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DESCRIPTION OF ORGANIZATION :

Fortis Memorial Research Institute (FMRI), established in 2012 with goal of bringing world class healthcare to people in India, is a 330-bedded Super Specialty Hospital. A part of the larger Fortis Healthcare network, FMRI is the Flagship hospital of the group.

- Equipped with state-of-the-art infrastructure, Cutting Edge medical technologies and a highly skilled and renowned team of doctors, it was ranked 29th Position in the list of “World’s best smart hospitals 2023 (Newsweek Survey)”
- It is also the only ELSO Certified Training Centre for training in ECMO program in the country.
- The hospital has received various accreditations, including Joint Commission International (JCI), National Accreditation Board for Hospitals & Healthcare Providers (NABH) and the NABL for its laboratory and Blood Bank.

VISION : Is to be a leading healthcare organization by fostering medical research, advancing medical education, and offering first-rate patient care. FMRI seeks to improve healthcare standards.

MISSION : The goal is to offer patients kind and individualized healthcare, seeks to achieve clinical excellence through a patient-centred approach.

CORE VALUES :

- Innovation
- Ownership
- Teamwork
- Integrity
- Patient Centricity

COMPLETENESS OF COMPLIANCE DURING DISCHARGE: AN OBSERVATIONAL STUDY

INTRODUCTION TO THE PROJECT

It is important to inform patients regarding their disease and medications, how to reduce fall risks with appropriate precautions, enhancing knowledge of infection control, advising when and how to seek urgent care, improving patient quality of life by identifying warning signs, and emphasizing the importance of diet to prevent food-drug interactions during the discharge from any hospital. This approach empowers patients for better health outcomes and lead a quality life at their home after discharge from hospitalization.

OBJECTIVES

- To observe the difference in the completeness of compliance during discharge before and after training of staff nurses

METHODOLOGY AND DATA COLLECTION

- Study Design** :- A before after study design was adopted to conduct the study.
- Study Population** :- All IPD patients discharged from Fortis Memorial Research Institute, Gurugram, Haryana during the study duration
- Pre-Audit** :-
 - Period :- 4th May 2024 to 28th May 2024 (25 days)
 - Sampling:- Convenient sampling was used to select the discharge files
 - Sample Size :- 100Three days orientation was given to the staff nurses to fulfil the criteria for compliance
- Post-Audit** :-
 - Period :- 1st June 2024 to 25th June 2024 (25 days)
 - Sampling:- Convenient sampling was used to select the discharge files
 - Sample Size :- 100
- Selection Criteria** :-
 - Inclusions – Ward
 - Exclusion – ICU and OPD

AUDIT TOOL

Discharge education check list									
Date of audit									
UHID									
Speciality									
Department									
Disease specific education									
Warning signs and complications									
Medications									
When and how to obtain urgent care									
Fall Prevention									
Infection control measures at home									
Wound Care									
Pain									
Equipment use									
Line care:									
Peripheral line									
Urinary Catheter									
For Postoperative Patients :									
wound care and infection control measures - information leaflet given (if available)									
Dietician: diet chart given with:									
Dietary interventions									
Food and Drug interaction									
Sign of Incharge									

DATA ANALYSIS

PARAMETER	OBSERVATION
Peripheral line	Peripheral line removal was completed but not documented
Urinary Catheter	Urinary Catheter removal was completed but not documented
Fall Prevention	Final risk assessment score not mentioned
Infection control measures at home	Specified instructions on infection control are not documented
Wound Care	Wound care instructions not mentioned
Pain	Proper documentation of pain assessment not present
Equipment use	Proper documentation on extraction of equipment's not mentioned
Sign of Incharge	Cross verification documentation by superiors not present
Warning signs and complications	Warning signs and complications not documented

ORGANIZATION STRUCTURE

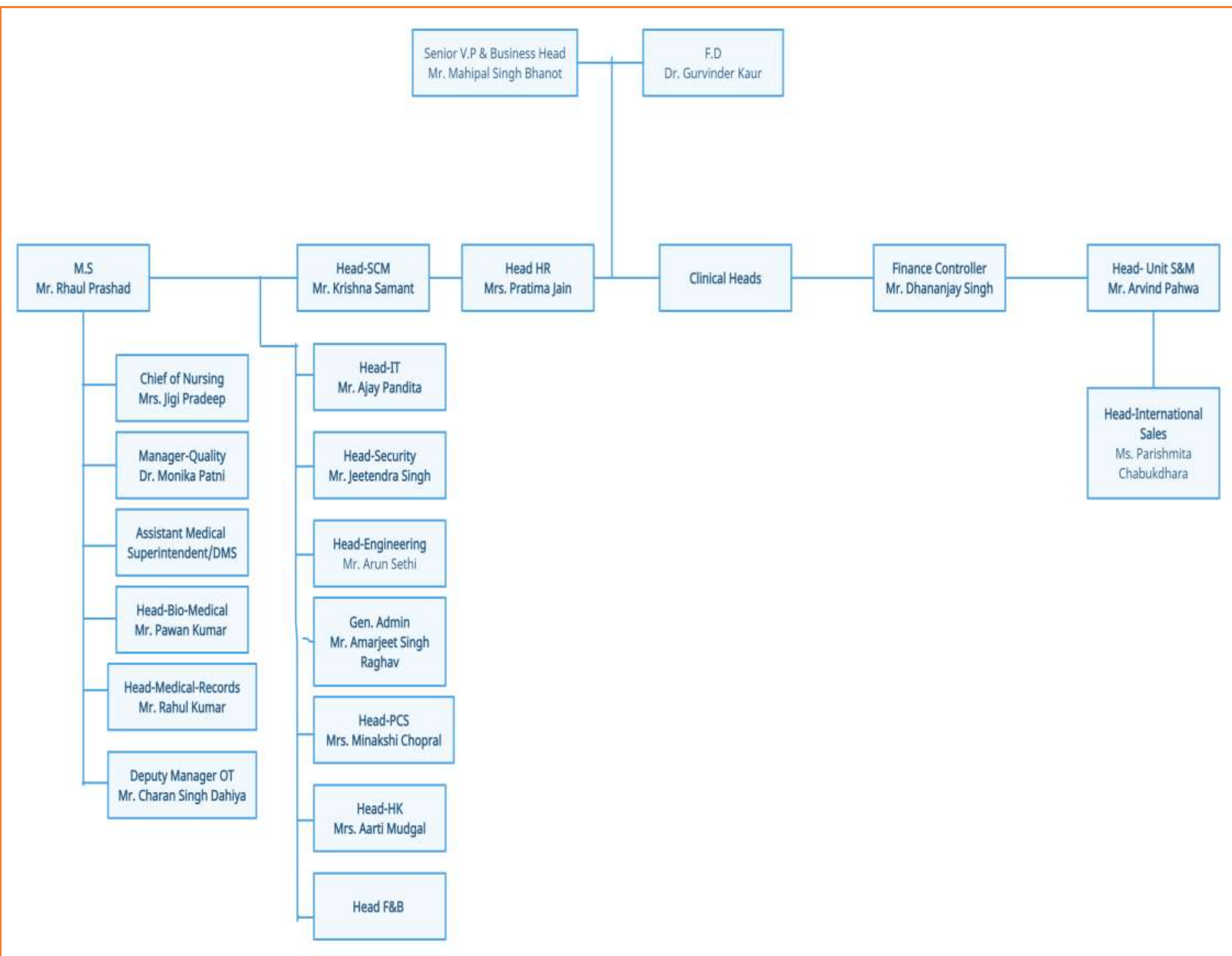
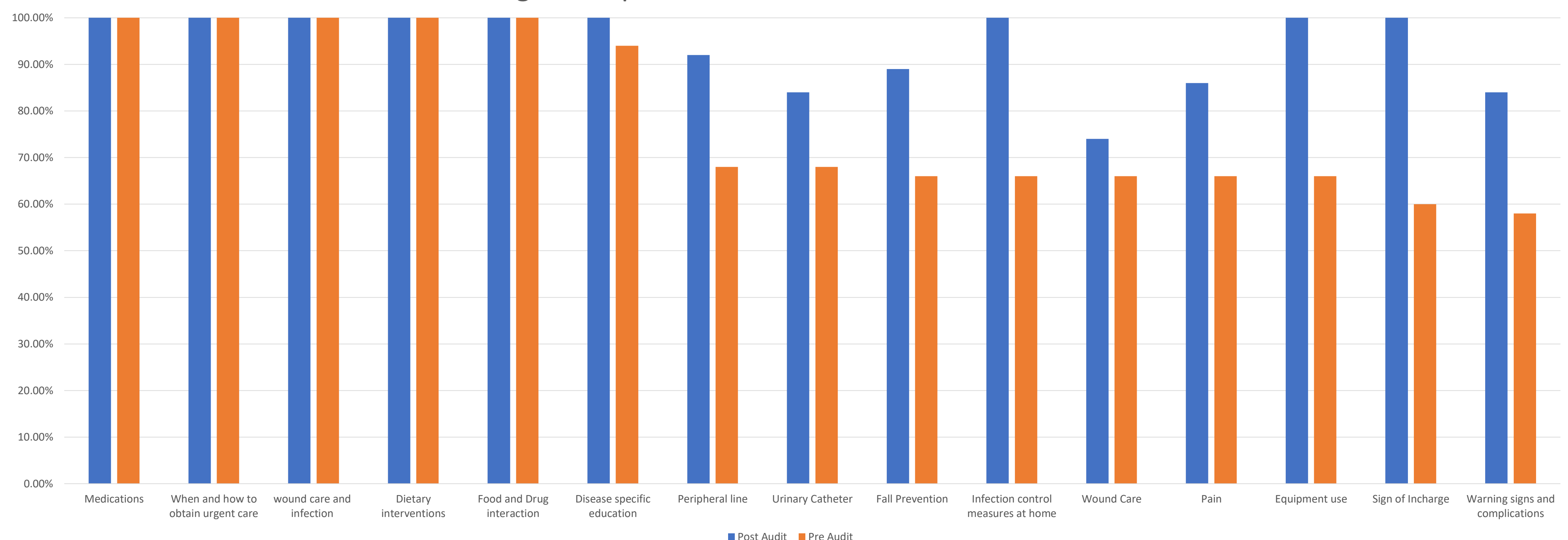


Fig1: Comparison between Pre and Post Audit



FINDINGS

- Improved compliance rates.
- Complete Compliance was seen amongst the files of 48 patients, i.e., around 48% in Pre Audit, whereas the same was around amongst the files of 84 patients, i.e., around 84%
- It was observed that after training, 100% compliance was seen in 4 new parameters namely, Infection control measures at home, disease specific education, equipment use and Sign of In charge. Before training complete compliance was seen in 5 parameters, whereas after training, complete compliance was observed in 9 parameters out of 15 parameters.
- Nurses were unaware of who typically fills out the discharge checklist and had no knowledge about the contents of the checklist and also how to properly fill it out.

LEARNING AND VALUE ADDITIONS DONE DURING INTERNSHIP:

- Learnt about the various processes in the hospital, CSSD Lab, Blood Bank and Quality department.
- It gave me a different perspective to view the Discharge process in a hospital setting.

CHALLENGES FACED DURING INTERNSHIP

Nurses were reluctant to have new ideas from the intern.
Due to less exposure in a hospital setting, it was initially difficult for the intern to submit daily report. However, after a few days of work, the intern submitted the reports on time.

SUGGESTIONS FOR THE ORGANIZATION

- Continuous training and refresher training of nurses and healthcare professionals for updated knowledge.
- Communication with team leader should be more effective.
- Regular Audits in ward to look at the completeness of compliance during discharge.

USEFULNESS OF INTERNSHIP

- Exposure to the working environment of a hospital setting.
- Learn the challenges faced while implementing protocols and how to overcome them.

DIFFERENCE IN PRACTICAL EXPOSURE AND THEORETICAL WORK:

- Implement Pre Post study practically. Learn the same theoretically in class room.

STRENGTH :

Good reputation and expertise in providing high quality medical care.
Collaboration and partnerships with international healthcare networks.
Advance medical technology.

WEAKNESS :

High cost of services.
Apart from medical technology, minimal use of emerging technologies for improving healthcare standards.

S.W.O.T ANALYSIS

OPPORTUNITIES :

Expansion of organization and increasing bed capacity.
Reevaluate the process to provide economic medical care.
Increase medical tourism.

THREATS :

Availability of services at a reduced cost in other healthcare organizations.
Constantly upgrading healthcare standards in vicinity.