ICU SURVEILLANCE AS PER NABH

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ABOUT THE ORGANIZATION

- **Fortis escort hospital located in malviya nagar ,Jaipur**
- **200+ bedded multi specialty and NABH accredited hospital with over 46 Specialities (neurosciences, cardiac sciences orthopedics etc with Robotic joint replacement technique.**
- **It is equipped with Medical Intensive Care Unit (MICU), Surgical Intensive Care Unit (SICU), Critical Care Unit(CCU) and Cath labs.**

VISION AND MISSON

Vision

To create a world-class integrated healthcare delivery system in India, entailing the finest medical skills combined with compassionate patient care.

Mission

To be a globally respected healthcare organisation known for Clinical Excellence and Distinctive Patient Care.

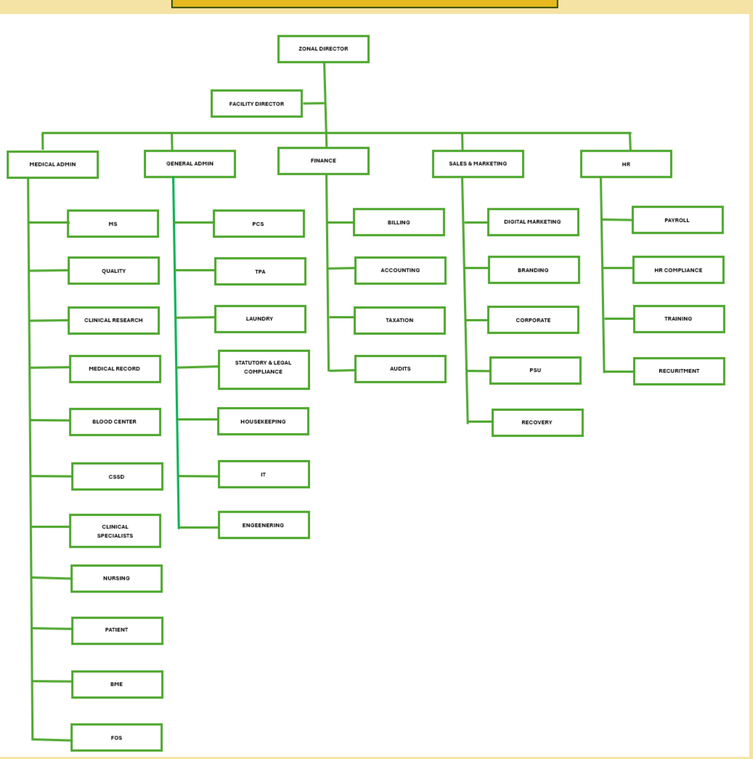
AIM

The aim of ICU surveillance is to enhance patient safety, improve clinical outcomes, and ensure compliance with established standards of care in ICUs. It focuses on continuous monitoring and assessment to identify potential risks, prevent complications, and promote evidence-based practices.

OBJECTIVES

- **To ensure the highest level of patient safety by monitoring for adverse events, medical errors, and complications.**
- **To identify areas for improvement in ICU care and implement strategies to enhance the quality of services provided.**
- **To monitor and reduce the incidence of healthcare-associated infections (HAIs) in the ICU.**

ORGANIZATION STRUCTURE



WHY THIS PROJECT?

I chose the topic of ICU surveillance as per NABH (National Accreditation Board for Hospitals & Healthcare Providers) for my report because it aligns with my objective of enhancing patient safety and improving clinical outcomes. ICU surveillance is critical in preventing healthcare-associated infections, ensuring compliance with established standards, and promoting evidence-based practices. By focusing on NABH guidelines, I aim to contribute to the continuous monitoring and assessment processes that identify potential risks and complications in ICUs. This topic not only builds on my experience from my internship at Fortis Hospital but also addresses a vital aspect of healthcare quality and patient safety.

SPECIALITY	Sample Taken	Percentage of Positive Results
MICU-1	3	0.00%
MICU-2	8	0.00%
MICU-3	27	2%
SICU-1	3	0.00%
PMU	6	2%
SICU-3	18	0.00%
SICU-4	16	0.00%

Theoretical Understanding	Practical exposure
In Epidemiology we studied about the types of studies.	The Study Done Includes Primarily Retrospective study.
Theoretically, we studied about the different types of colour bin used for biomedical wastes segregation.	Get Chance to Observe Practically followed in different departments of Hospitals
Theoretical conception don't last in our minds until they are revised	When it is not into practice on the field , it stays with us for a long time

SWOT ANALYSIS

STRENGTHS

- Infection control department in association with HR regularly keep check on complete vaccination of Health Care Workers.
- Well-defined protocols and procedures for infection prevention and control.

WEAKNESS

- Frequently changing of GDA & HK staff, due to this staff is not properly educated
- Reluctance of healthcare workers towards sharp injuries.
- Challenges in data collection, analysis, and management

OPPORTUNITIES

- Issues are escalated and discussed with administration in hospital Infection control committee meetings (HICC)
- Opportunities for collaboration with external organizations and institutions for research and best practices.

THREATS

- Risk of blood borne infections like (HBV, HCV,HIV)
- Economical and financial burden to the organisation

STUDY METHODOLOGY

Type of study: - Descriptive study

Sample Collection: Swab collected from bed railing, fridge handle, intra venous stand, external surface ventilator, nursing station, patient table, medicine trolley, pillow cover, and disinfectant. Hand swab and mouth swab of nursing staff were also collected.

Sample Size:_- 81 samples were collected from medical and surgical intensive care unit of Fortis Escort Hospital, Jaipur, Rajasthan.

RESULTS

Sample Size = **81**.

POSITIVE: Out of 81 Sample **4** samples were **positive.**

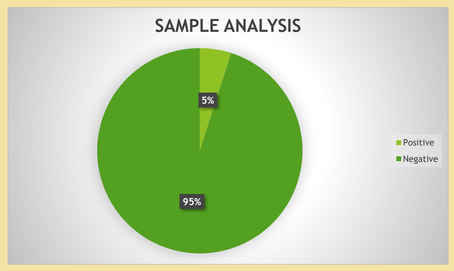
In MICU-3 AC DUCT inlet and outlet bacteria named Acinetobacter baumannii and Enterococcus faecium were found.

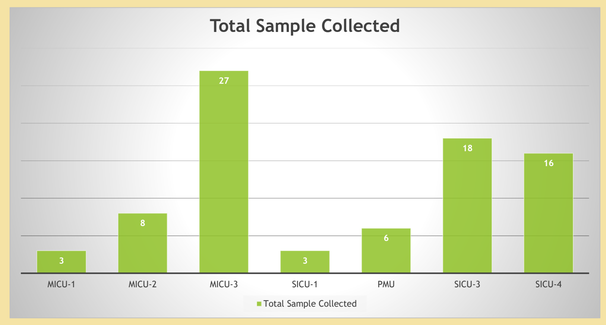
Where as in PMU, In Green Sheet and Suction jar, Klebseilla pneumoniae and Enterobacter coccae were found.

- **NEGATIVE:** Out of 81 Sample 77 samples were negative.

ANALYSIS

After Analysis of the data, it was found that out of the 81 sample,77 sample i.e 95.06% were negative and 4 sample i.e 4.9 % were positive.





LEARNINGS AND VALUE ADDITION

- Get chance to know and learn about clinical protocols of the hospitals.
- Able to Audit different wards of the hospitals MICU, CCU, SICU.
- What is HAIs?
- Learned The standard Of Quality Which is set By NABH.
- Trained Nursing staffs, House keeping staffs about the Hand hygiene and 5 key movements.
- Improved Communication Skills.

USEFULNESS OF INTERNSHIP

- Participated in Hand hygiene week.
- Present during the NABH audit of the Hospital.
- Attended Short Seminar on International Patient Safety Goals (IPSR).
- Participated in CME meeting of the Hospital.

SUGGESTIONS

- Develop and implement standardized clinical protocols and guidelines based on best practices and evidence-based medicine.
- Implement stringent infection prevention and control practices, including regular hand hygiene audits, proper sterilization procedures, and strict management of invasive devices.
- BMW guidelines should be followed for the segregation of the waste

CHALLENGES FACED

- Lack of communication between an auditor and the HCWs staff
- Neglegence towards sharp injury And Different Bins for Segregation was shown by HK, GDA as well as by nursing staff.