SUMMER INTERNSHIP PROGRAM

at

PARAS HEALTH

From 01/05/2024 to 30/06/2024

A REPORT BY

ISHITA MONDAL

Master of business administration in Health and Hospital Management

2023-25

under the Mentorship of

DR ANUPAM MEHROTRA

IIHMR UNIVERSITY

PARAS HEALTH

PHPL/HR-Rel./2024/00185

29th June 2024

TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Ms. Ishita Mondal** 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. Shaiini Tyagi
Head - Human Resources

Completion Certification from the Organization

CERTIFICATE

This is to certify that Ms. ISHITA MONDAL of 2023-25 batch of MBA Hospital and Health Management, IIHMR University has worked with our organization for her summer internship from 1st May 2024 to 30th June 2024. The overall performance shown by her during the period was excellent. This certificate is being issued to meet the requirements of the IIHMR University.

Date: 29/06/2024

(Signature of organization Mentor)

Name: Akshita Singhvi

Designation: Quality Head

Stamp of the Organization

PARAS HEALTH CARE PVT. LTD. UDAIPUR

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Ms. ISHITA MONDAL** of 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 work as per the guidelines. Her poster is approved for presentation.

Date:22/07/2024

22/7/24

(Signature of Faculty Mentor)

Dr. Anupam Mehrotra

Assistant Professor

Assessing IPSG Awareness and Compliance Among Staff

Ishita Mondal MBA(HM-28) Roll No. 1721
Faculty Mentor: Dr. Anupam Mehrotra

ABOUT HOSPITAL

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.

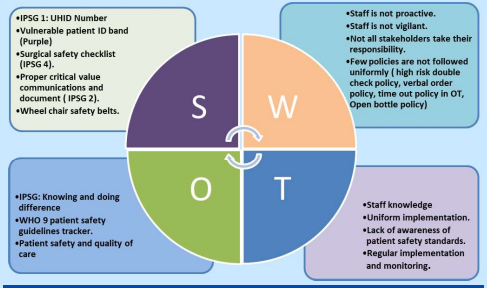
MISSION & VISSION

Vision-Simplifying Health with World-class Medical Treatment

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 Excellencelass Medical Treatment and Right Care

OBJECTIVES

- Identify gaps in knowledge and compliance
- Improve IPSG knowledge and compliance

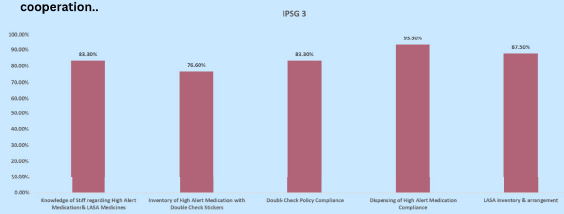


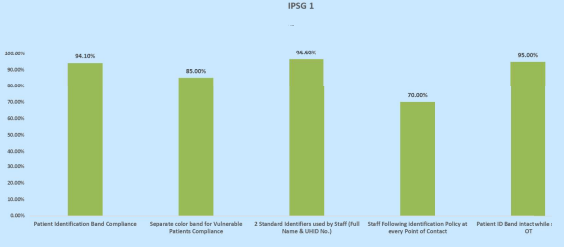
METHODOLOGY

Research study design:Observational Study.
Method of data collection:Real time data is collected from IPD, Day Care & OTs of Paras Health for the period,April & May (2024).
Evaluation techniques:Develop a scoring strategy to identify non-compliance
Present data using bar charts
Stakeholders involved in this study:Stakeholders involved in the study are Patients, Nursing Staff, OT Staff, Consultants, RMOs.
Criteria for the study Inclusion Criteria:All the IPD, Day Care & OT Areas

LEARNING DIFFERENCE

- Theoretical knowledge provides a foundation for understanding the world, integrates into hospital operations, and develops critical thinking and problem-solving skills..
- Practical exposure offers insight into healthcare operations, implements theoretical concepts, and enhances communication, teamwork, empathy, coordination, and cooperation..





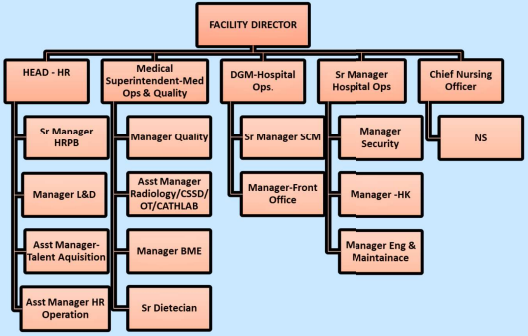
FINDINGS

- Fall History of few patients was not recorded appropriately
- Patient ID Bands were not proper
- High Alert Medicines – Double check policy was not followed uniformly
- Transfer forms were incomplete
- Time Out – 100 % Compliance is not observed
- LASA Staff awareness on Drugs
- Patient Education on 4Ps was not proper
- Safety belts were not used

CHALLENGES FACED

- Coordinating across departments
- Ensuring regulations are followed
- Gathering and analysing data

ORGANISATION STRUCTURE



USEFULLNESS OF INTERNSHIP

- Observed various department's functions, management, coordination
- Enhanced communication skills.
- Improved teamwork abilities.
- Strengthened professionalism and behavior
- Gained hands-on experience in quality management.

LEARNING DURING INTERNSHIP

- Patients admission, and consultation process
- Nutritional assessment, discharge
- Safety codes, Organizational policies, and services
- NABH accreditation for quality indicators
- Hazardous waste management, Basic life support

SUGGESTION

- Be proactive
- Conduct regular work status updates
- Foster a positive patient safety culture
- Organize regular training
- Conduct mock drills
- Perform risk assessments
- Hold regular meetings and follow-ups

INTRODUCTION:

This report details my summer internship experience at Paras Health, where I worked as an intern in the Quality Department. Paras Leading Indian healthcare provider Paras Health is well known for its dedication to high-quality patient care and safety. My internship, which spanned from [01/05/2024] to [30/06/2024], gave me a priceless chance to obtain firsthand knowledge of the complex inner workings of healthcare quality management.

I actively participated in a number of crucial areas throughout my internship that are essential to upholding and improving healthcare standards. Working on global patient safety objectives and getting ready for the NABH (National Accreditation Board for Hospitals & Healthcare Providers) AUDIT.

Among the important tasks I worked on was compiling comprehensive reports on global patient safety objectives. To improve patient safety practices, this required data analysis, area identification, and practical recommendation-making.

ACTIVITY DONE:

NABH SURVEILLANCE

I participated as a front line quality department staff in NABH quality assurance Surveillance held on 1st and 2nd June 2024.

1.Department Checklist

Activities: I was involved in preparing and maintaining checklists in different departments as per NABH 5th Edition Standards and the requirements were met. It also included the evaluation that was happening regularly and ensured each department produced what was on the checklists.

2.Signage

Activities: I made sure all of the hospital's signs were readable, positioned correctly, and adhered to NABH guidelines by performing a thorough audit of the signage. In order to improve safety and navigability, I also offered suggestions for better signpost placement and clarity.

3.Emergency Codes & Mock Drills

Code Red (Fire): Participated in mock drills to make sure staff members understood evacuation routes and fire safety protocols.
Code Blue (Medical Emergency): To evaluate and enhance the hospital's ability to handle medical emergencies, I took part in drills.
Code Pink (Infant Abduction): Assisting with the planning of exercises to teach personnel how to stop and react to scenarios involving infant abduction.
Code Orange (Hazardous Material Spill): Took part in drills to manage spills of hazardous materials in a safe manner.
Code Purple (Hostage Situation): Drills were observed and assessed in order to get staff ready for any security concerns.

4.Licenses & Agreements:

Activities: I helped make sure all of the hospital's licences and agreements were up to date and i compliance with the latest laws by examining and revising them. In order to authenticate and renew the required documents, coordination with multiple departments and

outside authorities was required.

5.Policies and Manuals:
Activities: I assisted with the review and updating of several manuals and rules as per NABH 5TH Edition Standards to make sure they were up to date and compliant with best practices. In order to make sure employees were aware of the most recent procedures, I also helped distribute these materials to the appropriate departments and led training sessions.

6. Facility Rounds – Once in a Month
Activities: I inspected departments for adherence to safety and quality standards during facility rounds as a part of Facility round team. This involved making sure that everything was clean, that the equipment worked, and that safety procedures were followed.

7. HIRA(HAZARD IDENTIFICATION AND RISK ASSESSMENT)Study
Activities: I took part in an HIRA study, offering solutions for risk mitigation and assisting in the identification of possible hazards in various hospital locations. This required assessing risks and creating thorough safety strategies in collaboration with a multidisciplinary team.

8. Outsource Audits – Once in every 6 months
Activities: I helped with audits of contracted services, including security, catering, and cleaning. This included checking for adherence to hospital standards, evaluating contracts, and assessing the calibre of services.

9. Document Control
Activities: I assisted with setting up and keeping up the document control system at the hospital. This involved making certain that every document was properly stored, current, and available to authorised staff.

10. Audits :

Clinical Audit

Audit on Medicine Department: Performed an audit to assess the patient records, treatment methods, and adherence to clinical recommendations in the Medicine Department.

Audit on PTCA

Participated in a review of Percutaneous Transluminal Coronary Angioplasty (PTCA) procedures, with an emphasis on post-operative care, procedural compliance, and patient outcomes.

Quality improvement plan(QIP)

Audit on IV Cannulation:
A review and improvement of IV cannulation procedures were carried out, with an emphasis on lowering risks and raising patient safety.
Audit on IPSG:
helped to identify areas for improvement, carry out remedial actions, and audit compliance with IPSG.

11. Patient safety and quality Improvement (PSQ) Indicators

Activities: I helped gather and examine data on a range of PSQ indicators, including rates of infection, patient falls, and medication errors. This information was utilized to spot patterns, create strategies for improvement, and assess how well treatments were working.

12. Overview of Project on IPSG

- **Introduction:**

Modern medical technology is causing a rapid evolution in healthcare, making hospital operations more complex and patient safety more important. The World Health Organisation states that during hospital care, one in ten patients in wealthy nations and a higher number in underdeveloped countries experience injury. Enhancing patient safety mechanisms was emphasized at the 55th World Health Assembly. Misidentification of patients, misunderstandings in communication, and high-risk prescriptions are major problems. The primary objectives of the IPSG are accurate patient identification, efficient communication, safe administration of high-alert drugs, appropriate surgical techniques, a decrease in infections linked to healthcare, and the prevention of patient falls. It is imperative that healthcare professionals are aware of IPSG.

- **Aim and Objectives:**

to ascertain the hospital staff's awareness level and compliance with the IPSG at a tertiary care facility. (Paras Health, Udaipur), in order to identify any gaps and enhance IPSG compliance and knowledge.

- **Research Methodology:**

    - This study is based on:-
    - **Research study design**: Observational Study.
    - **Method of data collection**: Real time data is collected from IPD, Day Care & OTs of Paras Health for the period April & May (2024).
    - **Evaluation techniques:** A strategy to find out Non-Compliance through Scoring and then presenting the data in the form of Bar Charts. Further, RCA has been done in the form of Fish Bone Diagram.
    - **Stakeholders involved in this study**: Stakeholders involved in the study are Patients, Nursing Staff, OT Staff, Consultants, RMOs.
    - **Criteria for the study**
    - **Inclusion Criteria:-**All the IPD, Day Care & OT Areas
    - **Exclusion criteria**
    - OPD
    - ER
    - Dialysis

- **IPSG GOALS:-**

Goal 1: Identify patients correctly

Goal 2: Improve effective communication

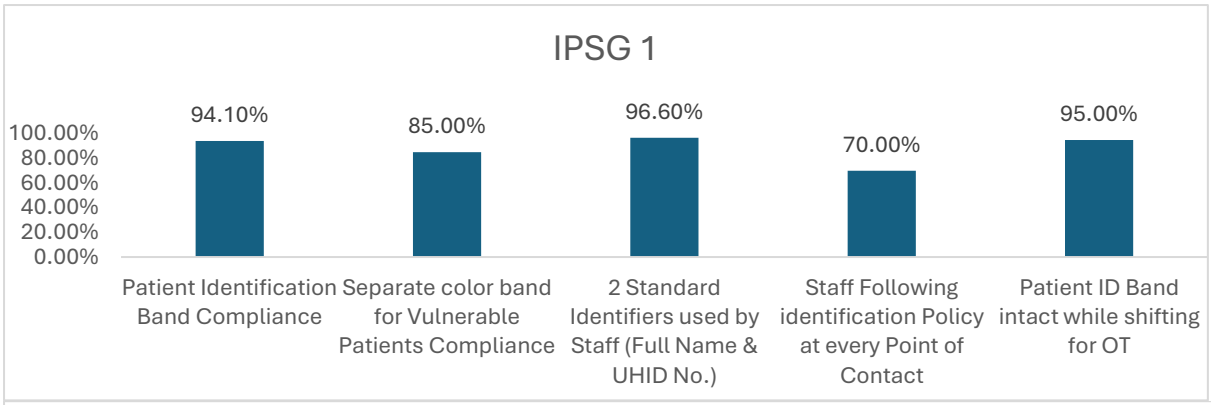
Goal 3: Improve the safety of high alert-Medications

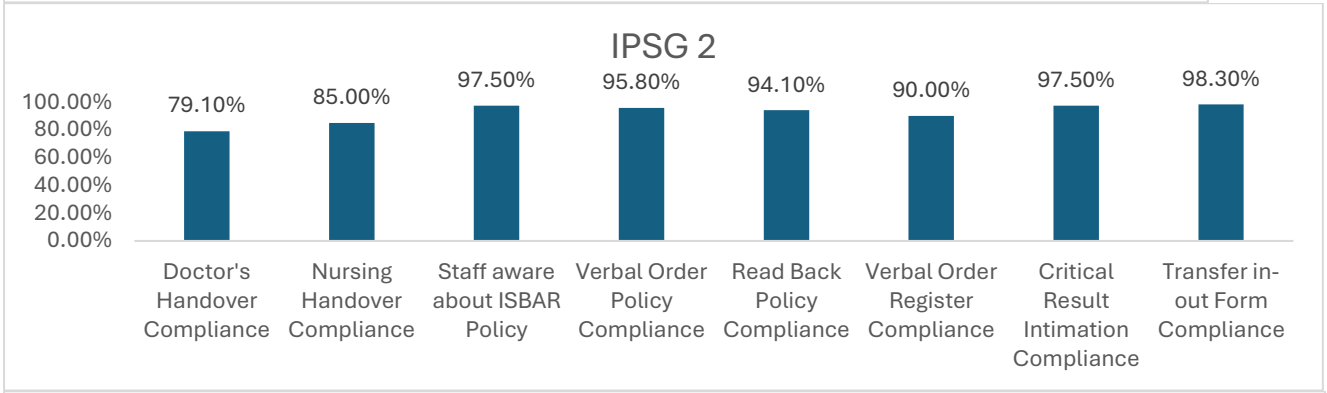
Goal 4:Ensure Safe Surgery.

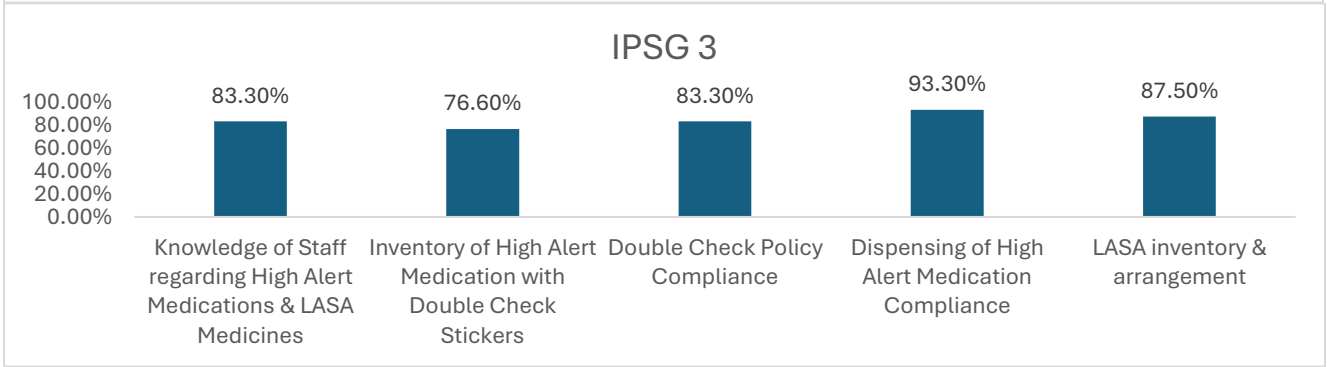
Goal 5:Reduce the Risk of Health care-associated infections.

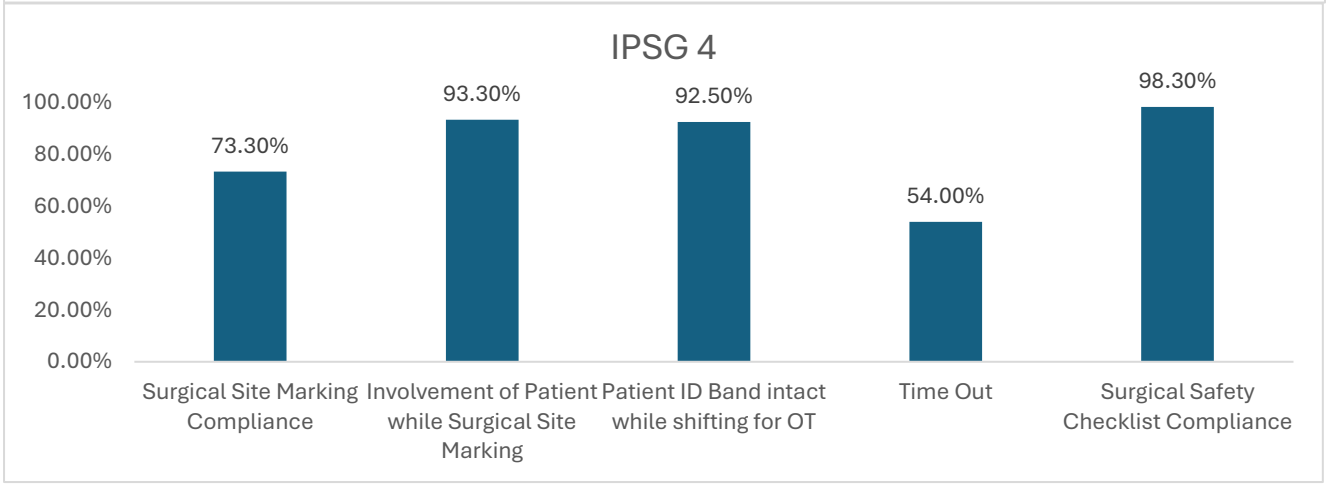
Goal 6:Reduce the risk of patient harm resulting from falls.

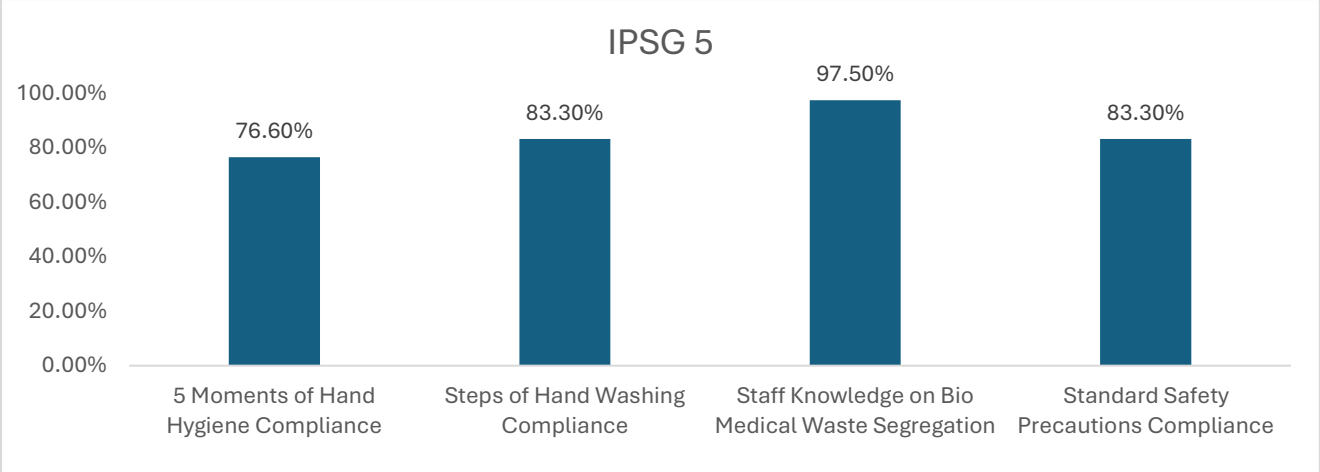
DATA ANALYSIS:-

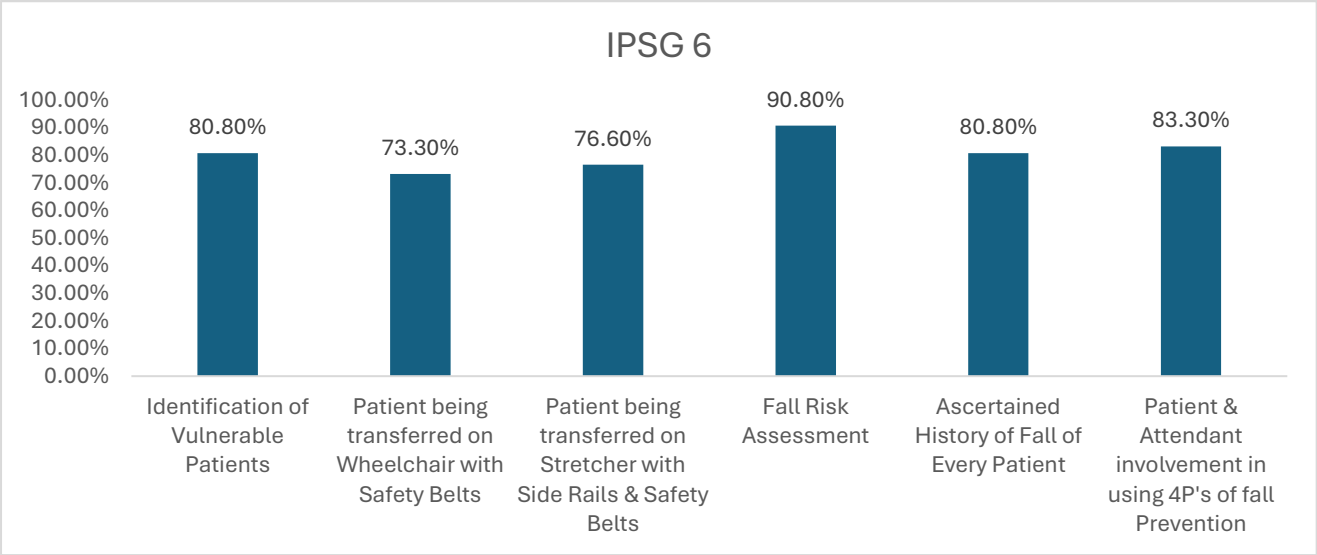




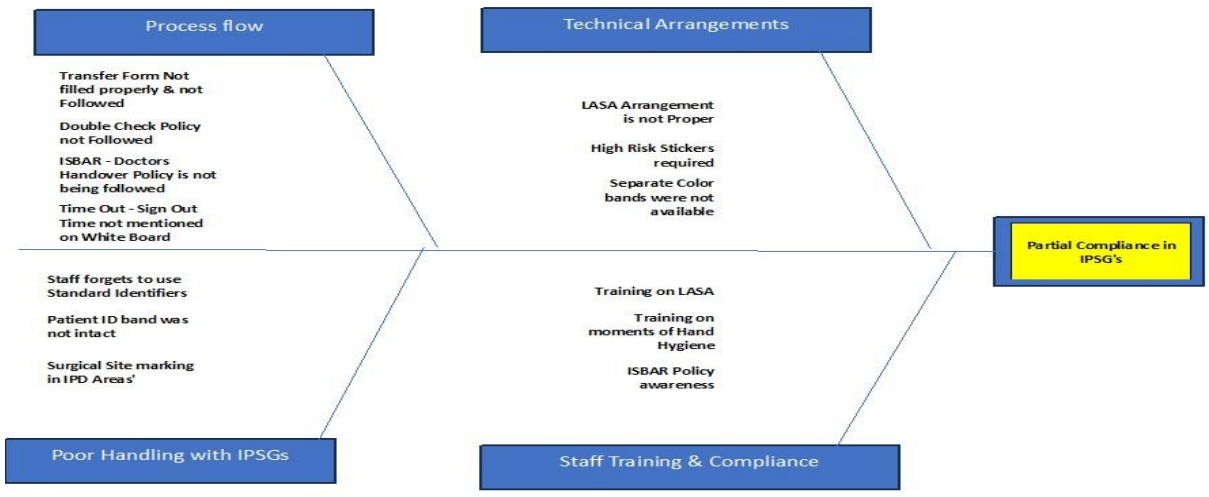








DATA ANALYSIS-FISH BONE DIAGRAM



FINDINGS:-

1. Employees did not always use Standard Identifiers when providing care.
2. The patient identification bands were not appropriately positioned, absent, or color-coded.
3. The protocol of double checking medicines on high alert was not consistently adhered to.
4. The transfer forms were not finished.
5. A small number of patients' fall histories were not properly documented.
6.Time Out - The patient board for OT 3 and 4 did not specify the sign-out time.
7. Time Out: There is no 100% compliance.
8. Knowledge of LASA drugs (handling & arrangements).
9. The 4Ps of fall prevention were not properly taught to patients. Employees were 10.told to teach patients the four Ps of fall prevention.
11. No side rails were utilized.

LINKING THEORY:-

- Health Systems and Policy: I gained knowledge of the application and observance of policies through my participation in the NABH inspection preparations**.**
- Committee meetings and department checklists used management theories, like Mintzberg's Managerial Roles and Fayol's Administrative Theory, to guarantee effective team collaboration**.**
- I carried out facility visits and simulated drills as part of my role managing hospital services to guarantee effective service delivery.
- Digital Health concepts were used for data management and document control, and biostatistics techniques were used to analyze patient safety data.
- In response to hospital operations management, I oversaw logistics during emergencies.
- Standards for quality and accreditation were followed while getting ready for the NABH inspection.
- Through financial management exercises, themes related to health economics and financing were examined.
- Methods of Research and Dissertation Preparing reports and gathering data helped to hone writing abilities. In addition, I coordinated training and audits using the concepts of human resource management.

GAPS IDENTIFIED ON THE WORKING AREA:-

* The department staff's lack of collaboration with the quality department.
* The department staff's unwillingness to collaborate with the quality department;
* The inability to meet daily NABH work criteria.
* Lack of knowledge about NABH standards among hospital staff.
* All stakeholders carry the obligation of upholding quality standards, which are not being maintained, even with the support of higher management.
* Adhering to the timetable established by the NABH surveillance audit to close non-compliances.
* Not following the instructions for documenting medical records.

SUGGESTIONS FOR IMPROVEMENT:-

- **Being Proactive:-**

• Willingness: Exhibit a willingness to participate in and enhance healthcare procedures.
• Knowledge: Keep abreast of developments in the field of quality and patient safety.
• Enthusiasm for participation: Exhibit a strong desire to engage in activities that will enhance the quality of life.
• Active monitoring and follow-up: Keep tabs on the advancement of initiatives that have been put into action on a regular basis

- **Top management backing:**

Obtain top management support and commitment for quality improvement projects.

- **Frequent updates on work status and internal audits conducted by the quality department:-** To keep an eye on developments and guarantee compliance, conduct internal audits and frequent updates.
- **Positive attitude towards patient safety and care quality:-** Promote an environment that places a premium on both.
- **Regular training sessions** should be arranged to ensure that staff members are kept up to date on safety procedures and best practices.
- **Setups for simulations:-**

• Patient admission and discharge: Establish patient admission and discharge procedures using simulations.
• **IPSGS:** Train personnel on the International Patient Safety Goals through simulations.
• Hospital infection control procedures: Use role-playing games to strengthen infection control protocols.

- **Carrying out simulated exercises:**

• Emergency Codes: To guarantee readiness, practice responding to different emergency codes on a regular basis.

- **The accountability of the management:-**

• Proactive risk analysis: To detect and reduce possible dangers, carry out proactive evaluations.
•HIRA study: To improve safety, conduct studies on risk identification and assessment.
• Safety precautions for patients and employees: Put safety precautions into place and keep an eye on them to safeguard both parties.

- **Root Cause Analysis (RCA) and remedial and Preventive Action (CAPA):**

Examine issues, identify underlying causes, and carry out preventative and remedial measures.

- Have frequent meetings to talk about strategies, obstacles, and advancements.
- Follow up on action items and improvements on a regular basis to guarantee continued progress.

- **Monitoring via open and closed file audits:-** To guarantee ongoing quality improvement, audit both active and completed patient files.

CONCLUSION:-

Throughout my internship at Paras Health, I enhanced my comprehension of healthcare administration by putting classroom theories to use in a variety of initiatives and activities. Audits and quality improvement initiatives were among the tasks that involved determining if the International Patient Safety Goals (IPSG) were being followed. Department checklists, emergency code drills, and clinical audits were among the activities. Proactive steps, senior management support, frequent updates, and audits were stressed as ways to maintain high standards of patient safety in the improvement suggestions. My experience has given me useful skills and insights into the workings of the healthcare system, highlighting the significance of ongoing improvement for better patient outcomes.

Signature of the Student- Ishita Mondal

Approved by the IIHMR University's Mentor- Dr Anupam Mehrotra