



Assessing quality of health care services through hospitals to customers of Aditya Birla Health Insurance Co.Ltd.

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Introduction

- ▶ A Health Insurance Company needs to build a network of good quality and affordable hospitals, Diagnostic Centre's, doctors etc. to provide the cashless facility to their customers at the time of need of hospitalization.
- ▶ Measuring the quality of healthcare is a necessary step in the process of improving health care quality.
- ▶ So, Aditya Birla Health Insurance conducts a hospital quality audit of all the empanelled hospitals to get detailed hospital information and to mitigate any kind of risk to the customer.
- ▶ This information would help in categorizing the hospitals in different quality profiles and enables the team to maintain a good quality network.
- ▶ Better Quality of services leads to better health outcomes with reduced costs which would ultimately leads to increased customer satisfaction.

Process Flow of Quality Survey

Target list of hospitals for Quality Survey is prepared

Formal mail with Quality Survey questionnaire is sent to the hospital

Date of survey is fixed with the hospital over phone

Detailed visit of the facility and data is collected through a questionnaire from the hospital is done



Quality check is done to assure the completeness of the survey



Data digitization and scoring is done of the collected data in MS Excel sheet



Grading of the hospitals (A,B,C,D) is done based on the Quality scores obtained.



Research Question-

- ▶ What is the status of quality of health care services through hospitals to customers of Aditya Birla Health Insurance?

Objectives-

- ▶ To study quality of services related to health insurance of the empanelled hospitals.
- ▶ To suggest ways to improve quality, if required.

Methodology

- ▶ **Study design-** Descriptive cross sectional
- ▶ **Setting-** The study was conducted in the empanelled hospitals of Mumbai and Pune for checking the quality of health care services provided by hospitals to the customers of Aditya Birla Health Insurance
- ▶ **Duration of study-** February 18 to April 30, 2019
- ▶ **Sampling and Sample size-** 50 Hospitals(42 hospitals of Mumbai and 8hospitals of Pune)

From all the empaneled hospitals of Mumbai and Pune, a list of 50 hospitals was given by the management. Visit was made to all the 50hospitals for quality survey according to the appointments fixed.



► **Methods of Data Collection**

Interaction with the staff and observation-Structure and the services available in the hospital were observed along

with a staff of facility as well as basic information about infrastructure, clinical services, Non clinical services, patient

centric etc. were asked to complete the quality survey questionnaire.

► **Tools of Data Collection**

A Quality Survey Questionnaire was provided by the management to collect the hospital information on various

parameters such as basic hospital information ,infrastructure, clinical services etc.

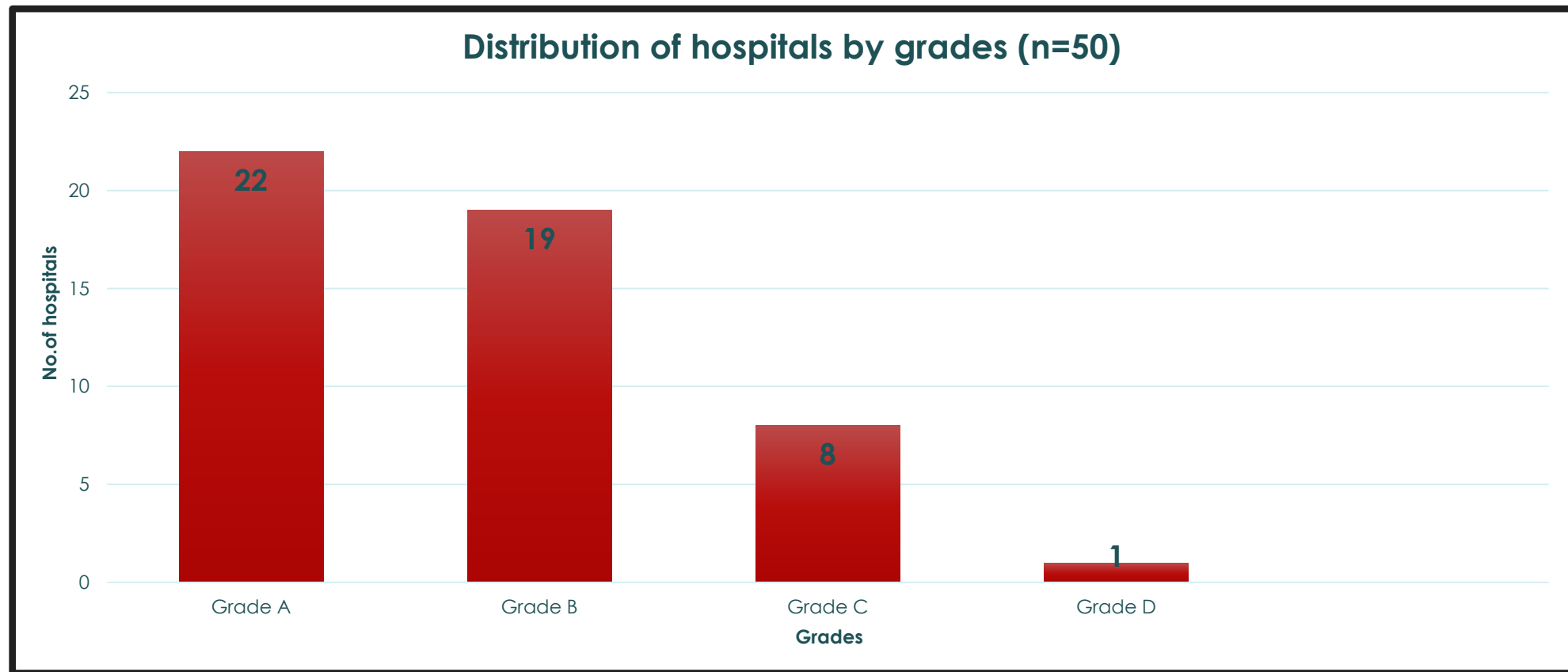
Data Analysis

- ▶ After data collection, digitization and scoring of the data was done on the scoring sheet which provides the defined scores to all the parameters of the questionnaire.
- ▶ Grading of the Hospitals (A, B, C, D) is done based on the scores obtained.
- ▶ Grading was done based on-

Hospital grades	Percentage
Grade A	80-100%
Grade B	60-80%
Grade C	40-60%
Grade D	40 and below



Results



% Distribution of Hospitals by Grades and Parameters of Quality Health Care Services (n=50)

Parameters	Grade A	Grade B	Grade C	Grade D
Basic Information of hospital	0%	54%	44%	2%
Infrastructure	12%	66%	18%	4%
Clinical Services	30%	36%	24%	10%
Non Clinical Services	60%	18%	16%	6%
Clinical Governance	48%	32%	16%	4%
Patient Centric	94%	0%	6%	0%
Outcome Indicator	58%	6%	22%	14%

Components:

1. Basic Information

In %

Parameters	A	B	C	D
International/ National Accreditation or any Certification	2	6	0	92
Legal Compliance	26	50	18	6
Coding, Billing and Internet use	8	6	0	86
Admission and Discharge Policy	62	2	0	36
HMIS	56	14	8	22

2.Infrastructure

In %

Parameters	A	B	C	D
Room category/ ICU/CCU	58	26	8	8
Other room categories	86	4	4	6
Hospital Environment Area	76	0	16	8
Electricity	30	16	48	6
Supply of Medical Gases	14	0	84	2
Air Conditioning	48	32	12	8

3.Clinical Services

In %

Parameters	A	B	C	D
Clinical Speciality	8	24	24	44
Radiology services	28	28	16	28
Laboratory	38	14	16	32
Emergency Services	32	12	54	2
Surgical Facilities	98	0	0	2
ICU	76	0	24	0

4.Non Clinical Services

In %

Parameters	A	B	C	D
Medical Record System	76	0	24	0
Pharmacy	84	0	0	16
CSSD	62	16	14	8
Laundry	84	0	0	16
Infection Control	62	8	2	28
Waste Management	68	8	2	22
Security & Safety	60	8	4	28
TPA Counter	60	0	0	40

5.Clinical Governance

In %

Parameters	A	B	C	D
Clinical Audit and Quality	60	0	0	40
Clinical Risk Management	50	8	0	42
Laboratory	76	0	2	22
Emergency Services	80	0	0	20
OT	92	0	0	8
ICU	92	6	0	2
Imaging and Radiology	92	6	0	2

6.Patient centric

In %

Parameters	A	B	C	D
Patient Consent	94	6	0	0
Patient Satisfaction and Complaints	88	6	0	6

7.Outcome Indicators

In %

Parameters	A	B	C	D
Outcome Indicator	46	14	4	36
Hospital Statistics	80	10	4	6

Conclusion

- ▶ The quality status of Grade A and Grade B hospitals was above 60% whereas Grade C and Grade D hospitals have less than 60% scores.
- ▶ Grade A Hospital 44%
- ▶ Grade B Hospital 38%
- ▶ Grade C Hospital 16%
- ▶ Grade D Hospital 2%
- ▶ There is scope of improvement in B grade hospital as well but priority is on the Grade C and D hospitals .

Recommendations

- ▶ Suggesting the low grade hospitals(Grade C and D) to improve their services in terms of accessibility and quality.
- ▶ De-panelling the hospitals who does not score up to the mark.
- ▶ Such quality audits should be conducted in regular intervals to get the real picture of the hospitals and to keep a track of these hospitals.
- ▶ Tariff analysis of these hospitals can be done that would help in formulating PPN (Preferred Provider Network) by comparing both quality and tariff results.

THANK YOU 😊