

INTERNSHIP REPORT

**STUDY ON INTRA HOSPITAL PATIENTS TRANSFER: ANALYSIS
AND OPTIMIZATION AT MISSION HOSPITAL ,DURGAPUR.**



The IIHMR University, Jaipur

Study on Intra Hospital Patient Transfer : Analysis and Optimization at MISSION HOSPITAL, DURGAPUR

Internship Period: 12 MARCH 2025 - 30 MAY 2025

Hospital Working Time: 9:00 AM – 5:00 PM, Monday to Saturday

Intern: ISHITA MONDAL

University: IIHMR University, Jaipur

Degree: Master of Business Administration (MBA) in Hospital and Health Management

Supervisor: DR.VIDYA BHUSHAN TRIPATHI

1. Introduction

During my Internship at MISSION HOSPITAL DURGAPUR ,I concentrated on the method for transferring patients within hospitals. Moving patients from one area of the hospital to another, as from the emergency room to diagnostic centres or from inpatient wards to operation rooms, is known as intra-hospital patient transfer. To streamline the transportation system, my job entailed studying the current procedures, evaluating their effectiveness, seeing possible areas for development, and suggesting fixes.

2. Objectives

- To comprehend the current system for intra-hospital patient transfer.
- To find inefficiencies, obstructions, and safety issues in patient transfer.
- To make suggestions for enhancing the system's effectiveness, safety, and quality

MISSION AND VISION

Mission:

To become a centre of excellence in healthcare by bringing tertiary-level healthcare to the people of eastern India.

vision:

To provide affordable, quality health care to patients by incorporating improvements in its day-to-day schedule.

SERVICE PROVIDED BY THE ORGANISATION

- **Accident & Emergency Medicine**
- **Paediatric Cardiology**
- **Plastic Reconstructive Surgery**
- **Psychiatry**

- **Urology & Kidneys**
- **General & Minimally Invasive Surgery Department**
- **Anaesthesiology**
- **Cardio Thoracic & Vascular Surgery**
- **Cardiology**
- **Dermatologist**
- **Radio-Diagnosis & Imaging Sciences**
- **Endocrinology & Metabolism**
- **Dentistry**
- **ENT**
- **Gastroenterology & Gastrointestinal Surgery**
- **General Medicine**
- **Obstetrics & Gynaecology**
- **Oncology**
- **Orthopaedics**
- **Paediatrics & Neonatology**
- **Paediatric and Preventive Dentistry**
- **Infectious Disease**
- **Neuroscience**
- **Nephrology**
- **Gynaecological Oncology**
- **Ophthalmology**
- **Pulmonology / Respiratory Medicine**
- **Interventional Pain Management**

3. KEY Activities and Responsibilities

- **Observation:** Spent time witnessing the processes involved in patient transport, particularly the transfer of patients between departments.
- **Data Collection:** Information about patient transport times, delays, safety precautions, and departmental communication was gathered.

- **Interviews:** Conducted interviews with hospital administrators, physicians, nurses, and transport workers who move patients.
- **Documentation Review:** Examined pertinent SOPs pertaining to patient transportation, safety measures, and equipment.
- **Analysis:** To find any inefficiencies, safety risks, or communication problems, the data was examined.

KEY LEARNINGS FROM INTERNSHIP

- **How to use hospital systems in real life**
 - Getting to see firsthand how different departments (ED, OPD, ICU, Radiology, OT, etc.) work together when moving patients.
 - Watching workflows, bottlenecks, and time-sensitive decisions in real time while moving patients.
 - Information about how hospitals work, such as how to manage beds, coordinate lifts, and schedule porters.
- **Coordination of clinical and non-clinical activities**
 - Knowing what doctors, nurses, and transport staff need to do to make sure that patient transfers are safe and on time.
 - The importance of checklists, keeping an eye on vital signs, and writing things down at every stage of transport.
 - Learning how important it is to talk to each other during handoffs.
- **Collecting and Analysing Data**
 - Learning how to do quantitative research.
 - Using programs like Excel to look at compliance rates, delays, and results.
 - Getting better at writing and reporting based on evidence and making useful suggestions.
- **Safety of Patients and Management of Risks**
 - Finding risks during transport, like low oxygen levels, broken equipment, or a delay in getting critical care.
 - Learning how safety measures like emergency kits and checklists before a transfer can lower bad outcomes.
 - How hospital-acquired diagnoses (HAD) can happen and how bad transfers can make them worse.
- **Making processes better and writing standard operating procedures**
 - Helping to make or review Standard Operating Procedures (SOPs) for moving patients within the hospital.

- Learning about Lean or Six Sigma ideas to make things work better and waste less.
- **Skills in communication and work**
 - Working with hospital administrators, doctors, and paramedics will help you talk to teams from different fields.
 - Learning how to formally report, collect feedback, and present findings to hospital management.
- **Exposure to rules and morals**
 - Knowing how hospitals follow NABH, JCI, or their own quality standards when moving patients.
 - Learning about ethical issues like getting consent, protecting patient privacy, and keeping data safe during transfers.
- **Using Technology in Transfers**
 - Looking at how EHR (Electronic Health Records) and hospital transport software (if available) help or hurt the process of moving patients
 - Finding out about possible improvements that could come from digital integration.
 - Making or suggesting frameworks to make communication better and speed up the process of transferring.

4. Key Findings

- **Delayed Transport:** Inadequate departmental coordination and a shortage of transport personnel frequently resulted in delayed patient transport times.
- **Inadequate Equipment:** Delays and discomfort were caused by occasionally inadequate or improperly maintained transport equipment, such as stretchers, wheelchairs, and patient trolleys.
- **Communication Gaps:** Inadequate departmental and transport staff communication caused misunderstandings regarding patient priority, which in turn caused delays and occasionally anxiety in the patients.
- **Safety issues:** Transport employees occasionally lacked the necessary expertise to manage patients who were seriously ill or immobilised, raising safety issues.
- **Absence of Monitoring:** Inefficiencies and trouble allocating resources resulted from the absence of a real-time monitoring system to track the status of patient transport.

5. Proposed Solutions

- **Better Coordination:** It was recommended that a centralised communication system be put in place so that employees from various departments can promptly discuss patient transport priorities and needs.

- **Training Programs:** To help healthcare workers and transport staff better understand safe procedures and appropriate patient handling methods, it is advised that they participate in frequent training programs.
- **Equipment Upgrade:** To prevent delays brought on by equipment failures, management was advised to invest in additional transport equipment and guarantee routine maintenance.
- **Real-Time Monitoring:** To improve coordination and cut down on delays, it was suggested that a real-time tracking system be developed to follow the location and status of patients being transported throughout the hospital.
- **Standardisation of Procedures:** To guarantee consistency in patient handling, safety, and prompt transport, it was proposed to create standardised transport protocols.

6. Conclusion

The internship at Mission Hospital Durgapur gave me important knowledge about the system for intra-hospital patient transport. Observations and data analysis revealed a number of significant inefficiencies and potential improvement areas. By putting the suggested fixes into practice—such as better training, better coordination, updated equipment, and real-time tracking—the hospital can improve patient transport services' effectiveness, security, and comfort. In providing high-quality healthcare services, the experience reaffirmed the significance of resource management, safety, and communication.

7. Acknowledgments

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