SUMMER INTERNSHIP PROGRAM

at

APOLLO HOSPITAL

From 01-05-2024 to 01-07-2024

A REPORT BY

P NIVETHA

Master of Business

Administration **Hospital and**

Health Management

2023-25

under the Mentorship of

Dr. DEEPTI SHARMA

ASSOCIATE PROFESSOR

IIHMR UNIVERSITY

Apollo HOSPITALS
TOUCHING LIVES

Completion Certification from the Organization

CERTIFICATE

This is to certify that Ms. P. Nivetha of HM 28 of IIHMR University, Jaipur has worked with our organization for her summer internship from 01/05/2024 to 01/07/2024. During her internship she worked for JCIA International Performance Measures Pilot in Emergency Services.

The overall performance shown by her during the period was excellent. This certificate is being issued to meet the requirements of the IIHMR University.

Date: July 01, 2024

(Signature of organization Mentor)

Name: BALAJI.V

Designation: Senior General Manager Quality System Office

Seal/Stamp of the Organization

Apollo Hospitals, 21, Greams Lane, Off Greams Road, Chennai - 600 006. India T : 2829 3333, 2829 0200,
Emergency Tel : 2829 4343 F : +91 44 2829 4429
E : enquiry@apollohospitals.com Website : www.apollohospitals.com

Registered Office : Apollo Hospitals Enterprise Limited, No.19, Bishop Gardens, Raja Annamalaipuram, Chennai - 600 028.
Corporate Identity Number (CIN) L85110TN1979PLC008035

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Ms. P. Nivetha** of the academic year 2023 – 25 of **Institute of Health Management Research** has prepared a poster with respect to her summer internship held during May-June 2024.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 19/7/2024

Dr. Deepti Sharma

Associate Professor

1, Prabhu Dayal Marg, Near Sanganer Airport, Jaipur- 302029, Rajasthan, India.
Ph.: 0141- 3924700, 2791431- 32, Fax: 0141 3924738, E-mail: iihmr@iihmr.edu.in, Web.: www.iihmr.edu.in

CLINICAL AUDIT ON THE QUALITY OF MANUAL ANESTHETIC DOCUMENTATION IN ICU AND SURGICAL WARDS AT APOLLO HOSPITAL, CHENNAI.

PRESENTED BY P. NIVETHA - 1771

MBA-HM 28, IIHMR UNIVERSITY, JAIPUR.

FACULTY MENTOR : DR. DEEPTI SHARMA

ORGANIZATION MENTOR : MR. BHASKAR SELVARAJ

ABOUT THE ORGANIZATION, VISION & MISSION

Apollo Hospital, Chennai Overview:
- Founded: 1983 by Dr. Prathap C. Reddy
- Type: Flagship hospital of the Apollo Group
- Location: Chennai, India
- Facility: 550-bed capacity with over 50 specialties and subspecialties
- Departments: More than 60, led by internationally trained medical experts

Achievements and Accreditations:
- JCI Certification: 8 hospitals
- NABH Certification: 32 hospitals
- NABL Certification: 15 hospitals
- ISO 14001 Certification: 3 hospitals
- ISO 45001 Certification: 1 hospital (Apollo Cancer Centre)

Innovations and Services:
- Renowned for comprehensive medical services and state-of-the-art facilities
- Known for cutting-edge innovations in medical procedures and technological advancements
- High clinical success rates with superior technology
- Ensure health and comfort with special attention and the best possible care for patients
- A preferred destination for patients from India and international medical tourism and medical value travel

Global Presence and Network:
- Company: Apollo Hospitals Enterprise Limited
- Headquarters: Chennai, India
- Network: 71 owned and managed hospitals
- Global Revenue: $34.383 billion for the twelve months ending March 31, 2024

VISION:
-Our vision is to make India a global healthcare destination.
-Our vision for the next phase of development is to "Touch a Billion Lives".

MISSION:
-Our mission is to bring healthcare of international standards within the reach of every individual. -We are committed to the achievement and maintenance of excellence in education, research and healthcare for the benefit of humanity.

CORE VALUES:
- Pioneering attitude
- Proactive involvement
- World class excellence
- Trustworthy spirit
- Compassionate care

MOTTO:
"Tender loving care"

QUALITY DEPARTMENT AT APOLLO HOSPITAL

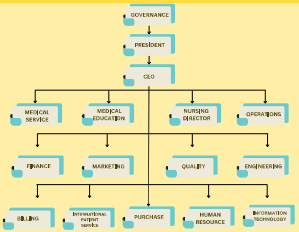
The Quality Department at Apollo Hospitals, one of the largest healthcare providers in Asia, plays a crucial role in ensuring the delivery of high-quality healthcare service to patients.

key Aspects of the Quality Department :
1. Quality Assurance and Control.
2. Accreditations and Certifications.
3. Quality Improvement Initiatives.
4. Training and Education.
5. Patient Safety Programs.
6. Risk Management.
7. Compliance with Regulations.

Importance of the Quality Department :
- Upholds Apollo Hospitals' commitment to delivering high-quality healthcare services.
- Continuously strives for improvement and innovation in healthcare practices.

Role of the Quality Manager in JCI Accredited Hospitals :
In Joint Commission International (JCI) accredited hospitals, the Quality Manager is crucial in maintaining compliance with JCI standards and fostering a culture of continuous quality improvement.

ORGANIZATION STRUCTURE



DEPARTMENT STRUCTURE

DIFFERENCE: PRATICAL EXPOSURE AND THEORTICAL WORK

- Theoretical knowledge provides a strong foundation in concepts, principles, and functions through coursework and lectures.
- Practical experience in the hospital helped me understand the dynamics of working in a healthcare team and the importance of effective communication.
- Hands-on experience in the hospital built my confidence, preparing me for future roles as a healthcare professional.
- Practical exposure focuses on communication, observation, and critical thinking, while theoretical understanding emphasizes knowledge acquisition and conceptual understanding.

ABOUT THE PROJECT

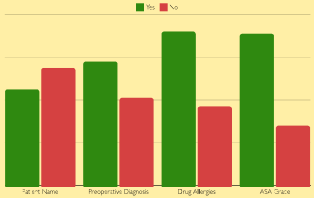
TITLE: Clinical audit on the Quality of Manual Anesthetic documentation in ICU and surgical Wards at Apollo Hospital, Chennai.

AIM & OBJECTIVE: To evaluate the quality of manual anesthetic documentation by assessing its accuracy and completeness through a clinical audit, with the objective of identifying areas for improvement and recommending enhancements."

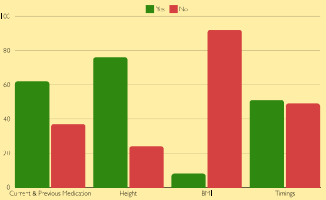
METHODOLOGY:
Ethical approval was obtained from the institutional ethical review committee.
- STUDY DESIGN: A Cross-Sectional Study.
- DURATION OF STUDY: May 2024- June 2024
- SAMPLE SIZE: 102 Cases were observed during the period of the study.
- DATA COLLECTION: A checklist that was developed based on the hospital anesthetic record sheet which was used for data collection. This clinical audit included all anesthesia record sheets from patients operated on during the study period.

RESULTS:
A total of 102 patients who were operated upon under anesthesia during the data collection Period were included in this audit. According to ASA guidelines the Key Areas of Strength 100% Completeness: Patient label, pulse, BP, vitals, drugs, fluids, date & time, name & signature in various categories. High Completeness: Anaesthesia type, doctor name, date, proposed surgery, past medical history, previous surgery.
Key Areas for Improvement: Patient Name: Only 45% completeness in the consent of anaesthesia. Preoperative Diagnosis: 58% completeness. BMI: 7% completeness.Current & Previous Medication: 63% completeness. Timings Noted: 51% completeness in the monitoring chart. Drug Allergy Documentation: 62% completeness in the safe surgery checklist.
This data indicates areas of strength and those require improvement in the completeness of Anaesthetic records, which can help to guide quality assurance efforts in healthcare documentation.

TABEL 1: DISTRIBUTION OF DOCUMENTATION IN CONSENT FOR ANESTHESIA AND ANESTHESIA RECORDS.



TABEL 2: DISTRIBUTION OF DOCUMENTATION IN MEDICAL HISTORY, CLINICAL EXAMINATION AND MONITORING CHART.



SWOT ANALYSIS

S — STRENGTH
- Skilled and experienced physicians and surgeons
- Multispecialty approach with over 50 medical specialties
- Excellent infrastructure and state-of-the-art medical equipment
- World-class patient services

W — WEAKNESS
- Inadequate parking facilities
- Traffic congestion and entrance overcrowding
- High service cost, targeting specific class
- Lower-income affordability issues

O — OPPORTUNITIES
- Staff access and recruitment via own colleges
- Steady supply of qualified professionals
- Strategic locations serving large populations
- Enhanced connections and service expansion

T — THREATS
- Increased competition from other healthcare providers
- Risks to patient data security and privacy

LEARNINGS DURING INTERNSHIP

- Gained knowledge about accreditation bodies like JCI, NABH, NABL, ISO 14001, and ISO 45001.
- Understood the importance of compliance frameworks and regulatory guidelines to ensure patient safety and quality care.
- Learned how to conduct regular checks and audits to identify inefficiencies within healthcare processes.
- Implemented strategies to streamline operations, enhance productivity, and optimize resource utilization.
- Recognized the importance of patient-centered care and its impact on improving patient outcomes and experiences.
- Conducted root cause analysis and implemented problem-solving techniques for issues ranging from medication errors to other incidents.
- During my internship, I contributed to the JCIA International Performance Measures Pilot in Emergency Services project, applying my skills to a significant hospital initiative.

USEFULNESS

- I found that having a flexible mind and attitude is very important.
- Developed skills in communication, data analysis, project management, teamwork, and critical thinking.
- Built professional connections and networks within the healthcare industry.
- Actively participated in quality improvement initiatives, gaining insights into the planning, implementation, and evaluation of quality improvement projects.
- Understood the organizational culture and dynamics.

CHALLENGES

- Human errors in documentation, such as incomplete or missing data, can compromise the reliability and validity of findings.
- Initially, my limited experience in data analysis was a challenge, but I have since become much more confident in working with numbers.

SUGGESTIONS

During my internship, I realized that proper documentation must be ensured and implemented more efficiently and effectively.

WEEKLY REPORTING OF 08 WEEKS

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 01 **From: 02/05/2024 to 04/05/2024**

Activity Done	Introduction part and basic formalities done. I started with the basics of understanding - how hospitals work, particularly in the quality department. And covered the 13 chapters of the Join Commission International standards. Orientation was given about the quality department – how it works, what are the accreditations at present in hospital. And covered first chapter -International patient safety goals. - QTBT Rounds
Linking theory (Classroom learning) with practice at your organization	Theoretical knowledge learnt at IIHMR, has laid a strong fundamental foundation for me which enabled me to perform confidently on my internship.
Gaps identified on the workingarea.	Inadequate knowledge or understanding of JCI standards among staff.
Suggestions for improvement	Provide comprehensive training sessions and regular refreshers on JCI standards to all staff.
Plan for the next week	Perform IP and OP data entry, focusing on accuracy and addressing challenges.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 02 **From: 06/05/2024 to 11/05/2024**

Activity Done	Learned about emergency codes and events- no harm event, near miss event, patient safety event, sentinel event. IP open record- data entry of April month. OP CPS entry- outpatient data entry. QTBT – Quality Toolbox Task – aware and educate the nursing staffs about JCI standards. Includes: - IPSG Goals - Hospital acquired infections. - Hand hygiene techniques.
Linking theory (Classroom learning) with practice at your organization	Theoretical knowledge gave me deeper understanding of all the concepts that I could practically apply and understand the reasons behind.
Gaps identified on the workingarea.	Lack of awareness and adherence to IPSG goals, prevention of hospital- acquired infections, and proper hand hygiene techniques among nursing staff.
Suggestions for improvement	Continuous education and regular audits to reinforce adherence to these standards.
Plan for the next week	Continue working on the JCIA International Performance Measures Pilot for March data in Emergency Services.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 03 **From: 13/05/2024 to 18/05/2024**

Activity Done	-Working on the JCIA International Performance Measures Pilot in Emergency Services study.(working on March month) -Project 365 (IP rounds to check patient file) -Understanding the concept of SOP (Standard operating procedure) -on 19th of every month visiting 19 places to educate and aware of IPSG goals.
Linking theory (Classroom learning) with practice at your organization	While studying the theoretical aspects of the concepts, I gained an understanding of what it might be and how it could be used in the field.
Gaps identified on the workingarea.	The timings are mismatching while comparing the manual data's in excel and patient medical record. Variability in thoroughness and documentation during patient file checks.
Suggestions for improvement	Standardize the checklist for file reviews and conduct regular audits to ensure adherence.
Plan for the next week	Continue working on the JCIA International Performance Measures Pilot for April data in Emergency Services.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 04 **From: 20/05/2024 to 25/05/2024**

Activity Done	-Working on the JCIA International Performance Measures Pilot in Emergency Services study.(Completed March month data and working on April month). - QTBT rounds. - ER rounds - IP open Audit. - Cath lab rounds.
Linking theory (Classroom learning) with practice at your organization	The practical exposure provided us with the opportunity to learn about the application of theoretical knowledge.
Gaps identified on the working area.	The UHID, Seal and timings, are missing while comparing the manual data's in excel and patient medical record.
Suggestions for improvement	Utilize barcode scanners or electronic health record (EHR) systems with mandatory fields to reduce manual errors and ensure completeness of records.
Plan for the next week	Continue working on the JCIA International Performance Measures Pilot for April data in Emergency Services. Prepare for the MMU auditing by coordinating with the clinical pharmacist and planning the audit logistics.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 05 **From: 27/05/2024 to 01/06/2024**

Activity Done	-Working on the JCIA International Performance Measures Pilot in Emergency Services study.(working on April month). - QTBT Rounds - IP Open audit - on 29th of every month MMU auditing.(Medication Management and Use) On this day auditing three – four places of every month with the clinical pharmacist to ensure the medications are properly and safely stored. - The emergency medications should be available, safely stored, monitored and secured. - Visited ER, Renal, and Radiology department to ensure: High alert medications, LASA drugs, Narcotics, CSSD items are stored properly.
Linking theory (Classroom learning) with practice at your organization	Theoretical knowledge gave me a deeper understanding of all the concepts.
Gaps identified on the working area.	In MMU auditing proper documentation was not followed- In narcotic drug record the signature was missing, in high alert medications drug label was missing, in specified single drug container some other drugs were identified.
Suggestions for improvement	Plan for a debriefing session after the audit to review findings, discuss areas for improvement, and develop an action plan for addressing any identified issues.
Plan for the next week	Continue working on the JCIA International Performance Measures Pilot for April data in Emergency Services.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 06 **From: 03/06/2024 to 08/06/2024**

Activity Done	-Working on the JCIA International Performance Measures Pilot in Emergency Services study.(Completed April month data and working on May month). - QTBT rounds - IP rounds - ER rounds
Linking theory (Classroom learning) with practice at your organization	Theoretical knowledge learnt at IIHMR, has laid a strong fundamental foundation for me which enabled me to perform confidently on my internship.
Gaps identified on the workingarea.	While analyzing the data lots of errors were found. In documentation work many things are missing.
Suggestions for improvement	Conduct regular training sessions for staff on the importance of complete and accurate data entry, emphasizing the critical elements like UHID, seal, and timings.
Plan for the next week	Continue working on the JCIA International Performance Measures Pilot for May data in Emergency Services.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 07 **From: 10/06/2024 to 15/06/2024**

Activity Done	-Working on the JCIA International Performance Measures Pilot in Emergency Services study.(working on May month). - QTBT Rounds. - IP open record- data entry of May month. - Understanding the concept of ACE indicators. This scoring system features a set of key parameters that measures complication rates, mortality rates, average lengths of stay after major procedures.
Linking theory (Classroom learning) with practice at your organization	The practical exposure provided us with the opportunity to learn about the application of theoretical knowledge.
Gaps identified on the workingarea.	Variability in thoroughness and documentation during patient file checks.
Suggestions for improvement	Conduct regular audits to ensure adherence.
Plan for the next week	Continue working on the JCIA International Performance Measures Pilot for May data in Emergency Services.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Name of the Organization: APOLLO HOSPITAL - CHENNAI

Area/ Department/ Project of Summer Internship Program: QUALITY

DEPARTMENT Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA – HOSPITAL AND HEALTH MANAGEMENT**

Week no: 08 **From: 17/06/2024 to 22/06/2024**

Activity Done	Working on the JCIA International Performance Measures Pilot in Emergency Services study.(Completed May month data and revalidation work of April month data). - Open audit to ER Department. - on 19th of every month visiting 19 places to educate and aware of IPSG goals. - Got all certificates approved and signed by the organization.
Linking theory (Classroom learning) with practice at your organization	Practical exposure focuses on communication, observation, and critical thinking, while theoretical understanding emphasizes conceptual understanding.
Gaps identified on the workingarea.	Inaccuracies and inconsistencies in data entry.
Suggestions for improvement	Regular audits should be conducted to identify gaps and implement improvements. Implement a standardized data entry protocol and provide training to ensure accuracy.
Plan for the next week	My Summer Internship completed. Overall, the internship provided valuable experience in quality management, compliance, and patient safety, equipping me with practical skills and knowledge applicable to healthcare quality improvement.

Signature of the student P NIVETHA

Approved by the IIHMR University's Mentor

Compiled Reporting Format

Name of the Organization: APOLLO MAIN HOSPITAL

Area/ Department/ Project of Summer Internship Program: QUALITY DEPARTMENT

Name of the Student: P NIVETHA

Roll no: 1771 **Stream: MBA- HOSPITAL AND HEALTH MANAGEMENT**

Activity Done	- I completed the introduction and basic formalities, beginning with understanding the operations of hospitals, specifically within the quality department. This included covering the 13 chapters of the Joint Commission International (JCI) standards. I also provided an orientation about the quality department, explaining its functions and current accreditations, with a focus on the first chapter of International Patient Safety Goals (IPSG). - In terms of emergency preparedness, I learned about various emergency codes and events such as no harm events, near miss events, patient safety events, and sentinel events. I was involved in data entry tasks, including the IP open records for April and outpatient (OP) CPS entries. - As part of the Quality Toolbox Task (QTBT), I educated nursing staff about JCI standards. This education covered IPSG goals, hospital- acquired infections, and hand hygiene techniques. - I worked on the JCIA International Performance Measures Pilot in Emergency Services study, starting with the data for March, which I completed. Subsequently, I began working on the April data. I also participated in Project 365, which involves conducting IP rounds to check patient files. I gained a better understanding of Standard Operating Procedures (SOPs). - Each month on the 19th, I visited 19 different areas within the hospital to educate and raise awareness about IPSG goals. I continued to work on the JCIA International Performance Measures Pilot in Emergency Services study, completing the data for April and then moving on to May's data. - My responsibilities also included conducting QTBT rounds, ER rounds, IP open audits, and Cath lab rounds. On the 29th of each month, I participated in MMU (Medication Management and Use) auditing. This involved auditing three to four areas with a clinical pharmacist to ensure medications were properly and safely stored. During these audits, I ensured that emergency medications were available, safely stored, monitored, and secured. I visited departments such as ER, Renal, and Radiology to verify the proper storage of high-alert medications, LASA (Look-Alike, Sound-Alike) drugs, narcotics, and CSSD (Central Sterile Services Department) items. I also understood the concept of ACE indicators, which is a scoring system that measures key parameters such

	as complication rates, mortality rates, and average lengths of stay after major procedures.
Linking theory (Classroom learning) with practice at your organization	- The theoretical knowledge I acquired at IIHMR University laid a strong fundamental foundation, enabling me to perform confidently during my internship. This knowledge provided me with a deeper understanding of key concepts that I could practically apply and understand the reasons behind their importance. Learning about the Joint Commission International (JCI) standards in the classroom gave me a comprehensive view of the various quality and safety protocols that hospitals must adhere to. - The theoretical aspects of quality management and performance measures
	provided me with insight into how hospitals measure their effectiveness. This knowledge was instrumental when I worked on the JCIA International Performance Measures Pilot in Emergency Services study. I could see firsthand how these indicators are used to evaluate and improve hospital services, linking the theoretical metrics to practical outcomes. Practical exposure during my internship emphasized communication, observation, and critical thinking skills. These skills complemented my theoretical understanding by allowing me to apply concepts in real-world scenarios. For example, during Project 365, which involved conducting IP rounds to check patient files, I utilized my theoretical knowledge of patient safety and quality care to identify areas for improvement and suggest practical solutions.
Gaps identified on the working area.	- Initially, I focused on learning how the department worked without immediately suggesting changes. This approach helped me understand the current processes and where we could make things better. Sometimes, the times recorded in Excel didn't match what was written in patient records. This could cause problems in coordinating patient care. A recurring issue was the absence of crucial information such as the Unique Hospital Identification (UHID), seal details, and accurate timings when comparing manual data in Excel with patient medical records. This missing data posed challenges in tracking patient care accurately and ensuring compliance with hospital protocols. During Medication Management and Use (MMU) audits, it was noted that proper documentation standards were not consistently followed. Specific issues included missing signatures in narcotic drug records, absent labels on high-alert medications, and incorrect medications found in specified single drug containers. These findings underscored the need for rigorous adherence to documentation protocols to enhance patient safety. Numerous errors were identified in the documentation work across various processes. These errors ranged from incomplete records to missing critical details necessary for comprehensive patient care and accurate reporting.

Suggestions for Improvement	- These gaps were systematically addressed and improved through proactive measures, including regular audits and quality assurance initiatives. The emphasis on ER audits played a crucial role in identifying and rectifying these issues promptly. By implementing corrective actions and enhancing documentation practices, Aimed to improve the accuracy, reliability, and safety of hospital operations. This approach not only ensured compliance with standards but also contributed to a culture of continuous improvement in patient care and operational efficiency.

Signature of the Student

Approved by the IIHMR University's Mentor