

**Summer Training at
Max Super Speciality Hospital,
Mohali**

- **Job Satisfaction Among General Duty Assistant**
- **Level of Knowledge of General Duty Assistant**
- **Raising the Level of Patient Satisfaction in the Department of Nutrition and Dietetics**

**By
Khushaboo**

**Under the guidance of
Dr. Saurabh Kumar**

**MBA Hospital and Health Management
2015-2017**



**The IIHMR University, Jaipur
2016**

TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Dr. Khushboo**, student of **MBA Hospital and Health Management** from the IIHMR University, Jaipur has undergone summer training at **Max Super Speciality hospital, Mohali** from 1st April to 31st May, 2016.

The Candidate has successfully carried out the study designated to her during summer training and her approach to the study has been sincere, scientific & analytical.

The Internship is in fulfilment of the course requirements.

I wish her all success in all her future endeavours.



Col. (Dr.) Ashok Kaushik
Dean (Academics & Student Affairs)
The IIHMR University, Jaipur



Dr. Sanrabh Kumar
Assistant Professor
The IIHMR University, Jaipur

Ref: MOH/TR/CP/J136

May 31st, 2016

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Dr. Khushboo D/O Mr. N.P Singh** has completed her training in the department of **Housekeeping** at Max Super Speciality Hospital, Mohali on 31st May 2016.

The project undertaken by her during the training period was:

- Job satisfaction among general duty assistant in Max Super Speciality Hospital.
- Level of knowledge of general duty assistant in Max Super Speciality Hospital.
- Raising the level of patient satisfaction in the department of nutrition and dietetics in Max Super Speciality Hospital.

She possesses a keen observation and conducts herself with confidence.

During her training (April 01st 2016 to May 31st 2016) she was part of hospital set up and was reporting to **Mr. Kirti Thakur (Manager-Housekeeping)**.

We wish her all the best in her future endeavors.

For Max Super Specialty Hospital

A handwritten signature in blue ink, appearing to read "Lily Sahota".

Lily Sahota
AGM – Human Resources

Max Super Speciality Hospital, Mohali - A unit of Hometrail Estate Pvt. Ltd.

Near Civil Hospital, Phase - 6, Mohali, Punjab - 160055, Phone: +91-172-6652 000

Hometrail Estate Private Limited

(CIN: U45400DL2008PTC176963)

Regd. Office: Max House, 1, Dr. Jha Marg, Okhla, New Delhi - 110 020

Phone: +91- 11-4122 0600, Fax: +91-11-4161 2155, E-mail: secretarial@maxhealthcare.com

www.maxhealthcare.in



ACKNOWLEDGEMENT

The project training at **Max Super Speciality Hospital, Mohali** helped me to gain both learning experience as well as glance into the daily managerial level issues of this eminent hospital. I was fortunate enough to interact with the reverent authorities and staff of the hospital, who have encouraged and guided me with their support and patience.

I want to express my gratitude and sincere thanks to my mentor **Mr. Kirti Thakur, Head of House-keeping department**, for his constant support and invaluable time-to-time guidance and advice in completion of this project.

I would also like to thank **Mr. Sumit Walia, Assistant manager in the department of House-keeping, Mr. Bhishan Dutt Joshi, Manager in Food and Beverage department, Mr. Gagandeep Singh, Supervisor in House-keeping Department**, who in spite of their busy schedule, guided me in completion of this project.

I also want to extend my thanks to **Dr. S.D. Gupta**, Director-IIHMR for incorporating right attitude towards learning and **Col. (Dr.) Ashok Kaushik**, Dean-Academics and students Affairs, IIHMR, for helping and supporting me to reach my goals.

Finally, I acknowledge my indebtedness to the staff of the hospital and our respected teachers of IIHMR especially **Dr. Saurabh Kumar** for providing his constant support by guiding me throughout my internship tenure.

I would also like to thank all who have directly or indirectly supported me towards the completion of the project.

Khushboo
Roll no. 0294
MBA-HM-20
(2015-2017)

Table of Contents

Acknowledgement.....	ii
Table of Contents.....	iii
List of Abbreviations.....	vii
List of Tables.....	viii
List of Figures	ix
About Max Super Speciality Hospital, Mohali	1
History of Max Hospitals	2
Vision and Mission	3
Objectives	4
The Logo.....	4
Max Super Speciality Hospital, Mohali.....	4
Introduction	4
Facts & Figures.....	5
Awards & Certifications	5
Collaboration:.....	6
Number of Departments	6
Clinical Departments:	6
Clinical Facilities:.....	7
Non-Clinical Departments:.....	7
Outsourced staff.....	8
Services Provided	9
Handling Visitors.....	11
Out Patient Department.....	11
Handling Appointments.....	12
Walk In Appointments	13
Registration Form.....	14
OPD Patient Registration, Consultation, Diagnostic and Treatment Process.....	15
IPD Working.....	16
Admission Procedure.....	17
Admission Process Map	18
Admission Request Form	19
Observational Analysis	20

Positive Features.....	20
Limitations.....	20
Suggestions.....	21
Conclusion.....	21

Job Satisfaction among General Duty Assistant (GDA) in Max Super Speciality Hospital, . 22 Mohali..... 22

1. Introduction	23
2. Review of Literature.....	23
3. Problem Justification	24
4. Objectives	24
5. Research Methodology	24
5.1 Research Design	24
5.2 Study Population.....	24
5.3 Sample Size-	24
5.4 Sampling Technique-	24
5.5 Study Tool-.....	24
6. Data Collection.....	24
7. Data Analysis and Interpretation.....	25
7.1 Job Satisfaction Status	25
7.2 Gender Based Analysis.....	25
7.3 Experience based analysis (in study hospital)	27
7.4 Employee Satisfaction	29
8. Findings	31
9. Strengths.....	32
10. Suggestions	32
11. Limitations	33
12. Conclusion.....	33

Raising the Level of Patient Satisfaction in the Department of Nutrition and Dietetics in Max Super Speciality Hospital_Mohali..... 34

1. Introduction	35
2. Problem Justification	35
3. Objective.....	36
4. Research Methodology	36
4.1 Research Design	36

4.2 Study Population.....	36
4.3 Sample Size	36
4.4 Sampling Technique-	36
4.5 Study Tool-.....	36
5. Data Collection.....	36
6. Food and Beverage Department at Max Super Speciality Hospital, Mohali	36
6.1 LOCATION.....	36
6.2 LAYOUT-.....	36
6.3 MENU	37
6.4 MANPOWER.....	37
6.4.1 ON-ROLL-	37
6.4.2 OUT-SOURCED-	37
6.5 PROCESS OF FOOD DELIVERY TO THE PATIENT	39
7. Findings	39
8. Strengths.....	43
9. Suggestions	43
10. Limitation.....	43
11. Conclusion.....	44
 Level of Knowledge of General Duty Assistant (GDA) in Max Super Speciality Hospital,...	45
Mohali.....	45
1. Introduction	46
2. Problem Justification	46
3. Objective.....	46
4. Research Methodology	46
4.1 Research Design-	46
4.2 Study Population-	46
4.3 Sample Size-	47
4.4 Sampling Technique-	47
4.5 Study Tool-.....	47
5. Data Collection.....	47
6. Data Analysis	47
7. Findings	48
7.1 OPD-	48
7.2 IPD-.....	49
8. Strengths.....	49
9. Suggestions	49

10. Limitations	50
11. Conclusion.....	50
References	i
ANNEXURE-1	ii
ANNEXURE-2	iv

List of Abbreviations

- ENT- Ear, Nose, Throat
- ER- Emergency Room
- FNB- Food and Beverage
- GDA- General Duty Assistant
- HIS- Hospital Information System
- IPD- In Patient Department
- ICU- Intensive care Unit
- LEED- Leadership in Energy and environmental Design
- LAMA- Leave Against medical advice
- MICU- Medical Intensive Care Unit
- NABH- National Accreditation Board for Hospital & Healthcare Providers
- NABL- National Accreditation Board for Testing and Calibration Laboratories
- OPD- Out Patient Department

List of Tables

Table 1. Figures about Max Hospital, Mohali	9
Table 2 Chi-square test between gender and job satisfaction	26
Table 3 Chi-square test between experience and job satisfaction.....	28
Table 4 Employee satisfaction survey	29
Table 5 Timings of the meal served.....	37
Table 6 Manpower (on -roll) in FNB Department.....	37
Table 7 Manpower (out-sourced) in FNB Department.....	37

List of Figures

Figure 1. Vision and Mission of Max Hospital, Mohali	3
Figure 2. Objectives of Max Hospital, Mohali	4
Figure 3. Logo of Max Healthcare	4
Figure 4. Logo of NABH	6
Figure 5. Logo of NABL	6
Figure 6. Logo of LEED Certified Green Hospital by IGBC	6
Figure 7. Various Specialities Provided by Max Hospital, Mohali	9
Figure 8. Flow chart of Handling Visitors	11
Figure 9. Flow Chart of Handling Appointments	12
Figure 10. Flow Chart of Walk In Appointments	13
Figure 11. Patient Registration Form	14
Figure 12. Admission Process Map	18
Figure 13. Admission Request Form	19
Figure 14 Job satisfaction status	25
Figure 15 Gender of the respondents	25
Figure 16 Gender and job satisfaction	26
Figure 17 Experience of the respondents	27
Figure 18 Relation between experience and job satisfaction	28
Figure 19 Employee satisfaction survey	30
Figure 20 Representation of major problems faced by FNB Department in percentage ...	40
Figure 21 Various issues of FNB Department	41
Figure 22 Graph depicting individual problems of patients	42
Figure 23 Response of GDA posted in OPD	47
Figure 24 Response of GDA posted in IPD	48

About Max Super Speciality Hospital, Mohali

History of Max Hospitals

Max Healthcare Institute is a healthcare institute based in New Delhi, India. The Institute is a wholly owned subsidiary company of Max India Limited. Established in 1985, Max India Limited is a Public Limited company listed in the Bombay Stock Exchange and National Stock Exchange of India with more than 37,000 shareholders.

The institute operates eleven centres in Delhi, NCR and neighbouring Punjab region, providing health care services in more than 30 disciplines. The company provides patient services including nuclear medicine and cardiac imaging, labs, scans, interventional cardiology, cardiac pacing and electrophysiology, neurosciences, orthopedics, gynecology and obstetrics, pediatrics, cancer care, kidney transplant, bone marrow transplant, maternity services, diagnostic services, paediatric, neurophthalmology, internal medicine, general surgery, urology, nephrology, gastroenterology, mental health and behavioural sciences, rehabilitative services, and pulmonology.

Mr. Analjit Singh is the Founder & Chairman Emeritus of Max India Limited, Chairman of Max Life Insurance Company Limited, Max Healthcare Institute Limited and Max Bupa Health Insurance Company Limited.

With over 2600 beds and 13 top hospitals in Delhi-NCR, Punjab and Uttarakhand, 2300 world-class doctors, Max Healthcare is one of the leading chain of hospitals in India. With over 500 ICU beds, the most advanced technology and state-of-the-art infrastructure, Max Healthcare is one of the best hospitals in India.

Max healthcare is committed in meeting all healthcare needs of customers, starting from the maintenance of good health to providing global standards in diagnostics, therapeutics and surgical requirements at the time of need.

It aims to exceed customer's expectations in terms of quality, service, safety and value for money through constant innovation and better product delivery.

Performance, Trust and Service excellence are enshrined in Max India Group's Vision, Mission and Values. In addition to these "life-centred" businesses, Max India manufactures speciality products for the packaging industry through its division- Max Speciality Products (MSP). MSP too has a strong service excellence orientation that strives on building long lasting partnerships.

The institutes focus is “completely satisfying customer needs profitably” by using DMAIC and Lean methodology.

Vision and Mission

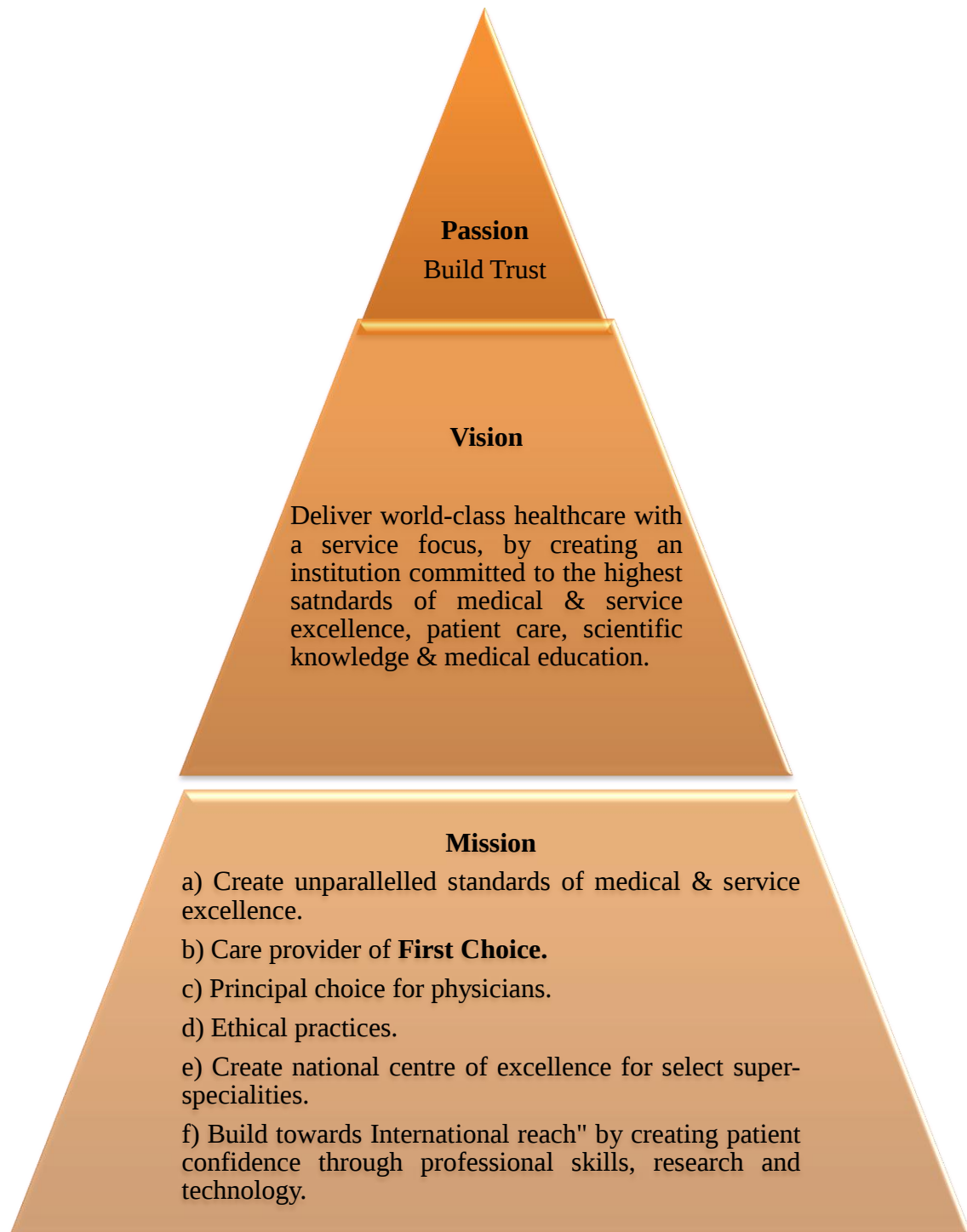


Figure 1. Vision and Mission of Max Hospital, Mohali

Objectives



Figure 2. Objectives of Max Hospital, Mohali

The Logo



Figure 3. Logo of Max Healthcare

The cross is the accepted symbol for Healthcare all over the world. It is a truly suitable symbol for a group that endeavours to enhance the quality of life through healing and care. The healthcare green is fresh, close to nature and symbol of life.

Max Super Speciality Hospital, Mohali

Introduction

Max Super Speciality Hospital, Mohali is another milestone towards realizing the dream of great visionary Mr. Analjit Singh, chairman and managing director of Max Healthcare Ltd.

The 217-bedded super speciality hospital is known for its personalised service and dedicated care for its patients.

Max Super Speciality Hospital, Mohali aims to bring comfort and convenience to its patients.

They believe in understanding their patients' health related problems and offer the right treatment to them. The hospital specializes in offering a broad array of services and amenities like Blood Bank, 24*7 Pharmacy for our-patients.

They use the most technologically advanced medical equipment to achieve excellence in research and treatment. They also have an art of diagnosis system to understand health problems better and choose the right treatment for their patients.

The state-of-the-art hospital extends dedicated care and personalised service to its patients: a pool of committed doctors and support staff help patients to get back to their normal routine at the earliest.

Facts & Figures

- Name: Max Super Speciality Hospital
- Location: Phase 6, Mohali (Punjab)
- Speciality: Tertiary Care Super Speciality Hospital
- Number of Beds: 217

Important dates:

- **September 2011-** OPD was inaugurated by honourable chief minister of Punjab Sh. Prakash Singh Badal.
- **December 2011-** IPD was inaugurated.

Research Activities

- Disease Management Programmes
- Health Promotion and Counselling Services

Awards & Certifications

Max Super Speciality Hospital has been endowed with multiple certifications assuring the highest level of medical and service quality.



Figure 4. Logo of NABH

NABH Accreditation: The accreditation is a recognition of Max Healthcare's commitment to provide the highest quality of care to its patients.



Figure 5. Logo of NABL

NABL Accreditation: Max Healthcare laboratories have successfully obtained NABL accreditation in the field of medical testing.



Figure 6. Logo of LEED Certified Green Hospital by IGBC

They are **LEED certificate Green Hospital** - Four out of Six* such hospitals in India are Max Hospitals.

Collaboration:

Max healthcare and GE healthcare have joined hands to advance Cancer care in India through research and Co-creation of multifaceted cancer care solutions.

Collaboration between Max Planck Society: Germany and Department of Science and Technology, India to understand the role of Ubiquitin-related modifiers in regulation of RNA splicing.

Number of Departments

Clinical Departments:

- Infection control

- Central Sterile Services Department
- Physiotherapy
- Cardiothoracic & Vascular Surgery ICU
- Neonatal ICU
- Labour, Delivery and Recovery
- Operation Theatres
- Triage/Emergency

- High Dependency Units
- Radiology
- General ward
- Laboratories
- Medical ICU
- Cardiac Care Unit
- Catheterization Laboratory
- Dialysis

Clinical Facilities:

- Blood Bank
- Computerized Tomography (CT) Scan
- Electrocardiogram (ECG)
- Endoscopy
- Histopathology/Laboratory
- Imaging Services
- Magnetic Resonance Imaging (MRI)
- Radio Immuno Assay
- Sonography
- Integrated Hospital Information Systems
- Computerized Billing
- Documented Infection Control Policies/Manuals
- Other major equipment – Gamma Camera, Treadmill Stress Test (TMT)

Non-Clinical Departments:

- Reception/Helpdesk/Information Desk
- Cafeteria/ Canteen
- Insurance Desk
- Pharmacy inside the hospital
- Ambulance Service
- Bio- Medical Engineering
- Laundry Management
- Maintenance & Facilities Management like housekeeping etc.
- Management of Bio-medical waste
- Mortuary services
- 24 hours Security
- Social service
- Supply chain Management/ Material Management System

- Finance
- Human resource
- Medical records
- Quality assurance
- Research
- Patient welfare department
- Information technology

Outsourced staff

- Laundry- A-one, Maurya
- Food & Beverage- High Tech
Hospitality
- House-keeping- Avon

Services Provided

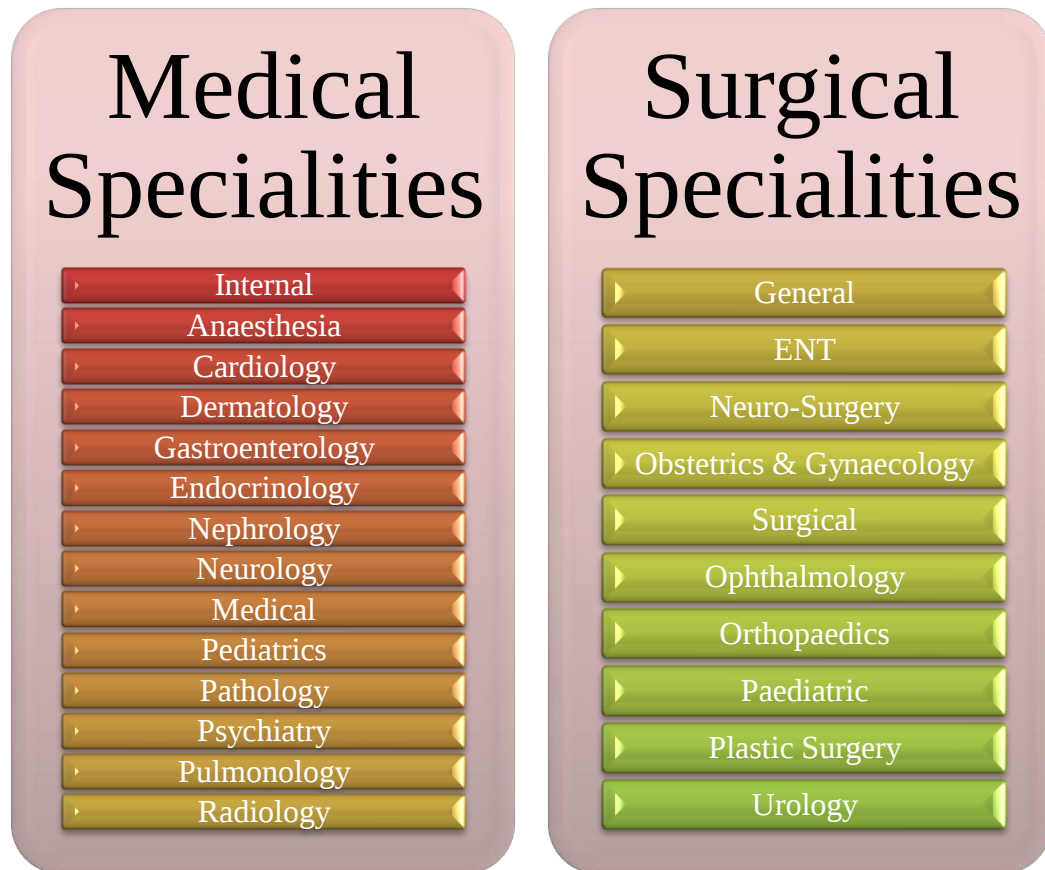


Figure 7. Various Specialities Provided by Max Hospital, Mohali

Table 1. Figures about Max Hospital, Mohali

Total number of beds	217
Number of General wards/classes	133
Number of Special wards/classes	Oncology Day-care Ortho ward Emergency ward Gynaecology wards Dialysis ward Multi-speciality-Single room, Twin sharing, Economy

Number of functional beds in Special wards	MSP Economy-82 Single-28 Twin sharing-30 Dialysis-10 ER-6 Oncology Day-care-15
Total number of Operation Theatres (OT)	8
Number of Emergency Wards	6
Number of functional beds in Emergency wards	6
Number of ICU	10
Total number of beds in ICUs	84
Number of Labour rooms(only for Gynaecology & Obstetrics)	1
Number of NICUs	1
Number of Ambulances	3
Surgical Specialities	32
Number of minor OT's	0
Number of major OT's	8

Handling Visitors

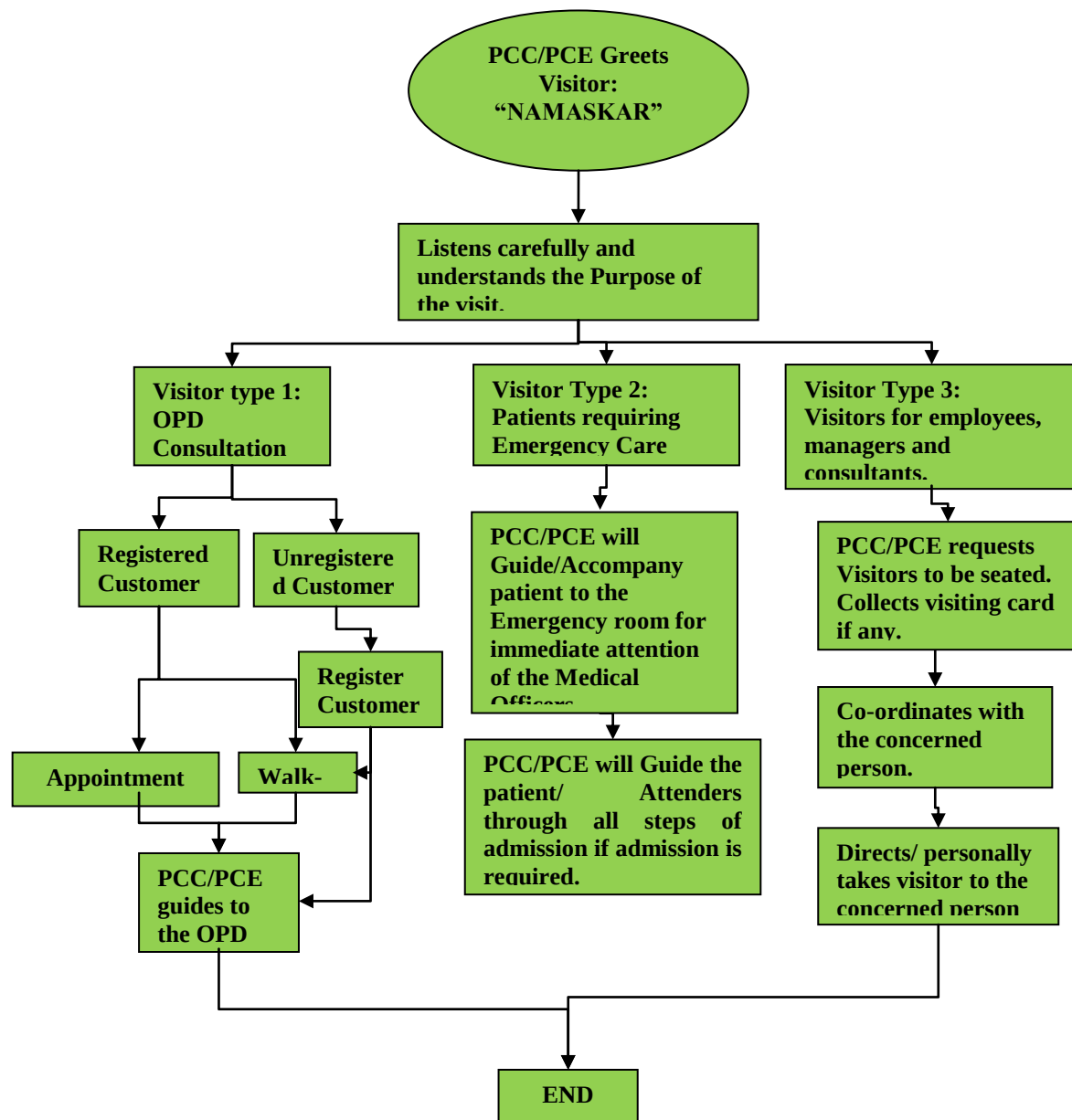


Figure 8. Flow chart of Handling Visitors

Out Patient Department

Outpatient department is a hospital department where healthcare professionals see outpatients, which consists of consulting rooms and support areas—e.g. nurses station, treatment rooms and waiting rooms. Outpatient departments are often physically located near support services (e.g. X-ray, ECG, surgical appliance department, pharmacy etc.).

Handling Appointments

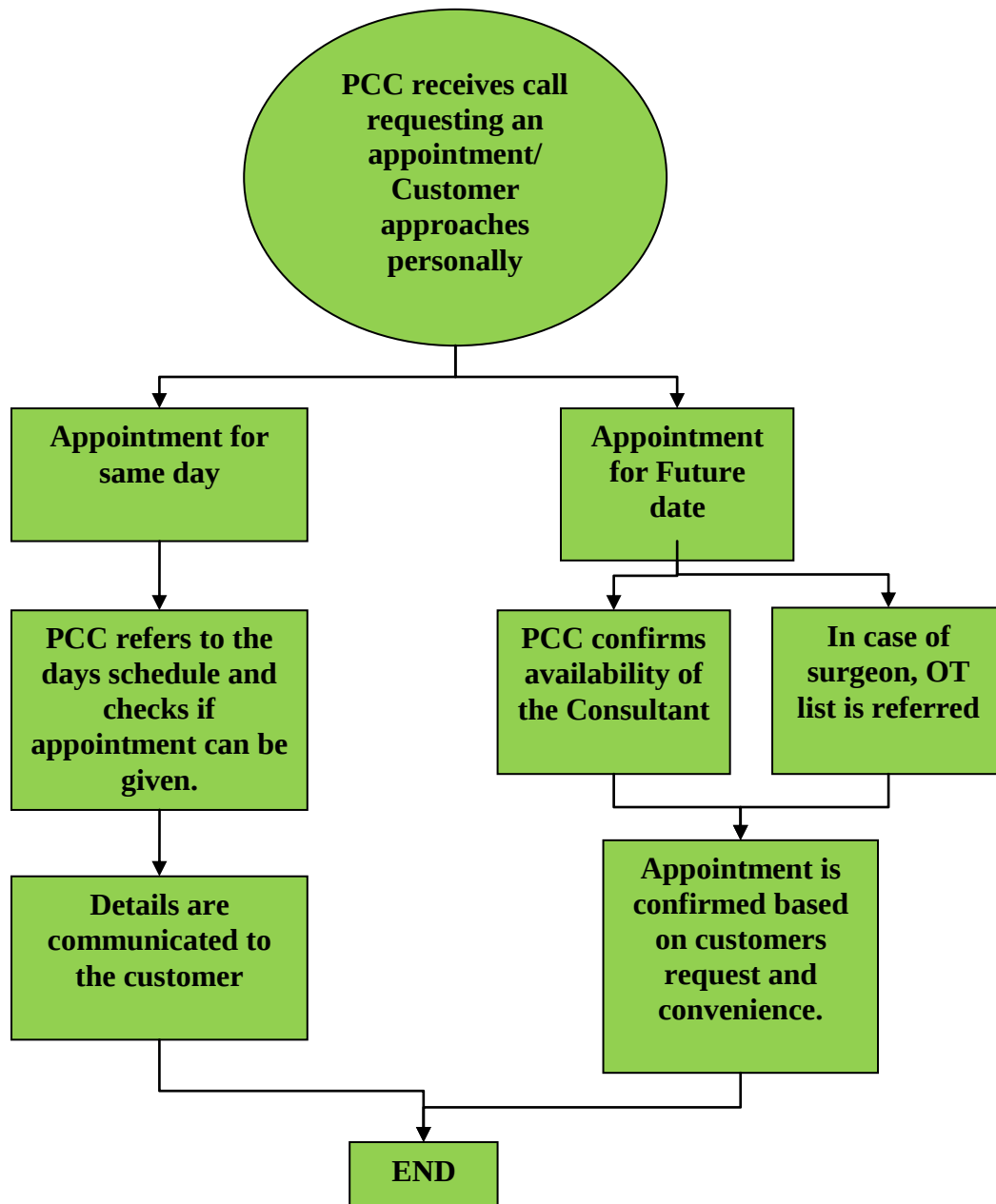


Figure 9. Flow Chart of Handling Appointments

Walk In Appointments

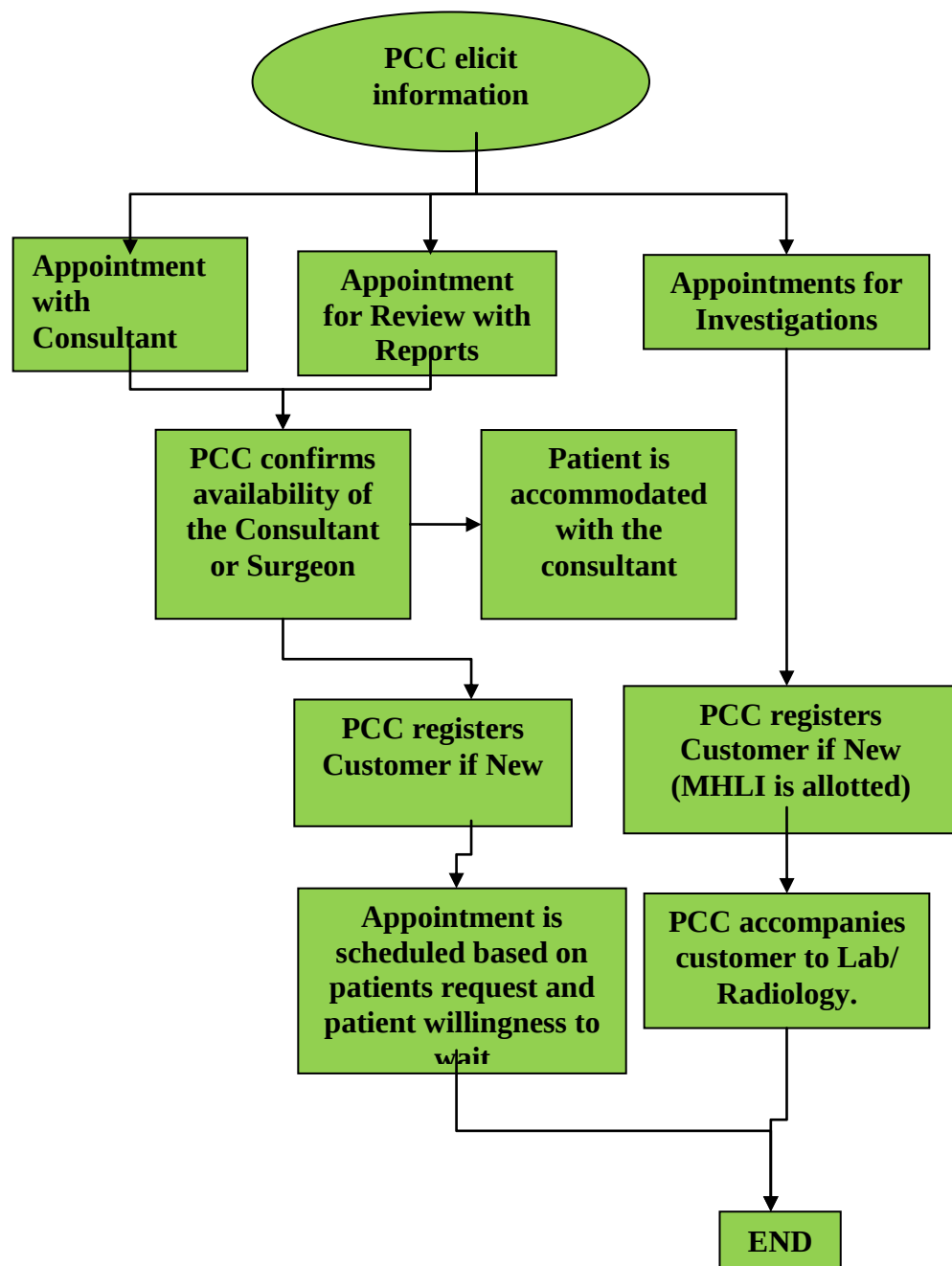


Figure 10. Flow Chart of Walk In Appointments

Registration Form



Registration Form

Personal Details :

First Name _____ Last Name _____
Next of Kin _____ Relationship(Please specify) _____
Father's/Husband's Name (Please tick) _____
Nationality _____
Date of Birth ☐☐ DD ☐☐ MM ☐☐☐☐ YYYY Age ☐☐ Years
Gender ☐ M ☐ F Martial status ☐ Single ☐ Married

Contact Details

House / Flat No. _____
Locality / Colony _____
City _____ State _____ Country _____
Residence No. _____ Office No. _____
Mobile No. _____ Email _____

Other Details

Present Occupation

☐ Corporate / Embassy Official ☐ Govt / PSU Employee
☐ Physician ☐ Retired ☐ Bussinessman
☐ Housewife ☐ Others(Please specify) _____

How did you come to know of Max Healthcare?

☐ Referred by Doctor ☐ Hospital ☐ Friends/Relatives
☐ Newspaper / Advertisement ☐ Website ☐ Other(Please specify) _____

Name of referring Doctor / Hospital _____

In case of emergency, contact Mr/ Ms _____

Phone No. _____ Local Address _____

Declaration

I here by declare that the facts stated above are true to the best of my knowledge and belief.

Signature of Patient / Relative _____ Relationship _____

For Office Use Only

Date & Time _____ Registration No. _____
PCC/ PCE Signature _____

All fields are mandartory, to be filled

Marketing / Registration Form / Rev. 1.0/ 1 April

Figure 11. Patient Registration Form

OPD Patient Registration, Consultation, Diagnostic and Treatment Process

1. Setting up an appointment

- Patient Fixes OPD Consult or Diagnostics Appointment over phone / walk in.
- Appointment fixed in Appointment schedule / Equipment schedule
- Patient visits the facility and is guided to the OPD counter for Registration process by Helpdesk

2. Patient Registration & invoice generation

- Patient meets the PCE/PCC & fills the registration form or gives details if already registered.
- Patient Details entered in HIS
- Discount is given if patient is a senior citizen or from any corporate with which we have an arrangement
- Patient pays by Cash / Credit Card or Credit bill raised if corporate patient.
- Patient invoice generated (as per Standard Tariff list) with the Registration No. & service detail.
- If any wrong entry is made or test could not be conducted, refund voucher to be generated
- Manual invoice generated as per approved pricing policy in case HIS not working or if any new service or tariff introduced.
- The new service/ tariff is intimated to IT for incorporation into HIS
- Manual invoices are updated in HIS if incorporated in HIS same day.
- If tariff is not incorporated in HIS then approval from accounts taken to update the HIS whenever new service/ tariff incorporated in HIS and scrolls is signed by Duty Manager.
- At the End of shift, PCC/ PCE takes out cash scroll from HIS.

3. Patient Consult / Diagnosis & Treatment.

- Patient has been guided to the Nursing counter
Nurse records patients' vitals followed by consultation with Doctor.

4. Patient visits Labs/ Pharmacy

- Patient visits various Diagnostic dept. and tests are conducted in Labs and is informed about the date of collecting the Report
Patient visits pharmacy if Drugs prescribed by doctor.

5. Review Consultation appointment made

- Patient contacts PCC/PCE at OPD counter for fixing review appointment date.
In case report not available, generate daily pending report list and follow up.

IPD Working

ADMISSION & DISCHARGE DESK			
GROUND FLOOR (TWO DESKS)	ONCO DAY CARE	MAX ELITE	SECOND FLOOR (TWO DESKS)

Inpatient services are hospital services and items furnished to inpatients including beds, nursing, diagnostic, therapeutic, medical and surgical services.

Admission Procedure

Pre Admission Investigation Process

- Patient approaches IP desk with admission request form issued by the doctor
- Patient details entered in HIS, advance collected and Estimation is provided to the patient.
- Advance receipt & Pre admission no generated
- Patient is told about the reporting time and entry is made in Expected Admission register

Patient Admission Process

- Patient informed about the charges and other essential details like Estimated Expense, inpatient Information, etc. required during the stay.
- Availability of room is checked from the Bed manager.
- Patient details entered in HIS and face sheet generated
- Advance amount taken from the patient by cash / credit card / as per the estimated cost
- For TPA patient pre authorization form is given to be filled up by the patient and the doctor (see insurance process) and signature is taken on in patient Information Sheet for TPA Hospital Policy.
- Passes are issued to the patient as per visitor policy and entry made on Face Sheet (Office Copy).
- Patient folder is created & sent to the wards along with a Front Office Staff / GDA.
For any International patient International Patient Services are informed

Admission Process Map

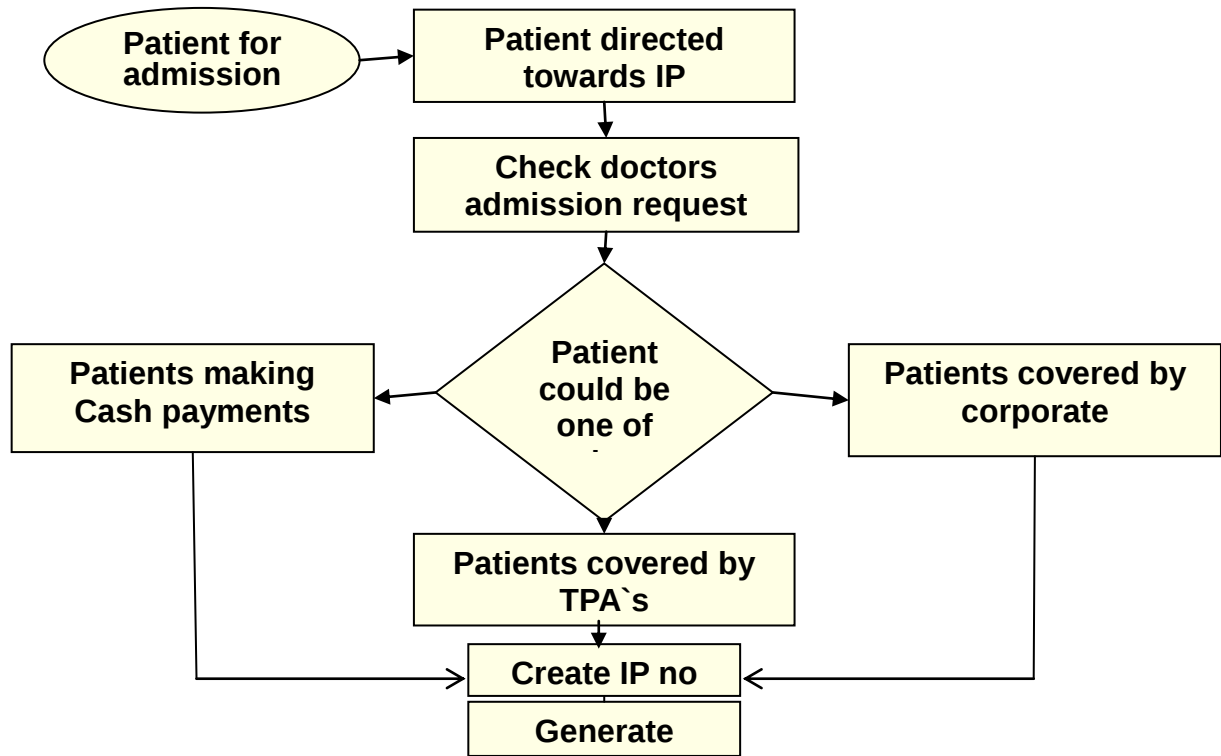


Figure 12. Admission Process Map

Admission Request Form

MAX HEALTHCARE
Caring for you... for life

IN PATIENT ADMISSION REQUEST FORM

EMERGENCY ☐ ROUTINE ☐
EMERGENCY NO. _____

Name of the patient : _____

Age : _____ Sex Male ☐ Female ☐ Reg. No. _____

Admitting Doctor : _____

Provisional Diagnosis : _____

Proposed date & time of Admission : _____ Mode of settlement ☐ Cash ☐ Insurance ☐ Others ☐

(Please contact the Front Desk for details on approved "Bed category" & "Amount covered" for all other than CASH settlement mode)

MEDICAL		SURGICAL	
Estimated length of stay	_____	Estimated length of stay	_____
Ward/ Bed _____ ICU _____		Ward/ Bed _____ ICU _____	
Estimated Investigations	Routine _____ Medium _____ High _____	Procedure / Plan _____ Name of Surgery / Procedure/ Category _____ Type of anesthesia _____ Estimated cost of implants _____	
Estimated Pharmacy / Consumables	Routine _____ Medium _____ High _____	Estimated Investigations	Routine _____ Medium _____ High _____
		Estimated Pharmacy / Consumables	Routine _____ Medium _____ High _____
		Asst Surgeon (if any) _____ Special Equipment (if any) _____ Surgeon from any other speciality _____	

Other / Misc. Charges _____

Name of Doctor _____ Speciality _____

Signature _____ Date _____

Surgery patients to please note :

- Please confirm the bed status for your admission before arrival to the hospital on the scheduled date ()
- Please bring your OT booking slip on the day of admission.
- Please bring all your reports/ Angio CD/ Cassette (if applicable) at the time of admission
- Please refer to In Patients guide for further information.

Undertaking by Patient/ Attendant :

I _____ S/o, d/o, w/o _____ R/o _____ hereby undertake to pay all medical & services charges for treatment to be provided to _____ (name of Patient), by the Hospital. I have understood the above estimated amount may increase or decrease depending upon the actual treatment provided per the medical condition. _____ (Signature)

(For Office Use Only)

Emergency contact _____ Phone no. _____
Billing Contact _____ Phone no. _____
Informed Nursing station : _____ & time of info _____
Name of staff _____ Date & Time _____
PCC / PCE signature _____
Photo ID / Address proof collected _____

Disclaimer :
The estimate of _____ given for the proposed treatment of _____ [Name of Patient] has been calculated on the basis of preliminary assessment of the Doctor. This estimated amount may increase or decrease based on the actual treatment & services to be provided to the Patient during his/her stay in the Hospital. Hospital shall not be liable for any decrease/increase of the treatment expenses and Patient shall be responsible to clear all the dues as and when accruing against the services provided by the Hospital.

Figure 13. Admission Request Form

Observational Analysis

Positive Features

- All the signage is in local language and placed appropriately.
- Eleven steps of hand washing protocol, Mission-Vision and department specific charts are put up at every Nurses Station, desks and supervisor rooms.
- Security guards are assigned at the entrance of every ward/area and elevators to maintain decorum.
- In-house ATM facility available.
- Special play area for children

Limitations

- Number of washrooms in OPD area is less compared to patient load.
- According to NABH guidelines, there should be a prayer room in the hospital, which is not present in Max Super Speciality Hospital, Mohali.
- Radiation exposure is on three floors (Lower Basement- Radiation Therapy, Ground Floor- Radiology and Nuclear Medicine departments and First Floor- Endoscopy/Bronchoscopy, Cath Labs).
- IPDs and ICUs are supposed to be quiet, acknowledging the demand of the patients, but nursing staff creates lot of noise.
- There is no queue system in pharmacy.
- There is no waiting area for pharmacy. It's combined with the OPD waiting area.
- Space constraint in OPD and Cafeteria as well as less sitting arrangement.
- Delayed response of the staff to the bell alarm by patients in IPD.
- Despite of different coloured uniforms for clinical and non-clinical staff, there still is no distinction in the overalls of physicians and paramedical staff.
- Informed consent to be filled by patient or their family members before undergoing any procedure is not in local language and incompletely filled.
- Red and Yellow coloured bags are used in the OP-Pharmacy where only green coloured bags should be used. Red bags are used for high alert medication and the yellow bags are used for stat/now orders.

- Number of chairs is present is a big problem in IPDs.

Suggestions

1. Chairs in the waiting area can be better organized and more chairs can be added by utilizing space properly.
2. Only green coloured bags should be used in the pharmacy replenishing their stock well in time by setting an appropriate Re-Order Level.
3. Dress Code for all the staff should be properly worked out assigning different colours to different staff members to avoid confusion. Charts explaining the colour code can also be displayed at various places.
4. A floor monitor (Can be made someone from the supervisors' team) should be assigned specifically to maintain discipline among the staff members.
5. Proper queue system should be implemented in the OP-Pharmacy with a help of a security person or a token system.
6. Nurses should be briefed and strictly monitored to answer the in-patient's call within a span of five minutes.
7. More chairs and other furniture should be bought and adequately distributed.
8. Informed consent should be duly signed and completed there and then at the time of admission or procedure. Strict action should be taken against the assigned staff who fails to do so.
9. A pooja room/area should be accommodated near the front desk on ground floor.

Conclusion

Max Super Speciality Hospital, Mohali is one of the leading hospitals in Punjab providing healthcare services to patients from the whole of North India. Average OPD patients for a day sum up to 324 resulting a jam packed setting from morning to evening. The occupancy of IPD also reaches a 100 percent indicating heavy patient load. The three cafeterias present in the premises along with the Food and Beverage department fully cover the patients, their attendants and staff well. The staff is well mannered and courteous. But since nothing is perfect, the management of this hospital isn't free of errors either. However, the able and dedicated staff of the hospital leaves no stone unturned in minimizing those. Since we didn't get an opportunity to visit every department and observe their functioning in detail, we could only list down the more visible cases of mismanagement. But we can easily say that with a very skilled team of doctors and dedicated nursing, administration and non-administration staff, Max Super Speciality Hospital, Mohali can achieve greater heights.

**Job Satisfaction among General Duty Assistant (GDA) in
Max Super Speciality Hospital,
Mohali**

1. Introduction

Job satisfaction is the contentment that comes from work. Hospital is a highly labour intensive organization, where the satisfaction of employees is indispensable for achieving the organizational objectives, since there is high interaction between employee and customer.

Retaining employees is the greatest challenge faced today by organizations. Human asset is the most important asset and retaining them is more important. This study aims at finding out job satisfaction level of GDA staff in Max Super Speciality Hospital, Mohali. One of the primary reasons for evaluating employee satisfaction is to improve the quality of patient care.

This report would like to assess the job satisfaction level of GDA staff, identify the factors influencing job satisfaction and give suggestions to improve the job satisfaction level of employees for retention.

2. Review of Literature

In a study by Senbounsou Khamlub et al in Vientiane in 2011 on 164 health care workers using self administered questionnaires showed that 96.75% employees were satisfied with their job except for their salary⁽¹⁾. Another study by Tarja Kvist et al in United states in 2013 on 1424 employees of the hospital showed that job satisfaction survey help in overcoming the problems faced by the staff⁽²⁾.

A study by Ramesh Kumar et al in 2012 in Islamabad on 73 Public health professional showed that 14% of them were highly dissatisfied due to low salaries, lack of training opportunities, improper supervision and inadequate financial rewards⁽³⁾.

Another study by Kaur. S et al in 2009 in a tertiary hospital in Delhi on 250 health professional showed that 49,6% were not satisfied with the duration of working , 45.6% were not satisfied due to low salary⁽⁴⁾.

A study by Pengqian Fang et al in Hubei, China, in 2015 on 2268 medical staff showed that half of them worked overtime. Within pilot county hospitals, less than half of the medical staff members were satisfied with current job and they have evidently less satisfaction on compensation packages and learning and training opportunities⁽⁵⁾.

3. Problem Justification

There is a definitive link between employee attitudes and patient satisfaction. If employees are unhappy or dissatisfied, despite their best efforts; it is difficult for them to conceal this factor when interacting with patients and other staff members. One of the primary reasons for evaluating employee satisfaction is to identify problems and try to resolve them before they impact on patient care. Improving the quality of patient care in hospitals is a vital and necessary activity.

General duty assistant (GDA) work in collaboration with doctors and nurses, so there is a need that they should have complete satisfaction in their work. Most of the health organizations give importance to primary healthcare providers thereby neglecting the role of secondary healthcare providers (GDA) who are equally important.

Brick, sand, mortar, all, are equally important to construct a wall; working on the same principle Max regard each employee uniformly and give due consideration to know the level of job satisfaction of GDA.

4. Objectives

- a) To assess level of satisfaction among the GDA staff in Max Super Speciality Hospital, Mohali.
- b) To study various factors affecting job satisfaction.

5. Research Methodology

5.1 Research Design-Analytical Cross-sectional Qualitative study.

5.2 Study Population- The study was conducted among GDA, aged 18-60 year posted at all the departments at Max hospital in morning shift.

5.3 Sample Size- 100

5.4 Sampling Technique- Purposive/ Convenience sampling

5.5 Study Tool- For quantitative data collection, schedule based survey was conducted.

6. Data Collection

Primary data is collected using structured questionnaire with closed ended questions (See Annexure 1)

7. Data Analysis and Interpretation

The acquired data is analyzed using Microsoft excel and Chi-Square test.

7.1 Job Satisfaction Status

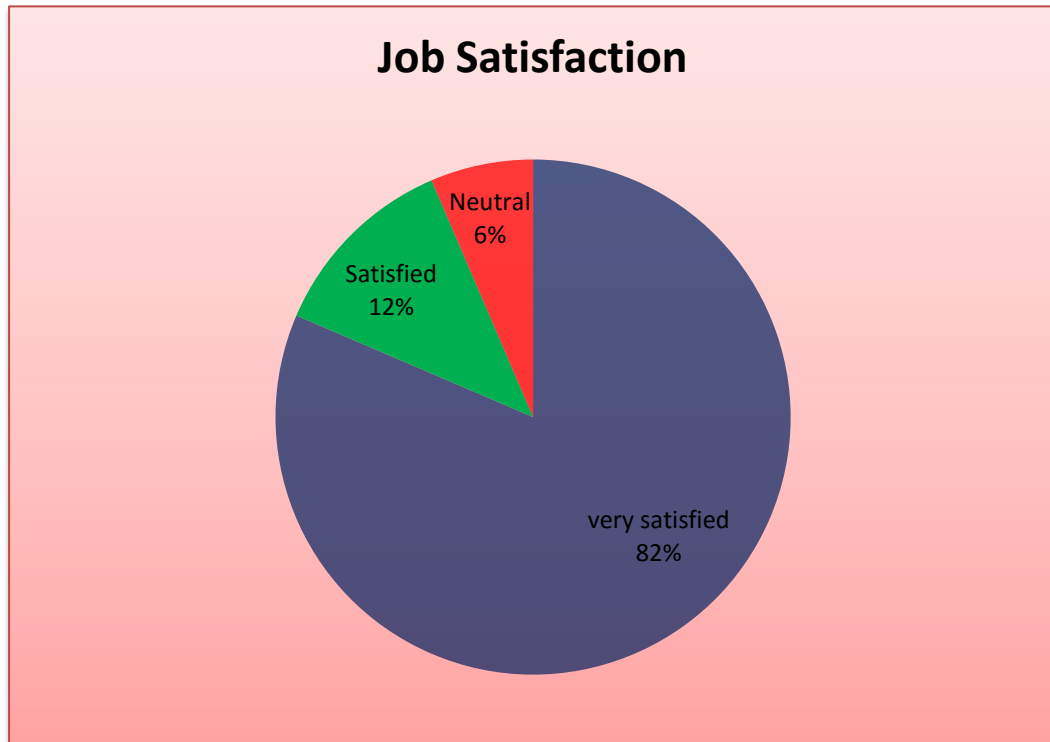


Figure 14 Job satisfaction status

7.2 Gender Based Analysis

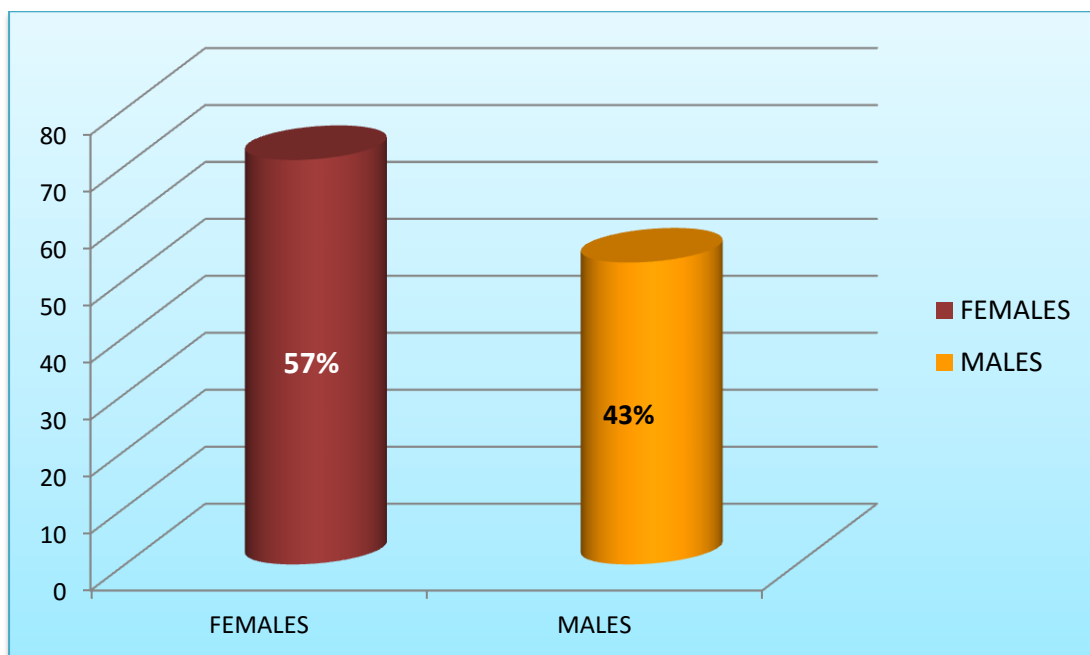


Figure 15 Gender of the respondents

CHI SQUARE TEST FOR GENDER OF THE RESPONDENTS AND JOB SATISFACTION

Null Hypothesis (H0): Job satisfaction is independent of gender of the employee.

Alternate Hypothesis (H1): Job satisfaction is dependent on gender of the employee.

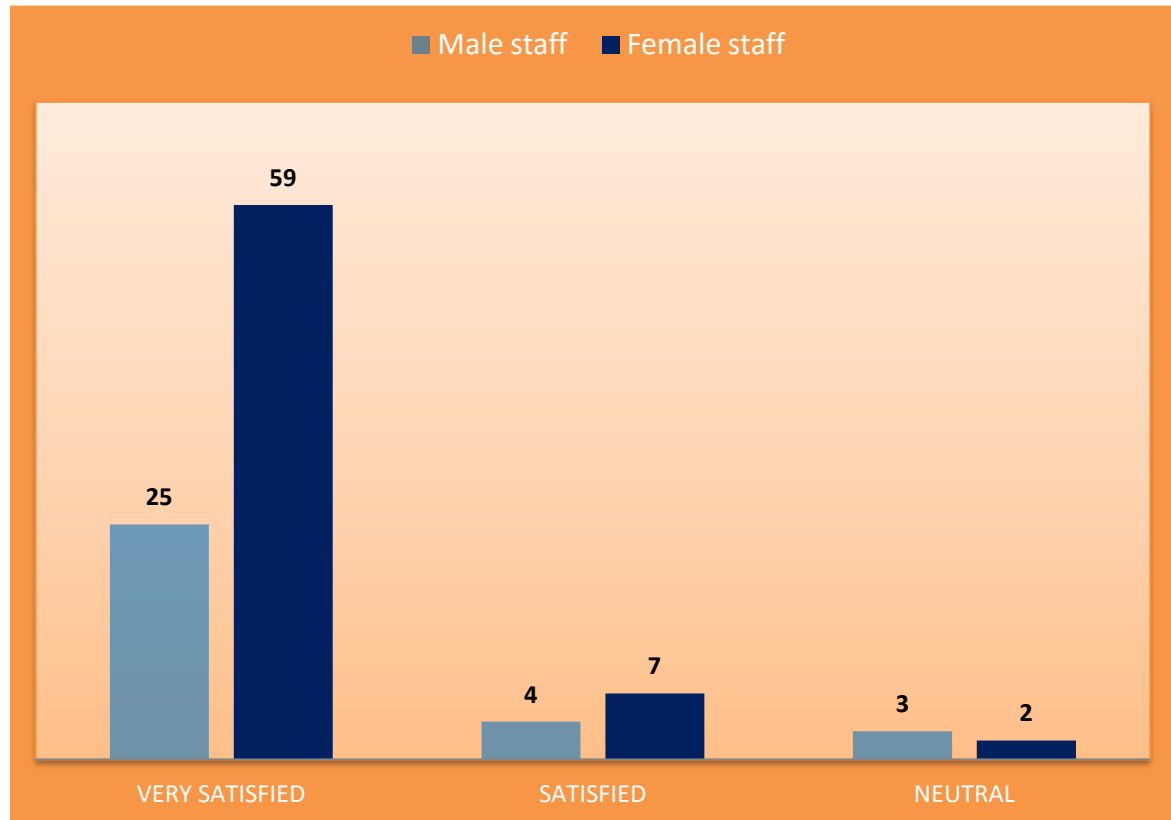


Figure 16 Gender and job satisfaction

CHI-SQUARE TEST

Table 2 Chi-square test between gender and job satisfaction

Chi-Square (calculated)	2.834
Chi-Square (observed)	5.99
Degree of freedom	2

INTERPRETATION: Since observed Chi-square value is more than calculated value, Null Hypothesis is accepted and Alternate Hypothesis is rejected, which implies the job satisfaction is independent of the gender of the employee

7.3 Experience based analysis (in study hospital)

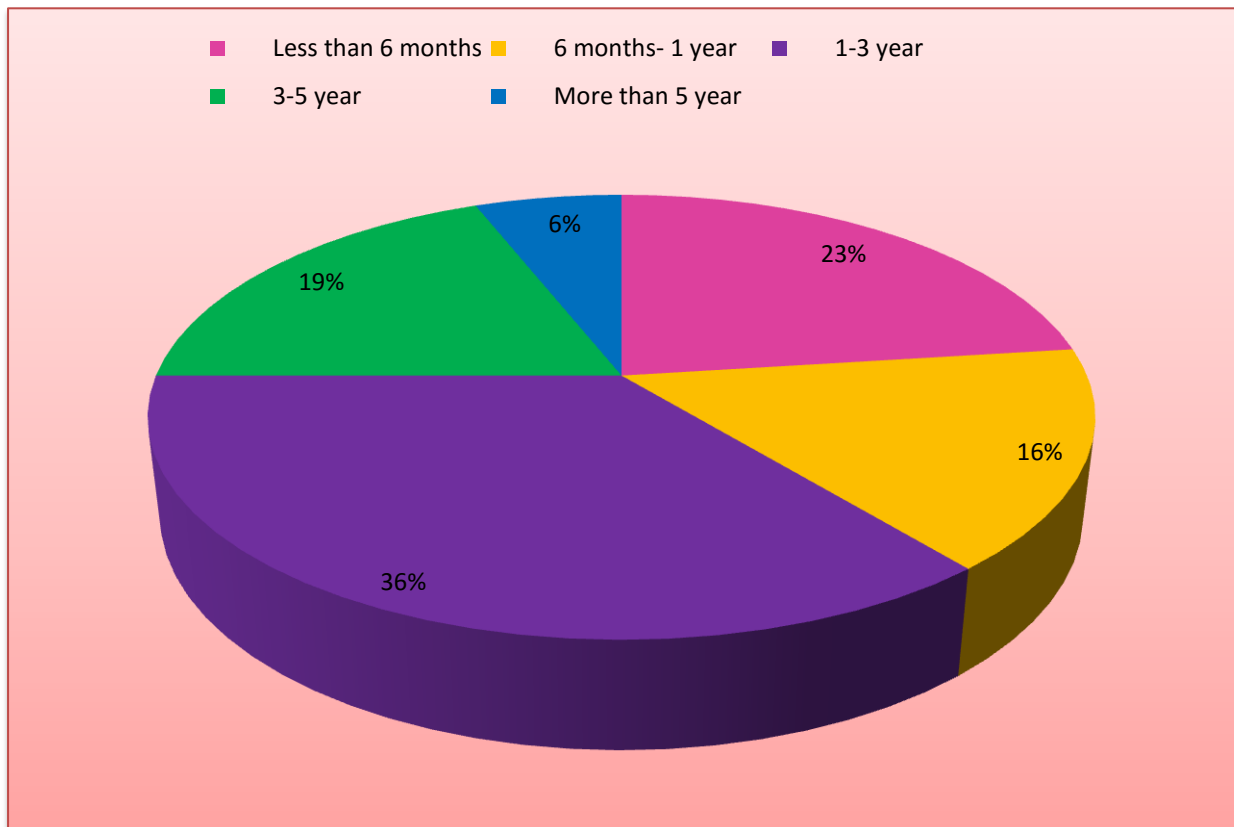


Figure 17 Experience of the respondents

CHI SQUARE TEST FOR EXPERIENCE OF THE RESPONDENTS IN STUDY HOSPITAL AND JOB SATISFACTION

Null Hypothesis (H0): Job satisfaction is independent of experience of the employee in study hospital.

Alternate Hypothesis (H1): Job satisfaction is dependent on experience of the employee in study hospital.

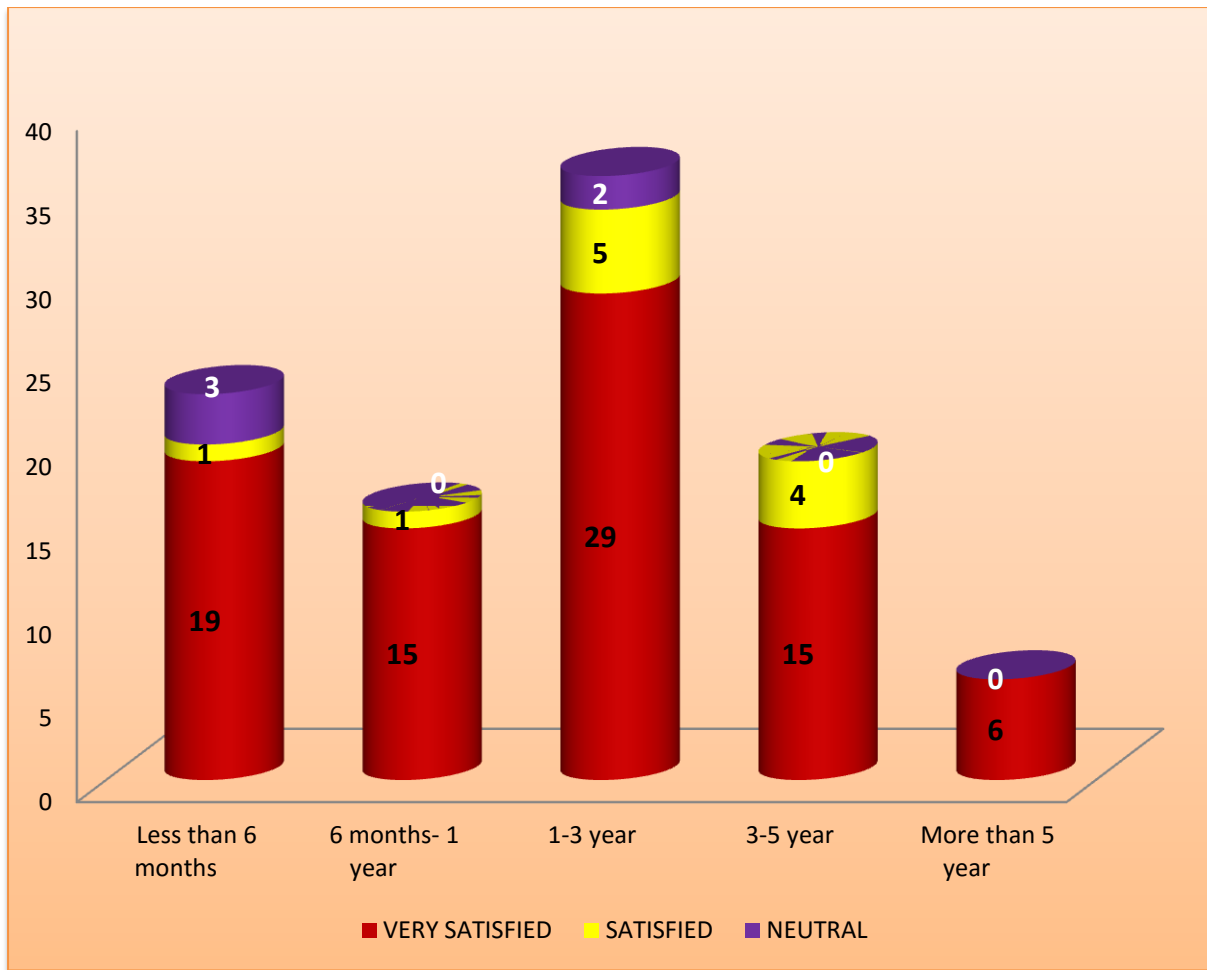


Figure 18 Relation between experience and job satisfaction

CHI SQUARE TEST

Table 3 Chi-square test between experience and job satisfaction

Chi-Square (calculated)	9.466
Chi-Square (observed)	15.507
Degree of freedom	8

INTERPRETATION: Since observed Chi-Square value is more than calculated value, Null Hypothesis is accepted and Alternate Hypothesis is rejected, which implies the job satisfaction is independent of the experience of the employee in study hospital.

7.4 Employee Satisfaction

Table 4 Employee satisfaction survey

Sno	QUESTIONS	STRONGLY AGREE	SOME WHAT AGREE	NEUTRAL	SOME WHAT DISAGREE	STRONGLY DISAGREE
1	Sufficient material and equipments are available	72	1	13	14	0
2	Clarity in the job	87	0	11	2	0
3	Cooperation between departments	83	12	5	0	0
4	Salary structure	0	3	83	14	0
5	Training programs	94	0	6	0	0
6	Fair treatment by supervisor	88	5	7	0	0
7	Reward and recognition to good performer by Max	0	0	0	0	100
8	Awareness of employee rights	52	9	16	23	0
9	Will recommend to others	98	2	0	0	0
10	Organisation give consideration to the family problems	89	11	0	0	0

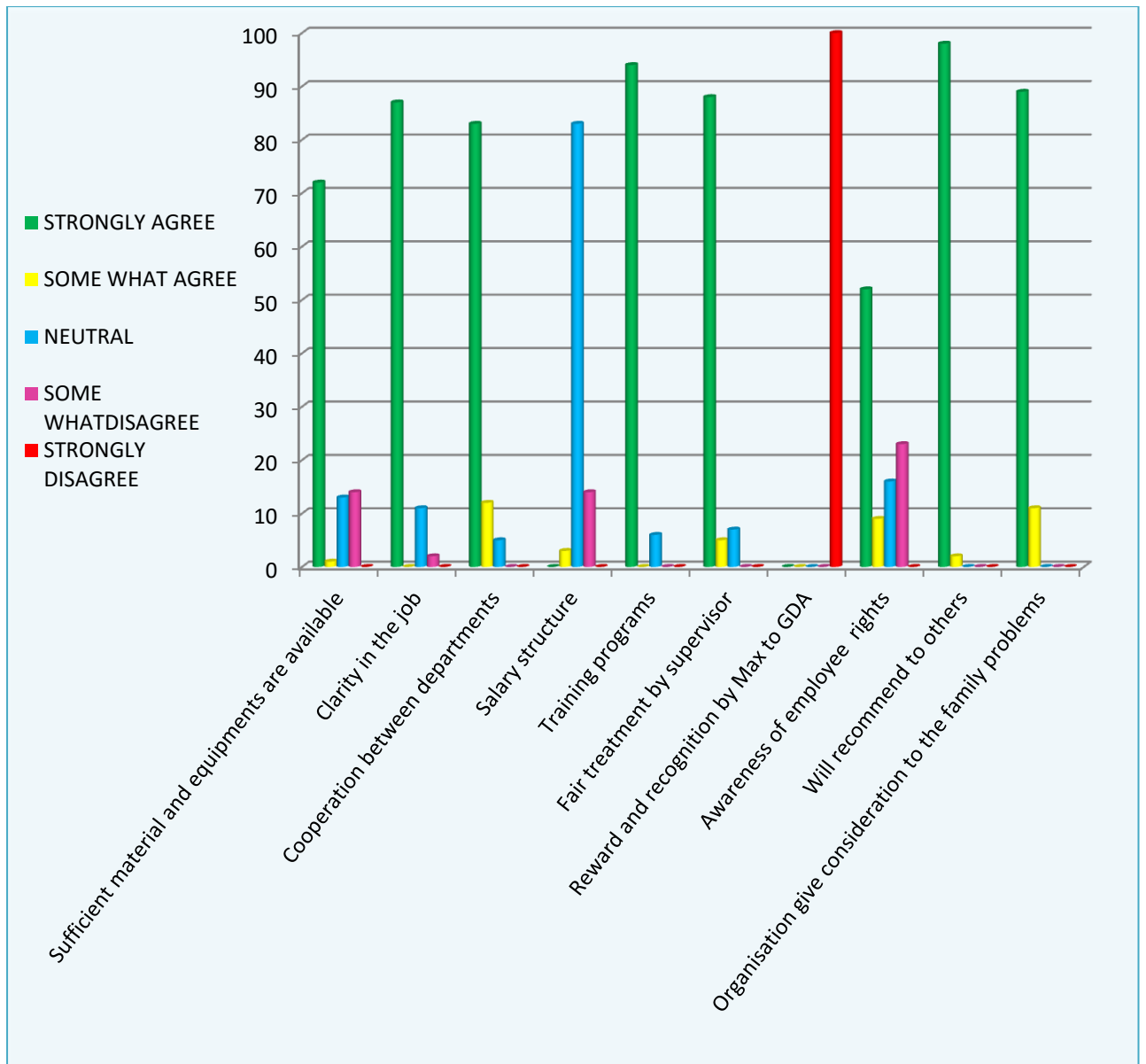


Figure 19 Employee satisfaction survey

JOB SATISFACTION INDEX

- There is a five-point scale in the questionnaire based on which the employee responses range from Strongly Agree, Somewhat Agree, Neutral, Somewhat Disagree and Strongly Disagree.
- The total number of questions with answers against each response is calculated. (5, 4, 3, 2, 1).

- The TOTAL SCORE RECEIVED = (total number of responses of 5 * 5)+(total number of responses of 4 * 4)+(total number of responses of 3 * 3)+(total number of responses of 2 * 2)+(total number of responses of 1 * 1).
- Calculate the MAXIMUM TOTAL SCORE.
- This gives the INDEX which is the (TOTAL SCORE RECEIVED / MAXIMUM TOTAL SCORE) * 100

CALCULATION OF JOB SATISFACTION INDEX

$$\begin{aligned}\text{JSI} &= (\text{Total Score Received}/\text{Maximum Total Score}) * 100 \\ &= (4116/5000)* 100 \\ &=82.32\%\end{aligned}$$

8. Findings

- The Job Satisfaction Index of the GDA staff at Max Super Speciality Hospital, Mohali in the scale of 100 is **82.32%**.
- **82%** GDA staff is very satisfied 12% is satisfied and 6% are neutral.
- Most respondents (**57%**) are female, while males are 43%.
- Most respondents (**36%**) have 1-3 years of experience, 23% of the respondents have less than 6 months experience, 19% have 3-5 years experience, 16% have 6 months to 1 year while only 6% have more than 5 years of experience.
- Most respondents (**72%**) agree that they have materials and equipments to do their work right, 14% were somewhat disagree while 13% did not share their opinion. This implies that the hospital authority should revisit the infrastructure available to the staff, particularly in relation with the laundry.
- Most respondents agree that they are explained the duties and responsibilities entailed in their job description, only 5% disagree while 2% did not share their opinion. This implies that the employees should be properly briefed about their responsibilities towards their work.
- All **87%** GDA staff has clarity about their job. This implies that the employees are properly briefed about their responsibilities towards their work. 11% were neutral and 2% staff were somewhat disagree.

- Most respondents **(83%)** Strongly agree that different departments cooperate with each other, 12% somewhat agree while 5% did not share their opinion. This implies that the interdepartmental co-operation is better.
- Most respondents **(83%)** did not share their experience about salary structure, 3% were somewhat agree, 14% were somewhat disagree. This implies that the salary structure should be reviewed and transparency should be maintained.
- All **94%** agree that they receive adequate training, 6% did not share their opinion.
- Most respondents agree that people they work with are cooperative, 17% disagree while 11% did not share their opinion. This implies that they should take training for employees for their self development.
- Most respondents **(88%)** feel that they are treated fairly by their supervisors; while 7% did not share their opinion. This implies that GDA staff is treated fairly by the supervisor.
- Respondents feel that they are not at all recognized and rewarded for good work. This implies that there should be the rewards and recognition procedure to boost the morale of the staff and to motivate them for better performance.
- Most respondents **(52%)** feel that they are aware of employee rights that are currently followed in Max hospital, 23% somewhat disagree (mostly new joiners) while 16% did not share their opinion. This implies that the new entries should be made aware about their rights.
- Most respondents **(98%)** state that they would recommend employment at Max hospital. This implies that people would recommend and promote working at Max hospital, Mohali.
- Most respondents feel that the organization is flexible about the issues related to the family problem of the GDA staff.

9. Strengths

1. Good intradepartmental team work is seen among GDA staff.
2. GDA's Work efficiently even during heavy patient load.

10. Suggestions

The following are the valuable suggestions for the hospital to improve the current job satisfaction level of their GDA staff.

- Employees should be given proper Job Orientation at the time of joining.
- The Inter as well as Intra-Departmental communication should be effective, informative and systematic.
- Training programs should be conducted to develop interpersonal and soft skills of the employees.
- Proper Performance appraisal techniques should be followed periodically.
- Employee should be aware of their KRAs and also should have discussions with supervisors.
- Periodic counselling of the employees should be done.
- Promotion policies, opportunities and rewards may be increased.
- Sufficient amount of materials (laundry) should be provided to the staff.

11. Limitations

- a. The study is subjected to the understanding bias and prejudices of respondents.
- b. The study is based on available information provided by the GDA staff in a short time span.

12. Conclusion

Job satisfaction is general attitude towards the job which varies between the individuals. From the finding and analysis, it is clear that the level of job satisfaction of employees in the hospital is good. It shows that job satisfaction strongly influences the productive efficiency of a hospital and increases effectiveness by making the employees more participative. The study on workers satisfactions level revealed that employees were satisfied on majority of the factors. The analysis thus has thrown light on various factors. Suitable suggestions are provided to further improve job satisfaction level. The findings and suggestions provided will help the hospital to increase the satisfaction level of employee and to motivate them in their job.

**Raising the Level of Patient Satisfaction in the
Department of Nutrition and Dietetics in Max Super
Speciality Hospital,
Mohali**

1. Introduction

Food and Beverages (FNB) department plays an important role in prognosis of the patient and patient satisfaction. Hence the hospital should focus on maintaining the quality of FNB department. Generally FNB department in a hospital is used as the value added service aiding in patient satisfaction. Hospital FNB management software works in full concert with the hospital kitchen to prepare patient's meal as per the dietician's recommendations.

All patients have a right to safe, nutritious food. They expect that their nutritional needs will be fulfilled during hospitalisation. The benefits of providing nutritional support have been documented in several clinical situations. While some patients may benefit from special techniques of nutritional support, most depend on ordinary hospital food to improve or maintain their nutritional status in order to optimise their recovery from illness.

2. Problem Justification

Food is vitally important to people. It embraces their health and enjoyment. The nutritional value of food left uneaten is nil. At best, mealtimes can provide both an enjoyable experience and the nutrients to support recovery and promote health including psychological well-being. Dieticians should promote improvement through FNB service that are good quality, safe, nutritionally adequate and appropriately patient focussed.

Providing the best possible foodservice for hospital patients is complex, and may be a difficult and unremitting task. It depends on a close and effective collaboration between a number of people who may have very different priorities. Meals provided to the patients must have the capacity to meet all nutritional needs. They must also be appealing. Patients will not eat food that is unfamiliar or that they do not like, especially when they are feeling unwell and have poor appetites.

In case of patient under medical supervision, patients are unable to make their normal food choices and it may be difficult and undesirable for them to obtain food elsewhere. Patients undergoing medical treatment are deprived of the normal consumer power, unaware of food choices according to their physical condition and are left dependent on hospital food and beverage provision. Where possible, patients should be involved in menu design. In addition, menu planners must be able to step into the patients' shoes and use local knowledge and feedback to inform menu choices.

Very little Indian data is available on quality of nutrition services in hospitals, but Max consider food service and its quality as one of the prime component which influences patients' satisfaction with their overall hospital experience. This study helps to know the level of patient satisfaction in the department of FNB and to adopt new way to boost them.

3. Objective

- a. To assess the level of patient satisfaction in FNB department.
- b. To identify the gaps in the services delivered to the patient.

4. Research Methodology

4.1 Research Design- Descriptive cross-sectional Qualitative study.

4.2 Study Population- The study was conducted on the patients admitted in the IPD at Max Super Speciality Hospital, Mohali.

4.3 Sample Size- 200

4.4 Sampling Technique- Purposive/ Convenience sampling

4.5 Study Tool- Observation and interview.

5. Data Collection

Primary data was collected, for observational study, through observation and by interviewing the patients.

6. Food and Beverage Department at Max Super Speciality Hospital, Mohali

6.1 LOCATION- Ground floor

6.2 LAYOUT- Cooking areas are divided into -

- a. Cutting and chopping area
- b. Cooking area
- c. dry storage area
- d. Utensils Washing area
- e. Vegetables washing area
- f. Food Distribution area

6.3 MENU

Table 5 Timings of the meal served

Services Offered	Meals	Timings
1 st	Early morning tea	06:00-06:30 AM
2 nd	Breakfast	08:00-09:00 AM
3 rd	Mid morning meal	10:45-11:30 AM
4 th	Lunch	01:00-02:00 PM
5 th	Evening tea	04:00-04:45 PM
6 th	Evening soup	05:45-06:30 PM
7 th	Dinner	07:45-08:45 PM

Night milk is provided to the patient who require high protein diet.

6.4 MANPOWER

- A. On-roll
- B. Out-sourced

6.4.1 ON-ROLL-

Table 6 Manpower (on -roll) in FNB Department

Supervisor	2
Dieticians	4

6.4.2 OUT-SOURCED-

Table 7 Manpower (out-sourced) in FNB Department

Manager	1
Dieticians	3
Supervisor	6
Order taker	2

Chef	1
Cook	13
Utility workers	13
Cashiers	2
Store keepers	2
Steward	25

- ❖ Different food items are packed and placed in trolleys, which has the provision for heating. The food items are then delivered hot to the patients.
- ❖ FNB Department keeps on acknowledging any new orders and accordingly the orders are served.

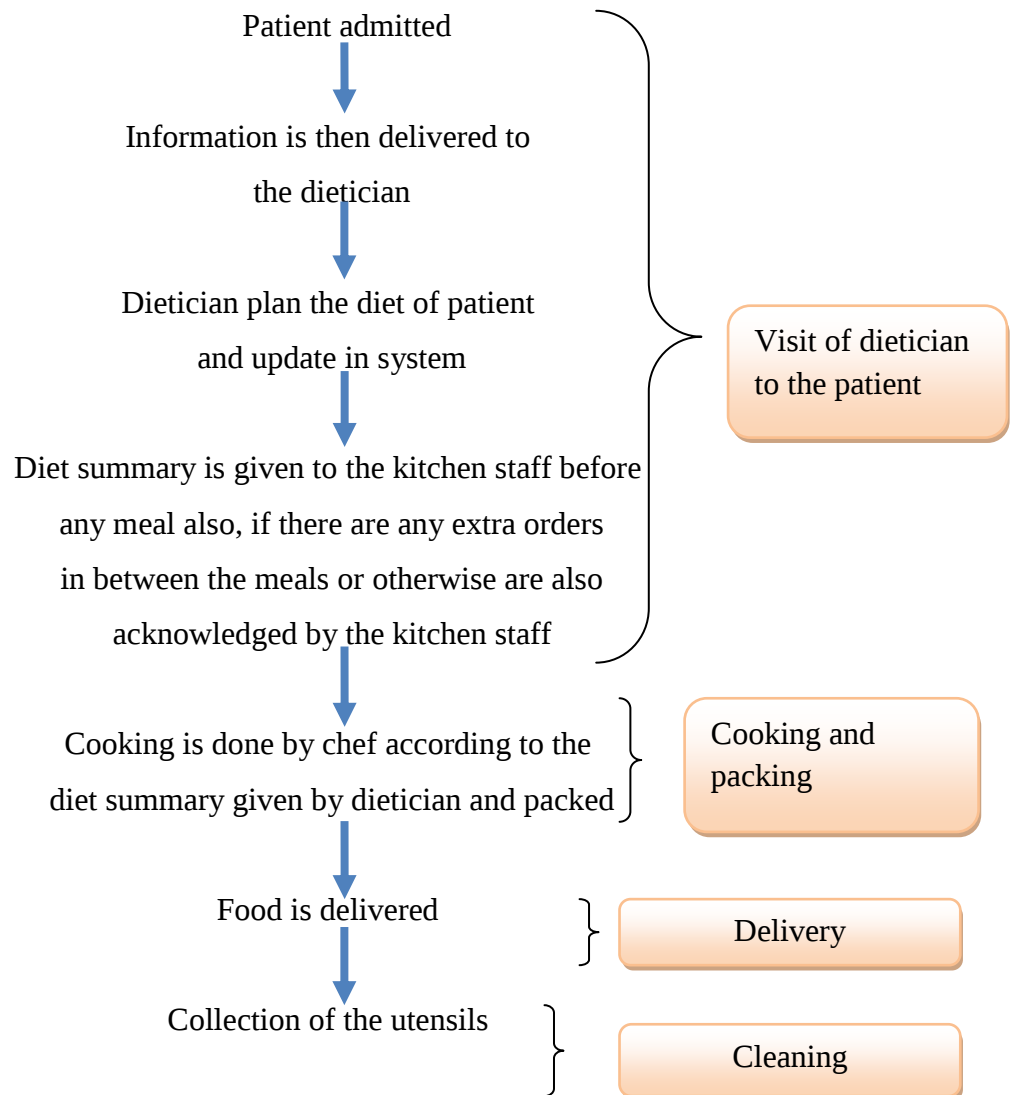
Dieticians-

Dieticians play a major role in the nutrition care of patients at hospital. The overall jobs performed by dieticians were menu planning, supervision of food preparation, maintenance of safe food, supervision of sanitation and hygiene, nutritional assessment and planning of diets.

According to standards one dietician for 40 beds,

Max, being 200 bedded require (5+2) dieticians (5 according to standards and 2 to compensate in case others are on leave).

6.5 PROCESS OF FOOD DELIVERY TO THE PATIENT



7. Findings

The problems faced by the patient arise at four different stages of service delivery by FNB department of Max Hospital, Mohali.

Though the patient's responses were variable, nevertheless, the results were helpful in establishing a baseline for improvement and for identifying the foodservice loopholes in the hospital through patient's feedback. All the issues raised by patients during the study were used for developing recommendations to provide better nutrition service to patient.

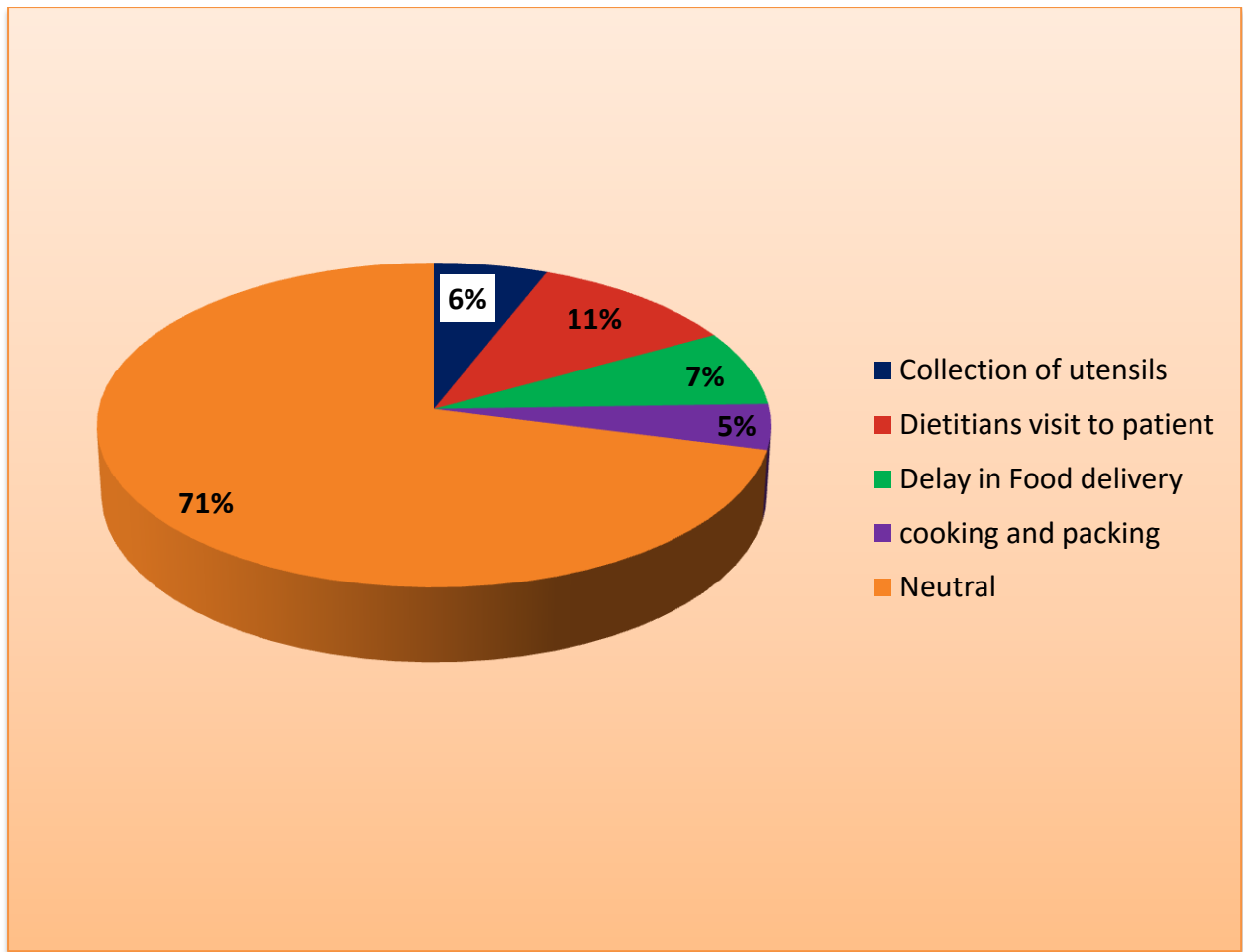


Figure 20 Representation of major problems faced by FNB Department in percentage

- The problems of **11%** of the patients are related to dietitians.
- **7%** of patients complain about delay in delivery of food while **6%** faces problem due to delay in collection of utensils at night.
- **5%** patient bear problems due to improper cooking of food items.
- **71%** patients were satisfied with the service provided by FNB department.

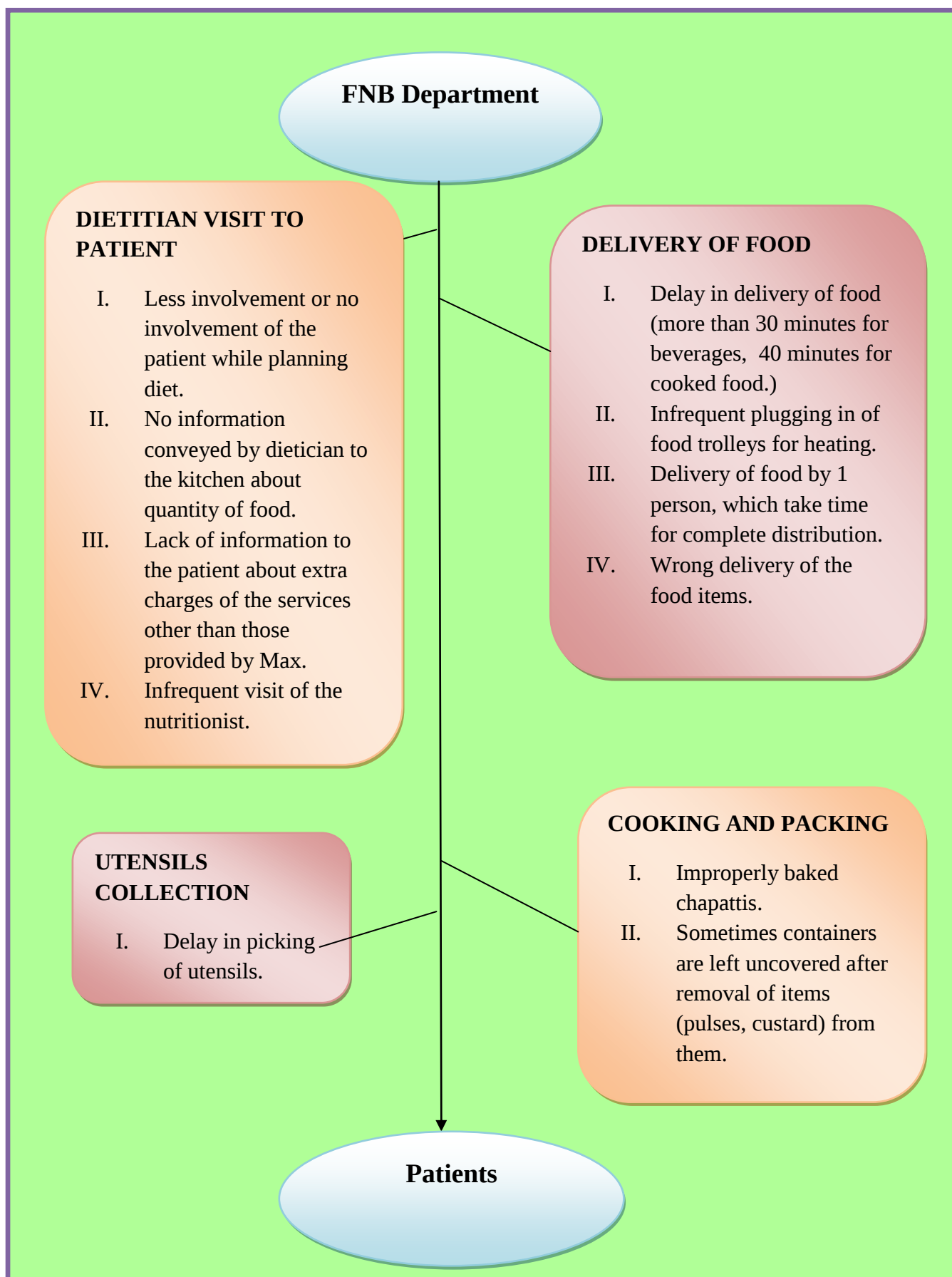


Figure 21 Various issues of FNB Department

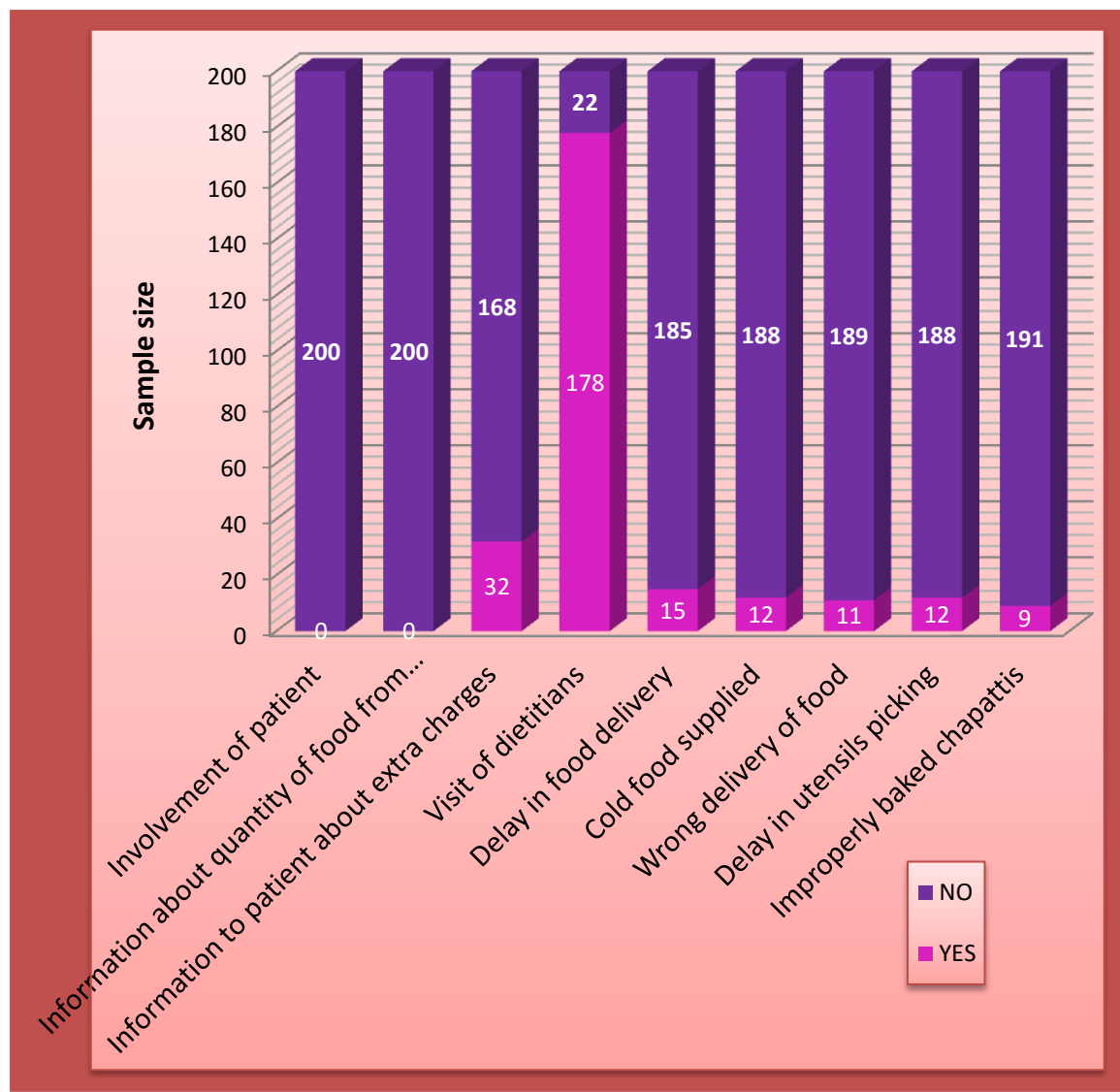


Figure 22 Graph depicting individual problems of patients

- Dieticians neither involve patients in planning their diet nor ask patient about the quantity of food.
- **84%** patients are not informed about extra charges of food items other than the menu by dieticians while **11%** patients complain about no visit of dieticians.
- **7.5%** complain about delay in food delivery while **6%** face problem of supply of cold food.
- **5.5%** of patient complain about delay in picking of utensils while **4.5%** complain chapattis not properly baked.

8. Strengths

1. Seven meal pattern is followed with proper meal timings.
2. Hospital maintains a clean and hygienic regime for preparing and cooking food.
3. Personal hygiene of the staff is up to the mark.

9. Suggestions

- Dietician should visit the patient after their admission and ask about their choices, any allergies as well as distaste for any food.
- Diet counselling and nutritional assessment should be done.
- Trainee should be accompanied with the nutritionist while visiting to the patients.
- Dieticians should ask as well as observe about the quantity of food delivered to the patient, to prevent food wastage if patient has less diet and adequate diet is served in case patient has good appetite.
- Dieticians should introduce themselves to the patient every time they visit patient so that patient remember them.
- Dieticians should inform the patient about extra charges for the services other than those mentioned in max menu list.
- Supervisors should check for quality of chapatti, burnt or unbaked, before serving patient.
- Care should be taken at the time of packing to remove half baked or unbaked chapattis.
- Containers should be covered immediately after its use.
- Any kind of delay in service should be enquired by supervisors (not more than 30 minutes for the beverages and 40 minutes for cooked food).
- The order should be thoroughly checked before delivering to the patient.
- For timely delivery of food to patients number of stewards should be increased from 1 to 2.
- Surprise visit of the manager to kitchen, patients to look for the services.

10. Limitation

- Limited contact with the patients.

- The time span of total study was short.

11. Conclusion

Nutrition and health are interrelated and good nutrition is a prerequisite for good health. Patient nutrition care is an integral part of hospital treatment and the consumption of a balanced diet is crucial to aid recovery. If patient care is to be optimized, then nutrition services need to be appropriate in hospitals. Hospital food service does not operate in isolation but requires the co-operation and integration of all the staff to provide the ultimate patient care. From the study, it may be concluded that some aspects were positive and there were some others that need improvement.

**Level of Knowledge of General Duty Assistant (GDA) in
Max Super Speciality Hospital,
Mohali**

1. Introduction

The core functions of a hospital system with almost 40% of the medical and patient care that is delivered in the hospital system is managed by nurses. Doctors account for another 20% of the workload. This additional workload on doctors and nurses can be offset by the introduction of General Duty Assistants. A trained GDA can decrease the workload and also add value to the value chain of the healthcare delivery system by handling some of the major functions involving patient care.

GDA is one who provides patient care and helps maintain a suitable environment. Some of the key responsibilities are to provide patient's daily care, comfort, safety and health needs. A GDA works in collaboration with doctors and nurses and other healthcare providers and deliver the healthcare services as suggested by them. A GDA is result oriented. He/she demonstrates basic patient care skills, communication skills and ethical behaviour while working in the hospital.

2. Problem Justification

Many changes which has occurred in health care service delivery lead to increase pressure on health care services. There has also been a widespread move towards the implementation of health care practices underpinned by research evidence and guided by principles of safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity.

In order to meet the demands and needs of health care consumers there should be adequate number of skilled health care providers. Therefore, there is a great need that the GDA staff should have appropriate knowledge depending on the area they are working in.

Max, give due consideration to enhance the knowledge level of GDA by carrying short sessions and briefing on daily basis. This study helps to know the present status of awareness of GDA's in order to improve where ever required.

3. Objective

To assess the Level of Knowledge of GDA staff with respect to patient care.

4. Research Methodology

4.1 Research Design- Descriptive cross-sectional Qualitative study.

4.2 Study Population- The study was conducted among GDA, aged 18-60 year posted at all the departments at Max hospital in morning shift.

4.3 Sample Size- 100

4.4 Sampling Technique- Purposive/ Convenience sampling.

4.5 Study Tool- For quantitative data collection, schedule based survey was conducted.

- The questionnaire prepared has different sets of questions for OPD and IPD GDA's.
- The questions are simple to understand and it was ensured that subject were at ease while answering them.

5. Data Collection

Primary data is collected using structured questionnaire with closed ended questions.

Separate questions are asked from the GDA staff depending upon their posting in different department whether IPD or OPD.

6. Data Analysis

Data collected is analyzed by using Microsoft Excel.

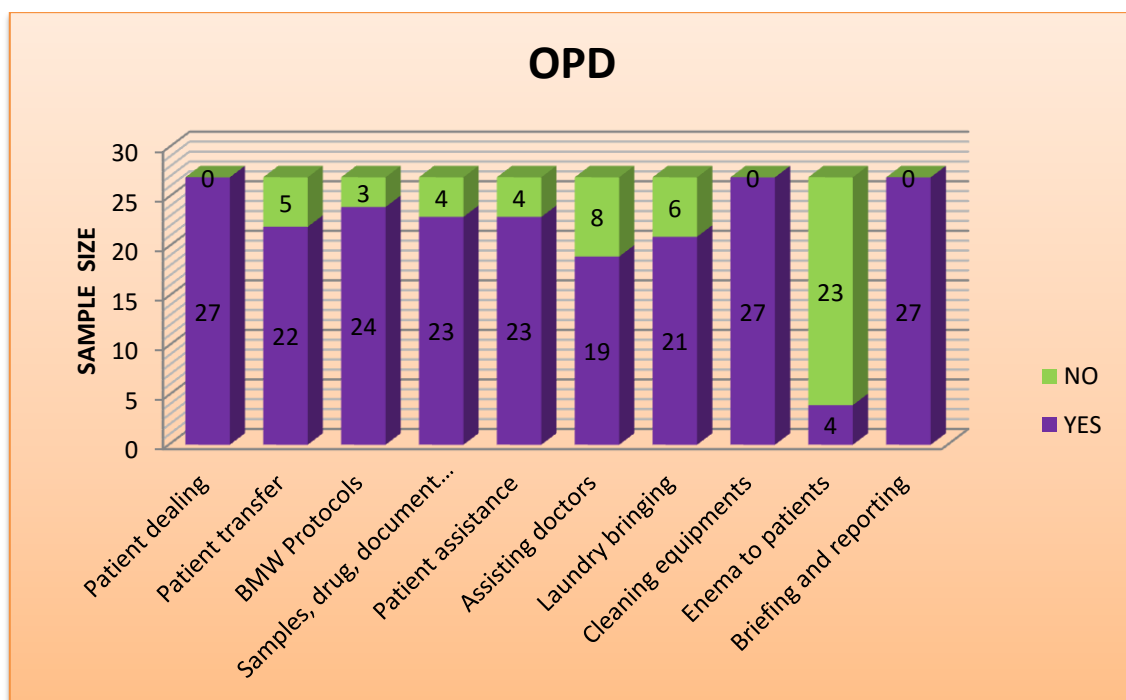


Figure 23 Response of GDA posted in OPD

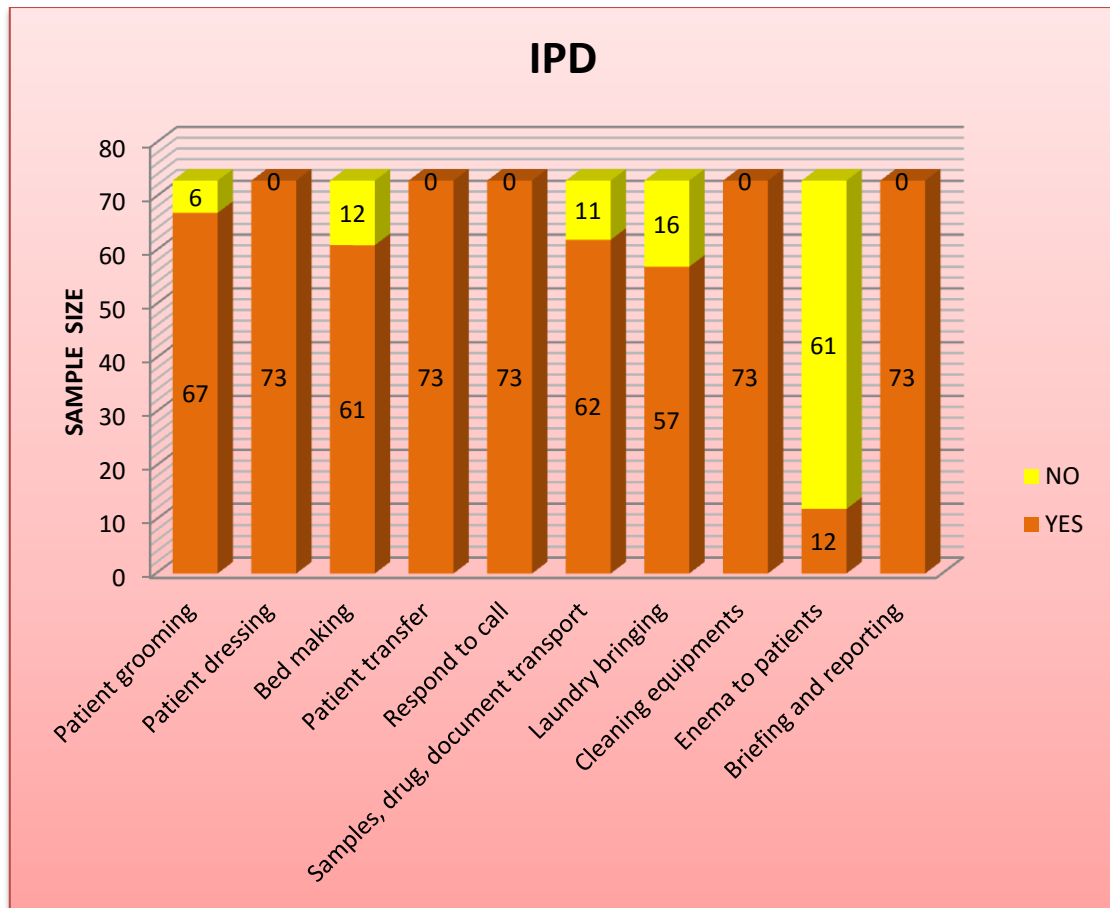


Figure 24 Response of GDA posted in IPD

7. Findings

7.1 OPD-

- All most all the GDA staff has the basic knowledge of patient dealing, which is required in the OPD.
- **81.48%** GDA's are performing the activity of transfer of the patient within the OPD to various department.
- **88.88%** of GDA's are aware of the revised biomedical waste management protocols.
- **85.18%** of GDA staff is involved in transportation of samples, drugs, documents.
- **85.18%** GDA's assist patients in locating various departments and in undergoing various procedures while **70.37 %** GDA's assist doctors in their procedures.

- **77.77%** of GDA's are involved in the bringing of linen from laundry while all (100%) GDA's are involved in cleaning of the equipments in the area where they are posted.
- **14.81%** of GD are involved in giving enema to the patients for which they are not practically trained.
- All (100%) are involved in the process of briefing and reporting.

7.2 IPD-

- **91.78%** of GDA staff posted in IPD are involved in patient grooming while all GDA's (100%) are involved in dressing up the patient.
- **83.56%** GDA's do bed making while all GDA's respond to patients call and transfer patient to various departments for conducting different procedures.
- **84.93%** of GDA staff is involved in transportation of samples, drugs, documents.
- **78.08%** of GDA's are involved in the bringing of linen from laundry while all (100%) GDA's are involved in cleaning of the equipments in the area where they are posted.
- All (100%) are involved in the process of briefing and reporting.
- **83.56%** of GDA staff is performing their duty according to their eligibility. While **16.43%** of staff is carrying out the actions, like enema for which they are not trained, in the absence of the nursing staff.

8. Strengths

1. GDA have the knowledge of basic skills of patient care.
2. Patients are satisfied with the behaviour of GDA staff.
3. Staff work efficiently even during peak time.

9. Suggestions

- ❖ Training should be conducted for all the GDA's, after certain time, so as to reinforce the activities that are expected from GDA's.

- ❖ Short trainings by floor supervisors or Team leader should be carried out on fortnight basis to strengthen the knowledge of GDA staff in the critical areas of patient care.
- ❖ Recruitment of the GDA staff should be on two basis
 - Skilled
 - Semi-Skilled

Skilled staff should be posted in areas requiring greatest care like IPD, OT, MICU, SICU, CTVS etc.

While the Semi-skilled should be posted in department requiring comparatively less attention like IP, Laundry.
- ❖ The functioning of GDA staff should be observed silently to analyse whether right task is performed at right time and place.
- ❖ Individual feedback should be given to GDA's performing average or below average to avoid inferiority complex.
- ❖ Strict warning should be given to those who are performing below average consistently.
- ❖ Those staff whose performance is persistently good should be complimented in front of all to set an example for others too.
- ❖ Some compensation should be given to those with experience than to those who are fresher.

10. Limitations

- a. The study is based on available information provided by the GDA staff in a short time span.
- b. The study is subjected to the understanding bias and prejudices of respondents.

11. Conclusion

Health care is extremely people based industry. The responsibility of the hospital does not finishes once patient undergoes major procedure, rather it is till the time patient is in the hospital. Therefore, GDA staff, who are also an important component in health care services, should be trained adequately so that the patient should not suffered.

This study, has shown most of the aspects are taken care by the study hospital but there are few things that also need to be considered to add one more star to the beauty.

References

1. Khamlub, S., Sarker, M. A. B., Hirosawa, T., Outavong, P., & Sakamoto, J. (2013). Job satisfaction of health-care workers at health centers in Vientiane Capital and Bolikhamsai Province, Lao PDR. *Nagoya journal of medical science*, 75(3-4), 233-241.
2. Kvist, T., Mäntynen, R., & Vehviläinen-Julkunen, K. (2013). Does Finnish hospital staff job satisfaction vary across occupational groups?. *BMC health services research*, 13(1), 1.
3. Kumar, R., Ahmed, J., Shaikh, B. T., Hafeez, R., & Hafeez, A. (2013). Job satisfaction among public health professionals working in public sector: a cross sectional study from Pakistan. *Human resources for health*, 11(1), 2.
4. Kaur, S., Sharma, R., Talwar, R., Verma, A., & Singh, S. (2009). A study of job satisfaction and work environment perception among doctors in a tertiary hospital in Delhi. *Indian journal of medical sciences*, 63(4), 139.
5. Luo, Z., Fang, P., & Fang, Z. (2015). What is the job satisfaction and active participation of medical staff in public hospital reform: a study in Hubei province of China. *Human resources for health*, 13(1), 34-34.
6. Aryeetey, R. N. O., Boateng, I., & Sackey, D. (2015). State of dietetics practice in Ghana. *Ghana medical journal*, 48(4), 219-224.
7. Hwalla, N., & Koleilat, M. (2004). Dietetic practice: the past, present and future.
8. Trigg, N. (2014). Mandatory guidelines aim to raise quality of meals in hospital: New measures arising from an investigation into nutrition in the NHS will involve extra support to help older patients to eat. Nick Trigg reports. *Nursing older people*, 26(8), 9-9.
9. Mehrotra, V. S. (2016). NVEQF: Skill Development under the National Skills Qualifications Framework in India: Imperatives and Challenges. In *India: Preparation for the World of Work* (pp. 281-310). Springer Fachmedien Wiesbaden.
- 10 Indian Council of Medical Research. Expert Group. (1990). *Nutrient Requirements and Recommended Dietary Allowances for Indians: A Report of the Expert Group of the Indian Council of Medical Research*. Indian Council of Medical Research.

ANNEXURE-1

JOB SATISFACTION AMONG GDA STAFF AT MAX MULTISPECIALITY HOSPITAL, MOHALI

QUESTIONNAIRE

- I. NAME:
- II. AGE:
- III. SEX:
- IV. DEPARTMENT:
- V. MARITAL STATUS:
- i. Single
 - ii. Married
- VI. How long have you worked?
- i. less than 6 months
 - ii. 6months- 1 year
 - iii. 1-3 years
 - iv. 3-5 years
 - v. more than 5 years
- VII. How satisfied you are with your job?
- i. Very satisfied
 - ii. Satisfied
 - iii. Neutral
 - iv. Dissatisfied

v. Very dissatisfied

VIII.

S.no .	QUESTIONS	STRONGLY AGREE	SOME WHAT AGREE	NEUTRAL	SOME WHAT DISGREE	STRONGLY DISGREE
1	Sufficient material and equipments are available					
2	Clarity in the job					
3	Cooperation between departments					
4	Salary structure					
5	Training programs					
6	Fair treatment by supervisor					
7	Reward and recognition					
8	Awareness of employee rights					
9	Will recommend to others					
10	Organisation give consideration to the family problems					

ANNEXURE-2

LEVEL OF KNOWLEDGE OF GDA

OPD

S. No.	QUESTIONS	YES	NO
1	Dealing with patient		
2	Transferring patient within the hospitals		
3	Follow Biomedical waste disposal protocols		
4	Transport patient samples, drugs, patient documents.		
5	Assisting patient to the testing area		
6	Assisting doctors (calling patients name according to the appointment schedule)		
7	Bringing of laundry		
8	Clean medical equipments under the supervision of nurse		
9	Giving enema to the patient		
10	Briefing and reporting		

IPD

S. No.	QUESTIONS	YES	NO
1	Patient grooming		
2	Assist patient in dressing up		
3	Hospital bed making		
4	Transferring patient within the hospital		
5	Respond to patient call		
6	Assist patient in maintaining normal elimination		
7	Transport patient samples, drugs, patient documents and manage changing and transportation of laundry		
8	Clean medical equipments under the supervision of nurse		
9	Giving enema to the patient		
10	Briefing and reporting		