



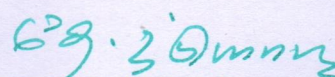
VELAMMAL MEDICAL COLLEGE
HOSPITAL AND RESEARCH INSTITUTE
MADURAI - 625009

6.3.5

Performance Appraisal System

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Prof. T. THIRUNAVUKKARASU, M.D., D.A.,
Dean
Velammal Medical College Hospital
and Research Institute
"Velammal Village"
Madurai-Tuticorin Ring Road
Anuppanadi, Madurai-625 009, T.N.



VELAMMAL MEDICAL COLLEGE HOSPITAL AND RESEARCH INSTITUTE MADURAI - 625009

Performance Appraisal System

A system of performance appraisal is in place for Teaching faculty, administrative support departments, and other non-teaching staff and is carried out annually by the Heads of the Departments, the Dean, and Senior Management. It involves quantitative assessment of staff in various parameters such as compliance with job requirements, the satisfaction of stakeholders, ability to upskill, interaction with peers, and proactive role in accomplishing excellence in services as load out in our institution's vision & mission that determines each employee's increments and promotion. It's an infallible, fair, clear, and non-partisan system of continuous evaluation of staff performance apropos to the intended level. It helps in rewarding excellent performers and training ordinary performers. The main domains under which employees are assessed include:

1. Process efficiency (weightage 50%)
2. Satisfaction of stakeholders (weightage 30%)
3. Personal Growth & Development (weightage 10%)
4. Team performance (weightage 10%)

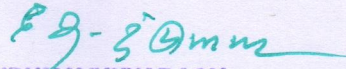
Each department might have slight modifications in each of these domains based on their unique contributions.

Administrative Support Departments:

Administrative support departments such as House Keeping, IT Support, Billing and Finance, Human Resources, Medical Records Department (MRD), Quality Control, Maintenance & Estate Management, etc. provide the much-needed backbone support for the institution. Hence a robust system of performance appraisal is in place to evaluate the strengths and identify the areas for improvement, especially for departmental heads of these pivotal departments that inform their increment and promotions. A few examples of the domains of assessment are:

IT Department:

1. Internal Customer (20%)
2. Process efficiency (20%)
3. IT security (20%)
4. Application development life cycle (20%)
5. Personal Growth & Development (10%)
6. Team performance (10%)


Prof. T. THIRUNAVUKKARASU, M.D., D.A.,
Dean
Velammal Medical College Hospital
and Research Institute
"Velammal Village" 2
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VELAMMAL MEDICAL COLLEGE

HOSPITAL AND RESEARCH INSTITUTE

MADURAI - 625009

Maintenance & Estate Management:

1. Complaint management (30%)
2. Cost Control (25%)
3. Process improvement (25%)
4. Personal Growth & Development (10%)
5. Team performance (10%)

Quality:


1. Co-ordination with NABH (20%)
2. Gap Analysis (20%)
3. Co-ordination of mandatory committees (35%)
4. Personal Growth & Development (10%)
5. Team performance (10%)

Teaching Faculty:

Teaching Faculty of Pre-Clinical, Para-Clinical & Clinical departments are appraised on their Number of academic publications, Contributions to book chapters, and their training & contribution to Faculty development programs. They are also appraised on their subject knowledge as well as Planning, Execution & Quality of their teaching programs, Communication skills, Work Ethics, Problem solving & Leadership skills, Relationship with peers & students & their contributions to Departmental Growth. The Head of the Department provides their feedback which is then reviewed by the Dean.

Non-teaching staff:

Non-teaching, administrative and technical staff have a pivotal role in the proper functioning of the college. A well-organized appraisal form helps to evaluate the strengths and weaknesses of staff. It comprises of details of their punctuality, efficiency, technical adequacy, Initiative, Neatness, Accuracy Leave record, Relations with superiors, colleagues and society Leadership qualities. HODs forward appraisal forms with their remarks to Dean for an eventual decision on increments and or promotions.


Prof. T. THIRUNAVUKKARASU, M.D.,D.A.,
Dean
Velammal Medical College Hospital
and Research Institute
"Velammal Village"
Madurai-Tuticorin Ring Road
Anuppanadi, Madurai-625 009, T.N.



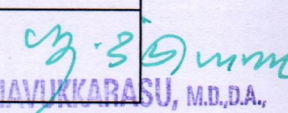
VELAMMAL MEDICAL COLLEGE

HOSPITAL AND RESEARCH INSTITUTE

MADURAI - 625009

Performance Evaluation and Review- Teaching & Non-Teaching Staff

Sl. No.	Name of Staff	Designation	Department
Teaching Staff			
1.	Dr. Nirmal Devi	Professor	Pediatrics
2.	Dr. M. Mariappan	Professor	Radiology
3.	Dr. C.Karpagavel	Professor	General Surgery
4.	Dr. Ramkrinbahar	Senior Resident	Ophthalmology
5.	Dr. J. Vijay Anto	Statistician	Community Medicine
6.	Dr. S. Anu	Professor & HOD	Physiology
7.	Dr. Raj Kishore	Professor & HOD	Pharmacology
8.	Dr. A. Hariharan	Assoc. Prof.	Biochemistry
9.	Dr. R. Ramesh	Professor	General Medicine
10.	Dr. G. Kavitha	Professor	OBG
11.	Dr. Pookamala	Asst. Prof.	ENT
12.	Dr. A. S. Krishnaram	Professor	Dermatology
13.	Dr. Parineeta Suman	Professor	Anatomy
14.	Dr. Ganesan G Ram	Professor	Orthopaedics
15.	Dr. S. B. Rena Rosalind	Assoc. Prof.	Psychiatry
16.	Dr. Janani	Asst. Prof.	Forensic Medicine
17.	Dr. Vithiya	Professor	Microbiology
18.	Dr. C. Jagan	Assoc. Prof.	Pathology
Non-Teaching Staff			
19.	Rajan	Biomedical Incharge	Biomedical
20.	Chenthilnathan	Insurance	Manager
21.	K. Shakira	Tele Communication	Team Leader
22.	K. Rahulkanth	Patient Care	Floor Co-ordinators
23.	K. Divyadharshini	Patient Care	Floor Co-ordinators
24.	A. Ananda Vignesh	Operations	Floor Co-ordinators
25.	M. Breghatha	Patient Care	Floor Co-ordinators
26.	Vinodhini. P	Patient Care	Floor Co-ordinators
27.	P. Saravanan	Operation Manager	Operation Manager
28.	S. Divya	Incharge	Billing
29.	Carunya VirubaiNooli	Radiology	Radiographer
30.	Arul	Manager	IT
31.	S. Madhan Pap	System Analyst	Information Technology


 Dr. S. Madhan Pap, M.D., D.A.,
 Dean
 Velammal Medical College Hospital
 and Research Institute
 "Velammal Village"
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 Anuppanadi, Madurai-625 009, T.N.



VELAMMAL MEDICAL COLLEGE
HOSPITAL AND RESEARCH INSTITUTE
MADURAI - 625009

32.	Senthilkumar	Project Engineer Civil	Project & Maintenance
33.	K. Nithya	AFC	Accounts & Finance

69.29mm
Prof. T. THIRUNAVUKKARASU, M.D.,D.A.,
Dean
Velammal Medical College Hospital
and Research Institute
"Velammal Village"
Madurai-Tuticorin Ring Road
Anuppanadi, Madurai-625 009, T.N.

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>Dr. T. Nirmala Devi</u>	Designation: <u>Professor</u>
Appraiser Name and Designation: <u>DR. T. NIRMALA DEVI</u> <u>DR. GANESH PRABHU</u> <u>PROFESSOR & HOD</u>	Reviewer Name and Designation: <u>DR. THIRUNA VUKKASU,</u> <u>DEAN</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
			✓	-	-

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. 5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	4	4
2. Planning and execution of the work	5	5
3. Quality of Work out put	4	5
4. Communication Skills	5	4
5. Work Ethic / Habits	5	4
6. Judgement / Problem Solving/ Decision Making	4	5
7. Leadership / Personnel Management	5	4
8. Relationship with Patients / Students / Peers	4	5
9. Use of Materials & Equipments	4	5
10. Contribution towards department growth	5	4
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>Dr. M. Mariappan</u>	Designation: <u>Professor</u>
Appraiser Name and Designation <u>Dr. M. MARIAPPAN</u>	Reviewer Name and Designation: <u>Dr. T. THIRUNAVUKKARASU.</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
			<u>✓</u>	<u>✓</u>	<u>-</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>5</u>	<u>4</u>
2. Planning and execution of the work	<u>4</u>	<u>5</u>
3. Quality of Work out put	<u>4</u>	<u>5</u>
4. Communication Skills	<u>4</u>	<u>5</u>
5. Work Ethic / Habits	<u>4</u>	<u>5</u>
6. Judgement / Problem Solving/ Decision Making	<u>5</u>	<u>4</u>
7. Leadership / Personnel Management	<u>3</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>5</u>
9. Use of Materials & Equipments	<u>5</u>	<u>5</u>
10. Contribution towards department growth	<u>5</u>	<u>5</u>
Total Score		

Appraiser Comments:	Reviewer Comments: <u>Highly skilled in Diagnostics services.</u>
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Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>DR. C. KARPAGIAVEL</u>	Designation: <u>PROFESSOR</u>
Appraiser Name and Designation <u>DR. S.R. DHAMOT HARLAN</u>	Reviewer Name and Designation: <u>DR. T. THIRUNAVUKKARASU</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
			<u>✓</u>	<u>✓</u>	<u>✓</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>4</u>	<u>4</u>
2. Planning and execution of the work	<u>4</u>	<u>5</u>
3. Quality of Work out put	<u>4</u>	<u>4</u>
4. Communication Skills	<u>4</u>	<u>4</u>
5. Work Ethic / Habits	<u>4</u>	<u>5</u>
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	<u>5</u>
7. Leadership / Personnel Management	<u>4</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>4</u>
9. Use of Materials & Equipments	<u>4</u>	<u>4</u>
10. Contribution towards department growth	<u>4</u>	<u>5</u>
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>Dr. Ramkiubahal</u>	Designation: <u>Senior Resident</u>
Appraiser Name and Designation <u>Dr. MELVIN LEO</u>	Reviewer Name and Designation: <u>Dr. T. THIRUNAVUKARASU</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
			<u>✓</u>	<u>-</u>	<u>-</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>5</u>	<u>5</u>
2. Planning and execution of the work	<u>4</u>	<u>4</u>
3. Quality of Work out put	<u>4</u>	<u>4</u>
4. Communication Skills	<u>5</u>	<u>4</u>
5. Work Ethic / Habits	<u>4</u>	<u>5</u>
6. Judgement / Problem Solving/ Decision Making	<u>5</u>	<u>5</u>
7. Leadership / Personnel Management	<u>4</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>5</u>
9. Use of Materials & Equipments	<u>4</u>	<u>5</u>
10. Contribution towards department growth	<u>4</u>	<u>4</u>
Total Score		<u>4</u>

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION - 2021-22

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: _____

Employee Name: J. VIJAY ANTO	Designation: Statistician
Appraiser Name and Designation Dr. Samir Bels, Prof. & Head, Com. Med.	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
4	-	2		1	1

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

Predictive Modeling

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	4	5
2. Planning and execution of the work	4	5
3. Quality of Work out put	4	5
4. Communication Skills	4	5
5. Work Ethic / Habits	4	5
6. Judgement / Problem Solving/ Decision Making	3	4
7. Leadership / Personnel Management	3	3
8. Relationship with Patients / Students / Peers	4	4
9. Use of Materials & Equipments	4	4
10. Contribution towards department growth	4	4
Total Score		44

Appraiser Comments: Excellent performance	Reviewer Comments:
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J. Vijay Anto
Employee Signature

[Signature]
Appraiser Signature

[Signature]
Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: 2021-22

Employee Name: <u>Dr. S. Anu</u>	Designation: <u>professor & Head</u>
Appraiser Name and Designation	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>6</u>	<u>—</u>		<u>4</u>	<u>1</u>	<u>1</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

Under the guidance, PGI received Best paper award
Dr. Ametha – received young research scholar award

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>5</u>	
2. Planning and execution of the work	<u>5</u>	
3. Quality of Work out put	<u>5</u>	
4. Communication Skills	<u>5</u>	
5. Work Ethic / Habits	<u>4</u>	
6. Judgement / Problem Solving/ Decision Making	<u>5</u>	
7. Leadership / Personnel Management	<u>5</u>	
8. Relationship with Patients / Students / Peers	<u>5</u>	
9. Use of Materials & Equipments	<u>5</u>	
10. Contribution towards department growth	<u>5</u>	
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

(Year 2021-2022)

VMCH&RI/HRD/PEF/001

PERFORMANCE EVALUATION (PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: _____

Employee Name: DR RAJ KISHORE MAHATO	Designation: PROF & HOD
Appraiser Name and Designation	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
25	PHARMACOLOGY MANUALS	3	5	3	2

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any): **- Basic course in Research Methodology by ICMR-NIE**

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	5	
2. Planning and execution of the work	4	
3. Quality of Work out put	4	
4. Communication Skills	4	
5. Work Ethic / Habits	4	
6. Judgement / Problem Solving/ Decision Making	4	
7. Leadership / Personnel Management	4	
8. Relationship with Patients / Students / Peers	4	
9. Use of Materials & Equipments	5	
10. Contribution towards department growth	5	
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: 22.03.22Appraisal Type: Annual / _____Period: 2021 - 22

Employee Name: <u>Dr. A. HARIHARAN</u>	Designation: <u>ASSOCIATE PROFESSOR</u>
Appraiser Name and Designation	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>2</u>	<u>-</u>	<u>1</u>	<u>11</u>	<u>1</u>	<u>-</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any): -

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>4</u>	
2. Planning and execution of the work	<u>4</u>	
3. Quality of Work out put	<u>4</u>	
4. Communication Skills	<u>4</u>	
5. Work Ethic / Habits	<u>4</u>	
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	
7. Leadership / Personnel Management	<u>3</u>	
8. Relationship with Patients / Students / Peers	<u>4</u>	
9. Use of Materials & Equipments	<u>4</u>	
10. Contribution towards department growth	<u>4</u>	
Total Score		

Appraiser Comments: <u>Possesses very good communication & teaching skills. guides the under-graduate well. Motivates students to adopt innovative learning skills</u>	Reviewer Comments:
--	-------------------------------

[Signature]
Employee Signature

[Signature]
Appraiser Signature

[Signature]
Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: 2021 - 2022

Employee Name: <u>DR. R. Ramesh</u>	Designation: <u>Professor</u>
Appraiser Name and Designation <u>A. Suresh</u>	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>4</u>	<u>4</u>
2. Planning and execution of the work	<u>5</u>	<u>5</u>
3. Quality of Work out put	<u>5</u>	<u>5</u>
4. Communication Skills	<u>5</u>	<u>5</u>
5. Work Ethic / Habits	<u>5</u>	<u>5</u>
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	<u>4</u>
7. Leadership / Personnel Management	<u>4</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>5</u>	<u>5</u>
9. Use of Materials & Equipments	<u>4</u>	<u>4</u>
10. Contribution towards department growth	<u>4</u>	<u>4</u>
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: 2021 - 2022

Employee Name: Dr. G. Kavitha	Designation: Professor
Appraiser Name and Designation Dr. K.S. CHITRA Prof K HOD O.K.G	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
—	—	—	—	—	—

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.), for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. 5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	4	5
2. Planning and execution of the work	4	5
3. Quality of Work out put	4	5
4. Communication Skills	5	5
5. Work Ethic / Habits	4	4
6. Judgement / Problem Solving/ Decision Making	4	4
7. Leadership / Personnel Management	5	5
8. Relationship with Patients / Students / Peers	5	5
9. Use of Materials & Equipments	4	5
10. Contribution towards department growth	4	4
Total Score		4

Appraiser Comments: Sincere / hardworking Person. Good patient care. Kavitha	Reviewer Comments:
--	---------------------------

Employee Signature

Appraiser Signature

Reviewer Signature

K.S. CHITRA, MD., DGO., DNB.
 Professor & HOD
 Dept. of OBS & Gyn
 Velammal Medical College Hospital
 Madurai-625 009

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: 2021 - 2022

Employee Name: <u>Dr. S. Pookamala</u>	Designation: <u>Asst Prof</u>
Appraiser Name and Designation <u>Prof. P. Rajasekaran, HOD-ENT</u>	Reviewer Name and Designation: <u>Prof. Thirunavukarasu, Dean</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>3</u>	<u>1</u>	<u>2</u>	<u>5</u>	<u>2</u>	<u>-</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

—

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>4</u>	<u>5</u>
2. Planning and execution of the work	<u>4</u>	<u>5</u>
3. Quality of Work out put	<u>4</u>	<u>5</u>
4. Communication Skills	<u>4</u>	<u>5</u>
5. Work Ethic / Habits	<u>4</u>	<u>5</u>
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	<u>5</u>
7. Leadership / Personnel Management	<u>4</u>	<u>5</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>5</u>
9. Use of Materials & Equipments	<u>4</u>	<u>5</u>
10. Contribution towards department growth	<u>4</u>	<u>5</u>
Total Score		<u>50</u>

Appraiser Comments: <u>Ramya Subramanian</u> <u>12.7.23</u>	Reviewer Comments:
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Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: 2021-2022

Employee Name: DR. A.S. Krishnaram	Designation: Professor
Appraiser Name and Designation: A.S. Krishnaram	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
25/7/21	Review	✓	✓ attached the certificate		✓

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):
 PG's contributed to presentation of Academic work for PGs in Conferences. 3rd prize in Quiz in Cuttack
 1st prize in Poster Presentation in mid-dermatology

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. 5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	5	4
2. Planning and execution of the work	4	5
3. Quality of Work out put	4	5
4. Communication Skills	4	5
5. Work Ethic / Habits	5	4
6. Judgement / Problem Solving/ Decision Making	5	4
7. Leadership / Personnel Management	4	4
8. Relationship with Patients / Students / Peers	3	3
9. Use of Materials & Equipments	4	4
10. Contribution towards department growth	4	5
Total Score		

Appraiser Comments: ✓ Ethical approach ✓ Clinical Dermatology ✓ Dermatopathology ✓ collection of academic slides Digital per since.	Reviewer Comments:
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Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: 07.06.2022Appraisal Type: Annual / AnnualPeriod: 2021 - 2022

Employee Name: <u>Dr. Parineeta Suman</u>	Designation: <u>Professor</u>
Appraiser Name and Designation <u>DR. S. RAJA SANKAR</u>	Reviewer Name and Designation: <u>DR. Sumana R. Prof & HOD</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>1</u>	<u>—</u>	<u>Certificate Course - 1</u> <u>Faculty Dev. Prog - 2</u>	<u>International - 1</u> <u>National conf. - 3</u>	<u>Conf. - 4</u> <u>CME - 2</u>	<u>—</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop / Seminar / Conference - required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

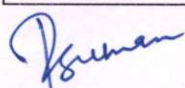
Specific contribution / achievements (if any):

Basic course in Biomedical Research
Revised Basic course workshop
curriculum implementation support program

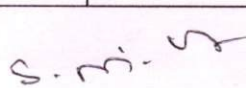
INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. 5 - Out Standing, 4 - Very Good, 3 - Good, 2 - Average, 1 - Unsatisfactory

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>5</u>	<u>4</u>
2. Planning and execution of the work	<u>4</u>	<u>5</u>
3. Quality of Work out put	<u>4</u>	<u>4</u>
4. Communication Skills	<u>4</u>	<u>4</u>
5. Work Ethic / Habits	<u>4</u>	<u>4</u>
6. Judgement / Problem Solving / Decision Making	<u>4</u>	<u>4</u>
7. Leadership / Personnel Management	<u>4</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>4</u>
9. Use of Materials & Equipments	<u>5</u>	<u>4</u>
10. Contribution towards department growth	<u>5</u>	<u>5</u>
Total Score	<u>43</u>	<u>42</u>

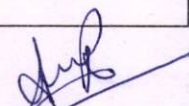
Appraiser Comments: <u>Sincere faculty</u>	Reviewer Comments: <u>Dedicated faculty</u>
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Employee Signature



Appraiser Signature



Reviewer Signature

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / _____

Period: 2021-2022

Employee Name: <u>Dr. Ganes Babu Ram</u>	Designation: <u>Professor.</u>
Appraiser Name and Designation	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>1</u>	<u>1</u>		<u>1</u>	<u>1</u>	<u>—</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRaiser'S RATING
1. Subject Knowledge	<u>5</u>	<u>4</u>
2. Planning and execution of the work	<u>5</u>	<u>4</u>
3. Quality of Work out put	<u>5</u>	<u>5</u>
4. Communication Skills	<u>4</u>	<u>5</u>
5. Work Ethic / Habits	<u>4</u>	<u>4</u>
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	<u>4</u>
7. Leadership / Personnel Management	<u>5</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>5</u>	<u>5</u>
9. Use of Materials & Equipments	<u>4</u>	<u>4</u>
10. Contribution towards department growth	<u>4</u>	<u>4</u>
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION
(PRE, PARA & CLINICAL FACULTY)

Date: 10/07/22

Appraisal Type: Annual / _____

Period: 2021-2022

Employee Name: <u>Dr. S. B. Rena Rosalind</u>	Designation: <u>Asso. Prof</u>
Appraiser Name and Designation	Reviewer Name and Designation:

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>2</u>			<u>2</u>		

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 - Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>5</u>	<u>5</u>
2. Planning and execution of the work	<u>4</u>	<u>4</u>
3. Quality of Work out put	<u>4</u>	<u>5</u>
4. Communication Skills	<u>4</u>	<u>5</u>
5. Work Ethic / Habits	<u>5</u>	<u>4</u>
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	<u>5</u>
7. Leadership / Personnel Management	<u>5</u>	<u>5</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>4</u>
9. Use of Materials & Equipments	<u>4</u>	<u>4</u>
10. Contribution towards department growth	<u>5</u>	<u>5</u>
Total Score		

Appraiser Comments:	Reviewer Comments:

Employee Signature

Appraiser Signature

Reviewer Signature

PERFORMANCE EVALUATION
(PRE, PARA & CLINICAL FACULTY)

Date: 07/06/2023Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>Dr. A. JANANI</u>	Designation: <u>ASSISTANT PROFESSOR</u>
Appraiser Name and Designation: <u>Dr. J. JAMES RAJESH - ASSOCIATE PROFESSOR, DEPT. OF. FORENSIC MEDICINE</u>	Reviewer Name and Designation: <u>Dr. MAHESH KRISHNA B.G., PROFESSOR & HOD, DEPT. OF. FORENSIC MEDICINE</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
1	-	-	✓	-	-

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. 5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	5	5
2. Planning and execution of the work	5	4
3. Quality of Work out put	5	5
4. Communication Skills	5	5
5. Work Ethic / Habits	5	5
6. Judgement / Problem Solving/ Decision Making	5	4
7. Leadership / Personnel Management	5	5
8. Relationship with Patients / Students / Peers	5	5
9. Use of Materials & Equipments	5	5
10. Contribution towards department growth	5	5
Total Score	50	48

Appraiser Comments:

- she is strong in academics.

Reviewer Comments:

Faculty is knowledgeable, Dependable, Student centric academician. She is an asset for the department.

A. Janani 07/06/23
Employee Signature

Appraiser Signature

Dr. Mahesh
Reviewer Signature

PERFORMANCE EVALUATION
(PRE, PARA & CLINICAL FACULTY)

Date: 07/06/2022Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>Dr. G. VITHIYA</u>	Designation: <u>PROFESSOR</u>
Appraiser Name and Designation <u>DR. RAMESH PROFESSOR MICROBIOLOGY</u>	Reviewer Name and Designation: <u>DR. T. RATENDREN PROFESSOR + 400, MICROBIOLOGY</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
<u>6</u>	<u>-</u>	<u>1</u>	<u>✓</u>	<u>-</u>	<u>-</u>

*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.,) for same.

Specific contribution / achievements (if any):

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. **5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory**

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	<u>4</u>	<u>4</u>
2. Planning and execution of the work	<u>4</u>	<u>4</u>
3. Quality of Work out put	<u>3</u>	<u>4</u>
4. Communication Skills	<u>3</u>	<u>4</u>
5. Work Ethic / Habits	<u>4</u>	<u>5</u>
6. Judgement / Problem Solving/ Decision Making	<u>4</u>	<u>5</u>
7. Leadership / Personnel Management	<u>3</u>	<u>4</u>
8. Relationship with Patients / Students / Peers	<u>4</u>	<u>5</u>
9. Use of Materials & Equipments	<u>5</u>	<u>4</u>
10. Contribution towards department growth	<u>4</u>	<u>5</u>
Total Score		

Appraiser Comments:	Reviewer Comments: <u>Faculty is sincere and competent. Helpful to Promote innovative ideas</u>
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Employee Signature Dr. G. VithiyaAppraiser Signature [Signature]Reviewer Signature [Signature]

PERFORMANCE EVALUATION

(PRE, PARA & CLINICAL FACULTY)

Date: _____

Appraisal Type: Annual / ANNUALPeriod: 2021-2022

Employee Name: <u>DR. CJAGAN</u>	Designation: <u>ASSOCIATE PROFESSOR (PATHOLOGY)</u>
Appraiser Name and Designation: <u>Dr. R. LAVANYA</u>	Reviewer Name and Designation: <u>Dr. YEGU MOTHU. K., PROFESSOR + HOD.</u>

Number of Publications	Book Chapter	Training Program Attended	Basic course Workshop / Seminar / Conferences		
			Participated	Presented	Organized
5	-	1. (2021-22) 2. (2022-23)	✓	-	-

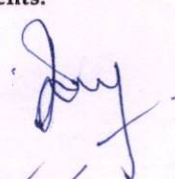
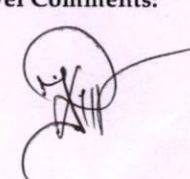
*ENCL: 1. Supportive documents are required for considering Publication / Book chapter / research article, which has submitted in the last one year are eligible. 2. Training / Basic course Workshop/ Seminar / Conference – required to submit the documents (Certificate of participation / Course Invitation / brochure, etc.), for same.

Specific contribution / achievements (if any):

~~None~~ Secured 97% in Basic course in Bronchodilation Research online certification by NPTEL

INSTRUCTIONS: Assign a number for each rating within the scale and write that number in the corresponding box. Points will be totalled for overall performance score. 5 – Out Standing, 4 – Very Good, 3 – Good, 2 – Average, 1 – Unsatisfactory

APPRAISAL DESCRIPTION	SELF RATING	APPRAISER'S RATING
1. Subject Knowledge	3	4
2. Planning and execution of the work	4	5
3. Quality of Work out put	4	5
4. Communication Skills	3	4
5. Work Ethic / Habits	3	4
6. Judgement / Problem Solving/ Decision Making	4	4
7. Leadership / Personnel Management	3	4
8. Relationship with Patients / Students / Peers	4	4
9. Use of Materials & Equipments	3	3
10. Contribution towards department growth	4	4
Total Score	35	

Appraiser Comments:	Reviewer Comments:
	

Employee Signature

Appraiser Signature

Reviewer Signature

Performance Evaluation and Review .

Bio Medical	Rating scale:
Month :	5 Excellent (consistently exceeds standards)
Name :Rajan	4 Outstanding (frequently exceeds standards)
Department:Bio Medical	3 Satisfactory (generally meets standards)
Designation:Incharge	2 Needs improvement (frequently fails to meet standards)
DOJ:12-12-2014	1 Unacceptable (fails to meet standards)

50%
Team is made
on maintenance
work.

50% opportunities
are there to focus on
- M/C utilization
- M/C cost analysis
- productivity analysis.

Assets Management (weightage 45%)

	Target	Achieved	%	Score
New equipments procured and installed	70	70	100	
New equipment & asset installation Lead time projected vs. Actual	70	70	100	
1 Average Monthly Biomedical issues(till date trend)	181	171	94.4	
Repair & Maintenance Cost	Spares and Repair cost	Rs.323200/month		
	AMC/CMC Cost	Rs30287,220/Yr		

Process Improvements (weightage 35%)

2	Routine Calibration of all instruments & machineries(till date trend)	1900	1765	92.8
	Maintenance schedules (Monthly)Less than 10 % Deviation(till date trend)	200	195	97.5
	Emergency complaints handling with in 1 hour (Should be documented and presented)	2/Month		
	More than 10 days complaints (In house) (till date trend)	5 Equipment/Month		

Technical performance (Weightage 80%)

Machine utilization -Name of the machine	Numbers Available	Average Repair time	Up time	Bench Mark Time	Actual time	%
		(median of the difference between the response time and the completion time of all breakdowns occurring in one particular month.)	(Available time – Breakdown time)/Available time) * 100			
Anesthesia Ventilator	26	0.04	$((720-0.04)/720)*100$		1.2/month	99
ABG Machine	4	0.75	$((720-0.75)/720)*100$		3/month	99
Defibrillator	43	0.12	$((720-0.12)/720)*100$		5/month	99.8
Hemodialysis Machine	55	0.13	$((720-0.13)/720)*100$		7/month	99

	IABP Machine	2	0.2	$((720-0.2)/720)*100$	95	0.04/month	96
	Steam Sterilizer	7	10.14	$((720-10.14)/720)*100$	95	71/month	98.5
	Heater/Cooler Unit	3	-	-	95	-	-
	Ventilator	67	0.13	$((720-0.13)/720)*100$	95	9/month	99
	CT Scan	2	2.02	$((720-2.02)/720)*100$	95	4.04/Month	99
4					Actual	Completed	%
	Planned Preventive maintenance (PPM) Completion Rate:				200	195	97.5
	Delinquent Work Order:				10	9	90
5	Unavailability of spares of older equipment				2/month		
	Delay in repair from the vendors' side						
6	Number of incident reports per month				No of Incidents		
	Battery failure				4/month		
	Accessory failure (including supplies)				2/month		
	Failure related to network				Nil		
	Failure Induced by service (i.e. caused by a technical intervention not caused by normal wear and tear)				Nil		
People Growth and Development (weightage 10%)							
	Attrition rate: retaining 75% of new joiners at least for 1 year						100.00%
	Retention : Retention of competent staff						100.00%
	staff quality- >90% of the department should be manned by staff who know all mandatory processes and are multi skilled						100.00%
	Assessment score for Staff Skills - Mean score more than 80 %						
Team Performance (weightage 10%)							
7	No of complaints against your team member						Nil
	No of Appreciation from received by your team member from User						Nil
	Major work related Incidents- No of incidents						Nil
	Corrective Action taken or not						
	Repeted incedents happened if any						Nil
	No of Habitual Late commers in your team						2
	No of employees found leave with out information						Nil
	No of employees found not following Grooming standards						Nil
	No. of employees Oral warning given (if any)						Nil
	No. of Written Memo given to employees (if any)						Nil

Overall performance rating: _____

Employee Signature: _____

Date: _____

Reviewer Signature _____

Date: _____

HOD Signature: _____

Date _____

Rajan

- ① He has clear understanding on his roles and responsibilities
- ② He has supportive documents/ records
- ③ He is focusing on doing his job better & more.
- 4) The data available with him is not sufficient for measuring efficiency of his team work.

Improvements Area

- ① There is a wide scope for analysing machine utilisation and recommend for opportunities to increase efficiency
- ② Cost-control on AMC / repair / preventive can be analysed and suitable recommend can be made for measuring efficiency
- ③ A trend analysis report can be made to measure up time / downtime

g/v

2021- Biomedical Issues Month wise

Sl.No.	Month	No. of Calls
1	January	179
2	February	235
3	March	195
4	April	159
5	May	84
6	June	139
7	July	212
8	August	160
9	September	198
10	October	201
11	November	170
12	December	251



VELAMMAL
HOSPITAL
THE HEALING FORCE

LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

GENERAL INFORMATION

NAME:	A. RAJAN	EMP. NO:	VH 1311
DESIGNATION:	BIOMEDICAL INCHARGE	DEPARTMENT:	BIOMEDICAL ENGR.
TOTAL EXPERIENCE:	20 years.	EXPERIENCE IN VELAMMAL:	7 years.
REPORTING TO:	CAO	NO. OF REPORTEES UNDER ME:	7
E-MAIL:	bma@velammalmedicalcollege.edu.in	CONTACT NO.:	8940512100
DATE:		VENUE:	



LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

3) WHAT ARE THE 3 THINGS YOU DID TO ENHANCE YOUR TECHNICAL SKILLS?
உங்களின் தொழில்நுட்ப/வேலைதிறன்களை மேம்படுத்த நீங்கள் செய்த 3 விஷயங்கள் யாவை?

- 1) Read More Technical Mannuals for equipment Handling & Troubleshooting.
- 2) Clarify the technical doubt due to Any Breakdown (or) fault By myself and other Hospital Incharges.
- 3) Improved Typing speed and Documenting knowledge by Online typing Simulation Software.

4) WHAT ARE THE 3 THINGS YOU MADE BETTER IN YOUR DEPARTMENT COMPARED TO THE PREVIOUS YEARS?
முந்தைய ஆண்டுகளுடன் ஒப்பிடும்போது, உங்கள் துறையில் நீங்கள் சிறப்பாகச் செய்த 3 விஷயங்கள் யாவை?

- 1) Reduced critical care down time by Verifying the individual preventive maintenance deviations.
- 2) Every Week conducted the Technical Training for Biomedical Staffs.
- 3) Provide the Support to Allied health science college for Newly Introduced courses.

LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

- 7) WHAT ARE THE 3 THINGS YOU MADE SIMPLER IN YOUR DEPARTMENT COMPARED TO THE PREVIOUS PRACTISES WHICH REDUCED TIME/EFFORT/MONEY/RESOURCES?
முந்தைய நடைமுறைகளுடன் ஒப்பிடும்போது, உங்கள் துறையில் நீங்கள் எளிமையாகச் செய்த 3 விஷயங்கள் என்ன, அவை தேவைப்படவேண்டிய நேரம்/முயற்சி/பணம்/வளங்கள் ஆகியவற்றைக் குறைத்திருக்கலாம்?

- 1). Computerized Job order analysis for reducing repeated complaints.
- 2). Instruct the team members to follow the 5S - Principle.
- 3) take 100% effort to explore the space in Local.

- 8) WHAT ARE THE MONITORING MECHANISMS YOU HAVE EVOLVED IN YOUR DEPARTMENT TO BRING ACCOUNTABILITY IN THE DEPARTMENT?
துறையின் பொறுப்பைக் கொண்டு வர உங்கள் துறையில் நீங்கள் உருவாக்கிய கண்காணிப்பு நெறிமுறைகள் என்ன?

- 1) To Analyze the Team members, instruct them to follow the Time Sheet regularly.
- 2) Performed monthly visit to Every department and collect the user feedback to improve the Team members performance.
- 3) Monthly once checked the individual Documents to reduce PH deviation and Documental Errors.

LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

11) WHAT ARE THE WORKS YOU DID OUTSIDE OF YOUR JD, WHICH HELPED THE ORGANISATION? (WALKED EXTRA MILE)
நிறுவனத்திற்கு உதவிய உங்கள் JOB DESCRIPTION -க்கு வெளியே நீங்கள் செய்த பணிகள் என்ன?

- 1) Handled the classes for 4 Branches in AHS College.
- 2) Provide the technical support for Oxygen plant project.
- 3) Taken over the RO plant Maintenance for dialysis.
- 4) Take an additional responsibility to Surgical instruments Management.

12) WHAT ARE THE 3 THINGS YOU LEARNT NEW IN THIS YEAR TO DEVELOP YOUR TECHNICAL/FUNCTIONAL HARD SKILLS & NON TECHNICAL SOFT SKILLS?
உங்கள் தொழில்நுட்ப மற்றும் தொழில் நுட்பமற்ற மென்திறன்களை மேம்படுத்த இந்த ஆண்டில் நீங்கள் புதிதாகக் கற்றுக் கொண்ட 3 விஷயங்கள் யாவை?

- 1) Attended the NABH Training and complete the CAHO Examination
- 2) Attended the "Medical" Expo to develop the equipment updation.
- 3) Attended the Motivational Training and Meditation class



LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

15) WHAT ARE THE 3 THINGS YOU COULD HAVE DONE BETTER IN THE LAST 1 YEAR AS A LEADER OF THE DEPARTMENT?
துறையின் தலைவராக கடந்த 1 வருடத்தில் நீங்கள் சிறப்பாகச் செய்திருக்க வேண்டிய 3 விஷயங்கள் யாவை?

- 1) Improve the Internal training.
- 2) Improve the Spare management

16) WHAT ARE THE 3 THINGS YOU DID TO EMPOWER YOUR TEAM MEMBERS IN YOUR DEPARTMENT?
உங்கள் பிரிவில் உள்ள உங்கள் குழு உறுப்பினர்களை வலுப்படுத்த நீங்கள் செய்த 3 விஷயங்கள் யாவை?

- 1) provide the space to individual for decision making.
- 2) Given the enough time to perform the task without guidance.
- 3) Allot New and different task for team members.



LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

19) WHAT ARE THE 3 MAJOR QUANTITATIVE RESULTS YOU ACHIEVED IN THE LAST 1 YEAR?
கடந்த 1 வருடத்தில் நீங்கள் அடைந்த 3 முக்கிய அளவிடக் கூடிய சாதனைகள் என்ன?

- ⇒ Completed the Preventive maintenance as per schedule.
- ⇒ Arrange and co-ordinate the External Calibration company to calibrate the equipment per schedule.
- ⇒ Reduced equipment downtime by spare management.
- ⇒ Reduced the cost of service by AMC & CMC followups.

20) WHAT ARE THE 3 MAJOR QUALITATIVE RESULTS YOU ACHIEVED IN THE LAST 1 YEAR?
கடந்த 1 வருடத்தில் நீங்கள் அடைந்த 3 பெரிய அளவிட முடியாத சாதனைகள் என்ன?

- 1) Provide the technical support for medical equipment procurement.

LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

23) WHAT ARE THE 3 THINGS YOU WANT TO DEVELOP IN YOUR TEAM MEMBERS IN THE NEXT 1 YEAR?
அடுத்த 1 வருடத்தில் உங்கள் குழு உறுப்பினர்களில் நீங்கள் உருவாக்க விரும்பும் 3 விஷயங்கள் யாவை?

- 1) Need to Strengthen the repair and Service Skills.
- 2). Need to Train the team members to Troubleshoot the All type of equipments.
- 3). Train them to plan the work in systematically. to Increase the productivity (Result) for each Work.

24) WHAT ARE THE 3 THINGS YOU PLAN TO OPTIMISE & REDUCE THE WASTAGE OF TIME/MONEY/EFFORT IN YOUR DEPARTMENT IN THE NEXT 1 YEAR - SMART WORK?
அடுத்த 1 வருடத்தில் உங்கள்துறையில் நேரம்/பணம்/முயற்சியின் விரயத்தை மேம்படுத்தவும் குறைக்கவும் நீங்கள் திட்டமிட்டுள்ள 3 விஷயங்கள் - ஸ்மார்ட்-வர்க் என்ன?

- 1) Going to monitor the equipment utilization.
- 2). Going to conduct the Job order Review meeting
- 3). Improvise the spare Sources.

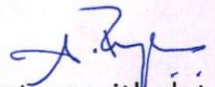
LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

25) WHAT ARE THE 3 QUANTITATIVE DEPARTMENT GOALS YOU HAVE FOR THE NEXT 1 YEAR TO ACHIEVE?
அடுத்த 1 வருடத்தில் நீங்கள் அடைய வேண்டிய 3 அளவிடக்கூடிய துறை இலக்குகள் என்ன?

- 1) Increase the cost cutting.
- 2) Raise the more Number of Incident reports to reduce the mishandling, Expenses. and Increase the patient and user safety.
- 3) Achieve the 100% staff retention.

Declaration:

I hereby declare that all the above responses are true to the best of my knowledge. And I am aware that the same will be utilized for my performance appraisal assessment for the year 2021-22.


Signature with date

Performance Review and Planning				
Insurance Business		Rating scale:		
Month :		5 Excellent (consistently exceeds standards)		
Name : Dr. Chenthilnathan		4 Outstanding (frequently exceeds standards)		
Department: Insurance		3 Satisfactory (generally meets standards)		
Designation: Manager		2 Needs improvement (frequently fails to meet standards)		
DOJ: 26.10.2017		1 Unacceptable (fails to meet standards)		
Insurance Business - (weightage 20%)		Target	Achieved	%
1	No of TPA/ Insurance - in active	Renewed		5
	No of new TPA's/ Insurance - MOU signed			
	No of TPA's/ Insurance - MOU renewed			
	No of TN Govt/ Central Govt schemes are in active			
	No of TN Govt/ Central Govt schemes - MOU signed or renewed			
Revenue and volume Analysis (weightage 20%)				
2	Case Volume of private insurance - Avg per Month			5
	Case Volume of Scheme patients - Avg per Month			
	Case Volume of CM Scheme patients - Avg per Month			
	Revenue from TPA/ Insurance Business	2 L		
	Revenue from Govt Schemes	1 SPS		
	Revenue from CM schemes	1.5 CM		
Operational Efficiency - Insurance vertical (weightage 25%)				
3	Days in Receivables Outstanding (DRO)-Private Insurance	2 months		5
	Days in Receivables Outstanding (DRO)-Schemes	↓ 1 month		
	Days in Receivables Outstanding (DRO)CM scheme			
	Receivables Outstanding Over 120 Days (amount)			
	No of claims denied due to eligibility oversight.	Nil.		
	Revenue lose due to eligibility oversight	Nil.		
	No of bills dis allowance bills			
	Revenue lose due to disallowances	Pri - 0.05		
	revenue lose due to not clarifying Queries with in time	CM - 0.05		
		ECIS - 20%		
Process efficiency - Insurance Vertical (weightage 25%)				
No of bills not raised as per our tariff and MOU (Deviations)	Nil.			
No of bills sent for pre-authorization not cleared in single attempt(More attempts)	0.5 %			

50%

He is not able to submit his claim in data

Case volume analysis data will help to see the Benign appeal

No target / miles to measure.

4	No of surgery delay due to Pre authorization	Nil.		
	Pre Authorize Pending within 24 hrs	0.01.		
	No of Bills pending for despatch more than 48 hrs in a month			5
	No issues / delays / claim rejection due to not adhering to procedures prescribed in CM scheme	Nil.		
People Growth and Development (weightage 10%)				
	Attrition rate: retaining 75% of new joiners at least for 1 year	Nil.		
	Retention : Retention of competent staff	100%		5
	staff quality- >90% of the department should be manned by staff who know all mandatory processes and are			
	Assessment score for Staff Skills - Mean score more than 80 %	90%		
Team Performance (weightage 10%)				
4	No of Patient complaints against your team member	0.01.		
	No of Appriciation from received by your team member from patients			5
	Major work related Incidents- No of incidents			
	Corrective Action taken or not			
	Repeted incedents happened if any			
	No of Habitual Late commers in your team			
	No of employees found leave with out information			
	No of employees found not following Grooming standards			
	No. of employees Oral warning given (if any)			
	No. of Written Memo given to employees (if any)			
Overall performance rating: 30.				
Employee Signature		HOD Signature:		
Date:		Date		
Reviewer Signature				
Date:				

NO evidence
Given —
↓
* Business volume
Increased
* Increased Revenue
* Collection
efficiency.

g. f.

- Positive
- He knows his job.
 - He assigned responsibility to his team

g. f.

Area to Improve:

His priority works are — Increasing Insurance Business volume.
— Collection efficiency
— Delay / Rejection / Disallowance %.

His concentration needs to be focusing more on the Increasing Business volume / Revenue generation.

LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

GENERAL INFORMATION

NAME:	K. Shakira	EMP. NO:	VH 8529
DESIGNATION:	Team Leader	DEPARTMENT:	Tele communication
TOTAL EXPERIENCE:	6 years	EXPERIENCE IN VELAMMAL:	5 months
REPORTING TO:	Director of marketing	NO. OF REPORTEES UNDER ME:	3
E-MAIL:	Shakirak@velammalmedicalcollege.edu.in	CONTACT NO.:	9841728822, 9804473333
DATE:	21.02.2022	VENUE:	



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LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

3)

WHAT ARE THE 3 THINGS YOU DID TO ENHANCE YOUR TECHNICAL SKILLS?

உங்களின் தொழில்நுட்ப/வேலைதிறன்களை மேம்படுத்த நீங்கள் செய்த 3 விஷயங்கள் யாவை?

Learned more about CRM.

Develop my skills on par with digital world.

Worked with many CRM's for adapting changes.

4)

WHAT ARE THE 3 THINGS YOU MADE BETTER IN YOUR DEPARTMENT COMPARED TO THE PREVIOUS YEARS?

முந்தைய ஆண்டுகளுடன் ஒப்பிடும்போது, உங்கள் துறையில் நீங்கள் சிறப்பாகச் செய்த 3 விஷயங்கள் யாவை?

Trained CRM to the team.

Personalised the CRM according to the hospital needs.

Trained the team on how to handle calls professionally.

**LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)**

- 7) WHAT ARE THE 3 THINGS YOU MADE SIMPLER IN YOUR DEPARTMENT COMPARED TO THE PREVIOUS PRACTISES WHICH REDUCED TIME/EFFORT/MONEY/RESOURCES?
முந்தைய நடைமுறைகளுடன் ஒப்பிடும்போது, உங்கள் துறையில் நீங்கள் எளிமையாகச் செய்த 3 விஷயங்கள் என்ன, அவை தேவைப்படவேண்டிய நேரம்/முயற்சி/பணம்/வளங்கள் ஆகியவற்றைக் குறைத்திருக்கலாம்?

Avoided unwanted intercom calls.
Missed call management.
Call back / followup the patients.

- 8) WHAT ARE THE MONITORING MECHANISMS YOU HAVE EVOLVED IN YOUR DEPARTMENT TO BRING ACCOUNTABILITY IN THE DEPARTMENT?
துறையின் பொறுப்பைக் கொண்டு வர உங்கள் துறையில் நீங்கள் உருவாக்கிய கண்காணிப்பு நெறிமுறைகள் என்ன?

Evaluating team performance and finding ways to resolve the problems on weekly basis.
call logging / monitoring chats.
Organising rotational shift efficiently to avoid missed calls.

LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

- 11) WHAT ARE THE WORKS YOU DID OUTSIDE OF YOUR JD, WHICH HELPED THE ORGANISATION? (WALKED EXTRA MILE)
நிறுவனத்திற்கு உதவிய உங்கள் JOB DESCRIPTION -க்கு வெளியே நீங்கள் செய்த பணிகள் என்ன?

Transferred knowledge to other department staff in regards to calls.
Co-ordinating with tele-medicine and marketing team to improve business.
Time to time adherence of director marketing.

- 12) WHAT ARE THE 3 THINGS YOU LEARNT NEW IN THIS YEAR TO DEVELOP YOUR TECHNICAL/FUNCTIONAL HARD SKILLS & NON TECHNICAL SOFT SKILLS?
உங்கள் தொழில்நுட்ப மற்றும் தொழில் நுட்பமற்ற மென்திறன்களை மேம்படுத்த இந்த ஆண்டில் நீங்கள் புதிதாகக் கற்றுக் கொண்ட 3 விஷயங்கள் யாவை?

I have started working in this organisation from past 5 months and
I am still building my team and implementing the skills which I know
earlier.



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**LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)**

- 15) WHAT ARE THE 3 THINGS YOU COULD HAVE DONE BETTER IN THE LAST 1 YEAR AS A LEADER OF THE DEPARTMENT?
துறையின் தலைவராக கடந்த 1 வருடத்தில் நீங்கள் சிறப்பாகச் செய்திருக்க வேண்டிய 3 விஷயங்கள் யாவை?

Joined 5 month before so still in process.

- 16) WHAT ARE THE 3 THINGS YOU DID TO EMPOWER YOUR TEAM MEMBERS IN YOUR DEPARTMENT?
உங்கள் பிரிவில் உள்ள உங்கள் குழு உறுப்பினர்களை வலுப்படுத்த நீங்கள் செய்த 3 விஷயங்கள் யாவை?

Improved communication skills of the team.

Thought them team co-ordination,

Improved the language skills



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LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)

- 19) WHAT ARE THE 3 MAJOR QUANTITATIVE RESULTS YOU ACHIEVED IN THE LAST 1 YEAR?
கடந்த 1 வருடத்தில் நீங்கள் அடைந்த 3 முக்கிய அளவிடக் கூடிய சாதனைகள் என்ன?

Ind-36-2 CH 10/10/2021

- 20) WHAT ARE THE 3 MAJOR QUALITATIVE RESULTS YOU ACHIEVED IN THE LAST 1 YEAR?
கடந்த 1 வருடத்தில் நீங்கள் அடைந்த 3 பெரிய அளவிட முடியாத சாதனைகள் என்ன?

அளவீட்டில் அடங்காத சாதனைகள் அடங்கியிருக்கின்றன. அவைகள் என்னவென்று கீழ்க்கண்டவற்றில் குறிப்பிட்டுக் கொள்ளுங்கள்.

1. அளவீட்டில் அடங்காத சாதனைகள் அடங்கியிருக்கின்றன. அவைகள் என்னவென்று கீழ்க்கண்டவற்றில் குறிப்பிட்டுக் கொள்ளுங்கள்.

2. அளவீட்டில் அடங்காத சாதனைகள் அடங்கியிருக்கின்றன. அவைகள் என்னவென்று கீழ்க்கண்டவற்றில் குறிப்பிட்டுக் கொள்ளுங்கள்.



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**LEADER'S PERFORMANCE APPRAISAL – GENERAL QUESTIONNAIRE
(FOR THE PERIOD OF JAN TO DEC 2021)**

- 23) WHAT ARE THE 3 THINGS YOU WANT TO DEVELOP IN YOUR TEAM MEMBERS IN THE NEXT 1 YEAR?
அடுத்த 1 வருடத்தில் உங்கள் குழு உறுப்பினர்களில் நீங்கள் உருவாக்க விரும்பும் 3 விஷயங்கள் யாவை?

Language and technical skills.

Team co-ordination

Time management.

- 24) WHAT ARE THE 3 THINGS YOU PLAN TO OPTIMISE & REDUCE THE WASTAGE OF TIME/MONEY/EFFORT IN YOUR DEPARTMENT IN THE NEXT 1 YEAR - SMART WORK?

அடுத்த 1 வருடத்தில் உங்கள்துறையில் நேரம்/பணம்/முயற்சியின் விரயத்தை மேம்படுத்தவும் குறைக்கவும் நீங்கள் திட்டமிட்டுள்ள 3 விஷயங்கள் - ஸ்மார்ட்-வர்க் என்ன?

Still in process to build a proper team with software.

Mrs. Shikha
Tele Communication

70.1

Performance Review and Planning Tracker sheet 2021						
Call center - Team Leader			Rating scale:			
Month :			5 Excellent (consistently exceeds standards)			
Name :			4 Outstanding (frequently exceeds standards)			
Department:			3 Satisfactory (generally meets standards)			
Designation:			2 Needs improvement (frequently fails to meet standards)			
DOJ:			1 Unacceptable (fails to meet standards)			
Process efficiency (weightage 50%)			Target	Achieved	%	Rating
1	1	Call Arrival Rate - number of calls that come in each day/ month	16898			0
	2	Call Setup Success Rate - successful call connections in a day / month	12034			
	3	Total No of Chats	811			
	4	Average abandonment rate (missed calls)	4864			
	5	The first response time	10 sec			
	6	Average Call Length - how long the average case stays open				
	7	Percentage of calls blocked (Break)				
	8	customer satisfaction score (complaint)				
	9					
	10					
People Growth and Development (weightage 10%)			Not applicable.			
Attrition rate: retaining 75% of new joiners at least for 1 year						
Retention : Retention of competent staff						
staff quality- >90% of the department should be manned by staff who know all mandatory processes and are multi skilled						
Assessment score for Staff Skills - Mean score more than 80 %						
2	Team Performance (weightage 10%)		1. Shabeer Palani Charles.			
	No of complaints against your team member					
	No of Appreciation from received by your team member from patients					
	Major work related Incidents- No of incidents					
	Corrective Action taken or not					
	Repeted incidents happened if any					
	No of Habitual Late commers in your team					
	No of employees found leave with out information					
	No of employees found not following Grooming standards					
	No. of employees Oral warning given (if any)					
No. of Written Memo given to employees (if any)						
Overall performance rating: _____						
Employee Signature: <i>K. Shakin</i>			HOD Signature:			
Date: 05/02/2022			Date:			
Reviewer Signature						
Date:						

As of Novm
Call Connection
Ratio is 71.1

She undertook in 2020
started caplin job
call productivity
analysis she has
to do

Performance Review and Planning Tracker sheet 2021						
Floor Coordinators -Specialty			Rating scale:			
Month : <u>December</u>			5 Excellent (consistently exceeds standards)			
Name : <u>K. Rahul/Canth</u>			4 Outstanding (frequently exceeds standards)			
Department: <u>Patient care</u>			3 Satisfactory (generally meets standards)			
Designation: <u>Floor - coordinator</u>			2 Needs improvement (frequently fails to meet standards)			
DOJ: <u>15/07/2021</u>			1 Unacceptable (fails to meet standards)			
Key Performance Indicator - Floor Coordinators - Specialty			Target	Achieved	%	Rating
S.		Particulars				
1	Floor census :(weightage 10%)	Ward wise census		3150		
		VIP admission		56		
		No of admission - Day shift		851		
		No of admission -Night shift		691		
		Department Wise admission in the floor		860		
		Referred patients by outside doctor area wise		100		
2	Stays by payer :(weightage 10%)	Private insurance		800		
		Scheme Patients		-		
		uninsured patients		2350		
3	Issues related to Facility Management services:(weight age 10%)	BIO Medical General Waste checking and issues found		-		
		No of ward related Complaints registered		30		
		No of ward related Complaints closed		30		
		Fumigation related issues		-		
		Complaints related to cleaning in the respective floors		04		
		Complaints pending for more than 3 days		-		
4	Linen issues:(weightage 10%)	No of bed sheets Condemned		-		
		No Linen received from the laundry		6000		
		Stain sheet identified before issuing		-		
		Stock Checking and variance found		-		

5	Ward coordination issues identified and resolved : (weightage 20%)	Patients reports submitted to the Insurance billing (No of delay complaints)	03		
		Bill pending more than 48 hours - in wards	850		
		IP advance collection -amount pending	-		
		Lab reports Pending issues and resolved	15		
		Other Diagnostic reports pending issues and resolved	10		
		Audit findings - diagnosis, consumables and procedures are not billed before discharge	03		
		Patient transportation - complaints and issues	16		
		MRD case sheet sending with in 24 hrs	01		
		Billing related issues with Previous day consultant wise surgery list in the wards	10		
6	Discharge Coordination: (weightage 20%)	Discharge Process-Summary not typed issues	12		
		AMA Discharge process - Delays/ Issues / rework/ Complaints	06		
		Death discharge process- Delays/ Issues / rework/ Complaints	03		
		MLC death discharge process- Delays/ Issues / rework/ Complaints	-		
		Corporate / Insurance claim patient discharge process	200		
		Unplanned discharge	570		
		Discharge delays % of total discharge			
		Birth certificate Related Delays/ Issues / rework/ Complaints	-		
		Death certificate related Delays/ Issues / rework/ Complaints	-		

Team members performance :(weightage20%)				
1	No of Patient complaints against your team member			
2	No of Appriciation from received by your team member from patients			
3	Major work related Incidents- No of incidents			
4	Corrective Action taken or not			
5	Repeted incedents happened if any			
6	No of Habitual Late commers in your team			
7	No of employees found leave with out information			
8	No of employees found not following Grooming standards			
9	No. of employees Oral warning given (if any)			
10	No. of Written Memo given to employees (if any)			
Overall performance rating: _____				

K. Rakulanti
Employee Signature

Date: 26/01/2022

Reviewer Signature

Date:

HOD Signature:

Date

Performance Review and Planning Tracker sheet 2021

Floor Coordinators - Medical College			Rating scale:			
Month : December 2021			5 Excellent (consistently exceeds standards)			
Name : K. Divyadharsini			4 Outstanding (frequently exceeds standards)			
Department: Patient care			3 Satisfactory (generally meets standards)			
Designation: Floor coordinators			2 Needs improvement (frequently fails to meet standards)			
DOJ: 15/07/2021			1 Unacceptable (fails to meet standards)			
Key Performance Indicator - Floor Coordinators - Medical College			Target	Achieved	%	Rating
S. No		Particulars				
1	Floor census :(weightage 10%)	Ward wise census		2,891		
		VIP admission		124		
		No of admission - Day shift		248		
		No of admission -Night shift		403		
		Department Wise admission in the floor		352		
		Referred patients by outside doctor area wise		69		
2	Stays by payer :(weightage 10%)	Private insurance		17		
		Scheme Patients		1100		
		uninsured patients		1704		
3	Issues related to Facility Management services:(weightage 10%)	BIO Medical General Waste checking and issues found		01		
		No of ward related Complaints registered		15		
		No of ward related Complaints closed		15		
		Fumigation related issues		-		
		Complaints related to cleaning in the respective floors		06		
		Complaints pending for more than 3 days		01		
4	Linen issues:(weightage 10%)	No of bed sheets Condemned		-		
		No Linen received from the laundry		1571		
		Stain sheet identified before issuing		-		
		Stock Checking and variance found		01		
	Ward coordination	Patients reports submitted to the Insurance billing (No of delay complaints)		-		
		Bill pending more than 48 hours - in wards		90		
		IP advance collection -amount pending		-		
		Lab reports Pending issues and resolved		25		

Performance Review and Planning Tracker sheet 2021					
Floor Coordinators - Medical College			Rating scale:		
Month :			5 Excellent (consistently exceeds standards)		
Name : A. Ananda Vignesh			4 Outstanding (frequently exceeds standards)		
Department: Operations			3 Satisfactory (generally meets standards)		
Designation: Floor Coordinator			2 Needs improvement (frequently fails to meet standards)		
DOJ: 15/7/2021			1 Unacceptable (fails to meet standards)		
Key Performance Indicator - Floor Coordinators - Medical College			Target	Achieved	Rating
S. No		Particulars			
1	Floor census :(weightage 10%)	Ward wise census		4664	
		VIP admission		46864	
		No of admission - Day shift		468	
		No of admission -Night shift		595	
		Department Wise admission in the floor		127	
		Referred patients by outside doctor area wise		4664	
				356	
2	Stays by payer :(weightage 10%)	Private insurance		704	
		Scheme Patients		218	
		uninsured patients		3,748	
3	Issues related to Facility Management services:(weightage 10%)	BIO Medical General Waste checking and issues found		Nil	
		No of ward related Complaints registered		44	
		No of ward related Complaints closed		42	
		No of ward related Complaints still open		2	
		No of maintainance related issues found (AC, Furniture, equipment)		12	
		No. of housekeeping related issues		10	
		Fumigation related issues		Nil	
		Complaints related to cleaning in the respective floors		Rectified	
		Complaints pending for more than 3 days		Nil	
4	Linen issues:(weightage 10%)	No of bed sheets Condemned		64	
		No Linen received from the laundry		1050	
		Stain sheet identified before issuing		Nil	
		Stock Checking and variance found		Done	

5	Ward coordination issues identified and resolved : (weightage 20%)	Patients reports submitted to the Insurance billing (No of delay complaints)		Nil	
		Bill pending more than 48 hours - in wards		52	
		IP advance collection -amount pending		Nil	
		Lab reports Pending issues and resolved		5 (resolved)	
		Other Diagnostic reports pending issues and resolved		2 (resolved)	
		Audit findings - diagnosis, consumables and procedures are not billed before discharge		1 (rectified)	
		Patient transportation - complaints and issues		(resolved)	
		MRD case sheet sending with in 24 hrs		100%	
		Billing related issues with Previous day consultant wise surgery list in the wards		Nil	
6	Discharge Coordination: (weightage 20%)	Discharge Process-Summary not typed issues		Nil	
		AMA Discharge process - Delays/ Issues / rework/ Complaints		2	
		Death discharge process- Delays/ Issues / rework/ Complaints		1	
		MLC death discharge process- Delays/ Issues / rework/ Complaints		-	
		Corporate / Insurance claim patient discharge process		Done.	
		Unplanned discharge		460	
		Discharge delays % of total discharge		2%	
		Birth certificate Related Delays/ Issues / rework/ Complaints		1 (rectified)	
		Death certificate related Delays/ Issues / rework/ Complaints		Nil	

Team members performance :(weightage20%)				
1	No of Patient complaints against your team member			
2	No of Appreciation from received by your team member from patients			
3	Major work related Incidents- No of incidents			
4	Corrective Action taken or not			
5	Repeted incidents happened if any			
6	No of Habitual Late commers in your team			
7	No of employees found leave with out information			
8	No of employees found not following Grooming standards			
9	No. of employees Oral warning given (if any)			
10	No. of Written Memo given to employees (if any)			
11	No. of incidents raised by the team members to Quality Department for RCA & CAPA			
12	No. of CAPA captured by the team members in a month and documented			
13	No. of high performing team members/ Month			
14	No. of people management / Team Management related issues faced & handled in a month			

Overall performance rating: _____

Employee Signature *A. Ananda Vignesh*

HOD Signature:

Date: *27/1/22*

Date

Reviewer Signature

Date:

Performance Review and Planning Tracker sheet 2021

Floor Coordinators -Specialty

Rating scale:

Month : December - 2021

Name : M. Brieghatha

Department: Patient Care

Designation: Floor Coordinator

DOJ: 15-07-2021

5 Excellent (consistently exceeds standards)

4 Outstanding (frequently exceeds standards)

3 Satisfactory (generally meets standards)

2 Needs improvement (frequently fails to meet standards)

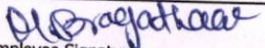
1 Unacceptable (fails to meet standards)

Key Performance Indicator - Floor Coordinators - Specialty

S. No	Particulars	Target	Achieved	%	Rating
1	Floor census : (weightage 10%)	Ward wise census			
		VIP admission			
		No of admission - Day shift	2850		
		No of admission -Night shift	42		
		Department Wise admission in the floor	821		
		Referred patients by outside doctor area wise	733		
2	Stays by payer : (weightage 10%)	Private insurance	885		
		Scheme Patients	184		
		uninsured patients	1000		
			300		
3	Issues related to Facility Management services: (weightage 10%)	BIO Medical General Waste checking and issues found	1500		
		No of ward related Complaints registered	-		
		No of ward related Complaints closed	20		
		Fumigation related issues	20		
		Complaints related to cleaning in the respective floors	-		
		Complaints pending for more than 3 days	5		
4	Linen issues: (weightage 10%)	No of bed sheets Condemned	-		
		No Linen received from the laundry	-		
		Stain sheet identified before issuing	3750		
		Stock Checking and variance found	-		

5	Ward coordination issues identified and resolved : (weightage 20%)	Patients reports submitted to the Insurance billing (No of delay complaints)		2		
		Bill pending more than 48 hours - in wards		150		
		IP advance collection -amount pending		1		
		Lab reports Pending issues and resolved		10		
		Other Diagnostic reports pending issues and resolved		12		
		Audit findings - diagnosis, consumables and procedures are not billed before discharge		1		
		Patient transportation - complaints and issues		5		
		MRD case sheet sending with in 24 hrs		1		
		Billing related issues with Previous day consultant wise surgery list in the wards		10		
6	Discharge Coordination: (weightage 20%)	Discharge Process-Summary not typed issues		12		
		AMA Discharge process - Delays/ Issues / rework/ Complaints		2		
		Death discharge process- Delays/ Issues / rework/ Complaints		1		
		MLC death discharge process- Delays/ Issues / rework/ Complaints		1		
		Corporate / Insurance claim patient discharge process		150		
		Unplanned discharge		600		
		Discharge delays % of total discharge				
		Birth certificate Related Delays/ Issues / rework/ Complaints		1		
		Death certificate related Delays/ Issues / rework/ Complaints		1		

Team members performance :(weightage20%)				
1	No of Patient complaints against your team member			
2	No of Appreciation from received by your team member from patients			
3	Major work related Incidents- No of incidents			
4	Corrective Action taken or not			
5	Repeted incidents happened if any			
6	No of Habitual Late commers in your team			
7	No of employees found leave with out information			
8	No of employees found not following Grooming standards			
9	No. of employees Oral warning given (if any)			
10	No. of Written Memo given to employees (if any)			
Overall performance rating: _____				


Employee Signature

Date: 26/1/22

Reviewer Signature

Date:

HOD Signature:

Date

Performance Review and Planning Tracker sheet 2021

Floor Coordinators - Medical College

Rating scale:

Month : December - 2021

Name : Vinodhini P

Department: patient care

Designation: floor coordinator

DOI: 15/7/21

5 Excellent (consistently exceeds standards)

4 Outstanding (frequently exceeds standards)

3 Satisfactory (generally meets standards)

2 Needs improvement (frequently fails to meet standards)

1 Unacceptable (fails to meet standards)

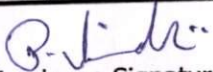
Key Performance Indicator - Floor Coordinators - Medical College

S. No	Particulars	Target	Achieved	%	Rating
1	Floor census :(weightage 10%)	Ward wise census	133959		
		VIP admission	200		
		No of admission - Day shift	141		
		No of admission -Night shift	40		
		Department Wise admission in the floor	2270		
		Referred patients by outside doctor area wise	52		
2	Stays by payer :(weightage 10%)	Private insurance	175		
		Scheme Patients	380		
		uninsured patients	10390		
3	Issues related to Facility Management services:(weightage 10%)	BIO Medical General Waste checking and issues found	-		
		No of ward related Complaints registered	-		
		No of ward related Complaints closed	-		
		No of ward related Complaints still open	-		
		No of maintainance related issues found (AC, Furniture, equipment)	40		
		No. of housekeeping related issues	60		
		Fumigation related issues	-		
		Complaints related to cleaning in the respective floors	20		
		Complaints pending for more than 3 days	-		
4	Linen issues:(weightage 10%)	No of bed sheets Condemned	3		
		No Linen received from the laundry	-		
		Stain sheet identified before issuing	-		
		Stock Checking and variance found	-		

5	Ward coordination issues identified and resolved : (weightage 20%)	Patients reports submitted to the Insurance billing (No of delay complaints)		-		
		Bill pending more than 48 hours - in wards		40		
		IP advance collection -amount pending		450		
		Lab reports Pending issues and resolved		-		
		Other Diagnostic reports pending issues and resolved		-		
		Audit findings - diagnosis, consumables and procedures are not billed before discharge		-		
		Patient transportation - complaints and issues		-		
		MRD case sheet sending with in 24 hrs		-		
		Billing related issues with Previous day consultant wise surgery list in the wards		-		
6	Discharge Coordination: (weightage 20%)	Discharge Process-Summary not typed issues		-		
		AMA Discharge process - Delays/ Issues / rework/ Complaints		-		
		Death discharge process- Delays/ Issues / rework/ Complaints		-		
		MLC death discharge process- Delays/ Issues / rework/ Complaints		-		
		Corporate / Insurance claim patient discharge process		-		
		Unplanned discharge		-		
		Discharge delays % of total discharge		-		
		Birth certificate Related Delays/ Issues / rework/ Complaints		-		
		Death certificate related Delays/ Issues / rework/ Complaints		-		

Team members performance :(weightage20%)				
1	No of Patient complaints against your team member			
2	No of Appreciation from received by your team member from patients			
3	Major work related Incidents- No of incidents			
4	Corrective Action taken or not			
5	Repeted incidents happened if any			
6	No of Habitual Late commers in your team			
7	No of employees found leave with out information			
8	No of employees found not following Grooming standards			
9	No. of employees Oral warning given (if any)			
10	No. of Written Memo given to employees (if any)			
11	No. of incidents raised by the team members to Quality Department for RCA & CAPA			
12	No. of CAPA captured by the team members in a month and documented			
13	No. of high performing team members/ Month			
14	No. of people management / Team Management related issues faced & handled in a month			

Overall performance rating: _____


Employee Signature

Date: 26/11/22

Reviewer Signature

Date:

HOD Signature:

Date

VMCH & VMCH WARD DETAILS LIST - JAN MONTH - 2022

S.No	LOCATION	WARDS
1ST FLOOR WARDS		
1	1ST FLOOR	1-PEDIATRICS I (FF)-102
2	1ST FLOOR	1-PEDIATRICS I (FF)-103
3	1ST FLOOR	1-OBSTETRICS I (FF) - 105
4	1ST FLOOR	1-PSYCHIATRY FEMALE (FF) - 109
5	1ST FLOOR	1-OBSTETRICS II (FF) - 106
2ND FLOOR WARDS		
1	2ND FLOOR	2-SURGERY WARD MALE I (SF) - 201
2	2ND FLOOR	2-ORTHOPEADICS III (SF) - 214
3	2ND FLOOR	2-ORTHOPEADICS I (SF) - 208
4	2ND FLOOR	2-SURGERY WARD FEMALE V (SF) - 205
5	2ND FLOOR	2-ENT WARD (SF) - 207
6	2ND FLOOR	2-ORTHOPEADICS II (SF) - 209
7	2ND FLOOR	2-PSYCHIATRY MALE (SF) - 206
3RD FLOOR WARDS		
1	3RD FLOOR	3-MEDICINE WARD MALE I (TF) - 301
2	3RD FLOOR	3-MEDICINE WARD MALE II (TF) - 302
3	3RD FLOOR	3-MEDICINE WARD FEMALE V (TF) - 305
4	3RD FLOOR	3-MEDICAL ONCOLOGY FEMALE WARD (TF) - 313
5	3RD FLOOR	3-NEURO MEDICINE / SURGERY WARD (TF) - 312
6	3RD FLOOR	3-RESPIRATORY MEDICINE WARD (TF) - 315
7	3RD FLOOR	3-MEDICAL ONCOLOGY MALE WARD (TF) - 314
8	3RD FLOOR	3-POST OPERATIVE WARD - SURGERY (TF) - 311
NOT USED WARDS		
1	1ST FLOOR	1-GYNECOLOGY (FF) - 101
2	1ST FLOOR	1-PAEDIATRICS WARD III (FF) - 104
3	1ST FLOOR	1-OBSTETRICS I (FF) - 106
4	1ST FLOOR	1-DERMATOLOGY MALE/FEMALE (FF) - 110
5	2ND FLOOR	2-SURGERY WARD MALE II (SF) - 202
6	2ND FLOOR	2-SURGERY WARD MALE III (SF) - 203
7	2ND FLOOR	2-SURGERY WARD FEMALE IV (SF) - 204
8	2ND FLOOR	2-BURNS WARD (SF) - 211
9	3RD FLOOR	3-MEDICINE WARD MALE III (TF) - 303
10	3RD FLOOR	3-MEDICINE WARD FEMALE IV (TF) - 304
11	3RD FLOOR	3-OPHTHALMOLOGY WARD (TF) - 306
12	3RD FLOOR	3-GASTRO WARD (TF) - 308
13	3RD FLOOR	3-UROLOGY WARD (TF) - 309
14	3RD FLOOR	3-INSURANCE WARD(TF)-307
15	3RD FLOOR	3-POST OPERATIVE WARD - ORTHO (TF) - 310

VMC		
5TH FLOOR WARDS		
1	5TH FLOOR	5A
2	5TH FLOOR	5B
3	5TH FLOOR	5C
4	5TH FLOOR	5D
5	5TH FLOOR	5G
4TH FLOOR WARDS		
1	4TH FLOOR	4A
2	4TH FLOOR	4B
3	4TH FLOOR	4C
4	4TH FLOOR	4D
5	4TH FLOOR	SW1

NOT USED WARDS		
1	4TH FLOOR	SW2
2	4TH FLOOR	SW3
3	4TH FLOOR	SW4

1ST FLOOR	5
2ND FLOOR	7
3RD FLOOR	8
4TH FLOOR	5
5TH FLOOR	5
TOTAL	30

VMC & VMCH TOTAL EMERGENCY CENSUS DECEMBER - 2021

DATE	VMCH		VMC		COVID		TOTAL
	WARD	ICU	WARD	ICU	WARD	ICU	
1 Dec 21	8	14	9	5	0	0	36
2 Dec 21	14	8	5	9	0	0	36
3 Dec 21	10	16	8	8	0	0	42
4 Dec 21	12	8	8	5	0	0	33
5 Dec 21	18	11	12	4	0	0	45
6 Dec 21	11	17	9	8	0	0	45
7 Dec 21	6	14	6	5	0	0	31
8 Dec 21	8	10	7	5	0	1	31
9 Dec 21	7	17	5	8	0	1	38
10 Dec 21	15	12	12	7	0	0	46
11 Dec 21	10	9	10	5	0	0	34
12 Dec 21	8	10	3	0	0	0	21
13 Dec 21	8	13	9	4	0	0	34
14 Dec 21	12	13	4	6	0	0	35
15 Dec 21	8	13	8	4	0	0	33
16 Dec 21	5	10	6	7	0	0	28
17 Dec 21	5	12	11	4	0	0	32
18 Dec 21	3	3	14	7	0	0	27
19 Dec 21	9	10	7	2	0	2	30
20 Dec 21	5	14	10	1	0	0	30
21 Dec 21	13	13	7	4	0	0	37
22 Dec 21	9	13	5	5	0	0	32
23 Dec 21	7	8	9	10	0	0	34
24 Dec 21	6	8	6	5	0	0	25
25 Dec 21	6	10	8	1	0	0	25
26 Dec 21	19	9	6	0	0	0	34
27 Dec 21	14	13	3	3	0	0	33
28 Dec 21	9	8	8	4	0	0	29
29 Dec 21	11	9	6	1	0	1	28
30 Dec 21	5	13	3	3	0	0	24
31 Dec 21	15	10	4	4	0	0	33
TOTAL	296	348	228	144	0	5	
GRAND TOTAL	644		372		5		1021

01-12-2021 to 31-12-2021 VMCH IP DATA DEPARTMENT WISE

S No.	DEPARTMENT NAME	DOCTOR NAME	NEW	OLD	OVER ALL TOTAL
1	CARDIO THORACIC SURGERY	DR.RAMPRASSATH M.S	12	6	18
2	CARDIO THORACIC SURGERY	DR.SATHIYA SELVAM M	0	2	2
3	CARDIO THORACIC SURGERY	DR.SIVAKUMAR PANDIAN	7	0	7
4	CARDIOLOGY	DR.MAHESHKUMAR S	11	6	17
5	CARDIOLOGY	DR.SELVA GANESH	21	14	35
6	CARDIOLOGY	DR.SHUNMUGA SUNDRAM P	38	28	66
7	CARDIOLOGY	DR.VADIVEL	10	17	27
8	CASUALTY	DR.AMARESWAR REDDY	1	0	1
9	DENTAL	DR.DIVAGAR.C	1	0	1
10	DENTAL	DR.MOHAN PRAKASH.R	0	1	1
11	DENTAL	DR.YOGANANDHA R	0	1	1
12	DERMATOLOGY	DR.KRISHNARAM A S	3	2	5
13	DERMATOLOGY	DR.MADHU SUDHANAN.V (DERMA)	0	3	3
14	DERMATOLOGY	DR.S. ILAVENDRAN	1	6	7
15	DERMATOLOGY	DR.SUCHITHRA	0	1	1
16	ENDOCRINE SURGERY	DR.SUGANYA S	2	8	10
17	ENT	DR.MAHESHWARAN	1	7	8
18	ENT	DR.POOKAMALA S	1	8	9
19	ENT	DR.RAJAVEL	5	5	10
20	ENT	DR.VIJAY PRADAP	3	9	12
21	GENERAL MEDICINE	DR.ANANDADURAI	13	9	22
22	GENERAL MEDICINE	DR.ANKIT ANAND	19	9	28
23	GENERAL MEDICINE	DR.JANSI BANU	0	1	1
24	GENERAL MEDICINE	DR.MANOJ PRABHAKAR M	18	9	27
25	GENERAL MEDICINE	DR.MANOJ.A	3	0	3
26	GENERAL MEDICINE	DR.NAGALAKSHMI	33	17	50
27	GENERAL MEDICINE	DR.PRABHUSWAMY	18	7	25
28	GENERAL MEDICINE	DR.PRAISIE R	18	10	28
29	GENERAL MEDICINE	DR.RAMESH	12	7	19
30	GENERAL MEDICINE	DR.SANGEETHA	12	12	24
31	GENERAL MEDICINE	DR.VIRGIN JOENA M	4	2	6
32	GENERAL SURGERY	DR.ABU HORAIRAH H	7	6	13
33	GENERAL SURGERY	DR.ANAND ABRAHAM	1	2	3
34	GENERAL SURGERY	DR.ARUN GURU K	15	19	34
35	GENERAL SURGERY	DR.DHAMOTHARAN.S.R	2	6	8
36	GENERAL SURGERY	DR.JEYAGANESH R	2	6	8
37	GENERAL SURGERY	DR.M.RANJITH KUMAR	8	10	18
38	GENERAL SURGERY	DR.OM KUMAR.V	4	2	6
39	GENERAL SURGERY	DR.S.SUJITHA	14	8	22
40	GENERAL SURGERY	DR.SELVACHIDAMBARAM	5	5	10
41	GENERAL SURGERY	DR.THANGAPPRAKASAM	12	11	23
42	GENERAL SURGERY	DR.VENKATESH	7	5	12
43	GENERAL SURGERY	DR.VIJAYA BOOPATHI	3	2	5
44	GYNAECOLOGY	DR.AGALYA ANGELINA.S	2	2	4
45	GYNAECOLOGY	DR.ANITHA	0	2	2
46	GYNAECOLOGY	DR.CHITRA.K.S	1	1	2
47	GYNAECOLOGY	DR.INDHUMATHI(GYN)	0	3	3
48	GYNAECOLOGY	DR.KARTHIKAA.C	0	1	1
49	GYNAECOLOGY	DR.KAVITHA (GYN)	1	2	3
50	GYNAECOLOGY	DR.PRIYANKA(GYNG)	1	1	2
51	GYNAECOLOGY	DR.RAJAKEERTHANA R	2	0	2
52	GYNAECOLOGY	DR.S HARINI	1	2	3
53	GYNAECOLOGY	DR.SASIKALA	0	2	2
54	MEDICAL GASTROENTEROLOGY	DR.ARUN A.C	27	40	67
55	MEDICAL GASTROENTEROLOGY	DR.SRIRAM.P.B	3	1	4
56	MEDICAL GASTROENTEROLOGY	DR.SUDHAN N	14	18	32
57	MEDICAL ONCOLOGY	DR.BALAMBIKA.R.G	6	140	146
58	MEDICAL ONCOLOGY	DR.RAJKUMAR (ONCOLOGY)	12	144	156
59	NEPHROLOGY	DR.SRI RAMULU D	9	18	27
60	NEPHROLOGY	DR.VIKRAM SAGAR	8	19	27
61	NEURO SURGERY	DR.ASHOK KUMAR (NEURO) N	14	7	21
62	NEURO SURGERY	DR.GANESH KUMAR M	23	16	39

01-12-2021 to 31-12-2021 VMC IP DATA DEPARTMENT WISE

S No.	DEPARTMENT NAME	DOCTOR NAME	NEW	OLD	OVER ALL TOTAL
1	CARDIO THORACIC SURGERY	DR.RAMPRASSATH M.S	28	18	46
2	CARDIO THORACIC SURGERY	DR.SATHIYA SELVAM M	2	1	3
3	CARDIO THORACIC SURGERY	DR.SIVAKUMAR PANDIAN	6	4	10
4	CARDIOLOGY	DR.MAHESHKUMAR S	16	6	22
5	CARDIOLOGY	DR.PRASANNA S	3	0	3
6	CARDIOLOGY	DR.SELVA GANESH	35	16	51
7	CARDIOLOGY	DR.SHUNMUGA SUNDRAM P	140	52	192
8	CARDIOLOGY	DR.VADIVEL	27	22	49
9	DENTAL	DR.YOGANANDHA R	2	1	3
10	DERMATOLOGY	DR.MADHU SUDHANAN.V (DERMA)	1	0	1
11	ENDOCRINE SURGERY	DR.SUGANYA S	0	12	12
12	ENT	DR.MAHESHWARAN	0	1	1
13	ENT	DR.RAJAVEL	2	11	13
14	GENERAL MEDICINE	DR.PRABHUSWAMY	20	15	35
	GENERAL MEDICINE	DR.RAMESH	16	22	38
16	GENERAL MEDICINE	DR.SANGEETHA	17	29	46
17	GENERAL MEDICINE	DR.VIRGIN JOENA M	3	2	5
18	GENERAL SURGERY	DR.ARUN KUMAR	1	0	1
19	GENERAL SURGERY	DR.KARPAGAVEL	6	6	12
20	GENERAL SURGERY	DR.THANGAPPRAKASAM	2	1	3
21	GENERAL SURGERY	DR.VENKATESH	2	1	3
22	GYNAECOLOGY	DR.AGALYA ANGELINA.S	0	2	2
23	GYNAECOLOGY	DR.ANITHA	3	2	5
24	GYNAECOLOGY	DR.CHITRA.K.S	0	3	3
25	GYNAECOLOGY	DR.KAVITHA (GYN)	3	24	27
26	GYNAECOLOGY	DR.SASIKALA	2	5	7
27	MEDICAL ENDOCRINOLOGY	DR.WARUN KUMAR.M.P	0	1	1
28	MEDICAL GASTROENTEROLOGY	DR.ARUN A C	1	0	1
29	MEDICAL GASTROENTEROLOGY	DR.ARUN A.C	12	24	36
30	MEDICAL GASTROENTEROLOGY	DR.SRIRAM.P.B	4	2	6
31	MEDICAL GASTROENTEROLOGY	DR.SUDHAN N	4	4	8
32	MEDICAL ONCOLOGY	DR.BALAMBIKA.R.G	0	37	37
33	MEDICAL ONCOLOGY	DR.RAJKUMAR (ONCOLOGY)	2	20	22
34	NEPHROLOGY	DR.SRI RAMULU D	0	6	6
35	NEPHROLOGY	DR.VIKRAM SAGAR	3	9	12
36	NEURO SURGERY	DR.ASHOK KUMAR (NEURO) N	2	0	2
37	NEURO SURGERY	DR.GANESH KUMAR M	27	26	53
38	NEURO SURGERY	DR.SENTHILKUMAR (NEURO)	10	5	15
39	NEUROLOGY	DR.GANESA PANDIAN.D	3	1	4
40	NEUROLOGY	DR.KAVITHA M (NEURO)	21	19	40
41	OBSTETRICS	DR.CHITRA.K.S (OBS)	0	2	2
42	OBSTETRICS	DR.KAVITHA (OBS)	1	1	2
43	OBSTETRICS	DR.SASIKALA.K(OBS)	1	0	1
44	OPHTHALMOLOGY	DR.ILANGO K	1	6	7
45	ORTHOPAEDICS	DR.LOKESH KUMAR.S	1	0	1
46	ORTHOPAEDICS	DR.SHANMUGANATHAN	3	5	8
47	ORTHOPAEDICS	DR.SUBBIAH	20	14	34

01-12-2021 to 31-12-2021 VMCH OP DATA DEPARTMENT WISE

S No.	DEPARTMENT NAME	NEW	OLD	GRAND TOTAL
1	ANESTHESIOLOGY	1	3	4
2	CARDIO THORACIC SURGERY	6	8	14
3	CARDIOLOGY	368	404	772
4	CASUALTY	1035	601	1636
5	DENTAL	467	361	828
6	DERMATOLOGY	309	690	999
7	ENDOCRINE SURGERY	36	125	161
8	ENT	656	772	1428
9	GENERAL MEDICINE	1240	5143	6383
10	GENERAL SURGERY	324	792	1116
11	GYNAECOLOGY	337	774	1111
12	MEDICAL ENDOCRINOLOGY	9	51	60
13	MEDICAL GASTROENTEROLOGY	137	681	818
14	MEDICAL ONCOLOGY	23	340	363
15	NEPHROLOGY	46	234	280
16	NEPHROLOGY DIALYSIS	0	2553	2553
17	NEURO SURGERY	50	233	283
18	NEUROLOGY	200	597	797
19	OBSTETRICS	173	572	745
20	OPHTHALMOLOGY	665	562	1227
21	ORTHO PAEDICS	473	1057	1530
22	PAEDIATRIC SURGERY	12	21	33
23	PAEDIATRICS	458	963	1421
24	PLASTIC SURGERY	3	62	65
25	PSYCHIATRY	177	816	993
26	RADIOLOGY	1	0	1
27	REPRODUCTIVE MEDICINE	0	3	3
28	RESPIRATORY MEDICINE	144	465	609
29	RHEUMATOLOGY	21	143	164
30	SPINE SURGERY (ORTHO)	0	1	1
31	SURGERY & SGE	53	215	268
32	SURGICAL ONCOLOGY	7	48	55
33	TRANSPLANT SURGERY	6	16	22
34	UROLOGY	127	378	505
35	VASCULAR SURGERY	41	105	146
TOTAL		7605	19789	27,394

01-12-2021 to 31-12-2021 VMC OP DATA DEPARTMENT WISE

S No.	DEPARTMENT NAME	NEW	OLD	GRAND TOTAL
1	ANESTHESIOLOGY	1	2	3
2	CARDIO THORACIC SURGERY	66	296	362
3	CARDIOLOGY	251	1599	1850
4	CASUALTY	0	2	2
5	DENTAL	9	49	58
6	DERMATOLOGY	22	89	111
7	ENDOCRINE SURGERY	10	69	79
8	ENT	25	92	117
9	GENERAL MEDICINE	58	732	790
10	GENERAL SURGERY	16	128	144
11	GYNAECOLOGY	32	202	234
12	MEDICAL ENDOCRINOLOGY	7	67	74
13	MEDICAL GASTROENTEROLOGY	67	340	407
14	MEDICAL ONCOLOGY	13	263	276
15	NEPHROLOGY	21	268	289
16	NEPHROLOGY DIALYSIS	0	164	164
17	NEURO SURGERY	57	396	453
18	NEUROLOGY	73	623	696
19	OBSTETRICS	0	2	2
20	OPHTHALMOLOGY	7	36	43
21	ORTHOPAEDICS	68	239	307
22	PAEDIATRIC SURGERY	9	43	52
23	PAEDIATRICS	21	32	53
24	PLASTIC SURGERY	0	28	28
25	PSYCHIATRY	10	133	143
26	REPRODUCTIVE MEDICINE	39	212	251
27	RESPIRATORY MEDICINE	27	200	227
28	RHEUMATOLOGY	6	59	65
29	SURGERY & SGE	12	84	96
30	SURGICAL ONCOLOGY	6	42	48
31	UROLOGY	27	167	194
32	VASCULAR SURGERY	9	63	72
TOTAL		969	6721	7,690

POSITIVE FEEDBACK FORM (OP) December 2021

S.NO	DATE	PATIENT NAME	UHID	PHONE	CONSULTANT	HOW DO YOU KNOW ABOUT VELAMMAL HOSPITAL	PLEASE LET US KNOW IF YOU WERE NOT SATISFIED WITH ANY OF THE SERVICES AND REASON WHY?
1	1-12-2021	MR. SUBRAMANIYAN		7639188898	DR. SHANMUGANATH	Doctors	Toilet cleaning and also floor toilet not convenient for patient
2	11-12-2021	MR. PALANISAMY	2011240109	9943077100	DR. KAVITHA	FRIENDS OR RELATIVES	Pharmacy service it's to late.
3	11-12-2021	MRS. TAMILARASI	1811090226	9600371842	DR. RAMPRASATH	FRIENDS OR RELATIVES	Kindly Distube the pharmacy very fast we are waiting for long time
4	11-12-2021	MR. RAMAKRISHNAN	2106160001	9629123195	DR. RAMPRASATH	FRIENDS OR RELATIVES	For those who come from long distance. it is better to send sms for booking time
5	13-12-2021	MR. GOPINATHAN		9717494866	DR. VENKATESH	Doctors	Insurance refund very late, almost we are waiting your month.
6	14-12-2021	MR. SETHU RAMLINGAM	2105060006	7373285222	DR. RAMANUJAM	FRIENDS OR RELATIVES	Please open the branch in tenkasi or Thirunelveli
7	14-12-2021	MR. VALARMATHI	1910010279	8973537142	DR. SUBRAMANIAN	FRIENDS OR RELATIVES	Test report its too late.
8	14-12-2021	MRS. VASANTHA	1706230063	9566597674	DR. RAJKUMAR	FRIENDS OR RELATIVES	To improve time shedule to get quick like, scan reports, blood test report
9	14-12-2021	MR. RIYASATH ALI	211090197	8300135265	DR. RAMPRASATH	Doctors	Worst behavior by pharmacy staff,
10	15-12-2021	MR. GOPALA VEL SWAMY		9976768875	DR. SELVAGANESH	FRIENDS OR RELATIVES	pharmacy staff not engaging in respectable activities.
11	15-12-2021	MR. JESUDASAN		9894262608	DR. BALAMBIKA	SOCIAL MEDIA	We face a prblem with medicines. When we admit a patient we didn't get the medicines at proper time. Even the IV medicine was given at 1pm. Since we got the medicine very late after indent. I suggest to have a note on it.
12	15-12-2021	MR. RAJDEEP DUTTU	2112150117	9944318987	DR. SANGEETHA	WEBSITE	The appointment system has some miscommunication.
13	15-12-2021	MR. MADHU BALA		9363187726	DR. KAVITHA	FRIENDS OR RELATIVES	Please give the report on time and improve the pharmacy service as soon as quickly
14	15-12-2021	MR. JESUDASS	2111290215	9894262608	DR. KAVITHA	SOCIAL MEDIA	Blood test report recd time pls mention.
15	15-12-2021	MR. PRABHU	2112150072	8098057990	DR. RAMESH	FRIENDS OR RELATIVES	Nurses who are all in the system should be trained on customer approach. Seeing some nurses not upto the expected level
16	20-12-2021	MRS. HEMA	2006050050	9994163441	DR. VIKRAM	FRIENDS OR RELATIVES	Toilet are unclean
17	27-12-2021	MRS. SATHIYAVANI	2010210032	8122233123	DR. VADIVEL	FRIENDS OR RELATIVES	Not attend correct time. Appointment call 9787214441
18	28-12-2021	MR. THIRUPPATHISAMY	2107110050		DR. RAMPRASATH	WEBSITE	Advertisement please increase.
19	30-12-2021	MR. MUTHURAMAN	2112090133	9566268378	DR. RAMAKRISHNAN	FRIENDS OR RELATIVES	We didn't expect more than this service we felt that services fulfill for us. Keep doing great services like this. Please improve appointment call communication
20	30-12-2021	MR. RAJENDRAN	2012040217	9442666386	DR. RAMULU	FRIENDS OR RELATIVES	Blood test report 3 hrs delay
21	30-12-2021	MR. KENNADY	2111150137	8300194037	DR. ARUN	FRIENDS OR RELATIVES	OP consultation getting very late. Internal & external canteen hygienic need to improve more.

Attrition analysis for the Year Jan 2021 to Dec 2021				
Department	Attrition %			
	Average head Count	Left Employees in a year	Department Attrition %	Attrition % on Hospital strength
Adman & Support	338	76	22%	3%
Engineering & Main	62	7	11%	0.3%
Food & Beverage	136	55	40%	3%
House Keeping	290	67	23%	3%
Medical Service	217	50	23%	2%
Medical Service (JR)	53	42	79%	2%
Nursing	737	351	48%	16%
Paramedical	291	60	21%	3%
Peripheral	12	1	8%	0.05%
Transport	38	9	24%	0.41%
Total	2174	718	33%	33%

Performance Review and Planning Tracker sheet 2020						
Key Performance Indicator - Operations Manager				Rating scale:		
Month :	Dec-21			5 Excellent (consistently exceeds standards)		
Name :	P.SARAVANAN			4 Outstanding (frequently exceeds standards)		
Department:	OPERATIONS MANAGER			3 Satisfactory (generally meets standards)		
Designation:	OPERATIONS MANAGER			2 Needs improvement (frequently fails to meet standards)		
DOJ:	25-05-2012			1 Unacceptable (fails to meet standards)		
S. No	Case volume (weightage 20%)	Target		Achieved		Rating
		Medical College	Specialty	Medical College	Specialty	
1	IP Numbers (Nos)			2049	1111	
	OP Numbers (Nos)			27394	7690	
	ER Numbers			1504	-	
	Walk-in health check up			581	-	
	OP to IP conversion ratio			20%	11%	
	ER to IP conversion ratio			6.44%	3.77%	
	OP Pharmacy conversions 100% (No of OP Bills/ OP pharmacy bill)			25168	6103	
	No Of AMA			117	25	
Revenue Target (weightage 20%)						
2	IP Revenue			28994796	135207577	
	IP Unbilled rev				12640850	
	IP ARPD (Average Revenue per Day)			1578000	4361534	
	ALOS (Average Length of stay)				5 Days	
	ARPOB (Revenue per occupied Bed)				115266	
Operational Efficiency (weightage 40%)						
3	IP advance collection -amount pending not to exceed in 24 hours					5
	Check & monitor Nil Bill Cancellation (Avg. No of bills cancelled in a month)					30
	Non contractual discounts to be brought down by 10% less than 3 months average					
	Bad debts (Amount not recoverable) 50 % less than existing 3 months average					
	Concession / Credit authorization forms should be signed within 24 hours -(No Of Credit authorization with out approval					
	Bill pending more than 48 hours - in wards					20 Days
	PMR pending more than 24 hrs -in OT					-
	Billing errors to be minimized-50% less than 3 months average					
	Ensure that all planned discharges should happened 100% as per the planned date.= No patient discharged after the discharge date / Total no of planned dated discharges of the month					

operation

Routine data collection and follow up work 40%.

for 60% need to focus

1) Definitive care IP/OP footfall without opportunity for increasing conversions

2) Need to focus on Revenue base areas and make it profitable

3) patient safety is another area to be focussed more

G. J.

**MASTER HEALTH CHECKUP DEPARTMENT
MONTH OF -DECEMBER -2021**

S.NO	Packages	Package Cost	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	Revenue
1	Primary Health Check up	1200	0	1	5	3	0	0	2	2	2	2	4	0	2	4	1	0	1	3	0	0	5	0	6	5	3	0	4	1	3	6	3	68	81600
2	Executive Diabetic Health Check up	2000	0	1	0	0	0	1	0	1	0	0	0	0	0	1	0	1	0	0	0	1	1	1	1	0	0	0	3	3	0	0	0	14	28000
3	Preventive Health Check Up	2200	1	0	0	2	0	2	0	2	1	1	5	0	2	0	0	3	2	1	0	2	3	2	0	0	0	0	1	1	1	0	4	36	79200
4	Executive Body Health Check Up	3000	0	0	0	0	0	0	0	0	1	1	4	0	0	1	0	0	0	0	0	2	3	2	0	0	0	0	1	0	0	1	16	48000	
5	Well Women Health Check Up	2500	0	0	0	0	0	0	0	0	0	1	1	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	7	17500	
6	Senior Citizen Health Check Up	1250	4	3	0	4	0	5	0	0	3	2	3	0	1	2	3	1	2	3	0	1	6	1	2	4	5	0	5	1	4	4	5	74	92500
7	Whole Body health Check Up	4000	12	5	5	6	0	4	12	5	12	4	7	0	2	22	9	5	12	7	0	6	11	2	7	4	2	0	12	13	10	14	5	215	860000
8	Cardiology Health Check Up	4500	1	4	4	0	0	1	5	0	5	3	8	0	1	2	2	1	3	5	0	1	2	2	2	4	1	0	3	3	0	6	1	70	315000
9	Executive Cardiac Health Check up	6500	0	0	0	2	0	0	0	1	0	0	0	0	0	0	0	1	3	0	0	1	0	0	0	0	0	0	2	2	4	1	0	17	110500
10	Pre-Employment Health Check Up	1000	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	4	4000	
11	Children Health Check Up	900	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	900	
12	Child Obesity Health Check Up	1200	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	3600	
13	Teen Age Health check up	600	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14	Pre-Marriage Health Checkup	2500	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15	TVS - Employees Health Check Up	1200	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16	MHC - BANK OF BARODA	3000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17	MHC -HSPL - 1008	800	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18	MHC - HSPL - 1006	1500	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19	MHC - HSPL - 1002	2200	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
20	MHC - HSPL - 1007	1300	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21	MHC - HSPL - 1010	1000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
22	MHC- HSPL - 1001	3000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3000	
23	MHC - IPHC	750	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24	CEHC-FEMALE	450	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
25	CEHC-MALE	350	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26	FREEDOMFROMDISEASE-F	555	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
27	BPCL AFS PACKAGE	700	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28	FHMC - FOOD HANDLERS MEDICAL C	750	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29	Total No of Patients		18	14	14	17	0	13	16	11	24	15	34	0	8	34	16	12	23	20	0	12	33	13	18	17	11	0	31	24	24	31	21	526	1643800
30	Daily Package Revenue																																	1646300	
31	Daily Extra Investigations Revenue																																	141265	
32	Daily Pre-Employment Health Check up (Vetaminal Employee)		12150	675	0	0	0	13500	0	0	0	675	0	0	0	4050	3375	0	0	0	0	0	0	675	0	0	0	0	0	0	0	0	0	37125	
33	Daily Total Revenue		83515	48375	44650	51900	0	49535	84150	35300	84500	45600	114390	0	25900	126590	56725	42010	91360	67990	0	45045	105330	33520	52210	49575	27180	0	110860	91980	84420	112080	60000		1324690
34	VIP Discount		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35	NET GROSS REVENUE		83515	48375	44650	51900	0	49535	84150	35300	84500	45600	114390	0	25900	126590	56725	42010	91360	67990	0	45045	105330	33520	52210	49575	27180	0	110860	91980	84420	112080	60000		1324690

Total No of Working Days 27

Total No of Patients: 526+55=581

{VELAMMAL EMPLOYEE} = 55

Average Census

22

Remarks 21.12.21-- ECAHC-10000(SPL)

INCHARGE - MHC

Performance Review and Planning Tracker sheet 2021

Billing - Incharge Medical College

Rating scale:

Month : JAN 2021-DEC 2021

5 Excellent (consistently exceeds standards)

Name : S.DHIVYA

4 Outstanding (frequently exceeds standards)

Department: BILLING

3 Satisfactory (generally meets standards)

Designation: INCHARGE(VMCH)

2 Needs improvement (frequently fails to meet standards)

DOJ: 01.02.2013

1 Unacceptable (fails to meet standards)

Billing Accountability (weightage 35%)

Target

Achieved

%

Rating

1

Average Net Medical Bill collection rate per month (Total bill payment/(gross bill amount-write off& adjustments)

3,89,644.00

34,78,90,184.00

2,89,90,848.67

High dues- pending amount

21,24,850.00

IP concessions (excluding corporate)on total IP Bills

24,89,314.00

Concession / credit authorization Process adherence

100%

100%

Doctor concession in CM scheme and other corporate bills -Process adherence

-

Ensure Investigations, procedure & instrument chages are properly entered in billing chat

98%

2%

Ensure the bills are raised as per our tariff

60%

40%

Bad debts (Amount not recoverable)

Billing process Efficiency(weightage 25%)

2

Accuracy levels-Number of billing errors (overall Billing)

9564

797

Bill pending more than 48 hours : No of Incedents

10950

912.5

Discharge Initiation Status - Not more than 12 hours

97%

3%

Bill Pending Ward - Not more than 24 hours

90%

10%

PMR Pending - Not more than 24 hours

97%

3%

General Debtors More than 30 days Bills - Nil

Patient Satisfaction (weightage 20%)

3

Number of complaints regarding Billing department.....

98%

2%

Patient satisfaction score for billing should be high

99%

1%

Waiting period; Internal- Reduction of lead-time

95%

5%

Omission Error -Omission error - zero cases

99%

1%

People Growth and Development (weightage 10%)

4

Attrition rate: retaining 75% of new joiners at least for 1 year

100%

Retention : Retention of competent staff

99%

staff quality- >90% of the department should be manned by staff who know all mandatory processes and are multi skilled

Assessment score for Staff Skills - Mean score more than 80 %

75%

OTHER LAB INVESTIGATION
PROCEDURE TRAFF

ICU QUANTITY
WARD SERVICES

60.1

Focus is on
collection and
Billing process
efficiency needs
to be focus

9

Team Performance (weightage 10%)

5	No of Patient complaints against your team member			
	No of Appreciation from received by your team member from patients			
	Major work related Incidents- No of incidents			
	Corrective Action taken or not			
	Repeted incidents happened if any			
	No of Habitual Late commers in your team			
	No of employees found leave with out information			
	No of employees found not following Grooming standards			
	No. of employees Oral warning given (if any)			
	No. of Written Memo given to employees (if any)			

Overall performance rating: _____

Employee Signature :

S. Dink

HOD Signature:

Date:

07/02/2022

Date

Reviewer Signature

Date:

Shivya

- ① She is a independant contributor
- ② Knowledge on her job is limited to "collaboration" only
- 3) She has data but not in a orderly manner
- 4) She has limited knowledge on interpreting data to take decision
- 5) She can be ~~needs~~ guided to create work processes and monitor deviations
- 6) In the current work flow, she has not able to document control mechanism to bring billing efficiency as per her SOP

Area of Improvement

- 1) She needs to understand process gaps in the work flow and work out control mechanisms
- 2) She needs to create Billing related data analytics templates to avert leakage.

q.f.

Performance Evaluation and Review .

Radiology- Technician		Rating scale:	
Month :		5	Excellent (consistently exceeds standards)
Name :	Caranya Wirubai scali	4	Outstanding (frequently exceeds standards)
Department:	Radiology	3	Satisfactory (generally meets standards)
Designation:	Radiographer	2	Needs improvement (frequently fails to meet standards)
DOJ:	05.06.2018	1	Unacceptable (fails to meet standards)
Staff Productivity & Technical skills Weightage (50%)		Score	Comments - If you are giving mark 5& 4 you need to specify
1	Examinations performance skills	5	
2	Preparing equipment for use as needed.	4	
3	Anatomy Knowledge	5	
4	Ensuring safety of patients during exams.	5	
5	Reporting Quality	5	
6	Radiation safety and protection	5	
7	Patient positioning techniques	5	
8	Monitoring patients during exams.	5	
9	Diagnosing equipment problems	5	
10	Interpreting clinical information about patients	5	
Total Score for 50 marks		49	-
Hospital Behavioral Expectations (25%)			
		Score	Comments - If you are giving mark 5& 4 you need to specify
Courtesy	A. Smile and maintain eye contact.	5	
	B. Assist people in finding their way; escort them to their destination.		
	C. Respect the rights and privacy of all customers.		
	D. Keep noise levels low in work areas.		
Communicate Effectively:	A. Listening to and respecting others in all requests	4	
	B. Providing information in a timely manner		
	C. Following through with commitments		
	D. Expressing yourself in a positive and respectful manner		
Teamwork:	A. Take ownership and responsibility for addressing problems.	4	
	B. Treat coworkers with courtesy, honesty and respect. Welcome		
	C. Address problems by going to the appropriate supervisor.		
	D. Avoid last minute requests, and offer to help fellow employees whenever		

Customer Waiting	A. Educate families about processes and provide a comfortable atmosphere	5	
	B. Apologize if a wait occurs. Always thank the customer for waiting.		
	C. Update family members periodically while a patient is undergoing a		
	D. Never confuse a patient or family member by using medical jargon or		
Ownership, Image and Attitude	A. Take pride in Velammal Hospital -Accept the responsibilities of his job	4	
	B. Make no inappropriate or negative comments about patients, co-		
	C. Present a positive image; Have a sense of ownership in providing the best		
	D. Demonstrate pride in Velammal hospital by keeping areas clean and safe.		
Total Score for		22	
Staff Development & Discipline (25%)		Score	Comments - If you are giving mark 5& 4 you need to specify
1	Understands technical aspects of one's job by continuously building	5	
2	Completes 100% of yearly mandatory hospital education programs:	4	
3	Take pride in herself and her appearance : Wear badge at work - Dress appropriately for her role - Adhere grooming standards - Take good care of herself and others	3	
4	Attendance and punctuality	5	
5	Disciplinary Action Records	4	
Total Score for 25 marks		20	
Overall performance rating:		-	
Employee Signature <i>Dr. S. S. Sadi</i>		HOD Signature <i>[Signature]</i>	
Date: <i>20/11/20</i>		Date:	
Reviewer Signature			
Date:			

IT maintenance work
70%

Scope for development
work

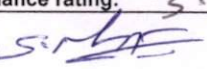
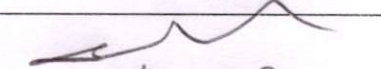
Performance Review and Planning 2021						
IT manager			Rating scale:			
Month :	Jan 21 - Dec - 21		5 Excellent (consistently exceeds standards)			
Name :	Anilsethan - R		4 Outstanding (frequently exceeds standards)			
Department:	IT		3 Satisfactory (generally meets standards)			
Designation:	Manager		2 Needs improvement (frequently fails to meet standards)			
DOJ:	24/06/2015		1 Unacceptable (fails to meet standards)			
Internal Customer (weightage 20%)			Target	Achieved	%	Rating
1	Complaints Turnaround time - As per the Guide lines (No of Complaints)					4
	Proposing new features - As per the request from the Functional Users (No of requests)					
Process Efficiency (weightage 20%)						4
2	Managing the Complaints efficiently by prevent, record and monitoring of complaints(As per the guidelines) documentary evidence					
	Efficient database administration (Issues and complaints) documentary evidence					
	Standardization of top reports/elimination of unused reports- documentary evidence				90	
	Server Up Time - in %				99.5%	
Evolve & document SOPs for all IT processes- documentary evidence					95	
IT Security (weightage 20%)						5
3	Initiative taken as per norms - Documentary evidence					
	Ensuring data Integrity- Issues - Documentary evidence					
	Ensuring data security Issues - Documentary evidence					
	Ensuring safety from Cyber attack- Issues - Documentary evidence					
Application Development Life Cycle(weightage 20%)						4
4	No of New application developed					
	Cycle Time: Application Development - The average amount of time needed to create an application, starting from fact-finding and requirements gathering until the application is introduced.					
	Ability to finish projects on time - Capacity to produce specific project milestones and complete the project within the specified schedule.					
	No of complaints received and resolved					
People Growth and Development (weightage 10%)						4
5	Attrition rate: retaining 75% of new joiners at least for 1 year					
	Retention : Retention of competent staff					
	staff quality- >90% of the department should be manned by staff who know all mandatory processes					
	Assessment score for Staff Skills - Mean score more than 80 %					
	Team Performance (weightage 10%)					
	No of Patient complaints against your team member					
	No of Appreciation from received by your team member from patients					
	Major work related Incidents- No of incidents					
	Corrective Action taken or not					
	Repeted incidents happened if any					
No of Habitual Late commers in your team						
No of employees found leave with out information						
Overall performance rating: _____						
Employee Signature _____			HOD Signature: _____			
Date: 08/02/2022			Date _____			
Reviewer Signature _____						
Date: _____						

I.T.: Anil

- As a Team leader he know his role as well as his team members role.
- He has allocated the responsibilities to his team member and created a tracking mechanism
- His team member are keeping track records for all their activities.

- Area of Improvement:

There is a scope for fixing targets for his/team members activities to measure their performance

Performance Evaluation and Review .				
IT Department			Rating scale:	
Month :			5 Excellent (consistently exceeds standards)	
Name :	S.Madhan Pap		4 Outstanding (frequently exceeds standards)	
Department:	Information Technology		3 Satisfactory (generally meets standards)	
Designation:	System Analyst		2 Needs improvement (frequently fails to meet standards)	
DOI:	15.07.2014		1 Unacceptable (fails to meet standards)	
HIS Support and Maintenance			Self	HOD
1	HIS support :No of complaints received and resolved	4		Comments - If you are giving mark 5& 4 you need to specify
	Monitoring Application Flow	4		Minimum 5 complaints per day
	Monitoring Report	4		Monitoring daily the work flow
	Monitoring User access	4	3	Execution of report verified and following up of new reports
	Implementing the new features	4		User access and rights verification and removal of relieved users periodically
	User Training	4		Gathering of requirement and coordinate with Kranium and implement in live
	User feedback	4		Regular user training for the new users
Call Centre Support				
2	Implementation of Call Centre	5		Implemented the new call centre application
	Implementing the new features	5		Added features like dropdowns auto answer
	User Training	5	3	Training given for the user
	Issues & Support	4		Followup for the issues and regular followup done
IPACS Support and Maintainance				
3	Switch over of IPACS to RASTER	5		Switching of IPACS completed
	Monitoring of IPACS	5		IPACS utility is monitored periodically
	User access	5		Individual user access created and provided
Mail Server Support and Maintainance				
4	Implementation of New Mail server	5		Implemented the new mail server
	User Training	5	3	Training given to the users
	Document followup and renewal of amc	5		Regular followup of the issues and renewal done
New SMS Panel Support				
5	Implementation of New SMS Panel	5		New SMS panel implemented
	User Training	5		Training given to the user
	Monitoring of usage of SMS	5		Regular monitoring of user statistics verified
NABH Support				
6	Document Preparation for NABH	5		Document prepared and filed the details provided
	User Training for NABH	4	4	Training and preparation of materials provided
	NABH related activities	4		Evaluation attended and activities done
NAAC Support				
7	Document Preparation for NAAC	5	4	Document prepared and filed the details provided
	NAAC related activities	4		Activities and document verification done
Other Department Support				
8	Hardware Support	4		Supported the hardware related work
	Application Deveopment Support	5	3	Supported the Software related work
	AV Support	4		Supported the AV related work
	Network Support	4		Supported the network related work
People Growth and Development (weightage 20%)				
9	No of Patient complaints against her/him			
	No of Appriciation from received r from patients			
	Major work related Incidents- No of incidents			
	Repeted incedents happened with her/him	4	3	
	No times came late	2		
	No of times found leave with out information	5		No leave taken without intimating to manager
	No of times found not following Grooming standards	4		
	No. of times Oral warning given (if any)	4		
	No. of Written Memo given to employees (if any)	4		
Overall performance rating: 3.5				
Employee Signature 		HOD Signature 		
Date: 15.2.2022		Date: 08/02/2022		
Reviewer Signature				
Date:				

Performance Review and Planning Tracker sheet 2019-20									
Maintenance - Manager					Rating scale: *				
Month :Jan 2021 to Dec 2021					5 Excellent (consistently exceeds standards)				
Name : Senthilkumar VH 3896					4 Outstanding (frequently exceeds standards)				
Department: Project & Maintenance					3 Satisfactory (generally meets standards)				
Designation: Project Engineer civil					2 Needs improvement (frequently fails to meet standards)				
DOJ: 01/05/2016					1 Unacceptable (fails to meet standards)				
Complaint Management (weightage 30%)					Received	Completed	Balance	%	Score
1	1	No of work requests received and processed with in lead time			105	103	2	98	4
	2	Maintenance work orders completed as per the scheduled period or required by date			103	103	0	100	
	3	The percentage of maintenance work requiring rework			0	0	0	0	
	4	No. of project received and completed			10	9	1	90	
	5	Percentage of Work Orders delayed over the specified time period due to non availability of spares / consumables / manpower			10	9	1	10	
2	Cost Control (weightage 25%)								
	1	Repair & Maintenance Cost (till date trend)			Normal			3	3
	2	Monthly power & Fuel Cost (till date trend)			Normal			3	
	3	Store material purchase			Normal			3	
3	Process Improvements (weightage 25%)								
	1	Incident related to preventive maintenance (till date trend)						3	3.6
	2	Maintenance schedules (Daily) (till date trend)						5	
	3	Maintenance schedules (Weekly) (till date trend)						4	
	4	Maintenance schedules (Monthly) (till date trend)						4	
	5	Maintenance schedules (quarterly) (till date trend)						3	
	6	Reduction of critical incidents (till date trend)						3	

74.5

66.1

72.1

86.1

People Growth and Development (weightage 10%)			
4	Attrition rate: retaining 75% of new joiners at least for 1 year	4	3.5
	Retention : Retention of competent staff	4	
	staff quality- >90% of the department should be manned by staff who know all mandatory processes and are multi skilled	3	
	Assessment score for Staff Skills - Mean score more than 80 %	3	
Team Performance (weightage 10%)			
5	Leadership quality	4	3.9
	Major work related Incidents- No of incidents	4	
	Corrective Action taken or not	4	
	Repeted incidents happened if any	4	
	No of Habitual Late commers in your team	4	
	No of employees found leave with out information	4	
	No of employees found not following Grooming standards	4	
	No. of employees Oral warning given (if any)	3	
	No. of Written Memo given to employees (if any)	4	
Overall performance rating: <u>3.6</u> Comments - If you are giving mark 5 & 4 you need to specify Employee Signature <i>K. P. 26/01/22</i> Date: Reviewer Signature Date:			
HOD Signature: <i>[Signature]</i> Date <i>26-1-2022</i>			

15

80.1

Performance Review and Planning Tracker sheet 2021

AFC		Rating scale:			
Month :		5 Excellent (consistently exceeds standards)			
Name :	K. NITHYA	4 Outstanding (frequently exceeds standards)			
Department:	Accounts & Finance	3 Satisfactory (generally meets standards)			
Designation:	AFC	2 Needs improvement (frequently fails to meet standards)			
DOJ:	15.1.2017	1 Unacceptable (fails to meet standards)			
Financial report & compliance(weightage 20%)		Target	Achieved	%	Rating
1	Ensure that Books are closed on or before given date of the following month (with all provision entries passed including depreciation etc)	Yes	Yes	90%	18%
	Ensure that adequate variance analysis report is prepared before given date of the following month (explaining all variance))	Yes	Yes	85%	
	All Statutory Compliance is taken care (Financial) on time)	Yes	Yes	90%	
	Income tax queries are properly attended on time	Yes	Yes	90%	
	Liaison with external Audit through effective coordination and completion of Audit before specific deadline.	Yes	Yes	90%	
	No difference between unaudited financial & audited financials as per auditor's statement	Yes	Yes	90%	
	Timely release of payments	Yes	Yes	90%	
	Process to be independently Audited every month (Cash, Card, Receivables, Bank, Inventory, Compliance, Discharges, OPD Management, Facility etc)	Yes	Yes	80%	
Tariff revision(weightage 10%)					
2	Tariff revision, effective implementation and analytical impact on Top Line and Bottom line	Yes	Yes	95%	9.5%
Fund managemet (effective rupee utilization)(weightage 20%)					
3	Ensure that all Term Loans, Overdraft are readjusted to Market rates	Yes	Yes	90%	18%
	Cash flow planning on a Monthly basis in advance (dissected into Weekly)	Yes	Yes	90%	
	Daily Loan repayment discipline to be effectively implemented resulting in effective Rupee utilizations	Yes	Yes	90%	
	No default in Interest, Principal repayments (all on time)	Yes	Yes	90%	
Data analytics(weightage 10%)					
4	On time MIS report - every month	Yes	Yes	90%	8.8%
	Service wise, Department wise, Doctor wise, Revenue Vs Costs, Overheads, Receivables, Payables, Inventory, Key ratios, slicing	Yes	Yes	90%	
	New Perspective every Quarter through slicing and dicing of data (Segmentation approach)	Yes	Yes	85%	
Internal audit schedule(weightage 20%)					
5	Internal audit & financial audit findings - follow up & reconciliation - corrective & pervetive action	Yes	Yes	85%	16%
	proactive detection , reporting & rectification of fraudulent activities on an ongoing continual basis - corrective & prevetive action	Yes	Yes	80%	
	Evolve mechanisms to arrest & prevent pilferage on a sustainable basis	Yes	Yes	75%	
	ensure that stock verification is done for stores & pharmacy every month - Corrective & prevetive action to be ensured	Yes	Yes	85%	
	surprise verification at cash points	Yes	Yes	50%	
	Tariff revision & implementation & validation with billing dept	Yes	Yes	90%	

People Growth and Development (weightage 10%)							
6	Attrition rate: retaining 75% of new joiners at least for 1 year	Yes	Yes	100%	9%		
	Retention : Retention of competent staff	Yes	Yes	90%			
	staff quality- >90% of the department should be manned by staff who know all mandatory processes and are multi skilled	Yes	Yes	90%			
	Assessment score for Financial Skills - Mean score more than 80 %	Yes	Yes	90%			
Team Performance (weightage 10%)							
7	No of Patient complaints against your team member				9%		
	No of Appriciation from received by your team member from patients						
	Major work related Incidents- No of incidents						
	Corrective Action taken or not						
	Repeted incedents happened if any						
	No of Habitual Late commers in your team						
	No of employees found leave with out information						
	No of employees found not following Grooming standards						
	No. of employees Oral warning given (if any)						
	No. of Written Memo given to employees (if any)						
Overall performance rating: 88%							
<div style="display: flex; justify-content: space-between;"> <div> Employee Signature <u>Ksithy</u> Date: <u>11.2.22</u> Reviewer Signature Date: </div> <div> HOD Signature: Date </div> </div>							