SUMMER INTERNSHIP PROGRAM

at

From 1st May 2024 to 30th June 2024

A REPORT BY

SHREY MAHAJAN

Master of Business Administration

HOSPITAL AND HEALTH MANAGEMENT

2023-25

Under the Mentorship of

DR. J.P SINGH

cloudnine

29th June 2024

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Mr. Shrey Mahajan** student of **IIHMR University, Jaipur** has completed his Internship in **Quality Department** with us from **01-May-2022 to 29th June 2024** under the guidance of **Ms. Radhika Govil, Head - Clinical & Medical Quality.**

We wish him good luck for his future endeavors.

For Cloudnine
(A unit of Kids Clinic India Ltd.)

KIDS CLINIC INDIA LTD. NOIDA

Trisha
Manager - People Department

IIHMR UNIVERSITY

University Faculty Mentor Approval

This is to certify that Mr. **Shrey Mahajan** of academic year 2023 - 25 of **INSTITUTE OF HEALTH MANAGEMENT AND RESEARCH** has prepared a poster with respect to his/her summer internship held during May-June 2023.

He has carried out work as per the guidelines. His poster is approved for presentation.

Jagajeet Dhanal Singh

Date: (Signature of Faculty Mentor)

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Shrey Mahajan,(1837, HM-28)

IIHMR UNIVERSITY

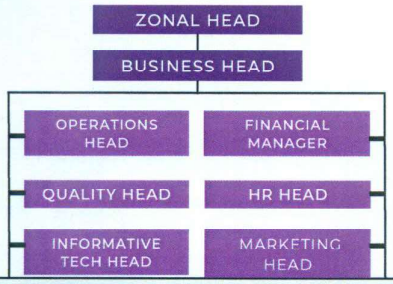
Summer Internship - Cloudnine Hospital

cloudnine

ABOUT CLOUDNINE HOSPITAL

- Founded in 2007 by Dr. R. Kishore Kumar in Bangalore, Cloudnine Hospital specializes in maternity and child care.
- The first facility gained a reputation for excellence in maternity, gynecology, fertility, and pediatric care.
- Cloudnine has expanded to Chennai, Gurgaon, Pune, and Mumbai.
- It offers advanced neonatal care and fertility treatments.
- Cloudnine is committed to setting benchmarks in maternal and child health across India.

Structue Of The Organization



cloudnine
We Know Moms

VISION

To be the kind of leader in the space of women and child health that India has not witnessed yet, by providing premier quality healthcare to women and children.

MISSION

Our aim is the pursuit of excellence in providing the best maternal and neonatal care by setting higher standards for ourselves and striving constantly to achieve them.

PROJECT

- Primary - Prescription Audit & Audit of Initial Assessment performed by duty doctors
- Secondary - PCPNDT Audit

OBJECTIVE

- Increase the use of digital prescriptions and ensure adherence to prescribing guidelines.
- Evaluate and enhance the completeness and accuracy of initial patient assessments.
- Ensure compliance with PCPNDT Act regulations and proper documentation practices.

METHODOLOGY

- For the prescription audit, prescriptions were downloaded from the Cloudnine Admin website and audited.
- For the initial assessment audit, the Lifetrenz app was checked to verify the upload status of initial patient assessments.
- For the PCPNDT audit, forms were collected from the radiology department and audited for compliance with various documentation requirements.

FINDINGS

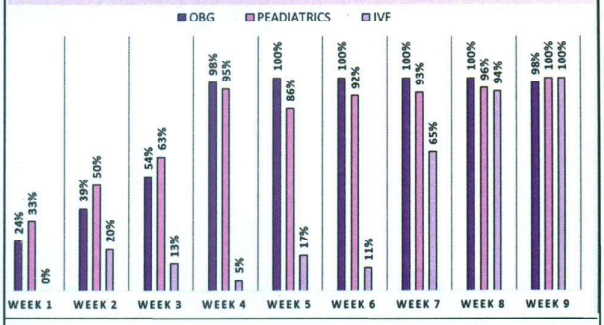
- **The percentage of initial assessments recorded on the LT app was very low, as they were often taken on registers instead.**
- **Duty doctors frequently saved the initial assessment reports without submitting them, leading to low compliance on the system.**
- **In the prescription audit, many instances of unreadable handwriting and frequent omission of allergy information were observed.**
- **Initially, the number of digital prescriptions was low because doctors preferred handwritten prescriptions, finding digital methods time-consuming and challenging to adapt to.**

PCPNDT Findings -

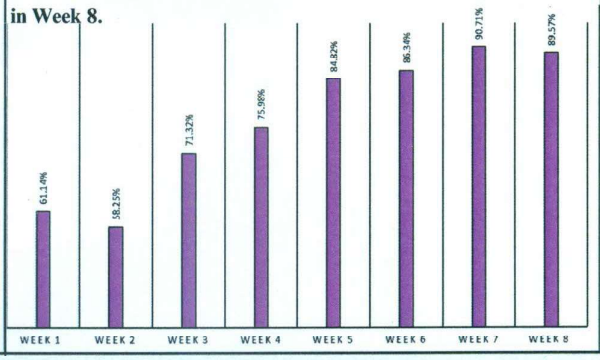
- **Four reports lacked scan descriptions.**
- **Four reports were missing the doctor's name and signature.**
- **Five reports were signed by unauthorized individuals.**
- **Many reports were unstamped.**
- **Four reports had the wrong doctor's name.**
- **Two reports had incorrect patient IDs and details.**
- **Two forms had incorrect scan dates.**
- **One form was missing, and four had duplicate numbers.**

RESULTS

Monitoring showed a significant increase in pediatric and OBG initial assessments on the Lifetrenz app from week 4. A substantial rise in IVF initial assessments was observed week 7 onwards.



Improvement in the percentage of digital prescriptions from 61.14% in Week 1 and 58.25% in Week 2 to 90.71% in Week 7 and 89.59% in Week 8.



SWOT

STRENGTHS

- Conducts comprehensive audits (e.g., prescription, PCPCDT, discharge summary).
- Focused on implementing and monitoring IPSG.
- Proficient in maintaining NABH accreditation.
- Develops and implements QIPs to enhance healthcare delivery.

WEAKNESSES

- High employee turnover disrupts quality improvement initiatives.
- Inconsistent staff participation in training sessions on fire safety and emergency codes.
- Focus on maternity and pediatric care may overlook broader hospital needs.

OPPORTUNITIES

- Ensure comprehensive employee training on quality standards and protocols.
- Enhance patient feedback systems to identify improvements and boost satisfaction.
- Launch a medicine delivery app for convenient medication access and better customer service.

THREATS

- Employees missing key meetings, like fire safety and emergency codes, can impact safety and preparedness.
- Regulatory changes in healthcare can challenge maintaining standards.
- Limited resources and budget can hinder quality initiatives.

Challenges Faced During Internship

- Initial data collection was difficult without staff assistance but improved over time.
- Inconsistent data entries in child registers and discharge summaries.
- Low training attendance required multiple reminders.
- Misplaced OT register in IPD highlighted document management issues.
- Duty doctors and scanning staff failed to properly complete Lifetrenz app assessments and PCPNDT forms despite multiple visits.
- Fire drill showed nursing staff unprepared and delayed lift shutdown, needing better emergency training.

Suggestions

- Guide duty doctors on online initial assessment submission.
- Implement OT and MRD reconciliation for accurate delivery docs.
- Standardize templates for child registers, OPD prescriptions, and other docs.
- Conduct regular audits for documentation standards and PCPNDT compliance.
- Meet with department heads to push digital prescriptions and adoption.
- Incentivize accurate documentation.
- Ensure HIS team resolves data issues promptly.
- Train housekeeping staff on heavy-duty gloves; enforce usage.
- Enhance fire drills with mandatory participation and regular sessions.

Learnings

- Gained experience in audits.
- Learned initial assessment procedures and discharge summary processes.
- Acquired knowledge of IPSG goals and NABH accreditation, including facility safety and fire safety audits.
- Developed insights into Pediatrics, OBG, and IVF departments through perinatal data compilation.
- Learned to conduct mock drills and handle emergencies from senior staff.
- Mastered workload management while maintaining quality standards.

Usefullness Of Internship

- Extensive experience in corporate environments and direct patient care.
- Proficient in managing patient needs and resolving queries effectively.
- Deep understanding of corporate organizational dynamics.
- Actively engage with experts to continually learn and grow.
- Significantly enhanced skill set through valuable internships.
- Leveraged internships for extensive networking opportunities.

Jagjeev Pal Singh

Weekly Report-1

Name of the Organization: **Cloud Nine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **1** **From:** **1st May 2024 to 5th May 2024**

Activity Done	• Conducted in-depth study of PCPNDT regulations. • Completed prescription audit project (April 29 - May 1). • Reviewed child register for April, focusing on quarterly checks. • Participated in Code Pink training for emergency preparedness. • Completed comprehensive hospital facility tour. • Attended meetings with HR and quality departments. • Assessed documentation practices in medical records department.
Linking theory (Classroom learning) with practice at your organization	• Ensured legal compliance using PCPNDT Act knowledge. • Implemented DrX and LT Apps from college training. • Optimized patient care with OPD and IPD management concepts.
Gaps identified in the working area.	• Identified gaps in child register documentation, including missing sex information and incorrect numbering. • Noted illegible handwriting affecting communication and patient understanding. • Observed missing information on allergies, drug-drug, and drug-food interactions. • Found that despite SOPs recommending digital prescriptions, doctors prefer handwritten ones.
Suggestions for improvement	• Incentivize digital prescription adherence. • Implement regular audits to improve prescription quality. • Encourage open communication to address barriers to digital adoption.
Plan for the next week	• Conduct May 2nd prescription audit for quality and safety. • Review March child register for accuracy and completeness.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-2

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **2** **From:** **6st May 2024 to 12th May 2024**

Activity Done	• Conducted PCPNDT audit (May 18) for regulatory compliance. • Completed prescription audit project (May 29). • Developed and presented emergency codes training for hospital staff. • Created patient literature on safe parenting practices. • Conducted March quarterly child register check. • Studied seven quality tools for process improvement. • Attended meetings with HR and quality department reps.
Linking theory (Classroom learning) with practice at your organization	• Applied quality tools like histograms and scatter charts for process improvement. • Integrated digital healthcare knowledge using DrX App and LifeTrenz App in hospital settings. • Utilized OPD and IPD management concepts for patient care optimization.
Gaps identified on the working area.	• Identified discrepancies in PCPNDT audit, including missing test reports. • Found gaps in child register documentation, like missing child weights. • Identified OPD prescription documentation gaps in Gynaecology, IVF, and Paediatrics. • Noted doctors' preference for handwritten prescriptions despite digital format standards. • Observed illegible handwriting affecting communication and patient understanding. • Found missing critical information like allergy and drug interactions.
Suggestions for improvement	• Implement standardized templates for child registers and OPD prescriptions. • Provide training on accurate documentation practices. • Encourage transition to digital prescriptions. • Offer handwriting improvement workshops for healthcare providers. • Conduct regular audits to ensure documentation standards. • Foster interdisciplinary collaboration for comprehensive documentation.
Plan for the next week	• Continued PCPNDT audit from May 9 onwards for ongoing compliance. • Conducted May 10 prescription audit to ensure quality and safety standards. • Reviewed February child register for record accuracy and completeness.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-3

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **3** **From:** **13th May 2024 to 19th May 2024**

Activity Done	• Conducted facility safety inspection per NABH guidelines. • Prepared April's Obstetrics and Gynaecology department statistics for perinatal meeting. • Assessed IPSG 16 compliance in kitchen and housekeeping. • Completed PCPNDT audit and prescription audit in May. • Verified child register data integrity for February quarterly check.
Linking theory (Classroom learning) with practice at your organization	• Conducted a study on International Patient Safety Goals (IPSG). • Applied NABH accreditation knowledge. • Implemented DX App and Life-Trenz App in hospital operations. • Optimized patient care using OPD and IPD management concepts.
Gaps identified on the working area.	• Found missed delivery entry due to OT register vs. MRD records discrepancy. • Identified issues in PCPNDT audit: missing doctor's sign, duplicated form numbers. • Noted OPD prescription discrepancies: handwritten scripts, missing allergies, drug interactions. • Observed illegible handwriting, incomplete info affecting patient safety in Gynaecology, IVF, Paediatrics.
Suggestions for improvement	• Implement regular OTMRD reconciliation for accurate delivery documentation. • Standardize PCPNDT audit protocols to minimize errors. • Improve documentation legibility and completeness through clear guidelines and training. • Establish quality assurance protocols for prompt issue resolution. • Encourage digital OPD prescriptions to reduce risks. • Foster interdisciplinary collaboration for comprehensive documentation.
Plan for the next week	• Prepare monthly statistical data for paediatrics department meetings. • Continue PCPNDT audit for ongoing compliance. • Conduct prescription audit to maintain quality and safety standards. • Review January child register for accuracy and completeness.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-4

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **4** **From:** **20th May 2024 to 26th May 2024**

Activity Done	• Prepared comprehensive monthly statistical data for Paediatrician, Anesthesia, Neonatal, and Triage departments for April perinatal meeting. • Presented and attended April perinatal meeting. • Conducted PCPNDT audit from May 17th to May 23rd for compliance with sex selective abortion prevention regulations. • Completed prescription audit project from May 17th to May 23rd. • Conducted quarterly check of January child register to verify data integrity. • Initiated initial assessment audit of In-Patient Department (IPD) patients' duty doctors' assessments for April.
Linking theory (Classroom learning) with practice at your organization	• Applied PCPNDT knowledge. • Integrated digital healthcare service knowledge into DX App and LifeTrenz App in hospital operations. • Utilized OPD and IPD management concepts to optimize patient care.
Gaps identified on the working area.	• Found PCPNDT audit discrepancies: missing doctor's sign, form number duplication. • Discovered January birth register audit issues: missing baby weights, incomplete baby details like birth time. • Observed low rates for OBG Paediatrics, and lowest for IVF. • Identified OPD prescription discrepancies: handwritten scripts, missing allergies, drug interactions. Noted illegible handwriting and incomplete info affecting patient safety in Gynaecology, IVF, Paediatrics.
Suggestions for improvement	• Conduct regular training on PCPNDT guidelines and emphasize accurate documentation. • Develop and distribute detailed SOPs for recording birth details to ensure consistent protocols. • Create standardized templates for prescriptions and medical records to include essential information. • Implement incentives to promote thorough and accurate documentation.
Plan for the next week	• Continued PCPNDT audit from May 23rd for ongoing compliance. • Conduct prescription audit from May 23rd to ensure quality and safety standards adherence.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-5

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **5** **From:** **27th May 2024 to 2nd June 2024**

Activity Done	• Conducted PCPNDT audit from May 24th30th for compliance with sex-selective abortion prevention regulations. • Completed prescription audit project from May 24th to 29th. • Developed detailed flowchart to educate patients on PCPNDT procedures. • Executed comprehensive fire safety audit covering 63 checklist points. • Initiated initial assessment audit of In-patient Department (IPD) patients' duty doctors' assessments for May.
Linking theory (Classroom learning) with practice at your organization	• Applied fire safety principles during the audit. • Integrated digital healthcare service knowledge from college using DX App and LifeTrenz App in hospital settings. • Utilized OPD and IPD management concepts to optimize patient care.
Gaps identified on the working area.	• Observed low rates for OBG Paediatrics, and lowest for IVF. • Discovered discrepancies in PCPNDT audit: missing doctor's signoff, incorrect personnel signing, and duplicate form numbers. • Identified OPD prescription documentation issues: handwritten prescriptions despite digital standards, missing essential information like allergies and drug interactions. • Noted illegible handwriting and information gaps in specialties (Gynaecology, IVF, Paediatrics) impacting communication and patient safety.
Suggestions for improvement	• Schedule meetings with duty doctors to demonstrate proper assessment procedures and gather feedback. • Encourage open dialogue to address challenges in patient assessments. • Conduct regular training on PCPNDT guidelines and accurate documentation. • Develop standardized templates for comprehensive prescriptions and medical records. • Implement incentives for accurate documentation to ensure compliance.
Plan for the next week	• Ongoing IPD initial assessment audit for April duty doctors' assessments. • Continuing PCPNDT audit from May 31 for compliance. • Conducting prescription audit from May 29 to ensure quality and safety standards.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-6

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **6** **From:** **3rd June 2024 to 9th June 2024**

Activity Done	• Completed PCPNDT audit (May 31 - June 7) for compliance. • Compiled detailed monthly statistics for OBG department's May perinatal meeting. • Reviewed child register quarterly in May for data accuracy. • Developed patient information on blood donation. • Finished prescription audit project (May 30 - June 5). • Started IPD initial assessment audit for May duty doctors' assessments.
Linking theory with practice at your organization	• Applied digital healthcare service knowledge from college using DX App and LifeTrenz App in hospital operations. • Implemented OPD and IPD management concepts from college to enhance patient care.
Gaps identified on the working area.	• Found child register omissions, like twice missing weight records. • Discovered PCPNDT audit discrepancies: unsigned reports, incomplete scan details, and incorrect patient IDs. • Noted initial assessment completion for OBG patients around 90%; lower rates for Paediatrics and lowest for IVF. • Identified OPD prescription issues: handwritten notes, missing allergy and interaction data. • Observed illegible handwriting and information gaps impacting safety in Gynaecology, IVF, and Paediatrics.
Suggestions for improvement	• Introduce standardized templates for child registers and OPD prescriptions; train staff on accurate documentation. • Schedule meetings with duty doctors to demonstrate assessment procedures and gather feedback. • Foster open dialogue to address challenges in patient assessments. • Conduct regular training on PCPNDT guidelines and accurate documentation. • Introduce incentives for thorough documentation to promote compliance.
Plan for the next week	• Ongoing IPD initial assessment audit for April duty doctors' assessments. • Continuing PCPNDT audit from June 7 for compliance. • Conducting prescription audit from June 6 to ensure standards adherence. • Compiling monthly statistics for paediatrics, neonatal, anesthesia, and triage departments for the perinatal meeting. • Organizing fire emergency mock drills for staff training.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-7

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **7** **From:** **10th June 2024 to 16th June 2024**

Activity Done	• Audited discharge summaries for seven Cloudnine units across multiple departments. • Conducted fire emergency mock drills with nursing and security staff. • Completed PCPNDT audit from June 7-15. • Compiled monthly statistics for pediatrics and neonatal departments for perinatal meetings. • Completed a prescription audit from June 6-13. • Initiated an initial assessment audit of IPD patients for June.
Linking theory with practice at your organization	• Applied digital healthcare knowledge to the DX App and LifeTrenz App in the hospital. • Used OPD and IPD management concepts from college to enhance patient care.
Gaps identified on the working area.	• Fire emergency mock drill issues: late nurse participation, late arrival of fire personnel, no fire extinguisher use, and improper evacuation procedures. • Discharge summary audit issues: low IVF compliance, missing data for Thanisandra and Chennai, absent IVF/Fertility discharge summaries, and misfiled records. • PCPNDT audit discrepancies: missing doctor signatures, scan details, and incorrect patient ID entries. • Initial assessment completion rates: 100% for OBG, around 90% for Pediatric, and lowest for IVF patients. • OPD prescription documentation issues: handwritten prescriptions, missing allergy and drug interaction information.
Suggestions for improvement	• Improve fire emergency drills with mandatory participation and regular sessions. • Regular check by HIS team. Informed HIS team about data unavailability and requested immediate rectification. • Schedule meetings with duty doctors for assessment procedure demonstrations and feedback. • Foster open dialogue to address challenges in patient assessments. • Conduct regular PCPNDT training and emphasize accurate documentation.
Plan for the next week	• Compile monthly statistics for anesthesia and triage departments for perinatal meetings. • Continue discharge summary audits for remaining units. • Continue initial assessment audit of IPD patients for April. • Continue PCPNDT audit from June 16th and prescription audit from June 14th to ensure quality and safety compliance.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-8

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **8** **From:** **17th June 2024 to 23rd June 2024**

Activity Done	• Developed and started implementing a QIP to transition housekeeping staff to heavy-duty gloves. • Audited discharge summaries for seven Cloudnine units across various departments. • Compiled monthly statistics for anesthesia and triage departments for perinatal meetings. • Conducted a PCPNDT audit from June 16-21. • Completed a prescription audit from June 14-22. • Initiated an initial assessment audit of IPD patients for June.
Linking theory with practice at your organization	• Applied digital healthcare knowledge to the DX App and LifeTrenz App in the hospital. • Used OPD and IPD management concepts from college to enhance patient care.
Gaps identified on the working area.	• Housekeeping staff use latex gloves instead of more protective, cost-effective heavy-duty gloves. • Discharge summary audit issues: low IVF compliance, incomplete data for Golf Course Road and Bellandur, missing IVF/Fertility summaries, and misfiled records. • PCPNDT audit discrepancies: missing doctor signatures and incorrect patient ID entries. • Initial assessment completion rates: 90%-100% for OBG and Pediatrics, and lowest for IVF patients. • OPD prescription issues: handwritten prescriptions, missing allergy and drug interaction information.
Suggestions for improvement	• Conduct training for housekeeping staff on the benefits of heavy-duty gloves and enforce their usage. • Notify HIS team about server data unavailability and request rectification. • Schedule meetings with duty doctors to demonstrate assessment procedures and gather feedback. • Encourage open dialogue to address challenges faced by duty doctors during assessments. • Conduct regular PCPNDT guideline training, emphasizing accurate documentation
Plan for the next week	• Continue QIP to transition housekeeping staff to heavy-duty gloves for better protection and cost-effectiveness. • Continue initial assessment audit of IPD patients for April. • Continue PCPNDT audit from June 22nd onwards and prescription audit from June 23rd.

Signature of the Student **Approved by the IIHMR University's Mentor**

Weekly Report-9

Name of the Organization: **CloudNine Hospital, Noida**
Area/ Department/ Project of Summer Internship Program: **Quality Department**
Name of the Student: **Shrey Mahajan**
Roll no: **1837** **Stream:** **Hospital and Health Management**
Week no: **9** **From:** **24th June 2024 to 30th June 2024**

Activity Done	• Suggested a QIP for consistent patient follow-up until hospital consultation. • Performed a comprehensive ambulance audit. • Conducted a PCPNDT audit till June 27th. • Initiated an initial assessment audit of IPD patients for June.
Linking theory with practice at your organization	• Applied digital healthcare knowledge to the DX App and LifeTrenz App in the hospital. • Used OPD and IPD management concepts from college to enhance patient care.
Gaps identified on the working area.	• PCPNDT audit uncovered discrepancies: missing doctor signatures and incorrect patient ID entries. • Patients face challenges meeting doctors as scheduled due to unavailability in the allotted time and the high volume of patients, leading to delays and incomplete medical consultations. • Initial assessment completion rates: 100% for OBG, lower for Pediatrics, and lowest for IVF patients. • OPD prescription documentation issues: handwritten prescriptions, missing allergy and drug interaction information. • PPE kit issues: missing goggles and lack of spill management training for staff.
Suggestions for improvement	• Schedule meetings with duty doctors for assessment procedure demonstrations and feedback. • Foster open dialogue to address challenges in patient assessments. • Implement comprehensive spill management training and ensure full PPE kit readiness. • Conduct regular PCPNDT guideline training, emphasizing accurate documentation.

Signature of the Student **Approved by the IIHMR University's Mentor**

Compiled Reporting Format

Name of the Organization: Cloudnine Hospital, Noida

Department of Summer Internship Program: Quality Department

Name of the Student: Shrey Mahajan

Roll no: 1837 **Stream: HM-28**

Activity Done	• Conducted an in-depth study of Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) regulations for the month of May and June. • Completed prescription audit project from April 29th till June 26th. • Initiated a thorough initial assessment audit of In-Patient Department (IPD) patients, evaluating the duty doctors' assessments for the month of April, May and June. • Conducted a quarterly check of the child register for January, February, March, April and May to verify data integrity. • Created patient information literature emphasizing safe parenting practices and blood donation. • Developed and presented a comprehensive emergency codes presentation for hospital staff, followed by conducting training sessions to educate staff on emergency codes, protocols, and procedures. • Performed a thorough facility safety inspection checklist following the guidelines outlined by the National Accreditation Board for Hospitals & Healthcare Providers (NABH). • Prepared comprehensive monthly statistical data for the Obstetrics and Gynaecology (OBG), Paediatrician, anesthesia, and neonatal, triage department, ensuring it is ready for presentation at the monthly perinatal meeting for April and May • Assessed adherence to International Patient Safety Goals (IPSG) 1-6 in both the kitchen and housekeeping departments. • Developed a detailed flowchart to educate patients on the PCPNDT (Pre-Conception and Pre-Natal Diagnostic Techniques) procedure. • Performed a comprehensive discharge summary audit for 13 Cloudnine units evaluating the Obstetrics and Gynaecology, Paediatrics, and Fertility departments. • Conducted fire emergency mock drills in collaboration with nursing and security staff. • Executed a comprehensive fire safety audit of the facility, covering 63 specific checklist points, and performed a detailed ambulance audit assessing critical aspects of the vehicle and its equipment.

	• Developed and started implementation of a Quality Improvement Plan (QIP) to transition housekeeping staff from using latex examination gloves to heavy-duty gloves, which are reusable, more cost-effective, and provide better protection
Linking theory (Classroom learning) with practice at your organization	**1) Emergency Codes Presentation and Training** • Emergency response protocols and hospital emergency codes. • Crisis management and communication. **2) Used the knowledge of international patient safety goals for audit.** **3) Ensured legal compliance using PCPNDT knowledge.** **4) Implemented the knowledge from college of the digital patient record system in lifeTrenz and DrX app.** **5) Facility Safety Inspection (NABH Guidelines)** • NABH guidelines for facility safety inspections. • Risk assessment and management in healthcare settings. • Safety protocols and compliance standards. **6) Monthly Statistical Data Preparation** • Data collection and statistical analysis methods. • Knowledge of IPD,OPD,OT and triage departments **7) Fire Emergency Mock Drills** • Applied fire safety principles during the audit • Collaboration strategies with nursing and security staff. **8) Quality Improvement Plan (QIP) for Glove Transition** • Quality improvement methodologies and plan development. • Benefits and safety standards for personal protective equipment (PPE). • Cost-benefit analysis and implementation strategies.
Gaps identified on the working area.	**1) CHILD REGISTER And PERINATAL DATA** • Uncovered audit issues in the birth register, including missing baby weights • Discovered discrepancies between OT register and MRD records resulting in a missed delivery entry. • Identified gaps in child register documentation, and incomplete birth details such as birth time. • Identified deficiencies in child register documentation, such as missing sex information and incorrect numbering. • Reason for emergency LSCS was not mentioned in many of the entries • An abortion case was mentioned as a still birth in the birth register **2) PRESCRIPTION AUDIT** • Identified OPD prescription documentation gaps in Gynaecology, IVF, and Paediatrics. • Noted doctors' preference for handwritten prescriptions despite digital format standards. • Found OPD prescription discrepancies including handwritten scripts and missing information on allergies and drug interactions, impacting patient safety in Gynaecology, IVF, and Paediatrics.

	3) PCPNDT AUDIT • Identified discrepancies in PCPNDT audits, including missing test reports and duplicated form numbers. • Discovered discrepancies in PCPNDT audits including missing doctor's name and signature, incorrect personnel signing • Uncovered PCPNDT audit discrepancies such as unsigned reports, missing of stamp of the performing doctor and incorrect patient IDs. **4) INITIAL ASSESMENT AUDIT** • Observed low rates for OBG and Paediatrics, and lowest for IVF. - improved the OBG and paediatrics • Doctors were not following the procedure completely hence they weren't able to submit the report on LifeTrenz • The duty doctor in IVF was a BAMS, hence the rights were not given to them **5) DISCHARGE SUMMARY AUDIT** • Discharge summary audit issues: low IVF compliance, missing data for Thanisandra and Chennai unit, incomplete data for Golf Course Road and Bellandur unit. • Absence of IVF/Fertility discharge summaries, and misfiled records. **6) QIP** • Found that the housekeeping staff use latex gloves instead of more protective, cost-effective heavy-duty gloves. • Patients face challenges meeting doctors as scheduled due to unavailability in the allotted time and the high volume of patients, leading to delays and incomplete medical consultations. **7) OTHERS** • Fire emergency mock drill issues: late nurse participation, late arrival of fire personnel, no fire extinguisher use, and improper evacuation procedures. • Ambulance - PPE kit issues: missing goggles and lack of spill management training for staff.
Suggestions for improvement	**1) INITIAL ASSESMENT AUDIT** • Removal of duty doctors' register so that all the initial assessment documentation is done online • Guide the duty doctors through the process of submission of initial assessment as it was seen that the assessment was not properly submitted by the doctors. • Give were rights to the IVF duty doctor as suggested **2) CHILD REGISTER AND PERINATAL DATA** • Implement regular OT and MRD reconciliation for accurate delivery documentation.

	• Implement standardized templates for child registers • Improve documentation legibility and completeness through clear guidelines and training. • Develop and distribute detailed SOPs for recording birth details to ensure consistent protocols. 3) **PCPNDT AUDIT** • Provide training on accurate documentation practices. • Conduct regular audits to ensure documentation standards. • Conduct regular training on PCPNDT guidelines and emphasize accurate documentation. 4) **PRESCRIPTION AUDIT** • Incentivize digital prescription adherence, Knowing the problems of the doctor and accordingly making changes in the format of online prescription • Regular meeting and visits to department in-charge for digitalization of prescription • Implement regular audits to improve prescription quality. • Encourage open communication to address barriers to digital adoption. • Implement standardized templates for OPD prescriptions. • Implement incentives to promote thorough and accurate documentation. 5) **DISCHARGE SUMMARY AUDIT** • Regular checks by HIS team and immediate rectification of data unavailability issues. **6) QIP** • Conduct training for housekeeping staff on the benefits of heavy-duty gloves and enforce their usage. **7) OTHERS** • Improve fire emergency drills with mandatory participation and regular sessions. • Implement comprehensive spill management training and ensure full PPE kit readiness.

Signature of the Student **Approved by the IIHMR University's Mentor**