

Citizen Charter Introduction to General Hospital, Himmatnagar Download PDF Nagrik Adhikar Patra GMERS General Hospital, Himmatnagar is a Government District Hospital providing following services to all irrespective of caste, creed or economic status. Being a Government hospital its main objective of the hospital is to provide holistic healthcare services-preventive, promotive, curative and rehabilitative-under the allopathic system. The hospital grew gradually over the years in the same location to the present status of 650-beds. The hospital caters to the healthcare requirements of people in the city Himmatnagar and the four Talukas attached to it Himmatnagar, Vanthli, Kesod, Manavadar, Bhesan Now our GMERS Medical College attached General Hospital, Himmatnagar is a 650 bedded teaching hospital which provides clinical education and training to future and current physicians, nurses, and other health professionals; in addition to delivering tertiary level medical care to patients. This hospital offers services in all specialties of modern Medicine and is focused on awareness, disease prevention, screening and early intervention. Our daily OPD is 1200 to 1500. Geographical Description and Layout of Hospital Conveniently located in the historical city of Gujarat, GHG has a large campus spreading over The hospital building is a construction by the public works department of the state with a separate building to house the outpatient (OPD) and the inpatients (IPD) that is connected with a passage. Contact Us Medical Superintendent GMERS Medical College Attached General Hospital, Himmatnagar Dr. D. R. Makavana cdmo.health.Himmatnagar@gmail.com Tel. 0285 2651436 PIN 362001 Gujarat Important Telephone No:-T 0285 2651436 Casualty- · Our services are provided on both Indoor and Outdoor basis as per the timings fixed by the Hospital. · Emergency Services for basic specialties are available round the clock all 365 days to all patients irrespective of their place of residence, paying capacity etc. · Medico legal cases are accepted round the clock and post mortem examination performed as and when necessary. · Registration timings - · Summer - (April to September) : 8:30 AM to 12.30 PM and 2:30 PM to 4:30 PM · Winter - (October to March): 8:30 AM to 12.30 PM and 2:30 p.m. to 4:30 PM · OPD consultation · Summer - (April to September): 9:00 AM to 1:00 PM and 3:00 PM to 5:00 PM · Winter - (October to March) 9:00 AM to 01.00 PM and 3:00 PM to 5:00 PM · Saturday - Only morning OPD · Cases requiring higher institutional setup are referred to higher institution after stabilization. · The hospital is also responsible for rendering community services as laid by the National Health Programs through outreach programs by Post Partum Unit and Sector Dispensaries such as Ante Natal Clinic, Post Partum Services, Immunization Services, School Health. · Yellow Fever Vaccination on designated day and time. (Monday at 11 AM) Clinical Services · 1. General Medicine · 2. Dermatology · 3. Pulmonary Medicine · 4. Psychiatry · 5. General Surgery · 6. Obstetrics and Gynecology · 7. Orthopedics · 8. Ear, Nose , Throat · 9. Ophthalmology · 10. Dentistry · 11. Pediatrics and Neonatology · 12. Anesthesiology Diagnostic Services · 1. Laboratory · a. Pathology · b. Microbiology · c. Biochemistry · 2. Radiology · a. X-Ray · b. Ultrasonography · c. CT- Scan · 3. Electro medical investigation – ECG ,2D Echo (Color Doppler) · Hemodialysis Auxiliary Services · 1. Hospital Administration · 2. Physiotherapy · 3. Dietary (Only for indoor patients) · 4. Central Sterile Supply Department · 5. Blood Bank · 6. Medical Stores · 7. Manifold room · 8. Medical Record Department · 9. Housekeeping · 10. Security · 11. Hospital Management Information System · 12. Rogi Kalyan Samiti Health Programs · 1. RMNCH+A (Reproductive, Maternal, Neonatal and Child health + Adolescence) · 2. RNTCP (Revised National Tuberculosis Control Program) · 3. National Vector Borne Disease Control Program · 4. National Blindness Control Program · 5. Polio Eradication Program · 6. National Aids Control Program · 7.

National Mental Health Program · 8. Rashtriya Swasthya Bima Yojana · 9. Mukhyamantri Amrutam Yojana Other Services Certificate (Medical fitness, Disability certificate, Health Certificates, Age certificate) · AFHS (Adolescence Friendly Health Services Centre) · Emergency Medical Response · VVIP and VIP coverage

1 Our Vision: "To be the part of network of finest public health care institutions in the State of Gujarat, providing quality medical care services with the state of art technology with easy accessibility, affordability and equity to the people of Gujarat and beyond." 2 Our Mission: "We shall enhance the patient quality life through providing specialized medical treatment at free/ affordable rates to the poor and the needy and preventive healthcare." 3 Objectives:

- To provide high quality care according to the health needs of the catchment population
- To facilitate patient satisfaction by service and ensuring the dignity and rights of patients and other stakeholders.
- To provide a safe and conducive work environment for staff.
- To ensure accountable, consultative and transparent management process.
- To provide basic and continuing education for staff.
- To integrate with district and state health system, by providing referral systems, technical, and logistic support to primary and community health care.

In order to improve the quality of the Hospital and bring it to the level of national standards of NABH following recommendations were given on the basis of Structure, Process and Outcome. The areas for improvement can be divided in to four categories:

- Human Resources
- Quality of care
- Management
- Infrastructure & Other resource management

The following table given below describes the present staff position form the government and RKS Quality of Care : Some of the process mentioned below were the steps initiated for quality of care Documentation system: Hospital has developed its documentation on policies, procedures, programmes, guidelines etc. These have been developed by committee personnel and staff of the hospital, reviewed by Quality Assurance Committee and Accreditation co-ordinator and have been approved by Medical Superintendent. List of Documents Developed are:- Central Manuals Policy Manual Procedure Manual Quality Assurance Manual Hospital Safety Manual Infection Control Manual Disaster and Emergency Preparedness Manual Departmental Manual (Each department has developed its department manual which included the working of the department/Protocols to be followed etc) OPD Manual Casualty Manual ICCU Manual NICU Manual OT Manual Laboratory Manual (Pathology, Microbiology, Biochemistry) Radiology Manual Dietary Manual Nursing Manual Clinical Protocol Manual Antibiotic Policy Hospital Formulary OBS & GYNEC Manual Pediatric Manual Medicine Manual ENT Manual Ophthalmic Manual Surgery Manual Dental Manual Psychiatry Manual Surgical Manual Orthopedic Manual Skin Dept. Manual Various processes implemented for quality care are:-

- To make SOPs for all departments
- To standardize all the formats used by the hospital
- To improvise on the expenditure done through RKS
- To Standardize the Annual Maintenance contract for all organizations
- To have a Patient Redressal System through Satisfaction Surveys and Suggestion Box at Places
- To carry out Staff Satisfaction Surveys
- To have a proper system of Staff Appraisal
- To have a monthly meeting of all Sister In Charges and Doctors and Sanitary Inspector
- To start Paramedical Courses in Hospital through which the hospital can get staff also.
- To involve the patient in decision making
- To have a mechanism of checking the Behavior of the patient through Pseudo Patients Visits
- Reporting of all sentinel events like adverse drug reaction, post operative infections
- To carry out Death Audits
- To have quality assurance document for Laboratory, Imaging Centre
- To have a disaster Management Plan
- To make the hospital barrier free for handicaps

Committee List. 1 Hospital Quality Assurance Committee 2 Infection Control

Committee 3 Medical Audit Committee 4 Emergency Preparedness Committee (Fire and Non Fire) 5 Drugs / Formulary Committee. & Antibiotic committee 6 Diet Committee 7 Safety Committee 8 Grievance Committee Various Trainings are continuously conducted for all staff from time to time Trainings: · Pain management guidelines · Rehabilitative services policies · Research activities policies and protocols · Nutritional assessment and reassessment · Training on CPR · End of life care · Procurement, Storage, prescription and dispensing of Medications · Administration of medications · Monitoring of medications · Patient's self administration of medication · Medication brought from outside the organization · Adverse drug events · Use of narcotic drugs and psychotropic substance · Usage of chemotherapeutic agents · Usage of radioactive and investigational drugs · Safe storage, preparation, handling, distribution and disposal of radioactive and investigational drugs. · Procurement of implantable prosthesis · Procurements, handling, storage, distribution, usage and replenishment of medical gases. · Antibiotic policy · Laundry and linen management · Kitchen sanitation and food handling · Engineering controls for infection control · Mortuary practices and procedures · Surveillance, data collection and monitoring of HAI · Isolation/barrier nursing · Outbreak control procedures · Quality control for sterilization · Handling of bio-medical waste · Quality assurance programmes · Operational and maintenance plan · Smoking policy · Human resource planning · Training on safe practices (Universal Precautions) · Training on care of vulnerable group · Mock Drill (Emergency)