

SUMMER INTERNSHIP PROGRAM

at

**Department of Medical Education, Rajasthan
MDM Hospital**

From 15/05/2025 to 29/07/2025

A REPORT BY

SAURISH SANJAY GAUTAM

Master of Business Administration in Hospital and Health Management

2024-26

under the Mentorship of

MR. SP CHATTOPADHYAY



Government of Rajasthan

Office of The Superintendent, Mathura Das Mathur Hospital, Jodhpur

Shastri Nagar, Jodhpur- 342001 supdt.mdmh.jdh@rajasthan.gov.in, Ph. no :- 02913438655/56/57

- :S.No.:Gen-1/MDMH/JU/24/ 15908

Dated 29-07-2025

CERTIFICATE

This is to certify that Mr. Saurish Gautam of (batch) of 2024-26, IHMR University, Jaipur has worked with our organization for his/her summer internship from 15th May 2025 to 29th July 2025. The overall performance shown by him/her during the period was good .

Date:-29-7-25

(Dr. Vikas Rajpurohit)

Superintendent

Mathuradas Mathur Hospital, Jodhpur

कम
डॉ. विकास राजपुरोहित
अधीक्षक
मथुरादास मथुरा चिकित्सालय
जोधपुर

IIHMR University Faculty Mentor Approval

This is to certify that Saurish Gautam of academic year 2024-26 **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: 31/07/2025

A handwritten signature in blue ink, appearing to read 'SP Chattopadhyay', is written above the printed name.

MR. SP Chattopadhyay
Assistant Professor



GAP ANALYSIS OF SUPERSPECIALITY BUILDING AT MDM HOSPITAL JODHPUR BASED ON KAYAKALP GUIDELINES



MENTORS:

Mr. SP Chattopadhyay (PROF. AT IIHMR UNIVERSITY, JAIPUR)

DR. VIKAS RAJ PUROHIT

(SUPERINTENDENT AT MDM HOSPITAL)

History and Description

Mathura Das Mathur (MDM) Hospital, Jodhpur largest hospital in the western region. Attached with the government medical college SN Medical college at Jodhpur. Inaugurated in 1979 with capacity of 200 beds, which currently at around 2700 beds. SN Medical college controls budget which headed by a superintendent, who is responsible for the health care services. Currently, 7 Super Speciality department and 12 other department are available. Hospital provide administrative services like, IHMS portal for patient registration and record-keeping and E-Aushadhi system which is an online system capable of having detailed information about availability of drugs. Provide free diagnosis, treatment, and medicine distribution and with various health schemes also like MAA yojana, RGHS, etc.

About Project

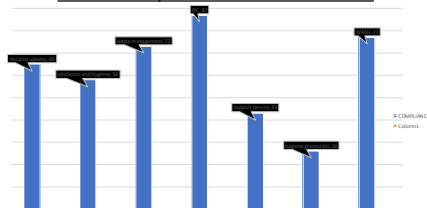
The project focused on conducting a comprehensive gap analysis of the Superspeciality building based on the Kayakalp guidelines, which aim to promote cleanliness, hygiene, and infection control in public health facilities. All thematic areas of Kayakalp were assessed, including hospital upkeep, sanitation and hygiene, infection control, support services, waste management, and behavioral practices. The goal was to identify existing gaps, understand their impact on patient care and service delivery, and provide practical, implementable recommendations to improve the hospital's compliance with quality and cleanliness standards.

Gap Analysis & Key Findings among

A thorough assessment of the hospital's sanitation and hygiene practices was conducted across key areas, including circulation corridors, walls, roofs, and cleaning routines, based on Kayakalp guidelines.

- **Unclean Circulation Areas:** Presence of dust, stains, and cobwebs in certain corridors indicates lapses in routine cleaning.
- **Inadequate Cleaning Frequency:** Corridors are not consistently cleaned twice daily as per the recommended.
- **Poor Visibility of Cleaning Schedules:** Cleaning charts and schedules were either not displayed or not updated regularly.
- **Training Gaps:** Cleaning staff lacked clarity on standard operating procedures (SOPs) for sanitation tasks.
 - Absence of checklist verification by a supervisor or nursing superintendent
 - Lack of awareness staff regarding concentration ratio of disinfectants standards

Marks obtained by each theme in KAYAKALP checklist



Mission:

Provide personalized healthcare that focuses on patient happiness and well-being through optimal, evidence-based medical interventions. To improve patient outcomes through investments in medical technologies. To encourage health education and wellness through active engagement in community outreach and public health programs.

Vision:

To provide comprehensive healthcare services accessible to all. To become a model and global leader in healthcare, and a research center on health.



Practical Exposure vs Theoretical Understanding

- Studied rules like color coded bins, segregation of infectious vs non infectious waste, and guidelines such as BMW (Management & Handling Rules. Where as in reality, observe how waste is actually handled on ground some times bins are missing, misused, shortage, etc.
- In theory we studied importance of SOP but in reality SOP is not visible as well as not compliant
- In theoretical classes we learned about all equipment, and staff available as per the standard guidelines. Whereas in practical we got the opportunity to observe real time situations
- In theory we learned about the hospitals working on quality of services in contrast mdm maintains its basic operational efficiency even with the daily op foot fall of 6000 patients

SWOT ANALYSIS

STRENGTH

- High Quality of care
- Experienced staff
- Trust and reputation
- Technology use- IHMS
- Satisfied patient experience
- Bed capacity

WEAKNESSES

- Communication gaps
- Overburdening of staff leading to decreased efficiency
- Overlapping of roles and duties leading to confusion and delayed progress
- Lack of accountability because of lack of role clarity

OPPORTUNITES

- Opportunity for making it NABH/NQAS compliant
- Can be made KAYAKALP guidelines compliant
- Can be made LAKSHYA guidelines compliant

THREATS

- Lack of quality compliance because of higher footfall
- Fire safety vulnerability
- Poor patient feedback because of complex patient flow.

Major Learning

- How hospital administration work in real scenarios.
- Concepts like queue management, waste segregation and patient satiation in daily takes.
- Learned about schemes like MAA yojana , RGHS etc.
- Worked on digital platforms IHMS portal.
- Learned how to manage with limited resources
- Developed practical solution for problems like overcrowding.
- Observed processes like admission, discharge, patient record, and infection control.

Challenges

- Facing challenge to reduce long waiting time due to large footfall daily in OPD, leading to long waiting time
- Multiple approval need for simple tasks.
- Staff are overburdened, leading to delays in service delivery.
- Many patients are confused about where to go for services, especially in OPD departments.
- Improper segregation of waste because of shortage in color plastic bag.
- Patients are often sent from one unit to another without clear instructions or documentation.

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Acknowledgment

I would like to express my heartfelt gratitude to the management of the **Department of Medical Education, Rajasthan MDM (Mathura Das Mathur), Jodhpur**, for giving me this amazing opportunity for a summer internship in their organization. I want to thank my organization mentor, **Dr Vikas Raj Purohit** sir, and special thanks to the Hospital Care Takers, **Chetan Sharma** sir, **Arun Gelda** sir, and **Kavita** mam for providing me with this opportunity and getting trained at MDM Hospital, without their support & supervision, I wouldn't be able to complete this project. I would also like to thank **IIHMR University & its Placement Cell** for giving me this opportunity & guiding me on the right path. Throughout the internship, I had an immense learning experience in various departments & it would be helpful in my professional career.



Saurish Sanjay Gautam



PRESENTED BY
Saurish Sanjay
Gautam

BAUCU HIM 29
ROLL NO 2072

MR. SP. Chattopadhyay (PROF.)
AT LIIHMR UNIVERSITY,
JAIPUR

DR. VIKAS RAI PUROHIT
(SUPERINTENDENT AT MDM
HOSPITAL)

GAP ANALYSIS OF SUPERSPECIALITY BUILDING AT MDM HOSPITAL JODHPUR BASED ON KAYAKALP GUIDELINES

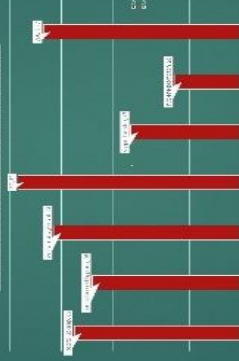
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Gap Analysis & Key Findings

A thorough assessment of the hospital's sanitation and hygiene practices was conducted across key areas, including circulation corridors, wards, rooms, and cleaning routines, based on Kayakalp guidelines.

- Indian Circulation Areas:** Presence of dust, stains, and odors in certain corridors indicates lapses in routine cleaning.
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- Training Gaps:** Cleaning staff lacked clarity on standard operating procedures (SOPs) for sanitation tasks.
- Absence of checklist verification by a supervisor or nursing superintendent.**
- Lack of awareness among staff regarding concentration ratio of disinfectants.**



Marks obtained by each theme in KAYAKALP checklist

History and Description

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Practical Exposure vs Theoretical Understanding

- Studied rules like color coded bins, segregation of infectious vs non infectious waste, and guidelines such as BWV (Management & Handling, Rules. Whereas in reality, observe how waste is actually handled on ground, some times bins are missing, mislabeled, shortage, etc.
- In theory we studied importance of SOP but in reality, SOP is not visible as well as not compliant.
- In theoretical classes we learned about all equipment, and staff available to per the standard guidelines. Whereas in practical we got the opportunity to observe real time situations.
- In theory we learned about the hospital working on quality of services to continue retain maintains its basic operational efficiency even with the daily up and down of 600 patients.

SWOT ANALYSIS

STRENGTH

- High Quality of care
- Experienced staff
- Trust and reputation
- Technology used: HIMMS
- Satisfied patient experience
- Good capacity

WEAKNESSES

- Communication gaps
- Overloading of staff leading to decreased efficiency
- Overloading of rooms and duties leading to confusion and delayed progress
- Lack of accountability because of lack of role clarity

OPPORTUNITIES

- Opportunity for making it NABH/NAS compliant
- Can be made KAYAKALP guidelines compliant
- Can be made LAKSHYA guidelines compliant

THREATS

- Lack of quality compliance because of higher financial
- Financially unsustainability
- Poor patient feedback, because of complex patient flow.

Major Learning

- How hospital administration work in real scenarios
- Concepts like queue management, waste segregation and patient satisfaction in daily takes.
- Learned about schemes like MAA yojana, RGHS etc.
- Worked on digital platforms, HIMMS portal.
- Learned how to manage with limited resources
- Developed practical solution for problems like overcrowding
- Observed processes like admission, discharge, patient review, and infection control.

Challenges

- Facing challenge to reduce long waiting time due to large footfall daily in OPD, leading to long waiting time
- Multiple approval need for simple tasks.
- Staff are over-extended, leading to delays in service delivery.
- Many patients are confused about where to go for services, especially in OPD departments.
- Inadequate segregation of waste because of shortage in color plastic bag.
- Patients are often sent from one unit to another without clear instructions or documentation.

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: OPD

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 01

From: 15th MAY 2025 to 17th MAY 2025

Activity Done	• Real time observation of the average waiting time for OPD (General medicine, Cardiology, Pediatrics, General Surgery) • Observed the average waiting time of a patient using MRI, CT, X- ray, USG • Collected April month data regarding claims submitted in the MAA yojana as percentage of IPD registration and claim rejection submitted by department • Eligible RGHS beneficiary coming from OPD/IPD • Percentage of bed occupancy of a department in a hospital
Linking theory (Classroom learning) with practice at your organization	• Hospital services module helped observe the hospital and its various departments in terms of location, site and accessibility
Gaps identified in the working area.	• Lack of record that supports calculation of waiting period, because of this real time observation of waiting period was done • Lack of smooth patient flow • Proper sign boards not available in OPD, patients face problems after registration
Suggestions for improvement	• Improve patient flow • Use of signs and boards
Plan for the next week	• Ongoing project



Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

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

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 02

From: 19th MAY 2025 to 24th MAY 2025

Activity Done	- Presented a presentation in front of the Superintendent and Deputy Superintendent of Hospital regarding the Proposal for Improving workflow in Cardiology OPD. - Collected waiting time for dispensing of medicines. (around 5 DDC observed). - Observation of neurology OPD
Linking theory (Classroom learning) with practice at your organization	- Applied principles of management by presenting a proposal for streamlining patient flow. - Used data collection and research methodology skills learned in class to observe and document workflows systematically
Gaps identified in the working area.	- Absence of smooth patient flow led to bottleneck formation in the OPD area - Common waiting room for new as well as follow up patients
Suggestions for improvement	- Make segregation of waiting line for both follow up as well as new patients. - Increase the number of windows in drug distribution center to avoid overcrowding
Plan for the next week	Analyzing gaps in other departments like neurology department

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

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

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 03

From: 26th MAY 2025 to 31th MAY 2025

Activity Done	• Visit of Cardio OPD, Ward (Stuffing, Nurses patient ratio, number of beds). • Visit the regional cancer institute. • Visit the mental ward as part of the PWD inspection. • Coordinating with hospital staff for state government inspection.
Linking theory (Classroom learning) with practice at your organization	• Checking on the understaffing of various departments in terms of public utilities.
Gaps identified in the working area.	• Cardio OPD, Ward understaffed • Segregation in BMW guidelines is not up to the mark. • Neurology OPD has only 3 days which results in large footfall in OPD.
Suggestions for improvement	• Recruitment of Staff. • Availability of different color bags for segregation for BMW. • Increase no of days for neurology OPD.
Plan for the next week	• To check the functioning of public utilities in OPD and track feedback from staff and patient to improve the functioning



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Reporting Format (Weekly)

Name of the Organization: MDM Hospital, Jodhpur

Area/ Department/ Project of Summer Internship Program: Janana Wing Waste Management System

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: Hospital and Health Management

Week no: 04

From: 02/06/2025 to 07/06/2025

Activity Done	• Learning how BMW rules are implemented in the hospital • Follow up in Janana Wing of hospital for PWD work • Learning how IHMS portal in hospital works
Linking theory (Classroom learning) with practice at your organization	• Waste Management- Operations & Regulatory Compliance • Janana Wing Follow-up- PRM, MCH, Healthcare Marketing • IHMS Implementation- Health Informatics, Digital Healthcare
Gaps identified on the working area.	• Shortage of specific-colored bags used for BMW leading to mixing up of waste • IHMS portal yet to be implemented fully
Suggestions for improvement	• Set up help desk at hospital entrance or OPD registration area with trained staff or volunteers to guide patients through online registration and scanning process. • Create and play short explainer videos in waiting areas showing how to scan and register using the IHMS portal. • Train front-desk and OPD staff to inform and guide patients, especially elderly or first-time visitors, about the online process.
Plan for the next week	• Will be observing various other departments or issues and coming up with prospective solutions



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Reporting Format (Weekly)

Name of the Organisation: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: IPD

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 05

From: 9th June 2025 to 14th June 2025

Activity Done	• Observed and prepared a presentation regarding laundry and the Linen Store. • Collected Claims submitted in the MMA Yojana as a percentage of IPD registration daily.
Linking theory (Classroom learning) with practice at your organization	• The hospital visit organized by our college helped me to work in a government hospital at a basic level. • Checking on the understaffing of various departments in terms of public utilities. • Organization communication classes help individuals understand and communicate effectively to address problems.
Gaps identified in the working area.	• There is no proper infrastructure for the Laundry and Linen store. • Lack of coordination between various departments • Understaffing in laundry
Suggestions for improvement	• To solve this problem, construct the proper storage area for laundry premises • Staffing levels to be improved
Plan for the next week	• Beginning with gap analysis and comparing it with KAYAKALP guidelines



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Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: IPD

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 06

From: 16th June to 21st June 2025

Activity Done	• Done on site observation and review of cleaning logs and schedules for gap analysis of sanitation while comparing it with KAYAKALP
Linking theory (Classroom learning) with practice at your organization	• Sanitation Realtime status to be seen and compared it to what is standard • Using communication skills with the ground staff by asking them the right question
Gaps identified in the working area.	• Daily schedule is not displayed • No regular audits by supervisor • Lack of training and awareness among cleaning staff
Suggestions for improvement	• Root cause analysis has to be done by on site observation and staff interview and then coming up with actions to fill the gap between real time status and KAYAKALP guidelines
Plan for the next week	• Root cause analysis of the gap • Coming up with prospective solutions



Signature of the student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: Hospital Old building

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 07

From: 23rd June to 28th June 2025

Activity Done	• Collected Information of Electrical and Civil work in old building of hospital. • Made a list of helpers present at each department. • Night round of hospital to check the presence of staff in wards and other critical areas like OT, Labor room
Linking theory (Classroom learning) with practice at your organization	• Applied Behavior change communication, classroom learning about how to communicate with the people.
Gaps identified in the working area.	• Absence of staff in some critical areas
Suggestions for improvement	• Improve the staffing level • To monitor the allocation of departments by the tender company to the helper as it is a PPP model in which Helper as human resource is made available by a private company and check the number of personnel allocated and make the attendance system digitized
Plan for the next week	• To make an excel file over civil and electrical issues of various departments



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Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: Super Specialty Block

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 08

From: 30th June 2025 to 05th July 2025

Activity Done	• Checking the staffing levels of various dept of a particular building • Staff interview for Gap analysis project • Preparation of presentation for staff training and awareness
Linking theory (Classroom learning) with practice at your organization	• All the procedures were compared in the light of standard procedures
Gaps identified in the working area.	• At some place staffing is not optimum • Absence of checklist and checklist verification in case of cleaning schedule
Suggestions for improvement	• Improve the staffing level • Implement checklist verification and monitoring by supervisor or nursing superintendent
Plan for the next week	• Observe the OT and compare it with standard OT practices

Saurish Gautam

**Signature of the Student
Mentor**

Approved by the IIHMR University's

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: Surgical OPD and RMRS

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 9

From: 07th July 2025 to 12th July 2025

Activity Done	• Observation of surgical OPD in terms of infection prevention and control • Visit of RMRS (Rajasthan medical relief society)
Linking theory (Classroom learning) with practice at your organization	• Comparing the infection control standard to present scenario
Gaps identified in the working area.	• Delayed approvals by RMRS • Absence of prioritization for release of funds • Surgery OPD minor OT light rusted • Sterilized equipments were kept open
Suggestions for improvement	• Following checklist for infection control in critical areas like OT, MOT, surgical OPD
Plan for the next week	• Poster and report preparation of gap analysis project

Saurish Sanjay Gautam

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organization: Department of Medical Education, Rajasthan (MDM Hospital, Jodhpur)

Area/ Department/ Project of Summer Internship Program: Surgical OPD and RMRS

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072

Stream: HM

Week no: 10

From: 14th July 2025 to 19th July 2025

Activity Done	• Visited main operating theatre • Preparation of college poster and report
Linking theory (Classroom learning) with practice at your organization	• Studied importance of zoning in OT and observed lack of clear zoning
Gaps identified in the working area.	• Lack of knowledge of correct dilution of disinfectants • No frequent cleaning of high touch areas • Spoiled laundry often mishandled
Suggestions for improvement	• Proper zoning should be implemented • Improve coordination with Utility service like laundry
Plan for the next week	N/A

Signature of the Student

Approved by the IIHMR University's Mentor

Compiled Reporting Format

Name of the Organization: Department of Medical Education, Rajasthan MDM Hospital.

Area/ Department/ Project of Summer Internship program:

Name of the Student: Saurish Sanjay Gautam

Roll no: 2072 **Stream:** HM

Week no: complete 10 weeks

Date: 15th May 2025 to 29th July 2025

Activity Done	• Activity 1: OPD Observation and Analysis a) Waiting Time Study in OPD: observed and visited various Outpatient Department including General Medicine, Cardiology, Pediatrics, General Surgery. Measured the average waiting time of patients from registration till consultation. Observed patient flow patterns, busy hours, availability of staff and reasons for delay. b) Cardiology OPD workflow Study: undertook a detailed analysis of Cardiology OPD. Found problems such as overcrowding mostly on (Monday, Wednesday, Friday). To manage the crowd, they are already following the token system in the waiting area to reduce the patient waiting time. I recommend that if nurses check vitals during waiting time it will reduce burden on doctors. • Activity 2: Radiology Department Observation: Measured average waiting time for diagnostic procedures like: MRI, CT scan, X-Ray, and Ultrasound. • Activity 3: Government Scheme Data a) MAA Yojana Claim Data (April): Gathered monthly data for calculating claims under MAA Yojana as percentage of total IPD admissions. Processed claim rejections department wise to determine reasons (document issue, eligibility mismatch). b) RGHS Beneficiary Tracking (April): Monitored number of eligible RGHS patients utilizing OPD/IPD services. • Activity 4: IPD Performance Analysis a) Ward Observation- Cardiology:
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	Observed total beds, number of nurses on duty per shift, and patient flow. Verified staff to patient ratio, trolley availability, and hygiene conditions. • Activity 5: Pharmacy Services- DDC Study: Observed dispensing time of medicine at five drug distribution counters. • Activity 6: Facility Visits and Department Observations a) Regional Cancer Institute visit learned about cancer care workflows, OPD, chemotherapy unit, and patient counseling services. b) Mental Health Ward visit: visited with PWD inspection and observed, infrastructure conditions, presence of psychiatrists, beds and attendants. And also, patient records and treatment history. c) Old building daily follow Up: observed infrastructure condition, condition of maternal ward beds, maintenance of cleanliness and postpartum care practices. • Activity 7: Civil and Electrical work survey: report on electrical faults, broken fittings, and insufficient lighting in older structures. Civil problems like leakage, cracked tiles, and proper functional problems in toilets. • Activity 8: Staff and Helper Mapping: made a department wise list of helpers posted in various areas of the hospital. Helped to prepare a duty roster to ensure smooth workflow. • Activity 9: Waste Management Practices: Learned and observed biomedical waste segregation: verified proper positioning of color-coded bins (yellow, red, blue, black). Verified the process with BMW Rules 2016. • Activity 10: Laundry and Linen Management: gathered information regarding laundry department operations (washing, ironing, drying, distribution, and collection). Determined delay in linen supplies and torn or old bed sheets. • Activity 11: Digital Platform (IHMS Portal and E-Aushadhi): worked on the Integrated Health Management System (IHMS) for IPD patients' entry, diagnostics upload, admission/discharge processing, billing, and insurance claim generation. • Activity 12: Gap analysis in superspeciality
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	and comparing it with KAYAKALP guidelines covering all 6 themes • Activity 13: Government Inspection Coordination: helped coordinate documentation and departmental readiness for state government inspection. • Activity 14: Surgical OPD Observation-with respect to infection, prevention and control • Activity 15: Main OT observation with respect to infection, prevention and control
Linking theory (Classroom learning) with practice at your organization	1. Principal of Management: • Proposed and submitted workflow improvement proposals (e.g. Cardiology OPD, Linen Management). (Planning & organizing) • Maintained nurse patient ratios, staff allocation, and assisted in compiling lists of helpers and support staff. (Staffing) • Recommended pharmacy wait time improvement, waste reduction and digital workflows. (Decision-Making) 2. Organizational Behavior: • Witnessed teamwork between medical and administrative staff. (Team dynamics) • Noticed motivation levels, particularly among support staff, valued leadership, and appreciation. (motivation & work culture) 3. Business Communication: • Prepared and presented several reports and proposals to hospital officials. (Professional Presentations) • Coordinated department wise (cardiology, pharmacy, wards, etc.) for collecting data and inspection preparation. (Interdepartmental Communication) • Recorded daily data on patient satisfaction, maintenance, and inspection checklists. (written communication) • I interacted with floor managers, nurses, assistants and patients to receive feedback. (Verbal communication) 4. Health Program • Attained comprehensive knowledge of MAA Yojana, RGHS and their contribution to IPD/OPD services. (knowledge of Government Schemes) • Monitored scheme-based claim submissions, rejections, and usage

	patterns. (Program Monitoring) 5. Health Policy: • Seen practical implementation of policies such as BMW Rules 2016, Kayakalp guidelines, and IHMS portal. (Policy Implementation) • Saw how schemes such as RGHS and MAA Yojana align to achieve Universal Health Coverage (UHC). (Scheme Alignment with National Goals) • Sensed on ground challenges in the processing of claim, lack of staff, and infrastructure shortfalls impacting effective policy implementation. (Policy Gaps and Challenges)
Suggestions for improvement	1. OPD Workflow Management: • Implement a Token based Queue System: (currently applied only in the Cardiology department), the use of a digital token system at the OPD registration desks can minimize congestion and add order to the flow of patients. 2. Human Resource & Workforce Management: • Ensure proper nurse to patient ratio. • Adopt a duty roster system for nurses and support staff that is digital, which will ensure equitable workloads and minimize miscommunication. 3. Infrastructure and Facility Upkeep: • Provide all wards with some basic infrastructure such as clean drinking water, hand sanitizers, etc. • Leaking taps, chipped tiles, inadequate illumination and broken toilets are to be given immediate attention. • Implement a centralized mobile-based complaint registration system with staff able to log complaints and monitor the status of resolution. 4. Patient Satisfaction and Feedback System: • Install digital feedback mechanisms at the station or QR code-based system close to ward and OPDs where patient or their family members can offer real time feedback about services. • Create a feedback review committee to review patient feedback weekly and allocate action points to the concerned department. 5. Coordination and Communication: • Implement regular inter department meetings (weekly) to address issues, exchange feedback, and work together to improve

	patient care. 6. Implement Robotic Surgery system at the operational level. This will not only improve surgical outcome and efficiency but also strengthen the hospital's positioning as a modern, patient-centric and technology driven institution.
Key learning	• During the internship I understood how public healthcare delivery works. Exposure to government health schemes like MAA yojana, RGHS, etc. • Learn how to manage with limited resources (manpower). • Gain insights into the hospital departments (OPD, IPD, Emergency, OT, Pharmacy, etc.) • Administrative practices (duty rosters, storekeeping, equipment maintenance) • Understood patient registration, file maintenance, IHMS portal. • Patient inflow, discharge process, and Feedback system. • Gained valuable insights into advanced technology, Robotic Surgery.

About Project

Project Title:

Comprehensive Gap Analysis of Super-Speciality Building in MDM Hospital Based on Kayakalp Guidelines

Introduction

The project aimed to assess the compliance of the **Super-Speciality Building, MDM Hospital, Jodhpur** with the **Kayakalp guidelines**, which emphasize cleanliness, sanitation, infection control, and patient-friendly infrastructure in public healthcare facilities.

The assessment was based on the official **Kayakalp checklist**, covering **six thematic areas**, and aimed to identify gaps, prioritize interventions, and suggest feasible improvements. Additionally, a **cleanliness and sanitation awareness program** was conducted for the cleaning staff to address behavioural gaps.

Objectives

1. To evaluate the Super-Speciality Building across **all six Kayakalp thematic areas**.
 2. To identify non-compliant areas through a **systematic gap analysis**.
 3. To recommend targeted interventions for improving overall quality of care.
 4. To conduct an **awareness session for cleaning staff** to enhance infection prevention and sanitation practices.
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Methodology

- **Tool Used:** The **Kayakalp checklist**, divided into six themes:
 1. **Hospital Upkeep**
 2. **Sanitation & Hygiene**
 3. **Infection Control**
 4. **Support Services**
 5. **Waste Management**
 6. **Hygiene Promotion**
- **Data Collection:** Direct observation, staff interviews, and document verification.
- **Scoring:** Scores were entered in the Kayakalp format to determine compliance levels.
- **Gap Identification:** Scores below full compliance highlighted areas needing improvement.
- **Awareness Session:** A presentation was conducted for cleaning staff focusing on standard cleaning protocols.

Key Findings (Theme-wise Gap Analysis)

1. Hospital Upkeep

- Paint peeling and damaged wall corners in some patient areas.
- Plumbing maintenance and electrical fixture repairs were irregular.

2. Sanitation & Hygiene

- Cleaning staff lacked knowledge of **correct disinfectant dilution**.
- Inconsistent cleaning schedules in low-traffic areas.
- NO use of checklist by cleaning staff
- Absence of Checklist verification

3. Infection Control

- **Hand hygiene stations** were inadequate in some patient care zones.
- Limited display of **handwashing and cough etiquette posters**.

4. Support Services

- Partial compliance in **linen management**; separation of clean and soiled linen was not always maintained.
- Lack of coordination between Hospital critical areas and laundry department

5. Waste Management

- Occasional improper segregation of biomedical waste; yellow and red category waste mixed in some areas.
- Lack of proper monitoring of waste bins.
- Mostly the bins were left uncovered
- Absence of colour coded bags

6. Hygiene Promotion

- IEC (Information, Education, and Communication) materials for patients and visitors were minimal.
 - No dedicated patient-awareness activities on hygiene were conducted.
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Interventions Suggested

- Regular **preventive maintenance schedule** for infrastructure.
 - Staff training on **standard cleaning protocols and disinfectant preparation**.
 - Increasing **hand hygiene facilities** and IEC materials across all patient care areas.
 - Strengthening monitoring of **biomedical waste segregation**.
 - Introducing **patient-awareness activities** for hygiene promotion.
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Cleanliness and Sanitation Awareness Program

A training session was conducted for cleaning staff, focusing on:

- Correct **dilution of cleaning and disinfectant solutions**.
- Use of **personal protective equipment (PPE)**.
- **Biomedical waste segregation** as per colour coding.
- Importance of staff training and awareness
- Implementation of cleaning activities with the help of checklist and monitoring should also be done by Nursing Superintendent

The session used a **presentation** to ensure better understanding.

Conclusion

The gap analysis revealed that while the Super-Speciality Building had achieved moderate compliance with Kayakalp standards, there were significant gaps in **infection control, waste management, and hygiene promotion**. Addressing these gaps through targeted interventions like checklist cleaning and monitoring and continuous staff training will help the hospital achieve higher scores in future Kayakalp assessments and enhance patient safety and satisfaction.