Dissertation Training

At

EYE-Q VISION PVT LTD.

Assessment and Gap analysis of accredited (Muzaffarnagar) and non- accredited (Saharanpur) Eye-Q hospital against NABH standards

by

Name – Dr. Akshita Gupta

Enroll No. PG/21/009

Under the guidance of

Dr. Nidhi Yadav
Associate Professor

PGDM (Hospital & Health Management)

2021-23

International Institute of Health Management ResearchNew Delhi

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(Completion of Dissertation from respective organization)

The certificate is awarded to

Name — Dr. Akshita Gupta

in recognition of having successfully completed his/her Internship in the department of Operations

Title - Management Trainee- Operations

and has successfully completed his/her Project on

Assessment and Gap analysis of accredited (Muzaffarnagar) and non- accredited (Saharanpur) Eye-Q hospital against NABII standards

Date 30th APRIL 2023

Organisation — EYE-Q VISION PVT LTD.

He/She comes across as a committed, sincere & diligent person who hasa strong drive & zeal for learning.

We wish him/her all the best for future endeavors.

Training & Development

Zonal Head-Human Resources

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr Akshita Gupta student of PGDM (Hospital & Health Management) from International Institute of Health Management Research, New Delhihas undergone internship training at Seva at Home India Pvt Ltd from 16th January 2023 to 30th April 2023.

The Candidate has successfully carried out the study designated to him during internshiptraining and his/her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course

requirements.I wish him all success in all his/her future

endeavors.

Dr. Sumesh Kumar
Associate Dean, Academic and Student Affairs
IIHMR, New Delhi

Dr. Nidhi Yadav
IIHMR, New Delhi

Certificate of Approval

The following dissertation titled **"Assessment and gap analysis of accredited (Muzzafarnagar) and non-accredited (Saharanpur) EyeQ hospital against NABH Standards" at "EyeQ Vision Pvt. ltd."** is hereby approved as a certified study in management carried out and presented in a manner satisfactory to warrant its acceptance as a prerequisite for the award of **PGDM (Hospital & Health Management)** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

Dissertation Examination Committee for evaluation of the dissertation.

Name	Signature
Dr Altaf Yousuf	
Dr Ratika Samtani	
Dr Kalpana Goyal	

Certificate from Dissertation Advisory Committee

This is to certify that **Dr Akshita Gupta,** a graduate student of the **PGDM (Hospital & Health Management)** has worked under our guidance and supervision. He/ She is submitting this dissertation titled "**Assessment and Gap analysis of accredited (Muzaffarnagar) and non- accredited (Saharanpur) Eye-Q hospital against NABH standards**" in partialfulfillment of the requirements for the award of the **PGDM (Hospital & Health Management).**

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.

Dr. Nidhi Yadav
Associate Professor

IIHMR- Delhi

Ms. Abida Khutan
Operations Manager
Muzaffarnagar

EYE-Q VISION PVT LTD

INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH,
NEW DELHI

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled Assessment and Gap analysis of accredited (Muzaffarnagar) and non-accredited (Saharanpur) Eye-Q hospital against NABH standards.

and submitted by Dr. Akshita Gupta Enrollment No. PG/21/009 under the superviston of Dr. Nidhi Yadav for award of PGDM (Hospital & Health Management) of the Institute carried out during the period from 16" January 2023 to 30th April 2023 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other Institute or other similar institution of higher learning.

Signature

FEEDBACK FORM

Name of the Student: DR. AKSHITA GUPTA

Name of the Organisation in Which Dissertation Has Been Completed: EYE- Q VISION PVT LTD

Area of Dissertation: OPERATIONS

Attendance: REGULAR & PUNCTUAL

Objectives achieved: - with various departments such as doctors, supply chain, credit team, other resources for smooth functioning of centres.

Deliverables: ensured stock (OT/OPD) consumables, medicines, optical managed appropriately.
ensured efficient OT utilization.

Strengths: general upkeep of centre
punctual, hard-working, sincere, good management skill

Suggestions for Improvement: more areas for growth

Suggestions for Institute (course curriculum, industry interaction, placement, alumni): None

Ms. Abida Khatun
Operations
Manager EYE-Q
Vision Pvt Ltd

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PREFACE

ABSTRACT

Title:A comparative study for assessment and gap analysis of accredited (Muzaffarnagar) and non- accredited (Saharanpur) EyeQ hospital against NABH Standards.

Objective: The study aims to conduct a thorough assessment of the Saharanpur center's compliance with NABH standards and identify areas where improvements are needed. By comparing the non-accredited center with the accredited center in Muzaffarnagar, the study seeks to gain insights into the gaps in NABH standards and understand the specific challenges faced by the Saharanpur center

Based on the findings, the study aims to develop and implement targeted strategies to bridge the identified gaps and improve adherence to NABH standards. These strategies may include staff training and orientation programs, process improvements, and enhanced documentation practices, among others. The ultimate goal is to facilitate the Saharanpur center in obtaining NABH accreditation, aligning it with the recognized quality standards of EyeQ hospitals.

Methods:A comparative study study design was employed, involving a sample of 37 which included all the staff members of EyeQ Hospital and excluded all the patients and staff of other EyeQ hospital other than Muzaffarnagar and Saharanpur. Convenience sampling was used to select sample. Self Assessment tool kit of NABH standards for entry level Small Healthcare Organisation (SHCO) 5th edition is used and data is analysed on the scoring of 0, 5 and 10 and employed for data analysis, including data categorization, graphical representation, and variables assessment.

Results: The comparative assessment and gap analysis of the accredited (Muzaffarnagar) and non-accredited (Saharanpur) EyeQ hospitals against NABH standards revealed several areas of concern in the non-accredited center.

Through record reviews, it was found that the staff in Saharanpur lacked orientation and documentation in key areas such as access, assessment, and continuity of care. Facility management and safety were compromised due to missing operational and maintenance plans. Hospital infection control showed incomplete documentation of bio-medical waste treatment.

Observations further highlighted deficiencies in signage, standard precautions, and the segregation of biomedical waste, indicating non-compliance with NABH standards. Cleanliness and general hygiene of facilities were also found to be below the required standards.

Interviews conducted with staff members revealed similar concerns in hospital infection control, facility management, and staff orientation to services related to access, assessment, and continuity of care.

Conclusion: The findings of this study emphasize the need for targeted interventions and improvement initiatives in the non-accredited Saharanpur EyeQ hospital to align with NABH standards. The identified gaps in compliance with NABH standards provide a road map for quality improvement efforts. By addressing the areas of concern, such as staff orientation, documentation, facility management, and infection control, the Saharanpur center can work towards obtaining NABH accreditation. Training programs and educational initiatives should be implemented to ensure staff members are knowledgeable about NABH standards and adhere to them consistently.

DISSERTATION TRAINING

1.1. INTRODUCTION

Eye-Q Vision Pvt Ltd is a leading eye care organization dedicated to providing comprehensive and state-of-the-art vision solutions. Established in [year], Eye-Q Vision has grown to become a trusted name in the field of eye care, offering a wide range of services to improve and maintain eye health.

With a mission to make quality eye care accessible to all, Eye-Q Vision focuses on delivering personalized and advanced treatments using the latest technologies and techniques. The company boasts a team of highly skilled and experienced ophthalmologists, optometrists, and support staff who are committed to delivering excellence in eye care.

Eye-Q Vision offers a range of services, including routine eye examinations, refractive surgeries (such as LASIK and PRK), cataract surgeries, glaucoma management, pediatric eye care, and treatment for various other eye conditions. They also provide contact lenses, eyeglasses, and other optical products to cater to the diverse needs of their patients.

In addition to its commitment to quality eye care, Eye-Q Vision places a strong emphasis on patient education and awareness. The organization strives to educate individuals about the importance of regular eye check-ups, preventive measures, and lifestyle choices that promote good eye health.

With a network of well-equipped eye care centers across different locations, Eye-Q Vision aims to reach out to as many people as possible, ensuring convenient access to their services. Their centers are designed to provide a comfortable and welcoming environment, creating a positive experience for patients.

Overall, Eye-Q Vision Pvt Ltd stands as a trusted and reliable provider of comprehensive eye care services, driven by a passion for improving vision and enhancing the quality of life for their patients.

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PUSHERS- DREAMERS- LEADERS:

Dr. Ajay Sharma

Founder and CMD

Dr. Ajay Sharma has made significant contributions to the field of ophthalmology in India over the course of his 25-year career. He obtained his MBBS degree in 1990 and his Master of Surgery in Ophthalmology in 1994 from PGIMS, Rohtak. In 1995, he served as a Senior Resident at Safdarjung Hospital in New Delhi. He completed two fellowships in Cataract Microsurgery and IOL Implantation and Phacoemulsification in 1996 at the prestigious LV Prasad Eye Institute in Hyderabad. From 1994 to 1995, he also served in the Haryana Civil Medical Services.

In 1996, Dr. Sharma was among the first few surgeons in India to introduce the Phacoemulsification technique. He also played a pioneering role in bringing Toric IOLs and Toric Multifocals to the country. With nearly 1.5 lakh surgeries performed, Dr. Ajay is recognized as one of India's foremost ophthalmologists, possessing extensive knowledge and top-notch surgical expertise.

Dr. Sharma has always aimed to create social impact, providing affordable, quality eye care in India, and making a small contribution to reducing blindness in the country. He has received numerous awards for his exceptional work, including the Gold Medal by the Intraocular Implant & Refractive Society of India, which was presented to him by the Honorable Governor of Tamil Nadu, for his exemplary work and contributions to Indian Ophthalmology. In addition, he received the Frost and Sullivan Award in 2012 for Best Eye Care Service Provider, the Best Ophthalmologist in Haryana 2012, the Best Ophthalmologist in North India 2013 at Business and Service Excellence Awards, and the Excellence Award to serve humanity from the Honorable Governor of Haryana and Punjab in 2015.

Mr. Rajat Goel

Co-Founder and CEO

A dynamic healthcare IT professional with over 24 years of experience in clinical practice, healthcare management, quality consulting, clinical change management, and healthcare digital transformation.

He is passionate about healthcare information technology and has a unique capacity to combine clinical knowledge, healthcare management expertise, and quality management skills to clearly understand and not only resolve difficulties faced by providers and payers, but also to assist them in developing and implementing solutions that effectively and efficiently satisfy their needs.

He's also interested in teaching physicians about EMRs and IT systems, as well as ensuring that electronic medical/health records are adopted through change management, as well as mentoring students and physicians preparing for jobs in healthcare administration and informatics.

1.2 OBSERVATIONS AND LEARNINGS

1.2.1. Machines and Functions

1. IOL Master- The IOL Master is a specialized ophthalmic diagnostic device used in the field of eye care. It is primarily used for measuring the length of the eye and determining the appropriate intraocular lens (IOL) power for cataract surgery or refractive lens exchange. The IOL Master helps ophthalmologists and optometrists to accurately calculate the power of the artificial lens that will be implanted in the eye during these procedures.

   The device uses optical biometry to measure the axial length of the eye, as well as other parameters such as corneal curvature and anterior chamber depth. These measurements are crucial for selecting the correct IOL power and achieving optimal visual outcomes for patients undergoing cataract surgery.

2 KR (Autorefraction + Keratometer) refers to a combination of two diagnostic instruments used in ophthalmology and optometry for measuring refractive errors and corneal curvature of the eye.

Autorefraction is a technique that utilizes automated optical systems to measure the refractive error of the eye, which includes parameters such as sphere, cylinder, and axis. It provides an objective assessment of a person's refractive status, helping to determine the appropriate prescription for corrective eyeglasses or contact lenses.

A keratometer, on the other hand, is a device specifically designed to measure the curvature of the cornea, the clear front surface of the eye. It provides important information about the corneal shape and curvature, which is essential for diagnosing and managing various eye conditions, including astigmatism and keratoconus. The keratometer measures the steepness and flatness of the cornea in different meridians, typically represented by the values of K1 and K2.

3 Non-ContactTonometer - A non-contact tonometer (NCT) is a diagnostic instrument used to measure intraocular pressure (IOP) without touching the surface of the eye. It is a commonly used method for screening and monitoring glaucoma, a condition characterized by increased pressure within the eye that can lead to optic nerve damage and vision loss if not properly managed. The non-contact tonometer works based on the principle of air-puff tonometry. The instrument releases a rapid, gentle puff of air onto the front surface of the eye, specifically targeting the cornea. As the air interacts with the cornea, it causes a slight indentation and the cornea begins to move. The tonometer uses advanced sensors to measure the change in corneal response caused by the air puff.

4 A-scan - A-scan, short for amplitude scan, is a diagnostic technique used in ophthalmology to assess the dimensions of various structures within the eye, particularly the axial length of the eyeball. It is primarily used for pre-operative planning of intraocular lens (IOL) implantation in cataract surgery and for diagnosing conditions such as glaucoma.

The A-scan ultrasound device emits high-frequency sound waves into the eye, which then bounce off the different ocular structures and return as echoes. These echoes are recorded

and analyzed to determine the distance traveled by the sound waves and, consequently, the dimensions of the eye's structures. It provides several important measurements like

Axial Length, Anterior Chamber Depth, Lens Thickness and Tumor Evaluation.

5 B-scan - B-scan, short for brightness scan, is a diagnostic imaging technique used in ophthalmology to visualize and assess the structures within the eye, particularly the posterior segment. It is commonly employed when direct visualization of the posterior segment is not possible or when a more detailed assessment is needed.

The B-scan ultrasound device emits high-frequency sound waves into the eye, which then bounce off the different structures within the eye and return as echoes. These echoes are converted into a two-dimensional image, allowing for visualization of the internal structures.

6 Slit lamp - A slit lamp is a specialized ophthalmic instrument used by eye care professionals, including ophthalmologists and optometrists, to examine the structures of the anterior segment of the eye. It provides a magnified and illuminated view of the eye, allowing for detailed assessment and diagnosis of various eye conditions.

The slit lamp consists of a binocular microscope combined with a light source and a slit beam. It is a fundamental tool in routine eye examinations, contact lens fittings, and the diagnosis and management of various eye conditions. It provides valuable information for detecting and monitoring eye diseases, evaluating the response to treatment, and assisting in surgical planning when necessary.

7 Lensometer - A lensometer, also known as a lensmeter or focimeter, is an ophthalmic instrument used to measure the prescription of eyeglasses or contact lenses. It is an essential tool in optometry practices and optical laboratories for verifying and determining the power and other optical characteristics of lenses.

8 Applanation - Applanation refers to the process of flattening or pressing against a surface, typically used in ophthalmology to describe a technique for measuring intraocular pressure (IOP). In this context, applanation tonometry is a method used to assess the pressure inside the eye.

The most commonly used applanation tonometer is the Goldmann applanation tonometer (GAT). It involves gently touching the cornea with a calibrated probe or prism that has a known surface area. A small amount of local anesthetic eye drops and a fluorescein dye may be used to aid in the measurement process. It is considered the gold standard for measuring IOP and is commonly used in the diagnosis and management of glaucoma. Elevated IOP is a significant risk factor for glaucoma, a condition characterized by progressive damage to the optic nerve, leading to vision loss. Regular IOP measurements with applanation tonometry help monitor the effectiveness of treatment and the progression of the disease.

9 YAG Laser - YAG laser, short for Yttrium-Aluminum-Garnet laser, is a type of laser used in ophthalmology for various procedures within the eye. The YAG laser emits a high- energy beam of light that can pass through transparent tissues, making it particularly useful for treatments in the posterior segment of the eye.

10 Retinoscope - Objectively determine a patient's refractive error. It allows for the measurement of the patient's prescription for corrective lenses, including nearsightedness (myopia), farsightedness (hyperopia), and astigmatism.

The retinoscope works on the principle of retinoscopy, which involves shining a beam of light into the patient's eye and observing the movement and characteristics of the reflected light as it interacts with the retina.

11 Gonioscopy lens- A gonioscopy lens, also known as a gonio lens or a gonioprism, is a specialized lens used in ophthalmology to examine the angle structures of the eye. It is commonly used in the diagnosis and management of glaucoma, a condition characterized by increased intraocular pressure and damage to the optic nerve.

The gonioscopy lens is typically a small, handheld lens that is placed directly on the cornea of the patient's eye. It has a curved surface and a mirror or prism incorporated into its design, which helps to visualize the angle structures of the eye.

12 Optical Coherence Tomography - It is an advanced imaging technique used in ophthalmology and other medical specialties to capture high-resolution cross-sectional images of biological tissues.

13 OCT utilizes light waves to generate detailed, three-dimensional images of tissue structures. It works on the principle of interferometry, where a beam of light is split into two arms: a reference arm and a sample arm. The light from the sample arm is directed towards the tissue being examined, and the light waves that are reflected back from the tissue are combined with the light from the reference arm. By comparing the interference patterns between the reflected light waves and the reference light waves, the system can generate detailed images of the tissue.

14 Optical Coherence Tomography Angiography - It is an advanced imaging technique that combines the principles of OCT and angiography to visualize the blood vessels within the retina and other tissues of the eye. It provides non-invasive, high-resolution images of the microvasculature without the need for injecting contrast agents.

OCT-A utilizes the same interferometric principles as traditional OCT but with an additional step to detect motion in the reflected light waves. This allows for the

differentiation between stationary tissue structures and flowing blood within the vessels.

15 Humphrey Field Vision - is a commonly used method for assessing the visual field of a patient. It is a diagnostic test that measures the sensitivity of a person's visual field, or the ability to see objects in their peripheral (side) vision while fixating on a central target.

The Humphrey Visual Field test is typically performed using an automated perimeter, such as the Humphrey Field Analyzer. During the test, the patient sits in front of the perimeter and focuses on a central target while a series of light stimuli are presented at various locations in their visual field. The patient is instructed to press a button or indicate whenever they see a light stimulus.

16 Pentacam - It is a device used in ophthalmology for anterior segment imaging and analysis.

It is a non-invasive imaging system that captures high-resolution images and provides detailed measurements of the cornea, anterior chamber, and other structures of the eye. The Pentacam utilizes Scheimpflug imaging technology, where a rotating camera captures multiple cross-sectional images of the anterior segment of the eye. These images are then analyzed to generate three-dimensional maps and measurements of various parameters.

17 Wave scan - Also known as wavefront analysis or wavefront aberrometry, is a diagnostic technique used in ophthalmology to measure and analyze the optical aberrations of the eye. It provides a detailed assessment of the way light travels through the eye, allowing for a more precise evaluation of refractive errors and higher-order

aberrations.

Wavefront analysis is based on the principle that the optical characteristics of the eye can be represented as a wavefront, which describes the shape of the incoming light as it passes through the eye's optical system. By measuring and analyzing this wavefront, wavefront aberrometer can identify and quantify aberrations that may affect visual quality.

1.2.2 Eye Diseases

There are numerous eye diseases and conditions that can affect the health and function of the eyes. Some of the common diseases are mentioned below-

1. Refractive Errors: These include conditions such as myopia (nearsightedness), hyperopia (farsightedness), astigmatism, and presbyopia. Refractive errors affect the way light is focused on the retina, resulting in blurred vision.
2. Cataracts: Cataracts involve the clouding of the eye's natural lens, leading to progressive vision loss and decreased visual clarity. Cataracts are usually age-related but can also be caused by injury, certain medications, or underlying medical conditions.
3. Glaucoma: Glaucoma is a group of eye conditions characterized by damage to the optic nerve, usually due to elevated intraocular pressure (pressure inside the eye). It can lead to gradual peripheral vision loss and, if left untreated, may result in permanent vision impairment or blindness.
4. Age-Related Macular Degeneration (AMD): AMD affects the macula, the central part of the retina responsible for sharp, central vision. It is a leading cause of vision loss in older adults and can result in a progressive loss of central vision.
5. Diabetic Retinopathy: This eye disease is associated with diabetes and occurs when high blood sugar levels damage the blood vessels in the retina. It can lead to vision loss or even blindness if left untreated.
6. Retinal Detachment: Retinal detachment occurs when the retina becomes separated from its underlying tissue layers. It is a medical emergency and requires immediate attention to prevent permanent vision loss.
7. Dry Eye Syndrome: Dry eye syndrome occurs when there is insufficient tear production or poor tear quality, leading to dryness, irritation, and discomfort in the eyes.
8. Conjunctivitis: Also known as pink eye, conjunctivitis is an inflammation of the

conjunctiva (the clear tissue covering the white part of the eye). It can be caused by infections, allergies, or irritants, and typically results in redness, itching, and discharge from the eyes.

9. Keratoconus: Keratoconus is a progressive thinning and bulging of the cornea, resulting in distorted vision. It usually starts during adolescence or early adulthood and can lead to significant visual impairment.

10. Retinitis Pigmentosa: This is a group of inherited eye disorders that cause the gradual degeneration of the retina. It typically leads to night blindness and peripheral vision loss.

1.2.3 Operations Management

Operations management in healthcare involves the planning, organizing, and controlling of various processes and activities to ensure the efficient and effective delivery of healthcare services. It focuses on optimizing resources, streamlining workflows, improving patient care, and maximizing operational performance within healthcare organizations. Here are some key aspects of operations management in healthcare:

1. Patient Flow Management: Efficiently managing the flow of patients through various stages of care, including registration, triage, diagnosis, treatment, and discharge. This involves optimizing appointment scheduling, managing wait times, and ensuring smooth transitions between different healthcare departments or units.
2. Capacity Planning: Determining the appropriate level of resources, such as hospital beds, operating rooms, and staff, to meet patient demand. This involves forecasting patient volumes, analyzing utilization rates, and ensuring adequate capacity to handle patient needs while minimizing resource bottlenecks or under utilization.
3. Supply Chain Management: Managing the procurement, inventory, and distribution of medical supplies, medications, and equipment. This includes optimizing supply chain processes, supplier relationships, and inventory levels to ensure timely availability of essential resources while minimizing waste and controlling costs.
4. Quality and Process Improvement: Implementing quality improvement initiatives to enhance patient safety, clinical outcomes, and operational efficiency. This includes utilizing quality management tools, monitoring performance metrics, identifying areas for improvement, and implementing evidence-based practices and guidelines.
5. Information Technology (IT) Integration: Leveraging technology and information systems to streamline operations, enhance communication, and improve patient care. This includes electronic health records (EHRs), telemedicine, data analytics, decision

support systems, and other IT solutions that support clinical workflows and decision-making.

6. Financial Management: Managing the financial aspects of healthcare operations, including budgeting, cost control, revenue cycle management, and reimbursement processes. This involves optimizing revenue streams, controlling expenses, and ensuring financial sustainability while complying with regulatory requirements.

7. Emergency Preparedness: Developing and implementing plans to respond to emergencies, disasters, and public health crises. This includes coordinating with emergency services, training staff, maintaining contingency plans, and ensuring the availability of resources to handle unexpected situations.

8. Continuous Quality Improvement: Emphasizing a culture of continuous improvement, encouraging feedback from patients and staff, and implementing initiatives to enhance the quality, safety, and efficiency of healthcare delivery.

DISSERTATION REPORT

Introduction:

The quality of healthcare services plays a crucial role in ensuring patient safety, effective treatment outcomes, and overall healthcare system improvement. In India, the National Accreditation Board for Hospitals and Healthcare Providers (NABH) has been established as an independent body to assess and accredit healthcare organizations based on predefined quality standards. Accreditation by NABH signifies that a hospital or healthcare facility has met the stringent criteria set forth by the board, demonstrating its commitment to providing quality care.

EyeQ Hospital is a renowned healthcare institution that specializes in providing comprehensive eye care services to patients in the Muzaffarnagar and Saharanpur districts of Uttar Pradesh, India. With a commitment to excellence in eye care, EyeQ Hospital has established itself as a trusted name in the region.

This comparative study aims to assess and conduct a comprehensive gap analysis between two eye hospitals located in the Muzaffarnagar and Saharanpur districts of Uttar Pradesh, India. The first hospital, referred to as Accredited EyeQ Hospital, has achieved NABH accreditation, while the second hospital, Non-Accredited EyeQ Hospital, is yet to pursue NABH accreditation.

The primary objective of this study is to evaluate the extent to which Accredited EyeQ Hospital complies with the NABH standards compared to Non-Accredited EyeQ Hospital. By conducting a detailed comparative analysis, we can identify the gaps in the quality of care, infrastructure, patient safety measures, documentation, and overall

organizational performance between the two hospitals.

The significance of this study lies in its potential to shed light on the benefits and importance of NABH accreditation for healthcare organizations. Accreditation not only helps hospitals streamline their operations and enhance patient care but also instills confidence in patients and healthcare providers regarding the quality and safety of services provided. Moreover, identifying the gaps in Non-Accredited EyeQ Hospital will provide valuable insights into areas that require improvement to meet NABH standards, thus paving the way for their journey towards accreditation.

The methodology employed in this study includes a comprehensive review of literature on NABH standards, healthcare quality, and accreditation processes. Additionally, site visits will be conducted to both hospitals, involving observations, interviews with key personnel, and data collection. The data will be analyzed using appropriate statistical tools and techniques to generate meaningful insights and draw valid conclusions.

The findings of this comparative study will serve as a valuable resource for healthcare professionals, hospital administrators, policymakers, and other stakeholders involved in the Indian healthcare system. By understanding the gaps and challenges faced by Non-Accredited EyeQ Hospital, steps can be taken to address these issues and foster a culture of continuous quality improvement in healthcare delivery.

In conclusion, this study aims to provide a detailed comparative analysis of an accredited hospital (Muzaffarnagar) and a non-accredited hospital (Saharanpur) against NABH standards. Through this analysis, we seek to evaluate the compliance of

Accredited EyeQ Hospital with NABH standards and identify the gaps in Non-Accredited EyeQ Hospital. The study's findings will contribute to the existing body of knowledge on healthcare quality, accreditation, and serve as a road map for hospitals aspiring to achieve NABH accreditation in the future..

Aim:

To assess and analyse the gap in compliance of staff of Muzaffarnagar (NABH certified) and Saharanpur (non-NABH) towards the NABH Standards in EyeQ Hospital.

Objective:

1) To assess and analyse the gaps in NABH Standards of Non accrediated EyeQ hospital(Saharanpur)

2) To compare and implement the strategies in order to get NABH accredation of non-accredited eye hospital.

Literature Review:

1. Accreditation and its Importance in Healthcare:

- Definition and significance of accreditation in healthcare organizations: Explore the concept of accreditation and its role in ensuring quality, safety, and adherence to standards in healthcare. Highlight the importance of accreditation as a quality assurance mechanism.
- Benefits of accreditation, such as improved patient outcomes, increased patient satisfaction, and enhanced organizational performance: Provide evidence from studies that demonstrate the positive impact of accreditation on patient care, safety, and overall healthcare outcomes. Discuss how accreditation drives quality improvement efforts.
- Studies highlighting the impact of accreditation on healthcare quality and patient safety: Summarize research studies that have examined the association between accreditation and healthcare quality indicators, such as reduction in medical errors, improved infection control, and patient safety outcomes.

2. National Accreditation Board for Hospitals and Healthcare Providers (NABH):

- Overview of NABH as an accreditation body in India: Provide background information on NABH, its establishment, and its role in accrediting healthcare organizations in India. Discuss the credibility and recognition of NABH accreditation.
- Introduction to NABH standards for eye care and their relevance: Describe the specific standards and criteria set by NABH for eye care services. Explain how these standards contribute to ensuring quality and patient safety in eye hospitals.
- Studies and research articles evaluating the effectiveness of NABH accreditation in eye hospitals: Summarize research studies that have evaluated the impact of NABH accreditation specifically in eye care settings. Highlight the findings related to quality

improvement, patient outcomes, and operational efficiency in accredited eye hospitals.

- Comparison of accredited and non-accredited hospitals in terms of quality and patient safety: Review studies that have compared the performance and outcomes of accredited and non-accredited eye hospitals. Discuss the differences in quality indicators, patient satisfaction, and adherence to best practices between the two groups.

3. Quality Standards in Eye Care:

- Identification of specific quality standards related to eye care services: Provide an overview of the key quality standards and guidelines applicable to eye care, such as those related to surgical procedures, infection control, patient education, and ethical considerations.
- Best practices and guidelines for providing high-quality eye care: Highlight established best practices and clinical guidelines in the field of eye care. Discuss their relevance in promoting optimal patient outcomes and safety.
- Studies assessing the implementation and adherence to quality standards in eye hospitals: Summarize studies that have evaluated the extent to which eye hospitals comply with established quality standards. Discuss the challenges faced by eye hospitals in implementing these standards and strategies to overcome them.
- Evaluation of the impact of quality standards on patient outcomes in eye care: Review research that has examined the association between adherence to quality standards and patient outcomes in eye care. Discuss the findings related to improved visual outcomes, reduced complications, and patient satisfaction.

4. Gap Analysis and Performance Improvement:

- Methodologies and frameworks for conducting gap analysis in healthcare organizations: Describe established methodologies and frameworks for conducting gap analyses in

healthcare settings. Discuss their applicability to eye hospitals and their usefulness in identifying areas for improvement.

- Approaches to identify gaps in compliance with accreditation standards: Explore approaches to identifying gaps in compliance with accreditation standards, such as internal audits, self-assessment tools, and external evaluations. Discuss how these approaches can be applied to Non-Accredited EyeQ Hospital to identify areas that require improvement.
- Strategies for performance improvement in non-accredited hospitals: Discuss strategies and interventions that non-accredited hospitals can implement to improve their performance and meet accreditation standards. Highlight successful quality improvement initiatives in healthcare organizations and their impact on patient care

5. Comparative Studies on Accredited and Non-Accredited Hospitals:

- Research studies comparing the quality of care, patient outcomes, and safety measures in accredited and non-accredited hospitals: Summarize comparative studies that have examined the differences in quality indicators, patient outcomes, and safety measures between accredited and non-accredited hospitals in the context of eye care. Discuss the findings related to accreditation's impact on improving quality and patient outcomes.
- Examination of the factors influencing the decision to pursue accreditation in healthcare organizations: Explore the factors that influence healthcare organizations, including eye hospitals, to pursue accreditation. Discuss the motivations, challenges, and benefits associated with the accreditation process.
- Analysis of the challenges faced by non-accredited hospitals and the impact on patient care: Identify and discuss the challenges faced by non-accredited eye hospitals, such as resource constraints, lack of standardized protocols, and limited quality improvement initiatives. Discuss the potential impact of these challenges on patient care and outcomes.

Methodology:

- Study Design- Comparative study
- Study setting- EyeQ Super Speciality Hospital, Muzaffarnagar and Saharanpur
- Sample size- Total 37. Muzaffarnagar- 19 and Saharanpur- 18
- Selection Criteria-

-- Include all the staff at EYEQ Hospital of Muzaffarnagar and Saharanpur. Staff includes- Manager, Doctors, Optometrist, Patient Relationship Executive (PRE), Pharmacist, Optician, Counsellor, Housekeeping, Trainees

-- Exclude all the patients and staff of other EyeQ hospital other than Muzaffarnagar and Saharanpur.

- Sampling Technique- Convenience Sampling
- Technique of Collection- Record review, Observation, interviews.
- Method and Tool to be used -

-- Self Assessment tool kit of NABH for entry level Small Healthcare Organisation (SHCO) 5th edition

-- Microsoft Excel in which Responses will be maintained and analyzed.

- Analysis Method:

Data categorization: Organize the data into categories based on the research questions and objectives of the study.

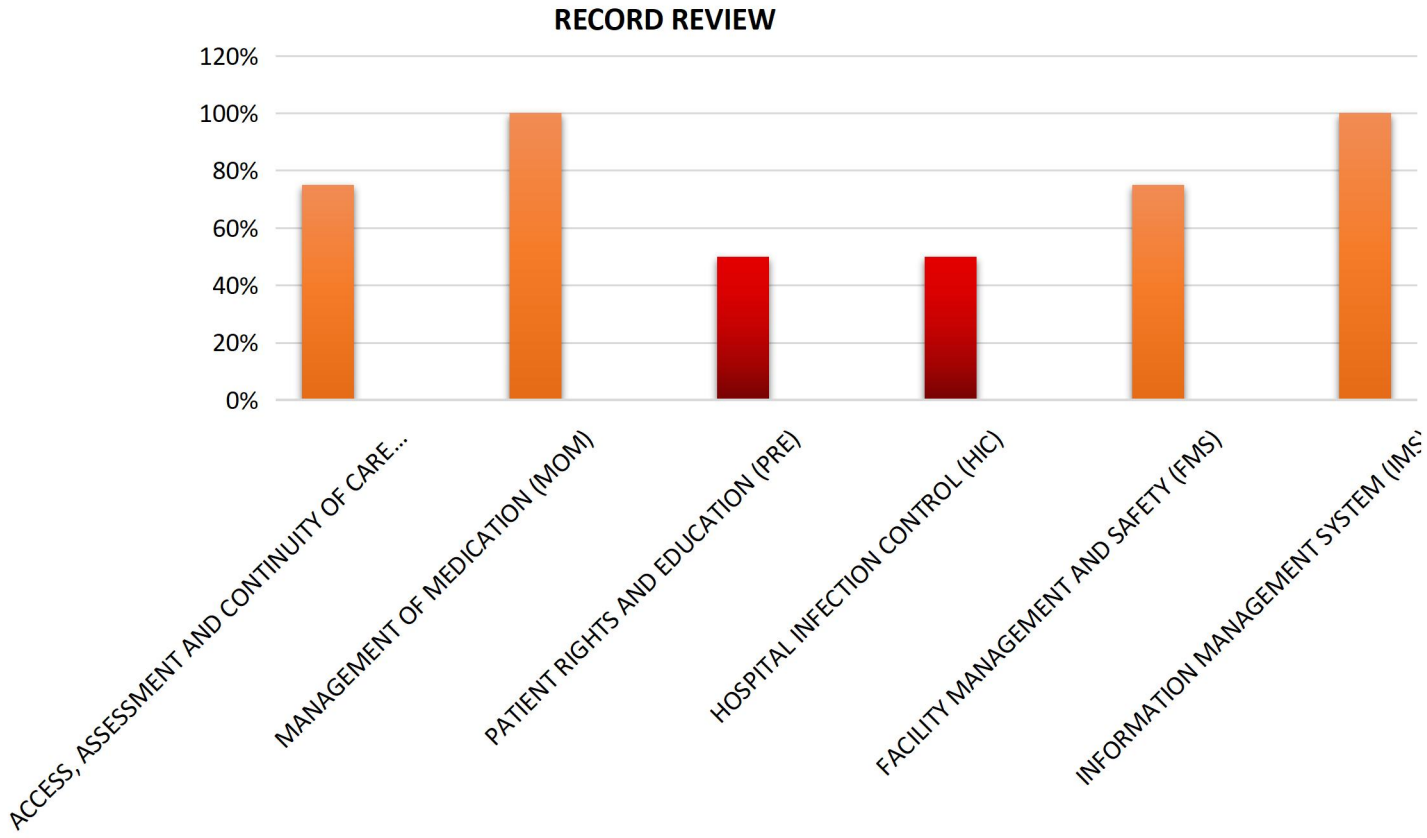
Data collection tool:

Self Assessment Toolkit

		MUZAFFARNAGAR	SAHARANPUR
CHAPTER 1 : ACCESS, ASSESSMENT AND CONTINUITY OF CARE (AAC)			
	The staff is oriented to these services.		
	The services provided are displayed.		
	The organization has a documented registration, admission and transfer process.		
	The organization defines the content of the assessments for the out-patients and inpatients.		
	The organization determines who can perform the assessments.		
	The initial assessment for in-patients is documented within 24 hours or earlier		
	Initial assessment of inpatients includes nursing assessment which is done at the time of admission and documented.		
	A discharge summary is given to all the patients leaving the organization (including patients leaving against medical advice).		
	Discharge summary contains the reasons for admission, significant findings, investigation results, diagnosis, procedure performed (if any), treatment given and the patient's condition at the time of discharge.		
	Discharge summary contains follow up advice, medication and other instructions in an understandable manner.		
Chapter 3: MANAGEMENT OF MEDICATION (MOM)			
	Documented procedure shall incorporate purchase, storage, prescription and dispensation of medications.		
	Documented policies and procedures exist for storage of medication		
	Medications are stored in a clean, safe and secure environment, and incorporate manufacturer's recommendations.		
	Sound alike and look alike medications are stored separately		
	Beyond expiry date medications are not stored/used.		
	List of emergency medicines is defined, stored, and available all the time.		
	Medication orders are clear, legible, dated and signed.		
	The organization defines a list of high risk medication & process to prescribe them.		
	Medications are checked prior to dispensing, including the expiry date to ensure that they are fit for use.		
	Medications are administered by trained personnel.		
	Medication administration is documented.		
Chapter 4: PATIENT RIGHTS AND EDUCATION (PRE)			
	Patient rights include respect for personal dignity and privacy during examination, procedures and treatment.		
	Patient rights include treating patient information as confidential.		
	Patient rights include obtaining informed consent before carrying out procedures.		
	Patient rights include information on how to voice a complaint.		
	Patient rights include information on the expected cost of the treatment.		
	Patient has a right to have an access to his / her clinical records.		
	Patients and families are educated on plan of care, preventive aspects, possible complications, medications, the expected results and cost as applicable.		
	Patients are taught in a language and format that they can understand.		
Chapter 5: HOSPITAL INFECTION CONTROL (HIC)			
	It focuses on adherence to standard precautions at all times.		
	Cleanliness and general hygiene of facilities will be maintained and monitored.		
	Cleaning and disinfection practices are defined and monitored as appropriate.		
	Equipment cleaning, disinfection and sterilization practices are included.		
	Laundry and linen management processes are also included		
	Hand hygiene facilities in all patient care areas are accessible to health care providers.		
	Adequate gloves, masks, soaps, and disinfectants are available and used correctly.		
	Appropriate pre and post exposure prophylaxis is provided to all concerned staff members.		
	The hospital is authorised by prescribed authority for the management and handling of Bio-Medical Waste.		
	Proper segregation and collection of Bio-Medical Waste from all patient care areas of the hospital is implemented and monitored.		
	Bio-Medical Waste treatment facility is managed as per statutory provisions (if inhouse) or outsourced to authorised contractor(s).		
	Requisite fees, documents and reports are submitted to competent authorities on stipulated dates.		
	Appropriate personal protective measures are used by all categories of staff handling Bio-Medical Waste.		

Chapter 6: CONTINUOUS QUALITY IMPROVEMENT (CQI)			
	There is a designated individual for coordinating and implementing the quality improvement and patient safety programme.		
Chapter 7: RESPONSIBILITIES OF MANAGEMENT (ROM)			
	The organization has a designated individual(s) to oversee the hospital wide quality and safety programme.		
	The organization's billing process is accurate and ethical.		
Chapter 8: FACILITY MANAGEMENT AND SAFETY (FMS)			
	Internal and External Signage's shall be displayed in a language understood by the patients and families.		
	Maintenance staff is contactable round the clock for emergency repairs.		
	There is a safety education programme for relevant staff.		
	There is a documented operational and maintenance (preventive and breakdown) plan.		
	Potable water and electricity are available round the clock.		
	Alternate sources are provided for in case of failure and tested regularly		
	The organization has plans and provisions for detection, abatement and containment of fire and non-fire emergencies.		
	The organization has a documented safe exit plan in case of fire and non-fire emergencies.		
Chapter 10: INFORMATION MANAGEMENT SYSTEM (IMS)			
	Every medical record has a unique identifier		
	Organization identifies those authorized to make entries in medical record		
	Every medical record entry is dated and timed		
	The author of the entry can be identified.		
	The record provides an up-to-date and chronological account of patient care.		
	Operative and other procedures performed are incorporated in the medical record.		
	The medical record contains a copy of the discharge note duly signed by appropriate and qualified personnel.		
	Care providers have access to current and past medical record.		
	Documented procedures exist for maintaining confidentiality, security and integrity of information.		
	Privileged health information is used for the purposes identified or as required by law and not disclosed without the patient's authorization.		
	Documented procedures are in place on retaining the patient's clinical records, data and information.		
	The retention process provides expected confidentiality and security		
	The destruction of medical records, data and information is in accordance with the laid down procedure.		

Results:



Based on the **record review**, several areas of concern have been identified in the assessment of the Accredited EyeQ Hospital. Here is a detailed explanation of the results:

1. Access, Assessment, and Continuity of Care:

- Staff not oriented to these services: The hospital staff lacks sufficient training or orientation regarding access, assessment, and continuity of care services. This may lead to potential gaps in providing timely and appropriate care to patients.
- Initial assessment for in-patients not documented within 24 hours or earlier: The hospital fails to document the initial assessments of in-patients within the recommended time frame. This could hinder effective care planning and may delay appropriate treatment for patients.

2. Facility Management and Safety:

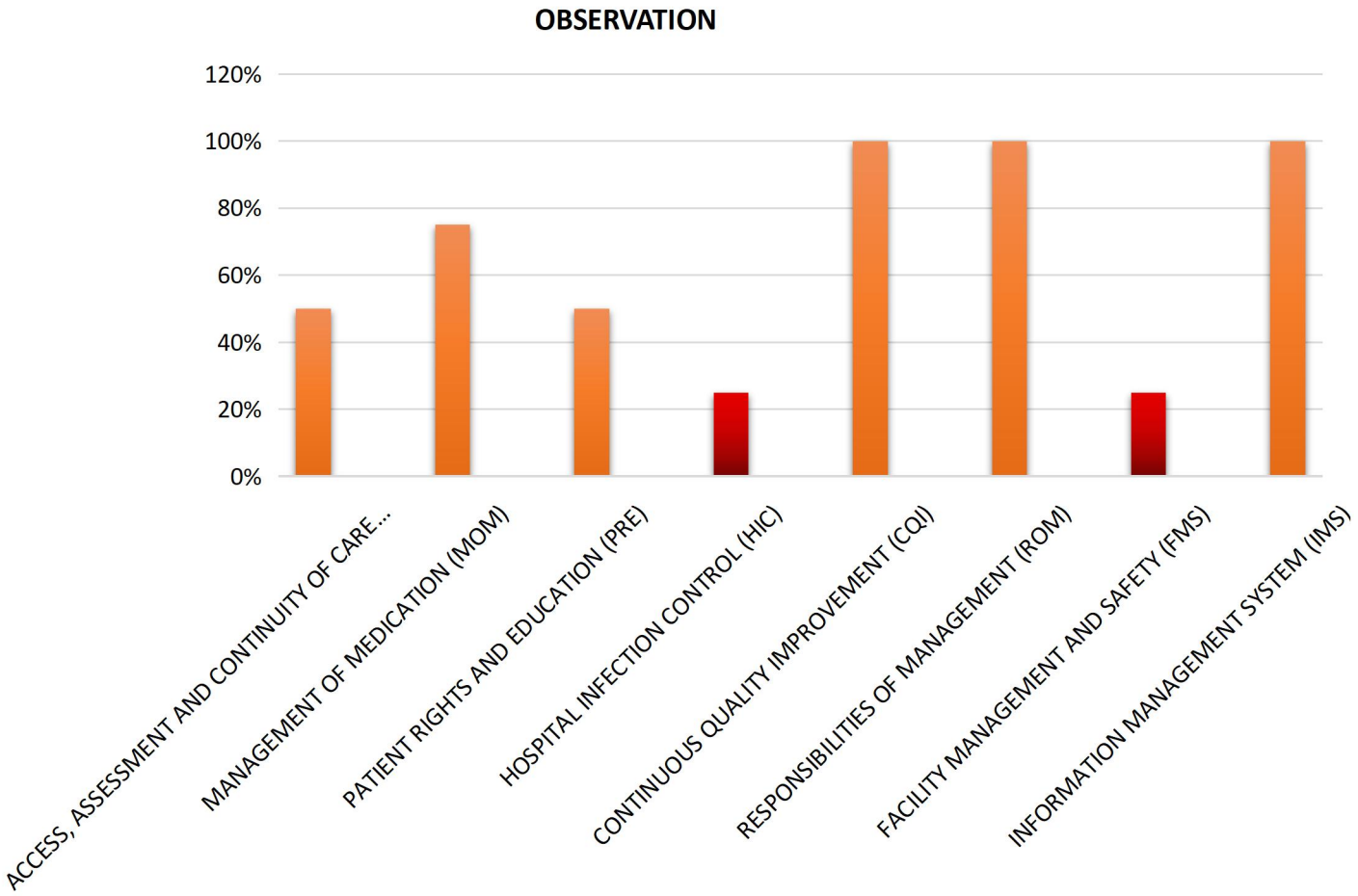
- Missing documents for operational and maintenance (preventive and breakdown) plan: The hospital lacks proper documentation for operational and maintenance plans. This may indicate a lack of systematic procedures for preventive maintenance and may compromise the overall safety and functioning of the facility.

3. Hospital Infection Control:

- Bio-Medical Waste treatment documentation incomplete: The hospital's documentation related to the treatment of bio-medical waste is incomplete. This raises concerns about the hospital's adherence to proper waste management practices and may pose risks to staff, patients, and the environment.

4. Patient Rights and Education:

- Patient consent forms not signed by a witness: The hospital fails to ensure that patient consent forms are properly signed by a witness. This raises questions about the hospital's compliance with ethical and legal requirements related to informed consent and patient rights.



Based on the **observations** made, several areas of concern have been identified in the assessment of Accredited EyeQ Hospital. Here is a detailed explanation of the results:

1. Facility Management and Safety:

- Missing signages: The absence of proper signages within the hospital premises can lead to confusion among patients, visitors, and staff. Signages play a crucial role in guiding individuals, ensuring efficient movement, and enhancing safety within the facility. The lack of signages indicates a potential gap in facility management and safety measures.

2. Hospital Infection Control:

- Non-compliance with standard precautions: Standard precautions are fundamental infection control measures that aim to prevent the transmission of infectious diseases within healthcare settings. The hospital's non-compliance with these precautions raises

concerns about the potential risk of healthcare-associated infections.

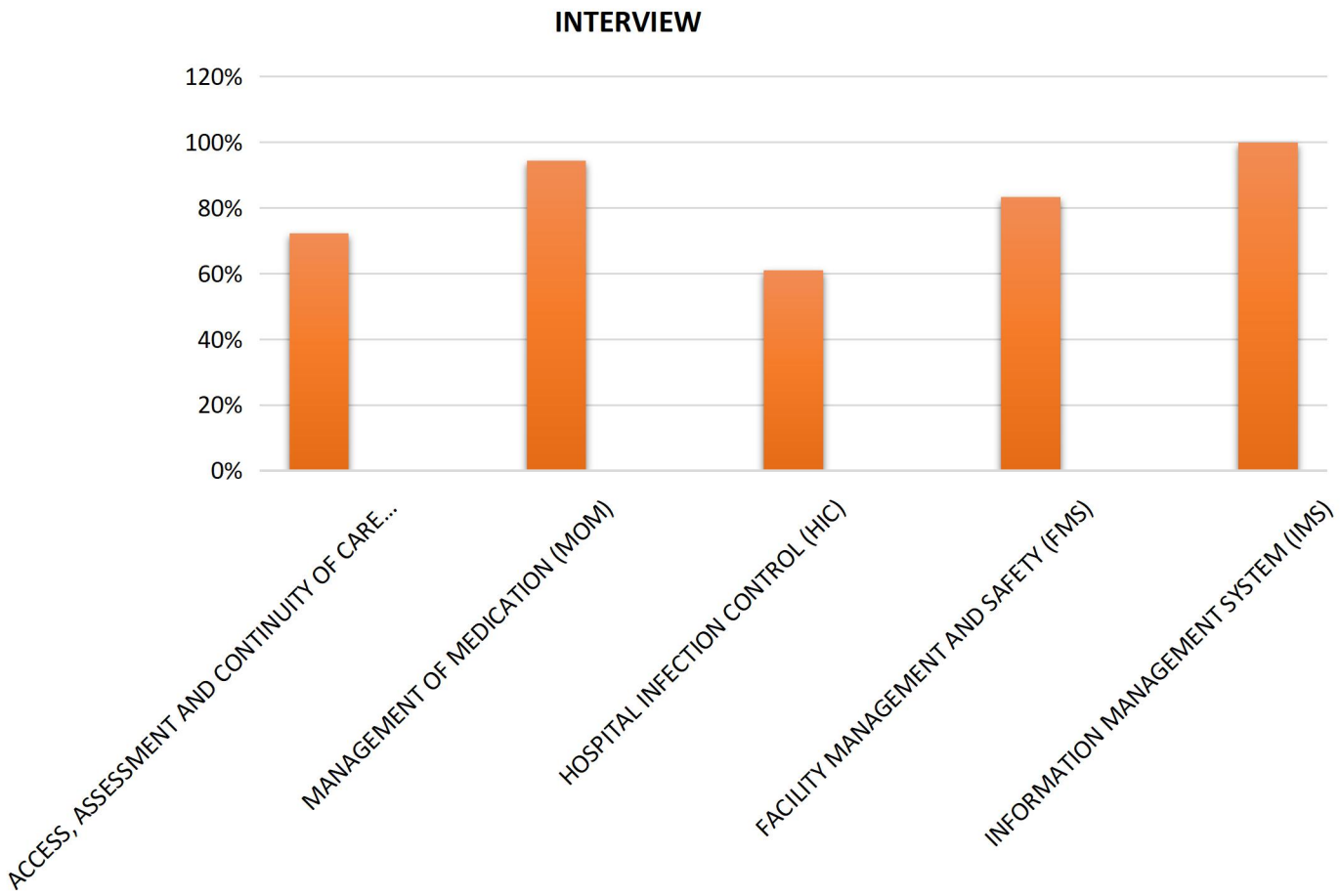
- Bio-Medical Waste segregation: Proper segregation and disposal of bio-medical waste are essential to minimize the risk of infections and environmental contamination. The non-compliance in this area suggests a gap in the hospital's waste management practices.
- Cleanliness and general hygiene of facilities: Cleanliness and general hygiene are crucial aspects of infection control in healthcare facilities. Non-compliance in this area indicates a potential risk of healthcare-associated infections and compromises patient safety.

3. Access, Assessment, and Continuity of Care:

- Initial assessment for in-patients not documented within 24 hours or earlier: Timely and comprehensive initial assessments are essential for accurate diagnosis, treatment planning, and continuity of care. The failure to document these assessments within the recommended timeframe may result in delays in providing appropriate care to in-patients.

4. Patient Rights and Education:

- Patient consent forms not signed by the patient or witness before admission: Obtaining proper consent from patients before admission is crucial to respect their autonomy and ensure their rights are upheld. The failure to have patient consent forms signed by the patient or a witness indicates a potential gap in the hospital's processes for obtaining informed consent.



During the interview process, several areas of concern have been identified regarding the assessment of Accredited EyeQ Hospital. Here is a detailed explanation of the results:

1. Hospital Infection Control:

- Standard precautions: The hospital shows non-compliance with standard precautions, which are essential measures to prevent the spread of infections within healthcare settings. Failure to adhere to these precautions can increase the risk of healthcare-associated infections and compromise patient safety.
- Bio-Medical Waste segregation: The hospital's practices related to the segregation of bio-medical waste are not in accordance with the established guidelines. Improper segregation can lead to environmental contamination and pose health risks to patients, staff, and the community.
- Cleanliness and general hygiene of facilities: The interview reveals concerns about the

cleanliness and general hygiene of the hospital facilities. Maintaining a clean and hygienic environment is crucial for preventing the transmission of infections and ensuring patient safety.

2. Access, Assessment, and Continuity of Care:

- Lack of orientation for recently appointed staff: The recently appointed staff members have not been adequately oriented to access, assessment, and continuity of care services. This lack of orientation may result in gaps in their knowledge and skills, potentially impacting the quality and continuity of patient care.

Discussion:

The combined discussion of the three results from the record review, observation, and interview at Accredited EyeQ Hospital reveals several areas of concern related to hospital infection control, access, assessment, and continuity of care, as well as facility management and safety. These findings highlight potential non-compliance with NABH standards and best practices, which can impact the quality and safety of patient care.

In terms of hospital infection control, the results indicate non-compliance with standard precautions, improper bio-medical waste segregation, and concerns regarding cleanliness and general hygiene. These issues pose significant risks to patient safety and increase the likelihood of healthcare-associated infections. Addressing these concerns requires implementing robust infection control protocols, providing staff training on standard precautions, improving waste management practices, and ensuring a clean and hygienic environment throughout the hospital.

Regarding access, assessment, and continuity of care, the findings reveal concerns regarding the documentation of initial assessments for in-patients and the lack of orientation for recently appointed staff. Timely and comprehensive initial assessments are essential for effective care planning, while staff orientation is crucial to ensure they have the necessary knowledge and skills to provide high-quality care. To address these concerns, the hospital should establish clear protocols for documenting assessments within the recommended timeframe and develop a comprehensive orientation program for new staff members to enhance their competency in delivering patient-centered care.

In terms of facility management and safety, the results highlight missing signages and concerns regarding facility maintenance and operational planning. Proper signages are

crucial for ensuring safe navigation within the hospital premises, while comprehensive operational and maintenance plans are essential for maintaining a safe environment and preventing equipment failures. The hospital should prioritize the installation of clear and visible signages, develop and implement robust facility management and maintenance plans, and ensure regular monitoring and documentation to enhance safety measures and facility operations.

Overall, addressing these combined concerns is critical for Accredited EyeQ Hospital to align with NABH standards, improve the quality and safety of patient care, and maintain a high level of performance. It is recommended that the hospital takes immediate action to rectify the identified issues, implement necessary training and education programs, establish standardized protocols, and conduct regular audits and evaluations to ensure ongoing compliance and continuous quality improvement. By addressing these concerns, the hospital can enhance patient outcomes, promote patient safety, and provide an environment conducive to quality healthcare delivery.

Recommendations:

Based on the assessment and identified areas of concern at Accredited EyeQ Hospital, the following recommendations are provided to address the gaps and improve compliance with NABH standards:

1. Develop and implement comprehensive training programs:

- Provide staff training on infection control practices, including adherence to standard precautions, proper bio-medical waste segregation, and cleanliness and hygiene protocols.
- Conduct orientation programs for newly appointed staff to ensure they are well-informed about access, assessment, and continuity of care services.

2. Strengthen documentation practices:

- Establish clear protocols for documenting initial assessments for in-patients within the recommended timeframe to facilitate timely and appropriate care delivery.
- Ensure proper documentation of consent forms, including signatures by patients and witnesses, before admission.

3. Enhance facility management and safety measures:

- Install clear and visible signages throughout the hospital premises to guide patients, visitors, and staff effectively.
- Develop and implement comprehensive operational and maintenance plans to ensure the smooth functioning of equipment and enhance safety measures.
- Regularly monitor and document facility cleanliness and general hygiene to maintain a safe and hygienic environment.

4. Conduct regular audits and evaluations:

- Implement a system for regular monitoring, auditing, and evaluation of compliance with NABH standards and best practices.
- Identify areas of improvement and take corrective actions promptly to address any gaps

or deficiencies.

5. Foster a culture of continuous quality improvement:

- Promote a culture that values continuous learning, quality improvement, and patient safety.
- Encourage staff engagement and participation in quality improvement initiatives, including feedback mechanisms and suggestions for improvement.

6. Establish effective communication channels:

- Enhance communication channels among staff members to ensure efficient coordination, information sharing, and seamless care transitions.
- Encourage open and transparent communication with patients and their families to address their concerns, provide education, and promote patient engagement.

7. Regularly review and update policies and procedures:

- Review and update existing policies and procedures to align with NABH standards and best practices.
- Ensure that policies are easily accessible to all staff members and regularly communicated and reinforced.

By implementing these recommendations, Accredited EyeQ Hospital can work towards closing the identified gaps, improving compliance with NABH standards, and providing high-quality, patient-centered care. Continuous monitoring, evaluation, and improvement efforts are essential to sustain and enhance the hospital's performance and commitment to quality healthcare delivery.

Conclusion:

In conclusion, the comparative study and gap analysis of Accredited EyeQ Hospital against NABH standards have identified areas of concern related to hospital infection control, access, assessment, and continuity of care, as well as facility management and safety. These findings indicate potential non-compliance and gaps in meeting the required standards.

To address these concerns, it is crucial for Accredited EyeQ Hospital to implement the recommended strategies and recommendations. These include strengthening adherence to infection control practices, improving documentation processes, enhancing facility management and safety measures, conducting regular audits and evaluations, fostering a culture of continuous quality improvement, establishing effective communication channels, and regularly reviewing and updating policies and procedures.

By addressing these areas of concern and implementing the recommended strategies, Accredited EyeQ Hospital can enhance patient safety, improve the quality of care, and align with NABH standards. This will contribute to the hospital's reputation, patient satisfaction, and overall advancement of healthcare services.

It is important for the hospital's management to prioritize and allocate resources for implementing these recommendations. Ongoing monitoring, evaluation, and continuous improvement efforts are essential to ensure sustained compliance with standards and to adapt to evolving healthcare practices.

Ultimately, Accredited EyeQ Hospital's commitment to addressing these concerns and striving for excellence will contribute to its overall success in delivering high-quality healthcare services and making a positive impact on patient outcomes.

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