

SUMMER INTERNSHIP PROGRAM

at

Paras Health, Udaipur

From 01/05/24 to 30/06/24

A REPORT BY

Pallabi Debnath

Master Of Business Administration

(Hospital And Health Management)

2023-25

under the Mentorship of

Dr Varsha Tanu



TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Ms. Pallabi Debnath** has completed her Internship at Paras Hospitals, Udaipur from **01-May-24 to 29th-June-24** under the supervision of **Ms. Akshita Singhvi (Head Quality)** at Quality Department.

The Management acknowledges & appreciates her contributions to the Organization during her tenure and wishes her all the best for her future endeavours.

For Paras Health, Udaipur


Ms. Shalini Tyagi
Head - Human Resources**PARAS HEALTH**

Paras Health, Plot No. 1, Shobhagpura Circle, Udaipur, Rajasthan (India)

Register Address : 1st Floor, Tower B, Paras Twin Towers, Golf Course Road, Sector 54, Gurugram, Haryana 122002

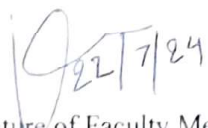
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IIHMR UNIVERSITY FACULTY MENTOR APPROVAL

This is to certify that Ms. PALLABI DEBNATH of the academic year 2023-25 of INSTITUTE OF
HEALTH MANAGEMENT RESEARCH has prepared a poster with respect to his/her summer
internship held during May-June 2024.

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

Date: 22/7/24


(Signature of Faculty Mentor)

Name: **DR. VARSHA TANU**

Designation: **ASSOCIATE PROFESSOR**

A ABOUT THE ORGANISATION

Paras Healthcare Pvt. Ltd. is a chain of hospitals founded in 2006, with centers in Gurgaon, Chandigarh, Panchkula, Darbhanga, and Patna, Udaipur totaling 730 beds. It offers specialized tertiary medical care through Paras Hospitals and Paras Bliss, focusing on multispecialty and mother-and-child care respectively. Expansion plans include new centers in Uttar Pradesh.

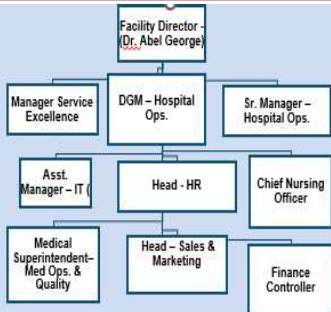
B VISION

Simplifying Health with World-class Medical Treatment and Right Care

C MISSION

Stepping Closer with every phase of developing healthcare provisions available for one and all, anywhere and everywhere with a futuristic advancement. Alongside channelizing and widening the horizons PARAS HEALTH as a Centre of Excellence

D ORGANISATION STRUCTURE



E AIM AND OBJECTIVE

- To determine the level of awareness amongst Hospital Staff and their compliance to IPSG
- To find gaps & to improve the IPSG Awareness and compliance level.

Name-Pallabi Debnath Roll-1772
Faculty Mentor-Dr Varsha Tanu
Industry Mentor-Akshita Singhvi

F RESEARCH METHODOLOGY

Research study design:
Observational Study.

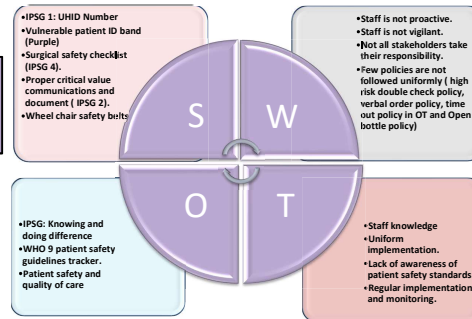
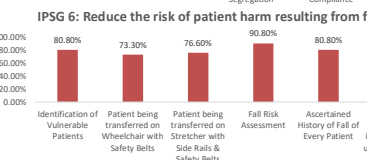
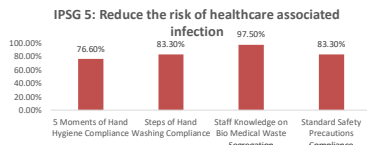
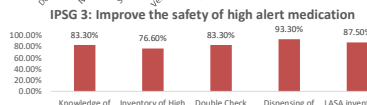
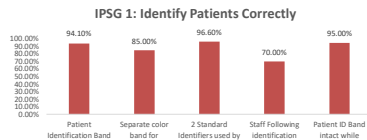
Method of data collection:
Data is collected from
IPD, Day Care & OTs of
Paras Health for the period
April & May (2024).

Evaluation techniques:
A strategy to find out gaps
and represent the data
through bar diagram.

Stakeholders involved in
this study:
Stakeholders involved in the
study are Patients, Nursing
Staff, OT Staff,
Consultants, RMOs.

Criteria for the study
All the IPD, Day Care &
OT Areas

IPSG GOAL WISE



G FINDINGS

- Staff did not use Standard identifiers at every point of care
- Patient ID Bands were not proper, not present, not according to the Colour Coding.
- High Alert Medicines – Double check policy was not followed uniformly
- Transfer forms were incomplete
- Fall History of few patients was not recorded appropriately
- Time Out – Sign out time was not mentioned on OT 3 & 4's Patient Board.
- Time Out – 100 % Compliance is not observed.
- Staff awareness on LASA Drugs (arrangement & handling).
- Patient Education on 4Ps of Fall prevention was not proper. Staff was advised to educate patients on 4Ps of Fall Prevention.
- Side rails were not used
- Safety belts were not used while transferring the Patients

H PRACTICAL EXPOSSURE V/S THEORETICAL UNDERSTANDING

THEORETICAL UNDERSTANDING

Theoretical knowledge encompasses concepts, principles, and ideas, providing a foundation for understanding and exploring the world.

PRACTICAL EXPOSSURE

Practical exposure provides a deeper understanding of the day-to-day operations, workflows, and dynamics within a hospital setting.



I CHALLENGES FACED

During my internship at Paras Health, challenges include data collection and analysis, interdepartmental coordination, understanding medical systems, report preparation, time management, adapting to workplace culture, handling technical issues, and ensuring regulatory compliance.

J LEARNINGS DURING INTERNSHIP

- During my internship at Paras Health, learnt quality management practices, data analysis, and interdepartmental collaboration.
- I've gained insights into healthcare regulations, medical systems, and technical troubleshooting.
- Additionally, I've developed professional skills in time management, report writing, and adapting to workplace culture, enhancing my expertise in healthcare quality management.

K USEFULNESS OF INTERNSHIP

- This internship at Paras Health was highly beneficial as it provided hands-on experience in healthcare quality management, enhanced my understanding of regulatory compliance, and developed my data analysis and technical troubleshooting skills.
- It also improved my professional abilities in report writing, time management, and interdepartmental collaboration, preparing myself for a successful career in healthcare.

L SUGGESTIONS

- To improve hospital processes, be proactive, secure top management support, and conduct regular work status updates and internal audits.
- Foster a positive patient safety culture, organize regular training, use simulations, conduct mock drills, perform risk assessments, and implement RCA and CAPA.
- Hold regular meetings and follow-ups, and monitor through audits.

Weekly Report

Week 01

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Pallabi Debnath

Roll no:1772

Stream: MBA hospital and health management

Week no: 01

From: 01/05/24 **to:** 04/05/24

Activity Done	- Interacted with department heads from Quality, Operations, Supply Chain Management, Support Services, and Guest Relations. - Joined Quality Department under Akshita Maam. - Noted NABH inspection scheduled for June 1st and 2nd. - Assessed compliance in MRD and Maintenance, addressing wheelchair safety and food tray hygiene. - Identified issues in patient file labelling during morning rounds. - Received appreciation for reporting findings and created NABH standards checklist. - Engaged departments like Fire Safety and IT to emphasize compliance and identify gaps. - Participated in training sessions on quality assessment procedures. - Evaluated FAQs and urged action for NABH compliance.
Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	- Lack of adherence to NABH standards in MRD department.
Suggestions for improvement	- Enhancing documentation practices and record-keeping.
Plan for the next week	- Fulfil checklist of clinical departments - Take follow ups of checklist being provided to them.

Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 02

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Pallabi Debnath

Roll no:1772

Stream: MBA hospital and health management

Week no: 02**From: 06/05/24 to: 11/05/24**

Activity Done	- Prepared an International Patient Safety Goal report for the hospital, analysing the extent to which goals are being followed in each department and giving scoring to each goal, identifying gaps. - Conducted an IV cannula audit in all departments, analysed the data, and prepared a final report. - Followed up with each department to ensure preparedness for the upcoming NABH inspection on June 1st and 2nd. - Visited the BME department where the HOD showed the Medical Gas Plant (MGP), explaining how oxygen and NO2 are stored and supplied throughout the hospital. Learned about the control of the suction pump in the OT from the MGP and how temperature is maintained in the hospital.
Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• Identified gaps in meeting IPSPG goals based on scoring criteria. • Analysed the data to identify any issues or areas for improvement in IV cannula management practices. • Identified and addressed gaps in compliance with NABH standards.
Suggestions for improvement	- Enhancing documentation practices and record-keeping.
Plan for the next week	- To take follow ups on the previous audit improvement .

Pallabi Debnath

Signature of the Student**Approved by the IIHMR University's Mentor****WEEK 03****Name of the Organisation: Paras Hospital, Udaipur****Area/ Department/ Project of Summer Internship Program: Quality****Name of the Student: Pallabi Debnath****Roll no:1772****Stream: MBA hospital and health management****Week no: 03****From: 13/05/24 to: 18/05/24**

Activity Done	- Followed up with each department to ensure preparedness for the upcoming NABH inspection on June 1st and 2nd. -Prepared QIP of IPSPG and IV Cannula. -Did open file Audit. -Prepared SOPs for Every Departments. - provided training on Emergency Codes and Incidence Reporting.
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Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• Identified gaps in meeting IPSG goals based on scoring criteria. • Lack of training of hospital staffs regarding emergency codes and incidence reporting.
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety.
Plan for the next week	- To provide training on IPSG, BLS and ACLS - To conduct mock drill on emergency codes..

Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 04

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Pallabi Debnath

Roll no:1772

Stream: MBA hospital and health management

Week no: 04

From: 20/05/24 to: 25/05/24

Activity Done	-Prepared QIP of IPSG and IV Cannula. -Did open file Audit. -Prepared SOPs for each and Every Departments. - provided training on Emergency Codes and Incidence Reporting. - Provided training for NABH inspection and explained FAQs.
Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• Identified gaps in meeting IPSG goals based on scoring criteria. • Lack of training of hospital staffs regarding emergency codes and incidence reporting.
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety.

Plan for the next week	- To provide training on IPSPG, BLS and ACLS - To conduct mock drill on emergency codes.
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Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 05

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Pallabi Debnath

Roll no:1772

Stream: MBA hospital and health management

Week no: 05

From: 27/05/24 to: 01/06/24

Activity Done	-Prepared and completed document work for the month. -Did closed file Audit and analysed the trends. - provided training on Emergency Codes and Incidence Reporting. - Provided training for NABH inspection and explained FAQs. - Experienced NABH surveillance and got to know how every chapters of NABH is being assessed.
Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• After the surveillance was done, gaps like checklists maintenance, crash cart maintenance, lack of details in PSQ data etc were identified.
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety. - need to improve the procedure of internal audits.
Plan for the next week	- To provide training on NABH protocols - To conduct mock drill on emergency codes. - To look up onto the areas where the assessors pointed to get them improved.

Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 06

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: PALLABI DEBNATH

Roll no:1772

Stream: MBA hospital and health management

Week no: 06

From: 03/06/24 to: 08/06/24

Activity Done	-Reviewed the Non compliances that has been issued under the name of Paras Health by NABH .
Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• After the surveillance was done, gaps like checklists maintenance, crash cart maintenance, lack of details in PSQ data etc were identified.
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety. - need to improve the procedure of internal audits.
Plan for the next week	- To provide training on NABH protocols - To conduct mock drill on emergency codes. - To look up onto the areas where the assessors pointed to get them improved.

Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 07

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: PALLABI DEBNATH

Roll no:1772

Stream: MBA hospital and health management

Week no: 07

From: 10/06/24 to: 15/06/24

Activity Done	-Closed the Non compliances that has been issued under the name of Paras Health by NABH .
Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• After the surveillance was done, gaps like checklists maintenance, crash cart maintenance, lack of details in PSQ data etc were identified.
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety. - need to improve the procedure of internal audits.
Plan for the next week	- To look up onto the areas where the assessors pointed to get them improved.

Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 08

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: PALLABI DEBNATH

Roll no:1772

Stream: MBA hospital and health management

Week no: 08

From: 17/06/24 to: 22/06/24

Activity Done	-Worked on the IPSG Project -Closed the Remaining Non compliances that has been issued under the name of Paras Health by NABH .
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Linking theory (Classroom learning) with practice at your organisation	- Importance of thorough departmental inspections for compliance as we learned in Organisational behaviour. - Understanding NABH standards and procedures as we learned in hospital services. - Effective communication with department heads for gap identification and resolution as we learned in principles of management and business communication.
Gaps identified on the working area.	• After the surveillance was done, gaps like checklists maintenance, crash cart maintenance, lack of details in PSQ data etc were identified.
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety. - need to improve the procedure of internal audits.
Plan for the next week	- To give presentation on IPSPG

Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

WEEK 09

Name of the Organisation: Paras Hospital, Udaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: PALLABI DEBNATH

Roll no:1772

Stream: MBA hospital and health management

Week no: 09

From: 24/06/24 to: 29/06/24

Activity Done	-Prepared project on IPSPG knowing and doing difference -PPT presentation given on IPSPG
Linking theory (Classroom learning) with practice at your organisation	- Understanding NABH standards and procedures as we learned in hospital services.
Gaps identified on the working area.	Staff were not aware of IPSPG goals
Suggestions for improvement	- Requires frequent staff training regarding hospital codes, policy and patient safety. - need to improve the procedure of internal audits.

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Pallabi Debnath

Signature of the Student

Approved by the IIHMR University's Mentor

CONTENT

S.NO	TOPICS	PAGE NO.
1	INTRODUCTION	3
2	ACTIVITY DONE	4-9
3	LINKING THEORY (CLASSROOM LEARNING) WITH PRACTICE AT THE ORGANISATION	9
4	GAPS IDENTIFIED ON THE WORKING AREA	9
5	SUGGESTIONS FOR IMPROVEMENT	9-10
6	CONCLUSION	10

INTRODUCTION:

This report details my summer internship experience at Paras Health, where I worked as an intern in the Quality Department. Leading Indian healthcare provider Paras Health is well known for its dedication to high-quality patient care and safety. My internship, which ran from 01/05/24 to 30/06/24, provided me with a priceless chance to obtain firsthand knowledge of the complex inner workings of hospital quality management.

One of the significant projects I undertook was creating detailed reports on international patient safety goals. This involved analyzing data, identifying areas for improvement, and proposing actionable recommendations to enhance patient safety protocols. Preparation for the NABH inspection was another crucial aspect of my internship.

My understanding of healthcare quality management has greatly increased as a result of my enriching summer internship at Paras Health's Quality Department. This report offers a thorough overview of my experiences, insights, and contributions made throughout the internship. It highlights how I applied my theoretical knowledge in real-world settings and developed the critical abilities needed to pursue a career in healthcare management.

Name of the Organization: Paras Health, Udaipur
Area/ Department/ Project of Summer Internship: Quality Department
Name of the student: Pallabi Debnath
Roll no. 1772
Stream: MBA hospital and health Management

ACTIVITY DONE:

NABH Surveillance

I participated as a frontline quality department staff in NABH quality assurance surveillance held on 1st and 2nd June, 2024.

Department Checklists

I assisted in creating and updating checklists for various departments as per NABH 5TH edition standards. This involved verifying that all necessary items were included and ensuring compliance with safety and quality standards. I also participated in periodic reviews to ensure all departments were meeting their checklist requirements.

Signage

I assisted a comprehensive audit of the hospital's signage, ensuring that all signs were visible, correctly placed, and compliant with NABH standards. I also made recommendations for improving signage clarity and placement to enhance navigability and safety.

Emergency Codes & Mock Drills

- Code Red (Fire): Assisted in conducting mock drills, ensuring staff were aware of fire safety procedures and evacuation routes.
- Code Blue (Medical Emergency): Participated in drills to test and improve the hospital's response to medical emergencies.
- Code Pink (Infant Abduction): Helped organize drills to train staff on preventing and responding to infant abduction scenarios.
- Code Orange (Hazardous Material Spill): Engaged in simulations to handle hazardous material spills safely.
- Code Purple (Hostage Situation): Observed and evaluated drills to prepare staff for potential security threats.

Licenses & Agreements

I assisted in reviewing and updating the hospital's licenses and agreements, ensuring all were valid and complied with current regulations. This involved coordinating with various departments and external agencies to renew and validate necessary documents.

Policies and Manuals

I helped review and update various department policies and manuals as per NABH 5th edition standards, ensuring they were current and aligned with best practices. I also assisted in disseminating these documents to relevant departments and conducted training sessions to ensure staff were familiar with updated protocols.

Facility Rounds

I was a part of facility round team, inspecting various departments for compliance with safety and quality standards. This included checking for cleanliness, equipment functionality, and adherence to safety protocols.

HIRA (Hazard Identification and Risk Assessment) Study

I participated in a HIRA study, helping to identify potential risks in different areas of the hospital and suggesting mitigation strategies. This involved working with a multidisciplinary team to assess risks and develop comprehensive safety plans.

Outsource Audits

I assisted in conducting audits of outsourced services, such as cleaning, catering, and security. This involved reviewing contracts, inspecting service quality, and ensuring compliance with hospital standards.

Document Control

I helped in organizing and maintaining the hospital's document control system. This included ensuring that all documents were correctly filed, up to date, and accessible to authorized personnel.

Audits

Clinical Audit:

Audit on Medicine Department: Conducted an audit to evaluate the quality of care in the Medicine Department, reviewing patient records, treatment protocols, and compliance with clinical guidelines.

Audit on PTCA: Assisted in auditing the Percutaneous Transluminal Coronary Angioplasty (PTCA) procedures, focusing on patient outcomes, procedural compliance, and post-operative care.

Quality Improvement Projects (QIP)

Audit on IV Cannulation: Conducted an audit to evaluate and improve the practices related to IV cannulation, focusing on reducing complications and enhancing patient safety.

Audit on IPSPG (International Patient Safety Goals): Assisted in auditing compliance with IPSPG, identifying areas for improvement, and implementing corrective actions.

Patient Safety and Quality Improvement (PSQ) Indicators

I was involved in collecting and analysing data on various PSQ indicators, such as infection rates, patient falls, and medication errors. This data was used to identify trends, develop improvement strategies, and monitor the effectiveness of interventions.

Project On IPSG (International Patient Safety Goal): The IPSG project was a vital part of my internship, providing me with hands-on experience in implementing and monitoring patient safety initiatives. It enhanced my understanding of the challenges and strategies involved in promoting patient safety within a healthcare setting.

Overview of International Patient Safety Goal Project:

INTRODUCTION: With the advent of advanced medical equipment, healthcare is changing quickly, making hospital operations more complex and patient safety more important. The World Health Organization reports that 10% of patients in wealthy nations and a greater percentage in underdeveloped nations experience injury while receiving medical care. A major focus of the 55th World Health Assembly was enhancing patient safety protocols. High-risk drugs, misidentification of patients, and poor communication are major problems. Correct patient identification, efficient communication, the safe use of high-alert drugs, appropriate surgical techniques, a decrease in infections linked to healthcare, and the prevention of patient falls are the main objectives of the IPSG. It is essential that healthcare professionals understand IPSG.

AIM And OBJECTIVE: To ascertain the hospital staff's awareness level and compliance with the IPSG at a tertiary care facility;
To identify any gaps and enhance IPSG compliance and knowledge.

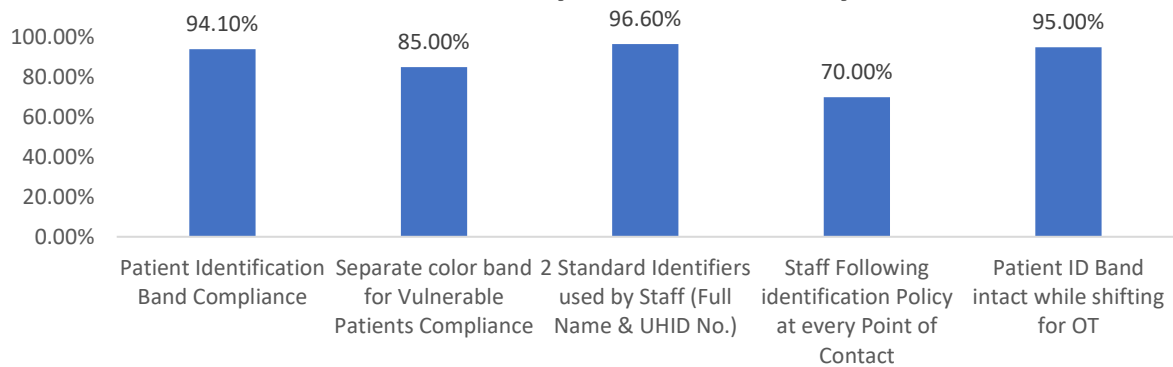
RESEARCH METHODOLOGY:

This study is based on: -

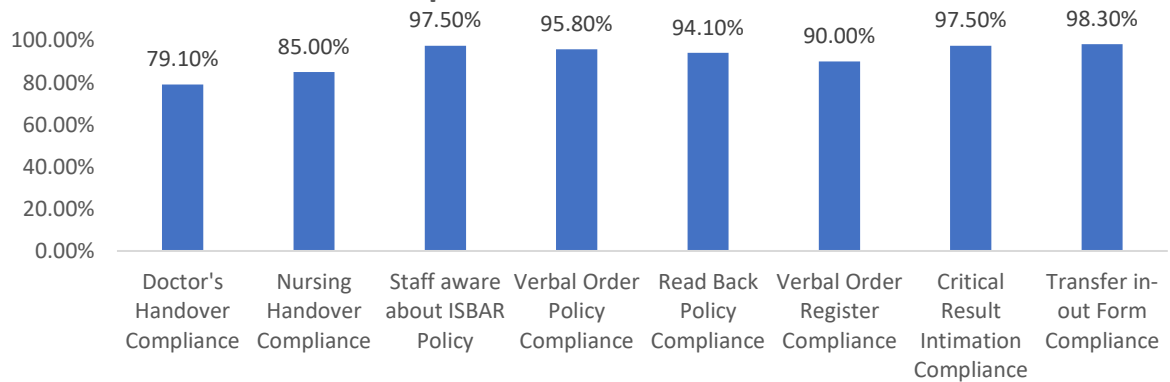
- **Research design:**
Observational Study.
- **Method of data collection:**
Data has been collected from IPD, Day Care & OTs of Paras Health for the period April & May (2024).
- **Evaluation techniques:**
A method of scoring and then displaying the data as bar charts to determine non-compliance. Additionally, RCA has been completed using Fish Bone Diagrams.
- **Stakeholders involved in this study:**
Patients, Nursing Staff, OT Staff, Consultants, RMOs.
- **Criteria for the study**
- **Inclusion Criteria**
- All the IPD, Day Care & OT Areas
- **Exclusion criteria**
 1. OPD
 2. ER
 3. Dialysis

DATA ANALYSIS:

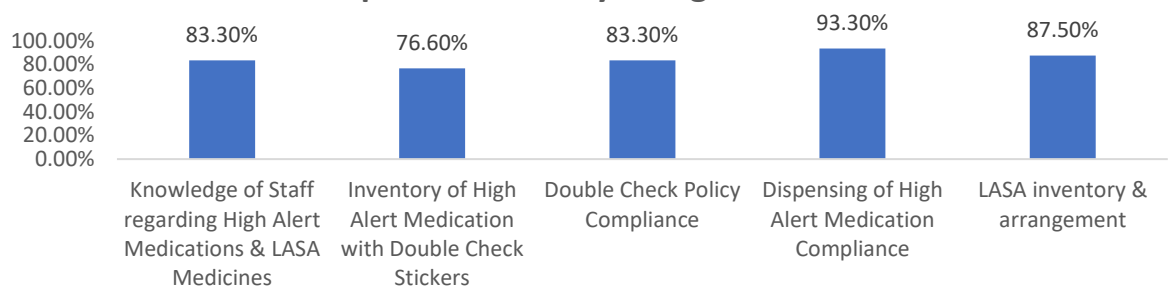
IPSG 1:Identify Patients Correctly

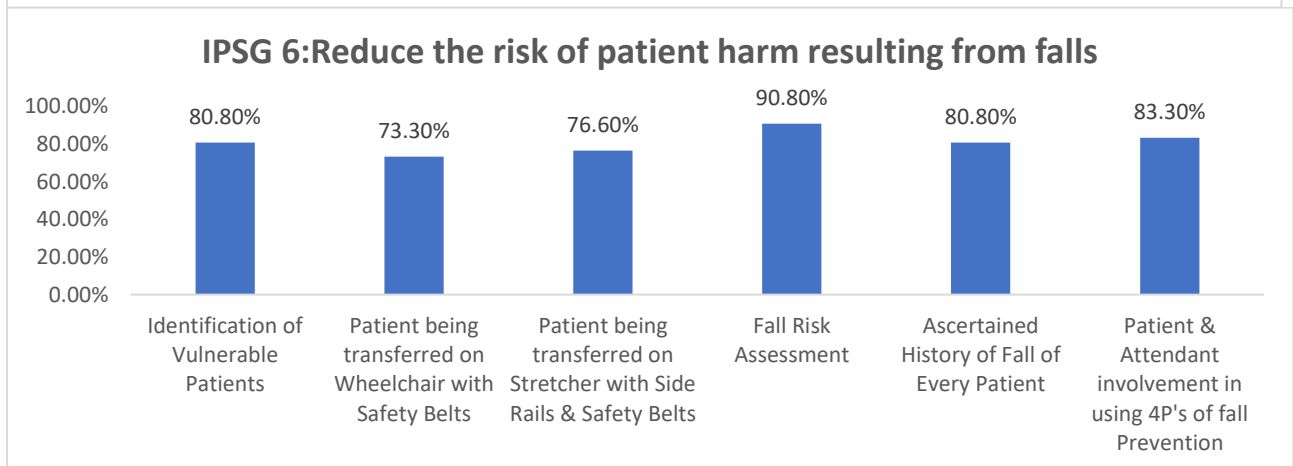
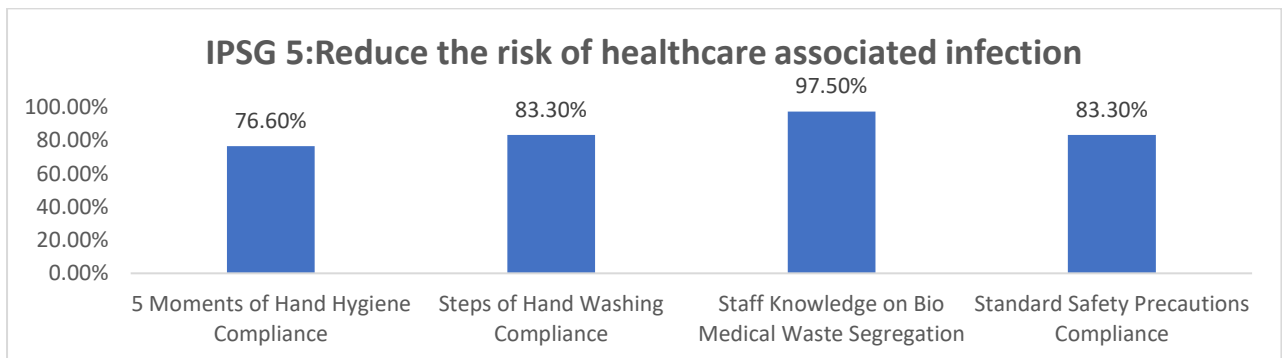
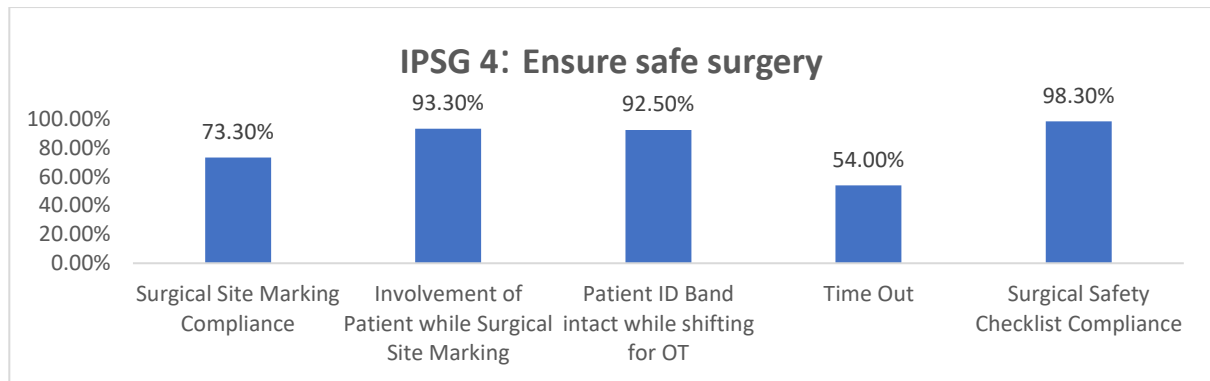


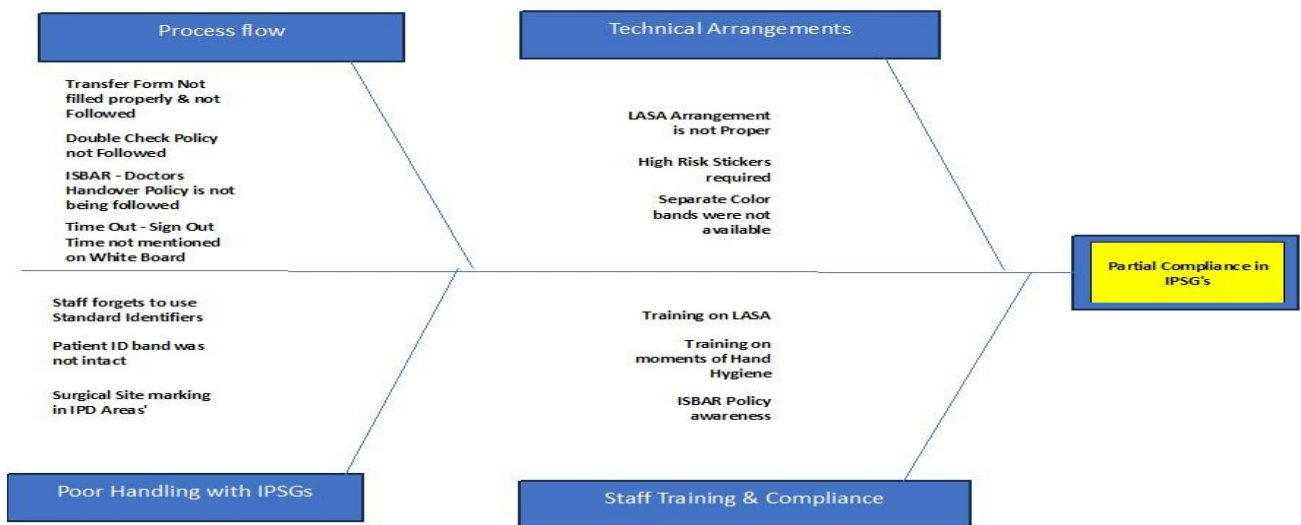
IPSG 2:Improve Effective Communication



IPSG 3: Improve the safety of high alert medication







Findings:

Fig: Fish Bone Analysis of RCA of IPSC compliance.

- Staff did not of care
- Patient ID Bands were not proper, not present, not according to the Colour Coding.
- High Alert Medicines – Double check policy was not followed uniformly
- Transfer forms were incomplete
- Fall History of few patients was not recorded appropriately
- Time Out – Sign out time was not mentioned on OT 3 & 4's Patient Board.
- Time Out – 100 % Compliance is not observed.
- Staff awareness on LASA Drugs (arrangement & handling).
- Patient Education on 4Ps of Fall prevention was not proper. Staff was advised to educate patients on 4P's of Fall Prevention.
- Side rails were not used
- Safety belts were not used while transferring the Patients.

use Standard identifiers at every point

LINKING THEORY (Classroom learning) with practice at our organisation

- Health Systems and Policy: I participated in NABH inspection preparations, understanding policy application and compliance.
- Principles of Management theories, such as Fayol's Administrative Theory and Mintzberg's Managerial Roles, were utilized in committee meetings and department checklists to ensure effective team coordination.
- In Managing Hospital Services, I conducted facility rounds and mock drills, ensuring efficient service delivery.
- Biostatistics skills were applied in analysing patient safety data.
- Digital Health principles were utilized in document control and data management.
- I managed logistics during emergencies, reflecting Hospital Operations Management.
- Quality and Accreditation standards were applied during NABH inspection preparations.
- Health Economics and Financing concepts were explored through financial management tasks.
- Research Methods and Dissertation Writing skills were refined through data collection and report preparation.

- I also applied Human Resource Management principles in coordinating audits and training.

GAPS IDENTIFIED AT THE WORKING AREA:

- Fail to meet daily NABH criteria for work.
- The department staff's lack of cooperation with the quality department
- Hospital workers' ignorance of NABH standards.
- Despite the assistance of upper management, all stakeholders bear responsibility for maintaining quality standards, which is not being met.
- Following the schedule for closing non-compliances following the NABH surveillance audit.
- Failure to comply with medical record documentation.

SUGGESTIONS FOR IMPROVEMENT:

➤ **Being proactive:**

- **Willingness:** Demonstrate a readiness to engage in and improve hospital processes.
- **Knowledge:** Continuously update and expand knowledge relevant to quality and patient safety.
- **Zeal for participation:** Show enthusiasm and commitment to participating in quality improvement activities.
- **Active monitoring and follow-up:** Regularly check and follow up on the progress of implemented initiatives.
- **Top management support:** Secure commitment and backing from senior management for quality improvement initiatives.
- **Regular work status update and internal audits by the quality department:** Conduct frequent updates and internal audits to monitor progress and ensure compliance.
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CONCLUSION:

During my internship at Paras Health, I applied classroom theories in various projects and activities, enhancing my understanding of healthcare management. Projects included assessing compliance with International Patient Safety Goals (IPSG) and conducting audits and quality improvement projects. Activities involved department checklists, emergency code drills, and clinical audits. Suggestions for improvement emphasized proactive measures, top management support, regular updates, and audits to maintain high standards of patient safety. This experience has equipped me with practical skills and insights into healthcare operations, emphasizing the importance of continuous improvement for better patient outcomes.

Pallabi Debnath

SUMMER INTERNSHIP PROGRAM

at

Paras Health, Udaipur

From 01/05/24 to 30/06/24

A REPORT BY

Pallabi Debnath

Master Of Business Administration

(Hospital And Health Management)

2023-25

under the Mentorship of

Dr Varsha Tanu



CONTENTS:

S.NO	TOPICS	PAGE NO.
1	INTRODUCTION	3
2	ACTIVITY DONE	4-9
3	LINKING THEORY (CLASSROOM LEARNING) WITH PRACTICE AT THE ORGANISATION	9
4	GAPS IDENTIFIED ON THE WORKING AREA	9
5	SUGGESTIONS FOR IMPROVEMENT	9-10
6	CONCLUSION	10

INTRODUCTION:

This report details my summer internship experience at Paras Health, where I worked as an intern in the Quality Department. Leading Indian healthcare provider Paras Health is well known for its dedication to high-quality patient care and safety. My internship, which ran from 01/05/24 to 30/06/24, provided me with a priceless chance to obtain firsthand knowledge of the complex inner workings of hospital quality management.

One of the significant projects I undertook was creating detailed reports on international patient safety goals. This involved analyzing data, identifying areas for improvement, and proposing actionable recommendations to enhance patient safety protocols. Preparation for the NABH inspection was another crucial aspect of my internship.

My understanding of healthcare quality management has greatly increased as a result of my enriching summer internship at Paras Health's Quality Department. This report offers a thorough overview of my experiences, insights, and contributions made throughout the internship. It highlights how I applied my theoretical knowledge in real-world settings and developed the critical abilities needed to pursue a career in healthcare management.

Name of the Organization: Paras Health, Udaipur

Area/ Department/ Project of Summer Internship: Quality Department

Name of the student: Pallabi Debnath

Roll no. 1772

Stream: MBA hospital and health Management

ACTIVITY DONE:

NABH Surveillance

I participated as a frontline quality department staff in NABH quality assurance surveillance held on 1st and 2nd June, 2024.

Department Checklists

I assisted in creating and updating checklists for various departments as per NABH 5TH edition standards. This involved verifying that all necessary items were included and ensuring compliance with safety and quality standards. I also participated in periodic reviews to ensure all departments were meeting their checklist requirements.

Signage

I assisted a comprehensive audit of the hospital's signage, ensuring that all signs were visible, correctly placed, and compliant with NABH standards. I also made recommendations for improving signage clarity and placement to enhance navigability and safety.

Emergency Codes & Mock Drills

- Code Red (Fire): Assisted in conducting mock drills, ensuring staff were aware of fire safety procedures and evacuation routes.
- Code Blue (Medical Emergency): Participated in drills to test and improve the hospital's response to medical emergencies.
- Code Pink (Infant Abduction): Helped organize drills to train staff on preventing and responding to infant abduction scenarios.
- Code Orange (Hazardous Material Spill): Engaged in simulations to handle hazardous material spills safely.
- Code Purple (Hostage Situation): Observed and evaluated drills to prepare staff for potential security threats.

Licenses & Agreements

I assisted in reviewing and updating the hospital's licenses and agreements, ensuring all were valid and complied with current regulations. This involved coordinating with various departments and external agencies to renew and validate necessary documents.

Policies and Manuals

I helped review and update various department policies and manuals as per NABH 5th edition standards, ensuring they were current and aligned with best practices. I also assisted in disseminating these documents to relevant departments and conducted training sessions to ensure staff were familiar with updated protocols.

Facility Rounds

I was a part of facility round team, inspecting various departments for compliance with safety and quality standards. This included checking for cleanliness, equipment functionality, and adherence to safety protocols.

HIRA (Hazard Identification and Risk Assessment) Study

I participated in a HIRA study, helping to identify potential risks in different areas of the hospital and suggesting mitigation strategies. This involved working with a multidisciplinary team to assess risks and develop comprehensive safety plans.

Outsource Audits

I assisted in conducting audits of outsourced services, such as cleaning, catering, and security. This involved reviewing contracts, inspecting service quality, and ensuring compliance with hospital standards.

Document Control

I helped in organizing and maintaining the hospital's document control system. This included ensuring that all documents were correctly filed, up to date, and accessible to authorized personnel.

Audits

Clinical Audit:

Audit on Medicine Department: Conducted an audit to evaluate the quality of care in the Medicine Department, reviewing patient records, treatment protocols, and compliance with clinical guidelines.

Audit on PTCA: Assisted in auditing the Percutaneous Transluminal Coronary Angioplasty (PTCA) procedures, focusing on patient outcomes, procedural compliance, and post-operative care.

Quality Improvement Projects (QIP)

Audit on IV Cannulation: Conducted an audit to evaluate and improve the practices related to IV cannulation, focusing on reducing complications and enhancing patient safety.

Audit on IPSG (International Patient Safety Goals): Assisted in auditing compliance with IPSG, identifying areas for improvement, and implementing corrective actions.

Patient Safety and Quality Improvement (PSQ) Indicators

I was involved in collecting and analysing data on various PSQ indicators, such as infection rates, patient falls, and medication errors. This data was used to identify trends, develop improvement strategies, and monitor the effectiveness of interventions.

Project On IPSG (International Patient Safety Goal): The IPSG project was a vital part of my internship, providing me with hands-on experience in implementing and monitoring patient safety

initiatives. It enhanced my understanding of the challenges and strategies involved in promoting patient safety within a healthcare setting.

Overview of International Patient Safety Goal Project:

INTRODUCTION: With the advent of advanced medical equipment, healthcare is changing quickly, making hospital operations more complex and patient safety more important. The World Health Organization reports that 10% of patients in wealthy nations and a greater percentage in underdeveloped nations experience injury while receiving medical care. A major focus of the 55th World Health Assembly was enhancing patient safety protocols. High-risk drugs, misidentification of patients, and poor communication are major problems. Correct patient identification, efficient communication, the safe use of high-alert drugs, appropriate surgical techniques, a decrease in infections linked to healthcare, and the prevention of patient falls are the main objectives of the IPSPG. It is essential that healthcare professionals understand IPSPG.

AIM And OBJECTIVE: To ascertain the hospital staff's awareness level and compliance with the IPSPG at a tertiary care facility;
To identify any gaps and enhance IPSPG compliance and knowledge.

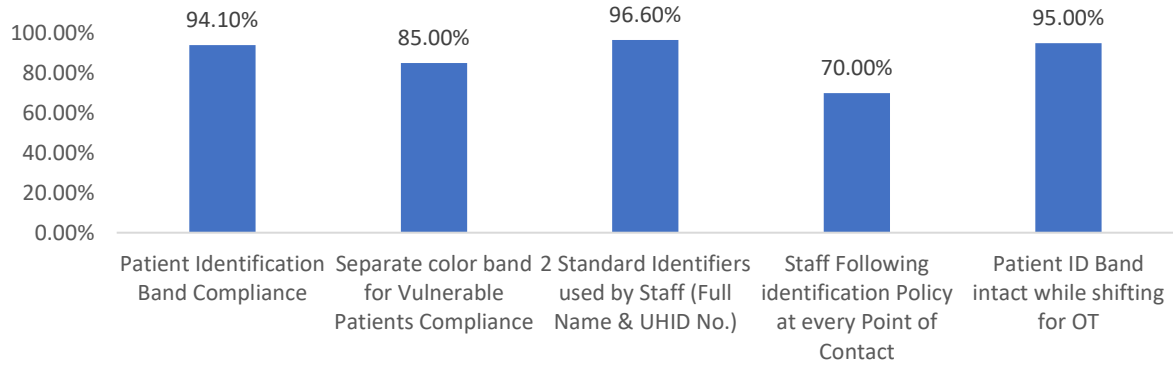
RESEARCH METHODOLOGY:

This study is based on: -

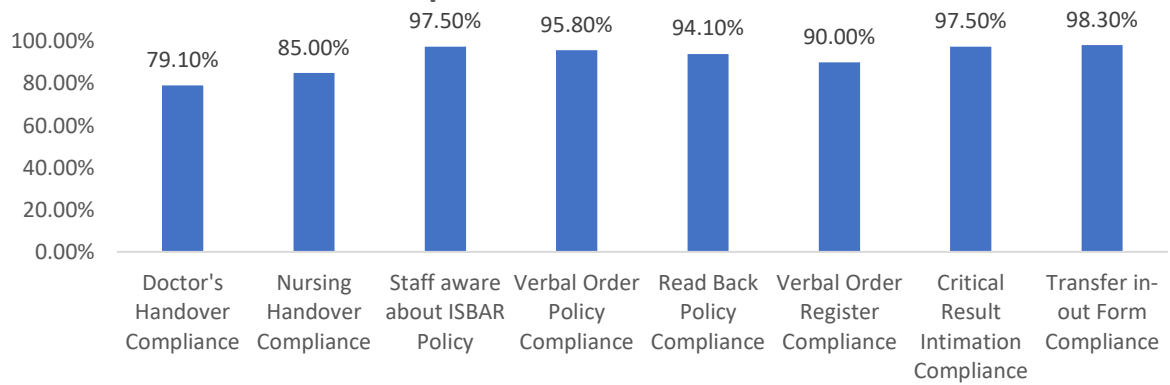
- **Research design:**
Observational Study.
- **Method of data collection:**
Data has been collected from IPD, Day Care & OTs of Paras Health for the period April & May (2024).
- **Evaluation techniques:**
A method of scoring and then displaying the data as bar charts to determine non-compliance. Additionally, RCA has been completed using Fish Bone Diagrams.
- **Stakeholders involved in this study:**
Patients, Nursing Staff, OT Staff, Consultants, RMOs.
- **Criteria for the study**
- **Inclusion Criteria**
- All the IPD, Day Care & OT Areas
- **Exclusion criteria**
 1. OPD
 2. ER
 3. Dialysis

DATA ANALYSIS:

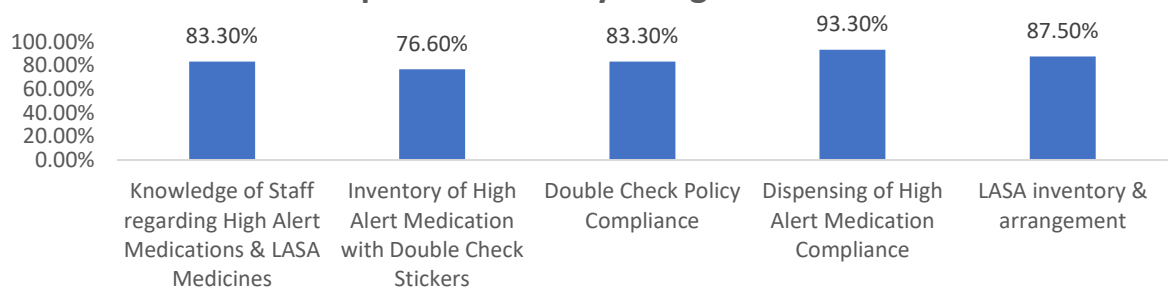
IPSG 1:Identify Patients Correctly



IPSG 2:Improve Effective Communication



IPSG 3: Improve the safety of high alert medication



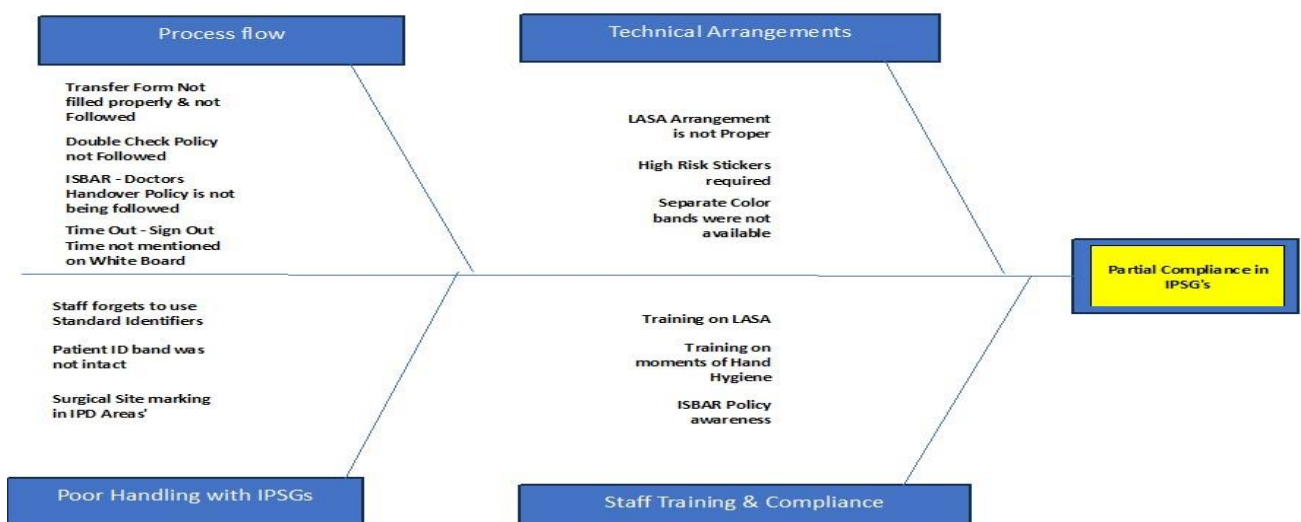
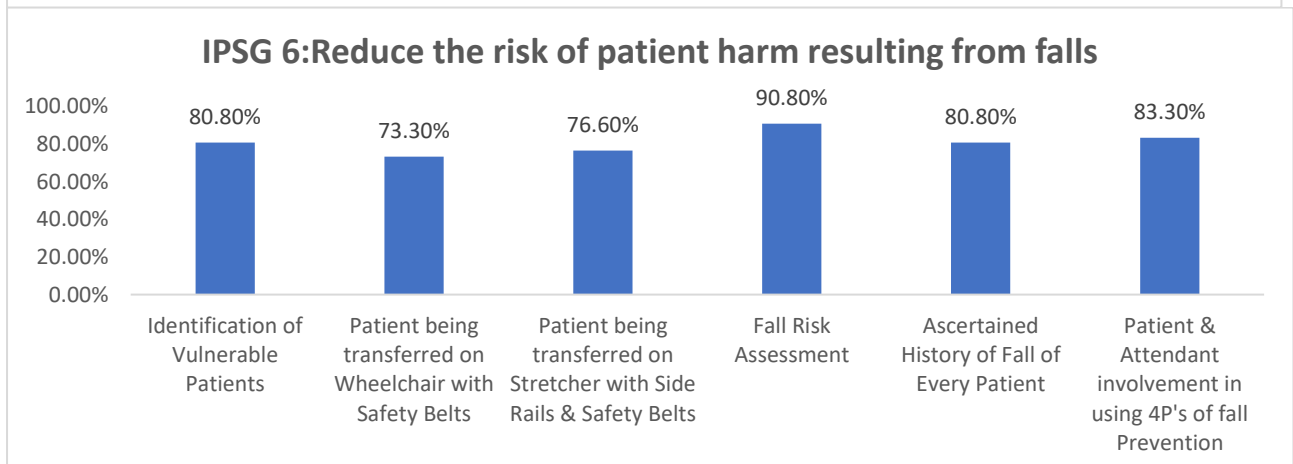
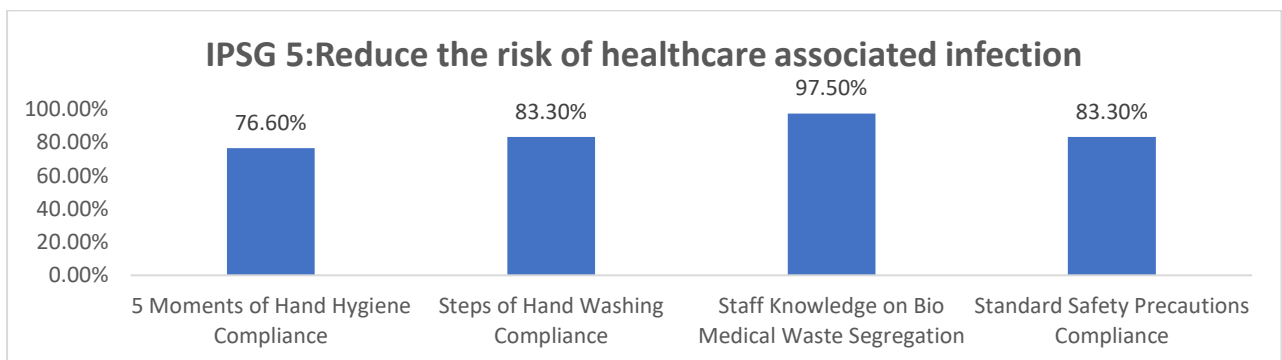
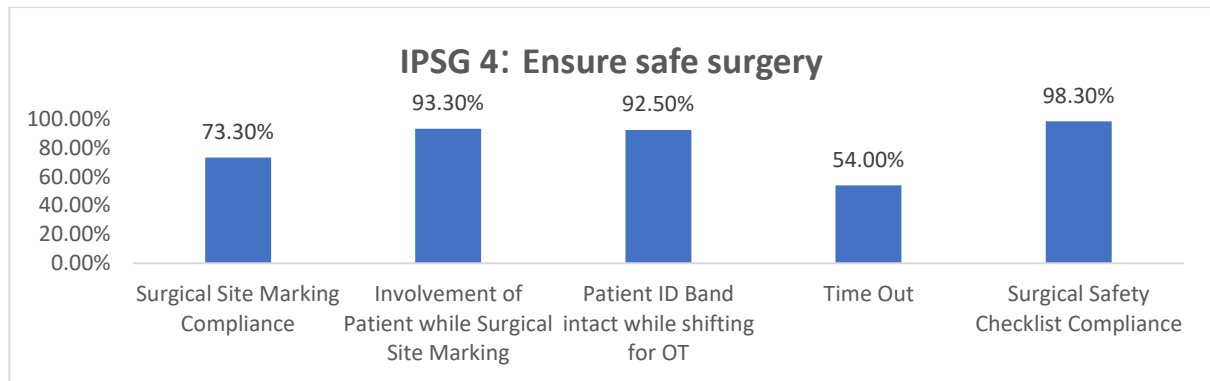


Fig: Fish Bone Analysis of RCA of IPSG compliance.

Findings:

- Staff did not use Standard identifiers at every point of care
- Patient ID Bands were not proper, not present, not according to the Colour Coding.
- High Alert Medicines – Double check policy was not followed uniformly
- Transfer forms were incomplete
- Fall History of few patients was not recorded appropriately
- Time Out – Sign out time was not mentioned on OT 3 & 4's Patient Board.
- Time Out – 100 % Compliance is not observed.
- Staff awareness on LASA Drugs (arrangement & handling).
- Patient Education on 4Ps of Fall prevention was not proper. Staff was advised to educate patients on 4P's of Fall Prevention.
- Side rails were not used
- Safety belts were not used while transferring the Patients.

LINKING THEORY (Classroom learning) with practice at our organisation

- Health Systems and Policy: I participated in NABH inspection preparations, understanding policy application and compliance.
- Principles of Management theories, such as Fayol's Administrative Theory and Mintzberg's Managerial Roles, were utilized in committee meetings and department checklists to ensure effective team coordination.
- In Managing Hospital Services, I conducted facility rounds and mock drills, ensuring efficient service delivery.
- Biostatistics skills were applied in analysing patient safety data.
- Digital Health principles were utilized in document control and data management.
- I managed logistics during emergencies, reflecting Hospital Operations Management.
- Quality and Accreditation standards were applied during NABH inspection preparations.
- Health Economics and Financing concepts were explored through financial management tasks.
- Research Methods and Dissertation Writing skills were refined through data collection and report preparation.
- I also applied Human Resource Management principles in coordinating audits and training.

GAPS IDENTIFIED AT THE WORKING AREA:

- Fail to meet daily NABH criteria for work.
- The department staff's lack of cooperation with the quality department
- Hospital workers' ignorance of NABH standards.
- Despite the assistance of upper management, all stakeholders bear responsibility for maintaining quality standards, which is not being met.
- Following the schedule for closing non-compliances following the NABH surveillance audit.
- Failure to comply with medical record documentation.

SUGGESTIONS FOR IMPROVEMENT:

- **Being proactive:**
 - **Willingness:** Demonstrate a readiness to engage in and improve hospital processes.
 - **Knowledge:** Continuously update and expand knowledge relevant to quality and patient safety.
 - **Zeal for participation:** Show enthusiasm and commitment to participating in quality improvement activities.
 - **Active monitoring and follow-up:** Regularly check and follow up on the progress of implemented initiatives.
- **Top management support:** Secure commitment and backing from senior management for quality improvement initiatives.
- **Regular work status update and internal audits by the quality department:** Conduct frequent updates and internal audits to monitor progress and ensure compliance.
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