



**UNIVERSITI TEKNOLOGI MARA
FACULTY OF INFORMATION MANAGEMENT**

INDUSTRIAL TRAINING REPORT:

HOSPITAL TANAH MERAH

**JALAN HOSPITAL, 17500 TANAH MERAH,
KELANTAN**

SPECIAL PROJECT: HOSPITAL SYSTEM MANAGEMENT

BY

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**IM245 - BACHELOR OF SCIENCE (HONS.) INFORMATION
SYSTEM MANAGEMENT**

**FACULTY OF INFORMATION MANAGEMENT
UNIVERSITI TEKNOLOGI MARA KELANTAN**

01 FEBRUARY 2017 – 30 JUNE 2017

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**REPORT SUBMITTED IN FULFILLMENT OF THE
REQUIREMENT FOR THE INDUSTRIAL TRAINING
FACULTY OF INFORMATION MANAGEMENT
UNIVERSITI TEKNOLOGI MARA KELANTAN**

01 FEBRUARY 2017 – 30 JUNE 2017

DECLARATION

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Signed by

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Date of submission: 11 July 2017

ABSTRACT

Based on the period from 01 February 2017 to 30 June 2017 in Hospital Tanah Merah (HTM) in department Information Communication and Technology, (ICT). Hospital currently uses a manual system for the management and maintenance of critical information. The current systems require numerous paper forms, with data stores spreads throughout the hospital management infrastructure. Often information is incomplete, or does not follow management standard. Forms are often lost in transit between departments requiring a comprehensive auditing process to ensure that no vital information is lost. Multiple copies of the same information exist in the hospital and may lead to inconsistencies in data in various data stores.

A significant part of the operation of any hospital involves that acquisition, management and timely retrieval of great volumes of information. This information typically involves; patient personal information and medical history, staff information and ward scheduling, staff scheduling and various list of other faculties. All of this information must be managed in an efficient and cost wise fashion so that an institution's resources may be effectively utilized HMS will automate the management of the hospital making it more efficient and error free. It aims at standardizing data, consolidating data ensuring data integrity and error free. It aims at standardizing data, consolidating data ensuring data integrity and reducing inconsistencies.

Keywords: *hospital, system, data stores, Hospital Tanah Merah, ICT*

ACKNOWLEDGEMENT

I thank to Allah the almighty, to whom we take refuge, for his endless supply of love, peace, mercy, grace, wisdom, insight and all that I am. Praise and honor goes to him always as he is awesome and above all. I wish I could describe him, but I could not. May Allah please continue bless us all, Thanks.

Moreover I appreciate the unit ICT for facilitating the practical training program runs smooth and making sure that it achieves its goal of bridging the gap between theory and practice.

I also extend my sincere and heartfelt gratitude to Mr. Mohamad Zakie bin Shafie, Mr. Ismail bin Jusoh and Puan Haslinda binti Mat Nor my external supervisors. I also thank them for their utmost cooperation and coordination during my practical training.

Special thanks Puan Shalliza Sapiai, University Teknologi MARA (UiTM) Kelantan branch from the information management, who was my internal Supervisor, for her wonderful and helping advices and opinions.

I extend my inner most appreciation to my beloved and caring family, for their endless moral support, understanding, prayers, encouragement and productive suggestion that led me in pursuing and get straight to my ambitions, goals and carrier in academic.

I also supply my inner most appreciation to my friends, roommates and fellow students for encouragement, supports and advices on how to write this report.

I acknowledge all the mentioned and unmentioned for their material, mental and moral support for this accomplishment. May the almighty Allah rain his shore less blessings upon themselves.



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CHAPTER 1: COMPANY BACKGROUND (HOSPITAL TANAH MERAH)

1.1 Background of the organization

Hospital Tanah Merah (HTM) commenced operations on May 2, 1985. 10 years to complete its construction. The history of the construction of which began in 1975 cost of RM 7.8 million was inaugurated by His Royal Highness the Sultan Kelantan on Sunday, April 20, 1986. Located on a hill called Bukit Remah with an area of 6 hectares, only 500 meters from the city center Tanah Merah. The location is on the main road as the road / highway connecting the East West Grik in Perak to Jeli in Kelantan to Kota Bharu in Kelantan and other colonies. Colonies around the Jeli district in the west of the East Machang, Pasir Mas in the north and in the south Kual Krai. Proximity to Kota Bharu is 51 KM.

HTM with a staff of 342 people has been upgraded as hospitals spiked in 2006 and became the center of a hospital patient referral hospital and health clinic nearby. It covers the entire province of Jeli part Machang and Pasir Mas. Expertise is available in HTM General Surgery Orthopaedic Surgery Obstetrics and Gynecology and Pediatrics. In addition, there is also an expert tour of Hospital Raja Perempuan Zainab II (HRPZ II).Kota Bharu and Universiti Sains Malaysia Hospital in Kubang Kerian running the hospital services their expertise here. Clinical and non-clinical support at the Tanah Merah Hospital. It runs almost all the affairs of patient management. In-patient units comprising a total of four General Ward and the Board of Surgery.

While the unit consists of Unit Outpatient Clinic Outpatient Clinic of Respiratory Specialists and Emergency and Trauma Unit. Clinical support unit consists of Pathology and Blood Bank Unit Diagnostic Imaging Unit Physiotherapy Unit Pharmacy Unit and Hemodialysis Unit Sterilization Unit.

Now HTM has initiated activities or programs quality since 1991. The main strategy of the program is to improve and upgrade facilities and facilities and for total human development and program improvement quality system. Besides that, HTM also to improve human capital development facilities is also a priority. All staff members were exposed to various elements of the spiritual and physical qualities as a driver towards improved quality of work. As a result of careful planning by management and the commitment of all citizens of the Tanah Merah Hospital have successfully obtained certification MS ISO 9002 version 1994 certification in 2001.

Certification for three years from 2001 to 2004 was among the first regional hospital. First in Kelantan received the certification. Since then it became a benchmark of excellence in service

quality improvement in rural Kelantan. Hospital Tanah Merah also recently on 28 to 29 July 2008 was held Surveillance Audit by SIRIM QAS auditor. Has proposed to retain the MS ISO 9001: 2000 for a period of three years.



Figure 1.1: Location of Tanah Merah General Hospital



Figure 1.2 : view of Hospital Tanah Merah

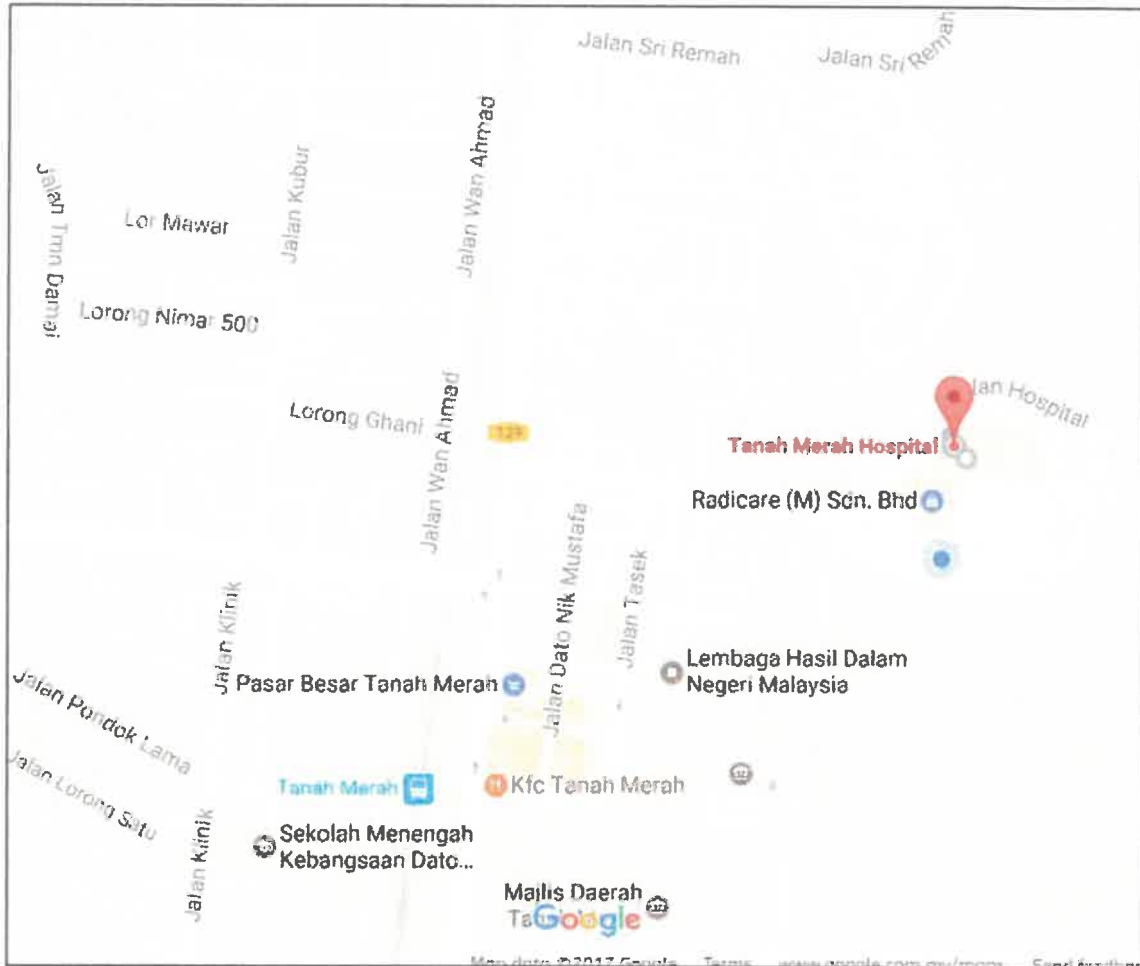


Figure 1.3: Hospital Tanah Merah location



1.2 Function of HTM

The basic purpose of a hospital is providing the treatment & care of the sick & injury patient. The functions of a hospital are given below:-

1.2.1 Patient care: patient care involves diagnosis, treatment of illness or injury preventive medicine, rehabilitation, convalescent care, dental care, personalized services

1.2.2 Education services: The education services are two form:-

a) Medical & allied health profession education: - Teaching of physician nurses, pharmacist, medical technologist, medical social service worker hospital administration & training, dietician etc.

b) Patient education: children, general education, social education for rehabilitation health care & also patient counseling.

1.2.3 Research: Research is important to advanced medical knowledge against disease & to improve hospital service. This is important for better health care of patient.

1.2.4 Public health care: public health is important to assist the community to reduce chance of illness & to improve general health population.



1.3 HTM LOGO



Figure 1.4: Logo

1.3.1 Mission

To provide medical and support network quality, dynamic and comfortable environment to internal and external users hospital.

1.3.2 Vision

Hospital Tanah Merah will become the center of excellence for the ultimate in care services through the employee responsible, committed and highly skilled with emphasis on corporate culture, customer satisfaction, continuous quality improvement, innovation, and technology affordable and proactive and to promote healthy lifestyle and participation the whole society towards improving the health and status a better quality of life.

1.3.3 Motto

Quality track, Generating Excellence

1.3.4 Quality Base

Top management Hospital Tanah Merah confident and responsible commitment to quality and constantly strive for improvement "Quality Management System" to meet customer needs.



1.3.5 Charter

- i. Each customer will be given appropriate medical treatment in the hospital.
- ii. Each customer will be treated well, friendly, considerate, respectful, polite, honest and sincere
- iii. Each patient was given the assurance that his honor will be maintained during treatment. All information about the disease and its treatment will be kept confidential and only be notified to the parties with its consent subject to the law.
- iv. Each patient will be given a clear explanation of the procedure and the proposed treatment including risks and other options.

1.4 Organizational structure

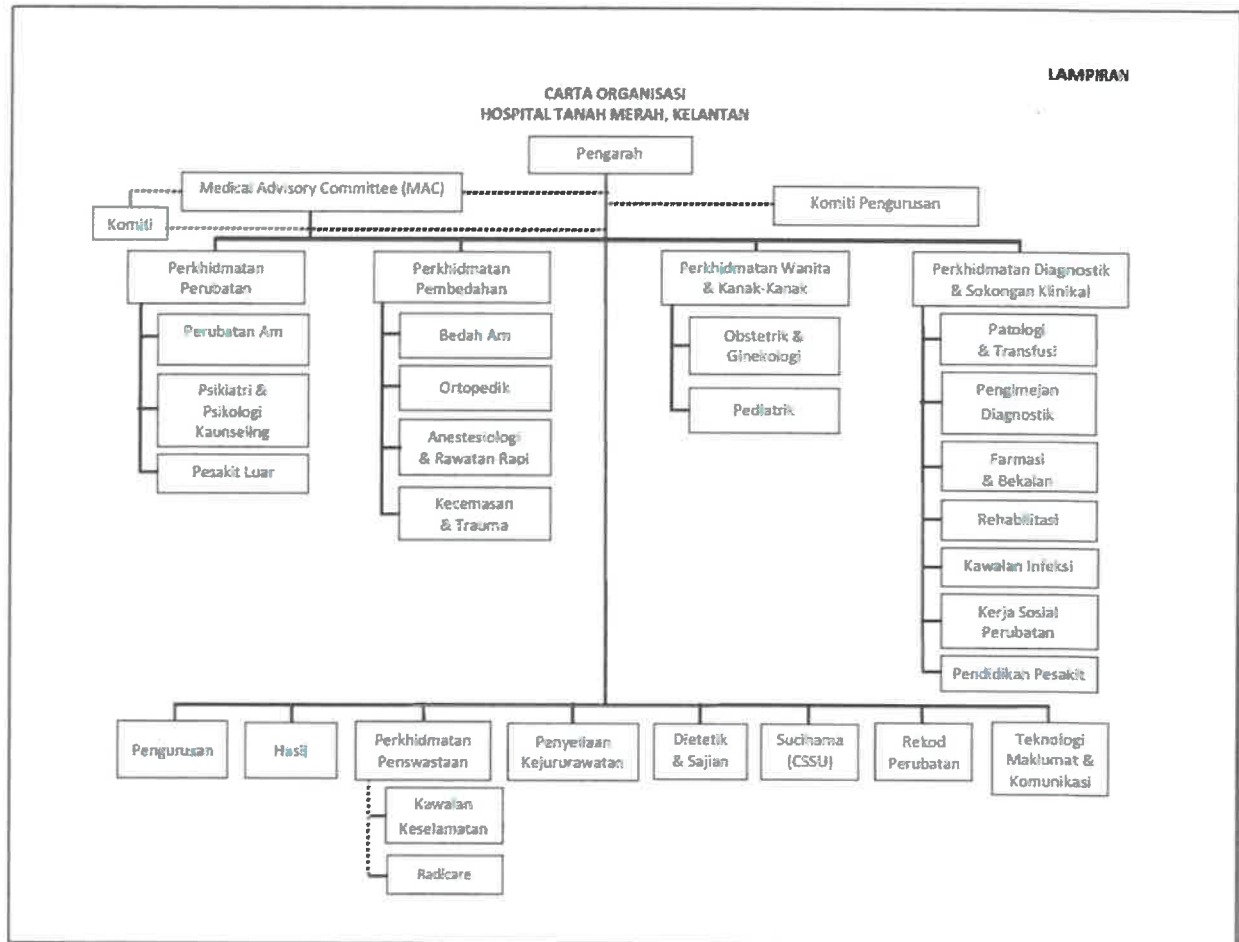


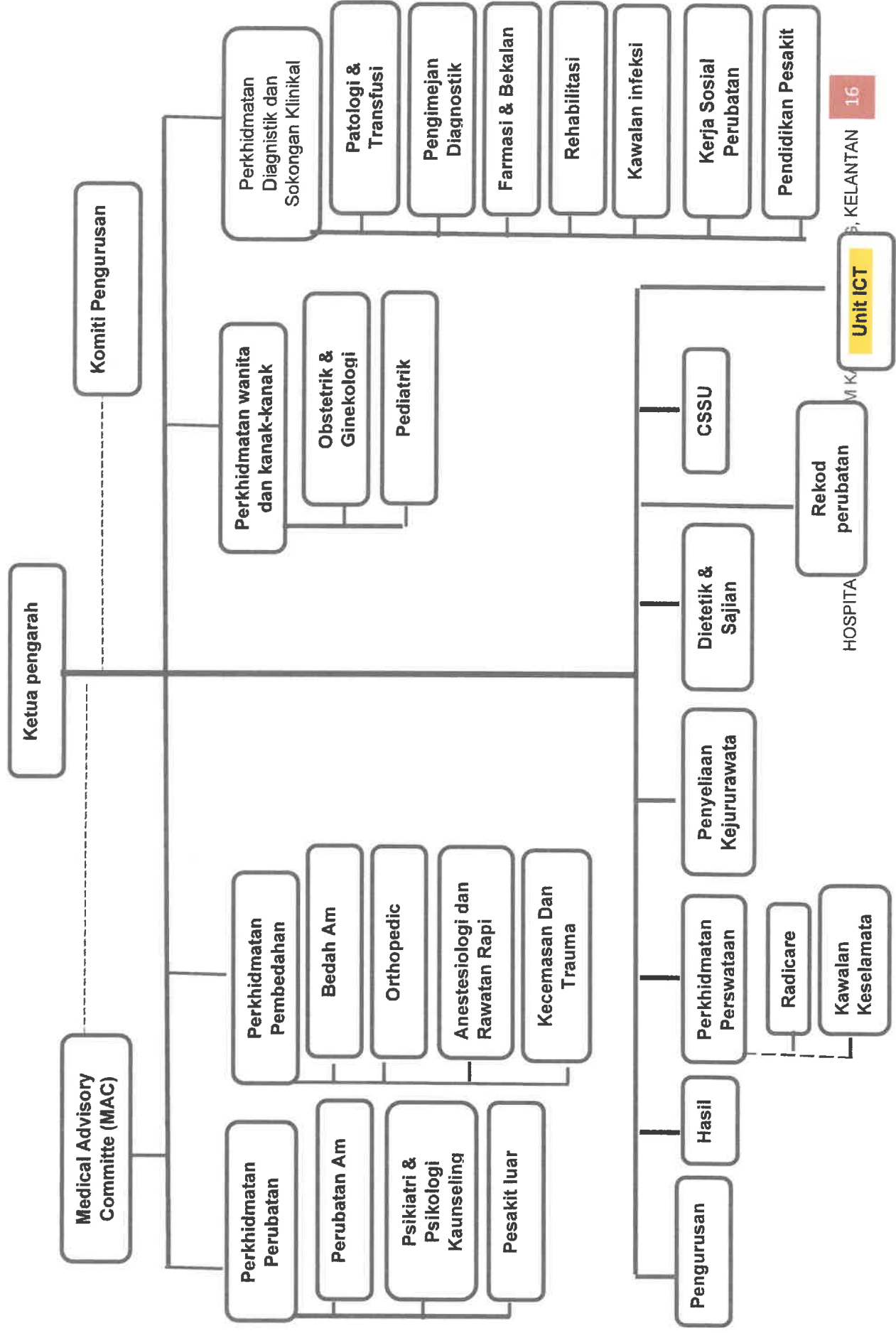
Figure 1.5: Organization structure

Hospital Tanah Merah (HTM) consist of 12 department divided into 2 work scopes which is have known Medical Advisory Committee (MAC) and Management Committee. The chart above show the responsible for the 2 work scopes.

The trainee (practical student) is allocated in the Information Communication and Technology which will be explain in the next chapter.



1.5 Department in HTM



1.6 List of Director HTM

Table 1.0: List of director HTM

 <p>1985 - 1986 Dato' Dr. Nik Saidina Omar b. Nik Zainal Abidin DJMK, SMK, JP.MBBS (Monash, Australia)</p>	 <p>1986 - 1987 Dr. Che Anuar b. Che Yaakob MBBS (UM) Master in O&G USM</p>	 <p>1987 Dr. Mohamad b. Ismail M.D. (UKM) Master of Hospital Administration College of Public Health University Philippine, Manila</p>
 <p>1987 - 1988 Dr. Hj. Kamaludin b. Hj. Hanapi MB. BCH (Al-Azhar) Mesir</p>	 <p>1988 - 1993 Dr. Zahari b. Mat Hassan A.S.K. M.D. UKM, PGDHSA (London)</p>	 <p>1993 - 1996 Dr. Zahri b. Atan MBBS (U.M)</p>
 <p>1997 Dr. Hjh. Laila bt. Abdullah M.D. (UKM) MSC Hosp. Adm. & Health Services Management South Bank University Of Londo</p>	 <p>1997 - 2007 Dr. Hj. Khalid b. Ibrahim B.S.K, A.S.K MBBS (U.M) MSC Hosp. Adm. & Health Services Management South Bank University Of London</p>	 <p>2007 - MEI 2011 Dr. Hjh. Selasawati bt. Hj. Ghazali MD· (Leuven Belgium) CMIA (Mal) M.Com Med(HealthSystem Management USM)</p>



 <p>MEI 2011</p> <p>Dr. Tengku Hazainiah binti Raja Hassan</p>	 <p>NOW</p> <p>DR. MOHD NASIR BIN ABD. KADIR</p>
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The table above shows the list of directors who have served in hospitals Tanah Merah. Hospital Tanah Merah began operating from the 70s up to until now. Many changes have been made by each director who runs the hospital and make a comfortable facilities to employees. Besides that, Dr.Nasir was said," My heartfelt appreciation and gratitude go out to all the Hospital Tanah Merah staff, for their hard work and dedication in ensuring the Hospital Tanah Merah continues to be able to provide the best health services to the community. The spirit of cooperation and in ensuring customer satisfaction is very much appreciated."

Hospital Tanah Merah one of the excellent hospital in the Kelantan. Hospital Tanah Merah actually have a complete facility which is population no need go far to take a treatment. On 2017, Hospital Tanah Merah once again got sophisticated tools by people representative which population well-known his name is Dato'Sri Haji Ikmal Hisham bin Abdul Aziz, Member of Parliament at Tanah Merah.



1.7 List of Development Projects

Bil	Project Name
1.	The work of preparing, supplying and installing water storage tank in the building Quarters Class D HTM including the installation of pipes and associated works
2.	Works grille assembly (Grill) security in Kuaeters C & D and other related work in HTM
3.	The work of paving the way for roads damaged in HTM
4.	The work of breaking the wall and shut the door in the ICU unit HTM
5.	Upgrading works hydroponics system storage water tank D at the Quarters HTM and installation of piping and other related work
6.	The work of supply and install rainwater tanks and other related work in HTM
7.	Work on Rain Water Harvesting (Installation type poly tank, plumbing to the tank) for external use
8.	The upgrading works to build a store on the counter and Pathology Unit HTM and other related work.
9.	The work of supply and install toilet seat system in the Children's Ward
10.	The work of replacing the control panel refinery and pipeline system in HTM
11.	The work of replacing (1) unit of storage water tank and another lint-related work in HTM
12.	Maintenance work six (6) Quarters Unit Class C including electrical work and mechanical and other related work
13.	Works Hemodialysis renovate toilets to be deposited storage and space modifier patients and other related work.

Table 1.2: List of development project

1.8 Summary

Improvements in service performed during the year 2017, the overall impact on the quality of the work of the Administration in which the unit can carry out its operations in good time of year. It is hoped that in the future be able to showcase excellence in the development of services in line with the Public Service.



CHAPTER 2: INFORMATION COMMUNICATION AND TECHNOLOGY, HTM

2.0 Background of ICT

ICT Department is one of the divisions in HTM. The trainee, Nurhasnaa binti Ramli, is assigned to this department for a period of 5 month (01 February 2017 – 30 June 2017). This department is headed by Mr. Mohamad Zakie bin Shafie as the head of units. Under his supervision, the department contains 3 staff consisting of Officers which is they are Mr. Ismail bin Jusoh as a Pegawai F41, and Madam Nor Haslienda bin Mohd Noor as a Penolong Pegawai F29.

Unit Information and Communication Technology (ICT) is a unit responsible in helping to provide infrastructure and ICT services and support services ICT technical staff at Hospital Tanah Merah.



2.1 Organization chart of ICT Department

The chart below will provide a visual description of the unit's allocation within the ICT Department.



DR. MOHD NASIR BIN ABD. KADIR
PENGARAH HOSPITAL UD54



MOHAMAD ZAKIE BIN SHAFIE
PEGAWAI TEKNOLOGI MAKLUMAT (F44)



ISMAIL BIN JUSOH
PEGAWAI TEKNOLOGI MAKLUMAT (F41)



NOR HASLIENDA BINTI MAT YUSOFF
PENOLONG PEGAWAI TEKNOLOGI MAKLUMAT



2.2 Objectives of Services

- i. Provide ICT infrastructure and services to the Hospital Tanah Merah for improve the quality system service delivery to customers.
- ii. Provide technical support ICT citizens to Hospital Tanah Merah to ensure that the facilities and ICT can be used in helping hospital carry out its functions efficiently, effectively and ongoing.
- iii. Optimizing the use of ICT to improve the knowledge and ICT culture among residents Hospital Tanah Merah.

2.3 Mission

Management of Hospital Tanah Merah helps in initiating the Information and Communication Technology (ICT) is integrated to provide efficient, high quality, fast and continuously.

2.4 Vision

Trying to establish a system of information and ICT infrastructure efficient, effective, safe, and continuing to support the Hospital Tanah Merah.



2.5 Activities / Results

The main activities of the ICT unit at Hospital is to provide support related technical ICT to citizen's hospital. For the year 2016 of 196 complaints of problems ICT received and resolved.

- i) A total of 13 complaints (6.63%) were received during the year 2015 can be treated within 8 hours. This situation contributes to the achievement of 93.37% and is still Quality Objectives surpassed ICT Unit which has been set at 90% of complaints will be treated within 8 hours.
- ii) In addition to completing complains related to ICT, ICT Unit also provide loans ICT equipment like laptops and LCD projector to citizens Tickets for presentation purposes papers, workshops, and also meeting. In addition to 2 items stated above, this unit also lend external hard drive, external combo, DVDRW, and others equipment from time to time. Detailed statistics are shown in below.
- iii) ICT Unit has organized training the use of Ms Excel and Ms Outlook for Hospital Staff Tanah Merah in March on 2017. In addition, training and ICT also help given to hospital staff the need for not directly.
- iv) Increasing the use of e-mail among staff. Until now a total of 134 employees have an email id Ministry. Consumers are increasingly confronted with use e-mail and more interested in functionality offered in 1GovUC.
- v) Increase in network facilities hospital, where all the computers coupled with ease 1GovNet.
- vi) Participate in the contest website the State Health Department Kelantan in conjunction with the Convention Innovation JKNK 2015. Home web hospital has obtained 4 star classification (star rating) that has been assessed by the Multimedia Development Corporation (MDeC)



2.6 Design 2017

ICT Unit is planning several activities to be implemented in 2016. Among the activities planned are:

- i) Provide training reinforcement email usage 1GovUC continuously for raising awareness email use among hospital staff.
- ii) Provide training Ms Office and Adobe Photoshop to Interested staff.
- iii) Improving the quality service hospital site besides improvements made in order to achieve star a higher rating.

2.7 Conclusion

Overall, the ICT Unit Customers who have reached Charter set and determined to continue improve the quality of service all the time.



CHAPTER 3: INDUSTRIAL TRAINING ACTIVITIES

3.1 Introduction

During the 5 month industrial training period, the trainee (**Nurhasnaa binti Ramli**) is assigned into units Information Communication and Technology. The report duty, the trainee was given a light task because it just introduction part of department. Besides that, the trainee has learned to improve her soft skills as well as management technique when dealing with superiors, subordinates, contractors and the public.

In this chapter, we will cover all aspects of work during the trainee’s training coupled with photo evidence and other relevant materials.

NOTE: *During the 5 month period, the trainee received 1 week off during HARI RAYA AILDIFITRI (25 June 2017 – 29 June 2017). For further elaboration on her schedule, please refer to **Table 3.1***

Table 3.1 List of Holiday in Kelantan

Date	Holidays
19 February	Holiday events
24 April	Agong’s coronation days
01 Mei	Labour days
10 Mei	Wesak’s days
28 Mei	Early holiday of Ramadhan
12 June	Nuzul Alquran days
25 June – 29 June	Hari Raya Aidifitri



3.2 Log Book

For recording purposes, the trainee is provided with one (1) log book, by the University as a requirement. Log books are used as a diary that contains all tasks and assignments given to her.

The figures below show sample images of UiTM's log book.



Figure 3.0 UiTM's log book

3.3 Task Assigned

This section is divided into 2 parts which is task daily and special project providing by Faculty supervisor for complete the practical training at Hospital Tanah Merah. This will contain all tasks given to the trainee with pictures as evidence.



Figure 3.1 Pickup phone

3.3.1 Answer phone call

For the first two days of training, the trainee was placed under information center counter which is the trainee was exposed about how to answer call with smooth and properly. This task was exposed to the unit work scope which is all of staff very well this unit is Information Communication and Technology.

Besides that, this task was given by Madam Haslienda which she teaches the phrase how to answer the phone. For general knowledge, at Hospital Tanah Merah, most staff here is doctor, housemen, veteran, sister, nurse, MA, MO, and practical student from various university.

"Hello, Assalamualaikum, Unit ICT. Can I help you sir/madam?"

Madam Haslienda was said, if the customer Muslim, the first thing need to give 'salam' because that sign we respect them each other Muslim. But, if the caller non-muslim, Madam Haslienda said, we need say 'Salam Sejahtera' and don't put 'Assalamualaikum'. Besides that, unit ICT need to mention because assigned the caller call unit ICT then sometimes, some department actually changed department.



3.3.2 Meeting with staff Hospital Tanah Merah (Renungan Pagi Program)

During the first week of training, the trainee was required to attend a general meeting with Mr. Mohamad Zakie, Mr. Ismail and Madam Haslienda. At hospital, for every month will be held meeting between staff. The meeting was given name 'Majlis Renungan Pagi'. It was the first board meeting attended by her and it served as a foundation as to how meetings are conducted in organizations.

On the meeting, a director was give a speech and make a clear motivation to all of staff which attended that program. The 'Majlis Renungan Pagi' involved all staff which from director, doctor was new transfer here then staff will be move to another places. Besides that, every each meeting also provide theme and on February which is that trainee attended the meeting, the theme 'Senyuman itu sedekah'.

And, on the first meeting a few doctor and a few staff was transferred here than a few staff move to another places. Then, what the trainee obtain while attend the meeting is some of doctor from UiTM's. They graduates from UiTM's Puncak Alam. The trainee feel proudly when director called them to introduce themselves.

After that, Hospital Tanah Merah decided to make an every each meeting on evening because on morning a few staff not ready in the hall then many staff busy on morning for bring out patient and some of staff busy to another meeting.



Figure 3.2: Some staff involved



Figure 3.3: 'Renungan Pagi' program

3.3.3 Opening program CT scan in Hospital Tanah Merah

Ct-scan program started on two weeks after the trainee report duty here. During the trainee start it was very busy in this weeks. Many preparation need to makes for make the successfully program. In this program everyone involved including the doctors, staff, directors and representatives of Tanah Merah. During the program, my supervisor ask me to be a photographer then taking picture for every moment in the program. This task very important because of the main is the boss is come in and launching the CT-scan.

Besides, on the days of events the top management which is attendance this program is Datuk Seri Dr. Hilmi Yahaya which is Director of Kementerian Kesihatan Malaysi (KKM), secondly, Dato'Sri Haji Ikmal Hisham bin Abdul Aziz as a represent Tanah Merah and last Dr, Nasir bin Abdul Kadir as a director of Hospital Tanah Merah. Then, the trainee as a photographer for this day got catch photo for every important moment then can put in to report.



Figure 3.4 Dato Hilmi launching the CT-scan program



Figure 3.5: Visit to CT-scan

Figure 3.6: Visit to CT-scan



Figure 3.7: Visit to Baby room (NICU)

3.3.4 'Bacaan Yassin' program

On every month then on Thursday's end of the month, Hospital Tanah Merah will be held 'Bacaan Yassin' in this hospital. This program for remembered the patient was sick and this practice increases among surviving. The program is designed to awaken the patient and also visitors rather our spiritual and physical balance in ourselves. This will cause us to feel calm and do not feel sad when faced with difficulties. I as trainee joined this program to get the experience of staff to engage in patients. That was fun and can help patients that they are not alone in the face of pain and misfortune. Apart from that, this program also our spiritual uplifting to read *surah Yassin* every day. Besides, the realization will also evident when we practice the holy verses of the Quran.



Figure 3.8 'Bacaan Yassin' Program

3.3.6 Thumbprint registration

Two week, the trainee here, was registered thumbprint on Hospital staff. Fingerprinting it very important because they can proof about attendance and time to back home. This attendance also can print and can make references if company want. Fingerprinting is one form of biometrics, a science that uses people's physical characteristics to identify them. Fingerprints are ideal for this purpose because they're inexpensive to collect and analyze, and they never change, even as people age. Although hands and feet have many ridged areas that could be used for identification, fingerprints became a popular form of biometrics because they are easy to classify and sort. They're also accessible. Apart from that, the number as given to trainee as a staff Hospital Tanah Merah is 86 then the password of the pass to thumbprint is a 1234.



Figure 3.9: Fingerprint

3.3.7 Laptop and LCD borrowed by doctor

On every day, every doctor or representatives of doctors will come to borrow a laptop and LCD. This is because they have to make continuous medical education (CME) or presentation related to their duties. Besides, borrowed laptop also to complete the assignment and help solve problems. In additionally, the pharmaceutical unit also has its own laptop which is called as 'PhiS laptop' because they have to accessing medication within the website that has been set in there. For borrowed laptops must use the correct transaction, such as a doctor must fill out a loan and must apply for a loan at the latest three days. ICT Unit provides a form to be filled out by the doctor and staff.



Figure 3.10 Projector



Figure 3.11 Laptop



HTM/ICT/05 Pind. 3/2015

**BORANG PINJAMAN PERALATAN ICT
UNIT ICT, HOSPITAL TANAH MERAH**

MAKLUMAT PEMINJAM	MAKLUMAT PERALATAN
<p>Nama :</p> <p>Jawatan :</p> <p>No. H/P :</p> <p>Bahagian/Unit :</p> <p>Tujuan :</p> <p>Item : Laptop <input type="checkbox"/> Kuantiti :</p> <p>LCD Projektor <input type="checkbox"/> Kuantiti :</p> <p>Lain-lain :</p> <p>Bantuan Teknikal : Ya <input type="checkbox"/> Tidak <input type="checkbox"/></p> <p>Tarikh Pinjam :</p> <p>Tarikh Mantar :</p> <p>Tandatangan Pemohon :</p> <p>Tarikh :</p>	<p>LAPTOP</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> KKM/JKN/HTM/03-06-01/H/14/106 2. <input type="checkbox"/> KKM/JKN/HTM/03-06-01/H/14/107 3. <input type="checkbox"/> KKM/JKN/HTM/03-06-01/H/14/108 4. <input type="checkbox"/> JKN.KELANTAN/130704/H/11/18 5. <input type="checkbox"/> JKN/KELANTAN/130701/H/08/51 6. <input type="checkbox"/> JKN/KELANTAN/130701/H/08/50 7. <input type="checkbox"/> JKN/KELANTAN/130701/H/08/01 8. <input type="checkbox"/> HTM/HM/01/PC/020/2004 9. <input type="checkbox"/> HTM/HM/KP/020/05 0. <input type="checkbox"/> HTM/HM/PC/014/06 <p>LCD PROJEKTOR</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> V9YK4X00048 2. <input type="checkbox"/> V9YK4Y00191 3. <input type="checkbox"/> V9YK4X00179 4. <input type="checkbox"/> JKN.KELANTAN/130704/H/11/16 5. <input type="checkbox"/> JKN.KELANTAN/130704/H/11/17 6. <input type="checkbox"/> HTM/HM/LCD/04/010/2005 <p>Lain-lain :</p>

Figure 3.12: Form of ICT equipment borrowed

Every time when using an ICT equipment doctor or staff must fill in the form and handed over to the officers. This is because of the pleasant staff on duty to record the amount of equipment borrowed for the day. Moreover, the form also as a reference if the equipment used was not sufficient or not returned yet. For example, unheard of laptops and LCD disappear. So the duty officer refers a list of names given to determine which units have been borrowed before.

3.3.8 Update antivirus

The next day, Trainee were directed to the McAfee antivirus update to a newer one. This is because existing antivirus has expired. To install antivirus takes a long, long time. We need to do to all the laptops that are in the ICT unit. Therefore we had to wait a long time for each of the laptop. Extra antivirus is not only to prevent entry of the virus but to block all the things that are not work-related and medical. Below I show how to install McAfee antivirus:

First step, you need to open the homepages of website McAfee then click 'My account'.

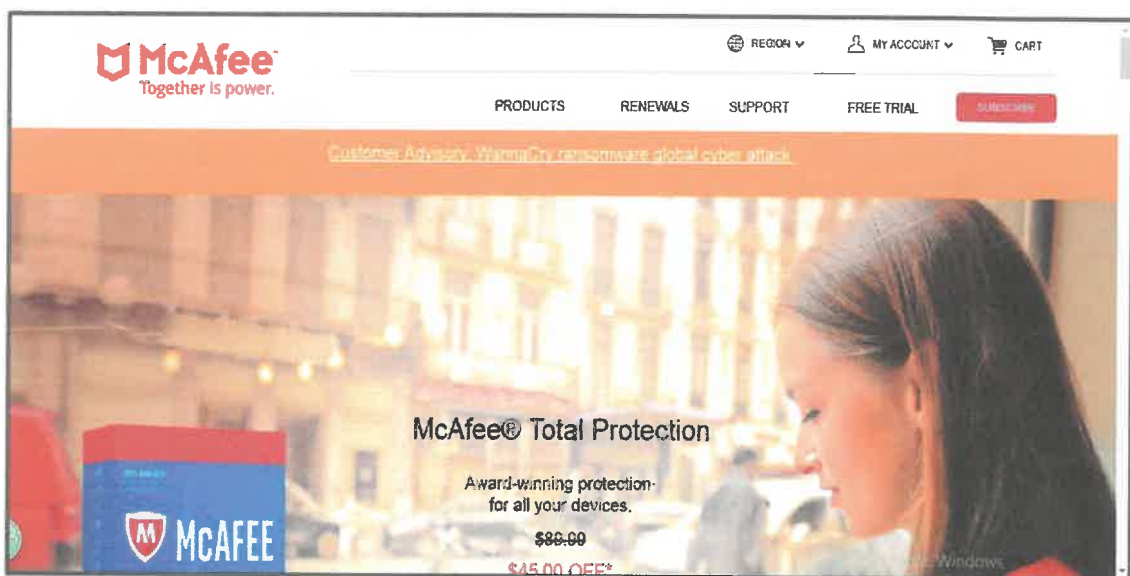


Figure 3.13: Homepages of McAfee

Second step, you need to sign in and run the installation of McAfee from your computer.

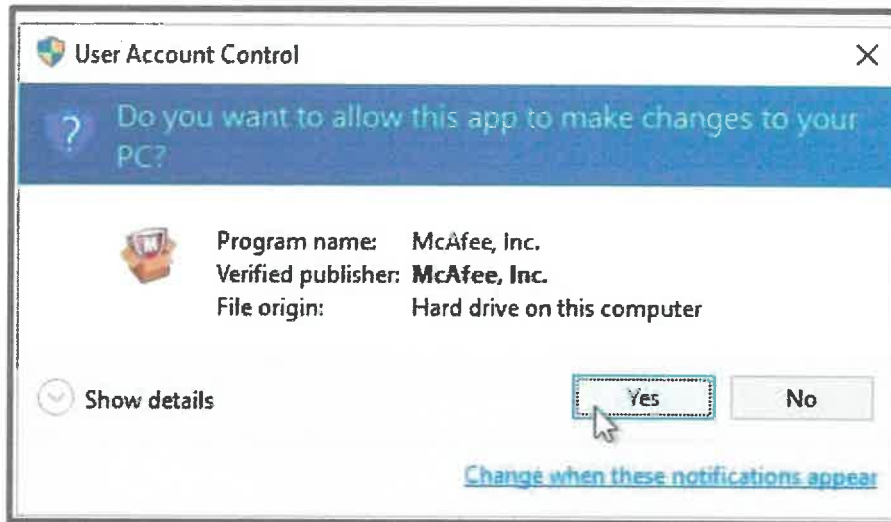


Figure 3.14: Give Windows permission to run the installer

McAfee will prepare the installation and once the installer is ready choose the “Complete” installation and click “Next”. McAfee will download the installation files to your computer before installing the software. After a short while McAfee will begin installing the files that were downloaded to your computer. When the installation is finished, you can choose whether to send or not to send usage reports to McAfee (anonymously). Unlike other AV brands, it seems that McAfee don’t use this to improve protection, but rather to improve their own software. If that wasn’t the case, I’d opt in, but since it’s only for the company’s benefit and not for improving security, I prefer to opt out. The next screen will prompt that the installation is complete and you can finish the process. After you click “Finish” the software will activate.

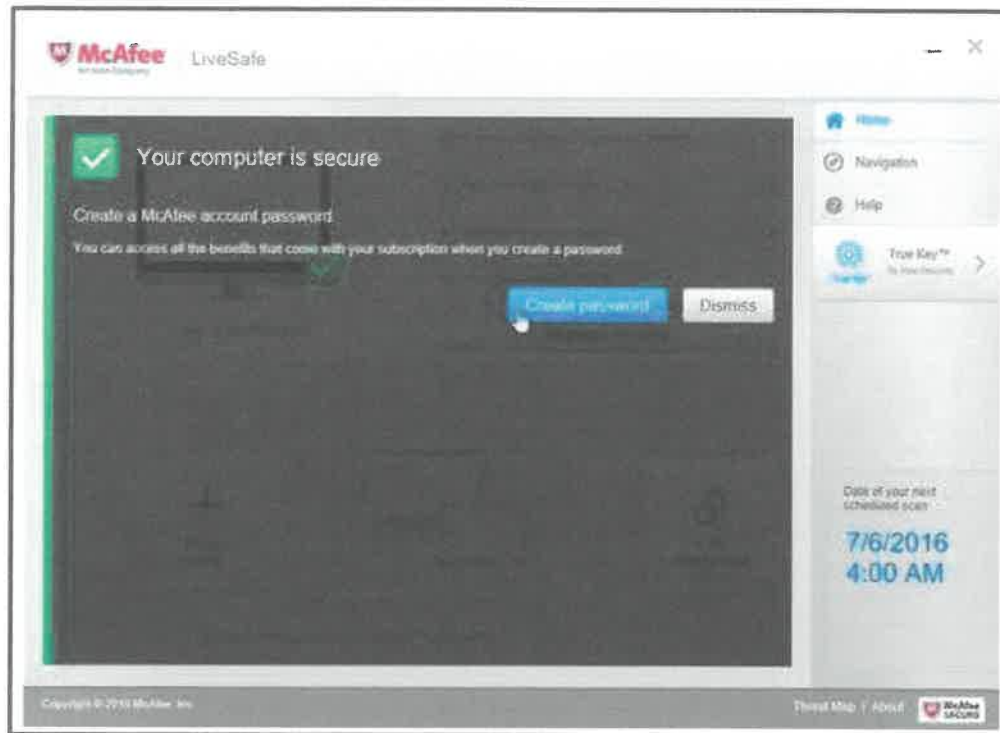


Figure 3.15: McAfee installed

Once the software initiates, you can create a password to access all the security features your plan offers in one place on the web. That's it! McAfee is now installed and as I mentioned before the virus definitions are already up to date so there's no need for you to update it immediately.

3.3.9 Fix paper jam in a printer

The next month, Trainee got a call from another unit that the printer is broken and needs to be repaired immediately. When the unit is up to them to say that they stick to the paper and the printer cannot be removed from the printer. It means the printer jam because of paper cannot working properly. When working with any printer, it is inevitable that you will encounter a paper jam. The following is a general guide for removing paper that has become stuck in a number of locations. Although most modern printers are similar in design. You may have to make slight adjustments to the following steps, depending on the model of your printer.



Figure 3.16 example of printer

When a paper jam occurs, some printers flash lights at you and scream for help. Others sense where the jam is and provide guidance on clearing the blockage. If your printer offers diagnostic advice, follow it. Also, take time to check the printer's documentation for help in clearing jams. Here are the basic steps you'll follow to correct the problem:

1. **Turn off the printer.** If you're going to be working inside the printer, you don't want any trouble with electricity or moving parts. And if you're dealing with a laser printer, you also don't want the fuser to generate additional heat. If the paper is jammed in or near the fuser unit (you'll feel the heat as you come near it), you'll have to wait for the fuser to cool off before clearing the jam.
2. **Open all doors leading to the paper path.** If you can't tell which door leads to the paper jam, start by removing or opening the input tray and following the paper path all the way to the output tray, opening every door or panel that you can find along the way.



3. **Carefully pull out paper sheets and scraps.** Check for paper sheets that are stuck or askew as well as for paper scraps. Pull paper out of the path firmly but very carefully and slowly. When possible, pull paper in the direction it is supposed to go in under normal conditions not backward, which could strain the printer's mechanics. Take care to remove all of the paper, as any scraps that remain could cause further jamming. If you have the misfortune of breaking a mechanical piece in the printer stop what you're doing and call for service.
4. **Close all doors and turn on the printer.** Once switched on, the printer should reset itself automatically. If the printer reports that it is still jammed, double-check for stray paper scraps, and then close all the doors again. If the printer continues to complain, try turning it off and then back on. If the complaints continue, you'll have to call for service and hope that a deep-seated piece of paper rather than a broken mechanical part is the source of the problem.

3.3.10 Open Motherboard

For this weeks, trainee supervisor only ask trainee to define about motherboard. So, Trainee just explore motherboard for those weeks. Motherboard, Mainboard, System Board. The name Motherboard is used in this study unit, however you need to be familiar with the knowledge that the three names above are all the same thing.

The motherboard is likened to the mother of the PC (Personal Computer), or caretaker/controller/holder/connection point of everything needed to run a PC. Each motherboard is different. They can be different in design, size, shape, capabilities and configuration possibilities. Some may look the same and have subtle differences. These differences are dependent upon the form factor and manufacturer.

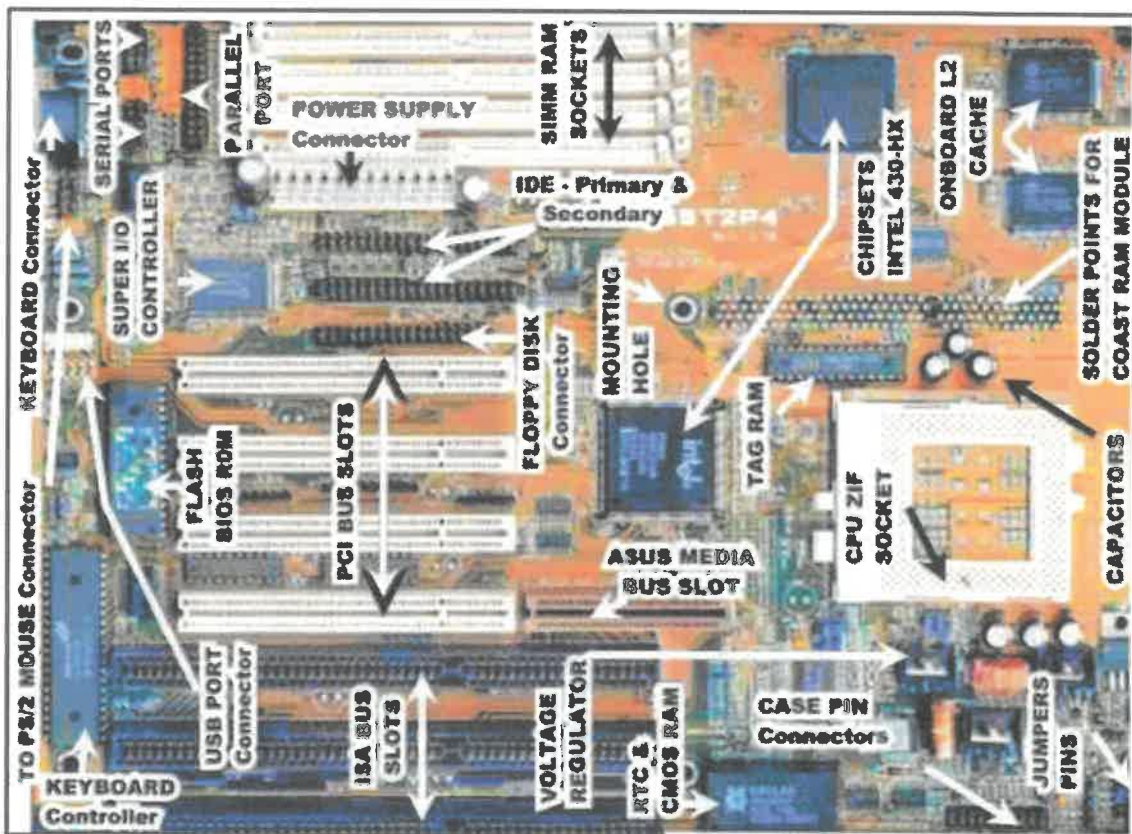


Figure 3.17 Motherboard

Pictured here is a typical Pentium-class 430Hxchipset motherboard (Asus P55T2P4), which is labeled for identifying parts. Although this is an older board, it contains most of the components and technologies that have been used, and that are studied in this lesson.

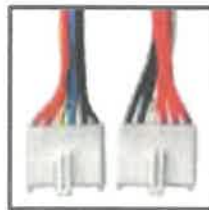


It is a good example for learning what is incorporated into motherboards, and what everything looks like.

Pictured below are AT & ATX power supply to motherboard connectors and sockets. With the ATX there is only one connector as opposed to using 2 connectors in an AT motherboard.



ATX Power Supply to Motherboard



AT Power Supply to Motherboard Connector (Female) – notice that the black wires must meet in the middle when connected.




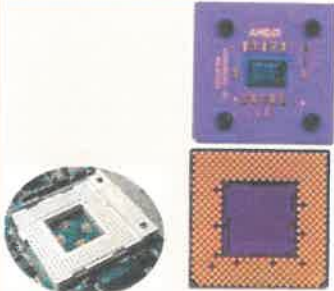


Connector (Female) ATX Power Socket at Motherboard (Male)




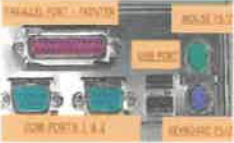




AT Power Socket at Motherboard (Male)

Table 3.2: Motherboard component and function

Motherboard component	Function
 <p>Real Time Clock (RTC)</p>	<p>Used for all timing purposes in the computer. It is powered by the onboard battery, and continues to run even if the computer is turned off and unplugged.</p>
 <p>ROM BIOS (Read Only Memory / Basic Input Output System)</p>	<p>The BIOS chip is not permanently soldered to the motherboard, but since it plays a major role in being able to use the motherboard.</p>
 <p>CMOS RAM (Memory for storing the hardware system information and setup.)</p>	<p>It is powered by the onboard battery, and continues to run even if the computer is turned off and unplugged. It contains all the special settings for the particular motherboard, including system devices and components that are connected to, or reside on the motherboard.</p>
 <p>CMOS & RTC Battery</p>	<p>CMOS & RTC Battery for the RTC and CMOS memory which is usually long-lasting. If the battery does die, either the original can be replaced or a special adapter which uses standard batteries can be installed. Special pins reside on the motherboard for this purpose.</p>
 <p>RAM (Random Access Memory) sockets</p>	<p>The motherboard contains sockets for RAM (memory), and can have more than one type of socket utilized for enabling different types of RAM to be used in the system. More memory</p>

	<p>is always better, and the new RDRAM (RAMBUS Dynamic RAM) is extremely fast and more reliable.</p>
 <p>BUS slots</p>	<p>That are used for attaching devices to the motherboard's BUS, which includes the etched wire circuits throughout the motherboard.</p>
 <p>CPU socket or slot</p>	<p>The CPU (Central Processing Unit) slot is usually centrally located on the motherboard, and this microprocessor is usually referred to as the brains of the computer. A computer cannot operate without the CPU. It is one of the most important components, if not the most important, that determines the speed and capability of the motherboard and computer system.</p>
 <p>Cooling motherboard</p>	<p>Most modern motherboards incorporate special connector pins for attaching wires of strategically located Fans inside the PC case, including the CPU Fan with its attached heat sink</p>
 <p>Onboard CACHE RAM</p>	<p>Motherboards contain slots or sockets that the CACHE is inserted into. Cache is sometimes upgradeable to larger capacities depending on the motherboard design and limitations, and is usually</p>

	<p>included in the purchase of the motherboard.</p>	
 <p>Jumpers & Pins</p>	<p>The use of pins on a motherboard, and are like switches that are used to enable or disable functions, or to make necessary management changes that are needed for specific devices or components that you add to a PC.</p>	
 <p>Super I/O Controller</p>	<p>The I/O control was accomplished through a special I/O card, which in turn, was inserted into one of the BUS adapter card slots on the motherboard. Individual I/O devices and components connected to this card for interfacing with the motherboard (both internally and externally).</p>	
 <p>Internal Connectors</p>	<p>There are other internal connectors that are used to connect devices to the motherboard, such as the connectors pictured here.</p>	
 <p>Motherboard External I/O connectors External Midi/ External Midi/</p>	 <p>25 Pin External Serial/Com Port</p>	 <p>External Midi/Joystick & Audio Connectors</p> <p>To enable the connection of external peripherals to the motherboards internal connectors, or directly to the motherboard there are external connectors.</p>

3.3.11 Replaces ink printer, changed tape and remove adware

This month trainee learned to replace printer ink, change the tape in the server and remove adware. My Supervisor describes how to change the tape properly and change the ink properly without damaging any equipment.



Figure 3.17 Write down name of printer.

Write down the printer brand and model number. You will need to know both in order to find the correct replacement ink cartridges. If you can't find the model number, check the documentation that came with your printer.



Figure 3.18 Turn on computer lid

Turn on your printer and open the lid/flap that encloses the cartridges. The cartridges should slide to the center of the printing area. You may need to press the Ink button, which may have a “drop” icon, in order for the cartridges to slide out.



Figure 3.19 Label ink

Take note of the cartridge number and type .The numbering and labeling systems vary by printer manufacturers.



Figure 3.20 refilled the cartridge

Purchase new cartridges or have your old ones refilled. Use the numbers you wrote down to buy either at an office store or online, or take your cartridges to an ink refilled. If you are unsure, take the cartridge to the store and ask an employee to help you find the right match.



Figure 3.21 Changed Ink

Gently remove the cartridges you want to replace. Depending on the model printer you have, there may be multiple cartridges to choose from the cartridge's ink color should be displayed on its label.

- Grip the cartridge. Some cartridges have clips that can be pressed in to release them from the ink tray.
- Pull it at an angle away from point of attachment.
- Do not remove your cartridges unless you have replacements ready, leaving a print head empty for too long can dry it out, making it unusable.



Figure 3.22 Shake the cartridge

Shake the new cartridge before unpacking. Shaking will help the first few print jobs come out looking better. Be sure to shake before opening the bag to prevent leakage.



Figure 3.23 *remove the protector*

Remove the protector that covers the ink dispenser. These differ by brand, but almost all cartridges will have a protective sticker or piece of plastic over the dispenser that needs to be removed before installation.



Figure 3.24 *Insert the cartridge*

Insert the cartridge into the printer. Insert it in the reverse way that you remove them. Keep the correct angle, and it should fit in with little effort. Most new cartridges will lock into place automatically with a little pressure.



Figure 3.25 Test print

Print a test page. This will make sure that the cartridges have been installed correctly, and will get the ink flowing before your first real document. Reconfigure printer heads for best quality. If you are noticing streaks, lines, or smudges, your print heads may be out of alignment or in need of cleaning. Check your printer's documentation on how to do this for your model.

ii. Remove adware

STEP 1: Uninstall Pop-up Ads program from your computer.

Most Pop-up Ads will install a program on your computer, while this is not a general rule, we will need to check for any malicious programs. In this first step, we will try to identify and remove any malicious program that might be installed on your computer.

- i. To uninstall the program that has installed is responsible for the pop-up ads, click the Start button, and then click on the Control Panel menu option.

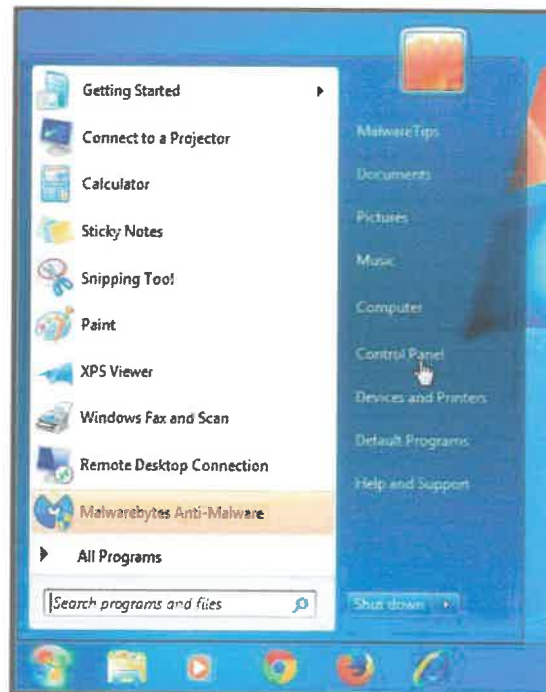


Figure 3.26 Control Panel

- ii. When the Control Panel window opens click on the Uninstall a program option under Programs category. This option is shown by the arrow in the image below. If you are using the Classic View of the Control Panel, then you would double-click on the Programs and Features icon instead.

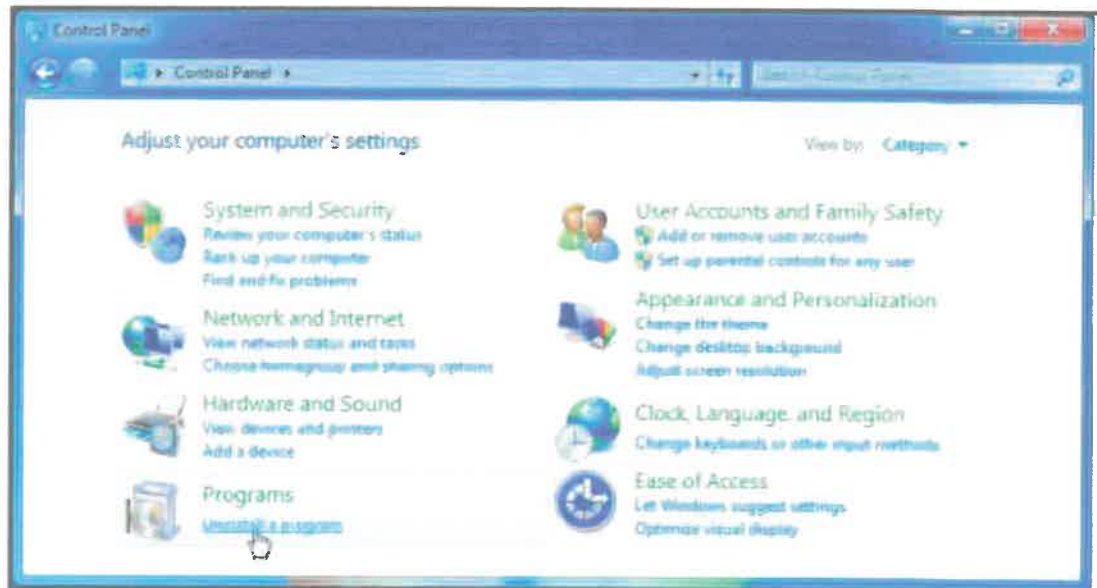


Figure 3.27 Uninstall program

- iii. When the Programs and Features or the Uninstall a Program screen is displayed, scroll through the list of currently installed programs and uninstall AllCheapPeruiCe 5.2, YoubeAdBlocker 1.2, TheBlooccker 1.3, Video Player, Plus-HD 1.3, BetterSurf, CouponMeApp, TubeAdbLOCKER, BLoCKTheADApp 3.2, WatchItAdBlocake, Media Player 1.1, Savings Bull, Start Savin, Websteroids, ScorpionSaver, HD-Plus 3.5, Media Watch, Re-Markit, Remarkable, SupTab, Key-Find uninstaller, Feven Pro 1.2, HD-Plus, HD-Professional-HQ, Quick Share and any other recently installed unknown program from your computer. To view the most recently installed programs, you can click on the "Installed On" column to sort your program by the installation date. Scroll though the list, and uninstall any unwanted or unknown programs.

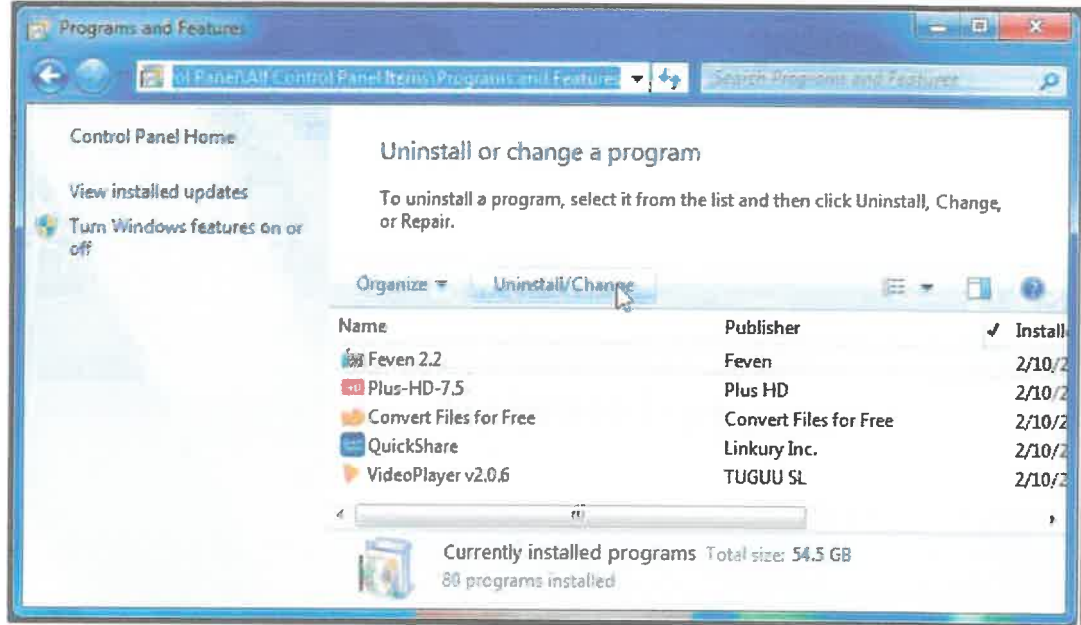


Figure 3.28 List of Program

- iv. Depending on what program has installed the adware infection, the above program may have a different name or not be installed on your computer. If you cannot find any unwanted or unknown programs on your machine, then you can proceed with the next step.

3.3.12 Program Automasi Pejabat by Unit ICT

In this week's, my unit ICT office automation provide a course which aimed to enhance the ICT knowledge among staff in HTM. In addition, the program also aims to teach the staff in HTM to use application contained in a computer properly. In this program, Trainee as a facilitator for teaching staff HTM. HTM staff than there are doctors who are in to learn about ICT. This program is held for two days from morning to evening. It is very tiring but fun treat the staff here because they are close friendly and quick to learn.

On the first day the course was held, the first trainer was Mr. Zaki where he teaches on ICT security. At 10am, Mr Zaki went on to teach about Microsoft Word, Excel. During this lesson, I will be in addition to tutoring the participants to indicate if they do not have time to keep up. On the second day, participants learned about 'OneDrive' and 'Dropbox'. This topic would be told by student's practical. My supervisor challenges students ahead of all staff. In the afternoon, the trainer is Mrs. Hazlienda that teaches about Microsoft Power Point and shows an easy way to create a banner using Microsoft Power Point.

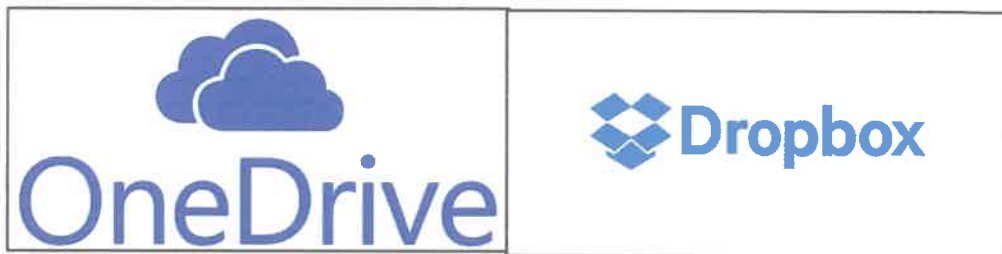


Figure 3.29 One Drive Logo and Dropbox Logo



Figure 3.30 Microsoft Word, Excel, Power Point Logo

3.3.13 Ornamental garden competition

On this weeks, Hospital Tanah Merah will be held competition about ornamental garden for each unit. Then, our department shared the ornamental garden with social department. This competition divided two category, first, flower garden on the ground and second flower garden on cement. Apart from that, our unit take a second category because our unit don't have ground. So, our unit make a one small garden and make waterfall for treatment to all participate which is attend to ICT department and social department.

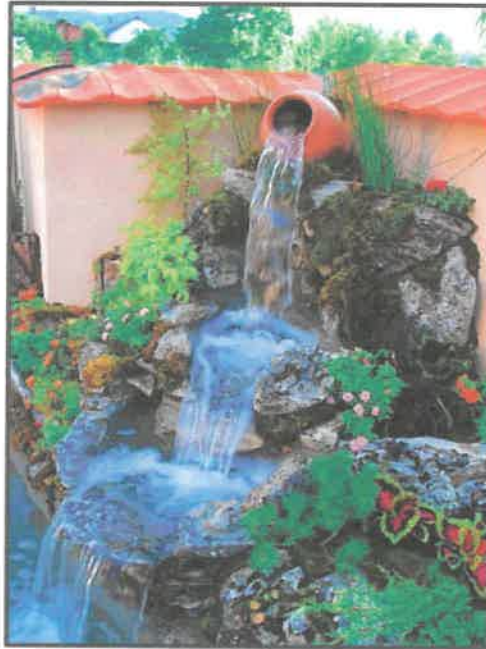


Figure 3.31 Waterfall park

3.3.14 Update fail through Pharmacy Information System (PhIS)

On this weeks, the trainee have tasks from supervisors to update data and information about status doctor from various wad. This because doctor or staff medical need to submit proper letter to ICT unit for enable them to use the PhIS system. When the transaction done, doctor and staff medical can used the system with entered their username and password.




Figure 3.32 Interface of PhIS

Above shows interface for PhIS which is used by doctor and staff medical at Hospital Tanah Merah. Only admin can add and enable of password for all users. The password always used a identity card number for the first time log in but users can change the password after they log in for second time.

For make user enable used this, doctor or staff need to submit the form of Pharmacist Information System (PhIS) to unit ICT and the form need to complete fill and sign by head of department. After that, Unit ICT will be enable the user's password in 10 minutes. Below the example of form PhIS :



USER ID REQUEST FORM

A. USER INFORMATION

Type of Request:	<input type="checkbox"/> New	<input type="checkbox"/> Reset Password	<input type="checkbox"/> Re-activation	<input type="checkbox"/> Change Department
Name:				IC No:
Designation:				HP No:
Job Status:	<input type="checkbox"/> Permanent	<input type="checkbox"/> Temporary	<input type="checkbox"/> Contract	Email:
Department / Ward:				Joint Date:
Granted Location Inpatient :		Granted Location for Specialist Clinic :		
<input type="checkbox"/> Wad 1 <input type="checkbox"/> Wad 2 <input type="checkbox"/> Wad 3 <input type="checkbox"/> Wad 4 <input type="checkbox"/> Wad 5		<input type="checkbox"/> O&G <input type="checkbox"/> PEAD <input type="checkbox"/> Ortho <input type="checkbox"/> SURGICAL		
<input type="checkbox"/> A&E <input type="checkbox"/> ICU/NICU <input type="checkbox"/> HDU (Haemodialysis)		<input type="checkbox"/> Medical & Respiratory <input type="checkbox"/> Psychiatrist		
<input type="checkbox"/> Others _____		<input type="checkbox"/> Visiting <input type="checkbox"/> Others _____		

[For Prescriber Only]

Designation/Job Function:	Prescriber Speciality:
<input type="checkbox"/> Specialist <input type="checkbox"/> Medical Officer <input type="checkbox"/> Housemen Officer	
Prescriber Type: <input type="checkbox"/> Resident <input type="checkbox"/> Part Time <input type="checkbox"/> Visiting	MPM No:
Discipline: <input type="checkbox"/> O&G <input type="checkbox"/> PEAD <input type="checkbox"/> Ortho <input type="checkbox"/> SURGICAL <input type="checkbox"/> Medical <input type="checkbox"/> Others : _____	

B. HEAD OF DEPARTMENT ENDORSEMENT

Name: (Signature & Chop)
Designation:	
Date:	

C. USER ACKNOWLEDGEMENT

I hereby understand and agree to the term forth in PhIS-CPS Guideline and I shall not share my user ID. If I were found to misuse the user ID, disciplinary action shall be taken on me.	
Name: (Signature & Chop)
Designation:	
Date:	

D. FOR ADMINISTRATOR

Created/Updated by:	
Name: (Signature & Chop)
Designation:	
Date:	

Noted :

3.3.15 Update design 'Emergency Plan for Specialist Clinic'

On 2017, Hospital Tanah Merah need to update all of document to the new because of Hospital Tanah Merah renovate and added a new one building left on the old building. During the trainee was there, vision, mission and map for specialist clinic still in process for make a change. This because specialist clinic moved to another placed and better than before. The supervisor was asked the trainee to modify of 'Emergency Plan for Specialist Clinic' to the new one. Below the picture of plan several part of Specialist Clinic.

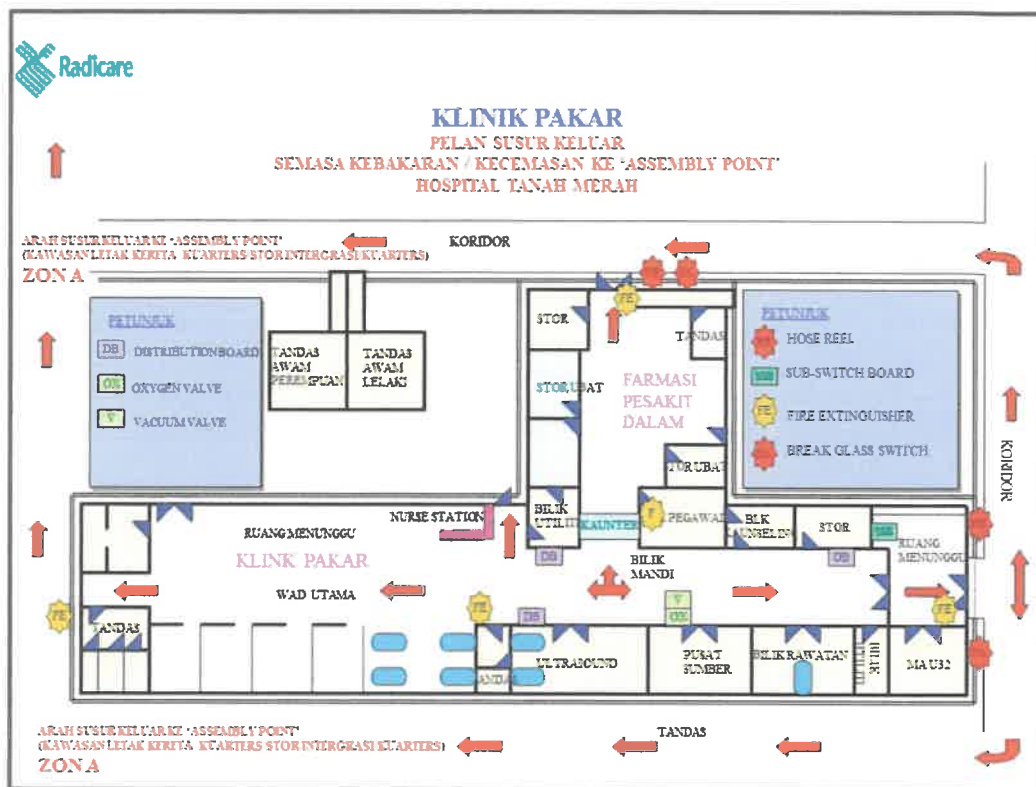


Figure 3.33 Plan Emergency



3.4 SPECIAL PROJECT

3.4.1 Description of project

Hospital are the essential part of our lives, providing best medical facilities to people suffering from various ailments, which may be due to change in climatic conditions, increased work-load, emotional trauma stress etc. It is necessary for the hospitals to keep track of its day-to-day activities & records of its patients, doctors, nurses, ward boys and other staff personals that keep the hospital running smoothly & successfully.

But keeping track of all the activities and their records on paper is very cumbersome and error prone. It also is very inefficient and a time-consuming process Observing the continuous increase in population and number of people visiting the hospital. Recording and maintaining all these records is highly unreliable, inefficient and error-prone. It is also not economically & technically feasible to maintain these records on paper.

Thus keeping the working of the manual system as the basis of our project. We have developed an automated version of the manual system, named as “Hospital System Management”.

The main aim of our project is to provide a paper-less hospital up to 90%. It also aims at providing low-cost reliable automation of the existing systems. The system also provides excellent security of data at every level of user-system interaction and also provides robust & reliable storage and backup facilities.



3.4.2 Objectives of the system:

The project “Hospital management system” is aimed to develop to maintain the day –to-day state of booking meeting room in Hospital Tanah Merah in circle of Phamarcist here. It is designed to achieve the following objectives:

- i. To computerize all details information about booking meeting room such capability, date, time and who in charged the meeting room.
- ii. Scheduling the services of specialized doctors and emergency properly so that facilities provided by hospital are fully utilized in effective and efficient manner.
- iii. The inventory should be updated automatically whenever a transaction is made.
- iv. The information of the staff HTM should be kept up to date and there record should be kept in the system for historical purposes.



3.4.3 Methodologies for Data Collection

a) Primary data collection

- Raw data (also known as primary data) is a term for data collected from a source. Raw data has not been subjected to processing or any other manipulation, and are also referred to as primary data. Primary data is a type of information that is obtained directly from first-hand sources by means of surveys, observation or experimentation. It is data that has not been previously published and is derived from a new or original research study and collected at the source such as in marketing. Primary data collection are observed and recorded directly from respondents. The information collected is directly related to the specific research problem identified. All the questions that one asks the respondents must be totally unbiased and formulated so that all the different respondents understand it.

b) Secondary data collection

- Secondary data is data collected by someone other than the user. Common sources of secondary data for social science include censuses, organizational records and data collected through qualitative methodologies or qualitative research. Primary data, by contrast, are collected by the investigator conducting the research.



3.4.4 Project planning (Baseline Project Plan)

3.4.4.1 Accessing project feasibility

Accessing project feasibility must be developed in order to ensure a good project management can be achieved by an organization. This process involve an action by measuring the resources used, budgeting, and time consuming when develop this project. While developing a project, everything must be measured in order to ensure that all the process involved moved smoothly to its goals without any limitations. The importance of the project will be determined through several factors such as economy, technical, operational, scheduling legal and contractual and political.

3.4.4.2 Accessing project economic feasibility

Financial management is one of the most important parts in developing this project. Financial management involves all the budgetary that have been used in the beginning of the project until to the end. Accessing project economic feasibility is a process of identifying all the cost related in with the project development. At the beginning of the process, the cost involved in developing the project should be identified accurately to avoid future waste and not enough budgets to continue the project. The table below shows the total cost of software and equipment used in developing this project.

Table 3.3 Financial Management

No.	Product	Price per unit	Total (RM)
1.	Adobe Photoshop CS6	RM 2300	RM 2300
2.	Adobe Dreamweaver CS6	RM 1500	RM 1500



3.4.4.3 Assessing technical feasibility

Technical feasibility defined as a process of assessing the development organization's ability to construct a proposed system. Every project have its own risks whether it involve large or small project. There are several vital risk factors that our company needs to concentrate which are the project size, project structure, development group and user group. The effect of not assessing and managing risk can include:

- a) Failure to attain expected benefits from the project
- b) Inaccurate project cost estimates
- c) Inaccurate project duration estimates
- d) Failure to achieve adequate system performance levels
- e) Failure to adequately integrate the new system with existing hardware, software, or organizational procedures.

3.4.4.4 Accessing operational feasibility

Operational feasibility is the process of assessing the degree to which a proposed system solves business problems or takes advantages of business opportunities. I needs to predict and examining the probability the project will achieved its goals or objectives. I will observe the development of the project move to its desired goals smoothly or not. If not, the project will be stopped for a short period of time to analyzing which part of the problem occurred and solve it as soon as possible to avoid another problems. To maintain the system movement, I will observe the organization for the first six month after the system has been launched. I will check the system works properly or not. IT technician at the company will be given training in order to maintaining system by themselves after six month ends. Next, IT technician at the organization will be monitored to decide whether they need training or I have to maintain the systems.



3.4.4.5 Accessing schedule feasibility

Assessing schedule feasibility is the process of determining the project time frame and completion dates whether it meets organization deadlines or not. Scheduling is one of the vital parts in development of the project which it also can determine the cost spend by our company. Company profits and loss are important in order to proceed maintaining the system. Gaining an understanding project time frame and completion dates will helps our company to achieve our goals on time and meets our customer requirement.

i. **Milestone and deliverable:**

Table 3.4 Company profit

Task	Duration	Milestone and deliverable
Requirement Analysis	10days	SRS Doc. (Milestone)
Planning Hospital Management System	20days	HMS executing Doc. (Milestone)
Designing HMS software	15days	HMS Software (Deliverable)
Documentation	15days	User manual (Deliverable)

*Date not includes weekend days.

II. GANT chart



































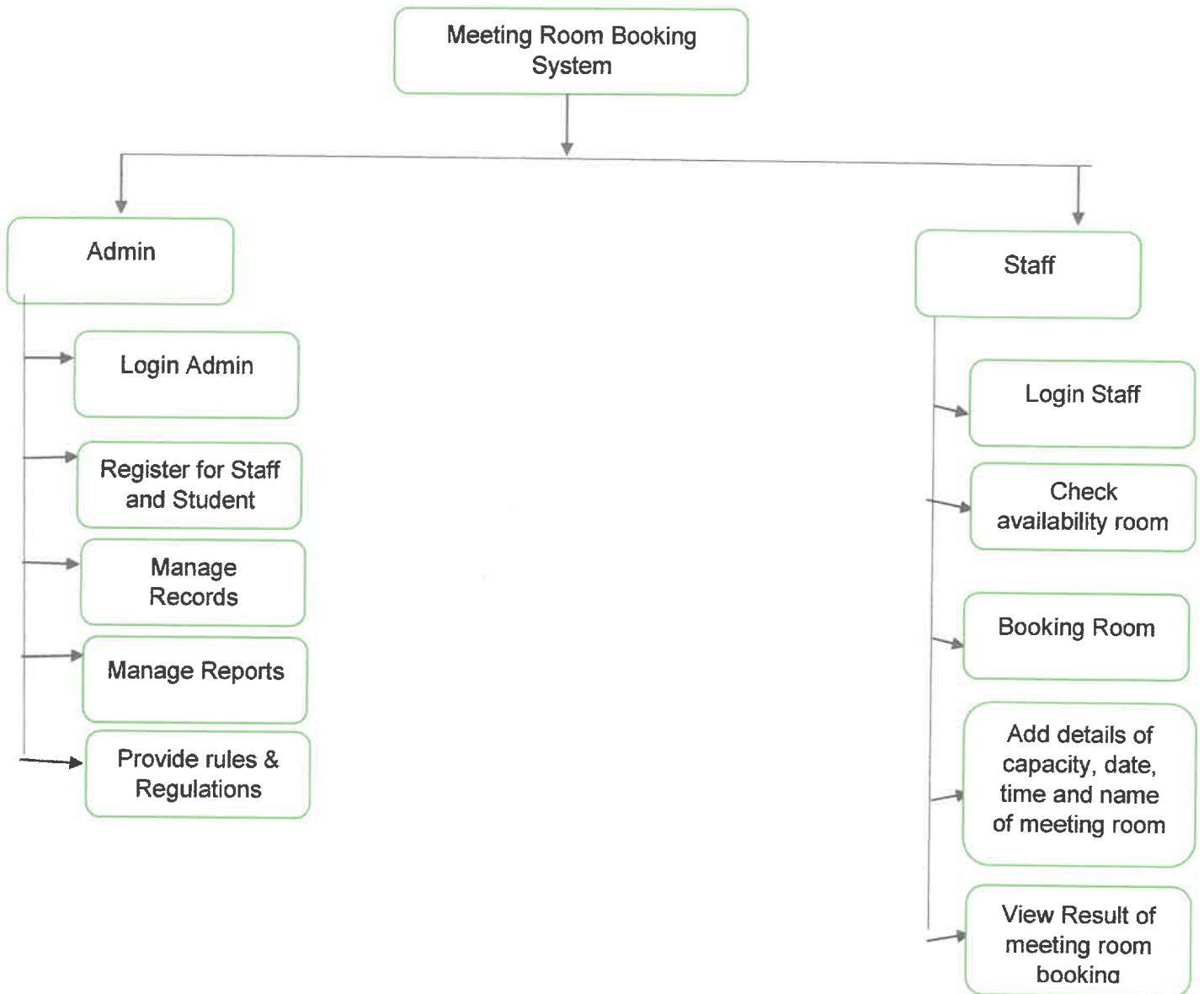
		Task Mode	Task Name	Duration	Start	Finish
1			- Start	2 days	Mon 13/02/17	Tue 14/02/17
2			Introduction	2 days	Mon 13/02/17	Tue 14/02/17
3			Problem Background	2 days	Wed 15/02/17	Thu 16/02/17
4			Proposed solution	2 days	Sun 19/02/17	Mon 20/02/17
5			Project Planning Centre	8 days	Tue 21/02/17	Thu 02/03/17
6			Project Management	2 days	Sun 05/03/17	Mon 06/03/17
7			- Scheduling Planning	47 days	Tue 14/03/17	Wed 17/05/17
8			Gantchartt	2 days	Tue 14/03/17	Wed 15/03/17
9			WBS	2 days	Wed 15/03/17	Thu 16/03/17
10			Risk Management	4 days	Sun 19/03/17	Wed 22/03/17
11			- Required Analisis	20 days	Wed 29/03/17	Tue 25/04/17
12			Process Modelling	20 days	Wed 29/03/17	Tue 25/04/17
13			Context Diagram	5 days	Wed 26/04/17	Tue 02/05/17
14			Level 0 DFD	5 days	Wed 03/05/17	Tue 09/05/17
15			- Data Modelling	3 days	Mon 15/05/17	Wed 17/05/17
16			ERD	3 days	Mon 15/05/17	Wed 17/05/17
17			- Entity Modelling	3 days	Thu 18/05/17	Mon 22/05/17
18			ELH	3 days	Thu 18/05/17	Sun 21/05/17
19			- Data Dictionary	3 days	Mon 12/06/17	Wed 14/06/17
21			Architecture Design	2 days	Tue 20/06/17	Wed 21/06/17
20			Design Principles	2 days	Thu 15/06/17	Fri 16/06/17
22			Intractive Screen	2 days	Mon 19/06/17	Tue 20/06/17
23			Programming Environment	4 days	Wed 21/06/17	Sun 25/06/17
24			Testing	3 days	Sun 25/06/17	Tue 27/06/17
25			Final Documentation	3 days	Tue 27/06/17	Thu 29/06/17
26			Stop	1 day	Fri 30/06/17	Fri 30/06/17

Figure 3.35 Gantchart

III. Work Breakdown Structure (WBS)





3.4.4.6 Assessing legal and Contractual Feasibility

Assessing legal and contractual feasibility is a process of assessing the legal and contractual ramifications of the proposed system development project. This process explain that system developer have to make sure the system is not against any legal and contract during the system development. There are several parts that developer needs to concentrate of such as copyright, contractual agreement, laws and local or international legislation.

3.4.4.7 Assessing Political Feasibility

Assessing political feasibility is the process of determining how the stakeholders view the proposed system. Types of information that been publish from the system may affect the organization. Information with benefits can make the organization becoming trusted organization which it assist user. But, if the system is not giving any benefits to organization, those stakeholders could not support the project and take several actions to stop, reject, or the organization needs to change to objectives or focus of the project development.

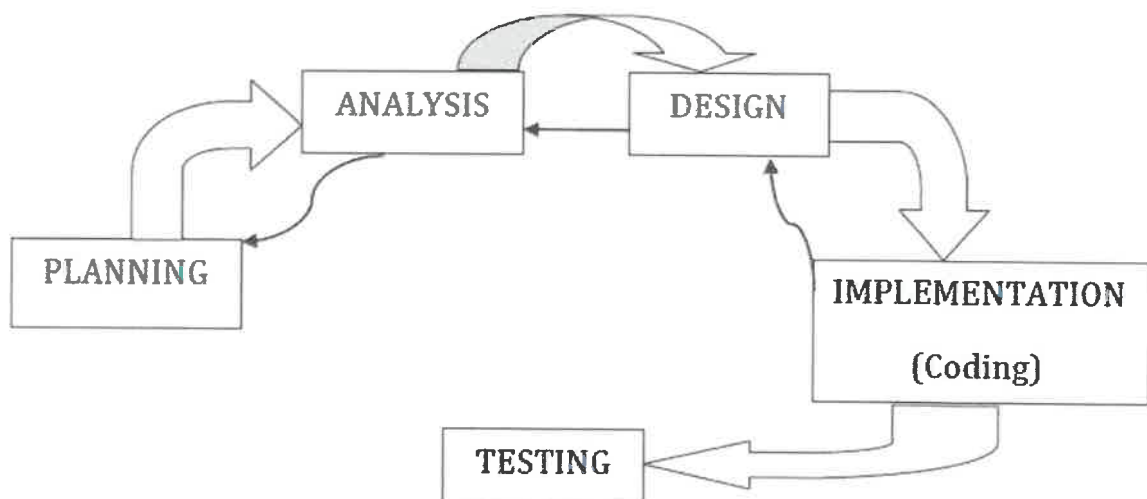
3.5 Selection of Methodology

As per the project management there should be a proper selection of the methodology so on that contrast we have to select the methodology for our project i.e. Hospital Management System. The method being used in developing the system is the System Development Life Cycle (SDLC). The SDLC process includes project identification and selection, project introduction and planning, analysis, design, implementation and maintenance.

Purpose of Methodology:-

- It provides us with a framework for planning the project.
- The quality of a software development effort is improved by using selected process techniques.
- It helps in software development with less errors and therefore, provides shorter delivery times and better value.

General structure of Life Cycle Model



Each phase produces deliverables required by the next phase in the life cycle. Some phases are also inter-related with other phase. Planning is done in the first and analysis of the system is continued after that. Analysis of the system is being translated into design. Code is produced during implementation that is driven by the design. Testing verifies the deliverable of the implementation phase.



- i. **Planning** It is the very first phase of the system, in which we decide what the task is for and what all things we have to do for completion of the project in an easier and healthy way.
- ii. **Analysis** It is second and also considered as an important phase of the life cycle model. In this phase, the existing system is studied by collecting the information through the Internet and analyzed the information to get alternatives for the use of proposed system.
- iii. **Design** This is where the details on how the system will work are produced. Architecture, including hardware and software, communication are all part of the deliverables of a design phase.
- iv. **Implementation** This is the longest phase of the software development life cycle as the code is produced from the deliverables of the design phase during implementation.
- v. **Testing** During testing of the system, the implementation code is tested to make sure that the product is actually solving the needs addressed and gathering the other information. Unit testing and system testing are done during this phase.

Scope of a methodology: - Methodology helps in giving direction, it saves time and it improves the quality of deliverables.

Structured Systems Analysis and Design Method:

SSADM is a method which deals with the information of system design. It is comparatively old system designed for large scale projects. SSADM has been traditionally used for the development of medium or large system. SSADM uses a combination of text and diagrams throughout the whole life cycle of a system design, from the initial design idea to the actual physical design of the application. These are followed by requirements analysis, requirements specification, logical system specification and a final physical system design.



Reasons of using SSADM in our system are as follows:

- SSADM reduces the error rate and risk by checking the system.
- SSADM is less expensive and time-consuming as compared to other methodology.
- SSADM separates the logical and the physical systems design. So the system does not have to be implemented again with new hard -or software.
- SSADM does not require very special skills and can easily be taught to the staff.
- The system model is developed and a comprehensive demand analysis is carried out by the help of SSADM.
- SSADM improves the overall productivity of the specific project and the company.

3.6 Structuring Systems requirement: Process Modeling

Logical Process Modeling is the representation of a business process, detailing all the activities in the process from gathering the initial data to reaching the desired outcome. It is used to model the detailed requirements of an application system.

3.6.1 Context Diagram

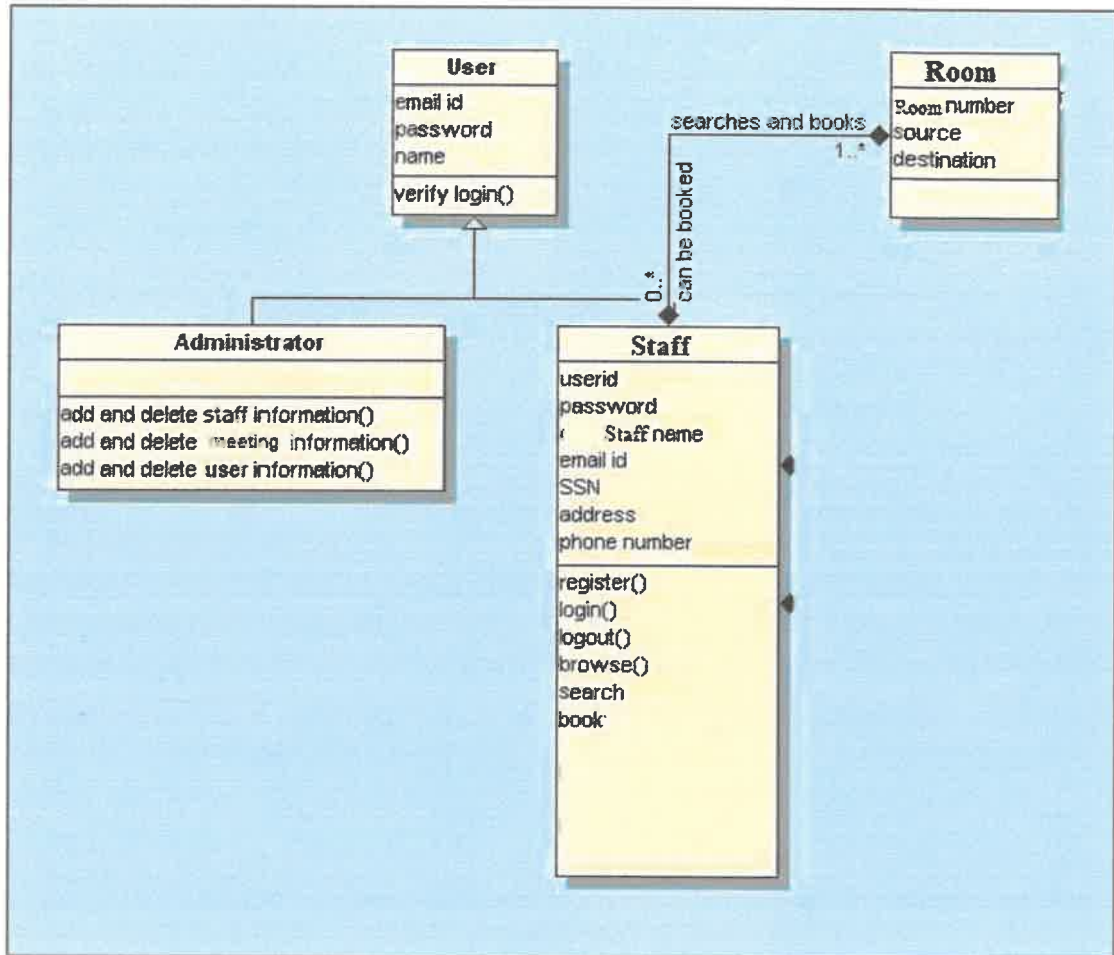


Figure 3.36 Context Diagram



3.6.2 Class description

Table 3.5 class description

Class description	Function
USER	The user class is responsible for handling all the user functions. This user class is the super class or the base class for two types of users namely the customer and the administrator. The user logging into the system will be mainly verified for their username and password, which is the email id for the customer and a username for the administrator.
ADMINISTRATOR	The administrator class is the sub class of the user class. This class is mainly depicted here to define all the attributes and functions carried out by the administrator of the Hospital Management System
STAFF	The staff class has been depicted here as it is a sub class for the super class user of the Hospital Management System project. The attributes for the staff would be the userid, password, staff name, email id, credit card number, address, phone number.
ROOM	The class room is depicted in the class diagram to represent the set of room present in the application. The staff can book using the MRBS pages.

3.6.3 Data Flow Diagram

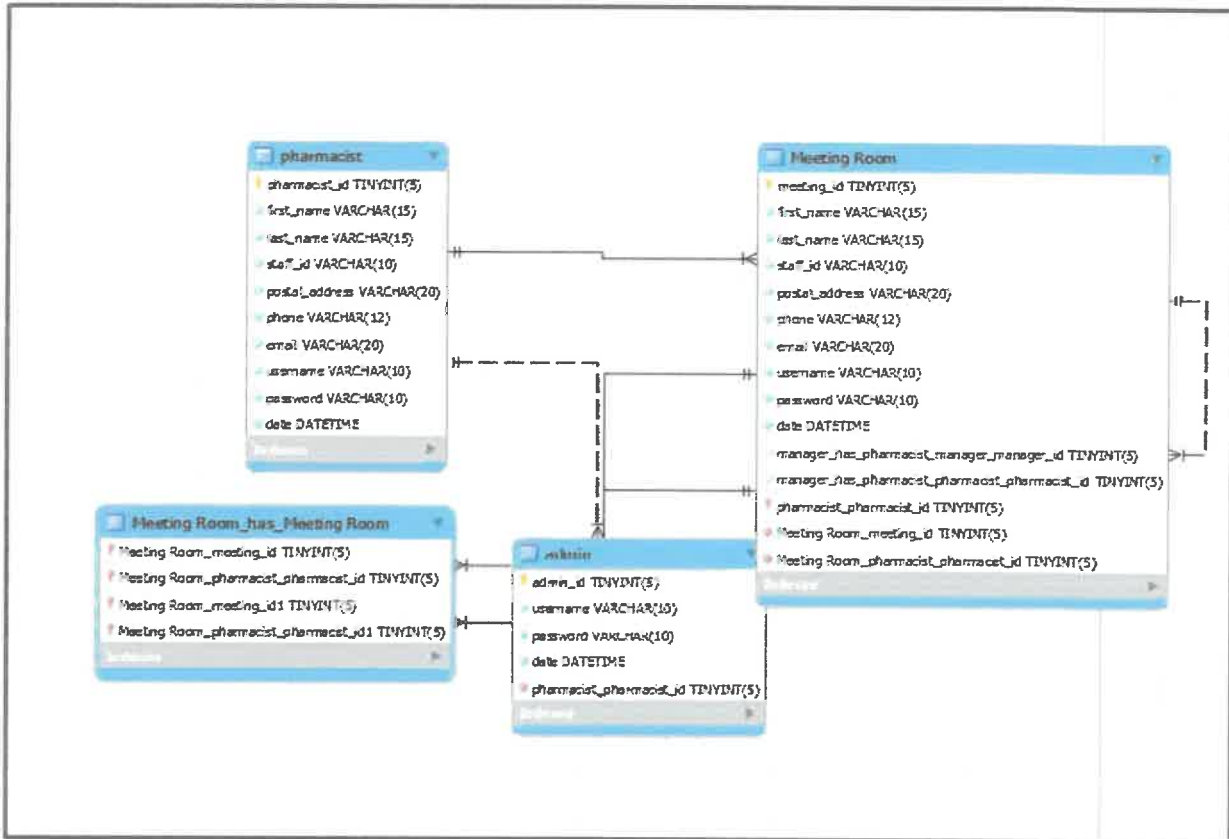


Figure 3.37 DFD



3.6.4 Data Modelling

a) Entity

An entity is something, real or abstract, about which we store information. For our system there are basically these three entities:

1. Admin
2. Staff
3. Room

b) Relationship

A relationship is an association that exists among entities. For our system we have following relationships among 2 specified entities:

- One Admin can register many Staff (0:N)
- One Admin can add many Rooms (0:N)
- One Admin can view many Reports of Staff, Rooms (0:N)
- One Admin can delete many Staff (0:N)
- One Admin can edit information of many Staff (0:N)
- One Staff can check payment of Room(1:N)
- One Staff can view many Reports of Rooms (1:N)
- One Staff can edit information of many booked Rooms (1:N)
- One Staff can search many rooms (2:N)
- One Staff can book many rooms (2:N)



3.6.5 Data Dictionary

a) Table : Admin

Table 1.6 data dictionary table admin

Table Name	Attribute Name	Content	PK OR FK
Admin	Admin ID	Admin Unique Number	PK
	Fname	Admin First Name	
	Lname	Admin Last Name	
	Phonenumber	Admin Phone Number	
	Email	Admin Email	

b) Table : Room

Table 3.7: Data Dictionary table room

Table Name	Attribute Name	Content	PK OR FK
Room	Room ID	Room Number	PK
	Name	Room Name	
	Type	Room Types	
	Condition	Room Condition	

c) Table : Staff

Table 3.8: Data Dictionary table staff

Table Name	Attribute	Content	PK OR FK
Staff	Staff ID	Staff's Unique Number	PK
	Fname	Staff's First Name	
	Lname	Staff s Last Name	
	Address	Staff's Address	
	Phone Number	Staff's Contact Number	



3.7 Interface design

3.7.1 Admin and Pharmacist Login



Above shows the home page of “Hospital System Management” web based system. This interface contains Login for admin and pharmacist. This system available for Admin and Pharmacist Hospital Tanah Merah.

3.7.2 Admin Dashboard

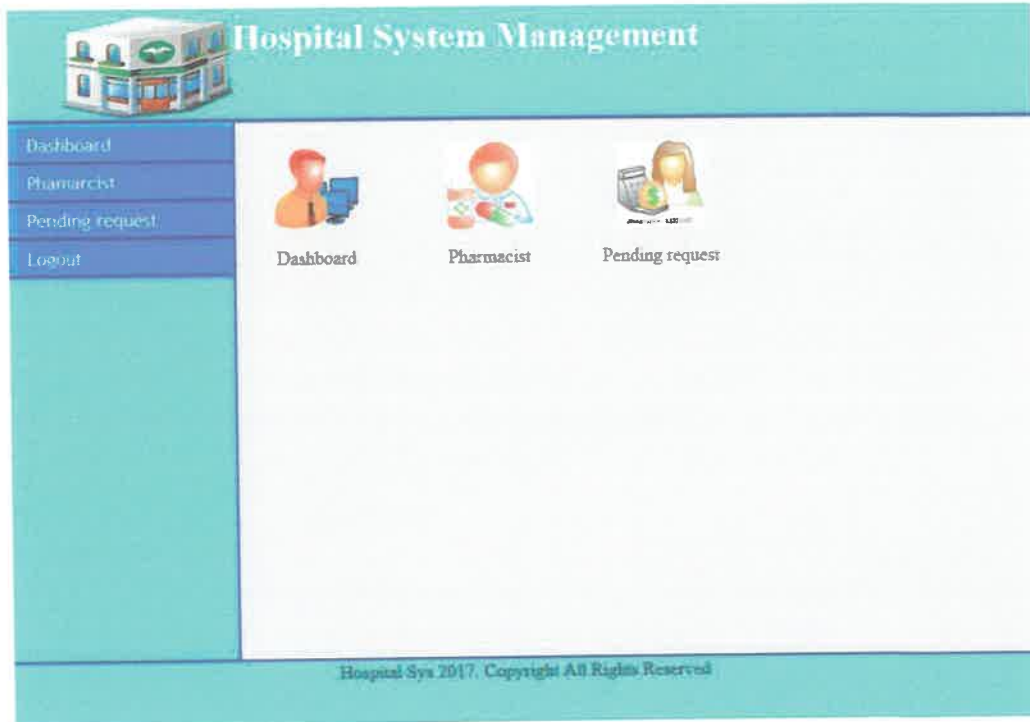
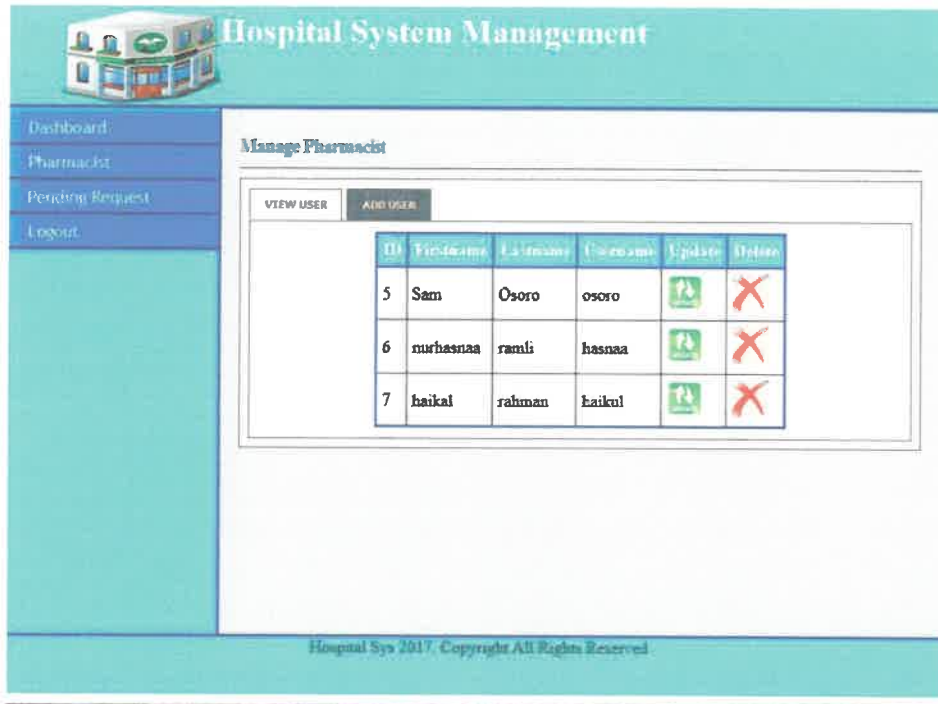








Figure shows the Dashboard page for admin. From here admin can register to the system by providing their necessary details (Username, First Name, Last Name etc.).

3.7.3 Admin list of Pharmacist



Hospital System Management

Manage Pharmacist

ID	First Name	Last Name	Username	Update	Delete
5	Sam	Osoro	osoro		
6	nurhasnaa	ramli	hasnaa		
7	haikal	rahman	haikul		

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Figure shows the manage pharmacist page for admin. From here admin can update to the system by providing their necessary details (Username, First Name, Last Name etc.).



3.7.5 Pharmacy dashboard

The screenshot displays the 'Hospital System Management' interface. On the left is a navigation menu with 'Dashboard', 'Booking Room', and 'Logout'. The main content area is titled 'Details' and contains a table of room bookings. Above the table are two buttons: 'VIEW AVAILABLE' and 'ADD BOOKING'. The table has columns for ID, PT Name, Room Booking, Purpose, Status, Date, and Delete. Three rows of data are visible, all with a status of 'Available' and a red 'X' in the delete column.

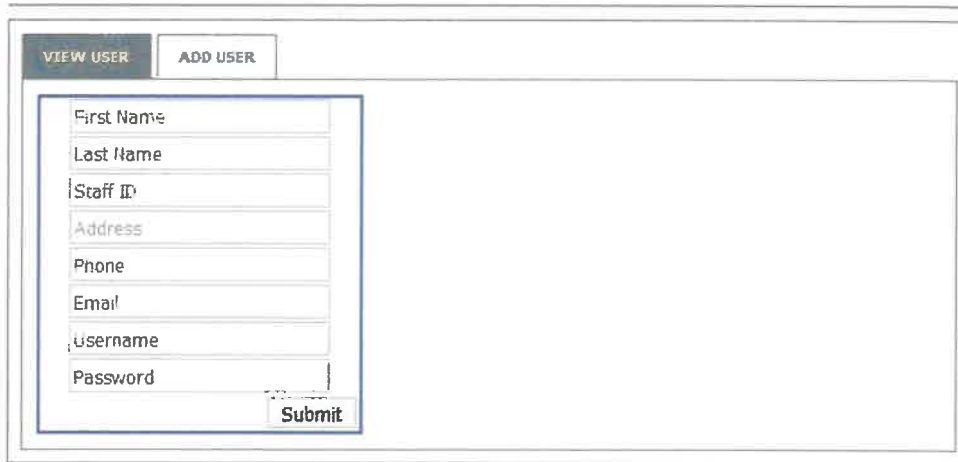
ID	PT Name	Room Booking	Purpose	Status	Date	Delete
8	Flagi	talet	Digestive	Available	2017-03-30	X
11	ph.ammar	Bilik Mesyuarat	CME	Available	2017-07-07	X
13	Muzir	Bilik Mesyuarat	CME	Available	2017-07-09	X

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This figure show for interface pharmacist to booking meeting room for CME and presentation. By clicking the button 'add booking', pharmacist can booking their meeting room.

3.7.6 Interface add user

Manage Pharmacist



The screenshot displays a web interface titled "Manage Pharmacist". At the top, there are two tabs: "VIEW USER" and "ADD USER". The "ADD USER" tab is active. Below the tabs is a form with the following fields: First Name, Last Name, Staff ID, Address, Phone, Email, Username, and Password. A "Submit" button is located at the bottom right of the form.

This interface for admin. In ICT department Hospital Tanah Merah, only admin can add user this system. By request form which prepared, pharmacist can apply that and sent to ICT department then admin will be enable the password.



3.8 Unit testing

A unit is the smallest testable part of an application. The primary goal of unit testing is to take the smallest piece of testable software in the application, and isolate it from the remainder of the code, and determine whether it behaves exactly as expectations of the developer. Each unit is tested separately before integrating them into modules to test the interfaces between modules.

I. LOGIN MODULE

Test Case Name		Login Module Testing		Test Case No.		HMS -01	
Purpose of Test				Check the correctness & Integrity of Login Module.			
Test Attribute				<input type="checkbox"/> By default cursor will be in User Name text field. <input type="checkbox"/> After entering User Name, cursor should switch to password field by using Tab Key or by clicking on the password textbox. <input type="checkbox"/> Sign in option is there to log into the system after fulfilling mandatory details.			
Test Focus	Function	Feature	Process	Interface	Validation	Verification	
x	x	Whether the complete Login module is working properly or not.	x		Proper validation for User ID, Password and other fields are given or not.	At last complete Login module is verified.	
Test Type				Beta Testing			
Test Process		Initiation	Starting Condition	Input Specification	Outputs Expected	Assumptions Made	
User starts the system from the computer.		Screen shows login module i.e. admin login form	<input type="checkbox"/> User ID, password are entered. <input type="checkbox"/> Submit button clicked.	<input type="checkbox"/> Successful Login. <input type="checkbox"/> Failed login due to incorrect field entry. <input type="checkbox"/> Failed login due to fields not filled	<input type="checkbox"/> Password has minimum 4 characters.		
Test Results		Criteria	Expected Result	Actual Result	Error Description	State	
User ID		As per database entry	As per database entry	-		Error Free State	
Password		As per database entry & both the attribute should match.		In some cases both the attributes doesn't match.		Errorless State	
Action				In case of any error, user has option to click on the forgot password and retrieve the password by filling in the mandatory details.			



II. REGISTRATION MODULE

Test Case Name		Registration Module Testing		Test Case ID		HMS-02	
Purpose of Test				To check the validity & performance of Registration process of a executive done by the admin			
Test Attribute				<input type="checkbox"/> By default cursor will be in First Name <input type="checkbox"/> Then the admin should click on the email id field, the security question and finally the answer field. <input type="checkbox"/> Submit option is there to make the specific student a user of the system after fulfilling mandatory details of the same.			
Test Focus	Function	Feature	Process	Interface	Validation	Verification	
Whether admin can register the executive or not	×	Whether the whole Registration module is working properly or not.	×	×		At last whole Registration module is verified	
Test Type				Beta Testing			
Test Process	Initiation	Starting Condition	Input Specification	Outputs Expected	Assumptions Made		
User starts the system from the computer.	Screen shows register executive form.	<input type="checkbox"/> Required fields have been filled. <input type="checkbox"/> Register is clicked.	<input type="checkbox"/> Successful registration. <input type="checkbox"/> Unsuccessful registration due to incorrect field entry or empty field.	<input type="checkbox"/> All fields are mandatory to fill			
Test Results	Criteria	Expected Result	Actual Result	Error Description	State		
All Fields Should be filled properly	As per the validation given by admin		As per the validation given by admin		Errorless state		
Action				In case of non comprehensible error the admin has the option of going back to the previous home screen and start the registration of the executive again.			



3.8.1 Integration testing for login, register a staff & room book

Integration testing is a logical extension of unit testing. In this testing strategy, different units that have already been tested are combined into a component and the interface between them is tested. Integration testing identifies problems that occur when units are combined. Thus Integration testing is the phase of software testing where individual software modules are combined and tested as a group.

Testing for Hospital management system				
Test Strategy			Integration Test	
Testing Modules			login, Register, room book, staff	
S. No	Condition Tested	Expected Result	Actual Result	Remarks
1	After providing user id and password in login module. Whether user go to next page. After providing all necessary fields for issue and register whether the task is fulfilled.	If user enters correct data than he proceeds	As per Expected Result	Pass
2	Data is transferred properly between the pages	Data should transfer from one page to another without any hindrance	As per Expected Result	Pass



3.8.2 System testing

The system test will focus on the behavior of the system as a whole. User scenarios will be executed against the system as well as error messages and navigation will be tested.

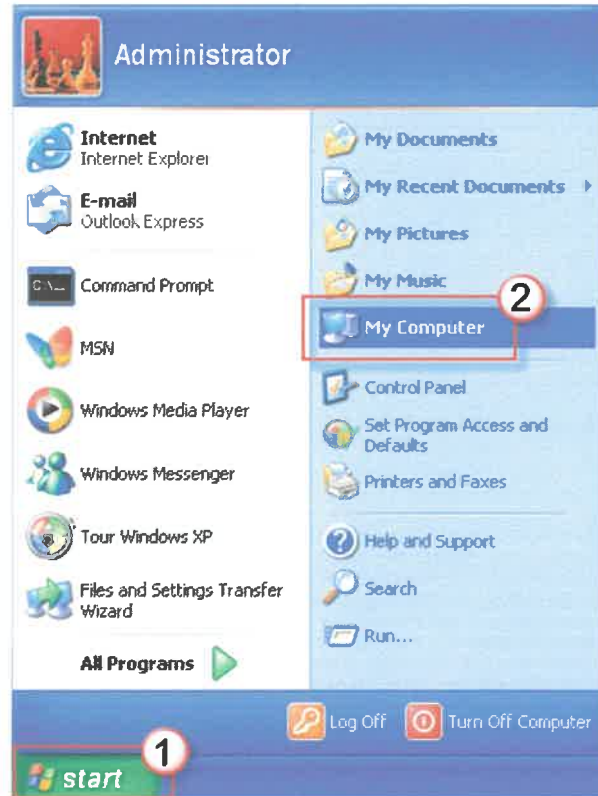
Methodology: Overall it will test the integrity of the system and verify if it meets the specifications in the requirement specifications.

Testing for Hospital management system				
Test Strategy		System Test		
Testing Modules		Complete system testing includes login, Register, room book, payment accounts, customer accounts etc.		
S.No	Condition Tested	Expected Result	Actual Result	Remarks
1	Getting the reports of executive accounts, room book accounts, customer accounts, payment account	If user enters correct data than he proceeds	As per Expected Result	Pass
2	Data is transferred properly between the pages	Data should transfer from one page to another without any hindrance	As per Expected Result	Pass
3	admin is able to view any report whenever he wants to get	If user enters correct data than he proceeds	As per Expected Result	Pass

3.9 User Manual for protected 'Wannacry'

3.9.1 User Manual for disable files sharing support (Window XP)

Step 1:



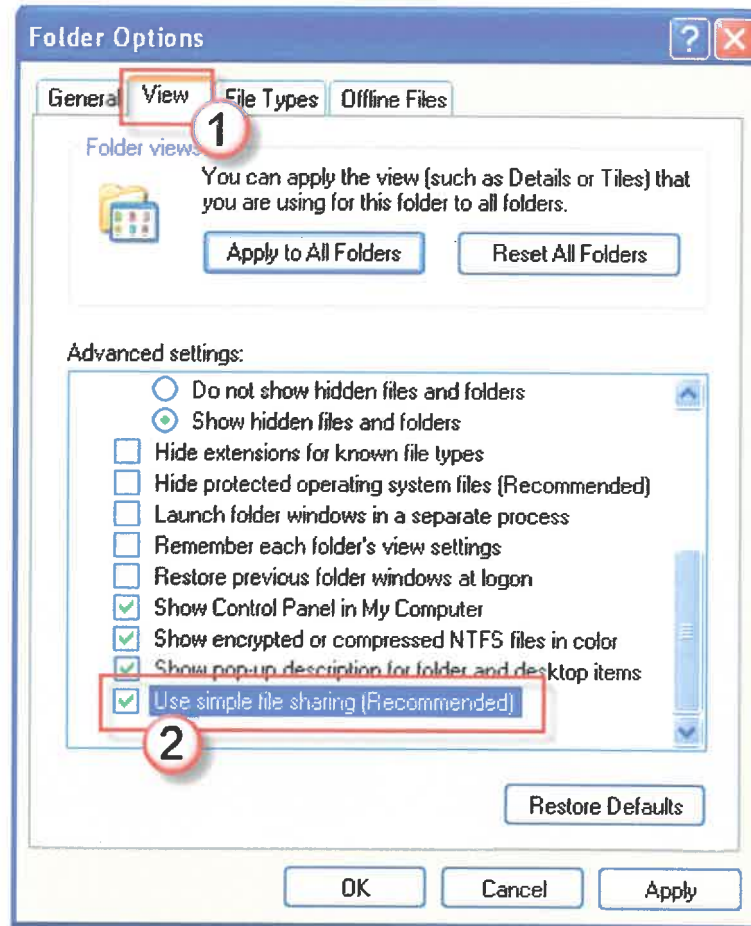
Click Start, and then click My Computer on the desktop.

Step 2:



On the Tools menu, click Folder Options.

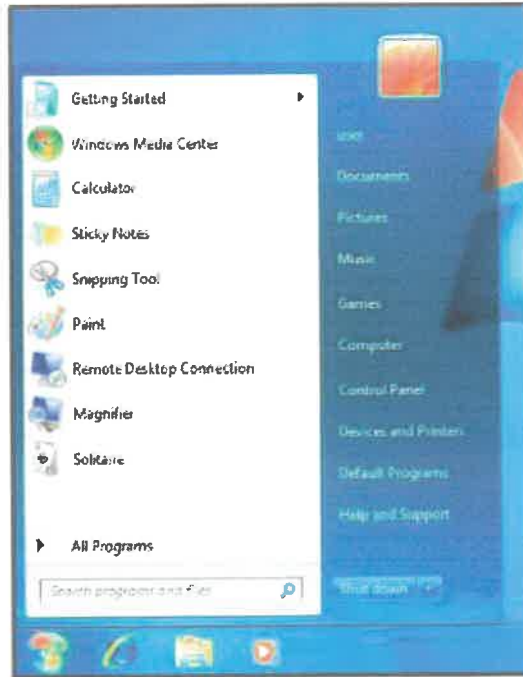
Step 3:



Click the View tab, and then select the Use Simple File Sharing (Recommended) check box to turn on Simple File Sharing. (Clear this check box to turn off this feature.). Click OK to close the Folder Options window. The settings for Simple File Sharing are now updated; no computer reboot is required.

3.9.2 User Manual for disable File Sharing Support (Window 7)

Step 1:



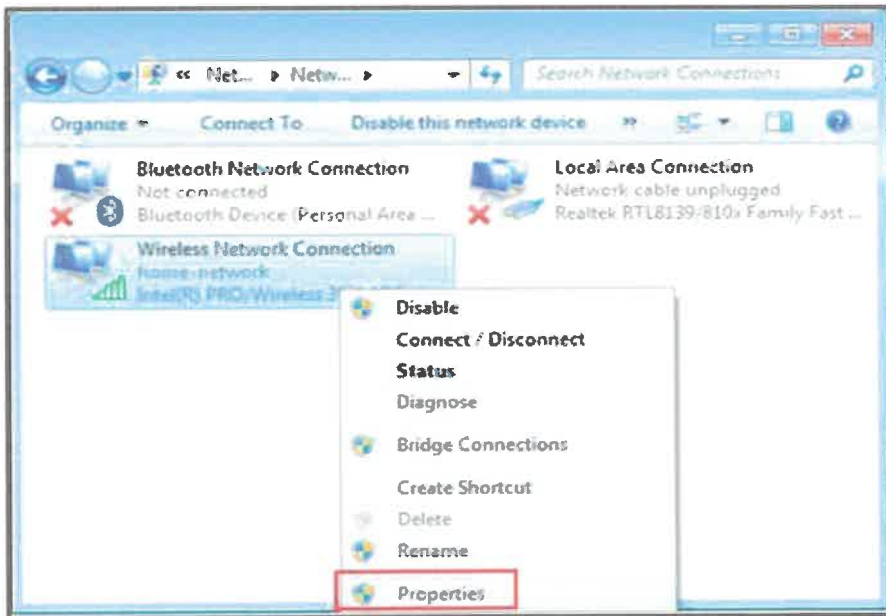
Go to **Start** and click on **Control Panel**. Proceed to click **View network status and tasks** in Control Panel window.

Step 2:



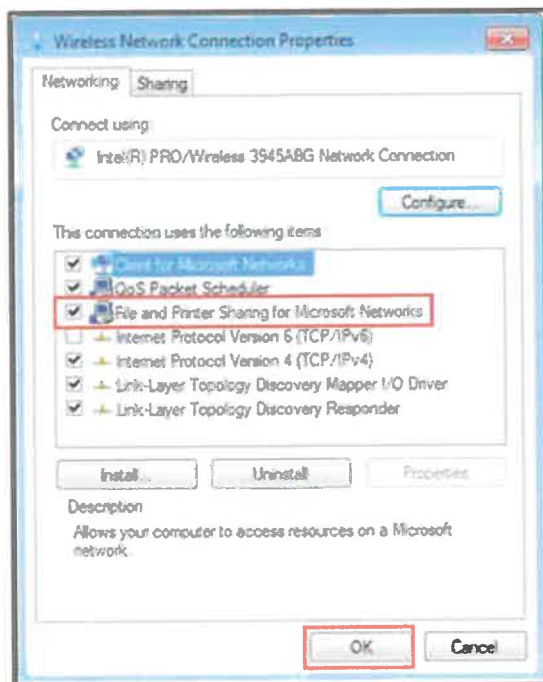
Network and Sharing Center window will appear, after that click **change adapter settings**.

Step 3:



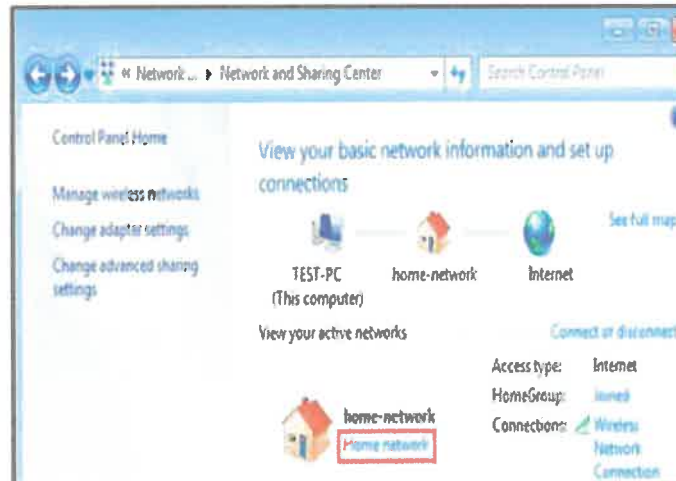
Network Connections window will appear. Here you can right click on the network adapter (can be wireless adapter or wired Ethernet adapter) that you are using and click **Properties**.

Step 4:



Your network card's properties window will appear, then tick **File and Printer Sharing for Microsoft Networks** if it's not tick, finally click **OK**.

Step 5:

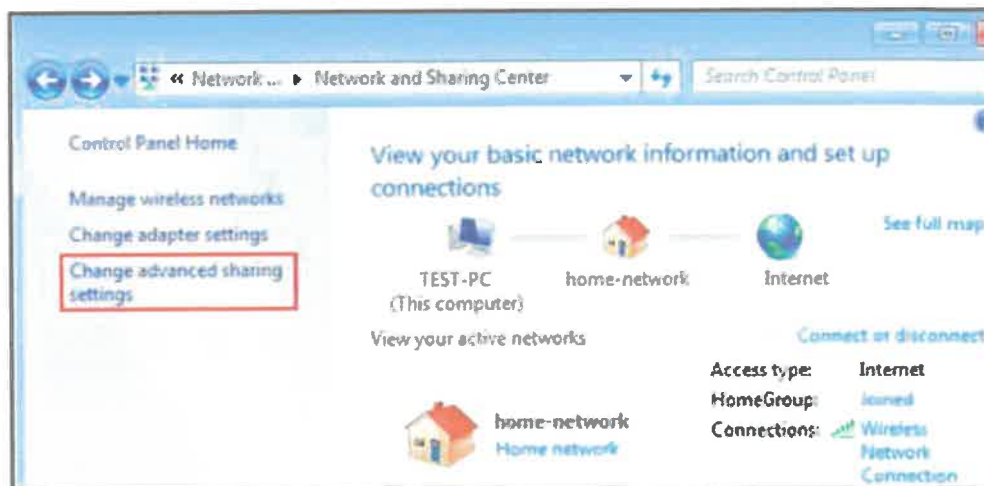


Let's move back to Network and Sharing Center window, make sure you have selected the appropriate [network location type](#) before enabling file sharing, mostly home network or work network type. In this case, my network location type is **home network**.

Note: I would also advise you to set the same [Workgroup](#) for all computers on the same network in order to ease the file sharing.

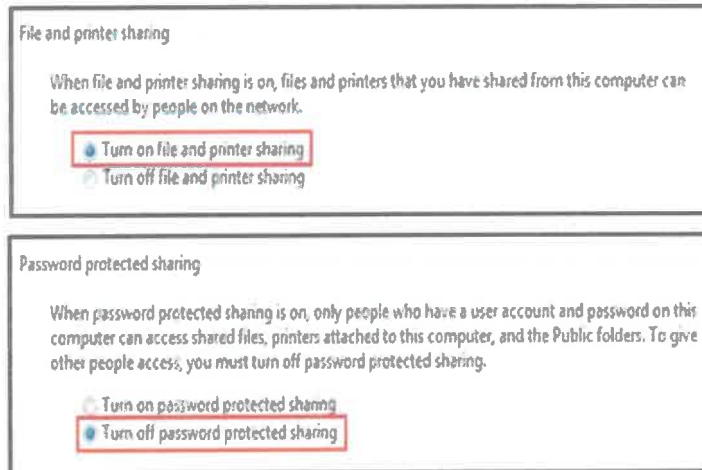
Note: You are also advised to enable [network discovery](#) too, so your computer can discover and locate other computers.

Step 6:



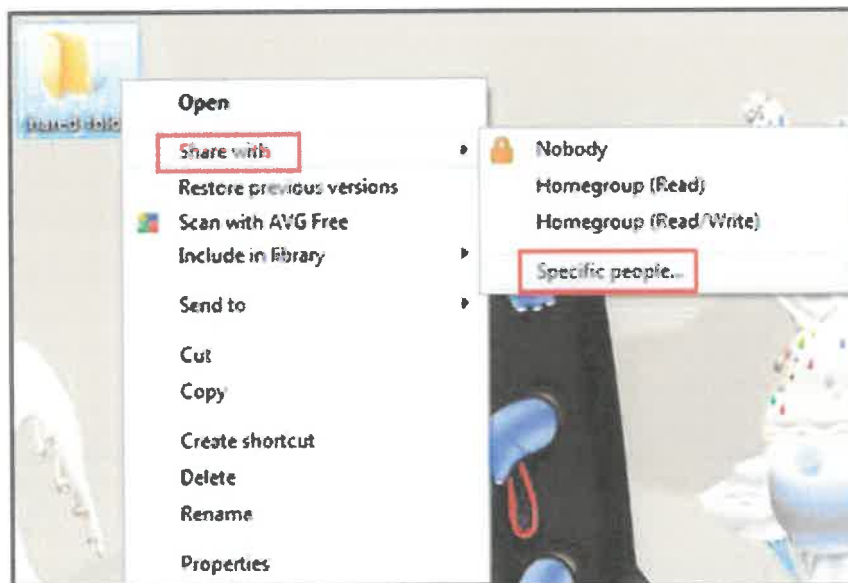
Now you can proceed to click on **Change advanced sharing settings**.

Step 7:



Here you need to **locate your current set profile** (home or network in this case), and turn on/off following settings. Click on **Save changes** at last.

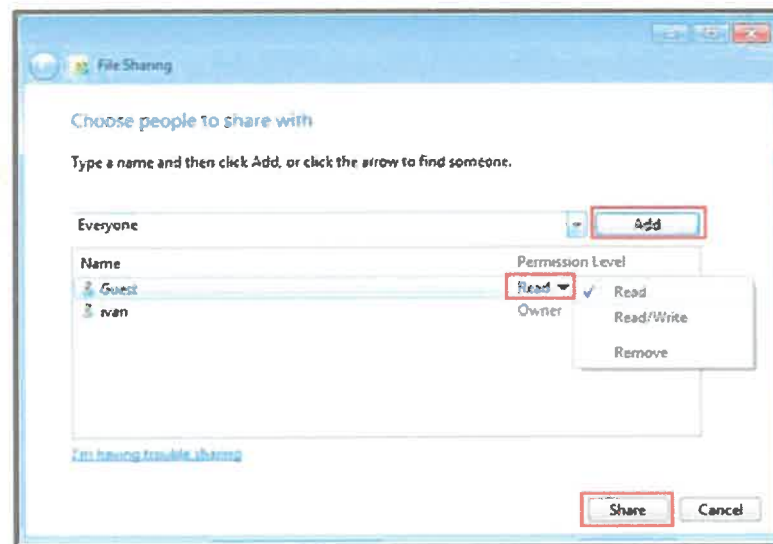
Step 8:



Right click the file or folder you plan to share, select **Share with** and click on **Specific people**

Note: If you don't see the **Share with** menu, you might be trying to share an item on a network or other unsupported location. It also won't appear when you select files outside your personal folder.

Step 9:



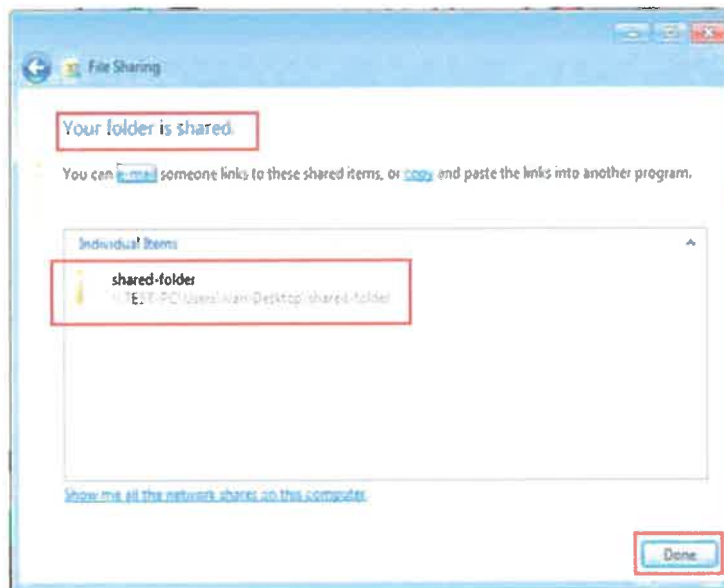
File sharing window will appear, and here you can select or key in the people you would like to share the file/folder with and click **Add**. In this case, I added user Guest and also set the Read permission level. Finally click **Share** to do sharing.

Note: You can set 2 different permission levels for each people you selected:

Read - Can open, but not modify or delete the file.

Read/Write - Can open, modify, or delete the file.

Step 10:

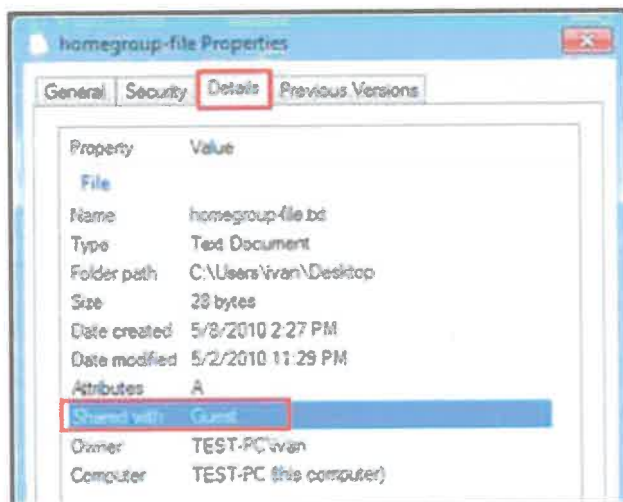


The next window will tell you that your file/folder is shared, click **done** to close the window. Basically you have done file sharing in windows 7.

Step 11:

You will notice there is no change on the shared file/folder icon, but if you right click the shared folder and click on **Properties**. Then go to **Sharing** tab, it will show that folder is shared. Ok. That folder and content can be accessed from other computers now by referring to that network path. Remember to disable this file sharing after completing your tasks!

Note: If you just shared a file, right click the file and click on **Properties** and go to **Details** tab, it will show you the users that the file shared with.



Note: You should also click on **Security** tab. Check the group or user names that are allowed to access this file/folder, and make sure the user/group that you allowed to access during sharing process just now is listed here as well (usually will be added automatically when you do file/folder sharing), if not click **Edit** to add those missing user/group.

If the specific user/group you allowed during sharing process does not match the user/group listed here, the missing user might not be able to see that shared file/folder at



*all! Or the user will get prompt saying that **you might not have permission to use this network resource** when try to access this shared file/folder from other computer.*

3.9.3 User Manual for disable File Sharing Support (Window 8.1)

Step 1:

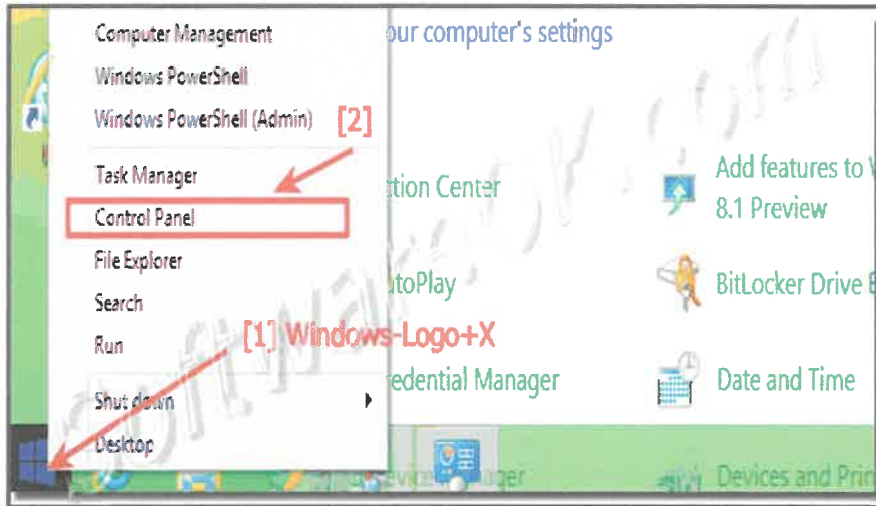
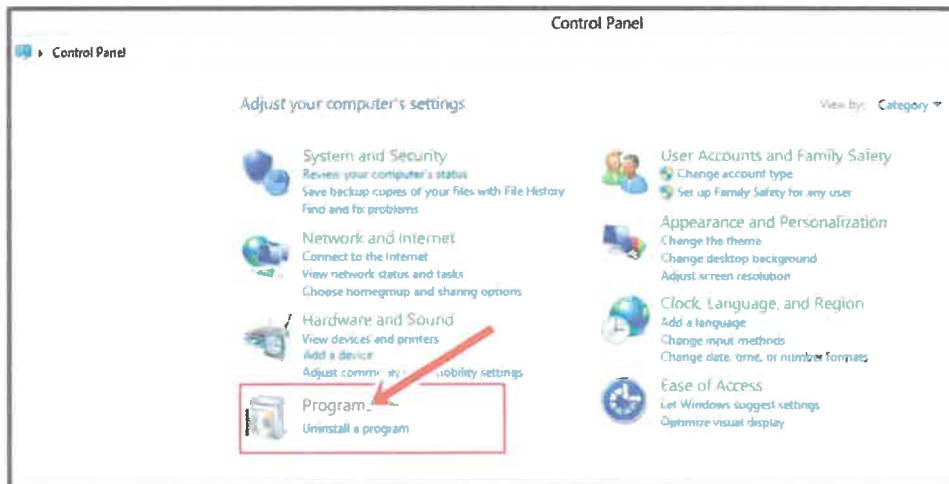


Figure 3.38: Startup Window

Right-click on the 'START' and select **CONTROL PANEL**

Step 2:



This page will be appear. Click on the 'PROGRAM'

Step 3:

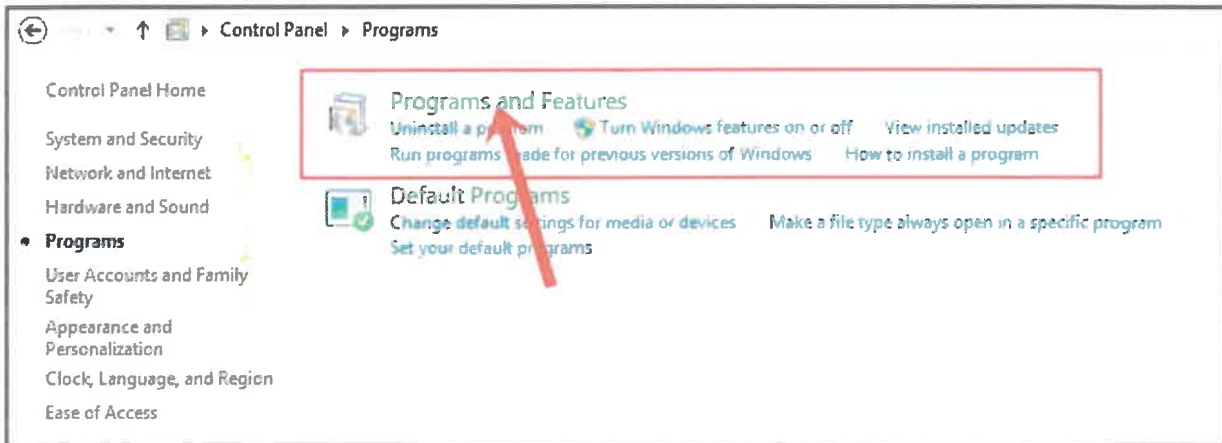


Figure 3.39: Program

Click on the 'PROGRAM AND FEATURES'

Step 4:

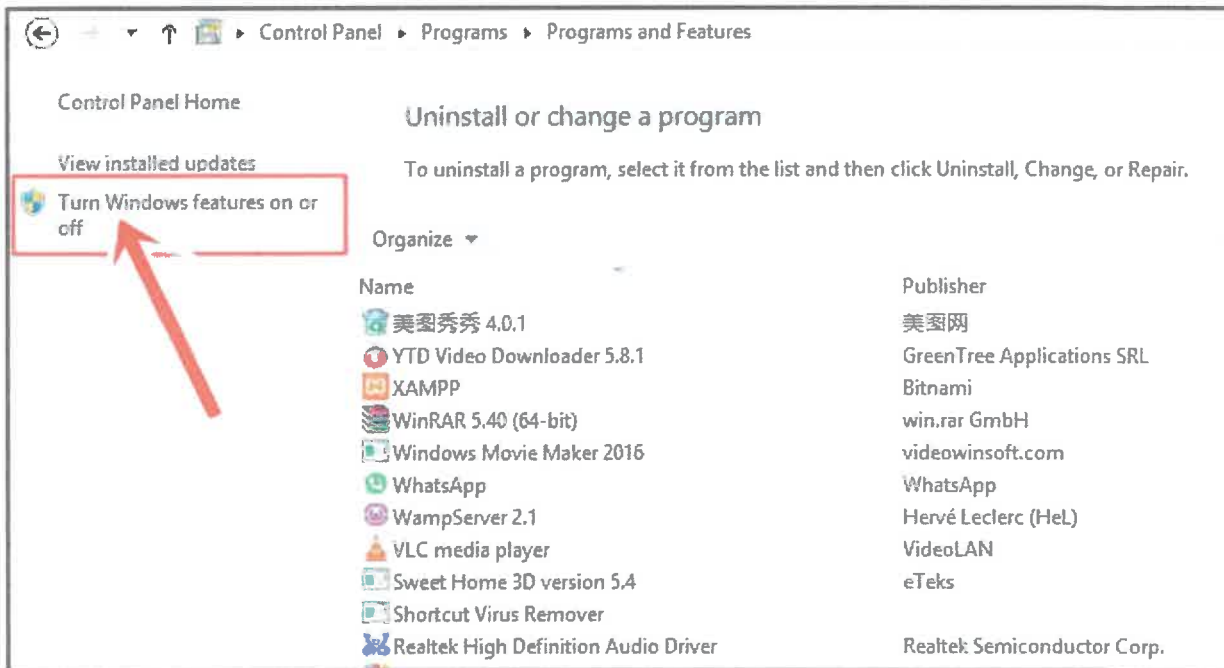


Figure 3.40: Programs and Features

Then, click on the 'TURN WINDOWS FEATURES ON OR OFF'

Step

5:

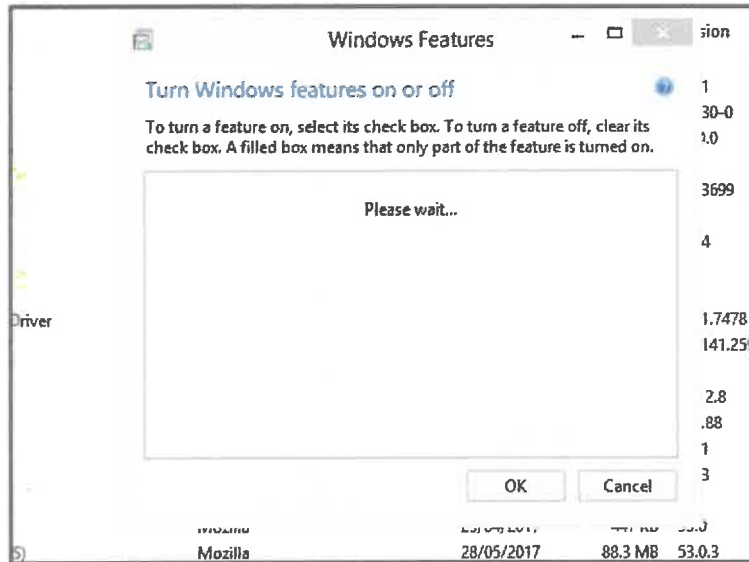


Figure 3.41: Window Features

The pop-up will come out and you have to wait for several minutes for window displays all the files there.

Step 6:

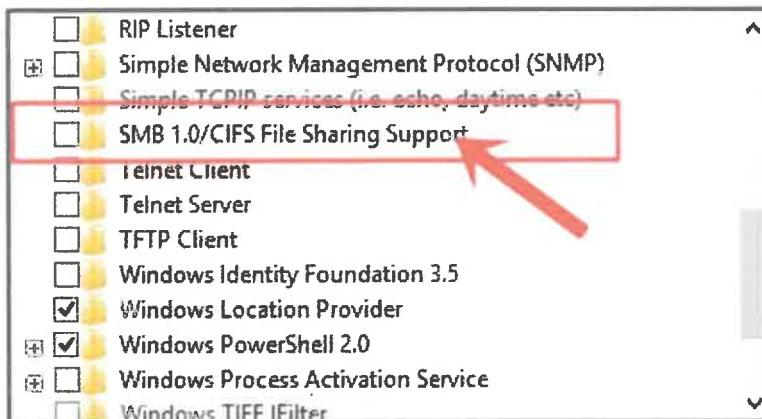


Figure 3.42 SMB 1.0/CIFS File Sharing Support

Untick 'SMB 1.0/CIFS File Sharing Support' for disable this function. Click "OK" button.

Step 7:

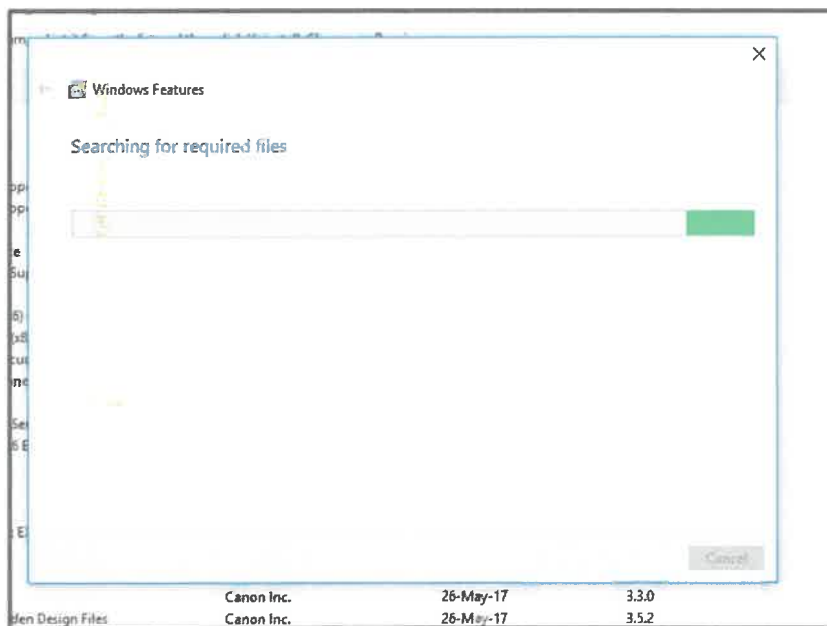


Figure 3.43: Searching files

This pop-up will be appear.

Step 8:

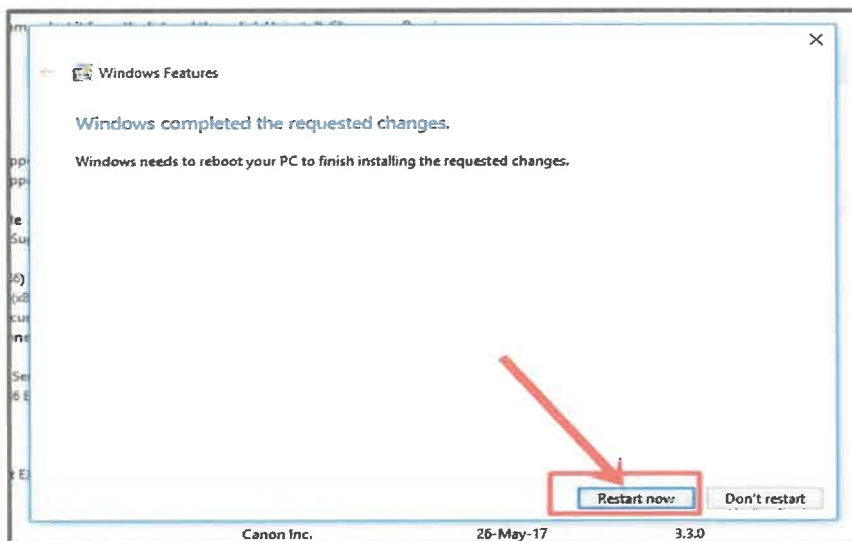


Figure 3.44: Restart

Click button 'RESTART' to reboot your PC to finish installing the requested changed.

3.9.5 User Manual for disable File Sharing Support (Window 10)

Step 1:

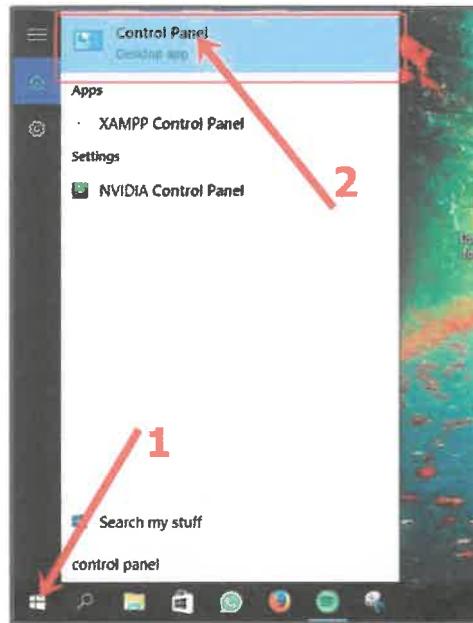


Figure 3.45: Search Control Panel

Click button 'WINDOW' then search 'CONTROL PANEL'

Step 2:

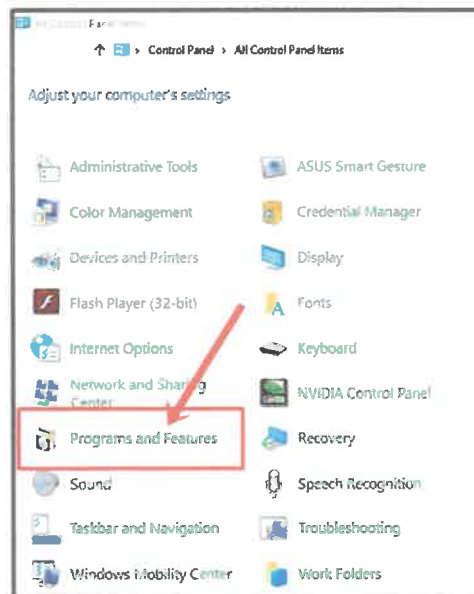


Figure 3.46 Program and Features

Click on the 'PROGRAMS AND FEATURES'

Step 3:

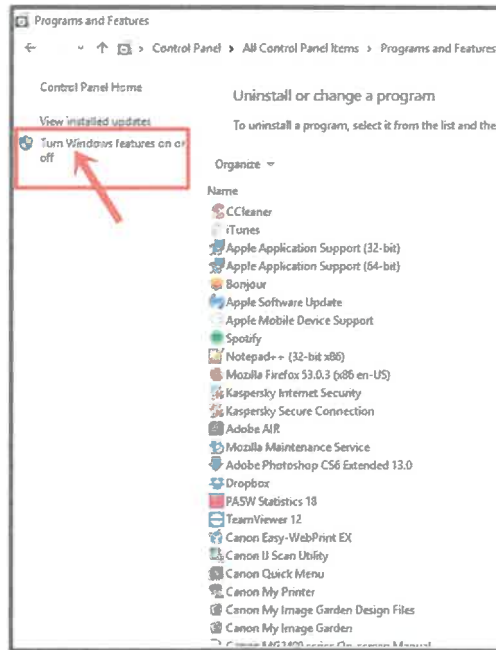


Figure 3.47 Turn window features on or off

Then, click on the **'TURN WINDOW FEATURES ON OR OFF'**

Step 4:

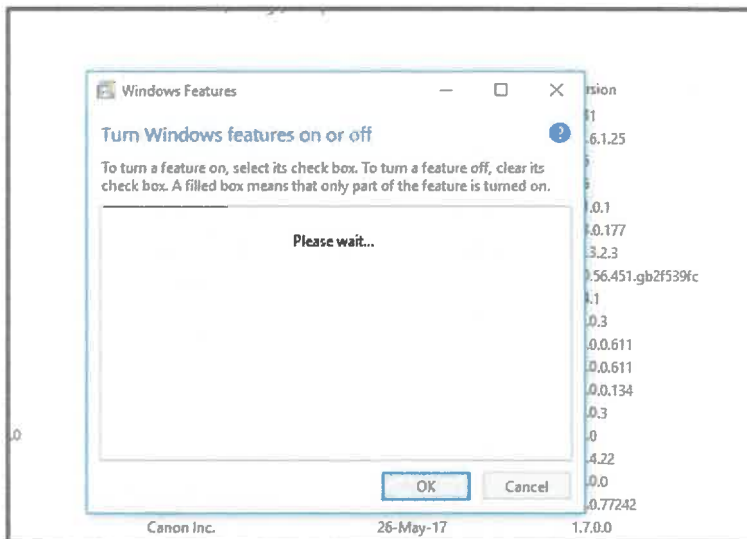


Figure 3.48 Pop up window features

The pop-up will come out and you have to wait for several minutes for window displays all the files there.

Step 5:

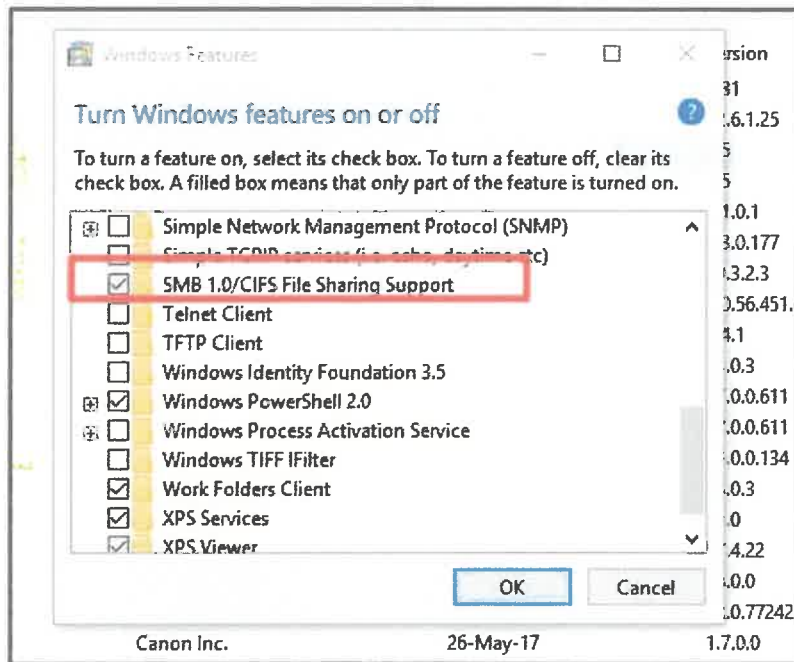


Figure 3.50 SMB 1.0/CIFS File Sharing Support

Untick **'SMB 1.0/CIFS File Sharing Support'** for disable this function. Click "OK" button.

Step 6

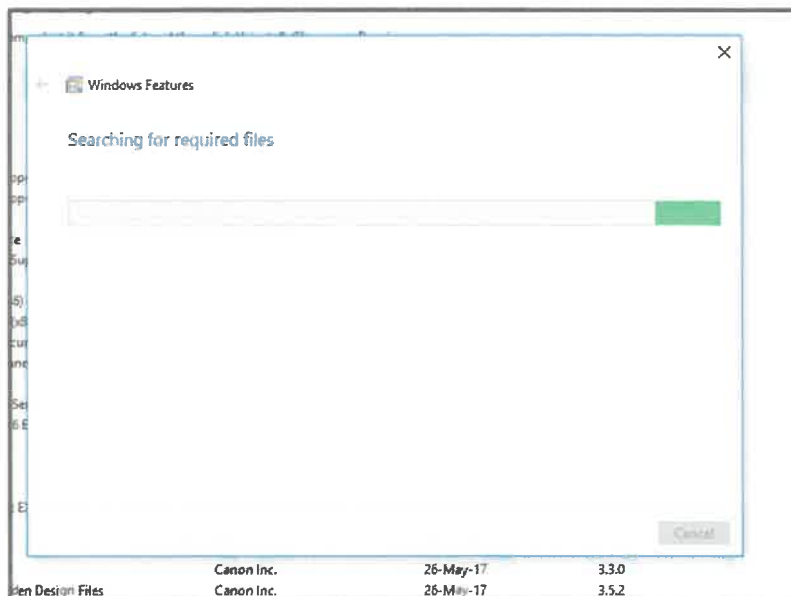


Figure 3.51 Searching files

This pop-up will be appear.



CHAPTER 4: CONCLUSION (COMMENTS, ISSUES AND RECOMMENDATIONS)

4.1 Introduction

During my time as a practical student here in Unit Information Communication Technology (ICT) Hospital Tanah Merah, Kelantan, I have been observing and recording every necessary detail to complete my coursework. This chapter will contain my personal comment, issues that needs to be addressed and propose recommendations if necessary as long as they do not affect the reputation of Unit ICT, Hospital Tanah Merah, Kelantan.

4.2 Application of knowledge, skills and experience in undertaking the task

The 5 month provided by UiTM for this industrial training is found to be extremely long for me. Practical training is done so that students can be exposed into the working world and tastes of what it feels like to do adult tasks. It is also another way to apply the theory that I have been learnt in Information System Management. However, the working timeframe of just 5 month does not provide enough coverage to learn everything I want to know there. In addition, the industrial training for my course need special project. So, I need divide my time to 2 part. First, for daily task given by my supervisor then second, special project provided by faculty. It left me wanting more than what I could get. The staffs were very helpful but time was against my side. The training was also conducted during the fasting month, constraining the amount of work I could do.

Being in the Unit Information Communication and Technology I have recognized a great deal of potential that can further elevate its stature. If the issues mentioned in 4.3 are addressed and rectified, I am positive that their department can provide an excellent service.

4.3 Limitation and Recommendation

As a practical student I am obligated to pinpoint issues that can affect the level of performance in Unit Information Technology and Communication. The condition for this is to not give away company secrets and affect the reputation of the department negatively.

5 month is not enough to cover every single issue in detail and it does not reflect the overall annual job performances. Therefore, it is important for readers to note that what has been written here is solely based on my observation during the limited time.



4.3.1 Staffing

For me, the problem here is not enough staff. I've mentioned earlier, the staff in these units is three. And sometimes one or two staff will be on leave simultaneously. This led to a more disorganized staff to make daily work, answering calls, here and there to solve the problem. In addition, some staff also like to take a half-day leave in the evening causing no staff to head office and to take it out of office. Sometimes, staff from other units in the system has a problem that involves a network pharmacy. Indeed, we as students will practically take notes but sometimes staff there need immediate assistance. There is a stage, all staff have attended courses in different places and offices do not have people. This causes, doctor of management and staff also difficult to make a loan laptop and LDCs.

Recommendation: In my opinion, the head of the unit should take this as a responsibility. I would not say the head of the unit are not good in managing it but sometimes when the office becomes vacant it difficult for management staff and doctors to do their jobs. besides, no doubt the head of the ICT unit is quite good but sometimes allow staff to go home early also makes it difficult for her work. Additionally, reduced staff was not able to be added because of government budget deficits. Should, ICT units only help to solve the problem of the system not to repair the equipment.

4.3.2 Equipment

At Department ICT because these units are a bit cramped cause the items in this insufficient equipment. Besides, chairs and tables are not sufficient for practical student. This causes practical students had to share a table with other students and causing practical student no privacy between students. For me, the privacy between others need although only practical student. Besides that, equipment like laptop and LCD sometimes no enough for doctor because somedays many doctor got to CME or presentation. As always, practical doctor from Lincoln University College will be make borrowed by unit ICT to presentation, CME, assignment and others. Apart from that, other staff and top management also borrowed this laptop and LCD for their purpose.



Recommendation: Fund purchases of equipment depends on the financial units. The result made they are difficult to buy essential items. This again, due to the financial balance out the money they had for all units. Sometimes, there is every unit needs a lot of money to support a program or course. SO, I think ICT staff need to creative in make the comfortable places. In addition, the lack of equipment can be balanced if they do not receive many students practical. Maybe they just need to take only three students practical considering there were only three tables in the room. Apart from that, during there are days that led to the ICT unit and cause a lot of people crowded in there so had the students practical exit to the outside unit.

4.3.3 Communication with client

This unit a lot here to talk with customers. Irrespective of doctors, nurses, students practical doctors, auditors, directors and many others. Regardless of the call or continue talking next to the remains called communication. At here, communication with client very important to us because we mediation in this hospital. We have term used when to serve customers. As example, "Hello, Assalamualaikum. Can I help you, madam/sir?". But, sometimes staffs didn't perform properly their job and sometimes postpone for customer request because of lack of staff. Besides that, sometimes staff moody and serve customer not full heart. Then, sometimes it takes more times to customize themselves with customer.

Recommendation: I think they need to improve their level of communication skill then no need to judge people through dressing, face or so on. Just serve them like customer they deserves. Apart from that, they need to know how to differentiated top management, and others management. I'm not to make this unit look a bad but sometimes them slanderers superiors and sometimes like to talked politics in their work. I not angry just like the way they criticize, but they actually didn't know what is happening in the political world. So I'm tired of hearing it. Then, I'm just thinker I'm only practical student. For me, they should not talked about politic in unit because the topic very sensitive and sometime we as an outside people didn't know how top management struggle to make netizen comfortable.



4.4.4 Environmental

Unbalanced atmosphere. Sometimes noisy sometimes desolate without staff. Due to uncertainties caused students have practically no regular daily task. In addition, staff in the unit ICT in a month that staff late to thumbprint then sometimes they arrived 8.10am that sometimes I had to wait outside the office door safely half an hour. In addition, if big boss no in office, the other two staff sometimes 8.30am arrived to offices.

Recommendation: I think they need to standardize their duty table so that they can arrived early. Apart from that, if they late came to office they need to inform all of practical student so practical student no need came early and waited them to open the offices. And my suggestion, if inevitable staff need prepared chair or waiting places for student or other to easier they sit and waited. I a little bit pity for some people which is need to stand up as long as they're there. Or, the other solution is staff can give duplicate key to student for easier to open offices and make a setup on offices. I think this can help actually to make transaction going faster.



4.4 Personal thought and opinion

As a staff members you will have an opportunity to discuss these expectations as part of the annual. This an occasion for you to reflect on how well you demonstrate these skills, attributes and behaviors, and to indicate where more support might be helpful. For example staff are expected to show their initiative where it is appropriate. But have you been given adequate opportunities to demonstrate how well you do this?

4.4.1 Personal effectiveness

Staff of the unit ICT are expected to demonstrate personal responsibility. Personal responsibility can be demonstrated in a variety of ways. For example, staff are generally expected to exhibit self-control, calmness and restraint, even in stressful situations. Staff are also expected to demonstrate, trustworthiness, reliability and loyalty. Personal effectiveness includes being client-focused that is understanding and responding with courtesy and respect to people within and external to the Hospital community Effective staff also think about how to do their job better and they seek out opportunities for learning and development.

4.4.2 Working collaboratively

Staff Uni ICT need to work collaboratively, and are expected to do so in a department manner. Staff can demonstrate their workplaces through a willingness to work positively with people of different backgrounds, status and education. On the one hand staff will express their own ideas openly and clearly, dealing positively with any criticism, on the other, they will listen to and consider the thoughts and opinions of other people in the workplace with respect, offering constructive criticism where appropriate.

4.4.3 Demonstrating a focus on outcomes

Staff of the Unit ICT are expected to be achievement-oriented. Achievement-oriented staff see the links between the mission of the Hospital Tanah Merah and their own work. They are able to demonstrate a capacity to set and meet deadlines and to solve the everyday problems that may arise in their workplace. Focusing on achievement also means showing initiative when appropriate.



4.5 Lesson learnt

There are so many great lessons we all learn from life. I personally made a list with some of the most important ones so far, lessons that had a great impact in my life. These lessons have helped me become the person I am today. I know there are more to come and I am ready, opened and receptive to them all.

4.5.1 Face your fear

One of the most important lessons that I have learned in life is to "face your fears". Fears can hold us back from experiencing everything that life has to offer. When we give into fear we limit ourselves. We think we can do only this go only that far but no more. My fear was a fear of failure I was so afraid that I would fail that I failed to take action. This was a self-fulfilling cycle that kept me from achieving goals that I had in my business and personal life. I was so paralyzed by fear that I did nothing I would get excited to do something, and get ready to do it and then the fear would take over and I would quit. By facing my fear of failure through redefining success I was able to grow in my personally life. This growth has enabled me to overcome my fear of spiders and I am working on my fear.

4.5.2 Treat other people as you want to be treated

The second most important life lesson that I learned is to treat people like you want to be treated. This is the "Golden Rule" It is a Biblical principle to "Love your neighbor as yourself". I wish I could as that I have always followed this principle but I haven't. I was a "me" person. What's in it for me? What can you do for me? I didn't mean to be I just was. I'm not sure when I changed but I know that I did. I no longer get impatient with people. I help where I can. I smile at people. I like people so much more now and you know what? They seem to like me more to. Treating other people like you want to be treated will change your whole outlook on life. You will enjoy it more and have less stress. It is a lesson worth learning at any age.



4.5.3 The world has plenty of information but not enough inspiration

If you think about it now with the technological revolution, we get access to so much information. Let's take for example a tiny chip. How much information can you store on it? Isn't it incredible? We have more information than ever but when it comes to inspiration (in-spirit) I would say that we have a deficit. We focus too much on the outside and not enough on the inside. We can't seem to understand that it all starts from within if the inside is a mess, the outside will also be a mess. Listen to your heart, listen to your intuition and know that: *"The only real valuable thing is intuition."* Albert Einstein

4.5.4 Loneliness is different from solitude

There is a difference between being lonely and being in solitude. When you are in solitude, you take advantage of it to get in touch with your inner self, to meditate and to quiet your mind, and that constant need to be around others in order for you to no longer feel lonely, will disappear. Wayne Dyer talks about this in such a wonderful way. Saying that we can never be lonely if we like the person we're alone with If you like yourself. If you have no problem with your own person, if you have accepted yourself completely, you will be content with having some quiet time, away from all the noise. You will feel happy when alone and also when surrounded by other people.

4.5.5 Learn what's under your control let go of the rest

This is important in every situation but especially so at work. If you understand what's really under your control, you're able to set more realistic goals and let go of some of the unnecessary stress. For example, part of my job is asking people experts, executives, celebrities and moguls to talk to me. I can ask I can be persistent and persuasive. But I can't control their answer. If someone says "no," I know I've tried, it was out of my hands, and I'll just have to keep looking for a "yes".



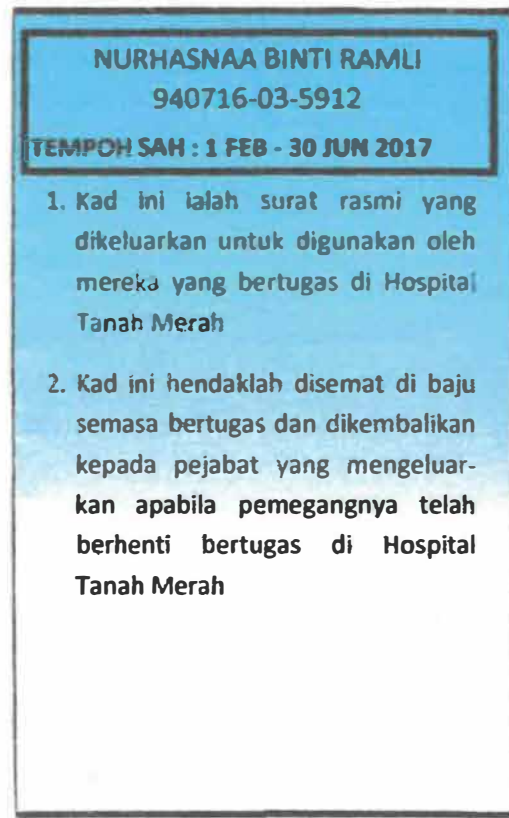
5.0 References

Hospital Tanah Merah. (2017, May 30). Retrieved from Unit ICT:
<http://www.hospitalthanahmerah.com>

Shafie, E. M. (2017, June 06). History of Hospital. (Nurhasnaa, Interviewer)



APPENDIX



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Electronic Time Card

Date	Weekday	Day Type	Sche	In	Break	Resume	Out	OT	Done	Work	Overtime	Short	Leave Taken	Remark
01/02/2017	Wednesday	HARI KERJA	0	10:20			17:07			6.40	0.07	2.20	TIDAK HADIR	
02/02/2017	Thursday	HARI KERJA	0											
03/02/2017	Friday	RESTDAY	0											
04/02/2017	Saturday	RESTDAY	0											
05/02/2017	Sunday	HARI KERJA	0	07:50			17:07			9.00	0.07			
06/02/2017	Monday	HARI KERJA	0	07:48										
07/02/2017	Tuesday	HARI KERJA	0											
08/02/2017	Wednesday	HARI KERJA	0											
09/02/2017	Thursday	HARI KERJA	0	10:43			15:35			4.47	0.05	2.43	TIDAK HADIR	
10/02/2017	Friday	RESTDAY	0											
11/02/2017	Saturday	RESTDAY	0											
12/02/2017	Sunday	HARI KERJA	0	07:50			17:10			9.00	0.10			
13/02/2017	Monday	HARI KERJA	0	07:54			17:05			9.00	0.05			
14/02/2017	Tuesday	HARI KERJA	0	07:52			17:06			9.00	0.06			
15/02/2017	Wednesday	HARI KERJA	0	07:49			17:04			9.00	0.04			
16/02/2017	Thursday	HARI KERJA	0	07:52			15:33			7.30	0.03			
17/02/2017	Friday	RESTDAY	0											
18/02/2017	Saturday	RESTDAY	0											
19/02/2017	Sunday	HARI KERJA	0											
20/02/2017	Monday	HARI KERJA	0	07:51			17:03			9.00	0.03		TIDAK HADIR	
21/02/2017	Tuesday	HARI KERJA	0	07:56			17:03			9.00	0.03			
22/02/2017	Wednesday	HARI KERJA	0	07:50			17:04			9.00	0.04			
23/02/2017	Thursday	HARI KERJA	0	07:56			15:39			7.30	0.09			
24/02/2017	Friday	RESTDAY	0											
25/02/2017	Saturday	RESTDAY	0											
26/02/2017	Sunday	HARI KERJA	0	07:51			17:06			9.00	0.06			
27/02/2017	Monday	HARI KERJA	0	07:57			17:06			9.00	0.06			
28/02/2017	Tuesday	HARI KERJA	0	07:55			17:04			9.00	0.04			

Day Type	Total Days	Present	Absent	Work	Overtime	Short
HARI KERJA	20	16	4	125.27	1.22	5.03
KELEPASAN AM						
RESTDAY	8					
OFFDAY						
	28	16	4	125.27	1.22	5.03

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Date	Weekday	Day Type	Sche	In	Break	Resume	Out	OT	Done	Work	Overtime	Short	Leave Taken	Remark
01/03/2017	Wednesday	HARI KERJA	0	07:57			17:03			9.00	0.03			
02/03/2017	Thursday	HARI KERJA	0	07:58			15:35			7.30	0.05			
03/03/2017	Friday	RESTDAY	0											
04/03/2017	Saturday	RESTDAY	0											
05/03/2017	Sunday	HARI KERJA	0	07:59			17:02			9.00	0.02			
06/03/2017	Monday	HARI KERJA	0	08:02			17:04			9.00	0.04	0.05		
07/03/2017	Tuesday	HARI KERJA	0	08:05			17:08			8.55	0.08			
08/03/2017	Wednesday	HARI KERJA	0	08:03			17:05			9.00	0.05			
09/03/2017	Thursday	HARI KERJA	0	07:59			15:36			7.30	0.06			
10/03/2017	Friday	RESTDAY	0											
11/03/2017	Saturday	RESTDAY	0											
12/03/2017	Sunday	HARI KERJA	0	07:59			17:05			9.00	0.05			
13/03/2017	Monday	HARI KERJA	0	08:03			17:05			9.00	0.05			
14/03/2017	Tuesday	HARI KERJA	0	08:01			17:03			9.00	0.03			
15/03/2017	Wednesday	HARI KERJA	0	08:03			17:04			9.00	0.04			
16/03/2017	Thursday	HARI KERJA	0	07:52			15:31			7.30	0.01			
17/03/2017	Friday	RESTDAY	0											
18/03/2017	Saturday	RESTDAY	0											
19/03/2017	Sunday	HARI KERJA	0	07:56			17:02			9.00	0.02			
20/03/2017	Monday	HARI KERJA	0	08:03			17:01			9.00	0.01			
21/03/2017	Tuesday	HARI KERJA	0	08:01			17:03			9.00	0.03			
22/03/2017	Wednesday	HARI KERJA	0	08:02			17:03			9.00	0.03			
23/03/2017	Thursday	HARI KERJA	0	07:53			15:34			7.30	0.04			
24/03/2017	Friday	RESTDAY	0											
25/03/2017	Saturday	RESTDAY	0											
26/03/2017	Sunday	HARI KERJA	0	07:56			17:02			9.00	0.02			
27/03/2017	Monday	HARI KERJA	0	08:00			17:02			9.00	0.02			
28/03/2017	Tuesday	HARI KERJA	0	07:54			17:01			9.00	0.01			
29/03/2017	Wednesday	HARI KERJA	0	07:54			17:02			9.00	0.02			
30/03/2017	Thursday	HARI KERJA	0	07:54			15:37			7.30	0.07			
31/03/2017	Friday	RESTDAY	0											

Day Type	Total Days	Present	Absent	Work	Overtime	Short	TIDAK HAJI	CUTI HAJI
HARI KERJA	22	22		190.25	1.18	0.05	REHAT/TAHUNAN	CUTI TANPA
KELEPASAN AM							SAKIT	
RESTDAY	9						HOSPITAL	
OFFDAY							MATERNITY	
	31	22	0	190.25	1.18	0.05	PATERNITY	
							EMERGENCY	
							HOSPITAL TANAH MERAH	0.000

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Electronic Time Card

Date	Weekday	Day Type	Sche	In	Break	Resume	Out	OT	Done	Work	Overtime	Short	Leave Taken	Remark
01/04/2017	Saturday	RESTDAY	0											
02/04/2017	Sunday	HARI KERJA	0											
03/04/2017	Monday	HARI KERJA	0	07:54			17:01			9.00	0.01		TIDAK HADIR	
04/04/2017	Tuesday	HARI KERJA	0	07:57			17:03			9.00	0.03			
05/04/2017	Wednesday	HARI KERJA	0	07:53			17:02			9.00	0.02			
06/04/2017	Thursday	HARI KERJA	0	07:52			15:35			7.30	0.05			
07/04/2017	Friday	RESTDAY	0											
08/04/2017	Saturday	RESTDAY	0											
09/04/2017	Sunday	HARI KERJA	0	07:54			17:02			9.00	0.02			
10/04/2017	Monday	HARI KERJA	0	07:55			17:01			9.00	0.01			
11/04/2017	Tuesday	HARI KERJA	0	07:53			17:02			9.00	0.02			
12/04/2017	Wednesday	HARI KERJA	0	07:57			17:02			9.00	0.02			
13/04/2017	Thursday	HARI KERJA	0	08:02			15:36			7.30	0.06			
14/04/2017	Friday	RESTDAY	0											
15/04/2017	Saturday	RESTDAY	0											
16/04/2017	Sunday	HARI KERJA	0	07:50			17:01			9.00	0.01			
17/04/2017	Monday	HARI KERJA	0	07:52			17:00			9.00				
18/04/2017	Tuesday	HARI KERJA	0	07:57			17:01			9.00	0.01			
19/04/2017	Wednesday	HARI KERJA	0	07:48			17:00			9.00				
20/04/2017	Thursday	HARI KERJA	0	07:50			15:32			7.30	0.02			
21/04/2017	Friday	RESTDAY	0											
22/04/2017	Saturday	RESTDAY	0											
23/04/2017	Sunday	HARI KERJA	0	07:54			17:01			9.00	0.01			
24/04/2017	Monday	HARI KERJA	0											
25/04/2017	Tuesday	HARI KERJA	0	07:52			17:02			9.00	0.02			
26/04/2017	Wednesday	HARI KERJA	0	07:48			17:03			9.00	0.03			
27/04/2017	Thursday	HARI KERJA	0	07:52			15:34			7.30	0.04			
28/04/2017	Friday	RESTDAY	0											
29/04/2017	Saturday	RESTDAY	0											
30/04/2017	Sunday	HARI KERJA	0	07:54			17:01			9.00	0.01			
Day Type	Total Days	Present	Absent	Work	Overtime	Short				TIDAK HADIR	2.000	CUTI HAJI		
HARI KERJA	21	19	2	165.00	0.39					REHAT/TAHUNAN		CUTI TANPA		
KELEPASAN AM										SAKIT				
RESTDAY	9									HOSPITAL				
OFFDAY										MATERNITY				
	30	19	2	165.00	0.39	0.00				PATERNITY				
										EMERGENCY				
										HOSPITAL TANAH MERAH				2.000

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✓=Excused

Date	Weekday	Day Type	Sche	In	Break	Resume	Out	OT	Done	Work	Overtime	Short	Leave Taken	Remark
01/05/2017	Monday	HARI KERJA	0											
02/05/2017	Tuesday	HARI KERJA	0	07:48			17:02			9.00	0.02		TIDAK HADIR	
03/05/2017	Wednesday	HARI KERJA	0	07:50			16:57			8.57		0.03		
04/05/2017	Thursday	HARI KERJA	0	07:44			15:46			7.30	0.16			
05/05/2017	Friday	RESTDAY	0											
06/05/2017	Saturday	RESTDAY	0											
07/05/2017	Sunday	HARI KERJA	0	08:02			17:06			9.00	0.06			
08/05/2017	Monday	HARI KERJA	0	07:57			17:04			9.00	0.04			
09/05/2017	Tuesday	HARI KERJA	0	07:56			17:06			9.00	0.06			
10/05/2017	Wednesday	HARI KERJA	0											
11/05/2017	Thursday	HARI KERJA	0	08:01			15:35			7.30	0.05		TIDAK HADIR	
12/05/2017	Friday	RESTDAY	0											
13/05/2017	Saturday	RESTDAY	0											
14/05/2017	Sunday	HARI KERJA	0	07:49			17:03			9.00	0.03			
15/05/2017	Monday	HARI KERJA	0	07:55			17:06			9.00	0.06			
16/05/2017	Tuesday	HARI KERJA	0	07:53			17:05			9.00	0.05			
17/05/2017	Wednesday	HARI KERJA	0	07:51			17:04			9.00	0.04			
18/05/2017	Thursday	HARI KERJA	0	07:56			15:38			7.30	0.08			
19/05/2017	Friday	RESTDAY	0											
20/05/2017	Saturday	RESTDAY	0											
21/05/2017	Sunday	HARI KERJA	0											
22/05/2017	Monday	HARI KERJA	0	07:52			17:05			9.00	0.05		TIDAK HADIR	
23/05/2017	Tuesday	HARI KERJA	0	07:55			17:09			9.00	0.09			
24/05/2017	Wednesday	HARI KERJA	0	07:54			17:08			9.00	0.08			
25/05/2017	Thursday	HARI KERJA	0	07:55			15:33			7.30	0.03			
26/05/2017	Friday	RESTDAY	0											
27/05/2017	Saturday	RESTDAY	0											
28/05/2017	Sunday	HARI KERJA	0	07:42			16:38			8.38		0.22		
29/05/2017	Monday	HARI KERJA	0	07:45			17:04			9.00	0.04			
30/05/2017	Tuesday	HARI KERJA	0	07:39			17:02			9.00	0.02			
31/05/2017	Wednesday	HARI KERJA	0	07:46			16:35			8.35		0.25		
Day Type	Total Days	Present	Absent	Work	OverTime	Short				TIDAK HADIR	3.000	CUTI HAJI		
HARI KERJA	23	20	3	173.10	1.36	0.50				REHAT/TAHUNAN		CUTI TANPA		
KELEPASAN AM										SAKIT				
RESTDAY	8									HOSPITAL				
OFFDAY										MATERNITY				
	31	20	3	173.10	1.36	0.50				PATERNITY				
										EMERGENCY				
										HOSPITAL TANAH MERAH				3.000

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✓ = Excused

Date	Weekday	Day Type	Sche	In	Break	Resume	Out	OT	Done	Work	Overtime	Short	Leave Taken	Remark
01/06/2017	Thursday	HARI KERJA	0	07:43			15:21			7.21		0.09		
02/06/2017	Friday	RESTDAY	0											
03/06/2017	Saturday	RESTDAY	0											
04/06/2017	Sunday	HARI KERJA	0	07:50			16:45			8.35		0.25		
05/06/2017	Monday	HARI KERJA	0	07:41			16:54			8.34		0.26		
06/06/2017	Tuesday	HARI KERJA	0	07:47			16:16			8.36		0.24		
07/06/2017	Wednesday	HARI KERJA	0	07:50			17:02			9.00	0.02	0.40		
08/06/2017	Thursday	HARI KERJA	0	07:47			14:50			6.50				
09/06/2017	Friday	RESTDAY	0											
10/06/2017	Saturday	RESTDAY	0											
11/06/2017	Sunday	HARI KERJA	0	07:47			16:30			8.30		0.30		TIDAK HADIR
12/06/2017	Monday	HARI KERJA	0											
13/06/2017	Tuesday	HARI KERJA	0	07:48			16:41			8.31		0.29		
14/06/2017	Wednesday	HARI KERJA	0	07:47			16:48			8.33		0.27		
15/06/2017	Thursday	HARI KERJA	0	07:54			15:10			7.10		0.20		
16/06/2017	Friday	RESTDAY	0											
17/06/2017	Saturday	RESTDAY	0											
18/06/2017	Sunday	HARI KERJA	0	07:44			16:23			8.33		0.27		
19/06/2017	Monday	HARI KERJA	0	07:48			16:34			8.31		0.29		
20/06/2017	Tuesday	HARI KERJA	0	07:50			16:38			8.38		0.22		
21/06/2017	Wednesday	HARI KERJA	0	07:48			16:47			8.37		0.23		
22/06/2017	Thursday	HARI KERJA	0	07:54			15:08			7.09		0.21		
23/06/2017	Friday	RESTDAY	0											
24/06/2017	Saturday	RESTDAY	0											
25/06/2017	Sunday	HARI KERJA	0											
26/06/2017	Monday	HARI KERJA	0											
27/06/2017	Tuesday	HARI KERJA	0											
28/06/2017	Wednesday	HARI KERJA	0											
29/06/2017	Thursday	HARI KERJA	0											
30/06/2017	Friday	RESTDAY	0											

Day Type	Total Days	Present	Absent	Work	Overtime	Short
HARI KERJA	21	15	6	123.08	0.02	5.52
KELEPASAN AM						
RESTDAY	9					
OFFDAY						
	30	15	6	123.08	0.02	5.52

HOSPITAL TANAH MERAH

6.000