

BRIEF HISTORY



Established in 2007 by the Apollo Tires Group, Artemis Health Institute is a leading healthcare provider in Gurgaon. It was the first hospital in the region to receive Joint Commission International (JCI) accreditation in 2013, highlighting its commitment to global healthcare standards. Within three years, Artemis also achieved National Accreditation Board for Hospitals & Healthcare Providers (NABH) accreditation, reinforcing its dedication to quality care. Known for its advanced medical technology and skilled professionals, Artemis offers specialized services in cardiology, oncology, orthopedics, neurology, and more. The hospital emphasizes patient-centric care, innovation, and excellence, continuously setting new benchmarks in the healthcare industry.

VISION

"To create an Integrated World Class Healthcare System, Fostering, Protecting, Sustaining and Restoring Health through Best in Class Medical Practices and Cutting Edge Technology developed through in depth Research carried out by the World's Best Scientific Minds"

MISSION

"To provide exceptional outcome for patient and families by providing excellent nursing care services through evidence based practices, cutting edge technology & compassionate care"

ORGANISATION STRUCTURE



SWOT ANALYSIS

STRENGTH

- Strong reputation as well as expertise providing high-quality medical care.
- Partnerships and collaboration with multinational healthcare networks.
- Advanced healthcare technology.

WEAKNESS

- High expenses for services
- limited utilization of new technologies to improve healthcare standards.

OPPORTUNITIES

- Expansion of organization and increasing bed capacity
- Growing medical tourism in India
- Increasing Healthcare Market

THREAT

- Regulatory change in healthcare
- Rapid expansion in a highly competitive market
- Slow integration of IT systems

PROJECT ON EFFECTIVE COMMUNICATION- EFFECTIVE HANDOVER AND CRITICAL RESULT (IPSG 2)

AIM:

To define a safe process to convey critical information about a patient's care when transferring care responsibilities from one physician to another, one nurse to another, from one level of care to another level of care, from in patient units to diagnostic or other treatment departments and monitor the procedure for reporting of critical results of diagnostic tests

METHODOLOGY

Study Design: Descriptive cross-sectional study as it describes the current status of IPSG Compliance, Non-Compliance and Partial Compliance in the hospital.

Sample size: For IPSG 2- Effective Communication- Effective Handover - 30

For IPSG 2.1 Critical Alerts- 20

Scope: Wards, ICU, Emergency.

- To promote specific improvements in patient safety
- Highlight problematic areas in health care
- Describe evidence-and expert-based consensus solutions to these problems

There are 6 IPSG in total, as follows:

Goal 1. Identify Patients Correctly

Goal 2. Improve Effective communication- 2 Critical results

2.1 Effective Handover

Goal 3. Improve the Safety of Medications

Goal 4. Ensure Safe Surgery

Goal 5. Reduce the Health Care Associated Infections

Goal 6. Reduce patient risk from Fall

IPSG 2: EFFECTIVE HANDOVER

Hospital Policy

To define a safe process to convey important information about a patient's care when transferring care responsibilities from one physician to another, one nurse to another, or among personnel, or when a patient leaves Artemis Hospital for another site of care.

CRITICAL RESULT

Hospital Policy: To ensure the effectiveness and timeliness of Critical results reporting in hospital within defined timelines.

CHALLENGES FACED



Navigating Complex Organizational Structures

Adapting to Technological Systems

Balancing Multiple tasks and completing them at a given time

Variability in the level of engagement and commitment from different stakeholders.

LEARNINGS DURING INTERNSHIP



Gained hands-on experience in applying quality improvement tools such as Cause and Effect analysis, RASI matrix, Brainstorming, Pareto chart

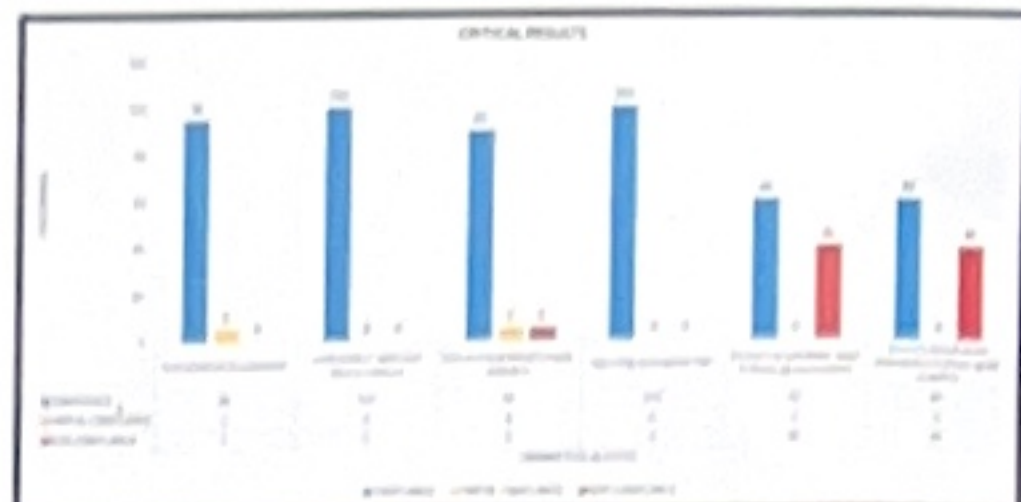
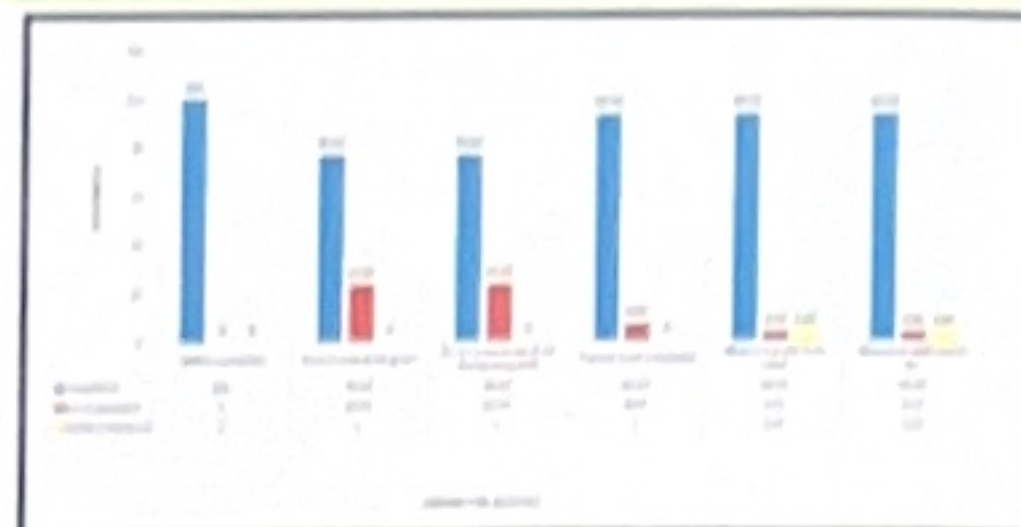
Gained insights into healthcare regulatory requirements and accreditation standards, and how they influence quality management practices

Witnessed the Quality Department's role in maintaining high hospital standards

Assisted in different mock drills (Code Black, Code blue, Code Pink, Code Orange)

Explored NABH and JCI audits, from preparation to action, ensuring top-notch quality

DATA ANALYSIS AND FINDINGS



PARAMETERS FOR EFFECTIVE HANDOVER

- SBAR documented
- Doctor's Handover given
- Doctor's Handover done during every shift
- Transfer form completed
- When is Transfer form used (staff knowledge)
- What does SBAR stands for (staff knowledge)

PARAMETERS FOR CRITICAL RESULTS

- Details documented in the critical value register: Date, time, values reported and Name of the person who informed it
- Confirmation of critical order is done with 'Read Back procedure'
- Is the reporting done within defined TAT? (Lab - within 15 mins, Radiology - 30 mins)
- Doctors documented critical value in the progress note/ HIS
- Doctors documented intervention in the progress note/ HIS

- After a thorough analysis it was found that Effective Handover had 23% Non-Compliance in the parameter "Doctor's Handover" not documented properly in HIS
- In Critical Result 40% Non Compliance was seen in "Doctor's Documented Critical value and Intervention" in progress note in HIS

Theory Into Practice

THEORETICAL

- ✓ Regulatory Standards
- ✓ Quality Improvement (QI) Theories
- ✓ Healthcare Accreditation

PRACTICAL

- ✓ Problem solving
- ✓ Conducting audits
- ✓ Use of Quality Improvement Tools
- ✓ Implementing Quality Improvement projects

USEFULNESS OF INTERNSHIP



- Exposure to the working environment of the hospital setting
- Learn the challenges faced while implementing protocols and how to overcome that
- Developed skills and confidence, equipping for future challenges and opportunities

SUGGESTIONS FOR IMPROVEMENT



- Proper documentation of patient file record to fulfill potential gaps and safety of patients.
- Implement mandatory training on the use of Electronic Health Records (EHR) for all staff.
- Conduct timely training sessions on IPSG requirements and ensure all staff are familiar with the hospital policies.
- Evaluate the need to augment human resources to meet increasing demands, ensuring adequate support for all hospital functions