SUMMER INTERNSHIP PROGRAM

at

MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

From 12th May 2025 to 19th July 2025

A REPORT BY

Jasmeen Kaur

Master of Business Administration

Hospital and Health Management

Roll no: 1966

2024-26

under the Mentorship of

Dr. Arindam Das

Professor

IIHMR UNIVERSITY

Completion Certification from the Organization

CERTIFICATE

This is to certify that **Dr. Jasmeen Kaur** of 2024-26 batch of MBA Hospital and Health Management, IIHMR University Jaipur has worked with our organization for her summer internship from 12th May 2025 to 19th July 2025. The overall performance shown by her during the period was excellent. This certificate is being issued to meet the requirements of the IIHMR University.

Date: 19th July 2025.

(Signature of organization Mentor)

Name: Dr. Ritika Choudhary

Designation: Deputy Manager
(Medical Administration)

Stamp/Seal of Organization

MAX SUPER SPECIALITY HOSPITAL MOHALI (A UNIT OF HOMETRAIL BUILDTECH PVT. LTD.)

Max Super Speciality Hospital, Mohali
(A unit of Hometrail Buildtech Pvt. Ltd.)
Near Civil Hospital, Phase 6, Mohali,
Punjab - 160 055
For medical service queries or appointments,
call: +91 172 521 2000

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(CIN: U4500DL2008PTC176962)

MC-2287
H-2013-0225
May 28, 23 – May 18,27
Since May 28, 2013

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

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

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 25th July 2025

Arindam Das.

(Signature of Faculty Mentor)

Name: Dr. Arindam Das

Designation: Professor

An Evaluation Of Surgical Time Patterns to Improve Operation Theatre Efficiency

University Mentor : Arindam Das ,PhD
Organization Mentor: Dr. Ritika Choudhary

Presented By: Dr. Jasmeen Kaur
Roll No. :1966
MBA(HM)

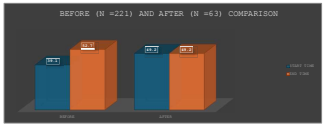


Figure 1

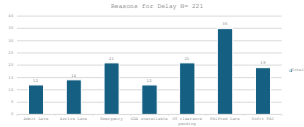


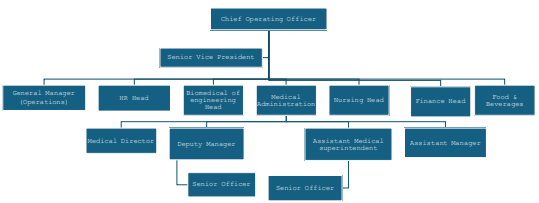
Figure: 2

About Organization

MAX Hospital, Mohali established in 2011
250+ bedded multi specialty and NABH, NABL accredited hospital with over 46 specialties (neurosciences, Cardiac Sciences, Cancer care, Orthopaedics, Obstetrics and Gynaecology among several others.
It is equipped with Medical Intensive Unit (MICU), Surgical Intensive Unit(SICU), Critical care Unit (CCU) and Cath Labs

MISSION AND VISION

TO SERVE:-
With commitment and compassion in the heart, deliver the highest standard of patient- centered care to those they serve.
TO technology and cutting-edge research. (MAX Hospital website
EXCEL:-
To excel from a dream team of doctors and specialties to support staff that goes the extra mile to deliver quality care, excellence in their DNA.
VISION:-
To be the most well-regarded healthcare provided in India committed to the highest standards of clinical excellence and patient care supported by the largest.



AIM

- To study surgery timings and find reasons for delays in the Operation Theatre.

Objectives

- **To identify frequent delay reasons** affecting OT start and end times

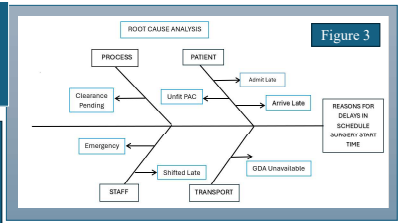


Figure 3

STRENGTH
- 1 Good tracking system for OT start and end times
- 2 Clearly planned surgery schedules in place.
- 3 Some departments perform on time.

WEAKNESS
- 1 Frequent delays in surgery start times.
- 2 Unclear responsibilities cause coordination gaps
- 3 Low compliance with scheduled times

OPPORTUNITIES
- 1 Fix common delay reasons
- 2 Introduce digital reminders for staff and patients
- 3 Train and assign backup support staff

THREATS
- 1 Emergency cases disturb the planned schedule
- 2 Manual coordination increases the risk of errors
- 3 Delayed surgeries affect patient safety and satisfaction.

Methodology

1. **Sample Size :**
   - **Pre Intervention :221 (June 1 to 30 2025)**
   - **Post Intervention :63 (July 1 to 7 2025)**
2. **Design :**
   - **Descriptive, observational study**
3. **Tool :**
   - **Excel-based OT records and surgical logs.**
4. **Data Analysis :**
   - **Descriptive statistics, trend analysis, and graphical representation using MS Excel .**

Aspects	Theoretical	Practical
Hospital Workflow	Operations run smoothly with standardized procedure.	Frequent delays & unplanned disruptions are common.
Compliance & Quality	Guidelines Like NABH are strictly followed.	Partial compliance seen, often emphasized more during audits.
Communication	Clear, structured communication across departments	Miscommunication leads to confusion or inefficiency
Role Clarity	Each staff member works strictly within defined roles.	Staff often multitask due to shortages or emergencies .

Suggestions

- Conduct monthly surprise audits in key departments to check real-time compliance with protocols
- Record Delay Reasons Properly so that each staff should known the impact of delays.

CHALLENGES

- **Some staff members did not involve us actively, treating us more as observers than contributors.**
- **Limited access to real-time data.**
- **Faced communication gaps with clinical staff due to their busy schedules.**

LEARNINGS

- **Understood the real working environment of a multispecialty hospital.**
- **Learned how different departments coordinate for patient care.**
- **Built confidence in handling real healthcare operations and challenges.**
- **Learned the importance of empathy and patient-centered care**

Week -1st Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI(CHANDIGARH)

Department: Operations Department

Name of the Student: JASMEEN KAUR

Roll no:1966 Stream: MBA(HM)

Week no: 1 From: 12th MAY 2025 to 17th MAY 2025

Activity Done	• Mentor- Mentee interaction & Discussion. • Orientation & Observation about all the departments. • Operation Theatre data collection. • Noted that how hospital maintain the patient record & documents.
Linking theory (Classroom learning) with practice at your organisation	• Infection control measures taken in hospital. • Layout of Hospital infrastructure. • Services of Hospital. • Learn the role of OT scheduling and actual time management in hospital operations. • Principle of Cooperation not individualism.
Gaps identified on the working area.	• Long waiting hours. • Lack of proper information& communication. • Lack of proper signage.
Suggestions for improvement	• Proper Training of newly selected employee & Trainee. • Better management & hustle free area in &out EMR department for better circulation area. • Improve coordination & communication between departments. • Increase seating capacity for patients.
Plan for the next week	• Visit Operation Theatre. • Continue with data collection. • Monitor Discharge Process.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -2nd Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI(CHANDIGARH)

Department: Operations Department

Name of the Student: JASMEEN KAUR

Roll no:1966 Stream: MBA(HM)

Week no: 2 From: 19th MAY 2025 to 24th MAY 2025

Activity Done	• Continued with the data collection of operation theatre. • Outpatient department (OPD)and the processing. • Admission of Patients and working procedure. • Third Party Administration (TPA) and the working procedure. • Discharge process processing. • Learn and observed about the proper processing of the Front Office Department collected documents and coordinated with staff.
Linking theory (Classroom learning) with practice at your organisation	• Informed Consent is taken and the patient rights. • Documentation, Admission process and the required formalities. • Importance of patient centred communication. • Essential of Hospital Services. • OPD Management and the insurance management. • Customer handling and the communication skills.
Gaps identified on the working area.	• Long waiting hours at admission desk less manpower and having more burden. • Delay in the bed allotments. • Approval of insurance takes long time, and many queries are raised, and the approvals gets rejected. • At the OPD some patients were confused about the room and the department no., and the staff was not having good coordination among them self. • Patients faced network and charging issue. • Communication gaps.

Suggestions for improvement	• Provide mobile charging stations and ensure stable Wi-Fi connectivity in the common waiting area. • Improve the coordination between nursing, housekeeping, and admission teams so that beds allotted fast. • During the peak hours more manpower should be present at admissions and conduct the token system to avoid the queue efficiently. • Use colour codes and proper signage for the department direction at the OPD entry • For TPA process coordination with doctors should be proper to ensure accurate and timely submissions and to avoid the delay.
Plan for the next week	• Continue with discharge process, management and the working. • Visit Emergency department. • Visit CSSD. • Observe and Working process of CSSD.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -3rd Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI(CHANDIGARH)

Department: Operations Department

Name of the Student: JASMEEN KAUR

Roll no:1966 Stream: MBA(HM)

Week no: 3 From: 26th MAY 2025 to 31st MAY 2025

Activity Done	• Continued with the discharge and the discharge planning • Learned the process of CSSD department • File and details management of patients • Observed the radiology department • Functioning of the PET- CT scan • Observed the processing of blood bank • Observed Operation theatre.
Linking theory (Classroom learning) with practice at your organisation	• Medical record department. • CSSD • Time management for effective treatment • Proper sterilization, zoning of department.
Gaps identified on the working area.	• CSSD the work is not digital and no tracking of no. of wraps used on daily basis. • Long waiting hours for the scanning reports of PET-CT scan. • Issuing and matching of blood takes long time. • In CSSD the receiving of instruments from the operation theatre takes more time.
Suggestions for improvement	• Introduce the digital reporting system where doctors can have access. • Digital record should be maintained consistently train the staff. • Create fix time schedule for receiving and giving for sterilised instruments.

Plan for the next week	• Continue with discharge process, management and the working. • Visit Emergency department. • Visit Daycare. • Process and workflow of Operation theatre.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -4th Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

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

Name of the Student: JASMEEN KAUR

Roll no:1966 **Stream: MBA(HM)**

Week no: 4 **From: 2nd June 2025 to 7th June 2025**

Activity Done	• Continued with the discharge and the discharge planning. • Handover audit done and informed for incomplete notes. • Learned the process of pre-operative and post-operative care. • Worked on the data collection of the project in the operation theatre. • Learn the processing of daycare and the types of consent are taken for surgeries. • Observed and learned the processing of Emergency Department.
Linking theory (Classroom learning) with practice at your organisation	• Consent Management. • WHO surgical check list. • IPSG Goals. • Time management for effective treatment • Proper sterilization, zoning of department.
Gaps identified on the working area.	• Site marking is not done for the surgery. • Long time for bed arrangement for post – operative patients. • OT module is incomplete. • Consent is not taken properly. • No Coordination between daycare and OT staff. • Entrance of Emergency department is crowded by the attendants.

Suggestions for improvement	• Ensure the proper site marking and proper consent is done by consultant and are rechecked. • Train the staff to fill the OT module properly and audit the number of Surgery performed. • Shared the schedule of OT and share platform for proper communication and coordination. • Before the surgery the proper bed allocation should be done. • Area outside the Emergency Department should be made free from attendants to avoid the delay in the admission of Emergency patients.
Plan for the next week	• Continue with discharge process, management and the working. • Continue with project work and data collection in Operation theatre. • Visit Pre Anaesthesia care PAC.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -5th Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department

Name of the Student: JASMEEN KAUR

Roll no:1966 **Stream: MBA(HM)**

Week no: 5 **From: 9th June 2025 to 14th June 2025**

Activity Done	• Continued with the discharge and the discharge planning. • Doctors and nurse handover audit done. • Assisted the Pre- and Post-operative assessment of the patients. • Collected data of the operation theatre of project given by organisation mentor. • Checked the assessment of the vitals of the patients in the Pre anaesthetic Care (PAC) and communicated with the other department. • Learned the proper risk stratification according to the ASA grading according to the Asses of the high risk of the patient. • Audit done of surgical checklist according to foam.
Linking theory (Classroom learning) with practice at your organisation	• Surgical Checklist of WHO • ASA (American Society of Anaesthesiologist. • Linked between the pre and post operative assessment. • OT utilisation to support quality assessment.
Gaps identified on the working area.	• No coordination between the OT staff and the PAC staff. • Long waiting hours for patients in PAC and doctor not available for the assessment. • Delay in surgery according to the scheduled time Vs the actual time. • Long waiting hours for bed allocation for the preoperative patients.

Suggestions for improvement	• Ensure the Patient if there is delay in the surgery so the patient should not wait for long time in the pre-Operative Area. • Preplanning of bed allocation should be there for post-operative patients to avoid the rush of post-operative patients. • PAC doctor should be present according to the duty assigned so that the waiting hour of patients be reduced.
Plan for the next week	• Continue with discharge process, management and the working. • Continue with project work and data collection in Operation theatre. • Visit the Laundry Department and the observe the processing of the department. • Learn and observe the working of MICU &SICU medical and surgical ICU.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -6th Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department

Name of the Student: JASMEEN KAUR

Roll no:1966 **Stream: MBA(HM)**

Week no: 6 **From: 16th June 2025 to 21st June 2025**

Activity Done	• Continued with the discharge and the discharge planning. • Assisted the Pre- and Post-operative assessment of the patients. • Collected data of the operation theatre of project given by organisation mentor. • Visited all the ICU learned the difference and the proper function of the MICU & SICU and noted the multidisciplinary teams in the critical care management and done the audit of all ICU. • Observed and learned the collection, sorting, washing, drying, packaging of linen and infection control.
Linking theory (Classroom learning) with practice at your organisation	• Critical Care management, ICU design and Protocol's. • Infection Control Protocol's, material management • Hospital Support Services. • Learned with CPRS System.
Gaps identified on the working area.	• Patient were not guided properly before the surgery. • Handover register was not maintained in ICU and are incomplete. • There was no recorded of how many linens used and unused per day.

Suggestions for improvement	• Conduct the random audit for the compliance and the accountability of the staff. • Maintain the ICU handover registers properly as manual and online and also train the staff to be cooperative with patients. • Train the staff for proper count over the linen issued and return. • Patient care welfare should properly guide the patient and the attendant about in brief of surgery and the fasting hours, consents, pre-post operative protocols.
Plan for the next week	• Continue with discharge process, management and the working. • Continue with project work and data collection in Operation theatre. • Visit Pharmacy and Learn the supply chain. • Observed the Biomedical Waste Management

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -7th Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department

Name of the Student: JASMEEN KAUR

Roll no:1966 **Stream: MBA(HM)**

Week no: 7 **From: 23rd June 2025 to 28th June 2025**

Activity Done	• Continued with the discharge and the discharge planning. • Assisted the Pre- and Post-operative assessment of the patients. • Collected data of the operation theatre of project given by organisation mentor. • Audit of handover register. • Observed & learn about the Pharmacy Units and workflow and layout • Learned the supplier coordination and stock replenishment procedure. • Learned the segregation of waste according to the colour and the storage the transport of the waste
Linking theory (Classroom learning) with practice at your organisation	• Cold Chain Management • Biomedical waste management • Drug inventory management • NABH •
Gaps identified on the working area.	• No real time tracking system is there for biomedical waste. • Lack of scanning of bar code for medications • High Risk medications are not properly segregated.

Suggestions for improvement	• Conduct surprise visit for the biomedical waste management. • Conduct regular training audits of biomedical waste management. • Implement the proper bar code for the proper tracking. • Segregate the medication properly specially the high risk.
Plan for the next week	• Continue with discharge process, management and the working. • Continue with project work and data collection in Operation theatre. • Visit Food & Dietary Service department. • Visit Quality Department.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -8TH Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department **Name of the Student: JASMEEN KAUR**

Roll no:1966 **Stream: MBA(HM)**

Week no: 8 **From: 30TH June 2025 to 5th July 2025**

Activity Done	• Continued with the discharge and the discharge planning. ▪ Assisted the Pre- and Post-operative assessment of the patients. ▪ Collected data of the operation theatre of project given by organisation mentor. ▪ Learned the meal distribution according to the patient's diet and observed the food hygiene audits. ▪ Conducted a small Survey of patient satisfaction and visited to patient's round and listened their queries. ▪ Trained the staff about proper implementation of the Surgical Checklist.
Linking theory (Classroom learning) with practice at your organisation	▪ Change Management. ▪ Team-Based Learning. ▪ Patient-Centred Care.
Gaps identified on the working area.	▪ Some of the patients were unaware about the pre-operative fasting and about the consent management. ▪ OT Module was incomplete the proper timings were not mentioned in the Module. ▪ In some wards the food was delayed and long waiting and sometimes the special diet patients were not served according to the diet.
Suggestions for improvement	▪ Introduce a feedback register to report food- related issues in every nursing station so that the issues be solved. ▪ Ensure the floor nurse to complete the OT Module with the proper timings mentioned.

	▪ Ensure the ward nurse to guide the patient proper about the pre-operative fasting and regarding the consent related to the surgery to be performed.
Plan for the next week	▪ Continue with discharge process, management and the working. ▪ Continue with project work and data collection in Operation theatre. ▪ Visit Quality Department. ▪ Meeting with the mentor regarding the project.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -9TH Report

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department **Name of the Student: JASMEEN KAUR**

Roll no:1966 **Stream: MBA(HM)**

Week no: 9 **From: 7th July 2025 to 12th July 2025**

Activity Done	• Visited the Quality Department to understand their role in OT efficiency and support project implementation. • Conducted a short training session for OT staff (nurses, transport, and support staff) on reducing surgical delays. • Shared project findings and explained common reasons behind delays. • Encouraged staff to follow timely shifting, checklist use, and better communication to improve start-time compliance.
Linking theory (Classroom learning) with practice at your organisation	• Applied classroom learnings like time-motion study, Lean management. • Learned how quality control tools like compliance tracking and daily reporting are used in actual OT management. • Understood how small delays create a big impact, in Operations and Hospital Planning Lecture.
Gaps identified on the working area.	• Staff was not fully aware how delays affect overall OT performance and patient flow. • Delay reasons not properly recorded, making it hard to track repeat issues. • No fixed system for tracking whether changes are working.
Suggestions for improvement	• Use a simple delay log sheet every day to track exact reasons for late starts. • Assign a point person in each OT to follow up on schedule and escalate any hold-ups. • Continue weekly micro-trainings to refresh everyone's understanding of roles and importance of time.

Plan for the next week	• Completed the data analysis of the graph • Prepare the PowerPoint presentation of the Project given by my mentor. • Collected the feedback from the OT staff and implement the suggestions given in the training. • Meeting with mentor about the project.

Signature of the Student **Approved by the IIHMR University's Mentor**

Week -10th Report.

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department **Name of the Student: JASMEEN KAUR**

Roll no:1966 **Stream: MBA(HM)**

Week no: 10 **From: 14th July 2025 to 19th July 2025**

Activity Done	• Analysed the data and graphs related to surgical delays and timing patterns. • Prepared the PowerPoint presentation for the project review and met with my mentor to discuss the overall project progress, findings, and suggestions. • Collected feedback from OT staff and suggested to improve the daily work process.
Linking theory (Classroom learning) with practice at your organisation	• Understood the importance of presentation tools like graphs and PPTs for effective communication of findings. • Applied data interpretation and presentation skills learned during classroom sessions. • Used concepts from healthcare operations and quality improvement to understand OT delays.
Gaps identified on the working area.	• Lack of proper documentation for feedback and delay reasons. • Delay reasons were often known by staff but not recorded or reported formally. • Limited use of data for regular performance evaluation in the OT.
Suggestions for improvement	• Involve quality department to track compliance trends and integrate them into internal audits and create a "Delay Reason Checklist" with common causes to simplify reporting.

Signature of the Student **Approved by the IIHMR University Mentor**

Complied Report Format

Name of the Organisation: MAX SUPER SPECIALTY HOSPITAL MOHALI (CHANDIGARH)

Department: Operations Department **Name: Dr. JASMEEN KAUR**

Roll no:1966 **Stream: MBA(HM)**

Activity Done	• Mentor- Mentee interaction & Discussion. • Orientation & Observation about all the departments. • Operation Theatre data collection. • Noted that how hospital maintain the patient record & documents • Continued with the data collection of operation theatre. • Outpatient department (OPD)and the processing. • Admission of Patients and working procedure. • Third Party Administration (TPA) and the working procedure. • Discharge process processing. • Learn and observed about the proper processing of the Front office department collected documents and coordinated with staff. • Continued with the discharge and the discharge planning. • Learned the process of CSSD department. • File and details management of patients • Observed the radiology department. • Functioning of the PET- CT scan. • Observed the processing of blood bank. • Observed Operation theatre. • Handover audit done and informed for incomplete notes. • Learned the process of pre-operative and post-operative care. • Worked on the data collection of the project in the operation theatre. • Learn the processing of daycare and the types of consent are taken for surgeries. • Observed and learned the processing of Emergency Department. • Doctors and nurse handover audit done. • Assisted the Pre- and Post-operative assessment of the patients.

	• Collected data of the operation theatre of project given by organisation mentor. • Checked the assessment of the vitals of the patients in the Pre anaesthetic Care (PAC) and communicated with the other department. • Learned the proper risk stratification according to the ASA grading according to the Asses of the high risk of the patient. • Audit done of surgical checklist according to foam. • Visited all the ICU learned the difference and the proper function of the MICU & SICU and noted the multidisciplinary teams in the critical care management and done the audit of all ICU. • Observed and learned the collection, sorting, washing, drying, packaging of linen and infection control. • Observed & learn about the Pharmacy Units and workflow and layout. • Learned the supplier coordination and stock replenishment procedure. • Learned the segregation of waste according to the colour and the storage the transport of the waste. • Learned the meal distribution according to the patient's diet and observed the food hygiene audits. • Conducted a small Survey of patient satisfaction and visited to patient's round and listened their queries. • Trained the staff about proper implementation of the Surgical Checklist. • Visited the Quality Department to understand their role in OT efficiency and support project implementation. • Conducted a short training session for OT staff (nurses, transport, and support staff) on reducing surgical delays. • Shared project findings and explained common reasons behind delays. • Encouraged staff to follow timely shifting, checklist use, and better communication to improve start-time compliance. • Analysed the data and graphs related to surgical delays and timing patterns. • Prepared the PowerPoint presentation for the project review and met with my mentor to discuss the overall project progress, findings, and suggestions. • Collected feedback from OT staff and suggested to improve the daily work process.
Linking theory (Classroom learning)	• Infection control measures taken in hospital. • Layout of Hospital infrastructure.

with practice at your organisation	• Learn the role of OT scheduling and actual time management in hospital operations. • Principle of Cooperation not individualism. • Consent management. • Documentation, Admission process and the required formalities. • Importance of patient centred communication. • OPD Management and the insurance management. • Medical record department. • CSSD. • Time management for effective treatment. • Proper sterilization, zoning of department. • Patient handling and the communication skills. • Surgical Checklist of WHO. • ASA (American Society of Anaesthesiologist. • Linkage between the pre and post operative assessment. • OT utilisation to support quality assessment. • Critical Care management, ICU design and Protocol's. • Infection Control Protocol's, material management. • Hospital Support Services. • Learned with CPRS System and HIS system. • Cold Chain Management. • Biomedical waste management. • Drug inventory management. • NABH and NABL. • Change Management. • Team-Based Learning. • Patient-Centred Care. • Applied classroom learnings like time-motion study, Lean management. • Learned how quality control tools like compliance tracking and daily reporting are used in actual OT management. • Understood how small delays create a big impact, in Operations and Hospital Planning Lecture. • Understood the importance of presentation tools like graphs and PPTs for effective communication of findings. • Applied data interpretation and presentation skills learned during classroom sessions. • Used concepts from healthcare operations and quality improvement to understand OT delays.

Gaps identified on the working area.	• Long waiting hours. • Lack of proper information& communication. • Lack of proper signage. • Long waiting hours at admission desk less manpower and having more burden. • Delay in the bed allotments. • Approval of insurance takes long time, and many queries are raised, and the approvals gets rejected. • At the OPD some patients were confused about the room and the department no., and the staff was not having good coordination among them self. • Patients faced network and charging issue. • Communication gaps. • CSSD the work is not digital, and no tracking no. of wraps used on daily basis. • Long waiting hours for the scanning reports of PET-CT scan. • Issuing and matching of blood takes long time. • In CSSD the receiving of instruments from the operation theatre takes more time. • Proper Site marking is not done for the surgery. • Long time for bed arrangement for post – operative patients. • Consent is not taken properly and not properly filled. • Entrance of Emergency department is crowded by the attendants. • No coordination between the OT staff and the PAC staff and no coordination between OT staff and Daycare staff. • Long waiting hours for patients in PAC and doctor not available for the assessment. • Delay in surgery according to the scheduled time Vs the actual time. • Handover register was not maintained in ICU and are incomplete. • There was no recorded of how many linens used and unused per day. • No real time tracking system is there for biomedical waste. • Lack of scanning of bar code for medications. High Risk medications are not properly segregated. • Some of the patients were unaware about the pre-operative fasting and about the consent management. • OT Module was incomplete the proper timings were not mentioned in the Module and the OT board is not changed according to the surgery going on its of earlier surgery. • In some wards the food was delayed and long waiting and sometimes the special diet patients were not served according to the diet.

	• Staff was not fully aware how delays affect overall OT performance and patient flow. • Delay reasons not properly recorded, making it hard to track repeat issues. • No fixed system for tracking whether changes are working. • Lack of proper documentation for feedback and delay reasons. • Delay reasons were often known by OT head but not recorded or reported formally. • Limited use of data for regular performance evaluation in the OT.
Suggestions for improvement	• Proper Training of newly selected employee & Trainee. • Better management & hustle free area in & out EMR department for better circulation area. • Improve coordination & communication between departments. • Increase seating capacity for patients. • Provide mobile charging stations and ensure stable Wi-Fi connectivity in the common waiting area. • Improve the coordination between nursing, housekeeping, and admission teams so that beds allotted fast. • During the peak hours more manpower should be present at admissions and conduct the token system to avoid the queue efficiently. • Use colour codes and proper signage for the department direction at the OPD entry and a guide to instruct the patients. • For TPA process coordination with doctors should be proper to ensure accurate and timely submissions and to avoid the delay. • Introduce the digital reporting system where doctors can have access. Digital record should be maintained consistently train the staff. • Create fix time schedule for receiving and giving for sterilised instruments. • Ensure the proper site marking and proper consent is done by consultant and are rechecked. • Train the staff to fill the OT module properly and audit the number of Surgery performed and check boards are maintained according to the surgery going on. • Shared the schedule of OT and share platform for proper communication and coordination. • Before the surgery the proper bed allocation should be done, and it should be made with the discharge planning.

	• Area outside the Emergency Department should be made free from attendants to avoid the delay in the admission of Emergency patients. • Ensure the Patient if there is delay in the surgery so the patient should not wait for long time in the pre-Operative Area. • Preplanning of bed allocation should be there for post-operative patients to avoid the rush of post-operative patients. • PAC doctor should be present according to the duty assigned so that the waiting hour of patients be reduced. • Conduct the random audit for the compliance and the accountability of the staff. • Maintain the ICU handover registers properly as manual and online and train the staff to be cooperative with patients. • Train the staff for proper count over the linen issued and return. • Patient care welfare should properly guide the patient and the attendant about in brief of surgery and the fasting hours, consents, pre-post operative protocols. • Conduct surprise visit for the biomedical waste management and conduct regular training audits of biomedical waste management. • Implement the proper bar code for the proper tracking of medications. Segregate the medication properly specially the high risk. • Introduce a feedback register to report food- related issues in every nursing station so that the issues be solved. • Ensure the ward nurse to guide the patient proper about the pre-operative fasting and regarding the consent related to the surgery to be performed. • Use a simple delay log sheet every day to track exact reasons for late starts. Assign a point person in each OT to follow up on schedule and escalate any hold-ups. • Continue weekly micro-trainings to refresh everyone's understanding of roles and importance of time. • Involve quality department to track compliance trends and integrate them into internal audits and create a "Delay Reason Checklist" with common causes to simplify reporting.

Key Learnings	• Understanding Real-Time Hospital Operations • Operation Theatre (OT) Efficiency and Surgical Delays • Coordination and Communication Skills. • Importance of Data Collection and Documentation, Processing and functioning of every department. • Quality and Patient Safety Measures. • Application of Classroom Learning. • Professionalism and Empathy in Healthcare. • Patient-Centred Care and Professional Behaviour. • Gained hands-on exposure to workflows like patient admission, discharge, TPA processing, and documentation.

Signature of the Student **Approved by the IIHMR University's Mentors**