Annexure

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Ph D in Human Resource Management
### Annexure 3.1: List of Hospitals in Pune City with 100 or more beds

#### Private Sector

<table>
<thead>
<tr>
<th>No.</th>
<th>Hospital name</th>
<th>Address</th>
<th>Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Bharati Hospital, Bharati Vidyapeeth Medical foundation</td>
<td>Pune-Satara Rd. Dhankavdi, Pune</td>
<td>831</td>
</tr>
<tr>
<td>2</td>
<td>Colony Nursing Home</td>
<td>50-51 Laxmi Park Colony, Navi Peth, Pune</td>
<td>100</td>
</tr>
<tr>
<td>3</td>
<td>Columbia Asia Hospitals Pvt. Ltd.</td>
<td>Sr. No. 17/7 &amp; 17/8 (1,2,3), 22/2A, Plot. No. 03, Kharadi, Pune-14.</td>
<td>100</td>
</tr>
<tr>
<td>4</td>
<td>Deenanath Mangeshkar Hospital</td>
<td>Plot. No. 8+13/2, Erandwane, Pune</td>
<td>411</td>
</tr>
<tr>
<td>5</td>
<td>Deendayal Memorial Hospital</td>
<td>926, Fergusson College Rd, Pune 4</td>
<td>120</td>
</tr>
<tr>
<td>6</td>
<td>Sancheti Institute for Orthopedic Rehabilitation</td>
<td>16, Shivaji Nagar, Pune 7-9, Koregaon Park, Pune 1</td>
<td>150</td>
</tr>
<tr>
<td>7</td>
<td>Inlaks &amp; Budhrani hospital</td>
<td>33, Sasson Rd., Pune</td>
<td>370</td>
</tr>
<tr>
<td>8</td>
<td>Jehangir Hospital</td>
<td>370</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>JPMT's Sanjeevan Hospital</td>
<td>23, Opp. Karve Rd., Pune</td>
<td>115</td>
</tr>
<tr>
<td>10</td>
<td>KEM Hospital</td>
<td>Plot No. 30 L, Lane No.1, Erandwane, Pune</td>
<td>550</td>
</tr>
<tr>
<td>11</td>
<td>Sahyadri Speciality Hospital</td>
<td>778, Shivaji Nagar, Opp Kamla Nehru Park, Pune, 411004</td>
<td>150</td>
</tr>
<tr>
<td>12</td>
<td>Joshi Hospital</td>
<td>241/1, New DP Road, Aundh, Pune</td>
<td>100</td>
</tr>
<tr>
<td>13</td>
<td>Medipoint Hospital Pvt Ltd.</td>
<td>Magarpatta City, Hadapsar, Pune</td>
<td>102</td>
</tr>
<tr>
<td>14</td>
<td>Noble Hospital</td>
<td>Behind Pride Executive Hotel, Pune</td>
<td>250</td>
</tr>
<tr>
<td>15</td>
<td>Oyster and Pearl Hospital</td>
<td>110</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Poona Hospital &amp; Research</td>
<td>27, Sadasiv Peth Pune</td>
<td>220</td>
</tr>
</tbody>
</table>

*Note: The above list is not exhaustive and may not include all the hospitals with 100 or more beds.*
<table>
<thead>
<tr>
<th>No.</th>
<th>Hospital Name</th>
<th>Address</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Rao Nursing Home</td>
<td>Pune Satara Road, Bibwewadi, Pune-37</td>
<td>125</td>
</tr>
<tr>
<td>18</td>
<td>Ruby Hall Clinic</td>
<td>40, Sasson Rd. Pune</td>
<td>566</td>
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<tr>
<td>19</td>
<td>Sane Guruji Arogya Kendra</td>
<td>165-A, Malwadi, Hadapsar, Pune 28</td>
<td>250</td>
</tr>
<tr>
<td>20</td>
<td>Seth Ramdas Shah Hospital</td>
<td>Rasta Peth Pune</td>
<td>110</td>
</tr>
<tr>
<td>21</td>
<td>Surya Hospital Pvt.Ltd.</td>
<td>1317 Kasaba Peth Pune</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td><strong>Public Sector</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Sasson General Hospital</td>
<td>Sasson Road, Pune</td>
<td>State</td>
</tr>
<tr>
<td>2</td>
<td>Command Hospital</td>
<td>Wanowari, Pune</td>
<td>Military</td>
</tr>
<tr>
<td>3</td>
<td>Dr. Babasaheb Ambedkar</td>
<td>Kirkee, Cantonment Board, Pune</td>
<td>Military</td>
</tr>
<tr>
<td>4</td>
<td>Cantonment Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Military Hospital (CTC),</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>SVP Cantonment General</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Military Hospital (CTC),</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Aundh Chest Hospital</td>
<td>Aundh, Pune. Balewadi, Opp. Bharati Vidyapeth English School, Pune-45</td>
<td>District</td>
</tr>
<tr>
<td>9</td>
<td>Manaswardhan De-addiction Rehabilitation &amp; Mental Health</td>
<td>Near Le Meridien-Station road</td>
<td>PMC</td>
</tr>
<tr>
<td>10</td>
<td>Kamla Nehru Hospital</td>
<td>Kasba Peth Post Office</td>
<td>PMC</td>
</tr>
<tr>
<td>11</td>
<td>T.B.Hospital</td>
<td>Sanghvi gaon</td>
<td>PMC</td>
</tr>
<tr>
<td>12</td>
<td>Late Rajiv Gandhi Hospital</td>
<td>Parnakuti, Yerawada, Pune</td>
<td>PMC</td>
</tr>
<tr>
<td>13</td>
<td>Sonawane Hospital</td>
<td>near Poona Saw mill, Bharwani Peth, Pune</td>
<td>PMC</td>
</tr>
<tr>
<td>14</td>
<td>Homi Bhabha Hospital</td>
<td>Deep Bungalow Chowk, Pune</td>
<td>PMC</td>
</tr>
</tbody>
</table>

*Source: http://mpcb.gov.in/biomedical/pdf/BMWList.pdf*
I. Name of the Hospital:

II. Name of the Respondent (Optional):

III. Gender: Male / Female

IV. Age (rounded off):

V. No. of years of service with this hospital:

VI. No. of total years of experience:

VII. Basic Qualification:

A. Indicate the Nature of following Training Programs: (tick the appropriate)

1. Induction Training at the time of joining: Too Basic Appropriate Too Advanced
2. Quality Patient Care (NABH): Too Basic Appropriate Too Advanced
3. Train the Trainer (Senior Nurses to train Junior Nurses): Too Basic Appropriate Too Advanced
4. Super Specialty: (e.g. ICU, OT, CAT Lab etc): Too Basic Appropriate Too Advanced
5. Code Blue: High alert: Too Basic Appropriate Too Advanced
6. Disaster Management: Too Basic Appropriate Too Advanced
7. Communication skills: (with patients and their relatives, doctors and colleagues): Too Basic Appropriate Too Advanced
8. Stress Management: Too Basic Appropriate Too Advanced
9. Any other, please specify:
B. *Indicate the duration of following Training Programs:*

10. Induction Training- at the time of joining:
11. Quality Patient Care: 4 times a year/ twice a year/ once a year/ ongoing
12. Train the Trainer: (for Senior Nurses to train Junior Nurses):
   4 times a year/ twice a year/ once a year/ ongoing
13. Super Specialty: E.g. ICU, OT, CAT Lab, Cardiac etc:
   4 times a year/ twice a year/ once a year/ ongoing
14. Code Blue: (High alert): 4 times a year/ twice a year/ once a year/ ongoing
15. Disaster Management: 4 times a year/ twice a year/ once a year/ ongoing
16. Communication skills: (with patients and their relatives, doctors and colleagues):
   4 times a year/ twice a year/ once a year/ ongoing
17. Stress Management: 4 times a year/ twice a year/ once a year/ ongoing
18. Any other, please specify:

Rate the following statements on 5 to 1 scale: 5- Highest and 1- Lowest (Circle the Numbers)

C. *Training Programs/ Sessions*

19. The overall quality of the training programs 5 4 3 2 1
20. Programs measured up to expectation 5 4 3 2 1
21. Programs’ worth in terms of time 5 4 3 2 1
22. Organization and co-ordination of the programs 5 4 3 2 1
23. Course content relevant to work 5 4 3 2 1
24. Materials, tools used, useful and practical 5 4 3 2 1
25. Program interactive and encouraged participation 5 4 3 2 1
26. Timings and duration of the program 5 4 3 2 1
27. Cost effectiveness of the program 5 4 3 2 1
28. Programs periodically evaluated and improved 5 4 3 2 1
29. Quality of In-Hospital training programs 5 4 3 2 1
30. Quality of External training programs 5 4 3 2 1
D. Trainers

31. Knowledge of the subject 5 4 3 2 1
32. Encourage participation 5 4 3 2 1
33. Answer questions completely 5 4 3 2 1
34. Respect your knowledge and experience 5 4 3 2 1
35. Use appropriate examples 5 4 3 2 1
36. Use effective mix of lectures and exercises 5 4 3 2 1
37. Provide clear explanations 5 4 3 2 1
38. Keep the sessions interesting 5 4 3 2 1
39. Level of presentation 5 4 3 2 1

E. Trainees

40. Nurses chosen by carefully identified training needs 5 4 3 2 1
41. Nurses take their training seriously 5 4 3 2 1
42. Nurses participate in determining the training they need 5 4 3 2 1
43. Nurses are given clear understanding of the skills and knowledge they are expected to learn 5 4 3 2 1
44. Nurses after training encouraged to reflect and plan improvements at their workplace 5 4 3 2 1

F. Training methods used during the program

45. Lectures 5 4 3 2 1
46. Visual aids 5 4 3 2 1
47. Group discussion 5 4 3 2 1
48. Case study methods 5 4 3 2 1
49. On the job practical 5 4 3 2 1
50. Which methods do you prefer the most? Point no.- 45 46 47 48 49

G. Venue

51. Location and distance 5 4 3 2 1
52. Lodging if any 5 4 3 2 1
53. Conference rooms facility 5 4 3 2 1

H. Facilities provided during training programs

54. Food 5 4 3 2 1
55. Audio video reception 5 4 3 2 1
56. Transport 5 4 3 2 1
57. Service provided 5 4 3 2 1
58. Hospital sponsors all training programs

1. Benefits or Outcomes of the training Program

59. The training proved motivating
60. New and useful updates and lessons learnt through training
61. All queries and problems answered through training
62. Can explain the training programs to others
63. Knowledge learnt can be applied to job
64. Support from immediate superiors to use knowledge learnt
65. Programs have improved overall performance at work
66. Improvement in career opportunities
67. Programs have contributed to personal development
   a. Improved morale
   b. Increased motivation
   c. Greater confidence
   d. More support from others
68. Would like to have more similar training programs
69. Would recommend training programs to others

70. What affects your decision to attend the training programs?
   a. Compulsion from management
   b. Self interest
   c. Needed for promotions
   d. Content of the programs
   e. Speakers
   f. Any other

71. Cost of Registration (fees) if any
   a. Too high
   b. Just right
   c. Too low

72. Time and days’ suggestion
   a. During working hours/ non-working hours
   b. Duration in days-
   c. Number of hours each day-
J. Other

73. Training programs conducted that you remember and their overall rating
   a. _______________________________________  5 4 3 2 1
   b. _______________________________________  5 4 3 2 1
   c. _______________________________________  5 4 3 2 1
   d. _______________________________________  5 4 3 2 1
   e. _______________________________________  5 4 3 2 1
   f. _______________________________________  5 4 3 2 1

74. Any Training programs- the content of which you already knew or did not learn anything new
   a.
   b.
   c.
   d.
   e.

75. Any Training programs in which you gained new knowledge
   a.
   b.
   c.
   d.
   e.

76. Any specific areas in which you would like more training programs to be held
   a.
   b.
   c.
   d.

77. Any other comments or suggestions:
(सी) पी एच डी. प्रश्नावली डॉ. अनुराधा वाहेगांवरकर

1. रुग्णालयाचे नाव:

2. प्रतिसाद देणारे—याचे नाव (ऐचिक):

3. लंब युग्म/ स्त्री:

4. वय (पूर्णावकाल):

5. प्रस्तुत रुग्णालयातील सेवा कालावधी:

6. एकूण सेवाकालावधीची वर्ग:

7. मृत्यूमूः आहे ता/ गुणवत्ता:

ए. पुढील प्रशिक्षणाचा स्रोतपाचा निर्देश करा (खूप करा)

1. सेवाप्रारंधाचे प्रशिक्षण/ (प्रेवेशा बेळचे)
   अति शास्त्रीय योग्य अतिप्रगत

2. रुग्णालयाचे देखभालीची गुणवत्ता (NABH चौराणानुसार)
   अतिशास्त्रीय योग्य अतिप्रगत

3. शिक्षणार्थीचे प्रशिक्षण (प्रतिचालकांकुडून कनिष्ठ अतिशास्त्रीय योग्य
   परिचालकांचे प्रशिक्षण)

4. अति विशेषता/ तज्ज्वता (उदा. अतिदुर्गता, शल्यगृह,
   कॉलेज व्योगशाळा इ.)

5. नील अज्ञेय: BLS अतिशास्त्राध्यानता/ प्रशिक्षण
   अतिशास्त्रीय योग्य अतिप्रगत

6. आपत्तकाळीन व्यवस्थापन
   अतिशास्त्रीय योग्य अतिप्रगत

7. संबंध कौशल्य (रुग्णार्थी, नातेवाईकांशी,
   डॉक्टरांशी, सहकर-यांशी)

8. तपास व्यवस्थापन
   अतिशास्त्रीय योग्य अतिप्रगत

9. अन्य नेमकपणाने नीद करा.
वी. योजनाभाष्य कालावधी विषयीत भाषा प्रकट करा।

(वर्षांत: ४ रेण/दोनदा/एकदा/सतत)

१०. सेवा प्रारंभीन्य प्रशिक्षण
११. सगंगत्य प्रशिक्षण
१२. ज्योतिष प्रशिक्षण (शिक्षणार्थी प्रशिक्षण)
१३. अति विशेषता (उद्दं. अतिदान, शाळगृह, कंघ प्रशिक्षण, युद्ध विकार इ.)
१४. नीर कोणत (अति कोणत)
१५. आपकालीन व्यवस्थापन
१६. संबंध कृती (सगंगत नातेनाइक डॉक्टर सहकारी)
१७. तणाव व्यवस्थापन
१८. अश्च नीरक पानी सांगा।

खालील विषयांनाचे मूल्यांकन करा. ५ सेवांषेषक ते १ दरांचे (मूळ करा)

सी. प्रशिक्षण कार्यक्रम/संवेद

१९. प्रशिक्षण कार्यक्रमाचा सर्वसाधारण दर्जा ५ ४ ३ २ १
२०. प्रशिक्षण कार्यक्रमाचे अपेक्षित मूल्यांकन ५ ४ ३ २ १
२१. प्रशिक्षण कार्यक्रमाची यथार्थता वेळेनुसार ५ ४ ३ २ १
२२. कार्यक्रमाचे संयोजन व समन्वयन ५ ४ ३ २ १
२३. कामाच्या दृष्टीने शिक्षणांतर्गत विषयांचा समावेश ५ ४ ३ २ १
२४. उपकरणे, साधने यांची उपयुक्तता आणि उपयोजकता व्यवहार्यता ५ ४ ३ २ १

२५. कार्यक्रमांतर्गत परस्परसंवाद व प्रोत्साहित सहभाग ५ ४ ३ २ १
२६. कार्यक्रमाचे वेळा आणि कालावधी ५ ४ ३ २ १
२७. कार्यक्रमाची आर्थिकक्षेत्र मूल्यांकन ५ ४ ३ २ १
२८. कार्यक्रमाचे वेळेनुसार मूल्यांकन व संचारण ५ ४ ३ २ १
२९. रुग्णालयांतर्गत प्रशिक्षणकोणांची गुणवत्ता ५ ४ ३ २ १
३०. रुग्णालय बाह्य प्रशिक्षणकोणांची गुणवत्ता ५ ४ ३ २ १
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<th>डी. प्रशिक्षक</th>
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<tbody>
<tr>
<td>31. विधायके ज्ञान</td>
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<td>32. सहभागासाडीचे प्रत्यासांन</td>
</tr>
<tr>
<td>33. प्रशिक्षाना पूर्णपणे उत्तरे देणे</td>
</tr>
<tr>
<td>34. साहाबद्दलची आस्था व अनुभव</td>
</tr>
<tr>
<td>35. योगद उदाररूपांची निवड</td>
</tr>
<tr>
<td>36. व्याख्याने व अभ्यास पाचा मेच</td>
</tr>
<tr>
<td>37. स्पष्ट खुलासे देणे</td>
</tr>
<tr>
<td>38. संग्राम नरोंजक करणे</td>
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<tr>
<td>39. अभिभवतीची पातळी</td>
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<table>
<thead>
<tr>
<th>इ. शिक्षणार्थी</th>
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<tbody>
<tr>
<td>40. प्रशिक्षणाच्या गरजांच्या परिचारिकांची निवड</td>
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<tr>
<td>41. परिचारिका प्रशिक्षणाकडे गांभीर्याने पाहतात का</td>
</tr>
<tr>
<td>42. आवश्यक प्रशिक्षणाची निर्धारण करण्यात परिचारिकांचा सहभाग</td>
</tr>
<tr>
<td>43. परिचारिकांकडून अपेक्षित कौशल्ये व ज्ञान यावदृढ आणेच दिली जाते का</td>
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<tr>
<td>44. प्रशिक्षणांतर परिचारिकांचा प्रतिक्रिया देण्यासाठी व त्याचा उपयोग कमासाठी करण्यास प्रोत्साहित केले जाते का?</td>
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<table>
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<tr>
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<tbody>
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</tr>
<tr>
<td>46. दुक श्राव्य साधने</td>
</tr>
<tr>
<td>47. गटचार</td>
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<tr>
<td>48. एखाद्या घटनेचा अभ्यास करण्याची पद्धती</td>
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<tr>
<td>49. कार्य करताना प्रयोगाची संधी</td>
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<tr>
<td>50. कोणत्या शिक्षण पद्धतीची निवड तुम्ही प्राधान्याने कराल?</td>
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<td>53. चर्चा कक्षाची संधी</td>
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<tbody>
<tr>
<td>54. अन्न</td>
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<tr>
<td>55. दुक श्राव्य प्रहण</td>
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<tr>
<td>56. वाहानुक संधी</td>
</tr>
<tr>
<td>57. अन्य सुविधा</td>
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</table>
58. रुग्णाल्याकडून पूर्ण प्रशिक्षणाची व्यवस्था

आय. प्रशिक्षणाचे फायदे व उपलब्धता

59. प्रशिक्षणामुळे प्रेरणा मिळाली.
60. प्रशिक्षणातून अवडीवाच नवीन ज्ञानप्राप्ती
61. मनातील सर्व विषयक व प्रशिक्षणांच्या उत्तरे मिळाली.
62. इतरांच्या शिक्षण कार्यक्रम समजवणे शक्य
63. प्राप्त केलेल्या ज्ञानाचा प्रत्यक्ष उपयोग
64. रईसांकडून ज्ञानाचा उपयोग करण्यास मदत
65. कार्यक्रमामुळे कार्यांत सुधारणा
66. नीतीशील संघीत वाढ
67. व्यक्तिक विकासाची कार्यक्रमाचा उपयोग
   ए. आत्मविश्वास वाढला
   बी. प्रेरणा वाढली
   भ. आतिशीत वाढला
   ग. इतरांकडून अधिक मदत मिळू लागाली.
68. असे अधिक कार्यक्रम आवडतील का?
69. या कार्यक्रमांची इतरांच्या शिफारस कराल का?

जै. अन्य

70. आयाण घेतलेल्या व लक्षात राहतील असे कार्यक्रम व त्यांचे मूल्यापन
   ए. __________________________
   बी. __________________________
   भ. __________________________
   ग. __________________________
   ठ. __________________________
   एक. __________________________

71. नौदणी शुल्क (असेल तर)
   ए. खुप जास्त
   बी. ठीक
   भ. खुप कमी

72. आयाण नवीन काही शिक्षलो नाही अथवा माहिती असलेल्या असे काही शिक्षणक्रम होते का?
   ए.
   बी.
   भ.
   ठ.
   एक.
७३. कोणत्या शिक्षणप्रक्रियातून आपल्याला नंद ज्ञान मिळाले?

ए.

बी.

सी.

डी.

ई.

७४. कोणत्या विषयाच्या क्षेत्रातील अधिक प्रशिक्षणाची आपणास अपेक्षा आहे?

ए.

बी.

सी.

डी.

७५. वेळच व दिवसांविषयी सूचना

ए. कामाच्या वेळेत / अन्यवेळी

बी. किती दिवसांचे?

सी. प्रत्येक दिवशी किती तास?

७६. शिक्षण घेण्याच्या निर्णयावर कोणत्या मुद्द्यांचा प्रभाव असेल?

ए. व्यवसायांकडून सक्ती

बी. स्वतःची आवश्यकता

सी. बदलचे संघीत वाढ

डी. कार्यक्रमातील समाविष्ट (बटक) विषय

ई. व्याख्याने

एफ. अन्य काही

७७. अन्य टिपणी वा सूचना
Annexure 5.1

Training Flow Chart – Jehangir Hospital

New Joiners
↓
Short Orientation
↓
Nursing Induction
↓
HR Induction
↓
6 months Observation Period
↓
CNE
↓
Daily CNE (45 minutes)
↓
On Floor Need Based Training
INDUCTION & ORIENTATION PROGRAMME

TIME: 8 am TO 3.00pm

VENUE: TRAINING HALL.

FROM: May 23.5.2013 to 3.6.2013 (EXCEPT ON SUNDAY)

<table>
<thead>
<tr>
<th>Date &amp; Day</th>
<th>Time</th>
<th>Topic</th>
<th>Faculty</th>
<th>Department &amp; Designation</th>
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</thead>
<tbody>
<tr>
<td>23/5/2013 Thursday</td>
<td>8am to 10am</td>
<td>Introduction &amp; Orientation of hospital</td>
<td>Ms. Swati &amp; Ms. Madhavi</td>
<td>Nursing Educator</td>
</tr>
<tr>
<td></td>
<td>10am to 10.30am</td>
<td>Tea-Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10.30 to 11.00am</td>
<td>Wel-come Note &amp; Nursing ethics</td>
<td>Ms. Nirmala Iyer</td>
<td>Nursing Director</td>
</tr>
<tr>
<td></td>
<td>11.00 to 11.30 am</td>
<td>Pre-Test</td>
<td>Ms. Madhavi &amp; Ms. Swati</td>
<td>Nursing Educator</td>
</tr>
<tr>
<td></td>
<td>11.30am to 12.30pm</td>
<td>Hierarchy</td>
<td>Ms.Cythia</td>
<td>Dy.Nursing Superintendent</td>
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<td></td>
<td>12.30pm to 1.30pm</td>
<td>General rules and regulation</td>
<td>Ms. Lucia</td>
<td>ANS (Q &amp; T)</td>
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<td></td>
<td>1.30pm to 3pm</td>
<td>Patients right &amp; responsibilities</td>
<td>Ms. Neeta</td>
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<td>24/5/2013 Friday</td>
<td>8am to 9am</td>
<td>Basic Nursing Procedures</td>
<td>Ms. Swati &amp; Ms. Madhavi</td>
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<td>9am to 10.00 am</td>
<td>Vital signs and pain assessment</td>
<td>Ms. Swati</td>
<td>Nursing Educator</td>
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<td>10.00 to 10.30 am</td>
<td>Tea-Break</td>
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<td></td>
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<td>10.30 to 11.30 am</td>
<td>Injections and oral administration of medication</td>
<td>Ms. Madhavi</td>
<td>Nursing Educator</td>
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<td>11.30 am to 12pm</td>
<td>DVT</td>
<td>Ms.Sali</td>
<td>Huntleigh Company</td>
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<tr>
<td></td>
<td>12pm to 1pm</td>
<td>Admission and Discharge Procedure</td>
<td>Ms. Gholap</td>
<td>Nursing Supervisor</td>
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<td>1pm to 2pm</td>
<td>Diet Therapy</td>
<td>Dietitian</td>
<td>F &amp; B</td>
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<td></td>
<td>2pm to 3pm</td>
<td>Daily Medicine Indenting</td>
<td>Mr.Ashok</td>
<td>Pharmacy</td>
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<tr>
<td>Date</td>
<td>Activity</td>
<td>Time</td>
<td>Instructor(s)</td>
<td>Department</td>
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<tr>
<td>25/5/2013</td>
<td>Artificial feeding</td>
<td>8am to 10 am</td>
<td>Ms. Swati &amp; Ms. Madhavi</td>
<td>Nursing Educators</td>
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<tr>
<td></td>
<td>Tea Break</td>
<td>10 to 10.30 am</td>
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<tr>
<td></td>
<td>Demonstration On Infection Control Methods</td>
<td>10.30am to 3pm</td>
<td>Dr. Vikram, Ms. Sheena, Ms. Poonam</td>
<td>Infection Control dept.</td>
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<td>26/5/2013</td>
<td>SUNDAY</td>
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<tr>
<td>27/5/2013</td>
<td>Revision</td>
<td>8am to 9 am</td>
<td>Ms. Swati</td>
<td>Nursing Educator</td>
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<tr>
<td>Monday</td>
<td>Policy on Infection Control</td>
<td>9am to 10 am</td>
<td>Dr. Vikram, Ms. Sheena, Ms. Poonam</td>
<td>Infection control sect.</td>
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<td></td>
<td>Tea-Break</td>
<td>10am to 10.30 am</td>
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<tr>
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<td>Demonstration On Infection Control Methods</td>
<td>10.30am to 3pm</td>
<td>Dr. Vikram, Ms. Sheena, Ms. Poonam</td>
<td>Infection Control sect.</td>
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<td>28/5/2013</td>
<td>Crash Cart Medication</td>
<td>8am to 9 am</td>
<td>Ms. Swati &amp; Ms. Madhavi</td>
<td>Nursing Educator</td>
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<td>Tuesday</td>
<td>Preparation of the patients for the investigations</td>
<td>9 am to 10 am</td>
<td>Ms. Swati</td>
<td>Nursing Educator</td>
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<tr>
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<td>procedure &amp; consents</td>
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<td>Tea-Break</td>
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<td>Care of biomedical equipment</td>
<td>10.30am to 11.30 am</td>
<td>Mr. Thucker</td>
<td>Biomedical dept.</td>
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<td>Principle of sterilization</td>
<td>11.30am to 12.30 pm</td>
<td>Ms. Lucia</td>
<td>ANS</td>
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<td>Handling and taking over</td>
<td>12.30 pm to 1.30 pm</td>
<td>Ms. Swati</td>
<td>Nursing Educator</td>
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<td>Method of blood collection</td>
<td>1.30pm to 3pm</td>
<td>Ms. Sherly</td>
<td>Lab dept.</td>
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<td>Session</td>
<td>Instructor/Department</td>
<td>Note</td>
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<td>29/5/2013</td>
<td>8am to 10am</td>
<td>Drug Calculation &amp; ICU Drugs</td>
<td>Ms. Smita – Neuro ICU Incharge</td>
<td>Nursing</td>
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<td>10am to 10.30am</td>
<td>Tea Break</td>
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<tr>
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<td>10.30 to 2pm</td>
<td>On Hand Practice on Manikin BLS Practical</td>
<td>Ms. Gawade/Ms. Mary Charles</td>
<td>Nursing Supervisor/ANS</td>
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<td>2pm to 3pm</td>
<td>Post - Test</td>
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<td>30/5/2013</td>
<td>8am to 10am</td>
<td>NABH Policies(COP)</td>
<td>Ms. Madhavi</td>
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<td>Basic of I/V therapy &amp; Drip calculation</td>
<td>Ms. Linta</td>
<td>BD company</td>
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<td>11.30am to 12.30pm</td>
<td>Access to computer system</td>
<td>Mr. Mridul Joshi</td>
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<td>12.30 pm to 1.30 pm</td>
<td>Nursing care plan</td>
<td>Ms. Madhavi</td>
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<tr>
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<td>1.30pm to 3pm</td>
<td>Soft Skills</td>
<td>Ms. Swati &amp; Ms. Madhavi</td>
<td>Nursing</td>
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<td>31/5/2013</td>
<td>8am to 10am</td>
<td>Daily inventory maintenance</td>
<td>Ms. Swati</td>
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<td>oxygen cylinder, central oxygen and central suction handling</td>
<td>Mr. Jaisingh</td>
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<td>12.30pm to 1.30pm</td>
<td>Blood transfusion</td>
<td>Mr. Elavia</td>
<td>Blood bank</td>
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<td>1.30 pm to 3 pm</td>
<td>Care of death Patient</td>
<td>Sr. Gholap</td>
<td>Supervisor</td>
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<td>1/6/2013</td>
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<td>Documentation</td>
<td>Ms. Swati</td>
<td>Nursing Educator</td>
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<td>Saturday</td>
<td>10.30 to 11am</td>
<td>Tea Break</td>
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<td>11am to 1pm</td>
<td>Pressure ulcer</td>
<td>Ms. Sali</td>
<td>Hunt Leigh Company</td>
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<td>1pm to 2pm</td>
<td>Cardiac emergency</td>
<td>Ms. Madhavi</td>
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<td>Session</td>
<td>Speaker</td>
<td>Department/Office</td>
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<td>2/6/2013</td>
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<td>Handling of glucometer</td>
<td>Ms. Sheetal Ross Lompcihv</td>
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<td>3/6/2013</td>
<td>8am to 9am</td>
<td>Patient safety</td>
<td>Ms. Madhavi</td>
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<td>9am to 10am</td>
<td>Management of medication</td>
<td>Ms. Neeta</td>
<td>ANS</td>
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<td>10am to 10.30am</td>
<td>Tea break</td>
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<td>Pre analytic analysis</td>
<td>Dept. Laboratory</td>
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<td>11 to 12 pm</td>
<td>Pre and post operative care of patients</td>
<td>Ms. Bharati Shetty</td>
<td>OT Matron</td>
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<td>12 Pm to 1.00 pm</td>
<td>Introduction of NABH</td>
<td>Dr. Pradnya and Dr. Shalaka</td>
<td>Q.S Office</td>
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<td>1.00 to 3.00 pm</td>
<td>Post Test &amp; Feedback</td>
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Annexure 5.2

Confirmation after 6 months

\[\downarrow\]

Staff Confirmation

\[\downarrow\]

Second Senior Level (needs supervision)

\[\downarrow\]

First Senior Level (supervises)

(as per competency)

\[\downarrow\]

Ward- In-Charge
<table>
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<tr>
<th>DATE DAY</th>
<th>TOPIC</th>
<th>METHOD OF TEACHING</th>
<th>TEACHER / PRESENTATOR</th>
<th>REMARKS</th>
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<td>TUESDAY</td>
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<td>WEDNESDAY</td>
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<td>FRIDAY</td>
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<tr>
<td>SATURDAY</td>
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<td>SUNDAY</td>
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SIGNATURE

SIGNATURE HOD – NURSING DEPT
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<th>DATE DAY</th>
<th>07.30 a.m. - 09.30 a.m.</th>
<th>9.30 - 10.30 am</th>
<th>10.30 - 1.00 pm</th>
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</tbody>
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Date: __________________________

SIGNATURE OF NURSE EDUCATOR

SIGNATURE HOD – NURSING DEPT
LIST OF TOPICS FOR INDUCTION TRAINING

1. Admission procedures
2. Discharge procedures
3. DAMA protocols
4. Death protocols
5. Code blue
6. Communication and telephone manners
7. Documentation
8. Vital signs
9. Bed making
10. Medication administration
11. Intracath insertion
12. Nebulization
13. Blood transfusion
14. Sample collection
15. BSL monitoring
16. Nasogastric tube insertion and feeding
17. Catheterization and care
18. Suctioning
19. Oxygen therapy
20. Pre and post op care
21. Assisting for lumbar puncture, ICD insertion, bone marrow biopsy
22. ICD care
23. Tracheostomy care
24. Cardiac monitoring
25. Pulse oximetry
26. Syringe pump, infusion pump
27. CPR, ventilation
28. Preparation of articles for different procedures
29. GCS and pain scale
30. Emergency and common drugs.
31. Fluid and drug calculation
32. Infection control protocols
33. ANC and PNC assessment, Partograph
### Delineation of Basic Privileges in Wards

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<th>NO</th>
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<td>Checking of Vital Sign</td>
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<td>Mouth Care</td>
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<td>Bed Making</td>
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<td>Bathing and Hygiene needs</td>
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<td>Enema and Bowel wash</td>
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<td>Nasogastric tube care/ Nasogastric feeds</td>
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<td>Phlebotomy and IV Cannulation care</td>
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<td>Urinary catheterization care</td>
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<td>Medication Management</td>
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<td>Drug administration: IV Fluids</td>
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<td>Drug administration: IV medications, Injections</td>
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<td>Insulin administration under supervision</td>
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<td>Patient Care</td>
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<td>Care of patient under supervision</td>
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<td>Infection control practices</td>
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<td>Hand hygiene</td>
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<td>Bio medical waste segregation</td>
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Signature of staff
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<tr>
<th>Name of Employee</th>
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<th>Department</th>
<th>Date of Training</th>
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<th>External Trainer</th>
<th>Remarks</th>
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**Note:** This is a table for recording training details. Please fill in the details accurately.
Training Attendance Record

Training Topic: 
Venue: 

Trainer Name: 
Date: 

Designation: 
Signature of Trainer: 

Start time: 
End time: 

Duration: 

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</table>
Name of the staff: 
Designation: 

EMP NO/Ward: 
Date:

1. Code Yellow means
   - e) Violence
   - f) Missing of baby
   - c) Cardiac arrest
   - d) Fire

2. Code Blue indicates
   - a) Violence
   - b) Missing of baby
   - c) Cardiac arrest
   - d) Fire

3. The risk factor for fall
   - a) Medications: 4+ or sedatives.
   - b) Uneven or slippery surfaces.
   - c) Poor lighting.
   - d) All of the above

4. Precaution is to be taken to prevent fall of the patient
   - e) Safe environment & link intervention
   - f) Be at the side of the patient
   - c) Provide large space
   - d) None of the above

5. The Restraining Patient is to be monitored
   - e) 4hrly
   - f) 2hrly
   - c) 6hrly
   - d) 1/2hrly

6. Vulnerable patients include
   - e) Geriatric & Pediatric Patient
   - f) Women in labor
   - c) Mentally & physically disabled patient
   - d) All of the above

7. Name the scale used to monitor BEDSORE
   - e) Measuring tape
   - f) VAS scale
   - c) Braden scale
   - d) Morse scale
8. Explain LAMA [LONG FORM]
   e) Leave against medical advice  c) Log off against medical advice
   f) Left against medical advice   d) none of the above

9. For collection of Haemogramme/urea/creatinine/electrolyte/Cross matching the sample container used are
   e) Purple, yellow, red          c) black, blue, orange
   f) Red, purple, green          d) purple, yellow, green

10. Right for administration of Medication
    e) 5                             c) 14
    f) 10                            d) 7

11. While sending female patient for Radiology we should confirm about
    e. Marriage status              c) Alone status
    f. Disease condition            d) pregnancy status

12. Guideline for assessment of patient to give CPR
    e) A-B-C                         c) B-A-B
    f) C-A-B                         d) C-A-R

13. Define CPR:
    i) CPR is the technique of inflation of the lungs and compression of the heart, used in an attempt to revive a patient who has suffered a cardiac arrest.
    j) Defibrillation is the therapeutic use / delivery of an unsynchronised electrical
    k) It is stands for continuous paper restoration
    l) All of the above

14. During chest compression the ratio of chest compression & breaths provided is
    e) 110:4                          c) 60:3
    f) 31:5                           d) 30:2
15. Maintainence of Airway for cardiac arrest, ambu bagging is done by
   e) Head tilt & chin lift
e) Head & chest lift
d) head & chin tilt
f) Trauma jaw thrust
d) head & chin tilt

16. In trauma patient, ambu bagging is done by
   e) Head tilt & chin lift
e) Head & chest lift
c) Head & chest lift
d) head & chin tilt
f) Trauma jaw thrust
d) head & chin tilt

c) head & chest lift

17. General Principle of Documentation is
   e) Completeness
c) confident
f) Correctness
d)All of the above

18. After Angiography patient’s peripheral pulsation should be felt
   e) DD/DT
c)DP/PT
d) TP/DM
   f) DT/PP
c)DP/PT
d) TP/DM

19. IV RL 1000ML FOR 8HRS, how many drops you will start
   e) 33
c) 42
d) 46
   f) 20
d) 46

20. IV 2000ml for 24hrs, how many drops you will start
   e) 28
c)36
d)60
   f) 12
d)60
WARD TEST: EMERGENCY DRUGS

Name of the staff: 
Designation: 
Department: 
MCQ: 15mks.

1. Name any 2 Anti-Epileptic drugs &

2. Atropine is a

3. Action of Inj. Atropine is

4. Action of Epinephrine is

5. Inj Dopamine is

6. Action of Inj. Dopamine is

7. Pharmacological name of CROCIN IS

8. Name any 2 Benzodiazepines &

9. Name any 2 Opioids &

10. Anti emetic [give example] &

11. Inj Heparin is

12. Inj Clexane is

13. Inj.Pantodac is

14. Tb.Cordarone is

15. NSAIDS are &
WARD TEST: CPR/CODE BLUE

Name of the staff:  
Designation:  
Department:  
EMP NO:  
Date:  

MCQ (15mks)

1. CPR should be initiated within ___________ minute

2. C stands for ___________

3. A stands for ________________

4. B stands for ________________

5. D stands for ________________

6. Chest compression in 1 minute is ______ compression

7. Airway of the patient is maintained by _________________________

8. Chest compression should be _______cm in depth

9. CPR stands for _______________________

10. Before starting the compression, we should check the _____________ pulse

11. In Noble Hospital the Emergency No is __________

12. During emergency Code ___________ is activated

13. PLS stands for _________________

14. During CPR we should give _______ compression & _______ rescue breath

15. Before starting with CPR we should see the _____________ of the patient & oneself
CIRCULAR

This is to inform you that various training programs will be conducted in the month of August 2014 for nursing and OT staffs.

Timings are as below:-

**Nursing**

1) Morning duty staff: 3-4 pm
2) Evening duty staff: 1-2 pm

**OT**

1) Daily 1 hour.

**Venue:** CMR

**Note:**

a) In-charges must attend all the lectures possible.
b) Be on time for all trainings.
c) Dairy and pen is a must.
d) Staffs for NABH audit must not miss even a single lecture.
e) It is mandatory for all the concerned staff to attend all the lectures

Mrs. Manisha Sanghvi

Executive Director

Date- 30/7/14
<table>
<thead>
<tr>
<th>SR NO</th>
<th>DATE</th>
<th>TIME</th>
<th>TOPIC</th>
<th>TRAINER</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>10/11/2014</td>
<td>1-2:15 pm</td>
<td>Falls scale</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>2</td>
<td>11/11/2014</td>
<td>1-2:15 pm</td>
<td>Initial assessment</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>3</td>
<td>12/11/2014</td>
<td>1-2:15 pm</td>
<td>Bed making</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>4</td>
<td>13/11/2014</td>
<td>1-2:15 pm</td>
<td>Vulnerable patients and their care</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>5</td>
<td>14/11/2014</td>
<td>1-2:15 pm</td>
<td>Biomedical waste management</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>6</td>
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<td>1-2:15 pm</td>
<td>Restraints and its monitoring</td>
<td>Mrs. Sindhu Praveen</td>
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<td>7</td>
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<td>1-2:15 pm</td>
<td>Pain management</td>
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<tr>
<td>8</td>
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<td>1-2:15 pm</td>
<td>Barrier nursing/ Standard precautions</td>
<td>Mrs. Sindhu Praveen</td>
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<td>9</td>
<td>19/11/2014</td>
<td>1-2:15 pm</td>
<td>High risk medication</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>10</td>
<td>20/11/2014</td>
<td>1-2:15 pm</td>
<td>Transfer checklist/BT Reaction Form</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>11</td>
<td>21/11/2014</td>
<td>1-2:15 pm</td>
<td>Narcotic drugs/ Lasa medications</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>12</td>
<td>22/11/2014</td>
<td>1-2:15 pm</td>
<td>End of life care</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>13</td>
<td>24/11/2014</td>
<td>1-2:15 pm</td>
<td>Incidence reporting</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>14</td>
<td>25/11/2014</td>
<td>1-2:15 pm</td>
<td>Nurses notes</td>
<td>Mrs. Sindhu Praveen</td>
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<tr>
<td>15</td>
<td>26/11/2014</td>
<td>1-2:15 pm</td>
<td>Verbal order policy</td>
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<td>16</td>
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<td>Importance of record keeping in nursing</td>
<td>Mrs. Sindhu Praveen</td>
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<td>17</td>
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<td>1-2:15 pm</td>
<td>Revision</td>
<td>Mrs. Sindhu Praveen</td>
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# Induction Programme for Nurses

<table>
<thead>
<tr>
<th>Day</th>
<th>Topics</th>
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</table>
| 1   | - Introduction to the Organization  
- Mission/ Vision/ Value Statement  
- Organogram  
- Soft Skills/ General Etiquettes  
- Employee Rights and Responsibilities  
- Patient Rights and Responsibilities  
- Introduction to Nabh- Chapters  
- Nursing Quality Indicators  
- Hand Washing- Steps  
- Hand Washing- Moments |
| 2   | - Emergency Codes and Their Management  
- Incidence Reporting  
- Medication Administration  
- Medication Errors  
- Expiry Medicine Policy  
- Lasa  
- High Risk Medication  
- Narcotic Drugs |
| 3   | - Biomedical Waste Segregation  
- Needle Stick Injury  
- Spillage Management  
- Safe Injection/ Infusion Practices  
- Disinfectants and Their Dilutents  
- Bmw Segregation  
- Care Bundles  
- Barrier Nursing  
- Sample Collection  
- Fumigation |
| 4   | - Initial Assessment  
- Verbal Orders  
- End of Life Care  
- Blood Transfusion/ Adverse Reaction  
- Restrains  
- Back Care  
- Lama/Dama  
- Catheter Care  
- Vulnerable Patient  
- Patient Identification  
- Mlc |
| 5   | - Nursing Rounds  
- Patient Over  
- It Training  
- O2 Cylinder Policy  
- Visitor Timing Policy  
- Dp Protocol  
- Room Readiness Protocol  
- Protocol for Bed Category  
- Common Orthopedic Conditions |
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<tr>
<td>1</td>
<td>Bed making</td>
<td>Beds checked</td>
<td>Lockers checked</td>
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<td>2</td>
<td>Bed bath/ Mouth care</td>
<td>sponging done</td>
<td>Mouth care</td>
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<td>3</td>
<td>Label on intracath/ IV sets</td>
<td>intracath changed</td>
<td>Procedure charted</td>
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<td>4</td>
<td>Room readiness- to be checked daily morning &amp; after Discharge.</td>
<td>Rooms checked</td>
<td>Checklists completed</td>
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<td>5</td>
<td>Ward cleanliness</td>
<td>Patient room</td>
<td>Nurses Station</td>
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<td>6</td>
<td>Bed sore care/ Back care - positioning every 2 hourly</td>
<td>Back care given</td>
<td>Position changing</td>
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<td>7</td>
<td>BMW segregation.</td>
<td>Date on hypochlorite</td>
<td>Proper waste segregation</td>
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<td>Catheter care/ perenial care given by staff</td>
<td>Catheter care</td>
<td>Charting in file</td>
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<td>9</td>
<td>Checking fridge temperature &amp; Contents in the fridge</td>
<td>Temperature log chart</td>
<td>Medicine in fridge</td>
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<td>10</td>
<td>Discharge Process</td>
<td>Discharge Summary</td>
<td>Return of Medication</td>
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<td>NURSING TOPICS</td>
<td>INFECTION CONTROL PRACTICES</td>
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<td>Expiry medicine policy</td>
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<td>LAMA/ DAMA</td>
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INFECTION CONTROL PRE-INDUCTION TEST

Name of the staff:____________________________________Id. No._______Department:

Q 1) What is the long form of HICC? (1)

Q 2) List the hospital acquired infections monitored as quality indicators in the hospital?

1. _____________________________________________________________ (4)
2. _____________________________________________________________
3. _____________________________________________________________
4. _____________________________________________________________

Q 3) Which is the basic and most important protocol one must follow? (1)

Q 4) Which vaccine is given in the hospital at the time of Joining? (1)

Q 5) Who is the chairman of HICC and infection control officer? (2)

Q 6) What are the Bio medical waste color code systems in the hospital? (4)

A.
B.
C.
D.

Q 7) What do you mean by PPE and name the items under PPE (2)
Q 9) What do you mean by HAZMAT? (1)

Q 10) On what basis the isolation policy is? (1)

Q 11) Name two diseases required strict isolation? (1)
   1.
   2.

Q 12) Where is the isolation room located? (1)

Q 13) Do not recap the needle? (1)
   a. True  b. False

Q 14) Most common disinfectant used in the hospital is 1% Hypochlorite solution: (1)
   a. True  b. False

Q 15) Used dressing material is discarded in ____________ bag. (1)

Q 16) The needles are discarded in the ____________________ (1)
INFECTION CONTROL POST-INDUCTION TEST

Name of the staff:____________________________Id. No._______Department:

Q 1) What is the long form of HICC? (1)

Q 2) List the hospital acquired infections monitored as quality indicators in the hospital?

9. ____________________________________________ (4)
10. ____________________________________________
11. ____________________________________________
12. ____________________________________________

Q 3) Which is the basic and most important protocol one must follow? (1)

Q 4) Which vaccine is given in the hospital at the time of Joining? (1)

Q 5) Who is the chairman of HICC and infection control officer? (2)

Q 6) What are the Bio medical waste color code systems in the hospital? (4)

A.
B.
C.
D.

Q 7) What do you mean by PPE and name the items under PPE (2)
Q 8) Name 4 notifiable diseases:
   1. 
   2. 
   3. 
   4. 

Q 9) What do you mean by HAZMAT?

Q 10) On what basis the isolation policy is?

Q 11) Name two diseases required strict isolation?
   1. 
   2. 

Q 12) Where is the isolation room located?

Q 13) Do not recap the needle?
   c. True          b. False

Q 14) Most common disinfectant used in the hospital is 1% Hypochlorite solution:
   c. True          b. False

Q 15) Used dressing material is discarded in __________ bag.

Q 16) The needles are discarded in the __________________________
QUESTIONAIRRE ON END OF LIFE CARE

NAME: ___________________________ DATE: ___________________________


1) What do you understand by the term end of life care?

2) Indications/ for whom end of life care is given?

3) Explain euthanasia?

4) Which procedures can be avoided for patients who are receiving end of life care?

5) Enumerate the nursing care for patients requiring end of life care?
1) Write the full form of the following care bundles?
   a) SSI-
   b) CAUTI-
   c) VAP-
   d) CLABSI –

2) What are the measures to prevent SSI?

3) How will you prevent CAUTI in the wards?

4) Explain the care bundles to prevent VAP?
The following staffs/Incharges have scored full marks in the post test conducted on Initial nursing assessment.......

1) Mrs. Naughire – G Ward
2) Mrs. Mungse – B Ward
3) Mrs. Sarika Dive – R Ward
4) Mrs. Priya Malkar – JRC- ICU
5) Mrs. Komal Holkar – E Ward

congrats!
CLINICAL PRIVILEGE - NURSING

Name: ___________________________ Date: ________________

Designation: ______________________ Employee Code No: ______________________

Registration No: __________________ Nursing Council: ______________________

Qualification: ______________________ Additional training undergone: ________________

Year of registration: ________________ Registration Valid till: ______________________

Year of experience in health care: ______________________

To the OT Matron Sancheti Hospital;

Based on my qualification and experience I wish to seek privileges to work in following
capacity. Relevant JD is acceptable to me.

<table>
<thead>
<tr>
<th>Tick Req</th>
<th>Capacity</th>
<th>Work independently</th>
<th>Work under supervision</th>
<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Sister In charge</td>
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<tr>
<td></td>
<td>Scrub Nurse</td>
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<td></td>
<td>Circulating Nurse</td>
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<td></td>
<td>Nurse Assistant</td>
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Name Of applicant: ______________________

Sign & Date: ______________________

Recommendation: On my assessment the applicant has necessary competence therefore
I recommend /do not recommend as the applicant does not have required competence.

Sign of OT Matron & Date: ______________________

Approval: Granted/ On Hold/ Refused

Sign of Medical Director: ______________________

Date: ________________

Noted and acted

Name & Sign of HR In-charge

Date: ________________
**CLINICAL PRIVILEGE- NURSING**

**Name:**  
**Date:**

**Designation:**  
**Employee Code No:**

**Registration No:**  
**Nursing Council:**

**Qualification:**  
**Additional training undergone:**

**Year of registration:**  
**Registration Valid till:**

**Year of experience in health care:**

To the Nursing Head Sancheti Hospitals:
Based on my qualification and experience I wish to seek privileges to work in following capacity. Relevant JD is acceptable to me.

<table>
<thead>
<tr>
<th>Tick Req</th>
<th>Capacity</th>
<th>Work independently</th>
<th>Work under supervision</th>
<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Nursing Head</td>
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<td>Deputy Nursing Head</td>
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<td>Nurse Educator</td>
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<td>Infection Control Nurse</td>
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<td>Nurse Manager</td>
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<td>Nursing Supervisor</td>
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<td>Evening supervisor</td>
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<td>Night Supervisor</td>
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<td>Sister In charge</td>
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<td>Staff Nurse (senior)</td>
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<td>Staff Nurse (junior)</td>
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<td>ICU Nurse</td>
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<td>Recovery Area Nurse</td>
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<td>Trauma Center Nurse</td>
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<td>Scrub Nurse</td>
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**Name Of applicant:**  

**Sign & Date:**

Recommendation: On my assessment the applicant has necessary competence therefore I recommend /do not recommend as the applicant does not have required competence.

**Sign of Nursing Head & Date:**

Approval: Granted/ On Hold/ Refused

**Sign of Medical Director:**

**Date:**

Noted and acted

**Name & Sign of HR In-charge**

**Date:**