

Hospital Management

Loga Priya P, Dr J Antonette Asumptha,
Department of Entrepreneurship Studies, Madurai Kamaraj University.
Department of Entrepreneurship Studies, Madurai Kamaraj Universtiy.
Rayen Dental

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ABSTRACT: The study of particular complets system by means of computer simulation is described in this paper. Hospitals are chosen as target systems where the proposed methodology is applied. The current paper analyses the specifics of the application of Activity-Based Costing method in hospital management.

KEYWORDS: Healthcare Management, Decision-making, Practice guidelines.

organization is the first step of the process. The incidence of hospital acquired methicillin resistant Staphylococcus aureus (MRSA) continues to rise globally. Attempts to control this spread have relied principal on three measures: hand hygiene among healthcare workers, restriction of antibiotics, and the detection and isolation of infected or colonized patients. Creative application of information technology is a keystone to reach the desired changes. In the sanitary area many efforts have been made in order to develop information systems that allow data to be stored and processed in a structured way.

I. INTRODUCTION :

This paper explains how the study of a hospital can be performed by means of computer simulation. A deep observation of the studied

II. REVIEW OF LITERATUE :

YEAR	TITLE AND YEAR PUBLISHED	AUTHOR	FINDINGS
2000	The Effects Of Clinical Case Management On Hospital Service Use Among ED Frequent Users. (2000)	ROBERT L. OKIN, ALICIA BOCELLARI, FRANCISCA AZOCAR, MARTHA SHUMWAY.	It has been extensively documented that a small number of emergency department (ED) patients make disproportionate use of emergency services and are difficult to link to primay care providers. These high users tend to be poor, homeless, socially isolated, lack insurance entitlements, and have drug and alcohol problems. These characteristics, crucial environmental factors, and the way emergency care is typically provided result in these patients receiving episodic, discontinuous, and inadequate care.

2005	Iron Ingestion: an Evidence-Based Consensus Guideline for Out-of-Hospital Management (2005)	Anthony S. Manoguerra, Andrew R. Erdman, Lisa L. Booze, Paul M. Wax	The ingestion of iron, either as tablets of iron salts or as constituents of vitamin and mineral supplements has, for the past few decades, been one of the major causes of poisoning mortality and morbidity in children. There are no potential conflicts of interest reported by the expert consensus panel or project staff regarding this guideline.
2006	Acetaminophen Poisoning: an Evidence-Based Consensus Guideline for Out-of-Hospital Management (2006)	Richard C. Dart, Andrew R. Erdman, Kent R. Olson, Gwenn Christianson, Peter A. Chyka	The term out-of-hospital is defined as the period before a patient reaches a healthcare facility. An acute ingestion is defined as any number of ingestions that occur within a period of up to 8 hours. The panel identified the patient's age, intent, the pattern of ingestion, as well as the dose and formulation of the acetaminophen product ingested as critical information that would be needed in order to make a sound triage decision.
2007	Tricyclic antidepressant poisoning: an evidence-based consensus guideline for out-of-hospital management	Alan D. Woolf, Lewis S. Nelson, Lisa L. Booze, Kent R. olson, Paul M. wax	Tricyclic antidepressant (TCA) poisoning is common in the United States. Appropriate referral to healthcare facilities is critically important as TCA ingestion can result in convulsions, coma, life-threatening arrhythmias and cardiac conduction disturbances, and death. There are no other potential conflicts of interest reported by the expert consensus panel or

			project staff regarding this guideline.
2008	Valproic acid poisoning: An evidence-based consensus guideline for out-of-hospital management (2008)	Peter A. chyka, E. Martin Caravati, Lisa L. Booze, Lewis S. Nelson, Alan D. Woolf	For the purpose of this guideline, two age groups are defined as either children less than 6 years of age or older children and adults. The older age group is more likely to attempt self-harm and to conceal an ingestion. The expert consensus panel chose to emphasize the importance of information that would be needed in order to make a sound triage decision for a patient with a known valproic acid poisoning. There were no controlled trials of ipecac syrup for valproic acid overdose.
2010	Modeling and Analysis of the emergency department at university of Kentucky chandler hospital using simulations (2010)	Stuart Brenne, MS, Zhen Zeng, MS, Yang Liu, Junwen Wang	In this article, we present a simulation study conducted in the emergency department at the University of Kentucky Chandler Hospital. Such a model provides a quantitative tool for continuous improvement and process control in the emergency department and also is applicable to other departments in the hospital. Using this model, we analyzed the effects of workforce configuration and resource utilizations in the UKCH emergency department.
2011	Evaluation of service quality of hospital outpatient department services (2011)	Col Abhijit Chakravarty	It has become essential for hospital managers to understand and measure consumer perspectives and service quality gaps, so that any perceived gap in delivery of service is identified and suitably addressed. Service quality gaps were identified to

			<p>exist across all the five dimensions of the survey instrument, with statistically significant gaps across the dimensions of „tangibles“ and „responsiveness.“ Study concludes that significant service quality gap existed in delivery of the hospital OPD services, which need to be addressed by focused improvement efforts hospital management.</p>
2013	<p>Randomized study comparing a Basal-Bolus with a Basal Plus correction insulin regimen for the hospital management of medical and surgical patients (2013)</p>	<p>Dawn Smiley, Amna Khan, Sol Jacobs, David Reyes, Vicky Hunt</p>	<p>Effective and easily implemented insulin regimens are needed to facilitate hospital glycemic control in general medical and surgical patients with type 2 diabetes (T2D). The use of a basal plus regimen with glargine once daily plus corrective doses with glulisine insulin before meals resulted in glycemic control similar to a standard basal-bolus regimen. The basal plus approach is an effective alternative to the use of a basal-bolus regimen in general medical and surgical patients with T2D.</p>
2014	<p>How hospital leaders contribute to patient safety through the development of trust (2014)</p>	<p>Corinne Auer, Rene Schwendimann,phd, Roswitha koch</p>	<p>The aim of this study was to explore the associations between hospital management support for patient safety, registered nurses“ trust in hospital management, and their overall perception of patient safety, considering aspects of safety communication as possible mediating variables. A path analysis revealed that the indirect associations between “management support for</p>

			patient safety” and “overall perception of patient safety” were more prominent than the direct association.
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2015	Developing Inventory Management in Hospital (2015)	Dauangpun Kritchanchai, Watcharaphong Meesamut	Single inventory policy has been applied to entire types of drugs in hospitals, despite several different drug and demand characteristics. Healthcare expenditure is generally concentrated on the use of drugs because they are important products in curative care. The study can be concluded that only single inventory policy cannot be applied to entire types of drugs in hospital. The inventory management policy should take into account both drug’s value and clinical importance factors.
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RESEARCH GAP:

The feedback of training of nurses was done in various methods but not particularly in Madurai, Tamil Nadu , India hence we have catered to it.

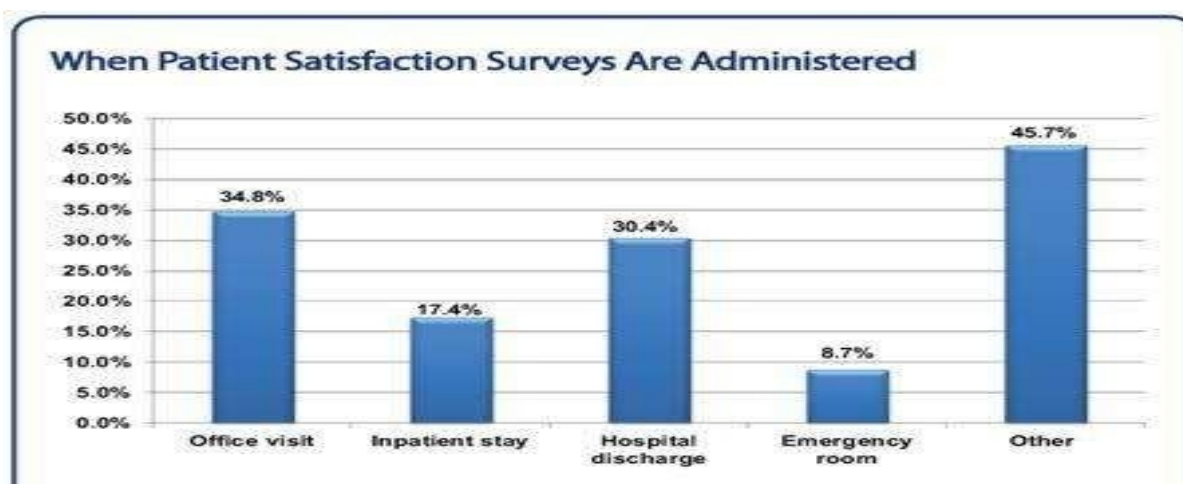
DATA COLLECTION:

We used a closed ended questionnaire to collect data. Data collection was done in person in hospital

in Madurai-Tamil Nadu. The nurses were ever co-operative.

III. DATA ANALYSIS AND CONCLUSION:

We use excel sheet to analysis data and we use simple random sampling to pick data. Convergent and Discriminant was proved.



I receive the right amount of support and guidance from my direct supervisor-45.7%.I feel encouraged by my supervisor to offersuggestions and improvements-34.8%.My work assignments are always clearly explainedto me-30.4%

The management doesnt make changes based on mysuggestions and feedback-17.4%, this is a disadvantage.I am not provided with all trainings necessary for me toperform my job-8.7%.Hence hospitals should improve these .

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Appendix:

TRAINEE NAME:		TRAINING CENTRE:	
JOB ROLE ENROLLED:		BATCH ID:	
TRAINER'S NAME:		CENTRE ID:	

A) ABOUT TRAINER AND TRAINING:

Items	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The management of this organization is supportive of me					
I receive the right amount of support and guidance from my direct supervisor					
I am provided with all trainings necessary for me to perform my job					
I have learned many new job skills in this position					
I feel encouraged by my supervisor to offer suggestions and improvements					
The management makes changes based on my suggestions and feedback					
The organization rules make it easy for me to do a good job					



I am satisfied with my chances for promotion					
I have an accurate written job description					
My work assignments are always clearly explained to me					