

**FRONT DESK OPERATING SYSTEM DATA ANALYSIS AT
SUKOON HEALTH, GURUGRAM**

Dissertation Submitted to



The IIHMR University, Jaipur

for the partial fulfillment for the award of the degree of
Master of Business Administration (MBA)

in

Hospital and Health Management

By

Rashmi Arya

Under the Supervision and Guidance of

Dr Susmit Jain

2021

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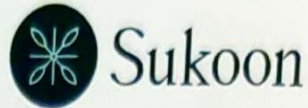
2021

DECLARATION BY STUDENT

I hereby declare that this dissertation titled “**Front Desk Operating System Data Analysis at Sukoon Health, Gurugram**” is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

Rashmi Arya

Roll no- 0971



Clinical Governance by
Dept. of Mental Health and Behavioral Sciences
Fortis Hospitals Ltd.

SH/HRD/IC/June/2021/01

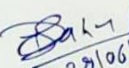
Date:28/06/2021

To whomsoever it may concern

This is to certify that Ms Rashmi Arya, a student of MBA Hospital and Health Management 6th Semester from IIHMR University, Jaipur, has completed her training at Sukoon Healthcare Services Private Limited.

She has completed her training in 'Sales & Marketing' from 15th Feb 2021 to 31st May 2021.

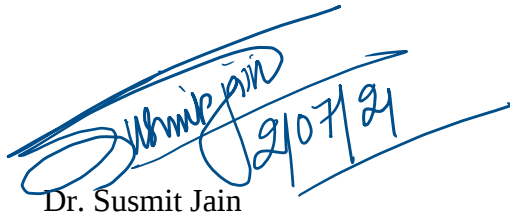
During her tenure, her performance was found to be satisfactory and we wish her all the best for her future endeavors.


28/06/21
HR Department
Sukoon Health



CERTIFICATE

This is to certify that dissertation titled “**Front Desk Operating System Data Analysis at Sukoon Health, Gurugram**” is a record of the research work undertaken by **Rashmi Arya** in partial fulfillment of the requirements for the award of the degree of MBA (Hospital and Health Management) from the IIHMR University, Jaipur under my guidance and supervision and her approach to the research study has been sincere, scientific, and analytical.



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FRONT DESK OPERATING SYSTEM DATA ANALYSIS AT SUKOON HEALTH,GURUGRAM

ABSTRACT

Rationale of Study: A hospital is a system, where each department performs specific functions. The performance of the departments within a hospital are inter-related. Front Desk is the department which handles appointments and gives information to the patients about illnesses, health care resources, or the services provided. The rationale of this study was to analyse the front desk operating system data at Sukoon Health, Gurugram. Front office quality of hospital was examined for the first time. Recommendations proposed from this analysis will help in improvement of the service attributes and ultimately improving the Quality.

Design/methodology: This study was Descriptive & Retrospective Study comprised of all the calls made for queries (OPD/IPD/Emergency), consultation (OPD), appointments (OPD) in Sukoon Health Gurugram for 2 months (April-May 2021). The data has been taken from Exotel (A secure and reliable business phone system where a single phone number is used for calling and receiving SMSs and calls) and an observational checklist has also been made for doctor's appointment schedule.

Findings: Data analysis was done through MS Excel. Total number of appointments are more in May as compared to April. Highest number of appointments was observed for Psychiatrist 1 and video consultations are more. More number of appointments are cancelled by doctors as compared to patients in both April & May. Delay in start of consultation was found highest for Psychiatrist 1 as compared to other two Psychiatrists. Average waiting time was 30 minutes in April which got increased to 35 minutes in May. Exotel data shows 26.30% calls were dropped in April which got reduced to 18.80% dropped calls in May.

Practical implications: Attributes which require improvement was identified which will help in improving the quality and overall functioning of the hospital.

Key Words: Front Desk, Appointments, Consultations, Hospital, Exotel, Quality

ACKNOWLEDGEMENT

First and foremost, thanks to the God, for his blessings throughout my internship to complete it successfully.

I would like to express my gratitude to **Mrs Anamika Sinha**, Experience Manager for giving me an opportunity to do my internship and project work in “SUKOON HEALTH PVT LTD.” I also thank **Mr Deepak Kumar Sahu**, General Manager for guiding and encouraging me in carrying out this project work. I also express my gratitude to the other staff members of Sukoon Health who helped me during the period of my internship. I also thank the Directors of Sukoon Health **Mr Kanishk Gupta** and **Mr Vidit Bahri** for providing me the opportunity to work on this project.

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Rashmi Arya

(Roll No.- 0971)

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ABBREVIATIONS

Sr. No.	Abbreviations	Full Form
1.	OPD	Out-patient Department
2.	IPD	In-patient Department
3.	rTMS	Repetitive Transcranial Magnetic Stimulation
4.	APA	American Psychiatric Association
5.	UHID	Unique Health Identification Number
6.	EMR	Electronic Medical Record

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CHAPTER 1- INTRODUCTION

1.1 About Sukoon Health-

- Sukoon Health is India's most comprehensive hospital for Psychiatry, Psychology, De-Addiction, Rehabilitation and rTMS services having OPD, IPD, Emergency services 24*7. It is clinically governed by the Dept. Of Mental Health and Behavioural Sciences, Fortis Hospitals Ltd.
- It is a twenty-one bedded facility, located in sector-56, Gurugram. It is designed as per American Psychiatric Association (APA) Standards. It is spread across 6 spacious floors with ample natural light and lush green spaces to provide a safe, private, comfortable, and calm environment for patients to recover.
- It has a dedicated woman only floor that is completely staffed by females' nurses, ward girls, and housekeeping staff. Every patient at Sukoon gets a dedicated nurse.

1.2 OPD-

- OPD is the part of the hospital with allotted physical facilities and medical and other staff in sufficient numbers, with regularly scheduled hours, to provide care for patients who are not registered as in-patients".(1)
- First point of contact between the patient and the hospital is the Out-Patient Department. A Patient who goes first time to any hospital, he/she directly goes to OPD.
- Patients are not required to be hospitalized but can visit any associated facility, such as a consultation room, diagnosis, pharmacy, etc., in the hospital.

1.3 Front-Desk Operating System-

- A hospital is a system, where every department performs specific functions. (2) The performance of the departments within a hospital are inter-related. (2,3) The performance of one department affects the functionality of other departments.

- Front Desk is a term used for the reception area and its personnel and is the department which handles appointments and gives information to the patients about illnesses, health care resources, or the services provided.
- Front office is a crucial point within a hospital because it functions as a common point of contact across the organization. (4) The front office offers assistance to guests related to the services they require. The department is the nerve centre of the overall organization, as it stores information regarding what is occurring throughout the hospital. (5). It is generally a part of hospital's customer relationship management infrastructure.
- A hospital operating system allows hospitals to expose the non-value added white space in operations. Windows, UNIX, and Mac OS are some of the operating systems which are used in a hospital.

Satisfaction from the clinical activities is the foremost target of patients, then also there should pay sufficient attention to all the non-clinical activities to make the patients happy from overall services of the hospital and to fulfill their (patients) all the secondary needs besides the primary needs. If the patient get satisfied from both clinical and non-clinical services that attitude remains in the mind of the patients and their relatives for a long period of time. It creates the good will of the hospital because a satisfied customer is the best marketing propaganda agent especially for the hospital and the reverse is also true.

A satisfied customer is the key for success of any hospital. Therefore, besides clinical it is also desirable to study the extent of influences of physical facilities, front office administration and hospital architecture on outpatient satisfaction.

1.4 OPD FLOW OF PATIENTS AT SUKOON HEALTH-

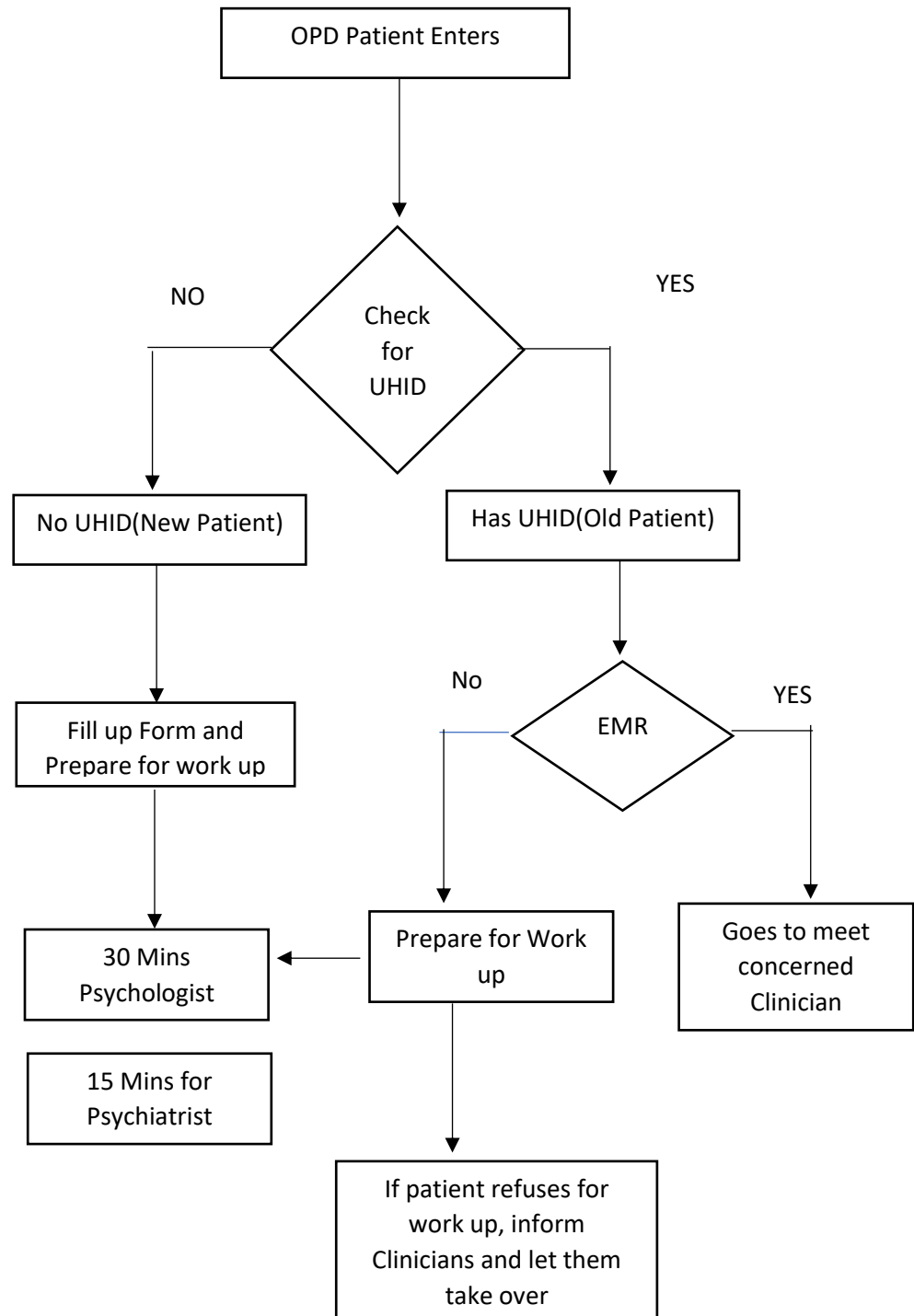


Figure 1.1: OPD Flow of Patients at Sukoon Health

1.5 OBJECTIVES:

1. To find out the Total number of consults done by doctors.
2. To find out the the no. of days where no OPD was done by the doctors.
3. To find out the cancelled or delayed appointments (By Patient/Doctor).
4. To find out the average waiting time for the consultation.
5. To find out the %age of Calls Dropped.

CHAPTER 2- REVIEW OF LITERATURE

Table 2.1: Review of Literature

Year	Authors	Title	Research Design	Conclusion	Inference
2019	Stavros Pouloukas et al.	Evaluation of the IHIS in Public Hospitals in Cyprus Utilizing the DIPSA Framework. (6)	DIPSA evaluation framework assessed the users' perception in five categories namely, satisfaction, collaboration, system quality, safety and procedures, using Likert scale and 3 open questions. Correlation between the categories was assessed using the Pearson correlation coefficient, and to examine the relationship between the demographic characteristics	All five categories were rated moderately, between 2.5 and 3, by the participants. All categories were correlated ($P < 0.01$). Multiple regression analysis indicated the need for improvement between the professionals (mainly doctors and nurses). The open questions pointed out the need for improvement in all 3 factors examined (Technology, Human Factor, Organization).	The moderately rated categories, in the Cyprus IHIS, suggest that there is a lot of room for improvement . Some interventions are suggested that could positively and simultaneously affect one or more categories.

			and categories, multiple regression analysis was used.		
2019	Moghaddam , Rafat Bagherzadeh	Evaluation of service quality of clinics at teaching hospitals affiliated with Tehran University of Medical Sciences in Iran from patients' viewpoint. (7)	Cross-sectional study,in Tehran (2017). Random selection of 400 patients in 4 hospitals. Data collection-through questionnaire.	Patients were more satisfied with physician consultation, services costs and admission process out of the 8 dimensions of health service quality. Reason for admission, source of recommendation ,education level, health status, and waiting time in the clinics is dependent on the positive perception of service quality.	The most important determinants of service quality in clinics are the Patients' perceptions of physician consultation, providing information to patients and the environment of delivering services.
2018	Kuang-Ming Kuo et al.	Strategic Improvement for Quality and Satisfaction of Hospital Information Systems.(8)	Cross sectional survey of 150 physicians at health-care system in southern Taiwan.	Reliability and response time were identified as the highest priorities for intervention by low- and high-satisfaction	To significantly predict physicians' satisfaction, System quality, information

				users, Low-satisfaction users further expects improvement of the HIS service quality.	quality, and service quality may be used. Health-care systems should produce coping interventions to enhance the Physicians satisfaction.
2015	Li et al.	Evaluating patients' perception of service quality at hospitals in nine Chinese cities by use of the ServQual scale.(9)	Descriptive, ServQual scale method was used.	Service quality was found satisfactory in Chinese patients.	Hospitals in China should increase their awareness and ability to serve their patients.
2011	Abhijit Chakravarty	Evaluation of service quality of hospital outpatient department	Cross-sectional study using SERVQUAL. Consumer ratings across 22 items were collected. Servic	Service quality gaps exist with significant gaps across the dimensions of 'tangibles' and 'responsiveness.'	Service quality gaps needs to be addressed by improvement efforts made by the

		services. (10)	e quality gaps were identified and analysed.	The quality gaps were further validated by a total SERVQUAL score of (-) 1.63.	hospital management.
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CHAPTER 3- RESEARCH METHODOLOGY

3.1 Study Design- Descriptive & Retrospective Study

- Descriptive Study explains the phenomenon and its characteristics. It focuses on answering the how, what, when, and where questions in a **research** problem, rather than the why.
- Retrospective study uses the information or events collected in the past.

3.2 Study Setting- Sukoon Health, Gurugram (Haryana)

3.3 Study Duration-Two months i.e.,April 1, 2021- May 31, 2021

3.4 Sample Size- comprised of all the calls (550) made for queries (OPD/IPD/Emergency), consultation (OPD), appointments (OPD).

3.5 Target Population- Patient's OPD Appointments

3.6 Data Collection- The data has been taken from Exotel having the timing, duration, status (missed/completed/call attempt) of the calls throughout the day for 2 months (April-May 2021) and observational checklist was also made for doctor's appointment schedule.

3.7 Inclusion Criteria-

- Data were collected of the patient having OPD Consultation (In-person/Video) between working hours 9 am to 6 pm
- Data collected was only for OPD appointments with Psychiatrists
- Call dropped/missed at the front desk by the personnel

3.8 Exclusion Criteria-

- IPD and emergency data has not been included in the study
- Psychologists, Art Based Therapists, Social Worker appointments have been excluded from the study

3.9 Data Analysis- The data analysis has been done through MS Excel.

3.10 Ethical Considerations- Due considerations of confidentiality and privacy of information would be undertaken in the study.

CHAPTER 4- RESULTS

Data Interpretation has been done for the months of April & May 2021 for 3 Psychiatrists doing OPD consultation for the month of April & May 2021. Psychiatrists has been named as ‘Psychiatrist 1’, ‘Psychiatrist 2’, ‘Psychiatrist 3’.

➤ Total No. of Appointments (Video/In-person)-

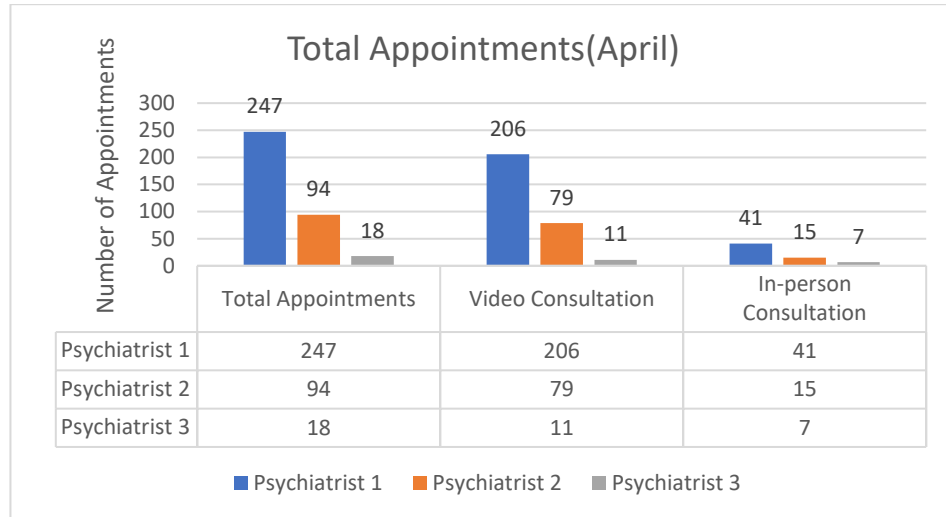


Figure 4.1: Total No. of Appointments (April)

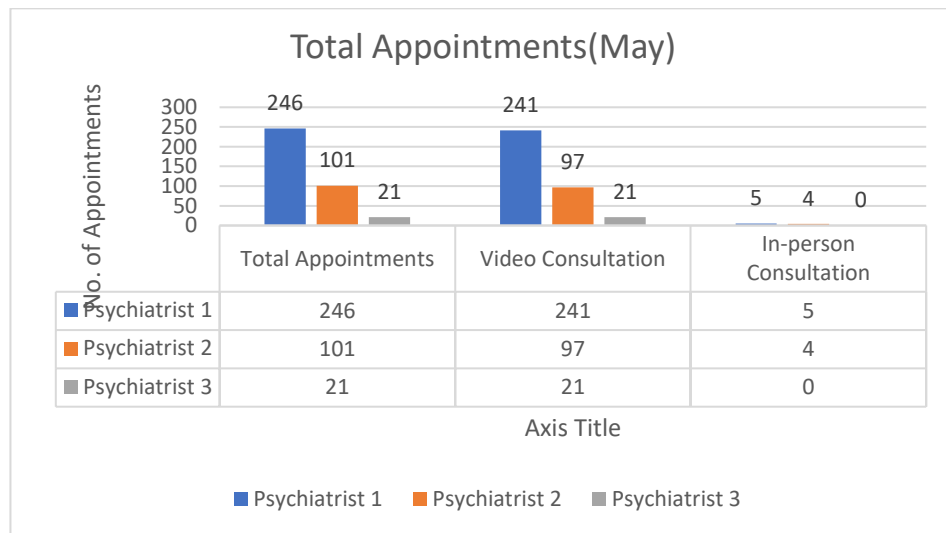


Figure 4.2: Total No. of Appointments (May)

- Total Appointments are less in April(359) as compared to May (368)
- Total Appointments are more for Psychiatrist 1 as compared to other two Psychiatrists in both April & May 2021
- Psychiatrist 3 has very less consultations as compared to other two Psychiatrists

- Video Consultations are more as compared to in-person consultations for all the three Psychiatrists

➤ **Percentage of new consults against total consults-**

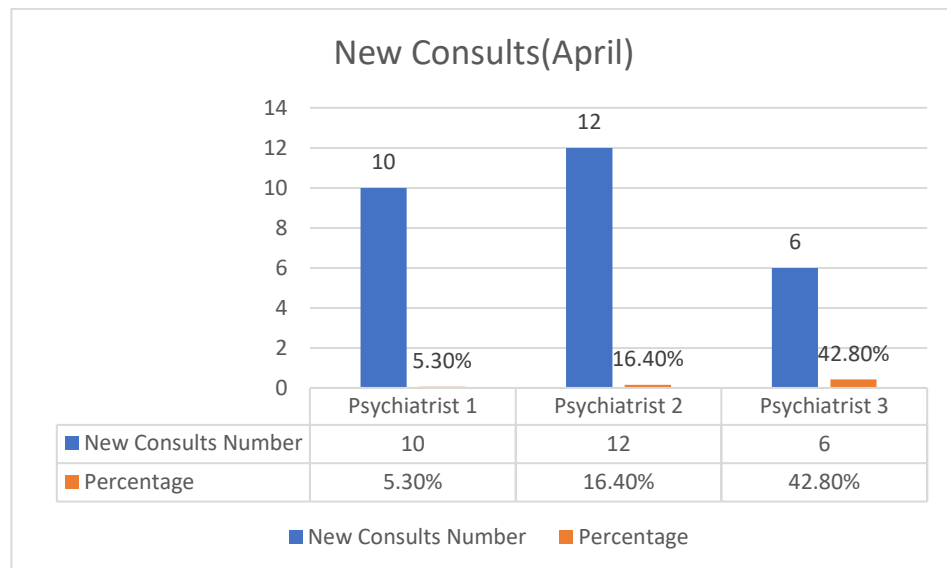


Figure 4.3: Percentage of new consults against total consults(April)

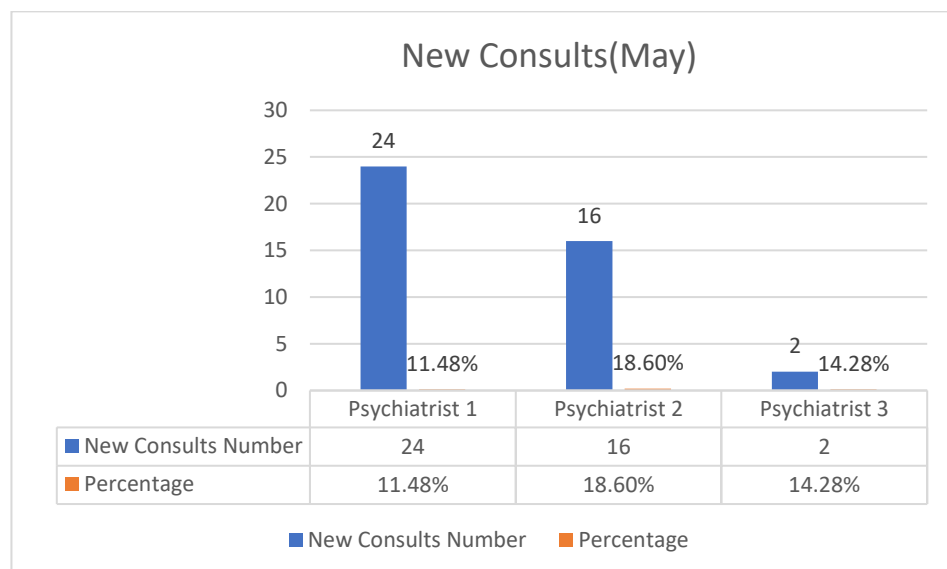


Figure 4.4: Percentage of new consults against total consults(April)

- In April, new consultations are more for Psychiatrist 2 while in May, new consultations are more for Psychiatrist 1
- For Psychiatrist 3, 6 consultations are new out of 14 consultations (42.80%) in April

➤ **Days with nil OPD consultation-**

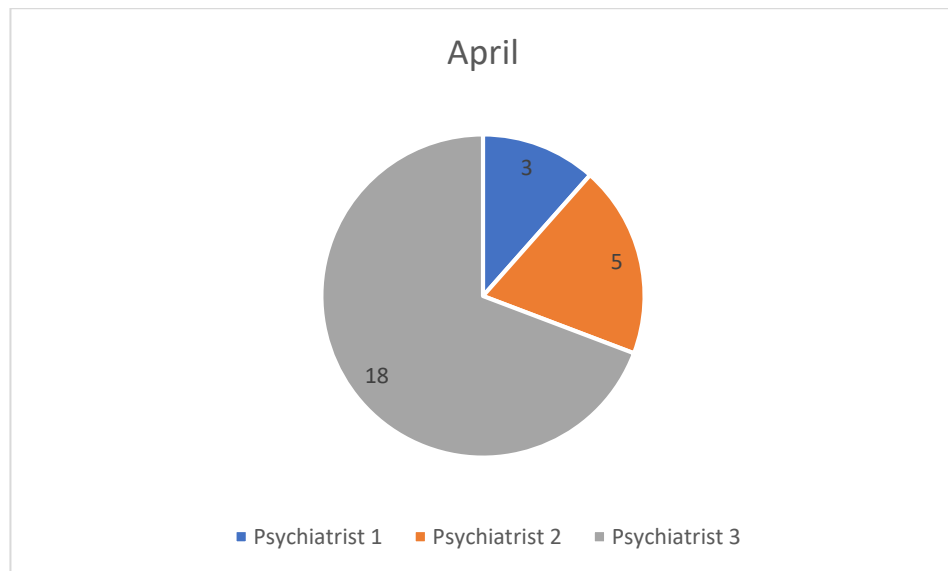


Figure 4.5: Days with nil OPD consultation(April)

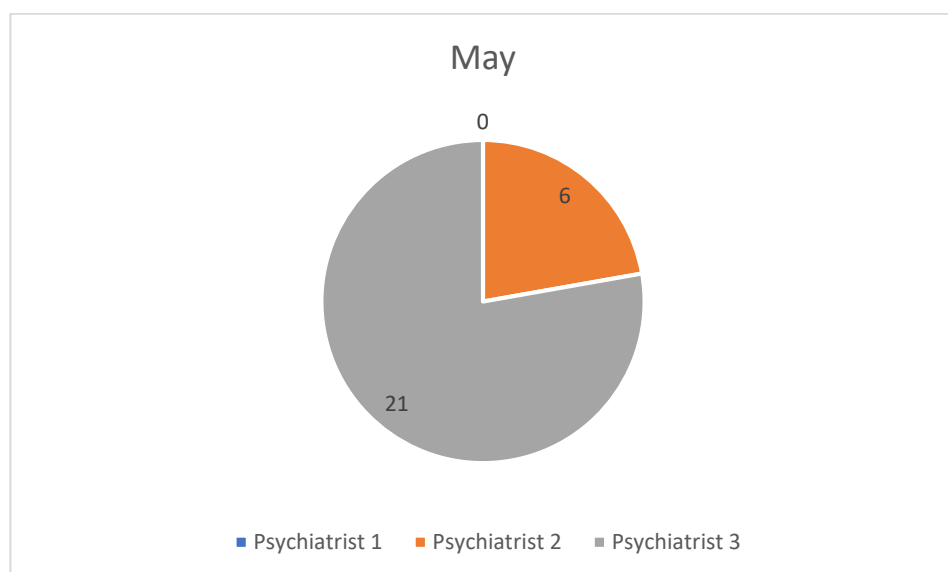


Figure 4.6: Days with nil OPD consultation(May)

- No. of days where OPD was not done by Psychiatrist 3 is highest in both the months
- Psychiatrist 1 has done OPD even on Sundays in May

➤ **Cancelled Appointments-**

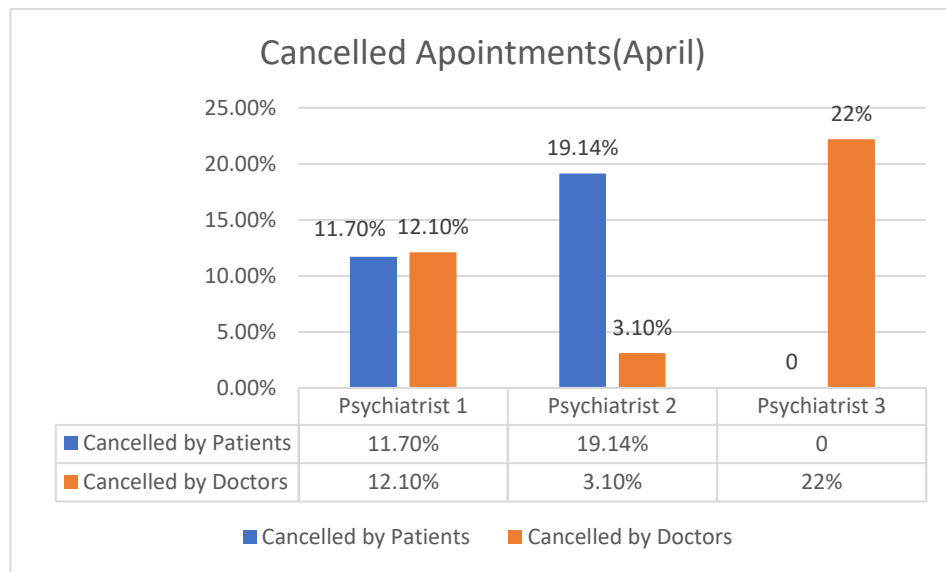


Figure 4.7: Cancelled Appointments(April)

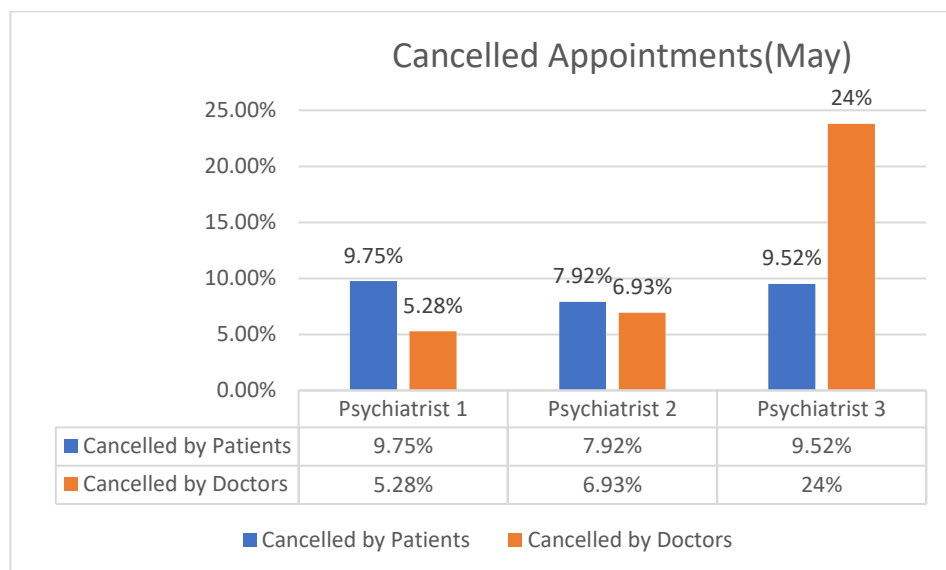


Figure 4.8: Cancelled Appointments(May)

- More number of appointments are cancelled by doctors as compared to patients in both April & May
- More no. of appointments is cancelled by Psychiatrist 3 in both April & May

➤ **Percentage delay in start of consult by the Patient/Doctor-**

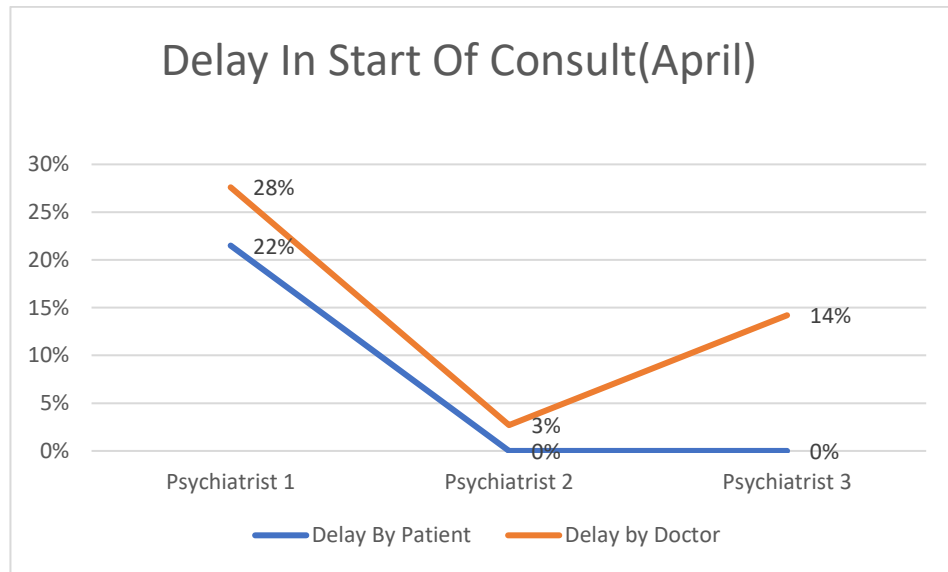


Figure 4.9: Percentage delay in start of consult by the Patient/Doctor(April)

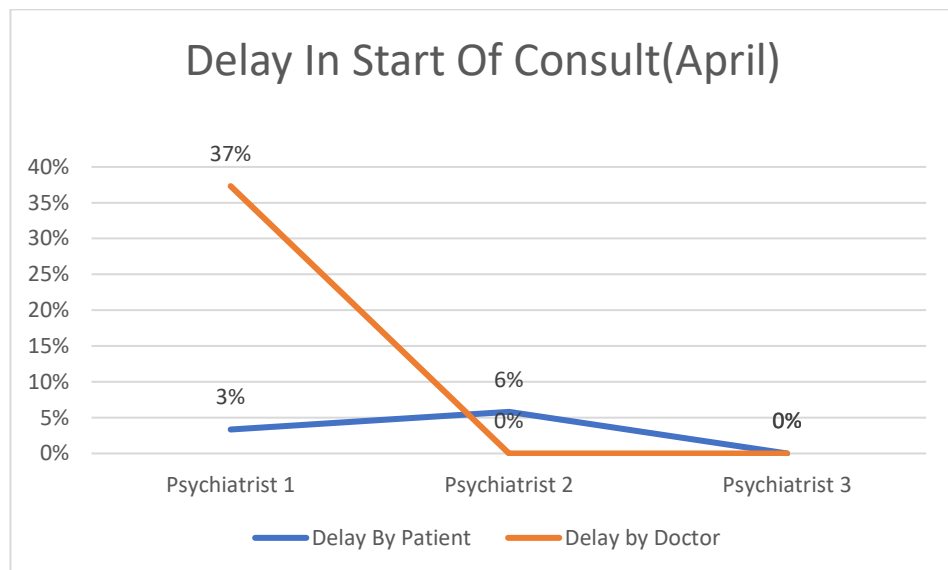


Figure 4.10: Percentage delay in start of consult by the Patient/Doctor(May)

- Delay in start of consultation occurred more due to Psychiatrists as compared to patients
- Highest no. of delays occurred in Psychiatrist 1 consultations

➤ **Percentage of Drs. arriving beyond scheduled OPD time-**

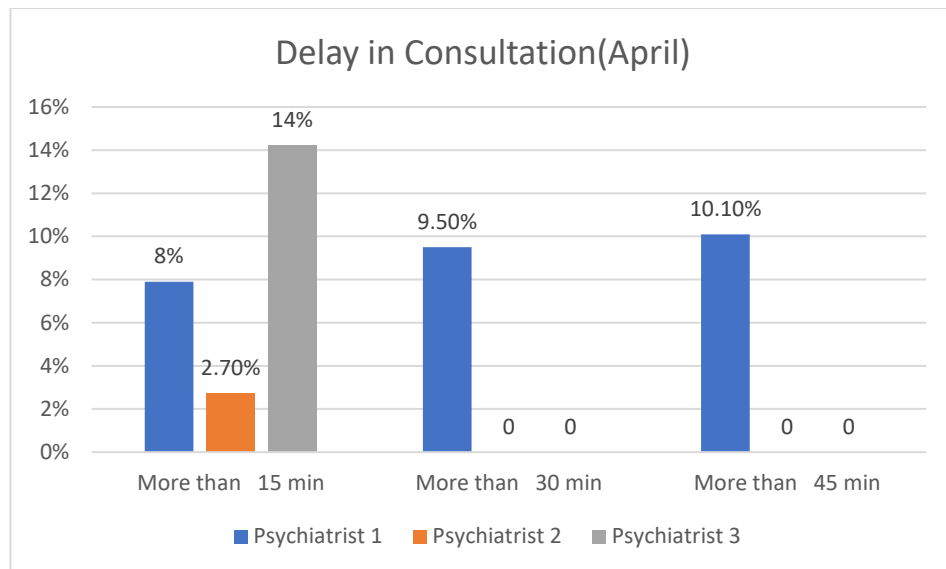


Figure 4.11: Percentage of Drs. arriving beyond scheduled OPD time(April)

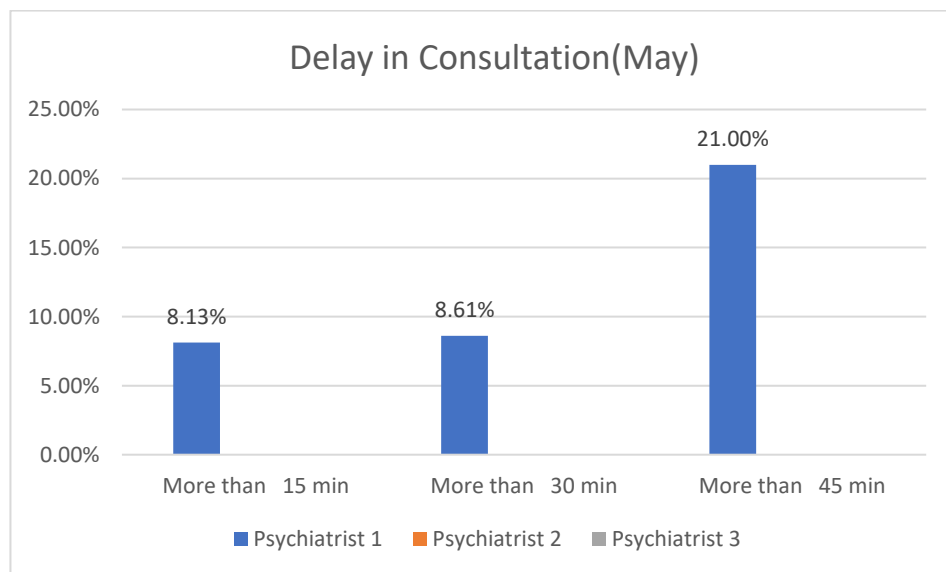


Figure 4.12: Percentage of Drs. arriving beyond scheduled OPD time(May)

- For Psychiatrist 1, Delay in consultation occurred for more than 15 minutes (8%), more than 30 min. (9.50%), and more than 45 min.(10.10%) in April
- For Psychiatrist 1, Delay in consultation occurred for more than 15 minutes (8.13%), more than 30 minutes (8.61%), and more than 45 minutes (21%) in May
- For Psychiatrist 2 delay has occurred in 2.70% consultations for more than 15 minutes in April only. In May, there was no delay in consultations

- For Psychiatrist 3, delay has occurred in 14% consultations for more than 15 minutes in April. In May, there was no delay in consultations

➤ **Average Waiting Time-**

For Average waiting time calculation, firstly total time of all the appointments got delayed by every Psychiatrist is calculated. Second, total number of times appointment got delayed by every Psychiatrist is calculated. Average waiting time is calculated by dividing total time of delay by total number of appointments delay.

• **April:**

- Psychiatrist 1- $1620/52 = 31.15$ min
- Psychiatrist 2- $30/2 = 15$ min
- Psychiatrist 3- $30/2 = 15$ min
- Average waiting time for OPD- $1680/56 = 30$ minutes

• **May:**

- Psychiatrist 1- $2775/79 = 35.12$ min
- Psychiatrist 2- 0 min
- Psychiatrist 3- 0 min
- Average waiting time for OPD- $2775/79 = 35.12$ minutes

➤ **Exotel Data Analysis-**

Exotel is a secure and reliable business phone system where a single phone number is used for calling and receiving SMSs and calls. %age of Calls Dropped is calculated by Total no. of calls coming from outside missed at console / total no. of outside calls received at console.

April:

1. %age of Calls Dropped- $(75/285) \times 100 = 26.30\%$
2. Call from Unique Numbers- 57
3. %age of Dropped Calls called back- NA

May:

1. %age of Calls Dropped- $(56/297)*100= 18.80\%$
2. Call from Unique Numbers - **46**
3. %age of Dropped Calls called back- NA

CHAPTER 5- DISCUSSION

From the data analysis, we can say that there is only slight difference in total number of appointments in April & May. Highest number of appointments are recorded for Psychiatrist 1, both Video and In-person as compared to other two psychiatrists. It is because of availability of Psychiatrist and also because patients want appointment with particular Psychiatrist. Psychiatrist 3 has lowest number of appointments. It may be due to health issues. Since the spread of covid-19 had rapidly increased in these two months, that is the reason video consultations were more as compared to in-person consultations.

Out of 275 consults in April, only 28 were new patients and in May, only 42 were new patients out of 309 consultations. Rest were follow up consultation of the old patients. It may be due to pandemic situation going on because people are delaying non-emergency treatment due to fear of getting COVID-19 infection. For Psychiatrist 3, total consults are less but new consults are 42.8% out of total consults in April.

The highest number of days where OPD were done was by Psychiatrist 1. Psychiatrist 1 has done OPD even on Sundays in May and Psychiatrist 3 has done very less OPD. It is possibly due to Psychiatrist not well due to COVID-19 and was on leave.

More number of appointments are cancelled by doctors as compared to patients in both April & May and highest no. of appointments is cancelled by Psychiatrist 3. Again, the cancellation of appointments by Psychiatrist 3 is due to COVID-19 infection.

Delay in start of consultation occurred more due to Psychiatrists as compared to patients and Maximum no. of delays occurred in Psychiatrist 1 consultations. For Psychiatrist 1, Delay in consultation occurred for more than 15 minutes (8% appointments in April & May), more than 30 minutes (9.50% appointments in April & 8.61% appointments in May), and more than 45 minutes (10.10% appointments in April & 21% appointments in May). For Psychiatrist 2 delay has occurred for 15 minutes only in April and that too in 2.70% consultations. For Psychiatrist 3, delay has occurred in 14% consultations for 15 minutes in April. In May, there was no delay in consultations of Psychiatrist 2 & 3.

Delay may be because of many reasons. These can be Psychiatrist was already in a session with patient and session got extended, an IPD query call has to be done which can cause delay in start of a consultation, an already admitted patient's family comes to visit the patient and also wants to meet the psychiatrist. In that case also, new consultation gets delayed. An emergency patient arrives in hospital, and if no Psychiatrist is available at that time, then one has to delay a consultation and see the emergency patient.

Patient waiting time for healthcare services is identified by the World Health Organization (WHO) as one of the key measurements of a responsive health system. Waiting time is the time for patients seeking care at hospitals before being attended by the doctors for consultation and treatment. (11,12) Average waiting time for OPD in the month of April is 30 minutes and in May it is 35.12 minutes for all the three Psychiatrists. Highest waiting time is for Psychiatrist 1 in both the months (31.15 min in April, 35.12 minutes in May). The reasons for waiting time is same as delay in consultation by the doctor as described above.

Exotel is a secure and reliable business phone system where a single phone number is used for calling and receiving SMSs and calls. We can have route calls and receive notifications for missed calls. Since the hospital is using Exotel, so in this study, data for missed calls has been taken from it. Total 285 calls have been received at console out of which 75 calls were dropped (26.30%) in April and in May, Total 297 calls has been received at console out of which 56 calls were dropped (18.80%). 57 unique numbers have called in April and 46 unique numbers have called in May. Reasons for call dropped was because some of the calls were received between 8pm-9am when there was no hospital staff present at reception/front desk. Some calls were dropped because front desk personnel were busy on other calls. Call back of dropped calls couldn't be done through hospital console because it will show as 'Spam call' in recipient mobile, so call back has been done through different mobile phones, so its data was not available and hence cannot be analyzed.

CHAPTER 6- RECOMMENDATIONS

- **Patient Satisfaction Rate-** As we have seen video consultations are more compared to in-person consultations, we should find whether patient satisfaction rate is higher for video consultation or in-person consultation by using feedback forms.
- **Address the cause of appointment cancellation-** From June onwards, we will find out whether the doctor has cancelled the appointment or the patient cancelled it and address the cause of appointment cancellation. And when are these cancelled appointments re-scheduled and audit of re-scheduled appointments in the following months has to be done.
- **NIL OPD-** we will try to find when the psychiatrists do not do OPD and what are the reasons for having NIL OPDs.
- **Cause for delay in consultation-** we will try to find out the causes for delay in start of a consult. Is the delay because of patient or because of Psychiatrist and how much is the delay(Whether it is less than 15 minutes, more than 15/30/45 minutes)
- **Reducing the average waiting time-** We have found the average waiting time around 30 minutes for both the months. We will try to reduce it to around 10 minutes in the following months by using various quality indicators.
- **Reducing the %age of Calls Dropped-** As the calls dropped are high in both the months specially during nights, so we can assign a particular staff member who will pick up the call during nights,holidays. Also we can keep a track of missed calls in the working hours and call them back within 30 minutes and try to reduce the percentage below 3%.

CHAPTER 7- CONCLUSION

A hospital is a system, where every department performs specific functions and their performance is inter-related. Quality of front office department is very crucial for the overall functioning of the hospital. So, this study was focused on the front office quality of the hospital. Recommendations proposed from this analysis will help in improvement of the service attributes and ultimately improving the quality.

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Annexure: 1

Observational Checklist of Psychiatrists for April'2021

Psychiatrist 1-

Date	Total Appointment	Video Consultation	Inperson Consultation	Cancel by patient	Cancel by doctor	Delay by patient	Delay by doctor	More than 15 min	More than 30 min	More than 45 min
01-04-2021	12	11	1	0	0	0	4	2	1	1
02-04-2021	10	8	2	1	3	0	2	1	1	0
03-04-2021	15	12	3	2	2	1	4	0	3	1
04-04-2021	0	0	0	0	0	0	0	0	0	0
05-04-2021	8	6	2	2	1	2	1	0	0	1
06-04-2021	5	4	1	0	0	0	0	0	0	0
07-04-2021	3	3	0	0	0	0	0	0	0	0
08-04-2021	13	10	3	3	2	2	3	1	0	2
09-04-2021	18	13	5	1	4	0	8	3	1	4
10-04-2021	17	12	5	0	3	1	9	2	5	2
11-04-2021	0	0	0	0	0	0	0	0	0	0
12-04-2021	16	11	5	2	6	0	4	1	2	1
13-04-2021	13	12	1	2	1	3	1	0	0	1
14-04-2021	13	9	4	0	0	1	8	2	5	1
15-04-2021	8	4	4	1	1	0	0	0	0	0
16-04-2021	7	5	2	0	0	0	0	0	0	0
17-04-2021	6	3	3	0	5	0	0	0	0	0
18-04-2021	0	0	0	0	0	0	0	0	0	0
19-04-2021	13	13	0	3	0	0	0	0	0	0
20-04-2021	2	2	0	0	0	0	0	0	0	0
21-04-2021	4	4	0	0	0	0	2	2	0	0
22-04-2021	9	9	0	1	0	0	2	0	0	2
23-04-2021	4	4	0	4	0	0	0	0	0	0
24-04-2021	13	13	0	3	2	3	1	1	0	0
25-04-2021	1	1	0	0	0	0	0	0	0	0
26-04-2021	7	7	0	3	0	0	0	0	0	0
27-04-2021	8	8	0	1	0	0	0	0	0	0
28-04-2021	8	8	0	0	0	3	3	0	0	3
29-04-2021	6	6	0	0	0	0	0	0	0	0
30-04-2021	8	8	0	0	0	3	0	0	0	0
Total	247	206	41	29	30	19	52	15	18	19

Psychiatrist 2-

Date	Total Appointment	Video Consultation	Inperson Consultation	Cancel by patient	Cancel by doctor	Delay by patient	Delay by doctor	More than 15 min	More than 30 min	More than 45 min
01-04-2021	4	3	1	1	0	0	0	0	0	0
02-04-2021	3	2	1	0	0	0	0	0	0	0
03-04-2021	8	6	2	2	0	0	1	1	0	0
04-04-2021	0	0	0	0	0	0	0	0	0	0
05-04-2021	3	3	0	0	0	0	0	0	0	0
06-04-2021	4	2	2	0	0	0	0	0	0	0
07-04-2021	5	5	0	1	0	0	0	0	0	0
08-04-2021	1	1	0	0	0	0	0	0	0	0
09-04-2021	4	3	1	1	0	0	0	0	0	0
10-04-2021	7	7	0	3	1	0	0	0	0	0
11-04-2021	0	0	0	0	0	0	0	0	0	0
12-04-2021	0	0	0	0	0	0	0	0	0	0
13-04-2021	2	2	0	0	0	0	0	0	0	0
14-04-2021	6	3	3	0	0	0	1	1	0	0
15-04-2021	3	2	1	0	0	0	0	0	0	0
16-04-2021	3	3	0	0	0	0	0	0	0	0
17-04-2021	8	6	2	2	0	0	0	0	0	0
18-04-2021	0	0	0	0	0	0	0	0	0	0
19-04-2021	7	6	1	3	0	0	0	0	0	0
20-04-2021	4	4	0	2	0	0	0	0	0	0
21-04-2021	4	4	0	0	0	0	0	0	0	0
22-04-2021	2	2	0	0	0	0	0	0	0	0
23-04-2021	2	1	1	1	0	0	0	0	0	0
24-04-2021	2	2	0	0	0	0	0	0	0	0
25-04-2021	0	0	0	0	0	0	0	0	0	0
26-04-2021	3	3	0	1	0	0	0	0	0	0
27-04-2021	5	5	0	1	0	0	0	0	0	0
28-04-2021	2	2	0	0	0	0	0	0	0	0
29-04-2021	2	2	0	0	2	0	0	0	0	0
30-04-2021	0	0	0	0	0	0	0	0	0	0
Total	94	79	15	18	3	0	2	2	0	0

Psychiatrist 3-

Date	Total Appointment	Video Consultation	Inperson Consultation	Cancel by patient	Cancel by doctor	Delay by patient	Delay by doctor	More than 15 min	More than 30 min	More than 45 min
01-04-2021	1	1	0	0	0	0	0	0	0	0
02-04-2021	0	0	0	0	0	0	0	0	0	0
03-04-2021	2	1	1	0	1	0	0	0	0	0
04-04-2021	0	0	0	0	0	0	0	0	0	0
05-04-2021	0	0	0	0	0	0	0	0	0	0
06-04-2021	2	1	1	0	0	0	0	0	0	0
07-04-2021	1	0	1	0	1	0	0	0	0	0
08-04-2021	0	0	0	0	0	0	0	0	0	0
09-04-2021	1	1	0	0	0	0	1	1	0	0
10-04-2021	0	0	0	0	0	0	0	0	0	0
11-04-2021	0	0	0	0	0	0	0	0	0	0
12-04-2021	1	1	0	0	0	0	0	0	0	0
13-04-2021	0	0	0	0	0	0	0	0	0	0
14-04-2021	1	1	0	0	1	0	0	0	0	0
15-04-2021	0	0	0	0	0	0	0	0	0	0
16-04-2021	2	1	1	0	1	0	0	0	0	0
17-04-2021	3	1	2	0	0	0	0	0	0	0
18-04-2021	0	0	0	0	0	0	0	0	0	0
19-04-2021	0	0	0	0	0	0	0	0	0	0
20-04-2021	1	0	1	0	0	0	0	0	0	0
21-04-2021	1	1	0	0	0	0	0	0	0	0
22-04-2021	0	0	0	0	0	0	0	0	0	0
23-04-2021	0	0	0	0	0	0	0	0	0	0
24-04-2021	0	0	0	0	0	0	0	0	0	0
25-04-2021	0	0	0	0	0	0	0	0	0	0
26-04-2021	0	0	0	0	0	0	0	0	0	0
27-04-2021	0	0	0	0	0	0	0	0	0	0
28-04-2021	0	0	0	0	0	0	0	0	0	0
29-04-2021	0	0	0	0	0	0	0	0	0	0
30-04-2021	2	2	0	0	0	0	1	1	0	0
Total	18	11	7	0	4	0	2	2	0	0

Annexure: 2

Observational Checklist of Psychiatrists for May'2021

Psychiatrist 1-

Date	Total Appointment	Video Consultation	Inperson Consultation	Cancel by patient	Cancel by doctor	Delay by patient	Delay by doctor	More than 15 min	More than 30 min	More than 45 min
01-05-2021	14	14	0	1	0	0	3	3	0	0
02-05-2021	3	3	0	0	0	0	0	0	0	0
03-05-2021	9	9	0	0	0	0	0	0	0	0
04-05-2021	7	7	0	1	0	0	5	2	1	2
05-05-2021	3	3	0	0	1	0	0	0	0	0
06-05-2021	8	8	0	1	0	0	0	0	0	0
07-05-2021	7	7	0	0	0	2	0	0	0	0
08-05-2021	12	12	0	2	0	0	3	1	1	1
09-05-2021	2	1	1	0	0	0	0	0	0	0
10-05-2021	11	11	0	2	1	0	7	0	0	7
11-05-2021	14	14	0	1	0	0	7	2	1	5
12-05-2021	6	6	0	0	0	2	0	0	0	0
13-05-2021	6	6	0	0	0	0	0	0	0	0
14-05-2021	10	10	0	2	0	0	3	0	1	2
15-05-2021	7	7	0	2	0	0	4	1	3	0
16-05-2021	4	4	0	1	2	0	1	0	1	0
17-05-2021	13	11	2	0	1	0	10	1	0	9
18-05-2021	7	7	0	2	3	0	0	0	0	0
19-05-2021	8	8	0	0	0	0	5	0	3	2
20-05-2021	5	5	0	0	0	1	0	0	0	0
21-05-2021	5	5	0	0	0	0	3	1	1	1
22-05-2021	10	10	0	1	1	0	5	1	3	1
23-05-2021	3	3	0	0	0	0	3	1	0	2
24-05-2021	12	11	1	2	2	1	6	1	1	4
25-05-2021	7	7	0	0	0	0	2	1	0	1
26-05-2021	14	13	1	2	1	0	8	1	2	5
27-05-2021	8	8	0	0	0	0	0	0	0	0
28-05-2021	6	6	0	0	0	0	0	0	0	0
29-05-2021	11	11	0	3	1	1	2	1	0	1
30-05-2021	4	4	0	0	0	0	0	0	0	0
31-05-2021	10	10	0	1	0	0	1	0	0	1
Total	246	241	5	24	13	7	78	17	18	44

Psychiatrist-2

Date	Total Appointment	Video Consultation	Inperson Consultation	Cancel by patient	Cancel by doctor	Delay by patient	Delay by doctor	More than 15 min	More than 30 min	More than 45 min
01-05-2021	7	7	0	0	7	0	0	0	0	0
02-05-2021	0	0	0	0	0	0	0	0	0	0
03-05-2021	0	0	0	0	0	0	0	0	0	0
04-05-2021	4	4	0	0	0	0	0	0	0	0
05-05-2021	4	4	0	0	0	0	0	0	0	0
06-05-2021	4	4	0	1	0	0	0	0	0	0
07-05-2021	3	3	0	0	0	0	0	0	0	0
08-05-2021	5	4	1	1	0	0	0	0	0	0
09-05-2021	1	0	1	0	0	0	0	0	0	0
10-05-2021	0	0	0	0	0	0	0	0	0	0
11-05-2021	7	7	0	0	0	2	0	0	0	0
12-05-2021	2	2	0	0	0	0	0	0	0	0
13-05-2021	5	5	0	0	0	0	0	0	0	0
14-05-2021	4	4	0	0	0	0	0	0	0	0
15-05-2021	2	2	0	0	0	0	0	0	0	0
16-05-2021	1	1	0	0	0	0	0	0	0	0
17-05-2021	6	6	0	2	0	0	0	0	0	0
18-05-2021	7	7	0	1	0	1	0	0	0	0
19-05-2021	0	0	0	0	0	0	0	0	0	0
20-05-2021	5	5	0	0	0	0	0	0	0	0
21-05-2021	3	3	0	0	0	0	0	0	0	0
22-05-2021	6	6	0	1	0	1	0	0	0	0
23-05-2021	0	0	0	0	0	0	0	0	0	0
24-05-2021	2	2	0	0	0	0	0	0	0	0
25-05-2021	1	1	0	0	0	0	0	0	0	0
26-05-2021	6	5	1	0	0	0	0	0	0	0
27-05-2021	3	3	0	0	0	0	0	0	0	0
28-05-2021	4	4	0	0	0	0	0	0	0	0
29-05-2021	7	6	1	2	0	0	0	0	0	0
30-05-2021	0	0	0	0	0	0	0	0	0	0
31-05-2021	2	2	0	0	0	1	0	0	0	0
Total	101	97	4	8	7	5	0	0	0	0

Psychiatrist 3-

Date	Total Appointment	Video Consultation	Inperson Consultation	Cancel by patient	Cancel by doctor	Delay by patient	Delay by doctor	More than 15 min	More than 30 min	More than 45 min
01-05-2021	0	0	0	0	0	0	0	0	0	0
02-05-2021	1	1	0	0	0	0	0	0	0	0
03-05-2021	0	0	0	0	0	0	0	0	0	0
04-05-2021	0	0	0	0	0	0	0	0	0	0
05-05-2021	0	0	0	0	0	0	0	0	0	0
06-05-2021	1	1	0	0	0	0	0	0	0	0
07-05-2021	0	0	0	0	0	0	0	0	0	0
08-05-2021	2	2	0	0	0	0	0	0	0	0
09-05-2021	0	0	0	0	0	0	0	0	0	0
10-05-2021	4	4	0	0	0	0	0	0	0	0
11-05-2021	0	0	0	0	0	0	0	0	0	0
12-05-2021	2	2	0	1	0	0	0	0	0	0
13-05-2021	0	0	0	0	0	0	0	0	0	0
14-05-2021	0	0	0	0	0	0	0	0	0	0
15-05-2021	3	3	0	0	3	0	0	0	0	0
16-05-2021	0	0	0	0	0	0	0	0	0	0
17-05-2021	0	0	0	0	0	0	0	0	0	0
18-05-2021	0	0	0	0	0	0	0	0	0	0
19-05-2021	0	0	0	0	0	0	0	0	0	0
20-05-2021	0	0	0	0	0	0	0	0	0	0
21-05-2021	0	0	0	0	0	0	0	0	0	0
22-05-2021	0	0	0	0	0	0	0	0	0	0
23-05-2021	0	0	0	0	0	0	0	0	0	0
24-05-2021	0	0	0	0	0	0	0	0	0	0
25-05-2021	0	0	0	0	0	0	0	0	0	0
26-05-2021	0	0	0	0	0	0	0	0	0	0
27-05-2021	2	2	0	0	1	0	0	0	0	0
28-05-2021	3	3	0	1	0	0	0	0	0	0
29-05-2021	1	1	0	0	0	0	0	0	0	0
30-05-2021	0	0	0	0	0	0	0	0	0	0
31-05-2021	2	2	0	0	1	0	0	0	0	0
Total	21	21	0	2	5	0	0	0	0	0