

A Fit-Gap Analysis of process flow of e-Healthcare service

By

Himanshi Chhabra

*Dissertation submitted for the partial fulfillment of the
MBA Hospital and Health Management*

Academic year, 2015-2017



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TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr. Himanshi Chhabra student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at Credihealth, Gurugram from 6th February to 5th May, 2017.

The Candidate has successfully carried out the study designated to her during internship training and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.



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Your Medical Assistant

Certificate of completion of Internship/dissertation

The certificate is awarded to

Dr. Himanshi Chhabra

In recognition of having successfully completed her
Internship in the department of

Medical Operations

and has successfully completed her Project on

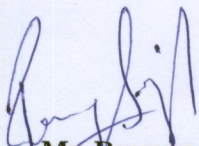
A Fit- Gap Analysis of process flow of e-Healthcare Service- Credihealth

Date: 15th May 2017

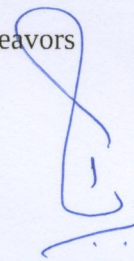
Organization: Credihealth Pvt. Ltd.

She comes across as a committed, sincere & diligent person who has a strong
drive and zeal for learning

We wish her all the best for future endeavors



Mr. Raunaq Singh
AVP- Service Delivery



Mr. Ravi Virmani
Founder & Managing Director

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled **A Fit Gap analysis of process flow of e-Healthcare services- Credihealth** and submitted by **Dr. Himanshi Chhabra** Enrollment No **IIHMR-U/01/2015-17/0286** under the supervision of **Dr Seema Mehta** for award of **MBA Hospital and Health Management** of the University carried out during the period from **February 06, 2017 to May 05, 2017** embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

Himanshi Chhabra

Signature

THE IIMMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that all ethical issues have been considered while collecting data for my dissertation titled: **AFit gap analysis of process flow of e-Healthcare services- Credihealth.**

Himanshi Chhabra

Signature of student

ABSTRACT

Title: A Fit-Gap Analysis of process flow of e-Healthcare service

Author: Dr. Himanshi Chhabra

Guided By: Dr. Seema Mehta

Background:

The e-healthcare service refers to the online healthcare marketplace that provides end to end services including information on various medical ailments, doctors, hospitals, treatments and their implications and post treatment care, i.e. concierge medical assistance from a distant reach.

The online services facilitate people to look for doctors, procedures and healthcare facilities, give second opinion across major cities in India, book appointments with the doctor of their choice, also help in getting rough cost estimates from hospitals for any treatment or surgery. Such platform has an advantage of distant data, that it offers better quality of services to maximum number of people. Due to the intense competition among various healthcare facilities, these e-Healthcare services are getting popular as they provide transparency along with convenience that has wider accessibility. Thousands of visitors can access these sites or portals at the same time. The e-Healthcare services raise awareness among the population that bridges the gap between the users and the healthcare providing facilities. This study aimed at understanding the process flow in such online medical platform and to uncover the reasons of drop-offs in the same.

Research Objectives:

1. To map the current process flow.
2. To measure the conversion rate for OPD and IPD city wise.
3. To analyze the search attributes city wise.
4. To identify the reasons for Drop-offs.
5. To suggest the value-additions in the process.

Methodology:

- Study type- Descriptive study

- Study Area- Online data of Six Major Metropolitan Cities- Bangalore, Chennai, Delhi-NCR, Hyderabad, Kolkata and Mumbai and Four Minor Cities- Jaipur, Indore, Pune and Ranchi
- Study Period- Data Tracking for Three months (February- April 2017)
- Sample Size- Distant online data of 25000 people who visited the digital platforms of Credihealth was tracked
- Study Respondents- Visitors on website different digital sources
- Sample method- Non-probability convenient Sampling
 - Data Collection Technique-Online Data tracking (Website, Android app, telephonic, Google search, social media campaign leads)
 - Limitation in Data Collection: Missed CRM requests, Non responding Users, Untracked CRM Request
- Data Analysis- The data analysis will be done in MS Excel.

Results:

The analysis of the data demonstrated the current scenario of the process flow being followed for the patients using e-healthcare service. The results also illustrated the conversion rate of patients reaching the online portal- who were converted into either OPD or IPD. The study allowed us to find the causes of drop-offs which could have created deficiencies/gaps that further lead to low conversion rates.

Conclusion:

The study aimed at finding out the problem areas associated with the process followed by the e-healthcare service. As the number of visitors involved was too high due to the distant service, the need of the hour was to understand and improve the process flow as well as to form strategies to eliminate the delivery point issues for all the users. The causes and their effects were identified and recommendations were made for value-additions to assist in improving the quality of services- both internally and externally for a sustainable profitable model.

Key Words:

e-Healthcare services, distant data, visitors, maximum reach, digital platform, drop-off, conversion rate.

ACKNOWLEDGEMENT

The dissertation opportunity with Credihealth, Gurugram was a great chance for learning and professional development. Therefore, I consider myself fortunate as I was provided with an opportunity to be a part of it. I am also grateful for having a chance to meet so many wonderful people and professionals who led me through this dissertation period. The foremost regards to **Mr. Ravi Virmani**, the founder and Managing Director of Credihealth, for having faith in me to make me a part of the Credihealth Family.

I am highly grateful and would like to express my deepest gratitude and special thanks to my mentor, **Mr. Raunaq Singh**, AVP- Service Delivery at Credihealth, Gurugram, who in spite of being extraordinarily busy with his duties, took time out to hear, guide and keep me on the correct path and arranging all facilities to make life easier and allowing me to carry out my project at their esteemed organization during my dissertation. I choose this moment to acknowledge his contribution gratefully.

It is my radiant sentiment to place on record my best regards, deepest sense of gratitude to **Mr. Mayank Sharma**, Business Analyst, **Mr. Chitrang Dalal**, Manager Product Management, my Delhi-team- Dr. Krati, Abida, Maneet, Dr. Sania and all of the support staff at Credihealth, Gurugram for their careful and precious guidance which were extremely valuable for my study both theoretically and practically.

I would like to thank **Dr. Seema Mehta** for the continuous support and guidance in completing my project, so I could learn from my mistakes and also Dr. Sania Loona, my batch mate cum friend for being always present by my side during my study.

I perceive as this opportunity as a big milestone in my career development. I will strive to use gained skills and knowledge in the best possible way, and I will continue to work on their improvement, in order to attain desired career objectives. Hope to continue cooperation with all of you in the future.

Sincerely,

Dr. Himanshi Chhabra

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LIST OF SYMBOLS AND ABBREVIATIONS

Serial No	Abbreviation	Full Form
1.	CH	Credihealth
2.	NCR	National Capital Region
3.	SAARC	The South Asian Association for Regional Cooperation
4.	GP	General Physician
5.	AMRI	The Advanced Medical Research Institute
6.	IT	Information Technology

Situational Analysis of process flow of e-Healthcare service- Credihealth

1.1 ABOUT OF THE ORGANIZATION

Credihealth (CH), established in 2014, is the first omni-channel player in the hospitalization/ inpatient business. It mainly provides medical assistance to the patients who already have visited a general physician or a family doctor and are looking for specialist for the tertiary care.

The organization is currently operable in ten major cities across India- Delhi NCR, Mumbai, Kolkata, Hyderabad, Chennai, Bangalore, Pune, Indore, Jaipur and Ranchi. It also caters international patients from Africa and SAARC nations- Afghanistan, Bangladesh and Nepal.

CH is an **end to end solution** for hospitalization needs – from searching for the right doctor, to scheduling appointments, diagnostics, surgeries & post-op care. It interacts with customers via website, mobile app, telephone & whatsapp to provide them a complete solution.

“It’s an online platform with a human touch” - Ravi Virmani, founder and managing director

1.1.1 Need to establish CH

Since every family has a healthcare need, CH helps navigate through the complex healthcare system and aspires to leverage technology to expand the healthcare boundaries, by enabling

a) Access to Healthcare- Through Information and Delivery

Information – Hospital and Doctor Credentials, Procedures, Treatments, Feedback, and healthcare content for the common man

Ensuring Delivery – It is a credible partner to support the patient through the entire experience of their hospital journey.

b) Transparency

CH empowers people to make informed healthcare decisions, by way of verified reviews, price comparisons, multiple treatment options and a belief that **now** there’s a better way!

Credihealth follows a disruptive model that challenges the conventions of traditional healthcare. The key differentiators are tie ups with marquee hospitals, medical guidance from in-house doctors, providing second opinions and referrals, comparable packages of different procedures in various hospitals, Hospital- concierge services, articles, blogs, videos, ambulance services, tie-up with loan facilities.

Users can search for doctors based on specialty and location or doctor name. The search can be further refined based on the area inside the city, availability, timings and consultation fee. Patients can directly book appointments from the search results, which display relevant doctors, their experiences, their timings, fees, their certifications, reviews and address.

Credihealth has a proprietary algorithm running in the backend, which ranks doctors listed on the site based on relevance, location and specialty, feedback from patients and appointment experience.

Credihealth involves the online organic search to get valuable consultations and further the treatment from the best doctors. Engagement can be low to moderate. It can be increased with bundling other forms of content in the app. Notifications can also work if they related to free stuff. Retention can be moderate to high. High retention can occur for satisfied users. Since health care services are of high involvement, a great experience will not only retain users but also drive a lot of recommendations too.

1.1.2 Conventional v/s Credihealth scenario

The very moment a family member gets ill, the first point of information is our near friends and relatives to ask for the best service provider. The process follows as to first consult that GP- that is usually is our family doctor, and moving forward to take second opinion for the same. Further, the patient lands up in the corresponding hospital based upon the treatment advised and the urgency of the need, Meanwhile, what is missed out is the proper guidance in the process which burdens the family who is already in worry of their dear one.

Here Credihealth fits in. Credihealth provides the one-stop solution to every healthcare need- beginning from getting the extensive information to help users to make an informed decision by speaking to a empathizing medical expert, avoiding the long que in the hospital, getting the

estimated cost comparisons between different hospitals, getting the correct treatment route and also the post treatment care, all just a phone call away!

1.1.3 Value Proposition to the Credi Users

- Hassle free experience - diagnostics, procedures and documentation
- Transparent medical costs with discounts passed directly to Patients; Prevent touts and unethical practices
- Access to a larger pool of doctors, hospitals, diagnostic centers
- Credi Concierge, one-on-one direct contact & post-op support
- Provide additional knowledge & helps ease decision making
- Find best Doctor for Patient's needs; get second opinions before committing to a procedure

“Credihealth enables users to make informed choices and manages the entire treatment lifecycle for patients”

CH stands unique with a large network of more than 630 hospitals- mainly Apollo Hospitals, Fortis Group, Medanta, Narayana Hrudalaya, Jaslok, Columbia Asia, BLK, Artemis, Medica and AMRI. The start-up's service is free for users. It charges a subscription and market development fee from hospitals.

1.1.4 The Credi Team

The start-up is lead by the clear vision of Mr. Ravi Virmani, Founder and Managing director of Credihealth.

Credi Family comprises of:

- Operations team including all the medical professionals and patient care executives.
- Business Development Team
- Digital Marketing Team
- Product Operations Team
- Technical Team
- Management team

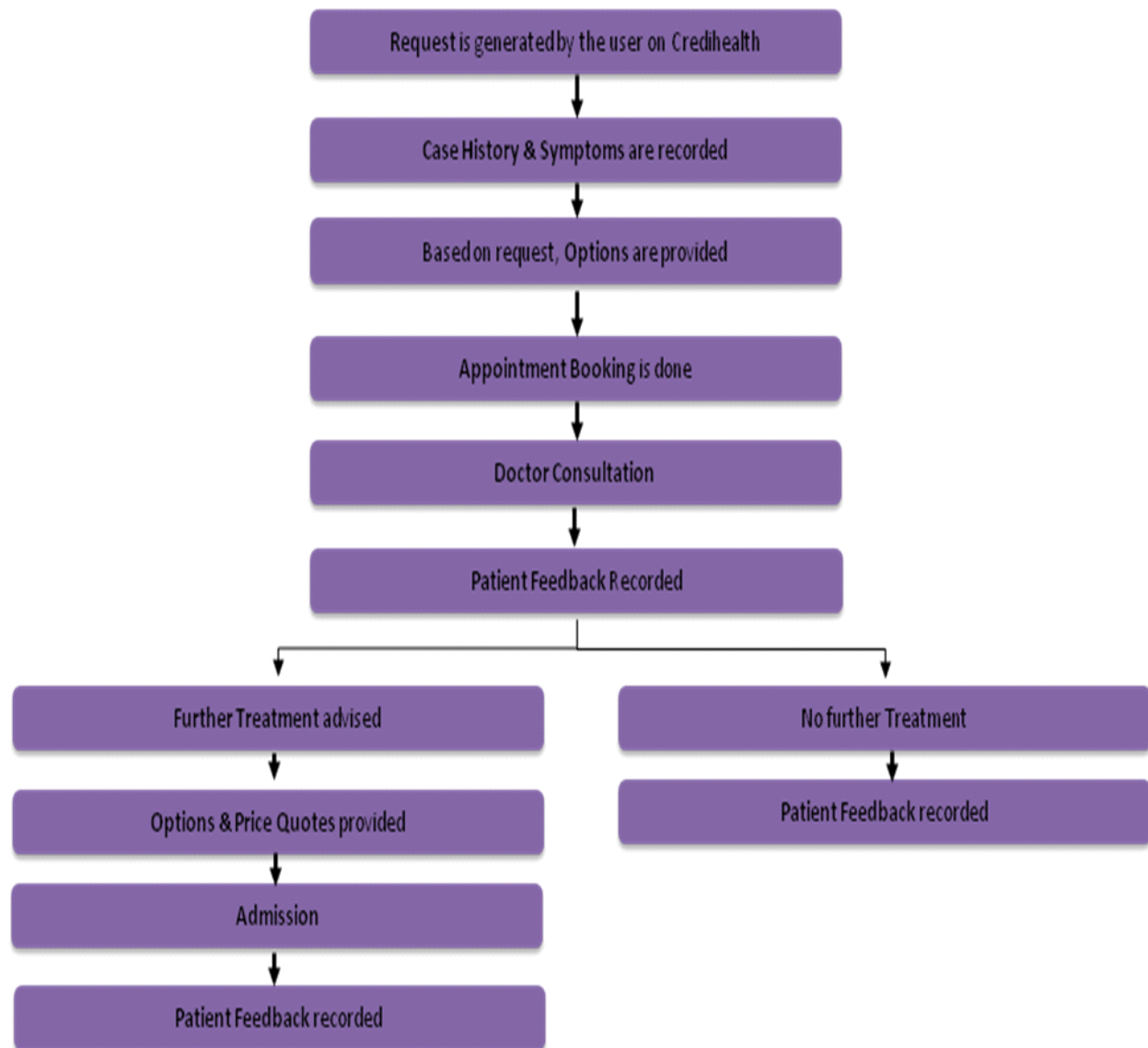
1.2 BACKGROUND OF THE STUDY:

The e-healthcare service refers to the online healthcare marketplace that provides end to end services including information on various medical ailments, doctors, hospitals, treatments and their implications and post treatment care, i.e. medical assistance from a distant reach.

The online services helps people to search for doctors, procedures and hospitals, provide second opinion across major cities in India, book appointments with the doctor of their choice, also help in getting quotes from hospitals for any treatment or surgery. Such platform has an advantage of distant data, that it offers better quality of services to maximum number of people. Due to the intense competition among various healthcare facilities, these e-Healthcare services are getting popular as they provide transparency along with convenience that has wider accessibility.

Thousands of visitors can access these sites or portals at the same time. The e-Healthcare services raise awareness among the population that bridges the gap between the users and the healthcare providing facilities.

1.2.1 Process Flow of Credihealth

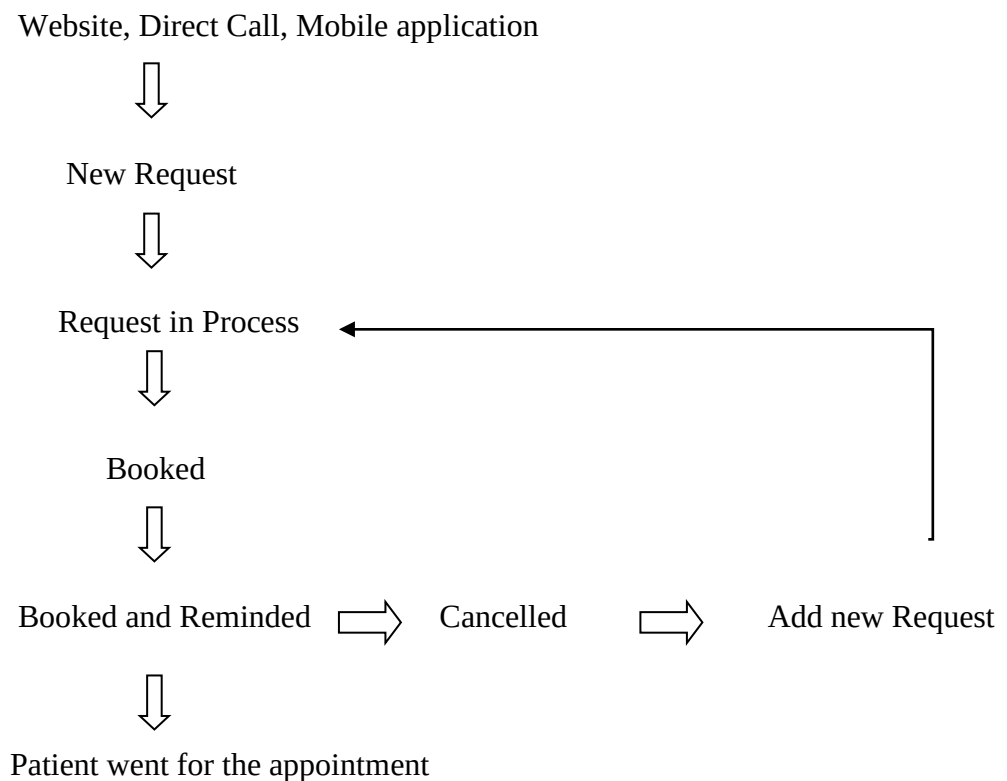


The process flow followed in Credihealth has three major features-

- Discovery & Search - Online: Provide extensive information to help users make an informed decision on their treatment
 - Comprehensive database of Hospitals & Doctors
 - Pre-recorded Doctor interviews, Articles and patient feedback on hospitalization and treatment

- Quality & Trust - The Personal touch:
 - In-house Doctor team provides reliable inputs & clarifications
 - Transparent comparison of procedure pricing across hospitals
- Convenience - Offline:
 - Project manage the entire hospitalization process for the user / patient through to post-op care

Operational Process Flow



Here,

- I) A request can come through various sources- Credihealth Website, Mobile application, Direct Call or various channels- social media campaign leads, Google search
- II) The new request handled by the medical expert is put into process.
- III) If the doctor and the slot is available for the particular date and time, the appointment is booked
- IV) The patient is reminded a day prior to the appointment date through system.

V) After this, the booking can be either- cancelled and booked again or it may be converted.

1.2.2 Conversion Rate

The key challenge for e-Healthcare market is not to get the traffic reaching the site but its retention, engagement and lifetime value. One of the crucial monitor of any service provider is the customer acquisition which can be calculated by the conversion rates. The conversion rate indicates that the provider took some action that pushes the consumer a bit further down the acquisition funnel.

1.3 Review of Literature:

The service industry represents 62% of the world's total GDP and employs 40% of global labor force.¹

The growth in industry comes with intricacy in the sectors with intangible goods and deals with perception of the consumer.

The unique features to these services are:

- Intangibility: services cannot be seen, felt or touched
- Inseparability: Services are produced and consumed simultaneously
- Perishability: Services must be consumed when they are offered and they cannot be stored for future purpose.
- Variability: Quality of service may vary depending upon who provides it also on when, where and how service is rendered.

Thus to be “the-best” out of the enumerable competitors, a niche has to be formed where no other has reached till date. And to overcome the challenges, as in other industries, the service industry needs to innovate and continuously improve its processes

As seen in the aviation industry, the evolutionary amendments in the processes meets the changing requirements related to capacity, environmental effects, consumer contentment, safety and security while meeting current requirement for the economic feasibility of the service providers.

Automation always sounds like a wonderful thing – letting go of unreasonably time-consuming processes and handing supervision to a system that can liberate up your finance department for tasks and projects that are better utilization of its time.²

Staff shortages, continuing cost inflation and service demand have intensified the call for more effective and efficient use of scarce resources through integrated service delivery models³.

Services expresses market sensitivity and responsiveness to changing requirements of the population⁴, assuring the patient receives the “right care at the right place at the right time”⁵. This requires a thorough consideration of the way in which patients move within and between various health and social care providers.⁶

In today's highly competitive business environment, information technology (IT) plays a grave role in sustaining business functions and fulfilling business requirements. Effective and efficient IT management has the potential to renovate business as well as optimistic impact on a company's performance. ⁷.

As business requirements frequently change, the business function expects IT to streamline IT service provision to improve time-to-market responsiveness. Moreover, the business organizations are performing constant IT process re-engineering initiatives to condense complexity and cost while providing high quality of services, control, and availability⁸

According to McKinsey & Company, “validating Lean IT principles can increase application development and maintenance productivity by as much as 40% while enhancing the quality and speed of execution”. ⁹ Among various Lean IT tools, the Value-Stream mapping (VSM) is a supportive tool to recognize waste and improvement areas. VSM is a standardized way of penning down the process steps and flow of work items, and then applying a methodical way to analyze these processes in order to build up an improvement plan.¹⁰⁻¹³

1.4 Rationale:

Five percent of Indian population has a health issue every month. The Indian environment is largely influenced by the private sector as the Government has lack of resources or ability to fulfill its social role to provide quality healthcare to the people of India.

Currently, Healthcare industry is opaque, not easily accessible, out of reach of the common man, and unreliable.

The study was done with the purpose to improve the process flow of the medical assistance provided by Credihealth to the patients and their family in need, by:

1. Working in collaborations with the different teams- Medical Operations, Digital marketing, Product Managing team and Business Development team
2. Empathizing and understanding needs of the patients requiring medical help through human touch
3. Studying the problem areas and encouraging a more holistic approach by recommending the possible solutions

The study was done to map the process flow of e-healthcare service at Credihealth with respect to requirement, of the users, channels through which users reach and operational flow at Credihealth.

1.5 Aim of research:

The overall aim of this study is to streamline the process flow in order to raise the efficiency of the decision-makers, thereby increasing the conversion rate of the credi patients from generating the request for medical assistance to actually consulting the appropriate doctor or hospital. This study aims to have a hold on this technology driven healthcare industry- so that Credihealth outstands its competitors such as Practo, Docsuggest.com, Healthinindia, Healthcaremagic, Doctorscabin etc.

1.6 Research Question:

What are the drop-offs in the process flow leading to low conversion rates of patients reaching to the healthcare facilities through Credihealth?

1.7 Research Objectives:

The study was done to achieve the following objectives:

1. To map the current process flow.
2. To measure the conversion rate for OPD and IPD city wise.
3. To analyze the search attributes city wise.
4. To identify the reasons for Drop-offs.
5. To suggest the value-additions in the process.

1.8 Methodology:

The methodology includes working in collaboration with all the teams and understanding their line of work, the process flow and the problems faced that are anyhow affecting the outcomes. The various dimensions worked upon incorporate the conversion on each step narrowing down the funnel.

It includes five types of status of the request-

- New
- In Process
- Booked
- Converted
- Cancelled

Table 1- The parameters of Methodology

S. No.	Parameters of Methodology	Description
1	Study Type	Descriptive Study
2	Study Area	Six major cities of India- Major Metropolitan Cities- Bangalore, Chennai, Delhi-NCR, Hyderabad, Kolkata and Mumbai and Four Minor Cities- Jaipur, Indore, Pune and Ranchi
3	Study Period	Data Tracking for Three months (February- April 2017)
4	Study Respondents	Visitors on Credihealth Platform through different digital sources
5	Sample Size	Distant online data of approx 25000 people who have visited the different digital sources.
6	Sample Method	Non- probability Convenient Sampling
7	Data Collection Technique	Online Data tracking (Website, Android app, telephonic, Google search, social media campaign leads)
8	Limitation in Collecting Data	- Missed observations- Missed Calls, Unattended calls, Delay in attending calls - Biased respondents

9	Data Analysis	Data analysis done in MS Excel
10	Ethical Consideration	• The data confidentiality will be maintained throughout the study. • The personal details of the employees and patients are kept confidential. • This will be shared for the dissertation purpose only.

1.9 Analysis and Findings:

1.9.1 Analysis

Steps of Conversions in the process:

1. The traffic generated at the Credihealth website is the team effort of the marketing or digital marketing team, through various sources of channels to reach Credihealth.
2. It is supported by the product and IT team. The request can come in any of the three way- appointment requests, call backs or tele-consultation.
3. This reaches the medical experts, who are the direct point of contact with the patients (Credi Consumers). The doctors assist the patient to the appropriate specialist or hospital of choice, which is confirmed by the patient care executives.
4. The same patient is followed up by the medical professionals, the next day of the appointment, which decides if patient requires further line of treatment or not.
5. The discovery team's role begins here to find out the admissions.

The overall analysis is made on the following basis:

- Total No. of Requests generated= approx 25000-30000
- Out of these requests, Sixty seven percent of cases were booked.
- Out of these cases booked, Fifty-one percent of the patients actually consulted.
- Further, out of these OPD consultations, approx Thirteen percent of the patients were admitted for further treatment plan.

Interpretation: The overall conversion rate from requests generated to book an appointment reduces from Sixty-Seven percent to Fifty-one percent for consultations. This further converts merely Thirteen percent of patients to admissions.

Here,

Interpretation:

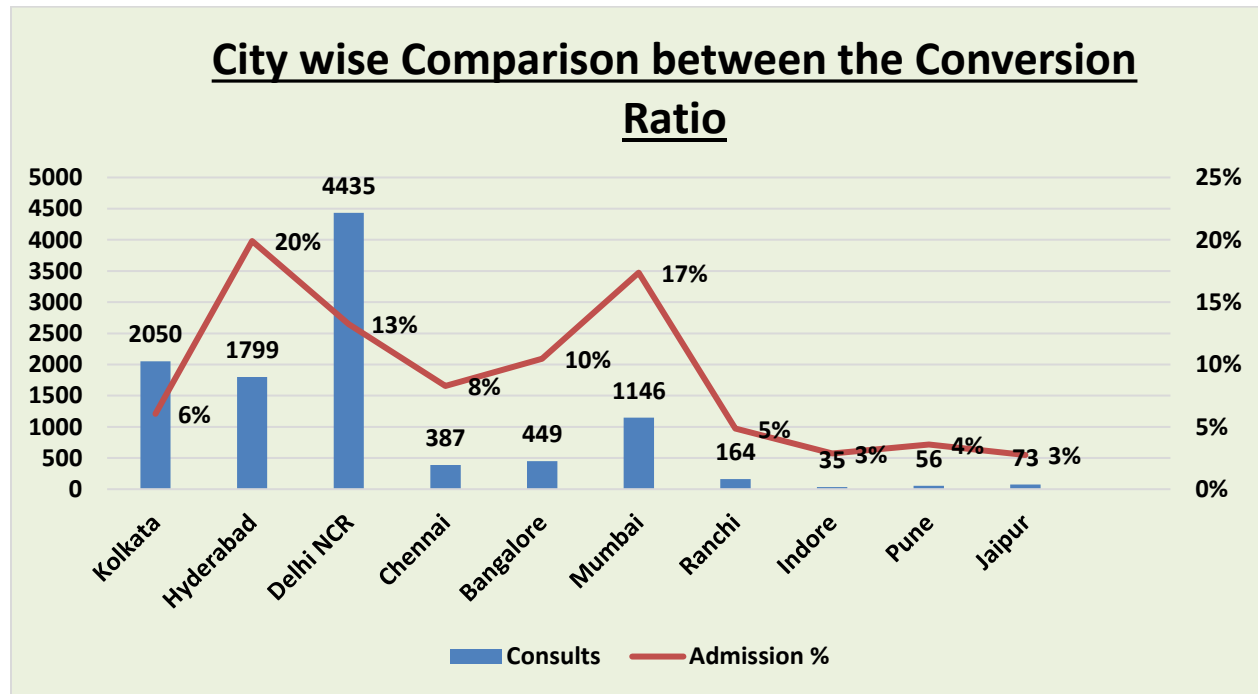
- Booking Percentage = No. of appointments booked / Total No. of requests *100

- Consultation Percentage = No. of Patients Consulted/ Total No. of appointments booked *100
- Admission Percentage = No. of Admissions/ Total No. of Patients consulted *100

Conversion Rate is the change in the status from new request to booking, from booking to consultation (OPD) and from consultation to admissions (IPD).

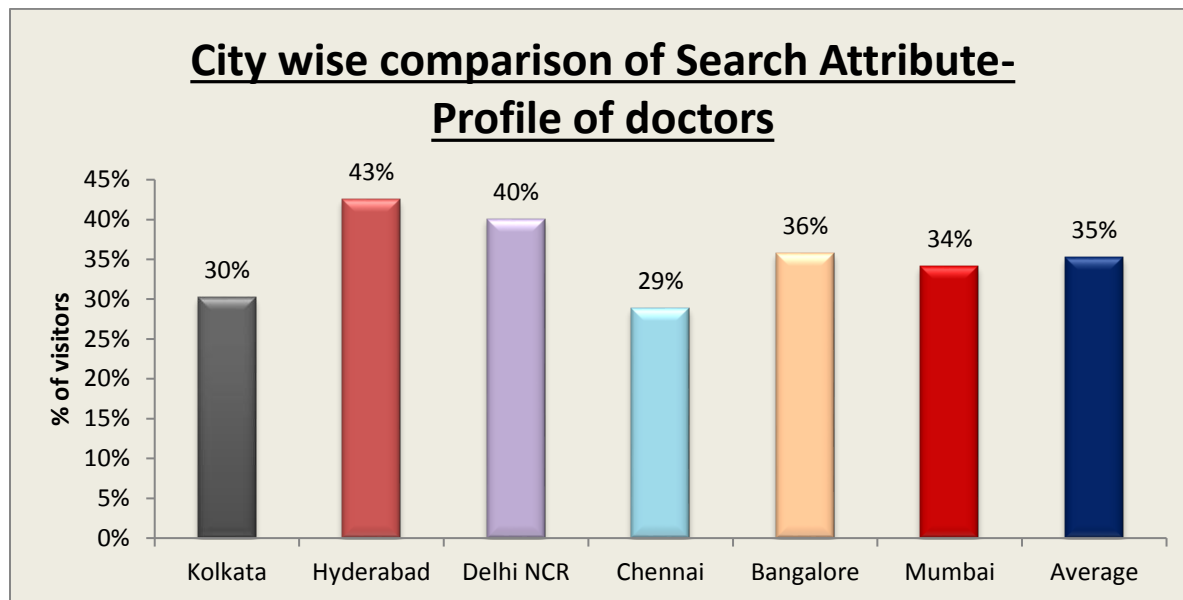
- The study focus on the OPD and IPD conversions.

Fig 1.1 City wise Comparison between the Conversion Ratios



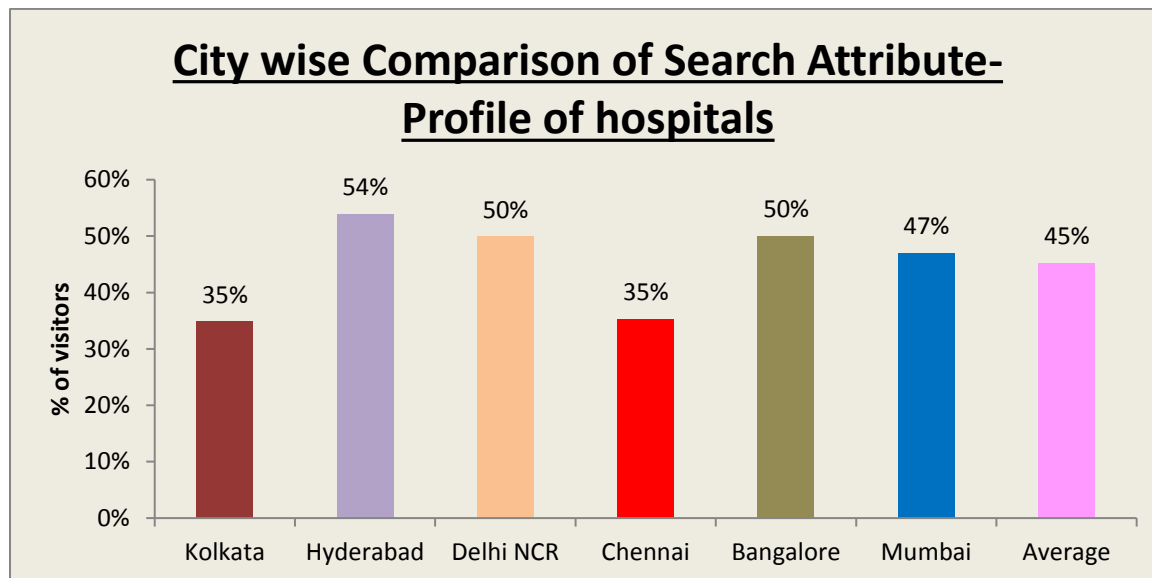
Interpretation: The maximum number of patients requesting the appointments and turn up in reality for the OPD consultation in hospitals partnered in Delhi-NCR. But still the maximum number of IPD conversions (Twenty percent) is observed in Hyderabad.

Fig 1.2- City wise Comparison of Search Attribute- Profile of Doctors



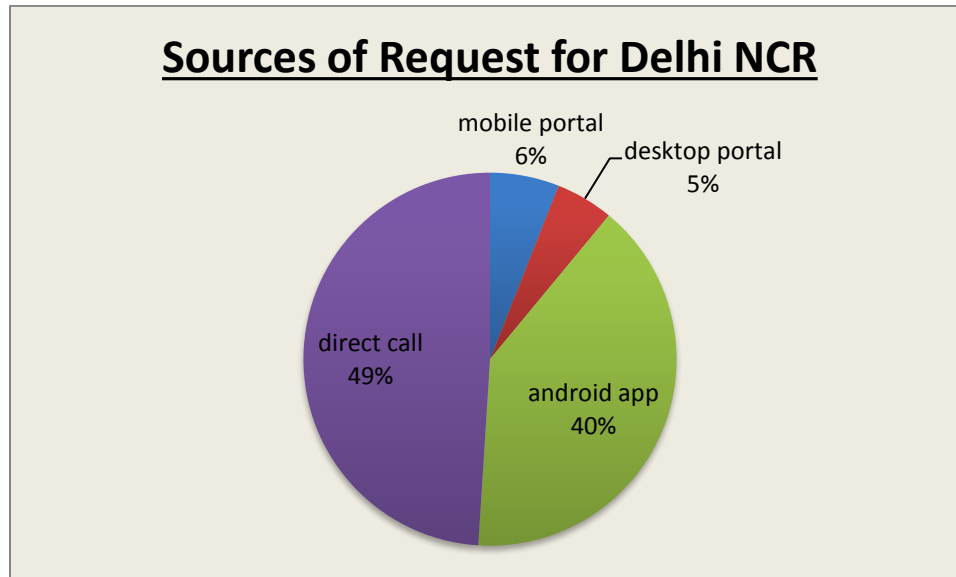
Interpretation: Around Forty-three percent of patients go for the consultation (maximum in Hyderabad) after viewing the profile of the doctors. On an average thirty five percent of the patients first checks the credentials of the doctors and then proceed for consultation.

Fig 1.3- City wise Comparison of Search Attribute- Profile of Hospitals



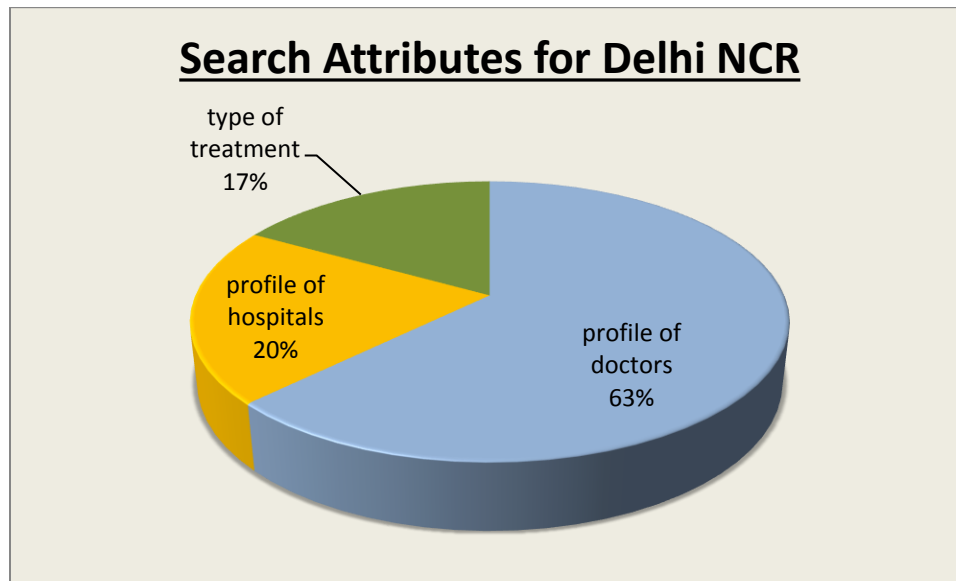
Interpretation: More than fifty percent of the patients in Hyderabad check the profile of the hospitals prior to asking for medical assistance in that hospital. Overall, forty five percent of the patients consult by the brand name of the hospitals.

Fig 1.4- Source Of Requests for Delhi NCR Region



Interpretation: The maximum number of patients (forty-nine percent) in Delhi NCR Region chose to directly call the e-Healthcare service for availing medical assistance, followed by downloading the mobile application (Forty percent).

Fig 1.5 Search Attributes for Delhi-NCR



Interpretation:

According to the analysis, most of the patients (sixty-three percent) prefer to choose treatment after looking the profile of the doctors.

The dimensions of the Fig 1.2-1.5:

Android- The requests coming through the mobile application

Portal- The requests coming from the Credihealth websites

Call- The requests via direct calls

Profile Treatments- The requests generated after searching for the particular disease ailment

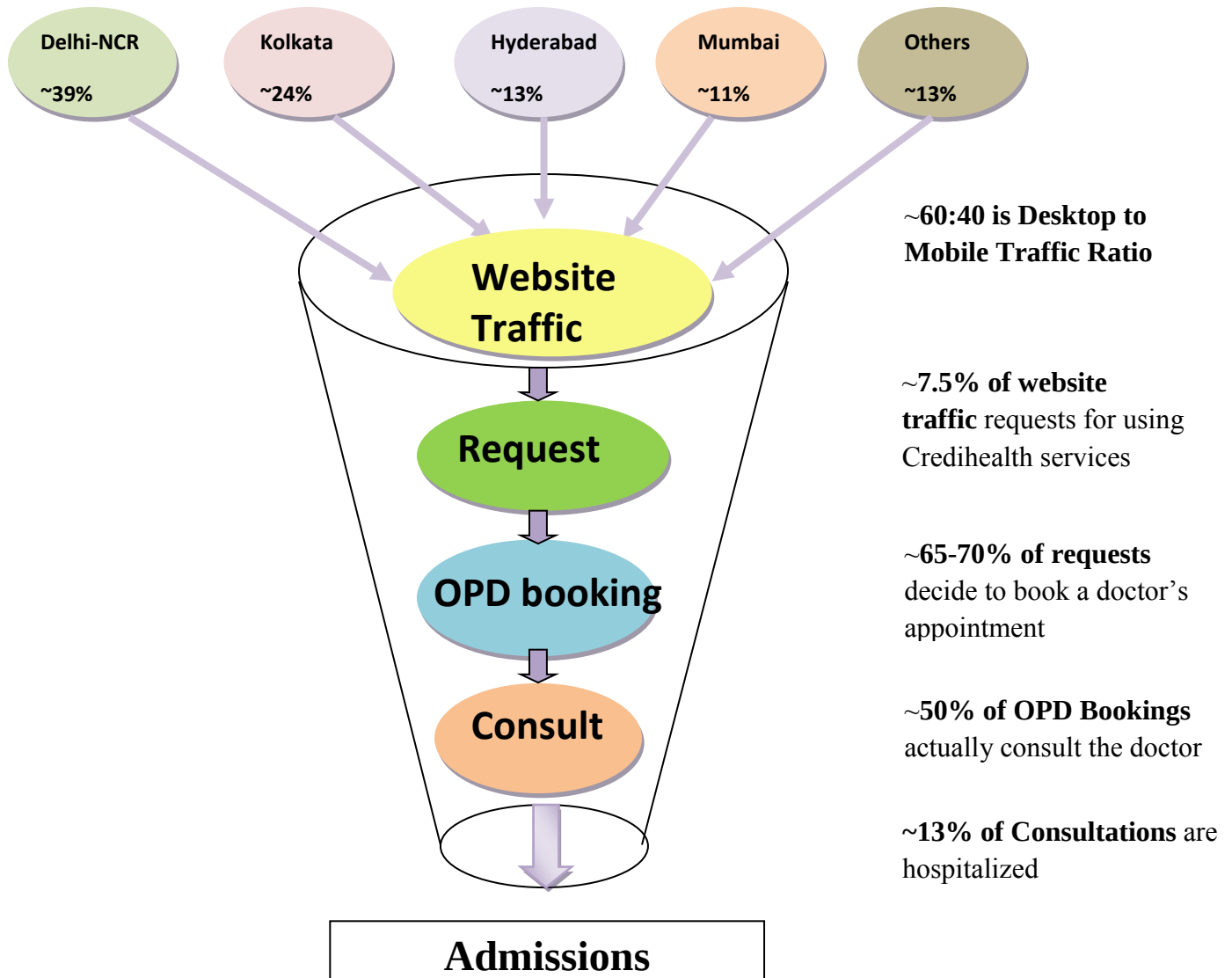
Search Doctors- The requests after searching the particular doctors, either suggested by the friends, family or referred by the doctors.

Profile Hospitals- The requests generated on selecting the particular hospital.

Profile Doctors- The patients are putting requests after looking the profile of the doctors.

Findings:

Customer Acquisition Funnel



The above findings show the conversion rates in the overall process of Credihealth.

1.11 Results:

The study results show that OPD conversion rate is approximately half (51%) of the requests are filtered out of the funnel and merely 13% comes out as admissions.

1.12 Discussion:

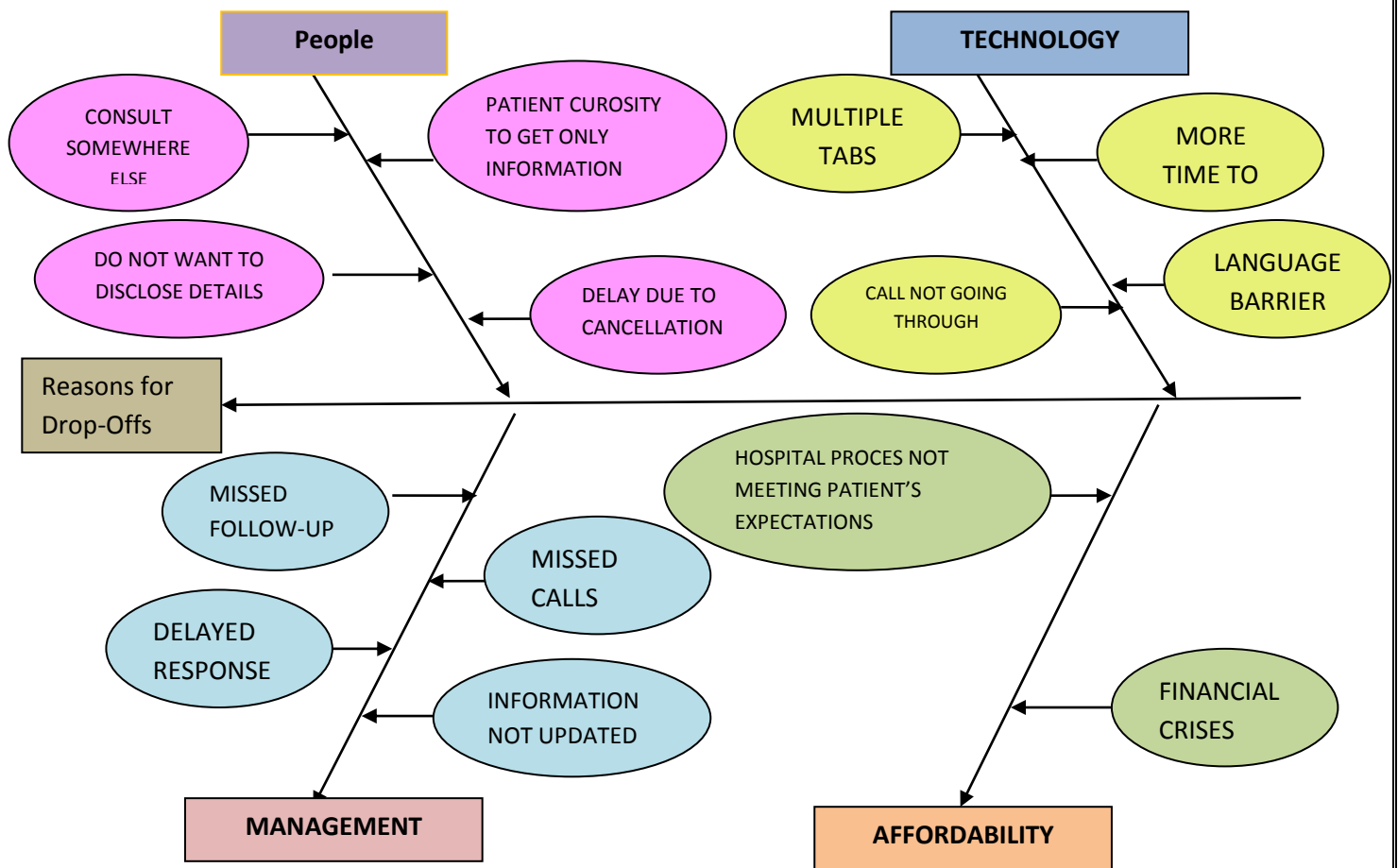
The inefficient process can result in unhappy customers, stressed colleagues, duplication of work, missed deadlines and increased costs too. Therefore, there was a need to map such dysfunctional process and re-structure them:

The reasons for the drop-offs observed were related to:

1. Website User Friendliness- The traffic on the site or mobile app can be missed due to:
 - Site not opening
 - Multiple tabs
 - High loading time
 - Language barriers
2. People (Customers) -
 - Change of mind to consult some other doctor or hospital
 - Individuals have curiosity of checking the site, but do not have any requirement.
 - Not satisfied with services provided, so are lost in that step of the funnel.
3. Management-
 - Delay in attending the cases.
 - Not up-to-date information at back-end, gives wrong information to the patient.
 - Calls not going through the number provided on the site
 - Missed follow-up of the critical cases.
4. Affordability-
 - Financial problem of the patient
 - Mismatch between the hospital prices and patient expectations

It may take the patients to the healthcare facility that has lesser prices. Example:
Government institutions.

The reasons of drop-offs can be explained by Fish-Bone Diagram.



1.13 Recommendations:

1. Admin Queuing System:

The requests should be handled according to the priority and the appointment time required. (e.g.: the Cardiac cases get the high score than the derma case. The surgical case is scored higher than the case requiring medical management. The less the time between the request made and the appointment requested, the more is the score.)

2. Tracking of the missed calls on the systems.

So the effort can be made to track the case and get them go through the channel of credihealth.

3. Use of artificial intelligence to automate the time-consuming and unnecessary process.

(Example- Automation of the message sent to the patient on putting the request that they will be reached soon by a medical professional to guide them, Automation of the country codes of the international patients.)

4. **Separate tabs to track the cases by symptoms or procedures done.**

This will make the process easy to track the cases in follow-up, that which case need to be followed up. This will also allow timely follow-up of the cases requiring tertiary care. (e.g.: A cancer patient needs to be followed not only till its operated but also for chemotherapy or radiotherapy)

5. **Introduction of local languages.** (e.g.: The site and app were earlier only in English language, can introduce languages like Hindi, Bengali, Tamil, Telugu)

6. **Updating all the back-end information.**

This will enable the employees to quote the right information to the patients.

1.14 Conclusion:

The study observations indicate that the e-healthcare services have the potential to match the demand over supply of the healthcare services, as it reduces the hassle and the add-ons in the cost of treatment, by bringing transparency and convenience, but at the same time, it comes with several drop-offs which needs to be addressed to maintain internal collaboration with the external outcomes for a sustainable profitable model.

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