

SUMMER INTERNSHIP PROGRAM

at

SHALBY HOSPITALS, SG UNIT, AHMEDABAD

From 16th MAY 2025 to 19th JULY, 2025

A REPORT BY

SACHANIA SHAIL VIVEKBHAI

Master of Business Administration

(Hospital and Health Management)

Roll no. – **2064**

2024-26

under the Mentorship of

Dr. Anupam Mehrotra

Assistant professor



INTERNSHIP COMPLETION CERTIFICATE

Ref. No: SHACD/IN202S/484

Date: 25.07.2025

Dr. Shail sachania Student of IIHMR University has successfully completed his Internship Program in "Clinical Operation Department" at Shalby Hospitals, Ahmedabad from 16.05.2025 to 16.07.2025.

He was sincere, dedicated and punctual during his training period.

For Shalby Academy



Babu Thmas
Chief Human Resources Officer

SHALBY LIMITED

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IIHMR University Faculty Mentor Approval

This is to certify that SACHANIA SHAIL VIVEKBHAI 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: 29/07/2025

A handwritten signature in black ink, appearing to read 'Anupam'.

Dr. Anupam Mehrotra
Assistant Professor

MEDICAL HANDOVER REPORT AT SHALBY HOSPITALS,SG UNIT,AHMEDABAD

BY SHAIL SACHANIA 2064 MBA

HM 29

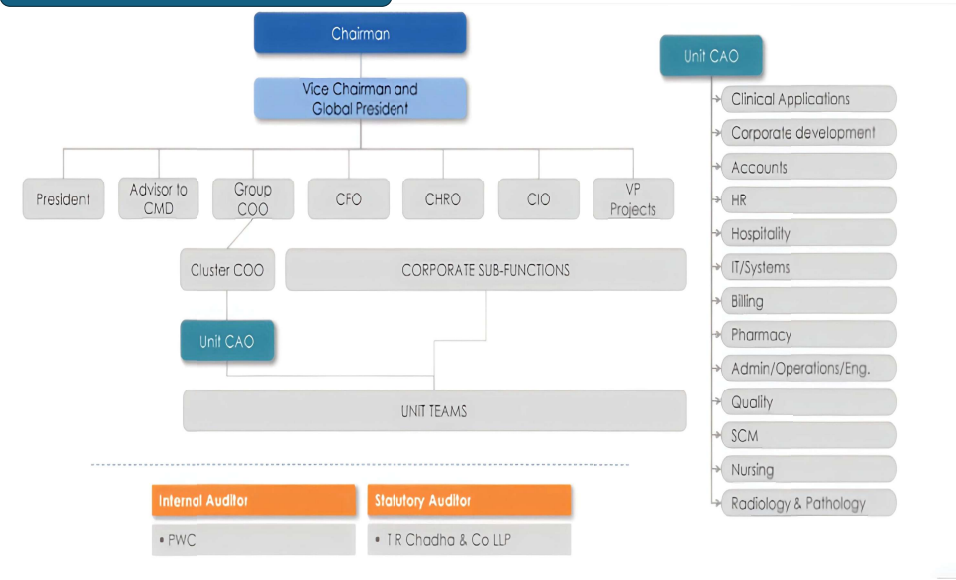
SHALBY
MULTI-SPECIALTY
HOSPITALS

LIHMR UNIVERSITY

BRIEF HISTORY OF SHALBY HOSPITALS

- Founded in 1994 by Dr. Vikram Shah in Ahmedabad, Shalby Hospitals began as a six-bed joint replacement center, pioneering the "Zero Technique" for faster Total Knee Replacement surgeries.
- Expanded into a multispecialty chain, growing from a 200-bed hospital in 2007 to 16 hospitals with over 2,350 beds across 13 Indian cities, offering over 40 medical disciplines.
- Global leader in joint replacements, having performed over 145,000 surgeries, with international OPDs in Africa and UAE

ORGANOGRAM



VISION

"Exceeding expectations from health with high-quality, innovative, and affordable solutions enhancing well-being."

MISSION

"Leveraging global leadership in Joint replacement to establish multi-specialty care across geographies."

KEY INFO ABOUT SHALBY HOSPITALS

- Shalby operates total 4 hospitals in Ahmedabad, with the SG unit having a bed capacity of 250.
- Has conducted over 14,000 joint replacement annually and has conducted over 1,45,000 joint replacements in the last 30 years
- Pioneers of the **Zero technique** for minimally invasive knee replacements which dramatically reduces surgery time to 10~12 mins per procedure

Values



Strengths

- State of art orthopedics and dental care unit.
- Strong regional presence and infrastructure.
- Patient centric approach

Weaknesses

- Orthopedic dependency of the hospital as other specialties are not recognized
- Geographical concentration mainly in central and western regions in India
- Operational costs

Opportunities

- Expansion of medical services
- Technological advancements and further improvement in hospital information services

Threats

- Rising competition by other local hospitals like zydus, apollo, CIMS.
- Lack of staff satisfaction

CHALLENGES

- Timely availability of staff and mentors
- Getting accustomed to the hospital and the people
- Managing multiple responsibilities like audit rounds, meetings with staffs
- Miscommunication risks when dealing with staff and patients in the same environment.
- Inconsistencies faced when handling handover reports.
- Inconsistent data handling in radiology critical value, redoes and correlation data
- Occurrence of a cases where staff member misplaced patient radiology reports
- Long wait times for radiology reports during rush hours.

LEARNINGS DURING INTERNSHIP

- Importance of having a positive attitude in a hospital which are a zone of negative emotions
- Learning of practical based approach
- Interpersonal communication and professional development
- Understanding how to communicate a problem appropriately to the medical officers and nursing staff
- Learned about SOPs of hospital, NABH accreditation, mock drills and handling of stroke patients
- Attended many meeting of staff like nursing, Doctor's meeting: learned that how the staff conveys their problems to the administrative staff and the management.
- Learned about patient safety codes and attended & assisted in mock drills organized by the hospital.

RESULTS AND CONCLUSION

- After the auditing process was done, we were told to hold a short meeting of the staff for more organized and structured way of handling medical handover sheets
- The compliance rate of the first round of audits was found to be 64% before the intervention
 - After the intervention the compliance rate significantly improved to 80%

AIM & OBJECTIVE OF THE STUDY

- The objective of the audit was aimed to study and assess the accuracy, completeness and the compliance level of Medical Officers[MO] handover documentation in a real-world scenario.
- To assess whether the MO handover sheet includes all the necessary information.
- To recommend improvements for handover structure, format standardization and compliance monitoring.

DESIGN & METHODOLOGY

- Study type- Cross sectional study
- Methodology- Quantitative
- Sampling method- Convenience sampling method
- Data collection- Audits done only on medical patients admitted to the hospital during 16th June to 10th July
- Study period- 16th June- 10th July
- Sample size- Pre training:- 58 patients
Post training- 53 patients
- Data collection tools- Customized sampling design and audit checklist, analyzed on excel.

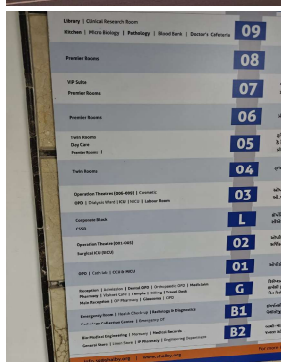
Theoretical and practical learning

- Applied theoretical knowledge of healthcare operations and other fundamental concepts and principles related to the function of the hospital
- Another practical exposure was involved in physical audits, identifying what the bottlenecks are in a real-world scenario
- The experience during audit preparation and various mock drills helped to highlight the various practical challenges of implementing theoretical knowledge.

SUGGESTIONS

- To streamline the handover process by taking appropriate measure like training, structured framework, routine audits,
- Routine data entry should be done in radiology to streamline the process
- Improvement in staff training across all the departments
- Increase patient education
- Staff feedbacks and complaints should be resolved in a timely manner,

Core parameters	Pre training compliance	Post training compliance
Descriptive details	72%	89%
Handover sign	60%	76%
Cross reference	71%	83%
Vital documentation	72%	85%
Handover status	78%	84%



Faculty Mentor:- Dr. Anupam Mehrotra
Organization Mentor:- Dr. Palak Dave

Weekly Report – 1

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no: 1 From: 16/05/2025 to 17/05/2025

Activity Done	• Documentation & Orientation session was conducted on first day by Quality and HR department. • Had a tour of SHALBY HOSPITALS along with detailed overview of some departments like CSSD & Emergency and all the floors of the hospital. • Meeting with Dr.Nirali Shah (Assistant manager of quality department), she had a brief session regarding SIP process followed by project discussion. • Also had a meeting with Dr Ekta shara (Head of quality department) who briefed about hospital operations of various departments. • Had a brainstorming session about the selection of topic of SIP. • Visited OPD & Obs and Gynae Dept and also the billing and TPA dept, met with senior personnel of the same dept. • Presented the overview of topic selected for SIP to • Visited ER Module and had a briefing about ER operations by Senior Manager Emergency he explained certain protocols about the safety and risk management that are followed in ER • Had an opportunity with Dr ekta maam where she explained in brief about the SOPs of the hospital which are currently followed.
Linking theory (Classroom learning) with practice at your organisation	• Utilised knowledge of Organisational Behaviour, Human Resource Management & organisation structure theories to analyse departmental functioning. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations and quality department of Shalby hospitals. • Read about the NABH protocols.
Gaps identified on the working area.	• Observed inconsistency in area some SOPs of the hospital and cleared some doubts with Dr Nirali maam
Suggestions for improvement	• Gave some suggestions about how certain SOPs can be modified according to the needs of the hospital

Plan for the next week	• Go through the current SOPs of the hospital • To also observe the remaining dept of the hospital
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Weekly Report – 2

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Sachania shail vivekbhai

Roll no: 2064 Stream: HM 29

Week no: 2 From: 19/05/2025 to 24/05/2025

Activity Done	• I reviewed the policies and SOPs of the hospital, in relation to the ongoing audits conducted in the quality department • I reviewed hospital policies on AAC chapter where I reviewed the documents relating to the hospital policy, system documentation and certain work instructions forms. • Had a meeting with Dr ekta maam where she explained and cleared some doubts regarding the AAC chapter of NABH • Attended a nursing meeting where the nursing staff conveyed their complaints to the quality department
Linking theory (Classroom learning) with practice at your organisation	• Gained Knowledge about hospital SOPs • Related concepts of quality department of the hospital • Applied concepts of “Essentials of Hospital Service”
Gaps identified on the working area.	• Oversaw some inconsistencies regarding SOPs of the hospital • Some info from the nursing chart were not implemented or ignored due to the rush hours.
Suggestions for improvement	• Through revaluation of some hospital SOPs • Feedback system of the medical staff should be improved, and better protocols should be implemented
Plan for the next week	• Work on the SIP topic assigned & cover the remaining dept. to understand their working. • To cover the COP chapter of the NABH standards and compare them to existing SOPs of the hospital.

Weekly Report – 3

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:3 From: 26/05/2025 to 31/05/2025

Activity Done	• Understood the COPs chapter of NABH standard with dr Nirali maam where she explained current policies the hospital. • Understood the difference between 5th and 6th edition of the NABH standards, where I understood what SOPs needed to be changed, what should be added and whether certain policies should be reviewed further. • Gained knowledge of how a policy is created from the scratch, what information is required, met with other staff to implement the changes. • Understood the nursing clinical chart and the MEWs (Modified early warning system) and management • Attended a doctors meeting where they conveyed their problems to the administration • Attend a mock drill for stroke protocol
Linking theory (Classroom learning) with practice at your organisation	• Gained Knowledge about hospital SOPs • Related concepts of quality department of the hospital • Applied concepts of “Essentials of Hospital Service” • Gained knowledge of how MEWs scale is implemented in the wards
Gaps identified on the working area.	• Oversaw some inconsistencies regarding SOPs of the hospital • Some info from the nursing chart were not implemented or ignored due to the rush hours.
Suggestions for improvement	• Through revaluation of some hospital SOPs • The nursing chart should be completed as per the info from the patient and the knowledge of the attending consultant for a more structured and organised way of data entry
Plan for the next week	• Work on the SIP topic assigned & cover the remaining dept. to understand their working.

	• Next week plan is to observe the workflow in the radiology department and have a meeting with the RSO.
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Weekly Report – 4

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:4 From: 02/06/2025 to 07/06/2025

Activity Done	• Was assigned to the radiology department to understand the current workflow • Had a meeting with Mr Manish hatthimare(senior manager in clinical operation, RSO) where he gave me a thorough tour of the radiology and ER department • Met with Dr Nirali shah to review the process of the ongoing COP policies.
Linking theory (Classroom learning) with practice at your organisation	• Related concepts of Organisation behaviour in hospital. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations. • Studied various protocols in radiology about safety and licensing.
Gaps identified on the working area.	• Oversaw some inconsistencies regarding SOPs of the hospital • Observed that some patients had received their radiology reports and blood reports quite late.
Suggestions for improvement	• Through reevaluation of some hospital SOPs according to the NABH 6th edition • The system implemented to receive radiology & blood reports should be standardized through utilizing digital platforms for secure and quick delivery

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Plan for the next week	• Continue to observe functioning and coordination of various departments in hospital. • To observe the workflow in radiology and to gain knowledge about the safety precautions and licensing. • Decide on the final SIP project topic.

Weekly Report – 5

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:5 From: 9/06/2025 to 14/06/2025

Activity Done	• Understood the various safety protocols followed in the radiology department like ALARA principal, TLD BADGE and licensing from AERB regulations • Was given a task to audit critical values, redoes and correlation data in radiology and to check whether data entry is done followed properly. • Meeting with Dr Palak dave maam where we finalized the SIP project on the audit MEDICAL HANDOVER done by Medical Officers (MO) wrt to certain parameters. • Conducted some clinical rounds to understand the discharge TAT and how the patient were allotted rooms/beds and to audit medical handover sheets from the MOs
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Linking theory (Classroom learning) with practice at your organisation	• Gained Knowledge about clinical operations department of the hospital. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations. • Reviewed some journals and papers on medical handover practices
Gaps identified on the working area.	• Safety protocols were sometimes neglected due to rush hours • Had a case where radiology report of a patient went missing due to a fault by the radiology billing staff • Some information in the medical handover sheet were more then often ignored or neglected.
Suggestions for improvement	• Safety protocols like lead aprons, TLD badges and ALARA principal should strictly be followed due to risks associated in radiology for both the patients and the operators • Information in the handover sheet should not neglected
Plan for the next week	• Work on the SIP topic assigned • Planning to have a meeting with dr palak dave maam to establish proper parameters in the audit.

Weekly Report – 6

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064 Stream: HM 29

Week no:6 From: 16/06/2025 to 21/06/2025

Activity Done	• Worked on the medical handover audit by physical rounds on all the floors of the hospital • Met with dr palak dave maam to discuss about the parameters of the audit • I was told to do the physical audit for 2 weeks and collect a sample size of 50-60 patients first and only do audits of live medical patients admitted to the hospital • Observation on clinical side of operations in the hospital
Linking theory (Classroom learning) with practice at your organisation	• Gained Knowledge about clinical operations department of the hospital. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations. • Reviewed some journals and papers on medical handover practices
Gaps identified on the working area.	• Some information in the medical handover sheet were more then often ignored or neglected.
Suggestions for improvement	• Information in the handover sheet should not neglected
Plan for the next week	• Work on the SIP topic assigned & cover the remaining dept. to understand their working.

Weekly Report – 7

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:7 From: 23/06/2025 to 28/06/2025

Activity Done	• Visited MRD Dept. observed to check old patient handover sheets to check whether the handover sheet was filled accurately or not • Worked on the medical handover audit by physical rounds on all the floors of the hospital • Also did audit in radiology for critical values, redoes, correlation data
Linking theory (Classroom learning) with practice at your organisation	• Applied theoretical knowledge for audits • Studied other ongoing audits in the hospital
Gaps identified on the working area.	• Slight improvement in the handover sheets for the patients on 7th floor but there is still some form of ignorance present by the evening/night staff • Digital data entry for critical values, redoes, correlation data are still lagging
Suggestions for improvement	• Verbal communication with the staff regarding handover sheet and in radiology
Plan for the next week	• Work on the SIP topic assigned & cover the remaining dept. to understand their working. • To have a meeting with medical officers to improve the process of medical handover sheets and planning to do a short training with dr. palak maam about the same topic

Weekly Report – 8

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:8 From: 30/06/2025 to 05/07/2025

Activity Done	• Had a meeting with medical officers about the process with handover sheets on each floor • Worked on the medical handover audit by physical rounds on all the floors of the hospital and told them the associated risk related with current practices • Compiled the previous collected data before the intervention and found the compliance rate • Visited the health lounge to see the process of data being collected • Started another round of audits after the intervention to any improvements in the audit
Linking theory (Classroom learning) with practice at your organisation	• Related concepts of Hospital Services in hospital. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations shall by hospitals
Gaps identified on the working area.	• Some information in the medical handover sheet were more than often ignored or neglected.
Suggestions for improvement	• Further training of the staff for better handover practices
Plan for the next week	• Work on the SIP topic assigned & cover the remaining dept. to understand their working. • Too see the compliance rate for after the intervention

Weekly Report – 9

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:9 From: 07/07/2025 to 12/07/2025

Activity Done	• Data analysis of the collected data • Had a meeting with medical officers about the process with handover sheets on each floor • Saw improvement in compliance rate after the intervention
Linking theory (Classroom learning) with practice at your organisation	• Related concepts of Hospital Services in hospital. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations
Gaps identified on the working area.	• Shortage of space in waiting area as per the footfall of the patients • Inconsistencies in documentation in health checkup department
Suggestions for improvement	• Enhance data collection methods and enhance presentation clarity and impact.
Plan for the next week	• Compile the data after the intervention and have a meeting with Dr palak dave maam for feedback

Weekly Report - 10

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

Week no:10 From: 14/07/2025 to 19/07/2025

Activity Done	• Attended a feedback session with dr ekta maam where I got quality insights about a career in hospital industry • Met with dr palak dave maam for feedback on the SIP project • Met with Mr jeetsingh Chavan(Head of HR) to review my journey and asked about any suggestions for improvement • Met with Mrs nidhi (manager in shalby academy) and learned about the what shalby academy does in brief
Linking theory (Classroom learning) with practice at your organisation	• Saw how HR topics like managing staff performance, keeping teams motivated, and clear communication affect how well staff follow rules about documentation and quality. • Understood that hospital systems need strong HR and team coordination to make sure everyone sticks to the quality standards. • Understood the business of shalby academy
Gaps identified on the working area.	• During shift changes from morning to evening there are still some negligence although there is significant improvement after the intervention
Suggestions for improvement	• Start proper shift handovers so nothing gets missed when one team hands over to another.
Plan for the next week	• I will be preparing for my final presentation at college and will organize all the documents I need for my project submission and future use.

Signature of the Student

Approved by the IIHMR University's Mentor

Complied Report

Name of the Organisation: SHALBY HOSPITALS, SG UNIT, AHMEDBAD

Area/ Department/ Project of Summer Internship Program: clinical operations- radiology

Name of the Student: Sachania shail vivekbhai

Roll no: 2064

Stream: HM 29

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	• Gained knowledge of how a policy is created from the scratch, what information is required, met with other staff to implement the changes. • Understood the nursing clinical chart and the MEWs (Modified early warning system) and management • Attended a doctors meeting where they conveyed their problems to the administration • Attend a mock drill for stroke protocol • Was assigned to the radiology department to understand the current workflow • Had a meeting with Mr Manish hatthimare (senior manager in clinical operation, RSO) where he gave me a thorough tour of the radiology and ER department • Met with Dr Nirali Shah to review the process of the ongoing COP policies. • Understood the various safety protocols followed in the radiology department like ALARA principle, TLD BADGE and licensing from AERB regulations • Was given a task to audit critical values, redoes and correlation data in radiology and to check whether data entry is done followed properly. • Meeting with Dr Palak Dave Maam where we finalized the SIP project on the audit MEDICAL HANDOVER done by Medical Officers (MO) wrt to certain parameters. • Conducted clinical rounds to understand the discharge TAT and how the patient were allotted rooms/beds and to audit medical handover sheets from the MOs • Worked on the medical handover audit by physical rounds on all the floors of the hospital • Met with Dr Palak Dave Maam to discuss about the parameters of the audit • I was told to do the physical audit for 2 weeks and collect a sample size of 50-60 patients first and only do audits of live medical patients admitted to the hospital • Observation on clinical side of operations in the hospital • Visited MRD Dept. observed to check old patient handover sheets to check whether the handover sheet was filled accurately or not • Understanding planned and unplanned discharge • Understood the value of data entry in radiology • Data analysis of the collected data
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	• Found out reasons for negligence in data entry in radiology and handover sheets due the increase footfall,limited personnel in the related departments • Data analysis of the collected data
Linking theory (Classroom learning) with practice at your organisation	• Applied knowledge of Organizational Behavior and Essentials of Hospital Service. • Gained knowledge about Utility Services. • Related Financial Management & HRM with hospital functions. • Related concepts of Marketing Management. • Able to correlate: ▪ NABH Guidelines ▪ Hospital planning ▪ HR capacity building ▪ Patient satisfaction and quality management ▪ Hospital information system ▪ Disaster management codes ▪ Supply chain management (IPD pharmacy) ▪ Hospital operation process ▪ Resource allocation ▪ Marketing and branding ▪ Medical ethics and legal aspect ▪ Strategic management ▪ Radiology safety protocols ▪ MEWS ▪ Licensing in radiology ▪ Mock drills
Gaps identified on the working area	• Lack of real time feedback system. • Inconsistencies in maintaining feedback and vital signs documentation. • Overcrowding in canteen during rush hours. • Coordination issues between staff of different issues which significantly elevated the issues in handover sheets • Lack of backup during peak emergency time in ambulance management. • Occasional backlogs in file digitization in radiology • Lack of training and audits for medical officers in handover sheets • Delay in pre-authorization and discharge approvals. • Junior staff unable to answer a few protocols related to handover sheets • Missing documentation of dietary advice and medication explained to patient/attendant. • Correlation data which was one of the parameters in our audit was often missing • Signs of medical officers in the evening were usually limited • Addressograph not attached to some patient files • Lack of space in MRD for organized data

	• Limited storage in morgue (only limited to 2) for a hospital with a capacity of 250 beds it was unusually small • Overcrowding often in OPDs during footfall
Suggestions for improvement	• Implement a digital real-time patient feedback system accessible via QR codes or tablets. • Enforce standardized digital forms with mandatory fields for vital signs and feedback documentation. • Stagger lunch breaks, expand seating capacity, or offer pre-order/delivery options. • Establish clear inter-departmental communication channels and regular coordination meetings. • Develop a robust emergency backup plan with additional on-call drivers/ambulances or external partnerships. • Allocate more resources to MRD for digitization or explore automated scanning solutions. • Streamline the pre-authorization/discharge process with dedicated personnel and digital platforms. • Implement regular protocol training and accessible digital protocol guides for all junior staff. • Implement standardized templates and a dual-verification process to minimize documentation errors. • Mandate a standardized checklist or dedicated section in patient records for handover sheets • Training of medical officers and other staff for handover sheets and nursing charts • Implement a real time feedback system for medical staff for proper communication of problems • Safety protocols like lead aprons, TLD badges and ALARA principal should strictly be followed due to risks associated in radiology for both the patients and the operators • The nursing chart should be completed as per the info from the patient and the knowledge of the attending consultant for a more structured and organised way of data entry • Verbal communication with the staff regarding handover sheet and in radiology • Start proper shift handovers so nothing gets missed when one team hands over to another.
Key Learnings	• 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. • Understood the importance of timely and accurate documentation.

	• 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. • Understood about licenses that are required to operate a hospital successfully •
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Signature of the Student

Approved by the IIHMR University's Mentor