Summer Training at

(9th April 2012- 1st June 2012)

MEDICAL AUDIT

By
Mukta Nagpal

Under the guidance of
Dr. Harish Sihare

Post Graduate Diploma in Hospital and Health Management
2011-2013

Institute of Health Management Research,
Jaipur
2012

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Certificate

This is to certify that Dr. Mukta Nagpal from Institute of Health Management Research, Jaipur has undergone Summer Training in Fortis Flt. Lt. Rajan Dhall Hospital, Vasant Kunj, 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 her future endeavors.

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

Dr. Harish Sihare
Assistant Professor
IHMR, Jaipur

Fortis
FLT. LT. RAJAN DHALL
HOSPITAL

1st June, 2012

To Whomsoever It May Concern

This is to certify that Dr. Mukta Nagpal has successfully completed her Internship in the Quality Department in our hospital from **2nd April 2012 to 1st June 2012.**

She has done a project titled Medical Audit(Continuous Quality Improvement).

We wish her all the best in his future endeavors.

For Fortis Flt. Lt. Rajan Dhall Hospital

Renu Bhatia
Head-HR

NABH

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ACKNOWLEDGEMENT

I take immense pleasure in completing this project and submitting the summer report. The 8 weeks with Fortis Vasant Kunj Flt. Lt. Rajan Dhall Hospital, New Delhi has been full of learning and sense of contribution towards the organization. I would like to thanks Fortis to giving me an opportunity of learning and contributing this project.

I also wish to express my sincere thanks to Chief Executive Officer and Ms. Renu Bhatia (Zonal head-HR) for granting me the privilege to be a part of their hospital and learn from my experience there.

I thank my mentor Mrs. Jyoti Singh (Quality Head) for being a sincere advisor and support in my project, being a source of encouragement. My heartfelt gratitude to all members and staff of the Quality Management Department for their understanding and assistance in completing my project.

I am highly grateful to Dr. S.D. Gupta (Director, IIHMR Jaipur), Dr. (Brigd) S.K. Puri (Dean Student and academic affairs and HOD of Hospital Stream), Mr. Hem Bhargava (Manager, Student Affairs) and Mr. Dalbir Singh (In charge Placement).

I extend my heartfelt gratitude to Mr. Vivek Bhandari for helping me to complete my project report and for being a constant help throughout the course of writing report.

Lastly , I wish to thanks each and every person who has been a helping hand in my endeavor, in one way or the other and also to my family for always being a much needed inspiration for me.

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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
PPE	Personal Protective Equipment
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

INTRODUCTION

Summer placement is designed to acquaint students with the hospital, their organogram, standard protocols and functioning of the hospital. It is basically designed to study process, input, output and outcome of the hospital.

It has been quiet a learning experience for me and helped me understanding the Hospital industry from a very close view. The process of learning by visiting various departments in the hospital and interacting with the staff has made me clears about the functioning and inter-coordination between the departments of the hospital.

OBJECTIVES:-

1) To study different departments.
2) To study infrastructure and facilities.
3) To study the layout of different departments in hospital.
4) To study organogram of the hospital.
5) To study the manpower of various departments.
6) To study the process flow of the departments.
7) To study hospital information system and other record keeping procedures.
8) To enumerate managerial systems in various departments of hospital.

HOSPITAL PROFILE

THE VISION AND MISSION

To create o world class integrated health care delivery system in india entailing the finest medical skills combined with compassionate medical care.

Late Dr. Parvinder Singh, founder chairman, Fortis health care ltd.

VIRTUOUS VALUES:-

- **Vision:** Imbibe and share the vision
- **Integrity :** Lead through honesty and integrity.
- **Respect :** Earn respect.
- **Trust :** gain patient trust.
- **Understanding :** commit to compassion, care and understanding.
- **Own :** own quality excellence.
- **Uphold :** uphold innovation and continuous improvement.
- **Share :** develop and share success.

KNOW OUR LOGO: A HEALING PASSION

The Fortis healthcare logo defines our commitment to patient care. The logo reflects our endeavor to achieve excellence in healthcare delivery

system by bringing together the best of technology. Medical expertise and patient care. Our logo implies the human values that govern every facet of our organization. The two hands that fuse seamlessly with a human form, express our reassuring approach to healthcare. A constant reminder to all that patient-centric care is fundamental to our ethos. Green is a color of healing and is symbolic of our steadfast focus : To ensure the health and well- being of those we minister to. And red, expressive of the dynamic zeal with which we strive to make it a reality. The Fortis Healthcare logo is the indelible assurance tat our expertise will always be tempered with humanity.

CODE OF CONDUCT:

This code is stated under the stewardship of the Board of Directors and Senior Management of the Company and reflects our affirmation to the way we operate as an organization. It applies to all direct and indirect employees and associates of the company (including Board of Directors), in all situations where the individual is seen as representing or being associated with the company. The term of the Code are deemed to form a part of every contract involving the organization whether explicitly stated there under or not.

SERVICES PROVIDED:-

1. **Health Care:-**

Fortis Healthcare is engaged in providing the latest in internationally recognized medical care to patients with a variety of ailments and medical conditions. Our network consists of Super Specialty Hospital Hubs that concentrate on one or more specialties. These hospitals are interconnected to a larger network of multi- specialty hospitals that ensures patient access to expert care for any specialty. This unique network architecture provides expert care to our patients and a level of confidence in receiving the latest medicine has to offer.

2. **Telemedicine:-**

Fortis Healthcare has built a Tele-medicine network, which connects each of its facilities, so expert care is never out of reach. In addition, Fortis Healthcare facilities are also working with both private and public partners in the Indian Healthcare industry to provide Super Specialty and quality healthcare services. Fortis Healthcare provides services covering ICU management, ER management, OPD management, Radiology Reporting, Pathology Reporting as well as Training and Education Opportunities. Utilizing our strong HIS backbone and PACS technology we are able to seamlessly transmit patient information in a secure and confidential environment. The use of Tele- medicine has provided a much needed boost to the Indian Healthcare sector. It has also allowed our network to expand its presence by extending quality healthcare treatment to the remote areas of Northern India as well as overseas.

3. **RESEARCH:-**

At Fortis Healthcare, we believe in continuous learning, innovation and improvement. We encourage medical practitioners and healthcare experts for medical research and studies. For years, Fortis Healthcare

has been involved in several healthcare and medicinal study projects and offers societal rewards and benefits to researchers.

4. Corporate Services:-

Healthy employees contribute to a healthy business. The healthcare delivery services in our top hospitals are specially designed to suit employee needs. All patient records are accessible at all our hospitals across India so that employees can access healthcare services at the centre most convenient to them, choosing from a wide network of our group hospitals.

FORTIS Flt. Lt. RAJAN DHALL HOSPITAL, VASANT KUNJ

Fortis Healthcare was established in 1996 by promoters of Ranbaxy Laboratories. Fortis hospital employs cutting edge technology to provide medical care of internationally accepted standards. The hospital currently has 6 operation theatres and 107 operational inpatient beds, with capacity for up to 200 beds.

It brings a wealth of medical expertise with the finest talents amongst doctors, nurses, technicians and management professionals in an environment that enables them to deliver the highest quality of healthcare through state-of-the-art facilities that aims to leave no stone unturned in perfecting over enhancing patient centric care. Enhanced by the warmth & care of professionally trained nurses and housekeeping staff, Fortis Hospital at Vasant Kunj recreates the comfortable ambience of home within its four walls.

Awards and recognitions:-

NABH Recognized

Location:-

Located at South Delhi's biggest residential complex- Vasant Kunj, Fortis Flt. Lt. Rajan Dhall Hospital, spread over an area of 1,50,000 sq. ft.


Fortis

MULTI-SPECIALITY:-

- Anesthesiology
- Bariatric Surgery
- Clinical nutrition & dietetics
- Clinical Psychology
- Cosmetic & Plastic Surgery
- Critical care medicine
- Dentistry
- Dermatology & Cosmetology
- ENT
- Gastroenterology
- General Orthopedics and hand surgery
- General surgery and minimal access surgery
- Geriatric Medicine
- Gynecology including Gynaec oncology
- Internal Medicine
- Interventional Radiology
- Medical oncology
- Ophthalmology
- Pediatric surgery
- Physiotherapy including Domiciliary Physiotherapy
- Sports Medicine
- Surgical oncology

SPECIAL CLINIC:-

- Preventive Health Checks
- Wellness centre
- Sleep Lab
- De addiction clinics
- Stress management clinic
- Obesity clinic
- Pain clinic
- Speech Therapy

24 hrs SERVICES:-

- 24 hrs Emergency
- Blood Bank
- Laboratory
- Radiology
- Pharmacy
- Ambulance
- Dialysis

OWNERSHIP:-

A unit of Flt.Lt Rajan Dhall Charitable Trust.O&M contract by OBLT.A 100% subsidiary of Fortis healthcare limited.

SPECIALITIES:-

- Cardiology
- Cardiac surgery(adult &pediatric)
- Endocrine &Metabolic diseases
- Joint replacement

- Nephrology
- Neurology
- Neurosurgery
- Pediatrics(including pediatric cardiology,nephrology,pulmonologists endocrinology&urlogy
- Pulmonology &thoracic surgery
- Rheumatology
- Urology including renal transplant

DEPARTMENT VISITED

OUTPATIENT DEPARTMENT:-

Objectives of department

1. Present correct information and inquiry handling.
2. Perform registration, OPD cash and credit billing within the target time.
3. Scheduling appointment for doctors.
4. Guide patients/attendants/visitors in facility.
5. To drive satisfaction and delightful experience.

Functions:-

- Function of OPD registration and billing are as follows:
- Registration has been done by the front office assistant and they generate one UHID number for the new patient.
- Billing has been done either for the consultation/investigation.
- They provide the information /enquiry to the patient and attendant.

- OPD daily collection has been deposit to the cashier by the front office assistant, after completion of the shift.
- They provide user ID and password. So, that they can collect laboratories report through internet.
- Maintenance of records.
- Telephonic query handling.
- Counseling regarding package or any details.
- Cash handling.
- To make the FOS.

IN PATIENT DEPARTMENT:-

Department Objectives:-

1. The prime objective of IPD is to "Service with a smile" the prime focus being Customer Delight and Attendant Satisfaction.
2. Being patient centric and develop patient's loyalty by surpassing their expectations.

Functions of the Department:-

General information and enquiry

1. Registration- to register the non registered inpatients.
2. Admission- to admit the patient for further treatment.
3. Counseling- to give detailed information on the financial aspects and packages.
4. Room Booking- to facilitate timely room allocation.

5. Cash Handling- to receive cash and give receipts, refunds to the inpatients. This is done in billing department.
6. Handling discharge- follow up, receiving and handling the final bills for the inpatients. Also done in billing department.
7. Visitor/ Attendant Passes- handling out various passes throughout the day for inpatients.
8. Payable Report- follow up on the daily outstanding.
9. Reimbursements- preparation of the breakups of bills.
10. OP Billing- billing for OP in the Off OPD hours.
11. Telephonic Query handling
12. Maintenance of reports/ records
13. Announcements
14. Running Bills- Handed over to the patients for their daily outstanding.
15. Clearances- clearances issued for procedures and final discharge.
16. Cross functional team coordination.

Staffing of In-Patient Department:-

Nursing Ratio ICU's	1:1	24 hrs
Nursing Ratio Wards	1:5	24 hrs
Nursing Ratio Delux/Suits	1:2	24 hrs
One Discharge Coordinator	24 hrs (Each floor)	
Nursing Supervisor	Morning hours one for each Floor & one for Evening &	

	Night
3-5 Housekeeping Boys -	Morning/Evening (Night One only each floor)
4-5 GDA (Male & Female) -	Morning/Evening (Night One only each floor)
One Housekeeping Supervisor-	Morning/Evening (one for 2 floor)
One GDA Supervisor -	Morning/ Evening (one For 2 floor)
Night Manager (Admin.) -	For Night
In House Medical Officer -	24 hrs
Anesthetist on call -	24 hrs

EMERGENCY:-

Hospital has provision was emergent and critical patients in its facility with a separate entrance near the main gate for the accident and emergency section. This department is very spacious and is divided into separate zones including the triage area, bed areas, doctors area, nursing station, janitor's area and the storage area. The facility is well equipped with all the world class life support and emergency equipment to ensure fast stabilization and smooth recovery of the patient. It is supported by a 24 hour ambulance facility which is partly outsourced by the hospital.

The procedure for responding to the emergency class is prompt and fast to save as many patients as they can, serving the community. Positioning of the department is such that it has easy accessibility from the road and to all the inter-related departments in the hospital. The staff is very well trained for emergency life support and is responsible in delivering their services. Department also has a proper waiting area for the patient's attendants for their comfort and counseling is provided for the patients as well as attendants to get them out of shock. It is also easily accessible to the registration and billing area making is convenient for the person accompanying the emergency patient.

OPERATION THEATRE:-

The aim of the department of anesthesiology and OT facility is to provide the highest quality of care for the patients undergoing various types of surgeries. The OT facility is to positioned as a tertiary care centre of excellence providing complete services for various surgical specialties. The department is staffed with highly experienced and trained anesthesiologist, surgeons, technicians, nursing and other support staff. The services have state -of-the-art technology and equipments with highest level of environment and quality controls. Protocols based approach for quality pre-operative, intra-operative and postoperative and follow up care of the patients. The department is equipped to carry out various surgeries for stable/critical patients in elective as well as in emergency situations. The facility has 6 operation theatres located on the 3rd floor providing complete services to the various surgical specialties. The OT complex has a pre and a post operative monitoring room for continuous monitoring of patients who are shifted after the end of

surgical procedure. The patients who require intensive care are shifted to Surgical ICU located on the 3rd floor.

INTENSIVE CARE UNIT:-

The hospital has 5 ICU's- CCU, CSICU, MICU, AICU and Ortho ICU.

All these ICU's are supported by a dedication team of experienced Intensivist and Nurses round the clock along with the most advanced monitoring systems and therapeutic equipments.

Isolation rooms are present for highly infectious patients. Every ICU is equipped with Staff lounges and toilets, sleeping and personal care accommodation for staff on 24 hour on call work, housekeeping room and storage area. Every ICU conforms to the spatial requirement in terms of Patient's space, Patient's service, Nursing station, Medication and nourishing areas and Isolation rooms. The performance indicators are appropriateness of admission, medication error, mortality and morbidity, timeliness of discharge (ALOS), Nosocomial infections, CPR efficiency.

NURSING DEPARTMENT:-

This is the area which accounts for maximum number of employs in the hospital. Sufficient numbers of nurses are appointed by the hospital administration to keep the nurse-patient ratio low leading to high patient satisfaction. The appointed staff is well qualified and experienced to do their duties efficiently. The appointed nurse are trained by the hospital according to the type of job they are required to do based on the area

where they are deployed in the hospital. Staff includes nursing superintendent , deputy nursing superintendent, floor nursing in-charge, head nurse, general nurses.

IMAGING AND RADIOLOGY DEPARTMENT:-

This is one of the major diagnostic services of the hospital and is located on the ground floor. Its positioning is such that it is away from the general traffic and being in the basement the harmful X-rays radiated are not scattered ensuring the safety of the visitors and the other members who are not availing the facility. It is accessible to both the IPD and OPD patients easily. It provides the following diagnostic services- Radiographs, CT scan, MRI, Digital X-rays, Ultra-sonography, mammography.

The equipment is of latest technology and the staff is well trained to handle all the machines efficiently. Staff includes department in charge, Radiologists, technicians, nurses and GDA's. services are provided to the patients who are advised diagnostic services by the hospital's consultants, by any referring physician or the patient vesting this area are least exposed to the harmful radiations. The radiation dose of the staff is monitored at frequent intervals to ensure their safety.

LABORATORY:-

It is outsourced service of the hospital, being outsourced to SRL Ranbaxy Laboratories. Objective of the department is to give correct and accurate results of all the tests in time to the patients to ensure fast patient turn-over and complete utilization of the facility. Department is located at the top floor with a separate sample collection unit in the basement for the OPD patients. Samples for IPD patients are collected by the nurses from their respected wards and sent to the laboratory through GDA's. after being processed and test completed in the laboratory the reports are sent to the consultants and to the patients. Reports are also made available online to the patients and it reaches the doctors through hospital information system. The test conducted in the hospital premises include routine test- Biochemistry, Microbiology and Pathology. The samples of the tests not conducted in the hospital are sent to the collaborating laboratories with proper safety and security. The tests conducted within the premises are carried in the automated machines. Staff is well trained to use these machines. Regular calibration of machines and quality checks of test result are done to maintain a standard level of services. Staff include a supervisor, 4 technician and GDA's. It's the policy of the hospital to provide the test result on time to all patients and accurate.

BLOOD BANK:-

Objective of the department is to provide and preserve the blood and its components in sufficient quantity and in good condition. Blood bank of the hospitak is NABH accredited. It is located in the basement where it is easily accessible to both IPD and Emergency. The department is divided unto separate areas which include-Donation room, blood storage room, screening room, refreshment room, sanitary areas and component

separation room. Donation of blood is accepted by the voluntary and by the replacement donors. Proper health examinations under all the required criteria are done before any blood donation. The donated blood is then screened for diseases like –syphilis, malaria, hepatitis B & C, HIV is done before sending it for transfusion to the patient. After donation the donor is given some refreshment and asked to rest for some time to avoid shock. Some of the donated blood is stored as it is after screening and for some its components are separated from the plasma and then stored. Blood is stored under refrigation to preserve it and prevent from spoiling. Special pre-designed bags are available to be used for donation in which the sample for screening tests automatically separated from rest of the blood and th preservatives are already present within in the bag before donation. Staff appointed is well trained and experienced .

FRONT OFFICE:-

It is located at the basement for OPD and at the ground floor for IPD and emergency patients. Staff includes front office manager and front office assistant. It is the first contact point of the patients with the hospital.

Its function includes the following:

1.Registration has done by the Front Office assistant and they generate one UHID number for the new patient.

2.Billing has been done either for the consultation /investigations

3.They provide information /inquiry to the patient and the attendant.

4.OPD daily collection is deposited to the cashier by the front office assistant after the completion of the shift.

5.They provide user ID and password. So that they can collect their laboratories report from the internet.

6.Maintenance of the records.

7.Telephonic query handling

CENTARL STERILE SUPPLY DEPARTMENT:-

The objective of the department is to provide sterilize instruments and linen items to the OT, wards, all ICU and OPD. The department has one in charge, technicians and GDA's. The process of sterilization consists of sterilization through heat (autoclaving) and by chemicals (ETO). This includes Receipt and counting of contaminated instruments, medical devices and pack sets before autoclave sterilization and receipt, counting and sealing of the catheter, balloon, tubing and ventilator circuit before ETO sterilization. Pack is labeled with autoclave or ETO lot no/date of sterilization/ date of expiry. The packed sets are then loaded into the machine and the machine is then made to run s per the programme selected with desired temperature and time duration. The sterile sets are checked for tape color change. The sterilized sets are stored in a sterile zone till dispatch and are issued to the concerned department when required. Biological indicator test, bowie-dick test and othe tests are conducted daily with the 1^{st} load. The preference indicators are autoclave color tape, ETO chemical indicator, ETO PCD indicator,

Bowie- Dick test compliance, biological indicators, label with chemical indicator on pack, segregation of BMW and occupational injury.

LINEN AND LAUNDRY:-

Linen and laundry department is located in the basement and is easily accessible from the lifts for easy supply of linen to all the departments. Although it is located at the basement but its positioning is such that it is away from the OPD area and is also cut- off from the major route of traffic flow. The objective of the department is to supply clean linen to the user departments at right time and in sufficient quantity. Proper quality is maintained while washing the linen to ensure safety to the staff and the patients. Staffing includes supervisor, technicians and GDA's. It is divided into separate areas for doing all procedures like sorting, sluicing, washing, drying etc. and is also very well equipped. Inventory is maintained in right quantity to ensure availability of clean linen in required amount at all times in the hospital and also some stock is kept for emergency department.

FOOD AND BEVERAGE DEPARTMENT:-

Hospital has outsourced this department to the food and beverage industry professionals' i.e. SODEXO. There are separate canteens for the staff and patients and for their attendants. Staff canteen is located at the topmost floor and for patients and their attendants it was at the basement and at the first floor. Food for the IPD patients is supplied from the same kitchen as that of doctors, according to the food prescribed by the dietician or the controlling physician. Regular health

checkups of the kitchen staff is done to prevent the spread of infection through the food. All the IPD patients are provided food in their rooms by the GDA staff in proper covered and hygienic containers. Method of storage followed is FIFO to reduce wastage and spoiling of perishable items.

HOUSEKEEPING:-

Objective of the department is to ensure clean and hygienic environment in all areas at all times in hospital. The staff is well trained to cleaning different areas in the hospital like OT, ICU, wards etc.

It is manned by a manager, floor supervisors and houseboys. Major functions of the department include cleaning of the patient rooms and circulation spaces, ensuring proper cleaning of the sanitary facilities provided for patients and staff, pest control, cleaning of any spillage, handling the wastes and horticulture. Staff is trained for safe disposal and handling of bio medical wastes to prevent the spread of infection. Separate closets for keeping the equipment are provided at all levels in the hospital.

PHARMACY:-

A separate pharmacy is present at the entrance of the building for all patients visiting the hospital and also for non- patients. The billing of the pharmacy is done at the OPD billing counter for all the hospital prescriptions. Drugs are stored according to the drug formulary and

distributed according to the first due expiry. They are stored in proper conditions to preserve their quality and effectiveness. Recording is done by the purchase department which is a part of materials management department. Pharmacy is the last stop for the patient visiting the facility so it is positioned at the right place for access to all the patients while going out of the hospital. Pharmacy is open round the clock and the staff is on shift duty to keep it functioning all through the day and night.

IT DEPARTMENT:-

Information technology is one of the major source of contacting and transferring the information, it is also incorporated in the hospital set up to provide convenient transfer of information and record keeping. This department is located at the second floor manned by one in charge and few technicians .All the department in the hospital is divided in the modules by the hospital information system. There is a limited access to the information added in HIS by the different departments. Its control the mails sent outside the hospital and received in the hospital to ensure the safety and security of the patient and hospital information.

SECURITY:-

Security is a major issue in the hospital as it is a very vulnerable area. Security department in this hospital is very well maintained and well controlled department. It is manned by a chief security officer, security supervisors for all floors and security guards. The floor supervisors keep patrolling the floors after short intervals. Security guards are deployed at all hospital entrance and exit gates. All people entering the hospital

premises have to undergo through security checks before they are provided access. Hospital is under the CCTV supervision all round the clock. Provision are also made for fire safety. Duplicate keys of all the departments are with the chief security officer. The OT and ICU are under tight security of well equipped guards.

PARKING:-

Hospital outsourced this facility for the manpower but it provides space in the parking within its premises and near- by areas. There are separate parking for the patient and the staff. Patient vehicle is parked by the parking staff after patient is unloaded from the vehicle at the OPD gate. Patients have to pay for the vehicles in the hospital premises hospital is not responsible for any loss or theft of property kept in the vehicle.

MEDICAL RECORD DEPARTMENT:-

This is one of the departments of the hospital which has to be under tight security for the safety of patient records and for the benefit of the hospital. Records for all the patients coming to the hospital are maintained both in hard as well as soft copies. A separate file is been allotted to each patient. All the patient records are the property of the hospital but a copy of the same can be given to the patient on request in legal and insurance clearance cases. Hospital has to preserve the records according to the stipulated guidelines and according to the policy of the hospital. Records for MLC cases death are stored permanently or till the

time the case is cleared but the IPD records are preserved for 10 years. Records of the OPD department are preserved only for 3 years. Records after completion of their preservation time are destroyed by shredding or burning.

Departments ensures the completion of the records when it receives it from the various departments and if any shortage or discrepancy is found the concerned department is contacted and the file is sent back for completion or correction. Hospital follows ICD-10 coding for categorization of the diseases. It gives reports to the government health agencies at regular intervals about the pattern of the diseases and the prevalent diseases in a particular area or community. It also gives records of the deaths and births to the government. Records also are an important source of calculating the efficiency and utilization of services and gives base for scope of future improvement by calculating various efficiency parameters form the data.

ENGINEERING SERVICES:-

These include maintaining and regular monitoring for proper functioning of all the equipment and machines installed in the hospital. It is also responsible for repair when there is breakdown in any machine of the hospital. This department is located topmost floor away from the main traffic. The equipment under their control is HVAC system, all diagnostic and therapeutic equipment, generators, boilers, equipment, used in utility services department etc. Staff includes department in-charge, biomedical engineers, technicians etc. they are also responsible for safe and adequate supply of water and electricity to the hospital.AHU are located at all floors in the hospital based on the

requirement of different departments. Calibration of the equipment is also one of the duties of the engineers.

ADMINISTRATION:-

This department is responsible for the smooth functioning of the hospital and for good inter-departmental coordination. It is located in the basement and is cut-off from the main traffic flow to ensure its proper functioning. It takes care of all the services offered to the patient in the hospital and is responsible for improving the hospital. The department under it are:-

1. Human resource
2. Finance
3. Marketing

FOS :-

Fortis operating system is a department which keeps all other departments on their toes as it keeps regular check on the functioning and the efficiency of the functions provided by all departments. There are certain set of criteria listed down by FOS for various departments. These criteria are measured on weekly basis to evaluate the functional efficiencies of various departments and weekly results are compared with the earlier performance and set the benchmark. This helps in finding out the areas of improvement and helps in increasing the efficiency. Staff includes one head of the department and few assistants.

MATERIALS:-

Materials management department in a hospital is responsible for maintaining the inventory or stock of various items required by different departments and at different levels in the hospital. This department is broadly divided into 3 sub-departments:-

1. Purchasing Department
2. Receiving Department
3. Stores

Purchasing Department accounts for the purchase orders of all the required items in the hospital. They negotiate for the best buying price to get a best purchase order and take care that the items ordered are according to the specifications asked by the doctor. They forward the details of the purchase orders placed to the receiving department to receive according to the order placed.

Receiving Department is responsible for receiving the delivery of the purchased items. They keep a check that the received items are according to the order placed, checking is under certain criteria like number of items ordered, Quality of the supplied material, specifications of the received items etc. They are in regular contact with the purchase department to keep a record of the purchase orders placed to be able to receive the supply according to the order placed.

Stores are responsible for proper storage of the inventory. They segregate the items and store them according to the different requirements of different items. They are also responsible foe keeping a record of the inventory and issuing the item under indent. They report to the purchase department for stock-outs and for expired items.

All these departments are linked internally with each other and externally with all the other departments of the hospital through hospital information system (HIS). According to the policy of Fortis Hospitals, all the departments have to report to FOS- Fortis Operating System under certain parameters every week. This is done to access the efficiency of departments functioning and to find the areas of improvement.

Materials management department gives a report to Fortis Operating System department under the following parameters:-

1. IP Pharmacy Sale
2. Wrong return indent
3. No. of local purchases
4. Percentage of stat indents collected within 15 minutes
5. Percentage of New admission indents delayed beyond 1 hour
6. Percentage or routine indents delayed beyond 3 hours
7. No. of Zero issues.

PATIENT WELFARE SERVICES:-

Preventive Health, also known as Preventative Health is best described as "Warding off Disease". These actions gives your body the best chance of remaining free from diseases. This is a special service offered by the hospital to ensure that the population it is catering remains healthy. They include packages of full body health check-ups for the person to rule out any present or expected problem.

There are following packages, which are as follows:

- Preventive Health packages

- Pre-employment packages
- Corporate packages

TPA:-

Third Party Administrators (TPA) is an important link between Insurance companies policyholders & healthcare providers (Hospitals and nursing homes).

TPA's role is to provide administrative support to the Insurance companies for servicing their insurance policies.

Service offered by TPA for policyholder:

Cashless Hospitalization: Each policy holders is provide with a list of empanelled hospitals where in he/she can avail cashless hospitalization.

ID Card: TPA Provides ID cards to all their policy holder in order to validate their Identity at the time of admission.

Claims Management: On behalf of insurance companies TPA administers & settle claims for hospitals & policy holders.

24 Hours customers support services: TPA provides assistance through its 24 hrs call centre information regarding policy holder's data, provider network, claim status, benefits available with existing cardholder etc. is furnished on request.

TPA Request is of 2 types:-

- Planned TPA request
- Unplanned TPA request

PROCESS OF AVAILING INSURANCE:-

- Obtain pre- authorization form from Insurance Helpdesk 3-4 days prior to the admission for planned hospitalization.
- Pre- authorization form is to be filled in by treating doctor.
- Check about the pre- authorization approval at the Insurance helpdesk within next 24 hrs.
- Avail cashless treatment at the hospital after receipt of written authorization from TPA for the covered.
- Leave back all the original documents and signed claim form with the hospital at the time of discharge.
- Contact local TPA office in case of any query.
- Make payment to the hospital for the expenditure over and above the TPA approved limit and for the treatment not covered under the package.

Guidelines for Availing Cashless Facility:-

- Hospital will facilitate your request with the TPA & try to procure the approval but prime responsibility remains with the patient.
- Hospital cannot influence any decision taken by TPA.
  Please provide all the relevant details of your insurance policy within 24 hrs of admission so as to timely initiate approval process.
- If there is any discrepancy in the record for e.g. Name & Age we reserve the right not to extend the cashless facility.
- Cashless facility is the subject to prior approval received from TPA.
- In case of unplanned or emergency admission patient is requested to deposit appropriate security amount as per hospital policy.

- Security deposit made at the time of admission would be refunded after receiving final approval at the time of discharge.
- Partial/ initial approval from the TPA would not be honored for setting the bill. Final bill along with discharge summary would be sent to TPA at the time of discharge.
- Only final approval letter would be taken into consideration.
- Amount against all non payable items, change in line of treatment, all non medical consumables, add-on investigations or any specific clause mentioned in the approval letter needs to be settled in cash at the time of discharge.

BIOMEDICAL DEPARTMENT:-

The main objective of the department is to facilitate the usage of latest technologies in the diagnosis and care of patients. It is also responsible for proper usage and quality performance of these equipments and tools in the hospital. The departments maintains register of the hospital equipments and conduct daily rounds to ensure the equipments working smoothly, responsible for facilitation and identification of equipment requirements, planning technical comparison ,ordering installation and deployment of all other units and new projects, conduct regular preventing maintenance servicing for all equipment at regular intervals, facilitating equipment replacement and condemnation , whenever required, conducting regular training programme for hospital staff, on usage of equipments. The staff consist of biomedical engineers and biomedical technicians.

PROJECT REPORT ON MEDICAL AUDIT

INTRODUCTION:-

Medical Care Evaluation or Medical Audit is defined as the evaluation of medical care in retrospect through analysis of medical records. It is a review of the professional work done in the hospital or in other words the quality of medical care rendered.

While there is a general agreement on the need of evaluating the healthcare provided and to conform to the regulations requiring the monitoring of this care, there is little agreement as to what constitutes quality care or what the form that evaluation and/or monitoring should take is. There are enormous pressures the health and hospital administrators have to deal with, like political, financial and medical emergencies. Within this framework medical professionals are striving for continued improvement of their performance and the highest standards of excellence.

Self-evaluation of any degree and of any value is improbable and therefore evaluation by audit and peer review is more likely to achieve its objectives. Medical audit is an important component of quality

assurance, which in turn is an essential part of any management process.

Medical audit is far more important to a hospital than financial audit. Financial deficits can be met eventually but medical deficiencies can cost lives, or loss of health thereby resulting in unwanted agony. It is being increasingly felt that while on one hand quantitative development is an important pre-requisite for ensuring accessibility of services, another equally essential requisite is the right quality of services. The evaluation of quality of patient care in hospitals through medical audit has assumed significant importance because it provides valuable feedback to the administrators and to the clinicians who are responsible for efficient and effective running of hospital services.

There are inherent difficulties in medical audit but the aim is to evaluate the quality of medical care to maintain the standard of excellence and improve the standards that fall below the accepted levels. It is in conformity with the traditions of hospitals and ethos of healthcare that the institutions should maintain high standards of patient care thereby taking a lead in the latest revolution in the healthcare delivery system. They can initiate by forming a medical audit committee that lays down

the evaluation procedures. The evaluation procedures can be random analysis of case records and hospital performance indicators like average length of stay, bed occupancy rate, bed turnover rate, infection rate, gross and net death rates, etc.

It is important to recognize that the implementation of medical audit is fundamentally an exercise in the management of change. The success of medical audit will depend on how it is implemented.

CLASSIC AUDIT STEPS:

1) Preparation and planning

- The topic for a clinical audit is a top priority.
- The clinical audit measures against standards.
- The organisation enables the conduct of the clinical audit.
- The clinical audit engages with clinical and non-clinical stakeholders.
- Patients or their representatives are involved in the clinical audit if appropriate.

2) Measuring performance

- The clinical audit method is described in a written protocol.

- The target sample should be appropriate to generate meaningful results.
- The data-collection process is robust.
- The data are analysed and the results reported in a way that maximises the impact of the clinical audit.

3) Implementing change

- An action plan is developed and then implemented to take forward any recommendations that are made.

4) Sustaining improvement

- The clinical audit is a cyclical process that demonstrates improvement has been achieved and sustained.

The strength of clinical audit is that it gives a detailed insight into areas of practice that routinely collected data does not. A bespoke, focused data set can provide a rich picture of practice. This then directs improvement activities appropriately.

OBJECTIVES

1. To study and understand the audit process.

2. To analyze the steps involved in the audit process and compare the working of the medical staff to the set standards.

3. To find procedures which need attention and improvement.

SCOPE OF THE STUDY

The scope of this project was to analyze the compliance involved in the audit process of the IPD files and to improve and bridge the gaps where required.

METHODOLOGY

Study Place

Fortis Flt. Lt. Rajan Dhall Hospital

Study Design

Observational study

Data Collection Tool

Audit Form

-Dividing the medical audit form into different categories for obtaining specific results.

Sample Design

Simple Random Sampling

Sample Size

170 IPD files (active files)

Sampling technique

Manually by auditing the IPD files

DATA COLLECTION AND ANALYSIS

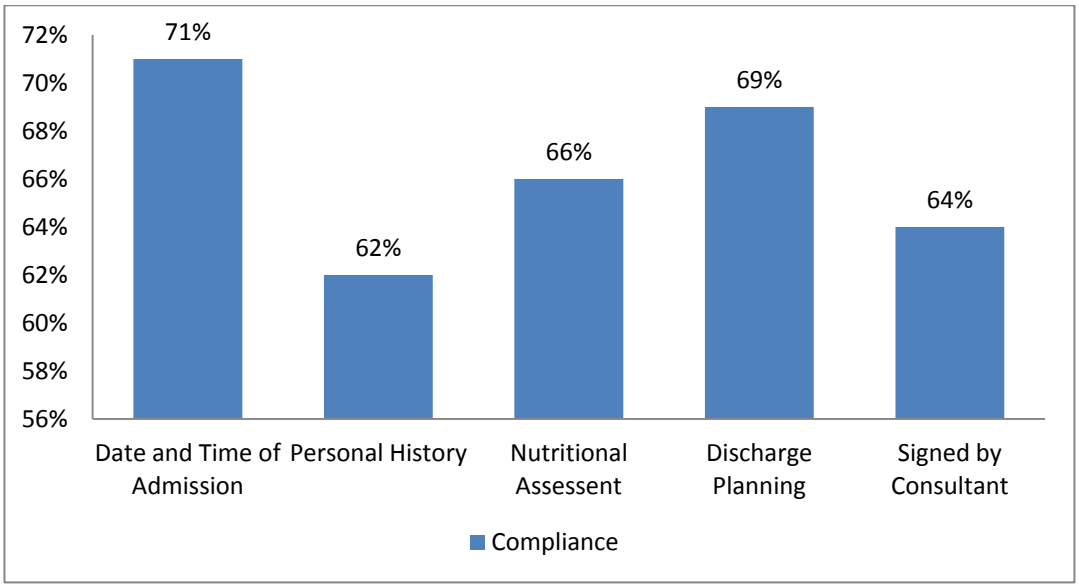
1. History and Physical Form

The documentation of History and Physical form is needed to be done by the doctor who is looking into the patient case. In order to maintain proper record of the patient medical history and thereby improving the quality of care provided, filling of medical history form is very essential. It should be filled within 24 hours of patient's admission.

The audit done on this category showed the following data:

CATEGORY	% COMPLIANCE
Date and Time of admission	71%
Allergies	82%
Chief Complaints	93%
History of present illness	91%
Past Medical/Surgical History	88%
Personal History	62%
Nutritional Assessment	66%
Family History	79%
Psychosocial History	83%
General Physical Examinations	85%
Systemic Physical Examinations	89%
provisional Diagnosis	95%
Investigations Treatment Plan	94%
Treatment Plan	94%
Diet Plan	90%
Discharge planning	69%
Signed By Doctor	88%

Signed By Consultant	64%
Date & Time(Doctors)	60%



Analysis:

- These categories show less than 80% of compliance with documentation process
- Major areas of concern are personal history of the patient, nutrition assessment, discharge plan and signature of the consultant.

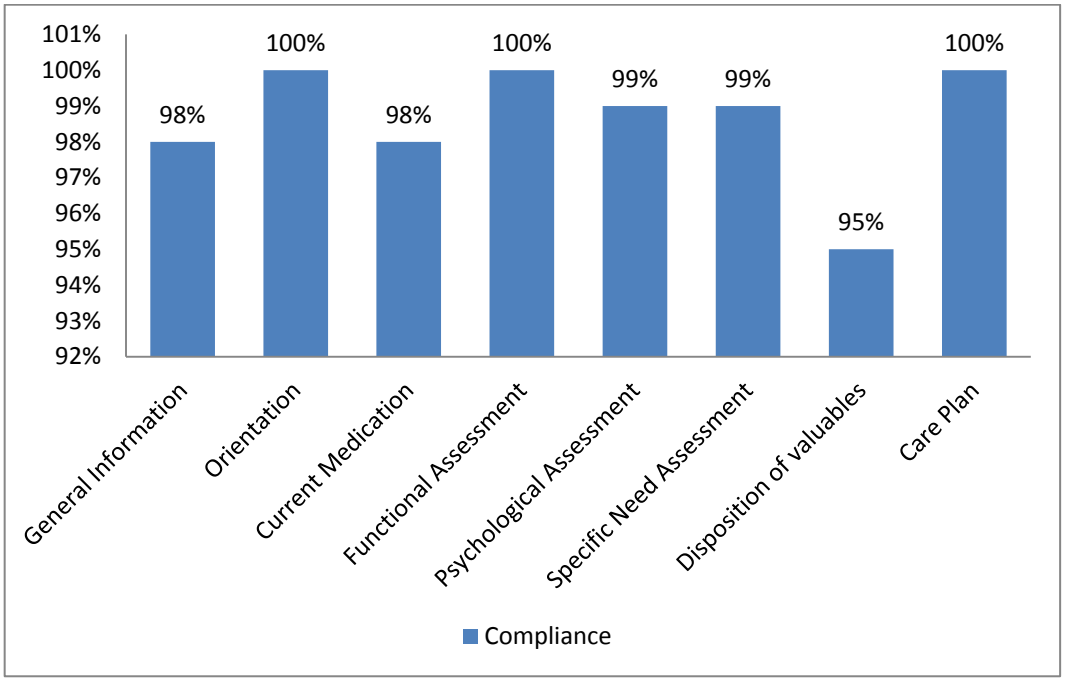
2.Nursing Admission Assessment Sheet

This form is filled by the nursing staff and contains all the crucial information relating to the patient admitted. It is the responsibility of the nurses to complete this form within 2 hours from the time of patient admission.

The audit done on this category showed the following data:

CATEGORY	% COMPLIANCE
General Information	98%
Vitals	100%
Orientation	100%
Allergies/ADR/Food Allergies	99%
Current Medication	98%
Fall Risk Assessment	100%
Functional Assessment	100%
Pain Rating	99%
Psychological Assessment	99%
Pressure Ulcer Risk Assessment	100%
Specific Needs Assessment	99%
Nutritional Assessment	99%

Disposition of valuables	95%
Reports Hand Over	83%
Care Plan	100%



Analysis

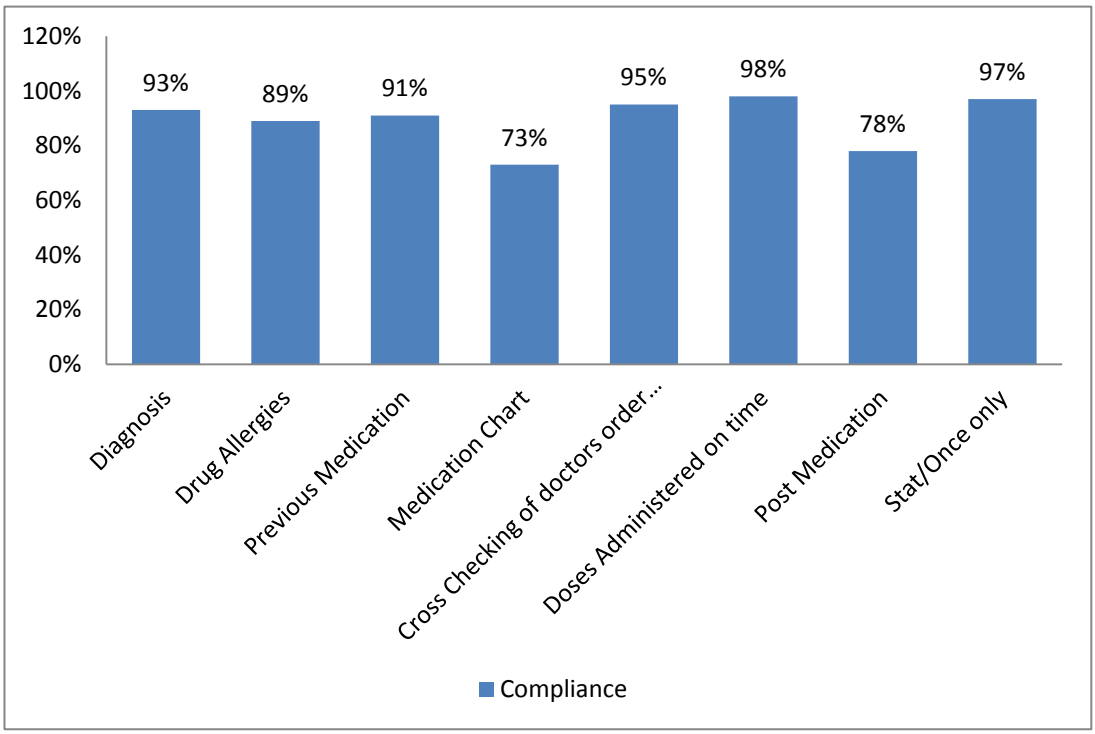
- The nursing staff is carefully following the documentation process with more than 80% of compliance in all the categories.
- Need to give more attention on the process of signature while duty- handover as it can create an atmosphere of unaccountability.

3. Medical Administration Chart

The medication chart plays a significant role in effective patient care. This is also a document for the nursing staff to follow effective medication administration regime.

The audit done on this category showed the following data:

CATEGORY	%COMPLIANCE
Diagnosis	93%
Drug Allergy	89%
Previous Medication	91%
Medication Chart	73%
Cross Checking Of doctors order with medication chart	95%
Doses administered on time	98%
Post Medication	78%
Stat/Once only Drugs	97%



Analysis:

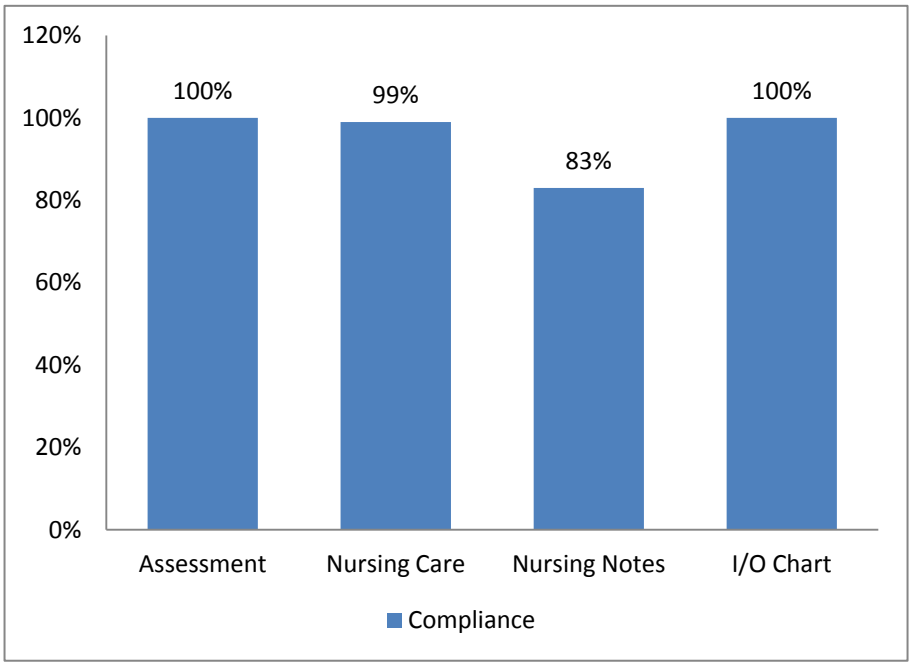
- The name of medicines are to be written in full capitals which shows only 73%compliance.
- Post medication documentation also shows a compliance of only 78% which needs attention from the physician's part.

4. Daily Nursing Flow Sheet

This document represents continuous nursing care and patient monitoring on a day-to-day basis. This document also helps the physician to make critical changes in the treatment modality.

The audit done on this category showed the following data:

CATEGORY	% COMPLIANCE
Assessment	100%
Nursing Care	99%
Nurses Note	83%
I/O Chart	100%



Analysis:

- Even though most of the categories in this document shows a 100% compliance, an important category shows only 83% compliance (nurses note).

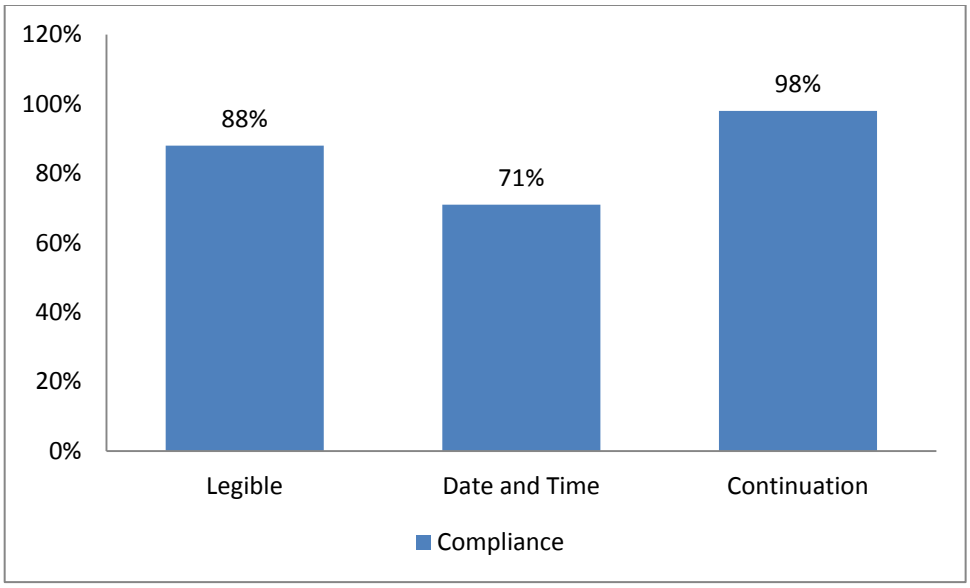
- Attention needs to given in effective and clear maintenance of nurses note.

5. Progress Note

Progress note is to be updated by the doctors in the rounds during each day of the patients stay in hospital. The nurses and other paramedical staff make inference on behalf of this note which the physician writes.

The audit done on this category showed the following data:

CATEGORY	% COMPLIANCE
Legible	88%
Date and Time	71%
Continuation	98%



Analysis:

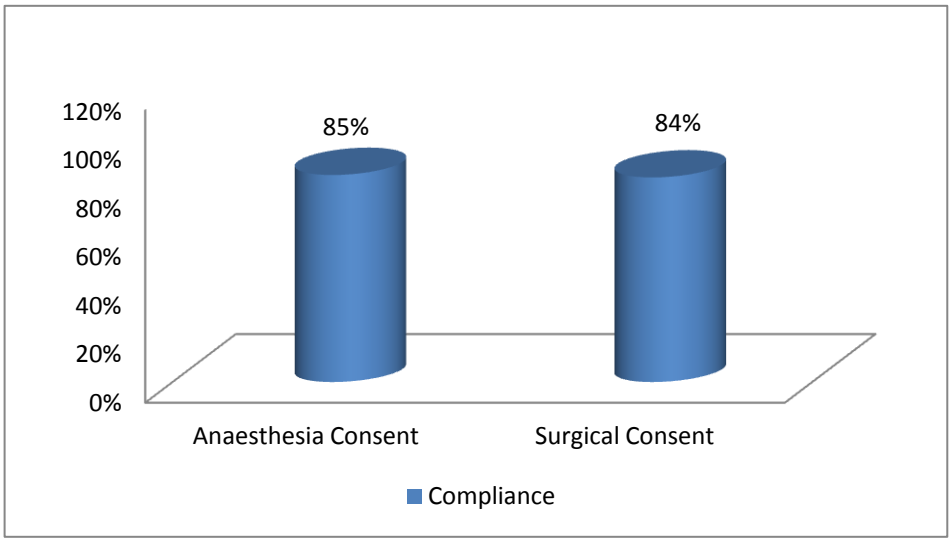
- The progress note shows a compliance of 90% and above in almost all the heads given.
- Concern is prevelent in mentioning the date and time which has only 71% compliance

6. PAC Consent

It is an important element in any form or surgery. This document not only gives the permission for medical interventions but also a legal cover for the hospital and its staffs.

The audit done on this category showed the following data:

CATEGORY	% COMPLIANCE
Anesthesia Consent	85
Surgical Consent	84



Analysis:

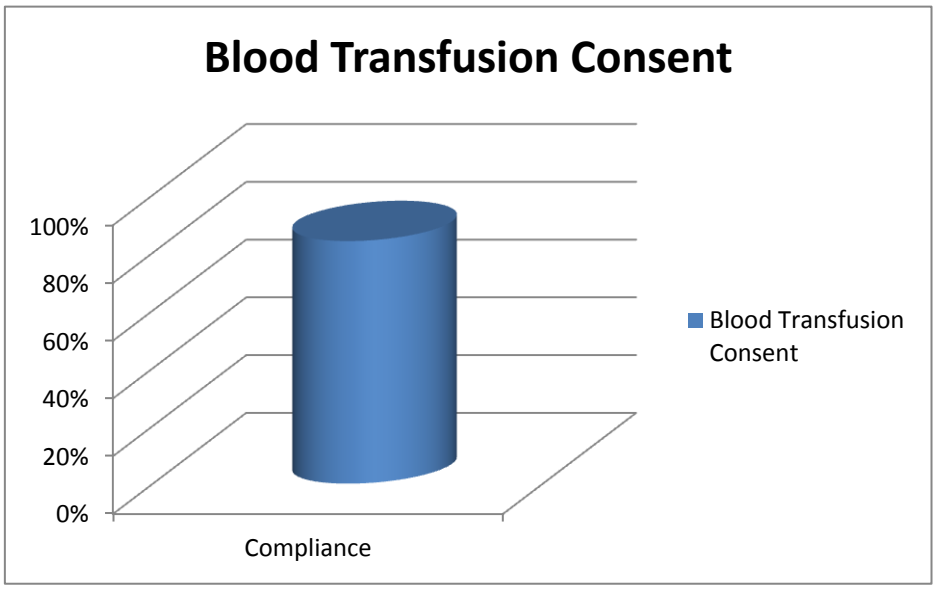
- Even though the compliance is 80% and above this head needs to look for 100% compliance.
- The main area is the date and time which is only partially noted in many cases**.**

7. Blood Transfusion Consent

As the consent for surgery blood transfusion also needs to be well consented, this procedure also may have adverse reactions with patients at times which can be come fatal.

The audit done on this category showed the following data:

CATEGORY	% COMPLIANCE
Consent	84%



Analysis:

- .The current compliance is of 84%.
- Improvement has to be made and 100% compliance should be aimed for in the coming months.

RESULTS

After comparing data from 170 samples, the results of importance are:

1. Date and Time are important part of any document and therefore, due attention needs to be given in filling these wherever mentioned.
2. Analysis reveals that physicians tend to miss personal history of the patient while documenting the History and Physical Form.
3. Even though the dietician plans a detailed diet plan, the initial nutritional assessment is very often overlooked by the physicians.
4. The data collected shows that the compliance rate in categories like diagnosis, treatment plan and investigations by the physicians, which is the core of any treatment modality is very high.
5. Results show that utmost care is taken by the nursing department while documenting details related to the admitted patients.
6. Areas where scope of improvement prevails are report hand-over by nurses and in filling up of nurses' note.

7. Even though consent document for all three categories (surgical, anesthesia and blood transfusion) show more than 80% of compliance, this has to be made into a 100% compliance category.
8. Hospital policy clearly states that the doctors need to write the diagnosis and prescription of medication in capital letters which is not strictly practiced according to the analysis.
9. The progress note written by the physicians has a scope for improvement in terms of legibility and mentioning of the date and timing.

CONCLUSION

The quality department is keen in continuous improvement of all the various processes in the hospital. Medical Audit is one of such tool which the department has customized for a holistic improvement of the clinical staff.

Overall audit shows a high percentage of compliance in all major categories which is a clear sign of clinical excellence but the ultimate challenge is in sustaining this excellence and covering up the other

categories as well. This can be done through a timely and impartial check on these services through effectively channelizing the medical audit tool.

RECOMMENDATION

As a quality nurse there should be a quality doctor or a person equivalent to doctor who can check the negligence made by doctors while filling the patient documents and he only should be responsible to any mishappening.