

SAIDEEP HOSPITAL	Doc No.	SHRPL/CTR/DM/01
Committee's TOR	Rev No.	1
	Rev Date	1/01/2024



Disaster Committee Terms of Reference

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Recommended By	Signature	Approved By	Signature
Dr.Hrishikesh kalgaonkar	uil	Dr.S.S.Deepak	1007-
Chief Medical Administrator	The state of the s	Chairman & Managing Director	



Sr.N o	TOR/Doc No SHRPL/CTR/Disa ster C/1	Document s Name Committe e TOR	Issu e. No	Rev.N o	Revie w Date 01- Jan-23	Chang e New memb er Added	Re v No	Revisio n Date 02-Jan- 24	Reaso n for Chan ge New Staff	Amendm ent Member List Updated
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ſ	Mrs.Shraddha surya	avanshi		Dr.H.Kalgaonkar				Dr.S.S.Deepak		
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1	SHRPL/CTR/D C/1	Committe e TOR	1	1	01-Jan- 22	New memb er Added	2	02-Jan- 23	New Staff	Member List Updated	
Original Date		Effective Date Next date			te of	e of revision Issue NO					
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N	1rs.Shraddha sury	/avanshi		Dr.H.	Kalgaonka	ır		Dr.	S.S.Deep	ak	
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1	SHRPL/CTR/D C/1	Committe e TOR	1	1	01-Jan- 21	New memb er Added	2	02-Jan- 22	New Staff	Member List Updated
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	Quality Co-ordinator		Ch	ie <mark>f Me</mark> dio	cal Admini	istartor	С	Chairman & Managing Director		
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1	SHRPL/CTR/D C/1	Committe e TOR	1	1	01-Jan- 20	New memb er Added	2	02-Jan- 21	New Staff	Member List Updated
Original Date		Effective Date Next date			te of	e of revision Issue NO				
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	Quality Co-ordinator		Ch	ief Medio	cal Admini	istartor	C	Chairman & Managing Director		
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1	SHRPL/CTR/D C/1	Committe e TOR	1	1	01-Jan- 19	New memb er Added	2	02-Jan- 20	New Staff	Member List Updated	
Original Date		Effective Date Next date			te of	e of revision Issue NO					
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Quality Co-ordinator		Ch	Chi <mark>ef Med</mark> ical Admin <mark>istartor</mark>			C	Chairman & Managing Director				
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Disaster Management Committee

1. Objective:

- To address hospital safety through a multi-hazard and inter-disciplinary approach.
- To Ensure that all professionals involved in the day to day operation of hospital are prepared to respond to disasters and provide a structure for the mitigation, preparation, response and recovery related to emergencies that may impact the hospital.
- Adopt an all hazards approach to emergency management to address a range of emergencies regardless of cause.
- Evaluate exercise and revise as appropriate emergency planning and response.
- 2. Scope: Applicable to all departments of the hospital.

1	Chief Managing Director	Chairman	Dr. S. S. Deepak
2	Chief Administrator	Member	Dr. H. Kalgaonkar
3	Quality Co-ordinator	Member	Ms. Shraddha Suryavanshi
4	Medical Superintendent	Member	Dr. Sunil Darandale
		N P All	Dr.Vikas Labade
5	General Manager	Member	Mr. Vilas Kalbhor
6	MRD In-charge	Member	Dr.Monali Gore
9	Nursing Superintendent	Member	Mr. Santosh Sangale
			Ms.Supriya Kamble
10	Fire Safety Officer	Convener	Mr.Akshay Navale
11	PSO 5	Member	Ms.Shivani Kamble
12	Account HOD	Member	Mr.Kishor Pipada
13	PRO	Member	Mr.Sanjeev Dayma
14	Security Officer	Member	Irfan shaikh
15	HR Manager	Member	Mr.Rajendra Shrimandlikar
			Mr.Prem Magar
16	Trainer	Member	Tejal Garje
17	FMS HOD	Member	Mr.Prakash Gadekar
18	Purchase HOD	Member	Mr.Vinay Pimparkar

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Dr.Hrishikesh kalgaonkar	uul	Dr.S.S.Deepak	1007-
Chief Medical Administrator	The state of the s	Chairman & Managing Director	

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SAIDEEP HEALTHCARE & RESEARCH PVT, LTD.	Committee's TOR	Rev No. Rev Date	1 1/01/2024

3. Constitution of Committee

The convener shall have the authority to invite any non-member to attend the meeting if it is deemed fit in relation to any matter being/ or to be deliberated by the committee.

4. Quorum:

The minimum quorum for passing any resolution in the committee should be more than **50%** of the members present with chairperson mandatory.

5. Frequency of meeting:

Members of the committee meets **once in three month** and as and when required.

6. Roles & Responsibilities:

Disaster committee should be responsible for:

- Issue Disaster Policy
- Documentation of the Policy
- Develop Policy
- Planning for disasters
- Hospital Disaster Plan
- Train and educate
- Monitor and evaluate

7. Common minimum agenda:

- Review previous meeting agenda
- Discussion on Disaster related activity
- Discussion on variation in process for better quality.
- Any other related issues

8. Terms of office for appointment:

The committee will be appointed for the period of one year. The management of the hospital will have the right to reappoint all or any of the said members and appoint new members to fill any vacancy. Minutes of the meeting would be recorded by the convener and circulated to all representatives including Director & Quality Dept.

9. Records to be maintained and period of retention

- Minutes of the meeting and the related document
- Analysis of RCA, CAPA
- The record shall be maintained for minimum three years

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Chief Medical Administrator	The state of the s	Chairman & Managing Director	