SUMMER INTERNSHIP PROGRAM

at

EHCC Hospital Malviya Nagar, Jaipur

From – 6th May 2024 to 6th July 2024

A REPORT BY

Bhawna Kaswan

Master of Business Administration

Hospital and Health Management

2023-25

under the Mentorship of

Tripti Bisawa

Professor

IIHMR University

Jaipur

ETERNAL HOSPITAL

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Ms. Bhawna Kaswan** student of **IIHMR University, Jaipur** has completed her internship at **"Eternal Hospital, Jaipur"** from **6th May 24 to 6th July 24.**

Eternal Heart care Centre & Research Institute, Jaipur is a 225-bedded multispecialty Hospital.

During this period, she was inducted, oriented and trained in the working and processes of **Quality Department** under the guidance of **Milind G Kulkarni.**

During the period we found her sincere, intelligent, obedient, and hard working.

We wish her all the best for future endeavours.

For **ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE, JAIPUR**

Ashok K Jeenwal
Head- HR & Training

Heartcare Centre & Research Institute JAIPUR

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that Ms. Bhawna Kaswan of academic year 2023-25 of Institute of Health Management Research has prepared 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

(Signature of Faculty Mentor)
Mrs. Tripti Bisawa
Professor
IIHMR UNIVERSITY JAIPUR

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Weekly Report

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

Area/ Department/ Project of Summer Internship Program: Department of Quality

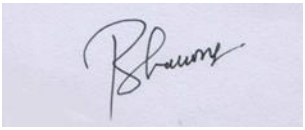
Name of the Student: BHAWNA KASWAN

Roll no:1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 1 **From:** 6th May-24 **to** 11th May-24

Activity Done	- Orientation about the department and hospital - Discussed about the project with the quality team - Did consultancy reference work on various floors - Monitored a mock drill for CODE ORANGE and CODE GREEN - Prepared a report for the same. - Did work related to pharmacy TAT (Turn around time) - Did work related to PHC (preventive health checkup) - Did work related to NABH survey in the hospital
Linking theory (Classroom learning) with practice at your organisation	- There were many things about which I studied in the class and was able use that knowledge in my day-to-day operations and that helped me to easily understand things in different departments of the hospital.
Gaps identified on the working area.	- While doing the consultancy reference work I observed that some patient files haven't mentioned the time and date of reference. - While working in PHC department I observed that some patients had issues related to long waiting time at the ophthalmology department and for lifts and washroom related problem on the ground floor.
Suggestions for improvement	- Doctor/staff should be advised to keenly fill the consultancy reference form with date and time. - Stairs should be available for use for patients also to reduce waiting time at lifts. - There is room for improvement in ophthalmology department and washroom area.

Plan for the next week	- To work at PAC (pre-anaesthesia check) department of the hospital - To work on discharge process in the hospital - Quality team will give new task next week



Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

Area/ Department/ Project of Summer Internship Program: Department of Quality

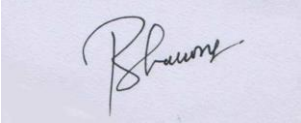
Name of the Student: BHAWNA KASWAN

Roll no:1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 2 **From:** 13th May-24 **to** 18th May-24

Activity Done	- Work related to PHC (Preventive health check)- data collection through questionnaire - Waiting TAT for PAC (Pre-anaesthesia check) patient - TPA (Third Party Administrator) tracking and TAT - Billing and discharge process - Interdisciplinary team round
Linking theory (Classroom learning) with practice at your organisation	- NABH guidelines - Hospital planning - Quality management - Patient satisafcation - Lean management
Gaps identified on the working area.	- Delay in TPA process due to staffing issues - Delay in TPA process due to protocol adherence - Delay in TPA process due to overcrowding - Improperly maintained PAC register
Suggestions for improvement	- Streamlining protocols in TPA department - Continuous quality improvement in TPA TAT to optimise efficiency - Delay in sending the IPD file to the department can also be improved - Proper maintenance of PAC registers
Plan for the next week	- To continue PHC work - To report to management team for the task given

	- To work on discharge process in the hospital - Quality team will give new task next week



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Weekly Report

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

Area/ Department/ Project of Summer Internship Program: Department of Quality

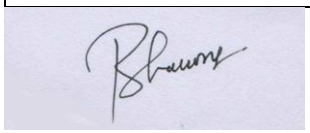
Name of the Student: BHAWNA KASWAN

Roll no:1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 3 **From:** 20th May 2024 **to** 25th May 2024

Activity Done	- Work related to PHC (Preventive health check)- data collection through questionnaire - Started working on project decided - TPA (Third Party Administrator) tracking and TAT - Observed Code orange mock drill and prepared report on the same - Reviewing the nursing assessment form for OPD-1 - Assigned the task to initiate a token system in OPDs - Sorting of nursing assessment form and doctor's prescriptions
Linking theory (Classroom learning) with practice at your organisation	- NABH guidelines - Hospital planning - Quality management - Patient satisafcation - Lean management
Gaps identified on the working area.	- Delay in TPA process due to staffing issues - Delay in TPA process due to protocol adherence - Increased waiting time due to absence of token system in OPDs - Improper management of nursing assessment forms and doctor's prescriptions
Suggestions for improvement	- Streamlining protocols in TPA department - Continuous quality improvement in TPA TAT to optimise efficiency - Implementation of token system in OPDs - Proper maintenance of nursing assessment form and doctor's prescription for record keeping

Plan for the next week	- To continue PHC work - To report to management team for the task given - To work on discharge process in the hospital



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Weekly Report

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

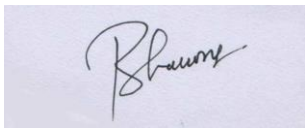
Area/ Department/ Project of Summer Internship Program: Department of Quality

Name of the Student: BHAWNA KASWAN

Roll no:1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 4 **From**: 27th May 2024 **to** 1st June 2024

Activity Done	- Started collecting data for project on discharge - Understood pharmacy process - Gone for IDTR rounds - Code orange mock drill
Linking theory (Classroom learning) with practice at your organisation	- NABH guidelines - Hospital planning - Quality management - Patient satisafcation - Lean management
Gaps identified on the working area.	- Improper knowledge to staff related to code orange - Manual documentation is not reliable due to human error in discharge process - Issues related to waiting time in OPDs
Suggestions for improvement	- Streamlining protocols in OPDs - Implementation of token system in OPDs - Proper training of staff for performing code orange for ensuring safety and minimizing risk
Plan for the next week	- To continue discharge process - To report to management team for the task given - IP and OP feedback rounds



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Weekly Report

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

Area/ Department/ Project of Summer Internship Program: Department of Quality

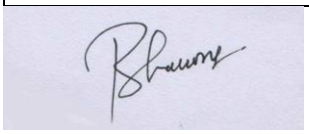
Name of the Student: BHAWNA KASWAN

Roll no:1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 5 **From**: 3rd June 2024 **to** 8th June 2024

Activity Done	- Understood the inventory management of IPD pharmacy - Pathology lab audit - Discharge data collection - IDTR rounds - Nursing assessment sorting
Linking theory (Classroom learning) with practice at your organisation	- NABH guidelines - Hospital planning - Quality management - Lean management - Patient satisfaction
Gaps identified on the working area.	- Issues related to delay in discharge process - Improper working of eye wash station in pathology lab - Open wiring issue in pathology lab - Improper record keeping of the nursing assessment form - Sitting arrangement in cardiac OPD
Suggestions for improvement	- Streamlining protocols in pathology lab - Ensuring proper working of eye wash station and daily checking - Addressing the open wiring issue in lab and adhering to the standards - Woking on the areas that results in delay in discharge process - Proper documentation of doctor's prescription and nursing assessment form

	- Addressing the sitting arrangement in cardiac OPD and changing it accordingly
Plan for the next week	- To continue discharge process - Nursing assessment form sorting - Understanding the CSSD and IPD pharmacy department - Departmental audits



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Weekly Report

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

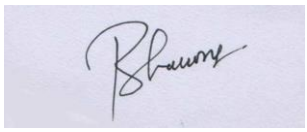
Area/ Department/ Project of Summer Internship Program: Department of Quality

Name of the Student: BHAWNA KASWAN

Roll no: 1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 6 **From:** 10th June 2024 **to** 15th June 2024

Activity Done	- Completed discharge data collection - IPD pharmacy audit - Critical value analysis - Glucometer IQC documentation
Linking theory (Classroom learning) with practice at your organisation	- NABH guidelines - Quality management - Gap analysis - Patient safety - Quality improvement
Gaps identified on the working area.	- Some items in the list does not match with the physical quantity in the IPD pharmacy - There is a mismatch of the documentation of critical value between wards and laboratory - Error in Glucometer documentation - New entries of lot number of strips in not updated regularly
Suggestions for improvement	- Streamlining protocols in IPD pharmacy - Ensuring proper documentation and regular checking of glucometer by appropriate authority - Regular checking of glucometer IQC - Addressing the mismatch between lab and wards regarding documentation of critical value
Plan for the next week	- Continuation of ongoing QIP's - Understanding of CCSD department - New work related to IPD pharmacy



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Area/ Department/ Project of Summer Internship Program: Department of Quality

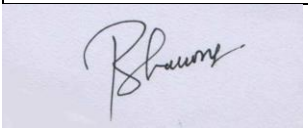
Name of the Student: BHAWNA KASWAN

Roll no: 1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 7 **From:** 17th June 2024 **to** 22nd June 2024

Activity Done	- Pharmacy clearance data collection - IPD pharmacy audit - Critical value analysis - Glucometer IQC documentation - Understood MRD functioning - IPD IDTR
Linking theory (Classroom learning) with practice at your organisation	- NABH guidelines - Hospital planning - Quality management - Gap analysis - Patient safety - Quality improvement - Patient satisfaction
Gaps identified on the working area.	- Some items in the list does not match with the physical quantity in the IPD pharmacy - There is a mismatch of the documentation of critical value between wards and laboratory - Error in Glucometer documentation - New entries of lot number of strips in not updated regularly
Suggestions for improvement	- Nursing staff should be instructed to record glucometer IQC record properly and on daily basis whenever glucometer strips are changed, and glucometer is tested. - Nursing staff should be instructed to use critical value chart for reference before making an entry in critical value register.

	- Path lab staff should communicate well with nursing staff regarding high value and critical value entry. - Ensuring proper documentation and regular checking of glucometer by appropriate authority - Addressing the mismatch between lab and wards regarding documentation of critical value
Plan for the next week	- Continuation of ongoing QIP's - Understanding of A/R marketing - Understanding laundry process - Understanding emergency operations



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Area/ Department/ Project of Summer Internship Program: Department of Quality

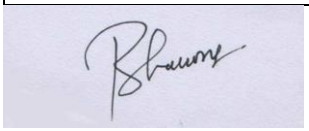
Name of the Student: BHAWNA KASWAN

Roll no: 1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Week no: 8 **From:** 24th June 2024 **to** 30th June 2024

Activity Done	- Critical value analysis - Glucometer IQC documentation - Understanding process of • MRD • A/R Marketing • F&B • Laundry • IT • Emergency admissions
Linking theory (Classroom learning) with practice at your organisation	- Hospital operation process - Quality management - Gap analysis - Patient safety - Quality improvement - QIP
Gaps identified on the working area.	- Dietician ticket system - ER admission desk is not located appropriately. - Inventory management of the laundry system. - Process of linen collection and distribution. - Linen getting missing from patient room.
Suggestions for improvement	- The waiting area for ER should be in front of ER admission desk. - Trolly should be covered properly while transporting dirty linen. - Dirty linen trolly should not be overloaded. - Inventory should be labelled according to linen.

	- Room discharge and patient dress handover information should be given to laundry department for maintaining record and linen. - Adjustable patient dress should be used so female patients are comfortable while wearing that. - Negative pressure needs to be maintained in the soiled linen room to prevent infection. - In hospital software dietician ticket system is old and food suggestions given by the system is not properly according to patient requirements. This requires manual editing in printed ticket for patient by dietician.
Plan for the next week	- ----------NIL---------- - INTERNSHIP COMPLETED



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Compiled Reporting Format

Name of the Organisation: ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE (ETERNAL HOSPITAL, MALVIYA NAGAR BRANCH JAIPUR)

Area/ Department/ Project of Summer Internship Program: Department of Quality

Name of the Student: BHAWNA KASWAN

Roll no: 1697 **Stream:** HOSPITAL AND HEALTH MANAGEMENT

Activity Done	• Orientation about the department and hospital • Discussed about the project with the quality team • Did consultancy reference work on various floors • Monitored a mock drill for CODE ORANGE and CODE GREEN • Prepared a report for the same. • Did work related to pharmacy TAT (Turn Around time) • Did work related to PHC (preventive health checkup) • Did work related to NABH survey in the hospital • Work related to PHC (Preventive health check)- data collection through questionnaire • Waiting TAT for PAC (Pre-anaesthesia check) patient • TPA (Third Party Administrator) tracking and TAT • Billing and discharge process • Interdisciplinary team round • Work related to PHC (Preventive health check)- data collection through questionnaire • Started working on project decided • TPA (Third Party Administrator) tracking and TAT

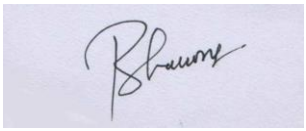
	• Observed Code orange mock drill and prepared report on the same • Reviewing the nursing assessment form for OPD-1 • Assigned the task to initiate a token system in OPDs • Sorting of nursing assessment form and doctor's prescriptions • Started collecting data for project on discharge • Understood pharmacy process • Gone for IDTR rounds • Code orange mock drill • Understood the inventory management of IPD pharmacy • Pathology lab audit • Discharge data collection • IDTR rounds • Nursing assessment sorting • Completed discharge data collection • IPD pharmacy audit • Critical value analysis • Glucometer IQC documentation • Pharmacy clearance data collection • IPD pharmacy audit • Critical value analysis • Glucometer IQC documentation • Understood MRD functioning • IPD IDTR • Critical value analysis • Glucometer IQC documentation • Understanding process of 1. MRD 2. A/R Marketing 3. F&B 4. Laundry 5. IT 6. Emergency admissions
Linking theory (Classroom learning) with practice at your organisation	• NABH Guidelines • Lean management (TAT) • Hospital planning • HR capacity building

	• Patient satisfaction and quality management (feedback) • Just in time (JIT) (IPD pharmacy) • Hospital information system • Disaster management codes • Patient safety • Supply chain management (IPD pharmacy) • Input quality control (Glucometer) • Point of care testing • Hospital operation process • Quality improvement programs • Gap analysis
Gaps identified on the working area.	Consultant reference – • While doing the consultancy reference work I observed that some patient files haven't mentioned the time and date of reference. Work related to PHC – • While working in PHC department I observed that some patients had issues related to long waiting time at the ophthalmology department and for lifts and washroom related problem on the ground floor. TPA – • Delay in TPA process due to staffing issues • Delay in TPA process due to protocol adherence • Delay in TPA process due to overcrowding • Delay in TPA process due to staffing issues PAC – • Improperly maintained PAC register. OPDs - • Increased waiting time due to absence of token system in OPDs. • Sitting arrangement in cardiac OPD. Nursing assessment forms – • Improper management of nursing assessment forms and doctor's prescriptions. Code orange – • Improper knowledge to staff related to code orange. Discharge process –

	• Manual documentation is not reliable due to human error in discharge process. • Issues related to delay in discharge process. Pathology lab – • Improper working of eye wash station in pathology lab. • Open wiring issue in pathology lab. IPD pharmacy – • Some items in the list does not match with the physical quantity in the IPD pharmacy. Critical value analysis – • There is a mismatch of the documentation of critical value between wards and laboratory. Glucometer IQC – • Error in Glucometer documentation. • New entries of lot number of strips in not updated regularly. Laundry – • Inventory management of the laundry system. • Process of linen collection and distribution. • Linen getting missing from patient room. ER admissions – • ER admission desk is not located appropriately. F&B – • Dietician ticket system
Suggestions for improvement	Consultant reference – • Doctor/staff should be advised to keenly fill the consultancy reference form with date and time. Work related to PHC – • Stairs should be available for use for patients also to reduce waiting time at lifts. • There is room for improvement in ophthalmology department and washroom area. TPA – • Streamlining protocols in TPA department • Continuous quality improvement in TPA TAT to optimise efficiency • Delay in sending the IPD file to the department can also be improved PAC – • Proper maintenance of PAC registers. OPDs – • Implementation of token system in OPDs.

	• Addressing the sitting arrangement in cardiac OPD and changing it accordingly. Nursing assessment forms – • Proper maintenance of nursing assessment form and doctor's prescription for record keeping. Code orange – • Proper training of staff for performing code orange for ensuring safety and minimizing risk. Discharge process – • Working on the areas that results in delay in discharge process. Pathology lab – • Streamlining protocols in pathology lab • Ensuring proper working of eye wash station and daily checking • Addressing the open wiring issue in lab and adhering to the standards IPD pharmacy – • Streamlining protocols in IPD pharmacy. Critical value analysis – • Addressing the mismatch between lab and wards regarding documentation of critical value. • Nursing staff should be instructed to use critical value chart for reference before making an entry in critical value register. • Path lab staff should communicate well with nursing staff regarding high value and critical value entry. Glucometer IQC – • Ensuring proper documentation and regular checking of glucometer by appropriate authority. • Regular checking of glucometer IQC. • Nursing staff should be instructed to record glucometer IQC record properly and on daily basis whenever glucometer strips are changed, and glucometer is tested. Laundry – • Trolly should be covered properly while transporting dirty linen. • Dirty linen trolly should not be overloaded. • Inventory should be labelled according to linen.

	• Room discharge and patient dress handover information should be given to laundry department for maintaining record and linen. • Adjustable patient dress should be used so female patients are comfortable while wearing that. • Negative pressure needs to be maintained in the soiled linen room to prevent infection. ER admissions- • The waiting area for ER should be in front of ER admission desk. F&B – • In hospital software dietician ticket system is old and food suggestions given by the system is not properly according to patient requirements. This requires manual editing in printed ticket for patient by dietician.



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