



# SREE GOKULAM MEDICAL COLLEGE & RESEARCH FOUNDATION

(A UNIT OF FOUNDATION OF NON-RESIDENT INDIANS)

Recognized by National Medical Commission & Affiliated to KUHS  
Accredited by NABH



SGMCRF/C1/HCC/2016

19/09/2024

## PROCEEDINGS OF THE PRINCIPAL

Sub : Hospital Council Committee re-constituted – reg.

The Hospital Council Committee of the college is re-constituted with the following members w.e.f 17/09/2024.

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| 1. Dr. K K Manojan ,Vice Chairman                                | :Chairperson |
| 2. Dr. P. Chandramohan, Dean Emeritus                            | : Member     |
| 3. Dr. Lalitha Kailas, Associate Dean                            | : Member     |
| 4. Dr. Nandini V R, Principal                                    | : Member     |
| 5. Dr. Krishna G S, Medical Superintendent                       | : Member     |
| 6. Deputy Medical Superintendent                                 | : Member     |
| 7. Dr. Dayananda Babu, Professor Emeritus, of General Surgery    | : Member     |
| 8. Dr.R. Samadarsi, Professor Emeritus, Dept. of General Surgery | : Member     |
| 9. Dr. Bhasi, Professor Emeritus, Dept. of General Medicine      | : Member     |
| 10. Dr. Sheela Vasudevan, Professor Emeritus,Dept of Pathology   | : Member     |
| 11. Dr. Benny P V, Professor &HOD, Dept. of Community Medicine   | : Member     |

**PRINCIPAL**

# Sree Gokulam Medical College & Research Foundation

## Hospital Council Committee

### 1. Purpose:

The Hospital Council Committee serves as a pivotal entity within the organizational structure of Sree Gokulam Medical College, aiming to foster a synergistic environment for effective communication, collaboration, and strategic decision-making among the key leadership members. The committee is dedicated to advancing the overall functioning of the hospital, elevating the standard of patient care, and enriching the academic endeavours of the medical college.

**a. Facilitation of Effective Communication:** The committee strives to break down communication barriers and create a platform for open, transparent, and constructive dialogue. By fostering an atmosphere of effective communication, the committee aims to ensure that pertinent information, updates, and insights are shared seamlessly among its members, thereby facilitating informed decision-making.

**b. Collaboration for Hospital Operations Enhancement:** One of the primary goals of the committee is to promote collaborative efforts among key leadership members to enhance hospital operations. By bringing together diverse perspectives, expertise, and experiences, the committee seeks to identify areas for improvement, streamline processes, and implement innovative solutions to optimize the overall efficiency of the hospital.

**c. Elevation of Patient Care Standards:** The committee places a strong emphasis on the continuous improvement of patient care standards. Through collective efforts, the committee members aim to devise strategies that prioritize patient safety, satisfaction, and well-being. This includes the evaluation and implementation of best practices, protocols, and technologies that contribute to the provision of high-quality healthcare services.

**d. Enrichment of Academic Activities:** Recognizing the integral connection between the hospital and the medical college, the committee is committed to enriching academic activities. This involves aligning hospital practices with academic goals, fostering research initiatives, and creating an environment that nurtures the professional development of medical students, residents, and faculty members.

**e. Alignment with Organizational Mission and Vision:** The committee operates in alignment with the broader mission and vision of Sree Gokulam Medical College. By actively contributing to the realization of organizational goals, the committee serves as a driving force for the institution's continuous advancement and commitment to excellence in healthcare and medical education.

## **2. Composition of the Committee:**

1. Dr KK Manojan, Director: Chairperson
2. Dr Nandhini V, Medical Superintendent: Convener
3. Dr Chandramohan, Dean Emeritus: Member
4. Dr Lalitha Kailas, Principal: Member
5. Deputy Medical Superintendent: Member
6. Dr Dayananda Babu, Prof Emeritus, General Surgery: Member
7. Dr R. Samadarsi, Prof Emeritus, Department of General Surgery: Member
8. Dr Bhasi, Prof Emeritus, Dept of General Medicine: Member
9. Dr Sheela Vasudevan, Prof, Emeritus, Dept of Pathology: Member
10. Dr Benny P V, Prof & HOD of Community Medicine: Member

## **3. Meeting Schedule:**

The committee will convene once a month unless otherwise deemed necessary. Additional meetings may be called by the Chairperson or Convener as needed.

#### **4. Agenda Setting:**

The Convener, in consultation with the Chairperson, will circulate the agenda to all members at least one week prior to the scheduled meeting. Members are encouraged to submit agenda items for consideration.

#### **5. Conduct of Meetings:**

- a. The Chairperson will preside over the meetings, ensuring that discussions remain focused and productive.
- b. The Convener will record minutes of the meeting, including decisions made and action items identified.
- c. Quorum: A minimum of six members, including the Chairperson or Convener, is required to constitute a quorum for the meeting.

#### **6. Decision-Making:**

Decisions will be made through consensus whenever possible. In the event of a disagreement, a vote may be called, with a simple majority determining the outcome.

#### **7. Action Items:**

- a. Action items will be assigned during the meeting, specifying responsibilities and deadlines.
- b. Follow-up on action items will be a standing agenda item for subsequent meetings.

#### **8. Reporting:**

The committee will provide regular updates to the Hospital Management and Academic Council on its activities, achievements, and challenges.

## **9. Emergency Situations:**

In the case of emergencies requiring immediate attention, the Chairperson or Convener may call for an emergency meeting with the available members.

## **10. Amendments to SOP:**

Proposed amendments to this SOP can be submitted by any committee member. Amendments will be discussed and approved during a regular meeting with a two-thirds majority vote.

## **11. Review:**

The SOP will be reviewed annually or as needed to ensure its relevance and effectiveness.

This SOP is effective as of 29/01/2024 and will be made available to all committee members and relevant stakeholders.