

# [The problems in the emergency department of services](https://assignbuster.com/the-problems-in-the-emergency-department-of-services/)

The report contains the actual hypothetical findings from which every prospective general public can benefit because the hospital is basically for public. The drastic differences between the government and private hospitals have revolutionized the private hospitals by creating more competition day by day. This report will discuss all the problems and issues of the Emergency Department of Services Hospital. This report has been accomplished by analyzing the recruitment statistics for Emergency Department as well as their whole process of their methodology. There were several problems in the department which we observed. This report will discuss about the patient problems, doctor problems, facilities, corruption and the hygiene environment and it will also discuss their solutions.

The word “ hospital” comes from the Latin “ hopes” which refers to either a visitor or the host who receives the visitor. From “ hopes” came the Latin “ hospitalia”, an apartment for strangers or guests, and the medieval Latin “ hospitale”.

## Hospital

“ Hospital” only took on its modern meaning as “ an institution where sick or injured are given medical or surgical care”

## Emergency

It is a place where person got first aid and doctor’s suggestion immediately

## Background

Lahore is the second largest city of Pakistan. It is the Capital of Province, Punjab. Lahore has many hospitals and services hospital is one of them. It is located in Jail road, near Punjab cardiology. Before giving a brief introduction about services hospital I want to tell you about the hospital. In 1958 a separate outpatient department of Mayo hospital, was setup for the government employees. In 1960 it was converted into 55 beds and named as Wahdat hospital. It had medical and surgical facilities together with laboratory and X-rays unit. Later on it was named as “ Services Hospital”. In 1977 it was became the teaching hospital of the Llama Iqbal medical college and now it has its own medical college known as SIMS. It was declared “ autonomous institute” in 1999.

In order to make to make the emergency department fully functional, a comprehensive ATLS training progress undergraduate MBBS and nursing student is being organized. In addition staff working in the emergency department is being trained on regular basis to handle emergency patients and disaster victims.

The description of problems is the “ patients problems “ that what kind of problems are being faced by patients.” Hygiene environment “ that what is the current condition of hygiene in the department. “ Facilities” that kind of facilities are being provided to doctors, staff and patients and the “ corruption”.

This research proposes to study the major problems of Emergency Hospital and to find out the causes of these problems, to find out what improvements have taken place in the past for the betterment of this department from 2005-2009

As Services Hospital is one of the biggest and oldest Hospital of Lahore; and is currently facing many problems that are why a detailed research must be conducted, so that we should be able to make people and the Government aware from the situation of the hospital.

The scope of this research is to cover all the major problems that the Emergency Department is currently facing like environment pollution, hygiene/ cleanliness, patients problems, doctors and staff problem, security, parking, and then to find out what steps can be taken to solve these problems. We divided the problems among group members. Each member contains two domain. Sundus Farooq has covered the “ Problems of

patients” and Hygiene environment. Ahsan Akram covered the “ Facilities “ and Corruption.

## Literature Review

One thing is for sure the people who are living near the hospital face many problems. One of the big is the dispose of syringes and other material near the residential areas which creates many problems and causes severe kind of diseases. We were searching the newspapers to get some information about the hospitals. We got various regarding the issues about the hospitals, but we are just writing the two news. One thing is for sure the people who are living near the hospital face many problems. One of the big issue is the disposed of syringes and other material near the residential areas which creates many problems and can cause multiple diseases. (Ali Raza, 2010) also discuss the problem of waste disposed. He said that the Environment Protection Department (EPD) has initiated legal action against hospitals for disposing hospital waste in residential skins on Jail Road. The sources EPD said that first we would issue Environmental Protection Orders (EPO) after which the case will send to the Environmental Tribunal. The EPD said that they had too many complaints that surgimed was disposing of its hazardous medical waste in the local garbage container.

Experts say the reuse of hospital waste posses serious threat to the health of citizens besides the workers and other people affiliated with the recycling purposes. If the infected content is not disposed properly, it will causes many fatal diseases like Hepatitis and AIDS, Beside this it will also causes skin , respiratory and eye diseases. Sources discover that private parties bring tons of infectious hospital waste from across

the province in the city for recycling purposes. They bring these waste packets in sacks through trucks. Mafia is also involved in all this. A senior official of CDGL Environment department said that hazardous and waste material, earning more than Rs 15 million per day out of which the value of Lahore waste was more than Rs 5 million per day. We analyze that their waste material is causing many problems.)

There should be taken some steps by the managements of hospitals to control all this.

In another article the author discusses the emergency department. The facilities which are mostly provide in every emergency department of hospital. The author said the emergency departments require different equipments and approaches than most other hospital division. Patients frequently with unstable conditions and so, must be treated quickly. They may be unconscious, and information such as their medical history, allergies, and blood type may be unavailable. Emergency Department staff are trained to work quickly and effectively even with minimal information. . They may be unconscious, and information such as their medical history, allergies, and blood type may be unavailable. Emergency Department staff are trained to work quickly and effectively even with minimal information. . They may be unconscious, and information such as their medical history, allergies, and blood type may be unavailable. Emergency Department staff are trained to work quickly and effectively even with minimal information)

## Research Questions

## Primary Research Question

What are the present conditions prevailed at the emergency department of services hospital Lahore?

## Subsidiary Research Questions

Q1:- What is the emergency department?

Q2:- How many doctors are available at a time in emergency department?

Q3:- what is the qualification of the employees of the department i. e are they fresh graduates or senior doctors?

Q4:- Where and how are the syringes and other waste material disposed?

Q5:- What is the method of sterilizing the surgical instrument?

Q6:- Why do people complain about non-availability of doctors?

Q7:- What facilities are being provided to the doctors?

Q8:- At the time of an emergency such as a blast, how do doctors handle the large number of casualties?

Q9:- What is the quality of the sterilization?

Q10:- What is the condition of machinery and equipment in the department?

Q11:- Does the dept, provide any research and teaching facility?

Q12:- Why do patients mostly prefer this hospital even though it is far from their houses?

## Method

## Sample

We have taken the sample of 50 by distributing the questionnaire.

## Data Collection

The primly source of data will be collected through questionnaire and interviews with different people having different opinions.

Most of the secondary data and information is obtained from electronic sources, annual reports, news papers, articles, case studies, books, and journals.

## Research Tools

The research tools are field study, distributing questionnaire; and then finally taking interview from the Dr. Mushtaq Khataq (DMS of Services Hospital) and the interview from the of affectee.

## Field study

This will be general source of data collection in which the data will be represented on the basis of our personal experience in the same field.

## Time frame

For the research we did field study on January 19, 2010; we started our work on January 22, 2010. We have taken interview on March 25, 2010 from the D. M. S of Services Hospital and from the affectee and we have also distributed the questionnaire on March 10, 2010.

Date of Interviews

March 25, 2010

Date of dist. Of Questionnaire

March 10, 2010

Rough Draft

March 20, 2010

Final Draft

April 2, 2010

Date of Submission

April 12, 2010

## Analysis of Data and Discussion

We visited the services hospital 3 to 4 times to evaluate the condition of the emergency department. In our first survey we had observed a lot of issue. The main problem which we faced was parking. There was no empty place for parking in the hospital. People parked their car according to their on will. There was no well organized order for parking and even had no security arrangements. One can easily steal your vehicles. Other issues were: we heard that there should not be noise and crowd in the parameters of hospital, but there was too much noise and it was overcrowded. There was no place to stand for one second in emergency department of the Services Hospital. Numerous people were standing there which had nothing to do their. They were sitting

their ideally and even not giving the seat to any patients.

## Patient’s problems

The emergency department of the Services Hospital is double story but still it was considered an insufficient place for patients. Numerous patients were sitting in the floor. There were insufficient beds in the emergency department and also there was no place for the relatives of patients or visitors. The visitors or relatives were also sitting with the patient on the bed. Nobody was asking them that not to sit here. With every patient there was 2 or 3 person who had made the emergency department overcrowded and noisy. Doctors and nurses were not asking anything to them. Even many visitors were standing in the way of a patient which was making many difficulties for patients. We saw from our own eyes that a patient was in the bed, he was on drip in his arm. He was screaming with pain but doctors were not examining him even not his relatives. The reason of his screaming was that his mother was also sitting on bed and she was continuously shaking the bed due to which the drip stand was moving and the patient gets pain, nobody feels that.

There was numerous patients which were sitting in line and waiting for their turn mean while their came one gentleman with his two security guards. The doctors left the list of patient and moved towards him to examine him first, though he did not have any big problem. He just had the minor headache. There was a medical store in the Emergency Department but there were insufficient medicines in the medical store. The person who was sitting in the medical store was giving the patients alternative medicines

instead of giving them the prescribed medicines and when the patients asked him he argued with them vaguely. We went to the person who was sitting in the medical store. We asked him that why you are giving alternative medicines instead of the prescribed one. He said that those medicines also had the same effect. We asked him that we know this and it is fine if you do not have the 2 or 3 prescribed medicines but you are giving every patient alternative medicine. We asked him why the prescribed medicines are not available and who is fallible for this? He said very ambiguously no one is responsible for this. The medical store of Emergency Department needs variety of medicines. The medicines which were available were not enough.

## Hygiene Environment

After the medical store we observed the hygiene environment in the Emergency Department of the Services Hospital. The condition of the cleanliness in the Department was satisfactory. There were 2 or 3 sweepers present in the department who cleaned the floor after an hour. Patients were throwing trash in the dustbins, but still there was a stingy smell in the Emergency Department and also wrappers were lying in the floor. The sweepers were using a kind of acid (final) to clean the floor and the microscopic germs but it had a very strong smell, which caused headache. The condition of some patients was becoming critical due to the smell of that acid. The doctors and other was throwing the used syringes and other disposed material into the dustbin which was collected by the sweeper after some time and there was a room where the sweepers throw the disposed material and outside of that room. There was written “ Dispose Room”. The dispose room was locked. The management told us that this disposed material is very useful after process of purification it uses for several purposes. In the news paper it was written that

the government had sent notice to many hospital in which services hospital was also cleared that their method of disposed material was not right. It is dangerous for the residential areas and for the other people.

## Patient’s problems

On our second survey, we went to the patients and general public to know their problems and issues. Numerous people had many problems with doctors and nurses and some were completely satisfied with the current situation of Emergency Department and also from the doctors and staff. People said that commonly doctors did not come on time and also did not examine them with complete satisfaction. Patients also told that sometime doctors did not tell them the actual disease. Patients said that doctors are also running their personal clinic due to which they mostly came late or suggest them to come to their personal clinic. People said that the doctors are earnings good revenue from their personal clinics. They also said that doctors did not take interest in them that means sometime do not become satisfied with the doctors. After the discussion with patients about the doctors we started to discuss with people about the staff. 30% of people said that the staff does not take the good care of the patient. They do not listen anybody an also discern between the people. They pleased the well known and rich people and often ignore the middle class or poor people. Numerous people said that they did not have any sense that how to talk with the patients and the visitors. Patients said that the staff do what they want to do. It totally depend on them that what they want to do. They do not listen to anybody and sometime they quarreled with other staff during their duty times

which create disturbance for the other patients. Some people point out that the character of the staff is not good. One patient told us that he caught one nurse who had stolen his mobile. Some patients had no issue with the staff. They were satisfied with the behavior of the staff. They said that the staff is caring, but 80% protest against the staff and doctors behavior.

When we came out from the Emergency Department we have seen that there is just one ambulance standing outside the emergency. When we asked about it to the management they replied that the ambulances are standing in front of different departments. Then we asked from the management how many ambulances are available at a time in the hospital. They told us that there are 8 ambulances present every time, and they also told us the process that how ambulances reach to the given addressed. They select person who can drive fast but not rough and who also know the all way of the city. We asked if by chance no ambulance is present or if you need more ambulances then what you do? They told us if we need more ambulances then we asked for it to others departments and if no ambulance is present at a time then we have the record and numbers of all the drivers. We just call them and said them to reach in the addressed immediately.

After our second and third surveys we went in the parameters to fill the questionnaires. The sample size of the questionnaire was 40. The questionnaire was distributed among the general public and patients in the Emergency Department in of the Services Hospital. On that survey we again find to talk with the different peoples. We all

divided the questionnaire among over selves and float it among people. We first filled questionnaire from the student of that Hospital (SIMS). They were girl students. She prefers the private hospital because she said that there were more facilities and good hygiene environment. She said that in the condition of emergency she will prefer to come to Services Hospital because she is student of this Hospital and she know the staff and get good care and discount here. Then we filled our questionnaire from the nurse she said that salary of staff should be increased so that the staff can work with more diligence. She also said that there should be more arrangements for cleanliness and management… Numerous people told us that we came here because it is cheaper than other hospital. We discuss all these problems with the doctors. Doctors said us that though we are running the personal clinic but we checked the patients of here with our complete satisfaction. we also filled our questionnaire from the doctor and the doctor also prefer the private hospital and said that the private hospitals had better facilities and take good care of the patients, he also accept that the government hospitals are not in better conditions. 95% people told us that there is too much corruption. You need high reference or any other kind of source to meet the doctors. We also use the resource and reference to meet the Principle of the hospital.

We face too many problems to take the interview from the authority. Nobody was ready to give us interview. They thought that we were also the member of press then after a lot of struggle they just give us the permission to take the interview of DMS and make the movie of emergency department in a condition. Ahsan Akram conducted the interview. The expression of DMS was very offensive. He just wanted to get rid of this.

Ahsan asked many questions from him. He answered in vey good attitude. He told us that us that the number of doctors presents depend on the quantity of patients. Sometime patients are large in amount and sometime there are fewer amounts of patients. He also told us that in the time of emergency we made the Emergency Department large, we discharge patients who had recover maximum, shifts the other patients in to the ward and we bring the more beds and call the more doctors. He also told us that there is a separate department where the whole surgical instruments were sent for sterilization.

## Facilities

A satisfactory number of facilities are providing to the patients, doctors, nurses and the relatives of the patients. Some of them are listed below

There is an outside counter present from where a patient has to receive his/her file. This file maintains record of the patient. Every patient has to buy his/her file in Rupees 10 only. There is a guard and a ward boy present at the gate of the each emergency. There is nursing counter from where patients can get information. Nurse is always present on the table. If a patient or relative of the patient have any query then he/she might talk to the nurse from the nursing counter. There is a special monitoring room present where every one cannot enter with shoes and patient’s relatives are also not allowed in special monitoring room. Monitoring room is the room where patients can be checked with full care and attention. Monitoring room is like a small operation Theater.

There are 20 beds available for men and 11 beds are available only for women. Total capacity of beds 20+11= 31. There are three counters of nurses from where patients

or the relative of patient can get information. Emergency department is fully air condition. Patients do not feel uncomfortable during treatment. There are two separate waiting rooms for the relatives of the patients in the surgical emergency of the hospital. 9

persons can sit in one waiting room and 24 people can sit in the second waiting room. There is an X-Ray room present in the surgical Emergency. So patient can X-Ray themselves immediately. There is an Ultrasound room present in the surgical emergency only for surgical emergency patients. This facility is very good facility for patients because they do not have to travel from one place to another. They immediately get their medicines, X-ray, ultrasound in the emergency. Pharmacy is also present in the surgical emergency.

There is a changing room. Small Operation Theater is also present in the emergency. 3 ward boys, 5 nurses, 6 post graduate students and 4 house officers are present in the surgical emergency all the time. There is blood bank present in the surgical emergency. Patient can take blood from the blood bank. If a patient is bleeding due to accident on the road and he needs a bottle of blood then he can take blood from the blood bank. There is a nursing head office. Head is always present in the room. There is a gents and ladies toilet present in the surgical emergency of the services hospital but they are not separate from each other. There is a prayer area in which 4 people can Offer their Pray at one time.

There is a children emergency ward present in the medical emergency. 24 beds are present in the children emergency room. There are 27 beds present for men and 28 beds are present in the women area. There is a guard and a ward boy present at the gate of

the each emergency. There are two separate wash rooms are available in the medical emergency of the services hospital. There is a Parmonology ward present in the medical emergency of the services hospital. There are security cameras present everywhere in the medical emergency of the hospital and TV`s are present in the DMS of the Medical Emergency DMS is always watching that what is happening everywhere

## Problems

There is infinite number of problems present in the emergency. Some of them are given below.

There are 20 beds present for men and 11 beds for women only. The number of beds is too small. They should increase the number of beds in the surgical emergency. Patents have to wait for the empty bed. Mostly 2 patents are present on the single bed. In a critical situation (such as bomb blast in the city) 100-150 injured person came to the emergency but the staff and doctors cannot handle that injured people. Administration of the hospital should take steps to increase the number of doctors and nurses. There are men and women toilet present in the surgical emergency but they are not separated from each other. They should be separated from each other because women need a separate washroom. They feel shy to enter in men`s washroom. Head should take action and make 2 toilets for men and two toilets for women separately. In the medical emergency there are two separated toilets but. There is a leakage of water from the upper roof in the washroom. There is one wash room which has no lock. Washrooms are in very bad situation. Washrooms are in very poor condition. No exhaust fans are present to clean the

atmosphere. Administration should take notice and give new sinks to the women`s toilet and put at least 2 to 3 exhaust fans in the toilet so the cleanliness of the washroom. Cat is wondering in the medical emergency. No one was there to take off that cat. Animals are free to move in the emergency. Head should heir a person who can control all this problems.

## Corruption

Corruption is present everywhere in our country. It is very difficult to handle corruption. Everyone wants black money. There is too much attraction in black money. Sometimes very responsible and honest person wants black money. It is in human nature. Man wants more, more and more money. Corrupted people do not care that it is HALAAL or HARAAM money. It is very difficult to control corruption but our leaders and heads can control this bad habit. (((Corruption is primarily of two types, Need Based Corruption (NBC) and the Greed Based Corruption (GBC). Both are found in the public as well as private sectors. NBC takes its birth in the lower echelons of the bureaucracy or in poor people who are not paid enough to fulfill their needs and on the top of it also not provided with the subsidized amenities and facilities by the government. Imagine the plight of one such functionary whose child is seriously ill and he has no money even to buy him the medicine! He would do anything to save the life of his child, let alone corruption. I am not trying to justify the NBC, but it needs to be seriously looked into. To control NBC government should increase the salary of poor people and try to give subsidies to them. According to Corruption rate of Pakistan is 2. 1.

When our researcher team visited the emergency department, patients said us that there is too much corruption present in the emergency of Services hospital. Patients have to give money to the staff to get bed in the Emergency. They have to give money to staff to get the bottles of blood. They have to give money to the nurses to get quick response from them. They have to give money to get medicines. There is too much corruption present in the hospital. Administration should increase the salary of nurses and ward boys. They should give facilities so that ward boy s and nurses leave to earn black money from patients. They want black money because they do not get their salary on time. The amount (price) is increasing of goods day by day. Workers cannot afford to buy anything in a limited amount of salary. Controller of the hospital should increase the salary to control the corruption. When they ask for money from the patient then patient cannot do anything expects giving them money because on that time patient is in very bad condition and needs help. In my opinion corruption is of two types. First one is NBC and the second one is covetousness. We have to control all of them by taking strong steps. Services Hospital should hair at least 3 to 4 people who do nothing but they must see what is happening very where. They should control the emergency department. They can control the corruption. If the administrations of the services hospital do nothing to control the corruption then it will increase daily. No doubt corruption is increasing daily but if we do not control now then it will be very dangerous for us. It is our duty to control corruption in the hospital level. If we do not control the corruption in the hospital yet, then what will we say to our new generation? It is our country our hospital we have to

control all this. Controller of the emergency should control all this and they can control by haring the team of responsible persons.

## Security

Pakistanis are known as terrorist now-a-days due to some groups or parties who played negative role in a society and made bomb blasts in every look and corner of the city. Lahore is in very critical situation. In 2007, 1, 503 terrorist attacks and clashes, including all the suicide attacks, target killings and assassinations, resulted in 3, 448 casualties and 5, 353 injuries, according to the PIPS security report. These casualties figure 128 percent and 491. 7 percent higher as compared with 2006 and 2005, respectively. The report states that Pakistan faced 60 suicide attacks during 2007, which killed at least 770, besides injuring another 1, 574 people. In 2008, the country saw 2, 148 terrorist attacks, which caused 2, 267 fatalities and 4, 558 injuries. Human Right Commission of Pakistan (HRCP) in its annual report indicated that there were at least 67 suicide attacks across Pakistan killing 973 people and injuring 2, 318. 2009, the worst of any year, 2, 586 terrorist, insurgent and sectarian-related incidents were reported that killed 3, 021 people and injured 7, 334, according to the “ Pakistan Security Report 2009” published by PIPS. These casualties figure 48 percent higher as compared to 2008. On the other hand, the rate of suicide attacks surged by one third to 87 bombings that killed 1, 300 people and injured 3, 600. There is a small list of bomb blasts occurred in Lahore Pakistan from past 3 years shown below. This list is too small and short.

2010

## No.

## Date

## Place

## Killed

## Injured

1

March 08

Model Town / Lahore

15

80

2

March 12

RA Bazaar / Lahore

57

90

## TOTAL

## 72

## 170

\*Data till March 15, 2010

## 2009

## Sl. No.

## Date

## Place

## Killed

## Injured

1

May 27

CCPO-ISI offices / Lahore

27

326

2

November 2

Lahore

1

25

3

December 7

Moon Market / Lahore

45

100

## TOTAL

## 73

## 451

## 2008

## Sl. No.

## Date

## Place

## Killed

## Injured

1

January 10

Lahore High Court

24

80

2

March 4

Pakistan Navy War College / Lahore

8

24

3

March 11

FIA regional headquarters / Lahore

30

200

4

August 13

Dubai Chowk / Lahore

9

35

## TOTAL

## 71

## 339

There is only security guard present at the gate of emergency of the services hospital Lahore Pakistan. They have no security cameras on the gate. They have no security gates and security alarms. They have no instruments to check the person. There is no security guard present on the main gate of the services hospital Lahore Pakistan. Anyone can enter and can freely move in the hospital. Any terrorist can enter in the hospital and do anything what he wants to do. Controller of the hospital should take steps to avoid this. They have to hair security guards who will check every person entering in the hospital. They should fix security cameras everywhere. No doubt it is a government hospital. There is a lack of money but if the authority does not do something for security then it will prove very dangerous for us and for all citizens. Our leaders use 40 % of security. They cannot move in the city without having security with them. No doubt their lives are very important but they should provide some security to the hospital.

When our researcher team entered in the services hospital, we observed many things. Few of them are listed below.

There was no parking at that place. Streets were poor in condition. Patients were sitting on the road of the hospital. Some of them are sitting on the stairs of the hospital. Cats are wondering on the roads of the hospital. There were countless people present in the emergency of the hospital. Space of e