

**NABH AUDIT- ADDRESSING CHALLENGES IMPLEMENTING
CORRECTIVE ACTIONS FOR NABH SURVEILLANCE IN HR PRACTICES AT
SAROJ SUPERSPECIALITY HOSPITAL, DELHI**

Dissertation Submitted to



The IIHMR University, Jaipur

for the partial fulfilment for the award of the degree of

Master of Business Administration (MBA)

in

Hospital and Health Management

By

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Under the Supervision and Guidance of

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2024



SSSH/HR/Cert/2024/06/ 9543

Date: 18/06/2024

TO WHOM SO EVER IT MAY CONCERN

This is to certify that Ms. Khushboo Vaishya D/o Mr. R.S.Vaishya R/o Pratapgarh, Uttar Pradesh-243306 studying at IIHMR University, Jaipur has successfully completed her internship in the Department of Human Resources from 18/03/2024 to 18/06/2024. Her conduct was good throughout the internship.

We wish her good luck for future endeavours.

Thanking you,

Yours truly,

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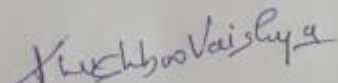
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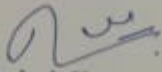

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This is to certify that dissertation titled **NABH AUDIT- ADDRESSING CHALLENGES - Implementing Corrective Actions for NABH Surveillance in HR Practices at Saroj Superspeciality Hospital, Delhi** is a record of research work undertaken by Khushboo Vaishya in partial fulfilment of the requirements for the award of the degree of MBA (Hospital and health Management) from the IIHMR University, Jaipur under my guidance and supervision and her approach to the research study has been sincere, scientific and analytical.

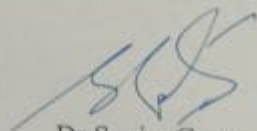


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Abstract

Objectives of the Study

The present study mainly aims to identify the problems faced by the HR department during NABH accreditation surveillance at Saroj Hospital, Delhi. The study also aims to find out the Corrective actions to implement and overcome such challenges and recommend strategies to improve identified deficiencies. This research will ensure improvisation in HR practices and adhering to the NABH'S so that the overall Hospital performance and quality health care towards patients can be improved.

Methodology

This is a qualitative research study. The research was carried out in Saroj Superspeciality Hospital. The target area was the HR department of the hospital. Quantitative evaluation by questionnaires and quantitative gap tracker from the files of employees were used to identify the main challenges. The targeted sample size was 50-100 participants, and random sampling was done so that data collection would be comprehensive in nature. Follow-ups for document compliance were conducted with the help of HODs, department incharges, etc. Interviews and focus group discussions were held with HR staff to gather qualitative insights so that one would understand the challenges and would further provide solutions. Gaps in employee files were measured with the help of checklists. The effectiveness of such corrective actions was checked and reviewed for proper regular audits.

Key Results

The present study shows strong discrepancies between the compliance levels of documents submitted by the employee and those records maintained by HR. Employees, in general, showed good compliance in submitting basic documents like PAN and ID proofs; however, gaps existed in self-attested marksheets and vaccination records. The documentation in relation to job descriptions and the appointment letters was good on the HR side, while there were serious deficiencies in highly critical areas such as offer letters and annual health checkups. Almost at the same time, corrective measures related to the centralized digital documentation system and improvement in the communication channels improved the compliance rate. Internal periodic audits and the training programs for staff went a long way in sustaining the accuracy and completeness of documents.

Conclusion

It is the conclusion of the study that addressing those gaps, as identified, and the recommended solutions implemented, would improve HR practice significantly at Saroj Hospital. With a centralized digital documentation system, better interaction between the HR department and the employee, and periodical audits, it would set hospitals on their way to meet NABH standards. This will not only make achieving and maintaining the level of accreditation easier but also a better all-round performance of the hospital in general with regard to patient care. The research, therefore, brings out the continuous cycle of improvement in HR practices within the functioning of a healthcare institution, operational actions, and documents related to it, for similar accreditation by other institutes.

Keywords:

- NABH Accreditation,
- HR Practices,
- Compliance Documents,
- Health Care Quality,
- Corrective Actions.

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Implementing Corrective Actions for NABH Surveillance in HR Practices at Superspeciality Hospital, Delhi.

Chapter 1 – INTRODUCTION

➤ Hospital Accreditation

One of the important initiatives taken by the National Accreditation Board for Hospitals & Healthcare Providers was the hospital accreditation program in the year 2005. It is more about the bench-marking of healthcare quality and patient safety amongst the public and private hospitals across the country of India. This formulates, supports, maintains, and continually improves high standards of care for the delivery of 'quality health care services' and ensures 'patient safety'. Since the NABH accreditation program was initiated, that is, during all these years, it has evolved, gained international recognition, and aligned itself with global healthcare accreditation standards. The standards formulated by the program got accredited by the International Society for Quality Assurance in Healthcare, thereby bringing in its global acceptance and credibility.

The standards for NABH encompass almost all the possible hospital function aspects, with a strong focus on patient safety and quality of service delivery. These standards shall remain dynamic in approach and modify themselves from time to time in response to changes in the healthcare environment so as to be able to strive continuously for better services. Adopting these standards shall enable a hospital to demonstrate its commitment towards quality care, command an enhanced patient trust, and therefore upgrade its reputation in the healthcare sector.

- **Importance of Accreditation**

The NABH accreditation program serves to guide hospitals in bringing about continuous improvement in the delivery of health care. It administers a framework for the evaluation of practice against benchmarks of excellence, identification of shortcomings, and making changes in enhancing the care provided to patients. Being accredited means that a hospital meets or is above the national and international standards, thus winning the trust of stakeholders and patients.

- **Elements of Accreditation**

These NABH standards address hospital operations with regard to patient rights and education, infection control, patient care, continuous quality improvement, and facility management. This flexibility draws on flexibility and adaptability, envisioning a situation wherein hospitals can adopt new practices or use of technology in a changing healthcare environment.

□ Continuous Improvement

One-time event accreditation is not an event; rather it is a continuous process wherein the hospital has to continue reviewing and revising such practices from time to time for updating the accredited status. This type of continuous quality improvement commitment for hospitals keeps them responsive to the changes occurring in the Health sector and helps them continue their services up-gradation.

□ Human Resource Management in Hospitals

• Role of HRM in Healthcare

Human resource management goes hand in hand with the administration of a good hospital. It includes strategic planning for the workforce so as to better position the organization toward the attainment of its aims through the delivery of top-quality care. HRM incorporates a broad range of activities that vary from recruitment and training to performance management and employee relations.

• Strategic HR Planning

Strategic HR planning involves the development of plans by the hospital so as to ensure that it has the right number of employees with the proper skills and competencies. This step follows the forecasting by looking into the future needs of the hospital according to its set goals and any foreseen changes in its services demand. The proper HR plan will enable the hospital to take measures ahead of time to fill the gaps in its workforce and ensure continuity in care.

•Motivation and Retention

Among the most critical functions of HRM in hospitals is employee motivation and retention. A motivated staff would be expected to deliver services in quality care and provide a good working environment. Some of the HRM strategies that could be employed toward improving motivation and retention are giving competitive compensation and benefits, opportunities for professional development, recognition or reward for good performance, and supportive and inclusive work culture.

•Training and Development

This will ensure that staff is competent to perform their duties and are kept updated on the latest medical practices and technologies. As such, regular training programs must be provided for the upgrading of staff skills and knowledge. This shall enhance patient care; it also increases job satisfaction among workers and, hence, retention rate.

• Performance Management

Performance management involves the regular and systematic assessment of employee performance within the organization, ensuring that staff members undertake work in accordance with set standards and objectives for the hospital. A good performance management system gives feedback, defines areas for personal improvement, supports career development, facilitates reward through recognition of good employees, thus supporting the motivation and morale of employees.

□ HR Challenges in Hospitals

Despite its importance, several issues have been associated with HRM in hospitals. This...spins the system into high rotating staff, lack of personnel, burnout, and continuous training. All these require a strategic and proactive approach toward HRM with respect to building up a positive, stimulating environment with adequate support and resources, valuing staff, and engaging them with the workplace.

□ NABH Self-Assessment Checklist for the HR Department

• Purpose of the Checklist

The NABH has prepared a checklist for institutions, like hospitals, to perform self-assessment of their HR departments. The provided checklist works as a tool that permits hospitals to review their HR practices in order to confirm compliance with the NABH standards. On this, furnished is a structured approach through which hospitals can check their HR functions in order to recognize and acknowledge areas for improvement and implement changes of necessities.

• Key Components of the Checklist

The checklist incorporates various elements that address workforce planning, recruitment, training, performance management, and employee welfare. Key among them is the requirement for a documented HR plan for the hospital. This is a plan that analyzes the staffing needs for the hospital, the current workforce, and future staffing.

• Documented HR Plan

In HR management, an HR plan in writing is more necessary. This plan will entail or be aimed at addressing the following elements:

- **Categories of Employees:** Identifying different categories of employees to be recruited, for example, doctors, nurses, administrative staff, and support personnel.
- **Quantity Required:** Deciding on the number of employees required in each category to meet operational requirements.
- **Quantity Available:** Assessing the existing workforce and finding gaps.

- **Future Quantity Requirements:** Estimating future quantity requirements in view of expansion programs of the hospital or increase in demand for services.

Recruitment and Selection

It emphasizes the need to have in place rigorous recruitment and selection procedures that ensure the hospital has adequate competent staff. These include definition of clear job descriptions, effective methods of recruitment, interviewing techniques, and background scrutiny.

□ Training and Development

This implies that training and development is inevitable in maintaining the competency of staff. The checklist emphasizes periodic training programs, continuing education and professional development initiatives. There should also be a tracking and evaluation mechanism of the programs offered by the hospitals.

□ Performance Management

Effective performance management is key to ensuring that employees attain hospital-set standards and objectives. The checklist gives guidelines on goal setting, regular performance appraisal, and feedback on any support that can be given for improvement.

□ Reputation of the Employee

It also includes protection of welfare through provisions that ensure a safe and healthy work environment, work-life balance, and the promotion of their well-being. Proper supporting and resourcing of the personnel would give them job satisfaction and lower attrition.

□ Implementation of checklist

Systematic implementation of the self-assessment checklist in hospitals will largely contribute to boosting performance. Each hospital should form a different team to spearhead the process, generate data, and recognize opportunities for improvements. The team should liaise with human resources and other departments to comprehensively conduct the assessment and ensure any changes required are effectively implemented.

Benefits of the Checklist

A key importance of the self-assessment checklist to a hospital is making sure compliance with NABH standards, improving HR practices, and increasing quality care. It assists the hospital in continually assessing and updating the HR functions so that it deals with gaps related to HR, staff satisfaction, and maintains a high standard of care towards patients.

□ **The Importance of the HR Plan**

• **Strategic Workforce Planning**

A documented HR plan is essential to any strategic workforce plan. It enables anticipation of hospital staffing needs prior to the need, managing resources effectively, and having a proper skill mix to meet organizational goals. The human resource plan needs to be integrated into the strategy of the general hospital and reviewed or updated regularly to reflect any changes in the environment concerned with health care.

• **Recruitment and Retention**

An effective HR plan supports recruitment and retention by identifying staffing needs and developing strategies to attract and retain qualified professionals. This will feature the provision of competitive compensation, attractive benefits, good working conditions, and opportunities that allow staff an opportunity for career growth and professional development.

• **Training and Development**

Ensure the development and implementation of an effective training and development program within the HR plan so that employees possess the necessary education and skills to deliver high-quality healthcare. This would include provision for regular training, professional development, and continuing education.

• **Performance Management**

A properly structured HR plan should basically have a robust performance management system in place, which comprises assessing the performance of an employee and taking remedial actions to improve it. Setting clear performance goals, regular appraisals, feedback, and career development form part of this process.

• **Standards Compliance**

The plan enables the hospital to meet up with standards of accreditation by NABH and other regulatory requirements within the facility. Compliance, operational efficiency will be increased, and patient care will be improved through systematic documentation and human resource planning.

• **Enabling a Positive Work Environment**

Another vital element of the work plan in HR is to promote a positive work environment where all employees are respected and supported. The resources required for work must be adequate. Also, there needs to be a balance between work and life. The culture needs to be fostered in collaboration or respect. A positive work environment has many benefits associated. These benefits include better job satisfaction, reduced turnover, and better quality care.

□ **History and Evolution of Saroj Group of Hospitals**

• **Founding and Early Years**

The Saroj Group of Hospitals has a hoary past dating back to the early 1970s. Basically, the journey began in 1970 with the establishment of Ganesh Dass Chawla Charitable Trust. This trust was founded at the behest of Sh. Ganesh Dass Chawla, who lost his daughter to dowry death, which made him understand himself 'to be able to give back to society'. The big step taken by the trust was the opening of a free Outpatient Department (OPD) dispensary in Balimaran, Delhi, way back in 1971. It had been the first step of the trust toward free health services for the poor and needy.

• **Establishment of Saroj Hospital**

In 1997, the Saroj Group scaled up its operations to a 40-bedded hospital. The inauguration of this hospital was done by the big guns, then Chief Minister of Delhi Shri Sahib Singh Verma and Hon'ble Lt. Governor of Delhi Shri Tejendra Khanna. The establishment of this hospital was a landmark, clearly demarcating the trust's commitment to the expansion of facilities and infrastructure for more people.

• **NABH Accreditation**

Saroj Hospital received the Accolade of NABH Accreditation in 2013. Although the achievement of accreditation has deemed commitment to the sustenance of lofty standards of healthcare services, being a healthcare organization, the actual target is much more challenging. The NABH accreditation gives national and international recognition as a benchmark for the quality and patient safety standards for a hospital. With this certification, Saroj Hospital has been able to prove its conformance to these stringent healthcare standards and practices.

□ **Expansion and Services**

• **Saroj Super Speciality Hospital**

Saroj Super Specialty Hospital is the flagship institution of the Saroj Group. Since December 1996, the 154-bedded multi-super specialty hospital has established itself as a premier healthcare provider in North-West Delhi, India. It provides comprehensive healthcare services through a host of specialties. They include cardiac sciences, orthopaedics, neurosciences, emergency and trauma care, gastro sciences, renal sciences, cosmetic and plastic surgery. The orientation of this hospital towards dispensation of quality, specialized care has chalked an image in itself for which it shines like a lighthouse in the eyes of patients desirous of advanced medical treatments.

• **Saroj Medical Institute**

The Saroj Group ventured out with the creation of Saroj Medical Institute as a follow-up for Saroj Super Speciality Hospital. This 50-bed facility is located in Sector 19, Rohini, Delhi, and will be well equipped with the latest technology and modern amenities. Saroj Medical Institute seeks to provide standards of medical care as comparable to Saroj Super Speciality Hospital. The institute is designed as a tertiary care unit with high-end medical procedures, which extends the reach and service of the group to the community with unparalleled health care delivery services.

□ **"Innovations and Achievements"**

Saroj Group of Hospitals has been in the forefront when it comes to innovations and improvements in various medical experimental initiatives. The group has also given significantly to the health sector by establishing North-West Delhi's first multi-organ transplant centre. This transplant facility is fully equipped to conduct challenging transplant surgeries and other treatments, thus providing the patients with access to life-saving treatment. Its constant pursuit of excellence and embracing state-of-the-art technologies in medicine and treatment have contributed to the accreditation of the hospital as the leader in the health industry.

□ **Commitment to Health of Society**

What has remained constant for years, however, is the strong adherence of the Saroj Group of Hospitals to its very foundation based on accessible and quality healthcare for all segments of society. The group still continues to hold free health camps, outreach programs, and community health initiatives toward promoting health awareness and

rendering medical care to underserved populations. This commitment to community health stands as that value which instigates the group's mission and vision.

□ Future Prospects and Vision

The Saroj Group of Hospitals is on its way to further expansion and growth. While developing new facilities, the existing ones are being upgraded ceaselessly to enable the group to serve its patients with the best facilities available. Specialized centers of excellence, expansion of research and development work, and collaborations with healthcare institutions in developed countries to facilitate the adoption of global best practices in India are some of the ideals visualized for the future.

The Saroj Group thus relentlessly pursues the establishing of a distinguished healthcare provider not only in Delhi but all over India, continuously guided by quality, patient care, and community welfare. It takes pride in its commitment towards excellence. It allows the group to be at the forefront in innovation for healthcare and service delivery, making truly spontaneous contributions toward the advancement of better healthcare standards across the region.

Hospital accreditation and good human resource management go hand in hand for the success of Saroj Superspeciality Hospital. The NABH Accreditation program sets such high standards of quality and safety that hospitals are encouraged to constantly keep improving their services. A properly documented HR plan is part of this process, and it helps the hospital strategically manage its workforce in order to ascertain whether there are enough resources to deliver excellent patient care. It means that, by principle, if followed well, a hospital will be able to achieve and maintain a high standard of care, enhancing its reputation, hence improving patient outcomes.

OBJECTIVES

□ Objective 1: To Address the Challenges Faced by the HR Department at Saroj Hospital During NABH Accreditation Surveillance

The first objective of this research is to minutely identify and solve the different challenges that the Human Resources department of Saroj Hospital faces in the NABH accreditation surveillance process. Among the tough and most sought-after hospital certifications in India, one is accreditation to NABH, which hospitals work hard to attain and sustain. It makes sure that the highest institutions' standards with regard to patient care, patient safety, and hospital management are carefully upheld.

The HR department at Saroj Hospital, however, faces heavy doles of challenges in terms of adherence. These may include attaining comprehensive and accurate records of the employees, having all staff properly trained and competent for the assigned tasks, and adhering to strict regulatory protocols related to staff welfare and patient care. The complexity and scope of such tasks, more often than not, create substantial hurdles that an HR department has to overcome to ensure adherence to NABH standards.

It seeks to identify precisely what these problems are in the HR department, explain their causes, and measure their impact on sustaining NABH accreditation in the hospital. Hence, this study will add valuable information to the literature regarding obstacles to compliance and will thus set the foundation for the formation of effective solutions.

□ Objective 2: To implement the correctives to overcome the gaps

The second objective would be to apply correctives that would seriously address the gaps and lacuna observed in the HR practices at Saroj Hospital. Only after the problems have been suitably identified and understood, would interventions be developed and applied which seek to lesson these problems.

Corrective actions may involve updating HR policies and procedures, improving staff training programs, enhancing documentation and filing methods, and implementing new technologies that can aid HR functions. For example, if one of the gaps that has been identified is poorly documented employee credentials and training records, then corrective action could be to instigate an effective digital record-keeping system whereby all information about employees is updated and easily accessible.

These corrective actions shall, therefore, be monitored for effectiveness. The process will involve the setting of measurable goals and performance indicators, progress measurement, and checking of achievements against set targets for the evaluation of whether gaps identified have been successfully addressed by the implemented actions. It would finally ensure that interventions introduce sustainable changes in HR practices and enable the hospital to sustain the NABH accredits.

□ Objective 3: To Suggest Strategies Adopted to Address Identified Deficiencies

The third objective of this research is to propound comprehensive strategies that the HR department can adopt to ensure that the identified deficiencies are addressed and continuous compliance with NABH standards. These would be founded on the findings from the investigation of the challenges and the result of the implemented corrective actions.

The strategies would operate in both short-term and long-term plans. The short-term strategies may include immediate actions necessary to comply with the requirements of NABH, which could include conducting a few intensive training workshops with staff to quickly bring them up to speed with NABH requirements and initiating a comprehensive audit of prevalent HR documentation in order to identify and rectify discrepancies.

Long-term strategies will be aimed at providing a sustainable framework for perpetual improvement in the practice of HR. This could be realized through developing a culture of periodic trainings and professional development for staff, an entrenched mechanism within the institution that provides assurance of continued compliance with the necessary procedures, as well as creating remedial and proactive attitudes toward spotting and dealing with potential issues before they become problems. Finally, next-gen technologies and big data analytics institutionalized within HR operations may also provide valuable insights into, and more efficient handling of, all HR processes.

Proposed Best Practice Strategies will also take into Consideration Other Healthcare Institutions that have Retained their NABH Accreditation. It will establish innovation and effectiveness which can be transferred and adapted for implementation at Saroj Hospital since this research will use practices of other hospitals that have obtained this accreditation for comparison with Saroj Hospital's practices.

The research objectives are formulated to cover all HR-related challenges faced by Saroj Hospital for NABH accreditation surveillance. Research being undertaken shall focus on studying the challenges, in what manner they can be corrected, and find out strategic solutions to improve HR practices of the hospital in order to maintain compliance with the standards of the accrediting body thereby improving quality of health services at large.

□ Purpose of Research

This research would, therefore, primarily focus on identifying and solving the problems of the HR department of Saroj Hospital, Delhi, coupled with ensuring adherence to NABH standards. The NABH accreditation is a recognition and demonstrates a hospital's commitment towards providing quality patient care and adhering to best healthcare management practices. The hard work needed to attain and maintain this accreditation involves thorough attention to several operational issues, of which a number of these are managed by the HR department.

Under NABH surveillance—the periodic audits executed to validate if the process standards laid down for hospital quality get sustained—the challenges faced by the HR

department at Saroj Hospital are manifold. These may range from proper, up-to-date documentation to maintaining staff competencies or adhering to rigid protocols regarding staff welfare and care with regard to the patients attended to. The aim of the present study is to identify such challenges in totality and to suggest and implement remedial measures to effectively address them and come up with some strategic solutions so that the department can easily overcome those challenges. The objective of the research, therefore would be to ensure that Saroj Hospital does not only achieve but retains its NABH accreditation continuously and keeps on improving the quality of health services.

□ Problem Being Investigated

The problem is at the heart of the issue of the research: the difficulty of sustaining compliance to the NABH standards during the surveillance audits that the HR department of Saroj Hospital faces. Hospitals in India are required to have the NABH, for an accreditation could guarantee an institution that has followed the highest standards in patient care, safety, and operational efficiency. However, there lie several challenges in this exercise that the HR department faces, which can compromise the status of the hospitals' accreditation.

These odds are as follows, but not limited to:

- 1. Documentation and Record Keeping:** Maintaining up-to-date and accurate records for all documents related to HR, including Employees' credential records, training, and compliance certifications.
- 2. Staff Competency and Training:** It involves periodic reviewing and up-grading of staff skills and knowledge to be at par with NABH requirements.
- 3. Adherence to Protocols:** Following the protocols of NABH in all respect of employee welfare, patient safety, and hospital management
- 4. Resource Availability:** Availability of resources to invest in continuous improvement and compliances needed for upliftment required for the accreditation.

Non-compliance to these issues might cause compliance slippages that would eventually cause loss of NABH. This would hurt not only the prestige and reputation of the hospital but also hamper its quest to provide improved care to patients.

□ Context and Importance of the Problem

Saroj Hospital is an important health care entity in Delhi, committed to excellence in patient care and medical services. Maintaining NABH means a lot to the hospital because this certificate reflects the high standards in health care. As such, it is never an end in itself but calls for continuous efforts to have all these stringent criteria maintained. This continuous effort is very essential in making the hospital retain its trustworthy position among patients seeking reliable and quality medical care.

The HR department is one of the cardinal sections within a hospital that impacts the facets of recruitment, training, the welfare of employees, and the voice about compliance matters with regard to the regulatory standards. Since the solutions to the problems encountered by the HR department are fundamental to the general performance and status of the accreditation, it becomes very important.

□ Importance of Addressing HR Challenges

1. Continuous Quality Improvement: The resolution of the problems related to HR helps to foster an atmosphere within the hospital of continuous quality improvement. This will help in assessing and improving the practices for care received by the patients.

2. Safety for Patients: Good HR practices also lead towards patient safety. Better-trained and competent staff can follow up with proper procedures in a manner that can ensure safe and quality care is delivered.

3. Operational Efficiency: Hence, solving HR problems will help in managing the operations more smoothly, reduce inefficiency, and ensure smooth running of processes from the part of the hospital.

4. Reputation/Trust: Continued NABH accreditation benefits by way of reputation and thus instilling trust in its patients, stakeholders, and the community.

The present research will thus aid with specific actionable insights and strategies for the HR department at Saroj Hospital. Secondly, the identification of deficits with corrective actions will help in aligning and sustaining the enforcement and implementation of standards according to NABH, as per the requirements, and hence sustain the continuance of the accreditation and improvement in healthcare delivery.

□ Possible Impact of the Research

The findings from this research will, therefore, be of immense benefit towards ensuring that the hospital retains its NABH accreditation. The recommended corrective actions and strategies would help in not only overcoming the short-term challenges faced by the HR department but would also bring about long-term benefits to the hospital's operations. This will help Saroj Hospital continue as a frontrunner in healthcare delivery and an inspiration for other institutions to follow suit.

The study focuses on the challenges of NABH accreditation surveillance that the HR department faces and implements effective solutions for executing compliance, patient care, and overall hospital performance coupled with a good reputation.

Chapter 2: Literature Review

This chapter reviews literature from past studies discussing HR practices in the healthcare settings but with special emphasis on their bearing on accreditation and quality assurance. Going through various studies, this literature review shall further elucidate the need for addressing challenges the HR department of Saroj Hospital has been facing while undergoing NABH accreditation surveillance. The contents drawn from this literature review were presented in tabulated form by summarizing key findings from selected publications.

Literature Review Table :

Authors (Year)	Study Location	Sample Size	Sampling Techniques	Salient Features
Gupta & Rokade (2016)	India	150	Random sampling	Impact of NABH accreditation on patient safety and quality of care
Srivastava & Bhatnagar (2019)	India	200	Purposive sampling	HR challenges in healthcare management
Buchbinder & Shanks (2017)	USA	-	-	Comprehensive overview of healthcare management practices
Goel & Kumar (2004)	India	-	-	HR management strategies in hospitals
NABH (2020)	India	-	-	Accreditation standards for hospitals

□ Detailed Review and Analysis

Gupta & Rokade, 2016

- **Study Focus:** The study by Gupta and Rokade was an assessment of whether NABH accreditation had any impact on patient safety and care quality in Indian hospitals.
- **Key Findings:** According to this research, NABH accreditation has the effect of raising both the patient's safety and the quality of care to be offered in Indian hospitals. This is due to the intensive standard-setting implemented through the process and subsequent continuous monitoring. This process will begin improving the quality of clinical practice, safety measures employed, and administrative efficiency as a function of its operation.
- **Relevance:** This study strongly underscores the direct benefits accruable from NABH accreditation by insisting that it is very essential to have effective HR practices for sustainability. This therefore means, attaining standards alone is not adequate for Saroj Hospital, but the conformation of it into a culture of quality and safety.

Srivastava & Bhatnagar, 2019

- **Focus of Study:** The research focuses on the various challenges that are posed in healthcare management, which is centred on the HR management of the sector, with special focus on the context of Indian.
- **Key Findings:** In the opinion of researchers, several problems have been identified regarding HR, including shortages and a lack of proper training. Compliance with regulatory standards and high rates of turnover were some of the other problems reported. It is also observed that the lack of proper policies in the human resource pool at the state level and low support for professional development strongly intensify the problem.
- **Relevance:** Saroj Hospital needs to comprehend these challenges to instigate pertinent strategies as measures towards the upliftment of HR practices. The main steps towards achieving and maintaining the NABH would be training and development of staff, improvement in compliance procedures, and reduction in turnover.

Buchbinder & Shanks., 2017

- **Focus of the Study:** Buchbinder and Shanks clearly explain how healthcare management practices are performed in the USA.
- **Key Findings:** This is an expanded book covering themes such as strategic planning, human resource management, financial management, quality assurance, and generally management practices that coalesce in efforts geared towards achieving improvements in healthcare delivery.

- **Relevance:** Though the context is different, many principles of best practices in HR management and strategic planning are of universal application. Probably, Saroj Hospital could borrow some lessons from such practices to upgrade its HR functions so that the accreditation standards can be achieved more effectively.

Goel & Kumar (2004)

- **Focus of the study:** The study focuses on strategies of HR management in the setting of a hospital.

The researchers have mentioned some of the methodologies to be adopted towards effective HR management, which include continuous professional development and putting in place a performance management system and an employee engagement initiative. They have also pointed out that all these HR strategies must be clearly aligned with the mission and goals of the hospital.

- **Relevance:** For Saroj Hospital, these strategies can be useful for developing a sound framework in HR for facilitating the process of gaining accreditation. Organising HR policies in accordance with mission statements of the hospital keeps all the staff working in a more unified manner towards achieving common goals, hence improving overall performance and compliance.

NABH (2020)

- **Focus of Study:** The 2020 standards of NABH guidelines give the detailed accrediting standards for hospitals.
- **Key Findings:** Certain requirements regarding the management of various aspects of hospitals are thrown into light by these guidelines. All these standards are to be in compliance with the requirements for achievement and retention of NABH accreditation.
- **Relevance:** These are the very expectations against which Saroj Hospital is measured. The understanding and implementation of these guidelines are thus very critical in the hospital's accreditation process. It is the responsibility of the HR department to align all practices and policies with the NABH standards to usher in compliance and continual improvement.

Literature reviewed clearly shows that HR practices play a very critical role in the achievement and maintenance of healthcare accreditation. Cross-cutting issues emerging as key challenges include staff training, compliance with regulatory standards, and continuous quality improvement. Human resource management strategies need to be effective in addressing such challenges for sustainable accreditation.

- **Effect of Accreditation:** Researches like Gupta & Rokade, 2016 established the positive effect of accreditation on the safety and quality to patients. The necessity of

having the finest care through fulfilling the requirements for licensing is in this way incontestable.

- HR Challenges: Srivastava & Bhatnagar, 2019 recognize HR problems concerning a health area that are shared in Saroj Hospital. Among others are deficiencies inside workforce and insufficient training.
- Strategic Insights: Buchbinder & Shanks, 2017; Goel & Kumar, 2004 provide key strategies for managing the HR function in a manner that is responsive, continuous in professional development, and oriented toward organizational goals.
- Compliance Standards: Standards needed for Accreditation are found in the 2020 NABH guidelines, which serve as a critical reference document for Saroj Hospital's HR practices.

Using insights from these studies, national HR strategies can be developed at Saroj Hospital in order to surmount identified challenges and enhance compliance with NABH standards, improving overall hospital performance and quality of care delivered to patients.

Chapter 3 – METHODOLOGY

□ Key Research Questions

The methodology of the present study has been designed in the light of the following three key research questions, which can be said to form the crux of the research insight about understanding and solving the HR problems at Saroj Hospital during NABH accreditation surveillance. Each question will help in comprehensively understanding the issues, identification with effective corrective actions and finally give suggestions for sustainable strategies for its continuous improvements. The three questions are elaborated as follows :

1. What are some major challenges the HR department at Saroj Hospital faces concerning NABH surveillance?

This study investigates and analyzes the key challenges that the HR department is facing in conducting the NABH surveillance accreditation process. The objective here is to get an in-depth understanding of those specific problems that block compliance with the NABH standards.

The next study is going to adopt a mixed approach in quantitative and qualitative data collection techniques in order to probe into the question:

- Quantitative Data Collection: The researcher targets HR personnel and other relevant staff members with surveys and questionnaires to get quantitative information about various aspects of HR practices concerned with the documentation process, responsiveness to training programs, level of employee satisfaction, and compliance with protocols. Such data would project measurable insights into the extent and impacts of several challenges.

The following methods will be employed in the research to build up a full picture of the issues the HR department faces, identifying problem areas and clarifying precisely what should be changed and where.

2. What remedial action might be taken to rectify these problems?

After the identification of the main challenges, one needs to know the appropriate corrective actions that can correctly address these issues. This research question focuses on identifying practical and actionable solutions which can be implemented in order to overcome the identified challenges.

This question shall be addressed through:

- **Best Practices Review:** Literature review of case studies of other successful hospitals in the NABH accreditation process. This review shall be instrumental in recognizing best practices and some worthy strategies that can be adapted for use at Saroj Hospital.

- **Development of Action Plans:** From the data collection phase, develop specific action plans tailored to the unique needs of Saroj Hospital. The action plans have to specify just what it will take in the way of resources, timelines, and responsible personnel to fix each challenge.

The aim is to leave Saroj Hospital with the concrete set of tested corrective actions that can be implemented to resolve the HR challenges identified in the first research question.

3. What strategies can be implemented in the Saroj Hospital setting to ensure continuous improvement of HR practices and compliance with NABH standards?

This third research question helps to ensure that solutions being developed are in the direction of sustainable improvement in HR practice and continued compliance to NABH standards. One wants to see the continuance of this improved state in order to maintain the proprietorship for this accreditation and enhance the quality of healthcare services.

Accordingly, the study will:

- **Continuous Improvement Frameworks:** Come up with frameworks and mechanisms for continually Monitoring and improving human resources practices. This will involve the establishment of periodic internal audits or constant training courses to keep on reviewing and fine-tuning the HR processes.

- **Leverage Technology:** In this context, the Technology allows facilitating and supporting the execution of HR operations and ensuring compliance. This would be aided by automated state-of-the-art HR management systems, digital record-keeping solutions, and data analytics tools that charts real-time insights on any issue regarding the performance of the HRs.

As such, the objective of the study is to provide Saroj Hospital with a strong, workable, and sustainable solution to meet the challenges of HR for continuous improvement and sustaining the NABH accreditation. The comprehensive methodology suggested above shall help the hospital improve its HR practices, which in turn shall have a positive impact on improving health care services and the overall performance of the hospital.

□ Research Design

The quantitative research design chosen for this study will, therefore, facilitate the systematic collection and analysis of numerical data. The design is most suitable for the purposes of identifying patterns, measuring variables, and determining relationships between various factors. In the context of this study, it helps quantify HR-related challenges and measures the impact of the corrective measures taken.

□ Study Setting

The place under focus in this study is the Saroj Superspeciality Hospital, based in Delhi. Being one of the big healthcare providers, the need to maintain NABH accreditation is very high for this hospital in terms of its reputation and care quality. For accomplishing that task, the HR department is also at the epicentre of all activities because it has to bear the responsibility of ensuring that all the protocols and related documentation pertaining to staff conform to strict standards of accreditation. By doing so, this research work will be focused on only this particular setting to obtain in-depth information regarding the operational difficulties and points of improvement for the human resource department.

□ Study Population:

The study will involve technicians and other HR-related staff integral to the NABH accreditation process in the study. This is because these are the people who have hands-on experience with the NABH-mandated documentation and compliance requirements. Targeting a sample size of 50 to 100 but we can work on 71 as per employees' presence ensures the study will cover broad and comprehensive data collection, thereby capturing a wide range of experiences and challenges.

□ Research Procedures

- **Quantitative Assessment:** The principal tool for collecting data in this research would be the questionnaires. The questionnaires, specially designed and developed jointly with the HR staff, act as gap-tracking documents to identify the major challenges. It, therefore, entails a perusal of employee files to underline missing documents or non-compliance elements. Follow-ups with departmental heads and in-charges are made to ensure completeness of data and its accuracy.
- **Follow-Up for Documents:** This is an essential step to cross-check the preliminary findings obtained from the surveys. The study can collect any missing documents and update all the records. Through this, a check on the corrective measures taken regarding the effectiveness of those measures can also be evaluated to measure the amount of improvement in the HR practices.

□ Sample Size Calculation

The sample size of 71 staff files is deliberately selected to meet the requirements of comprehensive data collection while taken into consideration the practical constraint of the research study. This range ensures that the sample size is large enough to provide reliable results that will be generalised and also manageable in the scope of research.

□ Sampling Techniques

Sampling: By randomly selecting participants from those involved in the NABH surveillance process and HR management, the study makes sure that the sample is representative of the larger population. A random sampling methodology to address bias allows the study to have negligible levels of bias; this allows for results to be highly reliable to an extent where analysis and conclusions can be simultaneously drawn.

□ Study Instruments

Checklists: This study will have a checklist for the critical tool to measure gaps in employee files. The checklist will have all necessary documents and compliance needs as per NABH requirements. The traversal of every file against this checklist will help the study unearth systematically the areas of non-compliance and deficiencies in documents. This detailed approach will make the findings precise and action-oriented, clearly indicating what needs improvement.

This methodology of the study is designed in order to provide an all-encompassing and data-driven analysis of the HR-related issues which exist in Saroj Superspeciality Hospital. By adopting quantification methods, a representative sample, and comprehensive checklists, the study attempts at the identification of fundamental issues, applying correct remedial actions, and recommendation of continuously improving strategies for promoting their overall improvement in HR practices and NABH compliance.

Operational Definitions

□ NABH Accreditation

- **Definition:** NABH is the accreditation awarded to only those hospitals that meet the standards set by the National Accreditation Board for Hospitals & Healthcare Providers with respect to patient care and hospital management.
- **Explanation:** Holding NABH means a hospital has been put through a very tight process to guarantee conformance with high performance in delivering patient care treatment. The accreditation standards are comprehensive and cover clinical care, administrative processes, patient safety, and quality of Services Provided. In general, this accreditation signifies that a hospital has a strong commitment to excellence in health care and is nationally as well as internationally recognized. Continuation of this accreditation at Saroj Hospital will have reputational and patient-trust-related implications.

□ Surveillance Audit

- **Definition:** The surveillance audit is basically periodic in nature, undertaken by NABH to ensure that the accredited hospitals keep instilling enhancements in the conformity assessment of their organizations with respect to the continuity of their accreditation status against relevant NABH standards.
- **Explanation:** Unlike the first-time accreditation process, which was exhausting and detailed, surveillance audits are regular checks for continuous compliance. They may be annual or biennial, and not necessarily scrutiny of the hospital's processes, its documentation, and practices to continue meeting the laid-down NABH standards. At Saroj Hospital, the implication for the HR department in these audits is that they continue to hold high standards in their operations and fill gaps or deficiencies promptly, which may have been identified.

□ HR Practices

- **Definition:** Human resources practices imply all the activities, policies, and strategies implemented by an HR department, which include recruitment, training, performance management, employee relations, legal compliance.
- **Explanation:** Effective HR practice is elemental in the smooth running of any hospital. It deals with the recruitment of the right staff, their training, performance management, and maintenance of a congenial work atmosphere. For Saroj Hospital, robust HR practice would ensure that all its staff are competent, motivated, and compliant with hospital policies and external regulations, including NABH standards. This adds to the overall quality of care provided to the patients and the operational efficiency of the hospital.

□ Corrective Actions

Definition: Corrective actions are those steps taken to rectify the deficiencies observed during the NABH surveillance audit. These corrective actions are for improvement in processes, compliance with the prescribed standards, and improvement in HR good practices.

Explanation: Just in case the surveillance audit detects certain deficiencies on the part of the hospital in not meeting up with the standards of NABH, there is a need to correct such areas. The actions would have to do with updating the policies, retraining of the staff, improving upon the documentation, or even changing the procedures. The HR department of Saroj Hospital has to implement these corrective actions so that gaps are closed and compliance is achieved, and the hospital continues to meet the standards of the two-day surveillance. Only through such proactive actions can high-quality patient care and operational efficiency be sustained.

□ Issues

- **Definition:** Problems confronted by the HR department, acting as a barrier to compliance with NABH standards during the surveillance process.

- **Explanation:** There exist several challenges, namely, inadequate documentation of policies, procedures, and practices; inadequate staff training; inadequacy of resources; outdated policies, which crops up to bring the Saroj Hospital regarding NABH standards. The very initial step for rectifying the problems is to identify it in the very first instance. The HR department can devise some strategies to overcome the obstacles once these obstacles are identified and analyzed. Only then will the hospital be able to remain compliant and maintain its services of high quality.

□ Strategies

- **Definition:** These are specific approaches and methods to address deficiencies identified to improve HR practices to meet NABH standards.

- **Description:** To do away with such surveillance audit issues, the HR Department has to design some workable strategies. They may include revision of training programs, improvement in record-keeping systems, improvement in communication channels, and revision of HR policies. Now, if these strategies get implemented by Saroj Hospital, all the HR Practices would generally come in line with NABH standards; it simply means better compliance, improved staff performance, and quality patient care. In that case, strategic planning and its execution would become very important for continuous improvement and to have continuous accreditation.

□ Effectiveness

- **Definition:** Effectiveness is the extent to which implemented corrective actions realize desired improvements in human resource practices and compliance with NABH standards.
- **Explanation:** It will be pertinent to measure the effectiveness of such corrective actions for continuous improvement. This now implies the assessment of whether or not changes made were successful in addressing deficiencies identified during the surveillance audit and if changes brought about improvements in human resource practices that were sustained. For Saroj Hospital, assessing whether these actions are effective allows the Human Resources department to check not only that it is adhering to the NABH standard but is also operating effectively and efficiently. It is a continuous process in which adjustments are required to ensure high standards in this area and allow the hospital to achieve its aims regarding the care and safety of patients.

revolving four ethical considerations

- **Informed Written Consent**

It has to be regarded as imperative that informed written consent be sought from all respondents before any data collection takes place. This step gives the overview of the details of the research to the participants, its methodology, risks involved, and benefits accruing from the study. In Saroj Hospital, this will involve describing what the research is all about, how their data is going to be utilized, and any probable consequences of their involvement in the HR staff and other concerned personnel. Participants should be able to ask questions and agree voluntarily to participate in the study without any form of coercion. Consent is obtained in writing to prove free will and to leave clear evidence of their consent. Free and informed consent is ensured to protect the participants' autonomy, enhancing one's trust in the research enterprise.

- **Protection of Data**

The data protection of that obtained in the course of the research is prominent to maintain the trust of participants and conformity with the requirement of ethics.

Strong data protection at Saroj Hospital must be existed. This implies safe storage of information in the physical documents, whereas digital data are encrypted to access by authorized personnel only. Moreover, transfer of data must be via secure channels to prevent unauthorized access to the data being transferred. The safeguards ensure that participant information remains confidential while at the same time maintaining the integrity of the research for the hospital. This avoids data breaches and saves the privacy of the subjects who have participated in the research study.

- **Confidentiality** forms the very essence of ethical research.

In the study being undertaken at Saroj Hospital, all information that is of a personal nature and provided by subjects must be treated as confidential.

This implies that information such as names, contact details and job title, etc. must be anonymized or coded in such a manner that identification is very difficult. Information should therefore be provided in summary form, such that it cannot at any time trace the response to the participant. Reports or discussions resulting from the study should also not involve personal identifiers except where consent to include them has been obtained from the participant. Maintenance of confidentiality not only serves the altered purpose ethically, but it will also foster open and honest participation since they are assured that their private information is secure. Practical Implementation at Saroj Hospital

1. Informed Written Consent Process:

- o Communication: The aim, procedures, risks and benefits of the study needs to be clearly communicate to subjects with the inclusion of plain language and has to be at an appropriate level of understanding, enough to give knowledgeable consent. Some time for questions should always be provided.

- o DOCUMENTATION: Consent forms needs to be prepared with all the required information in them. Participants signature should be taken only after verification that they clearly understand their rights and all details about the research study.

2. Data Security Measures

- o PHYSICAL SECURITY : Physical documents will be stored in locked cabinets and accessible only to authorised personnel.

- o Digital Security: Develop proper password policies, and regularly perform audits to protect the data.

3. Confidentiality Practice:

- o reporting: Use aggregate reporting in reports and presentations to make sure that individual responses cannot be identified.

On these counts, Saroj Hospital ensures that the research study complies with the best universally upheld standards of discretion, respect towards the subjects, and protection of their private information. This ethical perspective not only ensures that the research study complies with the law and policy regimes in force within persons' jurisdictions but cultivates a responsible culture of trust in research practices.

Chapter 4 – Results

The primary objective is to evaluate the extent of practice of the critical documents required by NABH standards, in the perception of the employees and the HR department. The chapter is relevant because it presents the actual evidence concerning the effectiveness of the measures and policies implemented that were proposed to improve document practice.

□ Data Presentation

Results are tabulated and presented in tables to make it crystal clear for the understanding of document compliance rates of various documents. Data is not only in text form but also in figures and tables, which forms the crux of these results.

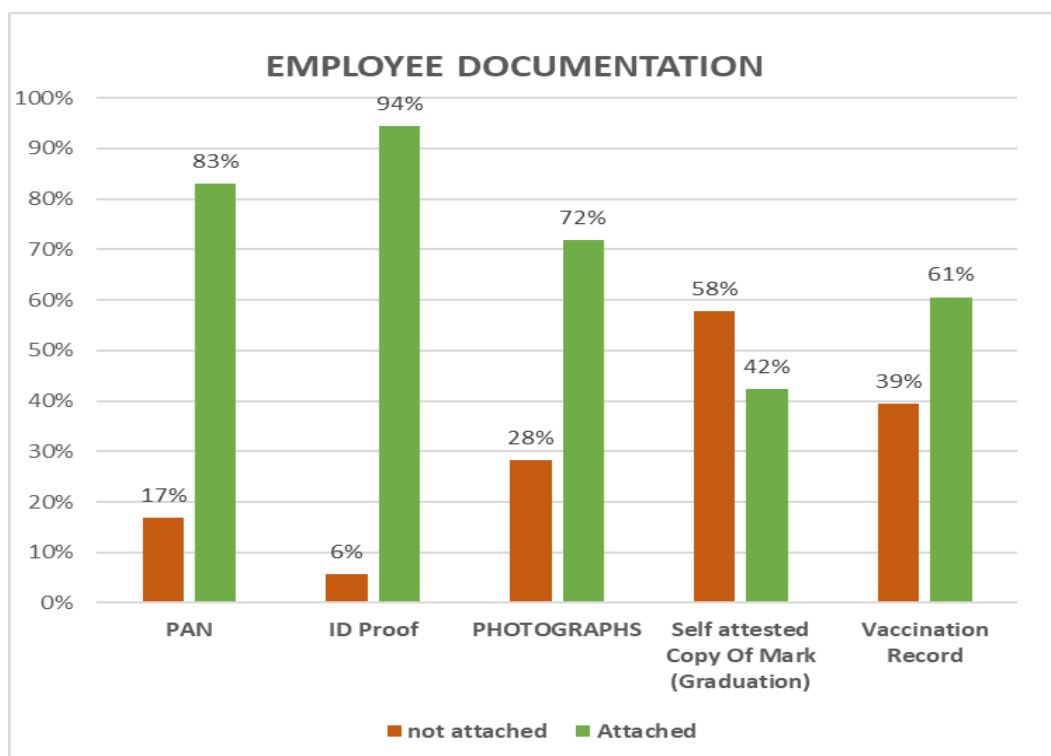
Compliance levels on the employee side and HR side by document submissions have been summarized in the following tables :-

Elements	not attached	Attached	total
PAN	12	59	71
ID Proof	4	67	71
PHOTOGRAPHS	20	51	71
Self attested Copy Of Marksheet	41	30	71
Vaccination Record	28	43	71

Table 1.1 Employee's Document Gap (%)

Elements	not attach ed	Attached	Total
PAN	12	59	71
ID Proof	4	67	71
PHOTOGRAPHS	20	51	71
Self attested Copy Of Marksheet	41	30	71
Vaccination Record	28	43	71

Table – 1.2 Employee's Document Gap Table



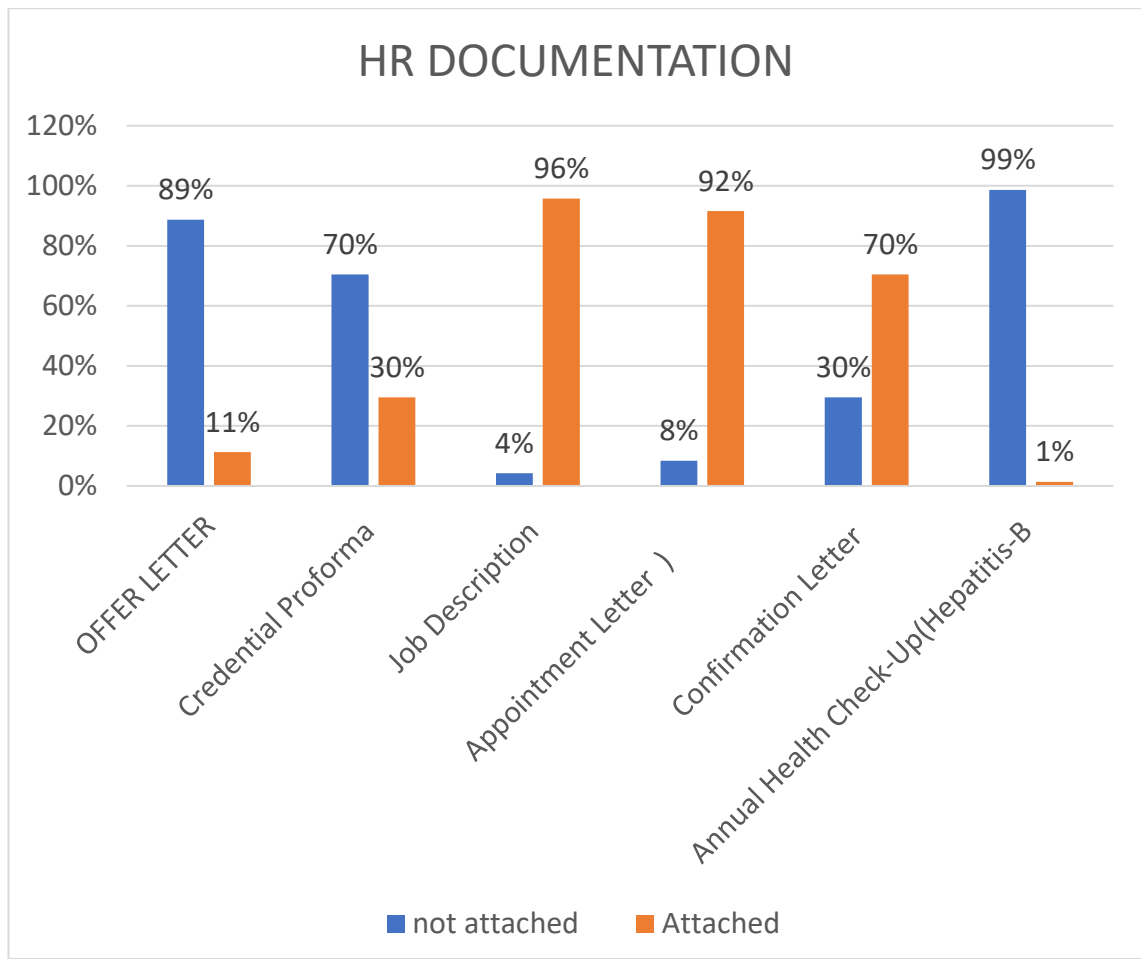
Graph 1- Employee's Document Gap

<u>Elements</u>	<u>not attached</u>	<u>Attached</u>
<u>OFFER LETTER</u>	<u>89%</u>	<u>11%</u>
<u>Credential Proforma</u>	<u>70%</u>	<u>30%</u>
<u>Job Description</u>	<u>4%</u>	<u>96%</u>
<u>Appointment Letter</u>	<u>8%</u>	<u>92%</u>
<u>Confirmation Letter</u>	<u>30%</u>	<u>70%</u>
<u>Annual Health Check-Up</u>	<u>99%</u>	<u>1%</u>

Table 2.1 HR Document Gap (%)

<u>Elements</u>	<u>not attached</u>	<u>Attached</u>	<u>Total</u>
<u>OFFER LETTER</u>	<u>63</u>	<u>8</u>	<u>71</u>
<u>Credential Proforma</u>	<u>21</u>	<u>50</u>	<u>71</u>
<u>Job Description</u>	<u>3</u>	<u>68</u>	<u>71</u>
<u>Appointment Letter</u>	<u>6</u>	<u>65</u>	<u>71</u>
<u>Confirmation Letter</u>	<u>21</u>	<u>50</u>	<u>71</u>
<u>Annual Health Check-Up</u>	<u>70</u>	<u>1</u>	<u>71</u>

Table 2.2 HR Documentation Gap



Graph 1- Employee's Document Gap

□ Data Analysis

• Quantitative Results

The analysis zeroes on the survey results and comparative data to determine the effectiveness of the corrective measures in ensuring compliance with documents:

- **Survey Findings:** Elaborate surveys that calculated the degree of compliance to NABH standards were done before and after the implementation of the corrective measures, thus displaying a snapshot of the challenges posed initially and the improvements thereafter.
- **Comparative Analysis:** By comparing compliance rates of HR& employees before interventions, the research evaluates the effectiveness of the strategies adopted by the HR department. Resultant measures will also include the percentage change in Document Attachment Rates and identification of any persistent gaps.

□ Interpretation

The analysis yields the following results:

- **Document Compliance Trends:** A high rate of attachment to documents, such as those of ID proofs and job descriptions, demonstrates the level of compliance that hospital practices show in NABH standards.
- **Areas of Improvement:** Low compliance documented for low compliance documents such as annual health checkup and self-attested mark sheets point out the areas of concern that need corrective measures.
- **Effectiveness of Corrective Actions:** Through this part of the report, an explanation about the way the implemented strategies have been adequate to overcome the identified deficiencies is presented. It argues over whether the corrective actions have churned out a major turn of events with regard to document compliance in the hospital.

Finally chapter 4 ends with general summary of findings and implications:

- **Implications for Practice:** The findings have been mapped with the recommended strategies that could alert the HR Department for possible actionable steps in which compliance of documents can be enhanced for maintaining standards of accreditation.
- **Future Directions:** Future areas of research for further exploration of additional influencing factors on document compliance and further longitudinal studies to track improvement that is sustained over time.

It would highlight not only the challenges and achievements in maintaining NABH standards but also strategies that could guide continuous improvement of informed strategies in hospital management and patient care quality. This chapter adds meaningfully to deeper insight into HR practices and accreditation processes in the healthcare setting through detailed findings and implications.

Chapter 6 – DISCUSSION

□ Interpretation of Results

The discussion interprets the results presented in chapter 4. The focus remains on the extent of compliance levels for documents submitted by employees and maintained by the HR department at Saroj Hospital. In more detail:

□ Comparison of Employee and HR Document Compliance

One can see a comparison of the compliance rates between the employee and HR document compliance. This comparison ameliorates, bringing out certain discrepancies in stark contrast:

1. Documents to Be Submitted by Employees:

a. PAN and ID Proofs: Employee compliance in providing relevant documents, among them the PAN card and the ID proofs, is usually very good. This demonstrates an awareness of basic compliance needs.

a. Photographs: They also have good compliance as far as submitting photographs is concerned, which is very essential for identification but also for record-keeping.

o Catering Certificates: Even in this case, the submission of self-attested marksheets is witnessed that it has wide gaps amongst the employees. This may represent major issues or can also be the inconsistencies in the practice followed for submitting the documents by the staff members.

o Vaccination Records: In the vaccination record, the compliance is also not very high, a good number of employees do not prefer to submit these documents so as to meet compliance

2. HR-Maintained Documents:

Job Descriptions and Appointment Letters: The compliance on the part of the HR department towards maintaining the job descriptions and appointment letters is high. This presents very strong administrative practices and adherence to regulatory compliances.

Offer Letters: Critical documents such as offer letters have very serious deficiencies in compliance. Many of the offer letters were not attached, or properly maintained—thereby pointing to flaws in procedural adherence by the HR Department.

Annual Health Check-Ups: Similar is the case of annual health check-ups, where most the records were not attached or maintained properly. This poses questions of employees' health monitoring and adherence to organizational health standards.

□ In-depth Analysis

• Understanding the Disparities

The discussion goes one level deeper in understanding the reasons that caused these disparities:

• Employee Factors: Some of the factors affecting employee conformance may be awareness, understanding of the requirements for documentation, and individual responsibilities toward compliance. In priorities that seem more important, or are more accessible, documents will be submitted by employees.

• Deficiencies Arising from Human Resources Department Practices: On the other hand, the gaps in documents maintained by human resources could be due to procedural gaps, resource constraints, or failure to place sufficient appraisal-related emphasis on documents management protocols. Besides, some reasons that may be responsible for differential base compliance levels include the lack of uniformity in practices and periodic audits.

- Implications for NABH Accreditation

The differences brought out in document compliance have the following wide implications on the maintenance of NABH accreditation:

- Patient Care and Safety: Proper documentation is a means to accurate management of patient information that aids in leading to the delivery of safe and effective healthcare services.
- Regulatory Compliance: The institution is compelled to put in place quality processes and safety measures through the requirement of complete documentation; institutions found non-compliant in certain areas, like health check-ups and employment-related records, risk losing their accreditation status.

□ Recommendations for Improvement

This chapter concludes, based on the interpretation of the findings, with these actionable recommendations:

- Communication and Awareness: Briefly explain and educate employees and HR personnel about the importance of document compliance, emphasizing what NABH desires.
- Document Management System: Standardization of procedures and workflows for document submission, verification, and maintenance will have to be developed within the HR department.
- Regular Audit and Feedback: There will need to be regular audits for tracing the compliance level and giving relevant feedback to employees and HR staff to ensure continuous improvement and alignment with the standards for the sought-after accreditation.

This section will also help strategize interventions to increase compliance, hence supporting the continuous process of efforts for maintenance of NABH accreditation and overall betterment of hospital management practices. □ Solutions for HR Department: Document Compliance Improvement 1. Systematized Documentation The modern and contemporary style of managing the employee documents and HR-related documents of Saroj Hospital could be done through a centralized digital documentation system. The following is an elaborate explanation of the solution:

- Centralised System: Digitisation would now mean that all document management activities are managed centrally. This includes storing, updating, and tracking documents of the employees like the PAN card, ID proofs, vaccination record, and other important HR documents like the Job Description, Offer Letter, Health checkups, etc.
- Automation: The system itself will remind staff and HR through automated reminders and alerts of pending document submissions and their expiration. This minimizes the possibilities of missing deadlines and ensures at all times the availability of updated documents.

- **Integration:** It is a need to have the digital documentation system integrated with other available HR management applications or with the HMS for smooth data flow, avoiding duplication and increasing efficiency in document handling.

2. Employee Awareness and Communication

Briefly explain to employees the importance of document compliance in building a culture of accountability towards adherence to NABH standards:

- **Clean Guidelines:** Clearly establish and set guidelines and checklists pertaining to documents through the onboarding process and during the course of employment. This will ensure that the documents to be furnished are clear, why they are important, and when their renewal is necessary.

3. Periodic Audit and Review

The periodic internal audits also help in maintaining high standards of document compliance and improvement issues on various fronts. The steps involved are:

- **Internal Audit:** Periodic internal audits should be performed by identified people within the HR department periodically. Internal audits must include documents submitted by employees and records maintained by the HR to check for completeness, accuracy, and compliance to NABH standards.
- **Compliance Checks:** Thoroughly check for compliance during audits against defined checklists and regulatory requirements. Bring out the inconsistency or deficiency in documents and document management practices.
- **Corrective Actions:** The audit findings shall form the basis of implementation of corrective actions. This may include house cleanup, updating of policies and procedures, further staff trainings, or enhancing the digital documentation system to fill up the identified lacunae.

□ Implementation Strategy

Effective implementation of these solutions would involve Saroj Hospital adopting a phased approach:

- **System Implementation:** Resource planning for the acquisition and implementation of a digital documentation system; training of HR personnel and employees on the usage and functionalities of the system
- **Communicate to Employees:** Educate the staff about the change process of documentation and the need for compliance. Circulate guidelines on this policy, and acquaint them with the initial training sessions.
- **Phase 3: Audit Roll-out** — The establishment of the frequency of audit cycles is to be set based on the required level of compliance and recorded effectiveness. The results of the audits shall be used for further process improvements, focusing on a culture of continual improvement.

The challenges brought out during the NABH accreditation surveillance can be effectively overcome at Saroj Hospital through the implementation of such solutions. Be that as it may, viz. digitization of documentation processes, employee awareness, and regular audits are very crucial initiatives of maintaining continued compliance with NABH standards. Such efforts will avoid risks associated with non-compliance and ensure better patient care and hospital management.

The study's limitations and strengths were in the context of improving HR practices at Saroj Hospital, Delhi, in the context of NABH accreditation surveillance.

□ Limitations of the Study

1. Sample Size

One of the primary limitations of this study is the sample size. A detailed explanation follows:

- **Representation:** The sample size may not represent the whole workers, departments, and Saroj Hospital. This could become a bias, in a way, to the information obtained and may get in a particular direction not able to represent the diversity of roles, responsibilities, and document handling practices in different departments.
- **Generalizability:** Since the sample size is small, the findings of this study cannot be generalized to any other healthcare institution of different structure or size, situated at some other geographical location. Hence, the research findings disseminated beyond Saroj Hospital have their limitations.
- **Statistical Power:** A small sample size does not only decrease the statistical power of the study but also affects the reliability and robustness of results associated with the quantitative data analysis. This can create complications in drawing definite decisions or obtaining significant correlations between variables.

□ Mitigation Strategies:

To reduce the effect of limitations of sample size, a few strategies are talked about below that the study can adhere to:

- **Stratified Sampling:** Apply strategies of stratified sampling to achieve representation from different departments and hierarchical structures within the hospital. This approach increases the variety of views that are captured for the study.

□ Strengths of the Study

1. Practical Relevance

This study offers insights relevant in practice with actionable recommendations on how to enhance HR practice within healthcare settings.

- **Contextual Relevance:** The findings directly relate to some of the challenges issues that Saroj Hospital faced during the NABH accreditation surveillance process. The study

locales into real scenarios and the practical implications of those towards relevant guidance in bettering documents' compliance and HR management process.

- **Impact on Patient Care:** The impact of streamlining document management and its compliance support, indirectly, GTX fraternity towards the hospital mission of delivering quality healthcare services to its patients.

□ Mitigation Strategies:

The following strategies can be used to maximize the strengths of the study at Saroj Hospital:

- **HEM:** Put in place mechanisms for periodic monitoring and evaluation of the change implemented. This will give insights into the regular influence that better HR practices are having on document compliance rates, satisfaction of employees and overall hospital performance.

Though limited in its sample size and other aspects, the research about improving HR practices at Saroj Hospital through enhanced document compliance is of immense practical relevance and actionable insights. This way, Saroj Hospital will be able to overcome many of its challenges associated with NABH accreditation surveillance and eventually march toward the sustained excellence of healthcare delivery. Such a comprehensive approach is functional in strategically improving organizational efficiency, other than strengthening the commitment to patient safety and quality care.

□ Implications of Findings

The findings of the study on HR practices at Saroj Hospital have huge implications both for operations within the hospital and even its entire accreditation processes. Good document compliance, therefore bridging the gaps which were identified, can bring drastic improvements in several aspects related to the working within the hospital. These are explored in some detail hereafter:

1. Enhanced Compliance with NABH Standards

Ensuring Continuity of Accreditation

- **Regulatory Adherence:** The research points out the most stringent areas of non-compliance with documents. By improving compliance in these matters, Saroj Hospital can maintain the requirements of NABH standards throughout, not only for the initial accreditation but also for the surveillance audits.
- **Pro-active Compliance:** The initiation of corrective actions and improvement in the process of documentation will keep the hospital prepared for accreditation in a proactive way. This would minimize the chances of non-compliance at the time of audits.

Improved Audit Outcomes

- **Improvised Audit Process:** Document compliance would ensure that at the time of any NABH surveillance audit, the hospital is well-equipped and has all required documents

within easy reach, ascertaining uninterrupted flow of audit and drawing least resources from hospital operations.

- Favourable Audit Report: Comprehensive and accurate documentation enables, to a great extent, generating favorable results from audits and continues to assure and work towards high standards of patient care and management.

2. Improved Human Resources Practices and Management

Simplified Documentation Work

- Centralized Computerized System: The research proposes that a centralized computerized documentation system be put into place. This kind of system would ensure monitoring, updating, and a retrieval process of documents in which the human resource department would be much more efficient, with few chances of loss of important records.
- Automated Reminders: Automated systems can generate document submission and update reminders. This keeps employees and HR staff updated about pending tasks, improving compliance rates.

Increased Employee Accountability

- Clear Guidelines and Checklists: Providing clear directions and checklists of the documents to be submitted to the employee inculcates accountability, thus ensuring all papers are correctly submitted on time.

Improved Monitoring and Evaluation

- Periodic Internal Audits: Proper internal auditing of documents on a regular basis will enable the HR department to realize the deficient areas of documentation and improve over these gaps before the actual external audits. This is a very proactive approach to make sure continuous improvement and preparedness are maintained.

3. National Accreditation Improves Patient Care and Hospital Management

Direct Impact on the Safety of Patients

- Accuracy of Employee File: When ensuring that all files of employees are complete and accurate, directly impact patient care. For example, ensuring all healthcare professionals are adequately qualified to work and have the certificates to prove it, means that patients are cared for by staff who can prove competency and qualifications.
- Vaccination and Health Records: The vaccination and health records of the employees should be updated at all times. This will, nevertheless, block the viruses of infectious diseases from spreading through the hospital and ensure the safety of patients and staff alike.

The recommended corrective actions and strategies would thus further improve the operations of the HR department on a continuous basis and, hence, help fulfill the mission of Saroj Hospital with respect to the delivery of quality patient care and leadership in the healthcare sector.

Chapter 6 – CONCLUSION

The study was an attempt to identify problems faced by the HR of Saroj Hospital in the surveillance of NABH accreditation, especially regarding compliance of documents. Such an analysis, in the present research, has brought in many critical issues to address, and all the identified issues were tried to be resolved by the implementation of some corrective actions as strategies for continuous improvement. The present research will thus give a comprehensive summary of findings and their implications.

□ Key Issues in Document Compliance

• Employee-Side Document Compliance

1. PAN Cards and ID Proofs:

o Good Compliance: A good majority of the employees had submitted their PAN cards as well as ID proofs. The percentage compliance stood at 83% and 94%, respectively. These are often documents that are required to be obtained for verification and regulation purposes.

o Resting Gaps: Fewer staff members failed to provide these documents - 17% for PAN and 6% for ID proofs. It suggests that focused follow up and reminders are call of the hour.

2. Photographs and Vaccination Records:

o Moderate Compliance: The Compliance of photographs and Vaccination records was still moderate, having a rate of 72% and 61%. These documents are vital not only for identification and

employment technique but also for health tracking at the work and an added healthcare setting.

o Major Gaps: Many employees had not submitted these documents – 28% for photographs and 39% for vaccination records, this reflecting the need for adequate intimation on the need for these documents.

3. Self-Attested Mark Sheets:

o Low Compliance: The compliance rate for self-attested mark sheets was a meager 42%. These are documents highly significant to cross-check the qualifications of the staff so that the qualification with regard to the post assigned is up to the mark.

o Major Gaps: A good percentage of the employees had not submitted these the documents (58%). An area that requires a lot of improvement.

• HR-Side Document Compliance

1. Job Descriptions and Appointment Letters:

High Compliance: As a department, the HR showed high compliance about keeping job descriptions (96%) and appointment letters (92%). Documents in this category are the Job description and appointment letters. These are documents that define roles and responsibility and formalizes employment agreement.

Minor Gaps: A minor percentage of these documents was missing thereby indicating requiring constant vigilance and regular audits.

2. Credential Proformas and Confirmation Letters

Moderate Compliance: The compliance rates for credential proforma and confirmation letters were 30 per cent and 70 per cent, respectively that is moderate. These documents are required to verify credentials and confirmation of employment status.

Significant Gaps: Significant gaps (70% in case of credential proformas and 30% in case of confirmation letters) can therefore serve as the reference points for attentions to be grasped around by the HR department.

3. Offer Letters and Annual Health Check-Ups:

Poor Conformance: Conformance under offer letters and annual health check-ups was quite poor at 11% and 1%, respectively. Offer letters are those used in the first confirmation of employment and, under such procedures, yearly health check-ups are mandatory to keep it fit and fine.

Most of these were not maintained which therefore show an area of critical improvement that needs to be done on an immediate basis

☐ Following Corrective Measures Taken

The above issues were controlled to an extent by implementing the following corrective measures:

1. Centralised Digital Documentation System:

Implementation: A centrally-created digital system for all sorts of employees and HR documentation was implemented. This system offers automated reminders as well as alerts to the employee and also HR staff to ensure that the employee submits and updates the documents as and when required.

Outcome: This streamlined the documentation process and eased its tracking for compliance.

2. Employee Awareness Programs:

Awareness Campaigns: Awareness programs were held for employees regarding document submission and compliance. Guidelines and checklists were brought out to ensure that employee understand the documentation requirements of the program.

Outcome: All these activities have generated much awareness among staff in their participation in the documentation process.

3. Regular Internal Audits:

Scheduled Audit: Internal audits related to completeness and accuracy of the documents related to employees and other HR documents are planned and audited on regular interval. These constantly help identify gaps in earlier stages and take corrective actions.

Outcome: Regular audits help regularly monitor the documents and improve them for compliance.

☐ Strategies for Continual Improvement

The following strategies are suggested for improving the HR practices continually for complying with NABH standards. They are:

1. Efficient Documentation Processes:

o **Digital Transformation:** There should be continued enhancements on the digital documentation system like more advanced tracking and reporting features. This is more specifying and would be better to have a rigorous setting on the handling of compliance.

o **Integration with Other Systems:** When the documentation system integrates with other HR and hospital management systems, there will set up a seamless experience and improved overall efficiency tolerance levels.

2. Continuous Training and Support:

Training Programmes: These may consist of periodic training programmes relating to best practices in documentation and compliance requirements for the employee and the HR staff. This training should be of updating at intervals necessary for effecting changes in standards or regulations.

Support Mechanisms: Support mechanisms, support helplines, or even online facilities will be equipped to have the requisite capability to make employees willingly comply with the need to follow documentation requirements.

3. Enhanced Monitoring and Evaluation:

Performance Metrics: Clearly defined performance metrics and benchmarks of the document compliance would help in tracking the progress and measurement of the impact suggested changes have.

Feedback Loops: Setting feedback loops between the employees and HR, or in simple words a feedback loop, will demonstrate areas for improvement and thus be useful to ensure the user-friendliness and effectiveness of the documentation processes.

Conclusion

This research study has allowed me to gain valuable insights into the problems faced by the HR department at Saroj Hospital during NABH surveillance regarding document compliance. The hospital, with its corrective actions and strategies proposed for continuous improvement, enhances HR practices and ensures that it is in compliance with NABH standards; this will have an overall impact on patient care and the betterment of hospital management. The findings of this study underline the importance of strong HR practices and comprehensive document compliance, which is specially required for the

maintenance of scalable standards of healthcare delivery to achieve success in the long run.

Summary of recommendations

- Short-Term Recommendations

Improved Communication

Description: Improvement in communication between the HR department and employees is a very important short-term plan. Communication helps employees know about documentation criteria, deadlines, and the necessity of maintaining compliance with NABH standards.

Current Gaps: From the study, it emerged that most of the staff did not know what documents to present for NABH compliance. Besides, there were inconsistencies in the way the information had been thrown to them, leading to confusion and delays in submitting the documents.

☐ Proposed Actions:

1. Clear Channels of Information Sharing: The various channels to be used are emails, intranet portals, notice board, and mobile apps. All the communication has to be clear, concise, and accessible.

2. Periodic Updates and Reminders: Periodic updates and reminders should be made about upcoming deadlines and mandatory documents. Automated reminder systems can help employees avoid missing critical dates.

3. Training: Training should be given during the sessions to educate the employees on the documentation process. The training session must focus on providing compliance information, what documents are required, and for submission, which steps should be followed.

☐ Anticipated Outcomes:

- Better awareness of time-to-time documents needing by the staff.

- High compliance levels will be experienced since documents will be submitted soon enough

- Misunderstandings and errors in proper documentation of necessary information would be eliminated.

☐ Long-term recommendations

Centralized Documentation System

Summary: the adoption of a centralized digital documentation would be a long-term approach. This will significantly boost the evident central management and monitoring of the necessary documents to be used. This is because a system in place will be relied on by all workers and the HR in accessing and handling information.

Existing Gaps: It was evident through this research study that the current documentation process was very fragmented because the documents were stored in several places and formats. This fragmentation has made tracking compliance difficult, and access to what is needed is slow for them.

□ Proposed Actions:

1. Digital Transformation: Development and deployment of digital, centralized systems that store all employee documents in a single place. The platform should be friendly and so accessible to the employees and the HR staff.

2. Automation: Includes features of automated reminders for submission and expiration, real-time tracking of document status, and an automated notification for missing documents.

3. Integration with Existing Systems: It is necessary that the centralized documentation system easily interfaces with other HR and Hospital Management systems to ensure embedding of this new system into the overall fabric of employee management and compliance tracking.

4. Data Security: Implement proper mechanisms to ensure data of employees are kept secure. This involves encryptions and availability of access controls and conducting regular audits of the security.

□ Expected Outcomes;

- Easy document management process with minimal administrative burden on the human resource department
- Enhanced precision and completeness in the placing of staff documents
- Improved compliance to the NABH standards that will go a long way in the hospital's bid for accreditation
- Enhanced security of the data and its confidentiality
- Regular audit of the security measures.

Overview: Periodic internal audits are very important to continue monitoring compliance and to identify loopholes in the documentation process. These audits also assure that the employees and the HR department have been following the NABH standards and can correct deficiencies promptly.

Current Gaps: The study reveals that there are no planned and periodic audits to gauge adherence to documentation. Due to the absence of a process to monitor the documentation, the gaps are reproduced continuously, and the risk to non-compliance is increased during NABH surveillance audits.

□ Proposed Actions:

1 Scheduled Audits: Set a schedule for routine internal audits at a minimum of quarterly. The scope for such audits should encompass the analysis of documents received from the employees, and documents maintained by HR.

2. Audit Teams: Establish audit teams composed of HR professionals and quality assurance staff. These teams should be trained in NABH standards and documentation compliance requirements.

3. Audit Checklists: Develop comprehensive audit checklists that include all necessary documents and criteria of compliance to help carry out the audit process; this ensures that none of the aspects are skipped.

4. Audit Reports: Comprehensive audit reports that highlight the discrepancies in compliance and suggest rectification, while tracking implementation.

5. Follow-up Audits: Perform follow-up audits to verify the effective implementation of rectification and improvement in compliance.

□ Expected Outcomes:

- Documentation gaps, if any, identified in time and rectified
- Progressive improvement in compliance to NABH standards
- The state of preparedness toward external NABH surveillance audits
- The quality and reliability of overall HR documentation standards are enhanced.

Conclusion

The document compliance and HR practices of Saroj Hospital will be significantly improved if the recommended short-term and long-term strategies are implemented. Specifying adequate and objective information related to documentation will result in timely and accurate submission because the employees involved will be well informed and consequently involved in the process. Digital documentation will be instrumental in ensuring centralized control over documentation, easy management of documents, enhanced document access, and effective data security. In addition, continuous audits will help in monitoring compliance for the real-time preparation of NABH accreditation.

Thus, once the mentioned problems are taken into account and the strategies proposed can be implemented, it is possible to get back to servicing the patients according to the high standards of patient care and management. The found-out results and the delivered recommendations provide a correct guideline for the HR department to engage and not lose the compliance with NABH, wherein the healthcare services are, still currently, top-notch.

□ Implications for Future Research

Research about More Aspects of HR Management and Accreditation Processes

General: The findings of this study have important overall implications for future studies in HR management and healthcare accreditation. Future studies in this area must look into ways in which technological solutions—and overall employee engagement strategies—could amplify the level of adherence to HR efficiencies.

□ Digital Documentation Systems and Compliance

Current Context: Although this study has advocated the potential benefits of a centralized, digital documentation system in managing employee and HR-related documents, a close assessment of the same in terms of the compliance rate and operational efficiency in the long run is also sought.

Proposed Research Areas:

1. Implementation and Adoption: Investigate the challenges and best practices involved in the adoption as well as the implementation of digital documentation systems into healthcare setups. The description of this would be initial setup, requirement for support, and integration with pre-existing management systems in hospitals.
2. Compliance Rates: One of the other of the most impactful aspects is the longitudinal impact that these digital documentation systems can have in terms of compliance rates. This would involve tracking submission rates of required documents, frequency of missing or outdated documents, and overall record accuracy.
3. Operational Efficiency: Study how the digital documentation systems have affected the HR operations efficiency. This could be the time saved for document management, reduction in administrative load, and the access and update of the records.
4. User Experience: Evaluate the user experience that occurred by the system for the HR staff and employees. The orientation of the study while presenting these should be the overall usability of the system, how efficient it has been in sending automatic reminders and notifications, and the level of user satisfaction.
5. Data Security and Privacy: The impact of the digital documentation system on data security and privacy will be discussed. It involves an examination of the strength of the encryption schemes at work, the access control methods, and compliance with legal statutes protecting data.

Anticipated Results:

- Comprehensive knowledge of the benefits and issues involved with a digital documentation system.
- Evidenced-based advice for healthcare organizations contemplating the adoption of such systems.
- How digital solutions can support compliance and efficiency within human resource departments.

Effectiveness of Employee Awareness Programs in improving document submission rates

Current Context: The study indicated that the effective communication and awareness programs make the employees understand their roles of documentation. In future, the impact of the effective employee awareness through the communication programs should be considered in relation to the rate of submission of the documents.

Proposed Areas for Research:

1. Program Design and Implementation: Observe different designs and implementation of the programs of employee awareness. This includes analysis of the content, nature, extent and periodicity of the communication, and the selection of different media.
2. Behavioral Influence: Analysis is done to measure the impact an awareness program would have on employees' behavior in filing in documents. This includes changes in the filing rate, timeliness, and accuracy in the submissions.
3. Participation and Involvement: There is a critical review of factors affecting employee participation and involvement in the awareness programs. A glance through motivational strategies, incentives to comply with the awareness program, and barriers that get in the way.
4. Continuous Improvement in Feedback Mechanism: The flow of information back from the employee/recipient category in interaction with the aware program would have to be inspected for its effectiveness. This continuum would analyze how feedback regarding the interaction of the employee/recipient category with the awareness program is collected, analyzed, and made to use in the pursuit of continuous improvement in the programs.
5. Comparative Studies: To measure the level of efficacy of the different kinds of awareness programs, a comparative study would be conducted. For example, between conventional ways, such as classroom training and contemporary ways like online modules and stimulating interactive platforms.

□ Likely Findings:

- The best design and implementation practices around employee awareness programs.
- Analytically sound recommendations to increase the submission of documents through focused communication and engagement efforts.
- Long-term impact knowledge of awareness programs on compliance and HR practice

□ Holistic Approach for Future Research

- Interdisciplinary Approach: Future research needs to adapt an interdisciplinary approach wherein HR professionals collaborate with healthcare administrators, IT specialists, and behavioral scientists. This will amalgamate a holistic view of the intricate dynamics at play and ensure that solutions devised are practical, effective, and pragmatic.
- Policy and Regulatory Implications: Policy and regulatory implications must be studied for carrying out any kind of digitized documentation system and awareness program. It is to be understood through research how these programs align with the existing, relevant accreditation standards, data protection laws, and healthcare regulations for the same.
- Scalability and Adaptability: Evaluate the scalability and adaptability of proposed solutions across wide-ranging healthcare settings. This would include the level of

customization available in digital systems and awareness programs that would serve the purpose of taking into account the heterogeneity in size and resources of different hospitals serving different population subgroups.

- **Cost-Benefit Analysis:** Many detailed cost-benefit analyses will be conducted to provide an indication of what it would entail financially to establish digital documentation systems and awareness programs. This includes assessing the initial investment, ongoing operation, and continuous costs that have the potential to result in an overall gain due to increased compliance and operational efficiency.
- **Demonstrable Case Studies:** Records of the real-life instances of the healthcare organizations that have produced positive impacts via the implementation of the digital documentation and awareness programs. Such case studies will offer deep insights into the best practices, lessons learned, and the actual benefits that were drawn.

Conclusion

Future research implications are huge and multi-dimensional. It would be pertinent to study the impact of digital documentation systems and the effectiveness of employee awareness programs in future studies to arrive at meaningful insights that can further better HR management and the process of accreditation in healthcare organizations. All these efforts will finally result in a better standard of patient care and hospital management, which in turn serve the prime motives of the NABH accreditation process.

□ Overview

The deep probing of the HR practices at Saroj Hospital concludes with the document gaps, and surmounting challenges discovered during the surveillance of NABH accreditation.

Bridging the gaps through strategic interventions and working on ways of continuous improvement remain the aim for consistent growth and excellence in patient care and hospital management. This chapter elaborates the observations, the implications for the hospital, and the suggested solutions for sustainable improvement.

□ Summary of Findings

Key Challenges:

- **Employee Document Compliance:** The documents submitted by the employees had major deficiencies, mainly in the self-attested mark sheets and vaccination records.
- **HR Document Compliance:** The HR department displayed good practices in documentation on job descriptions and appointment letters. However, it had serious deficiencies on offer letters and annual health checkup records.

Corrective Actions:

- **Smooth Documentation Process:** It was recommended that there shall be one single document centralization digital system to trace and maintain easily.

- Enhanced Employee Awareness: Recommendations for employee training and education on the need for documents to be submitted on time and accurately were made.
- Regular Audits and Reviews: To facilitate prompt identification and actions on document compliance gaps, periodic internal audits would be implemented.

□ Detailed Implications of the Findings

o Improvement in Document Compliance:

- Enhanced Accuracy in Record Keeping: Centralized digital documentation dramatically improves the accuracy and retrievability of employee and HR records vis-à-vis Saroj Hospital's records. This system will assist in reminders and alerts to reduce the chances of missing or outdated documents.
- Employee Engagement: Building awareness in the employees regarding the importance of document compliance can be achieved with clarity in guidelines, training sessions, and incentives on timely submissions, which in turn improves the degree of employee participation and responsibility.
- Ongoing Monitoring and Evaluation: Internal audit and review on a regular basis will enable sustaining the achieved high levels of compliance. These audits will ensure that gaps are identified at an early stage for which the HR department can take corrective actions to ensure no non-compliance during NABH surveillance audits.

Problem Areas, Recommended Solutions Implementation of the recommended solutions will lead to a significant improvement of HR practices of Saroj Hospital and will ensure conformity to NABH standards. This would help in the achievement and maintenance of accreditation, which is not the only end. The performance of the hospital, along with the quality of patient care, will be enhanced; latter being the most important output of exposure to continuous quality improvement in HR management and accreditation compliance, an essential track for sustainable excellence in the delivery of healthcare and earning a reputable trustworthy tag in the community of health care.

REFERENCES

The list shall include a detailed reference index of:

- NABH accreditation guidelines
- Relevant literature regarding HR practices in healthcare

- Past researches on the processes of accreditation and surveillance
- Scholarly articles and books on the topic under study

1.Books:

a)Buchbinder, S. B., & Shanks, N. H. (2017). Introduction to Health Care Management. Jones & Bartlett Learning.

□This text introduces the very basics of healthcare management that start with HR management, key to accreditation requirements.

a. Goel, S. L., & Kumar, R. (2004). Hospital Administration and Human Resource Management. Deep and Deep Publications.

□ This book discusses all-inclusive HR management approaches that are criticized to the healthcare sectors, hence able to provide insight into accreditation processes.

2. Journal Articles:

a. Gupta, S., & Rokade, V. (2016). "Impact of NABH accreditation on patient safety and quality of care: A study in a tertiary care hospital". International Journal of Research in Medical Sciences, 4(6), 2046-2051.

This paper reappraises the effects of NABH on the practices of hospitals about the safety of patients and excellence in care. These get under the direct influence of HR practices.

o Srivastava, R., & Bhatnagar, K. (2019). "Human Resource Challenges in Healthcare Management: An Indian Perspective". Journal of Health Management, 21(2), 245-256.

The paper sheds light on a few of the human resource challenges of India's system of healthcare. This sets an understanding of the kind of issues that would have cropped up at the time of NABH accreditation.

3. Reports and Guidelines:

NABH. 2020. Accreditation Standards for Hospitals, 5th Edition: National Accreditation Board for Hospitals & Healthcare Providers.

□This document outlines NABH accreditation standards and requirements, which shall form the prime source of reference in recognizing issues related to non-compliance, as well as addressing corrective actions equally.

Ministry of Health and Family Welfare. 2018. National Quality Assurance Standards for Public Health Facilities. Government of India.