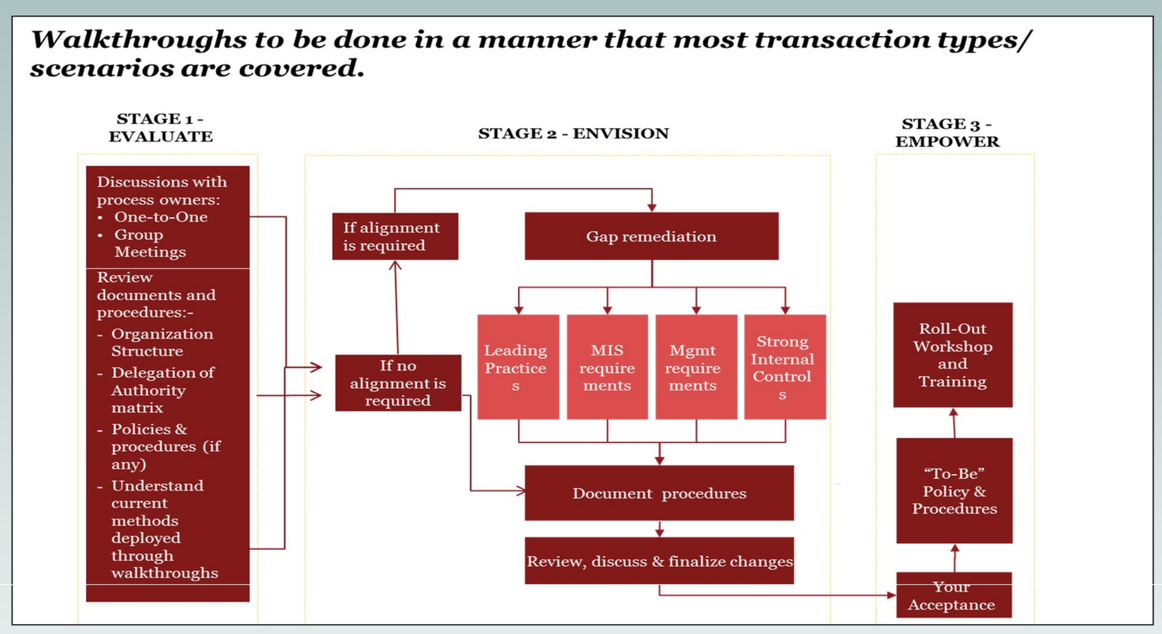
A Study on
Process Flow, Gap Analysis & Designing of SOPs For Six Departments : State's Leading Government Aided Trust Based Maternity Hospital & Hospital For Children

Objectives:

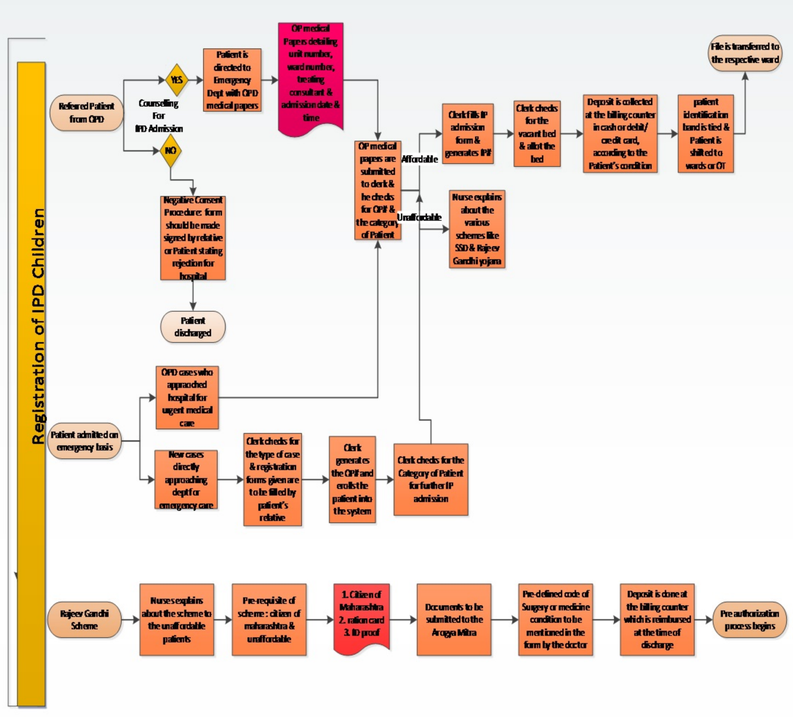
- To develop the process mapping of current document process of department under study
- To identify the duplication, lacunae of work flow process and suggest ways to prevent the same.
- To develop Standard Operating Procedures (SOPS) in compliance to NABH standards

Methodology:

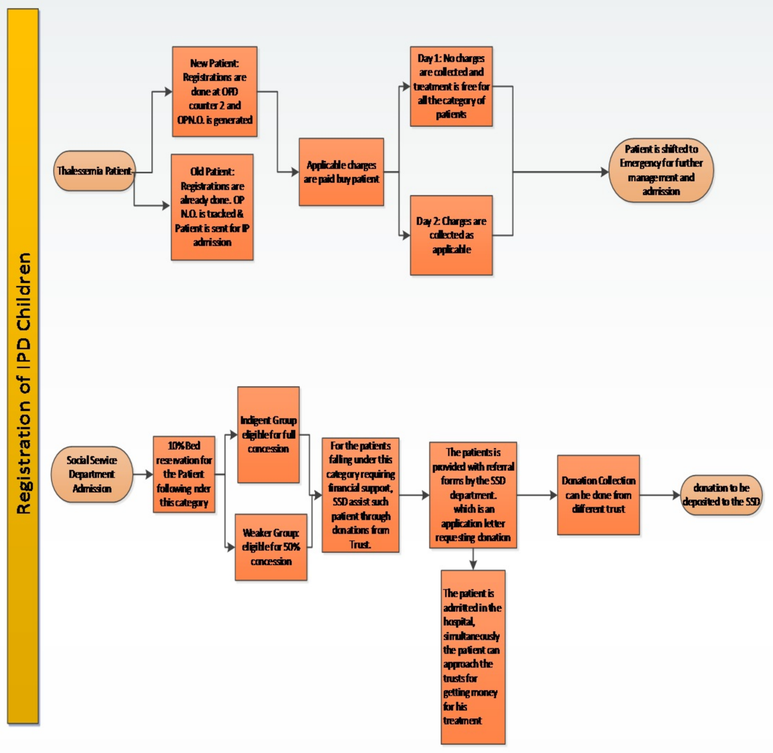
- Type of Study: Qualitative Study
- Sample Size: 40 (process owners of study departments)
- Area of Working OPD, IPD, Billing, Pharmacy, Procurement, Stores(general, Medical, kitchen).
- Sampling: Non Probability Purposive



IPD CHILDREN REGISTRATION AND BILLING



Process Flow



StandardOperating Procedure Template

	Quality Manual – 2016 Reference: NABH Standard
Version No. 1 Date Of Issue:	
Name of Service	
Name of Policy Policy No.	/AAC/02/A
Purpose	
Scope	
Responsibility	
Prepared by	Designation: Signature:
Approved by	Designation: Signature:
Issued by	Designation: Signature:
Responsibility for updating	Designation: Signature:

IPD CHILDREN REGISTRATION AND BILLING — Gap Analysis

Sr	Heading	Detailed Observation	Risk	NABH	Recommendation	Risk	Category
1	Display of name of department	As per NABH, the services being provided should be clearly defined and prominently displayed bilingually (English and Marathi)	•Risk of non-compliance of mandatory requirements stated as per NABH guidelines AAC •Risk of patients are not fully informed in absence of proper display	AAC	Services to be displayed bilingually (English and Marathi)	L	Infrastructure
2	Equipment in department	As per NABH guideline COP 4, The organisation plans for handling community emergencies, epidemics and other disasters. However 1 casualty bed and 1 patient warmer, Defibrillator are kept in ward for handling emergencies. Looking at the daily number of patients registration/admitted, the current set of equipment and infrastructure is inadequate.	Risk of non-compliance of mandatory requirements as per NABH guidelines (COP 4).	COP 4	To meet requirements of daily emergencies, steps to increase current infrastructure should be undertaken	M	Infrastructure
3	Transfer of patients from emergency department to other departments in the hospital	However transfer of patients by hospital staff and parents of child is not done in safe and secure manner. Stretchers do not have side railing for patient safety. Wheelchairs and stretchers should do not have adequate safety measures.	•Risk of non-compliance of mandatory requirements stated as per NABH guidelines (AAC 3). •Risk of accidents/injury due to unsafe transfer of patients	AAC 3	Wheelchairs and stretchers should have safety straps and belts that should be tied to the patient for safe and secure transfer. If possible stretchers of small length specially designed for paediatric patients could be used	M	Infrastructure
4	Bed availability and allocation of beds	As per NABH standards CQI 4c: Monitoring includes utilisation of space, manpower and equipment. However ERP system does not provide information about number of beds available in each ward. Further the staff are not aware of use of ERP for extracting information on bed availability etc.	Risk of non-compliance of mandatory requirements as per NABH guidelines (CQI 4). Utilization statistics	CQI 4c	ERP system should be reviewed to ensure all critical information such as availability of beds etc can be extracted. Knowledge of use of ERP for extracting information on critical aspects should be imparted to hospital staff	L	Operations
5	Stickers for patients being admitted in the hospital	Stickers detailing out details of patients etc. are generated at time of admission which are pasted in different documents for identification purpose. However all sheets of patient file and related documents do not have stickers and at many places the detailing of the patient detail is done manually.	•Risk of inconsistency and errors in documentation process due to non use of stickers Risk of additional time spent due to manual filing on documentation instead of use of stickers Some sheets can go undocumented, which could be misused		To eliminate errors, labelling of each new paper should be done through stickers only	L	Operations
6	Patient band	Patient band given to the patient has details of patient, bed number, doctor name and other related information written by the clerk/nurse in ballpen ink	Risk of loss of patient identification if ink on patient band is wiped out		Stickers should be pasted on patient band to avoid erasing of details on patient band	L	Operations
7	Initial assessment form	As per NABH standard AAC 4: Patients cared for by the organisation undergo an established initial assessment. Nursing assessment and doctor assessment to be done at time of admission to meet these requirements. However it was observed that Nursing initial assessment form are available in some cases, however doctors initial assessment forms were not available	•Risk of non-compliance of mandatory requirements as per NABH guidelines (AAC 4). •Risk of incorrect decision for admission of patient in hospital can exists if proper initial assessment not made.	AAC 4:	Nursing assessment and doctor assessment should be performed in all cases.	H	Operations
8	Pain management	Initial assessment form do no have smiley signs for pain management	•Risk of non-compliance of mandatory requirements as per NABH guidelines (COP 8).	COP 8	To be made part of the initial assessment form	H	Operations
9	Consent forms	All consent forms not available in the department (like those in the maternity hospital)	•Risk of non-compliance of mandatory requirements as per NABH guidelines (PRE 4) •Risk of failure of patient / relatives to accept terms and conditions for admission to hospital	PRE 4	To be made available	M	Operations

Recommendation:

- Training of the staff should be done regularly so as to keep in line with the newly designed SOPs according to NABH & MIS compliance .
- Feedback should be taken for the same for further scope of improvement.

Guided by : Dr. Seema Mehta
(Associate Professor)

Prepared by: Dr. Rutvi Sharma (P.T.)
0339 MBA-HM (2015-17)