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Details of the Documents (Amendment)

Name of the Hospital: Lok Nayak Hospital
Address: Jawahar Lal Nehru Marg, Govt of NCT Delhi-110002

Document Name	Standard Operating Procedures for OPD Services
Document No	04
Number of Pages	01-39
Date created	14 th February 2022
Date of Amendment	15.04.2024
Prepared by	Dr Sapna Paul (MO I/C OPD) <i>Sapna Paul</i> 15/4/24
Approved by	Dr Suresh Kumar (Medical Director, LNH) <i>[Signature]</i> Dr J.K. Basu (Addl.MS. OPD) <i>[Signature]</i> 15/4/24
Responsibility of Updating:	Office of AMS OPD

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Prepared by	Approved by	Issued by
Dr Sapna Paul MO I/C OPD	Dr. Suresh Kumar Medical Director , LNH Dr.J.K.Basu Addl.M.S. OPD	Office of AMS OPD

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4	NK Neha Khanna	Neha Khanna
5	N/Sr. Bindu Sharma	Bindu Sharma
6	N/Sr. Krishna Singh	Krishna Singh
7	N/Sr. Kusum Birlan	Kusum Birlan
8	N/Sr. Shilpa Mani	Shilpa Mani
9	N/Sr. Cynthia	Cynthia

The application of Quality tools is of paramount importance and standardize the basic needs catering to patient care services. Patient calling system in OPD is documented in various forms like: Bells system, Physical calling system by Nursing Orderlies on First Come First Basis, Token system at some points. Although the plan for further strengthening of patient calling system is under process. The receiving of patients in OPD Process involves: OPD card registration is done at registration counters followed by patient leaving for OPD area of consultation either through reading display signage or enquiring guards, Helpers etc. Before that a help desk area is located for taking of wheel chairs and trolleys , which is also stationed at various floors of Main OPD Block. Usage of Stairs, Lifts, Ramps is available. Display Boards are made at each and every floor of Main OPD Block. A dedicated sitting area is stationed for patients outside Doctors Consultation room on First Come First Basis, Calling by Nursing Orderlies. Patient received in Doctor Consultation room. Further, Critical Process Mapping enclosed opposite page 33/C and Quality tool application are done for quality improvement and gap closures including Mistake proofing.

The ANS OPD and Sister In-charges are directed to maintain record of the Mistake proofing, Root cause analysis, Gap Closures, Action Taken, and application of Quality tools to be supervised and checked by the concerned ANS and Doctor In- charge OPD.

Critical process mapping for the Main OPD Block to see and underline the Gaps analysis and work on the critical areas like : reduction of waiting time, Strengthening of Help desk area, Queuing , tokenization system for each facility.

Arrangements done for Mistake proofing at Help desk area: if wheelchairs and trolleys are exhausted at the helpdesk, then the same can be obtained from floors of the OPD. This reduces the waiting time and decrease in queue. Similarly the error less methodology is implemented at various floors of the Main OPD Block. Feedback forms and employee satisfaction survey enclosed form analysis are obtained by the patients are analysed for better management, also form is collected.

LOK NAYAK HOSPITAL

EMPLOYEE SATISFACTION SURVEY

Dear colleague

I appreciate your role and contribution in service delivery by our hospital. Your personal view on the following attributes in the table shall help us in objectively looking at the level of our happiness, wellbeing and motivation and in taking initiative for their improvements.

Please tick the appropriate box and drop the questionnaire in the suggestion box.

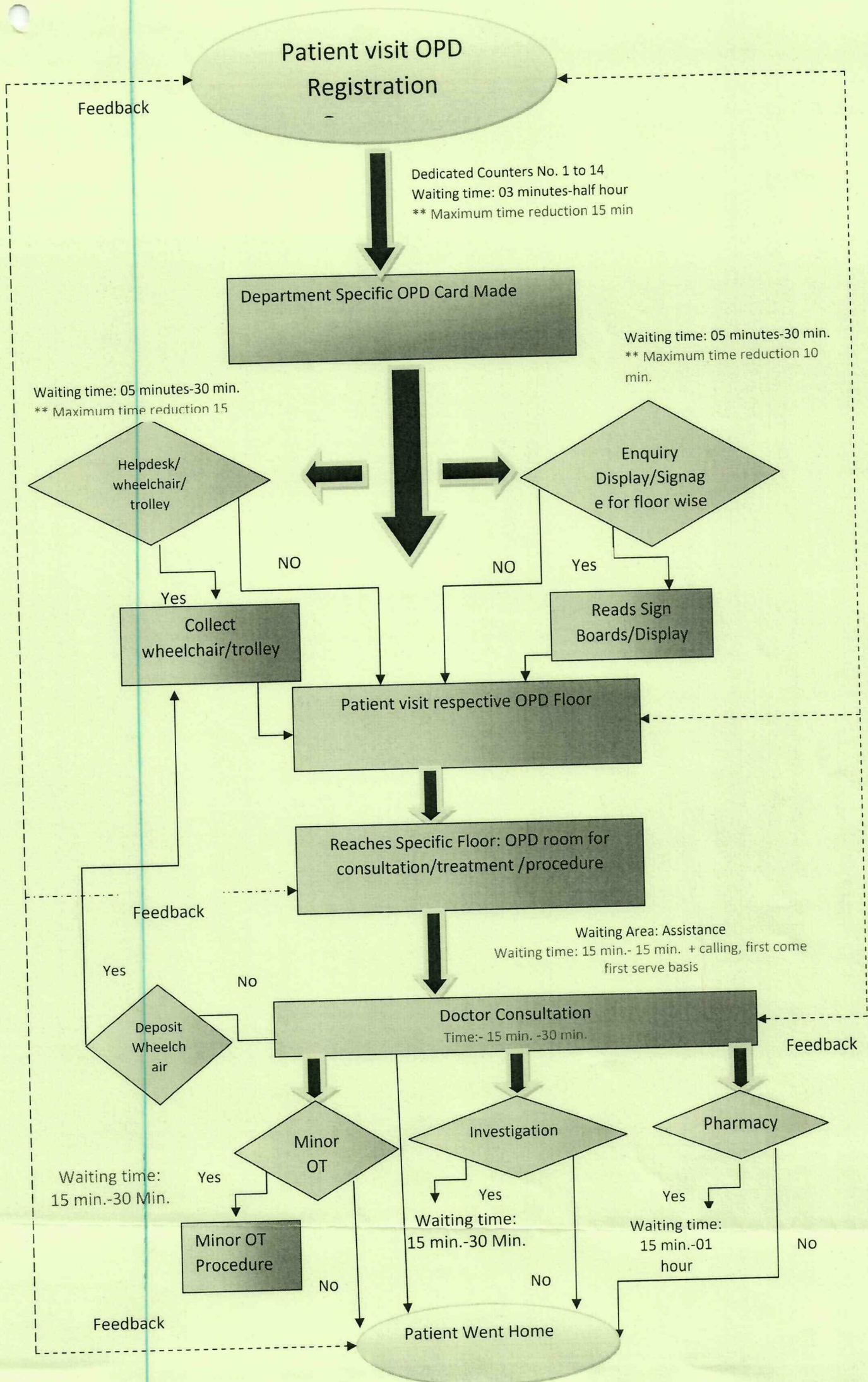
S.No.	ATTRIBUTES	POOR	FAIR	GOOD	VERY GOOD	EXCELLENT	NO COMMENTS
1.	DISTRIBUTION OF WORKLOAD AMONGST THE STAFF						
2.	CLARITY OF ROLE AND RESPONSIBILITY						
3.	HOUSING FACILITY AVAILABLE FOR STAFF						
4.	COORDINATION AND COOPERATION OF YOUR COWORKER IN DISTRIBUTING YOUR DUTY						
5.	BUILDING, INFRASTRUCTURE OF YOUR HOSPITAL						
6.	AVAILABILITY OF BASIC OFFICE/WORKING EQUIPMENTS						
7.	APPRECIATION/ RECOGNITION OF YOUR GOOD WORK						
8.	SYSTEM FOR APPRAISAL AND PROMOTION						
9.	OPPORTUNITIES FOR TRAINING AND SKILL DEVELOPMENT						

35/c

10.	THE EXISTING GRIEVANCE MANAGEMENT SYSTEM IN THE HOSPITAL						
11.	OPPORTUNITIES FOR EXPRESSING OPINION/VIEWS ON WORK RELATED TOPICS						
12.	LEADERSHIP BY HOSPITAL IN CHARGE						
13.	AVAILABILITY OF PERSONAL PROTECTIVE EQUIPMENTS (GLOVES, MASKS, ETC.)						
14.	AVAILABILITY OF AMENITIES LIKE CLEAN TOILETS, DRINKING WATER AND AIR COOLING/HEATING						
15.	SECURITY AND SAFETY OF STAFF IN HOSPITAL						
	OVERALL SCORE						

34/c

CRITICAL PROCESS MAPPING



pg. 33/c

Prepared by:-

1. Dr. Sapna Paul, MO I/C OPD
2. Ms. Seema Rani, Asst. Programmer

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Dr. J. K. BASU
Addl. Medical Superintendent (OPD)
LOK NAYAK HOSPITAL
NEW DELHI

Sapna Paul
(06/11/23) 32/c



OFFICE OF THE AMS (OPD)
LOK NAYAK HOSPITAL, GOVT OF NCT DELHI
JAWAHAR LAL NEHRU MARG
NEW DELHI-110002

F.NO.67/AMS (OPD)/ Patient Friendly/ Accessible /LNH/2022-23/ 24 Dated: 13/11/2022

CIRCULAR

In order to streamline and provide better Patient Friendly/Accessible services for disability/differently abled patients visiting Main OPD Block for treatment, investigation etc, the ANS OPD along with floor Sister I/C'S of Main OPD Block are directed to make necessary arrangements for providing preferential treatment to these patients with regard to OPD consultation, treatment, Laboratory, Radiological and other investigation services etc.

All HOD'S and MOI/C's are requested to provide consultation/treatment on priority basis.

This issue with prior approval of MD, LNH.

Sapna Paul
Dr. Sapna Paul
MOI/C OPD

Copy to:-

1. PA to MD
2. Director (A)
3. DMS OPD
4. All HODs/MOI/Cs
5. Nursing Superintendent
6. ANS OPD, for circulation to all Sister I/Cs (OPD)
7. Guard file

31/11

Details of the Documents

Name Of Hospital : Lok Nayak Hospital
Address : Jawahar Lal Nehru Marg Govt. of NCT Delhi-110002

Document Name :	Standard Operating Procedures for OPD Services
Document No. :	03
No. of Pages :	01-32
Date Created :	14 th February 2022
Date of Amendment:	06.11.2023
Prepared By :	Dr. Sapna Paul (MOI/C OPD) <i>Sapna Paul</i> 06/11/23
Approved By :	<i>[Signature]</i> 1) Dr. Suresh Kumar (Medical Director, LNH) LOK NAYAK HOSPITAL (Govt. of NCT of Delhi) New Delhi-110002 2) Dr. J.K. Basu (AMS OPD) <i>[Signature]</i> 06/11/23
Responsibility of Updating :	Office of AMS OPD

30/C

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Prepared By :	Approved By :	Issued By :
Dr. Sapna Paul (MOI/C OPD) <i>Sapna Paul</i> <i>06/11/23</i>	Dr. Suresh Kumar (Medical Director, LNH) <i>[Signature]</i> Medical Director LOK NAYAK HOSPITAL (Govt. of NCT of Delhi) New Delhi-110002 Dr. J.K. Basu (AMS OPD) <i>[Signature]</i> <i>06/11/23</i>	Office of AMS OPD

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4	N/SR LOVELY SHARMA	<i>[Signature]</i>
5	MSO Chitra Marig	<i>[Signature]</i>
6	Smt. S. Mani	<i>[Signature]</i>
7	Smt. Lisha Khalkar	<i>[Signature]</i>
8	MRS KUSUM Bhatnagar	<i>[Signature]</i>
9	Smt. Smt. Smt.	<i>[Signature]</i>
10	N/Sr. Lakshmi Devi	<i>[Signature]</i>

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Prepared by	Approved by	Issued by
Dr Sapna Paul MO I/C OPD <i>Sapna Paul</i>	Dr. Suresh Kumar Medical Director, LNH <i>Suresh Kumar</i> Medical Director LOK NAYAK HOSPITAL (Govt. of NCT of Delhi) New Delhi-110002 Dr. Prafull Kumar AMS OPD, Director Admin <i>Prafull Kumar</i>	Office of AMS OPD

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③	USHA KHALKHO (S. N. officer)	<i>Usha Khalkho</i>
④	ANNAMMA ROY (S. N. officer)	<i>Annamma Roy</i>
⑤	Mamta Sanyal officer	<i>Mamta Sanyal</i>
6.	Kalpana Devi	<i>Kalpana Devi</i>
7	SR. KIRAN 7th FLOOR	<i>Kiran</i>
⑧	MSO Shree Maria Edwards	<i>Shree Maria Edwards</i>
⑨	N/b. Darsamma Joshi	<i>Darsamma Joshi</i>
⑩	N/SR Joshi	<i>N/SR Joshi</i>

Details of the Documents (Amendment)

Name of the Hospital: Lok Nayak Hospital
Address: Jawahar Lal Nehru Marg, Govt of NCT Delhi-110002

Document Name	Standard Operating Procedures for OPD Services
Document No	02
Number of Pages	01-22
Date created	14 th February 2022
Date of Amendment	
Prepared by	Dr Sapna Paul (MO I/C OPD) <i>Sapna Paul</i>
Approved by	Dr Suresh Kumar (Medical Director, LNH) <i>[Signature]</i> Dr Prafull Kumar (AMS OPD, Director Admin) <i>[Signature]</i> <i>Medical Director</i> <i>LOK NAYAK HOSPITAL</i> <i>(Govt of NCT of Delhi)</i> <i>New Delhi-110002</i> <i>15/05/23</i>
Responsibility of Updating:	Office of AMS OPD

Prescription check list

Yes: score: 01

No: score: 00

S. no	Item	Yes / no	Score achieved	Remark
1.	Complete Name of the client/Patient			
2.	Age in years ($\geq$ five in years) In case of < five years (in months)			
3.	Date of consultation-day/ month /year			
4.	Sex of the client			
5.	Legible handwriting			
6.	OPD Registration Number			
7.	Medical component			
i.	Presumptive / definitive diagnosis written			
ii.	Brief history Written			
iii.	Salient features of Clinical Examination recorded			
iv.	Investigations advised			
v.	Medicines advised mostly available in the Dispensary			
vi.	Medicines advised partially available in the dispensary/Medicines advised not available in the Dispensary			
vii.	Dosage schedule / doses clearly written			
viii.	Duration of treatment written			
ix.	Date of next visit (review) written			
x.	In case of referral, the relevant clinical details and reason for referral given			
xi.	The required precautions / do's and don'ts recorded			(If none required then also gets 1)
xii.	Prescription duly signed (legibly)			
	Total Score			

For items recorded correctly, appropriate score is awarded. For items 7 iv, v, vi no score shall be given but the response shall be recorded as yes / no.

26/c



Delivered to Public Interest

OFFICE OF THE Pr. ACCOUNTANT GENERAL (AUDIT) DELHI
DGACR BUILDING, I. P. ESTATE, NEW DELHI-110002

Audit Party No. 2

(Audit Management Group- III)

Audit Memo No.31

Dated: 14.01.2022

Subject:- Performance Audit on Public Health Infrastructure and management of Health Services.

(A) SOPs for General Administrative Services and Equipment Management

Department of Health and Family Welfare, GNCTD had prepared SOPs by a Committee of Experts and were circulated for customization and adoption by all hospitals in August, 2016. These were made to document all dimensions / working aspects of common processes / procedures being implemented in provision of healthcare in different departments. This document pertains to Department of Support Services, General Administration & Equipment Maintenance. The individual hospital departments were advised to customize / adapt / adopt the SOPs relevant to their settings and resources. The customized final SOPs prepared by the respective Departments might have been approved by the Medical Director / Medical Superintendent and issued by the Head of the concerned department. It is, therefore, requested that an approved/signed copy of each of the following SOPs may be provided to audit:

1.General Administration	2.Human Resource Management
3.Laundry Services (In House/outsourced)	4.Dietary, Nutrition and food services
5.House keeping services	6. Mortuary
7. Ambulance Services	8. Radiation Safety Manual
9. Risk Management Manual	10. Security Manual
11. Manual for Department of Medical Records	12. SOP for OPD

(B) SOPs for assuring medicines and consumables availability in health institutions of GNCTD

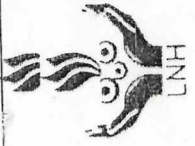
The government is committed towards assuring the availability of all essential medicines and consumables at all health institutions in GNCTD. Accordingly Directorate of Health Services had published SOPs for CPA, Medical Superintendents, Store Managers & MO i/c – Stores of Hospitals, Injection Room in charge and procuring consumables etc. It is, therefore, requested that an approved/signed copy of each SOP pertaining to medicines and consumables may be provided to audit. Copies of all other SOPs/Manuals/Guidelines prepared by LNH such as for ICU/CCU, OTs, Wards and procurement of hospital equipment etc. may also be provided to audit.

Inspecting Officer

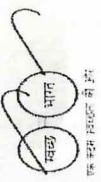
To, 1. The Medical Director,
Lok Nayak Hospital, GNCTD of Delhi,
Delhi Gate, New Delhi-110002

2. The Deputy controller of Accounts,
Lok Nayak Hospital, GNCTD of Delhi,
Delhi Gate, New Delhi-110002

CPA II Floor - 2 Moti C NGAS
Moile ICU/CCU



GOVT. OF NCT OF DELHI
OFFICE OF THE MEDICAL DIRECTOR
NQAS CELL, LOK NAYAK HOSPITAL
NEW DELHI -110002



File no .No. NQAS/DSHM/LNH/2017/ 2072

Date: 28.01.2022

31/1/22

CIRCULAR

With reference to the letter, Audit No.31, dated 14/1/2022(enclosed), Department of Health & Family welfare, GNCTD had prepared & circulated SOPs for updation/customization in 2016 to all Hospitals. The customized final SOPs prepared by the respective departments might have been approved by the Medical Director and issued by the Head of the Department.

However, a letter File No.NQAS/DSHM/LNH/2017/01 dated 04/01/2022 has already been circulated to all HODs for the same.

Therefore, all HODs/MOI/c/Incharges/Concerned Officials are requested to submit customized SOPs of their respective Department to Audit in LNH within a week.

*Enclosed- As above

(Dr Suresh Kumar)
Medical Director, LNH

Copy to-

- 1) AMS(A), Vice Chairman, NQAS
- 2) HOD, Forensic Dept. (MAMC)
- 3) Director(Admin.) for HRM
- 4) HOD, Radiology
- 5) DMS, Casualty
- 6) DMS, OPD
- 7) MOI/c, Audit
- 8) MOI/c, MRD
- 9) MOI/c, Security
- 10) MOI/c, Transport(Ambulance)
- 11) MOI/c Sanitation/House Keeping
- 12) MOI/c Laundry
- 13) MOI/c Dietary
- 14) Guard file

644/DMS(OPD)

31/01/2022

(Please find SOPs on <https://dshm.delhi.gov.in> for customization)

24/1/22



OFFICE OF THE AMS (OPD)
LOK NAYAK HOSPITAL: NEW DELHI-110002
OUT PATIENT DEPARTMENT

F.NO.61/SOPs:OPD /AMS (OPD)/LNH/2022 - 320-

Dated: 18-2-2022

Minutes of Meeting

A meeting was convened in the Office of AMS OPD under the Chairmanship of DMS OPD regarding Standard Operating Procedures for OPD on 17.02.2022 at 12:00 PM. The meeting was attended by the following members as mentioned below:

1. Dr. J.K. Basu (DMS OPD)
2. Dr. Sapna Paul (MOI/C OPD)
3. Ms. Krishna Sinha (ANS OPD)
4. Ms. Kusum Bidlani (ANS OPD)
5. All Floor sister In-charges of Main OPD Block

The agenda of the meeting is mentioned as below:

- a) A brief description of Standard Operating Procedure for OPD was apprised by Dr. Sapna Paul. The copies of SOPs was distributed to all OPD Floor Sister In-charges, ANS, DNS.
- b) All Floor Sister In-charges are directed to take rounds on daily basis of their respective Floors and submit the check list like patient satisfaction survey form, patient checklist, prescription, etc on weekly basis (Saturday) through ANS OPD in the office of the undersigned (Office of AMS OPD).
- c) DMS OPD directed all the concerned to maintain proper record and complete details of log book, stock register and inventory to be updated on daily basis which must be supervised by ANS OPD on weekly basis.
- d) All complaints pertaining to patient care services, PWD, etc. must be informed to the undersigned through ANS OPD.
- e) The patient Suggestion box/Feedback box must be open once a week i.e every Saturday in presence of Floor sister In-charge and the same may be recorded in log book. The Suggestion/Feedback must be brought to the notice of the undersigned through ANS OPD.
- f) The action taken report/ gaps filled if any must be informed too.

The meeting ended with the vote of thanks to the Chair.

Sapna Paul
(Dr. Sapna Paul)
MOI/C OPD

(I/C COVID/Sampling/ Vector Borne Disease)

Copy to:

1. DMS OPD
2. ANS OPD
3. All floor Sister In-charges
4. Office copy

Raj Rani Singh, J.K. Basu
II Genl
Sus
4th floor
18/2/2022

Kd
5th Floor OPD
Paeds. Med.

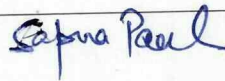
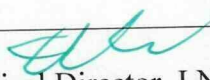
Rd
6th Floor (ENT/OPD)
Neelam
18/2/22

Received
18/2/2022
18/2/2022

23/C

Details of the Documents

Name Of Hospital : Lok Nayak Hospital
Address : Jawahar Lal Nehru Marg Govt. of NCT Delhi-110002

Document Name :	Standard Operating Procedures for OPD Services
Document No. :	01
No. of Pages :	01-21
Date Created :	14 th February 2022
Prepared By :	Dr. Sapna Paul (MOI/C OPD) 
Approved By :	1) Dr. Suresh Kumar (Medical Director, LNH)  2) Dr. J.K. Basu (AMS OPD) 
Responsibility of Updating :	Office of AMS OPD

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Dr. Sapna Paul (MOI/C OPD) <i>Sapna Paul</i>	Dr. Suresh Kumar (Medical Director, LNH) <i>[Signature]</i> Dr. J.K. Basu (AMS OPD) <i>[Signature]</i>	Office of AMS OPD <i>Sapna Paul</i>

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4.	4th floor N. K. K. K.	<i>[Signature]</i>
5.	2nd floor N. K. K. K.	<i>[Signature]</i>
6.	1st floor A. K. K. K.	<i>[Signature]</i>
7.	5th floor P. K. K. K.	<i>[Signature]</i>
8.	6th floor RT OPD	<i>[Signature]</i>
9.	6th floor ART	<i>[Signature]</i>
10.	6th floor ENT OPD	<i>[Signature]</i>
11.	5th floor Paeds Sp OPD	<i>[Signature]</i>
12.	5th floor ART	<i>[Signature]</i>
13.	one copy Ad for DNS Pinki	<i>[Signature]</i>

LOVELY SHARMA

Policy & Procedures:-

OPD is the face of the Hospital & first receiving part of patient care services. In a tertiary care hospital like LNH, the OPD services are of paramount importance & it is pertinent to mention that the quality services must be delivered to each & every patient for building Healthy Nation.

Aim & Objective

- To attain standards of quality as per Kayakalp, NQAS
- To ensure safety to patients, their families and service providers
- To offer all essential services with utmost due diligences and responsibility to all those attending the same.
- To provide continuous training and motivation to all our employees in continuous quality improvement
- To ensure patient satisfaction
- To ensure shortest services
- To ensure hygiene and cleanliness as per IP & BMW protocols
- To comply with statutory and regulatory requirements

Essential work pattern

- a) 1st point of contact for OPD services is the registration counter. Majority of patients visit our esteemed institution from far off places to receive quality and expert services run in the Main OPD Block under the supervision of proficient Health Care Personnel. All those who visit OPD, needs the OPD registration paper for consultation by the treating doctor. A well defined queue system is placed at the ground floor of Main OPD block with computerized registration and token system at all the counters of OPD registration services run by trained staff posted for the desired work. Also, the facility for online making of OPD slips is also available at the website.. <http://dshm.delhi.gov.in>

The patients are guided by the security personnel to attend the respective departments & also proper signages are placed to guide the path for the respective department to each & every floor of the Main OPD Block. The Nursing Sister I/C, Nursing Staff, Security Staff, Nursing Orderly, Sanitation Worker & staff from various other departments are posted for providing liaison & day to day services on each and every floor. The rooms are prepared by the supporting staff & well placed system in place which is supervised by the Nursing personnel for smooth & hassle free functioning of the OPD services run by the department's Senior Doctors/ Residents/Interns etc.

- b) All floors have token system and special attention is given to senior citizens /pregnant/lactating women. All due precautions /care is taken to tackle the COVID appropriate behaviors and various display material/IEC material is posted from time to time. The Nursing Personnel ensures adequate stock of logistics, face masks and hand sanitizer etc. Social distancing norms are followed to contain the spread of COVID 19.
- c) All doctors are attending their OPD's according to their respective OPD days/timings & does liaison accordingly. If any patient needs cross referral or admission the same is reflected on OPD Card by the treating doctor with information to the concerned Nursing Officer and conveyed to IT Department for cross referral slip or IPD Admission.
- d) Special attention is given to patients with disability.
- e) A COVID-19 Sampling OPD is run, attached to Main OPD complex to screen and sample the cases as per ICMR guidelines.
- f) Timely training sessions are conducted for various staff members to keep updated with latest information.
- g) Separate Immunization/Injection room is placed for all adults at 3rd floor Main OPD Block.
- h) Immunization room for Pediatric patients is stationed at 5th floor Main OPD Block.
- i) A grievance redressal facility is available and functional, through floor Nursing In-charge>ANS>DMS OPD/I/C OPD.

Highlights of OPD Registration

OPD Registration Services is stationed at Ground Floor of Main OPD Block and on the respective floors of OPD like PAC, Male & Female Family Planning at first floor, ART & Radiotherapy at sixth floor. The process for registration is simple and patient friendly.

1. Token issued to patients by Security Personnel in front of Main OPD Registration Gate.
2. It is ascertained by Security Personnel that each and every registration counter, the queue is maintained and not be any longer than approximately 20 Patients keeping in mind the COVID appropriate behavior like Social Distancing, Hand Sanitization and Wearing of Masks. Public address system is provided at OPD Registration area for making important announcements.
3. Segregation of counters for different patient categories have been done for quick and effective management of queues at OPD registration area. Separate counter windows for patient's areas is as follows:

<i>Counters no: 4b</i> a. Counter no.- 1, 2 & 3 b. Counter no.- 4a c. Counter no.- 5 d. Counter no.- 6, 7 & 8 e. Counter no.- 9, 10 & 11 f. Counter no.- 12 g. Counter no.- 13 h. Counter no.- 14 i. Separate Registration counter in Orthopaedics Block, for Orthopaedics patients.	<i>: Specially Allocated Patients</i> : Revisit patients : TB Centre : Senior Citizens : New patient registration (Male) : New patient registration (Female) : Paediatrics & Paediatric Surgery : Govt Employees : Staff Counter
---	--

Note: - The Counters are subject to change depending upon the case scenario.

4. In case of medical emergency/ patient sickness, the theory of Queue Breaking is applied to save the precious time and life of the patient standing in queue. The patient is attended immediately by the concerned staff posted and patient reported to emergency with the help of supporting staff.
5. Identity Proof is sought from all the patients being registered. However, in case the patient does not have the ID Proof, the Data Entry Operator collects personal details like Name, Spouse Name, Gender, Age, Residential address, Mobile Number. Further the OPD Slip generated captures the Date, Time, Hospital ID Number and General Description of health issue based on which Department is allocated. The departmental detail printed is Unit Heads Name with Room Number allocated. This data is entered in Hospital HIMS (Hospital Information Management System) portal. Enclosed Appendix A

6. The Computerized printout of OPD Registration card is handed to the patient. Proper Display of signages and directions are well put in place of each and every floor of the Main OPD Block for patient movement to the concerned OPD. Further the security personnel and supporting staff are deployed to supervise the hassle free movement of the patients attending the OPD.
7. Backup Plan is well placed in case of a technical issue, server crash or any disaster related issues. The OPD Registration Services runs seamlessly keeping other options wide open for example:- issuing of OPD Registration Cards manually, stationing of OPD Registration to an alternate site for making of OPD Slips etc.
8. In case any correction is sought in the OPD Registration Card the same is corrected through the concerned staff posted at the ground floor registration counter by cross checking the patient's original identity proof.
9. Preventing Theft : Security Guards have been deployed and CCTVs Cameras installed for the preventing robbery cases in the OPD area.
10. Help Line Number of OPD :- 011-23232400, Extn.- 1525, 1576, 1417, 1333, 1504
11. A dedicated Help Desk is stationed at the Ground Floor of the Main OPD Block, which looks after day to day activities pertaining to OPD patient care services. It also provides the wheel-chairs, trolleys to the needy and disabled patient.
12. The patient on reaching the respective floor of the concerned treating unit doctor/ department of OPD is guided to reach the room assigned and a dedicated waiting area is stationed in front of each and every functional doctor consultation room. Further the nursing in-charge, nursing staff, security personnel and nursing orderly, who is deputed in front of doctor consultation room ensure the queue system, smooth movement of the queue, token dispersal and guidance to the patient regarding the next course of action as and when advised by the treating doctor. The senior citizen is accommodated as every third patient in the queue.
13. The nursing in-charge ensures the smooth functioning of the floor assigned to them. They maintain the entire record of inventory, stocks, logistics, medicines, stationary, equipments, etc and submit the report to the concerned departments as and when they also supervise the mechanism of cross referral of patients consultation to other departments as mentioned by the treating doctor unit. Enclosed checklist : Appendix B

14. At the outset, it is pertinent to mention that are our esteemed institution has a variety of OPD services like Broad Specialty, Special Clinics, Panchkarma, Unani, Covid 19 Screening and Sampling OPD, etc. Also various activities of patient care interest and to boost the moral of Health Care Workers special activities like :- celebration of Yoga Day, Yoga Week, Happiness Therapy is organized time to time. This brings a positive and happy environment at work place for both patient and staff. Various Preventive, Promotive and Curative health services and implementation of National Health Programs are done in departments.

15. After the doctor consultation the OPD Card is duly signed and stamped by the treating doctor. Further the OPD Card is checked by the supporting staff and the investigation as advised the forms are filled and the patient is directed accordingly. Also separate counters are stationed at various floors of the OPD for taking of Blood Samples, dispersal of medicines and reports. A dedicated department of Radiology for CT, MRI, X-Rays and Ultrasounds is well placed.

16. For revisit patients, the OPD Registration counter applies revisit stamp of the treating unit doctor's in the OPD Card and the patient is directed accordingly as per the points mentioned above.

17. Report of investigation is dispatched to the OPD floor wise.

18. Patient feedback and suggestion box is available at each and every floor. Regarding patient grievance: 011-23232400, Extn.- 1525, 1576, 1417, 1333, 1504, the needy patient can contact on the said phone numbers. Also the same can be attended in person through floor nursing in-charge, nursing sister, office of AMS OPD. Enclosed: Appendix C & D

19. To update both patients and health care personnel visiting OPD various training program are conducted from time to time as per latest guidelines. Display of IEC material for addressing the patients.

20. The facility manager is posted in the OPD Block, who supervises the sanitation/ cleanliness services and also provides supporting staff and floor supervisor who works in liaison with the floor sister in-charge. He is also assigned to report his work on day to day activity to the Head of OPD Services. Enclosed Checklist : Appendix E

21. All activities/ programmes/ day to day functioning must be informed by all supporting staff to both the Head of OPD and ANS OPD.

22. The Floors, where the OPD Registration is run independently has to submit the census report on daily basis to the office of AMS OPD and IT Department.

23. Further, as per Government mandate, the OPDs are running few clinics as reflected in National/ State Program, for example:- ART Clinic: NACO, Immunization Clinics, Anti Rabies, Antenatal Clinic, New Born Clinic, Family Planning OPDs (Male & Female), etc.

24. To assess the quality services provided by the institutions, the NQAS has been established which provides inputs to the key areas and the scope of improvement.

25. A diagrammatic colored representation of flow chart of OPD with OPD Registration is annexed as Appendix F.



LOK NAYAK HOSPITAL

NEW DELHI - 110002

लोक नायक अस्पताल

नई दिल्ली - 110002

GOVERNMENT NATIONAL CAPITAL TERRITORY OF DELHI

EPBX No. : 23233400, 23232400
Casualty No. : 23235152
M.S. Office Fax No. : 23232870
E-mail: lnhmsoffice@gmail.com
msinh@nic.in

OUT PATIENT REGISTRATION CARD

Appendix A
Queue Token No. : 7

Dept	PEDS MEDICINE	DR M MANTAN (TUE-FRI)	Room No	515	OPD Reg. No.	114323551			
Name	X	Sex	M	Age	0 D	Date	11 FEB 2022 10:42 AM	Marital Status	
D/W	S/O : Y	Area / Location	XY, NEW DELHI	Referred to Dept	PEDS MEDICINE	Contact No.			
Religion		Nationality	INDIAN	Occupation		APL	BPL	Monthly Income	
DOB	11 FEB, 2022	Birth Wt(K.g.)		Wt(Kg.)		HC(Cms.)		Ht(Cms.)	
Immunization	BCG	DPT 1 2 3 B1 B2	OPV 1 2 3 B1 B2	Hepatitis B 1 2 3	Measles	MMR	Typhoid	Other	

PROVISIONAL DIAGNOSIS :

Allergic to :

INVESTIGATIONS	DATE	CLINICAL FINDINGS & REPORTS	TREATMENT
Haematology b / TLC / DLC SR Platelet Count T / CT / PT S URINE EXAM Sugar lb Microscopy / S BIO-CHEMISTRY Gl I Sugar F / PP / R Glycosylated Hb. I Uria . Creatinine . Uric Acid . Electrolytes . Calcium . Phosphorus Lipid Profile FT . Bilirubin /T /D /I GOT (ALT) GPT (AST) . ALK. Phosp . Protein Total lb Globulin G Ratio Prothrombin Time /INR RADIOLOGY -Ray Chest SG T Scan / MRI MICROBIOLOGY bsAg IV SO RP . Widal Iod C/S TS OTHERS CG CHO BG Blood Group			

Sign. /Name/Designation of Doctor
Date & Time: 11 FEB, 2022 10:42

Safety Inspection Checklist

UNIT/WARD/DEPARTMENT/FLOOR:

DATE:

S.No	FIRE AND SECURITY	Yes/No	N/A	Location & action to be taken
1	Are Fire exits and fire equipment free from obstruction?			
	Properly signage posted?			
	In good working condition?			
2	Are emergency procedures/ Codes displayed?			
3	What is the emergency number to call?			
4	Are staffs aware of the security procedures in the workplace?			
5	Emergency signage is clearly visible			
6	Staff are aware of procedures and know emergency personnel			
7	Staff are inducted in fire safety			
8	Extinguisher of appropriate type is close by; i.e., within 20 m			
9	Extinguisher is checked once in six months?			
10	Staff aware about Non fire emergencies			
11	Staff aware about evacuation plan during fire and non fire emergencies			

S.No	WORKING AREAS AND PHYSICAL HAZARDS	Yes/No	N/A	Location and action to be taken
1	Slippery or unsafe floor/corridors?			
2	Work areas, store room, and corridors free from clutter or obstruction?			
3	Any protruding, sharp, exposed objects or low overhead structures found?			
4	Is the lighting adequate for the work required?			
5	Is protective equipment available and used for protection from blood or body fluids?			
6	Are All safety signage displayed appropriately? e.g. fire			
7	Adequate personnel available to handle			

S.No	ELECTRICAL HAZARDS	Yes/No	N/A	Location and action to be taken
1	Are cords/plugs safe, not frayed or broken?			
2	Has defective electrical equipment been not in use?			
3	Are all hand-operated electric tools/equipment used with a Residual Current Device?			
4	Backup available in case of electricity failure			
Comments:				

S.No	CHEMICAL, DRUG AND SUBSTANCE HAZARDS	Yes/No	N/A	Location and action to be taken
1	Are all chemical containers clearly labeled?			
2	Are Material Safety Data Sheets available at the point of use of the chemical?			
3	Are dangerous or harmful substances stored appropriately			
4	Is the necessary protective equipment available and used?			
5	Are emergency spill kits available and procedures displayed?			
6	Staff is aware of procedures relating to Hazardous materials?			
7	Staff trained in chemical handling and are aware of chemical hazards			
	Current chemical MSDSs available?			
8	Spill kits are available and regularly maintained?			
9	Gas cylinders secured adequately?			
10	Written procedures for chemical handling, storage and spillage in place?			

S.No	EQUIPMENT AND MANUAL HANDLING	Yes/No	N/A	Location and action to be taken
1	Are all equipment, tools, and furniture in good repair?			
2	Have broken items been removed from use?			
3	Are special precautions clearly displayed for using dangerous equipment?			
4	Are safety signage displayed regarding the use of equipment?			
5	Are heavy items or frequently used items stored properly - between hip and shoulder height			
6	Copy of proper license/registration certificates available (indicate deficiency)			
7	Proper maintenance and inspection done for all equipments			

S.No	BIOLOGICAL HAZARDS AND WASTE	Yes/No	N/A	Location and action to be taken
1	Are known infection risks identified and proper notices in place?			
2	Is protective equipment available and used? i.e. gloves, mask, goggles, gown etc			
3	Are there sufficient numbers of waste collection bins containers available?			
4	Are the sharps containers overfilled?			
5	Is waste segregated properly?			
6	Regular waste disposal is done to minimize waste on site			
7	Records of waste are kept			
8	Transport of Biomedical waste across the hospital done properly?			
9	Is all the staff aware of the biomedical waste practices?			

Auditors:

S.NO	NAME	DESIGNATION	SIGNATURE

PATIENT SATISFACTION FORMS & STEPS FOR ITS IMPLEMENTATION**OPD patient Feedback**

Dear Client,

You have spent your valuable time in the hospital in connection with your / relative's/ friend's treatment. You are requested to share your opinion about the quality of services, which you experienced, while visiting the hospital. The information provided by you would be kept confidential and would only be used for improving the services.

Please tick the appropriate box and drop the questionnaire in the Suggestion box

Sl No	Attributes	Poor 1	Fair 2	Good 3	Very Good 4	Excellent 5	No comments
1	Availability of sufficient information in Hospital (Directional & location signages, Registration counter, Laboratory, Radiology Department, Dispensary, etc)						
2	Waiting time at the registration counter	more than 30 mins	10-30 mins	5-10 mins	Within 5 mins	Immediate	
3	Behaviour and attitude of Hospital Staff						
4	Amenities in waiting area (chairs, fans, drinking water and cleanliness of bathrooms & toilets)						
5	Attitude & communication of Doctors						
6	Time spent on consulting, examination and counselling						
7	Availability of Lab and radiology investigation facilities within the hospital						
8	Promptness at Medicine distribution counter						
9	Availability of prescribed drugs at the hospital dispensary						
10	Your overall satisfaction during the visit to the hospital						

1. What improvement would you like to see in the hospital
2. What made you come to this hospital for treatment?
3. Would you like to return to this hospital next time for treatment
4. Your valuable suggestions

Date _____ Clinic _____ Age _____ Sex _____

kg 16

आई0पी0डी0 रोगी प्रज्ञावली / फीडबैक

	सूचक	निम्न स्तरीय	सामान्य	अच्छा	बहुत अच्छा
1	अस्पताल में पर्याप्त सूचनापट्ट व विभागों, दिशा आदि की सूचना				
2	पजीकरण कराने में कुल समय	30 मिनट से ज्यादा	10-30 मिनट	5 मिनट में	तुरंत
3	रजिस्ट्रेशन काउंटर में अस्पताल के कर्मचारियों का व्यवहार				
4	डिस्चार्ज प्रक्रिया (यदि सटुट नहीं तो नीचे सुझाव दें)				
5	वार्ड की साफ-सफाई का अनुभव				
6	शौचालय व स्नानघर की साफ-सफाई				
7	चादर/बेड तकिया कवर की स्वच्छता				
8	अस्पताल परिसर व नालियों की साफ-सफाई				
9	डॉक्टरों द्वारा नियमित जांच व देखभाल				
10	डॉक्टरों द्वारा मरीज के प्रति व्यवहार				
11	जांच/परामर्श, सलाह में दिये गये समय सटुटि				
12	सेवा उपलब्ध कराने में नर्सों की शीघ्रता व सजगता				
13	वॉर्ड में 24 घंटे नर्सों की उपलब्धता				
14	नर्सों द्वारा मरीज की प्रति व्यवहार				
15	वॉर्ड बॉय/महिला (कर्मचारियों) की उपलब्धता व उनके द्वारा मरीज के साथ व्यवहार				
16	अस्पताल में दवाई की उपलब्धता				
17	अस्पताल में जांच : लेब जांच एक्सरे इत्यादि की उपलब्धता				
18	अस्पताल में भोजन वितरण की समयबद्धता				
	अस्पताल में दिये गये भोजन की गुणवत्ता				
19	अस्पताल में दिये गये उपचार व सेवाओं स सटुटि				

1 इस अस्पताल व इसकी सेवाओं में सुधार के लिए सुझाव

2 इसी अस्पताल में ईलाज के लिए आने का कारण

3 क्या आप ईलाज के लिए इस अस्पताल की सेवाओं को पुनः प्राप्त करना चाहेंगे

दिनांक:

आयु:

लिंग: पुरुष/महिला

आई0पी0डी0 नम्बर:

फोन नं0

HLL LIFECARE LTD GROOMING REPORT									
SITE NAME : LNJP HOSPITAL						Date:-			
S.NO	Employee Name	Designation	Uniform	Personal Hygiene	ID Card	Hair	Nails	Shoe	Employee Signature
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
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24									
25									
26									
27									
28									
29									
30									
Supervisor Sig. _____ Checked By _____ Verified By _____									

Appendix E

6/1/19

HLL LIFECARE LIMITED

MORNING

STAFF WASHROOM CHECKLIST

Location :-

19

DATE =

DAYS =

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY

S.NO	WASHROOM AREA	TIME	09:00	11:00	13:00	09:00	11:00	13:00	09:00	11:00	13:00	09:00	11:00	13:00	09:00	11:00	13:00	09:00	11:00	13:00	09:00	11:00	13:00	FOLLOW WORK SAFETY
1	FLOOR																							
2	WASH BASIN																							
3	URINAL POT																							
4	W/C																							
5	FACE MIRROR																							
6	ELECTRICAL POINT																							
7	TAP's																							
8	DOOR's																							
9	FLOOR TRAP																							
10	WALL TILES																							
11	EXHAUST FAN																							
12	NAPHTHALENE BALLS																							
13	HAND WASH																							
14	ODONIL																							
SUPERVISOR SIGNATUER																								

HLL LIFECARE LIMITED			
WASHROOM TECHNICAL CHECKLIST			DATE
			Location
S.NO	WASHROOM AREA		
1	FLOOR		
2	WASH BASIN		
3	URINAL POT		
4	W/C		
5	FACE MIRROR		
6	ELECTRICAL POINT		
7	TAP'S		
8	DOOR'S		
9	FLOOR TRAP		
10	WALL TILES		
11	EXHAUST FAN		
SUPERVISOR SIGNATURE			

Appendix E

HLL LIFE CARE LIMITED

OPD BLOCK DAILY CLEANING CHECK LIST

SITE NAME : LNJP HOSPITAL

DATE :

Floor	Area	Description	1st Time 8:00 AM	2nd Time 12:00 PM	3rd Time 4:00 PM	4th Time 8:00 PM	5th Time 12:00 AM	6th Time 4:00 AM	Remarks
Basement	STATIONERY STORE	Cob web removing, Glass, Table, Chair, Bench, Sofa, Bed, Pillar, Signage Board, Wall Tiles, Railing, Ramp, Stairs, Scurtting, Floor & Dustbin cleaning to be check. Washroom cleaning to be check.							
	OTHER STORE ROOMS								
	OPD								
Ground Floor	PHARMACY								
	REGISTRATION								
	CASUALTY								
	MAIN HALL								
	OUT SOURCE OFFICE								
1st FLOOR	AMS/PAC								
	OPD EAST WING								
	MFP/FFP								
2nd FLOOR	OPD WEST WING								
	GAYNI								
	OPD EAST WING								
	ANC								
	OPD WEST WING								
3rd Floor	MEDICINE OPD								
	OPD EAST WING								
	MEDICINE OPD								
4th FLOOR	OPD WEST WING								
	SURGERY								
	OPD EAST WING								
	NEURU SURGERY								
	OPD WEST WING								
5th FLOOR	PEDS. SURG.								
	OPD EAST WING								
	PEDS. MED.								
6th FLOOR	OPD WEST WING								
	ENT								
	OPD EAST WING								
	RT / ART								
	OPD WEST WING								
7th Floor	AYURVADIC / PANCHKARMA								
	OPD EAST WING								
	SKIN / M-F DRESSING								
	OPD WEST WING								

Checked By Supervisor Signature

Verified By

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Flow Chart of OPD with OPD Registration of Lok Nayak Hospital, GNCTD

