SUMMER INTERNSHIP PROGRAM

At

Government of Rajasthan (GOR)

(SMS HOSPITAL, JAIPUR)

From 15th May 2025 to 29th of July 2025

A REPORT BY
AVANTIKA BANSAL
Master of Business Administration
(Hospital and Health Management)
Roll No - 1894
2024-26

under the Mentorship of
Dr. MAHENDER KUMAR
PROFESSOR

Name of Institution
SAWAI MAN SINGH HOSPITAL (JAIPUR)

Completion Certification from the Organization

CERTIFICATE

This is to certify that **DR. AVANTIKA BANSAL** of batch **2024-2026 from IIHMR UNIVERSITY, JAIPUR (Department of MBA HOSPITAL AND HEALTH MANAGEMENT)** has worked with our organization for her summer internship **from 15 May 2025 to -29 July 2025**. The overall performance shown by her during the period was excellent.

Date: - 29 July 2025

(Signature of organization Mentor)

Name – Dr. Sushil Kumar Bhati

Designation – Medical Superintendent

Seal Stamp of the Organization.

चिकित्सा अधीक्षक
सवाई मानसिंह चिकित्सालय
जयपुर

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **DR. Avantika Bansal** of academic year 2024-26 of **institute of Health Management** 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: 31/07/2025

Dr. (COL.) Mahender Kumar

Professor

1, Prabhu Dayal Marg, Near Sanganer Airport, Jaipur- 302029, Rajasthan, India.
Ph.: 0141- 3924700, 2791431- 32, Fax: 0141 3924738, E-mail: iihmr@iihmr.edu.in, Web.: www.iihmr.edu.in

CRITICAL ANALYSIS OF POLYTRAUMA WARD IN SMS HOSPITAL

Prepared by:
Avantika Bansal
MBA-HM 29 Roll no. 1894

Faculty mentor- Dr. Mahender Kumar, professor
Organization mentor- Dr. Arvind Palawat (Nodal offic

Brief history about the organization

SMS hospital also known as Sawai man Singh hospital, is a major government hospital in Jaipur, Rajasthan the hospital provides free health care and principal government tertiary hospital in Jaipur with over 6000 beds organized into approximately 43 wards and handling a 10000+ OPD visits daily.

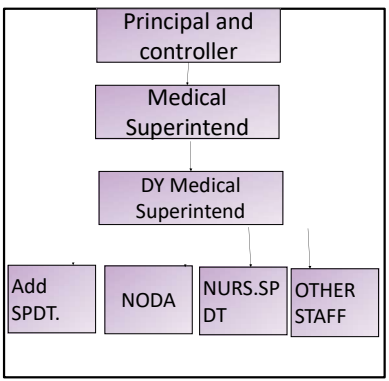
MISSION

To provide safe, ethical, and evidence based care that improves patient outcomes and enhances community well -being.

VISION

To actively learn and contribute to smoother, safer hospital process

Organization Structure



Learnings and Value Additions

1. Systemic gaps in patient monitoring
2. Theory shows timely discharge, but practice reveals frequent delays
3. Time management and communication skills
4. Learned about principles of management and how those work in the hospital.

SWOT Analysis

Strenght	Weakness
• Reputation and brand name • Highly qualified faculty • Comprehensive Healthcare Services • Good infrastructure for critical care patients • Use of technology	• Expensive and not affordable for all • Improper Biomedical waste management • Weak security management • Staff shortage
Opportunity	**Threats**
• NABH Accreditation • Research and Development • Online consultation and packages • Collaborate with more insurance companies	• Violence against healthcare staff • Infectious disease outbreak • Poor and weak infrastructure • Resource constraints

Usefulness of the internship

- Gained hands-on experience in hospital administration
- Learned the significance of SOPs in ensuring consistency, efficiency, and compliance
- Developed strategic recommendations for process improvements
- Built professional relationships with healthcare
- professionals

Challenges Faced

- Time management
- Adjusting to new work environment and culture
- Technology Integration
- Confidentiality issue in data collection
- Interdepartmental coordination

About the project

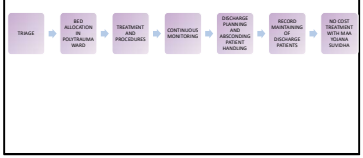
Aim: critically evaluate the absconding in polytrauma ward.

Objective:

1. To identify the factors causing patient absconding.
2. To analyze the gaps in the functioning of ward.

- **Methodology:**
- Study design: Cross sectional study
- Sample Size: For critical analysis - 40 cases
- Patient feedback survey
- Inclusion Criteria: Patient Admitted in the polytrauma ward
- Exclusion Criteria: less than 24hr stay
- Data Collection Method: Direct face to face interview with patient
- Tools used: Excel for documentation

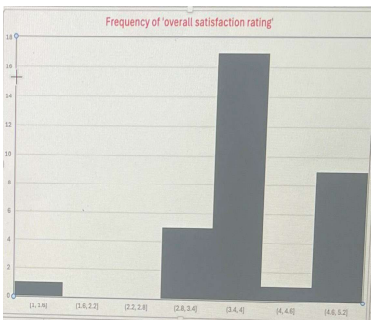
Process



Findings and Analysis

Collected information of the absconding patients. the observation shows that absconding rate is around 6-8% of the total admissions in this ward. The cause is not known and these patients do not get any medico -legal clearance from jurist . it creates delay in the treatment of patient at another place and also increases the chance of readmissions.

Patient satisfaction graph with treatment



Recommendation

- The register absconding patients should be, maintained properly with the cause of leaving.
- The ventilation system in the ward should be improved
- Only one attendee should be permitted with the patient
- MLC clearance for absconding patients.

Report of 1st week

Name of the Organization: SMS HOSPITAL, JAIPUR.

Area/ Department/ Project of Summer Internship Program: DEPARTMENT OF MEDICAL EDUCATION, RAJASTHAN

Name of the Student: DR. AVANTIKA BANSAL

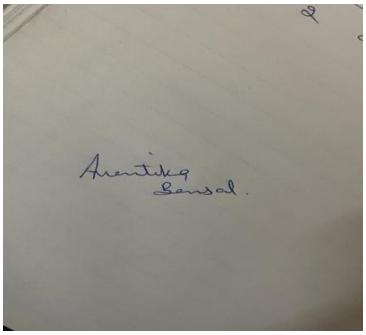
Roll no: 1894 **Stream: HM(A)**

Week no:1
From:15/05/2025.....**to**
17/05/2025…….

Activity Done	1. Examine Average Waiting Time of a Patient before being seen by a Doctor in OPD 2. Checked Average Waiting Time of a Patient before their sample is collected by the laboratory 3. inspect Average Waiting Time for a Patient to use various diagnostic services - MRI - X-Ray - CT scan - USG (Ultrasound) 4. Checked Number of claims submitted in MAA Yojana as a percentage of IPD registration 5. noted Percentage of claim rejection as a few claims submitted by a department in MAA Yojana 6. Checked Number of claims submitted in RGHS (Rastriya Swasthya Bima Yojana) for beneficiaries - As a percentage of eligible RGHS beneficiaries coming for OPD - As an average of eligible RGHS beneficiaries coming for IPD 7. noted the Percentage Bed Occupancy of a department in a hospital.
Linking theory (Classroom learning) with practice at your organization	OPD in hospital services nodule.

Gaps identified on the working area.	1. Cleanliness 2. Long queue of waiting patient outside OPD 3. No proper signage in the hospital 4. No proper communication 5. Distance between OPD and laboratory is so much
Suggestions for improvement	1. Proper training of nursing and other hospital staff to be empathetic and patient centric. 2. Focus on sanitation 3. Reduction of OPD time by online registration 4. Proper directional signage in hospital
Plan for the next week	I would like to observe the other departments of hospital like IPD and will try to link it with the theory part and what changes we can implement there for improvement of patient care in the department.

Signature of the Student



Approved by the IIHMR University's Mentor

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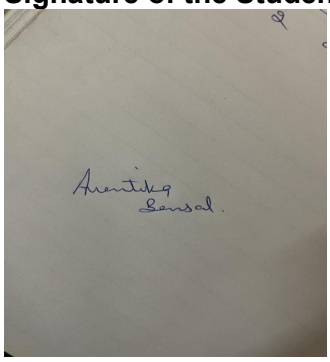
Report of 2nd week

Name of the Organization: SMS (Sawai man Singh) hospital, Jaipur
Area/ Department/ Project of Summer Internship Program: department of medical education, Rajasthan
Name of the Student: dr. Avantika Bansal
Roll no: 1894 Stream: HM (A)
Week no: 2 From:19/05/2025……to……24/05/2025…….

Activity Done	• ON 19TH Compile all the data that was collected on last week and added that in an excel sheet. • On 20th visited the neurology IPD and observed its working structure and management. • On 21st visited the neurosurgery department and understood the functioning and working structure. • On 22nd visited general medicine ward and understood its working and management system. • On 23rd we visited cardiology department (BMRC) ward and understood the functioning. • On 24th we were assigned with the task from our medical superintendent to check all the rooms available in the hospital and check whether the room is in good functional condition or they are just not being used properly.
Gaps identified on the working area.	1) Insufficient staff and bed 2) Poor restroom facility 3) Imbalanced nurse patient ratio 4) Improper biomedical waste management 5) Poor infrastructure 6) No specific space for inventory or medical supplies 7) No separate male and female wards
Linking theory (Classroom learning) with practice at your organization	• Analyzed ward structure, staffing patterns and patient care management. • Observed the communication channels between nurses, doctors and administrative staff. • Relate to the classroom learning of ward management, documentation and patient safety.
Suggestions for improvement	• Optimize bed allocation • Improve inventory management • Patient feedback system • Staffing analysis • Separate wards for male and female patients to maintain their privacy

Plan for the next week	I will observe the working structures of other departments in hospital and will try to link it with the theoretical analysis. Also, I will be discussing about the project with my controlling officer. as soon as I get my topic, I will share it with my university mentor.

Signature of the Student



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Report of 3rd week

Name of the Organisation: SMS (Sawai man Singh) hospital ,Jaipur

Area/ Department/ Project of Summer Internship Program: department of medical education, Rajasthan

Name of the Student: dr. Avantika Bansal

Roll no: 1894 Stream: HM (A)

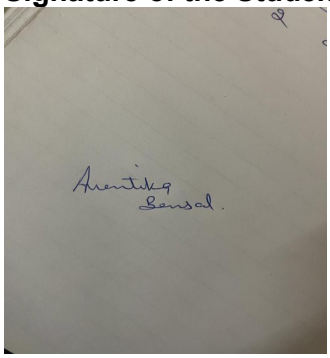
Week no: 3

From:.....24/05/2025.....to.....31/05/2025.....

Activity Done	• Understood the functioning of different OPD • Understood and observed the staffing process ,inventory management and patient flow in IPD departments.
Linking theory (Classroom learning) with practice at your organisation	Workflow mapping ,process optimization and patie centric care.
Gaps identified on the working area	1) Limited integration of IT systems that makes poor coordination between different departments 2) Poor signage system and patient navigation system 3) Shortage of manpower and uneven distribut particularly during peak hours 4) Manual inventory tracking ,leading to delays procurement and stockouts 5) Inefficient patient flow ,often due to lack of triage system and poor space utilization
Suggestions for improvement	1) Install clear , multilingual signage in all departments specially at entry points and OPDs 2) Colour coded path marking can be used to guid the patient to key service areas(e.g.: pharmacy, radiology etc)

Suggestions for improvement	1) Install clear, multilingual signage in all departments specially at entry points and OPDs 2) Color coded path marking can be used to guide the patient to key service areas (e.g.: pharmacy, radiology etc.) 3) Survey on workforce need assessment can be done to identify the staffing gaps 4) Implement flexible shift scheduling or task-shifting (delegating non-clinical tasks to support staff) 5) Recruit interns' trainees or conduct staff training programmed 6) Use of HR analytics tools (even in excel) to track performance and optimize deployment
Plan for the next week	On Monday I am going to discuss my topic with my hospital mentor and take some guidance. after finalization I will start working on that.

Signature of the Student



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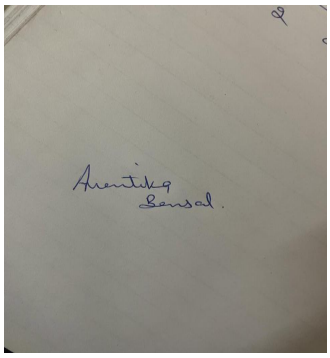
Report of 4th week

Name of the Organization: SMS (Sawai man Singh) hospital, Jaipur
Area/ Department/ Project of Summer Internship Program: department of medical education, Rajasthan
Name of the Student: dr. Avantika Bansal
Roll no: 1894 Stream: HM (A)
Week no: 4 From:1/06/2025……to……7/06/2025……..

Activity Done	• Understood the functioning of sample collection labs • Understood the staffing process of guards and nursing personnel • Worked upon improvement of bed occupancy • Identified the gaps on online and offline discharge of a patient
Linking theory (Classroom learning) with practice at your organization	Workflow mapping, human resource planning and allocation, patient centric care
Gaps identified on the working area	1) Limited integration of IT systems in labs 2) The report system in few labs Is still offline kind. 3) Poor signage system and patient navigation system 4) Shortage of efficient manpower to control the crowd 5) Manual inventory tracking, leading to delays in procurement and stockouts 6) Difference between online and offline discharging system
Suggestions for improvement	7) Install clear, multilingual signage in all departments specially at entry points and OPDs 8) Training of nursing and other staff can improve the outcomes 9) Survey on workforce need assessment can be done to identify the staffing gaps 10) Integration of online report tracking in labs
Plan for the next week	Working on a master plan with my mentor which includes different projects like e.g.: men with the trolley, nursing staff allocation, signage system etc.

Signature of the Student



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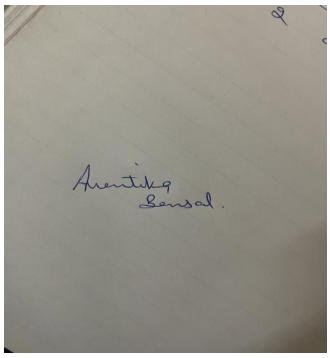
Report of 5th week

Name of the Organization: SMS (Sawai man Singh) hospital, Jaipur
Area/ Department/ Project of Summer Internship Program: department of medical education, Rajasthan
Name of the Student: dr. Avantika Bansal
Roll no: 1894 Stream: HM (A)
Week no: 5 From:9/06/2025……to……14/06/2025…….

Activity Done	• Understood the functioning of blood bank • Understood the staffing process of guards and nursing personnel • Done the work that we got from head quarters • Doing the regular tasks that we got from mentor
Linking theory (Classroom learning) with practice at your organization	Blood bank management system, human resource planning and allocation, patient centric care
Gaps identified on the working area	7) Limited integration of IT systems in labs 8) Complaint form in blood bank is so lengthy that sometimes doctors avoid that 9) Poor signage system and patient navigation system 10) Shortage of efficient manpower in every department 11) No. of trolley pullers in respect of trolleys are very less.
Suggestions for improvement	11) Install clear, multilingual signage in all departments specially at entry points and OPDs 12) Training of nursing and other staff can improve the outcomes 13) The complaint form can be précised in blood bank so that everyone can use it 14) Allocation of trolley pullers in every department
Plan for the next week	Planning to visit emergency and trauma center part of the hospital and observe the functioning there. Also working upon my tasks.

Signature of the Student



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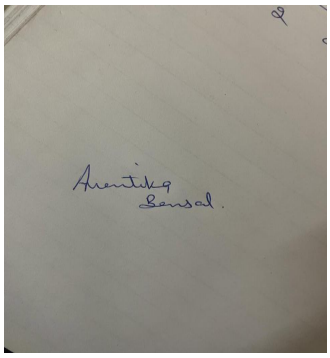
Report of 6th week

Name of the Organization: SMS (Sawai man Singh) hospital, Jaipur
Area/ Department/ Project of Summer Internship Program: department of medical education, Rajasthan
Name of the Student: dr. Avantika Bansal
Roll no: 1894 Stream: HM (A)
Week no: 6 From:16/06/2025……to……22/06/2025…….

Activity Done	• Visited another building of SMS which is called trauma center • Understood the admission process and functioning of this department • The emergency patients are admitted here • Observed the triage system in the emergency • Visited the polytrauma ward also • Took a basic lifesaving skills practical class.
Linking theory (Classroom learning) with practice at your organization	Hospital trauma services, the importance of seamless and efficient system for optimal patient system.
Gaps identified on the working area	• Emergency red area has only one bed • The cleaning and sanitization were very poor at the emergency site • Deficiency of manpower in every department • Only one ward boy was available in mass casualty department • Ventilation in polytrauma ward is poor
Suggestions for improvement	• Increase in the Number of beds in emergency • Hiring and training of more manpower • Cleaning and sanitation can be improved • Ventilation system checking regularly
Plan for the next week	Planning to visit all ICUs in the hospital and do a critical analysis of them and make a report that what should be changed and where are the gaps.

Signature of the Student



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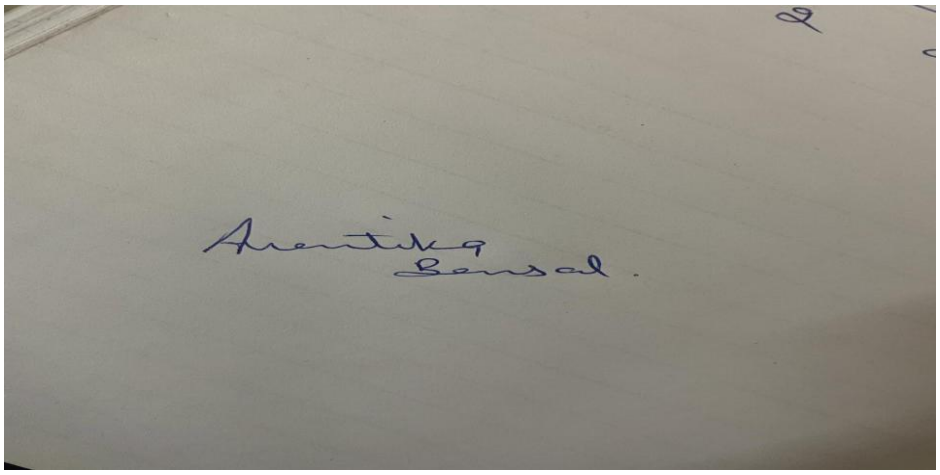
Report of 7th week

Name of the Organization: SMS (Sawai man Singh) hospital, Jaipur
Area/ Department/ Project of Summer Internship Program: department of medical education, Rajasthan
Name of the Student: dr. Avantika Bansal
Roll no: 1894 Stream: HM (A)
Week no: 7 From:22/06/2025……to……29/06/2025…….

Activity Done	• Doing a critical analysis on polytrauma ward • Observing the functioning of emergency ward • Took the sample of 10 patient attendee and ask them about the ward and treatment satisfaction level • Observed the functioning of different specialties working at a same place
Gaps identified on the working area.	8) Insufficient staff and bed 9) Poor ventilation facility 10) Imbalanced nurse patient ratio 11) Poor infrastructure 12) The discharging of patient took so much time because of so much paperwork 13) No. of absconding patients are high 14) Lack of team-based approach of patient treatment in the ward
Linking theory (Classroom learning) with practice at your organization	• Analyzed ward structure, staffing patterns and patient care management. • Systemic and team-based approach
Suggestions for improvement	• Optimize bed allocation • Patient feedback system • Staffing analysis • Patient and attendee counselling for emotional support • Discharging of patient should be easy • The data of absconding patients should be recorded in files properly with the reason of absconding.
Plan for the next week	I am working on polytrauma ward and in few days, I will explore more about that ward other than that also will work upon signages in the hospital for proper guidance of patient.

Signature of the Student



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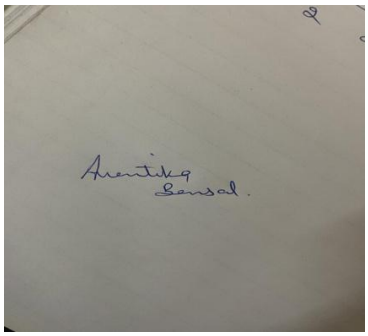
Report of 8th week

Name of the Organization: SMS HOSPITAL, JAIPUR.
Area/ Department/ Project of Summer Internship Program: DEPARTMENT OF MEDICAL EDUCATION, RAJASTHAN
Name of the Student: DR. AVANTIKA BANSAL
Roll no: 1894 Stream: HM(A)
Week no:8 From:1/07/2025……to 6/07/2025…….

Activity Done	1. Working on the polytrauma ward functioning. 2. Taking the data of absconding patients and trying to identify the reason behind it. 3. My hospital mentor assigned me a project where I must identify the No. of patients who does not need any treatment, but they are there and increasing the crowd. 4. Also working on signage system of hospital to improve the guidance of patients. 5. Working on how we can improve the efficiency of guards in hospital to reduce any casualties.
Linking theory (Classroom learning) with practice at your organization	• Operations theory, systems theory and lean management theory.
Gaps identified on the working area.	1. Register of absconding patients with a cause is not maintained. 2. Guards are not completely qualified according to hospital's term and conditions. 3. Signages are poor.
Suggestions for improvement	1. Register maintenance should be done in every department and ward for absconding patients. 2. Filtering of false patients before entering the OPD chamber. 3. Signages in the hospital should be clear.
Plan for the next week	Still going to work on the polytrauma ward and collect the data by surveying and asking the questions from patients, attendee and the present staff about the absconding issues in department.

Signature of the Student



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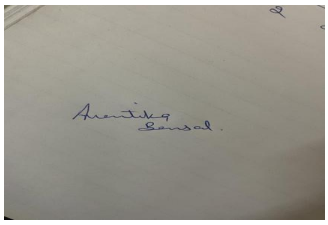
Report of 9th week

Name of the Organization: SMS HOSPITAL, JAIPUR.
Area/ Department/ Project of Summer Internship Program: DEPARTMENT OF MEDICAL EDUCATION, RAJASTHAN
Name of the Student: DR. AVANTIKA BANSAL
Roll no: 1894 Stream: HM(A)
Week no: 9 From:7/07/2025……to 13/07/2025……...

Activity Done	6. Still Working on the polytrauma ward functioning. 7. Taking the data of absconding patients and trying to identify the reason behind it. 8. Working on guards staffing protocols. 9. Observed the whole process of blood sample billing to collection of it in lab. 10. Collecting absconding data from polytrauma center. 11. Took the sample of patient satisfaction with the polytrauma ward and doctor -patient behavior.
Linking theory (Classroom learning) with practice at your organization	• Structure -process-outcome framework • Maslow's hierarchy of needs for absconding patient's unmet needs • Root cause analysis of absconding behavior of patients • Patient- centered care model • Total quality management in healthcare
Gaps identified on the working area.	4. Register of absconding patients with a cause is not maintained properly. 5. Infrastructure of ward is very poor. 6. Patient – nurse ratio is not balanced 7. Patients must wait for some specific doctors for so many hours. 8. Staff behavior with patients sometimes is not very good
Suggestions for improvement	4. The reason of absconding of patients should be asked to manage the record. 5. Patient counselling should be done by doctors and staff to give them a satisfaction regarding treatment. 6. Guards training should be done to manage the crowd and arguments. 7. Data of patient should be managed digitally to identify the common issues so that policy can be formed to improve them
Plan for the next week	Going to collect the data from polytrauma ward and analyze more gaps in the ward and with all these data I will make a critical analysis and swot analysis report of polytrauma ward.

Signature of the Student



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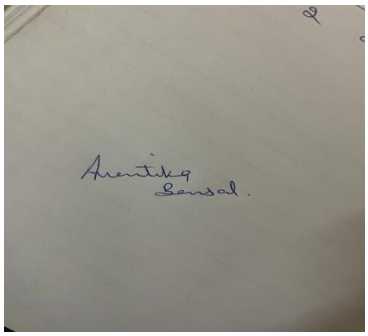
Report of 10th week

Name of the Organization: SMS HOSPITAL, JAIPUR.
Area/ Department/ Project of Summer Internship Program: DEPARTMENT OF MEDICAL EDUCATION, RAJASTHAN
Name of the Student: DR. AVANTIKA BANSAL
Roll no: 1894 Stream: HM(A)
Week no: 10 From:14/07/2025……to 29/07/2025……

Activity Done	• Collected the data from polytrauma ward and making a critical analysis report of that • Finding gaps in polytrauma for improvements • Compiling all my previous projects with data • Critical analysis and surveying of patients in polytrauma. • Visited the basement area of the hospital • Parking and food canteen visit
Linking theory (Classroom learning) with practice at your organization	• SWOT analysis of polytrauma ward • LEAN Healthcare -Focuses on eliminating waste, improving workflows, and enhancing patient satisfaction. • Service quality in healthcare
Gaps identified on the working area.	9. Absconding patient cause is unknown 10. No. of absconding patient is 6-8% daily 11. The ventilation and illumination in the basement area is very low 12. Water drainage is not proper in basement area 13. There was stagnant water everywhere in the basement 14. Parking area is not organized properly which creates chaos in hospital 15. No proper sitting area in the canteen
Suggestions for improvement	8. Counselling of patient can be done to reduce the absconding numbers 9. High power light installation in basement can improve illumination 10. Proper drainage system for basement 11. Guards training to reduce the thefts in wards and CCTV installation in corridors and in blind spots. 12. Parking ticket system can be implemented 13. A good ventilated and hygienic food court area should be there



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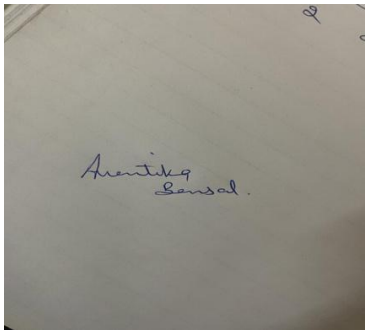
Compiled Report

Name of the Organization: SMS Hospital, Jaipur
Area/ Department/ Project of Summer Internship Program: Department of Medical Education
Name of the Student: Avantika Bansal
Roll no: 1894 **Stream:** MBA-HM
Week no: 10 **From:** 15th may to 29th July 2025

Activity Done	1. Hospital Introduction and Orientation 2. Hospital Round as a Patient 3. Observation of All Departments 4. Data Collection from OPD, IPD, Laboratory, and Radiology Departments. 5. Detailed Understanding of every building comes under SMS hospital 6. Observation in Blood Bank 7. Observation of sample lab 8. Observed the functioning of Dhanwanti, SMS old building, Charak Bhawan, Bangda and trauma center. 9. Orientation in OT (Operation Theatre) - Sterile zoning: Dirty area → Clean area → Sterile area → Operation room. 10. looked for the availability of wheelchairs and stretchers in every department. 11. Hospital Functioning and Departmental Observation Report 12. Worked upon signages system in hospital 13. Located the area for sign boards of different buildings 14. Observed the ventilation issue 15. Took the survey of vague patients in every department which are increasing the crowd 16. Observation of microbiology and biochemistry lab 17. Billing counter to OPD process of patients 18. Worked upon encroachment issue outside the hospital 19. Food court suggestion for hygienic food 20. Analysis of functioning of guards 21. Observation of triage and emergency area in trauma center 22. Attended the BLS training class. 23. Went top ICUs in trauma center to look functioning and staff efficiency 24. Went to mass casualty ward 25. Registration Process of IPD Admissions 26. IPD beds and how to make them available for every patient 27. Critical analysis of polytrauma ward 28. Visited the under construction new building of SMS in presence of mentor 29. Observed the bio medical waste system of the hospital 30. Medico-Legal Case (MLC) Protocol in Hospital 31. CCTV Surveillance Analysis in Hospital 32. Parking and Food Court Observation

	33. Power Supply, Wheelchair, Ambulance, and Lift Analysis
Gaps identified on the working area.	1. Inadequate Manpower 2. Limited Help Desk and Patient Guidance 3. Poor Maintenance of Units and Equipment 4. Communication Barriers 5. Rude or Unprofessional Behavior Toward Patient 6. Incomplete Training and Knowledge Among Working Staff 7. Unhygienic Environment and Infrastructure Gaps 8. No record keeping of absconding patients 9. improper biomedical waste management 10. crowd handling efficiency of guards is poor 11. ventilation issue in every ward, ducting system does not work 12. unorganized parking 13. delayed discharge process 14. signage issues for patients 15. patient to staff ratio is not sufficient 16. water drainage system in trauma center is poor 17. patient must pull the stretchers themselves due to deficiency of ward boys
Suggestions for improvement	1. more manpower 2. adequate number of wheelchairs and stretchers in every department with the ward boy 3. a hygienic food court 4. free up of the encroached area outside the hospital premises 5. better ducting system 6. drinking water availability 7. discharge process should be early and fast 8. maintenance of infra structure 9. proper color-coded signage system for every department and building 10. organized parking system 11. drainage system improvement 12. beds in ICU and OT can be increased 13.

Student's signature



Approved by the IIHMR University's Mentor

On the last day of every week Saturday -) report in the above format should be submitted to the faculty mentor. Submission of total 10 reports in 10 weeks is compulsory. Each report should not be more than 2 pages.