

Audit Report



Report No.: KDI-Q202503/Cert-2025

Type : Certification Audit
Organization : Motiwala (National) Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: Ashok Nagar, Nasik- 422012
Audit Date : 17.04.2025
Standard : ISO 9001:2015
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 17th.April.2025 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2015.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2015 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Observations and Area for Improvement (AFI): Read the underlined notings.

Physiology: 5 Quality Objectives set for 2023-24 found achieved. Next year objectives also set. Stock register, Attendance register verified. AMC of instruments done by GP Enterprises Nashik on 10.02.2025. World Homoeopathy Day celebrated on 10th.April.2025. National TB Elimination program held on 27.03.2025 at Anandwalli and Jalalpur. Daily diary found maintained.

Pharmacy: Study tour conducted from 11.11.2024 to 03.02.2025 at PCIM&H and SBL. Alcohol License is valid till 31.03.2026. Daily diary, Display board and IDN found maintained.

Anatomy: 4 Quality Objectives set last year found achieved. New departmental objectives set and monitored. 1 dead body donation received on 02.02.2025 with the ID as Late Mrs Bharati Bafna , Age 61 yr. Procedure for receiving dead bodies duly followed. Copy of Bombay Anatomy Act 1949 is available.

Obstetrics and Gynecology (OBGY): 7 Quality Objectives made during previous yr found achieved. Fresh 8 objectives are set for 2025-26. Attendance register seen and found use of whitener which was justified but it should be avoided. Total 8 seminars found held. Records of DOPS and DEPS available. Records of clinical postings were not available. OSCE found conducted.

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Surgery: Attendance of students and faculties found available as per NCH/ ME Std. Dr Kamlesh Bagmar cleared NTET Exam 2024. 6 research papers published by the department. Dr Subhas Yadav was appointed as Resource person and moderator.

Library: Total book inventory in the library found to be 10,157. From 15th.April.2024 onwards Night Library time (only for reading) changed to 5.30 PM to 8.30 PM. Fumigation and Pest control are planned on 19.04.2025. 9 Journals in Hard copies and 40 E-Journals preserved. Various lectures uploaded under LMS (Learning Management System). YouTube of the college is functioning.

Hub Center: Hub Center monitors 86 CCTV across the campus. There are total 30 PCs in the Hub Center. All PCs are duly updated with operating systems like Windows-7 & 11 along with Office 13 & 21. Student entry register available. Software like ISIS, Kentlan, Complete Dynamics, CARA Professional etc are available to the students. Two Wi-Fi channels viz. Airtel and BSNL are available with speed up to 200 Mbps. There are 6 routers installed in Girls' hostel. Quickheal Antivirus installed with validity up to 15.03.2026. Hub center now have adequate space for better functioning which was observed in previous audit. Motiwala college website and Motiwala mobile app both are being controlled from this Hub center. Latest AISHE Certificate C-13957/Dt: 15.01.2025 verified.

Organon: Daily diary available but registrar signature is not available. OPD-IPD records available. Journal club (PG) 18 Completed (08 new batch). Seminars 24 (PG) completed (05 new batch). Case presentation (PG) 25 Completed (04 new batch). 6 Departmental objectives set for 2025-26.

Practice of Medicines: Daily diary and Log book of PG students available. Log book found containing requisite information e.g. OPD, IPD duties, Seminar attended, seminar given, case presentation given and attended, Journal Club etc. Attendance register of faculties and students available. Journal club (PG) 5 completed, (UG) 4 Completed. 5 Case presentations done. IDN system found functioning. Departmental objectives set for 2024-25. Case presentation records available.

Materia Medica: Daily diary found maintained. 6 Departmental objectives set previous found achieved. To meet objective number 4 seminar found conducted by Dr Satish Naik on "Importance of Diagnosis learning the management of fever". Verification done: Journal Club (Part-I) 28, (Part-II) 14, Seminar (Part-I) 28, (Part-II) 14, Case presentation (Part-I) 23. Student feedbacks obtained and analyzed. Interdepartmental activities found done.

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Reparatory: Daily diary found maintained. Followings found held: Journal Club-33, Seminars-29, Case discussion-29. Log book of Dr Anand Nikam verified and found with the requisite information entered therein. Following records verified: Journal club CBDC Batch-I (9), Batch-II (9), Case discussion-II (9), Group discussion-I (9), Seminars-I (6), II (9), Seminars UG (4). Stock register verified. Availability of Books verified: 83 (PG), 81 (UG). 5 New objectives set for 2025-26.

Pathology: Daily diary found maintained. Remedial classes are taken. Departmental objectives of 2023-24 found achieved. Quality plans available and followed. Following records verified: Research article (6) published in Materia Nova. DOPS and DEPS are followed. OSPE procedures introduced.

Forensic medicine and Toxicology (FMT): 99 students in 7 batches visited Session & District court from 28.01.25 to 01.02.25 and visited civil hospital for witnessing the Post Mortem. 5 batches of students visited Central Jail from 28.01.25 to 01.02.25. All legal acts and gadgets available in the department. 10 Departmental objectives set in 2023-24 found achieved.

Pediatric (PG): 7 Departmental Objectives set for 2023-24 found achieved. Tribal Health TEER-25 (MUHS FIST'25) 31st.Jan to 2nd Feb 2025. NTET Exam qualified by Dr Mita Gharte, she stood 2nd in the exam. CBDC training found attended. IPD, OPD posting schedules available. Induction program found introduced.

Hospital: Various records of hospital verified e.g. Casualty, IPD, OPD, OT, MLC, Laundry Book, Delivery register and Bio Medical Waste etc. OPD recorded 92,551 patients. Camp register is available. Total camps held 316, total patients treated in camps 10,675. Total 677 patients availed X-Ray facility of the hospital. Pathology facility availed by 27,633 patients of (OPD) and 3,270 patients of (IPD). Hospital registration found renewed. Verified through Form-C (Regn-210). Validity period of hospital registration is from 01.04.2025 to 31.03.2028. Feedbacks from patients are obtained in writing and the same are analysed. Feedback form needs some modification. Hospital adopted 5 villages under UBA (Unnat Bharat Abhiyan).

Administration: Complaint boxes are available. These boxes are opened every Tuesday. However no complaint or suggestions found recorded. Admission procedures are available and followed. Monthly report found prepared. Records of 33 committees verified. Outward register verified. Attendance register verified. Records of admission meeting dated 29.08.2024 verified. Reprography records seen and found to be quite extensive and detailed. Staffs of admin and accounts departments were interviewed about their function and roll. They explained their functioning quite satisfactorily. The overall functioning of administration is very ably controlled by Col Chadha the Registrar of the college.

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Community Medicine: Department won 1st prize in MUHS FIST-25. Records of followings verified: 3 International presentations, 6 field visits, 16 seminars. Medical Relief camp held at Waynad Kerala between 19th.Aug to 25th.Aug 2024. Under NSS various camps conducted. 2 camps conducted National Tuberculosis Elimination program. CBDC training taken at Pune and 90 CBDC lesson plans prepared accordingly. ISO training program held on 25.03.2024. OSCE/ Deptt objectives set and achieved. 3 community health camps were conducted. Research article on impact of DHSC published Ref: ISSN: 2320-2882. Certificate of participation obtained in Avishkar 2024-25. Under DHCS (Domiciliary Health Care System) each student adopts a 5 families and visit every month. Interdepartmental activity notes available. Remedial classes are taken. Annual teaching plan prepared and followed.

3.1 MR Function:. Core committee meetings of ISO were held on 18.02.2024 and 18.03.2025. ISO training program held on 25.03.2024. IQA was carried out on 21.08.2024 to 27.08.2024 and between 02.04.2025 to 07.04.2025. The observations recorded were discussed in the MRM dated 15.09.2024 and 15.04.2025. ATR was prepared for corrective and preventive actions. Responsibilities along with their respective target dates found duly recorded.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened every Tuesday however no complaint found received. Motiwala app developed during the Covid pandemic is still operating. Student's feedback is taken for the teaching learning aspect.

3.4 Leadership: College is proud to have faced team of QCI (Quality Council of India) and won laurels from them. This is yet another feather in the cap of the college in their attempt to deliver quality in their academic pursuits. The new curriculum CBDC has been successfully implemented as per the requirements of NCH and MUHS. College has taken leadership role at University level in implementation of this program. Clinical presentation, Exit Exam and Dissertation presentation for interns are some of the innovative and valuable evaluation methods initiated by the institution are now mandatory in all homeopathic colleges across India. Management has also made substantial investments in upgrading various infrastructure requirements across all the departments.

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4.1 Conclusion: Internal quality audits are being conducted at planned intervals. Observations are duly recorded and ATR prepared for necessary corrective and preventive actions. Overall objectives as planned are achieved. Training is being given on CBDC system across all the departments and subsequently the system is being implemented.

4.2 Points for improvement: (i) The system of maintaining daily diary by the faculty appears to be fading away gradually as some places diaries were found not maintained and at some places diaries were found without the signature of the registrar. If this system is mandatory as per NCH and MUHS then it must be adhered to. If faculties feel there is lack of clarity regarding standard format of the diary then same may be clarified from the NCH and MUHS.

(ii) The Inter Departmental Note (IDN) once raised has no subsequent update whether the request has been approved or not. If approval is pending then the reason for non approval are not communicated back to the initiator. Hence there appears to be a gap in the process of IDN system.

5.0 Recommendation: We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by “Motiwala (National) Homoeopathic Medical College & Hospital, Nasik” found to be complying with the requirements of International standard ISO 9001: 2015 satisfactorily. Continuation of certification and issuance of new certificate thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.



Madhavendra Singh
(Lead Auditor-KVQA)

Audit Report



Report No.: IK2022E3/Cert-2022

Type : Certification Audit
Organization : Motiwala (National) Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: Ashok Nagar, Nasik- 422012
Audit Date : 01.04.2022
Standard : ISO 9001:2015
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 1st.April.2022 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2015.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2015 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Observations and Area for Improvement (AFI):

Physiology: IQA found done on 7th.March.2022. Working procedures are followed. Interdepartmental action records available. Departmental objectives reviewed and reset for the new academic year. RBC Diluting fluid prepared on 24.03.2022. Mentorship remuneration paid to 12 PG students. College scored 93% result in Physiology in the year 2022. MSR display board now showing the date of updation.

Pharmacy: Departmental objectives and procedures are available. IDN records available. Herbarium sheet prepared. Alcohol license renewal has been applied for. Study tour was held at “Sarada Krishna Homeopathic College”, Kulasekaram (TN) on 28th.Feb.2022 for III-Yr students. Herbarium is being located to a new place which would take some time to become presentable.

Anatomy: Annual teaching plan v/s actual verified through attendance register. IDN records available. Departmental objectives set for the new academic year. Records of cadavers available. 3 charts, 4 CDs, 6 specimen, 8 transparencies and 2 photos added. Records of collaborative activities with other colleges available. NSS participation records available.

Forensic medicine and Toxicology (FMT): Copies of 21 acts available. Copy of a new act “Clinical establishment act” added. Students visited Civil Hospital between 24th.Dec.21 and witnessed Post Mortem. Visit to courts not done due to Covid-19 situation. Departmental procedures are available. IDN records available. Departmental objective found reviewed and set afresh. Subject result found to be 95.45%.



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Obstetrics and Gynecology (OBG): Departmental objectives are available and achieved. IDA records available. Specimen record available but no new specimen added this year. Quality objectives were prepared on the spot and the same has room for improvement.

Library: Currently major renovation work is being carried out in the library. Total 9680 books found in the stock which was taken on 29th.March.2022. College has applied for ISSN for internal magazine "Materia Novum". NDL, Dell plus software found added. ABC type Fire extinguisher found recharged. Pest control found not done this year due to ongoing renovation work. Library policy available.

Hub Center: Teaching plan for 2021-22 available. Latest softwares are made available to the students. AISHE Certificates 2020-21 received.

Pathology: Quality policy, Departmental objectives, webinar certificates, NSS certificates available. ABC type fire extinguisher installed in Jan-2021. Departmental objectives set as 100% but could achieve 85.47%. IDN records verified through records dated 22nd.March.2021. Students visited external pathology labs and few students attended in house lab.

Community Medicine: Students were taken to water filtration plant, sewage treatment plant and Milk dairy on 19th.Nov.2021. Students also visited ideal village Patoda in Aurangabad district. College participated in Pulse Polio Program on 27th.Feb.2022. IDA and CBL records available. Credit Based Assessment and Mentor-Mentee program started this year. NSS special winter camp held between 4th to 10th.Jan.2022. College conducted Serology survey in Malegaon between 12th to 18th.March.2022. One student Ms Sana Sheikh was selected and participated in Republic Day parade in the National capital.

Medicines: Teaching plan v/s actual lectures taken available. Departmental procedures and objectives found available. 7 journal club and 8 seminars held this year. Stock register available.

Attendance register was not identified easily. Improvement in documentation required.

Pediatric (PG): Departmental objectives are available. Log book found available and duly updated. Journal club, seminars and case presentation records available. CBL and SDL records available. 3 publications added this year. However this year no visit to external clinic made.

Materia Medica: Departmental objectives are available. 9 Journal club and 7 seminars held in 2021-22. Record of 1 international Seminar and 2 publications available. Inter Departmental Activity register available. Stock register of books available.

Organon: PG students published 3 publications. 5 journal clubs held. 16 seminars attended and 5 seminars found held. Pass result of III yr students was 96.6%.

Reparatory: Departmental objectives are available. PG students published 3 publications. 5 journal clubs and 10 seminars held. CBL, Mentor-Mentee programs available. Pass results recorded as IV year 99% and PG 100%.

Surgery: Departmental objectives set for 2021-22 found achieved. Department held virtual classes using YouTube platform. Dr Subhash Yadav and Dr Baghmar published their article on Covid-19 in National Journal of Homeopathy. Seminar on organ donation held on 2, 3, 4 Sept 2021 in association with ZTCC. Department achieved pass result 95.76%.

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Administration: Motiwala app found working efficiently. Procedure for distributing circulars and notice board updation available. Suggestion box register available. No suggestions found received. Physical attendance and biometric attendance taken. A third biometric attendance access installed in newly installed lift in the hospital.

Reception: Telephone directory available in diary as well as in Excel form. Students' and teachers' leave records available.

Hospital: Hospital has undergone a major infrastructural development. A new medicines dispensing racks has been made wherein medicines are arranged based on their potencies. Interns' feedback system available. College is taking exams of the Interns and issuing them a score based Exit Certificate. Campus interviews conducted for the interns. Basic life support training given by Symbiosis Pune. College has purchased a new ABG instrument and a Covid analyser for hospital's pathology department. Various hospital records verified and found in order e.g. IPD, OPD register, MO, RMO time table, Autoclave, OT, Fumigation records, Sister Time table, House Physician register etc.

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

3.2 MR Function: Quality objectives reviewed and new objectives were set. The same found to be monitored and achieved. ISO core committee meetings were held on 19.03.2021 and 01.03.2022 IQA was carried out on 7, 8 and 9th of March.2022. Few observations came to notice which were discussed in MRM dated 28th.March and recorded for corrective action. ATR was prepared and responsibilities along with respective target dates are recorded.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened at planned intervals however no complaint was received during the academic year. Motiwala app developed by the college during the Covid pandemic time is still an effective tool of communication between college and parents of the students. Student's feedback is taken for the teaching learning aspect.

3.4 Leadership: The year 2020-2021 saw an unprecedented global break out in the form of Covid-19 pandemic. The second wave of this pandemic was much severe and widespread. Hundreds of new cases were adding each day. It was a big challenge to check and prevent its spread for the government as well as for the society. There was confusion every where and everyone was afraid to touch anything including the patients. It was when Motiwala college came forward and carried out their moral and social responsibility fearlessly. Students and staff of the college worked overnight and reached out every possible address within the corporation area as well as in neighboring villages. An unprecedented level of distribution of Ars Alb-30 was carried. College also treated COVID 19 patients successfully. This level of humanitarian aid deserves a special mention here. Management has undertaken a massive renovation work in all the departments of the college and also bought new teaching aids like Interactive smart board with S.L.W. touch technology. Management has bought a new ABG instrument and a Covid analyzer for its pathology. All these are prominent indicators of an efficient and mature leadership.

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4.0 Conclusion: The core committee is functioning efficiently and internal quality audits are being conducted at planned intervals. Overall quality objectives as well as departmental objectives are achieved. The installed quality management system is thus well maintained.

5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by “Motiwala (National) Homoeopathic Medical College & Hospital, Nasik” found to be complying requirements of International standard ISO 9001: 2015 satisfactorily. Issuance of fresh certification thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.



Madhavendra Singh
(Lead Auditor-KVQA)

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Audit Report

KVQA

Report No.: 18-i 2844/C-8837/Surv-II

Type : Surveillance Audit
Organization : Motiwala Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: Ashok Nagar, Nasik- 422012
Audit Date : 25.03.2021
Standard : ISO 9001:2015
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 25th.March.2021 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2015.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2015 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Observations and Area for Improvement (AFI):

Physiology: IQA done on 7th.Jan.2021. Working procedures are followed. Interdepartmental action records available. There were no dates mentioned on Role/ responsibility records. Departmental objectives reviewed and reset for the new academic year which included the Clinical Aspect, Reagent preparation etc. College scored 82.85% result in physiology in the year 2020 and stood second in the state.

MSR display board not showing the date of updation.

Pharmacy: Departmental objectives and procedures are available. IDN records available. Herbarium sheet prepared. College scored 82.8% result in physiology. A new 6 month course CCHD (Certificate Course in Homeopathic Dispensing) is planned and proposal has gone to MUHS for approval. Christmas tree drug proving is undertaken with due intimation to CCRH. Alcohol license found valid till 31.03.2021. Study tour to HPL Ghaziabad along with the tour to Schwabe India's plant is not planned this year due to Covid-19 situation. Last year too the tour was skipped. College should inform CCH about skipping of these mandatory tours for two years in a row and regularize academic records of the students suitably.

Anatomy: Annual teaching plan v/s actual verified through attendance register. IDN records available. Records of Unnat Bharat Abhiyan verified in which 5 villages were adopted during Covid-19 pandemic. College distributed Ars Alb-30 in village Mahadevpura, Dewargaon. Departmental objectives set for the new academic year. 3 seminars found conducted during the academic year. Exam result of the subject came out to be 83%. Pictures of body donors are displayed as a mark of respect.

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Forensic medicine and Toxicology (FMT): Copies of 20 acts available. Students visited Civil Hospital between 20th.Feb.21 to 27th.Feb.21 and witnessed Post Mortem. Visit to courts not done due to Covid-19 situation. Departmental procedures are available. IDN records available. Departmental objective found reviewed and set afresh. Advance teaching plans for 2020-21 found available and achieved. Subject result found to be 88.57%.

Library: Total 9494 books found in stock which was taken on 25th.March.2021. ABC type Fire extinguisher found recharged in Jan-2021. Pest control found done on 23rd.March.2021 by S&R Pest control Nasik. Dissertation works of the students are duly preserved in the library. Subscription of 35 journals and 10 News papers made available for the students. Book bank scheme of MUHS is being followed. Institute has provided an all in one Epson colour printer in the library.

Pediatric (PG): Departmental objectives are available. Log book found available and duly updated. Journal club found held periodically. Latest was held on 26.02.2021. Clinical training given to Dr Priyanka Shelke at Spandan Holistic Mother & Child care hospital under Dr Praful Barvalia for Autism Spectrum Disorder. Dissertation works are available.

Obstetrics and Gynecology (OBG): Departmental objectives are available and achieved. IDA records verified through records dated 23rd.March.2021. Case based learning encouraged using new methodology of DOPS & DEPS clinical training.

Surgery: Dr Subhash Yadav and Dr Baghmar published their article on Chronic Lower Back Pain in International Journal of Homeopathic Science. Department achieved pass result 100%. Departmental objectives set for 2020-21 found achieved. Intern assessment of batch 2020-21 done between 11 to 16th.Feb.2021. Case based learning encouraged.

Pathology: Stock register available. ABC type fire extinguisher installed in Jan-2021. Departmental objectives set as 100% but could achieve 79.2%. IDN records verified through records dated 22nd.March.2021. Webinars found conducted.

Medicines: Teaching plan v/s actual lectures taken available. Departmental procedures and objectives found available. Records of 6 International publications found available 2 on Corona and 4 on Hemophilia. In PG records found discrepancies in dates requires attention.

Materia Medica: Departmental objectives are available but were not very clear. 9 Journal club and 9 seminars held in 2020-21 by UG students. 6 seminars held by PG students. Inter Departmental Activity register available. Stock register of books available but date of stock taking not mentioned.

Organon: 12 seminars conducted by UG students. 7 seminars and 7 journal club found held by PG students during 2020-21. No student publication found this year.

Reparatory: 13 Journal Club and 18 seminars held by PG students during 2020-21. Records of IDN and IDA were available. Subject result came out to be 100%.



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Community Medicine: During the Covid-19 break out mass distribution of Ars Alb-30 was carried out across the Nasik municipal corporation area and neighboring villages. Question wise mark list prepared and sent to students online for internal exam. 6 school health check ups were conducted during 2020-21. Visit to Milk dairy, sewage treatment plant and hospital arranged. 34 PPT added. Health education workshop held in Feb-2021. Teaching plans available and completed. IDA records available. A village by name Jalalpur was adopted on 3rd.March.2020. Ars alb-30 distribution was undertaken in 5 villages under Jan andolan program of CCH and Ayush.. State level NSS appreciation award declared to HOD as NSS officer

Administration: Motiwala app found working efficiently. Procedure for distributing circulars and notice board updation available. Suggestion box register available. No suggestions found received. Physical attendance and biometric attendance taken. A third biometric attendance access installed in newly installed lift in the hospital.

Reception: Telephone directory available in diary as well as in Excel form. Students' and teachers' leave records available.

Hospital: Staff list available but found without a date. Interns' feedback system available. College has introduced a new system of taking exams of the Interns and plan to issue them a score based Exit Certificate. Campus interviews conducted for the interns. Basic life support training given by Symbiosis Pune. Webinars totaling 14 found conducted. IPD occupancy ratio recorded but same can also be recorded Month wise. On the day of audit there were 29 IPD patients in the hospital out of which 3 patients were given discharge. Recently a new weekly report system has also been introduced.

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

3.2 MR Function: Quality objectives reviewed and new objectives were set. The same found to be monitored and achieved. ISO core committee meetings were held on 27.12.2020 and 19.03.2021. IQA was carried out on 7, 8 and 9th of Jan.2021. Few observations came to notice which were recorded for corrective action. ATR dated 22nd.Jan.2021 was available. Student feedback on teaching and evaluation was obtained from 410 students using Google form and a summarized data found generated.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened at planned intervals however no complaint was received during the academic year. Motiwala app developed by the college last year came very handy while communicating with the students and their parents during the covid-19 pandemic. Student's feedback is taken for the teaching learning aspect. Subject wise feedback system has to be developed with more authenticity



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3.4 Leadership: The year 2020-2021 saw an unprecedented global break out in the form of Covid-19 pandemic. Hundreds of new cases were adding each day. It was a big challenge to check and prevent its spread for the government as well as for the society. There was confusion every where and everyone was afraid to touch anything including the patients. It was when Motiwala college came forward and carried out their moral and social responsibility fearlessly. Students and staff of the college worked overnight and reached out every possible address within the corporation area as well as in neighboring villages. An unprecedented level of distribution of Ars Alb-30 was carried out and 35,34,084 doses of Ars Alb-30 were distributed. College also treated successfully 488 Covid-19 cases as their IPD patients. This level of humanitarian aid is not seen in the recent times. Though the entire family of Motiwala College was participating in this never before health aid work the driving force was coming from the management of the college, especially Dr F.F. Motiwala, without whose initiative this daunting task was nearly impossible to carry out. Dr F.F. Motiwala was rightly conferred with Dr Hahnemann Lifetime achievement ward by Maharashtra Council of homeopathy on 27th.Jan.2021.

College has implemented a new case base learning method by name DOPS and DEPS. This is a new approach to make students practice with the real life medical cases. College has also introduced the exit exam for interns and plans to issue them an exit rating certificate. College conducted YouTube webinar on organ donation through MUHS state level activity.

4.0 Conclusion: The core committee is functioning efficiently and internal quality audits are being conducted at planned intervals. Overall quality objectives as well as departmental objectives are achieved. The installed quality management system is thus well maintained.

5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by “Motiwala Homoeopathic Medical College & Hospital, Nashik” found to be complying requirements of International standard ISO 9001: 2015 satisfactorily. Continuation of certification thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.


Madhavendra Singh
(Lead Auditor-KVQA)



KVQA

Audit Report

KVQA

Report No.: 18-i 2844/C-8837/Surv-I

Type : Surveillance Audit
Organization : Motiwala Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: Ashok Nagar, Nasik- 422012
Audit Date : 23.03.2020
Standard : ISO 9001:2015
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 23rd.March.2020 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2015.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2015 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Observations and Area for Improvement (AFI):

Physiology: Internal checklist prepared and followed. Interdepartmental action records available. Annual teaching plan v/s actual verified through attendance register. Departmental objectives reviewed and reset for the new academic year which included the Clinical Aspect, Reagent preparation etc. College scored 85.21% result in physiology in the year 2019 and stood top in the state.

MSR display board may indicate the date of update.

Pharmacy: Annual teaching plan v/s actual verified through attendance register. Departmental objectives and procedures are available. Herbarium sheet prepared. Study tour to HPL Ghaziabad is planned on 2nd.July.2020 along with a tour to Schwabe India's plant.

Anatomy: Annual teaching plan v/s actual verified through attendance register. Departmental objectives set for the new academic year. 3 seminars found conducted during the academic year. Exam result of the subject came out to be 83%. The system for देहदान is functioning. A dead body was donated on the date of audit i.e. 23rd.March.2020.

Hub Center: Annual teaching plan and work flow chart available. Latest diagnostic software Radar-10 is available to the students. This room monitors 24 CCTV across college campus and class rooms. In addition to the above the Hub center also maintains newly constructed Auditorium.



KVQA

Audit Report

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Library: Total 9461 books found in stock register which was taken on 19th.Feb.2020. Book bank scheme of MUHS is being followed. Institute has provided an all in one Epson colour printer in the library.

Fire extinguisher validity found to be till 19th.March.2020 which needs to be serviced immediately.
Pest control found not done since 20.07.2017 though an IDN was raised on 03.07.2018.

Forensic medicine and Toxicology (FMT): Teaching plan v/s actual lectures verified through attendance register. Departmental objective found reviewed and set afresh. Seminar records and list of journals found available. Project book found prepared for latest crime report. A request to visit central jail was sent on 16th.March.2019 but the same was rejected by the jail authorities on 28.12.2019. Post mortem visits were made to civil hospital 4 times during the academic year. Permission to visit the court is obtained and will be carried out on any future date.

Medicines: Teaching plan v/s actual lectures taken available. Departmental procedures and objectives found available. Log books of the students available and duly updated. 5 seminars by PG and 3 seminars by UG students conducted. Journal club total 5 held.

Organon: Teaching plan available and teaching vs actual lecturers taken recorded. 9 seminar conducted (3 each by 2nd, 3rd and 4th yr students). Total 6 journal club held. Publication by one student Priya Shirsat was available which was published in the last edition of college's own publication the Materia Novum. Records of clinical presentation available.

Reparatory: Departmental objectives were not available but prepared and made available during the audit. 4 seminars found held. Records of 3 journal club available. Daily diary found maintained.

Materia Medica: Departmental objectives are available. Records of 12 seminars by PG students and 22 seminars by UG students are available. Total 15 Journal club held. 10 Case discussion held by PG students. 23 medical camps found attended.

Pathology: Departmental targets prepared and achieved. Annual Teaching plan was not available. Stock register available but without mentioning the date. Records of interdepartmental activities are available. Daily diary found maintained.

Surgery: Teaching plan v/s actual lectures verified. Departmental objectives available. Case based learning introduced. Life saving medical skill demonstrated by Dr Yadav and Dr Baghmar. Articles on Osteogenesis published in Materia Novum and an article on homoeopathic treatment on Low back pain published in International journal of Homeopathic science.

Obstetrics and Gynecology (OBG): Teaching plan v/s actual lectures not available. Seminar records available, last was done on 15th. Nov.2019. Clinical presentation done by each student but topic is not mentioned on the sheet.

Pediatric: Departmental objectives are available. Log book found available and duly updated. Journal club found held periodically. Latest was held on 14.02.2020. Seminars and publication records available.



KVQA

Audit Report

KVQA

Community Medicine: आरोग्य दत्तक योजना DHCS records of Shivajinagar and Jalalpur village are available in detail. Feedbacks from the family members under DHSC obtained in writing. 11 School health checkups and 48 Medical camps carried out during the year. Out of these medical camps 3 camps carried out in Valsad taluka of Gujarat. Under NSS Blood donation camp 93 units of blood collected on 10th.July and 17th.September.2019. Under Pulse Polio drive 266 children were given polio drops. NSS unit of the college was ranked as the best NSS unit. 14 students participated in Swachh Bharat summer internship at Jalalpur, Mahadeopur and Gangapur village. A randomized control trial on “Cognition Domain Improvement” was undertaken at DN Patil school of Gangapur village. A follow up monitoring showed remarkable improvements in the students. Outdoor visit to Panjarpol organized.

Annual teaching plan is available and monitored on plan v/s actual scale. 100% students passed this subject and a final year student secured a Gold Medal in this subject. Daily diary and interdepartmental Note book found duly updated. Departmental objectives revised and found achieved.

Hospital: Various records of the hospital such as RMO attendance, Delivery register, BMW disposal, Physiotherapy etc verified and found updated. Records of 53 surgeries, 131 Sonography and 468 X-Rays verified. 4826 IPD patients and 75348 OPD patients availed the hospital facility during the year. IPD bed occupancy ratio found to be 33%.

A new Rotor Head Centrifuge machine is installed in the hospital under the sponsorship of CCRH. College has purchased a new Ambulance (Mahindra Bolero make) for the hospital. A “Hemophilia Research Center” is opened in the hospital.

CMO should not put one single stamp covering two successive dates.

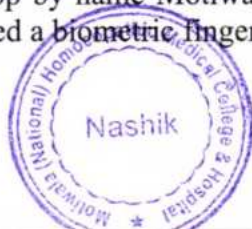
Administration: Motiwala app found working. Procedure for distributing circulars and notice board updation available.

Fumigation of library and recharging of fire-extinguishers have overshoot their dates of recharging thus needs immediate attention. Similarly record room should also be covered under these two parameters.

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

3.2 MR Function: Quality objectives (total 6) reviewed and new objectives set. The same found to be monitored and achieved. ISO core committee meetings held on 05.04.2019, 20.02.2020 and 12.03.2020. IQA found done every six month. First IQA was done between on 18th.April.2019. Latest IQA was conducted between 9th.March.2020. Few observations came to notice which were recorded for corrective action by each auditor.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened at planned intervals. College has developed an App by name Motiwala which is very useful to the students and their parents. College also purchased a biometric fingerprint reader of MYNTRA make.



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3.4 Leadership: A world class new auditorium has been constructed with best of the acoustics and visual standards. All departments display updated MSR status. Management is motivating faculty and students for social work. Organization has started with cancer OPD in collaboration with Mumbai organization. A lot many efforts were reflected in research work.

Auditor observed that the two biometric attendance scanners are not sufficient for the entire college staff. College may consider adding one or two additional scanners.

4.0 Conclusion: The core committee is functioning efficiently and internal quality audits are being conducted at planned intervals. Overall quality objectives as well as departmental objectives are achieved. The installed quality management system is thus well maintained.

5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by “Motiwala Homoeopathic Medical College & Hospital, Nashik” found to be complying requirements of International standard ISO 9001: 2015 satisfactorily. Continuation of certification thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.



Madhavendra Singh
(Lead Auditor-KVQA)



KVQA

Audit Report

KVQA

Report No.: 18-i 2844/C-8837/Cert

Type : Surveillance Audit
Organization : Motiwala Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: Ashok Nagar, Nasik- 422012
Audit Date : 14/01/2019
Standard : ISO 9001:2015
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 14th January 2019 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2015.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2015 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

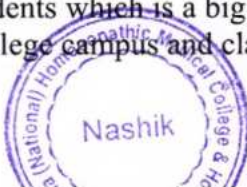
2.1 Observations and Area for Improvement (AFI):

Physiology: Internal checklist prepared and followed. Interdepartmental action records available. Annual teaching plan v/s actual verified through attendance register. MSR display board found updated. Core committee meeting held periodically, latest was held on 18.12.2018. Mentors are assigned for slow learners. Student feedbacks obtained and recorded. Maintenance register F/ACD/26 verified. Some complaints found unattended by the concerned department. Spirit license found valid till 31.03.2023.

Pharmacy: MSR display board found updated. Verified through 25 pill tiles. Ethanol stock verified. Annual teaching plan v/s actual verified through attendance register. Records of purity test of distilled water verified through Dec-2018 test records. Records of Study tour to HPL Ghaziabad dated 4th.July.2018 available and found in order. Records of मोफत आरोग्य शिविर dated 21st.August.2018 verified.

Anatomy: MSR display board found updated. Annual teaching plan v/s actual verified through attendance register of Dec-2018. MUHS and CCH syllabus are being followed. New charts are prepared. Total 40 PPT presentations (5 new) prepared. 200 slides are available for projector presentation. Student feedbacks obtained. The same has room for improvement. ISO training found given. Teaching plan, seminars, tutorials, records available. There is a system for देहदान. All particulars of donated dead body e.g. Aadhar etc are duly recorded.

Hub Center: Annual teaching plan and work flow chart available. Latest diagnostic software Radar-10 made available to the students which is a big addition as an additional learning tool. This room monitors 24 CCTV across college campus and class rooms.



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Printing & Stores: College has created a new printing department to cater to the printing needs of institute and its students. New Printing machines RISO SF-5330 and RISO 180 have been added to the infrastructure. Institute should include this department in its Pest control program. Institute may also install Class-A type fire-extinguisher in this department.

Library: Total 9298 books found available in the library. Book bank scheme of MUHS is being followed. Institute has appointed a qualified librarian who is reorganizing the book location afresh. Institute has provided an all in one Epson colour printer in the library. Fire extinguisher validity found to be till 18th.Jan.2019 which needs to be serviced immediately. Pest control found not done since 20.07.2017 though an IDN was raised on 03.07.2018.

Forensic medicine and Toxicology (FMT): MSR board available and found updated. Teaching plan v/s actual lectures verified through Dec-2018 attendance register. Seminar records and list of journals found available. Project book found prepared for latest crime report. A booklet of weapons is also prepared. Court visit found made on 28th.March, 2nd April and 5th April 2018. Post mortem visits were made to civil hospital 12 times between 9th March and 28th March 2018. Department has initiated a new and noteworthy practice by adding Photographs of visits to the visit records.

Pediatric: Case presentation dated 29th.Dec.2018 by Dr Surabhi Chitre available. Journal club found held periodically. Latest was held on 13.11.2018. Seminar and publication records available. ATFH newly added since 2016. PG log book found not updated. Student feedback forms not available. Daily book found not available.

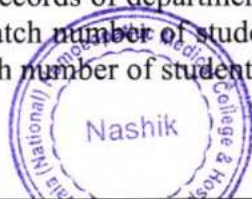
Medicines: Teaching plan v/s actual lectures available. Interdepartmental activity records available. Presentation records available in logbook. As per MUHS requirements 5 presentations per term being made. Institutional Ethical Committee records available. List of Extension activities verified through F/ACD/3.

Surgery: Teaching plan v/s actual lectures verified through Dec-2018 attendance register. Records of visit to hospital now available. Student feedbacks obtained and recorded. Seminar records available, latest was held on 12th.Dec.2018 on ear-examination. Two interns participated in Avishkar. MSR board found updated, verified through 22 charts. Policy to asses and mentor weak students found implemented.

Obstetrics and Gynecology (OBG): MSR board available and found updated. Teaching plan v/s actual lectures verified. Seminar records available, last was done on 18th. Aug.2018. Assignment and tutorial records available. Internal assessment records available. Medical camps found organized.

Pathology: Teaching plan v/s actual lectures verified. Departmental targets prepared and achieved. Department's result has gone from 70% to 100%. Quarterly seminars are conducted, latest was conducted on 17th.Nov.2018. Records of interdepartmental activities are available. Daily diary found maintained. As an extension activity students sent for camps. Records of parental and alumni feedbacks obtained. Other departments of the institution can also adopt this practice.

Materia Medica: Publications of PG Students published in Materia Novam magazine. Logbook found duly filled. Book issuance records of departmental library verified. Student feedbacks found obtained and Roll Number and Batch number of students recorded therein. Other departments can also record Roll Number and Batch number of students while obtain the feedbacks.



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Reparatory: Teaching plan v/s actual lectures taken verified through attendance register. Departmental objectives, working procedures not maintained properly. Presentation records of PG students available. Daily diary found maintained. Records of seminars dated 6 & 7 Dec 2018 found available. Departmental staff attended seminar on 19th Nov 2018 “Megahomoeocon-2018” certificate were found available. Departmental library records properly maintained.

Organon: Teaching plan available and teaching vs actual lecturers taken recorded. However attendance of faculty not available since 1st.Jan.2019. Seminar found done on 10th.Dec.2018. General club held on 4th.Jan.2019. Case discussion held on 9th.Jan.2019. No publication recorded since Jan.2018 year. External activity recorded as Medical camp held at Girnare on 3rd.Sept.2018.

Hospital: A case of Malaria IPD no. 1340/18 (OPD: 1181129081) was verified. It was observed that Malaria was established without any blood test. Hospital staff list with 45 staff verified. OPD patient statistics available. More than 255 patients per month found recorded. IPD bed occupancy ratio found to be 37-45%. Autoclave, Fumigation, Bio-medical waste and Birth record available. Sister duty register available.

Community Medicine: आरोग्य दत्तक योजना DHCS records available in detail. School health checkup found carried out at Kilbil High school and DN Patil School Gangapur Village on 6th.July and 10th.Sept respectively. Outdoor visit to Panjarpol organized. Practical books and publications of students are available. Departmental objectives revised and found achieved. Several services related to community help organized, salient among them are NSS, Swachha Bharat Abhiyan, Tree plantation, WHO day, Maha Arogya Shivir etc. Domicile Health care system propagated among the needy community and feedbacks from the family members obtained in writing. All of these feedbacks are positive with so many encouraging comments.

Reception: New check list has been prepared and followed. Attendance register available at the counter. Teaching faculty register duly maintained. Supporting staff and casual labor records also maintained at reception counter. Leave application and out going pass system found improved significantly.

Administration: Registrar office -Records of Inward and outward correspondences duly maintained. Record of the notice being circulated also duly maintained. However there is a room for improvement in this area. Feedback and suggestions from Motiwala App found to be very helping to the students. Administrative was not available for administration audit.

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

3.2 MR Function: Institute has upgraded its Quality Management System from old standard ISO 9001:2008 to new version of ISO 9001:2015. New Quality manual prepared and new objectives set. The same found to be monitored and achieved. IQA found done every six month. First IQA was done between 7th.June.2018 and 13th.June.2018. Latest IQA was conducted between 10th.Jan.2019 and 12th.Jan.2019. No non-conformity was recorded.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened at planned intervals. College has developed an App by name Motiwala which is very useful to the students and their parents. College also purchased a biometric fingerprint reader of MYNTRA make.



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Audit Report

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3.4 Leadership: Entire old building has been renovated and further renovations are underway. An entirely new auditorium is under construction which is planned to have international acoustic standards. All departments display updated MSR status. Management is motivating faculty and students for social work, tree plantation, Ankur project, compost project. Organization has started with cancer OPD in collaboration with Mumbai organization. A lot many efforts were reflected in research work.

4.0 Conclusion: The installed quality management system found very well maintained with MR function being significantly active.

5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by “Motiwala Homoeopathic Medical College & Hospital, Nashik” found to be complying requirements of International standard ISO 9001: 2015 satisfactorily. Issuance of certification thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.



Madhavendra Singh
(Lead Auditor-KVQA)



KVQA

Audit Report

KVQA

Report No.: 15-i 2388/C-8658/Surv

Type : Surveillance Audit
Organization : Motiwala Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: HPO, Nasik- 422222
Audit Date : 15/12/2017
Standard : ISO 9001:2008
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 15th December 2017 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2008.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2008 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Observations and Area for Improvement (AFI):

Physiology: Annual Teaching plan improved by adding column for Plan v/s Actual lecture taken. 4 days orientation program for IBHMS prepared. Department participated in Medical camp held on 18th.Aug.2017 for the benefit of Nasik Retail Cloth Merchant Association. Dr Mrs Kundu guided STSH project for UG student. Department conducted Revisional classes using a unique Random Question pick up method. MSR board made and displayed with updated information in the department which is a very significant infrastructural addition by the management. The entire department is renovated with large class room area and several new facilities.

Pharmacy: MSR display board available. Significant expansion and infrastructural improvement done. Teaching is carried out by visiting faculties. Attendance registers, seminar records available. Instrument list as per CCH available.

Anatomy: The entire department is renovated and several new features added. Dissection table and MSR board available. Teaching plan, seminars, tutorials, records available. There was short fall of 12 lectures in Plan v/s actual lectures taken. It was felt that there is a need of ISO training to the department.

Reception: Receptionist found doing following jobs single handedly. In order to give justification to other important job; receptionist may be off-loaded with the printing work. 1) Printing 1st to 4th year and MD level journals, pamphlets, case paper etc. 2) Receiving of student's application and forwarding them to admin dept. 3) Receptionist job.

Administration: It was suggested in MRM to keep a visitor register at reception. The suggestion was complied with. ATR record seen. Biometric machine (MYNTRA) purchased by college. Notice circulating register Admin/OC2/03 seen. Guest faculty register F/Adm/02 seen. There was entry of 8 visiting faculties. Motiwala App developed and introduced.

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Vice Principal: College Council Meeting records available but signatures of some mentioned staff were missing. LMC records found without the signatures of attendees. Signatures of several teaching staff were missing in Teaching staff register F/Adm/01.

Hospital records: Intern training record was not having proper heading. The same was corrected on the spot. Camp register seen. Total 165 days camp found arranged. OPD dispensing report available. Medical officer and RMO time table available. Autoclave records found maintained. Fumigation register available. Birth record register available. Bio-medical waste records available. Sister duty register available. The earlier system of sterilization of operation theatre by formaldehyde has been discontinued with and a new aerial fogger machine has been purchased and put into operation.

IPD Dispensing register format has to be rectified. Housekeeping at dispensing found to be average. Too much rush of interns around dispensing area observed which not only looks less elegant but also reflects either the system is absent or system is not functioning properly. OPD & IPD register has to be monitored and duly signed by the authority concerned on daily basis. Intern's duty monitoring system has to be reviewed. Responsibility and authority for hospital work should be well defined, documented and monitored.

Clinical Pathology: Blood cell counter Nihon Kohden make found under AMC. Requirement of a separate printer felt. There is work space constraint in the lab. Sample collection area may be demarcated and separated from the lab.

Forensic medicine and Toxicology (FMT): MSR available. 5 new acts added as per CCH. 16 new certificates added such as birth certificate, death certificate etc. Visit to district court found done on 08.May.2017. Visit to civil hospital done on 8 & 9 October.2017 for witnessing postmortem. Teaching plan v/s actual lectures taken records available. Attendance register available. Seminar records and list of journals available.

Library: Fumigation records not available. 41 new books added since 08.05.2017. MUHS digital library made available to the students. Pustak Pedhi Yojna of MUHS found implemented. A requirement of additional cupboard raised to admin vide IDN/22.08.2017, yet the action is still awaited.

Surgery: Teaching plan available and teaching vs actual now maintained. Practical and assessment records available. Records of seminars, publications and interdepartmental activities available. Hospital visit records of students are not much visible. However students witnessed surgery in college's own hospital.

Obstetrics and Gynecology (OBG): MSR available. Teaching plans v/s actual lectures taken records available. Interdepartmental activities record now available. Attendance register available. Records of seminars and tutorials available. Ante natal care records available.

Pathology: Plan v/s actual lectures taken records available. Interdepartmental activities record available.

PG-Materia Medica: Teaching plan vs actual status found available. Journal club meeting found held. Latest was held on 17.November.2017. Only one publication record found available. Records of departmental library seen. Some of the records of book issuance found without signatures.

PG-Organon: Teaching plan available and teaching vs actual lecturers taken records now maintained. After the observations made in IQA now two seminars per students are conducted. Publication for last year found not available. However one publication is due for publication in the coming month of Jan-2018.



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PG-Reparatory: Uniform system of Plan v/s actual lectures taken adopted across the institution was not available. 13 Seminars found conducted. Journal club records dated 13.10.17 and 15.15.2017 available. Attendance register was not made available at the time of audit.

PG-Practice of Medicine: Records of seminars 2 per month now available. Records dated 12.06.2017 and 17.02.2017 verified. Documentation and record keeping has to be improved

PG-Pediatric: During the IQA it was noticed that case discussion were not held. Case discussion record now available, record dated 10.11.2017 verified. House keeping found improved significantly. Journal club meeting held, latest was held on 20.11.2017.

Community Medicine: For the benefit of the students; department has collected Question Papers both internal and external examination. Question and answers of Viva summarized. Question bank has been prepared. Department has done 38 camps and carried out health check ups at 6 different schools as per the requirement of MSR. Under Pandit Deendyal upadhyay yojna online records of sick people uploaded. Organ donation message carried out at 8 places using street play (Happy Hippo show) that includes City Center mall. Department conducts a seminar every month. The latest was held on 13.11.2017. DHSC program being conducted on regular basis. Field visits were organized at Water Filtration plant, Food Industry, Eology park at panzarpola on 28/08/2017. A site visit to Rajhans Dairy Sangmaner was arranged on 1st.Sept.2017. Department actively conducts NSS program. Pulse polio records verified. Various program were conducted such as Organ donation program, Swachata Abhiyan, Sardar Vallabh Bhai Patel-ekta diwas AIDS Awareness program etc. Department participated in Maha Arogya Shibir at Nadurbar and Faizpur.

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

3.2 MR Function: Very effective. IQA and ATR records dated 26-27/07/2017 and 28-30/11/2017 available. Quality objectives found achieved. Academic proficiency increased to 85%. Participation of Article by students increased from 5 to 9. There were total 156 presentations in a year. Under service to humanity 152 hrs given as against the planed 100 hours. Patient feedback records as well as student feedback records available and analyzed.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened at planned intervals. College has developed an App by name Motiwala which is very useful to the students and their parents. College also purchased a biometric fingerprint reader of MYNTRA make.

3.4 Management's commitment: Entire old building has been renovated. All the departments have been provided with new furniture. Each department has its own attached washroom. Each department now displays MSR status on individual large MSR board, which are periodically updated.

4.0 Conclusion: The installed quality management system found very well maintained with MR function being significantly active.

KVQA

Audit Report

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5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by "Motiwala Homoeopathic Medical College & Hospital, Nasik" found to be complying requirements of International standard ISO 9001: 2008 satisfactorily. Continuation of certification thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.



Madhavendra Singh
(Lead Auditor-KVQA)



KVQA

Audit Report

KVQA

Report No.: 15-i 2388/C-8658/Surv

Type : Surveillance Audit
Organization : Motiwala Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: HPO, Nasik- 422222
Audit Date : 10/01/2016
Standard : ISO 9001:2008
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 10th January 2016 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2008.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2008 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Observations and Area for Improvement (AFI):

Organon: 21 photographs available but not displayed. Stock register of books verified. Publication of article on knee osteoarthritis in IJRH (Vol 10/Issue 3) verified. Annual Teaching plan may have 2 columns viz Plan vs actual for better monitoring.

PG: Department is supposed to conduct 2 seminars per month. The last record of seminar was of Feb-2015. Similarly clinical presentations should be 2 per week but no records were available.

PG-Materia Medica: Teaching plan vs actual status found available. Attendance register available. Lectures may be written in 1/3, 2/3, 3/3 formats. Latest seminar record of III yr was available of 8th.Oct.2016. No records of publications available for past 3 yrs. Against 2 seminars per month the last record was available of 03/05/2015. Similarly Journal club meeting as against 2 per week it was found be held in 11/03/2015.

PG-Practice of Medicine: Teaching plan of Dec-16 found not completed (3+2) lecturers. Seminar records available. Visit record to Super specialty hospitals available. Bedside training records available. Records of Clinical discussions 3 hrs per week not available. Records of seminars 2 per month not available. Number of project work 1 per student not available. It took lot of time to bring the relevant documents and records before the auditor.

PG-Reparatory: Annual Teaching plans found without signature. Plan for 2017 found not available. Computer record shown as 10 PCs but actually no PC found available. Record, books not traceable.



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Community Medicine: Annual teaching plans available. Attendance register available. DHCS (Village adoption) plans available and followed. List of Books available. Medical camp record 2014-2016 available. 177 Charts and 26 models available. Journal records, assignment records and NSS visit report available. 17 schools covered during 2015-16. Records of participation in Pulse polio vaccination program available. Records of visit to Rejewadi village in association with BOSCH found available. 2 students for NSS selected for republic day parade at Mumbai. Participated in organ donation awareness campaign. Out school survey conducted. Outdoor visit records available. Actively participated in Maha Arogya shiver. Screening of 2822 families found done at shiver. IQA found done on 14 May 2016 and 24-25 Oct-2016. ATR records available. 2 NCs found closed using KAPA.

Obstetrics and Gynecology: Teaching plans available. Attendance register available. Records of seminars and tutorials available. Ante natal care records available. Interdepartmental activities record not available. Record register of books not found.

Forensic medicine and Toxicology: Teaching plans available. Attendance register available. Copies of total 22 acts found available that includes 7 new acts. Seminar records available. Practical books with students available. Project book, assignment books with students available. Post mortem visits to Civil Hospital done. Procedures at district court witnessed. List of journals available. Publications and Tutorials found nil.

Library: Fumigation done but certificates not available. Fire fighters date expired.

Surgery: Teaching plan available but teaching vs actual not maintained. 8 out of 8 topics available. Practical and assessment records available. Records of 4 seminars found available. Records of publications and interdepartmental activities record available.

Physiology: Microscope maintenance done. List of books available. Annual teaching plan available. Work schedule according to CCH followed. Clinical presentation cum seminar record available. Alcohol license available till 2023. Daily diary available.

Pharmacy: Teaching plan available. Attendance register available. Hours distribution available. Seminar records available. Instrument list as per CCH available.

Pathology: Instrument list as per CCH available. Assignment and seminar records available. Exposure to clinical laboratory given. Participated in Maha Arogya mela on 01/01/2017. Daily diary, minute books available. Formalin replacement record maintained.

Anatomy: Dissection table available 4 nos. Teaching plan, seminars, tutorials, dissecting, burial records available.

Vice Principal: No signature found on college council record dated: 10.09.2016. LMC record not found with the meeting record. Responsible authorities have to seriously look into the lacuna since this is one of mandatory requirements of CCH.

Hospital: Bio medical waste record available. Auto clave records were available. However other hospital records were not updated as per minimum CCH requirements. Stock register, library register, teaching staff, non teaching staff register should be provided with the name of college for uniformity. System should be customer focused and prime attention should be given to the patients and students.



KVQA

Audit Report

KVQA

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

3.2 MR Function: Very effective.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened periodically. We have verified website of the college which is an alternative means of communication.

3.4 Management's commitment: Very visible. The old building is being extended. New building has come up for the PG courses. New play ground and parking area has come up. College actively participated in Maha Arogya mela on 01/01/2017. Institution contributes to CCH regularly with their valuable suggestions.

4.0 Conclusion: The installed quality management system found very well maintained with MR function being significantly active.

5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by "Motiwala Homoeopathic Medical College & Hospital, Nashik" found to be complying requirements of International standard ISO 9001: 2008 satisfactorily. Issuance of certification thus recommended.

This report is subject to the review of certification cell of KVQA Certification Services Pvt. Ltd. If the cell envisages any changes, the same shall be incorporated and a revised report shall be forwarded.



Madhavendra Singh
(Lead Auditor-KVQA)



KVQA

Audit Report

KVQA

Report No.: 15-i 2388/C-8658/Initial

Type : Certification Audit
Organization : Motiwala Homoeopathic Medical College & Hospital
Address : Motiwala Nagar, Gangapur-Satpur Link Road, Via: HPO, Nasik- 422222
Audit Date : 08/10/2015
Standard : ISO 9001:2008
Scope : Imparting Knowledge and Skills pertaining to Homeopathic System of Medicine.

1.0 The audit was conducted on 8th October 2015 to verify compliance & effectiveness of Quality Management System & its documented procedures to standard ISO 9001:2008.

1.1 Corrective Action Request – Minor

No minor non-conformances were recorded during the audit by sampling depth.

1.2 Corrective Action Request – Major

No major non-conformance amounting to the absence or total breakdown of quality management system as per the requirement of international standard ISO 9001:2008 were observed during the audit by sampling depth.

2.0 Effectiveness, Conclusion & Recommendation:

2.1 Good Points: Physiology department took active part in formulating and sending Curriculum improvement suggestions to CCH. Records of inter department activities and meetings meticulously maintained at Physiology department. Anti-ragging committee found working.

Anatomy department actively initiated wide publicity in local news papers for “Human body donation before death”. Procedure for Human Body embalming established and followed.

Clinical Pathology found inducting a new Automated Blood Test analyzer.

Record keeping found meticulous and flawless. Deserves appreciation.

Written feedbacks of the patients obtained at hospital shows very encouraging and positive feedbacks. There is not even a single negative feedback in the record. An indicator of good functioning of the installed QMS.

2.2 Observations and Area for Improvement (AFI):

Pathology: Teaching Plan found without academic year. Signatures found not available. Teaching plan v/s actual status not tallying. Histopathology records of formalin not available. Records of first induction of specimen not generated.

AFI: Laboratory reagents (having shelf life) which come from Clinical pathology lab do not bear the parent batch number and shelf life. A system of traceability between the two needs to be established.

Physiology: Teaching plan v/s actual status not tallying. List of instruments not available. There is every chance that some instruments are over used and some are not at all used.

AFI: List of instrument to be generated with serial number and issuance records duly maintained.

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Pharmacy: Teaching records, project work found duly conducted and recorded.

AFI: Herbarium garden has enough scope to add new plant species.

Anatomy: Di-section records duly maintained. Certificate for embalming issued.

Obstetrics and Gynecology: Monthly teaching plan perfectly tallies with the actual completion.

F.M.T.: Visit to Civil hospital arranged for students for witnessing Post Mortems, latest visit was on 24th.Sept. Seminars conducted on Legal Procedures, Mechanical Injuries and Medical Ethics.

Library: Total books available 8209. Dissertation work of the students duly preserved and identified. Location of books not posted in the ledger.

AFI: A Xerox facility at the library itself would certainly be a good facility to the students.

Surgery: Students are taken to Private Hospitals for demonstration of surgery. Clinical presentation of the students conducted. Evaluation is done by four evaluators under 400 marks.

Clinical Pathology: A new automated blood test analyzer found under induction.

AFI: Daily calibration records of Automated Bio-chemistry analyzer to be maintained. An additional column to be added in stock register for monitoring daily consumption.

Record Keeping: Birth and death records found duly maintained. Other records such as Fumigation, Autoclave, O.T., B.M.W. and sister duty register found properly and meticulously maintained.

AMT (Naturopathy): The department has requisite modern facility for Auxiliary Mode of Treatment. There are good number of regular visitors to this department.

Radiology: A clarification from BARC may be obtained for necessity of radiation badge for the operator vis-à-vis the kind of machine hospital is using currently.

CMO: Besides managing hospital CMO conducts Intern Orientation program. Patient feed back regularly collected and analyzed. Interestingly all feedbacks are positive.

AFI: Documentation and record keeping have room for improvement.

Community Medicine: Under the Community Medicine department; as the name implies; department is organizing & taking active participation in various social programs & mass activities. Mahila Arogya Abhiyan found conducted between 7th to 10th.March.2015, School Health Checkup and Blood-donation program regularly carried out. It also reflects interdepartmental activities as other departments also get actively involved equally during these programs. There is an excellent program by name DHCS (Domiciliary Health Care System) adopted by the institution and medical students visit adopted families every Saturday. The program is very successful and regularly monitored by the HOD. Department also participated in disaster management and Kumbhmela-2015.

Admin: Suggestion Box systems found in place. First opened on 6th.Oct.2015, but no suggestion or complaint found received. Classrooms have been installed with CCTV cameras and large TV screens. Final clearance of outgoing students found done the very same day. Deserves appreciation.

AFI: Program for maintenance of CCTV cameras may be prepared and incorporated into the system. A two-way communication between institutions and parents of the students may be introduced using parents' e-mail or mobile number.

Computer Lab Hub Center: The center uses software like Hompath, Radar-10. Students can come to the department and access these programs freely.



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P.G.: A new building has come up for the PG courses. There are 5 streams of PG that are currently being taught. They are Medicine, Pediatrics, HMM, Organon and Reparatory. In Medicine we found teaching plans available but no evidence of plan v/s actual was available. In Organon department an excellent detailed student feedback system has been introduced by Dr Mrs Gayatri Nimbhore. This system can be replicated across the institute after due deliberation and customization. In HMM, we found Evaluation of presentation done meticulously but copy of evaluation not given to the student or guide. Repertory has system in place which generated 3 Gold Medalists.

AFI: While doing the evaluation of presentations of the students, a copy of evaluation should be given to the student and his guide. It's their right to know their weak areas.

3.1 Degree of effectiveness & reliance of Internal Quality Audit (IQA): Quite satisfactory.

AFI: Participation of core team member should be more visible and inclusive. Department wise quality objectives should be made mandatory and should be important part of periodic IQAs.

3.2 MR Function: Very effective.

3.3 Customer communication: There is a system of Customer feedbacks being taken at hospital level which is found working quite efficiently. There is also a system of collecting students' complaint and suggestions through the complaint boxes which are opened periodically.

AFI: While students are the direct beneficiary, their parents also have equal right to be listened. Institution may invite some innovative ideas for an effective parent-institution communication. May be, by seeking parent's email and mobile numbers and establishing two way communications.

3.4 Management's commitment: Very visible. The old building is being extended. New building has come up for the PG courses. There are many more future plans. Dean's visit to Kashmir on 8th.Oc.2014 with 16 interns on flood relief visit was significant. It became more significant when he supported the air travel of some other institution's students on their return journey. The principles adopted in Quality Policy "..Upholding the Highest Moral Values.." were seen demonstrated in a real life situation.

4.0 Conclusion: Several departments of the institution have created their own internal systems to suit their internal needs. Some of them are quite good and useful and may be replicated across the institution as a standardized system. Management may consider that the generation of teaching plans and their monitoring on day to day basis is done centrally through a central computer, which in turn can be connected to all the departments via LAN and use of which may be controlled by issuing access code to the authorized persons. The quality of new PG set-up is enough an indicator of management's commitment towards customer satisfaction and seriously supporting the infrastructural building. Dean personally accompanying group of 16 interns on flood relief visit as far as to Kashmir is in tune with their adopted Quality Policy and deserve special mention. During recently held Kumbhmela at Nasik 160-doctors, professors, PG, Interns, & students actively participated in various health management activities. NSS regularly organized & special camps are conducted every year under which health services are provided to tribal village areas.

While the institution is blessed with the senior and matured faculty members, there are young and energetic staffs at the helm of the administration. As such exit documents of outgoing students are cleared the very same day. Institution actively contributing to CCH with their suggestions and CCH adopting them is quite an extraordinary feat. Senior faculty Shri Kundu contributing to the research in the field of Hemophilia is an absolute extraordinary achievement but under-publicized. In order to alleviate the suffering hemophilia patients worldwide his research may be brought to the notice of likes of WHO, UNICEF, Gates Foundation etc.

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Audit Report

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5.0 Recommendation:

We have carried out onsite audit on sample bases with a reasonable sample depth in each department. We have covered all the major departments and our audit findings are based on observations, personal interviews and documentary evidences. We conclude that; in absence of any Minor or Major Non-conformity the Quality Management System adopted by "Motiwala Homoeopathic Medical College & Hospital, Nasik" found to be complying requirements of International standard ISO 9001: 2008 satisfactorily. Issuance of certification thus recommended.

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Madhavendra Singh
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