**Final-Term Assignment**

**DPT 8th semester**

**Course Title: Hospital Management and Bio entrepreneurship**

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**Note:**

* **Attempt all questions, all questions carry equal marks.**

**Q1: (A) What is Population difference between Public, Community and Health?**

**POPULATION DIFFERENCE BETWEEN PUBLIC, COMMUNITY AND HEALTH**

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| **PUBLIC HEALTH**   * Public health shares some similarities with population health, it tends to be more focused on creating conditions in which individuals can be healthy. * For example, public health may combat infectious disease, or work to educate teens and adults on tobacco and alcohol use, or work on air quality education for asthmatics. * Public health tends to focus primarily on large scale concerns or threats, such as vaccination and disease prevention, injury and illness avoidance, healthy behaviors, and minimizing outbreaks that jeopardize public health. * Considering the past achievements of public health, there is no doubt that these efforts do generate positive results.  The immunization programs that have resulted in almost complete eradication of diseases like smallpox, polio and diphtheria are a part of public health programs.  The exclusion of asbestos from workplaces and home is also an achievement.  Since ages, practitioners in public health have constantly focused on enhancing people’s quality of life both locally and globally, thus ensuring better health for all. | **COMMUNITY HEALTH**   * Community Health shares similarities with both population health and public health but tends to be more strictly geographically based. * Community health often tackles a broader spectrum of issues than either population health or public health, such as influencing public policy, creating shared community resources, and taking a more holistic approach to healthy living. Community health directly addresses the social determinants of health — the collection of social and economic circumstances that can prevent people from attaining and maintaining positive health outcomes. * Under whole person care, providers strive to treat the full care needs of a patient through one coordinated care delivery system. Patients may receive primary care, chronic care, behavioral health, and employment or housing assistance from a coordinated care network. Food pharmacies, for example, enable medical providers to write prescriptions for food and nutrition needs as a way to improve patient health. | **POPULATION HEALTH**   * The simplest definition of population health is the health outcome of a group of individuals. In a broader sense, population health includes the health outcomes themselves and the efforts to influence those outcomes. * While the terms “population” and “health” are generally understood terms, they can be used in a way that describes a narrower group than may initially be apparent. * “Population” describes a patient population with a similar characteristic. But that characteristic can vary: age, geographic proximity, similar diagnosis, employees of the same company, disabled persons, or groups based on socioeconomic status or ethnicity are all examples of populations. * Thus a “population” can be a broad term encompassing patients who are rather dissimilar clinically to a narrow term encompassing patients who share highly similar clinical profiles. * It may mean a full return to healthy functionality, such as after an accident or temporary illness. * It may mean patients achieving the best possible wellness given the complexity of long-term chronic diseases. * It may mean health comprised of both physical and behavioral health, or it may mean healthy behaviors, such as patients undergoing substance abuse treatment. All of the above can be components addressed by population health. |

**(B) What is difference between Impairment, Handicap and Disability? Explain with Example**

**DIFFERENCE BETWEEN IMAPIRMENT, HANDICAP AND DISABILITY.**

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| **IMAPAIRMENT**   * Any loss or abnormality of psychological, physiological or anatomical structure or function. * As traditionally used, impairment refers to a problem with a structure or organ of the body.   **FOR EXAMPLE**  **CERBERAL PALSY**  Altaf is a 4-yr.-old who has a form of cerebral palsy (CP) called spastic diplegia. Ataf's CP causes his legs to be stiff, tight, and difficult to move. He cannot stand or walk.  The inability to move the legs easily at the joints and inability to bear weight on the feet is an impairment. Without orthotics and surgery to release abnormally contracted muscles, Altaf's level of impairment may increase as imbalanced muscle contraction over a period of time can cause hip dislocation and deformed bone growth. No treatment may be currently available to lessen Altaf's impairment.  **Dyslexia EXAMPLE**  Sundal is an 8-year-old who has extreme difficulty with reading (severe dyslexia). She has good vision and hearing and scores well on tests of intelligence. She went to an excellent preschool and several different special reading programs have been tried since early in kindergarten.  While no brain injury or malformation has been identified, some impairment is presumed to exist in how sundal's brain puts together visual and auditory information. The impairment may be inability to associate sounds with symbols | **HANDICAP**   * A disadvantage for a given individual that limits or prevents the fulfillment of a role that is normal. * Handicap refers to a disadvantage in filling a role in life relative to a peer group.   **FOR EXAMPLE** CERBRAL PALSY Altaf is a 4-yr.-old who has a form of cerebral palsy (CP) called spastic diplegia. altaf's CP causes his legs to be stiff, tight, and difficult to move. He cannot stand or walk.  altaf's cerebral palsy is handicapping to the extent that it prevents him from fulfilling a normal role at home, in preschool, and in the community. His level of handicap has been only very mild in the early years as he has been well-supported to be able to play with other children, interact normally with family members and participate fully in family and community activities. As he gets older, his handicap will increase where certain sports and physical activities are considered "normal" activities for children of the same age. He has little handicap in his preschool classroom, though he needs some assistance to move about the classroom and from one activity to another outside the classroom. Appropriate services and equipment can reduce the extent to which cerebral palsy prevents altaf from fulfilling a normal role in the home, school and community as he grows.  **Dyslexia EXAMPLE**  Sundal is an 8-year-old who has extreme difficulty with reading (severe dyslexia). She has good vision and hearing and scores well on tests of intelligence. She went to an excellent preschool and several different special reading programs have been tried since early in kindergarten.  Sundal already experiences a handicap as compared with other children in her class at school, and she may fail third grade. Her condition will become more handicapping as she gets older if an effective approach is not found to improve her reading or to teach her to compensate for her reading difficulties. Even if the level of disability stays severe (that is, she never learns to read well), this will be less handicapping if she learns to tape lectures and "read" books on audiotapes. Using such approaches, even in elementary school, can prevent her reading disability from interfering with her progress in other academic areas (increasing her handicap). | **DISABILITY**   * Any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being. * Disability is a functional limitation with regard to a particular activity.   **FOR EXAMPLE** CERBREAL PALSY Altaf is a 4-yr.-old who has a form of cerebral palsy (CP) called spastic diplegia. altaf's CP causes his legs to be stiff, tight, and difficult to move. He cannot stand or walk.  altaf's inability to walk is a disability. His level of disability can be improved with physical therapy and special equipment. For example, if he learns to use a walker, with braces, his level of disability will improve considerably.  **Dyslexia EXAMPLE**  Sundal is an 8-year-old who has extreme difficulty with reading (severe dyslexia). She has good vision and hearing and scores well on tests of intelligence. She went to an excellent preschool and several different special reading programs have been tried since early in kindergarten.  In sundal's case, the inability to read is a disability. The disability can probably be improved by trying different teaching methods and using those that seem most effective with sundal. If the impairment can be explained, it may be possible to dramatically improve the disability by using a method of teaching that does not require skills that are impaired (That is, if the difficulty involves learning sounds for letters, a sight-reading approach can improve her level of disability). |

**Q2: (A) How will you make Health Planning for Common Health problem in your community?**

**HEALTH PLANNING FOR COMMON HEALTH PROBLEMS IN YOUR COMMUNITY**

In our community there is a lot of health problem which need to diminish from our society we must need to solved these problems and we make a plan for these disasters which is affect our community health such as:

**Physical Activity and Nutrition**

Research indicates that staying physically active can help prevent or delay certain diseases, including some cancers, heart disease and diabetes, and also relieve depression and improve mood. Inactivity often accompanies advancing age, but it doesn't have to. Check with your local churches or synagogues, senior centers, and shopping malls for exercise and walking programs. Like exercise, you’re eating habits are often not good if you live and eat alone. It's important for successful aging to eat foods rich in nutrients and avoid the empty calories in candy and sweets.

**Overweight and Obesity**

Being overweight or obese increases your chances of dying from hypertension, type 2 diabetes, coronary heart disease, stroke, gallbladder disease, osteoarthritis, sleep apnea, respiratory problems, dyslipidemia and endometrial, breast, prostate, and colon cancers. Keep focus on your diet don’t use oily and fatty food because it increase cholesterol in our body. Change your lifestyle do any physical activity and exercises.

**Tobacco**

Tobacco is the single greatest preventable cause of illness and premature death. Try to quit are more successful when they have the support of their physician. Because it affect our lungs and other organs damage keep yourself and community from these poison things. Promote good health to your society also with pleasant environment.

**Substance Abuse**

Substance abuse usually means drugs and alcohol. These are two areas we don't often associate with seniors, but seniors, like young people, may self-medicate using legal and illegal drugs and alcohol, which can lead to serious health consequences. In addition, seniors may deliberately or unknowingly mix medications and use alcohol. Because of our stereotypes about senior citizens, many medical people fail to ask seniors about possible substance abuse. Avoid these type of bad behaviors with your society provide good and healthy system in your community try to quite these things from your society.

**Mental Health**

Dementia is not part of aging. Dementia can be caused by disease, reactions to medications, vision and hearing problems, infections, nutritional imbalances, diabetes, and renal failure. There are many forms of dementia (including Alzheimer's disease) and some can be temporary. With accurate diagnosis comes management and help. The most common late-in-life mental health condition is depression. If left untreated, depression in the elderly can lead to suicide. Here's a surprising fact: The rate of suicide is higher for elderly white men than for any other age group, including adolescents. Keep your environment depression free meet with your family and your community with smiley face because it give him happy part in their life and they enjoy stress free life.

**Environmental Quality**

Even though pollution affects all of us, government studies have indicated that low-income, racial and ethnic minorities are more likely to live in areas where they face environmental risks. Compared to the general population, a higher proportion of elderly are living just over the poverty threshold.

**Immunization**

Influenza and pneumonia and are among the top 10 causes of death for older adults. Emphasis on Influenza vaccination for seniors has helped. Pneumonia remains one of the most serious infections, especially among women and the very old.

**Access to Health Care**

Seniors frequently don't monitor their health as seriously as they should. While a shortage of geriatricians has been noted nationwide, URMC has one of the largest groups of geriatricians and geriatric specialists of any medical community in the country. Offering a menu of services at several hospital settings, in senior housing, and in your community.

**Q3: What are characteristics of an Accountable organization? Write down at least ten.**

**CHARCTERRISTICS OF AN ACCOUNTABLE ORGANIZATION**

1. Improve the quality of care for the patient while at the same time, reduce the cost of care,” wrote the authors of the study. “Initial factors that should facilitate these changes are having physicians certified as patient-centered medical homes.
2. Providing financial support for increased care coordination.”
3. The primary care physician is responsible for coordinating treatment and developing relationships with patients.
4. To minimize waste and avoid unnecessary hospitalizations, the combination of physician and nurse coordinator working in concert enabled the identification of areas of wasteful spending, creation of work plans, and provision of timely appointments to see the primary care physician team,” explained the report.
5. Physicians and nurses were also informed of the 33 quality measures that were required by CMS, which helped providers understand that compliance with these measures affected the calculation of [shared savings](https://revcycleintelligence.com/news/mixed-results-for-mssp-accountable-care-organization-savings)
6. Accountable organization should be unitary. A subordinate should be accountable to only one boss. In case he is made accountable to more than one boss there will be a confusion and friction. Different bosses may give their own orders and expect different performances. So it is essential that a subordinate is accountable to only one boss.
7. The responsibility and accountable organization should be precisely fixed so as to see whether the assigned task is completed or not. There should be specific standards for judging the accountability.
8. Authority and responsibility always goes downwards and accountability goes upwards. A subordinate remains accountable to the boss above him.
9. Superiors are accountable for the acts of the subordinates. In other words by delegating his authority, the superior cannot reduce his accountability.
10. Accountable organization cannot be delegated as in the case of responsibility. Even if the superior delegates his responsibility to his subordinates, he stands still accountable to his superiors.

**Q4: What is Medical Audit? Why we need to do Medical Audit? Write down at least ten reason**

**MEDICAL AUDIT**

**DEFINITION**

Medical audit is a planned programme which objectively monitor and evaluates the clinical performance of all practitioners, which identifies opportunities for improvement, and provides mechanism through which action is taken to make and sustain those improvements.

**NEED FOR MEDICAL AUDIT**

1. **Professional motives** health care provider can identify their lacunae and deficiencies and make necessary
2. **Social motives** to ensure safety of public and protect them from care that is inappropriate, suboptimal and harmful.
3. **Pragmative motives** to reduce patient suffering and avoid the possibility of denial to the patients of available services or injury by excessive or inappropriate service.
4. **Objectivity** An external auditor objectively examines the data with an eye toward discovering weaknesses that potentially could lead to allegations of wrong-doing, or to a loss of appropriate revenue.
5. **Focus.** Just as the auditor's time is focused, so will be his or her thought process. An outside auditor will apply a broad knowledge base to the specifics of your practice. Although internal staff may have the best intentions when conducting an audit, ordinary day-to-day activities of running the practice may cause the audit to be delayed, interrupted or even abandoned.
6. **Staff can perform regular tasks.** Using an outside auditor allows staff to continue in their normal business activities, thus protecting the practice from financial loss resulting from an interruption of normal business activities.
7. **Time** They are not likely to be distracted by the everyday business of running your practice. Using an outside individual will allow your staff to attend to their regular duties, thereby reducing potential interruption in the revenue cycle or reduction in the quality of customer service.
8. **Staff can perform regular tasks.** Using an outside auditor allows staff to continue in their normal business activities, thus protecting the practice from financial loss resulting from an interruption of normal business activities.
9. **Results provided.** Your external auditor should present findings in a way that is easy to understand, relevant and meaningful to practice administration. An external auditor will be focused on bringing findings to your attention and may be better positioned to command the appropriate level of attention than an employed staff person.
10. **Recommendations.** An external auditor will be able to make recommendations for improvement and change that have been tested previously in similar practice environments. He/she can steer you away from ideas that may seem to be a solution, but that have been tried elsewhere and proved unsuccessful. Their prior experience may save you hours of work.
11. **Assistance with implementation of new ideas, processes, policies.**Most external auditing organizations will have staff available to assist you in the implementation of new processes and policies developed to strengthen any areas of weakness exposed in the audit. Additionally, they will have the resources available to test the implementation by way of a follow up audit.

**Q5: What is Hospital Information system (HIS)? Write down Aims and Benefits of HIS**

**HOSPITAL INFORMATION SYSTEM**

A large computerized database management system that processes patient data in order to support patient care.

**EXPLANATION**

The system is used by health care clinicians to access patient’s data and to plan, implement, and evaluate care. Importance of HIS concerning administrative and financial aspects, the surgeon/clinician is primarily interested in the impact on improving the quality of care. Most of us are convinced that health information technology will improve quality and efficiency of health care institutions, from small practices to large centres. Most studies on the topic concentrated on the process quality matrix, analysing physician level variability and guideline compliance rather than overall quality improvement of patient outcomes.  Patient's laboratory test information also includes visual results such as [X-ray](https://en.wikipedia.org/wiki/X-ray), which may be reachable by professionals. HIS provide internal and external communication among health care providers. One study suggested that electronic health care records have the potential to decrease medical errors by providing improved access to necessary information, better communication, and integration of care between different providers and visits, and more efficient documentation and monitoring.

**BENEFITS OF HOSPITAL INFORMATION SYSTEM**

Benefits of hospital information systems include:

* Efficient and accurate administration of finance, diet of patient, engineering, and distribution of medical aid. It helps to view a broad picture of hospital growth
* Improved monitoring of drug usage, and study of effectiveness. This leads to the reduction of adverse drug interactions while promoting more appropriate pharmaceutical utilization.
* Enhances information integrity, reduces transcription errors, and reduces duplication of information entries.
* Hospital software is easy to use and eliminates error caused by handwriting. New technology computer systems give perfect performance to pull up information from server or cloud servers.

**AIM OF HOSPITAL INFORMATION SYSTEM**

The aim of a hospital is

* To achieve the best possible support of patient care and administration by electronic data processing.
* To promote the development of high quality hospital services and community health care.
* To promote a forum for the exchange of ideas and information among   health and hospital planners, academicians, administrators, various statutory bodies and the general public for the improvement of Hospital and Health Care delivery Systems.
* To recognize and felicitate the individuals who have made exceptional and significant contributions in hospital.
* More efficient use of the restricted resources available for patient care
* Qualitative improvement of the service to the patient
* Support of research
* Support teaching
* It can be composed of one or a few software components with specialty specific extensions as well as of a large variety of sub system in medical specialties example laboratory information system and radiology information system.