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8.7. TRAINING AND DEVELOPMENT POLICY

8.7.1. Purpose

The purpose of this policy is to promote continuous learning and professional growth by providing structured training opportunities that enhance employee skills, align with institutional goals, and support excellence in performance and service delivery.

8.7.2. Induction Training

All newly joined employees including outsourced staff are inducted to Amala Institute of Medical Sciences through a formal induction and socialization process with sessions on hospital Vision, Mission and values, policies, rules, regulations, procedures and services etc. A quick session about the hospital, policies and procedure and leave rules will be given to the staff on the same of joining and a formal induction will be organized by the HR Department for a large number of new joiners once in 15 days. The induction training program is conducted in a systematic manner, so that the employee will acquire requisite knowledge, skill, attitude and to create a basic awareness about quality. A welcome kit will be provided to staff on joining date.

8.7.3. Ongoing Programme for Professional Training & Development of the Staff

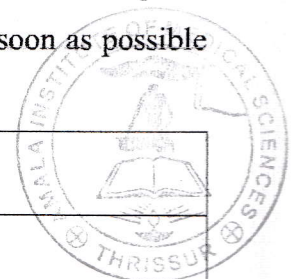
Ongoing/Department wise training programs shall happen in this institute. For nurses it is called CNE and for other it is CTP/CME etc. It can be internal or On the Job. The Management of Amala Institute of Medical Sciences recognizes the importance of providing adequate training to the staff for empowering them with skills which would improve their work performance. Need for training is also identified when there is a change in technology or an employee is transferred or promoted to a position carrying new/additional responsibilities. Training aspect also includes induction and job orientation training provided to each new employee.

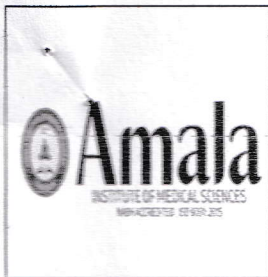
Staffs are trained on various safety related aspects like risks within the organization, occupational safety (NSI, Spillage etc), fire emergency etc.

a) Induction Training-

Induction training should commence on the first day of employment or within 15 days of joining, so that employees are familiar with basic procedures once they are at their place of work. When this is not possible, induction training will take place as soon as possible after the employee has started work.

INDUCTION TRAINING TOPICS	
Introduction to organization	IT
Vision, Mission, Quality policies &	Confidentiality of medical records &





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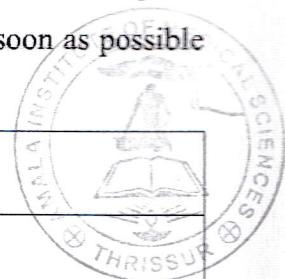
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INDUCTION TRAINING TOPICS	
Introduction to organization	IT
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 Amala <small>INSTITUTE OF MEDICAL SCIENCES</small> <small>WPH-ACCREDITED (02/03/2015)</small>	HUMAN RESOURCE DEPARTMENT MANUAL	Doc. No.	AIMS /DM / HR -41
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Continuous education in nursing represents exposure to nursing programs beyond those necessary for basic preparation. It also offers an opportunity for registered nurses to build upon their education and experience and develop their abilities and knowledge throughout their careers.

d) CME (Continuous Medical Education)-

Continuing medical education is continuing education that helps those in the medical field maintain competence and learn about new and developing areas of their field. According to NMC a doctor must attend 30 credit hours of training during 5 years.

e) DEPARTMENTAL TRAINING-

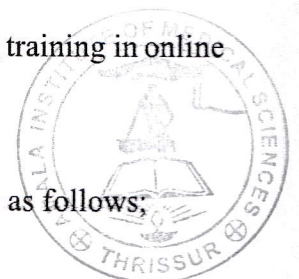
Trainings provided in departmental wise to the staffs helps to improve the staffs capability to provide better service in the department.

DEPATMENTAL TRAINING TOPICS	
Orientation to Department & Co-workers	Organisation's Vision, Mission, Service Standards, etc.
Scope of Service of the Department	Scope of Services
Reporting Structure	Grievance & Disciplinary Procedures
Jobs & Responsibilities	Employee Rights & Responsibilities
Departmental Policies & Work Instructions	Patients' Rights & Responsibilities
Training on Use of Software	Quality Management & NABH
Training on Use of Forms and Registers	Hospital Infection Prevention and Control
Departmental Safe Work Practices	Safety Aspects (Fire Safety, Occupation Safety, Patient Safety and Staff Safety)
Training on Use of Equipment and Modalities	Basic Life Support
Confidentiality of Medical Records & Hospital Data	IT

f) E- LERNING MODULES

MEDLEARN application is utilized as the official platform for delivering training in online mode, ensuring accessibility, consistency and compliance.

The Minimum mandatory hours of training that every staff must attend in a year as follows;



30 CREDIT HOURS OF TRAINING WITHIN 5 YEARS

STAFF NURSES	
CNE	12 Hrs
CTP	6 Hrs
DEPARTMENTAL TRAINING	12 Hrs
ANNUAL TRAINING	2 Hrs
TOTAL	32 Hrs

GENERAL STAFFS	
CTP	12 Hrs
DEPARTMENTAL TRAINING	6 Hrs
ANNUAL TRAINING	2 Hrs
TOTAL	20 Hrs

8.7.4. Description of the process:

Amala Institute of Medical Sciences recognizes the importance of training and development activities for employee motivation, skill enhancement, positive effect on productivity, acceptance to change (new technology) etc. Training and development activities are a part of the overall human resource management activity of the hospital.

The training need of the employee is identified (based on the qualification / skill / experience etc.) based on any of the following:


- a) New employee on fresh appointment.
- b) Horizontal or vertical movement in job.
- c) Change of technology.
- d) Competence assessment by the hospital.
- e) Training based on specific job description.

8.7.5. Training Mode:

Training mode (or action plan) includes any one of the following:

- a) Class room training
- b) Facilitated videos
- c) Formal apprenticeship & mentoring programs
- d) Guided self-study.
- e) External training courses (Hospital sponsored)
- f) Professional conferences / seminars etc.



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- b) Demonstration
- c) Interaction
- d) Verbal

8.7.7. Training calendar:

The training calendar indicates the different training programme planned by the HR department of the hospital for the various class of employee working under its purview. The training calendar is prepared on a yearly basis indicating the training scheduled over the period of one year. However the training calendar indicates the training scheduled by the hospital.

Each class of employees is provided with training facility which includes departmental, job specific training aimed at making them more efficient in their particular work responsibility as well as developmental training aimed at bringing about an overall change in the employee hence prepares them to assume increased responsibilities.

8.7.8. Training Record:

A training attendance sheet (for internal training as well as training imparted by external trainers in the hospital) for each individual class of employee is mentioned where each and every kind of training attended by the employee is recorded along with the trainer. It includes title of the training, trainers, list of trainees with signature. All the training attendance sheet of every staff is entered to system manually and a system generated training record is of staff are kept in their personal record. External training i.e. training attended by the employee outside the hospital environment is recorded in separate external training record register. Employees are required to submit a copy of the certificate awarded by the external agency for the purpose of record keeping in the personal file of the employee.

Training Effectiveness Evaluation:

Measuring the effectiveness of the training attended by the employee is a very important task for ensuring the usefulness of the training and the degree of knowledge it provided to the trainees. For that we conduct pre and post test during the training to evaluate the effectiveness of training.

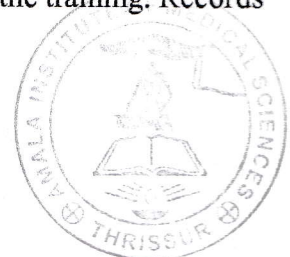
8.7.9. Training Feedback:

Feedback of each training will be collected from the trainer as well as attendees with help of a measuring tool (checklist) for the purposes of measuring the effectiveness of the training. Records Generated:

1. Training Calendar
2. Personal Training Record

8.7.10. Effectiveness of Training

An IET test shall be conducted upon completion of three month probation period to assess the



GRIEVANCE REDRESSAL AND DISCIPLINARY POLICY

1. Purpose

The purpose of this policy is to provide a structured, transparent, and impartial mechanism for employees, students, and trainees of the institution to raise grievances or complaints. It aims to ensure timely, respectful, and confidential resolution of issues related to working conditions, interpersonal matters, or disciplinary concerns. The committee formed under this policy shall be known as the **Grievance Redressal and Disciplinary Committee (GRC)**.

2. Applicability

This policy is applicable to:

- i. All permanent, temporary, part-time, and contractual employees
- ii. All students, interns, and trainees
- iii. Any other individual engaged with the institution in a working or training capacity

3. Definitions

A. Complaint: Any complaint received revealing the identity and incident

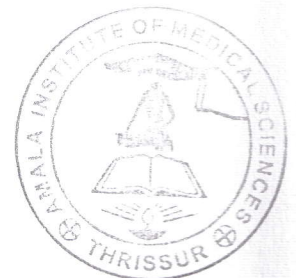
B. Committee: The Grievance Redressal and Disciplinary Committee constituted for this purpose. This also includes any sub-committee formed by the main committee to ensure a fair and impartial inquiry.

C. Complainant: - A person who has a grievance and filing the complaint before the committee

D. Grievance: - A grievance is any concern, complaint, or dispute raised by

an employee which may include but not limited to

- i. Workplace conditions
- ii. Workload or duties
- iii. Discrimination or harassment
- iv. Interpersonal conflicts
- v. Misconducts
- vi. Disciplinary actions
- vii. Salary or benefits
- viii. Abuse of authority
- ix. Any other workplace-related issue



E. Respondent: - A person against whom the complaint is filed by the Complainant

4. Objectives

- i. Foster a healthy, supportive work environment
- ii. Promote open communication and trust
- iii. Ensure fair and unbiased resolution of grievances
- iv. Prevent escalation of workplace conflicts
- v. Maintain discipline within the institution

5. Composition of Grievance Redressal & Disciplinary Committee (GRC)

- i. Chairperson Representative of the Management/Any priest in charge)
- ii. Two staff representatives at least one shall be a female]
- iii. One HR representative
- iv. One member from the legal/ethics cell
- v. One external member (optional)

6. Appellate Authority

In case of dissatisfaction with the GRC decision, an appeal may be submitted within 15 days to the **Appellate Authority**, which consists of:

- i. The Director
- ii. Chief Operating Officer (COO)
- iii. Medical Superintendent

7. Term:

The term of the committee will be 3 years and is renewable from time to time

8. Grievance Procedure

Step 1: Informal Resolution

The employee may first try to resolve the grievance informally with the concerned individual or immediate supervisor.



Step 2: Formal Complaint Submission

If unresolved, a written grievance can be submitted to the GRC through Email or Phone Number assigned for the purpose or dropping the complaints in the boxes designated for the purpose placed near punching stations.

Every complaint should include:

- i. The details of the complainant [Name, Department, Employee ID, Phone Number]
- ii. The details of the respondent [Name, Department, Phone Number, if available]
- iii. Date and place of occurrence
- iv. Nature of the grievance
- v. Any supporting evidence or name of the witness
- vi. Anonymous complaints may be reviewed, but action will be taken only if substantial evidence is available. Furthermore only a aggrieved person is entitled to file a complaint.
- vii. The complaint filed by any other person on behalf of the aggrieved person will be entertained only if there is a genuine reason and the GRC shall record the reason to entertain such complaint.

Step 3: Acknowledgement and Review

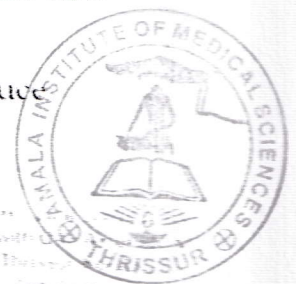
The GRC will acknowledge the grievance within **3 working days** and begin preliminary review.

Step 4: Committee/Sub committee

The Committee has the power to constitute sub-committee or co-opt external/internal experts for impartial inquiry where required.

Step 5: Hearing/Investigation

- i. Within **10 working days**, the GRC will invite the concerned parties for a fair and confidential hearing.
- ii. The denial to appear for the inquiry without a valid reason will amount to misconduct and subject to misconduct
- iii. The person who has a valid reason for non-appearance shall submit an application for adjournment stating the reason for non-appearance.
- ii. The parties can file their statements in written and can produce witnesses to prove their side



Step:6 Resolution and Action

i. Based on findings, the GRC will recommend the management to take appropriate action.

Final resolution will be communicated in writing within **30 days** of complaint receipt.

ii. **False complaints** proven with evidence may invite disciplinary action against the complainant.

Step 6: Appeal

If dissatisfied, the parties may appeal to the higher authority within 7 days of receiving the outcome.

9. Complaint against outsiders

The complaint against any outsiders will be forwarded to the Police Officer with the written consent of the Complainant.

10. Meetings

The committee shall hold meetings once in three months or whenever necessary

11. Confidentiality

All grievances and proceedings will be handled with utmost confidentiality.

12. Record-Keeping

All grievance records will be maintained securely by the Legal department for a minimum of **3 years or as decided by the Management from time to time.**

13. Policy Awareness

- All employees will be informed of this policy at the time of joining.
- Displayed on notice boards.
- Regular sensitization/training may be conducted.

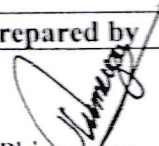
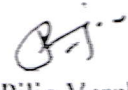
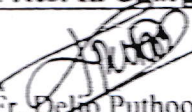
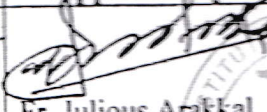
14. Amendments

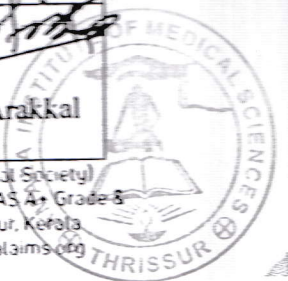
The institution reserves the right to amend this policy to comply with legal updates or internal requirements.

Betsy

DR. BETSY THOMAS

MBBS, DNB, MICOG
PRINCIPAL
AMALA INSTITUTE OF MEDICAL SCIENCES
AMALA NAGAR, THRISSUR-680 555

Prepared by	Verified by	Priest In Charge	Approved By
 Adv. Phinergeev Alapatt	 Adv. Piljo Verghese	 Fr. Deljo Puthoor CMI	 Fr. Julious Arakkal CMI



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8.23.4. Compliance and Enforcement

- a) Supervisory Responsibility
All department/unit heads and designated supervisors shall be responsible for ensuring adherence to this policy within their respective teams or departments.
- b) Inspections
The institution reserves the right to conduct random inspections or audits to verify compliance with this policy. All clinical personnel are obligated to cooperate fully with such inspections.
- c) Disciplinary Measures
Non-compliance with this policy, including repeated failure to wear the name badge or intentional alteration thereof, shall constitute a breach of institutional protocol and may result in disciplinary proceedings in accordance with the Human Resources Disciplinary Policy.

8.23.5. Review

This policy shall be reviewed periodically and may be amended as deemed necessary to reflect organizational requirements and regulatory changes.

8.24. GRIEVANCE REDRESSAL AND DISCIPLINARY POLICY

8.24.1. Purpose

The purpose of this policy is to provide a structured, transparent, and impartial mechanism for employees, students, and trainees of the institution to raise grievances or complaints. It aims to ensure timely, respectful, and confidential resolution of issues related to working conditions, interpersonal matters, or disciplinary concerns. The committee formed under this policy shall be known as the **Grievance Redressal and Disciplinary Committee (GRC)**.

8.24.2. Applicability

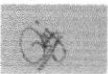


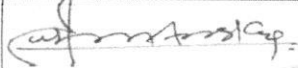
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8.24.3. Definitions

- a) *Complaint: Any complaint received revealing the identity and incident*
- b) *Committee: The Grievance Redressal and Disciplinary Committee constituted for this purpose. This also includes any sub-committee formed by the main committee to ensure a fair and impartial inquiry.*
- c) *Complainant:- A person who has a grievance and filing the complaint before the committee.*
- d) *Grievance: - A grievance is any concern, complaint, or dispute raised by an employee which may include but not limited to*
 - i. Workplace conditions
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- vi. Disciplinary actions
- vii. Salary or benefits
- viii. Abuse of authority
- ix. Any other workplace-related issue

e) Respondent:- A person against whom the complaint is filed by the Complainant

8.24.4. Objectives

- i. Foster a healthy, supportive work environment
- ii. Promote open communication and trust
- iii. Ensure fair and unbiased resolution of grievances
- iv. Prevent escalation of workplace conflicts
- v. Maintain discipline within the institution

8.24.5. Composition of Grievance Redressal & Disciplinary Committee (GRC)

- i. Chairperson Representative of the Management/Any priest in charge)
- ii. Two staff representative [atleast one shall be a female]
- iii. One HR representative
- iv. One member from the legal/ethics cell
- v. One external member (optional)

8.24.6. Appellate Authority

In case of dissatisfaction with the GRC decision, an appeal may be submitted within 15 days to the **Appellate Authority**, which consists of:

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8.24.7. Term:

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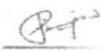

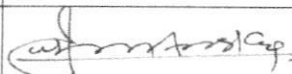
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- iv. Nature of the grievance



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- v. Any supporting evidence or name of the witness
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Step 6 Resolution and Action

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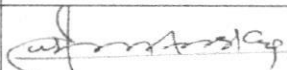
8.24.10. Meetings

The committee shall hold meetings once in three months or whenever necessary

8.24.11. Confidentiality

All grievances and proceedings will be handled with utmost confidentiality.



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8.24.12. Record-Keeping

All grievance records will be maintained securely by the Legal department for a minimum of **3 years or as decided by the Management from time to time.**

8.24.13. Policy Awareness

- All employees will be informed of this policy at the time of joining.
- Displayed on notice boards.
- Regular sensitization/training may be conducted.

8.24.14. Amendments

The institution reserves the right to amend this policy to comply with legal updates or internal requirements.

8.25. THE POLICY AGAINST SEXUAL HARASSMENT AGAINST WOMEN AT WORKPLACE

8.25.1. Objective

To create a safe and respectful work environment for women employees by preventing, prohibiting, and addressing incidents of sexual harassment at the workplace in accordance with The Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013.

8.25.2. Applicability

This policy applies to all women who are employed with or associated with Amala Institute of Medical Sciences in any capacity, including but not limited to:

- Regular, temporary, ad hoc, part-time, and contractual employees
- Consultants, Students, trainees, interns, and volunteers
- patients, and bystanders
- Visitors and vendors
- Events, training programs, camps, Gym, Canteens, Library, outreach activities, and transportation organized by the hospital

8.25.3. Definitions

A) Aggrieved Woman

Refers to a woman of any age, whether employed or not, who alleges to have been subjected to sexual harassment at the workplace.

B) Complaint

Complaint against about the sexual harassment

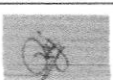
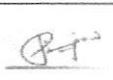
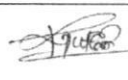
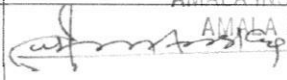
C) Employee

Any person employed at the hospital, whether permanently, temporarily, on contract, interns, trainees, or consultants, with or without remuneration.

D) Internal Complaints Committee (ICC)



Betsy

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Grievance Redressal Committee
Section 9 (c) of the Industrial Disputes Act 1947

- (1) Every industrial establishment employing twenty or more workmen shall have one or more Grievance Redressal Committee for the resolution of disputes arising out of individual grievances.
- (2) The Grievance Redressal Committee shall consist of equal number of members from the employer and the workmen.
- (3) The chairperson of the Grievance Redressal Committee shall be selected from the employer and from among the workmen alternatively on rotation basis every year.
- (4) The total number of members of the Grievance Redressal Committee shall not exceed more than six:
- (5) The number of members shall have equal number of women representative as far as possible.
- (6) The Grievance Redressal Committee may complete its proceedings within thirty days of receipt of a written application by or on behalf of the aggrieved party.
- (7) The workman who is aggrieved of the decision of the Grievance Redressal Committee may prefer an appeal to the employer against the decision of the Grievance Redressal Committee and the employer shall, within one month from the date of receipt of such appeal, dispose of the same and send a copy of his decision to the workman concerned.



Grievance Redressal & Disciplinary Committee

Members

1. **Fr. Deljo Puthoor CMI** - Chairman
2. **Dr. Rennis Davis** - Secretary
3. **Dr. Abel Francis** - Joint Secretary
4. **Adv. Phinergeev Alappatt V.** - Joint Secretary

Appellate Authority

1. **Fr. Julious Arakkal CMI** - Chairman/ Appellate Authority
2. **Dr. Rajesh Anto** - Member
3. **Mr. Saiju C. Edakkalathur** - Member

Mobile Code:

80984

E-Mail ID:

grc@amalaims.org



Internal Complaints Committee (ICC)

Reconstitution of CASH - Committee Against Sexual Harassment

Members

1. **Dr. Sr. Julia (Dr. Anila A P)**
Presiding Officer/Chair Person
2. **Fr. Julious Arakkal CMI**
Vice Chairman
3. **Dr. Sr. Ancine George S. H.**
Secretary
4. **Adv. Phinergeev Alappatt V.**
Joint Secretary

Mobile Code:

80985

E-Mail ID:

icc@amalaims.org



GRIEVANCE REDRESSAL CELL

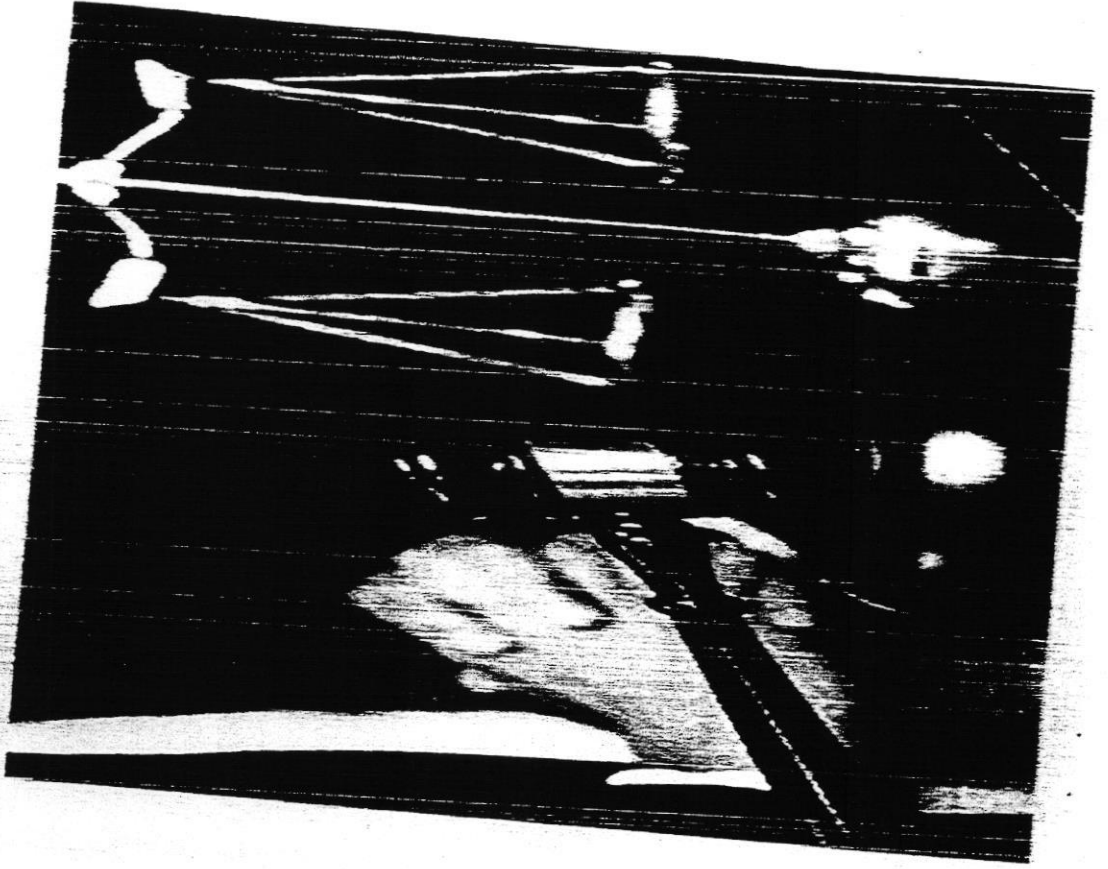


COMPLAINT

- Written complaint
- Name and department
- Details of grievance
- In the concerned boxes installed in different parts of the institution
- Can also send Email



APPEAL



WITHIN 30 DAYS
WITH REASONS
FOR APPEAL

