











# EMPLOYEE HANDBOOK

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### INTRODUCTION

This employee handbook is a summary of policies, procedures and practices related to human resource management at Medicover Hospitals.

The Company will make every effort to notify employees when an official change in policy or procedure has been made. But employees are responsible for their own up-to-date knowledge about Company Policies, Procedures.

Medicover Hospitals has been on the forefront of healthcare excellence.



### **PHILOSOPHY**

The Medicover Hospitals group wishes to maintain a work environment that fosters personal and professional growth for all employees. Maintaining such an environment is the responsibility of every staff person.

### It is the responsibility of all staff to:

- Foster co-operation and communication among each other
- Treat each other in a fair manner, with dignity and respect
- · Promote harmony and teamwork in all relationships
- Strive for mutual understanding of standards for performance expectations, and communicate routinely to reinforce that understanding
- Encourage and consider opinions of other employees or members, and invite their participation in decisions that affect their work and their careers
- Encourage growth and development of employees by helping them achieve their personal goals at Medicover Hospitals group and beyond
- Seek to avoid workplace conflict, and if it occurs, respond fairly and quickly to provide the means to resolve it
- Administer all policies equitably and fairly, recognizing that jobs are different but each is important that individual performance should be recognized and measured against pre-determined standards and that each employee has the right to fair treatment
- Recognize that employees in their personal lives may experience crisis and show compassion and understanding.

### **WHO WE ARE**

### **Medicover:**

Medicover is one of the most respected healthcare brands in the world with presence in 12 countries across the globe -Germany, Poland, Turkey, Belarus, Bulgaria, Georgia, Hungary, Romania, Serbia, Moldova, Ukraine and India.

### **Mission**

"Caring for your health is all we do"

### **Values**



Within Healthcare Service Division "Passion for Quality" value has increased emphasis as it's vital to deliver our cause. All our values are important but our quality value ensures we enable life, save life, maintain and improve life.



OUR LOGO DEPICTS "COVERAGE AND CARING"

### **SERVICES OFFERED AT MEDICOVER**

- Cardiology
- Electrophysiology
- Cardiothoracic Surgery
- Orthopaedics
- · Joint Replacements
- Neurology
- Neurosurgery
- Obstetrics & Gynecology
- Gastroenterology
- Bariatric Surgery
- · Surgical Gastroenterology
- · Critical Care & Pain Management
- Dental
- Dermatology
- Dialysis
- · Dietetics & Nutrition
- Emergency & Trauma
- Endocrinology & Diabetology
- ENT
- General Surgery
- · Internal Medicine
- Minimal Access Surgery
- Nephrology
- Medical Oncology



- Surgical Oncology
- · Orthopaedic Oncology
- Ophthalmology
- · Paediatrics
- Paediatric Surgery
- Physiotherapy
- · Plastic & Cosmetic Surgery
- Psychiatry
- Pulmonology
- Rheumatology
- Spine Surgery
- Urology
- Vascular Sugery
- Clinical Laboratory
  - o Bio-Chemistry
  - Clinical Pathology
  - o Micro-biology
  - Serology
  - Haematology
- Radiology
  - CT Scan
  - o MRI
- Ultrasound
- Doppler
- Blood Bank & Transfusion Medicine



### **EMPLOYEE DEFINITION AND STATUS**



### **Employee Definition and Status**

An 'Employee' of Medicover Hospitals is a person who regularly works for Medicover Hospitals on a wage or salary basis.

### **Employment Classification**

Employees of Medicover Hospitals are classified as either 'Permanent' or 'Temporary. This is necessary because, by law, employees in certain types of jobs are entitled to additional shift allowance for hours worked in excess of forty eight (48) working hours per work week.

### **Permanent Employee**

Is one who is employed at a permanent post and includes any person who has satisfactorily completed the prescribed period of probation in the same or higher or equivalent category in the hospital, and has been confirmed in writing.

### **Probationer**

Is one who is provisionally employed to fill a permanent vacancy and who has not completed the period of probation of 06 (Six) months or such extended period.

### **Trainee**

Is a person who is engaged for the purpose of learning work with or without stipend/allowance.

### **Temporary Employee**

Is one who is engaged for work which is temporary in nature, or likely to be finished within a limited period.

### **Casual Employee**

Is one who is employed on a daily basis or piece rate basis for work, which is essentially occasional or casual in nature on a day-to-day basis.

### **Contractual Employment**

A contractual job is employment that requires to sign and agree to terms of a contract before begin working. Contractual work is usually for a specified amount of time and ends upon completion of a projector assignment.

### **Probationary Period for New Employees**

Medicover Hospitals monitors and evaluates every new employee's performance for six months to determine whether further employment in a specific position with Medicover Hospitals is appropriate.

### **EMPLOYMENT AT MEDICOVER HOSPITALS**

### **Employment Equity**

Medicover Hospitals is an equal opportunity employer and employs personnel without regard to race, ancestry, place of origin, colour, ethnic origin, language, citizenship, creed, religion, gender, sexual orientation, age, marital status, physical and/or mental handicap or financial ability.

### **Recruitment & Selection**

All employment opportunities at Medicover Hospitals are posted on company's website. Occasionally, they are posted on employment websites or with an employment agency. Applications are encouraged from current employees but will be screened in the same manner as applications received from outside applicants.

Applicants are invited to submit their application, along with a current resume, demonstrating that they meet the minimum criteria for the position being sought. At the closing date, all applications are screened, and candidates selected for interview are contacted.

A selection panel is constituted to conduct interviews of each position defined in the organization. If the interview is positive, references will be contacted. Depending on the feedback provided, a position may be offered to the applicant.

### Orientation

All new employees to Medicover Hospitals shall receive an orientation session which will encompass an overview of general policies, procedures and operations. This will also provide employees, new to either a position or Medicover Hospitals, an opportunity to learn the performance expectations management has with regard to the position in question. Employee Handbook is uploaded in Employee Login in HRMS and each employee is expected to learn its contents. Employees will also be made aware of policies such as, Medicover Code of conduct, Medicover Anti Bribery Policy and asked to sign on their adherence to same.

### **Employee Duties**

Attached to an Offer of Employment, is a description of the job and the associated responsibilities, along with any additional tasks possibly required. This document will be used to evaluate for clarification.

From time to time, it may be necessary to amend an employee's job description. These amendments will be discussed with the employee in advance however; the final decision on implementation will be made by the Management.

### **Personnel Records and Administration**

The task of handling personnel records and related to administration functions has been assigned to the Human Resources Department.

Personnel files will be kept confidential at all times and include some or all of the following documents:

- · Bio-Data
- · Employment Application form
- · Educational certificates
- Experience and Relieving Letters
- · Signed copy of Appointment letter
- Medical records

### **Change of Personal Data**

Any change in an employee's name, address, telephone number, marital status, dependents, or insurance beneficiaries, needs to be reported in writing without delay to the Human Resources Department.

### Safety

The safety and health of employees is a priority. Medicover Hospitals makes every effort to comply with all state workplace safety requirements. Medicover's workplace safety rules and regulations are as following:

- Keep work areas free from unnecessary combustible materials be especially careful handling flammable materials
- Know the location of firefighting equipment in your work areas.
- Stay away from the fire scene if you are not directly involved in removing persons to safety.
- Avoid using the telephone after the fire is reported.
   All telephone lines must be kept open for emergency calls.

- Above all, be ready and know the special fire procedures in your work area. Know what you should do in the event of a fire.
- Each employee is expected to obey safety rules and exercise caution and exercise common sense in all work activities to avoid any untoward incident.

### ATTENDANCE AND PUNCTUALITY

Medicover Hospitals expects employees to be ready to work at the beginning of assigned daily work hours, and to reasonably complete their tasks by the end of assigned work hours.



### **Work Schedule**

Unless otherwise specified, regular full-time employees are expected to work at least forty eight (48) hours per work week.

### **Absence and Lateness**

From time to time, it may be necessary for an employee to be late or absent from work. Medicover Hospitals is aware that emergencies, illnesses, or pressing personal business that cannot be scheduled outside work hours may arise. It is the responsibility of all employees to contact and inform HR department and all other affected parties if they will be absent or late.

### **Unscheduled Absence**

Absence from work for three (3) consecutive days, warning notice will be issued (twice) by the HR / Admin Department, no response will be considered a voluntary resignation.

### **Meal and Break Periods**

Employees are allowed an one-hour lunch break generally between the hours of 12:00 Noon and 2:00 PM (it varies when operating in multiple shifts).

### **Dress Code**

Employees of Medicover Hospitals are expected to present a clean and professional appearance while conducting business, in or outside of the office. Dressing in a fashion that is clearly unprofessional, that is deemed unsafe, or that negatively affects Medicover's reputation or image is not acceptable.

### **Holidays**

All Medicover Hospitals employees of regular status are eligible for holiday pay. There will be 11 Holidays.

#### ENVIRONMENT

We care for natural environment and our aim is to continually improv environmental performance in all our operations and facilities. We focus on reduction of greenhouse gas emissions, minimise the use of harmful substances and hazardous waste, limit and reduce consumption of finite resources, promote an increased rate of recycling. Want

#### COMMUNICATIONS

Communications to all our stakeholder We maintain good relations with media in order to support Medicover's reputation and brand. All communicati with media, analyst or investors, public Information Policy provides guidance on who is an authorised spokesperson

#### INSIDERTRADING

financial instruments, and which, if it was made public, would be likely to have a significant effect on the prices of Medicover's financial instruments (including both shares and debt

#### We are all strictly prohibited from engagi in insider trading or disclosure of insider

laws is a serious crime and may result in criminalliabilityand damage Medicover's reputation. For more information, see Medicover Insider Policy.

WHAT IS A CODE OF CONDUCT?



#### SUPPLIERS

and we expect the same from our sunn

Please proceed in one of the tracks below to submit

If you do not want to contact someone in your organization there is a safe, encrypted channel where misconduct can be reported, anonymously, if you prefer Reports via this channel will only be available for a few selected employees in the Medicover headquarter in Stockholm, Sweden. For serious violations the best way to report is via our secure whistleblower tool:

· If you cannot access the tool you can also report whistleblowing@medicover.com.

If suitable for investigating your report - it will be re-directed to your country Legal head and/or HR head

REPORT CoC VIOLATION All employees are encouraged to report violations of law the CoC or any other Medicover policy.

in their own business and their business relations. Medicover Supplier Code of Conduct applies to all our suppliers





## CODE

**Employee Guide** 



### CARING YOUR HEALTH ISALL WE DO

# OF CONDUCT



### information to others as prohibited



ending on the confidential nature of investigations – erson submitting a violation will receive an adequate aack, provided that there is a contact (this can be: e. – mail – including an onymouse-mail).

MEDICOVER

MEDICOVER Internal Information

Code of Conduct (CoC) is a document that provides guidance on behaviours that we expect from our employees and co-workers at Medicover It says what is perceived as right and wrong

and outlines the rules for ways-of-working. It is built on our values and standards that we believe are essential for business ethics and a moral that the companystand behind.

#### KEY PRINCIPLES OF CoC

At Medicover we are committed to high othical standards and responsible business - this is why:

we measure our success not only by growth and performance in economic value, but also by the way we do business and take our responsibilities

It is of outmost importance to be a responsible as an employer/employee must be conducted in

- human rights
- labour rights
- environment

### WHAT DOES THE Co C CONTAIN?

- Business and personal critical information Political involvement
- Human rights, employment and work environment
- Suppliers relations
   How to react in case of CoC violations

### ACCOUNTING PRACTICES

We comply with all accounting and tax laws, we do not











### ANTI-CORRUPTION

including extortion, giving and receiving bribes, kickbacks, conflict of interest (which is a situation when your private interest is in conflict with the company interest embezziement, or nepotism/cronvism. For more information, see Medicover Anti-Bribery Policy





### RUSINESS & PERSONAL

#### CRITICAL INFORMATION

Safety of personal data and medical data of our patients is our top priority. We protect company business secrets We treat as confidential the information we we provided from partners Medicover does business with.







We protect personal data and medical data

#### POLITICAL INVOLVEMENT Medicover is politically neutral and do not support

in any form any of political organisations or politicians Doing business with the government and public officials is subject to additional rules, requirements defined by laws and increased scrutiny. All employees are responsible for knowing and complying with local laws, regulations and applicable company policies







with local laws



#### HUMAN RIGHTS

Medicover respects and works in line with tionally proclaimed human rights Each of us has a responsibility to show respect for human rights and uphold the laws.







































### **LEAVE POLICY**

- Leave period is from January to December.
- CL are availed after completing one month of service with the organization on pro-rata basis.
- SL (SL are not applicable who are covered under ESI) are availed after completing three months of service with the organization on pro-rata basis.
- An employee who had worked for a period of 240 days or more during a calendar year shall be allowed 15 days of leave during the subsequent calendar year
- ELs are eligible after completion of 1 year from DOJ. EL encashment will be at full & final settlement only after successful completion of 2 years of service with maximum of 30 days only (irrespective of EL balance) Encashment will be done on last drawn basic wage/salary.
- Employees will be eligible for 12 days of casual and 12 sick leave, Casual leave and sick leave will not be carry forward and no encashment

### **Maternity and Allied Leaves**

- Female employees are entitled to 26 weeks / 182 days maternity leave on completion of one year (160 days in a year incl. week off) of confirmed (continuous) service with the company, for two (2) children only. (for 3<sup>rd</sup> child onwards /adoption below 3 months 12 weeks) (wage?) creche facility is now mandatory
- Basic salary will be paid during the leave period by the company or ESI.
- The employee must intimate ESI or/and company about the due date well in advance for the purpose of payment of salary during her maternity leave.

In addition to the above, female employees may avail of the following leaves:-

### **Leave for Miscarriage**

An employee shall be entitled to '8.5' weeks / 60 days of paid leave immediately following the day of her miscarriage.

Complications in Pregnancy/ Delivery etc.

A female employee suffering from illness arising out of pregnancy / delivery /premature birth of the child or miscarriage shall be entitled for one month's leave with maternity benefits. This one month is in addition to her Normal entitle- ment in case of miscarriage / delivery etc.

Note: The proof of the miscarriage illness due to delivery must be produced to become entitled for the above said leave.

### **Permission**

- This provision is only for Staff, Executives and Managers
- Employees can avail of 2 hrs of permission at a time, twice a month.
- Permission is to be approved by the HOD. Employee has
  to submit "Permission Slip" to the Security team at the
  respective Unit whenever permission is availed. In case
  prior permission has not been obtained, then it will be
  treated as unauthorized absence.

### **Attendance Monitoring**

- Employees are expected to record their attendance on a daily basis.
- Leave (other than medical leave) needs to be approved in advance.
- Incase of official travel, please regularize attendance in consultation with the HR Department.

### **Extra Hours Pay**

 Working extra hours will be paid to employees who work in shift operations for more than the normal shift timings in a day. (If an employee exceeds by 2 hours than his/her shift, employee is eligible for claiming extra hours.)

### **Payroll & Paydays**

The frequency of Medicover Hospitals payroll distribution is dependent upon an employee's employment status. Regular full-time salary employees are paid monthly on or before the first business day of the following month. For the payroll purpose, attendance period is taken from HRMS.

### **EMPLOYMENT TERMINATION / RESIGNATION**

After the application of disciplinary steps, if it is determined by the management that if an employee's performance does not improve, or if the employee is again in violation of Medicover Hospitals practices, rules, or standards of conduct, following a decision-making employment with Medicover Hospitals will be terminated.

As per company policies notice period to be served incase of Voluntary resignation.

### **Exit Interview**

In a voluntary separation situation, Medicover Hospitals management would like to conduct an exit interview to discuss the employee's reasons for leaving and any other impressions that the employee may have about Medicover.

### INTERNAL COMPLAINTS COMMITTEE/POSH

Medicover Hospitals is committed to fostering a healthy working environment that enables employees to work without fear of prejudice, gender bias and sexual harassment. Medicover's philosophy is to be a professional organization, encouraging growth of individuals irrespective of gender, religion, caste, or community. Medicover endeavours to ensure a safe, secure, and congenial work environment, so that employees can deliver their best without inhibition.

Through all its policies, Medicover Hospitals seeks to ensure that every gender should have equal opportunity and no preferential or discriminatory treatment is meted out to anyone on grounds of sex alone. In that context, the Group feels the need to spread awareness across the organization, to prevent gender related harassment or discrimination, and in the event of such an occurrence, provide recourse to the concerned individual. The Group also believes that all employees of the Medicover Hospitals have the right to be treated with dignity. Sexual harassment at the workplace or other than workplace if involving the Group's employees, is a grave offence and is, therefore, punishable.

### **Objective:**

This policy is consistent and designed to comply with the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 which came into effect from 9th December 2013. Goal of this policy is prevention and redressal of sexual harassment. Medicover Hospitals have adopted a policy of non-tolerance against any such conduct that violates the law. The policy is non-negotiable.

Main objective of this policy document is to establish a complaint redress mechanism to effectively deal with incidents of sexual harassment at workplace and to resolve such complaints in a fair and timely manner. This policy covers not only sexual harassment at company premises, but other extension of workplace such as business trips, off site training programs, social events or seminars, trainings, conferences, and a function including get together and picnics organized by the Company.

### Scope:

This Policy extends to all Group employees and is incorporated in the service conditions code of conduct of all employees. "Sexual Harassment "includes any one or more of the following unwelcome acts or behaviour (whether directly or by implication) namely:

- · Physical contact and advances
- · A demand or request for sexual favours
- · Making sexually coloured remarks
- Showing pornography; or any other unwelcome physical, verbal, or nonverbal conduct of sexual nature.

The following circumstances, among other circumstances, if it occurs or is present in relation to or connected with any act or behaviour of sexual harassment may amount to sexual harassment:

- Implied or explicit promise of preferential treatment in her employment
- Implied or explicit threat of detrimental treatment in her employment
- Implied or explicit threat about her present or future employment status
- Interference with her work or creating an intimidating or offensive or hostile work environment for her; or
- · Humiliating treatment likely to affect her health or safety

### **Applicability:**

This policy is applicable to complaint of sexual harassment by and against employees of Medicover Hospitals, as well as Retainer, Trainee, temporary and contractual staff. (We should add Consultant & any other individual associated with Medicover.)

### **Constitution of Internal Committee:**

The Company shall mandatorily constitute the committee as defined below,

- Presiding Officer Shall be a woman employed at senior level who will be appointed by the Executive Director and the Chief Human Resources Officer.
- Convener Shall be an HR person who will be appointed by the Chief Human Resources Officer and the Presiding Officer.
- Member 1 Shall be a Medical Officer who will be appointed by the Presiding Officer.
- Member 2 Shall be an Employee who is having experience in Social work/Legal committed to the cause of women who will be appointed by the Presiding Officer.
- Member 3 Shall be from NGO or Association committed to the cause of women/person familiar with the issues relating to sexual harassment, who will be appointed by the Presiding Officer.

Committee meetings shall be held Quarterly and shall be documented.

One-half of the total members nominated shall be women. The committee and the presiding officer will hold office only for period of 2 years.

### **Role and Responsibilities:**

The Committee will work towards creating an atmosphere promoting equality, non-discrimination, and gender justice. It will promote and facilitate measures to ensure there is no hostile environment towards employees at the workplace. It will also monitor and review the implementation and effectiveness of sexual harassment policy. It will also act as highest point of escalation in case of complaint in Medicover Hospitals.

### **Presiding Officer**

- · Overseeing all activities of the Committee.
- Decision making based on deliberations and consensus of committee members.
- Review and approval of committee minutes of meeting.

### Convener

- Scheduling, communication, coordination for committee meetings in consensus with chairman.
- Taking attendance for committee meetings and notes on deliberations of members discussion during committee meetings.
- Preparing minutes of meeting and submitting the same for review and approval of chairman.
- Communicating the approved minutes of meeting to all members of the committee
- · Maintaining the records of committee.

### **Members:**

- · Actively participating in committee meetings.
- Evaluating the deficiencies and suggesting remedial actions for the same.
- Concerns if any related to committee and suggesting prevention strategies.

### **Redressal process:**

The inquiry will be conducted in accordance with the 2013 Act, powers conferred by the 2013 Act and as per principles of natural justice. However, with regards to men and others, complaint mechanism will be in accordance with code of conduct of the company. (Sec 14 - we are not taking about false complaints)

### The complaints can be received by:

The aggrieved female can approach any member of ICC with the written complaint, supporting documents and list of witnesses within a period of 3 months from date of incident/s. In case if the aggrieved female is not able to register complaint due to any physical incapacity, complaint can be registered with written complaint from the aggrieved person's relative, friend, and colleague, or any person who has the knowledge of the incident.

Committee	Name	Mobile Number	Email ID
Presiding Officer			
Convener			
Member 1			
Member 2			
Member 3			,

# Each complaint should at the minimum be specific as to:

- It is important that the aggrieved person keeps a written record of dates, time, details of the conduct and witnesses, if any.
- Nature of sexual harassment.
- Identity of the person/s who is/are involved in the act/s of sexual harassment.
- · Facts and circumstances in support of the complaint.

### **Inquiry into complaint**

In all cases where the complainant is a woman, the ICC shall proceed to make inquiry into the complaint in accordance with the 2013 Act, powers conferred by the 2013 Act and as per principles of natural justice. With regards to men complaint mechanism will be in accordance with code of conduct of the company/service conditions. On completion of the inquiry, the ICC shall provide the inquiry report to the Company. It shall also make a copy of the findings available to the concerned parties to enable them to make representation against the findings before the ICC. Copy of the inquiry report shall be made available to complainant and defendant. Where the ICC arrives at a conclusion that charges of sexual harassment against the defendant are not proved, it shall recommend to the Company that no action is required to be taken in the matter. Where the ICC arrives at a conclusion that the allegation against the defendant has been proved, it shall recommend to the Company to take action for sexual harassment as 'misconduct'. resulting in disciplinary action based on this policy, as deemed fit.

### **Conciliation:**

The purpose of the ICC is to resolve/redress the compliant of the aggrieved person. Hence, the first step by the ICC will be to make an attempt to resolve the raised issue through mutual discussion between the aggrieved person and the respondent. The mutual discussion will be considered based on the gravity of misconduct as construed by the aggrieved person and their consent to adapt conciliation process.

# Disciplinary Action: Guidelines for Disciplinary Action:

The Internal Committee will give recommendations on nature of disciplinary action to be taken in case the defendant is found guilty. The penalties listed below are indicative guidelines.

### **Minor Punishment:**

- · Warning or censure in writing
- Withholding or stoppage of increments/promotion
- Fine
- · Order to give a written apology to the aggrieved women
- Sign a bond of good behaviour
- · Negative impact on performance appraisal
- · Withdrawal of company provided facilities
- Transfer
- Debar from differentiated "Reward & Recognition" programs

### **Major Punishment:**

- Debarring from supervisory duties
- · Reverting, demotion
- · Termination / Discharge from services
- Dismissal without notice or any compensation in lieu of notice
- Compensation to the victim through deduction from the salary of the person found guilty
- In addition to above, the Internal Committee may also recommend providing gender sensitization counselling to the person found guilty

### **Criminal Proceedings:**

Where such conduct amounts to a specific offence under the Indian Penal Code or under any other law, the Company shall initiate appropriate action in accordance with law by making a complaint with the appropriate authority.

### **Third Party Harassment:**

Where sexual harassment occurs by any third party or an outsider, the management will take all reasonable steps to assist the affected employees in terms of support and preventive action.

### **Confidentiality:**

Publication and communication to public and media in any manner about the Compliant identity and address of the aggrieved person, respondent and witnesses shall be treated as confidential. To take an appropriate disciplinary action on any person who violates the confidentiality obligation under this policy.

### **Conclusion:**

It shall be constant effort of the Company to prevent Sexual harassment and create safe & conducive work environment. The policy is subject to modifications periodically as per changing times and need of the organization and /or change in law.

### **Version Control:**

The Chief Human Resources Officer of Medicover Hospitals shall be the custodian of this Policy. The policy shall be reviewed on a need basis by the senior management of Medicover Hospitals, any revisions to the existing policy will require approval of the Executive Director.

### **GRIEVANCE REDRESSAL POLICY**

### **Purpose:**

The purpose of this Policy is to provide a mechanism for individual employees to raise a grievance arising from their employment.

### Scope:

This policy is applicable to all employees of Medicover Hospitals who are on rolls of the hospital.

### **Definition:**

Issue or concern of an employee regarding workplace, job, working conditions, Colleagues.

### **Nature of Grievances**

- · Amenities/Facilities
- · Noise/Sound Pollution
- · Temperature/Humidity
- · Illumination / Lighting
- Housekeeping
  - Sitting Facilities
- · Drinking Water
- Sanitation & Cleanliness
- · Rest Rooms

### **Job and Roles**

- · Role Ambiguity
- Job Dissatisfaction
- Job Rotation
- Role Conflict
- Career Development

### **Working Environment**

- Employee participation
- · Stress and work pressure
- Relationship at work Disputes amongst peers
- · Disputes amongst employees & superiors
- · Interpersonal Relations
- Aggressive behavior
- · Discrimination on caste/creed/language

### **Victimization**

- · Personally offensive verbal comments
- Crude and unwelcome telephone calls, notes, drawings, faxes or e-mails
- Derogatory comments about a person's body, appearance or personal life
- Spreading of rumors.
- A pattern of deliberately ignoring or excluding a person
- · Offensive material that is displayed in a public place

The Company shall mandatorily constitute the committee as defined below:

**Chair Person** - Senior Leadership Employee (Centre Head/ Cluster Head) will be appointed by Executive Director and CHRO

- · Secretary Unit HR
- · Member 1 Unit Nursing Superintendent
- Member 2 Operations Manager
- Member 3 In Patient Manager
- Member 4 Quality Manager

**Preliminary Step** 

First Employee should address grievance with immediate supervisor. This may be done orally (informal discussion). Immediate supervisor has to listen and discuss if the grievance can be resolved through informal discussion. Immediate supervisor must accept the grievances forwarded by the employees and must respect the true and real feelings of the employees. Acceptance of grievances would bring confidence in employees, implies that the immediate supervisor is interested for solution of the grievance without any bias. To some extent the feelings of dissatisfaction would be reduced and avoid frustration, in turn the working environment would be conducive.

If grievance is on a colleague, immediate supervisor has to make the employee understand to deal with facts not the rumors, and to attack the problem not the person, and to verbalize feelings rather than acting.

If an informal attempt to resolve the matter is not successful, the concerned may implement the formal grievance process.

Note: If the grievance is on immediate supervisor, employee can approach the committee.

### STEP 2

If the aggrieved employee is not satisfied with the reply of immediate supervisor, or has not got a reply within the stipulated time, he/she may submit his grievance in writing to the grievance Committee within 7 days of receipt/due date of receipt of reply from the immediate supervisor. At this stage, the grievance shall be addressed to the Grievance Committee.

Committee	Name	Mobile Number	Email ID
Chair Person			
Secretary			
Member 1			
Member 2			
Member 3			_

The Grievance Committee shall go through the grievance in detail & give their recommendation within 10 days they receive the representation. If the aggrieved employee decides to present his case personally before the Grievance Committee, the Grievance Committee shall give him/her an opportunity to do so.

The Grievance Committee will meet monthly to address the grievance received from employees and record the same.

### PERFORMANCE MANAGEMENT SYSTEM

**Process Guidelines** 

Overview:

This Policy enables to enhance & sustain organization performance by aligning employees' goals & contribution to the Organization's vision and objectives. It also serves as a platform to provide employees the opportunity to structure and channelize their growth in terms of learning & development and rewards/ recognition.

### **Objectives:**

- To align individual performance with the Organization's strategic objectives via goal setting & review, on an annual basis.
- To differentiate performance contributions vis a vis goals set.
- To enhance individual contributions by identifying development areas.
- To identify/ develop appropriate learning tools/ methods To reward differing individual performances basis contributions.

### Scope:

- All confirmed employees as of April 1st of the year, are eligible for appraisal.
- The goal setting & final performance review are done on an annual basis (i.e. Financial Year: April – March)

### **Assessment Criteria:**

- 1. The Performance Assessment formats (i.e. Appraisal forms) comprise of two key sections:
- Key Responsibilities (the "What") requisite to be performed in the job. (Functional Key Result Areas (KRAs))
- Key Competencies (the "How") that are relevant to different job categories (Behavioural Attributes)
- 4. The Performance Assessment is a balanced evaluation of both "Key Responsibilities" & "Competencies" on a five point rating scale

The Final Assessment is to result in one of the five ratings enlisted below which are to confirm to a normal distribution for respective departments, units & hence the entire organization:

**OUTSTANDING** – Nearing perfection / exceptionally high contribution to business.

**GOOD** – Performance above expectations / contributes significantly as an individual performer.

**SASTISFACTORY** – Performance meets expectations.

**NEEDS IMPROVEMENT** – Performance below the expected level but could improve.

**UNSATISFACTORY** – Performance to improve drastically in the next 3 months to continue in organization

### **Process Flow:**

- Goal Setting: Employee and immediate supervisor set goals for the Performance Year at the beginning of the year
- Communication by HR and then managers to their respective reportees regarding the appraisal guidelines, methodology & criteria for assessment
- 3. Performance Assessment:
  - Employee (i.e. appraise) and immediate supervisor (i.e. appraiser) discuss and then evaluate performance of the employee against the predecided criteria
  - Post the evaluation discussion, supervisor sends the datasheet & forms to his/ her manager for all appraise Manager/ H.O.D to ensure that evaluation is done appropriately H.O.D/ reviewer to also look into concerns
  - c. Further roll up of all H.O.Ds' review, to the Unit/ Function Head.
  - d. Final check of entire distribution for Medicover Hospitals to be done by HR & roll up of assessment to the Managing Director & Chairman
  - e. Final Ratings to be communicated back to the employees by the respective managers.
  - f. Final Performance Assessment to be one of the contributors to salary revision and career development.

### **Conclusion:**

In accomplishing individual objectives, the employees play a part in achieving the overall objectives of the organization leading to the realization of the vision and strategic goals of the organization.

#### TRAINING AND DEVELOPMENT

#### 1. PURPOSE

To ensure continuous upgradation of knowledge and skills of all hospital employees by way of periodic training sessions and to measure its effectiveness thereafter to.

8 Hours of training is mandatary to each and every employee of Medicover Hospitals.

#### 2. SCOPE

All employees on the rolls of the organization, trainees, and those on a relationship agreement.

Medicover Hospitals is committed to train employees to:

- a. Provide excellence in patient care
- Understand the organizational vision, values, principles
   policies
- c. Facilitate and improve job performance
- d. Encourage employee self development

### **Training Need Identification:**

Concerned department head will be responsible for training need identification of his/her subordinate, based on the following functions:

- a. Functional skill requirement
- b. Behavioural requirement
- Change in job responsibility / function arising out of transfer / promotion
- d. New organizational initiatives

#### **Training Feedback**

A standardized "Training Feedback Form" will be filled by each trainee at the end of training session.

#### **Training Effectiveness**

Evaluation of the effectiveness of training would be done through.

- $\bullet$   $\;$  Interactive Q & A session at the end of every training.
- · Learning checks by concerned HOD.

#### TRAINING FEEDBACK FORM

Name of the programme	:
Date of the programme	:
Duration of the programme Trainer	Internal External
Trainer Name	•
Venue	:

<u>Instructions</u>
Please indicate your level of agreement in the statements listed below

Category	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The objective of the training were clearly defined					
Participation and Interaction were encouraged					
The topics covered were relevant to me					
The content was organized and easy to follow					
The material distributed are helpful					
This training experience will be useful in my work					
The trainer was knowledgeable about the training topics					
The trainer was well prepared					
The training objectives were met					
The time allotted for the training was sufficient					
The meeting room and facilities were adequate and comfortable					

- Q1. What did you like most about this training?
- Q2. What aspects of the training could be improved?
- Q3. What additional training would you like to have in the future?
- Q4. Please share other comments/suggestions:

# QUALITY

#### What is QCI?

Quality Council of India is an autonomous body set up jointly by Government of India and industry to establish and operates accreditation structure for assessment conformity bodies offering certification, inspection, testing and registration service etc. in the field of Health, Environment, Food safety, Information security, Occupational Health and Safety and Quality Management.

#### What is Accreditation?

It is a process of peer review of quality of the health care that is being provided by a health care organization. This is generally carried out by a non-government organization. It also represents the outcome of review and decision that an eligible organization meets and applicable set of standards.

#### What is a Standard?

It is a statement of expectation that defines the structures and processes that must be substantially in place in an organization to enhance the quality of care.

#### What is an objective element?

It is the component of the standard which can be measured objectively on a rating scale. The acceptable compliance with the measurable elements will determine the overall compliance with the standard.

#### What is a quality Indicator?

Quality Indicators area set of functional parameters, which have been selected across different departments of the hospital. Data for these is collected by the respective departments every month and analyzed by the Quality Committee, which looks into gross deviation in any of this data.

- Patient safety and quality of care, as core values are established and owned by management and staff in all functions and at all levels.
- There is a structured quality improvement programme based on continuous monitoring including feedback on patient care services.

The evaluation process includes interviews with patients, residents and staff. It calls for onsite visit to patient care areas and to departments addressing issues related to physical assessment of infrastructure, medical equipment, security, infection control, etc. as required in the accreditation standards. In short, the accreditation involves a comprehensive review of not only the facilities but also of clinical competence of the hospital to deliver services within its scope.

#### **OVERVIEW OF NABH**

National Accreditation Board for Hospitals and Healthcare Providers (NABH)

National Accreditation Board for Hospitals and Healthcare Providers (NABH) has been set-up under the national accreditation structure to establish and operate accreditation programme for healthcare organizations. It is a constituent board of Quality Council of India (QCI).

NABH is an institutional member of International Society for Quality in Health Care (ISQua). The board has representation from all stakeholders including government, consumers and healthcare industry. The structure incorporates Accreditation Committee, Technical Committee, Appeal Committee, Secretariat and a panel of over 100 Assessors / Surveyors selected among Clinicians, Hospital Administrators and Nursing Supervisors.

Structures of NABH: Chapters - 10 Standards - 100

Objectives elements - 651

The 10 Chapters of NABH

#### **Patient Centered Standards:**

Chapter 1 - Access, Assessment and Continuity of Care (AAC)

Chapter 2 - Care of Patients (COP)

Chapter 3 - Management of Medication (MOM)

Chapter 4 - Patient Rights and Education (PRE)

Chapter 5 - Hospital Infection Control (HIC)

#### **Management Centered Standards:**

Chapter 6 - Patient Safety and Quality Improvement (PSQ)

Chapter 7 - Responsibilities of Management (ROM)

Chapter 8 - Facility Management and Safety (FMS)

Chapter 9 - Human Resource Management (HRM)

Chapter 10 - Information Management System (IMS)

### The benefits of NABH Benefit to Patients:

- · Patients are the biggest beneficiary
- Patients receive high quality of care and safety
- Patients rights are protected and respected
- Patient satisfaction is regularly evaluated
- Patients get services by credential medical staff

#### **Benefit to Employee**

- Staff in a accredited hospital provides continuous learning
- · Good working environment
- Leadership and ownership of clinical processes
- Employee safety

### **Benefit to Hospital:**

Accreditation to hospital stimulates continuous improvement. It enables hospital in demonstration commitment to quality care. It raises community confidence in the services provided by the hospital It also provides opportunity to healthcare unit to benchmark with the best. It provides an objective system for empanelment by insurance and other third parties.

#### STANDARD PRECAUTIONS TO BE ADHERED TO

Consider every person (Patient or staff) as potentially infectious and susceptible to infection. Washing hands is the most important procedure for preventing cross contamination (person to person or contaminated object to person). Wearing gloves (both hands) before touching anything wet - broken mucous membranes, blood or other body fluids, or soiled instruments and contaminated waste materials - or before performing invasive procedures. Use physical barriers (protective goggles, face masks and aprons) if splashes and spills of any body fluids (secretions and excretions) are likely (e.g. cleaning instruments and other items). Use antiseptic agents for cleansing the skin or mucous membrane prior to surgery, cleaning wounds, or doing handrubs or surgical hand scrubs with an alcohol-based antiseptic product. Use safe work practices such as not recapping or bending needles, safely passing sharp instruments and suturing, when appropriate, with blunt needles. Safely dispose infectious waste materials to protect those who handle them and prevent injury or spread of infection to the community. Process instruments, gloves and other items after use by first decontaminating and thoroughly cleaning them, then either sterilizing or high-level disinfecting them, use the recommended procedures.

#### **HAND HYGIENE**

- Any health-care worker, care-giver or person involved in direct or indirect patient care needs to be concerned about hand hygiene and should be able to perform it correctly and at the right time.
- Clean your hands by rubbing them with an alcohol-based formulation, as the preferred mean for routine hygienic and antisepsis if hands are not visibly soiled. It is faster, more effective, and better tolerated by your hands than washing with soap and water.
- Wash your hands with soap and water when hands are visibly dirty or visibly soiled with blood or other body fluids or after using the toilet.

#### **HOW TO HANDRUB?**

### **HOW TO HANDRUB?**

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

O Duration of the entire procedure: 20-30 seconds





Apply a paintful of the product in a cupped hand, covering all surfaces;

Rub hands palm to palm;



Right palm over left dorsum with interfaced fingers and vice versa;



Faim to pain with ingers intenaced.



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Once dry, your hands are safe.

#### **BIOMEDICAL WASTE DISPOSAL**

Various Colour coded Bins for the segregation of Biomedical Wastage.



#### **YELLOW BIN**

Cytotoxic Drugs & Consumables



#### **Red BIN**

Blood sets, catheters, gloves, IV sets, plastics, bottles, ryle's tubes, syringes, urobags



#### **Green BIN**

General Items -Cardboards, fruits, leaves, paper items, tea cups, Water bottles



#### **White BIN**

Puncture Proof Sharps. Container or all kinds of sharps unbroken - IV glass bottles, syrup bottles, vials, other glass items, mutilated needles, metallic sharps, ampoules, blades, sharp items and other broken glass items

#### **HOW TO USE A FIRE EXTINGUISHER**

- P Pull the pin
- A- Aim at the base of the fire
- S Squeeze the top handle or lever
- S Sweep from side to side

### Remember the PASS word



Pull the pin (or other motion) to unlock the





Aim at the base (bottom) of the fire and stand 6 -10 feet away.





### queeze

Squeeze the lever to discharge the agent.





### weep

Sweep the spray from left to right until the flames are totally extinguished.



#### **RACE**

- Rescue anyone in immediate danger of the fire.
- Activate the nearest fire alarm pull station and call the designated number.
- Confine the fire by closing doors to the fire (do not lock).
   As people are notified to evacuate, ensure that all doors are closed.
- Evacuate to an area of refuge.
- When a fire is reported on your floor everyone is required to evacuate the area either through a set of fire doors on your floor or via the stairs downward atleast two floors to a safe area or to the outside.

#### Do not use elevators!

#### **EMERGENCY CODES**

- · CODE RED Fire Hazard
- CODE BLUE Medical / Cardiac Emergency
- CODE PINK Child Abduction / Missing
- · CODE GREY External Disaster
- CODE PURPLE Internal Security Threat



Call designated numbers at the respective locations to report/activate Emergency Codes. Based on the incident, an emergency code will be announced by the communication department 16.

## PATIENTS RIGHTS AND RESPONSIBILITIES Patient and family rights

Right to Information:

Every patient has the right to have information on

- Name and professional qualification of Healthcare Professionals treating him / her.
- State of his / her health condition, diagnosis, preventive strategies & probable medical prognosis, informed about the results of diagnostic tests.
- Proposed treatment plan including safe and effective use of medications, and its associated risks, benefits, expected outcomes, possible complications, available alternatives, preventing healthcare associated infections.
- Expected cost of treatment, diet and nutrition, immunizations, Informed Consent process.
- Access his / her records as per the hospital policy, how to voice a complaint; and whom to contact in case of emergency.
- Right to be involved where care plan is prepared and modified in consultation with the patient and / or family members.

## Right to quality care & participation in care delivery:

Every patient has the right to receive

- Medical care rendered, treatment irrespective of type of primary and associated illness, socio-economic status, gender, age, sexual orientation, religion, caste, cultural preferences, linguistic and geographical origins or political affiliations.
- Treatment during emergencies, make decisions about his/her patient care and right to give or withhold the consent, seek second medical opinion before giving his/her consent if so desired.

### Right to confidentiality, privacy, respect, and dignity:

Every patient has the right to:

- Have reasonable privacy and dignity during his/her treatment, various medical investigations & interventions.
- Keeping "doctor-patient privileged information" as confidential except when required by law or by the authorised insurance agency or company.
- Receive appropriate care regardless of race, culture, religion, age, gender or physical disability without any discrimination.
- Respect any special preference, spiritual and cultural needs; and
- · Redressal of his concerns.
- · Protection from neglect and abuse.

#### **Patient and Family Responsibilities:**

To provide effective treatment for patients, it is important that the patients have responsibility to:

Providing information:

Every patient shall provide information on

- His / her full name, address and other information required by the hospital
- Complete and accurate history and information about his/ her health, including present condition, past illnesses, hospitalizations, medications, natural products and vitamins, known allergies to medications and any other matters that pertain to his / her health.
- Communicate with health care provider if his / her condition worsens or does not follow the expected course.

## Treatment compliance, honesty and transparency:

Every patient shall

- Follow prescribed treatment plan and comply with instructions.
- Be punctual for appointments and have realistic expectations from the doctors.
- Participate in medical care by actively involving in understanding therapies and following doctors' advice at home.
- Educated about pain management techniques, when appropriate.

#### **Conduct at hospitals:**

Every patient shall:

- Treat Doctors and other healthcare staff with courtesy and respect.
- b. Not involve in abusing, assaulting, or causing harm to the Doctor or Staff of hospital or causing any harm to the hospital properties.
- c. Abide by all hospital rules and regulations.
  - · Comply with NO SMOKING and visitor policies.
  - Be considerate of noise levels, privacy, and safety.
  - Weapons are prohibited in the premises.
  - Pay the agreed expenses in a timely manner as per the hospital policies.
- Respect situations of treating emergent patients earlier than you.

#### EMPLOYEE RIGHTS & RESPONSIBILITIES Employee Rights:

- · Right to be aware of the hospital wide policies.
- Right to avail benefits extended by the organization.
- · Right to report any harassment to the HR department.
- Treated equally and respectfully, and not discriminated on the basis of caste, religion, sex or socio-economic background.
- Aware of the terms and conditions of his/her employment before joining the organization.
- Entitled to the terms and conditions as specified in the appointment letter.
- Clarity on the targets to be achieved / job to be performed and the roles/responsibilities associated with the task to be performed.
- Aware of all the rights being conferred on an employee during the course of employment.

#### **Employee Responsibilities:**

- To contribute to the highest standards of medical and service excellence.
- To follow Code of Conduct during his / her commitment with the organization.
- To work in shifts or normal duty hours to support the hospital's 24\*7 operations.
- To use email and internet access that is provided in a manner that is ethical and lawful.
- Responsible to use allocated equipment in their work stations and maintained in accordance with the SOPs.
- To maintain proper discipline, professional ethics and complete integrity in the performance of work.
- To maintain complete integrity in his/her action and work.

- To maintain complete confidentiality in respect of their documents and patient information they handle.
- Employees are not expected to have any contact with the Press or make an public statements without the prior approval of the Company.
- Employees shall be discrete in their personal conversations while in the presence of customers and patients.
- Employees are encouraged to adopt a clean desk policy and clear up their workstations.
- Employees working in patient contact areas, such as nurses, patient relation executives, who are issued company uniforms, are expected to be in uniform while at work. Employees who are not provided uniforms shall follow a business dress code.
- Employee should notify their supervisor and HR department of any changes in their personal data.

#### DOs & DON'Ts

#### DOs 🏥

- Adhere to the hospital's culture of work and dressing and personal standards
- Practice responsible corporate citizenship adopt best practices in the hospital's environmental policies and procedures
- · Keep the ethics of the hospital always in the fore front
- Devote full attention to the business interest of the hospital
- Practice transparency in the conduct of business

### DON'TS

- Use Medicover Hospitals facilities, relationships for personal Benefit or outside work
- Let personal interest conflict with the interest of the hospital
- Disclose confidential hospital information in the course of eemployment for gains
- · Discriminate among people while at work place
- · Misuse company property

#### **CLOSING STATEMENT**

Successful working conditions and relationships depend upon successful communication. It is important that employees stay aware of changes in procedures, policies, and general information.

It is also important to communicate ideas, suggestions, personal goals, or problems as they affect work at Medicover Hospitals.