MEDICAL HANDOVER REPORT AT SHALBY HOSPITALS,SG UNIT,AHMEDABAD

BY SHAIL SACHANIA 2064 MBA
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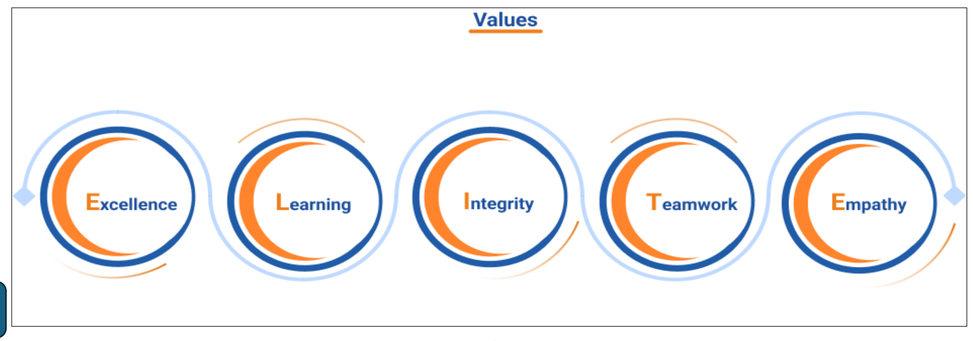
BRIEF HISTORY OF SHALBY HOSPITALS

- 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

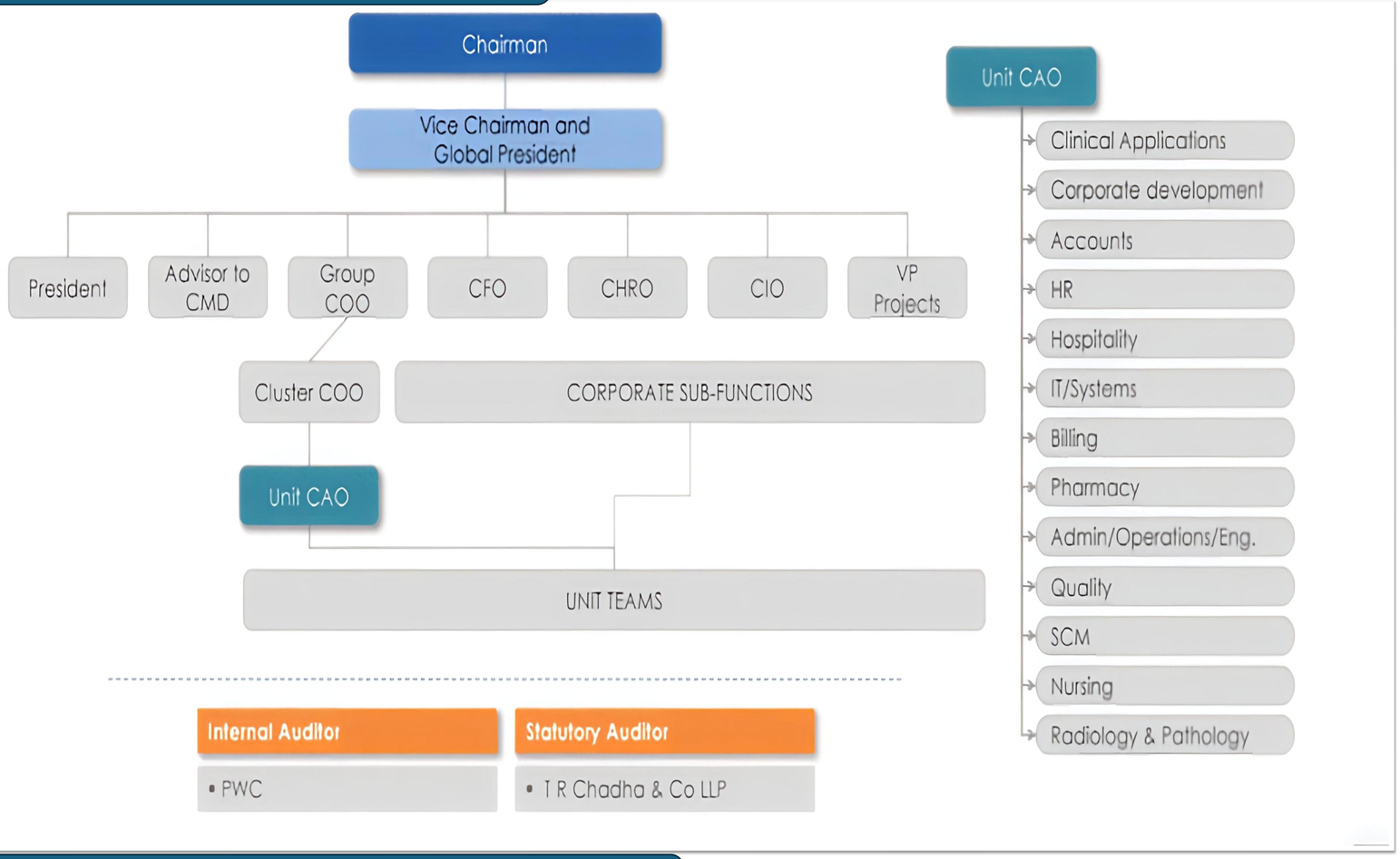
VISION
"Exceeding expectations from health with high-quality, innovative, and affordable solutions enhancing well-being."
MISSION
"Leveraging global leadership in Joint replacement to establish multi-specialty care across geographies."



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

ORGANOGRAM



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.

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.

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%

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

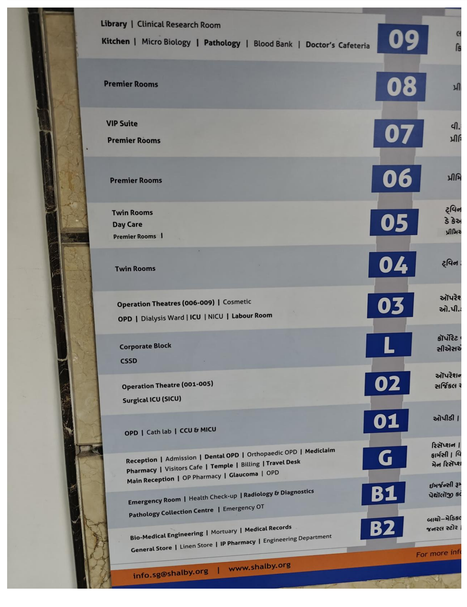
- Applied theoretical knowledge of of healthcare operations and other fundamental concepts and principles related to the function of the hospital
- Another practical exposure was involved in physical audits, identifying what the bottlenecks are in a real-world scenario
- The experience during audit preparation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

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, Docter'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.

SUGGESTIONS

- To streamline the handover process by taking appropriate measure like training, structurized 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,



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%**

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