



AARUPADAI VEEDU MEDICAL COLLEGE & HOSPITAL

Vinayaka Mission's Puducherry Campus

VINAYAKA MISSION'S RESEARCH FOUNDATION - Deemed to be University

(Recognized by : MCI, New Delhi; Ministry of Health & Family Welfare, Govt of India; NAAC & NABH Accredited)

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Date:05.09.2025

NURSING AUDIT COMMITTEE

The Nursing Audit Committee has been constituted with the following Members.

Committee Designation	Name	Academic Designation
Chairperson	Dr. K. Dhamodaran	Medical Superintendent
Vice Chairperson	Ms. Sasikala	Chief Nursing Officer
Convener	Ms. Justin Mary	Nursing Superintendent
Members	Ms. Susai Mary Denis	Deputy Nursing Superintendent
	Ms. Banumathi	Deputy Nursing Superintendent
	Ms. Guna sundari	Deputy Nursing Superintendent
	Ms. Jeyanthi Jeyarakine	Deputy Nursing Superintendent
	Ms. Sumathi	Assistant Nursing superintendent
	Ms. Esther Rubeyal	Assistant Nursing superintendent
	Ms. Pushpa	Assistant Nursing superintendent
	Ms. Shiba Catherine	Assistant Nursing superintendent
	Ms. Kalaimani	Assistant Nursing superintendent
	Ms. Jeevitha	Head Nurse
	Ms. Sivagama Sundari	Infection Control Nurse
	Dr. Gurudatta Sadashiv Pawar	Quality Team
	Ms. Dhanammal	
	Ms. Jayanthi	
	Ms. Ezhilarasi	
	Ms. Tamizhselvi	
	Ms. Renuga	


DEAN

Dr. R. MANI, M.D.,
DEAN

Aarupadai Veedu Medical College & Hospital,
Kirumampakkam, Puducherry-607 403.

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Continuation Sheet

ROLES OF NURSING AUDIT COMMITTEE

DEFINITION OF NURSING AUDIT:

According to Ellison "Nursing audit refers to assessment of the quality of clinical nursing".

PURPOSES OF NURSING AUDIT:

- Evaluating nursing care given.
- Achieves deserved and feasible quality of nursing care.
- Stimulant to better records.
- Focuses on care provided and not on care provider.
- Contributes to research

METHOD TO DEVELOP CRITERIA:

1. Define patient population.
2. Identify a time framework for measuring outcomes of care.
3. Identify commonly recurring nursing problems presented by the defined patient population.
4. State patient outcome criteria.
5. State acceptable degree of goal achievement.
6. Specify the source of information.
7. Design and type of tool-
 - a. Quality assurance must be a priority,
 - b. Those responsible must implement a programme not only a tool,
 - c. A co-ordinator should develop and evaluate quality assurance activities,
 - d. Roles and responsibilities must be delivered,
 - e. Nurses must be informed about the process and the results of the programme,
 - f. Data must be reliable,
 - g. Adequate orientation of data collection is essential,
 - h. Quality data should be annualized and used by nursing personnel at all levels.

AUDIT CYCLE:

Set standards



implement change observe practice



Compare with standards

AUDIT COMMITTEE:

- Before carrying out an audit, an audit committee should be formed, comprising of a minimum of five members who are interested in quality assurance, are clinically competent and able to work together in a group.
- It is recommended that each member should review not more than 10 patients each month and that the auditor should have the ability to carry out an audit in about 15 minutes.
- If there are less than 50 discharges per month, then all the records may be audited, if there are large number of records to be audited, then an auditor may select 10 per cent of discharges.

TRAINING FOR AUDITORS SHOULD INCLUDE THE FOLLOWING:

- A detailed discussion of the seven components.
- A group discussion to see how the group rates the care received using the notes of a patient who has been discharged, these should be anonymous and should reflect a total period of care not exceeding two weeks in length.
- Each individual auditor should then undertake the same exercise as above.
- This is followed by a meeting of the whole committee who compare and discuss its findings, and finally reach a consensus of opinion on each of the components.


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NURSING AUDIT COMMITTEE

TERMS OF REFERENCE

1. Objective:

- Facilitate the development of a comprehensive career pathway model/process for all nursing staff
- Facilitate the development of appropriate and current job descriptions and performance reviews for all nursing positions.
- Develop and maintain appropriate processes policies and practices to support the management of nursing services and personnel.
- Identify trends and requirements of the nursing profession to meet changing models of care and work force requirement.
- Advocate for resources to ensure nursing practice and professional needs across the organization are met.
- Investigate and make recommendation on issues of best practice.

2. Scope:

Applicable to all departments of the hospital.

3. Constitution of Committee:

The convener shall have the authority to invite any non-member to attend the meeting if it is deemed fit in relation to any matter being/ or to be deliberated by the committee.

4. Quorum:

The minimum quorum for passing any resolution in the committee should be more than 50% of the members present with chairperson mandatory.

5. Frequency of meeting:

Members of the committee meets **three months once** and as when required.


DEAN

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