



BIMR HOSPITALS

(Run by Birlanagar Jan Sewa Trust)

Surya Mandir Road, Residency, Morar, Gwalior - 474 005 (M.P.)

Ph.: 0751-7102 617

E-mail : adm@bimrhospital.com • Website : www.bimr.org

NABH Accredited Multi Super Speciality 350 Bedded Hospital



NABL Certificate No. MC-2504
(NABL ACCREDITED LAB)



H-2021-0829

BIMR Hospitals, Gwalior

Annual Performance Report Year 2023 -24 (1st April 23 to 31 March 24)

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Since 1983

Pathology Lab : 0751-7102 603, 7102 649, 7102 692 • Heart Center : 0751-7102 675 • Oncology : 0751-7102 724

Help Line No. : 0751- 7102 615 • Emergency : 0751-2335 000, 1800 233 2467

able Facilities : • Cardiac Centre • Oncology Centre • IVFCentre • Neuro Centre • Plastic Surgery • Pediatric Surgery • Laparoscopic & ral Surgery • Oral & Maxillo Facial Surgery • Gastroenterology • Orthopedics (Hip & Knee Joint Replacement) • Urology & Andrology dicine • Gynaecology • Pediatrics • Ophthalmology • Dermatology (Skin) • ENT Cochlear Implant, Sleep Apnea • Dental • Pathology fiology • Physiotherapy • Medicines 24x7 (15% Discount on Cash Purchase)



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I. Executive Summary:

The BIMR Hospitals is a multi specialty hospital. Our hospital is NABH Accredited. The hospital is first hospital of Gwalior Chambal division who has received accreditation from NABH and NABL. It is spread on 7.9 Acres of land, with a capacity of 350 beds. The outpatient services are spread on three floors with 45 consultation rooms. All ambulatory services have been designed with intent to create dedicated aides for specialties, whether it is the proximity of diagnostic services or blood bank to the emergency. Inpatients services are spread on three floors and all types of ICUs/HDUs & wards.

- The hospital has well equipped operation theatres, All the operation theatres are fitted with best in - class pendant operating lights, anesthesia work-stations and necessary life support system.
- The hospital has one of the biggest critical care facility in the region with 78 beds in different intensive care units viz Medical, Surgical, Cardiac, Pediatrics, Neonatology, Neurosciences. All critical care beds are in the close vicinity of the operation theatre complex for easy accessibility and continuity of care.
- BIMR Hospitals has top of the line Hospital Information System which is seamlessly connected across the outpatient, inpatient and diagnostic areas.
- The hospitals has very good buildings providing for multi-tiered access control, electronic security systems with integrated CCTVs spanning across the facility and advanced fire management systems amongst other utilities.

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- A concise overview of the hospital's performance is highlighted in succeeding paras.

2. Hospital Overview:

The BIMR Hospital is a multi specialty hospital.

Patient first: Quality Care for our patients is of utmost priority

Respect & Compassion: We respect our patients and communities & provide a compassionate care

Team work: We believe and encourage in team work

Excellence: We continually work on service excellence through our Quality improvement initiatives.

Community involvement: We are dedicated to serve the community with affordable & quality care services.

- An Introduction to the hospitals, Its Mission, Vision, and Key leadership

OUR VISION

"To fulfill the dream of Syt. D. P. Mandelaji who established BIMR Hospitals, to make it a model multi super specialty hospital of Madhya Pradesh."

OUR MISSION

To achieve the Vision of our Founder Trustee by—

- Developing and providing top class health services at affordable cost.
- Establishing hospital quality management system in Accordance with the national quality standards for hospitals.
- Setting and achieving performance improvement targets and raising the bar higher...and higher.

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OUR VALUES

Patient First - We strive to deliver the best to every patient every day.

Empathy & Respect - We treat every patient with empathy and respect.

Service - We strive to anticipate and meet the needs of our patients, and all healthcare workers.

Integrity - We maintain confidentiality and dignity of our patients.

Innovation - We always strive to adopt latest healthcare equipment & techniques, and improve our knowledge and skills by regular frequent training and Continuous Medical Education.

Teamwork - We believe that the patient care is a multidisciplinary team work and each one of us is personally responsible for their healthcare and satisfaction.

QUALITY POLICY

We are committed to achieve fullest satisfaction of our patient by fulfilling their healthcare needs. We strive to achieve our commitment by –

- Establishing healthcare procedures and protocols.
- Providing regular training and awareness programme to the hospital personnel.
- Continually improving our performance by setting and achieving service standards and improvement targets, complying with legal and professional requirements.

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SAFETY POLICY

The Hospital believes that the safety of the patients, staff and visitors over rides all other considerations. The hospital ensures safety & security in the hospital by establishing safety protocols for each functional area.

The senior most person in each area have been made responsible and accountable for safety & security of the patient and people in that area. The hospital is committed to continually improve its safety performance -

- By setting and achieving safety improvement targets
- By complying to the applicable legal requirements
- By providing regular safety education & training to its personnel
- By conducting regular safety drills
- By conducting regular safety checks and audits

The hospital is committed to achieve safety standards matching international parameters with the active participation of our personnel, patients and visitors.


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3. Performance Highlights:

- Key statistics, patient numbers, and major achievements summary of last 3 Year.

S. No.	Name of Service/ Procedure/ others	Year 21-22	Year 22-23	Year 23-24
1	No. of IPD	21109	25534	23464
2	No of OPD	88684	100536	101054
3	No of Day care + Oph	4092+(374Oph)	8837+(2202Oph)	7557+(1564Oph)
4	No of Surgery	3696	3739	3317
5	CTVS Surgery	19	81	106
6	IVF	34	74	118
7	No of Pathology Investigations	237962	228670	246669
8	No of CT	10106	6746	7067
9	No of MRI	3144	4165	6066
10	No of USG	13092	14603	15040
11	No of X ray	20533	23329	24479
12	No of Angiography	1039	1009	925
13	No of Angioplasty	442	173	181
14	No of Joint replacement(Hip and Knee)	11	11	1
15	No of Dialysis	5548	8751	7208
16	No of Chemotherapy(Adjuvent CT	200+23	200+29	375+61

G. H. Birlanagar

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	with RT)+ Oncology Daycare for Chemotherapy)			
17	No of Radiotherapy			
18	No of Upper GI Endoscopy	1012	291	57
19	No of Cataract Surgery	338	2104	1684
20	No of EEG	228	331	394
21	No of TMT	664	623	840
22	No of ECHO	3176	3061	3721
23	No of ERCP	42	9	1
24	No of Holter	25	59	79

4. Quality and Patient Safety:

- Present quality matrix and initiatives related to patient safety.
- Annexure -1

5. Clinical Services:

- The range of services offered, staffing, and patient outcomes.

Clinical Services

- Anesthesiology
- Advance Cardio Vascular Services (Interventional Cardiology – Non Interventional Cardiology)
- Cardiothoracic Surgery
- Critical Care
- Day Care Services

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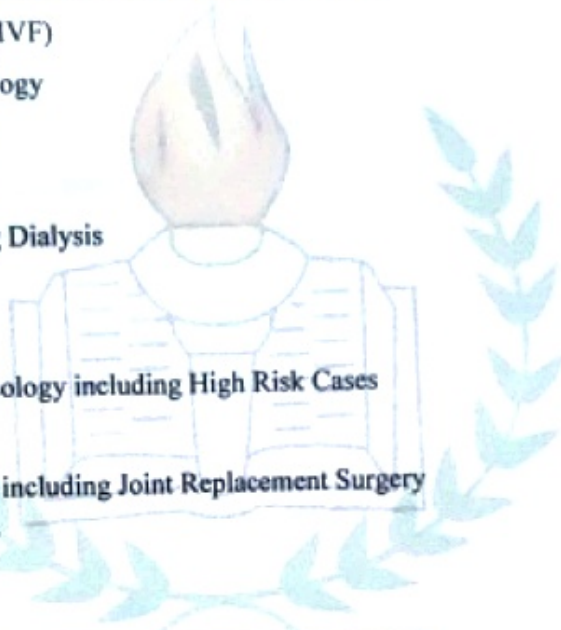


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- Dental Services
- Dermatology and Venereology
- Emergency Medicine
- General Medicine
- General Surgery including Minimally Invasive Services
- In Vitro Fertilization (IVF)
- Medical Gastroenterology
- Medical Oncology
- Neonatology
- Nephrology including Dialysis
- Neurology
- Neurosurgery
- Obstetrics and Gynecology including High Risk Cases
- Ophthalmology
- Orthopedics Surgery including Joint Replacement Surgery
- Otorhinolaryngology
- Pediatrics Surgery
- Pediatric
- Plastic and Reconstructive Surgery
- Radiation Oncology
- Respiratory Medicine
- Specialty ICU
- Surgical Oncology
- Urology



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Diagnostic/Radiological Services

- 2D Echo
- CT Scanning
- Holter Monitoring
- Mammography

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- MRI
- Spirometry
- Tread Mill Testing
- Ultrasound
- X-Ray

Laboratory & Microbiology Services

- Clinical Biochemistry
- Clinical Microbiology and Serology
- Clinical Pathology
- Cytopathology
- Hematology
- Histopathology

Pharmacy

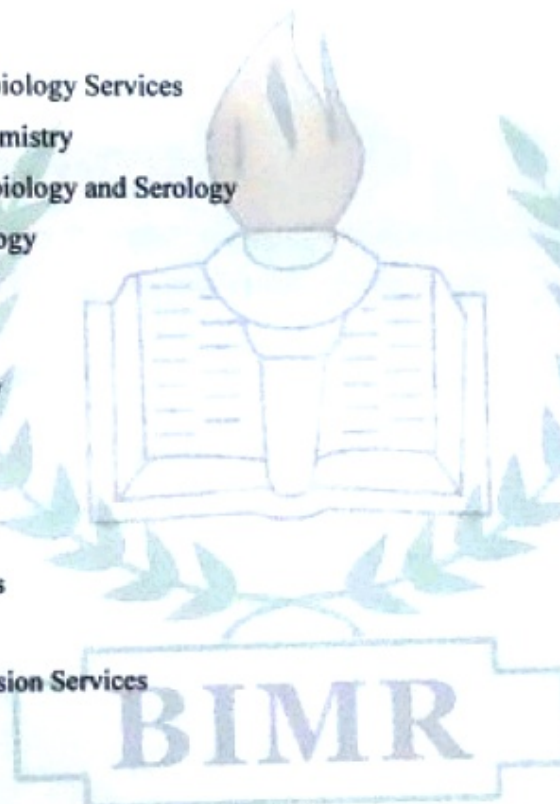
- Dispensary

Transfusion Services

- Blood Bank
- Blood Transfusion Services

Allied services

- Ambulance
- Dietetics
- Physiotherapy
- Psychology



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6. Financial Performance:

Over all hospital income was Approx. Rs 103 Cr. & 69 thousand per admitted patient in previous year. Hospital provided separate budget for Quality & HIC approx 2,65,10,800, 4,67,59,100.

Annexure 2 – Quality & HIC Budget

7. Patient Experience:

- Patient satisfaction survey is carried out and 90% satisfaction found in OPD & approx 80 % Satisfaction found in IPD Level. We create efforts to enhance patient experience.

8. Community Engagement:

- Highlight the hospital's involvement in the community.
- Blood Donation Camps organized – 12
- Mega Camps – 25
- Eye Camps – 20

9. Human Resources:

- Staffing levels
- Total Staff – 901
- Consultant - 67
- MO - 35
- Nursing staff – 244
- Paramedical – 80
- HK-250
- Security - 65

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- Training Conducted – 250
- 10. Technology and Infrastructure:

Buildings – 2

Total Bio Medical Equipment – 1200

11. Sustainability and Environmental Initiatives:

We have a Solar system 529 megawatt. We take green energy initiative to use STP garbage in planting.

12. Challenges Faced:

- a. Reduction in number of IPD patients: Hospital has deployed many ways to address this issue by exploring other options like commencing Super Specialty Clinics (already started in Dabra and Etawah), frequent camps in its periphery, promotions through digital means and social platforms.
- b. Trained staff: - Due high demand of para-medical staff like Nursing in Govt. Sector attritions rate in this area has increased and hospital is facing shortage of trained staff. Hospital has started dedicated training program for training of nursing staff to deal with extremely serious patients.

13. Goals for the Next Year:

- a. Financial Goal: - The total revenue of the hospital including from pharmacy during FY 2023-24 was Rs. 103 crores. We expect during FY 24-25 it would increase to around Rs. 115 crores with better margins and increase in number of patients by 10%.

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b. New Specialty:- Hospital has employed both Pathologist /clinical (Hematology) to introduce diagnosis and treatment of related disease including BMT. Hospital is also likely to introduce some new procedures in cardiology like IVUS, IVL and Rota ablation angioplasty.

14. Conclusion:

- BIMR Hospitals was launched in 1983 with 30 beds with other medical facilities in 1983 to provide basic health services to people of the Gwalior. Over the period it has turned into a 350 bedded multi/super specialty 350 bedded NABH/NABL accredited hospital only one of its types in Gwalior-Chambal region providing quality health care facilities to the all segments of society including under privileged population of region and its periphery. BIMR hospitals have always taken lead in adding
- new specialty over the years as compared to other nursing home in the region. We are determined to further enhance/upgrade existing specialties as well adding new super specialties so that people of the region get the much-needed quality health care services at affordable cost and avoid high cost of treatment in metro cities.
- In terms of overall performance of the hospital number of IPD is significantly reported i.e. 23464 patients and OPD is remarkably higher with 101054 patients in the session in discussion. overall Hospital income was approximately rupees 103 Cr which was higher than previous year. Above figure pointed out over all performance of the hospital is excellent in the session 2023-24.

15. Appendices:

- Annexure 1
- Annexure 2


Govind Deora

Executive Trustee
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Dr S. L. Desai
Director
BIMR Hospitals

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Annexure - 1

QUALITY INDICATOR:

Quality Indicators April 2023 – Sept 2023

S. NO.	Standard	INDICATORS	Apr-23	May-23	Jun-23	July 23	Aug 23	Sept 23
			Ratio/Percentage	Ratio/Percentage	Ratio/Percentage	Ratio/Percentage	Ratio/Percentage	Ratio/Percentage
1								
2		Average number of admission per day excluding day care	37/day	36/day	38/day	41/day	46/day	55/day
3		Average number of patient visiting OPD per day	281/ day	276/day	276/day	295/ day	296/day	226/day
4		Average number of patient visiting emergency per day	63/day	63/day	65/day	67/day	75/day	82/day
5		Average number of elective surgery per day	6/day	7/day	9/day	9/day	9/day	9/day
6		Average number of emergency surgery per day	1/day	2/day	2/day	1/day	1/day	1/day
7		Average number of daycare surgery per day	1/day	1/day	1/day	1/day	1/day	1/day
8		Average unit of water consumption /month(KL)	3360/KL	3583/KL	3841/KL	3886/KL	4794/KL	3944/KL
9		Average unit of Electricity consumption /month(units)	17712kwh unit/month	220312 kwh unit/month	265452 kwh unit/month	299432kwh unit/month	291740 kwh unit/month	279324 kwh unit/month
10	PSQ 3 a	Time for initial assessment of indoor patient	5204/350	5370/350	5515/350	4942/350	5115/350	5107/350

11	PSQ 3a	Number of reporting errors/1000 Investigation	=14.86MIN 7/4133*1000	=15.34 MIN 8/5253*1000	=15.57 MIN 8/4137*1000	14.42 min 8/4446*1000	14.61min 8/4966*1000	14.59 min 8/5054*1000
		Radiology	1.69/1000investigation	=1.52/1000investigation	1.93/1000investigation	1.79/1000investigation	1.61/1000investigation	1.58/1000investigation
12	PSQ 3a	Percentage of adherence to safety precaution by staff working in diagnostics Radiology	07/10=70%	08/10=80%	09/10=90%	07/10=70%	07/10=70%	08/10=80%
		Number of reporting errors/1000 investigation	2/16178*1000	0/16074*1000	0/16459*1000	0/16511*1000	0/18452*1000	0/20158*1000
		Pathology	=0.01/1000investigation	=0.00/1000investigation	=0.00/1000investigation	0.00/1000investigation	0.00/1000investigation	0.049/1000investigation
13	PSQ 3a	Percentage of adherence to safety precaution by staff working in Pathology	26/26=100%	28/28=100%	28/28=100%	35/35=100%	35/35=100%	35/35=100%
14	PSQ 3a	Incidence of medication error	7/1000	09/1169	8/193	8/231	07/208	07/386
15	PSQ 3a	Percentage of Inpatient developing adverse drug reactions	00/4062days	00/4349 days	00/4786 days	00/4813 day	00/5684day	00/6446 day

16	PSQ 3a	Percentage of unplanned return to OT	00/235	0/290	00/346	00/308	0/329	0/312
17	PSQ 3a	Percentage of surgeries where the organizations procedure to prevent adverse event like the wrong site, wrong patient and wrong surgery have been adhere to.	235/235=100%	290/290=100%	346/346=100%	308/308=100%	329/329=100%	312/312=100%
18	PSQ 3a	Percentage of Transfusion Reaction	0	0	0	0	0	0
19	PSQ 3a	Standardized mortality ratio for ICU	2.5%	2.2%	1.7%	1.6%	1.7%	2.5%
20	PSQ 3a	Return to ICU within 48 hours						
21	PSQ 3a	Return to emergency department within 72 hours with similar presenting complaints	3	3	5	1	3	0

22	PSQ 3a	Incidence of hospital associated pressure ulcers after admission (Bedsore per 1000 patient days)	2	2	2	1	1	0
23	PSQ 3b	CAUTI	2/1147=1.74 cauti/1000 catheter days	1/1243=0.80 cauti/1000 catheter days	1/1065=0.93cauti/1000 catheter days	1/955=1 cauti/1000 catheter days	1/1307=0.76cauti/1000 catheter days	-
24	PSQ 3b	VAP	3/348= 8.62 vap/1000 ventilator days	2/301= 6.6 vap/1000 ventilator days	2/251=7.9 vap/1000 ventilator days	1/225= 4.4 vap/1000 ventilator days	3/336=8.9 vap/1000 ventilator days	-
25	PSQ 3b	CLABSI	1/332=03 clabsi/central line days	1/212= 4.7 clabsi/centra l line days	1/187= 5.3 clabsi/central line days	0/180= 00 clabsi/central line days	1/196= 5.1 clabsi/centra l line days	-
26	PSQ 3b	SSI	1/235=0.42%	01/290=0.34 %	1/346= 0.28%	01/327=0.30%	3/334= 0.87%	-
27	PSQ 3b	Compliance to hand hygiene practice	-	62%= OPP-295, M-71, ACTION-183	73%= OPP-219, M-59, ACTION-160	61%= OPP-201, ACTION-233	72%= OPP-168, ACTION-232	-
28	PSQ 3b	Percentage of cases who received prophylactic antibiotic within specific timeframe	235/235=100%	290/290=100 %	346/346=100%	308/308=100%	339/339=100 %	312/312=100%

29	PSQ 3c	Percentage of Rescheduling of surgeries	04/235=1.70%	05/290=1.72%	04/346=1.15%	12/308=3.89%	02/339=0.58%	09/312=2.88%
30	PSQ 3c	Turn around time for the issue of blood and blood components	17760 min/444	17840 min/446	19400min/485	18760/469=	19280/482	18440/461
31	PSQ 3c	Nurse patient Ratio for ICUs and Wards	-40 min 208/135	-40 min 208/140	-40min 208/160	-40 min	-40 min	-40min
32	PSQ 3c	Waiting time for Outpatient Consultation	5355/302=17.7 3min	5955/355=16.78 min	5648/346=16.32min	6417/357=17.97 min		4433/250=17.32min
33	PSQ 3c	Waiting time for diagnostic	48055/4133 = 16.46min	54715/5233 = 10.45min	49760/4137 = 12.02min	52445/4446 = 11.79min	55070/4966 = 11.89	59940/505411 = .85 min
34	PSQ 3c	Time taken for discharge	28039/350 = 80min	26283/350 = 75 min	26391/350 = 75min	30935/350 = 88min	32577/350 = 93 min	34587/350 = 98 min

42	FSQ 3d	Compliance rate to medication prescription Capital	1110/1299=85%	830/1169=71%	86/193x100=45%	215/231=93.70%	108/208=51.92%	346/386x100=89.06%
43		Average length of stay	2.14 day	2.26 day	2.46 day	2.36 day	2.45 day	2.60 day
44		Number of Inpatient day in a given period	4062 days	4349 days	4786 days	4813	5684	6446
45		Number of Discharge and Death in a given period	1895	1921	1944	2040	2316	2677
46		Bed Occupancy Rate	38.68%	40.08%	45.58%	44.32%	52.38%	61.39%
47		Number of Inpatient day in a given period	4062 days	4349 days	4786 days	4813	5684	6446
48		Number of bed day available in that period	10500	10850	10500	10850	10850	10500

BIMR HOSPITALS, GWALIOR

QUALITY INDICATOR:

Quality Indicators October 2023 – Dec 23

S. NO.	Standard	INDICATORS	Oct 23	Nov 23	Dec 23
			Rate/Percentage	Rate/Percentage	Rate/Percentage
1		Average number of admission per day excluding day care	51/day	42/day	48/day
2		Average number of patient visiting OPD per day	275/day	227/day	258/day
3		Average number of patient visiting emergency per day	74/day	63/day	67/day
4		Average number of elective surgery per day	7/day	7/day	8/day
5		Average number of emergency surgery per day	1/day	1/day	1/day
6		Average number of daycare surgery per day	1/day	1/day	1/day
7		Average unit of water consumption /month(KL)	3944/KL	3582/KL	3310/KL
8		Average unit of Electricity consumption /month(units)	279324 kwh unit/month	122532 kwh unit/month	113808 kwh unit/month
9	PSQ 3 a	Time for initial assessment of indoor patient	5107/350 14.59 min	6280/434 14 min	5115/350 15 min
10	PSQ 3a	Number of reporting errors/1000 investigation	8/4800*1000	8/3958*1000	8/4335*1000

BIMR HOSPITALS, GWALIOR

		Radiology	= 1.66/1000 investigation	= 2.02/1000 investigation	= 1.84/1000 investigation
11	PSQ 3a	Percentage of adherence to safety precaution by staff working in diagnostics Radiology	09/10=90%	09/10=90%	09/10=90%
12	PSQ 3a	Number of reporting errors/1000 investigation	02/19676*1000	02/16034*1000	
		Pathology			
	PSQ 3a	Percentage of adherence to safety precaution by staff working in Pathology	35/35=100%	35/35=100%	35/35=100%
13	PSQ 3a	Incidence of medication error	03/384	16/427	10/429
14	PSQ 3a	Percentage of Inpatient developing adverse drug reactions	00/6158day	00	00
15	PSQ 3a	Percentage of unplanned return to OT	0/257	0/223	00
16	PSQ 3a	Percentage of surgeries where the organizations procedure to prevent adverse event like the wrong site, wrong patient and wrong surgery have been adhere to.	257/257=100%	-	-
17	PSQ 3a	Percentage of Transfusion Reaction	0	0	0
18	PSQ 3a	Standardized mortality ratio for ICU	3/43 = 6.9%	32/36=0.88%	31/15=2.06%
19	PSQ 3a	Return to ICU within 48 hours	2	2	1
20	PSQ 3a	Return to emergency department within 72 hours with similar presenting complaints	4	03	1
21	PSQ 3a	Incidence of hospital associated pressure ulcers after admission (Bedsore per 1000 patient days)	1/6158	1	1
22	PSQ 3b	CAUTI	1/1319=0.75/1000 catheter day	1/1059=0.94/1000 catheter day	1/960=1.4/1000 catheter day
23	PSQ 3b	VAP	3/334= 8.9vap/1000 ventilator days	2/340= 5.8vap/1000 ventilator days	2/334= 5.98vap/1000 ventilator days
24	PSQ 3b	CLABSI	1/270=3.7 clabsi/1000	0/126=0clabsi/1000	1/246=4clabsi/1000

BIMR HOSPITALS, GWALIOR

		central line days	central line days	central line days
25	PSQ 3b	SS1	1/251 - 0.39asi/100 cases	1/310 - 0.32asi/100 cases
26	PSQ 3b	Compliance to hand hygiene practice	178/240x100=74%	170/238x100=71%
27	PSQ 3b	Percentage of cases who received prophylactic antibiotic within specific timeframe	251/251=100%	247/247=100%
28	PSQ 3c	Percentage of Rescheduling of surgeries	08/251=3.18%	6/287=2.09%
29	PSQ 3c	Turn around time for the issue of blood and blood components	23924/510 = 46.90 min	13906/404 = 34.42 min
30	PSQ 3c	Nurse patient Ratio for ICUs and Wards	1:1 on Venti, 1:2 non venti	1:1 on Venti, 1:2 non venti
31	PSQ 3c	Waiting time for Outpatient Consultation	5616/450= 12.20 min	2987/390= 7.65 Min
32	PSQ 3c	Waiting time for diagnostic	59940/505411=11.85 min	237985/4335 =55 min
33	PSQ 3c	Time taken for discharge	34587/350 = 98 min	32577/350 93 min
34	PSQ 3c	Percentage of Medical Record having Incomplete/Improper Consent	13/350=3.5%	11/350=3%
35	PSQ 3c	Number of stock out of emergency medications	04	3
36	PSQ 3d	Number of variations observed during Mockdrills	01	01
37	PSQ 3d	Incidence of Fail	1	0

BIMR HOSPITALS, GWALIOR

38	PSQ 3d	Percentage of Near Miss	02/02	0	0	0
39	PSQ 3d	Rate of Needle stick Injuries				
40	PSQ 3d	Appropriate handover during shift change	19269/19300	99%	20560/20600	99%
41	PSQ 3d	Compliance rate to medication prescription Capital	89384x100 = 77%	99%	20768/20800	99%
42		Average length of stay	3.04 day			
43		Number of Inpatient day in a given period	6158			51378 = 88.11%
44		Number of Discharge and Death in a given period	2026			2.47 days = 48.27
45		Bed Occupancy Rate	56.75%		1682	1955
46		Number of Inpatient day in a given period	6158		44.2%	
47		Number of bed day available in that period	10850		4641	44.88%
					10500	4827
						10850

QUALITY INDICATOR:

Quality Indicators Jan 2024 - March 24

S. NO.	Standard	INDICATORS		
		Jan 24 Ratio/Percentage	Feb 24 Ratio/Percentage	March 24 Ratio/Percentage
1	Average number of admission per day excluding day care	44/ day	47/ day	38/ day
2	Average number of patient visiting OPD per day	230/day	302/day	274/d ay
3	Average number of patient visiting emergency per day	64/day	66/day	58/day
4	Average number of elective surgery per day	6/day	8/day	8/day
5	Average number of emergency surgery per day	1/day	1/day	1/day
6	Average number of daycare surgery per day	1/day	1/day	1/day
7	Average unit of water consumption /month(KL)	2991/KL	3080/KL	3467/KL
8	Average unit of Electricity consumption /month(units)	13132 kwh unit/month	87992 kwh unit/month	107692 kwh unit/month
9	Time for initial assessment of indoor patient	8108/550	7856/495	8513/550
		14.74 min	15.87 min	15.43 min
10	Number of reporting errors/1000 investigation	8/4148*1000	8/4480*1000	8/4504*1000

		Radiology	= 1.92/1000 investigation 09:10-90%	= 1.78/1000 investigation 09:10-90%	= 1.77/1000 investigation 09:10-90%
11	PSQ 3a	Percentage of adherence to safety precaution by staff working in diagnostics Radiology	09:10-90%	09:10-90%	09:10-90%
12	PSQ 3a	Number of reporting errors/1000 investigation	0/17229*1000	0/16776*1000	3/17292*1000
		Pathology	= 00/1000 investigation	= 00/1000 investigation	= 0.17/1000 investigation
	PSQ 3a	Percentage of adherence to safety precaution by staff working in Pathology	35/35=100%	35/35=100%	35/35=100%
13	PSQ 3a	Incidence of medication error	16/391	17/351	11/292
14	PSQ 3a	Percentage of Inpatient developing adverse drug reactions	00	00	00
15	PSQ 3a	Percentage of unplanned return to OT	0	0	00
16	PSQ 3a	Percentage of surgeries where the organizations procedure to prevent adverse event like the wrong site, wrong patient and wrong surgery have been adhere to.	100%	100%	100%
17	PSQ 3a	Percentage of Transfusion Reaction	0	0	0
18	PSQ 3a	Standardized mortality ratio for ICU	32/36 = 0.88%	33/33= 1%	22/25=0.88%
19	PSQ 3a	Return to ICU within 48 hours	4	1	3
20	PSQ 3a	Return to emergency department within 72 hours with similar presenting complaints	1	02	1
21	PSQ 3a	Incidence of hospital associated pressure ulcers after admission (Bedsore per 1000 patient days)	1	1	1
22	PSQ 3b	CAUTI	1/953=1.49/1000 catheter day	1/1082=0.92/1000 catheter day	1/979= 1.2/1000 catheter day
23	PSQ 3b	VAP	3/378= 7.93 vap/1000 ventilator days	2/464= 4.3 vap/1000 ventilator days	2/269 = 7.4 vap/1000 ventilator days
24	PSQ 3b	CLABSI	1/226 = 4.42	0/224 = 00 clabsi/1000	1/251 = 3.9 clabsi/1000

		elabsl/1000 central line days	central line days	central line days
25	PSQ 3b	SSl 1/228 -0.43 ssi/100 cases	1/251 -0.39 ssi/100 cases	1/274 = 0.36 ssi/100 cases
26	PSQ 3b	Compliance to hand hygiene practice 170/238 x 00 = 71%	171/233 x 100 = 73%	1708/240x100 = 74%
27	PSQ 3b	Percentage of cases who received prophylactic antibiotic within specific timeframe 210/210-100%	226/226-100%	210/210-100%
28	PSQ 3c	Percentage of Rescheduling of surgeries 2/210- 0.95%	5/226-2.21%	
29	PSQ 3c	Turn around time for the issue of blood and blood components 23924/510 = 46.90 min	14356/459 = 31.27 min	13906/404 = 34.42 min
30	PSQ 3c	Nurse patient Ratio for ICUs and Wards 1:1 on Venti, 1:2 non venti	1:1 on Venti, 1:2 non venti	1:1 on Venti, 1:2 non venti
31	PSQ 3c	Waiting time for Outpatient Consultation 2275/390= 5.83 min	1540/360= 4.27 min	1778/360= 4.93 Min
32	PSQ 3c	Waiting time for diagnostic 44415/4148=10.7 min	52430/4480=11.70 min	51790/4504 =11.49 min
33	PSQ 3c	Time taken for discharge 49859/541 = 92 min	39941/495 = 80 min	42273/550 = 76 min
34	PSQ 3c	Percentage of Medical Record having Incomplete/Improper Consent 72/550= 13.09 %	10/495= 2.02%	12/550=2.18%
35	PSQ 3c	Number of stock out of emergency medications 07	04	10
36	PSQ 3d	Number of variations observed during Mockdrills 01	00	02

BIMR HOSPITALS, GWALIOR

Annexure-2

37	PSQ 3d	Incidence of Fall	0	0	0
38	PSQ 3d	Percentage of Near Miss	02/02	0	0
39	PSQ 3d	Rate of Needle stick Injuries	0	1	1
40	PSQ 3d	Appropriate handover during shift change	19269/19300	20571/20600	18942/18972
41	PSQ 3d	Compliance rate to medication prescription Capital	99%	99%	99%
42		Average length of stay	$315/391 \times 100 = 80.56\%$	$240/351 = 31.62\%$	$169/292 = 42.12\%$
43		Number of Inpatient day in a given period	2.25 day	2.55 days	2.95 days
44		Number of Discharge and Death in a given period	4135	4447	4767
45		Bed Occupancy Rate	1835	1746	1614
46		Number of Inpatient day in a given period	38.11%	43.81%	43.95%
47		Number of bed day available in that period	4135	4447	4767
			10850	10150	10850

Annexure - 2

BMR HOSPITALS

(A Unit of Birla Nagar Jana Seva Trust)

ANNUAL BUDGET FOR THE FINANCIAL YEAR 2024-25

S.No	Particulars	As on 31.03.2023				As on 31.03.2024				Budget for the FY 2024-25			
		General	Hospital Infection Control	Quality Assurance	Total	General	Hospital Infection Control	Quality Assurance	Total	General	Hospital Infection Control	Quality Assurance	Total
		AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)
INCOME													
1	By Receipt from Hospital Services	71,60,00,000	-	-	71,60,00,000	71,60,00,000	-	-	71,60,00,000	71,60,00,000	-	-	71,60,00,000
2	By Miscellaneous Receipts/Income	1,51,304	-	-	1,51,304	7,27,654	-	-	7,27,654	1,21,804	-	-	1,21,804
3	By Clinical Fees	3,62,500	-	-	3,62,500	3,62,500	-	-	3,62,500	1,26,250	-	-	1,26,250
4	By Receipt from Cycle Stand	-	-	-	-	1,08,000	-	-	1,08,000	1,28,250	-	-	1,28,250
5	By Training Fee	33,200	-	-	33,200	5,87,899	-	-	5,87,899	5,47,799	-	-	5,47,799
6	By Rights/Less or Sale of Fixed Assets	2,89,515	-	-	2,89,515	3,03,315	-	-	3,03,315	2,43,121	-	-	2,43,121
7	By Interest	-	-	-	-	-	-	-	-	-	-	-	-
8	By Surplus Balance/ Written Back	72,87,94,833	-	-	72,87,94,833	72,87,94,833	-	-	72,87,94,833	88,47,18,200	-	-	88,47,18,200
Total Income													
EXPENDITURE													
1	To Establishment Expenses	38,21,30,320	2,88,43,448	37,66,948	41,25,45,893	38,67,78,845	4,31,56,883	43,68,73,204	42,85,37,880	6,40,17,200	43,75,308	61,21,000	50,00,000
	Salary & wages	9,20,45,000	1,37,01,688	37,69,940	10,35,34,430	8,67,27,635	2,54,08,976	12,41,29,932	3,12,64,000	2,00,33,000	11,00,000	11,00,000	11,00,000
	Medical fee and honorarium to Doctors	20,85,13,789	-	-	20,85,13,789	21,28,08,157	-	22,51,190	17,38,88,333	-	-	-	-
	Leave encashment	38,24,712	-	-	38,24,712	22,83,290	-	22,83,290	27,87,298	-	-	-	-
	Reimbursement of Medical Expenses	53,75,304	-	-	53,75,304	61,96,766	-	61,96,766	61,96,766	-	-	-	-
	Contribution to EPF	56,20,841	-	-	56,20,841	31,58,343	-	31,58,343	8,85,47,288	1,79,34,000	1,79,34,000	1,79,34,000	
	Contribution to ESIC	12,82,285	-	-	12,82,285	7,38,65,309	1,66,66,917	42,64,305	42,64,305	-	-	-	-
	Contract Labour fee	7,10,33,488	1,29,41,854	-	8,39,83,442	43,64,308	-	22,54,508	3,00,00,000	-	-	-	-
	Consultancy Charges	67,84,583	-	-	67,84,583	32,54,506	-	32,54,506	16,00,000	-	-	-	-
	General Expenses	66,87,898	-	-	66,87,898	3,81,89,464	-	3,81,89,464	14,00,000	-	-	-	-
2	To Honorarium to Cleared Healthcare Pr	3,43,01,660	-	-	3,43,01,660	15,71,327	-	15,71,327	3,43,01,660	-	-	-	-
3	To Honorarium to Max Healthcare Institute	22,89,340	-	-	22,89,340	4,98,572	-	4,98,572	2,98,572	-	-	-	-
4	To Honorarium to Rumbay Lab/Inquest lab	8,28,888	-	-	8,28,888	3,91,858	-	3,91,858	1,94,800	-	-	-	-
5	To Honorarium to Hemachal Pradesh and	1,82,447	-	-	1,82,447	94,400	-	94,400	1,50,300	-	-	-	-
6	To Auditors Remuneration	1,08,740	-	-	1,08,740	2,07,82,344	-	2,07,82,344	2,07,82,344	-	-	-	-
7	To Charitable Expenses	2,16,27,808	-	-	2,16,27,808	5,18,743	-	5,18,743	1,73,00,000	-	-	-	-
8	To New born baby (donor eye)	83,87,103	-	-	83,87,103	3,17,48,918	-	3,17,48,918	36,33,668	-	-	-	-
9	To Interest	37,58,612	-	-	37,58,612	66,120	-	66,120	50,00,000	-	-	-	-
10	To Consumable Stock (Blood Bank)	48,79,358	-	-	48,79,358	67,187	-	67,187	35,000	-	-	-	-
11	To Consumable Stock (Hemat Center)	20,84,181	-	-	20,84,181	21,23,156	-	21,23,156	25,00,000	-	-	-	-
12	To Consumable Stock (Cancer Unit)	-	-	-	-	-	-	-	47,300	-	-	-	-

CHS/ear



S.No.	Particulars	22-03-2024		23-03-2024		24-03-2024		25-03-2024		26-03-2024		27-03-2024		28-03-2024		29-03-2024		30-03-2024		
		AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)	AMOUNT (₹)
	Maintenance of Garden	43,300																		
	Repair & Maintenance (General)	55,01,648																		
	Te Depreciation																			
	Total Expenditure	78,58,948	4,33,32,735	2,47,63,487	79,31,43,880	71,68,68,790	5,91,76,763	2,48,38,880	80,66,81,433	75,82,28,000	6,88,03,000	2,65,34,000	60,22,84,800	4,75,18,000	8,09,33,656	2,48,38,880	4,84,87,000	6,88,03,000	2,65,34,000	4,75,18,000
	Deficit	-34,87,185	4,33,32,735	2,47,63,487	6,43,48,047	-34,91,743	5,91,76,763	2,48,38,880	8,09,33,656	-4,84,87,000	6,88,03,000	2,65,34,000	60,22,84,800	4,75,18,000	8,09,33,656	2,48,38,880	4,84,87,000	6,88,03,000	2,65,34,000	4,75,18,000

Budget Approved By:

(Signature)

Mr. Govind Deora
(Executive In-charge BMR Hospitals)



(Signature)
Asst. Cost Accountant
BMR Hospitals