

# Grievance Redressal Mechanism for NBEMS Accredited Hospitals

## A. Objective

- 1.1. To redress the grievance of the hospitals seeking/sought accreditation with National Board of Examinations in Medical Sciences (NBEMS).

## B. Composition

- 1.2. The composition of NBEMS Grievance Redressal Committee for NBEMS Accredited Hospitals shall be as under:

Designation	Role in the Committee
Vice President, GB NBEMS	Chairperson
Governing Body Member	Member
Specialty Board Members	Member
Any other co-opted expert/faculty with the permission of the Chairperson	Member
Executive Director	Member

## C. Terms of reference

- 1.3. The terms of reference of the NBEMS Grievance Redressal Committee for NBEMS Accredited Hospitals shall be as under:

- 1.3.1. To address the grievance of the hospital seeking accreditation wherein the hospital is not satisfied with the decision of Grievance Redressal by the NBEMS Accreditation Section at the First level.

- 1.3.2. To provide platform for level - 2 Grievance Redressal.

1.3.3. To make recommendations on the grievance of the applicant hospital after going through the facts of the matter.

1.3.4. To recommend penalty against hospitals making false representations.

#### **D. Venue of the meeting**

1.4. The venue of the meeting of NBEMS Grievance Redressal Committee for NBEMS Accredited Hospitals shall be at NBEMS office at New Delhi. The meeting may be convened on a virtual platform also, if so required.

#### **E. Frequency of the meeting**

1.5. The meetings of NBEMS Grievance Redressal Committee for NBEMS Accredited Hospitals shall be held once in every 2 months

#### **F. Quorum for meeting**

1.6. At least 3 members and Executive Director should be present.

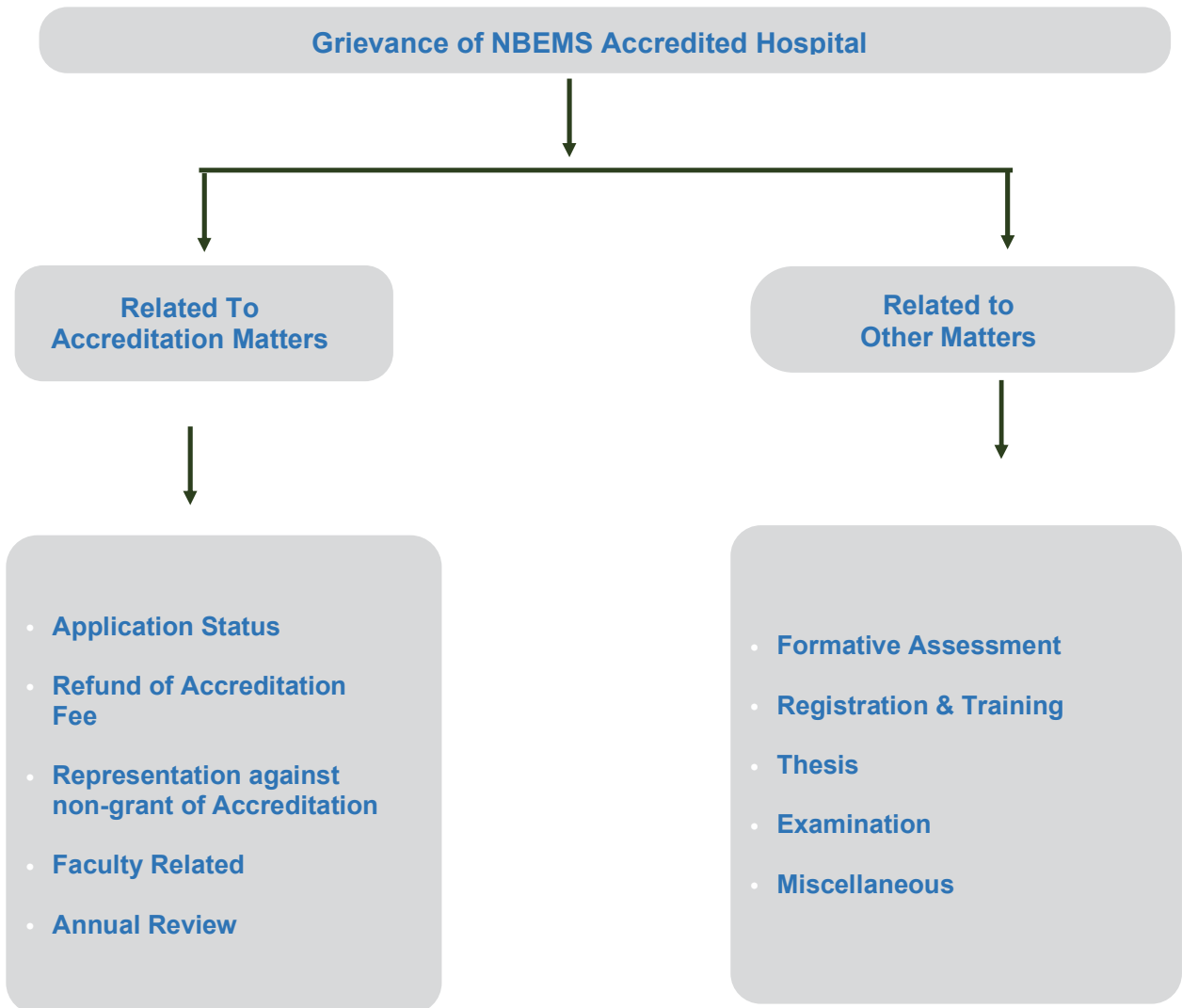
#### **G. Presiding officer**

1.7. Every meeting shall be presided by the Vice President of NBEMS and if the Vice President is unavailable then the Governing Body Member will be presiding the meeting.

#### **H. Voting**

1.8. Every member shall have one vote except the Executive Director. The Executive Director will not have any voting rights as he/she has dealt the case at the time of redressal of the grievance at the 1<sup>st</sup> level. If there is an equality of votes on any issue being deliberated by the Committee, the Chairperson shall have a casting vote.

## I. Nature of Grievance



## J. Grievance Redressal Procedure:

1.9. **Level - 1 Grievance Redressal Mechanism:** The applicant hospital can submit its query/complaint to the **Communication Web Portal (CWP)**. The query/complaint shall be responded by the department of Accreditation, NBEMS within the stipulated time on the same Communication Web Portal as level - 1 redressal mechanism.

1.10. **Level - 2 Grievance Redressal Mechanism:** The applicant hospital aggrieved by the decision of the Accreditation department of NBEMS and resolution of the grievance at the 1st

level will apply for redressal of the grievance at the level of the Grievance Redressal Committee for accreditation (level - 2).

- 1.11. The representation has to be submitted within one month of disposal of the grievance at level - 1. The Grievance can be submitted by the hospital through a dedicated online **Grievance Redressal Web-Portal (GRWP)**. The decision/resolution provided at Level -1 shall be mandatorily required to be submitted while submitting the Grievance at Level - 2. In case no resolution has been provided despite multiple communications at Communication Web Portal, details of all those communications needs to be provided. Matter cannot be escalated to Level - 2 unless the maximum time sought at NBEMS Communication Web Portal to resolve the matter at Level - 1 has been exhausted.
- 1.12. The Head of Department and Head of Institute will have to be physically present themselves at NBEMS office before the Committee to present their grievance along with the supporting documents.
- 1.13. The presence of Head of Department is mandatory. In case the Head of the Institute is not able to present himself before the Committee, a sufficiently senior functionary of the hospital can be deputed in lieu of the Head of the Institute with an authorizing affidavit.
- 1.14. No legal person / lawyer shall accompany the trainee under any circumstance.
- 1.15. The hospital shall be given an ample opportunity to present their case before the Committee.

#### **K. Recommendations of the Committee**

- 1.16. Committee shall make its recommendations subsequent to the representation being made by the hospital. The recommendations shall be approved by the Accreditation Committee and thereafter the GB will ratify the same, before the final outcome is communicated to the hospital.