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BRIEF HISTORY, VISION AND MISSION

INTRODUCTION

SMS Hospital, established in 1934, is one of the largest government hospitals in India and is affiliated with SMS Medical College, Jaipur. It provides tertiary care services to patients from Rajasthan and neighbouring states, with modern facilities and over 6000 beds.

Vision

To be a leading centre of excellence in healthcare, medical education, and research, ensuring accessible and quality care for all.

Mission

The mission of Sawai Man Singh Hospital, Jaipur is to provide high-quality, affordable, and accessible healthcare services to all sections of society, with a special focus on the underserved. The hospital is dedicated to excellence in patient care, medical education, and research. It strives to uphold ethical standards, ensure patient safety, promote innovation, and continuously upgrade its infrastructure to meet the evolving healthcare needs of the population.

SWOT ANALYSIS

STRENGTH

- One of the biggest government hospitals in North India
- Attached to SMS Medical College (strong academic support)
- Offers wide range of specialties and super-specialties
- Provides affordable treatment to all, especially the poor

WEAKNESSES

- Overcrowded due to high patient load
- Shortage of staff compared to demand
- Slow maintenance and administrative processes
- Limited use of advanced digital systems

OPPORTUNITIES

- Can expand more Digitalization in services
- Scope for upgrading infrastructure and equipment

THREATS

- Rise in chronic diseases and lifestyle disorders
- Competition from private hospitals in cities
- Infection risks due to overcrowding
- Pressure during emergencies like pandemics



Objectives

- To find out how much time is usually taken by different types of ambulances:
 1. Critical care ambulances
 2. General ambulances
 3. Dead body shifting ambulances
- To identify the main problems or bottlenecks in the transport process.
- To suggest practical ways to improve the overall transport system in the hospital.

Methodology

- A mixed-method approach (quantitative and qualitative) was adopted.
- 60 ambulance trips were tracked (20 each of critical care, general, and dead body shifting).
- Trip durations were recorded for performance analysis.
- 15 hospital staff (nurses, drivers, ward boys, senior staff) were interviewed informally.
- Researcher observed real-time operations and noted delays.
- Daily challenges faced by staff were documented for deeper understanding.

Findings

1. **Traffic & Entry Issues:**
 - Roads were crowded and there was no separate emergency lane for ambulances.
 - There was a bottleneck at the main hospital gate, causing delays.
2. **Inside the Hospital:**
 - Fewer stretchers and wheelchairs were available at key points.
 - No proper signage at emergency entries, leading to confusion.
 - Referred patients often faced delays as the hospital wasn't prepared in advance.
3. **Staff and Coordination Problems:**
 - Ambulance dispatch was often delayed.
 - Excessive paperwork slowed down the process.
 - Many staff were on contract, underpaid, and felt less motivated.
 - Communication between departments and ambulance teams was poor.

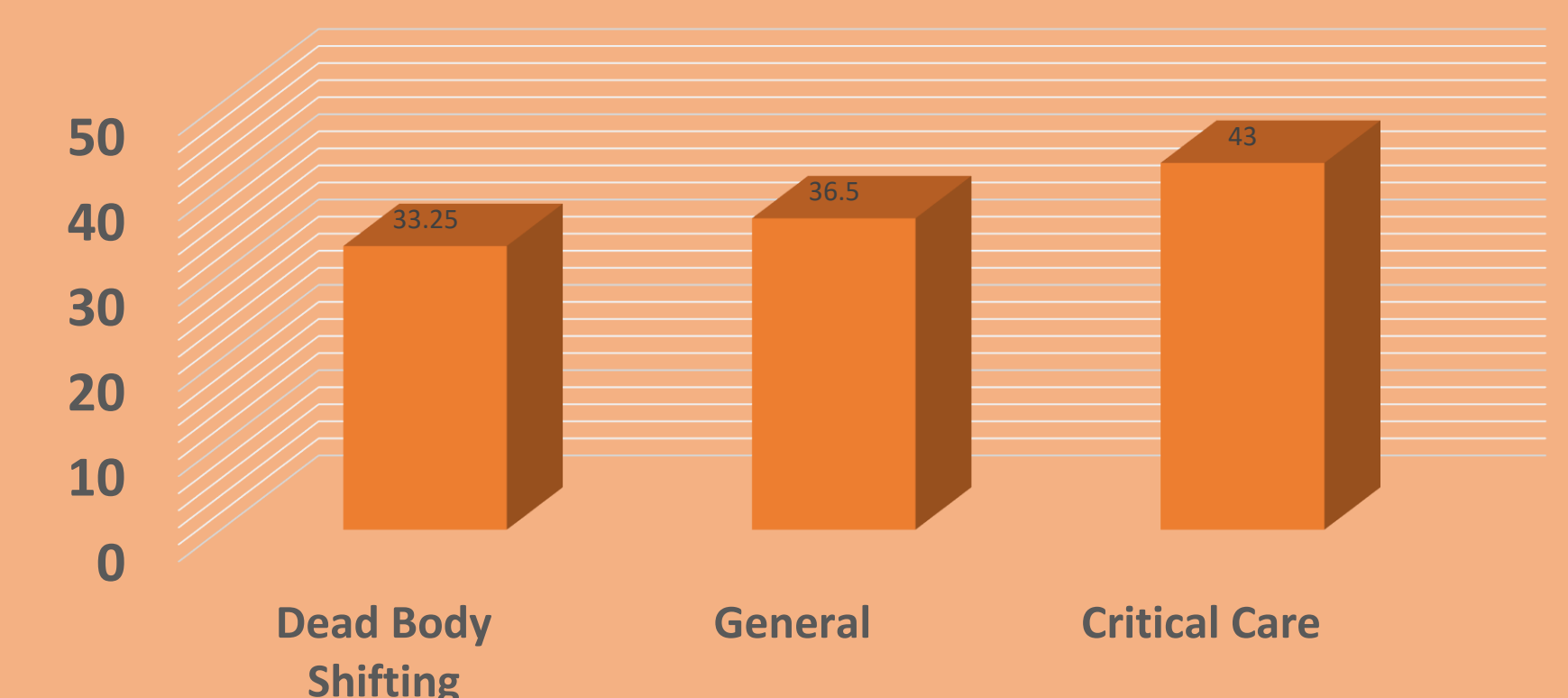
Results

1. **Time Taken:**
 - Critical Care Ambulances took the longest, due to the need for patient stabilization and careful handling.
 - General Ambulances had moderate timings but were often used for unnecessary trips.
 - Dead Body Shifting Ambulances were faster but still faced delays due to paperwork.
2. **Staff Feedback:**
 - Many staff members felt there was a lack of coordination and they weren't appreciated for their efforts.
 - Drivers shared that waiting at gates and not getting timely instructions added to delays.

Recommendations

- Set up a dedicated emergency lane and a separate gate for ambulances.
- Keep enough stretchers and wheelchairs ready at all major entry points.
- Use walkie-talkies or centralized communication tools to reduce confusion and delay.
- Reduce paperwork by going digital where possible.
- Use ambulances only for emergency purposes.
- Improve training, motivation, and pay for staff involved in transport services.

Average Time Taken (in minutes)

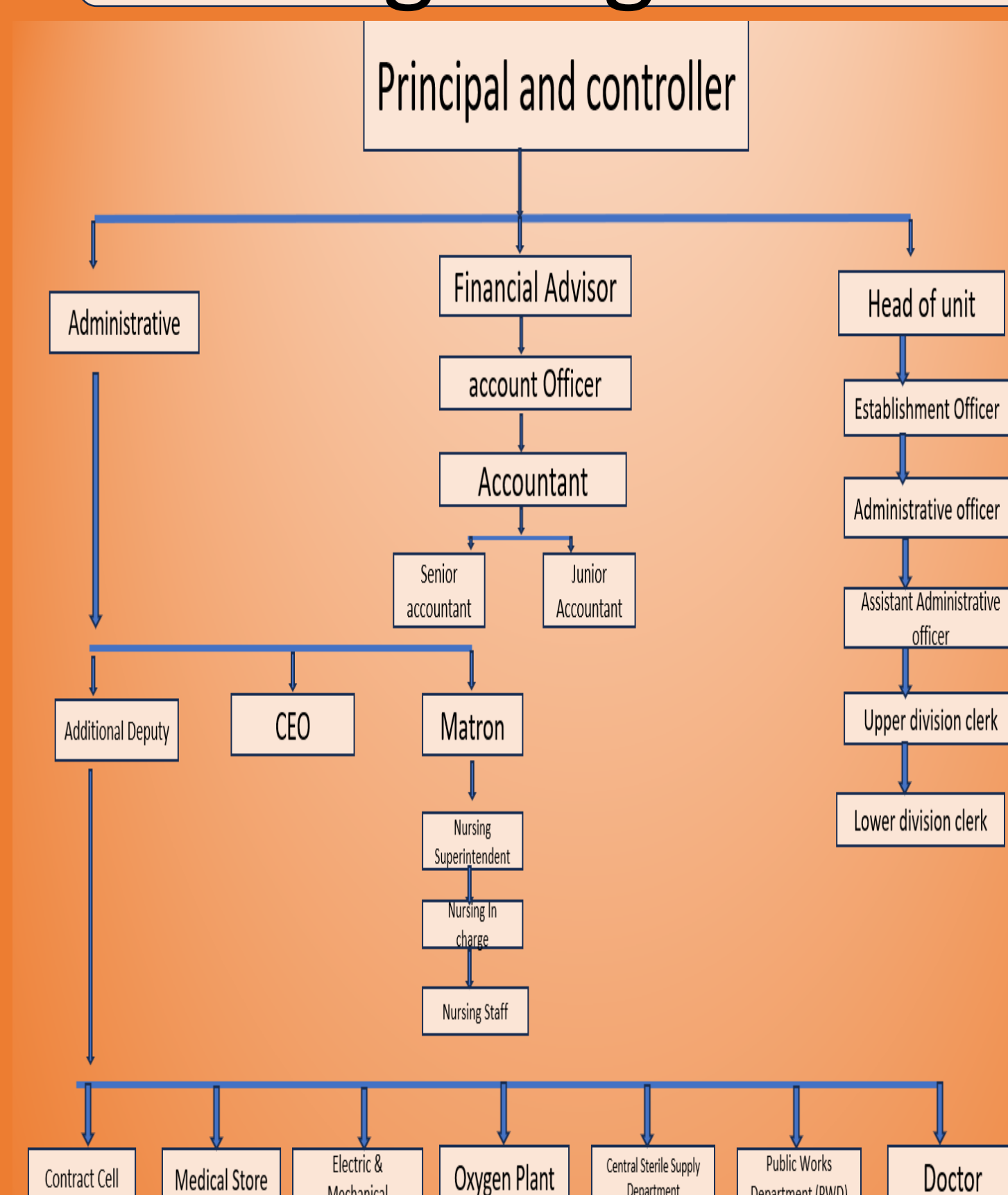


Ambulance Type	Total Duration (minutes)	Number of Trips	Average Duration (minutes)
Dead Body Shifting	665	20	33.25
General	730	20	36.50
Critical Care	860	20	43.00

Conclusion

While SMS Hospital has a good number of ambulances, the overall system has some serious gaps. Delays, poor coordination, excessive paperwork, and lack of motivation among staff are affecting the smooth functioning of the transport services.

Organogram



Practical Exposure

- Practical exposure help me in understanding on ground issues in hospital system.
- Dealt with different stakeholders which possess different challenges.

Theoretical Learning

- Modules helped me learned about various departments and their functioning in hospital.
- Modules helped me learned about concepts of management.

Learnings During Internship

- Observed all the departments, learned about their functions, management, and coordination, and connected this practical experience with classroom learning.
- Developed communication skills, teamwork abilities, professionalism, and overall behaviour.
- Learned working under stress along with team collaboration

Usefulness of Internship

- Provide platform to apply academic knowledge.
- Help in learning skills like teamwork, effective communication, time management and decision making
- Personal growth and understanding own strength and weakness
- Received training in Biomedical Waste (BMW) management, Basic Life Support (BLS), and Cardiopulmonary Resuscitation (CPR).
- Built a professional network with healthcare staff and experts.

Challenges faced During Internship

- Data collection from different stakeholder
- Managing different projects at same time
- Managing multiple task and adherence to deadlines
- Coordination with other stakeholders

Suggestions For Improvement

- Implement real-time ambulance tracking to ensure faster dispatch and reduce gate delays.
- Install clear emergency signage and maps to streamline internal patient movement.
- Digitize transport, stretcher requests, and patient handover to minimize manual delays.
- Boost staff motivation with regular training, recognition, and fair incentives.
- Sufficient manpower should be needed for effective hospital operations

Other Major projects

1. Status of Implementation of Biomedical waste management Practices within SMS hospital.
2. Utilization Analysis of OPD Services Based on Age and Gender Distribution