

**A STUDY ON TIME TAKEN FOR INITIAL ASSESSMENT OF IN-
PATIENTS BY NURSES IN MEDANTA HOSPITAL, LUCKNOW**

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Master of Business Administration (MBA)

In

Hospital and Health Management

By

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Under the Supervision and Guidance of

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2023

DECLARATION BY STUDENT

I hereby declare that this dissertation “**A Study on Time Taken For Initial Assessment Of In – Patient by Nurses in Medanta Hospital, Lucknow**”, is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

(Signature)

Name of Student

Date



CERTIFICATE

This is to certify that **Miss. Vishakha Chandel** in partial fulfillment of the requirements for the award of the degree of **MBA (Hospital and Health Management)** from the **IIHMR University, Jaipur** has successfully completed her internship at **Medanta Hospital, Lucknow**, during **March 1, 2023 to May 27, 2023**.

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This is to certify that dissertation titled “**A Study on Time Taken For Initial Assessment Of In – Patient by Nurses in Medanta Hospital, Lucknow**”, is a record of the research work undertaken by **Vishakha Chandel** in partial fulfillment of the requirements for the award of the degree of **MBA (Hospital and Health Management)** from the IIHMR University, Jaipur under my guidance and supervision and his/her approach to the research study has been sincere, scientific, and analytical.

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ABSTRACT

The initial assessment of patients by nurses is an essential aspect of healthcare delivery. It is the first step towards providing comprehensive and appropriate care to patients.

The purpose of this study was to evaluate the length of time required for the initial assessments of inpatients by nursing staff at Medanta Hospital in Lucknow and to pinpoint the causes of assessment process delays. The study also sought to design and put into practise methods to shorten the duration of Initial assessment. It emphasises the significance of prompt first evaluations performed by nursing professionals and offers information on the causes of delays. The proposed interventions and strategies have the potential to reduce the time spent on initial assessments and improve patient care outcomes in inpatient departments.

OBJECTIVES:

1. To assess the current time for Initial Assessment of Inpatients by Nursing staff in Inpatient department.
2. To identify all those factors that significantly contribute to the delay in initial assessment by nursing staff.
3. Developing and implementing an intervention that will reduce the time spent on initial assessments by nursing staff in Hospital.
4. Evaluate the effectiveness of the intervention in reducing the time it takes nursing staff in inpatient departments to conduct initial assessments.
5. Identify challenges encountered while implementing the intervention and suggest strategies for overcoming them.
6. Recommend strategies for reducing the time of initial assessment by nursing staff in patient departments.

RESEARCH METHODOLOGY:

The study was designed as a cross-sectional study conducted at Medanta, Lucknow. The study population consists of all patient admissions during the dissertation period. The inclusion criteria encompasses all patients admitted during the specified time frame, while patients admitted through

the emergency department and those in critical care units are excluded from the study. The duration of the study spans two and a half months, from 10th March to 25th May 2023. A total of 310 samples are included in the study.

Data collection is carried out using a real-time tracking approach, where patients are monitored and relevant information is recorded and verified from the patient files (Annexure I). This method allows for the collection of accurate and up-to-date data on various parameters related to the initial assessment of inpatients by nurses.

RESULTS

The study on the time taken for the nurses to complete initial assessment of in patients in a tertiary care hospital has yielded valuable insights and significant improvements. The initial assessment took 66 minutes and 24 seconds, demonstrated the need for measures to improve patient care and maximise efficiency. Over the course of three months, the assessment duration was effectively decreased to 47 minutes and 15 seconds by the implementation of focused interventions.

CONCLUSION

This research emphasises the value of prompt first assessments by nursing personnel and provides details on the causes of delays. The study's findings will contribute to a better understanding of the assessment process and may inform potential interventions or improvements in practice to enhance patient care and workflow efficiency.

ACKNOWLEDGEMENT

“Appreciation is a wonderful thing: it makes what is excellent in others belong to us as well.”

- VOLTAIRE

Words of acknowledgement, however many they might be, are insufficient to express the gratitude I feel towards the people who have constantly supported me in successfully completing my dissertation in these unforeseen and unpredictable circumstances.

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ABBREVIATIONS

NABH: “National Accreditation Board for Hospital and Healthcare Providers”

ED: “Emergency Department”

IPD: “In-Patient Department”

IP: “In – Patients”

KPI: “Key Performance Indicator”

TAT: “Turn Around Time”

RNs: “Registered Nurses”

HDU: “High Dependency Unit”

ISQua: “International Society for Quality in Healthcare”

MO: “Medical Officer”

BNPA : “Barriers to Nurse’s use of Physical Assessment”

INTRODUCTION

Initial assessment of inpatients in any healthcare organization is an essential stage in order to provide high quality healthcare services. The assessment provides the necessary information that guides the development of a care plan for the patient. It entails assessing a patient's symptoms, medical history, and condition in order to choose the best course of action. The initial assessment is undertaken and is the responsibility of both ; Medical officers and Registered Nursing staff and is the foundation upon which subsequent care activities are built. This marks the very first interaction between the patient and healthcare providers.

The first person to engage with patients and gather essential information that aids in the evaluation process is a “Nurse”. Post documentation by nurses, the information is shared with the medical officers who then conduct their initial assessment (Doctors Initial Assessment) involving gathering of data related to Past medical History, Medical Reconciliation, Allergies, discuss of plan of care and expected outcome with the patient and the attendants.

The importance of the initial assessment process cannot be overemphasized. It is the first step towards providing comprehensive and appropriate care to patients. A well-conducted initial assessment is critical to identifying potential health issues and preventing complications.

The initial assessment process is carried out in various healthcare settings, including hospitals, clinics, and nursing homes. In hospitals, the assessment process is usually conducted in the emergency department, where the patient is triaged based on the severity of their condition.

The comprehensive assessment by nurses include collecting subjective and objective data or baseline vital information about the current health status of the patient. . The nurse also assesses the patient's level of consciousness, pain, and other symptoms that may indicate a need for immediate medical attention. These vital signs / data includes: Blood pressure (BP), Heart Rate (HR), Respiratory Rate (RR), Temperature (T), Oxygen saturation (SpO2). These measurements

help to identify any deviations or abnormalities from the normal range, in order to determine possibility of any underlying health issues or changes in the patient's condition.

Other than these, parameters related to condition's and specific needs of the patient are also assessed. These include: Height and Weight; which provided information about patients Body Mass Index (BMI) in order to determine the medication dosage, fluid management, Nutritional assessment; Pain assessment in order to evaluate pain intensity and location which is often done by using a pain scale.

These data assist nurses in grouping patients according on how serious their ailments are, making sure that those who require emergency care are treated first. They can assist with administrative tasks like securing permission and submitting paperwork to quicken the examination procedure.

According to the Key performance indicator (KPI) of NABH 5TH Edition, the time taken for Initial assessment of in patient and is determined by the Sum of time taken for Initial assessment to the total number of admissions in 30 days. The data is captured either through the HIS or through Audit. The time begins from the time that the patient arrives at the bed of the ward till the time that the initial assessment is conducted by a nurse and documented. This initial assessment does not include day care patients.

The time taken for initial assessment in Hospitals depends on several variables, including the patient's condition, the intricacy of their medical history, and the accessibility of resources, might affect how long nursing personnel must spend performing the initial assessment of inpatients. It is important that this assessment takes place as soon as the patient is admitted to the Hospital. This is due to the fact that the data acquired during the assessment can help direct the patient's care and treatment and can also uncover any urgent or life-threatening illnesses that need immediate attention.

The initial assessment process being extremely time-sensitive can have significant impact on patient outcomes due to any sort of delay in the process. The time it takes to conduct an assessment can also be impacted by the resources' accessibility, such as diagnostic tools.

The amount of staffing that is available is also one of the variables that can affect how long it takes for nursing staff to do the initial assessment. Sometimes Patients may have to wait longer for care if the hospital is understaffed since the nurses may be overworked. This may impede the evaluation process and affect the way patients respond.

An additional factor that could impact how long it takes the nursing staff to complete the initial evaluation is the patient's medical history. For patients with complicated medical histories, the nursing staff may require additional time to gather and examine all relevant information. Patients with chronic illnesses who require ongoing treatment are particularly affected by this.

The severity of the patient's condition can also have an impact on how long it takes nursing staff to perform the initial examination. Patients with significant or life-threatening illnesses that require prompt treatment and management may affect how long the examination takes.

Delay in Initial Assessment process can have several consequences such as Compromised patient safety, Delayed treatment, Increased Risk of Complication, Prolonged length of Hospital stay, Decreased Patient Satisfaction, etc., to name a few. Therefore it is important for healthcare institute to prioritize timely and effective assessment for optimal patient care and outcome.

The Initial Assessment of inpatients by nursing staff involves a collaborative effort between the medical team in order to give the patient the best treatment possible. By diligently conducting thorough assessments, nurses contribute to better patient safety, promote early detection of complications, and the delivery of effective and efficient healthcare. This can be achieved by streamlining the process, proper staffing and effective communication among the healthcare delivery team.

It is also crucial to remember that effective communication is paramount to the process of Initial Assessment. Herein, it's important that the nurses communicate clearly and effectively with the patient, patient attendants, and other healthcare professionals involved in the patient's care. Effective communication ensures that patient specific needs are clearly understood and the there

is no room for miscommunication from the patient's / patient attendants end as well as from healthcare provider's end.

Therefore, the initial assessment process is a crucial aspect of healthcare delivery. A care plan for the patient is developed based on the information in this document. The process involves reviewing the patient's medical history, examining them physically, and assessing their vital signs. It is imperative that healthcare organizations ensure nurses are adequately trained and equipped with resources for effective initial assessments. Thus, healthcare organizations can improve the outcomes of their patients by providing timely and appropriate care.

This study is conducted in a Private Tertiary Care hospital situated in Western UP, with the aim of assessing Time taken for initial assessment of inpatients by Nurses.

It also aims to perform a comparative analysis of time taken for initial assessment before the intervention and after the intervention and thereby determine the effectiveness of the interventions and scope for further improvement. It is expected that with this study, the hospital would be facilitated in providing timely and effective care to inpatients, ultimately improving patient outcomes and overall healthcare delivery as it would directly reflect upon the quality of care provided by the organisation.

REVIEW OF LITERATURE

Initial Assessment being the First point of interaction between the Patient and the healthcare professional and the information gathered in this helps determine the course of treatment; therefore it becomes even more important that it is prompt and effective. There are few studies conducted in this regard.

In the year 2014, *Douglas, Clint; Osborne, Sonya; Reid, Carol; Batch, Mary; et al.*, conducted a study to find out the various factors influencing nurses' physical assessment practices. For this, they developed a scale called "The Barriers to Nurses' use of Physical Assessment (BNPA) Scale. They concluded that the biggest barrier identified by the nurses themselves was related to organizational Factors such as workload, lack of time and limited resources. There were certain other factors as well that were identified as barriers in the nursing assessment; these were personal (e.g., lack of confidence), and patient-related barriers (e.g., patient refusal) and also include knowledge and skill barrier.

Kokko, R. (2015), assessed the correlation between the way of nurses documentation takes place and its impact on the standard of patient care. It was found that effectiveness of patient care was strongly correlated with the effectiveness of nurses documentation. The patients who had meticulously detailed nursing plan were more likely to get treatment at the right time. It emphasized on the importance of nurse records in standard of patient care.

Jones K, Adams T, Schneider J, et al (2016) , conducted a Retrospective Observational study in a Medical Surgical unit of a Hospital to determine the time taken for nursing initial assessment . In this study, it was found that it took an average of 15 minutes and 32 seconds for the nurses to conduct the initial assessment.

In the same year, *Douglas, C., Booker, C., Fox, R., et al.*, conducted a study on 150 acute care registered nurses of a General Ward of a Tertiary Referral Hospital to determine consensus across core acute care speciality areas on core physical assessment skills necessary for early recognition of patient status change. The study resulted in identification of a set of fundamental nurse physical assessment abilities.

Chakravarty, A., Sajan, P., & Nambiar, B. C. (2017) did a qualitative study to develop an instrument for initial nurse assessment since no standardized form exists in the Armed Forces Medical Services to document initial nursing observations while a patient is being admitted in service hospitals. A focus group design was utilized to explore and conceptualize an initial nurse assessment form that may be utilized by service hospitals. The study led to the development of an instrument made up of a number of domains and subdomains that included all of the crucial elements of a thorough first evaluation performed by nurses in critical care.

Fung, C. C., & Wong, C. K. (2018) conducted a retrospective study for a period of six months in the Emergency department of a hospital in Hong Kong to determine the variables that affect the length of time needed for a patient's initial nurse evaluation in an ED. The study found that the length of time needed for the initial nursing evaluation was impacted by the severity of the patient's condition, the presence of a carer, and the availability of nurses.

Smith A, Johnson B, Brown C., (2018) conducted an observational study in an Acute care hospital to determine the time taken for nurses to complete the initial assessment of inpatients. The study discovered that the initial examination of inpatients by nurses took an average of 23 minutes to complete.

Dall'Ora C, Griffiths P, Hope J, et al in 2021 undertook a time-and-motion study of 16 acute medical or surgical wards across four hospitals in England. Two trained observers followed a standard operating procedure to record the time taken to measure and record vital signs. The objective was to estimate the time taken to measure and record one set of patient's vital signs; and to identify factors associated with the time required to measure and record one set of patient's vital signs. They conducted this study as there are no robust estimates of the workload it generates for nursing staff and this made it difficult to plan adequate staffing to ensure current monitoring protocols can be delivered. The study found that the estimated time per vital signs set of 5 min 1 sec. If interruption within the rounds were included, then the estimated time was 6 min 26 sec.

RESEARCH OBJECTIVE

1. To assess the current time for Initial Assessment of Inpatients by Nursing staff in Inpatient department.
2. To identify all those factors that significantly contribute to the delay in initial assessment by nursing staff.
3. Developing and Implementing an intervention that will reduce the time spent on initial assessments by nursing staff in Hospital.
4. Evaluate the effectiveness of the intervention in reducing the time it takes for nursing staff in inpatient departments to conduct initial assessments.
5. Identify challenges encountered while implementing the intervention and suggest strategies for overcoming them.
6. Recommend strategies for reducing the time of initial assessment by nursing staff in patient departments.

RESEARCH METHODOLOGY

The study design employed for this research was a cross-sectional study, which involved collecting data at a specific point in time. The duration of the study spanned over 2.5 months, starting from March 10, 2023, and ending on May 25, 2023. The study sample consisted of 310 in-patients who met the inclusion criteria.

Convenient sampling was used as the sampling technique, whereby participants were selected based on their availability and accessibility during the study period. Real-time tracking of patients was conducted, and data were documented in Excel spreadsheets, ensuring accurate and reliable data collection (Annexure I)

The inclusion criteria for the study encompassed all elective inpatient admissions, including those in High Dependency Units (HDUs). On the other hand, certain patient groups were excluded from the study, including those admitted through the Emergency department, as well as patients in specialized units such as Chemo, Dialysis, and Day care units.

By employing this study design, duration, sample size, sampling technique, and tools, the research aimed to gather comprehensive data on the time taken for initial assessments of inpatients. These criteria and methods were established to ensure the representation of a diverse range of patients within the study, while excluding certain groups that could potentially confound the results.

RESULTS AND DISCUSSIONS:

OBJECTIVE 1: To assess the current time for Initial Assessment of Inpatients by Nursing staff Inpatient department from 10 March – 10 April 2023

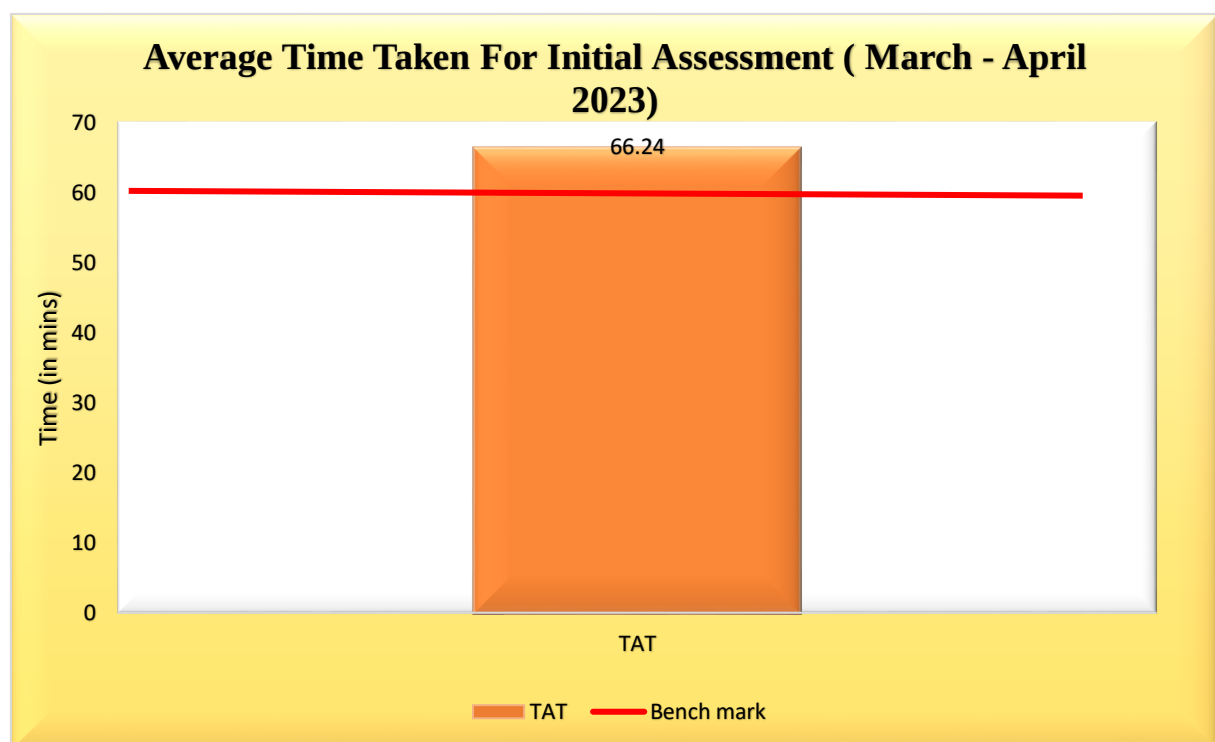


FIG. 8.1. AVERAGE TIME OF INITIAL ASSESSMENT OF INPATIENTS BY NURSES (MARCH - APRIL 2023)

Fig. 8.1 shows the Average Time of Initial assessment of in patients in the Month of march till 10th April. It shows that the TAT is 66 minutes 24 seconds which is 6 minutes 24 seconds above the KPI of the Hospital.

This implies that the assessment process is delayed suggesting potential issues or inefficiencies within the current workflow and there is a need to address the factors contributing to this prolonged TAT and implement measures to improve the timeliness and effectiveness of the initial assessment process. Also Continued monitoring and evaluation of the assessment process will be crucial in striving for improved efficiency and timeliness of initial assessments in order to enhance patient care and outcomes.

TABLE 8.1 TOTAL NO. OF INPATIENTS ASSESSED - ABOVE AND WITHIN 60 MINS

Total number of In patients	Above 60 minutes (in number)	Within 60 Minutes (in number)
140	91	49

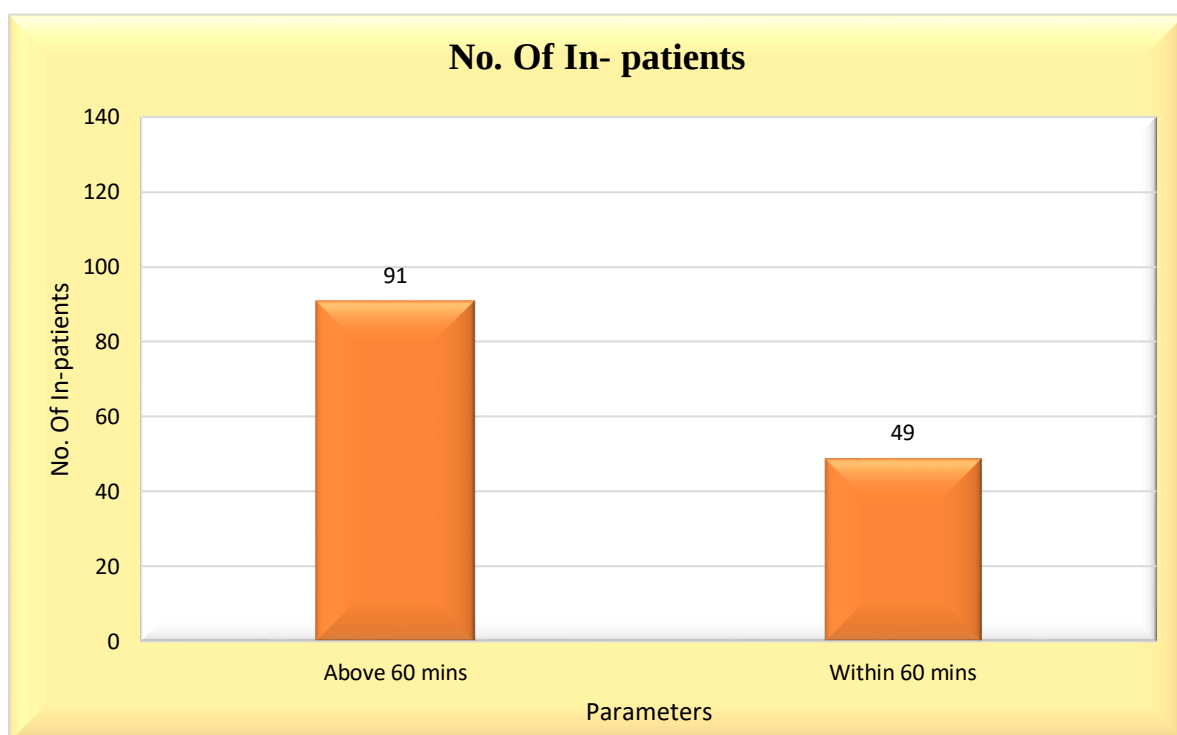


FIG.8.2. TOTAL NO. OF INPATIENTS OBSERVED – ABOVE AND WITHIN 60 MINS

Fig. 8.2 shows the No. of inpatients whose Initial assessment was done within the KPI of 60 Mins. It is found that out of 140 sample size, 91 samples exceeded the KPI while only 49 samples were within the time range.

This implies that the assessment process is delayed suggesting potential issues or inefficiencies within the current workflow and there is a need to address the factors contributing to this prolonged TAT and implement measures to improve the timeliness and effectiveness of the initial assessment process.

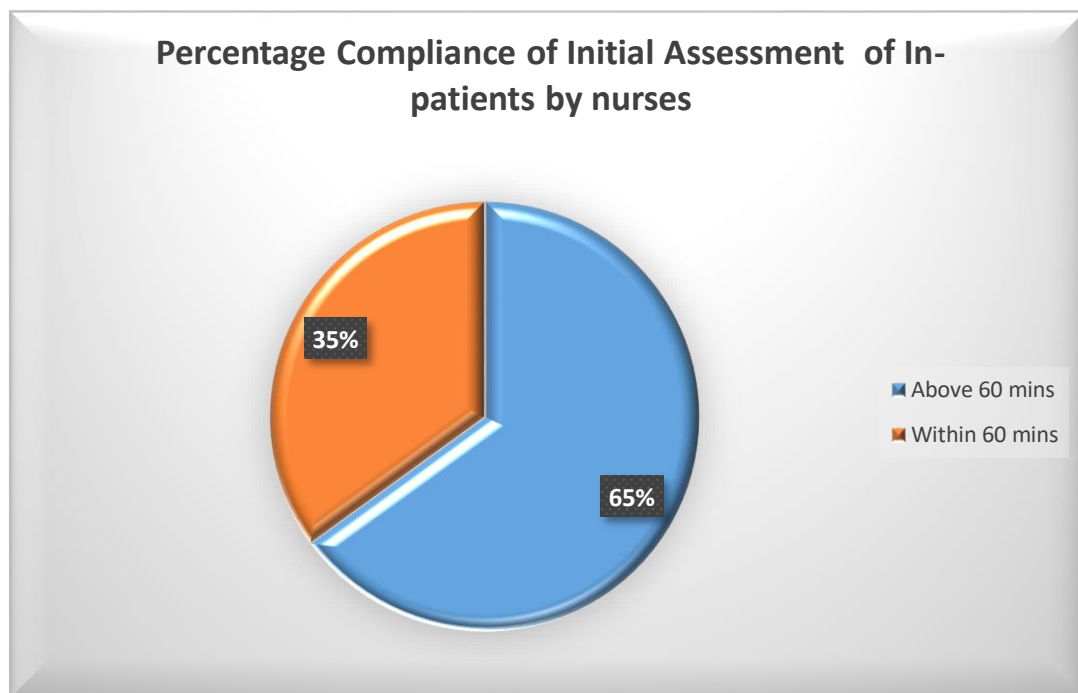


Fig.8.3 Percentage compliance of initial assessment of In-Patients by Nurses

Fig. 8.3 shows the Percentage compliance of inpatients whose Initial assessment was done within the KPI of 60 Mins. It is found that 65% observations took more than 60 mins for assessment while only 35 % observations were within the 60 mins.

The high percentage of observations taking more than 60 minutes suggests potential gap/ inefficiencies within the assessment process and need for strict interventions. It is crucial to address this gap promptly to ensure timely and effective assessment of inpatients, as delays can impact patient outcomes and overall quality of care.

OBJECTIVE 2: To identify all those factors that significantly contribute to the delay in initial assessment by nursing staff.

- i. **Staffing Shortages:** Inadequate no. of nursing personnel may lead to overworked employees, which would impede the conduct and completion of the initial evaluation.
- ii. **High Patient Acuity :** Delays may occur if it takes longer or more resources to evaluate patients with significant or complex medical issues or higher acuity levels.
- iii. **Workflow and Prioritization:** Inefficient workflow processes, lack of clear priorities, or competing demands are more likely to contribute to delays in completing initial assessments.
- iv. **Communication and Handoff Issues:** Poor communication between shifts or during handoffs can lead to delays because relevant information may not be effectively communicated to the nursing staff responsible for the initial assessment.
- v. **Emergency Situations:** Unexpected emergencies or critical situations like sudden code blue or RRT situation can divert nursing staff's attention and postpone the first evaluation of newly arrived patients.
- vi. **Inadequate Training or Competency :** Nurses may incur delays if they lack the necessary training or expertise to conduct initial evaluations or if they come across unusual or difficult situations.

- vii. **Patient-related Factors:** Delays in conducting the initial assessment may be caused by patient factors such as patient refusal, patient complexity, language hurdles, or cognitive impairments.

- viii. **Resource Constraints:** If there are numerous admissions at once, the lack of supplies and equipment, such as a cardiac monitor for measuring vital signs like blood pressure, heart rate, and ECG, may cause delays in doing the first examination.

- ix. **Organizational Culture and Priorities:** If there are numerous admissions at once, the lack of supplies and equipment, such as a cardiac monitor for measuring vital signs like blood pressure, heart rate, and ECG, may cause delays in doing the first examination.

- x. **External Variables :** External variables such as high patient traffic, unexpected / Emergency situations or disruptions may prevent evaluations from being completed on time.

OBJECTIVE 3: Developing and Implementing an intervention that will reduce the time spent on initial assessments by nursing staff in Hospital.

- i. **Education and Training:** By Providing nursing staff with specialized training programs on effective communication, time management, and efficient assessment methods, their ability to quickly and accurately conduct assessments can be Enhanced.
- ii. **Enhance Collaboration and Communication:** By facilitating good communication teamwork among healthcare professionals involved in the initial assessment process. To hasten evaluations, encourage quick information exchange and collaborative dialogue.
- iii. **Workflow and staffing patterns can be improved:** By streamlining processes, eliminating non-essential tasks, optimizing staffing patterns, examining the specific inpatient department's workflow and identifying areas for improvement; all this can assist in reducing bottlenecks and increasing efficiency during initial assessments.
- iv. **Continuous Quality Improvement:** Establishing a mechanism for tracking and assessing the effectiveness of initial assessments as a part of quality improvement efforts. Review procedures would help to get inputs from nursing staff and implement changes in the areas that need them.
- v. **Supportive Organizational Culture :** Building a culture inside the organization that promotes effectiveness and ongoing development. Encouraging and reward efforts to speed up evaluation process and assistance to ensure that interventions are put into place successfully.

OBJECTIVE 4: Evaluate the effectiveness of the intervention in reducing the time it takes for nursing staff in inpatient departments to conduct initial assessments.

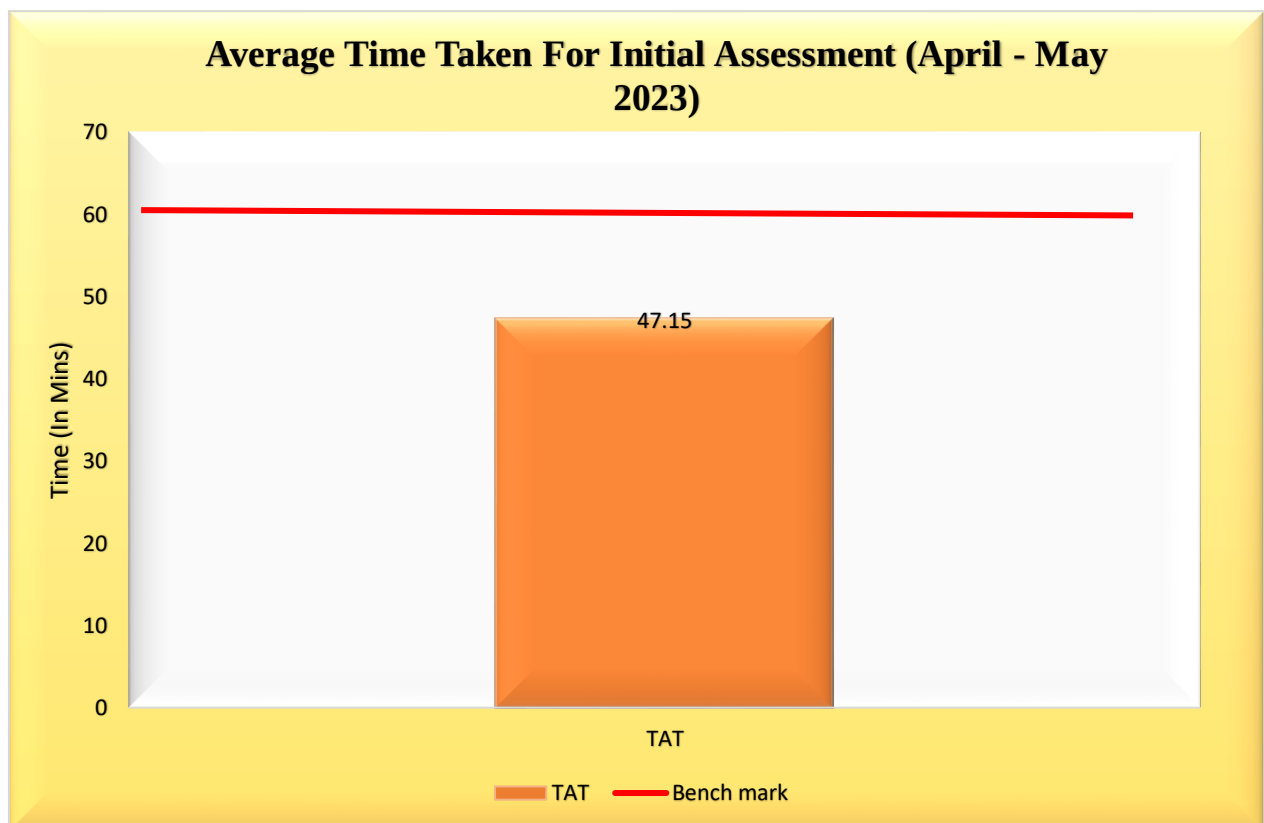


FIG. 8.4. AVERAGE TIME OF INITIAL ASSESSMENT OF INPATIENTS BY NURSES (APRIL - MAY 2023)

Fig. 8.4 shows the Average Time of Initial assessment of in patients in the Month of April and May. It shows that the TAT is 47 minutes 15 seconds which is within KPI of the Hospital.

This implies that the intervention has a positive outcome on the initial assessment process suggesting is delayed indicating enhanced patient safety, improved patient satisfaction, and optimized utilization of nursing resources. These outcomes contribute to a more streamlined and efficient healthcare delivery process.

TABLE 8.2 TOTAL NO. OF INPATIENTS ASSESSED - ABOVE & WITHIN 60 MINS AND WITHIN 30 MINS

Total number of In patients	Above 60 minutes (in number)	Within 60 minutes (in number)	Within 30 minutes (in number)
170	40	114	16

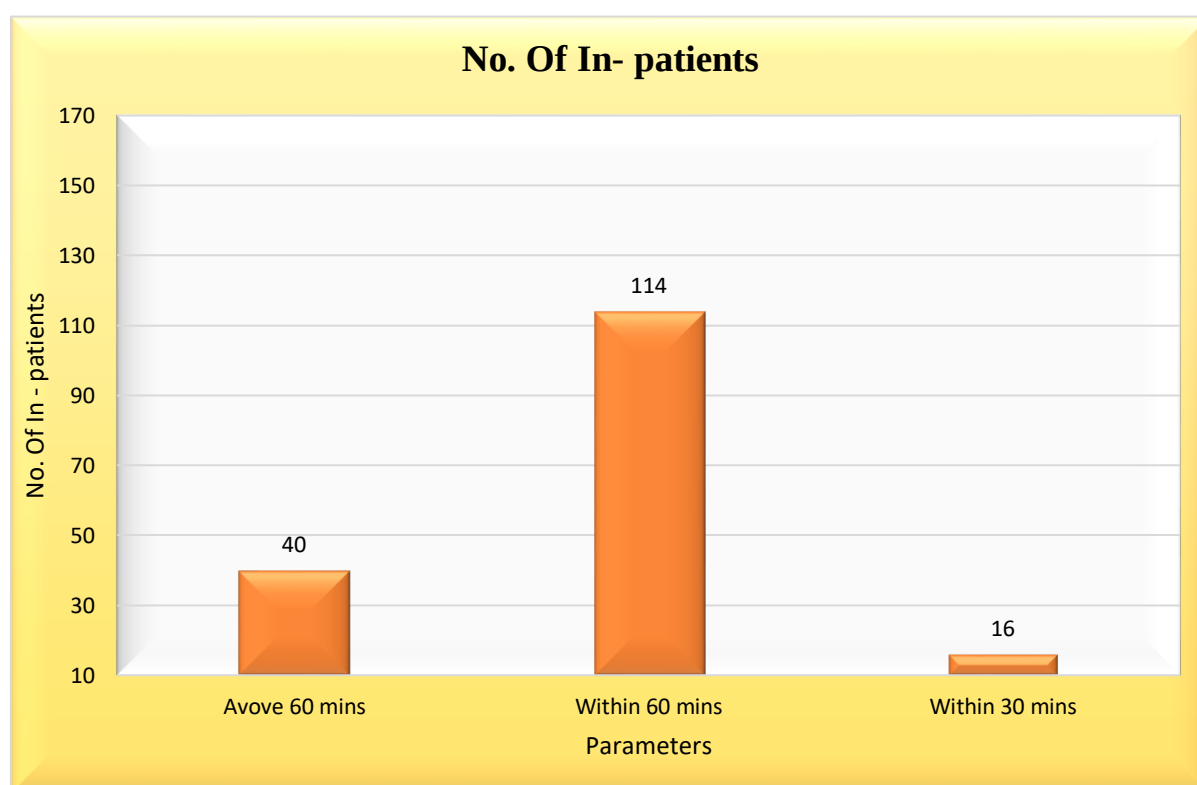
**TABLE 8.5 TOTAL NO. OF INPATIENTS OBSERVED - ABOVE AND WITHIN 60 MINS AND WITHIN 30 MINUTES**

Fig. 8.5 shows the No. of inpatients whose Initial assessment was done within the KPI of 60 Mins. It is found that out of 170 sample size, only 40 samples exceeded the KPI while 114 samples were assessed within the specified time range, indicating that the majority of the assessments were completed within an acceptable timeframe.

Furthermore, the graph also reveals that 16 samples were assessed within an impressive time frame of 30 minutes or less. This indicates that a small portion of the sample achieved a commendable level of efficiency in conducting the initial assessments within the desired timeframe.

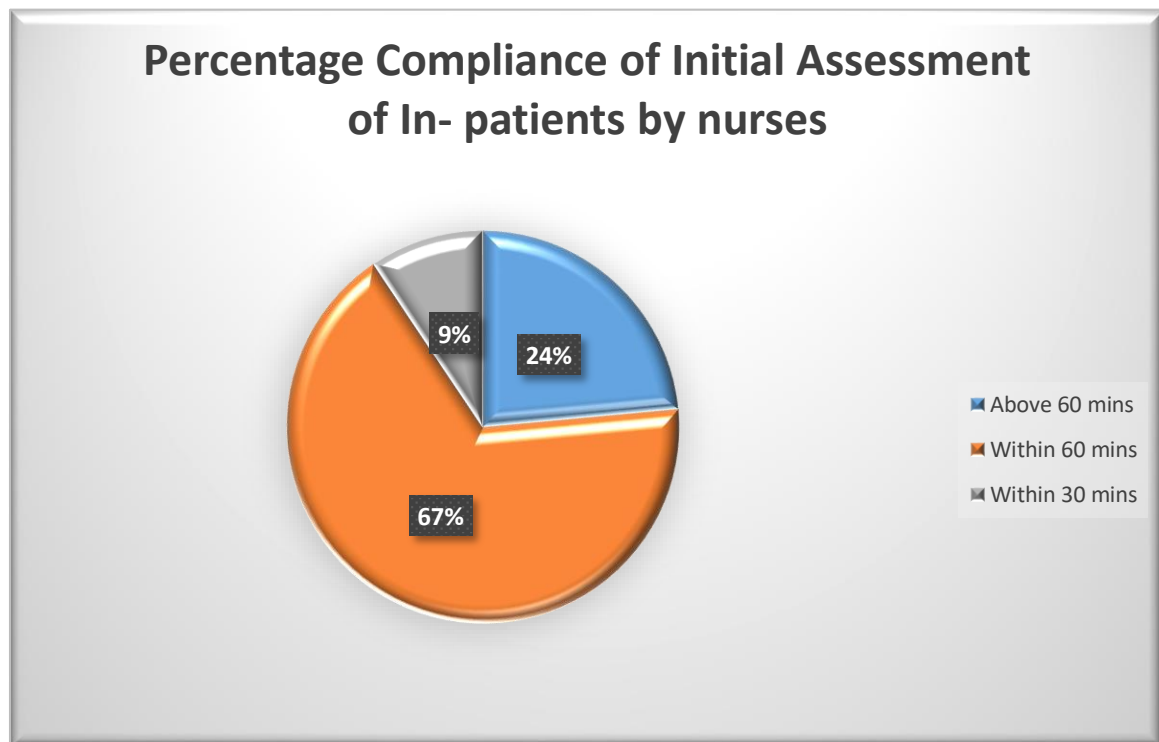


Fig.8.6 Percentage compliance of initial assessment of In-Patients by nurses

Fig. 8.6 shows that only 24% of the assessments took more than 60 minutes to complete. This indicates that a minority of the assessments exceeded the desired time frame. On the other hand, a significant proportion of the observations, specifically 67%, were completed within the expected time frame of 60 minutes. This indicates that the majority of the assessments were conducted in a timely manner, meeting the desired standard for initial assessments.

Furthermore, a smaller subset of the observations, comprising 9%, demonstrated exceptional efficiency by completing the assessments within the commendable time frame of 30 minutes. This subset represents a noteworthy achievement, showcasing the potential for streamlined workflows and effective utilization of resources in conducting prompt assessments.

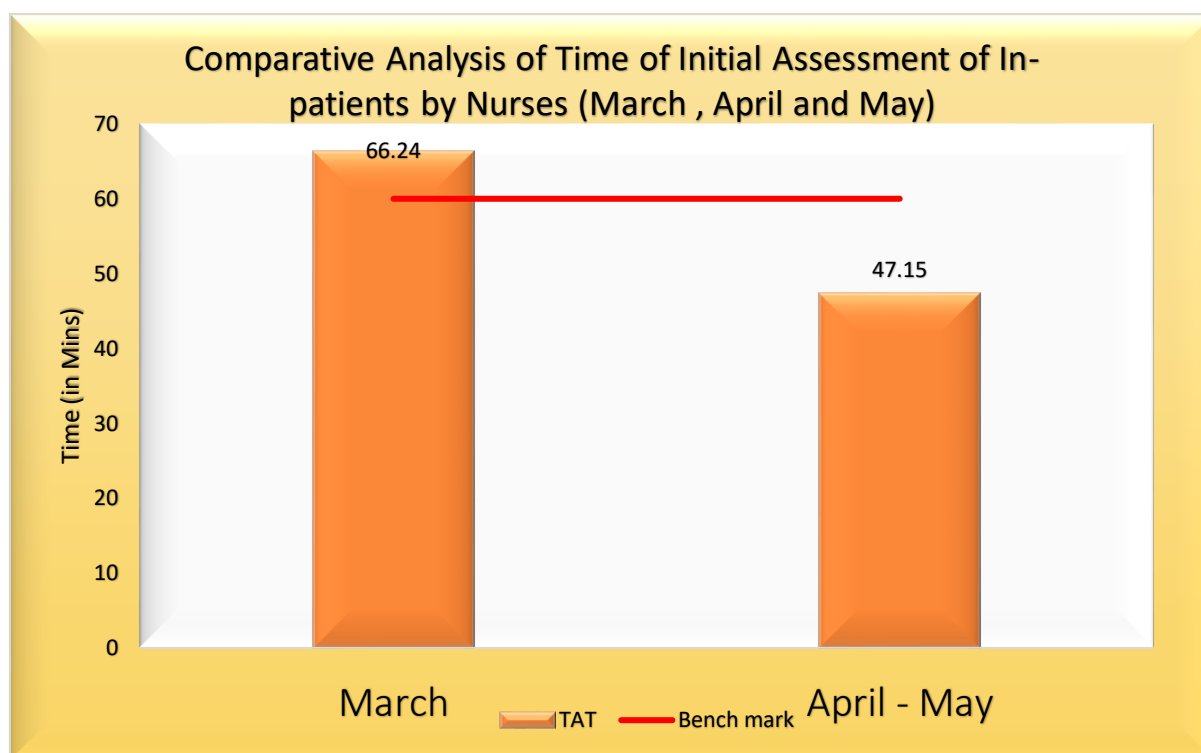


Fig.8.7 Percentage compliance of initial assessment tat of in-patients by nurses

Fig. 8.7 shows the comparative analysis of Initial assessment done during the dissertation period. It is observed that a significant reduction in the time taken for the initial assessment of inpatients took place after the implementation of interventions.

In the initial period, during March until April 10th, the average time for the initial assessment was 66 minutes and 24 seconds. However, after the application of interventions such as training and other measures, there was a notable improvement in the assessment time.

In the subsequent period, from April to May, the average time for the initial assessment decreased to 47 minutes and 15 seconds. This reduction in assessment time indicates the positive impact of the interventions implemented during the study.

The specific interventions applied, such as training programs, workflow optimization, or other strategies, played a crucial role in streamlining the assessment process and reducing the time required for the initial assessment.

These findings suggest that interventions aimed at improving efficiency, enhancing nurses' skills, and optimizing workflow can lead to substantial improvements in the time taken for the

initial assessment of inpatients. By implementing these interventions, healthcare facilities can ensure timely assessments, facilitate prompt interventions, and ultimately enhance patient outcomes.

OBJECTIVE 5: Identify challenges encountered while implementing the intervention and suggest strategies for overcoming them.

There were a few of the challenges faced / encountered while implementing interventions to reduce the time spent on initial assessments by nursing staff in a hospital.

Below mentioned are few of them encountered:

- **Resistance to Change:** Being used to the usual ways of working, nursing staff initially resisted / hesitated to adopt new processes or procedures associated with the intervention. Resistance stemmed from concerns about increased workload, perceived disruption to established routines, or skepticism about the intervention's effectiveness.
- **Data Collection and Monitoring:** Real time tracking of patients is in itself a difficult task. Monitoring simultaneous admissions either on the same ward or difficult made it a little more difficult to collect authentic data.
- **Resource Limitations:** Implementation was hindered by limited availability of resources, such as staffing, funding, technology, or equipment. Insufficient resources initially impeded the smooth execution of the intervention and hindered its effectiveness.
- **Time Constraints:** Nursing staff already have demanding workloads, making it challenging to allocate additional time for training, implementation, and documentation associated with the intervention. Time constraints affects staff engagement and hinder successful implementation.

- **Staffing and Workforce Issues:** Having staffing shortages and high attrition rate, posed difficulty in maintaining consistent implementation of the intervention. Insufficient staffing levels can strain the ability to deliver timely assessments and sustain the intervention's impact.
- **Communication and Coordination:** Inadequate communication and coordination between different nursing staff of different shifts involved in the intervention hindered its implementation. It is crucial to ensure clear and effective communication channels and collaboration between nursing staff, management, patient and patient attendants, and other relevant stakeholders
- **External Variables :** External variables such as high patient traffic, unexpected / Emergency situations or disruptions may prevent evaluations from being completed on time.
- **Sustainability:** Ensuring the long-term sustainability of the intervention can be challenging. Without ongoing monitoring, reinforcement, and continuous quality improvement efforts, there is a risk of the intervention losing effectiveness over time or being abandoned altogether.

Engaging relevant stakeholders, careful planning, efficient communication, and ongoing support were necessary for addressing these issues. Implementation difficulties can be overcome and the likelihood of an intervention's successful implementation can be increased by employing strategies like providing comprehensive training, addressing concerns through open dialogue, securing support from leadership, and making use of available resources.

- **Effective Communication:** The purpose, advantages, and anticipated outcomes of the intervention should be made abundantly clear to nursing staff. Address any concerns

or misconceptions that the nursing staff might have and connect with them in the dynamic cycle

- **Inclusion and Collaboration:** Include the nursing staff in the development and implementation of the intervention to encourage ownership and buy-in. Encourage them to share thoughts, viewpoints, and feedback at each level.
- **Training and Education:** Provide comprehensive training and education on the intervention, including its rationale and benefits. Address any skill gaps or concerns through targeted training sessions or individual coaching.
- **Prioritization:** Identification and prioritization of the critical resource needs for the intervention. It is crucial to take each resource demand into account, as well as its viability and influence. Priority should be given to resources that have a greater chance of significantly improving patient outcomes and assessment times.
- **Continuous Evaluation and Adaptation:** Regular and Timely evaluation of effectiveness and impact of intervention on initial assessment time will help to identify any barriers or areas for improvement and adapt the intervention accordingly.

OBJECTIVE 6: Recommend strategies for reducing the time of initial assessment by nursing staff in patient departments.

To reduce the time of initial assessment by nursing staff in patient departments, here are some strategies that can be considered:

- i. **Standardize Initial Assessment Processes:** Develop standardized protocols or guidelines for conducting the initial assessment. This increases consistency and streamlines the evaluation process. Include key elements to be evaluated, documentation requirements and completion time.
- ii. **Implement Structured Assessment Tools:** Use structured assessment tools or checklists to guide nursing staff in the assessment process. These tools help ensure that all important aspects are addressed efficiently, reducing the time spent on assessments.
- iii. **Optimize Workflow and Staffing Patterns:** Analyze patient department workflow and identify areas for improvement. Streamline processes, eliminate unnecessary steps and optimize staffing models to increase efficiency and minimize delays in initial assessments.
- iv. **Enhance Communication and Handoff Processes:** Establish effective communication channels and standardized handover procedures between shifts. Ensure that relevant patient information is clearly communicated and minimize the time spent gathering relevant information during the assessment.
- v. **Provide Targeted Training and Education:** Provide training programs to improve the assessment, time management and communication skills of nursing staff. Address areas of improvement identified through performance evaluations or feedback.

- vi. Foster Interdisciplinary Collaboration : Encourages collaboration and communication between the various health professionals involved in the assessment process. Promote a team-based approach to initial assessment using, leveraging the expertise of various disciplines.
- vii. Allocate Dedicated Assessment Time : Designate specific time slots or reserved time slots for initial assessments to minimize interruptions and distractions. This ensures that nursing staff can focus solely on assessment without additional competing demands.
- viii. Continuously Monitor and Evaluate : Continuous monitoring and evaluation systems for the initial evaluation period should be introduced. Review data regularly, identify trends or issues, and make necessary changes to optimize performance.
- ix. Foster a Culture of Efficiency : Promote a culture of efficiency and continuous improvement in patient wards. Identify and celebrate initiatives that reduce assessment time. Encourage feedback and suggestions from nursing staff to identify further improvement opportunities.

CONCLUSION AND RECOMMENDATIONS

From the results of this study , valuable insights and significant scope for improvement in terms of efficiency and timeliness was drawn out. The study found that the average time for initial assessment, known as the Time to Assessment (TAT), at the starting of the research exceeded 60 which was significantly higher than the prescribed limit of 60 minutes. It came out to be precisely 66.24 minutes. Factors contributing to the delay in initial assessment included Emergency Situations, staffing and workload issues, communication and handoff Issues, resource constraints, Patient factors, Inadequate Training, etc.

The initial assessment time of 66.24 minutes revealed the need for interventions to optimize efficiency and enhance patient care. Prolonged assessment times also have a several implications, including patient dissatisfaction, compromised patient safety, increased workload for nurses, and strain on resources.

Addressing this issue required a thorough evaluation of the factors contributing to the prolonged assessment times. This evaluation considered workflow, staffing levels, patient complexity, documentation processes, and interdisciplinary communication. Standardized assessment protocols, additional training and resources for nurses, optimized technology utilization, and streamlined documentation processes all helped reduce assessment times.

Through the implementation of these interventions, the assessment time was successfully reduced to 47 minutes 15 seconds which was within the prescribed limit. The improvements observed indicate enhanced patient safety, improved patient satisfaction, and optimized utilization of nursing resources. These outcomes contribute to a more streamlined and efficient healthcare delivery process.

Challenges and barriers encountered during the implementation of the intervention were identified, including Resistance to change, Resource Limitations, workload and time constraints, staffing and resource availability, communication and collaboration issues, education and training needs, , and external variables.

To overcome these challenges, strategies such as Standardize Initial Assessment Processes: streamlined admission procedures, optimal staffing and work flow patterns, standardized assessment protocols, interdisciplinary collaboration, effective communication systems, continuous education and training, process monitoring and evaluation, and a culture of continuous quality improvement were recommended.

Also it was found that before the interventions, out of 140 in patient sample size, a total of 91 samples exceeded the time period i.e. their assessment took more than 60 minutes; while only 91 samples were assessed within 30 minutes.

After the interventions like training and education , out 170 in-patients sample size, assessment of 40 inpatients exceeded 60 mins, while 114 inpatients were assessed within 60 mins which is more than pre intervention . Also 16 assessments were completed with a commendable time period of 30 mins which in turn is a benchmark for any healthcare organisation.

Key performance indicator of nursing initial assessment of most of the organisation is 30 mins. By continuing to focus on quality improvement and implementing further recommendations, the target of achieving a 30-minute assessment time can be realized, ultimately enhancing the overall patient care experience and healthcare outcomes.

It is important to continually evaluate the impact of these interventions and monitor the assessment time to ensure sustained improvement. Regular feedback from nurses and patients can provide valuable insights for further refinement of processes and interventions and can lead to more timely and effective medical assessments, ultimately benefiting the patients and the hospital as a whole.

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For Collection and Analysis of data

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