SYNOPSIS

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MBA-HM 27

1. TITLE:

Quality Assessment of Dietetics and Health Checkup Department at Mission Hospital, Durgapur, Using NABH Guidelines and Real-Time Monitoring Checklists.

2. INTRODUCTION:

This study focuses on assessing the quality of care provided at Mission Hospital, Durgapur, specifically within the Health Checkup Department and Dietetics department.
Quality healthcare not only improves patient outcomes but also enhances patient satisfaction and reduces medical errors {Agency for Healthcare Research and Quality. (2018). The Six Domains of Health Care Quality}.
The National Accreditation Board for Hospitals & Healthcare Providers (NABH) is an esteemed body in India that sets stringent standards for healthcare quality and safety. NABH accreditation signifies adherence to standardized protocols and best practices, underscoring a hospital's commitment to delivering high-quality care {National Accreditation Board for Hospitals & Healthcare Providers (NABH). (2020)}NABH Standards for Hospitals, 5th Edition.) The Health Checkup Department and Dietetics Department at Mission Hospital face unique challenges that impact service delivery and patient care.
Due to inefficient processes, inadequate staffing, and improper patient flow management can not only affect patient satisfaction but also compromise the timely diagnosis and management of health issues. By pinpointing areas that meet or fall short of NABH standards and identifying gaps that cause delays in the Health Checkup Department, can implement targeted interventions to enhance patient care, staff practices, and overall departmental effectiveness.
The Dietetics Department plays a crucial role in patient recovery and overall health management by providing tailored nutritional advice and interventions. Challenges in this department include maintaining up-to-date dietary protocols, ensuring individualized patient care, and effectively communicating with other healthcare providers. Assessing the quality of care in this department against guidelines provided by Health of Ministry and Family Welfare will highlight areas for improvement in dietary services, which is vital for enhancing patient outcomes and promoting optimal health.

3. RESEARCH GAP:

Despite the focus on quality standards by NABH, there is a noticeable gap in research regarding the real-time monitoring of Dietetics and Health Checkup departments in Indian hospitals.
Most current studies focus on overall hospital performance or specific clinical specialties, creating a significant gap in understanding the unique operational and quality challenges these departments face. This lack of targeted research results in an insufficient foundation for developing strategies to address the specific needs of these critical areas.

The Dietetics and Health Checkup departments are critical for preventive care and patient nutrition, which are vital for long-term health outcomes. Without in-depth research into these areas, opportunities for focused quality improvement may be overlooked.
This study aims to enhance patient care by examining the specific processes and challenges within

these departments, ensuring that services are delivered efficiently and in accordance with NABH standards.

The study aims to provide detailed data on how well the Dietetics and Health Checkup departments comply with NABH standards in real-time, identifying areas needing improvement and the reasons behind non-compliance. The findings will offer benchmarking data that other hospitals can use for comparison, promoting the adoption of best practices across institutions.

4. RATIONALE:

By assessing real-time compliance with NABH guidelines, Mission Hospital can identify bottlenecks and specific areas where the Dietetics and Health Checkup departments need improvement. This will lead to the implementation of best practices, enhancing the overall quality of care provided to patients. Consistent compliance with NABH standards will not only help in maintaining accreditation but also enhance the hospital's reputation for providing high-quality care. This can attract more patients and potentially increase the hospital's revenue.

5. RESEARCH QUESTIONS:

1. How effectively does the Dietary Department at Mission Hospital comply with NABH standards and the guidelines established by the Ministry of Health & Family Welfare (Government of India)?
2. What are the specific reasons behind the delays in the process and service delivery of the Health Checkup Department?

6. OBJECTIVES:

- To Develop real-time monitoring checklists specifically aligned with NABH guidelines and the Ministry of Health & Family Welfare for Dietetics departments and also at Mission Hospital, Durgapur.
- To identify and analyze the factors and the gaps occurring during the processes leading to delays in service delivery in Health checkup department.

7. HYPOTHESIS:

- Improved adherence to NABH guidelines and government standards will enhance service delivery in the Health Checkup and Dietetics departments at Mission Hospital.
- Identifying and addressing hidden gaps in the implementation of standard protocols will lead to a reduction in delays and an improvement in compliance within the Health Checkup and Dietetics departments at Mission Hospital.

8. MATERIAL AND METHODS:

STUDY DESIGN –

Mixed-Methods Approach, combining a descriptive cross-sectional study for the Dietetics department (real-time monitoring) and a retrospective study for the Health Checkup department (historical data analysis).

DATA COLLECTION PROCESS –

FOR DIETETICS DEPARTMENT: The statistical data such as IPD admissions and patient's footfall data collected from HMIS. Data is collected as per the indicators given in the Checklist provided by the Ministry of Health and Family Welfare (Gov. of India) and monitored accordingly. Analysis is done by combining the whole month's data and then analyzed through the data analysis software.
FOR THE HEALTH CHECKUP DEPARTMENT: Patients' footfall, their arrival and departure time data from each department is collected from HMIS for the last 6 months i.e., from December to May and predictive analysis of the same is done accordingly.

SETTING-

The mission Hospital, Durgapur, West Bengal

STUDY POPULATION-

Inclusion Criteria –

- Patients admitted in the Inpatient Department (IPD) and outpatient (OPD) patients receiving dietary services:

Including IPD patients ensures representation of individuals needing in-hospital dietary management, essential for evaluating compliance with NABH standards and Ministry of Health & Family Welfare guidelines. OPD patients receiving dietary services reflect broader nutritional management practices.

- Patients visiting to health checkup department:

This includes corporate patients undergoing regular health checkups as part of employment benefits, and patients seeking care without adherence to any institutional protocol for personal health concerns.

Exclusion Criteria-

- Pediatric patients for routine health checkup:

There is a separate department i.e., Pediatrics for the health checkup for children.

STUDY TOOLS:

- Checklist developed according to the Guidelines of Health and Family Welfare (Gov. of India), 2022.
- Ministry of Health and Family Welfare. “Guidelines for modern kitchen and Dietary Services” National Health system Resource Centre 2022.
- ‘’A study on optimization of master health checkup process at a multispecialty hospital in Coimbatore’’. Journal of Advanced Research in Dynamical and Control Systems 9(14):1113-1125.
- N.Junior Sundresh, Sakshi George, sunny P Orathel, Sanju Cyriac. ‘’A Study on Total Waiting Time with Respect to Preventive Health Check-Up Programme’’ in Tertiary Care Hospital

SAMPLE SIZE:

- For Health Checkup Department –
  Sample Size = 2966
- For Dietary Department –
  Sample Size = 60

SAMPLE TECHNIQUE

- Simple Random Sampling

DATA COLLECTION PROCEDURE:

- Real-time monitoring checklists is employed on a daily basis to systematically capture relevant information pertaining to dietary services and adherence to NABH standards. Data entries are recorded electronically using Excel spreadsheets, ensuring that observations are promptly documented and organized for subsequent analysis**.**
- For Health checkup department, data is collected from HMIS and recorded electronically using Excel spreadsheet.

9. DATA ANALYSIS PLAN:

- Descriptive statistics and inferential analysis will be conducted using MS Excel to identify trends and significant factors affecting compliance and delay

10. ETHICAL CONSIDERATIONS:

- The study will adhere to ethical guidelines and regulations governing research involving studies and data recorded for the same.
- Informed consent is obtained from all participants, and data is kept anonymous to protect confidentiality.

11. IMPLICATIONS OF RESEARCH:

- The findings of the study can lead to the areas for improvement and inform policy decisions and quality improvement initiatives, potentially leading to better patient outcomes and enhanced compliance with NABH standards in other healthcare settings."
- Also, it would aid in pinpointing the deficiencies responsible for falling short of the NABH standards and guidelines and the occurrence of Waiting time during the process.

12. REFERENCES:

- John Gnanaraj, Rajendra G. Kulkarni, Dibyajoti Sahoo and B. Abhishekh. "Assessment of the Key Performance Indicator Proposed by NABH in the Blood Centre of a Tertiary Health Care Hospital in Southern India". Indian Journal of Hematology and Blood Transfusion 39(1):3.
- Ministry of Health and Family Welfare. "Guidelines for modern kitchen and Dietary Services" National Health system Resource Centre 2022.
- ''A study on optimization of master health checkup process at a multispecialty hospital in Coimbatore''. Journal of Advanced Research in Dynamical and Control Systems 9(14):1113-1125.