SUMMER INTERNSHIP PROGRAM

At

Rukmani Birla Hospital, Jaipur

From 1st MAY'2024 to 1st JULY'2024

A REPORT BY

Purva Mathur

Master of Business Administration

Hospital and Health Management

2023-25

Under the Mentorship of

Dr. Tripti Bisawa

IIHMR UNIVERSITY

CK BIRLA HOSPITALS | RBH

RBH/2024/Jul/HRD/6154

Date: 01 Jul 2024

TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Purva Mathur** has successfully completed her training in Medical Services Department from 01 May 2024 to 01 Jul 2024.

We found her sincere, punctual & hardworking. We wish her every success in her future and career.

For **CK Birla Hospital - RBH**

Raju Kumar
Unit Head - HR

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Purva Mathur** of the academic year 2023-25 of **INSTITUTE OF HEALTH MANAGEMENT RESEARCH** has prepared a poster with respect to her summer internship held during May-June 2024.

She has carried out her work as per the guidelines. Her poster is approved for presentation.

Date: July 22, 2024

Dr. Tripti Bisawa
Professor
IIHMR University, Jaipur

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TURNAROUND TIME IN NON-INVASIVE CARDIOLOGY DEPARTMENT

Name – Dr. Purva Mathur Roll No. 1785 HM-28
Faculty Mentor – Dr. Tripti Bisawa Organization Mentor – Dr. Saket Joshi

BRIEF HISTORY AND INTRODUCTION

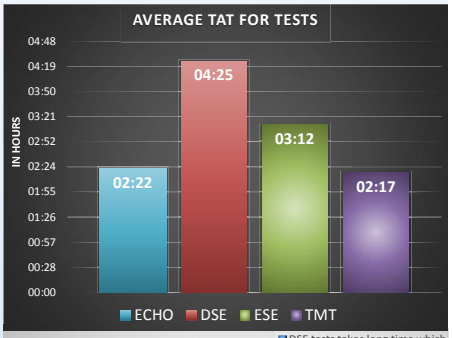
RUKMANI BIRLA HOSPITAL is a 230 bed multi-specialty hospital n Jaipur with world-class infrastructure which offers comprehensive in-patient and out-patient services. Since its founding RBH has been providing its patients with the full medical care, encompassing outpatient services, Neurosciences, GastroScience, Renal Science, Cardiology, Orthopaedics & Joint Replacement and more. CK Birla Hospitals, comprising of its three landmark identities, The Calcutta Medical Research Institute (CMRI,1969,Kolkata), BM Birla Heart Research Centre (BMB,1989, Kolkata) and its recent venture Rukmani Birla Hospital(RBH,2016,Jaipur) have set milestones in the healthcare Industry.

VISION

To provide best of Patient Service & Clinical Excellence.

MISSION

To create Clinical Centres of Excellence on a strong backbone of research, academics and evidence-based medicine for best clinical and patient outcome.

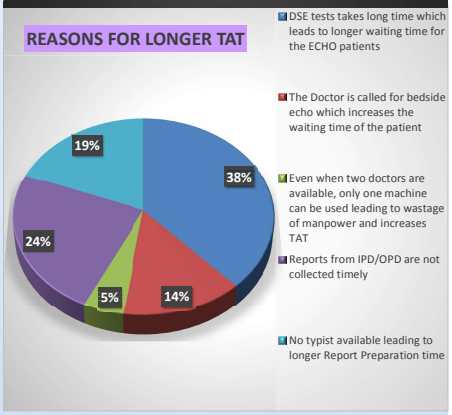


OBJECTIVES

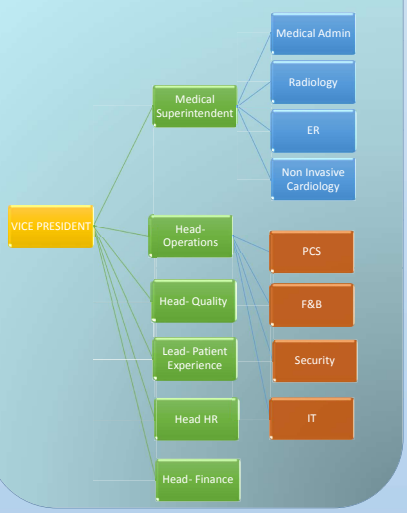
- To determine the Turnaround time for patients in Non-invasive Cardiology Department
- To identify factors that contribute to longer Turnaround time.
- To find out the solution for longer Turnaround time in Non- invasive Cardiology department

LEARNINGS

- Functioning of Non invasive Cardiology department
- Various Emergency Codes
- Working of PHC department
- Conducting Audits
- Patient Management

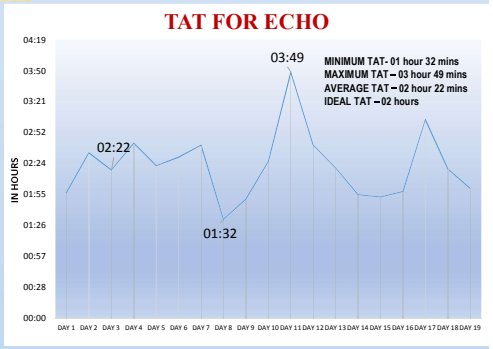


ORGANIZATION STRUCTURE



CHALLENGES

- Recording data of multiple procedure in the department simultaneously
- Understanding complex workflows and procedures in Non-invasive cardiology department

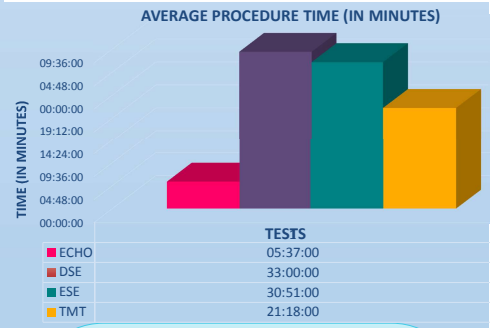


THEORETICAL UNDERSTANDING

Theoretical knowledge gained at university helped in understanding the fundamental concepts and principles related to the functions of a hospital

PRACTICAL EXPOSURE

Practical exposure demonstrated how to operate in real time hospital scenarios using theoretical knowledge



TESTS	
ECHO	05:37:00
DSE	33:00:00
ESE	30:51:00
TMT	21:18:00

SWOT ANALYSIS

STRENGTH

- Advanced Diagnostic Technology
- Skilled Personnel
- High Patient Flow

WEAKNESS

- Dependence on Equipment
- Longer Waiting Time
- Manpower Shortage

OPPORTUNITIES

- Advanced Scheduling Systems
- Integration of EHR
- Automation and AI

THREATS

- Growing Competition
- Technological issues
- Patient No-Shows and Late Arrivals

USEFULNESS OF INTERNSHIP

- Practical Experience in Hospital
- Gained insights into departmental work processes, identifying key issues and challenges.
- Exposure to Corporate work culture
- The internship provided valuable opportunities for direct patient interaction, allowing for the development of strong communication skills and a deeper understanding of patient needs.

SUGGESTIONS

- Implement a planned test schedule for PHC patients to streamline operations and reduce chaos.
- A typist with experience in preparing reports for the Non-Invasive Cardiology Department should be hired to fasten the report preparation process
- Ensure IPD patients are shifted promptly after appointments are made with the department.
- A separate ECHO machine for PHC patient to avoid the chaos and time delay
- After every 1 hour the OPD/IPD staff should come to collect the reports from the department

WEEK 1 REPORT

Name of the Organisation: CK BIRLA HOSPITAL

Area/ Department/ Project of Summer Internship Program: Medical Services

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** MBA-HM

Week no: 1

From: 1st May 2024 to 4th May 2024

Activity Done	Observation of OPD, IPD, Lab, CSSD, OT, ICU, Radiology, Emergency department, Pharmacy Department
Linking theory (Classroom learning) with practice at your organisation	Staffing pattern, Zoning of different departments, Functioning of departments
Gaps identified on the working area.	There was overcrowding in OPD. Lack Of proper staffing in Non-Intensive cardiology department, Long waiting time for dispensing of medicine at the pharmacy
Suggestions for improvement	A typist can be provided to the Non- Intensive Cardiology department for better functioning
Plan for the next week	Discussion and start working on Summer Training Project

Signature of Student- Purva Mathur

WEEK 2 REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Project Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 2 **From:** 6th May 2024 to 11th May 2024

Activity Done	• Finalized Project Topic- Turn- around time in Non-Invasive Cardiology department • Started Data Collection for TAT in Non-invasive Cardiology department. • Data Collection for Drugs and Consumables in OT • Identifying major reasons for patient refusal in ER • Verifying Reasons for Patient refusal in ER with the patients
Linking theory (Classroom learning) with practice at your organisation	Zoning in hospital , Communication
Gaps identified on the working area.	• Long Waiting time in Non- invasive Cardiology department • Long waiting time for Admitting consultants in ER
Suggestions for improvement	Better scheduling of patients in Non-Invasive Cardiology Department
Plan for the next week	Data Collection for the project and it's Analysis

Signature of Student- Purva Mathur

WEEK 3 REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 3 **From:** 13th May 2024 to 18th May 2024

Activity Done	• Data Collection for Turnaround Time in Non-invasive Cardiology department and analysing the major reason of chaos and waiting time in the department • Data Collection for Drugs and Consumables in OT and their Coding from pharma department • Identifying major reasons for patient refusal in ER • Verifying Reasons for Patient refusal in ER with the patients
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients
Gaps identified on the working area.	• Long Waiting time in Non- invasive Cardiology department • Long waiting time for Admitting consultants in ER
Suggestions for improvement	Reports should be collected timely in Non- invasive Cardiology Department
Plan for the next week	Data Collection for the project and it's Analysis

Signature of Student- Purva Mathur

4th WEEK REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 4 **From:** 20th May 2024 to 26th May 2024

Activity Done	• Data Collection for Turnaround Time in Non-invasive Cardiology department and analysing the major reason of chaos and waiting time in the department • Analysing the collected data and preparation of graphs. • Preparation of Presentation for Mid-Month Review. • Identifying major reasons for patient refusal in ER • Verifying Reasons for Patient refusal in ER with the patients • Observing Response for different codes in Emergency Department.
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients
Gaps identified on the working area.	• Long Waiting time in Non- invasive Cardiology department • Delay in dispatching of tests report for Tests
Suggestions for improvement	Staffing issues in NIC Department The response during the Emergency codes can be improved in the IPD
Plan for the next week	Looking for new project ideas

Signature of Student- Purva Mathur

5TH WEEK REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 5 **From:** 27th May 2024 to 1st June 2024

Activity Done	• Analysing the major reason of chaos and waiting time in the department • Analysing the collected data and preparation of graphs. • Compilation of all the data • Working on a new Project- Audit on Antibiotic prophylaxis in Pre/Post OP Area. • Data Collection for the project • Analysis of the data collected in the audit • Identifying major reasons for patient refusal in ER • Verifying Reasons for Patient refusal in ER with the patients
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients, Quality Check
Gaps identified on the working area.	• Long Waiting time in Non- invasive Cardiology department • Delay in dispatching of tests report for Tests • Non-Compliance in Consent Form and Part Preparation in Pre/Post OP area
Suggestions for improvement	PROJECT 1- Report can be printed on different floors itself Notification of number of patients on HIS
Plan for the next week	Preparation of Graphs for PROJECT 2 Identifying other gaps in the hospital and work on it

Signature of Student- Purva Mathur

6TH WEEK REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 6 **From:** 3rd June 2024 to 8th June 2024

Activity Done	• Working on a new Project- Feasibility of a starting an Oncology department in CK Birla Hospital • Analysis and submission of previous project report- Audit on Antibiotic Prophylaxis in Pre-op area. • Identifying Reasons for patient refusal in emergency department
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients, Quality Check
Gaps identified on the working area.	• Non-Compliance in Consent Form and Part Preparation in Pre/Post OP area
Suggestions for improvement	PROJECT 2 – Proper Documentation by the nursing staff
Plan for the next week	Collection of data about oncology department Identifying other gaps in the hospital and work on it

Signature of Student- Purva Mathur

7TH WEEK REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 7 **From:** 10th June 2024 to 15th June 2024

Activity Done	• Working on a new Project- Feasibility of a starting an Oncology department in CK Birla Hospital • Collecting data and articles for the oncology department • Started working on a project – Comparative study of PHC Packages of CK BIRLA, EHCC, FORTIS Hospital • Identifying and verifying Reasons for patient refusal in emergency department • Launch of new HIS in the Hospital, Identifying the problems faced by different departments
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients, Quality Check, Research
Gaps identified on the working area.	Not smooth functioning of HIS of the hospital
Suggestions for improvement	Better HIS interface for the consultant
Plan for the next week	Collection of data about oncology department Identifying other gaps in the hospital and work on it

Signature of Student- Purva Mathur

8TH WEEK REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 8 **From:** 17th June 2024 to 22nd June 2024

Activity Done	• Collecting data and articles for the oncology department for a project on feasibility of starting a new Oncology Department in CK Birla hospital. • Working on a project – Comparative study of PHC Packages of CK BIRLA, EHCC, FORTIS Hospital • Visited EHCC and Fortis hospital to collect data on functioning of PHC • Started with an Audit in ICU's for Hand Hygiene • Identifying and verifying Reasons for patient refusal in emergency department
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients, Quality Check, Research
Gaps identified on the working area.	Non-compliances in Hand hygiene in some areas of the hospital
Suggestions for improvement	Trainings on Hand Hygiene
Plan for the next week	Compiling all the collected data Poster Preparation Identifying other gaps in the hospital and work on it

Signature of Student- Purva Mathur

9TH WEEK REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Week no: 9 **From:** 24th June 2024 to 1st July 2024

Activity Done	• Collecting data and articles for the oncology department for a project on feasibility of starting a new Oncology Department in CK Birla hospital. • Completed Comparative study of PHC Packages of CK BIRLA, EHCC, FORTIS Hospital • Compiling data on Audit in ICU's for Hand Hygiene • Identifying and verifying Reasons for patient refusal in emergency department • Started with Poster preparation • Observed STP plant working • Observed MRD Department Working • Completed Poster and got it approved by the Organization mentor • Preparation of Report
Linking theory (Classroom learning) with practice at your organisation	Communication; Patient Interaction, Management of Patients, Quality Check, Research
Gaps identified on the working area.	Non-compliances in Hand hygiene in some areas of the hospital
Suggestions for improvement	Trainings on Hand Hygiene
Plan for the next week	

Signature of Student- Purva Mathur

COMPILED REPORT

Name of the Organisation: CK BIRLA HOSPITAL, JAIPUR

Project of Summer Internship Program: Turn- around time in Non-Invasive Cardiology department

Name of the Student: Purva Mathur

Roll no: 1785 **Stream:** Hospital and Health

Activity Done	• Observation of OPD, IPD, Lab, CSSD, Radiology, Emergency department, Pharmacy Department • Observed OT and ICU working • Finalization Project Topic- Turn- around time in Non-Invasive Cardiology department • Observed the Working of Non- Invasive Cardiology Department • Started Data Collection for TAT in Non-invasive Cardiology department. • Data Collection for Drugs and Consumables in OT • Identifying major reasons for patient refusal in ER • Verifying Reasons for Patient refusal in ER with the patients • Observed Mock drill for Emergency Code – BLUE • Analysing the major reason of chaos and waiting time in Non-invasive Cardiology department • Analysing the collected data and preparation of graphs.

	• Preparation of Presentation for Mid-Month Review. • Observing Response for different codes in Emergency Department. • Compilation of all the data • Working on a new Project- Audit on Antibiotic prophylaxis in Pre/Post OP Area. • Data Collection for the project • Analysis of the data collected in the audit • Observed mock drill for CODE- RRT • Noted More than 4 hour stay in Emergency Department and listed it's reason • Working on a new Project- Feasibility of a starting an Oncology department in CK Birla Hospital • Analysis and submission of previous project report- Audit on Antibiotic Prophylaxis in Pre-op area. • Collecting data and articles for the oncology department • Started working on a project – Comparative study of PHC Packages of CK BIRLA, EHCC, FORTIS Hospital • Launch of new HIS in the Hospital, Identifying the problems faced by different departments • Visited EHCC and Fortis hospital to collect data on functioning of PHC • Started with an Audit in ICU's for Hand Hygiene • Completed Comparative study of PHC Packages of CK BIRLA, EHCC, FORTIS Hospital

	• Data Collection for Hand Hygiene and Infection Control Bundles • Compiling data on Audit in ICU's for Hand Hygiene • Continued Identifying the major reasons for patient refusal in ER • Verifying Reasons for Patient refusal in ER with the patients • Observed STP plant working • Observed MRD department functioning • Started with Poster preparation • Completed Poster and got it approved by the Organization mentor • Observed Code PINK
Linking theory (Classroom learning) with practice at your organisation	• Understanding hospital workflows, patient flow, and departmental interdependencies. • Surgical procedures, infection control, and critical care management. • Data collection methods and statistical analysis. • Cost control in Operation Theatre. • Patient behaviour, communication barriers, and healthcare accessibility. • Emergency response protocols and code management. • Process improvement and patient flow optimization. • Audit methodologies and infection control practices. • Comparative analysis and benchmarking

	• Health information systems and implementation challenges. • Field visits. • Hand hygiene protocols and audit processes. • Infection control and prevention strategies. • Communication • Patient Interaction • Management of Patients • Quality Check • Research • Staffing pattern • Zoning of different departments • Functioning of departments
Gaps identified on the working area.	**FOR NON – INVASIVE CARDIOLOGY DEPARTMENT** • Lack Of proper staffing in Non-Intensive cardiology department • Delays in patient processing and Reporting in Non- Invasive Cardiology Department. • Delay in Report Collection by the IPD and OPD staff • The unavailability of a dedicated typist results in longer times required for report generation. • Not proper scheduling of PHC and IPD patients • Despite multiple calls, IPD patients are not shifted to the department on time • IPD staff often bring incomplete previous history files, causing further delay.

	• Only one machine is available for both DSE/ESE and regular echocardiograms (ECHO), causing significant delays. **GENERAL GAPS OBSERVED IN THE HOSPITAL** • Overcrowding in OPD • Long waiting time for dispensing of medicine at the pharmacy • Inconsistent Adherence to Infection Control Protocols • Resistance to change and technical issue during HIS implementation initially • Low compliance with Hand Hygiene protocols

	RECOMMENDATION FOR HOSPITAL • Regular training and audits to ensure compliance with infection control guidelines. • Streamline workflows and improve coordination among staff. • Conduct regular and comprehensive emergency drills and training sessions. • Implement strict audit and feedback mechanisms to ensure guideline compliance. • Reinforce hand hygiene practices through education and regular audits.

Signature of the Student- Purva Mathur

Approved by the IIHMR University's Mentor -