkataRamana Reddy, Supdt.,
HRM 2	The organization implements a defined process for staff recruitment.	1. Mrs.P. Naga Prasuna, Supdt., 2. Mrs.V. Aruna,Supdt., 3. Mr.M. VenkataRamana Reddy, Supdt.,
HRM 3	Staff are provided induction training at the time of joining the organization.	1. Mrs.P. Naga Prasuna, Supdt., 2. Mrs.V. Aruna, Supdt.,
HRM 4	There is on-going programme for professional training and development of the staff.	1. Mrs.P. Naga Prasuna, Supdt., 2. Mrs.V. Aruna, Supdt., 3. Mr.G. Babu, A.D.
HRM 5	Staff are appropriately trained based on their specific job description	1. Mrs. P. Nagaprasuna, Superintendent, Establishment Section 2. Mrs C. Suneetha, Nursing Suptd., Grade-I
HRM 6	Staff are trained in safety and quality-related aspects.	1. Dr. R. Jayaprada, Assoc.Professor, Dept. of Mircrobiology 2. Dr. V S Kirnamayi, Assoc. Professor, Dept. of Biochemistry 3. Mr.ElangoDamodaran Reddy Fire Safety Officer 4. Mr. B. Prakash,Security Officer
HRM 7	An appraisal system for evaluating the performance of staff exits as an integral part of the human resource management process.	1. Mr. G. Suresh Kumar, A.D-I (Estt. Sec.) 2. Mrs. G. P. Manjula , A.D -II (Estt.Sec.) 3. Mrs. M. Prasana Lakshmi, DD (GM) 4. Mrs. T. Prabhavathi, AD Nursing
HRM 8	Process for disciplinary and grievance handling is defined and implemented in the organization.	1. G. Suresh Kumar,A.D-I (Estt. Sec.) 2. G. P. Manjula, A.D-II (Estt. Sec.)
HRM 9	The organization promotes staff well-being addresses their health and safety needs.	1. Dr. V. Vanajakshamma, Professor, Cardiology & Team 2. Mr. M. VenkataRamana Reddy, Supdt., 3. Mr. A. Rama SubbaRamudu, Supdt., 4. Mr.K.GiriBabu, AMRO
HRM 10	There is a documented personal information for each staff member.	1. P. Naga Prasuna, Supdt.,(Estt. Sec.) 2. A. Rama SubbaRamudu, Supdt., (Estt. Sec.)

Task code (Standard)	Summary of Standards	Group Members
HRM 11	There is a process for credentialing and privileging of medical professionals, permitted to provide patient care without supervision.	<ol style="list-style-type: none"> 1. Dr. Alok Sachan, Prof & HOD, Dept. of Endocrinology 2. Dr. B. Manilal, Assoc. Prof, Surgical Oncology 3. Dr. K. Venkat, Assoc. Prof, Neuro Surgery 4. Mr. G. Suresh Kumar, A.D -I (Estt. Sec.) 5. Mrs. P. Naga Prasuna, Supdt.,
HRM 12	There is a process for credentialing and privileging of nursing professionals, permitted to provide patient care without supervision.	<ol style="list-style-type: none"> 1. Dr. BCM. Prasad, Professor, Dept. of Neurosurgery 2. Ms. T. Prabhavathi, A.D (Nursing) 3. Dr. P. Sudharani, Professor, College of Nursing 4. Mrs. G.P. Manjula, A.D -II (Estt. Sec.) 5. Mrs. V. Aruna, Supdt., (Estt. Sec.)
HRM 13	There is a process for credentialing and privileging of para-clinical professionals, permitted to provide patient care without supervision.	<ol style="list-style-type: none"> 1. Dr. B. Venkata Ramana, Assoc. Prof, Microbiology 2. G. Suresh Kumar, A.D -I (Estt. Sec.) 3. M. Venkata Ramana Reddy, Supdt.,

Chapter: 10 Information Management System (IMS)

Group Leader : Mrs. K. Bhavana, IT Manager

Co-ordinator : Mr. R. Sandeep Kumar, AMRO

Task code (Standard)	Summary of Standards	Group Members
IMS 1	Information needs of the patients, visitors, staff, management and external agencies are met.	<ol style="list-style-type: none"> 1. Mrs.K.Bhavana, IT Manager 2. Mrs.I.Kanthamma, Nursing Supdt., Grade-II 3. Mr.B.Prasad (Computer Assistant)
IMS 2	The organisation has process in place or management and control of data and information	<ol style="list-style-type: none"> 1. Mr.Pranayatheja (Network Adminrator) 2. Mr. A.Savithri H/N, urology
IMS 3	The patients cared for by the organization have a complete and accurate medical record.	<ol style="list-style-type: none"> 1. Mr.K.GiriBabu, AMRO and 2. Mr. B.Prasad, Computer Assistant.
IMS 4	The medical records reflects the continuity of care.	<ol style="list-style-type: none"> 1. Mr.K.GiriBabu, AMRO 2. Mr.R. Sandeep Kumar, AMRO
IMS 5	The organization maintains confidentiality, integrity and security, data and information.	<ol style="list-style-type: none"> 1. Dr.K.V. Koti Reddy, RMO, 2. Dr.P. PrabhanjanKumar , Asst. Prof. Dept. of Ophthalmology 3. Mr. R. Sandeep Kumar, AMRO
IMS 6	The organization ensures availability of current and relevant documents, records, data and information and provides for retention of the same.	<ol style="list-style-type: none"> 1. Mr. K.S. Mohan Srinivas, Royal, Supdt., MRD 2. Mr.R. Sandeep Kumar, AMRO
IMS 7	The organization carries out a review of medical records.	<ol style="list-style-type: none"> 1. Dr. D.T. Katyarmal, Professor, Dept. of Medicine 2. Mr.N.S.R.Muralikrishna, MRO, Dr. YSR Arogyasri Dept. 3. Mr. K.S. Mohan Srinivas, Royal, Supdt., MRD 4. Mrs.C. .Sunitha, Nursing Supdt., Grade-I