

Factors for Non-Retention of Patients For recommended surgical treatment

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Research Question:

What are the factors responsible for non-retention of patients for recommended treatment?

Study Objectives:

- To find out the percentage of patients availed surgical treatment recommended within the facility.
- To identify the factors responsible for non-retention of the patients for recommended surgical treatment.

Methodology

Study Design:

- Observational analytical

Data collection- Secondary data

Data source: HMIS(Hospital Management Information System)

Study setting: The study was conducted in the operations department of Calcutta Medical Research Institute, Kolkata.

Study Duration: April 2018- March 2019

Methodology

Study Design:

- Observational descriptive
- Qualitative

Sampling frame:

- People who didn't avail treatment within the facility
- Type of Sampling- Purposive sampling

Sample Size: 140 patients.

Data collection- Primary data

Technique-Telephonic interview

Study setting: The study was conducted in the operations department of Calcutta Medical Research Institute, Kolkata.

Study Duration: 1st February 2019- 28th February 2019

Factors identified for negative influences on retention in care (Ferdinand C. Mukumbang, Joyce Chali, and Brian van Wyk, 2010)

1. Personal history and biological factors that influence the retention-in-care behaviours of the patient.
2. Weight increase as a sign of improved health, medication side effects, and alcohol use were patient factors identified to influence retention-in-care behaviours.
3. Trust in faith healing and the use of other herbal remedies.

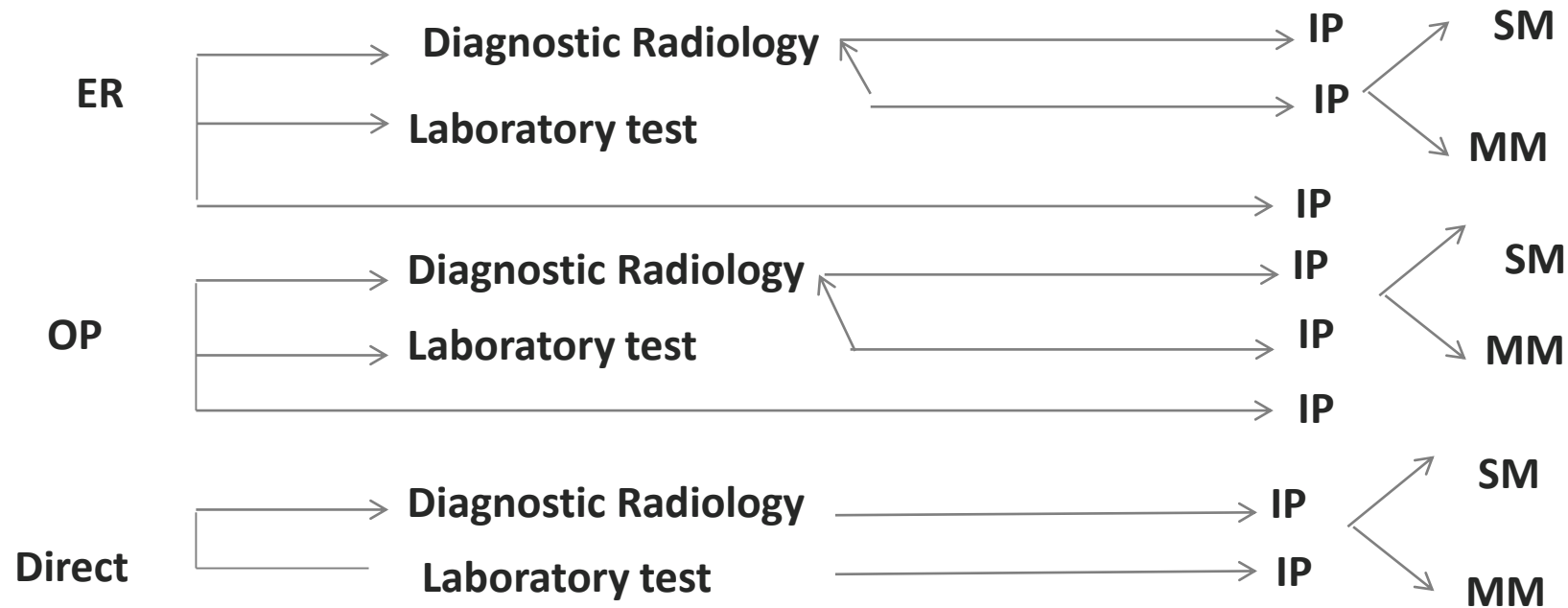
Factors associated with non-retention in HIV care in an era of widespread antiretroviral therapy. (O'Connell S, O'Rourke A, Sweeney E, Lynam A, Sadlier C, Bergin C, 2017)

1. All the patients who disengaged from care.
2. Intravenous drug users
3. patients with heterosexual risk were more likely to disengage from care

Nursing staff non-retention: Effective factors (Mohammad Heidari, Bahar Seifi, Zahra Abdolreza Gharebagh, 2017)

1. Job stress
2. Social support
3. Job dissatisfaction

1. For the hospitals, OPD and ER is the place where patients first step. Based on the treatment advised, patients avails it either from within the facility or outside.
2. Patient retention depends on patient experience. It's not always the price that accounts the number one driver in all other sectors nor is it prestige. It's just feeling good about the visit.
3. The conversion in healthcare industries is circular in nature against conversions in other industries, which is linear.
4. On an average the conversion rate in healthcare industry is 15-18%
5. The various sources of conversions observed in a multi-specialty hospitals are:

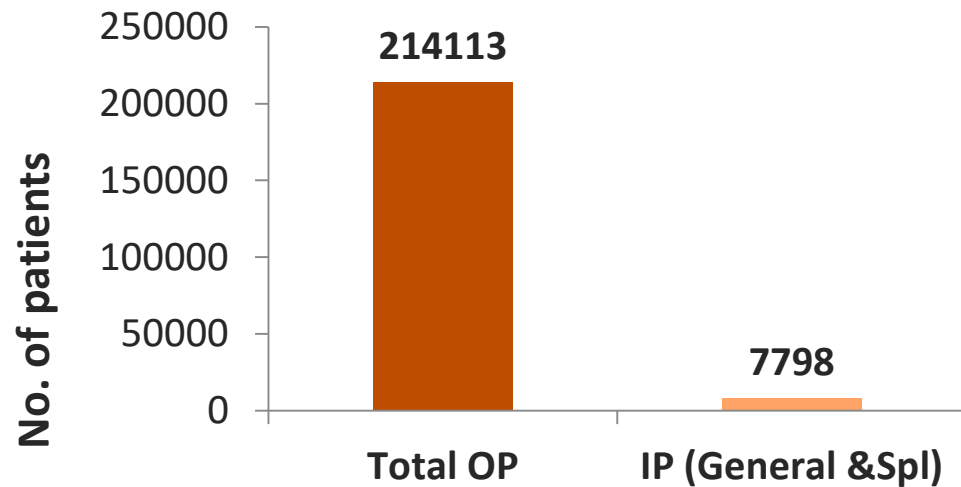
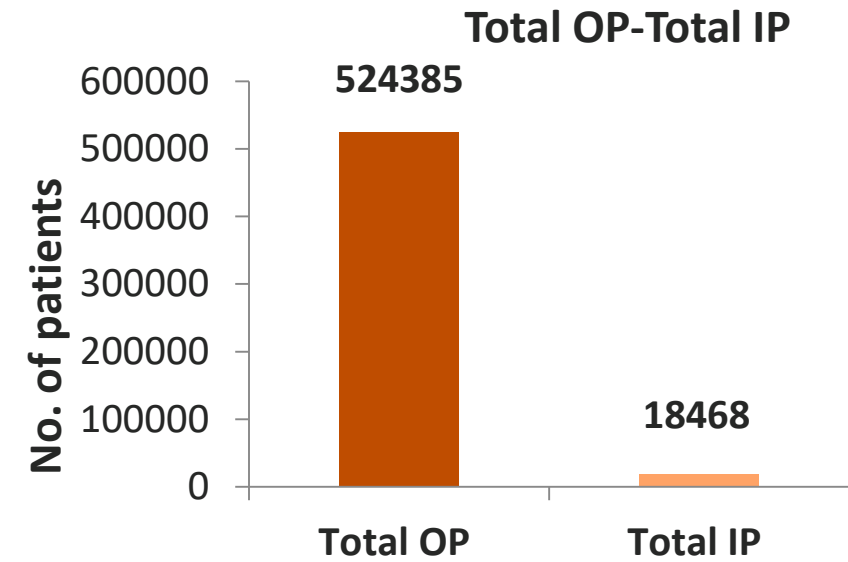
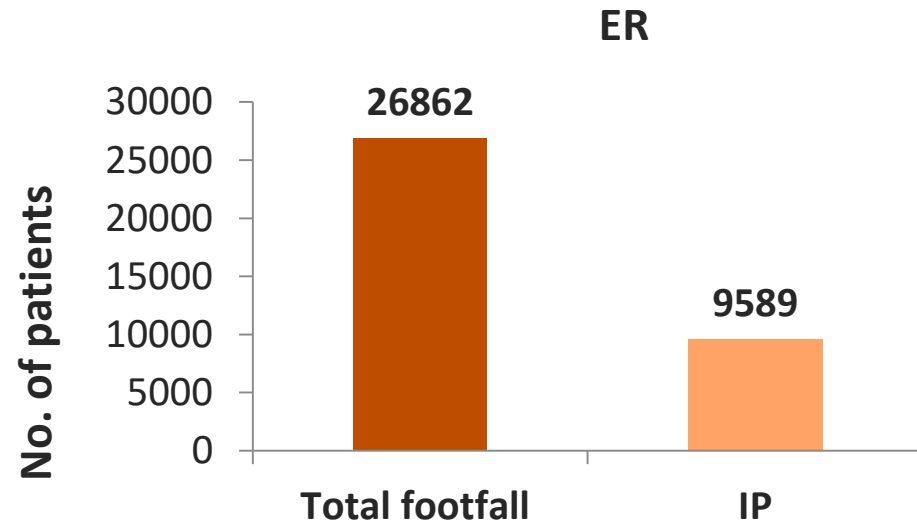


S- Surgical Management
M- Medical Management
IP- Inpatient (Admission)
ER- Emergency
OP- Outpatient

Objective 1-To find out the percentage of patients availed treatment recommended within the facility.

April 2018- March 2019

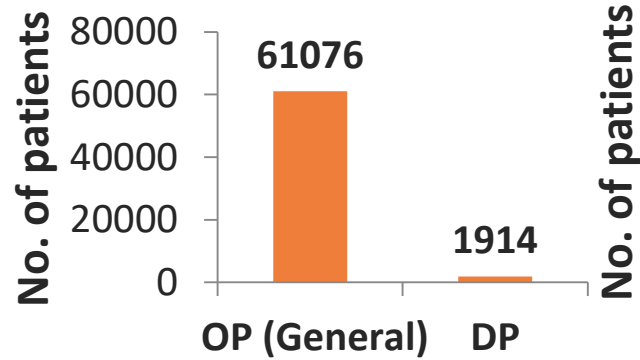
Conversion



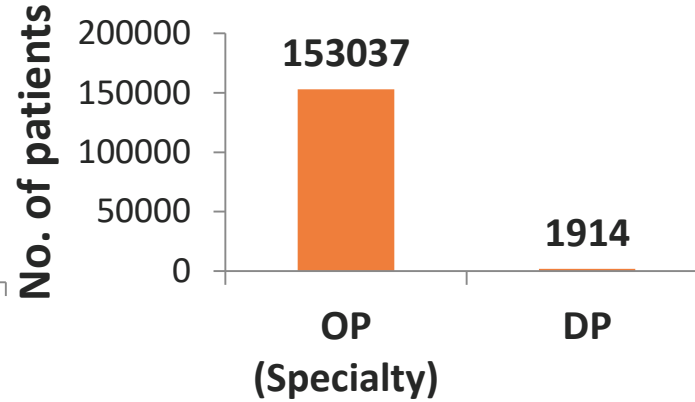
Conversion rate

1. ER Conversion- 35%
2. Total OP- Total IP: 3.5%
3. Total consultation – Total IP: **3.64%**

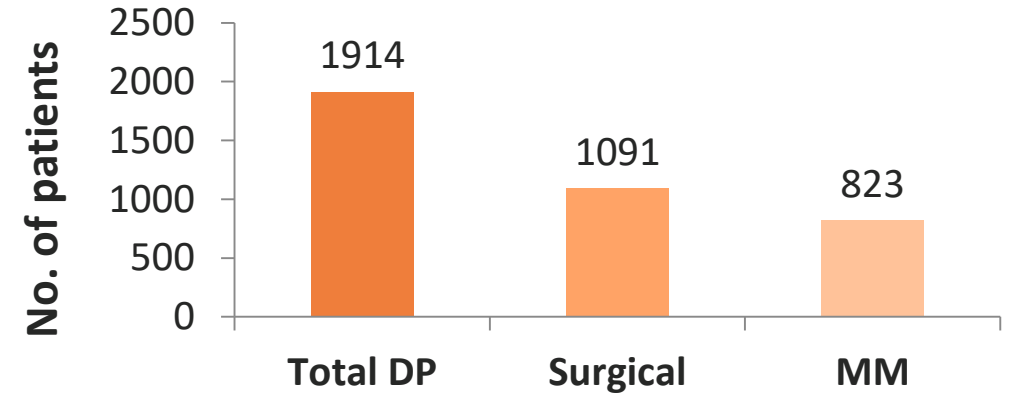
OP(General)- DP



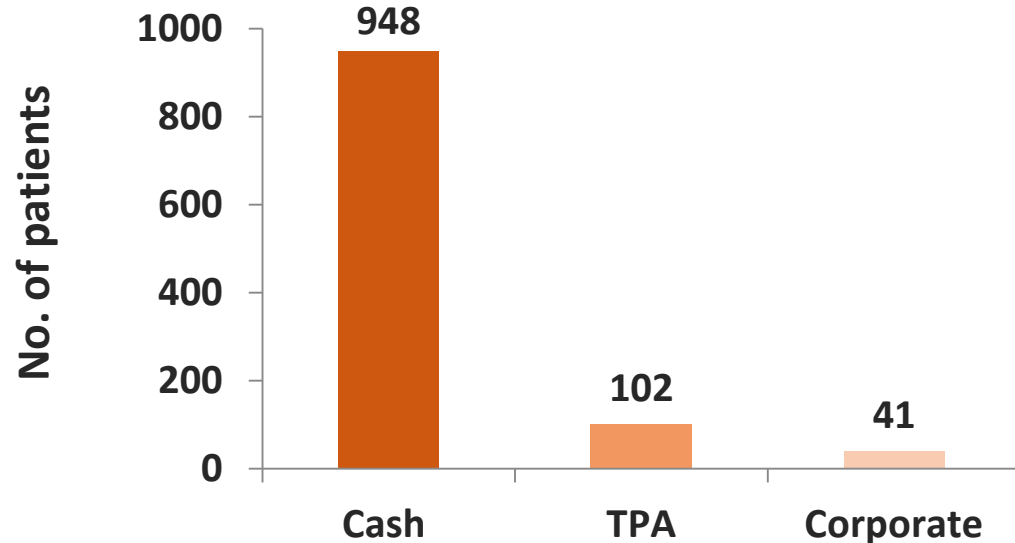
OP (Specialty)-DP



Total DP- MM & Surgical

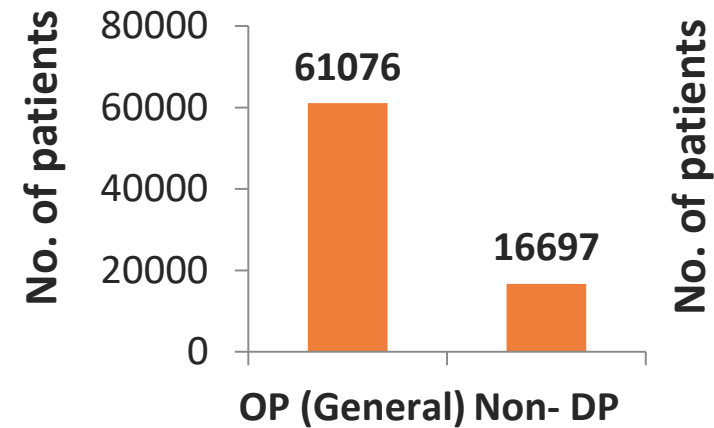


Total DP(Surgical): Payor wise

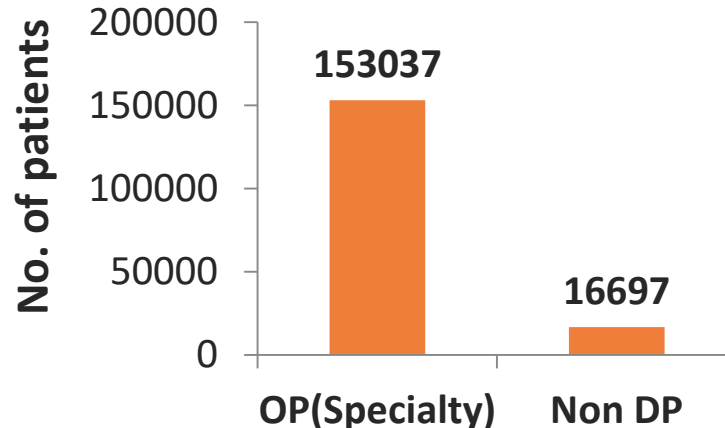


- %age of DP from **OP(General)**: **3.13%**
- %age of DP from **OP(Specialty)**: **1.25%**
- %age of **MM** in total DP: **42%**
- %age of **Surgical** in total DP: **57%**
- %age of **Cash** in total DP: **50%**
- %age of **TPA** in total DP: **5.3%**
- %age of **Corporates** in total DP: **2.14%**

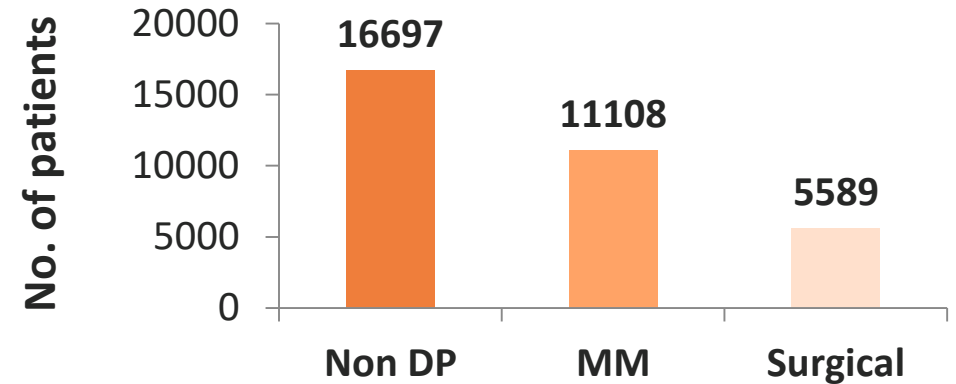
OP(General)- Non DP



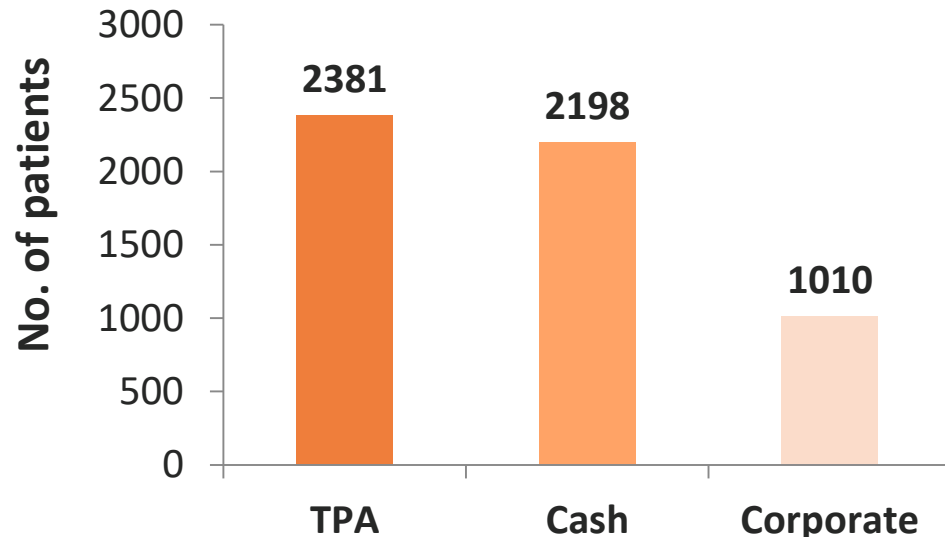
OP(Specialty)- Non DP



Total Non DP- MM & Surgical



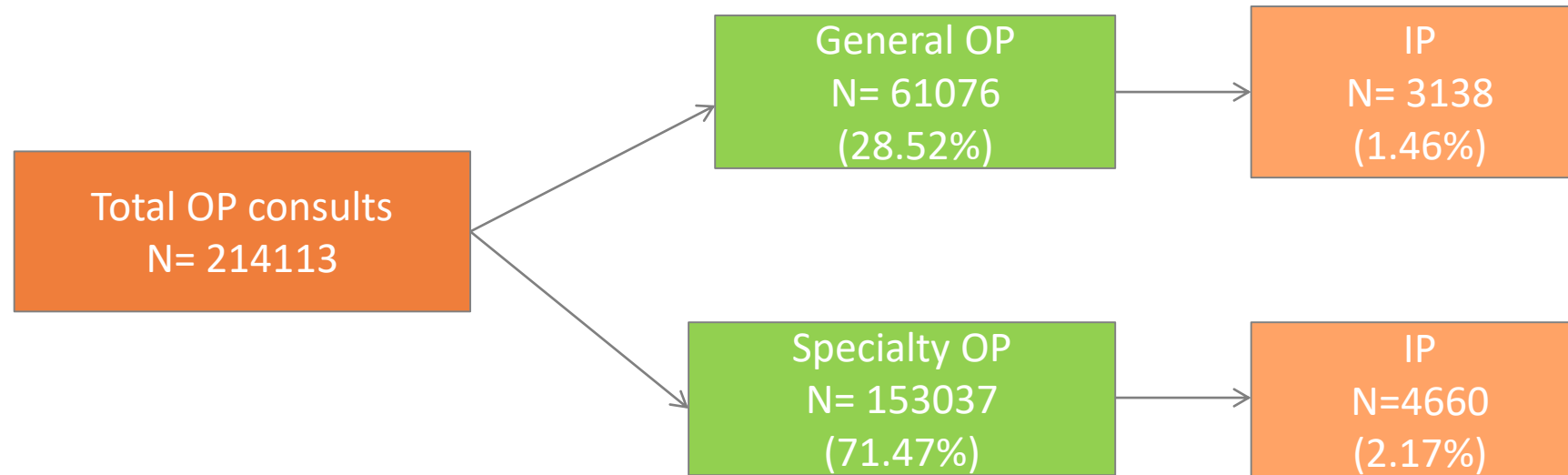
Total Non DP(Surgical)- Payor wise



- %age of **Non-DP** in OP(General): **27.33%**
- %age of **Non-DP** in OP(Specialty): **10.91%**
- %age of **MM** in total Non-DP: **67%**
- %age of **Surgical** in total Non- DP: **33%**
- %age of **Cash** in total Non-DP: **39%**
- %age of **TPA** in total Non-DP: **47%**
- %age of **Corporates** in total Non-DP: **18%**

Surgical Conversion

Surgical Departments	OP consults	IP	OP-IP Conversion %	Surgeries done	% of surgeries done through OP	Surgical				Non- Surgical			
						DP	Non DP	DP% in Total OP	Non DP % in total OP	DP	Non DP	DP% in Total OP	Non DP% in Total OP
Cosmetic Surgery	3545	602	17%	1613	46%	377	1236	11%	35%	7	21	0.2%	0.6%
E.N.T.	9656	218	2%	175	2%	37	138	0%	1%	3	50	0.0%	0.5%
General Surgery/GI	8507	1632	19%	1432	17%	267	1165	3.13%	14%	25	214	0.3%	2.5%
Paediatric Surgery	360	78	21.6%	96	27%	1	95	0.2%	26.3%	0	10	0.0%	3%
Obstetrics Gynaecology & Gynae Oncology	15384	1218	8%	985	6%	106	879	1%	6%	19	165	0.1%	1.1%
Neurosurgery	4527	577	13%	260	6%	27	233	1%	5%	15	329	0.3%	7.3%
Orthopaedic	18030	979	5%	996	6%	116	880	1%	5%	26	128	0.1%	0.7%
Interventional Radiology	167	73	44%	341	204%	62	279	37%	167%	11	2	6.6%	1.2%
Total	60176	5377	9%	5898	10%	993	4905	2%	8%	106	919	0.2%	1.5%

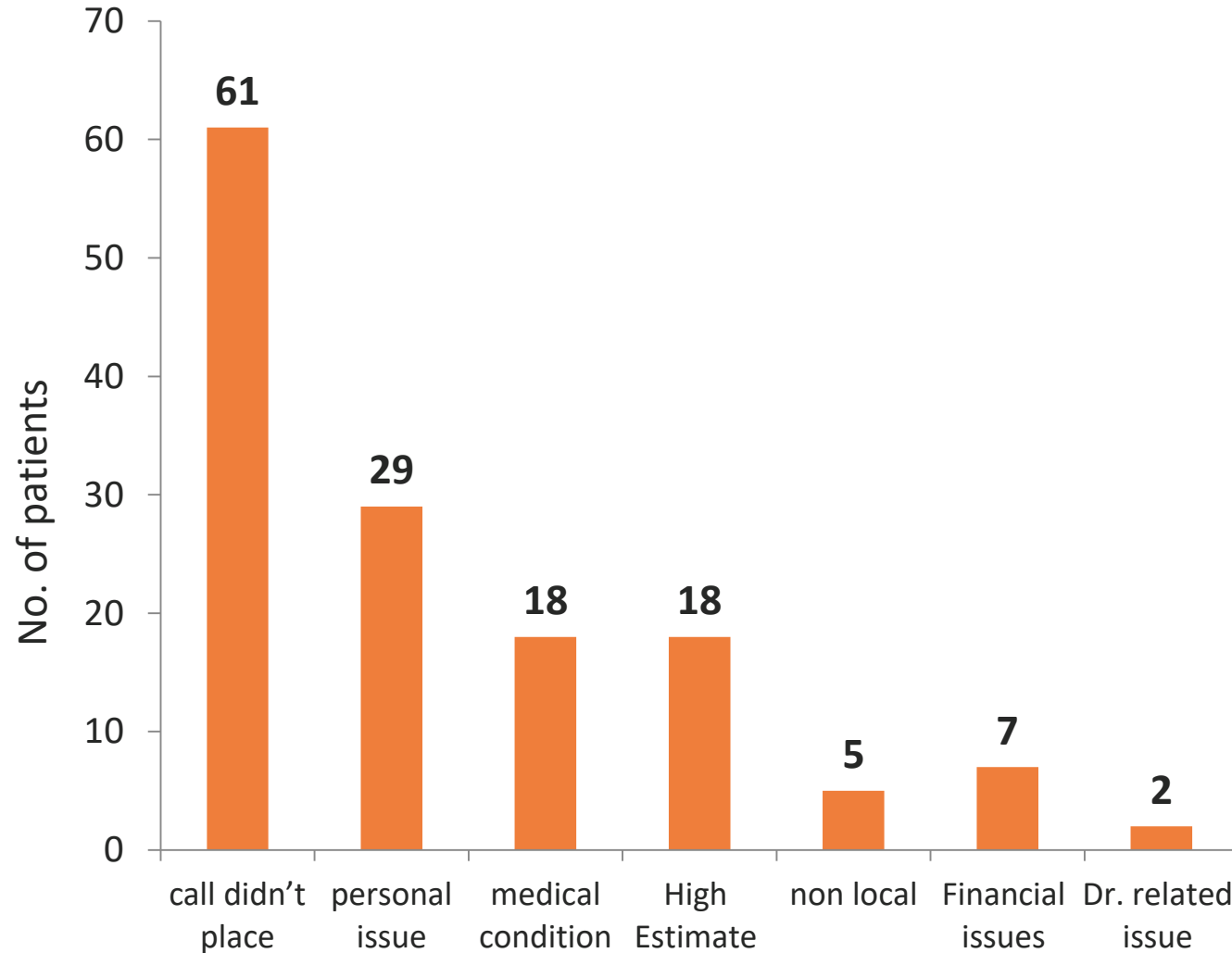


From total patients consulted, 61076 patients were from general OP and 153037 patients were from specialty OP. Out of patients consulted in general OP, 3138 patients were admitted and out of total patients consulted in specialty OP, 4660 patients were admitted.

- 35% of patients were admitted through emergency department.
- 3.5% of patients admitted through Outpatient.
- 3.64% of patients were admitted out of total OP consultations.
- 3.13% of patients consulted in general OP were admitted in Diet paying (DP) ward.
- 1.25% of patients consulted in specialty OP were admitted in Diet Paying ward.
- 42% of patients were admitted under medical management in DP ward.
- 57% of patients were admitted in DP ward and undergone surgery.
- Out of total patients admitted for surgery, 50% were cash patients, 5.3% were TPAs and 2.14% were corporate patients.
- 27.3% of patients consulted in general OP were admitted in Non Diet paying (DP) ward.
- 10.91% of patients consulted in specialty OP were admitted in Non DP ward.
- 67% of patients were admitted under medical management in DP ward.
- 33% of patients were admitted in DP ward and undergone surgery.
- Out of total patients admitted for surgery, 39% were cash patients, 47% were TPAs and 18% were corporate patients.
- Among surgical departments, It was found that less than 15% patients availed treatment within the facility from ENT, Obstetric Gynaecology and Orthopedic i.e. 2%, 8% and 5% respectively. Further from ENT, Gynaecology, Neurosurgery and Orthopaedic, less than 15% patients i.e. 2%, 6%, 6%, 6% respectively undergone surgery.

Objective 2: To identify the factors responsible for non-retention of the patients for recommended surgical treatment.

Factors responsible for Non- Retention of Patients for surgery recommended



Interpretation:

61 patients were failed to be interviewed due to calls issues, 21 patients had their personal issues, 18 patients didn't avail treatment because of medical conditions, 5 patients were not from Kolkata, 7 patients had financial issues and 2 patients had issues from doctor.

Reasons for non retention of patients for recommended treatment

International patient

Wrong number

Didn't answer the call

Invalid number

Switched off

0

Academic issues

0

Place constraint

0

Not yet decided

0

Family issues

0

Not mentally prepared



Patient is on medicine



Patient is pregnant



Investigation reports found normal



Suffering from multiple medical problems.



Surgery rate was high

- Rude behavior

- ▮ Refused to do surgery under PPN package.

The major factors responsible for non-retention of surgical treatments are:

1. High estimate
2. Financial issues
3. Doctor related issues
4. Medical condition
5. Non local
6. Personal issues

Among the patients interviewed, “personal issue” was the factor which was answered by majority of patients followed by “High estimate” and “medical condition”

- Provision of providing psychological counseling to the patients not mentally prepared for surgery.
- The surgery rates to be revised and surgery grade to be fixed for each surgery according to the complexity and duration of surgery.
- Provision of free pick and drop facility to the patients staying more than 10 kms away from the hospital.

Research title	Research Question	Sub- questions	Objectives	Method	Result	Findings from literature review	Findings from your research	Recommendations
Factors for Non-Retention of Patients For recommended surgical treatment	What are the factors responsible for non-retention of patients for recommended treatment?	Q1. What is the percentage of patients availed surgical treatment recommended?	To find out the percentage of patients availed surgical treatment recommended within the facility.	Study design: Observational analytical Data collection: Secondary data Data source: HMIS Study setting: Operations dept. of CMRI hospital Study duration: April 2018-March 2019	, It was found that less than 15% patients availed treatment within the facility from ENT, Obstetric Gynaecology and Orthopedic i.e. 2%, 8% and 5% respectively. Further from ENT, Gynaecology, Neurosurgery and Orthopaedic, less than 15% patients i.e. 2%, 6%, 6%, 6% respectively undergone surgery.	Factors identified for negative influences on retention in care (<u>Ferdinand C. Mukumbang</u>, <u>Joyce Chali</u>, and <u>Brian van Wynn</u>, 2010) - Personal history and biological factors that influence the retention-in-care behaviours of the patient. - Weight increase as a sign of improved health, medication side effects, and alcohol use were patient factors identified to influence retention-in-care behaviours. - Trust in faith healing and the use of other herbal remedies.	35% of patients were admitted through emergency department. 3.5% of patients admitted through Outpatient. 3.64% of patients were admitted out of total OP consultations.	- Provision of psychological counseling to the patients not mentally prepared for surgery. - The surgery rates to be revised and surgery grade to be fixed for each surgery according to the complexity and duration of surgery.
—	—	Q2. What are the factors responsible for non-retention of patients for recommended surgical treatment?	To identify the factors responsible for non-retention of the patients for recommended surgical treatment.	Study design: Observational descriptive and Qualitative. Sampling frame: Patients who didn't avail treatment within the facility. Sampling type: Purposive sampling Sample size: 140 patients. Study duration: 1 st February 2019-28 th February 2019	21 patients had their personal issues, 18 patients didn't avail treatment because of medical conditions, 5 patients were not from Kolkata, 7 patients had financial issues and 2 patients had issues from doctor.	Factors associated with non-retention in HIV care in an era of widespread antiretroviral therapy. (<u>O'Connell S</u>, <u>O'Rourke A</u>, <u>Sweeney E</u>, <u>Lynam A</u>, <u>Sadlier C</u>, <u>Bergin C</u>, 2017) - All the patients who disengaged from care. - Intravenous drug users - patients with heterosexual risk were more likely to disengage from care Nursing staff non-retention: Effective factors (<u>Mohammad Heidari</u>, <u>Bahar Seifi</u>, <u>Zahra Abdolreza Gharebagh</u>, 2017) - Job stress - Social support - Job dissatisfaction	The major factors responsible for non-retention of surgical treatments are: - High estimate - Financial issues - Doctor related issues - Medical condition - Non local - Personal issues Among the patients interviewed, “personal issue” was the factor which was answered by majority of patients followed by “High estimate” and “medical condition”	Provision of free pick and drop facility to the patients staying more than 10 kms away from the hospital.

THANK YOU