Summer Training at
Fortis Escorts Heart Institute, Okhla, New Delhi
(April 9th- June 1st, 2012)

Patient Satisfaction Analysis

By
Nancy Dixit

Under the guidance of
Dr. Santosh Kumar

Post Graduate Diploma in Hospital and Health Management
2011-2013

Institute of Health Management Research,
Jaipur
2012

INSTITUTE OF HEALTH MANAGEMENT RESEARCH
1, Prabhu Dayal Marg
Sanganer Airport, JAIPUR - 302 011, INDIA
Tel. : 3924700, 2791431-32
Fax : 91-141-3924738
E-mail : iihmr@iihmr.org
URL : http://www.iihmr.org
Gram : HEALTHINST

Date : 24 August 2012
Ref. No. : IIHMR/PGDHM/SP/2012/

Certificate

This is to certify that Dr. Nancy Dixit from Institute of Health Management Research, Jaipur has undergone Summer Training at Fortis Escorts Heart Institute, Okhla, New Delhi from 9th April, 2012 to 1st June, 2012.

The candidate herself carried out the project. Her approach to the study has been sincere, scientific and analytical. This summer training is partial fulfillment of the course requirement is recommended for the award of post graduate diploma in health and hospital management.

I wish her success in all his future endeavors.

Dr. P.R. Sodani
Dean (Academic and Students Affairs)

Dr. Santosh Kumar
(Associate Professor)

Fortis Escorts
HEART INSTITUTE

Escorts Heart Institute and
Research Centre Ltd.
Okhla Road, New Delhi - 110 025 (India)
Tel.: : +91-11-47135000
Emergency Tel. : +91-11-10501
Fax : +91-11- 2682-5013
E-mail : fehi@fortishealthcare.com
Website : www.fortisescorts.in
A NABH and JCI Accredited Institute

June 01, 2012

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Dr. Nancy Dixit** , a student of PGDHHM, IIHMR Jaipur, has successfully completed Her Internship in **Patient Welfare Department.** Her project was **Study the Patient Satisfaction level in both the outdoor as well as the indoor Patients of the Hospital** at **Fortis Escorts Heart Institute, New Delhi,** during the period from April 9, 2012 to June 01, 2012.

Her conduct throughout the tenure of internship was good.

FORTIS ESCORTS HEART INSTITUTE

ESCORTS HEART INSTITUTE & RESEARCH CENTRE LTD. OKHLA NEW DELHI

AUTHORISED SIGNATORY

Fortis Escorts
HEART INSTITUTE

Okhla Road, New Delhi - 110025 (INDIA)
Phone : +91 11 4713 5000
Direct : +91 11 4162 8429
Fax : +91 11 2682 5012, 2682 5013
Mobile : +91 98 1859 0060
E-mail : vibhu.gupta@ehirc.com
Website : www.fortisescorts.in

DR. V.R. GUPTA
MEDICAL SUPERINTENDENT

Date: 31/05/2012

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Miss **NANCY DIXIT**, student of PGDHM, (IIHMR, Jaipur) has successfully completed her project report on "**Patient Satisfaction Analysis**" during her summer internship of 2 months (9th April to 1st June), under our supervision and guidance. Besides her project work, she was also actively involved in inter-departmental activities like FOS Audits; organizing SPANDAN sessions as well as Pre-operative and Post operative sessions. Throughout her internship period she was found to be punctual, hardworking and sincere towards her work.

We wish her a successful life ahead.

Dr. V.R.Gupta
(Medical Superintendent)

Dr. V.R. GUPTA
Medical Superintendent
Fortis Escorts Heart Institute
Okhla Road, New Delhi-110 025

Table of contents

ACCRONYMS/ ABBREVATIONS

ABC	Always Better Control
A/D	Admission/Discharge
ALOS	Average Length of Stay
ACLS	Advanced Cardiac Life Support
ABG	Air blood gas
BMW	Bio- Medical Waste
CPR	Cardio- Pulmonary Resuscitation
CSSD	Central Sterile Supply Department
FOS	Fortis Operating System
F & B	Food & Beverage
GDA	General Duty Attendant
HDU	High Dependency Unit
HIS	Hospital Information System
HRD	Human Resource Development
ICU	Intensive Care Unit
MLC	Medico Legal Cases
MRD	Medical Record Department
NABH	National Accreditation Board for Hospital and Healthcare Providers
NABL	National Accreditation Board for Testing and Calibration Laboratories
IPD	In-patient Department
OPD	Out-patient Department
OT	Operation Theatre
PCS	Patient Care Services
TAT	Turn-around Time
TPA	Third Party Administrator
SOP	Standard Operating Procedure
PHC	Preventive health checkup
MICU	Medical Intensive Care Unit
CCU	Cardiac Care Unit
SICU	Surgical Intensive Care Unit
NICU	Neonatal Intensive Care Unit
CSSD	Central Sterile Supply Department
CPR	Cardio pulmonary resuscitation
ECG	Electro Cardiograph
MRI	Magnetic Resonance Imaging
ENT	Ear Nose Throat

ICD	International Classification of Diseases
HEPA	High Efficiency Particulate Air
SCD	Supply Chain Department
ACLS	Adverse Cardiac Life Support
BLS	Basic Life Support
MIS	Management Information System
CCTV	Close Circuit Television

ABSTRACT

The issue of patient/customer satisfaction has gained increasing attention from executives across the healthcare industry. The measurement of patient satisfaction through patient satisfaction surveys has helped organizational leaders incorporate patient perspectives as a way to create a culture where service is deemed an important strategic goal for healthcare facilities. However, despite their many efforts and successes with satisfaction measurement, evidence shows that more work in this area is still needed. One of the primary challenges has been in sustaining patient/customer satisfaction improvement initiatives in the face of competing priorities and diminishing resources. **Fortis Escorts Heart Institute, New Delhi (FEHI)** is an organization that has made the issue of improving patient/customer satisfaction one of its top priorities. The purpose of this study is to serve as a resource to help **FEHI** fulfil its mission to enhance its patient/customer satisfaction o as to make it community's first choice in seeking medical care. By analyzing primary and secondary survey data, this study demonstrates that intangible human values such as care ,co-operation, compassion along with the tangible medical services are vital to satisfy the needs of the patient and has the most powerful effect in terms of patient satisfaction during a hospital stay at **FEHI.**

ACKNOWLEDGEMENTS

I owe a great debt to all the professionals at **FORTIS ESCORTS HEART INSTITUTE, OKHLA ROAD, NEW DELHI** for generously sharing their knowledge and time, which inspired me to do my best at this project study.

My heartfelt gratitude to **Dr. V.R.Gupta** (Medical Superintendent) **Fortis Escorts Heart Institute**, for showing his keen interest in the study and for sharing his views in spite of his very busy schedule . It has been my privilege to work under his dynamic supervision at the Hospital.

I am extremely grateful to **Ms. Gagan Harika** (Head of HR Department), **Dr. Dheeraj Arya** (Assistant Manager) for the constant support and encouragement. This study would not have been possible without their support.

I express my warm veneration towards **Ms. Divya Chopra (**Head of Patient Welfare Department), for her valuable guidance throughout the entire course of study right from deciding the topic to its completion.

My sincere gratitude to **Dr. (Brig.) S. K. Puri (Dean Academics and Student welfare, IIHMR Jaipur)** for his relentless support and guidance. My regards go to my guide at the institute **Mr. Santosh Kumar (Associate Professor)** for his very helpful attitude and valuable suggestions.

I would like to express my heartiest thanks to my parents for their moral support, which always inspires me to perform best. And finally credit goes to all my friends and colleagues who helped me in this study.

Sincerely

Nancy Dixit
PGDHM- 16th Batch
IIHMR, Jaipur

HOSPITAL PROFILE

ESCORTS HEART INSTITUTE AND RESEARCH CENTRE (EHIRC) is a renowned name in the field of cardiac surgery, interventional cardiology and cardiac diagnostics. The institute formally came into existence in October 1988; and was set up as a dedicated cardiac hospital to bring to India the best cardiac care, training of cardiac surgeons and cardiologists and also to conduct research of international standards. The Fortis group took over the hospital on 10th September 2005.

Now the *Escorts Heart Institute and Research Center* is popularly known as ***Fortis Escorts Heart Institute*** (FEHI) which is pioneer in the field of fully dedicated cardiac care facility in India. Fortis health care is the fastest growing hospital network in India. Fortis Healthcare is led by the vision of late *Dr. Parvinder Singh* for creating an integrated healthcare delivery system in India.

Fortis Escorts Heart Institute has set benchmark in cardiac care with its path breaking work over the past 20 years. Today, it is recognized world over as a center of excellence providing the latest technology in Cardiac Bypass Surgery, Minimally Invasive (Robotics), Interventional Cardiology, Non invasive Cardiology, Pediatrics Cardiology Surgery. The hospital is backed by the most advanced laboratories performing complete range of investigative tests in the field of Nuclear Medicine, Radiology, Hematology, Transfusion medicine, Microbiology.

Fortis Escorts Heart Institute has a vast pool of talented and experienced team of doctors, who are further supported by a team of highly qualified, experienced & dedicated support staff & cutting edge technology like the recently installed Dual CT Scan Currently, more than 200 cardiac doctors and 1600 employees work together to manage over 14,500 admissions and 7,200 emergency cases in a year.

The hospital today has an infrastructure comprising of around 285 beds (it currently enjoys 86.9% occupancy rate), 5 CATH Labs, 9 Operation Theatres, 2 Heart Command Centers, and 2 Heart Stations besides an array of other world-class facilities. FEHI provides top end services in areas of acute care, invasive and non-invasive cardiology and state-of-the-art surgical procedures, besides playing a leading role in prevention, early detection and the reversal of heart disease. A consumer forum (VOICE) has ranked its patient care and nursing services as No. 1 in Delhi. .

To spread cardiac care to more and more people FEHI has vast network of hospitals across the country. Also to cater the far-flung areas, the institute has started with Community Outreach Programme. It provides high-class emergency services to patients including the facility for air ambulance. The institute also offers many cardiac preventive health checks.

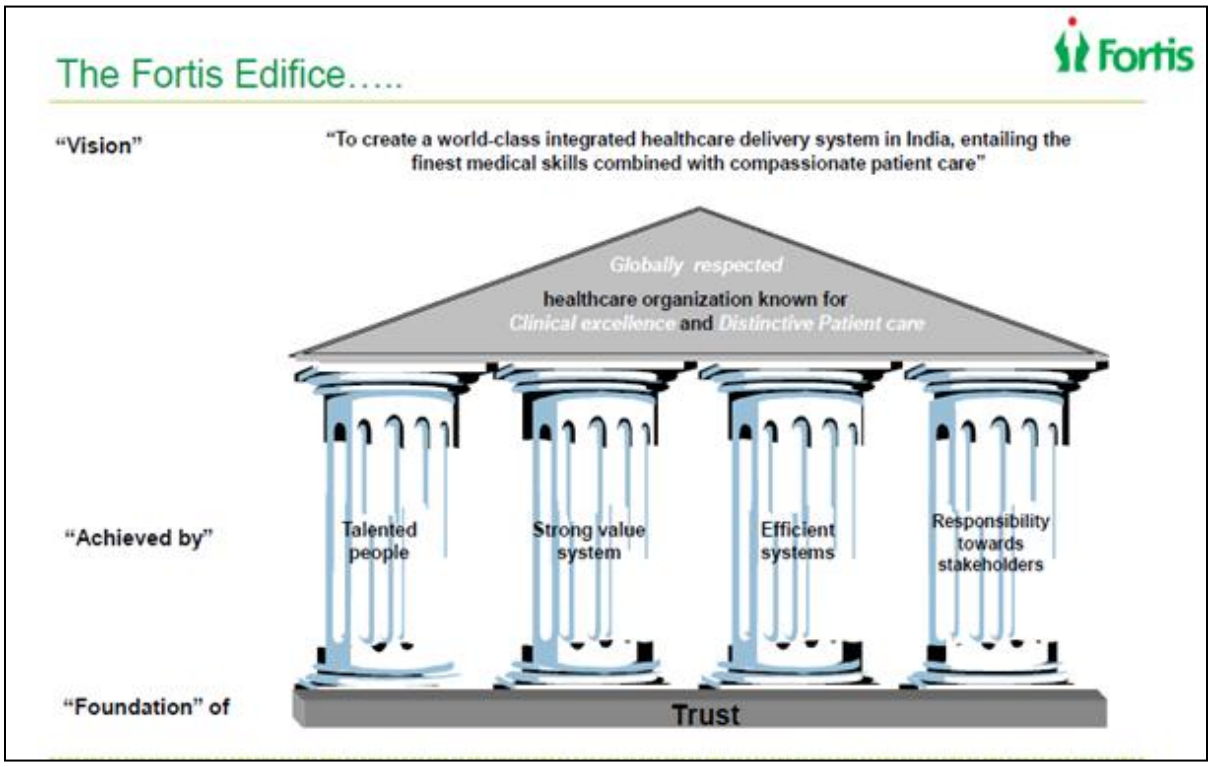
FEHI launched its **Community Outreach Programme**, which started out with a vision to reach out to the health needs of population in the remotest corners of the country, and has covered the states of Uttar Pradesh, Haryana, Punjab, Bihar, Madhya Pradesh, Himachal Pradesh and Rajasthan.

Over a period of time, the philosophy of the programme **"A give back to society"** has evolved and over 100,000 people are provided free cardiac check-ups annually. FEHI has now taken a landmark step in introducing Robotic Cardiac Surgery by installing the first the **Da Vinci Surgical System** in this Region.

MISSION

"To create a world-class integrated healthcare delivery system in India, entailing the finest medical skills combined with compassionate patient care"

Late Dr. Parvinder Singh,
Founder Chairman, Fortis Healthcare Ltd



VISION

Globally Respected Healthcare Organization recognized for Clinical Excellence and Distinctive Patient Care.

VALUES

- **Honesty**

  Conduct everything we do with highest standards of professional and ethical integrity

- **Excellence**

  Pursue excellence and continuous improvement in technology, skill, services and quality of interaction.

- **Attentiveness**

  Be responsive to the physical and emotional needs of patients and their families, and expectations of the society.

- **Respect**

  Show respect, compassion and truthfulness towards patients, co-workers and all persons we encounter.

- **Teamwork**

  Recognize that working together can create a power greater than the sum of individual activities, and that mutual respect demands collegiality, consensus seeking and cooperation.

HOW FEHI HAS ACHIEVED THIS

- By providing state-of-the-art world standard healthcare that exceeds expectations of patients and families.
- Pursuing independent as well as collaborative research in all aspects of cardio-thoracic medicine and surgery.
- By establishing a network of joint ventures and satellite centers to extend the availability of quality health care to the population at their doorstep.
- Providing expert training for medical, paramedical, nursing and other professionals in the field of heart care.
- Networking with other organizations to promote health and well being in society through education, preventive checkups and community outreach programs.

Accreditations

Joint Commission International, USA

Fortis Escorts is a Joint commission international (JCI) accredited hospital. JCI is the highest global accreditation body to recognize hospitals adhering to patient care and safety norms. The receiving of the JCI accreditation is a vindication of our excellence in medical services and the care we provide to each of our patients.

(Effective February 20, 2010)

NABH

National Accreditation Board for Hospitals & Healthcare Providers (NABH) is a constituent board of Quality Council of India, set up to establish and operate accreditation programme for healthcare organizations. The board is structured to cater to much desired needs of the consumers and to set benchmarks for progress of health industry.
Fortis Escorts is proud to announce the comprehensive NABH Accreditation

(Effective June 16, 2008)

NABH (Blood Bank) Accreditation

Blood is a Drug which has to be administered with great caution. This life saving elixir can save lives but can also prove fatal for the recipient.
Effective Quality assurance is essential to ensure transfusion of safe, high quality blood and its components.
National Accreditation Board for Hospitals and Healthcare providers(the highest quality assurance wing of Quality Counsel of India) ,after a thorough check of processes and procedures being practiced at EHIRC Blood Bank appreciated the high standards being maintained and were pleased to grant NABH accreditation. The Blood Bank was amongst the first few in the country to achieve this honour. To

ensure the highest safety of blood the blood bank carries out Leuco depletion on all the blood donated at this centre and tests the blood by NAT Technology, the highest disease markers test available in the world, in addition to mandatory regulatory requirements of testing.

(Effective January 28, 2009)

International Organization for Standardization (ISO) 9001:2000 Certification

Fortis Escorts has been certified by ISO 9001:2000 ensuring compliance across multiple criteria including improved patient satisfaction, effective Quality Management System, efficient management of our processes and continuous improvement of the system.

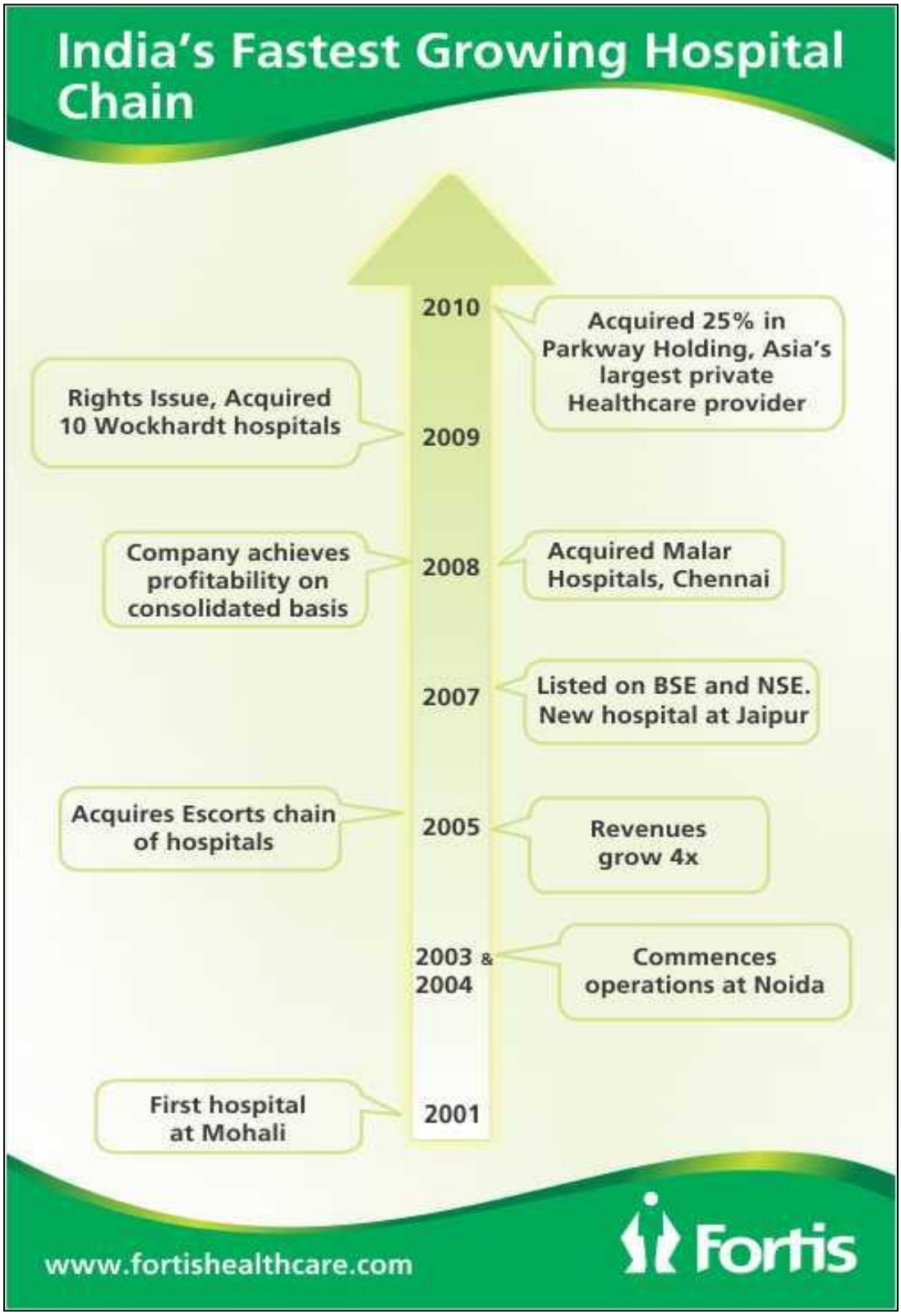
(Effective Feb 17, 2009)

Superbrand 2008 Award

Fortis Escorts Heart Institute - Honoured with Superbrand 2008 Award
Regional Director, Mr. Ashish Bhatia receives a Superbrand Award from Shri L K Advani, Former Deputy Prime Minister and Leader of the Opposition and was the Chief Guest for the Award Ceremony in the evening held at Ashoka Hotel, Chanakyapuri.

The 'Superbrand' is a concept that evolved in the UK in 1993. Superbrand India was launched in December 2002. The 1st edition of Business Superbrand India was out in September 1995. An independent panel of judging experts called the Brand Council awards the Superbrand status. The people of the panel represent the finest brand management practices in the country. Each member has outstanding records of creating and nurturing brands. Every country has its own jury. A Superbrand is one, which has established the finest reputation in its field. It offers customers significant emotional and/or tangible advantages over its competitors, which (consciously or sub-consciously) customers want and recognize.

HISTORY


India's Fastest Growing Hospital Chain
2010
Acquired 25% in Parkway Holding, Asia's largest private Healthcare provider
Rights Issue, Acquired 10 Wockhardt hospitals
2009
Company achieves profitability on consolidated basis
2008
Acquired Malar Hospitals, Chennai
2007
Listed on BSE and NSE. New hospital at Jaipur
Acquires Escorts chain of hospitals
2005
Revenues grow 4x
2003 & 2004
Commences operations at Noida
First hospital at Mohali
2001
www.fortishealthcare.com
Fortis

HOSPITAL LAYOUT

FEHI is a renowned name and has 2 buildings. The main building and the rehabilitation centre both the blocks are on the opposite sides of the road which is connected through an underground tunnel which is basically meant for shuttles to take patients from one building to another. Each of the blocks would be dealt in details below

REHAB BLOCK/OPD BLOCK (Red Building)

INTRODUCTION

It is very significant that, FEHI is paying much attention to the proper planning, designing, organization and functioning of the outpatient department as any other department.

The outpatient department of FEHI, Delhi has a separate building for outpatients with Upper Basement, Ground Floor and First Floor having all the important services like Executive Health Checkup (EHC), various tests like X-ray, TMT, Echo, ECG etc, OPD consultation, Comprehensive Cardiac Check up (CCC), Pharmacy etc.

FLOOR WISE DISTRIBUTION OF REHAB BLOCK-

- **Lower Basement**
  - Medical Records department
  - Pathology Laboratory

- **Upper Basement**
  - Executive Health Centre

- **Ground Floor – (OPD Block)**
  - Help Desk
  - OPD Billing
  - Sample Collection Room
  - X-Ray
  - Echo
  - ECG
  - TMT
  - Mammography
  - Bone Densitometry

- Pharmacy
- Report Room
- Dialysis Center
- Consultant Rooms
- Administrator's Office

- **First Floor- (OPD Block)**
  - OPD Billing
  - Three nurse counters
  - Nineteen consultation chambers where specialized doctors in the following fields are available-
    - Pulmonology
    - Neurology
    - Gastroenterology
    - Ophthalmology
    - Laparoscopic and General Surgery
    - Psychiatry
    - Thoracic surgery
    - Pediatric surgery
    - Urology
    - Dermatology
    - Diabetology
    - Cardiology
    - Cardiac surgery
    - Vascular surgery
    - Pediatric cardiac surgery
    - Pediatric cardiology
    - Pacemaker Clinic.
    -

- **Second Floor**
  - Café Jam Ja Jee

- **Third Floor**
  - Centre for sight

- **Fourth Floor**
  - Quality department
  - Human resource department

- Marketing department

- **Fifth floor**
  - Corporate offices

- **Sixth floor**
  - Physiotherapy
  - Gym

MEDICAL RECORDS DEPARTMENT

Layout: - Lower Basement
Staff: 8

Organogram:

Head of the department (1)

↓

Medical record technician (2)

↓

Junior medical record technician (1)

↓

Office assistant (3)

↓

Ground duty assistant (1)

Functions of MRD

- To ensure that the FEHI has complete & accurate medical record for every patient.
- Public dealings With respect to TPA queries, Bill verification, MLC cases and dealing with Summons to the doctors, hospital.

- To maintain high level of confidentiality as far as patient's records are concerned.
- To ensure that the records are Identified and stored safely to prevent unauthorized changes and easily retrieved whenever required.
- Issuing **Emergency, Medical, Birth & Death certificates**.
- To generate **Bed Occupancy reports** (daily & monthly), **P.N.D.T, M.T.P** reports (monthly).
- Sorting of active files from the inactive files.

Record Retention Periods:

- IP Records : 5 years
- OPD documents : 3 years
- MLC Records : Not to be destroyed
- Birth/Death Register : Not to be destroyed

Colour coding followed for various files as follows:-

- Green – insurance
- Red – paediatric
- Yellow – ophthalmology
- Blue – general (OPD+IPD)

EXECUTIVE HEALTH CHECK UP (EHC)

Layout: - Upper Basement

Process flow-

FEHI has a separate OPD department with basement totally meant for preventive health check. It offers a wide range of preventive health check packages for various mindsets. This area is exclusively designed for providing complete body check-up for.

1. Corporate executives.
2. Pre-employment check-ups
3. General health check-up for walk-in patients.

For corporate clients, Escorts have various health check packages that are pre-designed and customized by the respective company, according to their policies.

The patients usually come with a prior appointment, empty stomach that is then undergone through a series of tests under the supervision of doctors. The package includes complimentary breakfast and doctors consultation both pre-post, valid up to 15 days from the date of visit. Executives coming from empanelled companies are required to bring along a letter of reference from their office, duly authorizing the check

This health center exclusively caters to patients from various companies with whom FEHI has a tie-up and also other executive patients including international patients. These patients have an array of various health checkup packages to choose from. They can decide which package to choose, depending on their present health condition and medical history, or they can consult the doctor, who can guide them in making the decision. After the patient has opted for a health check-up package he is guided to various diagnostic procedures.

The EHC has the following facilities:

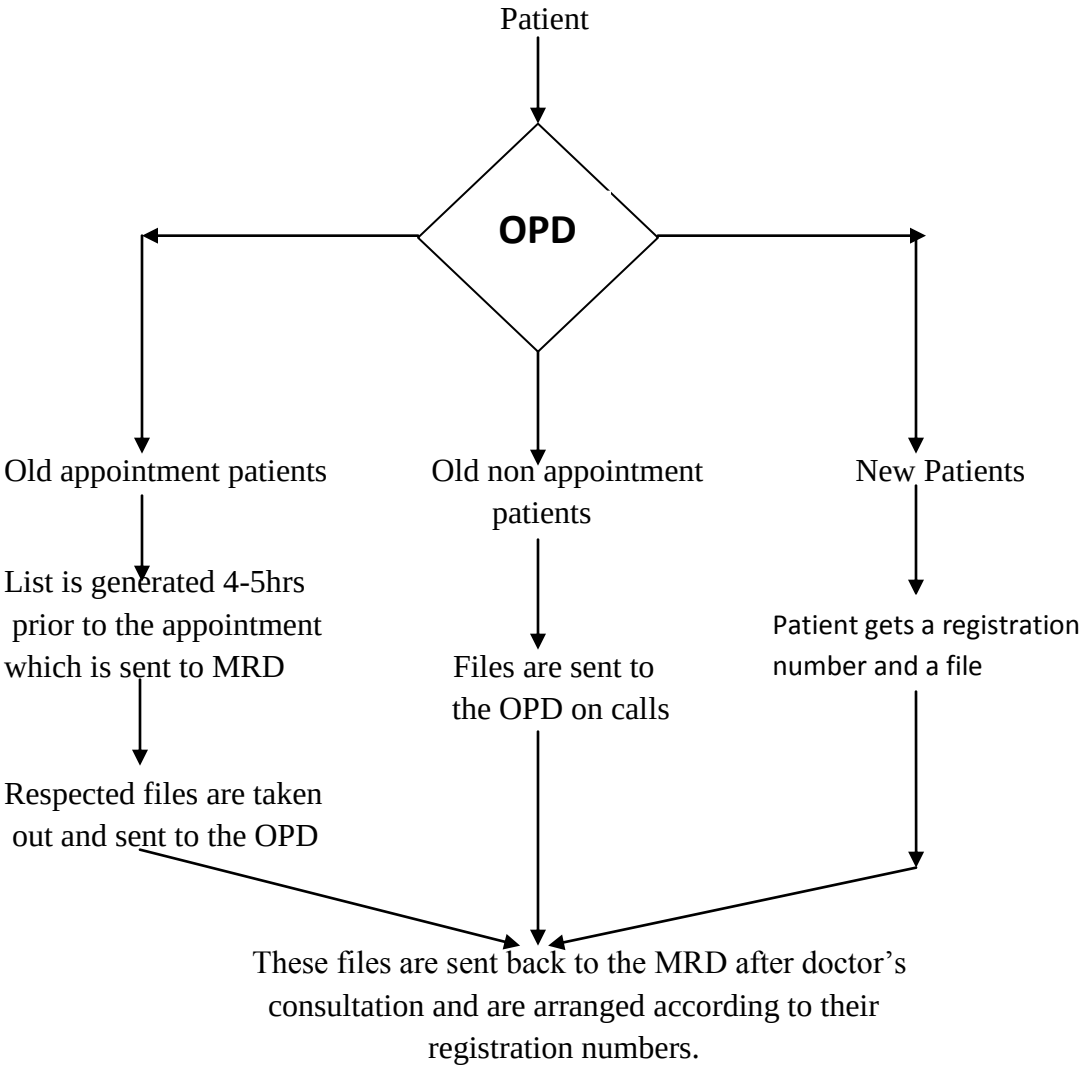
- Sample collection room
- TMT
- ECG
- ECHO
- PFT
- Ultrasound
- Audiometry department
- ENT Department
- Gynecology department
- Dental department
- Dietician
- Clinical Psychologist
- Cardiologist

Apart from these facilities, EHC also has a spacious Patient Waiting Lounge and a Learning Center.

PROCESS FLOW

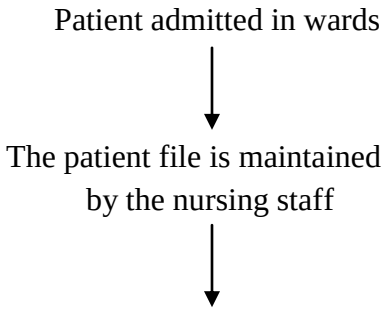
The MRD department of FEHI is centralized (OPD + IPD)

1. OPD



One file of documents is given to the patient (patient copy) and one document is kept in the file (file copy).

2. IPD FLOW-



Once the patient is discharged the file is sent to the MRD Department for the storage and for future referral

↓

The checklist to the file is attached and available documents is tick marked

↓

The file is then arranged at their respective positions

GAPS:

- No color coding format (for year identification) followed.
- Insufficient racks storing records.
- Semi electronic method followed

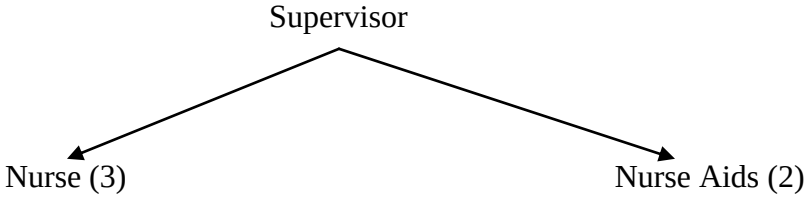
Insufficient space provided for MRD department, according to 285 bedded hospital

OPD DEPARTMENT (ground floor)

HELP DESK

It guides the patients and gives them the information about all the packages of FEHI and also guides the patient to their required destinations. There are 6 nurses who provides all the information and guides the to their respective destination

Organogram-



OPD Billing

Here the billing of all the tests is done (both individual test billing as well as packages test billing). The billing counter at ground floor starts at 8a.m to 5pm. There are 2 billing staff for this purpose

Sample Collection Room

Staff – 4

Organogram

Senior lab technician (1)

↓

Lab technician (2)

↓

Ground duty assistant (1)

Blood samples for testing heamogloin, fasting blood sugar, postprandial blood sugar, T3-T4 etc are collected along with urine and stool samples for urine and stool analysis respectively.

Then the sample of blood, stool and urine are taken by GDA to the pathology lab for analysis.

- Pharmacy

Report Room-

Staff – 3

Organogram

Senior front office coordinator (1)

↓

Front office coordinator.(1)

↓

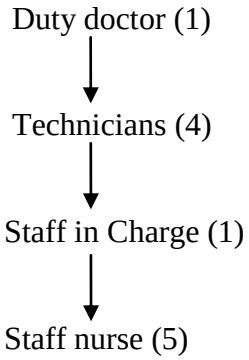
Ground duty assistant (1)

Reports for all the tests done in the hospital are available, for collection by the patients (IPD/OPD), in the report room.

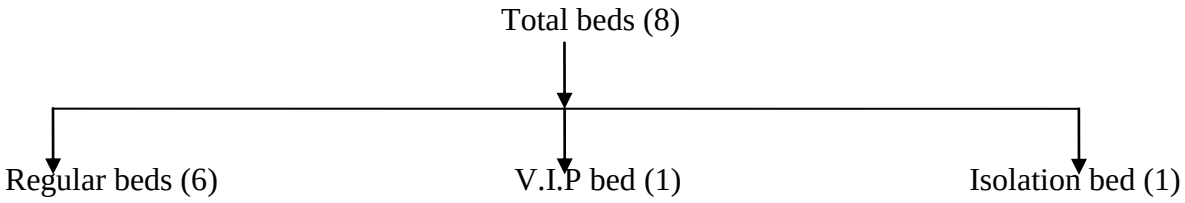
Dialysis Center

Total Staff - 11

Organogram-

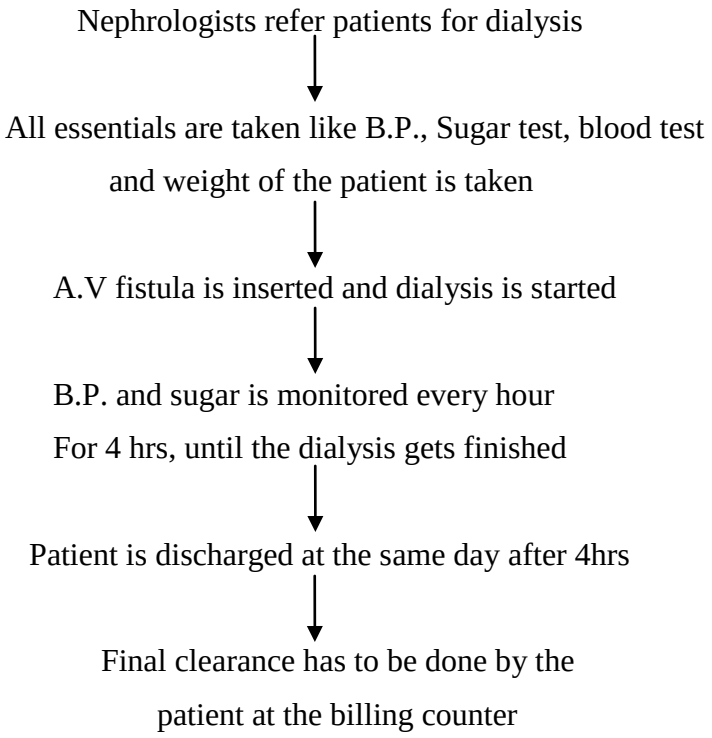


Infrastructure-



- For each bed there is a haemodialysis machine i.e. there are 8 machines
- Peritoneal dialysis is conducted very rarely

Process flow



- The patient is given the appointment for the next dialysis depending upon the condition of the patient. But if the patient is called twice or thrice a month then investigations are not performed. The tests are valid for one month only, after that patient has to undergo all the tests before admitting for the procedure

- Consultant Rooms

  There are two chambers for doctors consultation at the ground floor, rest all chambers are at the first floor OPD.

- Administrator's Office

  The hospital administrator for the OPD controls all the workings from this office

There are various tests which are being performed at the ground floor they are as follows:-

- X-Ray

- Echo
- ECG
- TMT
- Mammography
- Bone Densitometry

STANDARDS OF OPD

- PATIENT TURN AROUND TIME = 4.5 HOURS
- DOCTORS DELAY = 15 MIN.
- WAITING TIME FOR PATIENT = > 15 MINUTES

PROCESS FLOW:

- As the patient enters at ground floor, he has to go at billing counter where he has to pay the initial amount for CCC package.
- If the patient is C.G.H.S / D.G.H.S .Beneficiary, then he has to fill only admission card.
- After completing billing ,patient comes to the nursing counter and from there patient goes for the investigation (sugar –fasting)
- After that patient comes back to the nursing counter and here patient is diverted for various investigation.
- Then reports send to the report room from various investigation centres. where the reports are compiled and distributed to the patient.

PROCESSING IN OPD

Every patient coming for CCC was considered and observed throughout all the procedures he/she undergoes, till the time their reports are compiled in the report room.

Average time taken for each package was calculated by combining the time spent by the patient for the tests, since the time his billing is done till he undergoes the last test and finally the time at which the reports are available.

The patients visiting the CCC consist of company executives, executives for pre-employment medical checkup and the walk-in patients. The total time for each package per patient was calculated initiating from the billing time till the report generation time.

We observed CCC packages in preventive health check and observed the process flow of ECCC patients. We observed the functioning of the various departments here. Time spend by the patients at various department and made comparative study of the standard time and actual time to find out the productivity gap.

Tests include:-

- Doctor's consultation and full medical examination
- Blood tests:

  Complete haemogram (Hb, TLC, and DLC)

  ESR, Haematocrit, peripheral smear)

  Blood group (ABO, RH)

  Blood sugar (fasting and post prandial)

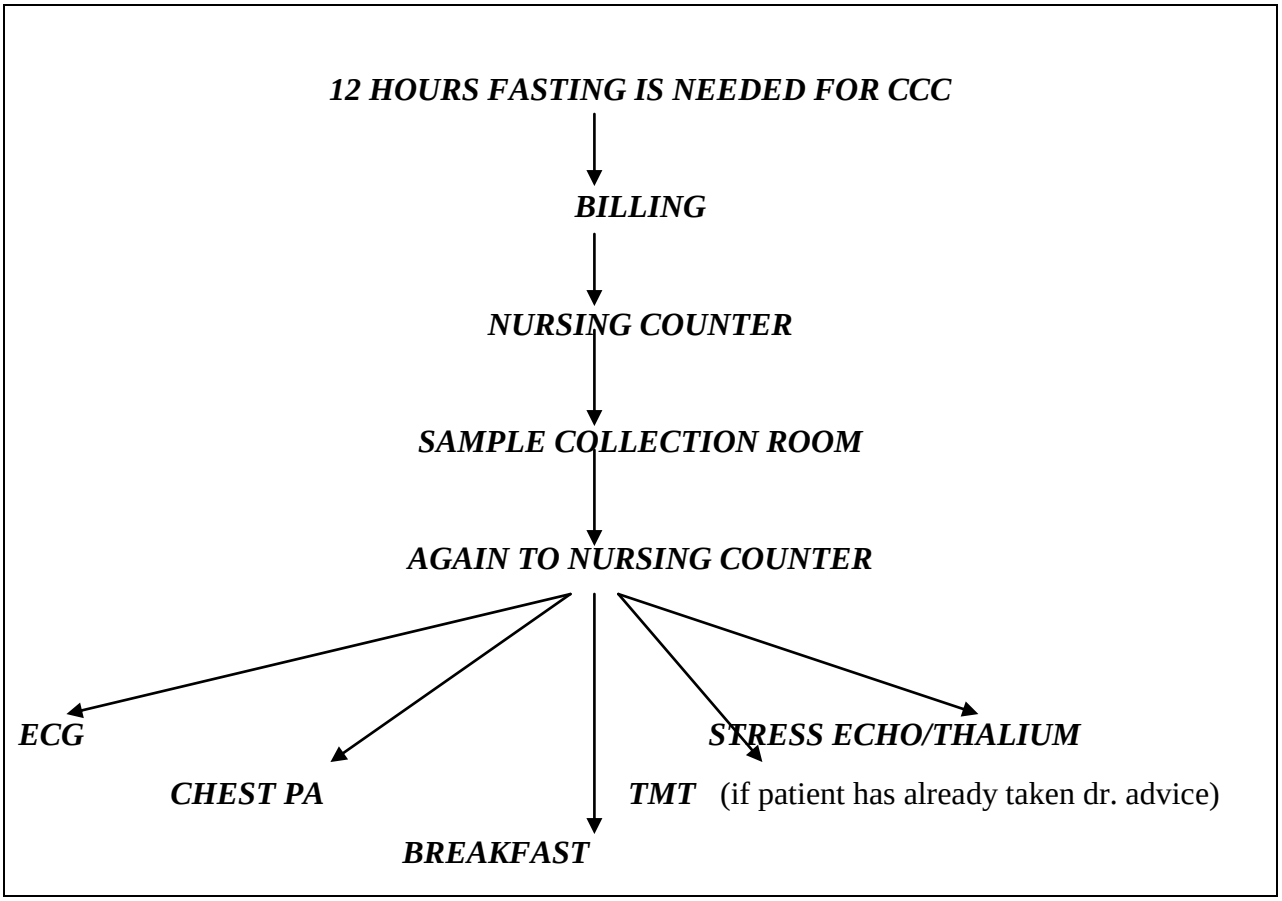
  Blood urea

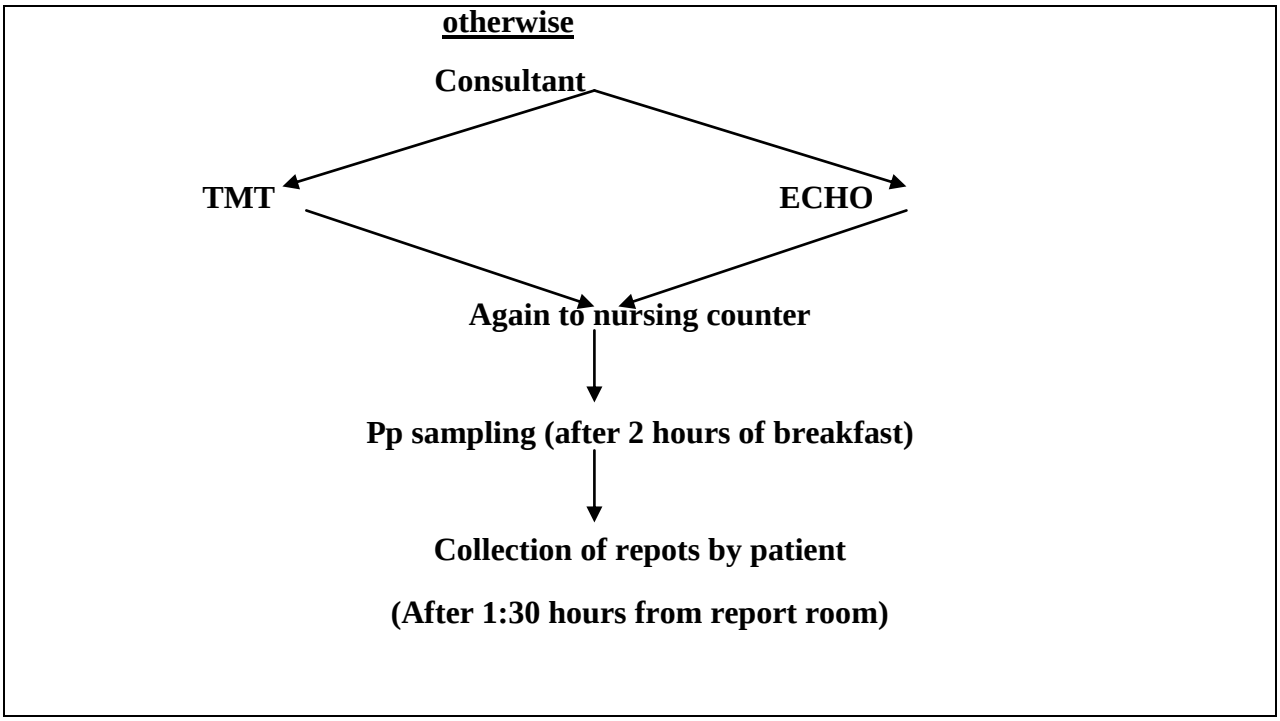
  Serum uric acid

  Lipid profile
- Urine examination
- X-Ray chest PA
- ECG
- Ultrasound whole abdomen

- Stress screening by psychologist
- Post check-up consultation

PROCESS FLOW OF CCC





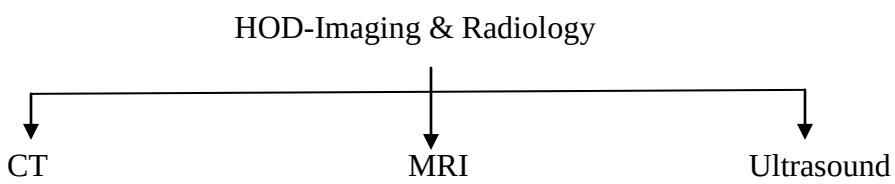
IMAGING & RADIOLOGY

Services provided:

- CT
- ULTRASOUND
- X-RAY
- MRI
- MAMMOGRAPHY
- BONE DENSITOMETRY

Staff & Hierarchy:

Doctors: 4



Radiographers: 6

Chief Technical Supervisor

↓

Senior Radiographer

↓

Junior Radiographers (4)

MRI Technician: 1

Typist: 1

GDA's: 3

Records Maintained:

- Patient Register
- MLC Register
- BARC Standard Records

WORKFLOW:

OPD Patient

↓

Doctor advices "X" investigation

↓

Patient bills for investigation advised

PHC

↓

Patient chooses & bills for desired package

IPD

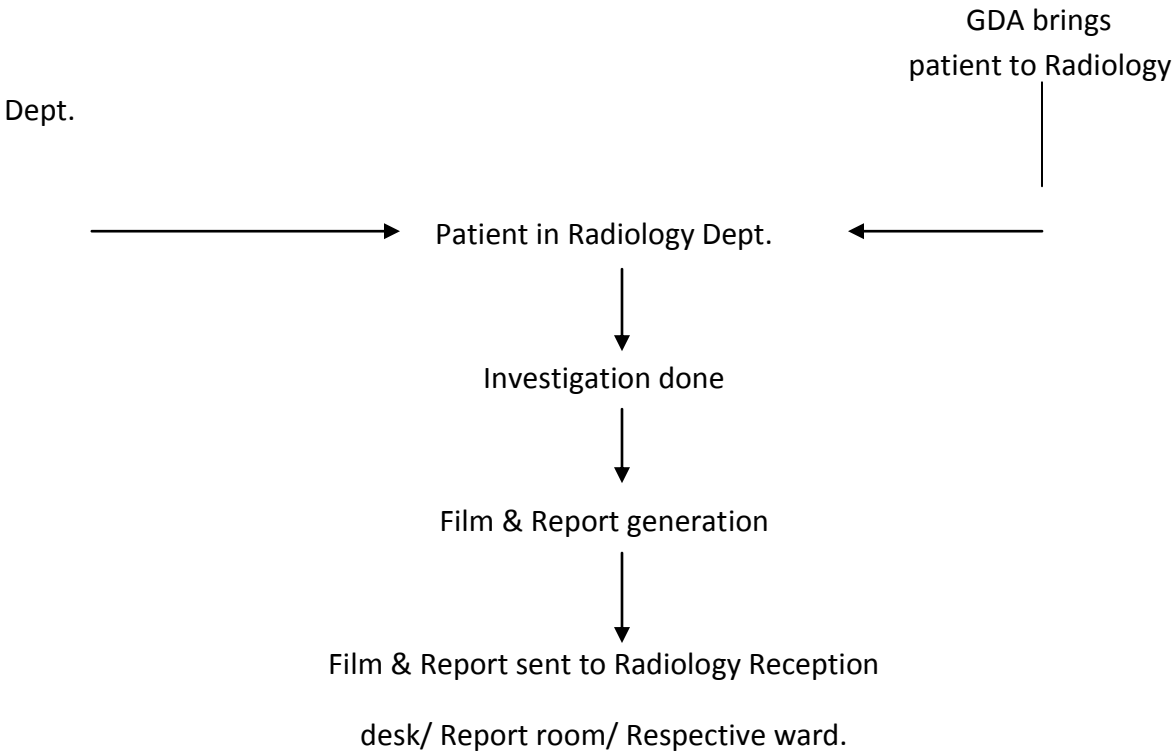
↓

Doctor advices investigation

↓

Nursing staff fills X-Ray/ Ultrasound/ MRI Requisition Form

↓



PHARMACY

(RELIGARE WELLNESS - the complete health store)

Layout: -OPD – Ground floor, rehab block

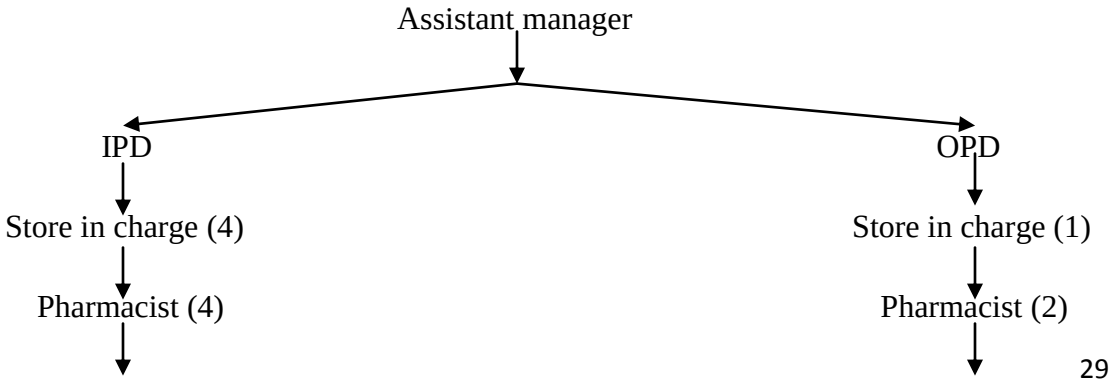
IPD –Ground floor, main building

Status: Outsourced

Staff:

OPD – 4
IPD – 12

Organogram:



Assistant pharmacist (4) Assistant pharmacist (1)

Timings:

- OPD: 8:30 AM – 8 PM
- IPD: 24 Hours

PROCESS FLOW:

FOR IPD PHARMACY-

In-Patient Wards, All ICU's, OT, Emergency, CTVS, CATH Lab

↓

Ward boy/Nurse brings Request for Drug indentation through "**Indoor Patient Drug Requisition Form"**

↓

IPD Pharmacy

↓

Issues drugs

↓

Ward boy/ nurse take drugs to respective ward/OT/ICU

FOR OPD PHARMACY

Patient comes to the pharmacy counter

↓

Shows the prescription by doctor

↓

Prescription is verified by the pharmacist

↓

Entry made in the computer

↓

Required drug is delivered

OPD FIRST FLOOR

QUALITY POLICY OF OPD

FEHI is committed to deliver highest quality of healthcare to enhance patient satisfaction and meet their expectation through well defined quality systems, world class professionals, state of art technology, human and compassionate care.

Staff-

Nurses -1

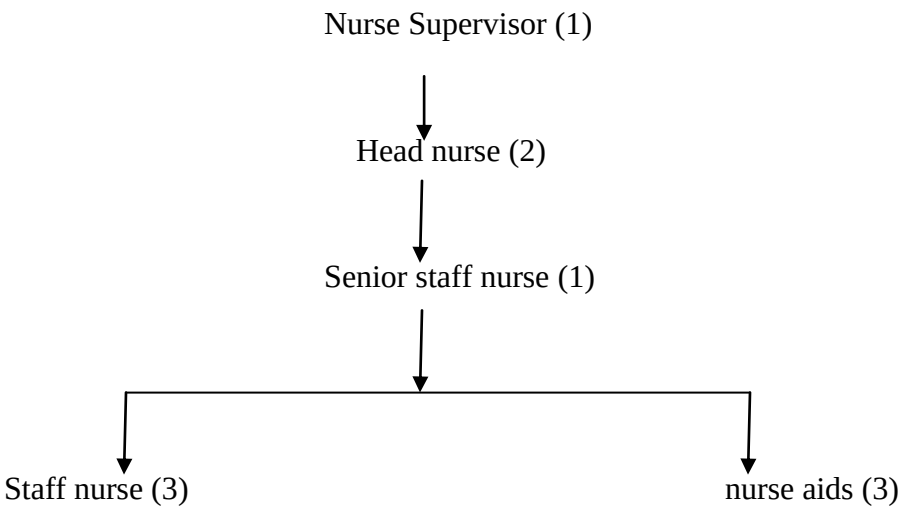
Doctors – 45

Billing staff – 2

QUALITY INDICATORS IN OPD

- Waiting time analysis of patients in OPD
- Delay time in doctor starting their OPD

Organogram



OPD billing-

There is one billing counter and billing for the consultation for all doctors on the same floor is done here.

Nursing stations-

There are 3 nursing stations, each having 2 nurses and 1 nurse aid. The consultation rooms are divided per nursing station.

Nursing station	Consultation rooms
1	4
2	8
3	7

PROCESS FLOW:-

- As the appointment patient enters the first floor OPD for seeking doctor's consultation, she/he has to report to the respective nursing station, where the nurses guide them to the billing counter to pay the consultation fee. If the patient is non appointment, walk in patient who is visiting for the first time then he/she has to fill the registration card and has to do the billing where itself the particular doctor is appointed and if the patient is non appointment follow up patient then he has to first do the billing and then report to the respective nursing station.

- After completing billing, appointment patient again comes to the nursing counter and get their name registered in the patient register. if the patient is coming for the first time for consultation then the nurse makes their new OPD card, wherein doctor writes all the important findings, all the test and drugs are prescribed in the same booklet, and the patient has to bring the booklet everytime he/she comes for follow ups. The patient is also given a new colour file where he/she can keep all his reports. But if the patient is coming for the follow up visit the nurse themselves take out their file, which contains all their previous and current reports. As soon as patient leaves the counter nurse makes an entry in the computer that patient has arrived(there is an automatic system called as Medtrack and each nurse and other staff have their separate ids and passwords to open this and so by this they can see all the records of patients)

- The nurse then goes and keep these files in the doctors room, whereby each patient is called according to their appointment time.

- As soon as the patients name is called he first has to visit the team doctors' cabin, and after that only the senior consultant sees the patient as soon as the patient enters the team doctors cabin the nurse changes the status from arrived to departed. In this way the FEHI maintains the record of patient waiting time.

- After departing from the consultation room, the patient has to either undergo some tests, or he has to get admitted into the IPD, or he can leave the hospital, as prescribed by the doctor.

- Before leaving the first each and every patient gets his /her consultation details of that day's documents are scanned as well as photocopied.

Zero billing

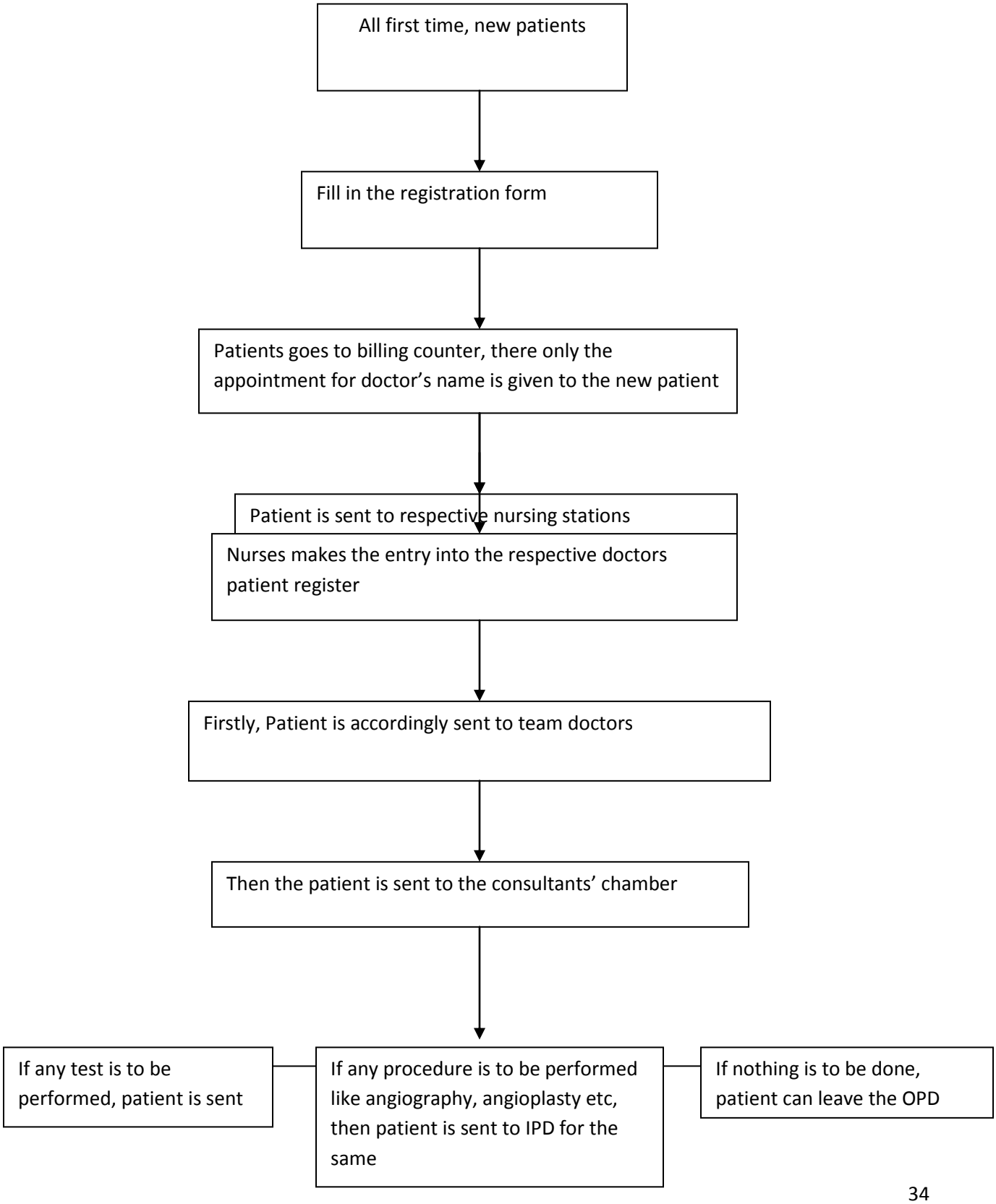
Zero billing is done under following conditions:-

- When the patient has undergone any procedure like angiography , angioplasty etc then within 15 days of span if he/she comes for seeing a doctor then he/she is accounted for '0' billing.

- When the patient has paid once for the OPD consultation then that bill is valid for 7 days and if in case the patient is again showing within 7 days span of consultation then he has to pay '0'.i.e zero billing.

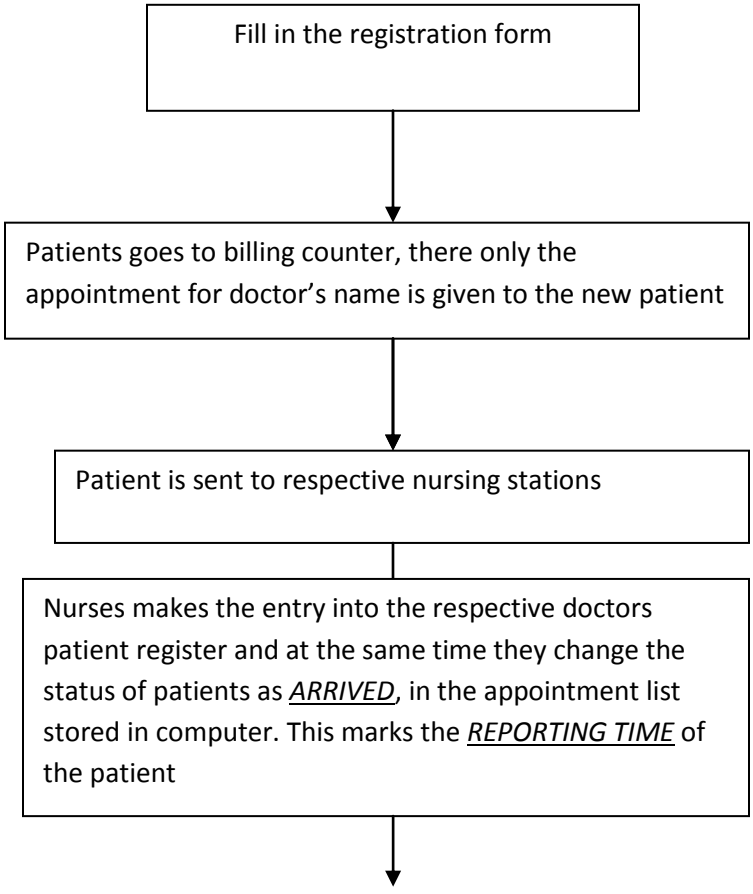
Patient flow

- **First time patient(walk in/non appointment)**



- **For the follow up non-appointment patients, the patients directly go the billing counter and then to the nursing counter, then the procedure is same as above.**

First time visitors, but appointment patients



Patient according to the appointment timings and their reporting timings are sent to team doctors first. As soon as the patient enters the team doctor's room, the patients status is changed from arrived to *departed*. This is called as *DEPARTURE TIME* of patient

Then the patient is sent to the consultants' chamber

If any test is to be performed, patient is sent

If any procedure is to be performed like angiography, angioplasty etc, then patient is sent to IPD for the same

If nothing is to be done, patient can leave the OPD

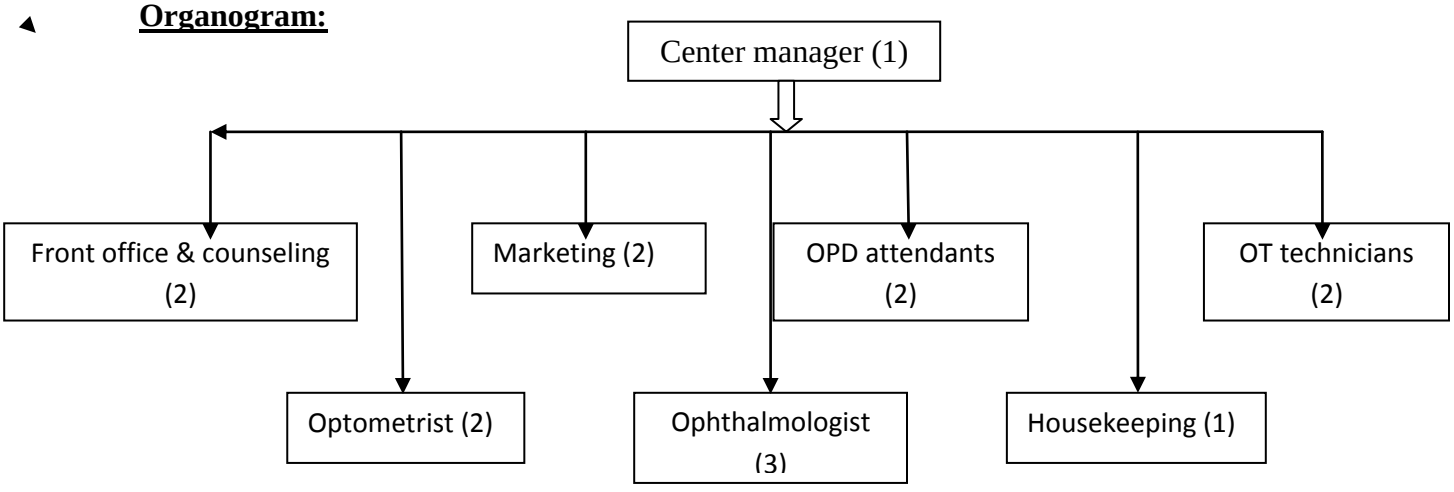
y up a ctly
then to the nursing n the register as well as
computer (in order ne)

CENTER FOR SIGHT

Layout: Rehab block, 3rd floor

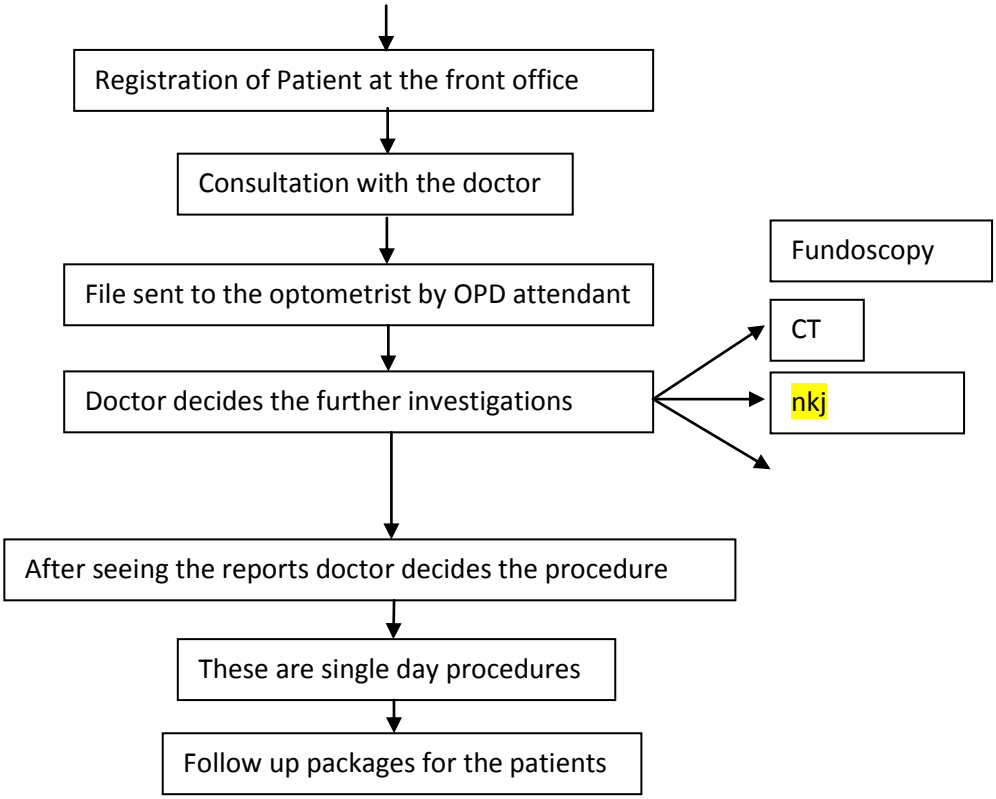
Staff: 14

Organogram:



Process flow

Financial counseling of patient is done on ground floor


Registration of Patient at the front office
Consultation with the doctor
File sent to the optometrist by OPD attendant
Doctor decides the further investigations
Fundoscopy
CT
nkj
After seeing the reports doctor decides the procedure
These are single day procedures
Follow up packages for the patients

MARKETING DEPARTMENT

Layout: -Rehab block, 4th floor

Total Staff: 21

Organogram:

Zonal Head

↓

HOD Marketing

↓

Deputy Manager (3)

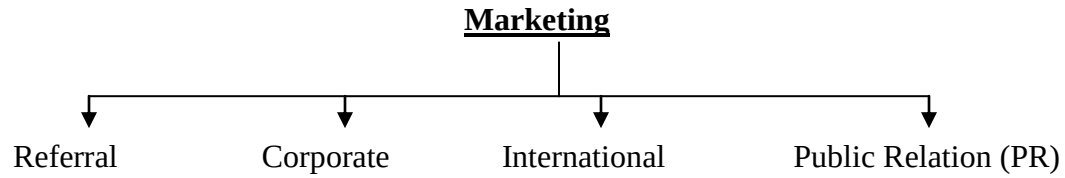
↓

Assistant Manager (1)

↓

Marketing Staff

Marketing Pattern:



1) **Referral :**

- Community Education Programmes (CME)
- General Practitioners
- Picnics
- Community Outreach Programs (COP) i.e. Free Community Checkup Camps
- Friends of Escorts (FOE)
- *Nannichhav*

2) Corporate

- Empanelment/ Corporate Tie ups
- PSU's Tie-ups
- TPA Tie Ups
- Summits
- Workshops

3) International

- Embassy
- Doctors
- Facilitators

4) Public Relation

- Press Conferences
- Shoots/ Interviews
- Print Media: Newspapers, Magazines
- Branding: Events, Conferences, Trade shows.

LOCAL PUBLICITY

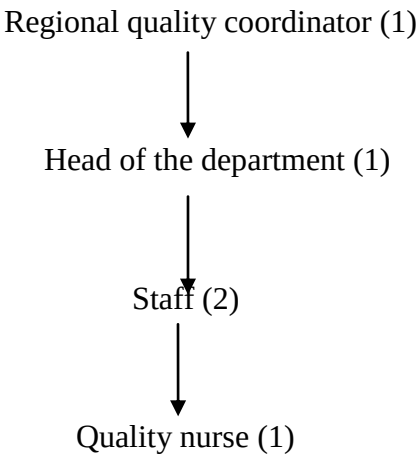
- TV ads / Cable ads
- Newspaper Ads
- Ads in local magazines, supplements, directories
- Leaflets , Pamphlets and Flyers
- Direction Boards
- Kiosks
- Hoardings
- Hospital Board (Glow sign)
- SMS Health Tips & Discount scheme

QUALITY DEPARTMENT

Layout: - 4th floor

Staff: 4

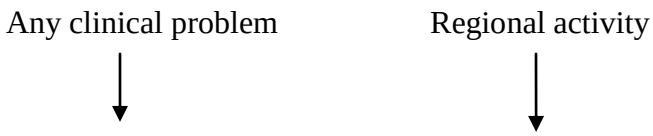
Organogram:

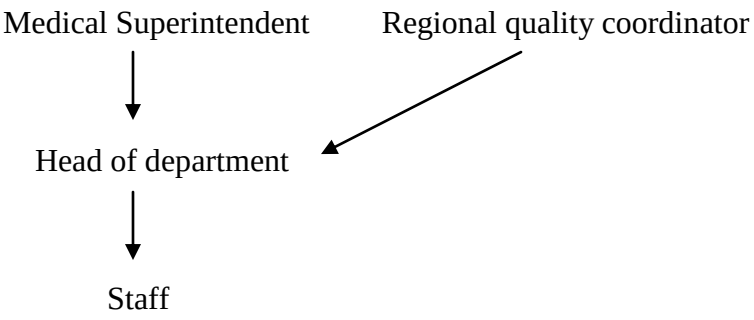


Functions of quality department

- Clinical and non clinical audit
- Policy making
- Quality initiative
- Committee meeting coordination
- Organizing meeting and taking the minutes
- Various committee organized by quality department are:-
    - Infection control committee
    - Safety and quality staring
    - HR committee
    - Pharmacy and therapeutical committee
    - Medical audit committee
    - Medical record committee
    - OT committee
    - Sexual harassment committee
    - Independent ethics committee
    - Executive council committee
    - Institutional review board committee

Process flow



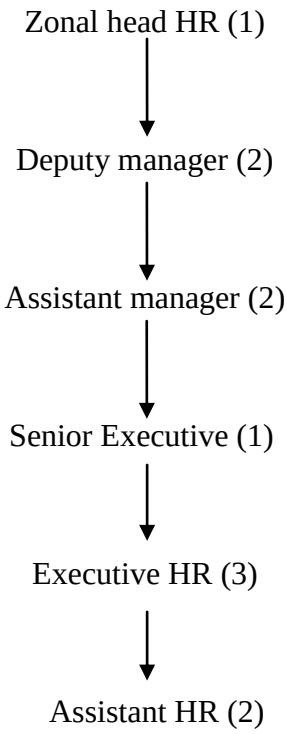


HUMAN RESOURCE DEPARTMENT

Layout: -4th floor

Total Staff: 11

Organogram:



Jobs & Responsibilities:

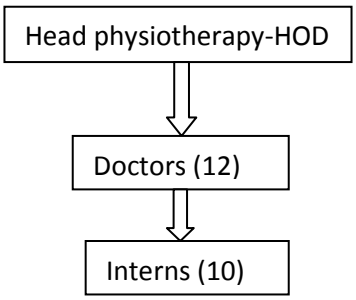
- Manpower Planning
- Internal Job Posting Process
- CV Selection
- Credential Policy
- Confirmation and Appraisal
- Staff Queries
- Follow up with selected candidates
- Issuing of appointment letters
- Disciplinary Policy
- Leaves sanctioning
- Payroll
- Budgeting for departments
- Doctors payout
- Duty roster
- Issuing of Experience letters
- Investigation of staff grievances
- Issues of slow cause
- Salary statement
- Full n final settlement
- Outsource staff attendance
- Induction and orientation
- Finger print report checking
- Manpower planning
- Dispatch of salaries
- Pre recruitment calls
- Organizing interviews
- Housekeeping of CV'S
- Preliminary interviews
- Joining formalities
- Leave record maintenance
- Issuing of I-Cards
- Conducting Employee Welfare Programme e.g. Nurse Day
- Issuing of Refreshment Coupons
- Conducting Exit Interviews.

PHYSIOTHERAPY DEPARTMENT

Layout: Rehab block, 6th floor

Total Staff: 12

Organogram:



IPD Building

IPD Block Floor wise Plan-

- **Basement-**
  - Blood bank
  - Laboratory
  - Pediatric Echo Lab
  - Finance department.
  - Engineering department.
  - Laundry
  - Purchase Department.
  - Stores.
  - Nursing Office
  - Corporate office
  - Library
  - Auditorium

- **Ground Floor-**
  - Emergency.
  - Heart Command Centre I, II
  - Heart Station I and II
  - Day Care Centre
  - Nuclear Medicine
  - Administration
  - Patient Care Service
  - Medical Superintendent Office
  - Director's Office

- Food and Beverages
- Cafeteria
- Dietician
- Security
- Personnel
- Pharmacy
- Counseling
- Billing
- Lounge
- International desk.
- TPA department.

➢ **First Floor-**

- Pediatric ICU- II.
- Recovery I, II, III, IV
- Anesthesia Room
- OT
- IT department

➢ **Second Floor-**

- CSSD
- Biomedical Engineering
- Regional director's Office
- MD office
- Board Room
- CEO Office
- Doctors' Office
- Catheterization Lab
- CATH Recovery I, II, III

➢ **Third floor-**

- CATH Recovery IV
- Block A (Old) Ward- Bed no. 301-331F
- Block B(New) Ward- Bed no.- 332- 359.

➢ **Fourth Floor-**

- Cardiac Care Unit.
- Block A (Old) Ward- Bed no. 401 to 431F
- Block B (New) Ward- Bed no. 432 to 453, PS I and II

- **Fifth Floor-**
  - Pediatric ICU- I.
  - Pediatric Ward.
    - Ward bed no. 501 to 516.
    - Step down I- Bed no. 517 to 521.
    - Step down II- Bed no. 522 to 526.

BLOOD BANK

Layout: Basement

Total staff: 20 which includes

- Consultant- 1
- Junior Consultant- 1
- Senior Technologist-1
- Technologist-1
- Junior Technologist-1
- TechnicalAssistant-2
- Senior Technician-1
- Technicians- 8
- Senior Office Assistant-1
- Office Assistant-1
- Staff Nurse- 1
- General Duty Assistant-1

FLOW OF DONOR:

Donor

↓

Donor Registration/ Counseling Room

↓

Medical Examination Room/ Screening Room

(Height, Weight*, B.P, Hb, ABO Blood Grouping checked) → If Not Ok → Exit

If Ok

↓

Phlebotomy Room

↓

Recovery Couch (If required)

↓

Refreshment Room

↓

Instructions Given

↓

Exit

*- If the donor is more than 55kgs, then 450 ml of blood is collected; otherwise 350 ml.

Movement of Donor's Blood:

Blood collected from donor in blood bag + temporary labeling in Phlebotomy Room

450 ml blood bag — 350ml Blood Bag

↓ (450 ml blood bag)

Blood components (PRBC, FFP, Platelets) separated by Centrifuged

↓

Screened for HIV, Hepatitis- C, HBS Ag, VDRL, Malaria Parasite

↓

ABO Grouping & Rh Compatibility Checked

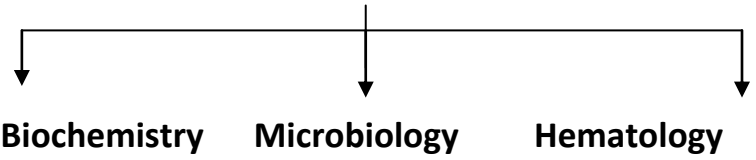
↓

Screened blood stored at 4-6^{0}C

Infrastructure of the blood bank-

- Donor Registration/Counseling Room
- Medical Examination Room
- Donor room/Phlebotomy/Bleeding room- Blood is collected in this room.
- Aphaeresis Room
- Refreshment Room- After donating the blood, refreshments are provided here.
- Component Room: Here collected blood is formed into different components.
- Cross matching Room (Serology room) - Here Blood is tested & cross matched.
- Store Room/ Record Room- All the records and inventories are stored here.
- Wash & Sterilization Room- Here any blood tested positive for any infection or unmatched blood is discarded.

Laboratory Services

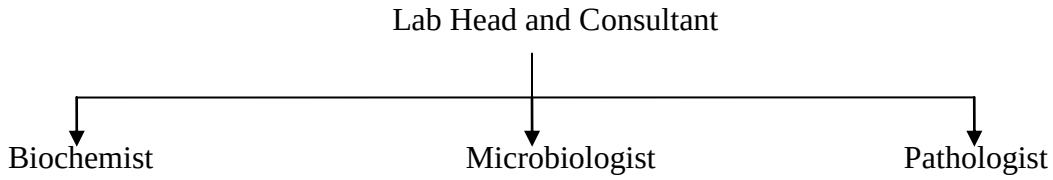


Layout: Lower Basement, Rehab Centre.

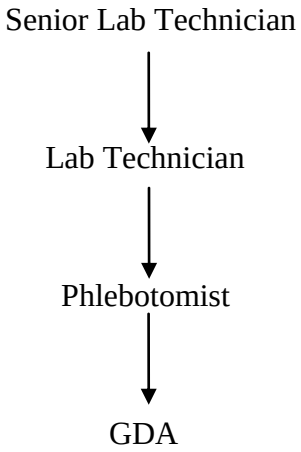
Basement, Main building

Total Staff- 55

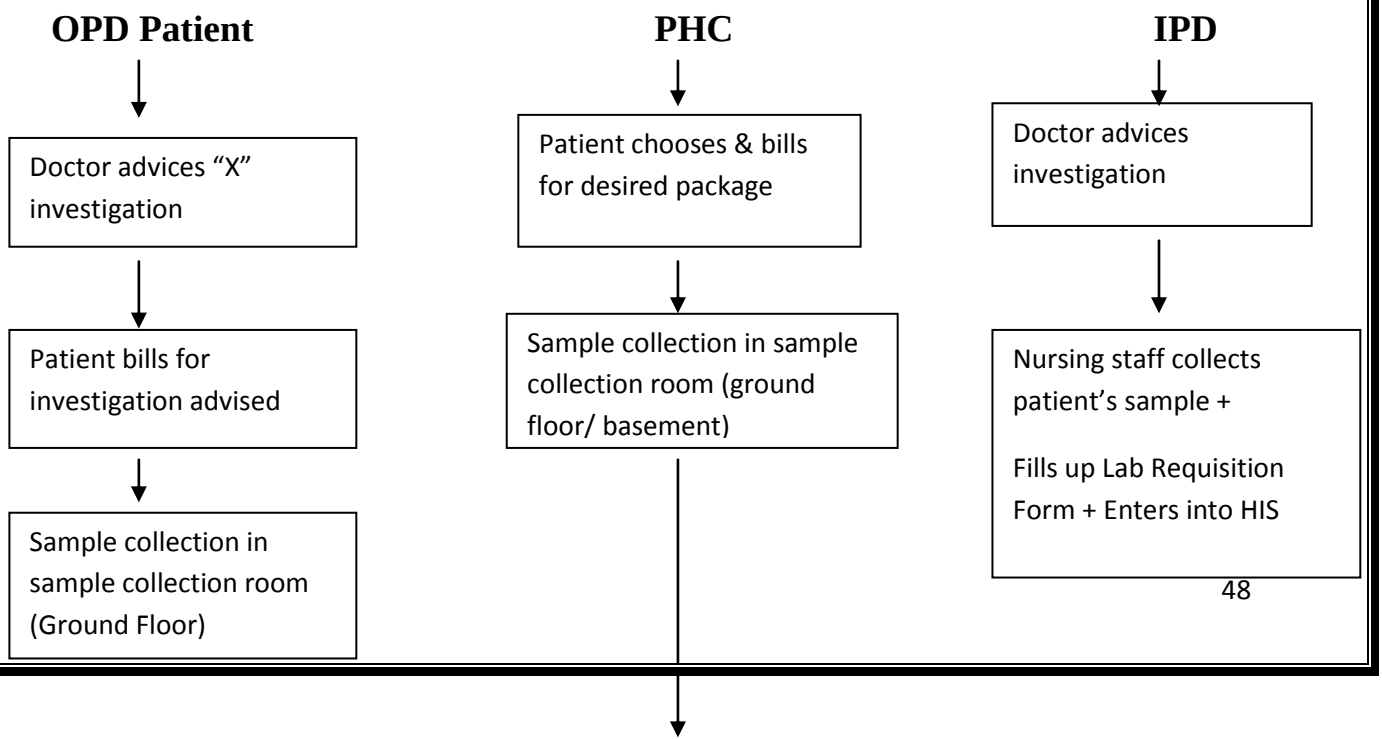
Organogram-

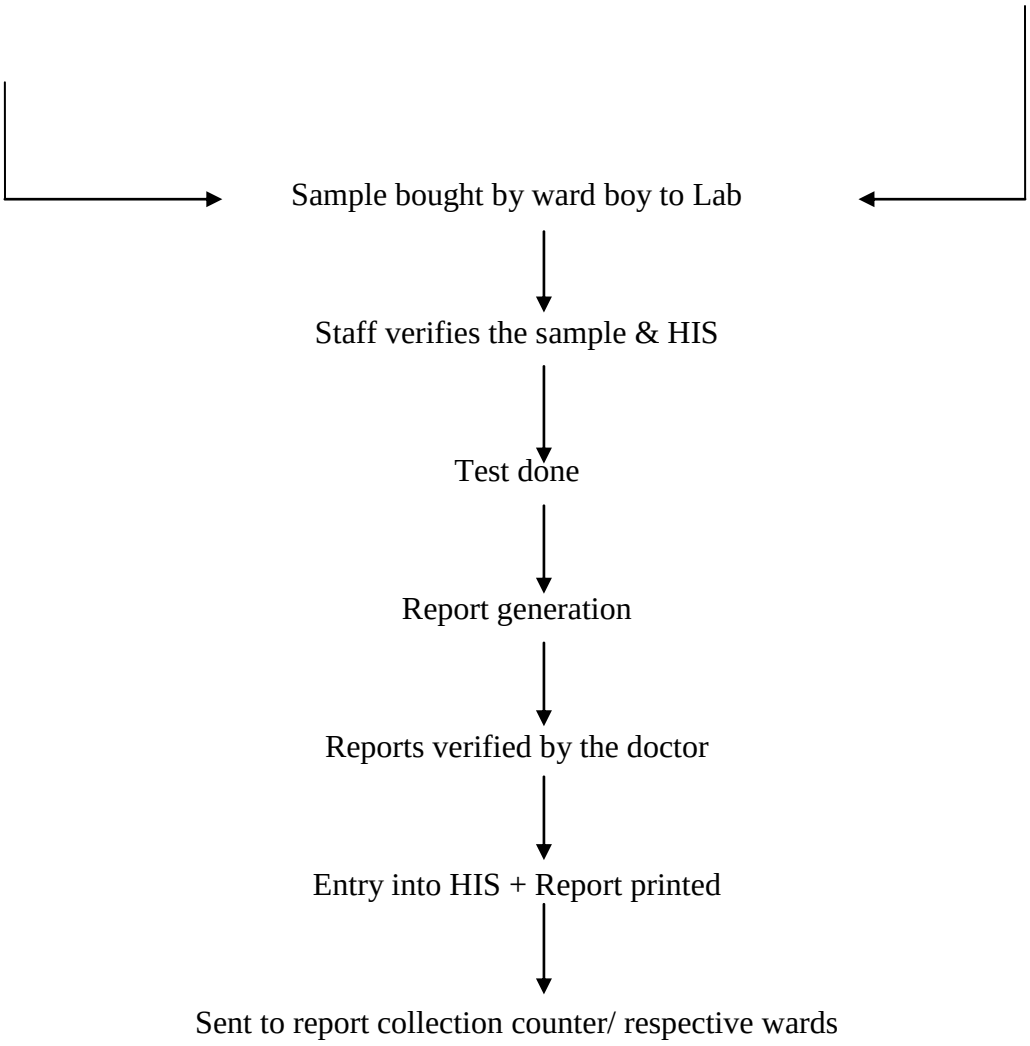


Each person has the following staff working under him/her-



Workflow:

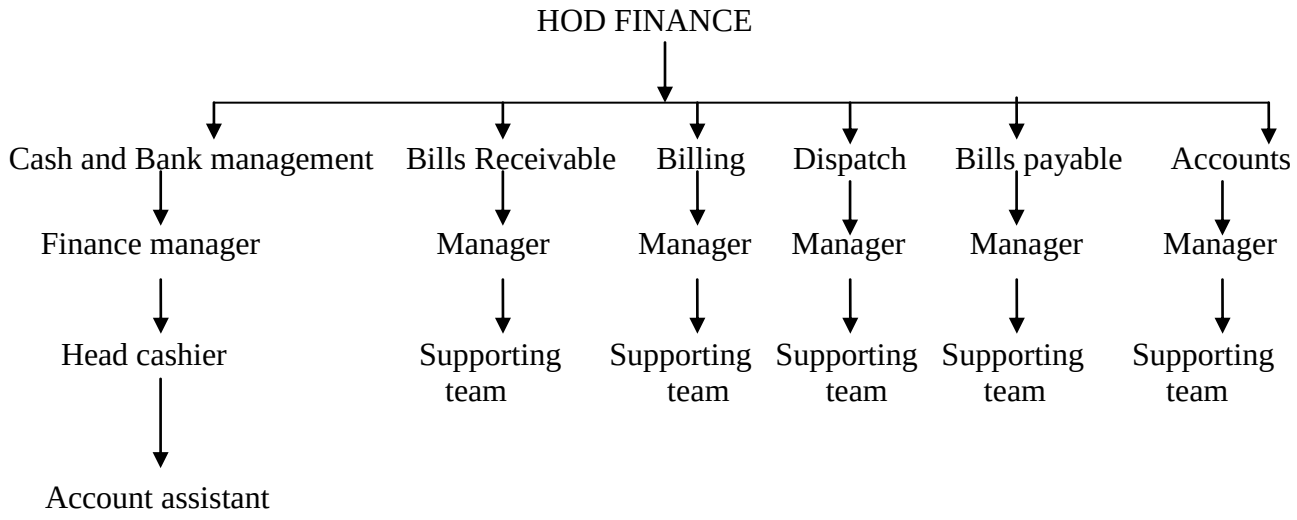




FINANCE & ACCOUNTS

Layout: -Basement

Organogram:

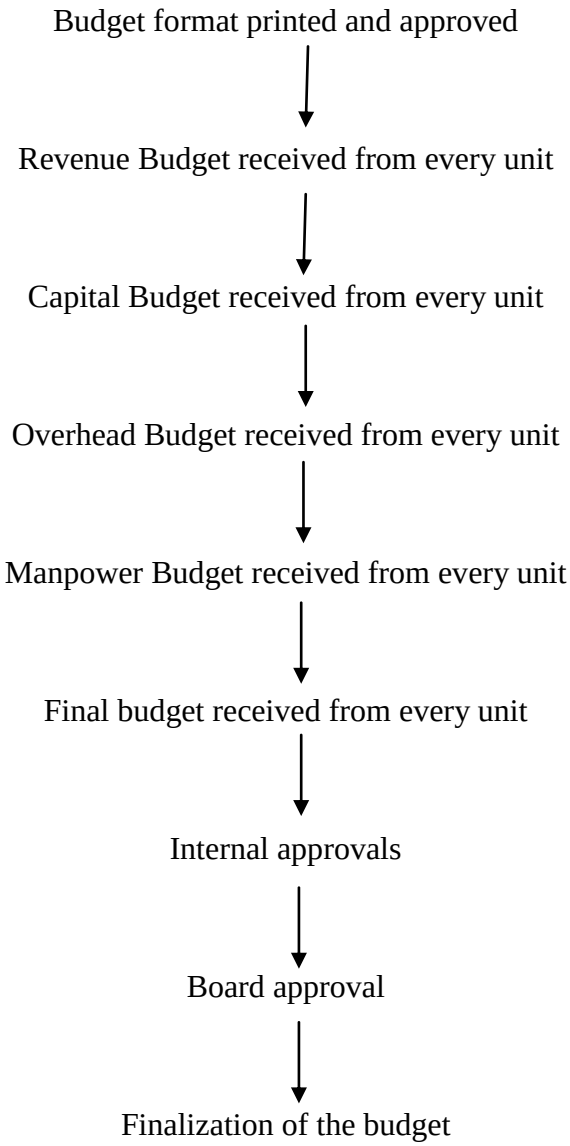


Scope of Services:

The scope & complexity of service provided by this department (which includes billing aspect also) is:

- Business building insights.
- Areas for lowering cost & improve profitability.
- Updating of bills on daily basis for IPD patients.
- Customer (Patient's Attendant) satisfaction for billing concern.
- The Billing staff has overall responsibility for coordination of various functions (Pharmacy, Wards etc.) and daily basis report for admission and they maintain a log of all the problems that arise on day to day basis and provide the necessary solution as deemed proper and reasonable.
- Daily collection of money from various sources in the hospital and its deposition in bank.
- Maintenance of petty cash.
- Budgeting
- Department serves all departments for finance & billing aspect.
- Making Balance sheet, Profit & Loss Statement for the financial year.
- Maintenance of file of all employees, vendors, creditors & debtors.

PROCESS OF BUDGET MAKING



LAUNDRY SERVICES

Layout: -Basement

Total Manpower:

Supervisor- 2

Operator- 2

Helper- 34

Tailor- 2

Tailor for CSSD- 1

MAINTENANCE & ENGINEERING

Layout: -Basement

Total Staff: 41

Components:

- Electricals
- Boiler Plant
- Air conditioning
- Sewage treatment plant
- Carpentry
- Pump House + Fire Fighting
- HVAC
- Plumbing

Functions:

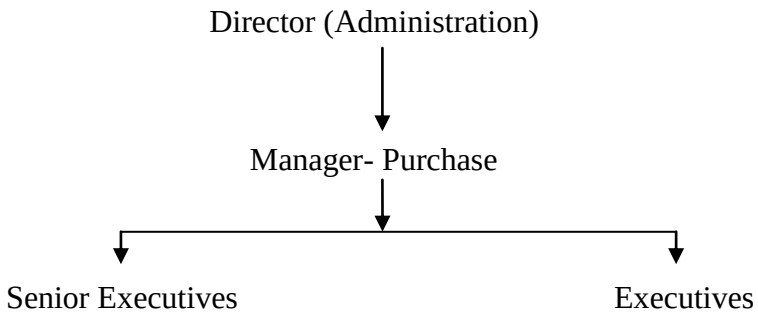
- Preparing the plan for equipment daily and preventive maintenance, spare parts and consumable for the department so that each facility works properly & there is minimum breakdown.
- Engineering is also responsible for controlling and ensuring for optimum use of power, water and diesel.

PURCHASE DEPARTMENT

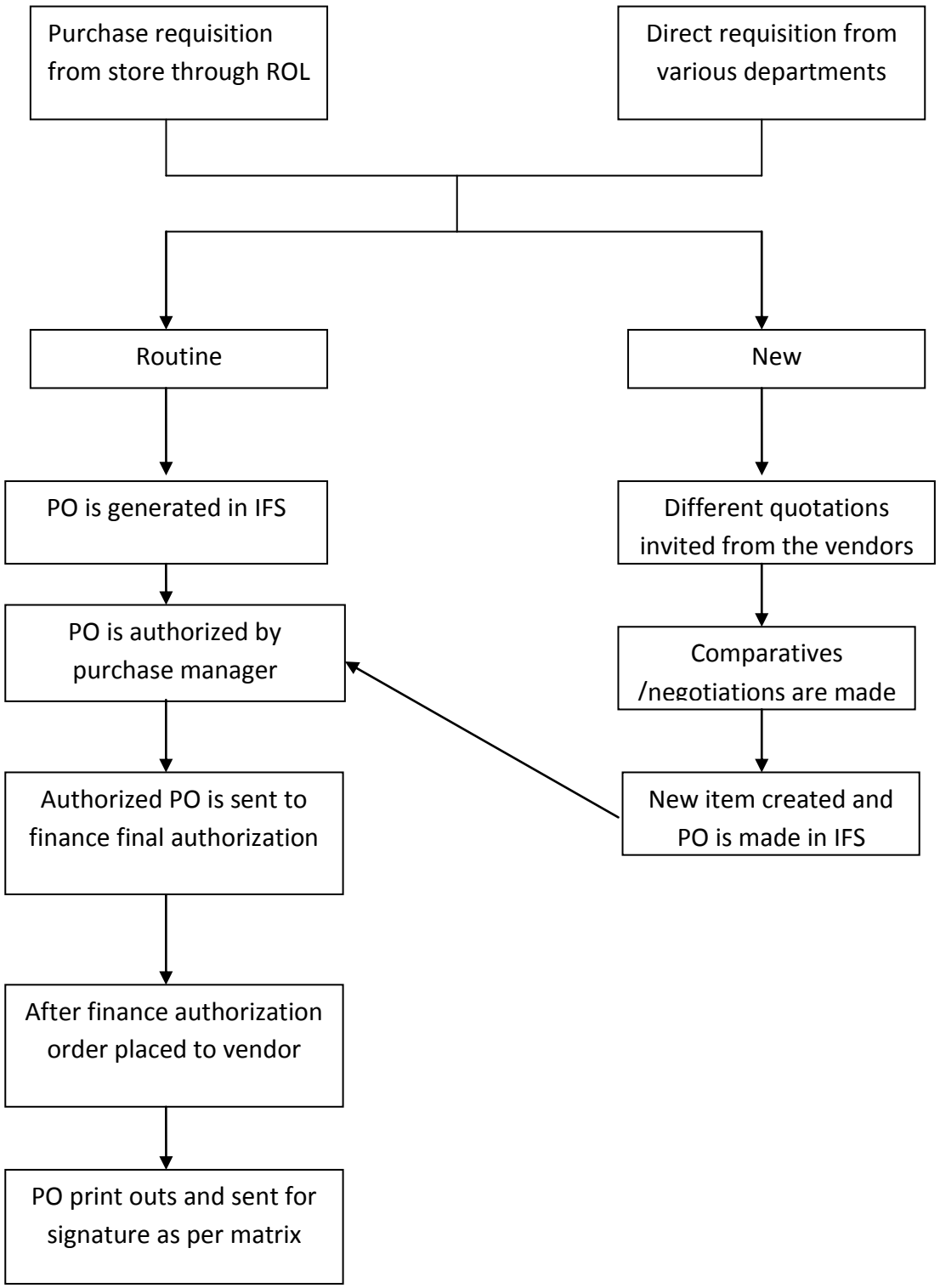
Layout: Basement

Total Staff: 4

Organogram:



Work Flow

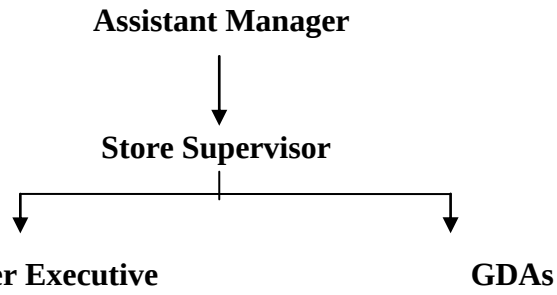

Purchase requisition from store through ROL
Direct requisition from various departments
Routine
New
PO is generated in IFS
Different quotations invited from the vendors
PO is authorized by purchase manager
Comparatives /negotiations are made
Authorized PO is sent to finance final authorization
New item created and PO is made in IFS
After finance authorization order placed to vendor
PO print outs and sent for signature as per matrix

STORES

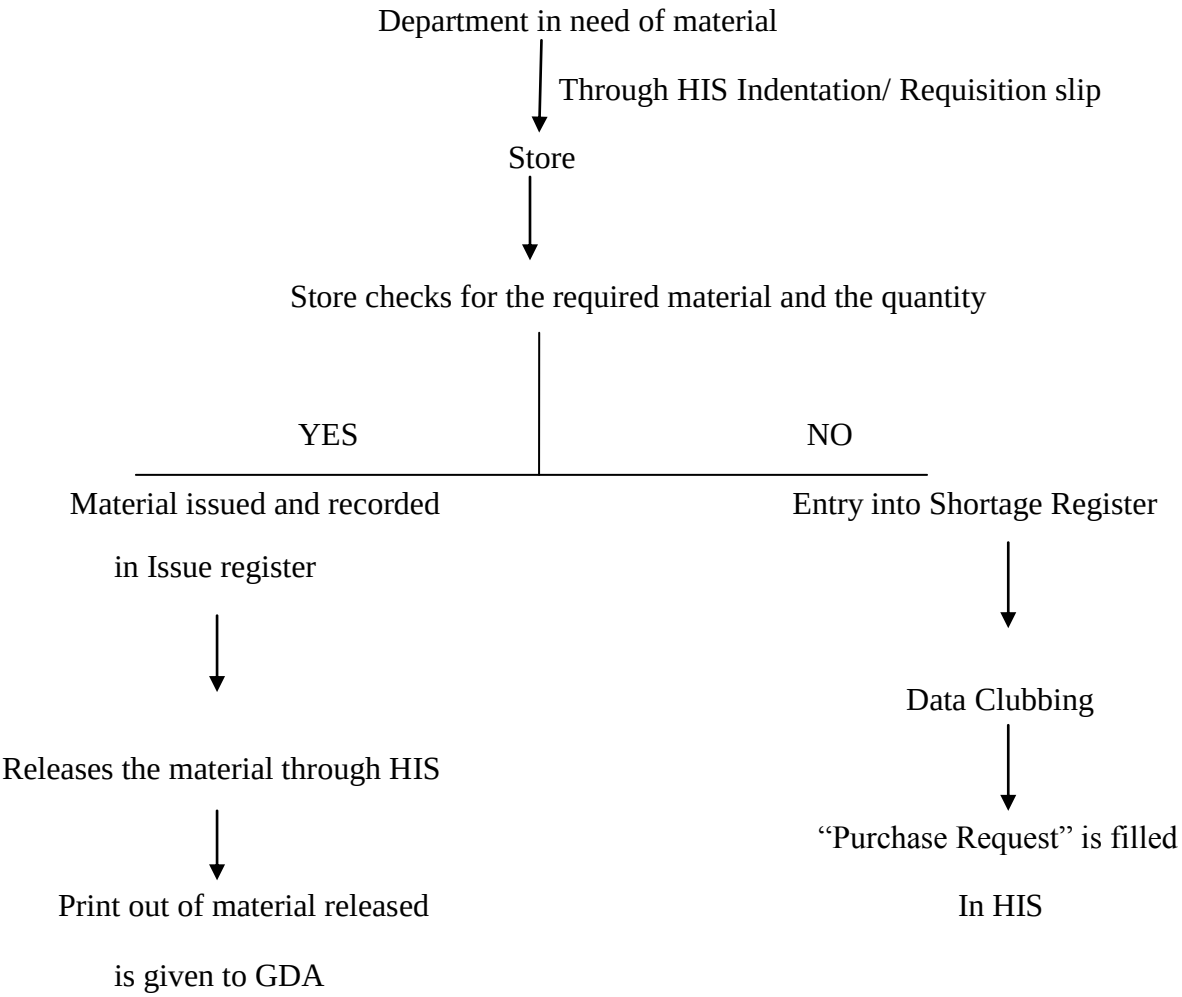
Layout: - Basement

Staff: 5

Hierarchy:



WORK FLOW



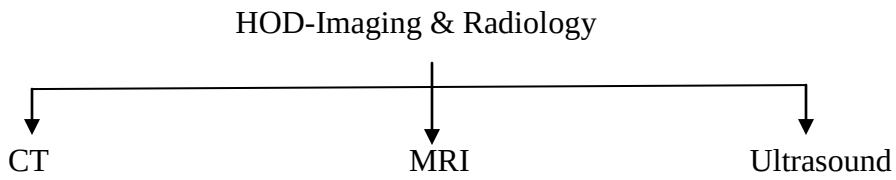
IMAGING & RADIOLOGY

Services provided:

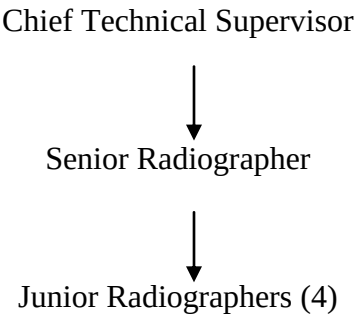
- CT
- ULTRASOUND
- X-RAY
- MRI
- MAMMOGRAPHY
- BONE DENSITOMETRY

Staff & Hierarchy:

Doctors: 4



Radiographers: 6



MRI Technician: 1

Typist: 1

GDA's: 3

HOUSEKEEPING

Status: Outsourced

Components & Status

Component	Outsourced to:	Total personnel	Shift Timings
1. Housekeeping	Sandha & Co.	101	Morning: 7A.M – 3.30P.M Evening: 1P.M – 10 P.M Night: 10 P.M – 7 A.M
2. Wardboys (GDA's)	Indian Sanitation	105	Morning: 7A.M – 3.30P.M Evening: 1P.M – 10 P.M Night: 10 P.M – 7 A.M
3. Glass Cleaners	Classic Appearance	5	8 A.M – 5.30 P.M
4. Pest controllers	Pest Control of India (PCI)	1	Morning: 7A.M – 11 A.M Evening: 5 P.M – 9 P.M

Advantages of outsource:

- ✓ Reduce workload of management e.g. no salary, PF, Uniform headache.
- ✓ Manpower management is the responsibility of contractor
- ✓ Reduction in cost if services are contracted out.

FUNCTIONS:

- Clean Floor ,Wall Ceiling
- Discharge Cleaning
- Remove Garbage
- Replace Supplies In Utility Rooms
- Clean Housekeeping Equipments
- Clean Room, Wards, Reception, OT, ICU Etc.
- Infection Control
- Pest & Rodent Control
- Odour Control
- Environment Hygiene
- Sanitation Hygiene
- Checking Cleanliness Of All Areas
- Control & Reporting Of All Maintenance Works
- Hospital Waste Disposal
- In-Service Training

Day	Weekly Assignment
Monday	Thorough Cleaning of all hospital doors
Tuesday	Thorough Cleaning of Ceilings & AC Ducts
Wednesday	Thorough Cleaning of corners & skirting
Thursday	Thorough Scrubbing of Toilets
Friday	Thorough Cleaning of AHU's & wooden beading cleaning
Saturday	Thorough Cleaning of Outer area + Parking Area
Sunday	Thorough Cleaning of all Administration Block + All Wards

EMERGENCY

Layout: - Ground Floor

- Nurse Station
- Store room: 1
- Doctor's Duty Room: 2

Infrastructure:

- Beds: Total: 11
  - For Triage- 4
  - For Observation- 7
- Ambulances- 2
- Air Ambulances- 1

Nurse: Patient Ratio: 1:1

Staff & Hierarchy:

1 Resident doctor, 1 Junior Consultant

Head nurse- 1

Team leader (nurse) - 1

Nurses- 11

GDA- 3

Inventory Management:

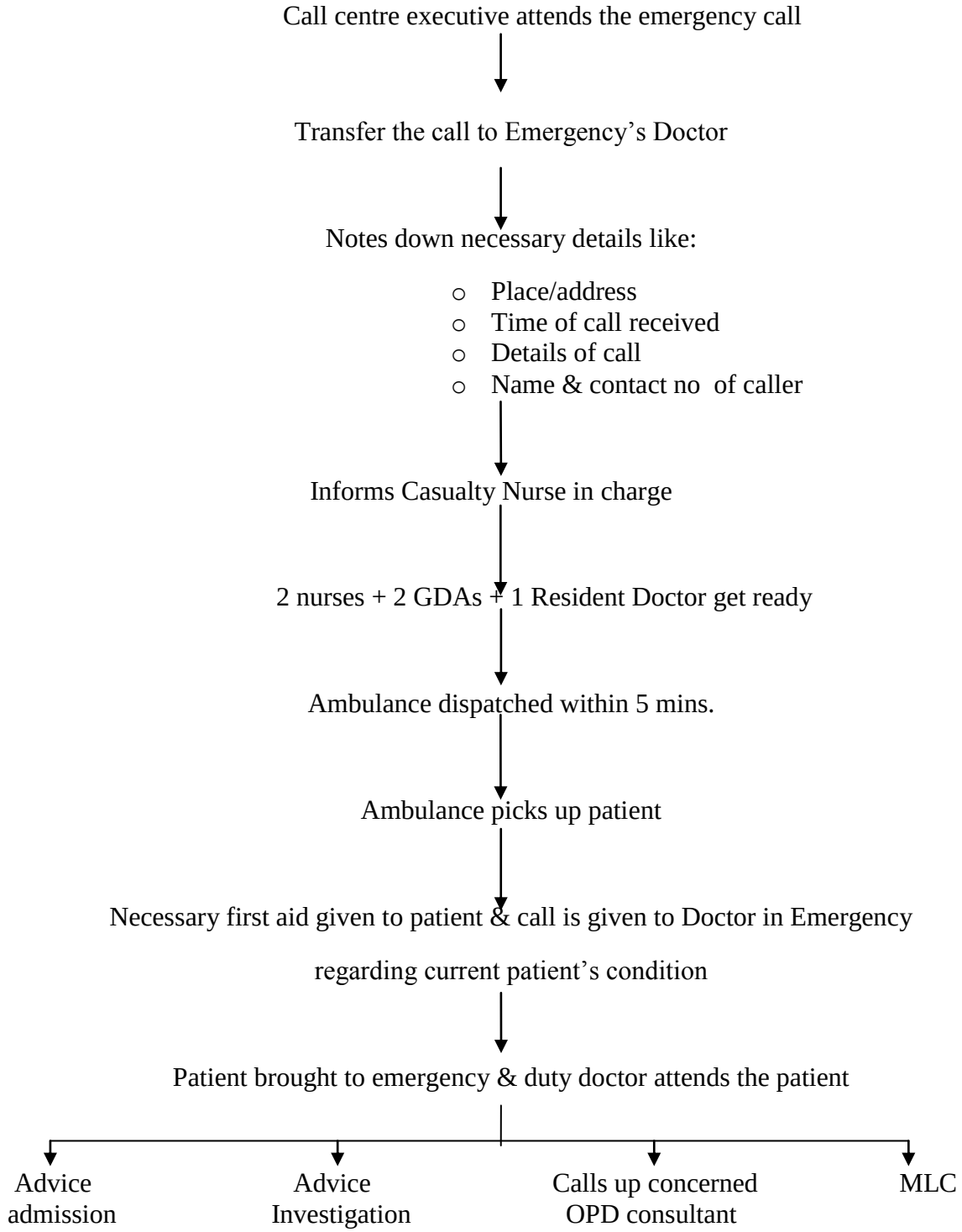
1. Inventory register:
   - Medicine trolley daily checklist
   - Dressing trolley daily checklist
   - POP Checklist
   - Crash cart checklist
2. Ambulance inventory Register

Maintenance Book:

- Oxygen pressure daily checklist
- ECG Checklist

- Biomedical Equipment Checklist.

AMBULANCE SERVICE FLOW



Heart Command Centre- I and II

Layout- Ground Floor

Beds- 12 (including 4 for Triage, 3 for Observation and 1 Isolation Room)

Staff- Senior Residents= 3 in morning shift, 2 in evening and night shift

Junior Residents= 2

Nurses= 15

GDAs= 3(morning), 2(evening), 2(night)

For critical patients, Nurse: patient=1:1

For non-critical patients, Nurse: patient=1:2

Workflow-

Cardiac procedure done in CATH lab or OT

↓

Patient is transferred from OT to HCC- I or II

↓

If patient is stable but requires further investigations, then transferred to wards

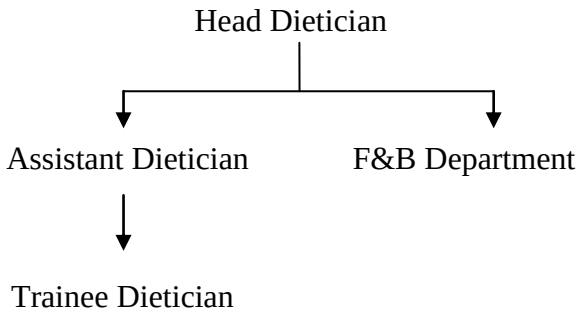
If patient is unstable, then he remains in the HCC till he is ready to be either shifted to Wards (most of the times) or is ready for getting discharged

Clinical Nutrition & Dietetics Department

Outsource to- Good Food Dietary services.

Layout: -Ground Floor

Organogram:



F&B Department-

- Unit Manager- 1
- Assistant Manager- 2
- Supervisor-14
- Chef-1
- Accountant- 1
- Cashier- 8
- Cook- 33
- Order taker-2
- Stewards- 60
- Store Keeper-4
- Utility- 36

Functions:

- Catering to Inpatients, Hospital staff, Patient attendants.
- Diet counseling
- Education

- Smooth provision of laid out 9 diets to the patients.
- To check the patient, Attendant & Staff food for quality, preparation, presentation and packing.
- Coordinating closely with the Nursing shift in charges for changes in the patient's diet or new admissions etc.

Areas in Kitchen

- **Receiving & Storage Area-** Walk in refrigerator
- **Preparation Area:** For peeling, cutting, chopping, slicing, mincing.
- **Cooking Area:** Pantry, Bakery, Continental, Indian
- **Tray Layout & Packing Area**
- **Service Area:** From here food is transferred to patient's on trolleys.

Other Areas:

- Dish washing & pot washing area
- Dietician Room

Type of Diet	Diet Card Color
Normal	Green
For Diabetes Mellitus	Yellow

Flowchart of Dietician and Inpatient Interaction:

The Dietician takes details of new patients such as name, UHID, doctor's name, diagnosis and diet prescribed.

↓

Takes a detailed round and provides nutritional counseling and education, ensures patients' compliance to recommended diet.

↓

Does nutritional screening in order to know about patients' clinical condition, appetite and tolerance to food and acceptance to hospital diet and food allergies if any.

↓

After the rounds, detailed food summary sheets are planned and prepared for every patient keeping in mind medical history and preferences of patient as well.

Flowchart of Dietician & Nursing staff interaction:

Dietician receives a daily diet requisition once a day from all nursing station.

↓

Dietician cross-checks received diet requisition from time to time with nurse both during rounds and on phone constantly.

↓

Dietician updates changes with respect to new admissions/ transfers/ discharges/ changes in diet

SECURITY SERVICES

Outsourced- Security Guards Corps (P) Ltd.

Security personnel:

- 1 Supervisor per shift
- 1 Inspector per shift
- 60 guards in main building
- 24 guards in Rehabilitation Centre
- 144 GDAs

Operational CCTV's:

- 48 in main building
- 8 near the main gate
- 4 in Rehabilitation Centre

Area of Operation (Present):

- Visitor's check
- Surveillance of hospital through CCTV's
- Theft , Burglary
- Violence
- Handling of MLC
- Material movements in & out of the hospital

- Handling visitor's pass
- In case of patient's death, handling emotional chaos of attendants
- Parking management and traffic control.

Additional Responsibilities:

- Playing their role once different codes are bought into action.
  - Blue : Individual Disaster
  - Red : External Disaster
  - Pink : Baby Abduction
  - Grey : Internal disaster
  - Purple : Fight likely
  - Yellow : Fire

- Locker & key management.
- Conducting Mock Fire and Disaster Drills.
- Playing their part in **HAZMAT**.

ICU

It mainly caters to the non- cardiac patients.

No. of beds- 16 (including 1 bed for dialysis and 1 for Isolation of special patients)

Nursing staff: 15 nurses (in a nurse patient ratio of 1:1)

Housekeeping staff: 7 (in 3 shifts- Morning -3, Evening-2, Night-2)

Working Shifts:

Morning: 8.00 AM to 2.00 PM

Evening: 2.00 PM to 8.00 PM

Night: 8.00 PM to 8.00 AM

EQUIPMENTS:

1. Ventilator
2. Patient monitor
3. Defibrillator
4. Syringe pump
5. ECG machine

6. Pace Maker
7. ICU bed
8. Blood gas analyzer
9. Crash Cart

Each Bed Space Contains:

1. Motorized Electric Bed
2. Multiparameter Modular Philips Monitor – mounted on wall behind the bed.
3. Chart/ Locker Trolley
4. Independent wall mounted panel housing 2 each of Oxygen, Air & Vacuum outlets (all connected to central manifold by concealed pipelines)
    - Each bedside monitor is hooked to CENTRAL NURSIING STATION MONITOR.
    - Other Equipments (common to all beds):
        - Ventilators
        - Syringe pumps
        - Feeding pumps
        - Nebulizer
    - 1 bed has access to piped RO water & can be used for bed-side dialysis.

Admission in ICU can occur from:

- Inpatient wing of the hospital
- Emergency complex
- From other hospitals
- Sometimes directly from OPD
- Rarely from Bronchoscopy, Endoscopy, Dialysis unit

Patient admission procedure in ICU-

Physician

(Desiring admission of a patient in ICU)

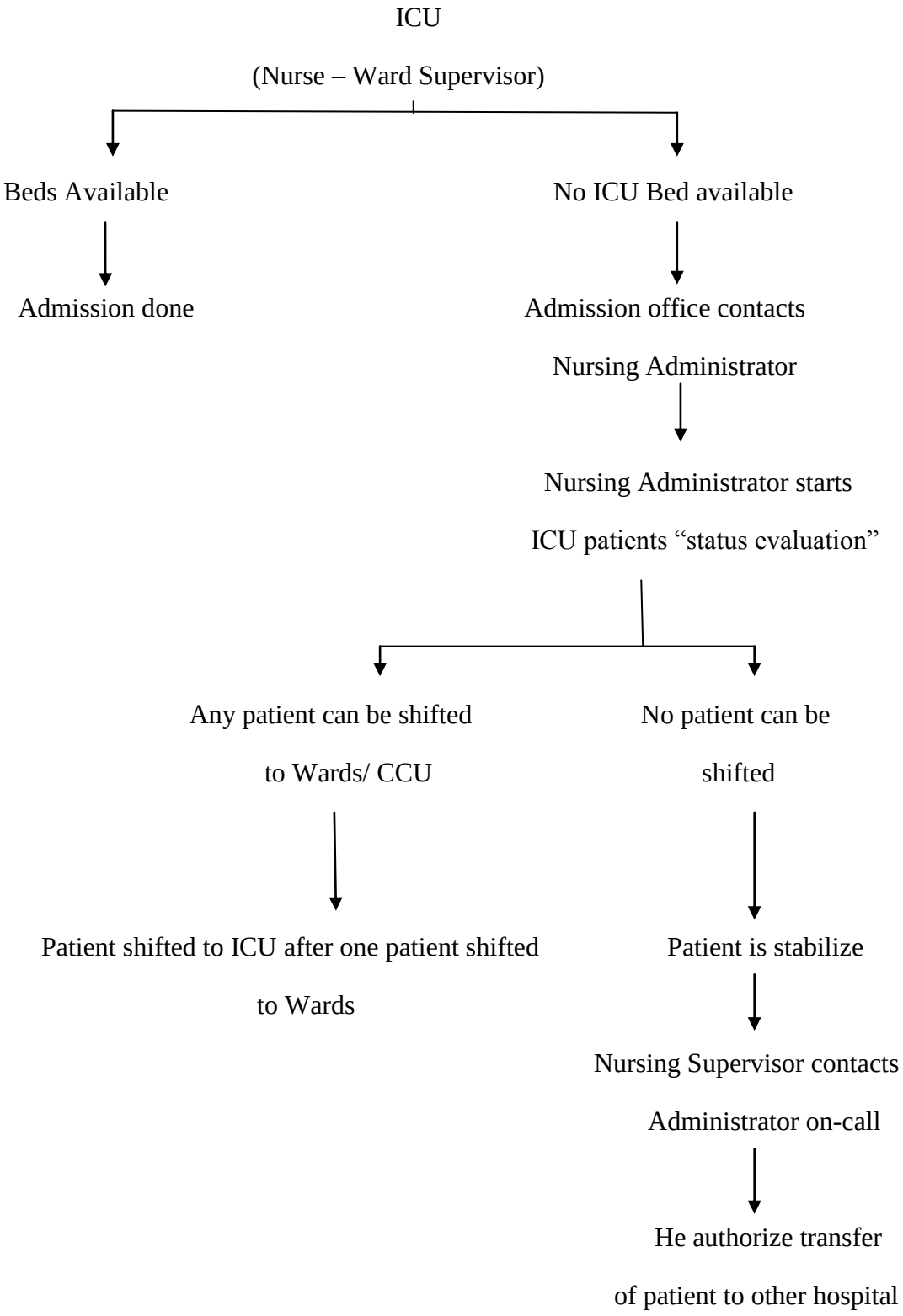
↓ Contacts

Admission Office

↓

Contacts for Bed Availability with

↓


ICU
(Nurse – Ward Supervisor)
Beds Available
No ICU Bed available
Admission done
Admission office contacts
Nursing Administrator
Nursing Administrator starts
ICU patients "status evaluation"
Any patient can be shifted
to Wards/ CCU
No patient can be
shifted
Patient shifted to ICU after one patient shifted
to Wards
Patient is stabilize
Nursing Supervisor contacts
Administrator on-call
He authorize transfer
of patient to other hospital

DEATH PROTOCOL

In case of clinical death

↓

Duty doctor informs both Admitting & CCM team

before declaring death

↓

Family informed of death

↓

Doctors on duty issues a Death Certificate ASAP after death

↓

Body is duly packed in fresh sheet & retained in ICU**

↓

Family is requested to clear bills (Hospital + Pharmacy + any other)

& fill Dead Body Form

↓

After receiving Dead Body Form, body handed over to family

** Body retained in ICU for a maximum of 1 hr. after death and up to 4 hrs in exceptional situation on orders of Duty Doctor & beyond that on orders of GM (Admin). Thereafter body is sent to Mortuary and security is informed.

If it is a MLC case, packed body is sent to mortuary & handed over to police by security.

Information Technology (IT) Department

Outsourced to HCL (for FMS) and Redington (for hardware)

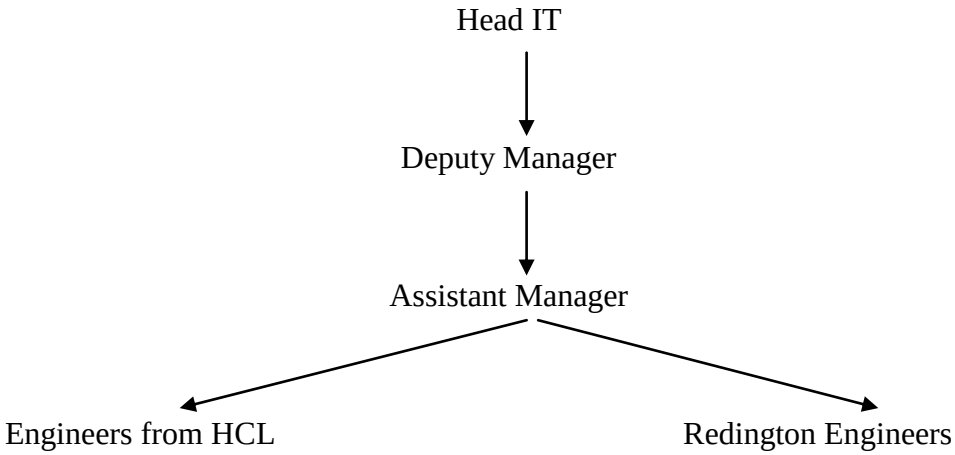
Layout: - First Floor

Staff: 8 – HCL

2 – Redington

3 – FEHI (Managers)

Organogram-



Functions and responsibilities:

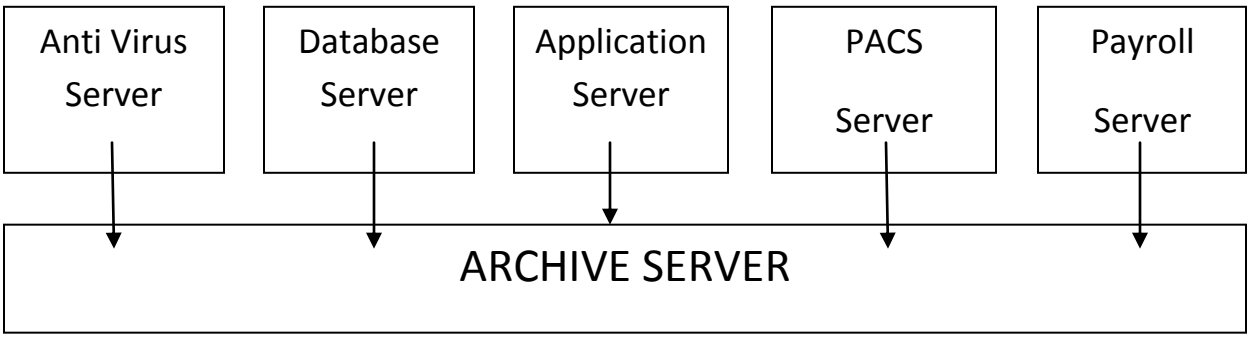
- To keep the servers alive
- To keep the network alive
- To keep internet connection alive
- To take care of all the desktops & laptops in the organization
- To track the records of all the desktops
- To keep an eye on the employees desktops.
- To resolve the complaints of the employees
- Training of the other staff for the HIS
- To come up with new technologies that can be implemented in the hospital to ensure its smooth functioning and increased safety of care of patients.

2 Major Work Areas: General Administration & HIS

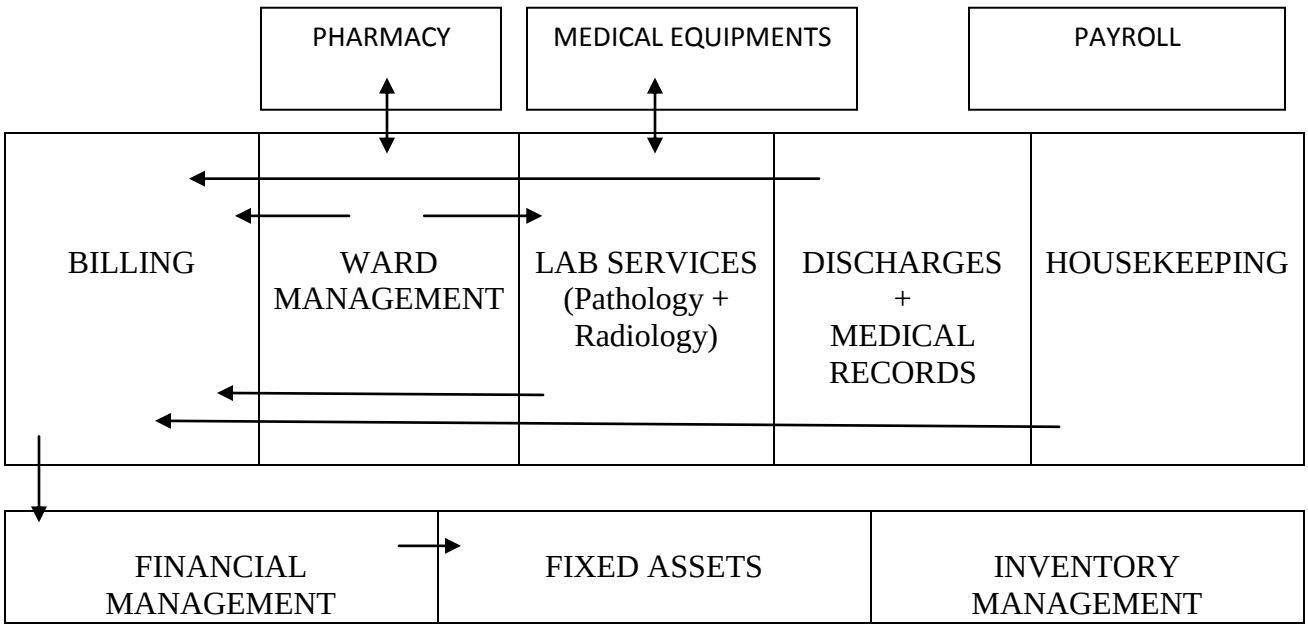
I) General Administration:

Servers:

- Anti virus server
- Database server
- Application server
- PACS server
- Payroll server
- Archive server



II- HIS STRUCTURE:



OT (Operation Theatre)

- **Layout :** 1st floor
- **No. of OT's :** 9
- **No. of beds in Pre operative ward :** 5
- **No. of beds in post operative wards :** 6
- **Utility room :** 1
- **Pantry :** 1
- **Sterile room :** 1
- **Changing rooms :** 4
- **OT Staff-**

1. OT Coordinator- 1
2. Surgeon- 1
3. Anesthetist- 1
4. Anesthetist Assistant- 1
5. Senior OT Technician-1
6. OT Technician- 6
7. Perfusionist-1
8. Perfusionist technician- 1
9. Scrub Nurse-1

OT Washing & Fumigation Schedule:

OT - 1,2,3,8,9 : Every Saturday
OT - 4,5,6,7 : Every Sunday

Present Scenario:

OT Washing and fumigation done every Saturday and Sunday

↓

In case, culture report (every 72 hrs for each OT) shows more **than 3 types of isolates** then fumigation done on same day in OT.

INFECTION CONTROL SURVEILLANCE PROGRAME FOR OT

Records maintained for OT Sterilization Check:

1. **OT Culture File :**

- Contains culture report of each OT
- Done every **72 hrs**.
- Swabs taken from OT Floor, walls, table locations.
- Method used : **Slit Air Method**
- FORMAT : Site (OT No.)
  Method
  Receiving date
  Reporting date
  Microbiology report

2. **Daily OT Cleaning File :**

- Daily OT cleaning record (compiled to get monthly record) with format as :
  OT No./Item name /Qty./ Date /Morning, Evening, Night with
  (personnel sign & ID no.)
- OT Washing date record, OT Fumigation date record.

3.Fumigation Record File

- Separate record for each OT
- Fumigation done by **2% trigene**
- Weekly reporting
- FORMAT :
  Date/ Fumigation done by/ Technician name/ Remarks

DOCUMENTS AND CHECKLIST MAPPING ACCORDING TO PATIENT FLOW IN OT

Patient's Progress	**Documents in file**	**Documents to be added**	**Checks and checklist**	**Procedure done by nursing staff (during the process)**
From WARD to PRE-OPERATIVE AREA	Consent forms: - Informed - Surgical - Anaesthesia Pre operative checklist Bill clearance papers Records of- Antibiotic & Investigations Pre anaesthetic check up record	**Surgical safety checklist form** Requisition forms: -Histopathology -Blood bank -Laboratory -Indoor patient's drug requisition form	All documents received from wards are complete. Part preparation done On-time pre surgery antibiotic schedule	**OT Patient Pre hold register** completion Time in entry in **" In-Out Register"**
From PRE-OPERATIVE AREA to OPERATION THEATRE (OT)		Completed **Surgical safety check list form**. Operation notes	**"First column" of Surgical safety check list form** completed or not. Checks of : -Medical gases -Equipments -Electrical points -Linen -Complete surgical set **"Pre column" of Instrument checklist form.**	Completion of **" second column" of Surgical safety check list form** **Operation records register** completion **"Post column" of Instrument checklist form** completed.

From OT to POST OPERATIVE AREA/RECOVERY AREA		Completed operation notes form OT Daily Charge Bill	Proper disposal of OT waste as per procedures laid down. OT preparation for next surgery. Special attention to blood spills.	OT Daily charge bill completion Completion of **"Time-out" in "In-Out OT Register"**

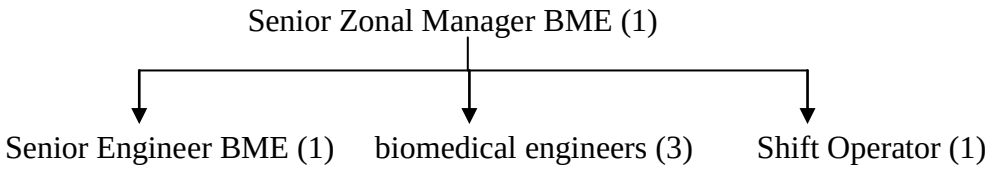
BIO MEDICAL ENGINEERING DEPARTMENT

Layout: 1st floor

Total Staff: 6

Organogram:

The biomedical department of Fortis Escorts Heart Institute comprises of the following staff-



Functions-

Biomedical Engineering Department performs four main functions:

1. Budgeting for new equipments
2. Installation
3. Preventive maintenance/calibration
4. Breakdown management

CSSD

(Central Sterile Supply Department)

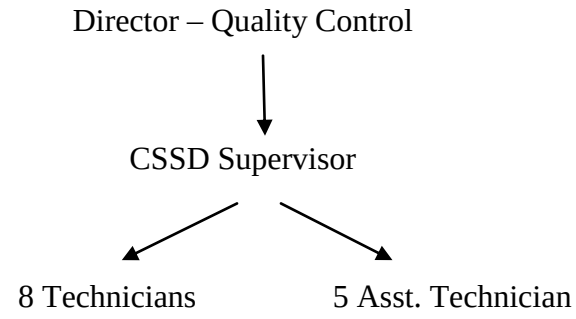
Layout: 2nd floor

Staffing: 1 Supervisor

8 Technicians

5 Assistant technicians

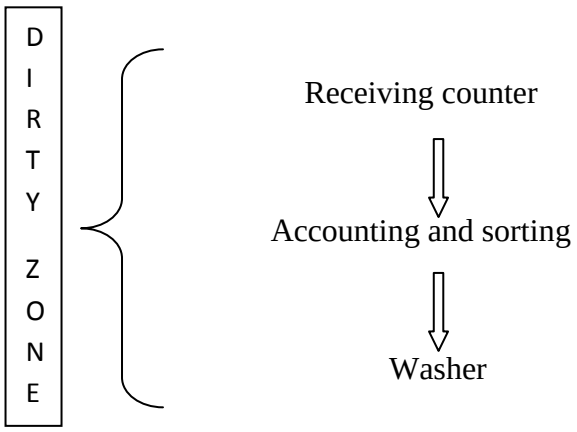
Organogram:

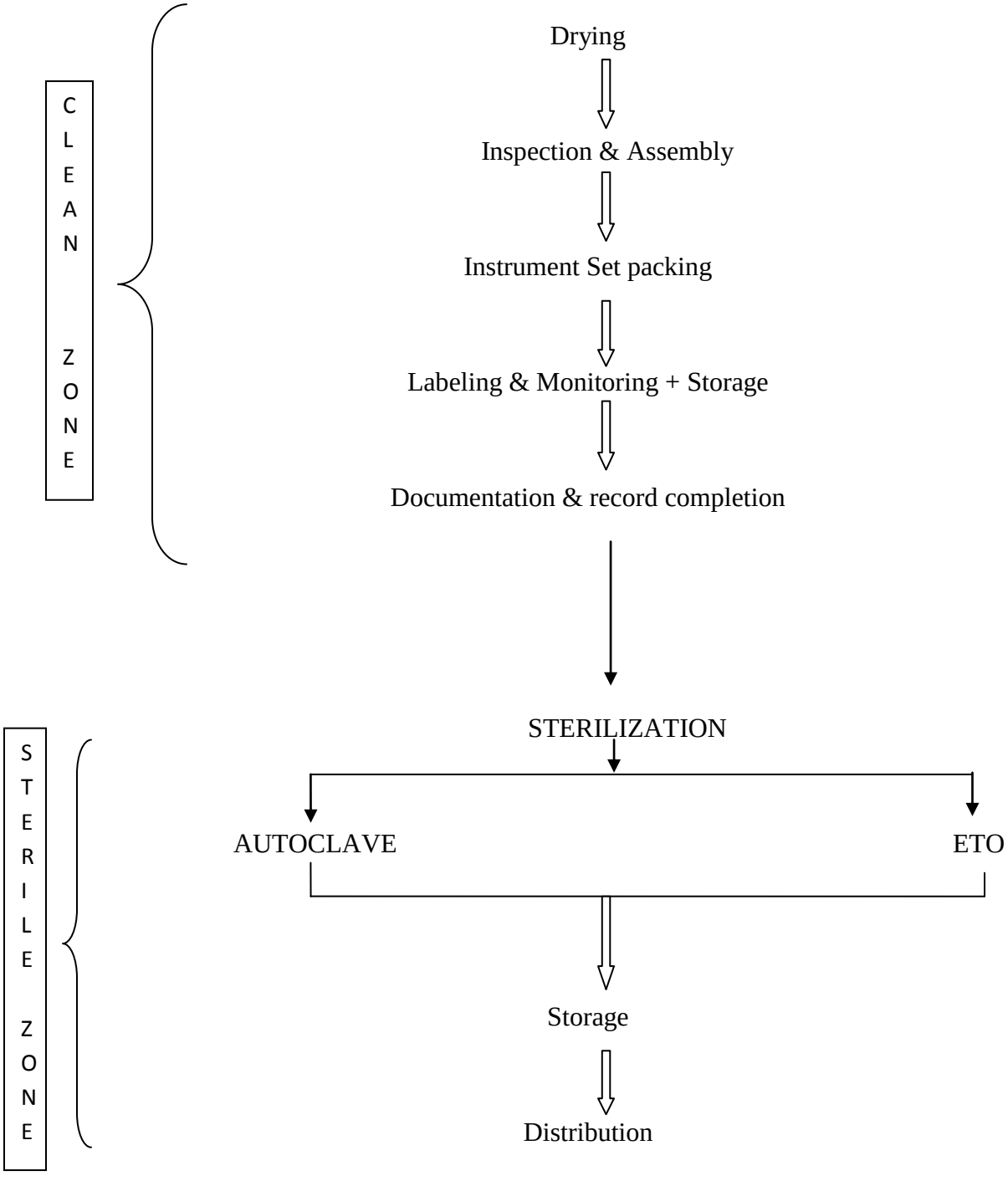


Infrastructure:

- Autoclaves (vacuum type) -2
- ETO -3
- Ultrasonic washer- 2

DEPARTMENT WORK FLOW:




CLEAN ZONE
Drying
Inspection & Assembly
Instrument Set packing
Labeling & Monitoring + Storage
Documentation & record completion
STERILE ZONE
STERILIZATION
AUTOCLAVE
ETO
Storage
Distribution

METHODS OF STERILIZATION USED:

AUTOCLAVE (Steam sterilization)	ETO
• No. of autoclaves – 2 • Type –vacuum type • No of cycles per day – Acc. to load. • Temp/time/pressure. 121 deg C/ 15 mins/ 1.2 kg 134 deg C/ 4 mins/ 2.2 kg • **STERILIZATION CHECK :** a) Bowie Dick Indicator (Chemical Indicator) Once a day b) Biological Indicator : *G. Stereothermophilus* Once a week	• Number – 3 • No of cycles – usually 1 / day (But can vary acc. to load) • Temp – 54 deg C • 12 hour cycle • **STERILIZATION CHECK :** ✓ Biological indicator *Bacillus atrophaeus* : Each load.

MONITORING:

CHEMICAL MONITORING	BIOLOGICAL MONITORING
• Class I Indicator : Interlocking Tape applied on packs. • Class II Indicator : Bowie Dick + Batch Monitor • Class VI Indicator : To be put in packs.	• *G.stereothermophilus* • *B.atrophaeus*

Labeling:

Autoclave I or II/ Lot no/ Date of Sterilization/ Date of Expiry/ Indicator Slip/ Contents

Records Maintained:

1. Receivable item register
2. Items issued register
3. CSSD Sterilization Record Register :

   It includes:

   - Reports from microbiology
   - Graphs generated from each sterilization
   - Batch Monitoring Record

4. Record keeping register of each sterilization process :

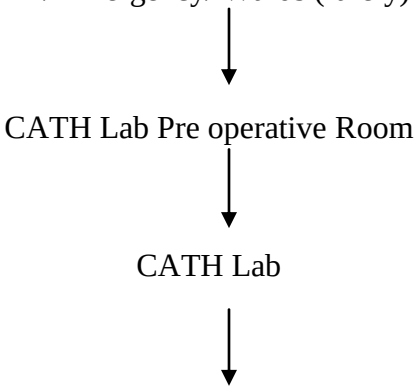
   It includes:

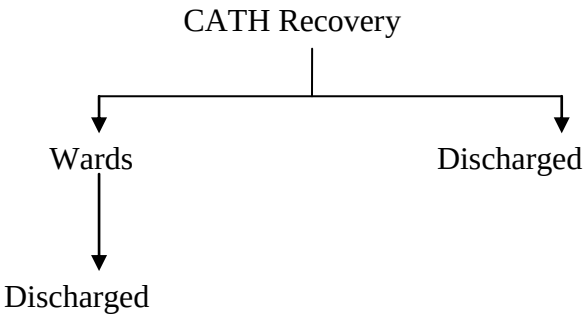
   - Indicator used
   - Temperature / pressure
   - Time of start/end
   - Initials of person doing sterilization
   - Process number

Catheterization Lab (CATH)

Layout: 2nd floor

- **Workflow**
- Patient from Cardiac OPD/ Emergency/ Wards (rarely)





- **Common procedures in CATH Lab:**

  - Coronary Angiography (CAG)
  - Coronary Angioplasty (PTCA)
  - Balloon Mitral Valve Valvoplasty
  - Permanent Pacemaker
    - Single chamber
    - Dual chamber
    - Bivent
    - Combo device
    - AICD
  - Electrophysiology study- Radiofrequency Ablation (EPS-RFA)

CATH Recovery

Layout- 2nd Floor

Beds- 12 (3 rooms)

Staffing- Doctor-1

Nurses-9-10 (if the patient is critical then the nurse: patient ratio is 1:1, otherwise it is 1:2)

GDAs-= 3-4

Workflow-

After the patient has undergone a cardiac procedure, he/she is shifted to CATH Recovery (any of the 3 rooms), to keep an eye over the cardiac status for the next few hours.

- If the patient had only Angiography, he is discharged from CATH Recovery after 6 hours of the procedure

- If the patient has undergone any surgical procedure, then he/she is shifted to the wards the next day for further investigations.

The nurses keep the record of the patients' status and their medications as well. The duty doctor is responsible for reviewing the patients from time to time.

CATH Recovery- IV

Layout- 2nd Floor

Beds- 12 (in each of the 3 rooms)

Staffing- Doctor-1

Nurses-9-10 (if the patient is critical then the nurse: patient ratio is 1:1, otherwise it is 1:2)

GDAs-= 3-4

Workflow-

After the **patient** has **undergone** a cardiac **procedure**, he/she **is shifted** to **CATH Recovery** (any of the 3 rooms), to keep an eye over the cardiac status **for the next few hours**.

- If the patient had **only Angiography**, he is **discharged** from **CATH Recovery after 6 hours of the procedure**
- If the patient has undergone any surgical **procedur**e, then he/she is **shifted** to the **wards the next day** for further investigations.

The nurses keep the record of the patients' status and their medications as well. The duty doctor is responsible for reviewing the patients from time to time.

CCU

Layout- Fourth floor

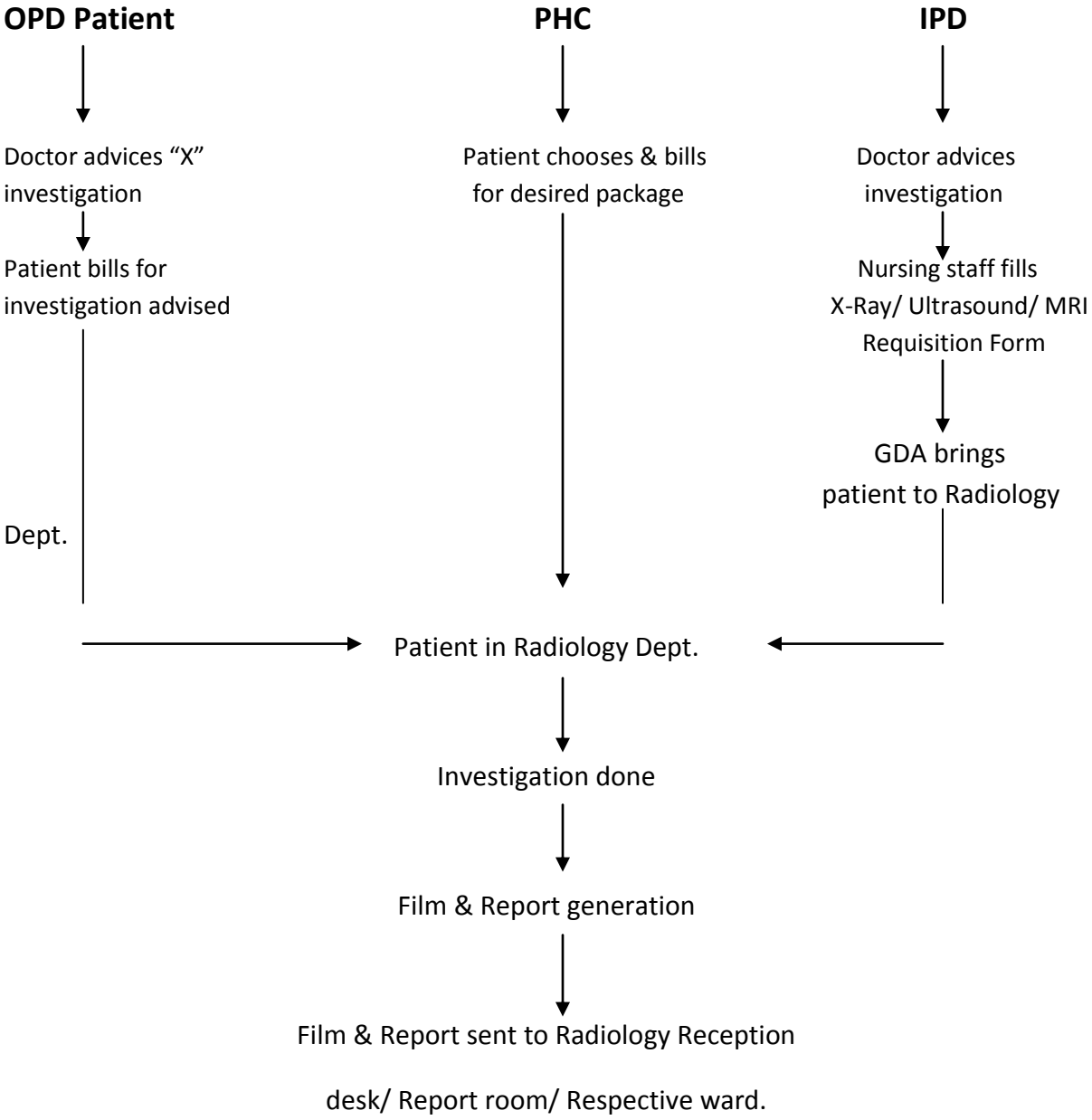
Beds: 7

Store: 1

Clean utility room: 1

Dirty utility room: 1

WORKFLOW



Wards

Layout- 3rd, 4th floor (for adults) and 5th Floor (for pediatrics)

Beds- 3rd floor= 64

4th Floor= 60

5th Floor= 26

Staff- At every floor, the staffing pattern was the same.

Staffing of Nursing Personnel In Wards-

Chief Nursing Superintendent

↓

Deputy Nursing Superintendent

↓

Nursing Supervisor

↓

Nursing In charge

↓

Nursing TL (Team Leader)

↓

Nurses

- Nurse to Patient ratio= 1:5
- The staff works in three shifts-
  a. Morning (8am -2pm).
  b. Evening (2pm-8pm).
  c. Night (8pm-8am).

EXECUTIVE SUMMARY:-

PATIENT SATISFACTION

Patient satisfaction is a highly desirable outcome of clinical care in the hospital and may even be an element of health status itself. A patient's expression of satisfaction or dissatisfaction is a judgement on the quality of hospital care in all of its aspects. A healthcare organisation's reputation for its commitment to quality and patient-centered customer service stands as the main criteria for individuals in choosing that organisation. Therefore, measurement of patient satisfaction and incorporating results to create a culture where service is deemed important should be a strategic goal for all the health-care organisations. Over the past several years, the issue of Patient satisfaction has gained increasing attention from the executives across the healthcare industry. As a result, all the healthcare organisations have been focussing their attention on improving patient satisfaction through various initiatives. National Accreditation Board for Hospitals and Healthcare providers (NABH) is a constituent board of Quality Council of India (QCI), set up to establish and operate accreditation programme for healthcare organisations. They have designed an exhaustive healthcare standard for hospital and healthcare providers. Accreditation may be helpful in assuring that these hospitals provide high quality services**.** NABH standards are as follows:-

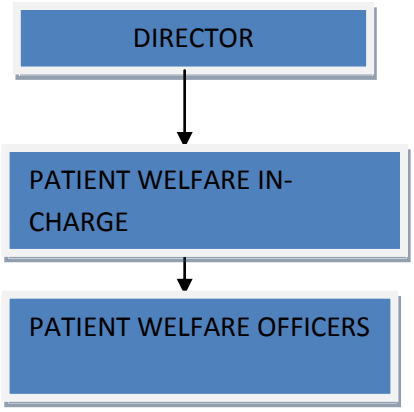
SECTION 1:- PATIENT-CENTERED STANDARDS

- Access, Assessment and Continuity of Care (AAC)
- Patients Rights and Education (PRE)
- Care of Patients (COP)
- Management of Medications (MOM)
- Hospital Infection Control (HIC)

PATIENT WELFARE DEPARTMENT

The patient welfare department aims at providing quality health-care services to the patients as well as their families. It plays a vital role in maintaining a coordination amongst various departments such as Nursing, Food & Beverage , Housekeeping ,Maintenance so as to ensure complete patient satisfaction. It also plays an imperative role in resolving patient's grievances by continually reviewing and refining the hospital services. At the end of each month PATIENT SATISFACTION INDEX is developed in order to evaluate the quality of services offered so that the opportunity for continual improvement is not missed. On the whole, it gives a 360° view of the hospital.

ORGANISATIONAL STRUCTURE



WORKFLOW OF PATIENT WELFARE DEPARTMENT

1. Greeting and introduction for new admissions – To help the patient get acquainted with the room and hospital services at large. This makes the patient and his/her relative feel comfortable.

2. Daily interactions ,query and feedback handling - To make the patient/attendant's stay comfortable by resolving their issues then and there (if possible) by co-ordination with various departments like nursing, F&B ,Housekeeping, Finance,etc.

3. Interaction at the time of discharge –.Take feedbacks from the patients/attendants at the time of discharge in order to know their level of satisfaction with the services they received during their stay.

4.Developing a patient satisfaction index - Analysing feedbacks and formulating a satisfaction index with the aim of monitoring hospital's quality of care.

5. Review of internal processes- To continually assess and refine processes towards patient centricity and ensure that these are followed.

6. Handling customer feedback on staff- To receive customer feedback about particular employees and take appropriate action to correct behaviour or to appreciate the staff as appropriate.

7. Celebrating special occasions of In-patients - To make the patients feel at home by giving them special attention on special occasion.

8. VIP Patient Care- To give utmost care to VIP patients. In order to ensure that the sensitivities of other patients are managed, these VIP patients should be referred to as the critical patient list.

The reason for this is that even if such a list called the “critical patient list” is seen inadvertently by a patient, the patient will not think that special care is being offered to these patients as a result of a reference, status, background etc.

9. Follow up calls - To know the recovery of patients who have been discharged from the hospital and conveying good wishes for their speedy recovery through telephonic conversation.

10. Educative programmes for the attendants in IPD areas - To conduct educative programmes for the attendants waiting in the IPD areas with an aim of not only increasing health awareness, but also favourably influencing the attitudes and knowledge related to the improvement of health on a personal as well as community level.

11. Care of attendants of deceased - To ensure that the attendants of the deceased person are handled with dignity and care and the billing is done with minimum delay. Also to ensure that we are compassionate with the attendants who may be finding it difficult to accept the fact that they have lost a member of the family.

PROJECT: - TO STUDY THE LEVEL OF SATISFACTION OF THE OUTDOOR AS WELL AS THE INDOOR PATIENTS.

AIM OF STUDY:-

The aim is to study the overall functioning of the patient welfare department so as to understand the emerging needs of the patient in terms of quality health care and to identify strategies that may help in increasing patient satisfaction scores and sustain patient loyalty on a long-term basis.

OBJECTIVES:-

1. To assess the functioning of Patient Welfare Department in terms of available resources, quality of services provided and the outcome of service delivery.

2. To measure the level of patient satisfaction by developing a patient satisfaction index after evaluating the collected feedback forms.

METHODOLOGY

STUDY DESIGN: - Small-scale descriptive study

STUDY AREA :- FORTIS ESCORTS HEART INSTITUTE ,OKHLA ROAD ,NEW DELHI

STUDY POPULATION:-

Both the indoor patients who have been admitted for some kind of medical intervention as well as the patient coming for the consultation and diagnostic purposes i.e. the outdoor patients.

NATURE OF DATA: - Quantitative data collected through survey and questionnaire technique.

TYPE OF DATA:-

PRIMARY DATA

1. Collected through direct observations.

2. Interacting with the patients or the attendants of the patients of this hospital.

SECONDARY DATA

1. Information obtained through Hospital records.

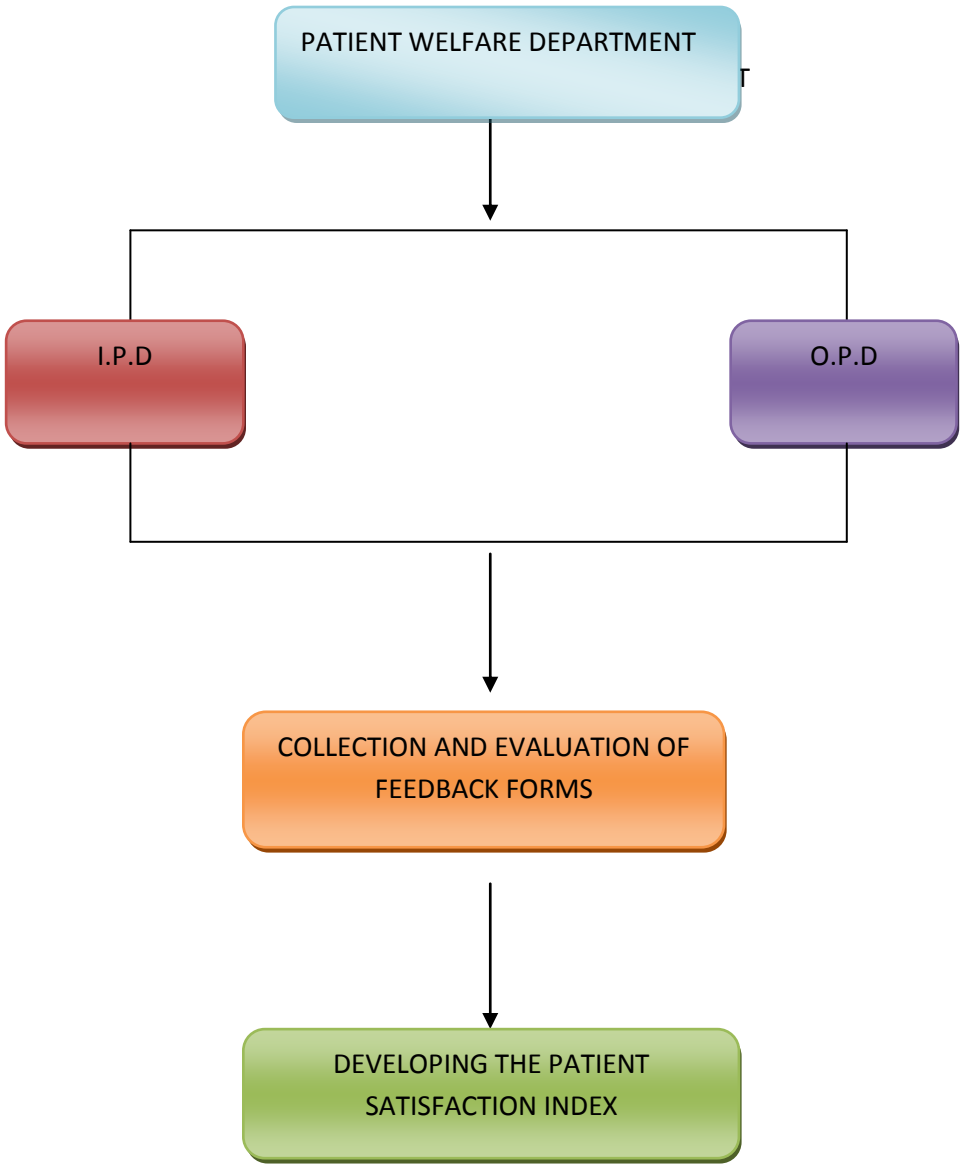
2. Information gathered through internet.

STUDY TECHNIQUE USED: - Questionnaire technique was used including both open-ended and closed-ended questions.

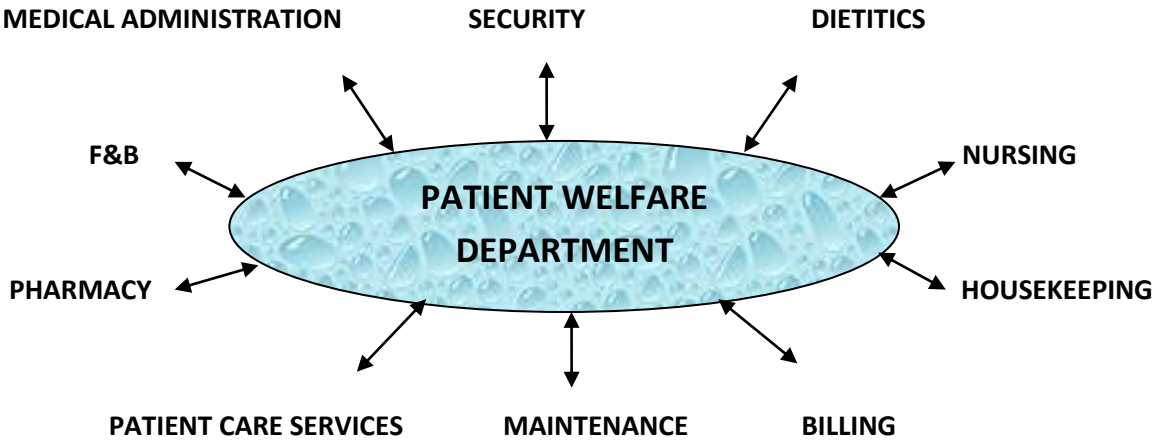
STUDY TOOLS USED :- 1) Feedback Forms

2) Occupancy Report

Patient satisfaction will be studied according to the below mentioned flowchart.



The Inter-departmental Co-ordination and Bi-directional Communication of the Patient Welfare Department can be depicted with the help of the following diagram.



PART 1 :- IN-PATIENT DEPARTMENT(I.P.D)

Total number of complaints received from various departments –

S. NUMBER	DEPARTMENT	FEBRUARY	MARCH	APRIL	MAY
1.	F & B	7	3	9	9
2.	NURSING	5	8	10	18
3.	MEDICAL	3	5	1	2
4.	HOUSEKEEPING	2	6	5	4
5.	PCS	5	2	1	8
6.	BILLING	2	2	0	1
7.	DIETETICS	3	0	3	0
8.	MEDICAL ADMIN.	1	1	1	0
9.	SECURITY	1	1	4	0
10.	PHARMACY	1	0	0	0
11.	MAINTENANCE	0	2	1	0
12.	TPA	0	1	0	0
13.	OTHERS	2	0	0	0

GRAPHICAL REPRESENTATION

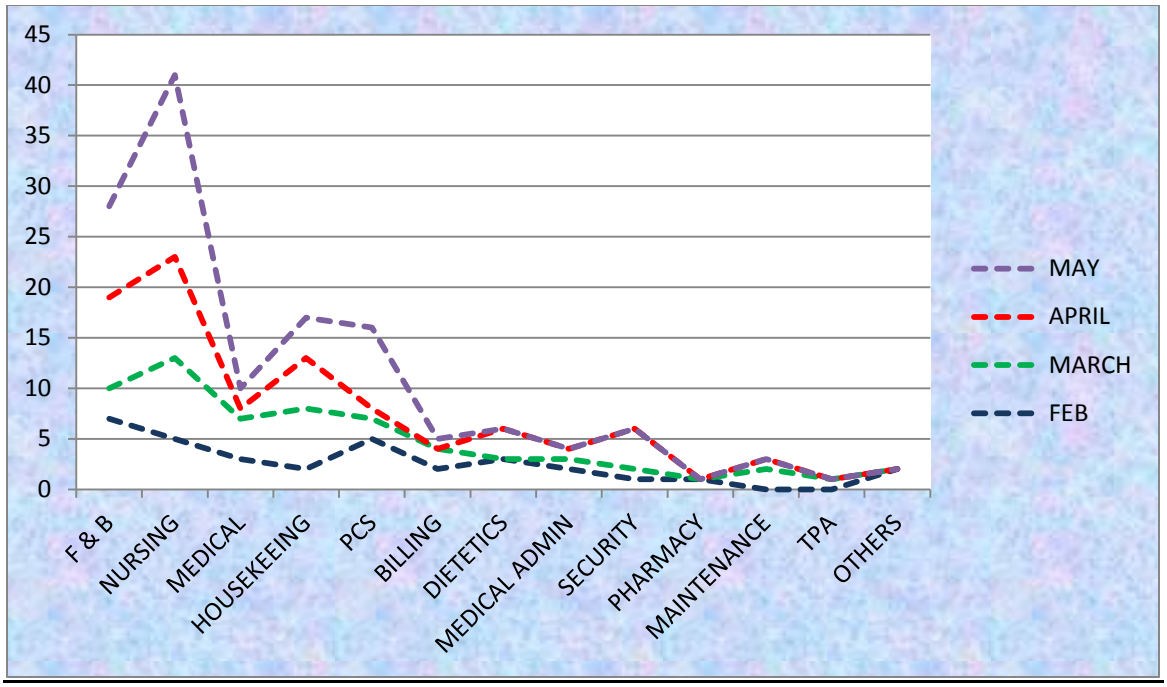


Figure 1- I.P.D COMPLAINTS

INFERENCE: - The number of complaints regarding F&B and nursing department have shown a comparative hike in the month of April whereas departments like Billing, TPA and Pharmacy were completely void of complaints.

I.P.D OPERATIONS – PATIENT SATISFACTION INDEX/SCORECARD

SERIAL NUMBER	SCORECARD	FEBRUARY	MARCH	APRIL	MAY
1.	Total no. of I.P.D discharges	1655	1711	1557	1543
2.	Total no. Of I.P.D. feedback forms collected	521	483	445	362
3.	Percent of discharges covered	31%	28%	29%	23%
4.	Overall level of I.P.D service score	3.55	3.52	3.54	3.46
5.	Overall I.P.D patient satisfaction score	3.38	3.40	3.41	3.36
6.	Reputation index	56%	56%	48%	49%
7.	Positive reference index	92%	96%	94%	94%

INFERENCE: - **The I.P.D service score of April is satisfactory but is slightly less than that of February service score. However, the I.P.D patient satisfaction score is reported to be the highest during the month of April.**

CALCULATING THE INDEX : - The percent of discharges covered were calculated by dividing the number of feedback forms collected by the total number of discharges in a particular month. Overall level of I.P.D service and satisfaction score were calculated by taking the mean of the scores of various parameters on the scale ranging from 1-4.

1- Poor service
2- Average services
3- Good services
4- Very good services

Reputation index depicts the percentage of people choosing Fortis Escorts because of it's reputation. Positive Reference Index represents the percentage of people who would recommend Fortis Escorts facilities to other people.

WHY DID CUSTOMERS SELECT FORTIS SERVICES?

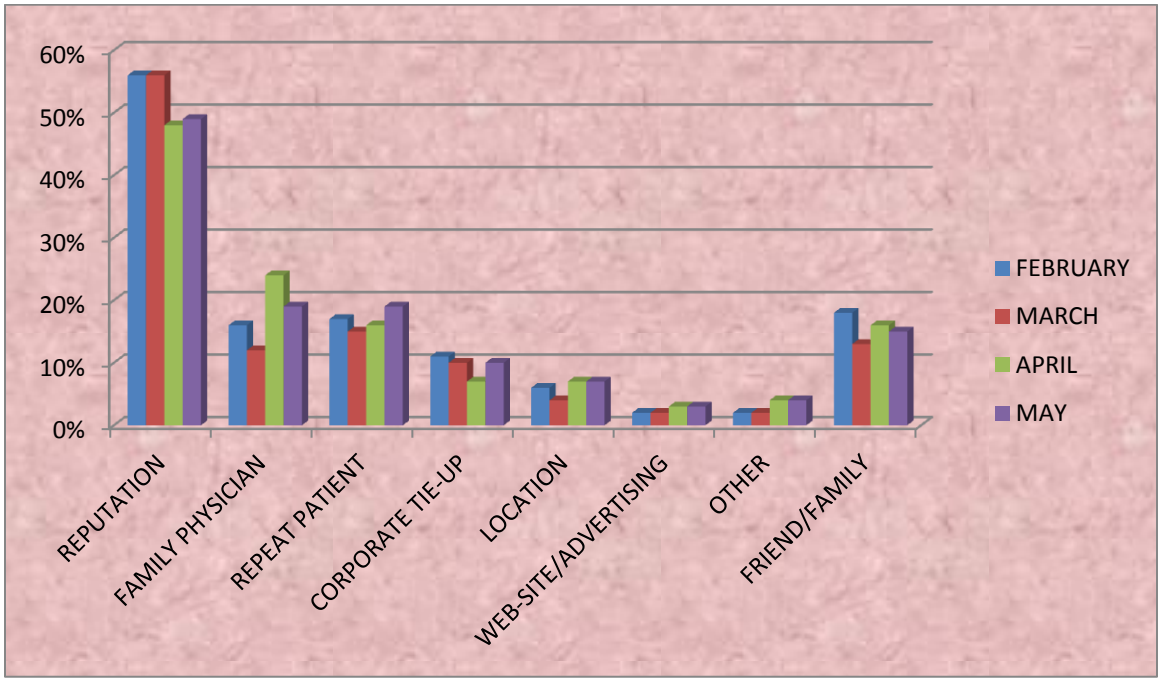


Figure 2 :- REASONS FOR SELECTING FORTIS FACILITIES.

INFERENCE – Reputation of the Fortis Escorts hospital happens to be the prime most reason for the patients to choose this hospital. This trend has remained almost the same in all the three months.

PART 2 :- OUT PATIENT DEPARTMENT (O.P.D)

Total number of complaints received from various areas:-

SERIAL NUMBER	AREAS	FEBRUARY	MARCH	APRIL	MAY
1	BILLING	1	1	0	2
2	SAMPLE COLLECTION	0	1	0	1
3	PHARMACY	0	1	0	0
4	MEDICAL	2	1	0	0
6	SECRETARIAL	0	2	0	0
6	PCS	1	1	0	4
7	PARKING	0	2	0	0
8	F&B	0	1	0	0
9	HOUSEKEEPING	0	1	0	0
10	ECG	1	0	0	0
11	MEDICAL ADMIN	0	0	2	0
12	RADIOLOGY	0	0	1	0

GRAPHICAL REPRESENTATION

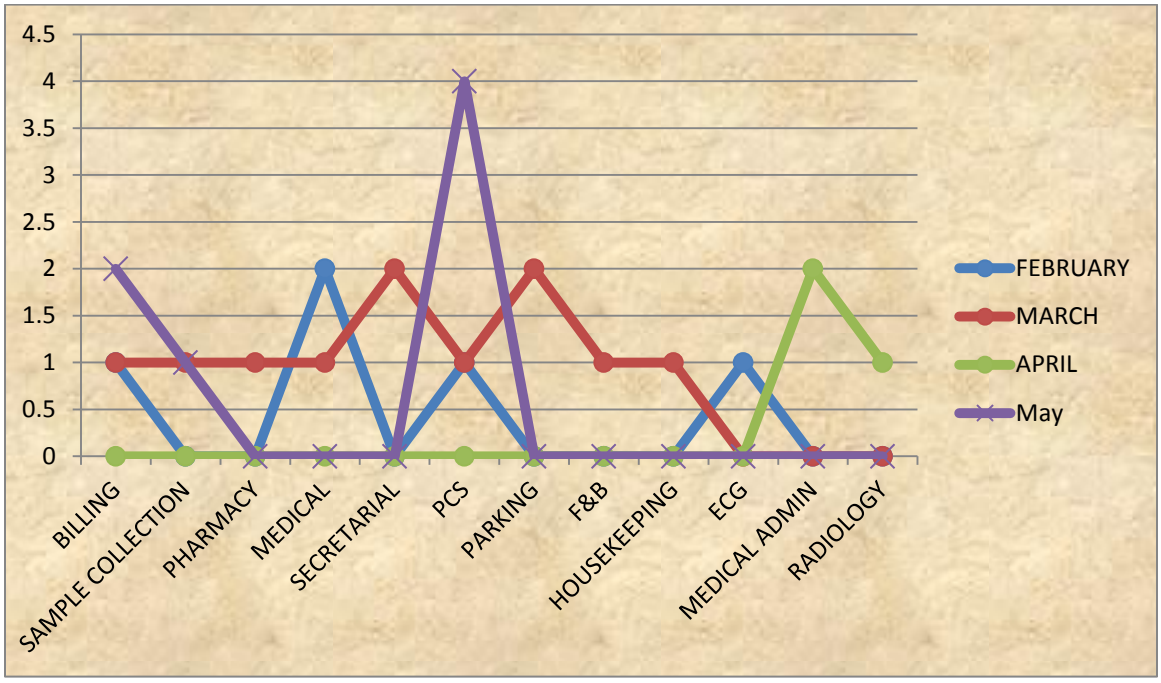


Figure 3:- O.P.D COMPLAINTS

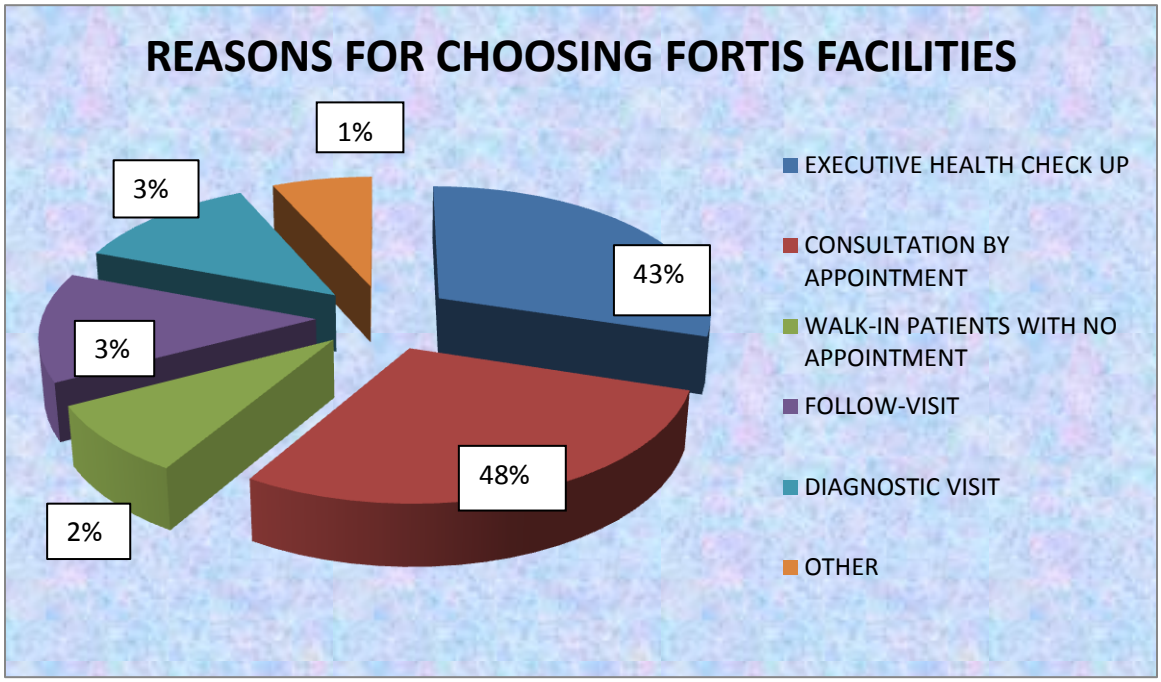
INFERENCE: - The number of O.P.D complaints has drastically reduced in the month of April as compared to the other months reflecting higher patient satisfaction level.

PATIENT SATISFACTION INDEX/SCORECARD

S. No.	SCORECARD	FEBRUARY	MARCH	APRIL	MAY
1	TOTAL NUMBER OF OPD CONSULTS	8456	9119	8052	9104
2	PERCENT OF OPD PATIENTS COVERED	1.49%	1.60%	1.90%	1.80%
3	NUMBER OF HEALTH CHECKS CONDUCTED	1804	1292	2010	2272
4	PERCENT OF HEALTH CHECK PATIENTS COVERED	3.05%	5.57%	4.43%	2.86%
5	TOTAL NUMBER OF DIAGNOSTICS	6794	7920	7338	8066
6	PERCENT OF DIAGNOSTICS COVERED	0.65%	0.24%	0.49%	0.35%
7	NET PERCENT OF PATIENTS COVERED	1.43%	1.35%	1.71%	1.36%
8	OPD SERVICE SCORE	3.34	3.36	3.36	3.30
9	OPD PATIENT SATISFACTION SCORE	3.33	3.28	3.31	3.30
10	REPUTATION INDEX	64%	44%	45%	43%
11	POSITIVE REFERENCE INDEX	96%	94%	95%	95%

INFERENCE – The O.P.D service score has remained the same in both March and April months. However, Patient satisfaction score has been reported to be the highest in the month of April.

REASONS WHY THE CUSTOMERS CHOSE FORTIS SERVICES:-



INFERENCE – The main reason for the Outdoor Patients to visit Fortis Escorts were mainly for the Consultation purpose and the Executive health checkups.

FINDINGS:-

As per the data collected, it was found that the patient's satisfaction level largely depends upon the attributes such as respect and compassion and not merely the technical proficiency. The quintessential elements for patient satisfaction were found to be the speed and efficiency of the hospital in providing services, comfort during their stay in the hospital, information and proper communication to reduce their anxiety and emotional support. The In-door as well as the Out-door patients of this hospital were found to be highly satisfied with the attention and co-operation provided by the doctors and the nurses team. Fortis Escorts hospital has succeeded in gaining quality feedback from their patients and conducting the necessary review of results. Also, the staff working together as a team in problem identification and problem solving has effectively helped in creating a culture where in the patients is given prime importance. However there are certain areas where the corrective action planning and implementation needs to be taken so as to better meet the patient's needs at a sustainable level. The In-door patient's concerns were mainly for the F

& B and Nursing departments whereas the Out-door patients were more or less completely satisfied with the hospital services.

The concerns for the various departments were found to be as follows :

1. F&B DEPARTMENT:-

1) Delay in delivering food to the patients.

2) Communication gap between the dietetics and the F&B department because of which inappropriate food being served to the patients.

3) Quality and quantity of food being compromised.

2. NURSING DEPARTMENT:-

1) Delay in nurse call-bell response.

2) Communication problem between the nurses and the patients as the nurses mainly communicate in their local language.

3. HOUSEKEEPING DEPARTMENT

1) Patients were not provided with uniform of their appropriate size.

2) The cleanliness of the washroom was a major issue for many patients.

3) The housekeeping staff was found to be loud and disturbing while cleaning the ward rooms in the morning.

4) Patients were also found to be dissatisfied because of the absence of towel, soap,dental kit were not found in some rooms.

4. MAINTENANCE DEPARTMENT

1) The complaints of TV, Shower and Telephone not functioning properly were being made.

5. BILLING DEPARTMENT

1) Billing staff needs to be more polite and humble.

2) Patient complained that billing updates were not provided to patients on time to time basis.

3) Things need to be explained more properly to the patients. Also, the patients in emergency cannot pay the whole amount upfront so the billing staff needs to be more accommodative as it takes around 1-2 days to arrange the whole amount.

6. PATIENT CARE SERVICES DEPARTMENT

1) There was a complaint regarding the delay in the issue of the attendant pass by the PCS department.

2) Patients had to face a lot of problem while taking the appointment from this department as nobody responded properly to them.

7. TPA DEPARTMENT

1) There was complaint that the TPA staff is not at all considerate and courteous towards elder people as they make them run from one place to another for the completion of various formalities.

INTIATIVES TAKEN:-

1. Arranging a DENTAL KIT for the patients which would include a toothbrush, toothpaste and a mouthwash for the oral cleansing purposes.

2. SLIPPERS have been arranged for the patients during their stay in the hospital.

ISSUES HANDLED:-

1.ISSUE - CONFUSION REGARDING MEALS AT THE TIME OF PATIENT MOVEMENT IN/OUT OF THE ROOM.

SOLUTION – Whenever the patient moves in/out of the room the information will be passed on from the assigned nurse ⟶ dietician ⟶ F&B supervisors.

2. ISSUE – QUALITY OF FOOD WAS NOT UPTO THE MARK.

SOLUTION – The food will be checked at 3 levels (Head Chef, F&B Manager and then the dietician) and the record will be duly signed by respective people.

3. ISSUE – COMMUNICATION GAP BETWEEN THE F&B DEPARTMENT AND THE DIETICIAN.

SOLUTION – A weekly meeting will be held between these departments so as to ensure proper co-ordination between the two.

4. ISSUE – NO PROPER SIGNAGE INDICATING PATIENT OR PATIENT'S ATTENDANTS MOVEMENT IN/OUT.

SOLUTION – Proper room orientation would be done at the time of signing in the room. Nursing educators will reinforce the same.

5. ISSUE – INFORMATION REGARDING STEP-UP/STEP-DOWN OF PATIENT WAS NOT PROVIDED ON TIME.

SOLUTION – Information regarding the step-up and step-down will be provided immediately on their extension number 1002.

RECOMMENDATIONS:-

1. Arrangement of the ATM facility in the OPD building for the patient's convenience as the ATM facility is available only in the IPD building.

2. Parking area of the O.P.D building needs to be improved.

3. Last but not the least, Co-operation and co-ordination amongst various departments is required so as to better achieve the goal of patient satisfaction.

CONCLUSION:-

From the project report it can be concluded that the Fortis Escorts hospital has succeeded in creating a culture where rendering quality patient services is its main strategic goal. The organisation has put in its concentrated efforts to pay attention to the patient's need for privacy, compassion and information related to his or her hospital visit. The patient welfare department works in the areas of problem-identification and problem-solving ensuring the patient to be the integral part of this hospital thereby enhancing patient satisfaction and sustaining patient loyalty on the long-term basis.

ANNEXURE -1

In-Patient Feedback Form

HELP DESK/FRONT OFFICE

4. Very Good 3. Good 2. Average 1. Poor

Please rate the ease with which you could contact the Hospital [4] [3] [2] [1]

How did we respond to your queries? [4] [3] [2] [1]

How well did we explain the various expenses and packages available? [4] [3] [2] [1]

How was your admission process? [4] [3] [2] [1]

Please rate the efficiency and warmth of the Front Office Team [4] [3] [2] [1]

ACCOMMODATION

How comfortable was your accommodation? [4] [3] [2] [1]

The quality of cleanliness and upkeep [4] [3] [2] [1]

How well did all equipment/facilities work? (Please mention any specific problem) [4] [3] [2] [1]

Quality of food [4] [3] [2] [1]

ood Service on time [4] [3] [2] [1]

fficiency and politeness of F&B team [4] [3] [2] [1]

FACILITIES FOR ATTENDANTS

Quality of in-room facilities [4] [3] [2] [1]

Food options for attendants [4] [3] [2] [1]

Guidance and information on patient movement during procedures [4] [3] [2] [1]

MEDICAL AND NURSING PROCESS

4. Very Good 3. Good 2. Average 1. Poor

Time spent by Doctors to explain diagnosis/treatment [4] [3] [2] [1]

Attention from our Doctors team [4] [3] [2] [1]

Attention from our Nursing team [4] [3] [2] [1]

How well did our Nursing team explain your treatment, procedures and care at home? [4] [3] [2] [1]

Please rate the quality of service

- Efficiency [4] [3] [2] [1]
- Promptness [4] [3] [2] [1]
- Care and warmth [4] [3] [2] [1]

DISCHARGE PROCESS

Please rate the overall discharge process [4] [3] [2] [1]

Efficiency of Billing Desk [4] [3] [2] [1]

Response to any query [4] [3] [2] [1]

OTHER FACILITIES

Please rate the quality of:

Chemist/Other Shops [4] [3] [2] [1]

Waiting Areas [4] [3] [2] [1]

Public Dining Options [4] [3] [2] [1]

Parking and Security [4] [3] [2] [1]

BEHAVIOUR OF THE FORTIS TEAM

Overall level of service [4] [3] [2] [1]

HOW DID YOU SELECT THIS FORTIS FACILITY

Reputation ☐ Family physician ☐

Repeat patient ☐ Corporate tie-up ☐

Location ☐ Web-site/advertising ☐

Other ☐ Friend/Family ☐

Would you recommend us to others yes ☐ no ☐ not sure ☐

OTHER COMMENTS

PERSONAL DETAILS

Name:

Admitting Doctor

Room/Ward No: UHID No:

Date: Admission Discharge

Contact No:

Email:

Signature

Please Note: Your feedback could be used as a testimonial in the public domain

ANNEXURE-2

Out-Patient Feedback Form

THE REASON OF YOUR VISIT

- Executive Health Check ☐
- Consultation by appointment ☐
- Walk-in patient without prior appointment ☐
- Follow-up visit ☐
- Diagnostics visit ☐
- Other

REGISTRATION / HELP DESK

4. Very Good 3. Good 2. Average 1. Poor

- The ease with which you could contact us [4] [3] [2] [1]
- How was your registration experience? [4] [3] [2] [1]
- Was our team efficient and courteous? [4] [3] [2] [1]
- How well were you guided through all required processes? [4] [3] [2] [1]
- Was the Registration desk/lounge well organised and clean [4] [3] [2] [1]
- Please rate the location/directional signage in the OPD area [4] [3] [2] [1]
- How efficiently did our team retrieve your information (if applicable)? [4] [3] [2] [1]

MEDICAL AND NURSING PROCESS

4. Very Good 3. Good 2. Average 1. Poor

- Attention from our Doctors [4] [3] [2] [1]
- Time spent by the Doctor in explaining diagnostics/treatment [4] [3] [2] [1]
- Attention and efficiency of the medical support staff [4] [3] [2] [1]
- How well were the required procedures and process explained? [4] [3] [2] [1]
- Please rate the sensitivity of our team to your privacy [4] [3] [2] [1]
- Please rate the quality of service
  - Efficiency [4] [3] [2] [1]
  - Promptness [4] [3] [2] [1]
  - Care and warmth [4] [3] [2] [1]

OTHER FACILITIES

Please rate the quality of:

- Chemist/Other Shops [4] [3] [2] [1]
- Waiting Areas [4] [3] [2] [1]
- Public Dining Options [4] [3] [2] [1]
- Parking and Security [4] [3] [2] [1]

BEHAVIOUR OF THE FORTIS TEAM

- Overall level of service [4] [3] [2] [1]

HOW DID YOU SELECT THIS FORTIS FACILITY

- Reputation ☐ Family physician ☐
- Repeat patient ☐ Corporate tie-up ☐
- Location ☐ Web-site/advertising ☐
- Other ☐ Friend/Family ☐

Would you recommend us to others yes ☐ no ☐ not sure ☐

OTHER COMMENTS

PERSONAL DETAILS

Name: _____

Consultant Doctor _____

UHID No: _____ Date of Visit _____

Contact No: _____

Email: _____

Signature _____