



CDN-20011/273/2026-COORDINATION-NMC
Government of India
National Medical Commission
(Policy & Coordination Division)



Pocket - 14, Sector - 8,
Dwarka Phase-1, New Delhi - 110 077.
08-10-2026.

PUBLIC NOTICE

Subject: Constitution of '*Patient Safety Committee / Cell*' in Medical Colleges / Medical Institutions.

A communication dated 08.05.2026 from the Additional Director General of Health Services (Addl. DGHS), Ministry of Health & Family Welfare, Government of India, regarding strengthening of patient safety practices in Medical Colleges and Medical Institutions across the country, has been received in the National Medical Commission (NMC) (copy alongwith attachments is enclosed).

2. The National Patient Safety Secretariat (NPSS), Dte.GHS (MoHFW), is undertaking various initiatives to institutionalize a culture of patient safety, appropriate protocols and Standard Operating Procedures (SOPs) in healthcare institutions. The objective is to improve health outcomes, reduce avoidable treatment-related costs, enhance patient satisfaction and strengthen public trust in healthcare services.

3. In this regard, all Deans / Principals / Directors / Heads of Medical Colleges / Medical Institutions are advised to designate '*a Patient Safety Nodal Officer*' for their Medical College and Hospital.

4. Further, all Medical Colleges / Medical Institutions are required to constitute '*a Patient Safety Committee/Cell*' with representation from relevant specialties and domains of patient safety. The Committee / Cell shall facilitate the implementation, monitoring and periodic review of patient safety practices, protocols and SOPs in the institution.

5. All Medical Colleges / Medical Institutions are therefore requested to share the details and composition of the '*Patient Safety Committee/Cell*', along with the details of the designated '*Patient Safety Nodal Officer*', with the National Patient Safety Secretariat at secretariatpatientsafety@gmail.com.

Digitally signed by
Dr.Raghav Langer
Date: 08-10-2026
12:44:48

(Dr. Raghav Langer)
Secretary, National Medical Commission

To,
The Dean / Principal / Director of All Medical Colleges / Institutions.

डॉ. (प्रो.) सुजाता चौधरी
Dr. (Prof.) Sujata Chaudhary
अपर महानिदेशक / ADDL DGHS



सत्यमेव जयते

भारत सरकार
स्वास्थ्य सेवा महानिदेशाधीन
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
कर्तव्य भवन-1, नई दिल्ली-110 001

Government of India
Directorate General of Health Services
Ministry of Health & Family Welfare
Kartavya Bhawan-1, New Delhi-110 001
Tel. No. 011-2401 3911/ Mob. 9999051546
E-mail : Sujata.chaudhary64@gov.in
D.O.No. Z.28015/12/2023-PatientSafety
दिनांक / Date 08.05.2026



Subject: Constitution of Patient Safety Committee/Cell in your Medical College

Dear Colleague,

Patient Safety in India is a critical concern, characterized by high rates of avoidable medical errors, infections and diagnostic failures. For instance, an estimated 52 lakh injuries occur annually due to medical errors, including medication errors and hospital-acquired infections (HAIs).

With the objective to strengthen Patient Safety practices in Medical Colleges across the country, the National Patient Safety Secretariat (NPSS), MoHFW seeks to institutionalize patient safety culture, protocols and Standard operating Procedures (SoPs) to improve health outcomes with reduction in treatment costs, thereby enhancing patient satisfaction and strengthening of public trust in healthcare institutions.

Broadly eleven domains of patient safety i.e. Medication Safety, Surgical Safety, Blood Transfusion Safety, Medical Device Safety, Laboratory -and Diagnostic Safety, Infection Prevention & Control (IPC)/Healthcare-Associated Infections (HAIs), including Antimicrobial Resistance (AMR), Operational Research in Patient Safety, Patient & Family Engagement, Vaccine and Injection Safety, Facility Safety (including Biomedical Waste Management, Fire Safety, Structural Safety, and Environmental Safety) and AYUSH are addressed by NPSS.

In view of the above, you are hereby requested to designate a Patient Safety Nodal Officer in your Medical College and Hospital. The officer should have appropriate seniority and command to implement patient safety practices in the institute (for eg. MS/Addl. MS/Director etc). A previous communication on the subject is attached.

Further, it is mandated to form a Patient Safety Committee in your institution. The committee is to be chaired by Director/ Head of Institution/ MS. The committee shall have members from all the eleven domains of patient safety. The list of domains and specialties is annexed. The committee composition may be shared at secretariatpatientsafety@gmail.com.

With your continued collaboration and commitment, we can build a resilient healthcare institution where zero harm becomes a norm.

Encl: As Above

Sujata Chaudhary
(Dr. Sujata Chaudhary)

To,

Director/Executive Director/MS/Principal/Head of Institution of all Medical Colleges (Govt. & Pvt.)

Copy to: The Secretary, National Medical Commission.

Dir. (P & C) Dy. No. 1508

Dated 6.10.26

Annexure

Sl.No.	Name of the Patient Safety Domain	Only one faculty to be nominated from the Specialities as listed below	Name & Designation of the nominated faculty	Mobile no.	Email ID
1	Medication Safety	Pharmacology/General Medicine /related Medical super specialities (Cardiology, Neurology, Nephrology, Oncology ,Endocrinology, Hepatology, Infectious Diseases, Rheumatology, Pulmonary & Critical Care ,Geriatric Medicine Emergency & Critical Care Medicine)			
2	Surgical Safety	Anaesthesiology/General Surgery/ related Medical super specialities (Neurosurgery ,Urology ,Cardiothoracic & Vascular Surgery (CTVS) ,Plastic & Reconstructive Surgery, Paediatric Surgery ,Surgical Oncology ,GI / HPB Surgery, Vascular Surgery ,Endocrine Surgery ,Spine Surgery/ENT/Ophthalmology			
3	Blood Transfusion Safety	Transfusion Medicine/Pathology/Biochemistry / clinical haematology			
4	Medical Device Safety	Hospital Administration/Biomedical Engineering/ Respiratory Medicine /Community Medicine/Radiology /Bio chemistry			
5	Lab & Diagnostic Safety	Biochemistry/Pathology/Microbiology /Lab Medicine /Radiology/Nuclear Medicine			
6	IPC/ HAI – AMR	Microbiology/Hospital Administration/Internal Medicine/ Orthopaedics / Dermatology/Obstetrics & Gynaecology (OBG)/ General Surgery/ related Medical super specialities/ ENT/Ophthalmology/Respiratory Medicine			
7	Operational Research	Community Medicine/Anatomy/ Physiology/Forensic medicine/Biochemistry / Pharmacology/ General Medicine /related Medical super specialities			

8	Patient, Family & Community Engagement	Community Medicine /Physiology/Anatomy/ Dermatology / Psychiatry/Hospital Administration/ Pharmacology/ Obstetrics & Gynaecology (OBG)/Anaesthesiology			
9	Vaccine & Injection Safety	Community Medicine /Internal Medicine/Paediatrics/ Psychiatry /Immunization Nurse			
10	Facility Safety	Hospital Administration/Engineering/Foren sic Medicine /Radiology / General Surgery/ related Medical super specialities			
11	AYUSH	Hospital Administration/AYUSH			



प्रो.(डॉ.) अतुल गोयल

Prof. (Dr.) Atul Goel

MD (Med.)

स्वास्थ्य सेवा महानिदेशक

DIRECTOR GENERAL OF HEALTH SERVICES



सत्यमेव जयते

भारत सरकार
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
स्वास्थ्य सेवा महानिदेशालय
Government of India
Ministry of Health & Family Welfare
Directorate General of Health Services

D.O. Z.28015/12/2023-PatientSafety

15 January 2024

Dear Colleague,

Patient safety is recognized as one of the key important components of quality of care and many initiatives have been taken at central and state level to address issues related to it. In recent years there has been an increasing attention on improving quality of healthcare in India within broader Universal Health Coverage (UHC) context. Challenges in patient safety in India range from unsafe injections and biological waste management to medication and medical device safety, high rates of health care associated infections, anti-microbial resistance etc.

Just to cite an instance, Patient safety starts right from the moment the patient enters the Hospital gates, during stay in the hospital and until her/his exit. Thus, apart from the facilities inside the hospital, it also includes ensuring availability of decongested entry and exit points of the health facility for a seamless movement.

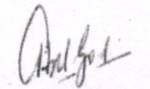
Hence, to streamline patient safety practices it is requested to constitute a Patient Safety Cell at your institution and ensure the following:

- Appoint a Patient Safety Nodal Officer supported by a team comprising of representation from related departments of your institution.
- Ensure Stringent IPC activities to prevent Hospital Acquired Infections, Medication Safety, Surgical Safety, Hand Hygiene, Lab safety measures etc.
- Sensitization /Training sessions of healthcare professionals including all hospital staff working in the hospitals.
- Display relevant IEC materials on patient safety in hospital premises.

A compliance report with the details of the Nodal Officer (email id, contact number) and committee constitution order may be shared with Dr L Swasticharan, Addl DDG, Director EMR & Head, Patient Safety Secretariat, Dte.GHS, MoHFW, GoI at swasticharan.L@nic.in and avinash.sunthlia23@ncdc.gov.in latest within 15 days of the receipt of the letter.

With Warm Regards

Yours sincerely,


(Atul Goel)

To

Principal/Dean All Medical Colleges
Director, All AIIMS, PGIMER, JIPMER and other INI's

Cc :

PSO to Secretary, HFW
PS to Head, Patient Safety Secretariat, Dte.GHS, MoHFW

Annexure: Terms of Reference (ToR) – Patient Safety Cell

1. Background

In alignment with the National Patient Safety Action Plan (NPSAP) 2030 and building upon the National Patient Safety Implementation Framework (NPSIF) 2018–2025, healthcare institutions shall establish structured institutional mechanisms to strengthen patient safety systems and ensure safe healthcare practices.

The Patient Safety Cell shall serve as the institutional mechanism for implementation, coordination, convergence, and promotion of patient safety practices across all domains within the healthcare facility. The Cell shall provide a comprehensive and integrated approach to patient safety by strengthening coordination among existing committees, and departments, thereby avoiding duplication of efforts and promoting streamlined implementation of patient safety activities.

2. Purpose

To establish a multidisciplinary institutional mechanism for strengthening patient safety systems, promoting a culture of safety, reducing preventable patient harm, and supporting continuous improvement towards healthcare practices.

3. Scope

The Patient Safety Cell shall oversee patient safety activities across all clinical, diagnostic, administrative, and support services within the healthcare institution.

4. Composition

The Patient Safety Cell shall be constituted through a formal administrative order.

The Patient Safety Cell shall include:

- Head of Institution / Medical Superintendent / Director – Chairperson
- Patient Safety Nodal Officer – Member Secretary
- Nursing Superintendent / Nursing Representative
- Quality Manager / NABH Coordinator
- Any other member as deemed appropriate by the Chairperson

The institution to nominate faculty representatives/domain leads from relevant specialties for all patient safety domains, as applicable.



Sl. No.	Patient Safety Domain	Suggested Specialty/Department for Nomination*
1	Medication Safety	Pharmacology / General Medicine / related Medical Super Specialities (Cardiology, Neurology, Nephrology, Oncology, Endocrinology, Hepatology, Infectious Diseases, Rheumatology, Pulmonary & Critical Care, Geriatric Medicine, Emergency & Critical Care Medicine)
2	Surgical Safety	Anaesthesiology / General Surgery / related Surgical Super Specialities (Neurosurgery, Urology, CTVS, Plastic & Reconstructive Surgery, Paediatric Surgery, Surgical Oncology, GI/HPB Surgery, Vascular Surgery, Endocrine Surgery, Spine Surgery) / ENT / Ophthalmology
3	Blood Transfusion Safety	Transfusion Medicine / Pathology / Biochemistry / Clinical Haematology
4	Medical Device Safety	Hospital Administration / Biomedical Engineering / Respiratory Medicine / Community Medicine / Radiology / Biochemistry
5	Laboratory & Diagnostic Safety	Biochemistry / Pathology / Microbiology / Laboratory Medicine / Radiology / Nuclear Medicine
6	IPC/HAI-AMR	Microbiology / Hospital Administration / Internal Medicine / Orthopaedics / Dermatology / Obstetrics & Gynaecology / General Surgery / related Medical Super Specialities / ENT / Ophthalmology / Respiratory Medicine
7	Operational Research	Community Medicine / Anatomy / Physiology / Forensic Medicine / Biochemistry / Pharmacology / General Medicine / related Medical Super Specialities
8	Patient, Family and Caregiver Engagement	Hospital Administration / Psychiatry / Psychology / Community Medicine / Nursing / Medical Social Work
9	Vaccine and Injection Safety	Community Medicine / Paediatrics / Pharmacology / Microbiology / General Medicine / Nursing
10	Facility Safety	Hospital Administration / Biomedical Engineering / Civil Engineering / Electrical Engineering / Fire & Safety / Infection Control
11	Safety in AYUSH Systems	AYUSH Specialties including Ayurveda, Yoga & Naturopathy, Unani, Siddha, Homoeopathy, Sowa-Rigpa

* Institutions may nominate faculty/member from the relevant specialty/domain based on institutional availability and requirements.

5. Roles and Functions

The Patient Safety Cell shall:

- Coordinate implementation of the National Patient Safety Action Plan (NPSAP) 2030 and patient safety initiatives across all domains in the healthcare institution.
- Promote a culture of safety, learning, supportive supervision and non-punitive reporting.
- Facilitate reporting, review, and analysis of patient safety incidents, near misses, and high-risk events
- Identify system gaps and recommend corrective and preventive measures
- Conduct or facilitate Root Cause Analysis (RCA) for incidents, wherever required
- Support implementation of national patient safety priorities, advisories, guidelines, and institutional safety practices
- Coordinate with the National Patient Safety Secretariat (NPSS), IPSN Nodal Institutions, and relevant authorities for implementation of patient safety activities and programmes
- Promote patient safety training, capacity building, IEC/awareness activities, research, innovation, and dissemination of best practices
- Facilitate audits, assessments, monitoring, and institutional safety learning activities
- Promote patient, family, and caregiver engagement in patient care
- Facilitate convergence and coordination among institutional committees, departments, and safety-related activities
- Maintain institutional documentation, reporting, and learning systems related to patient safety

7. Meetings

- Meetings shall be conducted periodically as decided by the institution (Monthly/Quarterly)
- Emergency meetings may be convened for serious patient safety incidents
- Minutes of meetings and action points shall be recorded, maintained and shared with NPSS.

8. Reporting Mechanism

- The Patient Safety Cell shall submit periodic reports to the head of the institution and the National Patient Safety Secretariat (NPSS) – monthly/quarterly.
- Reports to include minutes of patient safety cell meetings, patient safety incident summaries, Root Cause Analysis (RCA) findings, Corrective and Preventive Actions (CAPA), Action Taken Reports (ATRs), and key patient safety indicators
- Action Taken Reports (ATRs) shall be reviewed in subsequent meetings for follow-up and system improvement
- Any other reporting mechanism/framework mandated by the National Patient Safety Secretariat (NPSS) shall also be followed by the institution

9. Record Keeping

Necessary records may be maintained by the cell.

10. Integration with Institutional Systems

- The Patient Safety Cell shall serve as the institutional platform for coordination and convergence of patient safety-related activities across departments, committees, and systems within the healthcare facility
- Existing institutional mechanisms related to infection prevention and control, medication safety, blood transfusion safety, biomedical equipment safety, quality assurance, and other relevant areas may function in coordination or converge under umbrella of Patient Safety Cell
- Patient safety activities shall align with national patient safety priorities, institutional policies, accreditation standards, and applicable reporting systems/frameworks prescribed by the National Patient Safety Secretariat (NPSS)
- Healthcare institutions may adopt appropriate digital systems, including HMIS/HIS platforms, for patient safety reporting, monitoring, and learning

11. Review and Accountability

- Performance of the Patient Safety Cell may be reviewed periodically by the head of the institution/NPSS
- Feedback and guidance to be incorporated for continuous strengthening of patient safety systems