

SUMMER INTERNSHIP PROGRAM

at

EHCC Hospital , Jaipur

From 12/05/2025 to 21/07/2025

A REPORT BY

Shivam Rawat

Master of Business Administration

HM-29

Roll no - **2079**

2024-26

under the Mentorship of

Dr. Neetu Purohit , Professor



Ref: EHCC&RI/HR/Office/12424

Date: 21-July-2025

TO WHOMSOEVER IT MAY CONCERN

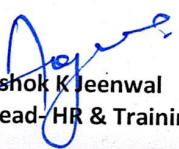
This is to certify that **Mr Shivam Rawat** student of **IIHMR University, Jaipur** has completed his internship at **"Eternal Hospital, Jaipur"** from **12th May'25 to 21st July'25**.

During this period, he was inducted, oriented and trained in the working and processes of **Quality Department** under the guidance of **Dr Ruchi Khanna**.

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

We wish him all the best for future endeavours.

For ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE, JAIPUR


Ashok K. Jeenwal
Head- HR & Training



IIHMR University Faculty Mentor Approval

This is to certify that **SHIVAM RAWAT** of academic year 2024-26 of Institute of Health Management Research has prepared a poster with respect to his summer internship held during May-July 2025.

He has carried out work as per the guidelines. His poster is approved for presentation.

Date: 25/07/2025

A handwritten signature in blue ink, appearing to read 'Neetu Purohit'.

Dr. Neetu Purohit

Professor

Assessment of Adherence to Sepsis Care Pathway

Presented By- Shivam Rawat

(2019, MBA HM 29)

Faculty Mentor - Dr. Neetu Purohit

Professor, IIHMR University

Organisation Mentor- Dr. Ruchi Khanna

Group Quality Head, EHCC, Jaipur

Hospital Description

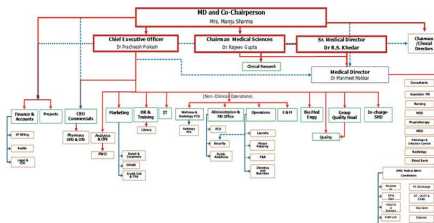
Eternal Hospital (A unit of Eternal Heart Care Centre and Research Institute) is a pa-of-the-art tertiary care hospital in Jaipur city.

With a capacity of **250 bedded** hospital has state-of-the-art technology focusing on the specialties like **Cardiology, Cardiac Surgery, Neurology, Neuro Surgery, Orthopaedic & Joint Replacement, Spine Surgery, Nephrology, Paediatrics, Gynaecology, Critical Care, Urology, Pulmonology, Gastroenterology, Diabetes and Endocrinology** and many more.

Vision: A center of excellence in area of medicine with highest international standard at affordable cost for the community around the globe.

Mission: To redefine healthcare by improving outcomes & experience of patient to cutting edge research & personalised clinical care including innovative, preventive, diagnostic, therapeutic, and rehabilitation services.

Organogram



About Sepsis

Sepsis is a time-sensitive emergency requiring prompt intervention.

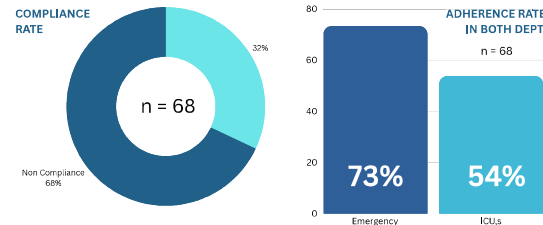
Sepsis may progress to **septic shock**. This is a dramatic drop in blood pressure that can damage the lungs, kidneys, liver and other organs. When the damage is severe, it can lead to death.

A **Sepsis Bundle Pathway** is a standardized set of evidence-based practices to diagnose and manage sepsis, including: **Early recognition, Timely antibiotics and fluids, Monitoring vital signs, Escalation of care**. It aims to deliver prompt and effective treatment, improving patient outcomes.

Study Objective Methodology

- To assess documentation and compliance of the Sepsis Bundle Pathway.
- To assess real-time adherence from Emergency to ICU.

- A total of 68 patients admitted to the Emergency and then in ICU wards were studied for over two months (12 May–10 July) to assess compliance with the Sepsis Bundle Pathway.



When analysed out of 68 cases diagnosed with sepsis, only 22 have correct documentation. Hence **67.5%** cases show non compliance.

The Emergency Department shows a higher adherence rate compared to the ICU's.

SWOT Analysis

Strengths

- Structured Data Collection
- Quantified Insights
- Time efficiency
- Improved Adherence over time

Weakness

- Poor Documentation practice
- No defined trigger points
- No Assigned Accountability

Opportunities

- Training & Capacity Building
- Streamlined Protocols
- Trigger Based Systems
- Regular Audits with feedback

Threats

- High workload in ER
- Staff turnover & staff changes
- Resistance to change
- Delayed Diagnosis

Key Learnings Challenges Faced

- Overview of all the departments of hospital & their working.
- Learned to conduct quality audits across various departments.
- Operational workflow of clinical and non-clinical departments, and their interdependencies.
- Improved self communication skills confidence and through daily interactions.

- Hesitation of staff in sharing relevant information.
- Balancing multiple tasks & duties.
- Transitioning from academic learning to unpredictable healthcare environment.

Suggestions

- Patient/attendant entry and exit should be from different gates to manage the flow.
- Complete counselling of patients/attendants at the time of discharge.
- Appointing a health counsellor for PHC

Theoretical Learning v/s Practical Exposure

Through my summer project, I was able to apply theoretical knowledge to actual hospital scenarios, developing practical problem-solving skills that will serve me well in my future career as a healthcare professional.

WEEKLY REPORT I

Name of the Organisation: Eternal Health Care Centre, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: I **From:** 12/05/2025 to 17/05/2025

Activity Done	1. Documentation & Orientation session was conducted on first day by Quality and HR department. 2. Had a tour of EHCC Hospital along with detailed overview of some departments like CSSD & HDU's. 3. Meeting with Dr. Ruchi Khanna Ma'am (Quality Head), she had a brief session regarding SIP process followed by project discussion. 4. Also had a meeting with Amit Khan Sir (Chief Administrative Officer) who briefed us about hospital operations of various departments. 5. Visited Cardiology Dept, OPD & Physiotherapy observed the process of registration, admission, billing, TPA, consultation to pharmacy. Also noted the footfall in dept. 6. Had a brainstorming session about the selection of topic of SIP. 7. Visited OPD I & II Obs and Gynae Dept, and had observed the same process of admission, billing, & TPA over there. 8. Presented the overview of topic selected for SIP to Quality Head. 9. Visited ER Module and had a briefing about ER operations by Senio Manager Emergency he explained Emergency Zoning, Triad, TAT. 10. Visited RGHS Registration Dept. & had an overview of RGHS Services observed the admission (OPD & IPD) process on RGHS software.
Linking theory (Classroom learning) with practice at your organisation	1. Utilised knowledge of Organisational Behaviour, Human Resource Management theories to analyse departmental functioning.

	2. Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	1. Observed inconsistency in area of feedback records. 2. Irregularities in assessment of vitals in some OPD’s.
Suggestions for improvement	1. Implement mandatory vital signs protocol & conduct a regular documentation audit for feedback.
Plan for the next week	2. Go through the topic. 3. Along with observing remaining IPD’s & OPD’s.



Signature of the Student

Approved by the IIHMR University’s Mentor

WEEKLY REPORT II

Name of the Organisation: Eternal Health Care Centre, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: II From: 19/05/2025 to 25/05/2025

Activity Done	1. Visited IPD pharmacy & General store of hospital. Had a brief the about both the dept. purchase & distribution under Supply Chain Management. 2. Visited Clinical Nutrition & Dietetics Dept. learnt about different types of diet & their administration (from ticket generation to distribution). 3. Had a brief of security services, their processes, undergone a fire safety drill with a session followed by Chief Security Officer, EHCC, got to know about the emergency alerts & various emergency codes. 4. Visited the F & B Dept., had a tour of hospital's kitchen & room service area, learnt about licenses, billing & management of kitchen services. 5. Had a tour of Bio Medical Engineering Dept, had a brief session on various technological advancements made in premises, machinery, & their efficient maintenance. 6. Had a meeting with the Head of Projects Management EHCC, he briefed us on how a hospital is made from start from excavation to whole structure & functioning. 7. Visited the Engineering Dept, explained about the processes and working of all engineering activities. 8. Visited Blood Bank and its operations, TAT, and storage.
Linking theory (Classroom learning) with practice at your organisation	9. Linked Utility Services lectures with practical knowledge of processes. 10. Supply Chain Management 11. Applied concepts of "Essentials of Hospital Service" to understand the operations of EHCC.
Gaps identified on the working area.	1. Overcrowding in canteen in rush hours.

Suggestions for improvement	1. Increase seating capacity as per footfall.
Plan for the next week	2. Will start data collection according to SIP topics assigned.



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WEEKLY REPORT III

Name of the Organisation: Eternal Health Care Centre, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: III **From:** 26/05/2025 to 31/05/2025

Activity Done	3. Visited Dialysis Department & got a brief about process of dialysis, billing and clinical emergencies that can occur during dialysis. 4. Visited Housekeeping dept. understood the link between housekeeping with other depts. Such as CSSD etc. 5. Worked on my SIP topic audited various ICUs and checked the sepsis pathway checklist from ER to ICUs. 6. Observed the flow of a Septic Shock patient from different depts. in critical / initial six hours of admission. 7. Visited TPA dept. and understood about the process of claim, billing & discharge of various organisations.
Linking theory with practice at your organisation	8. Related concepts of Financial Management & HRM in hospitals. 9. Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	10. Irregularity in maintaining the Sepsis Checklist in ICUs.
Suggestions for improvement	11. Tracking & Verification by the supervisor or in-charge in respective ICUs.
Plan for the next week	12. Work on the SIP topic assigned & cover the remaining dept. to understand their working.

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WEEKLY REPORT - IV

Name of the Organisation: EHCC, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29 sec A

Week no: IV

From: 02/06/25 to 07/06/25

Activity Done	13. Understood floor management and patient flow process at the hospital. 14. Followed patient processes from admission to discharge. 15. Observed how patient movement is managed by nursing station. 16. Coordination of various departments like dietetics, housekeeping, clinical pharmacology, IPD pharmacy, IDTR, TPA etc for patient management. 17. Worked on project topic “Sepsis Pathway Checklist”
Linking theory (Classroom learning) with practice at your organisation	18. Related concepts of Organisation behaviour in hospital. 19. Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	Checklist is not filled completely.
Suggestions for improvement	20. Data should be routinely analysed to identify trends and department .
Plan for the next week	21. Continue to observe functioning and coordination of various departments in hospital.

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WEEKLY REPORT - V

Name of the Organisation: EHCC, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: V

From: 09/06/25 to 14/06/25

Activity Done	22. Coordinated with both ER and various ICUs, HDUs, NICUs to implement the proper sepsis pathway filling . 23. Learned about various checklists used for internal department auditing. 24. Audited Physiotherapy dept. checked documents and registers.
Linking theory (Classroom learning) with practice at your organisation	25. Related concepts of Organisation behaviour in hospital. 26. Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	27. Found various communication gap between the nursing staff.
Suggestions for improvement	28. Required regular meeting with the hospital staff and required regular audit to decrease the adherence to filling forms .
Plan for the next week	29. Continue to observe functioning and coordination of various departments in hospital.

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WEEKLY REPORT - VI

Name of the Organisation: EHCC, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: VI

From: 16/06/25 to 21/06/25

Activity Done	30. Visited the Digital Marketing department learnt the process of tele talk , queries management, SEO,GMB and other marketing methods. 31. Visited OT Complex and got a thorough idea of how OT works and co-ordinate in different emergencies. 32. Worked with PCS dept. of hospital observed their process to manage the flow of patients. 33. Got to know about the Health & Wellness centre in hospital process of PHC(Preventive Health Check-ups) 34. Worked on SIP project met with Sr Manager ER to implement the new Sepsis pathway. 35. Learnt about different checklists used for different departments for clinical & internal audit.
Linking theory (Classroom learning) with practice at your organisation	36. Related concepts of Marketing & Digital Health . 37. Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	38. Health & Wellness lounge has space constraint has to be slightly modified to divert the rush of patients.
Suggestions for improvement	39. Can be shifted to another area where people can sit and relax while waiting for their turn for lab test etc.
Plan for the next week	40. Continue to observe functioning and coordination of various departments in hospital. 41. Visit Cathlab and know the process. 42. Learn the process of MRD dept.

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WEEKLY REPORT - VII

Name of the Organisation: EHCC, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: VII

From: 23/06/25 to 28/06/25

Activity Done	43. Visited MRD Dept. observed the Record section of hospital ,got to know about MLC cases and other legal documentations which has to be saved. 44. Participated in IDTR team, as a member and conducted a IDTR round with PWO dept. 45. Observed the Complaint and Grievance addressing process and RCA, CAPA methods. 46. Visited Infection Control Dept. got to know about the mandatory things to be followed within hospital premises. 47. Conducted an internal audit on a floor checked all the necessary parameters according to IPSPG,NABH,JCI guidelines. 48. Worked on my SIP project met Dr. Pramod Sarwa (Medical Incharge MICU) to modify the sepsis bundle sheet. 49. Tracked the compliance of Sepsis Bundle Pathway in ICUs. 50. Participated in a fun activity organised by HR Dept. “Masti ki Pathshala “.
Linking theory (Classroom learning) with practice at your organisation	51. Related concepts of HRM in MRD dept. 52. Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	53. Infection Control Dept could have more members in team to manage efficiently and reduce time.
Suggestions for improvement	-

Plan for the next week	54. Continue to observe finance department s in hospital. 55. Join or participate in a corporate health camp organised by hospital. 56. Visit Cathlab and know the process.
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WEEKLY REPORT - VIII

Name of the Organisation: EHCC, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: HM 29

Week no: VII

From: 30/06/25 to 05/07/25

Activity Done	57. Visited Emergency Department got to know about Ambulance Operations it's daily management. 58. Conducted an internal audit regarding patient file checklist. 59. Reviewed the CPR Running Sheets and compiled data of past month June. 60. Worked on my SIP project segregated all the data in Excel to assess and find out the compliance rate. 61. Tracked the compliance of Sepsis Bundle Pathway in ICUs.
Linking theory (Classroom learning) with practice at your organisation	62. Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.
Gaps identified on the working area.	63. There is only a single ambulance owner by hospital rest depends on outsourced companies.
Suggestions for improvement	-
Plan for the next week	64. Continue to observe finance department s in hospital. 65. Join or participate in a corporate health camp organised by hospital.



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WEEKLY REPORT - XI

Name of the Organisation: EHCC Hospital, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: MBA-HM

Week no: XI **From:** 07/07/2025 **to** 12/07/2025

Activity Done	66. Overview of the finance dept. 67. File audit of OT Notes and Surgical safety checklist 68. NABH checklist audit of radiology department 69. Data analysis and prepared presentation of SIP Topic.
Linking theory (Classroom learning) with practice at your organisation	70. Gained knowledge on the concepts of “Essentials of Hospital Services”. 71. Applied concepts of “Financial Management” and “Biostatistics”.
Gaps identified on the working area	72. Inconsistencies in documentation or incomplete checklists identified during the audit. 73. Challenges in data collection or interpretation, or areas for refining the presentation content.
Suggestions for improvement	74. Standardize documentation procedures and provide refresher training on the surgical safety checklist. 75. Develop action plans to address identified non-conformities and improve adherence to NABH standards. 76. Refine data collection methods and enhance presentation clarity and impact.
Plan for the next week	1. Follow-up on implemented suggestions for OT notes and surgical safety checklist. 2. Deliver the SIP presentation and incorporate feedback.

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WEEKLY REPORT - X

Name of the Organisation: EHCC Hospital, Jaipur

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: MBA-HM

Week no: X **From:** 14/07/2025 **to** 19/07/2025

Activity Done	3. Overview of Medical Administration got to know about the working and coordination with doctors , nurses and other dept. 4. Submission of Final project and presentation to quality head. 5. Done the facility round audit on each floor.
Linking theory (Classroom learning) with practice at your organisation	6. Gained knowledge on the concepts of “Essentials of Hospital Services”.
Gaps identified on the working area	7. Inconsistencies in documentation or incomplete checklists identified during the audit. 8. Challenges in data collection or interpretation, or areas for refining the presentation content.
Suggestions for improvement	9. Standardize documentation procedures and provide refresher training on the surgical safety checklist.
Plan for the next week	10. Follow-up on implemented suggestions for OT notes and surgical safety checklist. 11. Deliver the SIP presentation and incorporate feedback.

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COMPILED REPORT

Name of the Organisation: EHCC Hospital, Jaipur

Department: Quality

Name of the Student: Shivam Rawat

Roll no: 2079

Stream: MBA-HM

From: 12/05/2025 **to** 21/07/2025

Activity Done	• Documentation and orientation session by HR and quality department. • Discussed and finalized the topic of SIP "Sepsis Bundle Compliance" ○ Objective - To assess documentation and compliance of the Sepsis Bundle Pathway, & to evaluate real-time adherence from Emergency to ICU. ○ Sample size included all 68 patients admitted in ICUs & ER in the tenure of 2 months. ○ The present study was conducted to assess the emergency management and clinical compliance in patients diagnosed with sepsis and septic shock. ○ The study design followed a retrospective observational approach focused on clinical documentation and sepsis protocol adherence. • Visited various departments to learn about their overview, functioning and operations in the hospital. ○ CSSD: Learned about sterilization processes, green linen and how surgical instruments are cleaned and packed for reuse. ○ OPD: Observed outpatient flow from reception – billing- consultation- investigations. ○ RGHS Counter: Gained insight into government health schemes. Learned about the departments at EHCC that are empaneled under RGHS.
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	Registration- processing- billing- treatment-discharge. ○ ER Module: Understood emergency triage, initial treatment and documentation in critical situations. ○ IPD Pharmacy: observed the process of how IPD pharmacy receives the prescribed order - packs the drugs- sends to the nursing station- received by the patient. Also learned about their inventory management. ○ General store: Learned about procurement, maintaining the stock and its distribution to other departments. ○ Dietetics: Observed dietician rounds, ticket generation and meal planning according to patient requirements. ○ Food & Beverages: Observed how patient's meals are prepared according to the tickets sent by dietician, how the meals are scheduled and delivered to the patients at the right time while following the protocols. ○ Security: Understood hospital security system. Observed various protocols that security guards should follow. Learned about fire drill practice. ○ Biomedical engineering: Got an insight of engineering aspect of a hospital. learned about maintenance and calibration of medical equipment's. ○ Dialysis: Understood the procedures, patient monitoring and emergency protocols. ○ Housekeeping: Observed cleaning schedules, infection control, and area wise hygiene practices and protocols. Observed coordination of housekeeping with other departments also. ○ TPA: learned about insurance claim processing and discharge process. ○ PCS: learned about various healthcare packages. observed patient coordination, counselling and experience enhancement. ○ Medical records department: Learned about file maintenance, MLC cases, and documentation compliance. Learned about various protocols related to the department.
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	○ Ambulance management: Understood logistics, protocols for dispatch, and coordination for patient movement. ○ Digital Marketing: learned various tools used in hospital branding like google reviews, search engine optimization, implementing visible feedback systems. Brief overview of tele-talk department. ○ Blood bank: Understood the process of blood collection, storage, and distribution, ensuring constant availability. Also learned about the counselling aspect. ○ Projects department-Got to know about the infrastructure development to increase occupancy within the hospital premises and efficient use of space. ○ Engineering department- : Understood about the power supply distribution by UPS specially in critical areas such as ICU, Ots ,Emergency , Cath lab etc. ○ Finance: understood about revenue management in the hospital including billing, patient accounts, budgeting and cost monitoring. ○ Infection control department: Learned about its role in preventing and managing hospital acquired infections. ○ Medical administration department: Gained insight about how the department ensures smooth coordination between clinical and non-clinical aspects of the hospital. ○ IDTR (interdisciplinary teams round): participated in the rounds where HODs visit admitted patients to review their experience and timely resolve any concern raised by them. ● Floor management: visited the nursing station and observed the day-to-day functioning. Coordination of nursing staff with other departments like IPD pharmacy, Housekeeping, dietetics, FandB, billing etc. Observed the patient movement management from admission to discharge. ● Conducted audits
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	○ <u>Ward audit:</u> Audited nursing station. Evaluated display of signages, documentation of checklists, medication management, infection control practices, equipment management. Checked for facility and safety measures, IPSTG, Conducted staff interviews. ○ <u>File audit:</u> ▪ <u>Restraint monitoring audit:</u> Reviewed patient files to check if restraint consent forms and monitoring sheets were timely filled and documented. ▪ <u>Discharge monitoring checklist audit:</u> verified if key parameters were documented properly ensuring that patients received their belongings and proper education about drugs and diet were provided. ○ Evaluation of CPR Running Sheets monthly to know the quality care provided as per the JCI standards. ○ <u>Facility round audit on floors:</u> assessed various elements like signage, emergency exits, fire extinguishers, obstructions, easy access of basic equipment's and hygienic facilities, lightings, counters, eyewash stations etc.
Linking theory (Classroom learning) with practice at your organisation	• Applied knowledge of Organizational Behavior and Essentials of Hospital Service. • Gained knowledge about Utility Services and Supply Chain Management. • Related Financial Management & HRM with hospital functions. • Related concepts of Organization Behavior, Financial Management, Biostatistics. • Understood application of marketing concepts in hospital settings, patient counseling, branding. • Was able to correlate: ○ NABH Guidelines ○ HR capacity building

	○ Patient satisfaction and quality management ○ Hospital information system ○ Disaster management codes ○ Supply chain management (IPD pharmacy) ○ Hospital operation process ○ Resource allocation ○ Medical ethics and legal aspect ○ Strategic management ○ RCA/CAPA ○ Gap analysis
Gaps identified on the working area	● Low Compliance Rate in case of sepsis bundle pathway. ● Incomplete Form Filling in Emergency ● No Accountability During Handover to ICU ● Communication gap between nursing staff. ● No Clear Trigger Point to Start Compliance Monitoring ● Lack of real time feedback system. ● Inconsistencies in maintaining feedback and vital signs documentation. ● Overcrowding in canteen during rush hours. ● Lack of counsellor in Patient Care Services (PCS). ● Coordination issues between clinical and non-clinical terms affected timely service delivery like delayed diet delivery. ● Lack of backup during peak emergency time in ambulance management. ● Occasional backlogs in file digitization in MRD. ● No dedicated patient counsellor in PCS for health packages. ● Delay in pre-authorization and discharge approvals. ● Junior staff unable to answer a few protocols related questions during ward audits. ● In some cases, restraint consent forms and monitoring sheets were partially filled. ● Missing documentation of dietary advice and medication explained to patient/attendant.

Suggestions for improvement	• Revised Unified Sepsis Checklist with Dual Triggers • Introduce Sepsis Form Handover Verification • Regular inter-shift meetings to align with patient care. • Trigger-Based 6-Hour Monitoring Activation • Conducting real-time debriefs after procedures to gather feedback. • Training on Sepsis Identification & Documentation • Monthly Compliance Audit with Feedback • Introduce pre-order or app-based food collection system in canteen. • Provide cross-training to nurses/social workers for basic counselling. • Introduce barcode scanning to speed up document digitization. • Early intimation to the TPA desk about upcoming discharges to help them process paperwork smoothly and in advance. • Acknowledge the importance of complete documentation of forms and monitoring sheets during shift handovers and include it in audit feedback for improvement. • Reinforce the importance of filling the discharge checklist through regular audit feedback.
Key learnings	• Got to know about sepsis fatality and its documented importance to treat patient effectively and overcome the risk of death. • Gained hands-on experience of data collection, organisation and analysis for quality check. • Analysed how patient feedback is gathered and assessed for continuous improvement. • Understood the key importance of various elements like signages, emergency exits, hygiene etc for patient and staff safety. • Learned how to conduct audits and checklist evaluations while following the hospital protocols. • Learned how training, awareness and adherence directly affects the prevention of HAIs. • Understood the importance of timely and accurate documentation. • Gained knowledge of NABH & JCI standards and their implementation in hospitals.

	• Learned about interdepartmental coordination to improve patient care services. • Observed the flow of medical records and documentations in hospital. • Gained confidence in communicating with healthcare professionals, from nurses to department heads. • Understood the impact of outsourced services on hospital's internal operations. • Learned about the inventory management practices in hospital. • Co-related theory learnings with hands-on experience. • Appreciated the holistic view of hospital operations from patient entry to discharge and from clinical to non-clinical care.
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Signature of the Student

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