



SMCW-SUHRC/SOPs/97/2025

Date- 16<sup>th</sup> Jul 2025

OFFICE ORDER No 97

STANDARD OPERATING PROCEDURE

Standard Operating Procedure (SOP) on Grievance Redressal Mechanism for Medical Students and Stakeholders Symbiosis Medical College for Women (SMCW) & Symbiosis University Hospital and Research Centre (SUHRC)

Key Information	
Title	Standard Operating Procedure (SOP) on Grievance Redressal Mechanism for Medical Students and Stakeholders Symbiosis Medical College for Women (SMCW) & Symbiosis University Hospital and Research Centre (SUHRC)
Policy Owner	Dean, SMCW
Responsible Department	Student Section
Approved by	Dean, SMCW
Date of Approval	16 <sup>th</sup> Jul 2025
Effective date	16 <sup>th</sup> Jul 2025
Version number	Ver 1.0
Policy Drafter	Student Section
Stakeholders consulted	Student Section, Dy Deans and Administrative Staff
Frequency of review	Every year/As and when the policy is changed by the Regulatory Authority (NMC)

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### References

1. National Medical Commission, Public Notice: Advisory on Grievance Redressal Mechanism for Medical Students and Stakeholders (Ref. No. CDN-20011/136/2025-COORDINATION-NMC dated 08-07-2025).
2. Symbiosis International (Deemed University) Notification No.1574 issued vide No. SIU/ U-28/ 2025/ 1547 dated 15th April, 2025 [Sub.: Re-Constitution of Campus Student Grievance Redressal Committee at the Lavale Hill Base - II Campus/ Location of Symbiosis International (Deemed University), Pune].

### Introduction

3. A transparent and responsive grievance redressal system strengthens trust between students, stakeholders, and the institution. This SOP formalizes the practices for receiving, investigating, and resolving complaints related to academic, administrative, or interpersonal matters at SMCW & SUHRC. It also outlines the establishment and functioning of a **Grievance Redressal Committee (GRC)** for medical students and stakeholders at **Symbiosis Medical College for Women Lave, Pune** in accordance with regulatory and institutional mandates to ensure a fair, transparent, and responsive environment in medical education.

### Purpose

4. To establish a clear, structured, and institution-wide process that ensures all grievances from medical students, parents, faculty, and other stakeholders are addressed fairly, efficiently, and confidentially, in compliance with NMC guidelines. Promote a culture of transparency, accountability, and fairness. Ensure timely resolution of issues related to academic, administrative, and interpersonal matters.

### Scope

5. This SOP applies to all grievances concerning:
  - (a) Academic issues (curriculum, teaching quality, assessments, clinical postings).
  - (b) Administrative services (admissions, fees, hostel facilities, stipends).
  - (c) Harassment, discrimination, ragging, or unfair treatment.

- (d) Infrastructure and support services.
- (e) Any matter affecting the academic and professional well-being of medical students.

### Procedure

6. The following procedures will be strictly followed by all the stake holders mentioned in paragraph 05 ante.

(a) **Submission of Grievance.** Stakeholders may lodge complaints in writing to the Member Secretary, GRC, or via **email/** the online portal: NMC [<https://nmc.org.in/ActivitiWebClient/open/initiateComplaint>]. Anonymous complaints require corroborating evidence to proceed. All grievances will be acknowledged within **3 working days** and resolved within **15 working days**, depending on complexity.

(b) **Acknowledgement.** The Member Secretary logs the grievance in the master register and issues an acknowledgement within **3 working days**.

(c) **Preliminary Review:** Within 7 working days, the GRC verifies jurisdiction, classifies the grievance type, and assigns an investigation team or individual rapporteur.

(d) **Investigation & Hearing:**

(i) Complainant and respondent(s) are invited to present their accounts.

(ii) Relevant documents, witness statements, and records are collected.

(iii) Meetings are scheduled with at least one student representative present.

(e) **Resolution & Communication:**

(i) The GRC deliberates and recommends corrective actions or remedies.

(ii) Decision is recorded and signed by the Chairperson.

(iii) Written communication of the outcome is sent to all parties **within 15 working days of acknowledgement.**

(f) **Closure & Escalation:**

(i) If the complainant is dissatisfied, an appeal may be filed with the Campus Student Grievance Redressal Committee at the Lavale Hill Base - II Campus within 15 days of the GRC decision.

(ii) Unresolved matters at the institutional level may be escalated to the SIU.

7. **Confidentiality & Protection:**

(a) All proceedings will be conducted with strict confidentiality.

(b) No complainant shall face any discrimination or retaliation for lodging a grievance in good faith.

8. **Awareness & Accessibility:** The institution shall ensure:

(a) Display of grievance redressal information on notice boards and the website.



(b) Periodic orientation sessions for students and staff about their rights and the mechanism.

9. **Review of the Mechanism:** The effectiveness and operation of the Grievance Redressal Mechanism will be reviewed **annually**, and necessary updates will be implemented in accordance with regulatory guidelines.

**Composition of the Grievance Redressal Committee and Roles and Responsibilities.**

10. The roles and responsibilities of the **Grievance Redressal Committee (GRC)** for medical students and stakeholders at **Symbiosis Medical College for Women Lave, Pune** shall include, but are not limited to:

Sr. No.	Name	Position	Position of Individual	Responsibilities
(a)		Dean	Chairperson	Convene GRC meetings; approve final decisions; ensure adherence to timelines and confidentiality
(b)	Dr. Mandar Ambike	Dy. Dean Student Welfare	Member Secretary	Receive and log grievances; schedule hearings; maintain records; track timelines
(c)	Col. (Dr.) Hitender Singh Batra	Dy. Dean Administration	Member	Conduct impartial review; gather evidence; participate in deliberations
(d)	Brig. Gopi Iyer	Deputy Chief Administration, Arogyadham	Member	
(e)	Dr. Amit Aggarwal	Professor	Member	
(f)	Dr. Pankaj Harish Bansode	Professor & HOD	Member	
(g)	Col (Dr.) Dinesh Bhasin	Professor & HOD	Member	
(h)	Dr. Anjali Milind Kher	Professor & HOD	Member	
(i)	Dr. Pradeep Gangadhar Dixit	Professor & HOD	Member	

**Action Taken Report (ATR)**

11. **Frequency:** Quarterly submission to the Dean, SMCW by the Member

Secretary.

12. **Contents:**

- (a) Grievance ID.
- (b) Date lodged.
- (c) Nature of complaint.
- (d) Investigation summary.
- (e) Actions/recommendations taken.
- (f) Resolution date.
- (g) Current status (Closed/Escalated).

13. **Format:** Tabular report endorsed by the Chairperson and Member Secretary.

**Conclusion**

14. By adhering to this SOP, SMCW & SUHRC reaffirm their commitment to a fair, transparent, and timely grievance redressal process. Continuous monitoring, periodic reviews, and stakeholder feedback will guide ongoing improvements and uphold institutional integrity.

Place: Pune



Col (Dr.) H. S. Batra (Retd)  
Acting Dean  
Officiating Dean  
Symbiosis Medical College for Women  
Lavale, Tal. Mulshi, Dist. Pune-412115.

19/7/25

**Copy to: -**

Office of the Hon'ble Provost, FoMHS | Medical Superintendent, SUHRC | Head Operations, SUHRC | All Dy Deans | All Heads of Departments | All Faculty Members | All Students | Officer in Charge NMC Cell | Deputy Chief Administration, Arogyadham | Head Hospital Administration, SUHRC | Head Nursing, SUHRC | Head Finance, SUHRC | Head HR, FoMHS | Head Quality, SUHRC | Head IT, FoMHS | IT Support Team, SMCW | Website Committee | NMC Cell | Student Section | Administrative Officer SMCW | PA to Dean, SMCW