

BRIEF HISTORY ABOUT FORTIS, HOSPITAL



In 1996, the brand "Fortis" was established with an aim to deliver world class healthcare facilities. It is considered as the country's fastest growing healthcare group. The first branch of Fortis Hospital was at Mohali (Chandigarh) which opened in 2001. Later it evolved from North to South and East to West. In India, Amritsar, to Ludhiana, Mohali, the National Capital Region, Mumbai, Bangalore, Mysore, Chennai, Kolkata and many more destinations are all home to Fortis facilities. Fortis Hospital, Kolkata is a 10-storied, NABH accredited super-specialty tertiary care hospital established in the year 2011 across 7 acres of land in Anandapur.

VISION

- "Saving & Enriching Lives"

MISSION

- "To be a globally respected healthcare organization known for Clinical Excellence and Distinctive Patient Care"

As a Summer Intern I had worked in the Quality department of Fortis Hospital, Kolkata which is a 10-storied, NABH accredited super-specialty tertiary care hospital established in the year 2011. From routine checkups and appointments to life saving treatments and diagnostic services, Fortis Kolkata is enriched with the best specialists, nurses and management staffs. It is considered as one of the best hospital in Kolkata, performing a wide range of treatments and procedure in cardiology, cardiac surgery, pulmonology, urology, nephrology, neurosciences, emergency and critical care.

LEARNING & VALUE ADDITIONS DONE DURING INTERNSHIP

- Learnt how to perform clinical audits (as per NABH guidelines & Fortis SOPs) by collecting data from the patient live files and to analyse the data in MS Excel.
- Learnt about the NABH parameters and hospital SOPs which are followed during the audits.
- With the help of my organizational mentor, I had learnt how to conduct awareness surveys and how to formally communicate with the other employees.

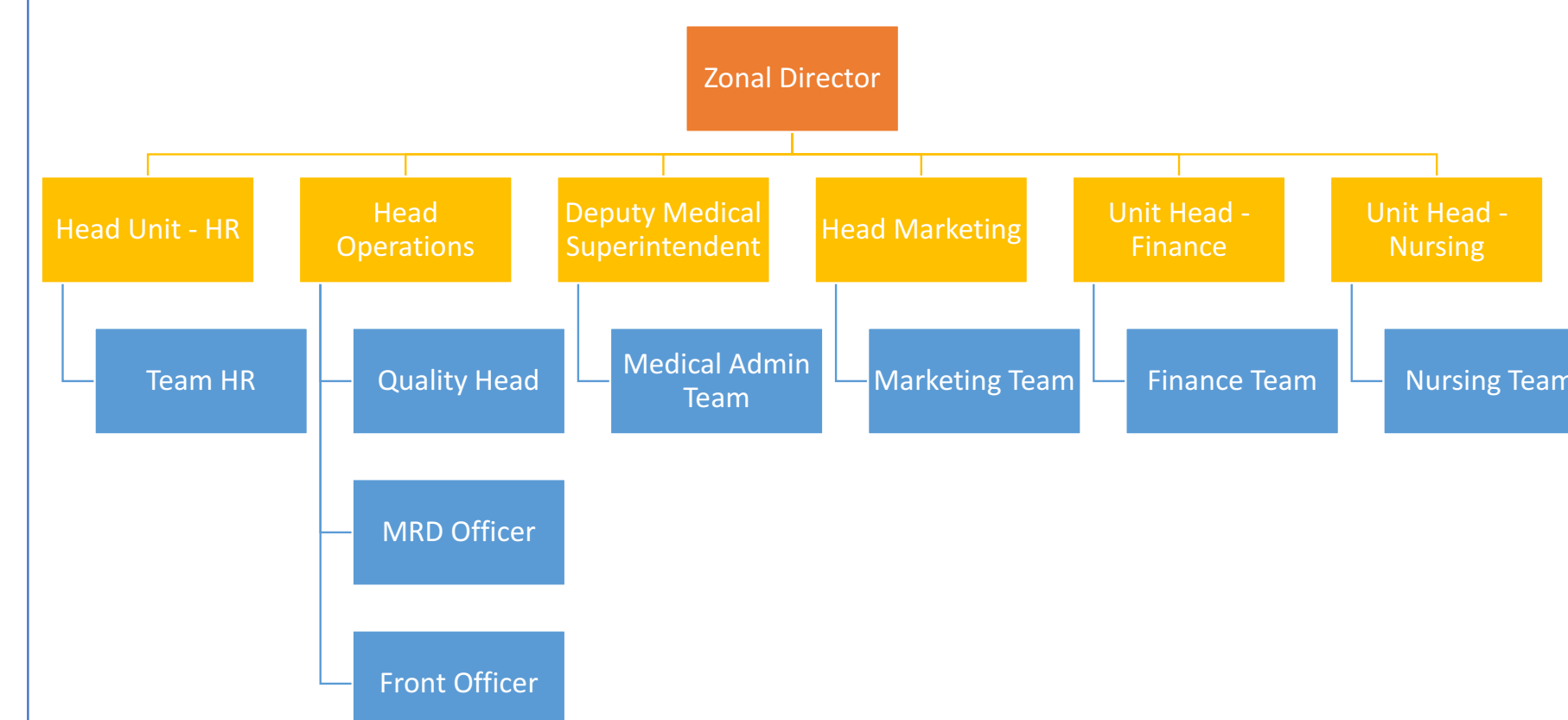
THE LOGO OF FORTIS HOSPITAL

The logo of Fortis represents the synthesis of human values of trust, ethics and service and quality healthcare. The integration of the hands (in a distinctive 'green' with a 'red dot') and the human figure is completely representative of 'Fortis' responsive approach to healthcare. The green colour of hands is representative of health, wellbeing, compassion, nurturing and generosity while the red dot gives an immediate association to our Indian roots, while it also represents energy, spirituality, courage and symbol of good luck.



ABOUT FORTIS, KOLKATA & IT'S ORGANIZATION STRUCTURE

On 9th January, 2011 Fortis Hospital Kolkata was established as a 240 bedded Super Specialty Hospital located in EM Bypass Road. It is a part of India's leading Healthcare providers for the Healthcare India Ltd. This amenity includes 24-hours accident and emergency services including trauma treatment, ambulance services, blood Centre, fully functional operation theatres, Cath lab & preventive health check-up and diagnostic lab. Fortis Hospital, Anandapur, Kolkata is a NABH & NABL accredited, Nursing Excellence accredited & Green OT Certified organization.



DIFFERENCE BETWEEN PRACTICAL EXPOSURE AND THEORETICAL WORK

- From the subject "Essentials of Hospital Services", I have learned about the overall hospital structure and how it works and also about the role of Quality department which really helped me a lot to work in the Quality department in Fortis, Kolkata but the practical works such as consent audits, clinical audits, etc. were completely new to me and it took few days to understand the actual process.
- Theoretically, I had studied about communication but during this internship I had to practically approach staffs from completely different sectors like from nursing staffs to housekeeping staffs.

CHALLENGES FACED-

- During the initial phase of my internship, it was difficult for me to understand the clinical terms in the live files when I was asked to audit.
- When I was asked to conduct awareness surveys among nurses and housekeeping staffs regarding Needle Stick Injury, it took some time to make them understand how crucial this survey was.

SWOT ANALYSIS

STRENGTH

- As the organization has recently went through the NABH visit, the guidelines of NABH and the hospital SOPs were well maintained in documentation of patient live files.
- The brand name plays an important role to attract patients and Fortis Kolkata is well known for providing the best quality and patient-centric services.

WEAKNESSES

- Lack of trained staffs and manpower is deteriorating the quality of services.
- Lack of two way communication between clinical and managerial staffs has resulted in increase in errors in documentations.

OPPORTUNITY

- Due to rapid development of East Kolkata, major portion of the population are shifting in these areas, which has led to increase in the demand for quality healthcare.
- After the pandemic, people are putting more effort into taking care of their health and looking for professionals who can help them. This is an opportunity for Fortis and its team of specialists.

THREATS

- Growing competition from the other hospitals like APOLLO, MEDICA etc.
- The delivery of services is being highly affected by the rising healthcare costs. It's getting hard for people to afford quality healthcare and difficult for healthcare service providers to reduce costs in fear of losses.



SUGGESTIONS

For Clinical (live file) and consent Audits:

- Root cause analysis should be done to find out the reason for the lapse in proper record writings in certain departments.
- Sensitizing the doctors, nurses and other staffs regarding the importance of correct record keeping and maintenance emphasising both from a patient's care and research perspective.
- Hospital wide standardization of the medical records keeping including all admission and discharge related documentation.
- There should be regular clinical audits of the documentation procedures.
- The resident doctors/nurses responsible for filling the patient records should be taught how to adequately fill in the records in a scientific manner as per the hospital protocols.

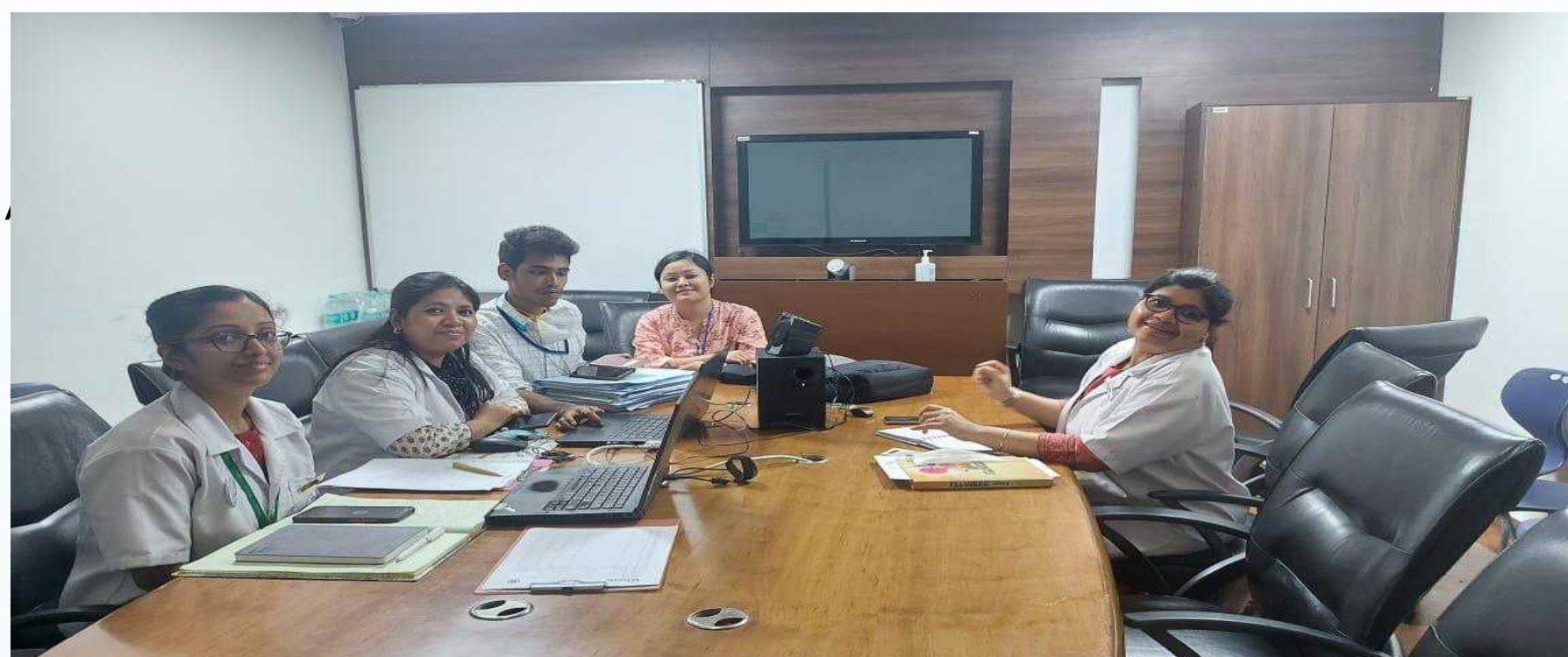
For conducting awareness surveys (NSI, Handwash, Fire safety, Nurses Rights and Patients' Rights)-

- Reward system should be introduced for the best performing staff and the best performing department.
- Proper training sessions should be conducted in English as well as in Hindi or in the particular regional language so that all the staffs can understand.
- Staffs should be made aware of the consequences that may occur due to Needle Stick Injury.

USEFULNESS OF INTERNSHIP

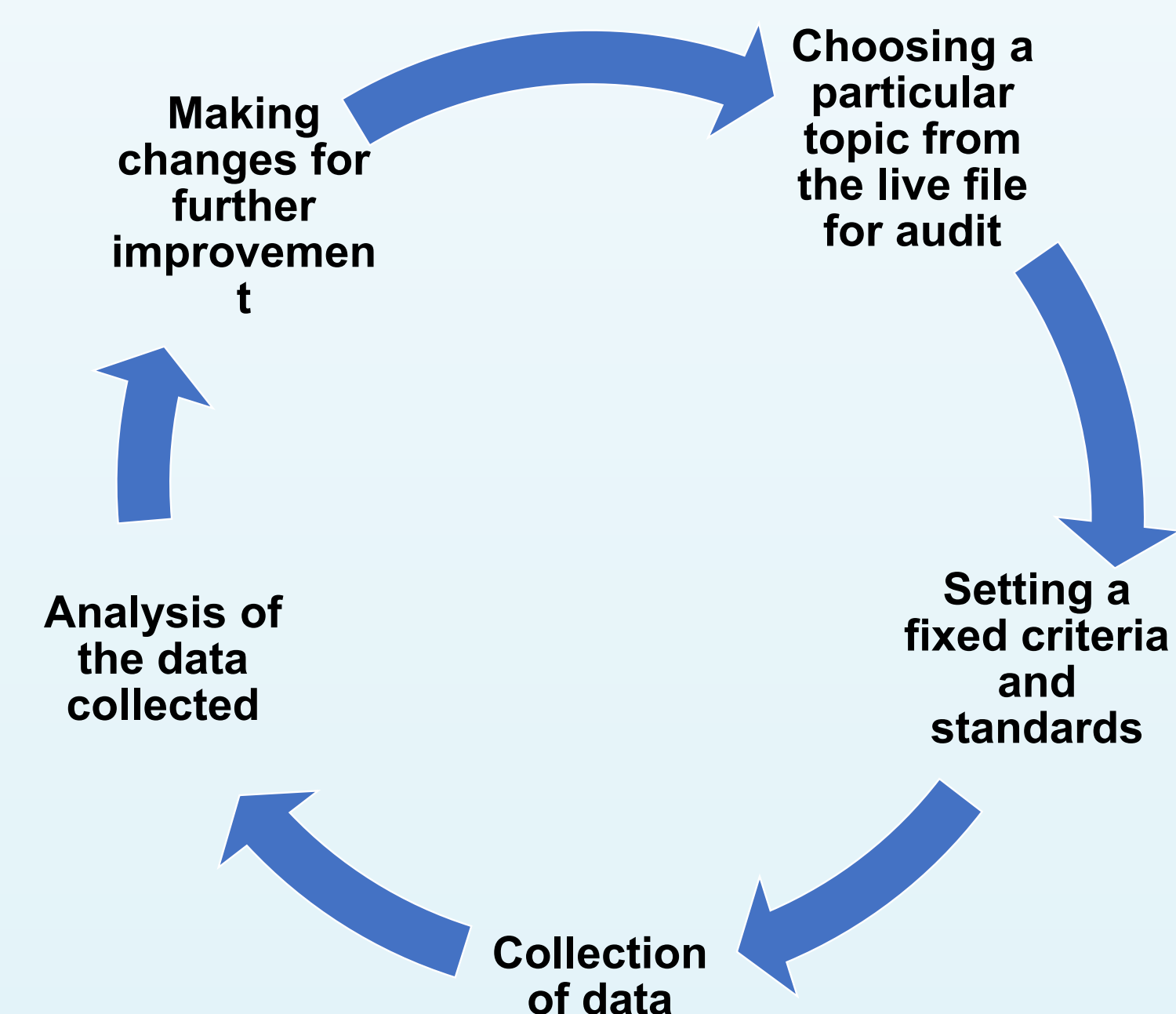
- With the help of this internship I was able to audit and analyse patient's files from all the wards/HDU/ICCU/MICU.
- Able to identify if there are any drawbacks or problems occurring in the files considering all the parameters
- After this summer internship, I came to know the various departments in a hospital and how they are dependent on each other and how they works.
- During my summer internship, NABH visited Fortis, Kolkata and I was able to witness that and it was a very good experience for me as I came to know the NABH guidelines followed by my department.

PROJECT REPORT



What is Clinical Auditing?

Auditing is a process of verifying the records of an organisation whether everything is perfect or not. Similarly, in a healthcare organisation, clinical auditing is the process of examining the medical records to make sure that the doctors, nurses and medical equipment and facilities offered in a hospital or a healthcare set up comply with the standard rules and regulations of the medical field (Bennadi, Konekeri, Kshetrimayum and Siluvai, 2014).



OBJECTIVES

- To do live file (open files) auditing of patient's files from all the wards/HDU/ICCU/MICU
- To check whether all the guidelines of NABH and hospital SOPs are followed or not.
- To identify if there are any drawbacks or problems occurring in the files considering all the parameters/checklist.
- To provide suggestions for the betterment of the respective problem and to suggest the Corrective and Preventive Actions.

RESEARCH QUESTION

What are the gaps in the live file documentation in the month of May with regard to policies & procedures to ensure legibility?

METHODOLOGY

The study on "Clinical Audits in Hospital" was conducted in all the patient wards (7,8,9 floor), HDU, ICCU, MICU of Fortis Hospital, Kolkata from 1st May to 31st May, and the study is cross sectional and descriptive in nature. The samples were selected from patient live files and the study population is based on the number of discharges in a month. The sample size of my study is 100 which is 10% of the total discharge (1000 patients) in a month. Any patient admitted to the hospital for more than 24 hours were considered for the clinical auditing (Inclusion Criteria) but the day care patients were not considered for such audit (Exclusion Criteria).

The data collected was secondary data and was collected through convenience sampling. All the parameters of NABH & hospital SOPs were checked thoroughly and a score of 0,5,10, N/A were given to all the auditing components based on their completeness.

LITERATURE REVIEW

Bennadi, D. Konekeri, V.Kshetrimayum, and Siluvai, 2014, in the study 'Clinical audit - A literature review' has described about the clinical auditing and its importance and how clinical auditing can be effectively done. This article also consists of all the types and various stages of Clinical Auditing and differences between audit and research was mentioned.

In the article, 'Clinical audit, a valuable tool to improve quality of care: General methodology and applications in nephrology' by [Pasquale Esposito](#) and [Antonio Dal Canton](#), 2014, 'Clinical Audit' is defined as a tool for evaluating and for the improvement of quality of patient care. In this study, clinical audit is referred as a tool to the nephrologists to monitor their clinical practice.

[Christopher Limb, 2017](#), in the study 'How to conduct a clinical audit and quality improvement project' discussed about how to get rid of the barriers while performing effective clinical audits and how to design a clinical audit. In this study, the relationship between quality audit and quality improvement was also discussed.

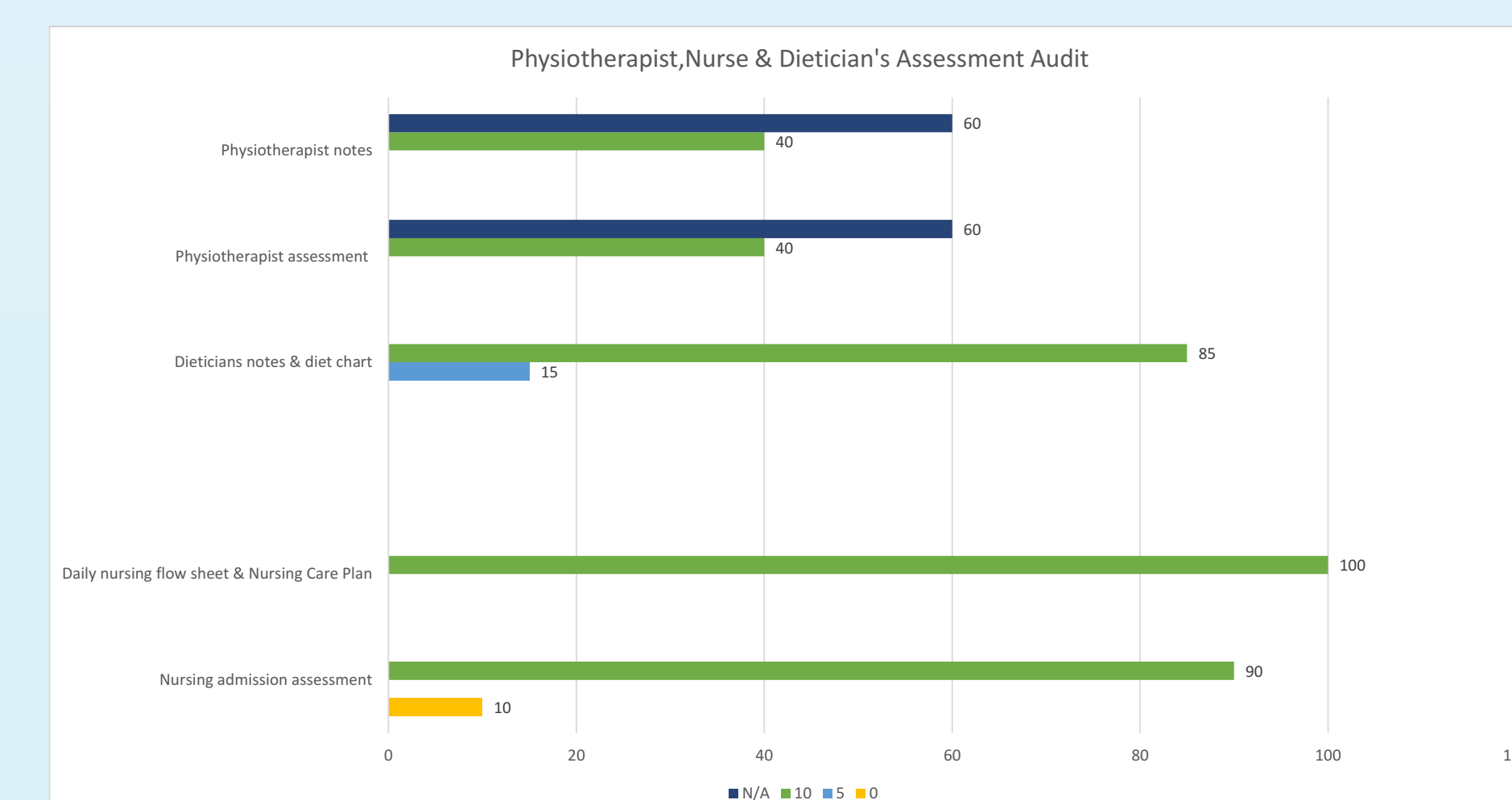
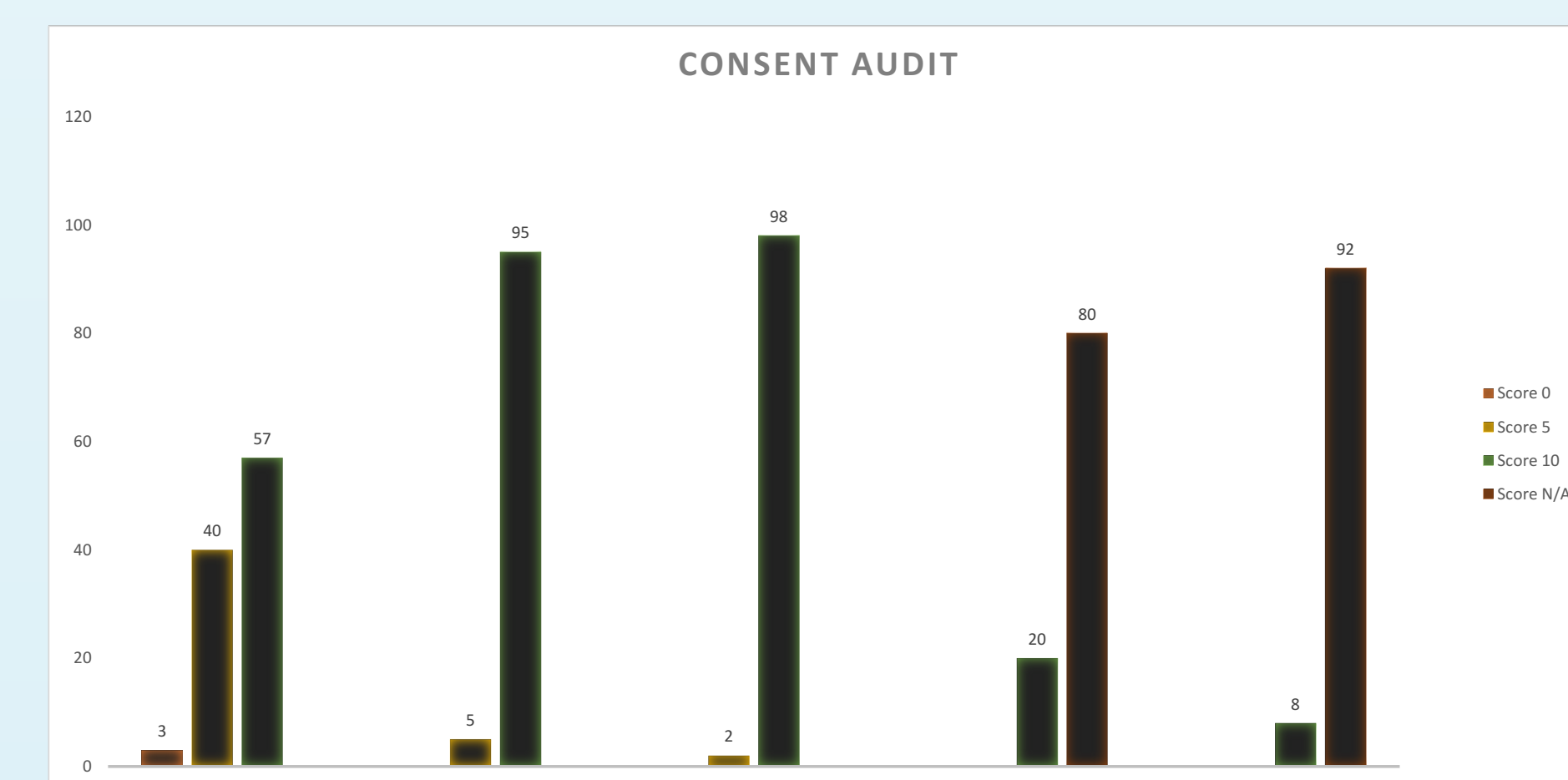


NEED OF THE RESEARCH

Clinical audit plays a crucial role in the quality improvement process. It usually measures a clinical outcome or a clinical process against hospital standards. This comparison between clinical practice and standards leads to the formulation of strategies, which further improves daily care quality.

This method of auditing examines the efficacy of the medical procedures performed. It enables the Quality Control department to find out the shortcomings among various procedures performed by tracking few key components from the patient livefiles. Clinical audit acts as a helpful tool to monitor and advance the clinical practice of doctors and nurses.

RESULTS & ANALYSIS



SUGGESTIONS

- A weekly audit from the quality department to assure that the instructions are followed.
- Nursing in charges of the concerned nursing stations must be informed to prevent discrepancies while maintaining the patient's records.
- It should be the responsibility of the discharging doctor or ward in charge to return the inpatients records and complete the required sections on follow up
- Gaps should be escalated to the head of quality department to inform the concerned doctors for prevention of such lapse in the files while admission in future.
- The resident doctors/nurses responsible for filling the patient records should be taught how to adequately fill in the records as per the hospital protocols.

CONCLUSION:

After my internship in Fortis Hospital, Kolkata, I have learnt and observed that running a hospital is not that easy. Every protocol by the hospital itself and by the NABH are to be followed to provide the best healthcare facilities.

My results suggest that improvements in completeness of documentation can enhance the quality of health care service and the trust factor among the patient and their doctors will be better protected in medico-legal cases. In addition, training and surveys will noticeably improve this procedure.

LIMITATIONS

The audit was done of 100 live files (10% of discharge in a month), but depending on these 100 live files the results and analysis cannot be generalized to the rest of the 90% of population. The process of maintaining all the protocols while documentation is not that easy and the accuracy in its practice is also very important; the surgeon should be able to explain the procedure, its benefits and complications, and other treatment options in lay terms so that the patient can understand, weigh information, and make an informed decision.

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