

# **FACULTY HANDBOOK**

**SHAHIDA ISLAM MEDICAL COMPLEX LODHRAN**

## **FOREWORD**

It is with great pleasure that I welcome you to SHAHIDA ISLAM MEDICAL COMPLEX. We always look forward to our newly inducted faculty members as they bring with them a new ray of experience. You being the part of "ISLAM FAMILY" will not only teach the future physicians, but also help us providing best health care in the associated teaching hospital this puts upon us a great responsibility to provide a fertile ground for developing faculty. We strive to inculcate necessary ethics to ensure faculty of this medical complex is professional, empathic, and responsible.

Wishing you the best in the future.

**Prof. Dr Gulzar Ahmed**  
**Chairman Administrative committee**  
**Shahida Islam Medical Complex**

**The guidelines are divided into following sections:**

- **Mission & Vision Statement**
- **Overview of Shahida Islam Medical Complex with organizational structure (organogram).**
- **Specialties available at the hospital.**
- **Employee Code of Conduct**
- **General / Specific Job Description**
- **HR policy**
- **Employees Rights and their responsibilities**
- **Patients' Rights and Responsibilities**
- **Recognition/appreciation criteria and Performance Appraisal Form.**
- **Fire and general safety**
- **Infection Control**
- **Quality assurance and improvement system (CQI)**
- **Waste management Plan**

## **MISSION OF THE MEDICAL COMPLEX**

To create a new genre of doctors trained to the highest levels of competence, committed to excellence, following professional ethics and ready to serve the ailing humanity through:

- Innovative Education.
- Research Distinction.
- Clinical Excellence.
- Evidence based health management.

## **VISION OF THE MEDICAL COMPLEX**

To be a globally acclaimed institution, recognized for excellence in Medical Education, Scientific Research and Patient Care

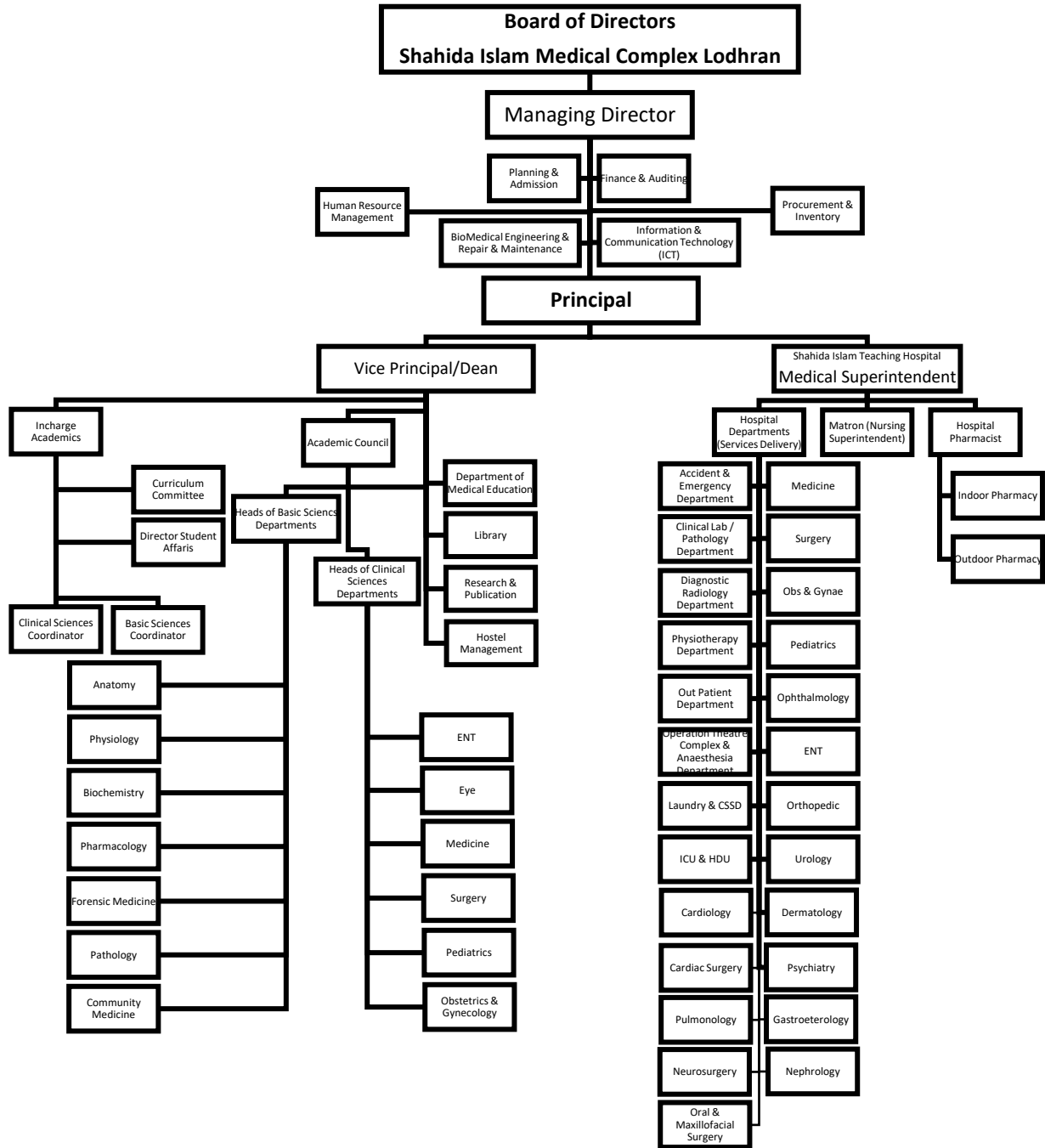
## OVERVIEW OF SHAHIDA ISLAM MEDICAL COMPLEX

The chairman and the board of governors decided to build a state-of-the-art hospital and affiliated medical college in this underdeveloped area to benefit the community's poor people. The project started in 2013, and Shahida Islam Medical Complex was able to admit its first batch of:

- **MBBS** program in Shahida Islam Medical College (SDMC) in 2016 recognized by PM&DC.
- **BDS** program in Shahida Islam Dental College (SDDC) in 2018 recognized by PM&DC.
- **DPT** program in Shahida Islam College of Rehabilitation Sciences (SICRS) in 2018 affiliated by University of Sargodha.
- **BScN Generic** and **BSN** Post RN nursing program in Shahida Islam Nursing College (SINC) in 2019 recognized by PNC.
- **PARA MEDICAL** prog in Shahida Islam Para medical School (SIP) IN 2019 affiliated by PMF.
- Pharmacy program in Shahida Islam College of Pharmacy(SICP) in 2020 recognized by PCP

Shahida Islam Teaching Hospital (600 bedded) started its operations in 2016. The complex arranged free medical camps and started free beds and OPD service, continuing till now. Our main campus is situated on the national highway (N-5) in Lodhran. Our institution is spread over a sprawling 115 Kanal of Land and houses modern, attractive, and state of the art lecture theatres, auditoriums, dissection halls, laboratories and more.

# ORGANOGRAM OF SHAHIDA ISLAM MEDICAL COMPLEX



## SPECIALTIES AVAILABLE AT SHAHIDA ISLAM MEDICAL COMPLEX

- The currently available specialties in the hospital are (alphabetically arranged).

Sr. No	Department	Sr. No	Department	Sr. No	Department
01	A&E	08	EYE	15	Pediatrics & Nursery
02	Cardiac Surgery	09	Gastroenterology	16	Physical Therapy
03	Cardiology	10	Gynae	17	Plastic Surgery
04	Clinical Hematology	11	Medicine	18	Psychiatry
05	Dental	12	Nephrology	19	Pulmonology
06	Dermatology	13	Neurosurgery	20	Surgery
07	ENT	14	Orthopedic	21	Urology

## **SHAHIDA ISLAM MEDICAL COMPLEX CODE OF CONDUCT**

- **General Work Practices**

Employees of Shahida Islam Medical complex including faculty, researchers, fellows, residents, support staff, administrative staff etc. shall enjoy an environment free from implicit and explicit behavior used to control, influence, or affect the well-being of any member of hospital community. Harassment of any individual based on race, color, gender/sex, age, religion/ religious creed, national origin, ancestry, sexual orientation, disability/ handicap, genetic information, or any other characteristic is a ground for disciplinary action.

- **Unauthorized Gathering and Disruptive Behavior**

It is the policy of the institution that all grievances should be addressed through authorized procedures and any gathering of staff/ individuals with a purpose to air their grievances in a collective manner is strictly forbidden, as it could interfere in patient care and working of the institution.

- **Workplace Civility**

The purpose of this policy is to set forth the institution's desire to create and maintain an environment free from disruptive, threatening, bullying and violent behavior. The institution shall not tolerate inappropriate or intimidating behavior within the workplace.

- **Damage/ Loss of Institutional Property**

The medical complex assigns responsibility to persons responsible for loss/ damage to institutional property and to follow up effectively by executing appropriate disciplinary action.

- **Fraud and Abuse Reporting**

It is the policy of the institution to provide and maintain a culture characterized by integrity, responsible behavior, and a commitment to the highest legal and ethical standards. All institutional employees share responsibility for ensuring that the institution conducts its activities in a compliant manner.

- **Breach of Confidentiality**

All suspected breaches of confidentiality and information security shall be investigated in conformance with institution procedures for complaints related to breach of privacy and information security. Penalties shall be applied in accordance with the requirements of these rules and regulations.

- **Disclosure of Conflict of Interest**

It is the policy of the institution to define broad principles and behavior standards that promote a high level of ethical conduct. This policy is intended to promote the highest standard of public trust and integrity while protecting all of institution's stakeholders by providing the means to avoid or resolve situations that may otherwise place these stakeholders in ethically questionable situations. This policy applies to all institutional employees.

- **Dress Code/Personal Hygiene**

The personal appearance of employees of the institution is important in our interactions with patients and visitors. Employees shall dress in a way that establishes confidence and respect for the institution, while maintaining the health and safety of patients, visitors, and employees. The following factors are taken into consideration in defining the dress code policy:

- **Probation/ Introductory Period**



It is the policy of the institution to require newly hired employees to complete a 60 calendar days Probation/ Introductory Period. The Introductory Period is intended to provide the employee with an opportunity to demonstrate his or her ability to achieve a satisfactory level of performance and to determine whether the new position meets the employee's expectations. This policy applies to all employees working in the medical complex and it uses this period to evaluate the employees' capabilities, work habits and overall performance. Where appropriate, weakness in performance, behavior or development should be brought to the employee's attention for correction.

- **Income Tax Deduction from Salaries**

The institution deducts the income tax from salaries on monthly basis as per Income Tax Ordinance/ Government of Pakistan's tax slabs and provides details/ calculations of such deductions during the year to the employees on request basis. The deducted tax is deposited in the Government Treasury on a timely basis.

- **Advance Salary**

As per institutions policy, advance salaries are not granted. However, exceptions with appropriate approvals may be entertained for house rent advances, for relocating employees, on festive occasions such as Eid etc.

# GENERAL/ SPECIFIC JOB DESCRIPTION

## Clinical Sciences

### **PROFESSOR / HEAD OF DEPARTMENT (CLINICAL SCIENCES)**

The duties and responsibilities of a Professor (Clinical Sciences) shall be as follows:

#### **(A) Teaching**

- 1) To supervise and share teaching of undergraduate and postgraduate trainees/students in the Department.
- 2) To participate in clinical teaching/learning sessions at all levels i.e., morning reports, journal clubs and teaching rounds with trainees.
- 3) To schedule and supervise teaching assignments of Associate Professors, Assistant Professors and Senior Registrars/Lectures in the Department.
- 4) To plan and participate in the core curriculum development and teaching program for the trainees/students.
- 5) To guide postgraduate dissertation work and to hold demonstrations of complicated cases of academic interest.
- 6) To supervise and finalize internal assessment of trainees/students and timely dispatch to the Examination Department of the University.
- 7) To perform examination duties e.g., paper setters, internal/external examiner and/or paper assessor etc. of the University.

#### **(B) Research**

- 1) To play a leadership role in organizing research in the Department with special emphasis on collaboration and multidisciplinary research.
- 2) To conduct and supervise clinical and epidemiological research and present papers in national and international conferences/seminars.
- 3) To publish research articles in reputed indexed journals and also to encourage junior faculty and trainees to write research articles for publications.
- 4) To participate in research conferences/seminars/workshops as much as possible to keep oneself updated in the field.
- 5) To plan and organize research workshops/seminars/conferences.

#### **(C) Administration**

- 1) To coordinate intra- and inter-department activities.
- 2) To participate in various meetings and committees of the College / University.
- 3) To ensure maintenance of departmental decorum, discipline, conduct and patient service care.
- 4) To ensure timely availability of necessary input to the Department in the form of equipment, materials, academic expertise and patient care.
- 5) To maintain a record of the performance of the faculty and personnel in the Department.
- 6) To arrange/recommend educational workshops / seminars for continuing professional development (CPD) of the faculty.
- 7) To be responsible for health and safety in own area of responsibility

#### **(D) Patient Care Services**

- 1) To provide consultation at outpatient and in-patient facilities (ward, rounds, OPDs and on call duties).
- 2) To monitor and evaluate young doctors responsible for patient care.
- 3) To advise the institution in developing cost-effective patient care.
- 4) To guide and train the juniors in completion of various medical documents.

## **ASSOCIATE PROFESSOR (CLINICAL SCIENCES)**

The duties and responsibilities of an Associate Professor (Clinical Sciences) shall be as follows:

### **(A) Teaching**

- 1) To engage in teaching at all levels using relevant teaching methods e.g., lectures, seminars, tutorial, etc., working as part of the teaching team.
- 2) To develop and apply appropriate teaching techniques and materials, which may be novel or innovative, to create interest, understanding and enthusiasm amongst students/trainees.
- 3) To undertake curriculum design and deliver material across programs of study at various levels, using appropriate teaching, learning support and assessment methods, reviewing, and improving as required.
- 4) To guide students in their clinical and pre-clinical work as assigned by the Professor.
- 5) To assist and supervise the students in their library dissertation, seminar presentations etc., as assigned by the Professor.
- 6) To carry out examination / assessment duties assigned by the supervisor or the University e.g., paper setter, internal/external examiner, paper assessor, etc.

### **(B) Research**

- 1) To play a leadership role in organizing research in the Department with special emphasis on collaboration and multidisciplinary research.
- 2) To conduct and supervise clinical and epidemiological research and present papers in national and international conferences/seminars.
- 3) To publish research articles in reputed indexed journals and also to encourage junior faculty and trainees to write research articles for publications.
- 4) To participate in research conferences/seminars/workshops as much as possible to keep oneself updated in the field.
- 5) To plan and organize research workshops/seminars/conferences.

### **(C) Administration**

- 1) To assist the Professor in departmental administrative work which may include:
  - a. Overall coordination of duties of all staff in the Department.
  - b. Maintenance of patient record in the Department.
  - c. Assigning work to postgraduate trainees/students.
  - d. Maintain a record of academically important clinical cases.
  - e. Patient counseling and departmental public relations.
- 2) To participate in various meetings and committee activities as assigned by the Professor.
- 3) To conduct clinical audit when required.
- 4) To perform the duties of Professor in his absence.

### **(D) Patient Car Services**

- 1) To discharge clinical duties in the teaching hospital by conducting ward rounds, OPDs and providing emergency cover.
- 2) To play preceptor's role for the juniors and trainees according to the roster given by the Department Head.
- 3) To participate in the development of SOPs and treatment guidelines and protocols.
- 4) To strive for excellence in providing standard patient care and documentation and guide the juniors in this regard.
- 5) To train the juniors in writing patient Discharge summaries and to guide there in completion of various forms.

## **ASSISTANT PROFESSOR (CLINICAL SCIENCES)**

The duties and responsibilities of an Assistant Professor (Clinical Sciences) shall be as follows:

### **(A) Teaching**

- 1) To take lecture classes and attend clinics.
- 2) To monitor, assess and mark students' work, maintain accurate records and progress.
- 3) To demonstrate various clinical treatment modalities to the students.
- 4) To schedule and conduct seminars and journal clubs for students.
- 5) To provide hands-on teaching of complicated cases of academic interest.
- 6) To support and guide all students in their curricular and extra-curricular activities.
- 7) To perform examination/assessment duties assigned by the Head or the University.

### **(B) Research**

- 1) To design and conduct clinical and educational research studies under guidance of senior faculty.
- 2) To encourage juniors and students to get involved in short term clinical projects of collaboration nature to create a research culture in the institution.
- 3) To publish research articles in reputed indexed journals.

### **(C) Administration**

- 1) To act under the senior faculty and departmental/section head for all administrative assignments.
- 2) To work as a member of a team for various committees of the department as designated from time to time.
- 3) To actively participate in academic seminars.
- 4) To implement institutional policies of clinical teaching and curricular delivering, involving senior registrars and other necessary personnel.
- 5) To manage academic affairs of the Department and hospital in-patients by:
  - a. Assigning duties to the senior registrars and other juniors under his jurisdiction.
  - b. Participating in curriculum/course designing activities of various classes and making a rotation structure.
  - c. Helping senior registrars in allocating beds to the rotating students and assigning tasks to the trainees.
  - d. Assisting senior faculty in smooth running of the teaching programs.

### **(D) Patient Care Services**

- 1) To discharge clinical duties in the teaching hospital by conducting ward rounds, OPDs and providing emergency cover.
- 2) To monitor and evaluate junior doctors responsible for patient care.
- 3) To strive for excellence in providing standard patient care and documentation and guide juniors in this regard.

## **SENIOR REGISTRAR/REGISTRAR (CLINICAL SCIENCES)**

The duties and responsibilities of a Senior Registrar/Registrar shall be as follows:

- 1) To work as clinical instructor and assistant consultant at the teaching hospital.
- 2) To supervise Registrar, SMOs/MOs/CMOs, House Officers, Nurses and other staff working in the Unit.
- 3) To stay on call for emergency cases and critically ill patients and be immediately summoned to the hospital when required.
- 4) To accompany the faculty member on teaching and administrative rounds and be overall responsible for patient care, proper documentation, and maintenance of record.
- 5) To operate on scheduled and emergency cases under the supervision of Assistant Professor.
- 6) To allocate patient beds to clinical students and help them in clinical examination to achieve required clinical skills.
- 7) To provide out-patients consultation, attend to inter-departmental references and examine in-patients in morning and evening rounds and more frequently when warranted.
- 8) To be responsible for all student related activities e.g., completion/maintenance of history books, logbooks, procedure cards, attendance record and rotation assessment record.
- 9) To ensure that the record of patients treated by his/her unit is legible, updated and correctly reflects the patient's condition and response to treatment.
- 10) To prepare and verify medical reports, death reports and medico-legal reports issued by the Unit.
- 11) To coordinate clinical audit, teaching, and research activities of the Assistant Professor in achieving the targets.
- 12) To ensure that all equipment, instruments,
- 13) and appliances are properly maintained.

# Basic Sciences

## **PROFESSOR / HEAD OF DEPARTMENT (BASIC MEDICAL SCIENCES)**

The duties and responsibilities of a Professor (Basic Medical Sciences) shall be as follows:

### **(A) Teaching**

- 1) To oversee the design and development of the overall curricular and develop and deliver a range of programs of study (sometimes for entirely new courses) at various levels.
- 2) To develop the quality assurance framework within the University's overall framework, including the validation and revalidation of courses, and student admission and assessment.
- 3) To transfer knowledge including practical skills, methods and techniques.
- 4) To encourage the development of innovative approaches to course design and delivery and ensure that teaching design and delivery comply with the quality and educational standards and regulations of the department.
- 5) To challenge thinking, foster debate and develop the ability of students to engage in critical discourse and rational thinking.
- 6) To supervise student projects, field trips and, where appropriate, placements.
- 7) To set, mark and assess work and examinations and provide feedback to students.
- 8) To ensure that the teaching content and methods of delivery respond to issues relating to staff and student needs.
- 9) To schedule and supervise teaching efforts of Associate Professors, Assistant Professors and Lectures in the Department.
- 10) To guide postgraduate dissertation work and to hold demonstrations of complicated cases of academic interest.
- 11) To perform examination duties e.g., paper setters, internal/external examiner and/or paper assessor, etc., of the University.
- 12) To remain current in discipline and update course content when appropriate to reflect the current levels of knowledge in the discipline.

### **(B) Research**

- 1) To lead the development and implementation of research strategy.
- 2) To lead and co-ordinate research activity in the subject including determining relevant research objectives and preparing research proposals.
- 3) To lead research and collaborative partnerships with other educational institutions or other bodies.
- 4) To lead bids for research, consultancy, and other additional funds.
- 5) To write or contribute to publications or disseminate research findings using other appropriate media.
- 6) To seek practical application of research findings.
- 7) To make presentations at national and international conferences and similar events.
- 8) To carry out independent research and act as principal investigator and project leader.
- 9) To act as a referee and contribute to peer assessment.
- 10) To plan and organize research workshops/seminars/conferences.

### **(C) Communication**

- 1) To disseminate conceptual and complex ideas to a wide variety of audiences using appropriate media and methods to promote understanding.
- 2) To be routinely involved in complex and important negotiations both within the University and with external bodies.
- 3) To prepare and submit proposals and applications to external bodies, e.g., for funding and accreditation purposes.

### **(D) Administration**

- 1) To coordinate intra- and inter-department activities and promote an environment of learning and research in the Department like journal club meetings, seminars, case discussions, etc.
- 2) To participate in various meetings and committees of the University.
- 3) To involve in the recruitment, management and development of staff and act as a mentor to colleagues.
- 4) To ensure maintenance of departmental decorum, discipline, and conduct.

- 5) To maintain departmental records, documents and accounts.
- 6) To maintain a record of the performance of the faculty and personnel in the Department.
- 7) To arrange/recommend educational workshops / seminars for continuing professional development (CPD) of the faculty.
- 8) To provide quality laboratory services to outdoor and indoor patients of the teaching hospital, where available.
- 9) To lead and develop internal and external networks to foster collaboration and share information and ideas, promoting both the subject and the University.
- 10) To promote and market the work of the department in the subject area both nationally and internationally.
- 11) To ensure that staff are suitably qualified to work within their own area.
- 12) To appraise and advise staff on personal and career development plans.
- 13) To promote an institutional approach and develop team spirit and team coherence.
- 14) To foster inter-disciplinary teamwork.
- 15) To develop and communicate a clear vision of the department's strategic direction.
- 16) To be responsible for dealing with referred issues for students within own educational programs.
- 17) To provide first line support for colleagues, referring them to sources of further help if required.
- 18) To take overall responsibility for the organizing and deployment of resources within own areas of responsibility, and actively contribute to the overall management of the department in areas such as budget management and business planning.
- 19) To be responsible for health and safety in own area of responsibility.

## **ASSOCIATE PROFESSOR (BASIC MEDICAL SCIENCES)**

The duties and responsibilities of an Associate Professor (Basic Medical Sciences) shall be as follows:

### **(A) Teaching**

- 1) To undertake research-led teaching at different levels on postgraduate taught courses, regularly collecting, and responding to, student feedback.
- 2) To contribute at an appropriate level to university and faculty policy and practice in teaching.
- 3) To play a significant role in the design, development and planning of modules and programs within the subject area as required.
- 4) To play a significant role in the review of programs and in quality assurance and enhancement as required.
- 5) To develop innovative approaches to learning and teaching as appropriate.
- 6) To provide timely feedback and assessment of coursework and examinations.
- 7) To provide general support and guidance to students, resolving issues and/or referring to specialists, where appropriate.
- 8) To act as an academic advisor, supporting students in maximizing the benefit of their time at the University.
- 9) To supervise students undertaking research projects as appropriate.
- 10) To perform regular evaluations of student performances and submit students' grades and course reports in a timely manner.
- 11) To perform examination duties e.g., paper setters, internal/external examiner and/or paper assessor, etc., of the University.
- 12) To remain current in discipline and update course content when appropriate to reflect the current levels of knowledge in the discipline.

### **(B) Research**

- 1) To play a leadership role in organizing research in the Department.
- 2) To conduct and supervise basic and epidemiological research and present papers in national and international conferences/seminars.
- 3) To obtain grants to support research programs.
- 4) To publish research articles in reputed indexed journals and also to encourage junior faculty and trainees to write research articles for publications.
- 5) To participate in research conferences/seminars/workshops.
- 6) To plan and organize research workshops/seminars/conferences.
- 7) To act as editor/reviewer of research journals.

### **(C) Administration**

- 1) To assist the Professor in maintaining an environment of learning and research in the Department by regularly organizing journal club meetings, seminars, case discussions, etc.
- 2) To participate in various meetings and committees of the University.
- 3) To ensure maintenance of departmental decorum, discipline, and conduct.
- 4) To maintain departmental records, documents, and accounts.
- 5) To arrange educational workshops / seminars for continuing professional development (CPD) of the faculty.



## **ASSISTANT PROFESSOR (BASIC MEDICAL SCIENCES)**

The duties and responsibilities of an Assistant Professor (Basic Medical Sciences) shall be as follows:

### **(A) Teaching**

- 1) To contribute to the intellectual life of the University by engaging in high quality core teaching.
- 2) To contribute to the monitoring and enhancement of quality in teaching within the department.
- 3) To actively seek and pursue training in teaching technology and practice, for example by participating in CME activities.
- 4) Teaching and examining doctoral and masters level students.
- 5) Supervising PhD students.
- 6) Developing innovative and attractive courses, shaping and influencing curriculum development and actively contributing to the review of courses in accordance with departmental strategy.
- 7) Supervising lecturers, including organizing and delegating work, arranging induction and providing training and guidance.
- 8) Actively contributing to departmental teaching administration.

### **(B) Research**

- 1) To conduct substantive research into complex problems, ideas, concepts or theories and applying appropriate methodologies.
- 2) To develop and carry forward a coherent research strategy in the discipline which has national and international impact.
- 3) To develop a body of outstanding quality publications in well recognized peer reviewed outlets.
- 4) To initiate and develop links with internal contacts such as academics in interdisciplinary departments/institutes/centers, external contacts at other educational institutions, employers and professional organizations to actively foster collaboration.
- 5) To present research and give invited papers at national and international conferences.
- 6) To act as a reviewer for academic journals.
- 7) To provide academic leadership at conferences and raise the profile of the University research.
- 8) To provide expert opinion and commentary to external audiences and organizations.

### **(C) Administration**

- 1) To foster departmental collegiality and fulfilling individual responsibilities as set out by the Head of Department and/or other senior colleagues.

To actively contribute to the intellectual life of the department and to the work of the University overall, for example.

- a. Attending and participating in departmental meetings
  - b. Acting as a member of and/or chairing departmental, inter-departmental or University committees
  - c. Liaising with University and departmental administration to resolve issues concerning program development, student welfare and examinations etc.
- 2) To engage with external institutions, organizations, and the wider community to support research, teaching and University strategic objectives.

## **LECTURER/DEMONSTRATOR/TEACHING ASSISTANT**

- 1) To teach and supervise students on a regularly monitored basis during tutorials and, where appropriate, practical and laboratory sessions.
- 2) To prepare, under supervision, teaching materials, e.g., for practical sessions (lab manuals, power-point presentations) and different types of academic materials (photocopying and distributing).
- 3) To monitor student attendance as required.
- 4) To offer academic help during office hours and answer students' queries.
- 5) To assist in collecting assignments and other assessment submissions.
- 6) To give feedback to the assistant professor on the delivery and marking of assignments.
- 7) To mark and grade assignments (but not projects, dissertations, or presentations)
- 8) To record grades, and return assignments to students, in accordance with established deadlines and university policies.
- 9) To assist with conferences as deemed appropriate.
- 10) To invigilate examinations.
- 11) To use and develop e-learning effectively to support learning and teaching.
- 12) To participate in appropriate staff development programs.

## ADMINISTRATIVE COMMITTEE

1. All the Principals, Vice Principals, Medical Superintendents, Dean Faculty, Dean Academics and Director Medical Education will formulate the Administrative Committee of the complex.
2. Principal Shahida Islam Medical College (SDMC) will be ex-officio Chairman of the Administrative Committee (CAC) and will be responsible for issuing notifications, rules & regulations, and decisions of committee etc. which are to be applied to all constituent institutions of the SIMC Lodhran.
3. Dean Academics will be ex-officio secretary of the administrative committee and will be responsible for scheduling, making agenda and recording minutes of meetings of administrative committee.
4. The major function of the administrative committee will be to decide about the general rules, regulations, administrative issues, academic issues which are similar for all constituent institutions of SIMC.
5. The job description of **PRINCIPAL** will be as follows:
  - 5.1. Principal SDMC being CAC to report to the Board of Directors (BOD) or their nominee on all important matters concerning students & staff.
  - 5.2. Principal Shahida Islam Dental College (SDDC), Principal Shahida Islam College of Rehabilitation Sciences (SICRS), Principal Shahida Islam Nursing College (SINC) and Principal Shahida Islam Paramedical School (SIPS) to report to CAC and BOD or their nominee.
  - 5.3. To be the chief executive for all academic and administrative activities of the institution.
  - 5.4. To exercise the administrative & financial power as delegated under the rules.
  - 5.5. To represent the college at the accrediting body (e.g., PM&DC, CPSP, PNC, PMF etc.) and the affiliating university concerned.
  - 5.6. To work within the parameters/ framework laid down by the BOD, besides carrying out any other duties that may be assigned to him from time to time by the BOD/ their nominee & shall keep them informed of all important matters and issues.
  - 5.7. To be the ex-officio Chairman of the College Academic Council and will preside over the meeting and working of the academic council in accordance with the functions assigned by the accrediting body.
  - 5.8. To sign & issue academic certificates in respect of students.
  - 5.9. To be responsible for ensuring compliance of all PM&DC, UHS or relevant accrediting and affiliating body's regulations and for the supply of correct information as and when required by them.
  - 5.10. To imagine, articulate and implement an organization-wide vision for the college and advocate for and drives strategies aimed at achieving the college's mission and vision.
  - 5.11. To provide leadership in advancing the missions of excellence in education, research, clinical care and public service and to establish the college as the source of "best practices" in medical-education, now and into the future.
  - 5.12. To demonstrate a high level of personal and professional commitment, enthusiasm, integrity and pride in the college and its values.
  - 5.13. To build and manage high performing, diverse, and highly interoperable teams.
  - 5.14. To engage in strategic planning from inception to implementation; to establish specific, measurable, goals and other performance expectations of subordinates; and to employ a systematic review of progress toward goals and objectives.
  - 5.15. To get annual performance evaluation reports (PER) of all the staff initiated at the departmental level and then countersign, review, and make recommendations to BOD on basis of these reports.
  - 5.16. To issue experience certificates to the faculty and other teaching and non-teaching staff of the college in collaboration with HR department.
  - 5.17. To plan and execute short- and long-term strategies.
  - 5.18. To oversee development and effective utilization of financial resources, human resources, and physical infrastructure.

- 5.19. To advertise various teaching and administrative posts.
  - 5.20. To make initial appointments and re-appointments, seniorities, no objection certificates, grant of leaves and recommendations for tenure and promotions.
  - 5.21. To form various bodies like Academic Council, Curriculum Committee, Research Committee, Disciplinary Committee etc. for smooth functioning of the institution.
  - 5.22. To draft, amend, print and update various statutes and rules/ regulations of the institution in consultation with the academic council.
  - 5.23. Principal SICRS and SIPS to oversee and look after the duties and job description of Vice Principal also (mentioned below).
6. The job description of **VICE PRINCIPAL** will be as follows:
- 6.1. To report to the principal.
  - 6.2. To exercise the administrative & financial power as delegated under the rules.
  - 6.3. To be the head of general administration of the institution.
  - 6.4. To represent the college at the accrediting body (e.g., PM&DC, CPSP, PMF, PNC etc.) and the affiliating university concerned.
  - 6.5. To perform all the duties of Principal in case of his absence.
  - 6.6. To be the ex-officio secretary of the Academic Council and will be responsible for scheduling and finalizing agenda of the meeting in consultation with the principal and recording and circulating the minutes of the meeting.
  - 6.7. To be the ex-officio Chairman of the Co-Curricular Committee and will be responsible for managing the co-curricular programs and activities in the campus.
  - 6.8. Vice Principal SDMC to be the ex-officio Chairman and Vice Principal SDDC & SINC to be the ex-officio members of the Disaster Management Committee and will be responsible for planning and implementation along with training of the staff for any God forbid disaster.
  - 6.9. To assist in the day-to-day functions and operations of the office of the Principal for Administrative Affairs, liaising closely with administrative staff and leadership.
  - 6.10. To be responsible for ensuring optimum standards of discipline among the students at the college.
  - 6.11. To maintain discipline in the college including punctuality, conduct and performance, and take necessary steps on receipt of a complaint, relating to both the member/ staff of the college or the students under intimation to the principal.
  - 6.12. To take necessary steps to prevent harassment of students and ensure that there is no ragging.
  - 6.13. To be responsible for ensuring compliance of all PM&DC, UHS or relevant accrediting and affiliating body's regulations and for the supply of correct information as and when required by them.
  - 6.14. To demonstrate a high level of personal and professional commitment, enthusiasm, integrity and pride in the college and its values
  - 6.15. To promote involvement of the college / hospital with the community and under-served and rural regions of the district Lodhran.
  - 6.16. To effectively communicate with students, faculty, university and hospital administrators, alumni, and community members, including civic leaders, state legislators and potential benefactors.
  - 6.17. To create a positive, diverse, and inclusive work environment and to ensure all faculty and staff are treated with dignity and respect.
  - 6.18. To determine, implement, maintain, and lead an effective management structure.
  - 6.19. To oversee development and effective utilization of financial resources, human resources, and physical infrastructure.
  - 6.20. To have overall responsibility for dealing with student/trainee academic offenses and disciplinary matters.
  - 6.21. To allot the in-campus houses to faculty and maintenance of seniority list for allotments.
  - 6.22. To correspond with PM&DC or HEC or Affiliating university regarding faculty and their service conditions.

- 6.23. To maintain vigilance over performance of duties by security personnel and maintain vigil on the law & order situation of the campus.
  - 6.24. To carry out any other duties that may be assigned from time to time by the CAC/BOD & to keep them informed about the performance of these functions.
7. The job description of **MEDICAL SUPERINTENDENT** will be as follows:
- 7.1. To report to the Chairman Administrative Committee (CAC) / Respective Principal and Board of Directors (BOD) or their nominee.
  - 7.2. To be the chief executive for all hospital management and patients related activities of the concerned hospital and perform services of managing the institution within the highest standards of professional and ethical competence and integrity.
  - 7.3. To exercise the administrative & financial power as delegated under the rules.
  - 7.4. To be the ex-officio focal person for Punjab Health Care Commission (PHC) for concerned hospital and will be responsible for fulfilling all requirements of PHC in collaboration with faculty and administration.
  - 7.5. The MS of SITH will be the ex-officio secretary of Disaster Management Committee and will be responsible for scheduling meetings, making agenda, and recording of minutes of the committee and The MS of SIDH will be the ex-officio member of the Disaster Management Committee.
  - 7.6. To be responsible for arranging training of all the staff of concerned hospital and the complex for any kind of disaster management.
  - 7.7. To ensure provision of health care services to the satisfaction of public and institutional administration.
  - 7.8. To plan & promulgate with the approval of the CAC/BOD comprehensive patient care & clinical facility programs in the hospital to raise & maintain the standard of health delivery.
  - 7.9. To maintain discipline in the hospital including punctuality, conduct & performance.
  - 7.10. To sign & issue experience certificates in respect of medical officers (MO/WMO), postgraduate residents (PGRs), house officers (HO), nursing staff & other paramedical staff of the hospital in collaboration with the HR department.
  - 7.11. To check and certify patient care activities performed by the clinical staff up to the senior registrar level.
  - 7.12. To maintain clinical and administrative data record of the hospital and report to the CAC/BOD on quarterly basis and ensure the compliance of appropriate steps proposed by the CAC/BOD.
  - 7.13. To evaluate progress of institution on basis of performance indicators provided by BOD or PHC or any regulatory body and shall take any corrective measures based on report at least twice per year.
  - 7.14. To be responsible for maintenance and development of all ancillary services like pharmacy, nursing, human resources, material & equipment, clerical, communication, and security services etc. of the concerned hospital.
  - 7.15. To build and manage high performing, diverse, and highly interoperable teams.
  - 7.16. To plan and execute short- and long-term strategies.
  - 7.17. To assess the need of human resource, infrastructure and equipment requirements of the hospital keeping in view the accrediting body requirements and patient load and to make recommendations to CAC/BOD for further recruitment of staff or purchase of equipment etc.
  - 7.18. To form various committees as per requirement of PHC and continuously keep record of their working with submission of the report of CAC/BOD at least on quarterly basis.
  - 7.19. To draft various statutes and rules/ regulations for the hospital and implement after approval from the CAC/BOD.
  - 7.20. To facilitate Dean Academics and DME for training and rotations of undergraduate and postgraduate students.
  - 7.21. To keep a check on the attendance of undergraduate and postgraduate students as per the timetable circulated by DME.
  - 7.22. To provide BOD, Government, PHC etc. information, comments and suggestions on any specific point as may be asked for.

- 7.23. To be responsible for adequate fumigation and sterilization of the hospital building at scheduled time or on as required basis in collaboration with BOD.
  - 7.24. To carry out any other duties that may be assigned from time to time by the CAC/BOD & to keep them informed about the performance of these functions.
8. The job description of **DEAN FACULTY** will be as follows:
- 8.1. To report to the CAC and BOD or their nominee.
  - 8.2. To assist in the day-to-day functions and operations of the office of the Principal for Faculty Affairs, liaising closely with administrative staff and leadership.
  - 8.3. To be responsible to ensure optimum standards of discipline among the faculty of the SIMC (including SDMC, SDDC, SICRS, SINC, SIPS, SITH, SIDH).
  - 8.4. To be the ex-officio Chairman of the Research Advisory/ Ethical Review Committee of SIMC and will be responsible for scheduling the meetings and communication of the decisions to CAC.
  - 8.5. To take necessary steps to prevent harassment of faculty, medical officers, PGR, House Officers etc. and ensure that there is no ragging.
  - 8.6. To carry primary responsibility for faculty recruitment with the help of Principals, ensuring that all faculty are committed and engaged to the teaching process.
  - 8.7. To empower faculty and staff to achieve performance goals and objectives, consistently “raising the bar” regarding performance expectations; to inspire accomplishment of future-state goals and objectives; to model creativity, innovation, risk taking, and professional excellence.
  - 8.8. To build and manage high performing, diverse, and highly interoperable teams.
  - 8.9. To develop leadership skills of faculty and staff through education, mentoring and delegating.
  - 8.10. To employ a systematic review of progress toward goals and objectives of the faculty and staff and assist the principals in collection and review of PERs.
  - 8.11. To provide insight and oversight into physician and provider needs for research, administrative and clinical positions to sustain and strategically grow the institution’s service provision and college departments through the addition of faculty and staff.
  - 8.12. To establish and maintain effective relationships with all heads of departments within the entire complex and all affiliated institutions.
  - 8.13. To create a positive, diverse, and inclusive work environment and to ensure all faculty and staff are treated with dignity and respect.
  - 8.14. To plan and prioritize human resource needs for the faculty and to establish strategies to enhance institution’s ability to compete in the recruitment of high-caliber faculty and staff.
  - 8.15. To build an environment of collegiality in which faculty and students jointly participate in, and benefit from, the unique nature of the faculty.
  - 8.16. To communicate the faculty’s vision to the administration to enhance understanding and build support for the faculty’s unique place within the institution.
  - 8.17. To keep a record of all available scholarships and fellowships of higher studies for the faculty; to plan for their admissions in higher education programs and to help them get the scholarships or grants etc.
  - 8.18. To carry out any other duties that may be assigned from time to time by the CAC/BOD & to keep them informed about the performance of these functions.
9. The job description of **DEAN ACADEMICS** will be as follows:
- 9.1. To report to the CAC and BOD or their nominee.
  - 9.2. To be responsible for all academic matters of SIMC (including SDMC, SDDC, SICRS, SINC, SIPS, SITH, SIDH).
  - 9.3. To supervise all the work of the Department of Medical Education (DME).

- 9.4. To represent the college at the accrediting body (e.g., PM&DC, CPSP, PNC, PMF etc.) and the affiliating university concerned.
  - 9.5. To be the ex-officio Chairman of the Curriculum Committee of the complex.
  - 9.6. To assist in the day-to-day functions and operations of the office of the Principal for Curricular Affairs, liaising closely with DME and leadership.
  - 9.7. To draw up and promulgate detailed teaching programs for students in accordance with the recommendation of the College Academic Council & Board of Studies of University concerned.
  - 9.8. To assist in the management of the current undergraduate medical curriculum, including working closely with faculty to develop and implement changes to the current curriculum, to ensure exceptional education for our medical students.
  - 9.9. To sign & issue academic certificate in respect of students.
  - 9.10. To be responsible for the compilation of all medical education & research data relating to the institution and report to the CAC and BOD about the academic performance of the institution at least on quarterly basis and to take appropriate steps to ensure optimum standards of medical education of the college.
  - 9.11. To ensure that the faculty and students get opportunities and time for research and to ensure development of faculty by making available appropriate opportunities.
  - 9.12. To be responsible for ensuring compliance of all PM&DC, UHS or relevant accrediting and affiliating body's regulations and for the supply of correct information as and when required by them.
  - 9.13. To work with the faculty and DME to co-create, develop, and implement new curricular innovations to ensure that our students have the core knowledge, skills, and attitudes to be exceptional physicians and prominent world leaders in health and science.
  - 9.14. To explore and implement high-impact, evidence-based curricular changes, interfacing with faculty to restructure portions of the current curriculum as necessary, and to respond to concerns or suggestions from students, staff, and faculty.
  - 9.15. To manage numerous curricular programs and activities within the complex.
  - 9.16. To lead and be responsible for the accreditation of various CME activities.
  - 9.17. To amend, update and print regulations pertaining to academics and admissions to both undergraduate and postgraduate programs run in SIMC as per accrediting and affiliating institution's policies and requirements.
  - 9.18. To formulate and circulate syllabi, all kinds of admission forms, examination forms, admission tests etc. for both undergraduate and postgraduate programs run in the complex.
  - 9.19. To make the college its own question bank for future examination conduction and secrecy, in collaboration with all heads of departments.
  - 9.20. To oversee the admission process in undergraduate and postgraduate degree programs.
  - 9.21. To decide and notify about change of timings, vacations, holidays, examination calendar etc. in consultation with CAC. (Note: The input from heads of departments i.e., Academic Council may be sought before finalizing).
  - 9.22. To arrange and designate the infrastructure i.e., lecture theatre, multimedia, computers etc. required for teaching; in collaboration with the administration and to supervise the duty roster of staff deputed for this purpose.
  - 9.23. To carry out any other duties that may be assigned from time to time by the CAC/BOD & to keep them informed about the performance of these functions.
10. The job description of **DIRECTOR MEDICAL EDUCATION** will be as follows:
- 10.1. To report to CAC, Dean Academics & BOD.
  - 10.2. To be the ex-officio secretary of Curriculum Committee and will be responsible for scheduling, finalizing agenda and recording the minutes of curriculum committee.
  - 10.3. To manage the continuing medical education program of SIMC (including SDMC, SDDC, SICRS, SINC, SIPS, SITH, SIDH) in accordance with the overall mission and objectives of the organization.

- 10.4. To ensure compliance with the Educational Accreditation Standards of PM&DC and UHS or other affiliating bodies and universities.
- 10.5. To keep records and inform administration about new requirements related to maintenance of accreditation and license etc.
- 10.6. To plan the minimum teaching schedule (Academic Calendar, Timetables, Teaching Hours, Skill Lab Schedule, Clinical Rotations, Tests/Examination Date Sheets etc.) of each constituent college as per the accrediting body and affiliating university criteria.
- 10.7. To solicit input and feedback (at least once a year) from all faculty members, administration, and students etc. to identify educational needs and develop and implement activities accordingly.
- 10.8. To delegate the roles to (i.e., nominate subject coordinators) and coordinate educational efforts with the leadership of various departments or committees.
- 10.9. To plan for all educational activities that include establishing learning objectives, selecting appropriate content and interactive learning formats, incorporating desirable attributes, identifying, and resolving potential conflicts of interest, and evaluating activities to foster changes in learner's competence, performance and/or patient outcomes (i.e., preparation and dissemination of study guides) considering TOS of the affiliating university.
- 10.10. To conduct & coordinate the fortnightly CPC.
- 10.11. To secure financial and administrative support required to conduct all routine educational and CME activities (i.e., physical facilities, lecture theatres, AV equipment, personnel etc.).
- 10.12. To monitor the attendance of faculty, postgraduate and undergraduate students in CPCs, interactive lectures & symposia and will submit a report to the Dean Academics on quarterly basis.
- 10.13. To be responsible for issuing of roll numbers to newly inducted undergraduate students and recording, maintaining and communication of the attendance record and monthly performance report (MPR) of postgraduate and undergraduate students in collaboration with student affairs section, including arranging parent teacher meeting (PTM) for students not up to mark.
- 10.14. To coordinate with supervisors for arranging annual assessment and annual rotation schedule of postgraduate students.
- 10.15. To hold regular meetings with supervisors at least twice per year to sort out problems in training of postgraduate students.
- 10.16. To coordinate with the CPSP regional office or other Postgraduate Affiliating University regarding approval of synopsis & dissertations of postgraduate students.
- 10.17. To facilitate the faculty in their research proposals and projects.
- 10.18. To conduct an overall program analysis which includes following study guides implementation through monthly academic audit & student feedback and communication of their results to the stakeholder's ensuring privacy.
- 10.19. To identify, plan and implement the needed or desired changes in the overall program that is required to improve the ability to meet the institution mission.
- 10.20. To be responsible for pre, per and post-exam assessment of question papers & its reporting to the relevant heads of departments.
- 10.21. To arrange for workshops for faculty development at least on a quarterly basis.
- 10.22. To help Dean Academics in managing and accreditation of CME activities.
- 10.23. To carry out any other duties that may be assigned from time to time by the CAC/BOD & to keep them informed about the performance of these functions.



# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **ANESTHETIST**

Job Title: Anesthetist  
Department: Anesthesiology  
Reports To: Chief of Anesthesia

### **Pre-Operative Responsibilities:**

- Conduct thorough pre-operative evaluations to assess patients' medical history, physical condition, and risk factors for anesthesia complications.
- Discuss anesthesia options with patients and obtain informed consent.
- Educate patients about anesthesia, the risks and benefits of different types of anesthesia, and post-operative care.
- Collaborate with surgeons and other healthcare professionals to develop a comprehensive anesthesia plan for each patient.

### **Per-Operative Responsibilities:**

- Administer a variety of anesthetic techniques, including general, regional, and local anesthesia, tailored to each patient's individual needs and the surgical procedure.
- Continuously monitor patients' vital signs, hemodynamic status, and overall health throughout the surgical procedure
- Manage any medical complications that may arise during surgery, including respiratory distress, cardiovascular instability, and allergic reactions.
- Provide pain relief and manage intraoperative sedation as needed.
- Collaborate with surgeons and other healthcare professionals to ensure optimal patient care during surgery.

### **Post-Operative Responsibilities:**

- Oversee patients' recovery in the post-anesthesia care unit (PACU) or intensive care unit (ICU)
- Monitor patients' vital signs, respiratory status, and pain levels in the recovery period
- Manage post-operative complications, such as nausea, vomiting, and pain.
- Provide education and support to patients and their families regarding post-operative care and follow-up instructions.
- Document anesthesia care and intraoperative events in comprehensive medical records

### **Qualifications:**

- The Anesthetist must have a PMDC renewed License.
- Must have Completed an accredited anesthesiology residency program.
- The Post graduate trainees will work as per the rules and regulations of PMDC and CPSP
- Strong clinical skills and judgment in anesthesia administration and patient management
- Excellent communication & interpersonal skills to interact with patients, surgeons etc.
- Ability to work under pressure, make quick decisions, and maintain composure in critical situations.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **CARDIOLOGIST**

Job Title: Cardiologist

Department: Cardiology

Reports To: HOD Cardiology / Medical Superintendent

### Duties and Responsibilities

#### **1. Patient Care:**

- Conduct thorough patient evaluations, including physical examinations, medical history reviews, and diagnostic tests, to accurately diagnose cardiovascular diseases.
- Develop and implement personalized treatment plans for patients with a variety of heart conditions, considering medical history, risk factors, and individual needs.
- Provide comprehensive medical care, including prescribing medications, recommending lifestyle modifications, and monitoring patient progress.
- Perform invasive diagnostic procedures, such as coronary angiography and echocardiography, to assess the heart's structure and function.
- Manage acute cardiac events, such as heart attacks and arrhythmias, providing prompt and effective treatment to stabilize patients.

#### **2. Consultations and Referrals:**

- Provide expert consultations to other healthcare providers, such as primary care physicians and surgeons, regarding the management of cardiovascular diseases.
- Refer patients to appropriate specialists when additional expertise is required, such as cardiothoracic surgeons for complex cardiac procedures or electrophysiologists for arrhythmia management.
- Collaborate with other healthcare professionals to ensure seamless patient care coordination and optimal treatment outcomes.

#### **3. Educational and Research Activities:**

- Participate in teaching and training programs for medical students, residents, and other healthcare professionals, sharing knowledge and expertise in cardiology.
- Conduct or contribute to research studies aimed at improving the understanding, diagnosis, and treatment of cardiovascular diseases.
- Present research findings at conferences and publish articles in peer-reviewed journals to advance the field of cardiology.

#### **4. Professional Development and Leadership:**

- Actively participate in continuing medical education (CME) programs to stay updated on the latest advancements in cardiology, diagnostic techniques, and treatment modalities.
- Contribute to the development and implementation of clinical practice guidelines and quality improvement initiatives in cardiology.

- Assume leadership roles within the cardiology department or hospital, providing guidance and mentorship to colleagues.

#### **5. Clinical Experience and Expertise:**

- Possess at least five years of clinical experience as a board-certified cardiologist in a hospital or clinic setting.
- Demonstrate extensive knowledge of cardiovascular anatomy, physiology, pharmacology, and disease processes.
- Exhibit proficiency in performing invasive diagnostic procedures, interpreting diagnostic tests, and managing a wide range of cardiac conditions.

#### **6. Personal and Professional Attributes:**

- Maintain exceptional attention to detail and a commitment to accuracy and precision in patient care and diagnostic interpretation.
- Possess strong problem-solving and critical thinking skills to identify and address complex cardiovascular issues.
- Exhibit exceptional communication and interpersonal skills to interact effectively with patients, colleagues, and other healthcare providers.
- Demonstrate a commitment to lifelong learning, staying abreast of the latest advancements in cardiology and maintaining a high level of clinical competence.

### Qualifications

#### 1. Academic Background:

- Hold an MBBS degree from a recognized institute registered with PMDC.
- Completed post-graduation in cardiology.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **CATH LAB MANAGER**

Job Title: Cardiac Catheterization Laboratory (Cath Lab) Manager

Department: Cardiology

Reports To: HOD Cardiology / Medical Superintendent

Duties and Responsibilities

### **1. Cath Lab Management and Supervision:**

- Oversee the day-to-day operations of the Cath lab, ensuring optimal utilization of resources, adherence to departmental policies and procedures, and compliance with infection control protocols.
- Develop and implement Cath lab work schedules, coordinating with cardiologists, nurses, and other healthcare providers to ensure adequate coverage and timely scheduling of procedures.
- Manage Cath lab staff, including assigning duties, providing performance feedback, conducting staff evaluations, and fostering a positive and supportive work environment.
- Implement and monitor quality control measures to ensure the accuracy, safety, and effectiveness of diagnostic and therapeutic procedures.
- Conduct regular audits and reviews of Cath lab practices, identifying areas for improvement and implementing corrective actions.

### **2. Procedural Support and Coordination:**

- Assist cardiologists during diagnostic and therapeutic procedures, including preparing patients, setting up equipment, and providing necessary support throughout the procedure.
- Ensure the availability and proper functioning of Cath lab equipment and supplies.
- Maintain accurate documentation of procedures, including patient information, diagnostic findings, and treatment interventions.
- Coordinate with other departments, such as radiology, pathology, and critical care, to ensure seamless patient care coordination.

### **3. Infection Control and Safety:**

- Implement and enforce infection control protocols to maintain a sterile and safe Cath lab environment.
- Ensure the proper handling and disposal of biohazardous materials.
- Monitor radiation exposure levels for patients and staff, adhering to safety guidelines and regulatory requirements.
- Collaborate with the hospital infection control team to prevent and control hospital-acquired infections (HAIs).

### **4. Staff Training and Education:**

- Provide training and education to Cath lab staff on diagnostic and therapeutic procedures, infection control protocols, and the use of specialized equipment.
- Facilitate the professional development of Cath lab staff, encouraging participation in continuing education programs and workshops.
- Foster a culture of continuous learning and improvement within the Cath lab team, ensuring staff stay updated on the latest advancements in Cath lab technology and procedures.

### **5. Quality Improvement and Regulatory Compliance:**

- Participate in quality improvement initiatives to enhance Cath lab performance, patient outcomes, and overall healthcare delivery.

- Ensure compliance with all applicable Cath lab procedures, safety standards, and infection control guidelines set forth by the Healthcare Commission and other relevant regulatory bodies.
- Maintain accurate records and documentation to demonstrate compliance with regulatory requirements and quality assurance standards.

**6. Clinical Experience and Expertise:**

- Possess at least five years of clinical experience in a hospital or clinic setting as a Cath Lab Supervisor or a similar supervisory role.
- Exhibit extensive knowledge of cardiac catheterization procedures, equipment, and safety protocols.
- Demonstrate a proven track record of managing Cath lab operations, ensuring patient safety, and adhering to infection control guidelines.

**7. Personal and Professional Attributes:**

- Maintain exceptional leadership and organizational skills, effectively managing and motivating a team of Cath lab personnel.
- Possess strong problem-solving and critical thinking skills to identify and address challenges in Cath lab operations and infection control practices.
- Exhibit exceptional communication and interpersonal skills to foster collaboration and build positive relationships with colleagues, patients, and other healthcare providers.
- Demonstrate a commitment to lifelong learning and professional development, staying abreast of the latest advancements in Cath lab technology, procedures, and regulatory requirements.

Qualifications

1. Academic Background:

- Hold a bachelor's degree in nursing or a related field from a recognized institution.
- Possess a Diploma or Certificate in Cardiac Catheterization Laboratory Technology or a related field.

## **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

### **CLINICAL SURGICAL DEPARTMENT**

Job Title: Clinical Specialist for the respective department

Department: For the respective Clinical surgical department

Reports To: Medical Superintendent / Respective HOD

#### Duties and Responsibilities

1. Clinical Evaluation and Diagnosis:
  - Conduct thorough physical examinations, patient interviews, and medical history assessments to identify surgical indications and diagnose underlying conditions.
  - Order and interpret diagnostic tests, such as imaging studies, laboratory tests, and biopsies, to further evaluate patient conditions.
  - Collaborate with other healthcare professionals, such as radiologists, pathologists, and anesthesiologists, to optimize patient care before and during surgery.
2. Surgical Planning and Preoperative Preparation:
  - Develop detailed surgical plans, considering patient factors, surgical risks, and potential complications.
  - Obtain informed consent from patients, explaining surgical procedures, risks, and benefits in a clear and understandable manner.
  - Prescribe appropriate medications, antibiotics, and other treatments to prepare patients for surgery and minimize surgical risks.
3. Surgical Procedures and Anesthesia:
  - Instruct and supervise the surgical team, including anesthesiologists, nurses, and technicians, to ensure a smooth and efficient surgical operation.
  - Perform a wide range of surgical procedures under general, local, or regional anesthesia, using advanced surgical techniques and equipment.
  - Maintain sterile conditions throughout the surgical procedure to prevent infection and ensure patient safety.
4. Postoperative Management and Care:
  - Closely monitor patients' vital signs, pain levels, and overall condition during and after surgery.
  - Prescribe appropriate pain management medications and other post-operative care instructions to promote patient recovery.
  - Supervise the care of patients in the post-anesthesia care unit (PACU) and in the hospital ward until they are discharged.
5. Consultation and Follow-up:
  - Provide ongoing consultation and support to patients during their recovery and rehabilitation period.
  - Perform regular follow-up visits to assess healing progress, monitor surgical complications, and provide necessary adjustments to treatment plans.
  - Educate patients about post-operative care, lifestyle modifications, and prevention of future surgical interventions.

6. Research and Education:
  - Participate in research initiatives aimed at improving surgical techniques, reducing complications, and enhancing patient outcomes.
  - Mentor and supervise surgical residents, medical students, and other healthcare professionals to promote knowledge transfer and skill development.
  - Stay abreast of the latest advancements in surgical procedures, technologies, and evidence-based practice guidelines.

## Qualifications

1. Academic Background:
  - Hold an MBBS or equivalent degree from a recognized university.
  - Hold post graduate degree in respective specialized surgical subspecialty duly registered by PMC.
2. Professional Experience:
  - Possess at least three years of clinical experience in a surgical setting as a surgeon.
  - Demonstrate a proven track record of successful surgeries and effective patient care management.
  - Maintain a strong commitment to evidence-based practice and continuous professional development.
3. Personal and Professional Attributes:
  - Exhibit exceptional manual dexterity, hand-eye coordination, and surgical precision.
  - Maintain a strong work ethic, demonstrating dedication to patient care and achieving excellence in surgical practice.
  - Possess exceptional problem-solving and analytical skills, enabling the ability to adapt to complex surgical situations.
4. Regulatory Compliance:
  - Be registered with the Pakistan Medical Council (PMC) and maintain an active license to practice medicine.

## Additional Considerations:

- Surgeons play a critical role in patient care, providing minimally invasive and complex surgical procedures that improve patient outcomes.
- They must maintain high standards of professionalism, ethical conduct, and patient confidentiality.
- Surgeons should stay updated on the latest advancements in surgical techniques, technologies, and evidence-based practice guidelines.
- They should actively participate in continuing medical education programs to enhance their knowledge and skills.

# JOB DISCRPTION / DUTIES AND RESPONSIBILITES

## CSSD INCHARGE

Job Title: CSSD In charge

Department: Operation theater

Reports To: Medical Superintendent / HOD ANESTHESIA

Duties and Responsibilities

### **1. CSSD Management and Supervision:**

- Oversee the day-to-day operations of the CSSD, ensuring optimal utilization of resources, adherence to departmental policies and procedures, and compliance with infection control protocols.
- Develop and implement CSSD work schedules, coordinating with staff to ensure adequate coverage and timely processing of sterile items.
- Manage CSSD staff, including assigning duties, providing performance Feedback, conducting staff evaluations, and fostering a positive and supportive work environment.
- Implement and monitor quality control measures to ensure the accuracy, safety, and effectiveness of sterilization and decontamination processes.
- Conduct regular audits and reviews of CSSD practices, identifying areas for improvement and implementing corrective actions.

### **2. Sterilization and Decontamination Processes:**

- Oversee and supervise the sterilization and decontamination of medical instruments and equipment, ensuring adherence to established protocols and guidelines.
- Monitor the performance and maintenance of sterilization equipment, including steam sterilizers, washers, and dryers.
- Maintain proper documentation of sterilization and decontamination procedures, ensuring traceability and compliance with regulatory requirements.
- Implement and monitor infection control protocols to maintain a sterile and safe CSSD environment.

### **3. Inventory Management and Supply Chain:**

- Manage the inventory of sterile items, ensuring adequate stock levels and timely procurement to meet patient care needs.
- Implement a system for tracking and tracing sterile items from decontamination to distribution.
- Collaborate with other departments, such as surgery, nursing, and radiology, to anticipate requirements and ensure a smooth supply chain of sterile items.

### **4. Staff Training and Education:**

- Provide training and education to CSSD staff on sterilization and decontamination procedures, infection control protocols, and the use of specialized equipment.
- Facilitate the professional development of CSSD staff, encouraging participation in continuing education programs and workshops.
- Foster a culture of continuous learning and improvement within the CSSD team, ensuring staff stay updated on the latest advancements in sterilization technology and infection control practices.

### **5. Communication and Collaboration:**



- Maintain open and effective communication with surgeons, nurses, and other healthcare providers regarding the availability and status of sterile items.
  - Participate in departmental and hospital-wide infection control committees to share expertise and contribute to the prevention of HAIs.
  - Collaborate with other departments, such as engineering and procurement, to ensure the proper maintenance and availability of sterilization equipment.
- 6. Clinical Experience and Expertise:**
- Possess at least one-year clinical experience in a hospital or clinic setting as a CSSD Supervisor or a similar supervisory role.
  - Exhibit extensive knowledge of sterilization and decontamination procedures, equipment, and safety protocols.
  - Demonstrate a proven track record of managing CSSD operations, ensuring patient safety, and adhering to infection control guidelines.
- 7. Personal and Professional Attributes:**
- Maintain exceptional leadership and organizational skills, effectively managing and motivating a team of CSSD personnel.
  - Possess strong problem-solving and critical thinking skills to identify and address challenges in CSSD operations and infection control practices.
  - Exhibit exceptional communication and interpersonal skills to foster collaboration and build positive relationships with colleagues, patients, and other healthcare providers.
  - Demonstrate a commitment to lifelong learning and professional development, staying abreast of the latest advancements in sterilization technology, infection control practices, and regulatory requirements.

#### Qualifications

##### Academic Background:

- Hold a bachelor's degree in nursing / Operation theater technology / Sterile Services Technology, or a related field from a recognized institution.
- Possess a strong foundation in microbiology, infection control principles, and sterilization techniques.

## **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

### **GASTROENTEROLOGIST**

Job Title: Gastroenterologist

Department: Gastroenterology

Reports To: HOD Gastroenterology / Medical Superintendent

#### Duties and Responsibilities

**1. Patient Care:**

- Conduct thorough patient evaluations, including physical examinations, medical history reviews, and diagnostic tests, to accurately diagnose digestive disorders.
- Develop and implement personalized treatment plans for patients with various digestive conditions, considering medical history, risk factors, and individual needs.
- Perform endoscopic procedures, such as colonoscopies, gastroscopy, and ERCPs, to visualize the digestive tract and obtain diagnostic samples.
- Manage complex digestive conditions, such as liver cirrhosis and pancreatic cancer, providing guidance on treatment options, such as liver transplantation or pancreatic enzyme replacement therapy.

**2. Consultations and Referrals:**

- Provide expert consultations to other healthcare providers, such as primary care physicians, surgeons, and oncologists, regarding the management of digestive disorders.
- Refer patients to appropriate specialists when additional expertise is required, such as surgeons for advanced surgical interventions or oncologists for cancer treatment.

**3. Educational and Research Activities:**

- Participate in teaching and training programs for medical students, residents, and other healthcare professionals, sharing knowledge and expertise in gastroenterology.
- Conduct or contribute to research studies aimed at improving the understanding, diagnosis, and treatment of digestive disorders.
- Present research findings at conferences and publish articles in peer-reviewed journals to advance the field of gastroenterology.

**4. Professional Development and Leadership:**

- Actively participate in continuing medical education (CME) programs to stay updated on the latest advancements in gastroenterology, diagnostic techniques, and treatment modalities.

#### Qualifications

**1. Academic Background:**

- Hold an MBBS degree by a recognized institution registered by PMDC.
- Completed postgraduation in gastroenterology / internal medicine.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **NURSING STAFF**

Job Title: Nurse

Department: Nursing

Reports To: Nursing Superintendent

### Duties and Responsibilities

- Administer medications to patients.
- Provide wound care and other nursing care.
- Monitor patients' vital signs and report any changes to doctors.
- Educate patients about their health and teach them how to manage their conditions.
- Assist with patient care, such as bathing, dressing, and feeding.
- Work under the direction of doctors to provide care to patients.

### Qualifications

- Diploma in Nursing (DN) or equivalent degree from a recognized institution.
- Registration with the Pakistan Nursing Council (PNC).
- At least one year of experience in a hospital setting.
- Excellent communication and interpersonal skills.
- Ability to work independently and as part of a team.
- Must complete all required training and certifications.
- Must adhere to all PHC regulations and standards.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **LAB TECHNITION**

Job Title: Lab Technician

Department: Laboratory

Reports To: Lab Supervisor / Medical Superintendent

### Duties and Responsibilities

#### 1. Sample Collection and Preparation:

- Collect biological samples from patients, following proper safety protocols and adhering to ethical guidelines.
- Prepare samples for analysis, including labeling, aliquoting, and centrifugation.
- Maintain accurate records of sample collection, preparation, and storage procedures.

#### 2. Laboratory Testing and Analysis:

- Perform a variety of laboratory tests using specialized equipment and techniques, such as:
  - Hematology tests: Complete blood count (CBC), differential blood cell counts, coagulation tests.
  - Clinical chemistry tests: Blood sugar, electrolytes, liver enzymes, kidney function tests
  - Serology tests: Antibody and antigen detection for infectious diseases
  - Microbiology tests: Identification and culture of microorganisms
- Adhere to standardized laboratory procedures and ensure the accuracy and reliability of test results.
- Document test results and maintain organized laboratory records.

#### 3. Quality Control and Assurance:

- Implement quality control measures to ensure the accuracy and precision of laboratory testing.
- Calibrate and maintain laboratory equipment regularly.
- Participate in proficiency testing programs to evaluate laboratory performance.
- Monitor and report any deviations from established quality control standards.

#### 4. Equipment Maintenance and Safety:

- Maintain and calibrate laboratory equipment to ensure optimal performance and safety.
- Adhere to laboratory safety protocols, including proper handling of hazardous materials and waste disposal.
- Wear appropriate personal protective equipment (PPE) when handling biological samples and chemicals.

#### 5. Communication and Collaboration:

- Communicate test results clearly and concisely to physicians and other healthcare professionals.
- Collaborate with laboratory colleagues to troubleshoot problems and improve laboratory procedures.
- Participate in laboratory training sessions and continuing education programs.

#### 6. Technical Skills and Expertise:

- Proficient in operating a variety of laboratory equipment, including microscopes, centrifuges, and automated analyzers.
  - Familiar with laboratory safety protocols and hazardous materials handling procedures.
  - Possess strong analytical and problem-solving skills to interpret test results and identify potential errors.
7. Personal and Professional Attributes:
- Exhibit meticulous attention to detail and a commitment to accuracy and precision in laboratory work.
  - Maintain a strong work ethic and ability to manage multiple tasks simultaneously.
  - Possess excellent communication and interpersonal skills to interact effectively with colleagues, patients, and healthcare professionals.

## Qualifications

### 1. Academic Background:

- Hold a diploma from PMF or associate degree in laboratory technology or a related field from a recognized institution.
- Possess a strong foundation in biological sciences, chemistry, and laboratory procedures.
- Demonstrate a passion for science and a commitment to providing accurate diagnostic information.

# **JOB DISCRPTION / DUTIES AND RESPONSIBILITES**

## **NEPHROLOGIST**

Job Title: Nephrologist

Department: Internal Medicine or Nephrology

Reports To: HOD Nephrology / Internal Medicine / Medical Superintendent

### Duties and Responsibilities

#### **1. Patient Care:**

- Conduct thorough patient evaluations, including physical examinations, medical history reviews, and diagnostic tests, to accurately diagnose kidney diseases and disorders.
- Develop and implement personalized treatment plans for patients with a variety of kidney conditions, considering medical history, risk factors, and individual needs.
- Provide comprehensive medical care, including prescribing medications, recommending lifestyle modifications, and monitoring patient progress.
- Perform or supervise specialized procedures, such as kidney biopsies, catheter insertions, and peritoneal dialysis access placements.
- Manage complex kidney conditions, including end-stage renal disease, providing guidance on renal replacement therapy options, such as hemodialysis and peritoneal dialysis.

#### **2. Consultations and Referrals:**

- Provide expert consultations to other healthcare providers, such as primary care physicians, surgeons, and intensivists, regarding the management of kidney diseases and disorders.
- Refer patients to appropriate specialists when additional expertise is required, such as urologists for urinary tract complications or endocrinologists for metabolic disorders.
- Collaborate with other healthcare professionals to ensure seamless patient care coordination and optimal treatment outcomes.

#### **3. Educational and Research Activities:**

- Participate in teaching and training programs for medical students, residents, and other healthcare professionals, sharing knowledge and expertise in nephrology.
- Conduct or contribute to research studies aimed at improving the understanding, diagnosis, and treatment of kidney diseases and disorders.

#### **4. Professional Development and Leadership:**

- Actively participate in continuing medical education (CME) programs to stay updated on the latest advancements in nephrology, diagnostic techniques, and treatment modalities.
- Contribute to the development and implementation of clinical practice guidelines and quality improvement initiatives in nephrology.
- Assume leadership roles within the nephrology department or hospital, providing guidance and mentorship to colleagues.

### Qualifications

#### **1. Academic Background:**

- Hold an MBBS degree from a recognized institution registered with PMDC.
- Hold a post graduate degree in internal medicine / nephrology registered with PMDC.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **OT INCHARGE**

Job Title: Operation Theater In charge

Department: Surgery

Reports To: Medical Superintendent / HOD Anesthesia

### **Duties and Responsibilities**

#### **1. Operation theater Management and Supervision:**

- Oversee the overall management and operations of ORs, ensuring optimal utilization of resources and adherence to departmental policies and procedures.
- Develop and implement OR schedules, coordinating with surgeons, nurses, and other healthcare providers to optimize patient flow and minimize wait times.
- Manage OR staff, including assigning duties, providing performance feedback, and conducting staff evaluations.
- Implement and enforce infection control protocols to maintain a sterile and safe OR environment.
- Ensure the proper maintenance and calibration of surgical equipment and instrumentation.
- Monitor OR supplies and equipment inventory, ensuring adequate stock and timely procurement.

#### **2. Quality Assurance and Compliance:**

- Establish and maintain quality assurance standards for OR procedures and patient care.
- Implement and monitor quality control measures to ensure the accuracy, safety, and effectiveness of surgical interventions.
- Conduct regular audits and reviews of OR practices, identifying areas for improvement and implementing corrective actions.
- Ensure compliance with all applicable surgical procedures, safety standards, and infection control guidelines set forth by the relevant healthcare authorities.

#### **3. Patient Care and Safety:**

- Advocate for patient safety and well-being, ensuring that all surgical procedures are conducted in a safe and ethical manner.
- Oversee patient preparation and transfer to and from ORs, ensuring proper documentation and communication with patient care teams.
- Monitor patient vital signs and respond to any adverse events or complications during surgery.
- Collaborate with surgeons and nurses to ensure optimal patient care and outcomes.

## **Staff Training and Education:**

- Provide training and education to OR staff on surgical procedures, infection control protocols, and the use of surgical equipment.
- Facilitate the professional development of OR staff, encouraging participation in continuing education programs and workshops.
- Foster a positive and supportive work environment, promoting teamwork and collaboration among OR personnel.

## **5. Communication and Collaboration:**

- Maintain open and effective communication with surgeons, nurses, anesthesiologists, and other members of the surgical team.
- Participate in surgical team meetings, providing input on patient care plans and OR scheduling.
- Collaborate with other departments, such as radiology, pathology, and critical care, to ensure seamless patient care coordination.

## **6. Clinical Experience and Expertise:**

- Possess at least one year of clinical experience in a hospital or clinic setting as an Operation Theater In charge or a similar supervisory role.
- Exhibit extensive knowledge of surgical procedures, instrumentation, and equipment.
- Demonstrate a proven track record of managing OR operations, ensuring patient safety, and adhering to infection control protocols.

## **7. Personal and Professional Attributes:**

- Maintain exceptional leadership and organizational skills, effectively managing and motivating a team of OR personnel.
- Possess strong problem-solving and critical thinking skills to identify and address challenges in OR operations.
- Exhibit exceptional communication and interpersonal skills to foster collaboration and build positive relationships with colleagues and patients.

## **Academic Background:**

- Hold a diploma in Operation theater Diploma or Certificate by PMF / bachelor's degree in nursing / Operation Theater Technology from a recognized institution.



# DISCRIPTION / DUTIES AND RESPONSIBILITES

## OPERATION THEATER ASSISTANT

Job Title: Operation Theater Assistant (OTA)

Department: Operation Theater / Anesthesia

Reports To: In Charge OT

Summary

Duties and Responsibilities

### **1. Preoperative Preparation:**

- Assist in preparing patients for surgery, including ensuring proper attire, positioning, and administration of preoperative medications.
- Verify patient identification and match patients to their surgical schedules.
- Gather and organize necessary surgical instruments, equipment, and supplies.
- Prepare the operating room environment, ensuring proper lighting, ventilation, and sterility.

### **2. Intraoperative Assistance:**

- Provide direct assistance to surgeons and nurses during surgical procedures, including:
  - Handling and positioning surgical instruments and equipment according to surgeon's instructions.
  - Anticipating and providing surgeons with necessary instruments and supplies.
  - Maintaining a sterile field throughout the procedure.
  - Assisting with patient positioning, draping, and wound irrigation.
  - Monitoring patient vital signs and responding to any changes or complications.

### **3. Postoperative Care:**

- Assist in transferring patients from the operating room to recovery areas.
- Clean and organize surgical instruments and equipment, following proper sterilization procedures.
- Prepare and maintain operating room inventory and supplies.
- Document surgical procedures and activities in patient records.

### **4. Safety and Infection Control:**

- Adhere to strict infection control protocols, including proper hand hygiene, sterile technique, and disposal of biohazardous materials.

- Maintain a safe and organized operating room environment, ensuring proper storage and handling of surgical instruments and equipment.
- Monitor patient safety throughout the surgical procedure, reporting any potential hazards or concerns to the surgical team.

**5. Communication and Collaboration:**

- Communicate effectively with surgeons, nurses, and other members of the surgical team to ensure seamless coordination and patient care.
- Anticipate the needs of the surgical team and provide prompt assistance.
- Maintain clear and concise documentation of surgical procedures and patient care activities.

**6. Clinical Experience and Expertise:**

- Demonstrate proficiency in assisting with a variety of surgical procedures, including instrumentation, positioning, and patient care.
- Exhibit strong sterile technique and adherence to infection control protocols.

**7. Personal and Professional Attributes:**

- Maintain exceptional attention to detail and a commitment to accuracy and precision in all tasks.
- Possess strong problem-solving and critical thinking skills to anticipate and respond to changing situations during surgery.
- Exhibit exceptional teamwork skills and the ability to work effectively under pressure.

**Qualifications**

Academic Background:

- Hold a diploma or associate degree in Operation Theater Technology or a related field from a recognized institution.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **PATHOLOGIST**

Job Title: Pathologist

Department: Pathology

Reports To: Medical Superintendent/HOD Pathology

### Duties and Responsibilities

1. Examination of Tissue Specimens:
  - Conduct thorough microscopic examinations of tissue samples, body fluids, and other specimens obtained from patients.
  - Employ advanced knowledge of anatomy, pathology, and cytology to accurately identify and interpret cellular changes and abnormalities.
  - Utilize specialized techniques, such as staining and immunohistochemistry, to enhance the visualization and characterization of cellular structures.
2. Disease Diagnosis and Tumor Classification:
  - Formulate accurate diagnoses of diseases and conditions based on the microscopic examination of specimens.
  - Classify tumors according to their type, grade, and stage, providing crucial information for cancer staging and treatment planning.
  - Collaborate with clinicians to correlate pathological findings with clinical presentation and patient history.
3. Laboratory Supervision and Quality Control:
  - Oversee the operation of the pathology laboratory, ensuring adherence to safety standards and quality control protocols.
  - Supervise and train pathology technicians and residents, providing guidance and instruction in diagnostic techniques and procedures.
  - Participate in quality assurance programs to maintain high standards of accuracy and reliability in laboratory testing.
4. Research and Education:
  - Actively engage in research initiatives aimed at advancing knowledge in pathology and improving diagnostic accuracy.
  - Contribute to educational programs for pathology residents, medical students, and other healthcare professionals.
  - Stay abreast of the latest advancements in pathology techniques, disease markers, and molecular diagnostics.

### Qualifications

1. Academic Background:
  - Hold an MBBS or equivalent degree from a recognized university.
  - Hold a post graduate degree in pathology.
2. Professional Experience:
  - Possess at least one year of clinical experience in a hospital or clinic setting as a pathologist.
  - Demonstrate a proven track record of accurate diagnoses and effective patient care contributions.

- Maintain a strong commitment to evidence-based practice and continuous professional development.
- 3. Personal and Professional Attributes:
  - Exhibit exceptional communication and interpersonal skills, fostering effective collaboration with colleagues and patients.
  - Maintain a strong work ethic, demonstrating dedication to patient care and achieving excellence in pathology practice.
  - Possess exceptional problem-solving and analytical skills, enabling accurate interpretation of complex microscopic findings.
- 4. Regulatory Compliance:
  - Be registered with the Pakistan Medical Council (PMC) and maintain an active license to practice medicine.

Additional Considerations:

- Pathologists play a critical role in patient care, providing accurate diagnoses that guide treatment decisions and improve patient outcomes.
- They must maintain high standards of professionalism, ethical conduct, and patient confidentiality.
- Pathologists should stay updated on the latest advancements in pathology techniques, disease markers, and molecular diagnostics.
- They should actively participate in continuing medical education programs to enhance their knowledge and skills.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **Internal Medicine, Pediatrics, Family Medicine, or other relevant specialty**

Job Title: Physician

Department: Internal Medicine, Pediatrics, Family Medicine, or other relevant specialty

Reports To: Medical Superintendent / Respective HOD

### Duties and Responsibilities

#### 1. Patient Care and Management:

- Conduct thorough patient examinations, including physical examinations, medical histories, and symptom evaluations.
- Order and interpret diagnostic tests, such as laboratory tests, imaging studies, and biopsies, to aid in diagnosis and treatment planning.
- Diagnose and treat a wide range of medical conditions, from common illnesses to complex chronic diseases.
- Prescribe appropriate medications, therapies, and interventions to manage patient conditions and promote healing.

#### 2. Preventative Care and Counseling:

- Provide preventive care counseling to patients, emphasizing healthy lifestyle habits, disease prevention strategies, and regular checkups.
- Educate patients about their medical conditions, treatment plans, and potential complications to promote informed decision-making and self-management.
- Administer immunizations and vaccinations to protect patients from infectious diseases and promote public health.

#### 3. Collaboration and Referrals:

- Collaborate with other healthcare professionals, such as specialists, nurses, and social workers, to provide comprehensive patient care.
- Refer patients to specialists or other healthcare providers when necessary for specialized care or management of complex conditions.
- Maintain effective communication with patients' families and caregivers to ensure their involvement in the care plan.

#### 4. Documentation and Record-Keeping:

- Maintain detailed and accurate medical records for each patient, documenting examinations, diagnoses, treatments, and patient interactions.
- Prepare clear and concise patient summaries and discharge instructions, ensuring continuity of care.
- Adhere to all applicable record-keeping standards and regulations set forth by the Punjab Healthcare Commission (PHC).

#### 5. Continuous Learning and Professional Development:

- Stay abreast of the latest advancements in medical knowledge, diagnostic techniques, and treatment modalities through continuing medical education (CME) programs.
- Participate in research initiatives aimed at improving patient care, advancing medical knowledge, and enhancing treatment outcomes.
- Contribute to the education and training of medical students, residents, and other healthcare professionals, sharing expertise and fostering professional growth.

## Qualifications

### 1. Academic Background:

- Hold an MBBS or equivalent degree from a recognized university.
- Hold a post graduate degree in the respective specialized specialty.

### 2. Professional Experience:

- Possess at least one year of clinical experience in a hospital, clinic, or private practice setting as a physician.
- Demonstrate a proven track record of accurate diagnoses, effective treatment plans, and patient satisfaction.
- Maintain a strong commitment to evidence-based practice and continuous professional development.

### 3. Personal and Professional Attributes:

- Exhibit exceptional communication and interpersonal skills, fostering effective collaboration with patients, colleagues, and healthcare teams.
- Maintain a strong work ethic, demonstrating dedication to patient care and achieving excellence in medical practice.
- Possess exceptional problem-solving and analytical skills, enabling the ability to diagnose complex medical conditions and make sound treatment decisions.

### 4. Regulatory Compliance:

- Be registered with the Pakistan Medical Council (PMC) and maintain an active license to practice medicine.
- Be registered with the College of Physicians and Surgeons Pakistan (CPSP) or the relevant specialty college and adhere to its professional guidelines and ethical standards.

## Additional Considerations:

- Physicians play a pivotal role in patient care, providing comprehensive medical services and promoting patient well-being.
- They must maintain high standards of professionalism, ethical conduct, and patient confidentiality.
- Physicians should stay updated on the latest advancements in medical science, diagnostic techniques, and treatment modalities.
- They should actively participate in continuing medical education programs to enhance their knowledge and skills.

## **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

### **Quality Control Officer**

Job Title: Quality Control Officer

Reports To: Medical Superintendent

Responsibilities:

- Develop and implement quality improvement plans:
  - Conduct regular needs assessments to identify areas for improvement.
  - Develop comprehensive quality improvement plans aligned with the Punjab Healthcare Commission's standards and best practices.
  - Collaborate with various departments, including clinical teams, administrative staff, and patients, to garner feedback and ensure program implementation meets their needs.
- Monitor and evaluate quality improvement initiatives:
  - Develop and utilize data collection tools to track key performance indicators (KPIs) and measure progress towards quality goals.
  - Analyze data to identify trends, patterns, and areas for further improvement.
  - Prepare reports summarizing findings and recommendations for improvement.
- Facilitate and implement corrective actions:
  - Analyze root causes of identified quality issues.
  - Develop and implement corrective action plans to address identified problems.
  - Track and monitor the effectiveness of corrective actions.
- Educate and train healthcare professionals:
  - Conduct training sessions on quality improvement principles, methodologies, and tools.
  - Provide ongoing support and guidance to healthcare professionals involved in quality improvement initiatives.
- Maintain compliance with regulatory requirements:
  - Ensure all quality improvement activities comply with relevant standards and regulations established by the Punjab Healthcare Commission.
  - Participate in accreditation surveys and inspections.
- Collaborate with other stakeholders:
  - Build and maintain relationships with key stakeholders, including patients, families, community members, and regulatory bodies.
  - Communicate effectively and transparently regarding quality improvement initiatives and results.

# **JOB DISCRIPTION / DUTIES AND RESPONSIBILITES**

## **RADIOGRPAHER**

Job Title: Radiographer (PMF Qualified)

Department: Radiology

Reports To: HOD Radiographer or Medical Superintendent

### **1. Image Acquisition and Processing:**

- Prepare patients for radiographic examinations, explaining procedures, addressing concerns, and ensuring proper positioning.
- Operate and maintain a variety of radiographic equipment, including X-ray machines, CT scanners, MRIs.
- Employ appropriate radiographic techniques and exposure parameters to obtain high-quality diagnostic images.
- Process and manipulate digital images using specialized software to enhance their diagnostic value.

### **2. Image Interpretation and Reporting:**

- Analyze and interpret medical images, identifying abnormalities and potential disease indications.
- Prepare clear and concise radiology reports, communicating findings to referring physicians in a comprehensive and timely manner.
- Collaborate with radiologists to ensure accurate diagnoses and provide additional information when necessary.
- Participate in quality assurance programs to maintain high standards of image quality and interpretation.

### **3. Patient Care and Safety:**

- Prioritize patient safety, ensuring proper radiation protection measures are implemented throughout the imaging process.
- Monitor patients during imaging procedures, addressing any discomfort or concerns.
- Provide support and reassurance to patients, particularly those undergoing stressful or complex examinations.
- Adhere to infection control protocols to maintain a hygienic and safe environment.

### **4. Professional Development and Education:**

- Stay abreast of the latest advancements in radiographic techniques, imaging modalities, and diagnostic criteria.
- Participate in continuing medical education (CME) programs to enhance knowledge and skills.
- Contribute to the education and training of radiology residents, medical students, and other healthcare professionals.
- Engage in research initiatives aimed at improving radiographic procedures, image interpretation, and patient outcomes.

### **5. Clinical Experience and Expertise:**

- Possess relevant clinical experience in a hospital or clinic setting as a radiographer.



- Demonstrate clinical competence and adherence to professional standards and ethical principles.
- Exhibit excellent communication and interpersonal skills to interact effectively with patients, healthcare providers, and research team members.

**6. Personal and Professional Attributes:**

- Exhibit exceptional attention to detail, enabling the ability to identify subtle abnormalities in medical images.
- Maintain strong problem-solving and analytical skills to interpret complex images and provide accurate diagnoses.
- Possess exceptional work ethic, dedication, and perseverance to overcome challenges and achieve research goals.
- Demonstrate a commitment to ethical conduct, patient safety, and the responsible use of medical images.

Qualifications

**1. Academic Background:**

- Holds specialized diploma in radiography field from Punjab Medical Faculty / degree from a recognized university.
- Demonstrate a strong academic record, including a passion for radiography and an aptitude for conducting independent research.
- Possess a solid foundation in the theoretical and practical aspects of radiography and imaging modalities.

# **JOB DISCRPTION / DUTIES AND RESPONSIBILITES**

## **RADIOLOGIST**

Job Title: Radiologist

Department: Radiology

Reports To: Medical Superintendent / HOD Radiology

### Duties and Responsibilities

#### 1. Interpretation of Medical Images:

- Conduct a thorough examination of medical images, including X-rays, CT scans and other diagnostic imaging modalities.
- Employ advanced knowledge of anatomy, physiology, and pathology to accurately interpret the findings depicted in medical images.
- Identify and analyze abnormalities, subtle changes, and potential pathologies within the images.

#### 2. Disease Diagnosis and Condition Assessment:

- Formulate accurate diagnoses of diseases, injuries, and other health conditions based on the interpretation of medical images.
- Evaluate the severity and extent of identified conditions to determine the appropriate course of treatment.
- Collaborate with referring physicians to provide comprehensive patient care and management.

#### 3. Communication and Reporting:

- Effectively communicate diagnostic findings and interpretations to referring physicians, ensuring clear and concise reporting of medical conditions.
- Prepare detailed radiology reports that clearly document the findings, diagnoses, and recommendations for further management.
- Engage in discussions with patients and their families to explain diagnostic findings and address any concerns they may have.

#### 4. Interventional Radiology Procedures:

- Participate in planning and performing interventional radiology procedures, such as biopsies, angiograms, and image-guided drainage procedures.
- Employ specialized techniques and equipment to guide minimally invasive procedures with precision and accuracy.
- Collaborate with radiographers and other healthcare professionals to ensure the safe and effective execution of interventional radiology procedures.

#### 5. Quality Improvement and Education:

- Actively participate in research initiatives aimed at improving diagnostic accuracy, optimizing imaging protocols, and enhancing patient care.
- Contribute to educational programs for radiology residents, radiographers, and other healthcare professionals, sharing expertise and advancing knowledge.
- Stay abreast of the latest advancements in radiology technology, diagnostic techniques, and interventional procedures.

#### Qualifications

##### 1. Academic Background:

- Hold an MBBS or equivalent degree from a recognized university.
- Holds a post graduate degree in radiology.

##### 2. Professional Experience:

- Possess at least one year of clinical experience in a hospital or clinic setting as a radiologist.
- Demonstrate a proven track record of accurate diagnoses and effective patient care management.
- Maintain a strong commitment to evidence-based practice and continuous professional development.

##### 3. Personal and Professional Attributes:

- Exhibit exceptional communication and interpersonal skills, fostering effective collaboration with colleagues and patients.
- Maintain a strong work ethic, demonstrating dedication to patient care and achieving excellence in radiology practice.
- Possess exceptional problem-solving and analytical skills, enabling accurate interpretation of complex medical images.

##### 4. Regulatory Compliance:

- Be registered with the Pakistan Medical Council (PMC) and maintain an active license to practice medicine.

#### Additional Considerations:

- Radiologists play a crucial role in patient care, providing accurate diagnoses and contributing to effective treatment plans.
- They must maintain high standards of professionalism, ethical conduct, and patient confidentiality.
- Radiologists should stay updated on the latest advancements in radiology technology and diagnostic techniques.
- They should actively participate in continuing medical education programs to enhance their knowledge and skills.

# HR POLICY

Following HR policy must be followed in true letter and spirit regarding attendance and leaves of the employees in SIMC as approved by the academic Council in its meeting held on 26 April 2019.

## **GENERAL RULES FOR ALL EMPLOYEES:**

01. Every employee will mark their Attendance with biometric devices (excluding professors) at arrival and departure and/or the Attendance Register provided in the respective departments at arrival or departure with date and time as per SOPs mentioned against each.
02. The concerned Head of Department (HOD) / In charge (I/C) (depending on the type of employee) will countersign the attendance register at arrival time with crossing of the empty / unfilled columns.
03. Three late entries on biometric / attendance register will be equal to one short leave.
04. Three short leaves will be equal to one casual leave.
05. Short leave will not be of more than TWO hours.
06. Short leave also must be recommended by the concerned HOD or I/C and deposited in Medical Superintendent / Principal office before leaving the premises. If anyone leaves the institute before time without short leave, his/her absence for that day would be considered.
07. In the case of short leave required at arrival time then the short leave will be submitted a day before. However, in case of emergency the concerned HOD or I/C and MS/Principal will be informed telephonically regarding the requirement of short leave and the leave form will be submitted in the office of MS/Principal after arrival on duty.
08. Any employee requiring leave must get the leave approved from Medical Superintendent / Principal a day before to proceeding for leave with proper substitute. The approved leave must reach the HR & Accounts office on the same day of approval.
09. The leave application without substitute will not be entertained.
10. The leave application must be recommended and forwarded by the concerned HOD or I/C otherwise it will not be acceptable.
11. In case of sick leave / emergency leave the employee must inform the concerned HOD or I/C and Medical Superintendent / Principal via phone and email the leave at [faculty@simdc.edu.pk](mailto:faculty@simdc.edu.pk) . The arrangement of replacement in this case will preferably be made by the person requiring leave by telephonically requesting his/her colleagues or he/she will request the concerned HOD or I/C for such arrangement. And the substitute should be mentioned in the email as well.
12. After the utilization of allocated casual leaves of the year if a person avails any further leave, then it will be counted as absent from duty and the salary of those days will be deducted.
13. The HOD or I/C must ensure the entry of the leaves and short leaves in the Attendance Register when countersigning it, daily.
14. The MS / Principal office must also keep a record of leaves etc. to tally with the attendance Performa sent by the departments at the end of each month.
15. Department wise monthly attendance of the complete faculty and staff of the on enclosed Performa duly signed by concerned HOD or I/C must reach the Office of Medical Superintendent (SITH)/Principal (SIMC) up to 1<sup>st</sup> of every month for onward submission to P.D. Admin & Account Office otherwise the Salary of that department will not be disbursed for that month.
16. The female staff members will be allowed maternity leave as per government rules.

## **DOCTORS:**

01. All the doctors up to Associate Professors will mark their Attendance with biometric devices and on the Attendance Register provided in the respective departments, on arriving and on leaving the duty with time of arrival and leaving.
02. Professors will just mark the Attendance on the Registers and no biometric, however the Date & Time of arriving and leaving the duty must be mentioned.
03. The Professor / HOD will be responsible as their HOD or I/C for daily checking and countersigning the Attendance Register and all other duties assigned to the HOD or I/C in the above mentioned general rules.
04. Although the staff from Assistant Professor and above working in the hospital is the college staff falling under the control of Principal but for their convenience and ease of access they can submit the attendance Performa, leaves and short leaves in the office of Medical Superintendent and the MS office will communicate it to the principal office/Account Office.
05. The AMS evening and night will sign the leaves and attendance of medical officers on evening and night duties as I/C and arrange for substitute.

## **NURSES AND PARAMEDICS:**

01. All the Nurses will mark their Attendance with biometric devices and on the Attendance Register on arriving and on leaving the duty with Time & Date while signing the Register in Matron / AMS Offices.
02. The Matron and AMS Evening and Night will be responsible as their HOD or I/C for daily checking and countersigning the Attendance Register and all other duties assigned to the HOD or I/C in the above-mentioned general rules.

## **CLERICAL STAFF, COMPUTER OPERATORS, MATRON, FLOOR INCHARGES etc.:**

01. All the staff mentioned above will mark their Attendance with biometric devices and on the Attendance Register on arriving and on leaving the duty with Time & Date while signing the Register in Principal Office or MS / AMS Offices (depending upon the place of posting i.e., Hospital or Medical College).
02. The Principal, MS and AMS Evening and Night will be responsible as their HOD or I/C for daily checking and countersigning the Attendance Register and all other duties assigned to the HOD or I/C in the above-mentioned general rules.

## **CLASS IV SERVANTS (WARDBOYS, SWEEPERS, WARD AYA etc.):**

01. All the Class IV Servants will mark their Attendance with biometric devices and on the Attendance Register on arriving and on leaving the duty with Time & Date while signing the Register in the Administrator / Floor I/C Office.  
The Administrator & Floor I/C will be responsible as their HOD or I/C for daily checking and countersigning the Attendance Register and all other duties assigned to the HOD or I/C in the above-mentioned general rules.

# EMPLOYEE RIGHT AND THEIR RESPONSIBILITIES

Shahida Islam Medical Complex Lodhran is an equal opportunity employer, all team members are treated with respect at work, they have the tools, training & support to deliver care, opportunities to develop & progress. Employees also have the right to privacy, fair compensation & freedom from discrimination. Detailed list of employee Rights & Responsibilities are as below.

## EXPECTATION FROM EMPLOYEES:

Every employee should follow the job responsibilities and make sure to maintain good inter / intra departmental coordination.

## EMPLOYEE RIGHTS:

1. To receive written employment agreement / contract & to have equal opportunities of employment & promotion regardless of age, gender, caste & economic status.
2. To be evaluated & rewarded through periodical performance evaluation.
3. To be respected regardless of customs, personal values, religion / belief & dignity.
4. To have all training & orientation as per job specification.
5. To have leave as per the SIMC leave policy.
6. To have grievance redressed & also to be provided with harassment free workplace.
7. To work in a safe & healthy environment free from all risks & hazards.
8. To be informed about any hazards & risks associated with work.
9. The personal privacy of an employee will be respected.
10. Provision of instructions PPE; s training & supervision to all employees so they can work safely.

## EMPLOYEE RESPONSIBILITIES:

1. To adhere to professional work practices as per institution rules, regulations & practices.
2. To accept professional accountability & maintain the standards of professional practice asset by the appropriate regulatory bodies applicable to your profession or role.
3. To attend complete orientation, professional development activities & departmental training.
4. To provide complete & accurate information to the HR & Hospital management whenever required.
5. To treat client, co-workers, patients with respect & dignity & maintain confidentiality & to report immediately to Administration/ Reception/ Concerned department about untoward incident, dangerous unsafe practice & any type of harassment. To understand & adhere to Patient's Rights & Responsibilities.
6. Not to interfere with or misuse any material resources by the SIMC.
7. To ensure compliance with health & safety requirements & relevant SIMC rules.
8. To ensure renewal of professional certifications, registrations or any other board renewals associated with employee continuing education, professional development, or any legal requirements by regulatory authorities.
9. To comply with "declaration of commitment" given during orientation.
10. To respect HOD / Supervisor & all the employees of Shahida Islam Medical Complex

# PATIENTS' RIGHTS AND RESPONSIBILITIES

## Part A: PATIENTS RIGHTS

The patients being treated at Shahida Islam Medical Complex should :

1. Have Easy access to registration/help desk to get registered and be guided to the respective services as per requirement.
2. Have Special arrangements for elderly people and disabled to have easy access to required health services.
3. Be treated with due skill, and in a professional manner for the accepted standard of health in complete consonance with the principles of medical ethics.
4. Be made aware of the full identity and professional status of the Healthcare Service Provider(s) and other staff providing services.
5. Be given information to make informed choices about his healthcare and treatment options and/or to give informed consent, in terms and in a language that he understands.
6. Have the right to seek second opinion when making decisions about his healthcare and may be assisted by the Healthcare Establishment/healthcare service provider in this regard.
7. Have the right to accept or refuse any treatment, examination, test, or screening procedure that is advised to him, exceptions being in cases of emergencies and/or mental incapacity in accordance with the relevant law.
8. Be assured that Personal health information will be kept secure and confidential.
9. Have Access his own medical records, including but not limited to, comprehensive medical history, examination(s), investigation(s) and treatment along with the progress notes, and obtain copies thereof.
10. Not to be discriminated against because of age, disability, gender, marriage, pregnancy, maternity, race, religion, cultural beliefs, color, caste and/or creed.
11. Be assured that the treatment being received is provided by duly qualified and experienced staff.
12. Receive emergency healthcare, unconditionally. However, once the emergency has been dealt with, he may be discharged or referred to another Healthcare Establishment [emergency requiring healthcare, is a situation threatening immediate danger to life or severe irreversible disability, if healthcare is not provided urgently].
13. Be treated with respect, empathy, and dignity irrespective of age, disability, gender, marriage, pregnancy, maternity, race, religion, socio-economic status, cultural beliefs, color, caste and/or creed.
14. Be treated in privacy and with dignity and have his religious and cultural beliefs respected throughout the duration of care, including but not limited to, taking history, examination or adopting any other course of action.
15. Be made aware of procedures for complaints and resolution of disputes and conflicts.
16. Be aware of the complaint process concerning healthcare service provider, official of the Healthcare Establishment or such other organization/person and be associated throughout the progress of the complaint and its outcome.
17. Seek compensation if he has been harmed by, including but not limited to maladministration, malpractice, negligent treatment, or failure on the part of a healthcare service provider or any staff/employee or others rendering services at the Healthcare Establishment.
18. Be informed and refuse to participate in research, or any project dealing with his disease, care, and treatment.
19. Be informed as early as possible regarding cancellation and/or postponement of any appointment, surgery, procedure, treatment, or meeting.
20. Be made aware of the costs, fee and/or expenses, prior to the consultation, treatment or other services, and/or operation/procedure, as the case may be, and receive payment receipt(s) for the same.
21. Be given written instructions regarding his treatment, including instructions at the time of discharge.
22. Have the right to examine and receive an explanation for the bill(s) regardless of the source of payment.

## **PART B: RESPONSIBILITIES OF PATIENTS**

The patients being treated at Shahida Islam Medical Complex should:

1. Provide, accurate and complete information, to the best of his knowledge, regarding medical history, including but not limited to, present medical condition and complaints, medications, allergies and special needs, past illnesses, prior hospitalizations etc. as is required.
  2. Report unexpected changes in his condition.
  3. Adhere to the treatment plan prescribed to him.
  4. Inform the hospital if he/she is going to be late or is unable to do so for any reason to make up the appointment, as soon as possible.
  5. Take responsibility for his actions if he refuses treatment or does not follow the given instructions.
  6. Ensure that the financial obligations of his care are fulfilled as promptly as possible.
  7. Follow the Healthcare Facilities' Rules and Regulations relating to patient care and conduct of others, including careers and or visitors.
  8. Behave in a courteous and polite manner which is non-threatening.
  9. Refrain from conducting any illegal activity while he is at the premises.
  10. Inform them of any change of address and other requisite information.
- The Process / system of performance appraisal will be properly explained in the orientation which will be covering the following points.



## **POLICY FOR EMPLOYEE PERFORMANCE APPRAISAL**

1. The employee's appraisal will focus on their strengths, areas for improvement, and any notable accomplishments.
2. There will be eight segments which will be Rated (from 1 to 5 and 5 being Excellent) by the Concerned head of the Department / supervisor of the employee concerned. The employee will be judged on
  1. Job knowledge
  2. Quality of work
  3. Quantity of work
  4. Reliability
  5. Initiative and creativity
  6. Judgment
  7. Cooperation
  8. Attendance
3. The average of all the segments will be calculated to judge the overall performance rating of an employee.
4. The rating scale will be.
  1. Unacceptable (fails to meet standards)
  2. Needs improvement (frequently fails to meet standards)
  3. Satisfactory (generally meets standards)
  4. Outstanding (frequently exceeds standards)
  5. Excellent (consistently exceed standard)
5. If there are any other noteworthy accomplishments / Improvement required will be pointed out by the HOD concerned.
6. Once the Performance appraisal form is filled will be submitted to the principal concerned who will countersign the form and if required will call the employee and discuss the strengths, areas for improvement, and any notable accomplishments.
7. Every employee can have the first performance appraisal at the end of probation period in case of poor performance or complaint during the probation period. Otherwise, the employee service is considered regular.
8. Each employee, head of department/ supervisor will ensure that the performance appraisal of every employee is written and sent to HR department by November each year.
9. Based on the yearly performance appraisal form the following can be given to the employee:
  1. Extension/ cancellation of the job contract
  2. Appreciation/ warning letter
  3. Promotion/ demotion in the designation (PM&DC rules will also apply for doctor) \*
  4. Increment in Salary/ compulsory training for improvement.
  5. Any other benefits/ actions

# Appreciation criteria Performance Appraisal Form

Employee Name:

Employee BMC:

Position:

Department:

Review Period:

Head of Department/ Supervisor:

**Instructions:** Rate the employee's performance during the review period by checking the most appropriate numerical value in each section. Prior to the performance discussion with the employee, a detailed plan to address areas rated "need improvement" or "unacceptable" must be submitted to the department head and human resources for review.

**Rating scale:**

- 5 Excellent (consistently exceeds standards)
- 4 Outstanding (frequently exceeds standards)
- 3 Satisfactory (generally meets standards)
- 2 Needs improvement (frequently fails to meet standards)
- 1 Unacceptable (fails to meet standards)

	5	4	3	2	1
<b>Job Knowledge</b> Knowledge of products, policies, and procedures; OR knowledge of techniques, skills, equipment, procedures, and materials.					
<b>Quality of Work</b> Freedom from errors and mistakes. Accuracy, quality of work in general.					
<b>Quantity of Work</b> Productivity of the employee.					
<b>Reliability</b> The extent to which the employee can be depended upon to be available for work, to complete work properly, and complete work on time. The degree to which the employee is reliable, trustworthy, and persistent.					
<b>Initiative and Creativity</b> The ability to plan work and to proceed with a task without being told every detail and the ability to make constructive suggestions.					
<b>Judgment</b> The extent to which the employee makes decisions that are sound. The ability to base decisions on fact rather than emotion.					
<b>Cooperation</b> Willingness to work harmoniously with others in getting a job done. Readiness to respond positively to instructions and procedures.					
<b>Attendance</b> Consistency in coming to work daily and conforming to scheduled work hours.					

*Add all numerical values from each category then divide by 8.*

**Overall performance rating:** \_\_\_\_\_

**Noteworthy accomplishments during this review period:**

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**Areas requiring improvement in job performance (attach the performance improvement plan for any areas rated needs improvement or unacceptable):**

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# **DISASTER MANAGEMENT FIRE SAFETY & EVACUATION PLAN SHAHIDA ISLAM MEDICAL COMPLEX, LODHRAN**

## **Fire Safety & Evacuation Plan**

The Medical Superintendent Shahida Islam Teaching Hospital Lodhran (Chief oversight in charge) & Director maintenance, Repair & Cleanliness (Deputy chief oversight in charge) will be looking after the disaster management, fire safety & evacuation plan in Shahida Islam Medical Complex, Lodhran.

Following Staff is deputed in all the Four Sections of Shahida Islam Medical Complex Lodhran (Instructions for staff attached)

- 1) Shahida Islam Teaching Hospital
- 2) Shahida Islam Medical College
- 3) Shahida Islam Dental College
- 4) Shahida Islam Boys/ Girls Hostels & Faculty Apartments

### **1. SHAHIDA ISLAM TEACHING HOSPITAL (FIRE RESPONSE TEAM)**

- i. Floor In charge (Team In charge) (Zafar Iqbal – 0303-4342949)
- ii. PA to MS (M. Shakeel Shad – 0333-6042742)
- iii. Ward boy Derma OPD
- iv. Ward boy Surgery OPD
- v. Ward boy Medicine/ Ortho OPD
- vi. Ward boy Gynae / Surgery ward
- vii. Ward boy OT-Complex
- viii. Ward boy Pead's/ ICU ward

### **2. SHAHIDA ISLAM MEDICAL COLLEGE (FIRE RESPONSE TEAM)**

- i. In charge Student Affairs (Team In charge) (Mr. Shabir Ahmed – 0308-7736915)
- ii. PA to Principal (Mr. M. Adnan 0303-4014248)
- iii. Office Boy Student Affairs
- iv. Receptionist
- v. Office Boy Bio-Chemistry / Library
- vi. Office Boy Pathology / Anatomy
- vii. Lecture Theatre Assistant
- viii. Office Boy Pharmacology/Comm. Medicine

### **3. SHAHIDA ISLAM DENTAL COLLEGE (FIRE RESPONSE TEAM)**

- i. In charge Student Affairs (Team In charge) (Mr. Najaf Nawaz – 0302-3808568)
- ii. PA to Principal (Zafar- 0306 1362137)
- iii. Office Boy M.S Office
- iv. Receptionist
- v. Office Assistant Oral Biology/Physiology
- vi. Office Assistant Oral Pathology / Anatomy
- vii. Lecture Theatre Assistant
- viii. Office Assistant General Medicine / Surgery

**NOTE: In the evening & night shift the Security In charge will look after the Medical & Dental Colleges.**

# ہسپتال کے عملے کیلئے ضروری ہدایات

آگ یا کسی بھی ایمر جنسی کی صورت میں درج ذیل اقدام درج ذیل عملہ کی ذمہ داری ہوگی۔ درج ذیل ٹیم اسٹنٹ ڈائریکٹر / فائر سیفٹی مینجر کی زیر نگرانی میں کام کریں گے۔

تمام ایمر جنسی باہر جانے والے دروازے کھولے گا (چابیاں ساتھ بکسے میں ہیں)	فلور انچارج
1122 اور 15 وغیرہ کو ٹیلی فونک اطلاع کرے گا	پانی اور ٹوائیم ایس
فائر الارم بجائے گا	وارڈ ہوائے ایم ایس آفس
ادارہ کی سکیورٹی کو اطلاع دے گا	وارڈ ہوائے جلد OPD
الیکٹریشن ڈیپارٹمنٹ کو اطلاع دے گا	وارڈ ہوائے سرجری OPD
لوگوں کو نزدیکی ایمر جنسی دروازے کی طرف لیجائے گا	وارڈ ہوائے میڈیسن / آرٹھو
فٹ فلور سے لوگوں کو ایمر جنسی دروازے کی طرف لیجائے گا	وارڈ ہوائے گائنتی اسرجری
آپریشن تھیٹر سے لوگوں کو نکال کر ایمر جنسی دروازے کی طرف لے کر جائے گا	وارڈ ہوائے تھیٹر کمپلیکس
وارڈز سے لوگوں کو باہر نکالے گا	وارڈ ہوائے پیڈز / آئی سی یو

باقی تمام وارڈ ہوائز اور سوپیروز  
 دوسرے وارڈ ہوائز کی مدد کریں گے۔ فلور انچارج فائر ایکسٹنگویشن اور دوسرے تمام آلات کی ایکسپلوری ڈیٹ اور ان کی مینینٹنس کا خاص خیال رکھے گا اور تمام وارڈ ہوائز اور سوپیروز کو ہر 6 ماہ بعد ٹیننگ دے کر رپورٹ پیش کرے گا۔  
 تمام ایمر جنسی EXIT کے نقشہ جات ہر فلور پر آویزاں ہیں کسی بھی ایمر جنسی کی صورت میں تمام لوگوں کو اسمبلی گراؤنڈ (مسجد والے گراؤنڈ) میں اکٹھا کیا جائے گا

بحکم: میڈیکل سپرینٹنڈنٹ  
 شاہدہ اسلام میڈیکل کمپلیکس، لودہراں

# میڈیکل کالج کے عملے کیلئے ضروری ہدایات

آگ یا کسی بھی ایمرجنسی کی صورت میں درج ذیل اقدام درج ذیل عملہ کی ذمہ داری ہوگی۔ درج ذیل ٹیم اسٹنٹ ڈائریکٹر / فائیر سیفٹی منیجر کی زیر نگرانی میں کام کریں گے۔

انچارج سٹوڈنٹ انیمرز  
پی اے ٹو پرنسپل  
آفس بوائے سٹوڈنٹ انیمرز  
رہسپنڈنٹ  
رہسپنڈنٹ  
آفس بوائے بائیو کیمسٹری لائبریری  
آفس بوائے پیٹھالوجی / اناٹومی  
لیکچر تھیٹر اسٹنٹ  
وارڈ بوائے فارماکولوجی / کمیونٹی میڈیسن  
باقی تمام آفس بوائز اور سوئیچرز  
دوسرے آفس بوائز کی مدد کریں گے۔ انچارج سٹوڈنٹ انیمرز فائر ایکسٹنگویشن اور دوسرے تمام آلات کی ایکسپازرٹی ڈیٹ اور ان کی مینینٹنس کا خاص خیال رکھے گا اور تمام آفس بوائز اور سوئیچرز کو ہر 6 ماہ بعد ٹریننگ دے کر رپورٹ پیش کرے گا۔  
تمام ایمرجنسی EXIT کے نقشہ جات ہر فلور پر آویزاں ہیں کسی بھی ایمرجنسی کی صورت میں تمام لوگوں کو اسمبلی گراؤنڈ (مین سپورٹس گراؤنڈ) میں اکٹھا کیا جائے گا

تمام ایمرجنسی باہر جانے والے دروازے کھولے گا (چابیاں ساتھ بکسے میں ہیں)  
1122 اور 15 وغیرہ کو ٹیلی فونک اطلاع کرے گا  
فائر الارم بجائے گا  
ادارہ کی سکیورٹی کو اطلاع دے گا  
ایکسٹریشن ڈیپارٹمنٹ کو اطلاع دے گا  
لوگوں کو ایمرجنسی دروازے کی طرف لیجائے گا  
فٹ فلور سے لوگوں کو ایمرجنسی دروازے کی طرف لیجائے گا  
لیکچر تھیٹر سٹوڈنٹس کو نکال کر ایمرجنسی دروازے کی طرف لے کر جائے گا  
سیکنڈ فلور سے تمام سٹاف اور سٹوڈنٹس کو باہر نکالنے میں مدد کرے گا  
اگر آگ لگی ہو۔ پانی، مٹی، اور فائر ایکسٹنگویشن کے ذریعے آگ بجھائیں یا

بحکم: میڈیکل سپرینٹنڈنٹ  
شاہدہ اسلام میڈیکل کیمپلیکس، لودہراں

# ڈینٹل کالج کے عملے کیلئے ضروری ہدایات

آگ یا کسی بھی ایمر جنسی کی صورت میں درج ذیل اقدام درج ذیل عملہ کی ذمہ داری ہوگی۔ درج ذیل ٹیم اسٹنٹ ڈائریکٹر / فائبر سیفٹی منیجر کی زیر نگرانی میں کام کریں گے۔

انچارج سٹوڈنٹ افیئرز تمام ایمر جنسی باہر جانے والے دروازے کھولے گا (چابیاں ساتھ جیسے میں ہیں) پی اے ٹوپر نیل

آفس بوائے ایم ایس آفس فائر الارم بجائے گا

ریسپنڈنٹ ادارہ کی سیکورٹی کو اطلاع دے گا

ریسپنڈنٹ الیکٹریشن ڈیپارٹمنٹ کو اطلاع دے گا

آفس اسٹنٹ اورل بائیو لوجی / افزا لوجی لوگوں کو ایمر جنسی دروازے کی طرف لیجائے گا

آفس اسٹنٹ اورل پیتھالوجی / اناٹومی فٹ فلور سے لوگوں کو ایمر جنسی دروازے کی طرف لیجائے گا

یکسچینجریٹر اسٹنٹ ایکسچینجریٹر اسٹوڈنٹس کو نکال کر ایمر جنسی دروازے کی طرف لے کر جائے گا

آفس اسٹنٹ جرنل میڈیسن اسرجری سائنڈ فلور سے تمام سٹاف اور سٹوڈنٹس کو باہر نکالنے میں مدد کرے گا

باقی تمام آفس بوائز اور سوئیچرز اگر آگ لگی ہو۔ پانی، مٹی، اور فائر ایکسٹنگویشر کے ذریعے آگ بجھائیں یا

دوسرے آفس بوائز کی مدد کریں گے۔ انچارج سٹوڈنٹ افیئرز فائر ایکسٹنگویشر اور دوسرے تمام آلات کی ایکسپانڈری ڈیٹ اور

ان کی مینجمنٹس کا خاص خیال رکھے گا اور تمام آفس بوائز اور سوئیچرز کو ہر 6 ماہ بعد ٹریننگ دے کر رپورٹ پیش کرے گا۔

تمام ایمر جنسی EXIT کے نقشہ جات ہر فلور پر آویزاں ہیں کسی بھی ایمر جنسی کی صورت میں تمام لوگوں کو اسمبلی گراؤنڈ (مین سپورٹس گراؤنڈ) میں اکٹھا کیا جائے گا

بحکم: میڈیکل سپرینٹنڈنٹ

شاہدہ اسلام میڈیکل کیمپلیکس، لودہراں

#### **4. Shahida Islam Boys / Girls Hostels & Faculty Apartments (FIRE RESPONSE TEAM)**

- i. Hostel Wardens (Team In charge)
  - a. Mr. Kashif 0346-8676110
  - b. Ms. Rubina 0304-0972308
- ii. Hostel Ayas
- iii. Hostel Sweepers

### **SIMC Fire Safety, Prevention and Disaster Mock Drill Schedule**

#### **The Training Schedule & Mock Drill (Biannually)**

##### **By 1122 Lodhran.**

An MOU has already been signed by the Oversight In charge and in charge Rescue 1122 Lodhran (Attached Annexure I) for training of Faculty, students and all Para medical & lower staff at Shahida Islam Medical complex every six months. The schedule decided is as:

- In Month of February/ March every year
- In Month of September /October every year

### **IDENTIFIED HIGH RISK / FIRE PRONE AREAS IN SIMC**

#### **High Risk Areas of Teaching Hospital**

- i. OT - Complex.
- ii. Radiology Department.
- iii. Pathology Department.
- iv. Electric Workshop.
- v. I.T Server Room.
- vi. A&E Department.
- vii. General Store.
- viii. Medical Record Room.

#### **High Risk Areas of Medical College**

- i. Basic Science Lab.
- ii. Library.
- iii. IT Lab.
- iv. Record Room.
- v. Control Room

#### **High Risk Areas of Dental College**

- i. Orthodontic Lab.
- ii. Prosthodontics Lab.
- iii. Radiology Department.



## **FIRE SAFETY MEASURES IN HIGH-RISK AREAS**

The Fire Safety Manager is responsible for implementing the policy and procedures regarding fire safety of high-risk areas & Training of staff in **Shahida Islam Medical Complex Lodhran**.

The fire safety Manger will ensure the following actions,

- ❖ Ensure to turn off / shut down all electric equipment when they are not in use.
- ❖ The entire stationary & wood furniture be placed on safe side from electricity.
- ❖ Ensure that the Acids, Chemicals & other risky things are placed separately.
- ❖ Maintain the Room / machine temperature accordingly.
- ❖ Ensure that appropriate management responsibilities are put in place so that fire incidents can be managed accordingly.
- ❖ When on duty, the Fire Safety Manager, or deputy is to attend fire calls to ensure procedures are being conducted in an efficient and effective way.
- ❖ Ensure that Heads of Departments & other staff are aware of their responsibilities in managing fire safety precautions for their areas of control.
- ❖ Ensure the fire risk assessments are carried out and management plans are in place for all buildings within SIMC.
- ❖ The fire incidents are recorded and investigated.

## **EMERGENCY INTERNAL TELEPHONE NUMBERS:**

Medical Superintendent (Oversight In charge)	131
Fire Safety Manager	435
Security Main Gate	801
Security Camera Room	414
Electrician Room	145
Emergency Reception Hospital	170
Main Reception Hospital	0
Reception Dental College	333
Reception Medical College	444

## **DETECTION OF FIRE / SMOKE:**

All the Staff on duty especially security guards, receptionists, ward boys, office boys/ assistant , Hostel Aya & Sweepers and nurses at the nursing station will be vigilant and if they notice any smoke, spark or smell in their respective area of duty they will immediately inform:

- i. Respective Team In charge
- ii. Assistant Director
- iii. Oversight In charge

Respective Team In charge will take the appropriate actions like switching off the electricity, use of fire extinguisher or sand bucket etc.

### **Necessary Items and Equipment**

- i. Buckets with sand
- ii. Portable fire extinguishers  
Affixed in all the Departments.

### **Containment:**

The In charge of team responsible for containment of fire will take a quick review of the situation to assess that they can control / contain the situation otherwise simply initiate the alarm for evacuation and ask the team for abating the fire.

### **Abatement:**

It is very important to decide when to try abatement and when not to. The fire resulting from short circuit should never be controlled with water unless the power is cut off through main switch or the fuse break. If fire doesn't seem to be controllable by the hospital internal resources, it is essential to call help (fire brigade, civil defense) immediately even before starting the efforts for abatement. The general guidelines given below are helpful in carrying out the abatement.

### **General guidelines for Abatement**

1. When fire is detected, stay calm, try to oversee the situation, and watch out for danger. Then the following actions should be taken in this order:
  - a. Close windows and doors.
  - b. Give fire alarm (shouting, telephone, fire alarm).
  - c. Rescue people (and animals if present).
  - d. Switch off electricity and/or gas supply.
  - e. Fight fire, if possible, with at least two persons.
2. Persons with burning clothing should be wrapped in a blanket on the floor, sprayed with water. A CO2 fire extinguisher can also be used, but do not spray on the face.
3. When using fire extinguishers, it is important that the fire is fought at the seat of the fire i.e., at the bottom of the flames, not in the middle of the flames.  
If gas cylinders are present, there is the danger of explosion by overheating. If they cannot be removed, take cover, and try to cool them with a firehose. When the situation looks hopeless, evacuate the building. Let everybody assemble outside and check that no one is missing.

### **EMERGENCY EXIT PLAN/MAPS**

Shahida Islam Medical Complex consist of

- i. Shahida Islam Medical College
- ii. Shahida Islam Teaching Hospital
- iii. Shahida Islam Dental College
- iv. Boys and Girls hostels
- v. Faculty apartments.

All of these are multistory purpose-built buildings. All the buildings have appropriate fire exit maps displayed at all the floors and at appropriate places. The exit passage in this map area clearly identified with red arrows. All the buildings have EXITS which are unobstructed all the time. **Fire Exit Signs** are posted at appropriate places. The emergency exits are clearly marked.

The SIMC is in liaison with Civil Defense, Police authorities, Rescue1122 and Fire Brigade department as and when required for their help and support in case of an emergency.

### **EMERGENCY EXIT SYSTEM**

- i. Emergency lighting facilities maintain the specified degree of illumination in the event of failure of the normal lighting for a period of at least one hour.
- ii. "EXIT" signs are displayed at all the exit points.
- iii. Size of signs – readable from 15-20 meters.
- iv. Use of ramps / external stairs for access to second and higher floors.(where applicable)
- v. Stairways with safe and adequately secured railings.
- vi. At least Stairway 5 feet wide made of concrete are available in all buildings.

### **In Case of Emergency Situation Evacuation of**

#### **1) Children / Ladies**

Children / Ladies will be given priority while evacuation. Children will be carried out by their mothers or attendant. Hospital staff will also be available for the any help required. The newborns and the children in incubators or under warmers shall be carried wrapped in blankets by the Staff.

#### **2) Patients:**

The patients who can walk will be guided to the appropriate exit while those who cannot walk will be transported through wheelchairs or the stretchers according to the condition of the patient.

#### **3) Faculty and Students evacuation from college and Hostels:**

The In-charge Student affairs Medical College and In charge Student affairs Dental College will ensure the evacuation of all the Students, Faculty, Staff from their respective colleges with the help of the designated teams already constituted

#### **4) Fire safety and evacuation team**

Fire safety and evacuation team will ensure that all the buildings have been and will only leave the building when they area sure no person is in the building.

### **ASSEMBLY AREA AFTER EVACUATION:**

- All the Employees & Patients etc. of the Shahida Islam Teaching Hospital will gather in the Assembly Area of Hospital (Mosque Ground near Parking) so that a head count can be done. To ensure everyone has been successfully evacuated from the building.
- All the Students, Teaching Staff etc. of the Shahida Islam Medical & Dental College, Hostels & Faculty apartments will gather in the Assembly Area of Medical Complex (Main Ground / Sports Ground) so that a head count could be done. To ensure everyone has been successfully evacuated from the building.
  - Fire and general safety

# **INFECTION CONTROL POLICY SHAHIDA ISLAM MEDICAL COMPLEX**

## **SURVEILLANCE PLAN TO CONTROL NOSOCOMIAL INFECTION**

Surveillance is a systematic, active on-going observation of the occurrence and distribution of a disease within a population and of the events that increase or decrease the risk of the disease occurrence. The primary role of surveillance is to monitor nosocomial infection rate as the first step to identify local problems and priorities and evaluate the effectiveness of IC activity. Surveillance, by itself, is an effective process to decrease the frequency of hospital-acquired infections.

### **I.OBJECTIVES:**

The aim of surveillance program is the reduction of nosocomial infections and the cost of treatment whereas the specific objectives include:

1. To improve awareness of the clinical staff and other hospital workers (including administrators) about nosocomial infections and antimicrobial resistance so that they may appreciate the need for preventive action.
2. To identify possible areas for improvement in patient care.

### **II. Implementation at the hospital level:**

1. General Surveillance:

The Infection Control Team is responsible for general monitoring and surveillance of the hospital including the patient's beds, washrooms, corridors, and other patient care area. The team will see if the waste segregation is practiced from the point of generation to the disposal. In view of the Dengue fever risk, it will be ensured that water is not let to stay uncovered.

2. Microbial Surveillance:

Swabs from Operation theatres are collected quarterly for culture. The swabs will be collected from the 6 sites including OT bed/table, floor, walls, air, light and anesthesia machine. External validation will be carried out every six months. The periodicity of microbial surveillance can be shortened as per the advice of the surgeon or the anesthetist depending upon the number of surgeries and nature of the procedures.

### **III. Infection Control Practices**

Infection control practices can be grouped in two categories:

1. Standard Precautions: Transmission of infections in healthcare facilities can be prevented and controlled through the application of basic IC precautions which can be grouped into Standard Precautions, that must be applied to all patients at all times, regardless of diagnosis or infectious status.
2. Additional Precautions, which are specific to modes of transmission or transmission-based i.e. airborne, droplet and contact.

**Standard precautions:** should be followed which includes.

- Hand hygiene
- Use of personal protective equipment (e.g., gloves, gowns, masks) depending upon the anticipated exposure
- Safe injection practice
- Safe handling of potentially contaminated equipment or surfaces in patient environment
- Appropriate handling of waste

**Transmission based precautions:** should be followed in certain circumstances, which include.

- Contact isolation
- Droplet isolation
- Airborne isolation

### **A) HAND WASHING**

- Hand washing techniques should be displayed in each department of hospital
- Provision of plain soap/alcohol-based hand sanitizer in each department

**Hands should be washed in the following situations.**

- 1) Hands should be washed before and after patient contact before putting on gloves and after taking off gloves
- 2) After touching blood and body substances (or contaminated patient care equipment), broken skin or mucous membranes, excreta (even if you wear gloves)
- 3) Between different procedures on the same patient
- 4) After handling contaminated equipment or laundry.
- 5) Before administration of medicines
- 6) After cleaning of spillage

### **B) PERSONAL PROTECTIVE EQUIPMENT (PPE)**

#### **USE OF PPE**

Proper Personal protective equipment which includes gloves, respiratory masks, gowns/aprons, eye protection goggles, boots/shoes, caps should be used.

PPE should be used by:

- a) Healthcare workers who provide direct care to patients and who work in situations where they may have contact with blood, body fluids, excretions, or secretions.
- b) Support staff including medical aides, cleaners, and laundry staff in situations where they may have contact with blood, body fluids, secretions, and excretions.
- c) Laboratory staff, who handle patient specimens.
- d) Family members who provide care to patients and are in a situation where they may have contact with blood, body fluids, secretions, and excretions.

## **Principles for use of PPE**

PPE reduces, but does not eliminate, the risk of acquiring an infection. It is important that it is used effectively, correctly, and always when contact with blood and body fluids of patients may occur. Continuous availability of PPE and adequate training for its proper use are essential. Staff must also be aware that the use of PPE does not replace the need to follow basic IC measures such as hand hygiene.

The following principles guide the use of PPE:

- a) PPE should be chosen according to the risk of exposure. The healthcare worker should assess whether they are at risk of exposure to blood, body fluids, excretions or secretions and choose their items of personal protective equipment according to this risk.
- b) Avoid any contact between contaminated (used) PPE and surfaces, clothing, or people outside the patient care area.

1) Gloves must be worn when:

- a) Direct contact with blood and body materials
- b) Examining a lacerated or non-intact skin e.g., wound dressing
- c) Examination of mucous membranes e.g., mouth, nose, dental procedures, oropharynx, GIT
- d) Working directly with contaminated equipment
- e) Gloves must never be reused.
- f) Wear gloves that fit appropriately
- g) Do not wear the same pair of gloves for the care of more than one patient.
- h) Do not wash the gloves for the purpose of reuse.
- i) Perform hand hygiene before and immediately after removing gloves.

2) Masks and protective eye wear must be used

- a) When engaged in procedures are likely to generate droplets of blood and body fluids.
- b) During surgical operations to protect wound from staff breathing which may contain infectious particles
- c) During catheterization and spinal procedures to protect the patient from exposure to infectious particles in mouth and nose of healthcare personnel
- d) Masks must be of good quality, properly fixed on mouth and nasal openings.

3) Gowns and aprons

- a) Should be worn where spraying or spattering of blood or body fluids is anticipated.
- b) Do not wear the same gown for the care of more than one patient.
- c) Remove gown and perform hand hygiene before leaving the patient area.

4) Respiratory masks

- a) If available N 95 or higher respirators for potential exposure to infectious agents transmitted via the airborne route (e.g., tuberculosis)
- b) N95 or higher respirators are tested annually.

## **RECOMMENDATIONS FOR DONNING OF PPE**

- Always perform hand hygiene before donning PPE
  1. If wearing a gown, don the gown first and fasten in back accordingly.
  2. If wearing a facemask or respirator
    - a) Secure ties or elastic band at the back of the head and/or neck
    - b) Fit flexible band to nose bridge
    - c) Fit snug to face and below chin

If wearing goggles or face shield, put it on the face and adjust to fit

## **RECOMMENDATIONS FOR REMOVAL OF PPE**

- Remove PPE before leaving the exam room or patient care area (except respirators which should be removed after exiting the room)
- Removal of gloves
  - o Grasp outside of glove with opposite gloved hand and peel off
  - o Hold removed glove in gloved hand.
  - o Slide ungloved fingers under the remaining glove at the wrist, peel off and discard.
- Removal of gowns
  - o Removal in such a way to prevent contamination of skin or clothing.
  - o Turn contaminated outside surface toward the inside.
  - o Roll or fold into a bundle and discard.
- Removal of facemask or respirator
  - o Avoid touching the front of face mask or respirator.
  - o Grasp the bottom and the ties/elastic to remove and discard.
- Removal of goggles or face shield
  - o Avoid touching the front of goggles or face shield.
  - o Remove by handling the head band or earpieces and discard
- Always perform hand hygiene after removing PPE

## **C) INJECTION SAFETY**

Injection safety practices are intended to prevent transmission of infectious diseases between one patient and another, or between patient and healthcare personnel.

- Use aseptic technique when preparing and administering parenteral medications
- Avoid unwrapping syringes prior to the time of use
- Never administer medications from the same syringe to multiple patients, even if the needle is changed
- Do not reuse a syringe to enter a medication vial or solution
- Do not administer medications from single-dose or single-use vials, ampoules, or bags or bottles of intravenous solution to more than one patient (e.g, do not use a bag of saline as a common source supply for multiple patients)
- Cleanse the access diaphragms of medication vials with 70% alcohol and allow the alcohol to dry before inserting a device into the vial

- Dispose of used syringes and needles at the point of use in a sharps container that is closable, puncture resistant, and leak-proof
- Do not use fluid infusion or administration sets (e.g., intravenous tubing) for more than one patient
- Use single-use, disposable fingerstick devices (e.g., lancets) to obtain samples for checking a patient's blood glucose, PT/INR, etc. and dispose of them after each use; do not use a lancet holder or pellet device for this purpose
- Sharp injuries must be reported and notified.
- Sharp boxes must not be overfilled, labeled or color coded.

#### **D) HANDLING OF CONTAMINATED MATERIAL**

- 1) For cleaning of blood and body fluids
  - Wear gloves and use proper PPE
  - Wipe up the spill with paper or towel and dispose of in appropriate container for bio-hazardous waste
  - Decontaminate the area using disinfectant bleach solution
- 2) For cleaning and disinfection of equipment
  - Protective barriers must be worn
  - Use EPA-registered disinfectant with appropriate germicidal claim for the infective agent of concern (may vary depending on situation) and follow the manufacturer's safety precautions and instructions (e.g., amount, dilution, safe use, storage and disposal) for cleaning/disinfection
- 3) Handling and processing of lab specimen
  - Must be in strong plastic bags with biohazard label
- 4) Handling and processing of soiled linen
  - Handle all contaminated linens with minimum agitation to avoid contamination of air, surfaces, and persons
  - Do not sort or rinse soiled linens in patient-care areas
  - Use leak-resistant containment for linens contaminated with blood or body substances; ensure that there is not leakage during transport
  - If laundry chutes are used, ensure that laundry bags are closed before tossing the filled bag into the chute; do not place loose items in the laundry chute
  - In the laundry area, appropriate PPE (e.g., gloves) are worn by laundry personnel while sorting soiled linen, and hand hygiene supplies are available for their use
  - If laundry equipment is available on premise, use and maintain the equipment according to manufacturer's instructions

In general, If hot-water laundry cycles are used, wash with detergent in water  $\geq 160^{\circ}\text{F}$  ( $\geq 71^{\circ}\text{C}$ ) for  $\geq 25$  minutes

o If low-temperature ( $< 160^{\circ}\text{F}$ ,  $70^{\circ}\text{C}$ ) laundry cycles are used, wash with proper concentrations of laundry chemicals.
- 5) Handling and processing of infectious waste
  - Must be placed in color coded, leakage proof bags, collected with barrier precautions.



- Contaminated waste incinerated or better to autoclave before disposal in landfill.

### **What to do if exposed to body fluid or blood?**

- Puncture wounds should be washed immediately, and the wound should be caused to bleed.
- If skin contamination should occur, wash the area immediately.
- Splashes to the nose or mouth should be flushed with water.
- Eye splashes require irrigation with clean water, saline or sterile irrigate.
- Most importantly report the incident to charge nurse and agency immediately.

### **E) ENVIRONMENTAL CONTROL**

- In order to control infection, hospital environment must meet quality and infection control measures.
- Cleaning of hospital environment and disinfection according to policies
- Proper air ventilation
- Water pipes examination
- Proper waste collection and disposal
- Cleaning and disinfection of equipment
- Proper linen collection, cleaning, and distribution

### **CLEANING PATIENT CARE AREAS**

General cleaning and disinfection measures that apply to any patient-care area:

- Wear appropriate PPE
- In general, cleaning should be performed before disinfection
- Wet-dust horizontal surfaces by moistening a cloth with a small amount of an EPA-registered disinfectant
- Avoid dusting methods that disperse dust (e.g., feather-dusting)
- Concentrate on cleaning high-touch surfaces (areas frequently touched by patients and facility staff) and those in close proximity to the patient, as outlined below for specific rooms/areas
- Follow manufacturer's instructions for cleaning and maintaining noncritical medical device/equipment
- Clean walls, blinds, and window curtains when they are visibly dusty or soiled

Cleaning and disinfection measures for specific patient-care areas:

#### **Exam Rooms**

- Change the paper covering the exam table and pillows between patient use
- Place any used linens (e.g., exam gowns, sheets) in a designated container located in each exam room after each patient use
- Clean any medication preparation area after each patient encounter and ensure contaminated items are not placed in or near the area
- Focus cleaning on high-touch surfaces (at least daily), e.g., exam bed, bedrails, blood pressure cuff, stethoscope, wall-mounted ophthalmoscope, and otoscope (per manufacturer's instructions), chair and bedside stool, and doorknob
- Decontaminate high-touch surfaces using an EPA registered disinfectant with specific claim labels for the infective agent
- If patient has suspected infectious diarrhea and the infective agent is unknown, clean high-touch surfaces using a sodium hypochlorite (bleach)- based product.

#### **Cleaning Bathrooms**

- Wear appropriate PPE

- Clean the toilet, the area around the toilet, the sink and faucet handle at least daily, and the walls if visibly soiled
- If used by a patient with known or suspected infectious diarrhea, clean the bathroom before it is used again, focusing on the toilet and the area around the toilet.
- Use an EPA-registered disinfectant with specific claim labels for the infective agent
- If infective agent is unknown, use a bleach-based disinfectant.

#### **F) STAFF HEALTH PROMOTION AND EDUCATION**

- Employee health history must be reviewed and take necessary action if found some disease.
- Occupational injury must be notified
- Continuous education of staff e.g., proper selection and use of PPE to improve practice

#### **G) ISOLATION OF PATIENTS**

Strictly follow isolation rules for contact, droplet, and airborne isolation.

##### **Contact isolation**

- Apply to patients with any of the following conditions and/or disease:
  - o Presence of stool incontinence (may include patients with norovirus, rotavirus, or *Clostridium difficile*), draining wounds, uncontrolled secretions, pressure ulcers, or presence of ostomy tubes and/or bags draining body fluids, MRSA, VRE, CRE, and MDR organisms.
  - o Presence of generalized rash or exanthems
- Prioritize placement of patients in an exam room if they have stool incontinence, draining wounds and/or skin lesions that cannot be covered, or uncontrolled secretions
- Perform hand hygiene before touching patient and prior to wearing gloves <sup>PPE</sup> use:
  - o Wear gloves when touching the patient and the patient's immediate environment or belongings.
  - o Wear a gown if substantial contact with the patient or their environment is anticipated.
- Perform hand hygiene after removal of PPE; note use soap and water when hands are visibly soiled (e.g., blood, body fluids), or after caring for patients with known or suspected infectious diarrhea (e.g., *Clostridium difficile*, norovirus)
- Clean/disinfect the exam room accordingly
- Instruct patients with known or suspected infectious diarrhea to use a separate bathroom, if available; clean/disinfect the bathroom before it can be used again

##### **Droplet isolation**

- Apply to patients known or suspected to be infected with a pathogen that can be transmitted by droplet route; these include, but are not limited to:
  - o Respiratory viruses (e.g., influenza, parainfluenza virus, adenovirus, respiratory syncytial virus)
  - o For first 24 hours of therapy: *Neisseria meningitides*, group A streptococcus
- Place the patient in an exam room with a closed door as soon as possible (prioritize patients who have excessive cough and sputum production); if an exam room is not available, the patient is provided a facemask and placed in a separate area as far from other patients as possible while awaiting care.
- PPE use:
  - o Wear a facemask, such as a procedure or surgical mask, for close contact with the patient; the facemask should be donned upon entering the exam room.
  - o If substantial spraying of respiratory fluids is anticipated, gloves and gown as well as goggles (or face shield in place of goggles) should be worn.

- Perform hand hygiene before and after touching the patient and after contact with respiratory secretions and contaminated objects/materials; note use soap and water when hands are visibly soiled (e.g., blood, body fluids)
- Instruct patient to wear a facemask when exiting the exam room, avoid coming into close contact with other patients, and practice respiratory hygiene and cough etiquette
- Clean and disinfect the exam room accordingly

### **Airborne isolation**

- Apply to patients known or suspected to be infected with a pathogen that can be transmitted by airborne route; these include, but are not limited to:
  - o Tuberculosis
  - o Measles
  - o Chickenpox (until lesions are crusted over)
  - o Localized (in immunocompromised patient) or disseminated herpes zoster (until lesions are crusted over)
- Have patient enter through a separate entrance to the facility (e.g., dedicated isolation entrance), if available, to avoid the reception and registration area
- Place the patient immediately in an airborne infection isolation room (AIIR)
- If an AIIR is not available:
  - o Provide a facemask (e.g., procedure or surgical mask) to the patient and place the patient immediately in an exam room with a closed door.
  - o Instruct the patient to keep the facemask on while in the exam room, if possible, and to change the mask if it becomes wet.
  - o Initiate protocol to transfer patient to a healthcare facility that has the recommended infection control capacity to properly manage the patient.
- PPE use:
  - o Wear a fit-tested N-95 or higher-level disposable respirator, if available, when caring for the patient; the respirator should be done prior to room entry and removed after exiting room.
  - o If substantial spraying of respiratory fluids is anticipated, gloves and gown as well as goggles or face shield should be worn.
- Perform hand hygiene before and after touching the patient and after contact with respiratory secretions and/or body fluids and contaminated objects/materials; note use soap and water when hands are visibly soiled (e.g., blood, body fluids)
- Instruct patient to wear a facemask when exiting the exam room, avoid coming into close contact with other patients, and practice respiratory hygiene and cough etiquette
- Once the patient leaves, the exam room should remain vacant for generally one hour before anyone enters; however, adequate wait time may vary depending on the ventilation rate of the room and should be determined accordingly
- If staff must enter the room during the wait time, they are required to use respiratory protection

### **H) STERILIZATION OF OPERATION THEATRES**

- The operation theatres must be sterilized according to the protocols

### **J) WASTE MANAGEMENT**

- Waste should be segregated according to the protocols in separate bags
- Waste should be disposed off according to the protocols
- Regular trash and regulated medical waste are disposed of in their designated containers

- All trash and waste containers are emptied at least daily by designated personnel
- Wear appropriate PPE
- Handle, transport, and dispose regulated waste in accordance with state and local regulations

### **K) SURVEILLANCE AND REPORTING**

Routine performance of surveillance activities for case detection, outbreak detection and improvement of healthcare practices

#### **HAI surveillance**

- Designated personnel collect, manage and analyze data
- Surveillance reports are prepared and distributed periodically to appropriate personnel for any necessary action

#### **Disease reporting**

- Healthcare staff adhere to local healthcare laws regarding reporting of reportable diseases and outbreak reporting

### **L) DECONTAMINATION OF AMBULANCE EQUIPMENT**

The following procedure will be followed when decontaminating the ambulance and ambulance equipment:

- Gloves will be worn throughout the cleaning process.
- Emergency unit will be cleaned monthly or more frequently as needed.
- Disposable equipment will be used only once and thrown away.
- Cot will be cleaned with disinfectant and the sheets, blankets, and pillowcase will be changed after each run.
- Suction equipment will be disposed of and replaced after each use.
- Patient transport/transfer equipment that includes the scoop stretcher and other devices will be sprayed with a disinfectant.
- The patient care supply kits will be emptied and cleaned with soap and water or as instructed by the manufacturer. Use a disinfectant solution on the nylon equipment bags. Do not use bleach on nylon equipment. Let the bag air dry before packing equipment into the Kit. Dispose of any trauma supplies that have exceeded their expiration date or usefulness.

### **RESPONSIBILITIES AND AUTHORITIES OF INFECTION CONTROL COMMITTEE**

- 1) Must meet regularly no less than three times a year
- 2) In an emergency (such as an outbreak), this committee must be able to meet earlier than quarterly on an emergency basis.
- 3) The ICC will be responsible for taking notes and preparing minutes of each meeting and reminding the Chairperson to follow up on the recommendations
- 4) Oversee, monitor, and evaluate the performance of the IC program and team
- 5) Enforce compliance with basic IC standards and to penalize if anyone breaking the policy of IC plan
- 6) Review and approve a yearly program of activity for surveillance and prevention
- 7) Assess and promote improved practices at all levels of the health facility
- 8) Ensure appropriate staff training in IC and safety management, provision of safety materials such as PPE and products
- 9) Oversee training of health workers Oversee the development of facility specific IC manual if needed

## **POLICY FOR QUALITY IMPROVEMENT PROGRAM.**

- Purpose
  - The purpose of this policy is to establish and maintain a quality improvement program that will continuously monitor and improve the quality of healthcare services provided by the hospital.
  - This CQI plan document outlines the framework for the development, implementation, and maintenance of the CQI program at Shahida Islam Teaching Hospital Lodhran. The CQI program is designed to improve the quality of healthcare services provided to patients through the systematic identification and implementation of evidence-based practices.
- Scope
  - This policy applies to all healthcare professionals and departments within the hospital.
- The principles of CQI will include:
  - Patients and their family/caregivers will be at the center of improvement efforts.
  - The focus will be on work processes.
  - There will be involvement of interdisciplinary teams to identify issues and make improvements.
  - Data and team knowledge will guide changes.
- The quality improvement program will be based on the following principles:
- The CQI committee will be responsible for overseeing the development, implementation, and maintenance of the CQI program. The committee will be composed of staff from different departments and disciplines, including:
  - CEO/ Director of SIMC (Chairman)
  - Dean Academics SIMC
  - MS of SITH (Secretary)
  - Principal SINC
  - Principal SICP
  - Heads of All Clinical Departments (the head of any newly established unit will automatically become the member of the QI Committee)
  - AMS evening and Night
  - Nursing superintendent and nursing shift in-charge evening and night
  - Dr. Yasir Kazmi and Dr. Javaid Ahmad (QI Managers/ Coordinators)
  - Infection control in-charge (Head of Microbiology Section)
  - Administrative officer (in-charge of security and sanitation)
  - Hospital pharmacist
  - Biomedical engineer
- The terms of reference (TOR) of the CQI committee will be as follows:
  - To develop and maintain the CQI plan.
  - To identify and prioritize areas for improvement.
  - To develop and implement interventions and make resources available to address areas for improvement.
  - To monitor, review and evaluate the effectiveness of interventions.
  - To make recommendations on Continued Professional Development/educational needs of staff and to ensure the staff education for quality improvement.

- To appoint sub-commitments or teams to work on specific issues, as necessary.
- To report on the progress of the CQI program to the hospital's leadership.
- To coordinate activities with the PHC as and when required.
- CQI Methodology
  - The CQI methodology to be used will be the Plan-Do-Check-Act (PDCA) cycle:
    - Plan: Identify the area for improvement, set goals, and develop a plan to achieve the goals.
    - Do: Implement the plan.
    - Check: Monitor the results of the plan and compare them to the goals.
    - Act: Make adjustments to the plan as needed.
  - The CQI committee will use a variety of data collection and analysis methods to monitor the effectiveness of interventions, including:
    - Patient satisfaction surveys
    - Clinical outcomes data
    - Staff surveys
    - Process audits
- Reporting Structure of CQI Results
  - The CQI committee will report on the progress of the CQI program to the hospital's leadership on a quarterly basis. The reports will include information on the following:
    - The areas for improvement that are being addressed.
    - The interventions that have been implemented.
    - The results of the interventions.
    - Any adjustments that have been made to the plan.
    - The QI results can be reported under 3 broad headings.
      - **Overuse**
        - This refers to the use of healthcare services or procedures when the risks outweigh the benefits e.g., prescription of tranquilizers and sedatives.
      - **Underuse**
        - This refers to the failure to provide healthcare services or procedures when the benefits outweigh the risks, e.g., immunization.
      - **Misuse:**
        - This refers to when an appropriate healthcare service is used improperly e.g., medication errors.
- Responsibilities and Authorities of the Committee
  - The CQI committee has the following responsibilities and authorities:
    - To develop and maintain the CQI plan.
    - To oversee the implementation of the CQI plan.
    - To monitor and evaluate the effectiveness of the CQI plan.

- To make recommendations to the hospital's leadership for changes to the CQI plan.
- Procedures
  - The following procedures will be followed for the quality improvement program:
    - The committee will meet on a quarterly basis to identify areas for improvement, develop and implement interventions, and monitor and evaluate the effectiveness of interventions.
    - The committee will prioritize the areas for improvement. When prioritizing, the committee should consider the following factors:
      - The severity of the problem.
      - The feasibility of addressing the problem.
      - The potential impact of the improvement on patient care.
    - The committee will develop and implement interventions to address identified areas for improvement. Interventions may include changes to clinical protocols, staff training, or the purchase of new equipment.
    - The committee will monitor and evaluate the effectiveness of interventions. This may be done by collecting data on patient outcomes or by conducting follow-up surveys.
    - The committee will report on the results of the quality improvement program to the hospital's management team on a yearly basis. The report will include information on the areas for improvement that have been identified, the interventions that have been implemented, and the effectiveness of the interventions.
- Regular Review and Staff Induction
  - The CQI plan will be reviewed and updated on an annual basis by the CQI committee.
  - The CQI committee will also develop and implement a process for inducting new staff to the CQI program.
- Evidence of Regular Review and Staff Induction
  - The following evidence will be used to demonstrate that the CQI plan is regularly reviewed and that a process of staff induction to the program is in place:
    - Minutes of CQI committee meetings that document the regular review of the CQI plan.
    - Records of staff inductions to the CQI program.
    - Staff satisfaction surveys that include questions about the CQI program.
- Conclusion
  - This CQI plan document provides a framework for the development, implementation, and maintenance of a comprehensive CQI program at Shahida Islam Teaching Hospital Lodhran.
  - The plan is designed to improve the quality of healthcare services provided to patients through the systematic identification and implementation of evidence-based practices.
  - The CQI committee is responsible for overseeing the implementation of the plan and monitoring its effectiveness. The plan is regularly reviewed and updated, and new staff are inducted into the program.

## **SIMC HOSPITAL WASTE MANAGEMENT PLAN**

### **Introduction to Hospital Waste Management Plan:**

In its unwavering commitment to safeguarding public health, preserving the environment, and upholding the highest standards of healthcare delivery, Shahida Islam Medical Complex, Lodhran recognizes the critical importance of an effective and sustainable waste management system. The generation of diverse waste streams within the hospital setting necessitates a strategic and comprehensive approach to ensure the responsible disposal and treatment of waste materials.

The purpose of this Hospital Waste Management Plan is to establish a robust framework that not only complies with regulatory requirements but also reflects our dedication to environmental stewardship and community well-being. By meticulously addressing the entire lifecycle of hospital-generated waste, from its source to ultimate disposal, this plan seeks to minimize environmental impact, protect healthcare professionals and support staff, and contribute to the overall quality of life in our community.

In crafting this plan, we acknowledge the dynamic nature of healthcare practices, technological advancements, and evolving environmental standards. As such, this document is designed to be adaptable, fostering a culture of continuous improvement and accountability within our healthcare facility.

We believe that a well-structured and executed waste management plan not only aligns with our organizational values but also serves as a testament to our commitment to ethical healthcare practices. By engaging all stakeholders, from hospital administration and healthcare providers to support staff and waste management personnel, we strive to create an environment where waste is managed responsibly, efficiently, and in accordance with the highest healthcare standards.

Through the collective efforts outlined in this plan, we aim to set a benchmark for sustainable healthcare practices, promoting a healthier future for generations to come.

### **Purpose of Hospital Waste Management Plan:**

The purpose of the Hospital Waste Management Plan is to establish a systematic and comprehensive framework for the proper handling, segregation, collection, transportation, treatment, and disposal of various wastes generated within the hospital premises. This plan aims to ensure environmental sustainability, protect public health, and comply with relevant regulatory standards governing healthcare waste management. By implementing efficient waste management practices, the hospital seeks to minimize the environmental impact, enhance workplace safety, and contribute to community well-being.



**Scope of Hospital Waste Management Plan:** The scope of the Hospital Waste Management Plan encompasses all activities related to the management of waste generated within the hospital, including but not limited to:

1. **Waste Classification and Segregation:** The plan outlines procedures for classifying different types of waste (biohazardous, general, hazardous, pharmaceutical, etc.) and provides guidelines for proper segregation at the source.
2. **Collection and Storage:** It addresses the safe collection, transport, and temporary storage of various waste streams, considering factors such as volume, type, and duration of storage.
3. **Training and Awareness:** The plan includes provisions for training hospital staff on waste management protocols and conducting awareness campaigns to reinforce proper waste handling practices.
4. **Infrastructure and Equipment:** It details the infrastructure and equipment necessary for effective waste management, ensuring the availability and proper maintenance of waste disposal bins, containers, and related facilities.
5. **Transportation:** The plan outlines procedures for the safe transport of waste from the hospital to designated disposal facilities, including arrangements with licensed waste carriers.
6. **Treatment and Disposal:** It describes methods for the treatment and disposal of different waste categories, ensuring compliance with environmental regulations and ethical considerations.
7. **Emergency Response:** The plan establishes a response framework for handling spills, accidents, or other emergency situations involving hazardous waste, with clear roles and responsibilities outlined.
8. **Monitoring and Reporting:** It includes mechanisms for ongoing monitoring of waste management practices and regular reporting to track waste generation, disposal, and any incidents.
9. **Continuous Improvement:** The plan encourages regular reviews and updates to adapt to changing circumstances, technological advancements, and regulatory requirements, promoting a culture of continuous improvement in waste management practices within the hospital.

By defining this scope, the Hospital Waste Management Plan provides a comprehensive roadmap for all stakeholders involved in waste management, ensuring a coordinated and environmentally responsible approach throughout the hospital facility.

# **Responsibilities of Persons involved in Waste management Plan:**

## **1) Responsibilities of Hospital waste management team**

- A hospital waste management team shall be responsible for preparation, monitoring, periodic review, revision or updating if necessary and implementation of waste management plan and for supervision of all actions taken in compliance with these rules

## **2) Responsibilities of Hospital Administration**

- Develop and endorse policies that outline the hospital's commitment to effective waste management and environmental sustainability.
- Allocate necessary resources for waste management infrastructure, training programs, and compliance with regulatory requirements.
- Provide oversight to ensure that waste management practices align with established policies and regulations.

## **3) Responsibilities of Heads of Departments**

- Ensure that all doctors, nurses, clinical staff in their respective departments is aware of waste management protocols
- Liaise with the waste management officer for effective monitoring and reporting of omissions and errors in implementation of waste management plan

## **4) Responsibilities of Infection control officer**

- Giving advice regarding the control of infection and the standards of waste disposal system
- Identifying training requirements for each category of staff
- Organizing training and refresher courses on safe waste management procedures

## **5) Responsibilities of Pharmacist**

- Give advice regarding formulation of appropriate procedures for management of pharmaceutical waste and coordinate implementation of these procedures
- Ensure that concerned hospital staff members receive adequate training in pharmaceutical waste management procedures

## **6) Responsibilities of radiology officer**

- Give advice regarding formulation of appropriate procedures for management of

- radioactive waste and coordinate implementation of these procedures
- Ensure that the concerned hospital staff members receive adequate training in radioactive waste management procedures
  - Maintain the record of hospital waste generated and transferred for final disposal

### **7) Responsibilities of Matron**

- Ensure training if nursing staff, laboratory staff, medical assistants and sanitary staff and sweepers in waste management procedures
- Segregation of waste in wards and operation theatres

### **8) Responsibilities of Hospital Biomedical engineer**

- Installation, maintenance and safe operation of waste storage facilities, waste handling equipment and hospital incinerator
- Ensure that the concerned hospital staff members are properly trained for these purposes

### **9) Responsibilities of waste management Floor Incharge**

- Ensure internal collection of waste bags and waste containers and their transportation to central storage facility of hospital on daily basis
- Liaise with the supplies department of the hospital to ensure that an adequate supply waste bags, containers, protective clothing and collection trolleys are available all the time
- Ensure that the sanitary staff and sanitary workers immediately replace used bags and containers with the new ones of the same type and where waste bag is removed from containers it is properly cleaned before a new bag is fitted therein
- Directly supervise the sanitation staff assigned duties to collect and transport the waste
- Ensure correct use of central storage facility and that it is kept secured from unauthorized access and the waste from central storage facility shall be transferred to disposal site with in twenty four hours
- Prevent unsupervised dumping of waste bags and waste containers on the hospital premises
- Maintain the record of waste brought to central storage facility, type of waste entered, weight of waste, date and time of entrance of waste as well as when it was transferred from central storage facility to incinerator
- Coordinate and monitor all waste disposal operations
- Ensure that the correct methods of transportation of waste are used on site to

- central storage facility or incinerator
- Ensure proper labelling of waste bags
- Ensure that the emergency procedures are available at all times and that all staff members are aware of the action to be taken by them
- Investigate, record and review all incidents reports regarding hospital waste management

## **PLAN FOR HOSPITAL WASTE MANAGEMENT:**

### **Waste classification**

The hospital produced both risk and non-risk wastes

#### **A) Risk waste**

##### a. Infectious waste

Infectious waste means waste contaminated by any type of pathogens, cultures from laboratory work, waste from surgeries, and waste from infected patients, discarded or disposable equipment's that have been in contact with such patients.

##### b. Pathological waste:

Means tissues, organs, body parts, fetuses, blood and body fluids

##### c. Pharmaceutical waste:

Includes expired or unused pharmaceutical products, surplus drugs, vaccines or sera, discarded items used in handling pharmaceutical such as bottles, boxes, gloves, masks, tubes, vials

##### d. Chemical waste

Chemical waste refers to any waste material that contains chemicals and has the potential to cause harm to human health or the environment. This category of waste includes a wide range of substances, such as: mercury containing devices, hazardous chemicals

##### e. Radioactive waste

Radioactive waste refers to any material that contains radioactive substances and is no longer deemed useful for its original purpose. Radioactive materials undergo decay, emitting ionizing radiation, which can pose risks to human health and the environment.

##### f. Sharps

Sharps means whether infected or not, needles, syringes, scalpels, infusion sets, knives, blades, broken glass and any other item that can cut or puncture

## **b) Non Risk waste/Municipal waste**

Means paper, cardboards, packaging, food waste, tissues, and others

### **Waste segregation (color coded bins yellow, red, white)**

Risk waste shall be segregated from non-risk waste at the ward bedside, operation theatres, laboratory or any other room in the hospital where the waste is generated by doctor, nurse or other person

The disposal of medical equipment and supplies including syringes, needles, plastic bottles, drips and infusion bags shall be cut or broken and rendered non-reusable at the point of use by the person using the same.

**Infectious waste:** All risk waste other than sharps, large quantities of pharmaceuticals, or chemicals waste such as broken thermometers shall be placed in yellow containers made of metal or tough plastic with pedal type or swing lid with a strong yellow waste bag

The yellow waste bags shall be removed when these are not more than three quarters full and sealed

**Glass:** Glass vials of pharmaceutical drugs, expired pharmaceuticals (tablets, capsules etc), glass bottles, broken thermometers shall be placed in red bins with red color bags.

Each yellow and red bag shall be labeled, indicating date, point of production, ward, quantity and description of waste prominently displaying the biohazard symbol. The bags removed should immediately be replaced with the new ones of same type

**Sharps:** Sharps shall be placed in metal or high density plastic containers resistant to penetration and leakage and should be closed when three quarters full. It shall be placed in yellow bags with other risk waste.

Large quantities of pharmaceuticals shall be returned to supplier and small quantities shall be placed in yellow waste bags

**Labor room/Operation theatre:** Anatomical waste from labor room and operation theatres should be placed in specific yellow containers and sent for burial.

Non-risk waste shall be placed in suitable container lined with white bags.

## **Waste collection**

Sanitary staff when handling waste shall wear protective clothing at all times including face masks, aprons, protective boots and disposable heavy duty gloves as required.

Sanitary staff shall collect the waste daily early morning at 6-7 AM and in afternoon at 3-4 PM.

Do not fill the waste bag beyond 3/4 or 75% of its capacity. The removed waste bags shall be immediately replaced with the new ones of the same type. All waste bags are labelled before removal and sealed.

## **Waste transportation**

A waste collection trolley will be used for transport of waste. The sealed waste bags shall be carefully loaded by hand onto trolley to minimize the risks of puncture or tears. The white and yellow bags shall be collected on separate trolleys and painted in their respective colors. The collection route shall be from final collection point to central storage facility.

## **Waste storage**

A separate storage facility with yellow labels shall store the yellow bags with a sign permanently displaying biohazard symbol. The storage facility is near the incinerator. The storage facility is cleaned and disinfected after usage. The risk waste shall not be stored for more than twenty four hours. If more than twenty four hours is required in certain situation refrigerator will be used for storage of risk waste.

## **Waste disposal**

The risk waste shall be weighed and documented in register before incineration. The risk waste shall be incinerated within twenty four hours. The ash and residues from incineration shall be placed in non-combustible containers and sent to local councils designated risk waste landfill site.

**Burial Pit:** Anatomical parts are disposed off according to standard protocols.

- a) Fetus: First of all fetus is returned to family and if refused than it is sent for burial
- b) Body parts: First of all body parts are returned to family if family refuses to take than they are sent for burial.

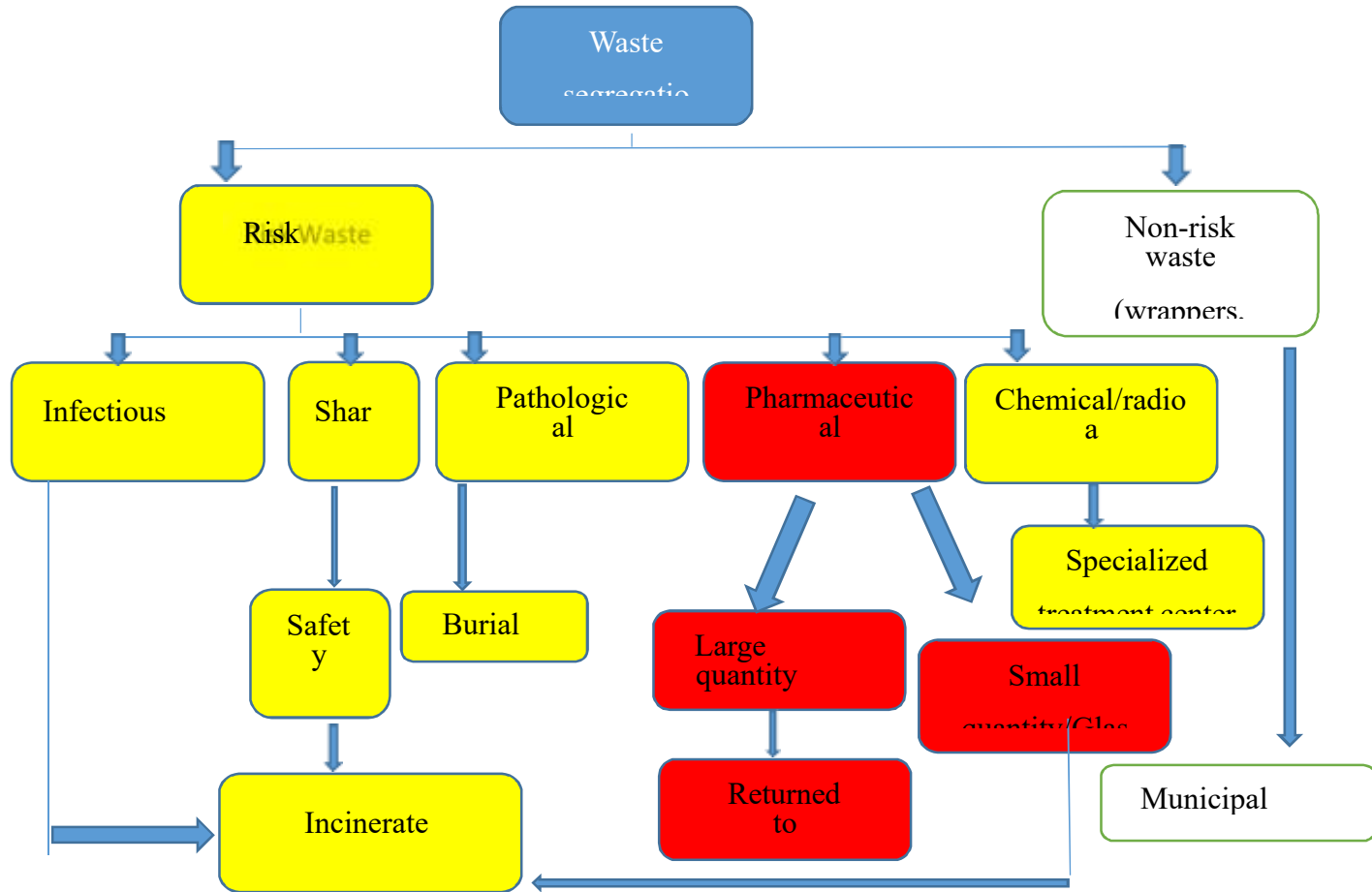
## **Emergency response**

In case of spillage contaminated area shall be evacuated immediately, the contaminated area shall be cleaned and disinfected. Equipment used for management of spillage shall be placed in the same place from where it was taken. The incident should be raised and shall be documented for further investigation of accident and spillage.

# Training of staff

All staff involved in waste segregation, transport and disposal shall receive continuous training on the plan and monitor the efficacy of plan.

## WASTE SEGREGATION PLAN



## Hospital Infectious Waste algorithm

