

**DISCHARGE TURNAROUND TIME: KIMS –SUNSHINE PARADISE
HOSPITAL**

Internship report Submitted to



The IIHMR University, Jaipur

for the partial fulfilment for the award of the degree

of Master of Business Administration (MBA)

in

Pharmaceutical Management

by

Smita Srinivas Chitragar

Under the Supervision and Guidance of

Dr. Sudhinder Singh Chowhan

Associate Professor

2023

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DECLARATION BY STUDENT

I hereby declare that this internship titled “Discharge Turnaround Time: KIMS - Sunshine Paradise Hospital” 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 Information derived from the published or unpublished work of others has been duly acknowledged in the text.

(Signature)

Smita Srinivas Chitrakar

Date:

CERTIFICATE

This is to certify that Smita Srinivas Chitrakar in partial fulfilment of the requirements for the award of the degree of MBA (Pharmaceutical Management) from the IIHMR University, Jaipur has successfully completed her internship at KIMS Hospital, Secunderabad during February 27- May 26, 2023.

Place:

Preceptor/Head of the Organization

Date:

Name of the organization

CERTIFICATE

This is to certify that internship titled “Discharge Turnaround Time: KIMS - Sunshine Paradise Hospital” is a record of the research work undertaken by Smita Srinivas Chitrakar in partial fulfillment of the requirements for the award of the degree of MBA (Pharmaceutical Management) from the IIHMR University, Jaipur under my guidance and supervision and her approach to the research study has been sincere, scientific, and analytical.

Faculty Guide

IIHMR University, Jaipur

Date:

School Dean

IIHMR University, Jaipur

Date:

Acknowledgement

At the outset of my project report, I'd want to express my sincere gratitude to all the individuals who have assisted me with this project report. I would not have made any progress on the assignment if it hadn't been for their strong leadership, participation, and consolation.

I am inexpressibly obliged to Mr. Saurabh Kumar, Associate Professor and Dean SPM, IIHMR University for his upright direction and support to finish this report. It is my radiant sentiment to place on record my best regards, deepest sense of gratitude to Mr. Vinod Tejawani, Dean- Placements & Alumni Relations IIHMR university and Dr. Sudhinder Singh Chowhan, Associate Professor, my Mentor at IIHMR University.

I would also like to express my sincere gratitude to hospital mentors, Miss. Sravanthi Gampa, Mr. Krishnamacharyulu Burra, Mr. Prabhuniteja Gangapatnams, Dr. Ayushi Umesh Devi, Mr. Ashish Kumar Chintala for your support and cooperation in facilitating the project.

Special thanks to Renuka Radhakrishnan ma'am for your constant support. Your assistance and input were invaluable in helping me to achieve the objectives of my report.

Finally, I'd like to express my gratitude to every companion who directly or indirectly assisted me in completing this assignment. Any omission from this brief affirmation does not imply a lack of gratitude.

Thank You.

Sincerely,

Smita Srinivas Chitrakar

Roll no. -0348

Chapter 1

Introduction



KIMS (Krishna Institute of Medical Sciences) Hospital is one of the leading healthcare providers in India, known for its high-quality medical services and patient-centric approach. The hospital was established in 2000 in Hyderabad, Telangana, and has since expanded to multiple locations across the country, including in states such as Andhra Pradesh, Maharashtra, Karnataka, and Tamil Nadu.

The hospital at Secunderabad is our flagship multispecialty hospital which became operational in 2004. This hospital has a bed capacity of 1,000 beds, including 885 operational beds, as of September 30, 2017. This hospital is strategically located in an approximately five-acre area and is easily accessible from within the city.

The hospital at Secunderabad is accredited by the NABH and ISO 9001:2015 certification and has also been accredited by the NABL. It has received an award from the AHPI for nursing excellence in 2015 and was ranked the number one multi-specialty hospital in Hyderabad by the Times of India Survey in 2015. In 2017, it was awarded the best hospital of the year in the multispecialty hospital category in Hyderabad by Times Healthcare Achievers Awards and in 2016 received the Pharmacie De Qualite certification from Bureau Veritas. Further, it is the only hospital in Andhra Pradesh and Telangana to have been Green OT certified in 2016. Hospital at Secunderabad was ranked as the second-best specialty hospital for 2016 in the Week Magazine's November issue. It is also the laureate of the Asia Pacific Society of Infection Control CSSD Centre of Excellence Silver Award 2015-2016.

The hospital is equipped with modern medical technology and state-of-the-art facilities and offers a wide range of medical services across various specialties, including cardiology, neurology, orthopaedics, oncology, gastroenterology, nephrology, and more. The hospital is committed to providing comprehensive medical care to patients, and its team of medical professionals includes highly skilled and experienced doctors, nurses, and support staff.

KIMS Hospital's mission is to provide compassionate and personalized care to patients from all walks of life, and the hospital has built a reputation for excellence in healthcare delivery. The hospital's core values include quality, integrity, teamwork, and innovation, and these values are reflected in every aspect of the hospital's operations.



Delivering Excellence.

The KIMS Way.

- 4000+ Beds
- 1700+ Doctors
- 4000+ Nurses
- 2100+ Paramedics
- 6300+ Admin

One of the key strengths of KIMS Hospital is its focus on medical technology and innovation. The hospital is equipped with advanced medical equipment and technology, and regularly invests in the latest medical advancements to provide the best possible healthcare services to patients. KIMS Hospital's commitment to innovation has led to the introduction of new medical procedures and treatments, and the hospital is recognized as a leader in the field of medical technology and innovation.

Another key strength of KIMS Hospital is its team of medical professionals. The hospital's doctors, nurses, and support staff are highly skilled and experienced, and are committed to providing the best possible care to patients. The hospital's medical team is supported by a range of specialized services, including emergency care, intensive care, radiology, pathology, and more.

KIMS Hospital's commitment to patient-centric care is reflected in its approach to healthcare delivery. The hospital's medical professionals work closely with patients to understand their medical needs and concerns and develop personalized treatment plans that are tailored to each patient's unique needs. The hospital also places a strong emphasis on patient safety and quality of care and has implemented rigorous quality control measures to ensure that all medical services meet the highest standards of safety and quality.

KIMS Hospital's commitment to excellence in healthcare delivery has been recognized by several national and international accrediting agencies. The hospital is accredited by the National Accreditation Board for Hospitals and Healthcare Providers (NABH), which is the highest accreditation standard for healthcare providers in India. The hospital is also accredited by the Joint Commission International (JCI), which is a global accreditation standard for healthcare providers.

In addition to its core medical services, KIMS Hospital also provides a range of community outreach programs and initiatives. The hospital regularly organizes health camps and awareness programs to promote healthy living and prevent disease. The hospital also provides financial assistance to patients who are unable to afford medical treatment and works closely with local NGOs and charities to provide support to vulnerable populations.

Overall, KIMS Hospital is a leading healthcare provider in India, known for its commitment to excellence in healthcare delivery, patient-centric approach, and focus on medical technology and innovation. The hospital's mission is to provide compassionate and personalized care to patients from all walks of life, and its core values of quality, integrity, teamwork, and innovation are reflected in every aspect of its operations.

Hospital Network:



India's First Fully Automated Joint Replacement Surgery Robot At KIMS Hospitals, Kondapur

Incredible
Accuracy

Extraordinary
flexibility

Unimaginable
Safety

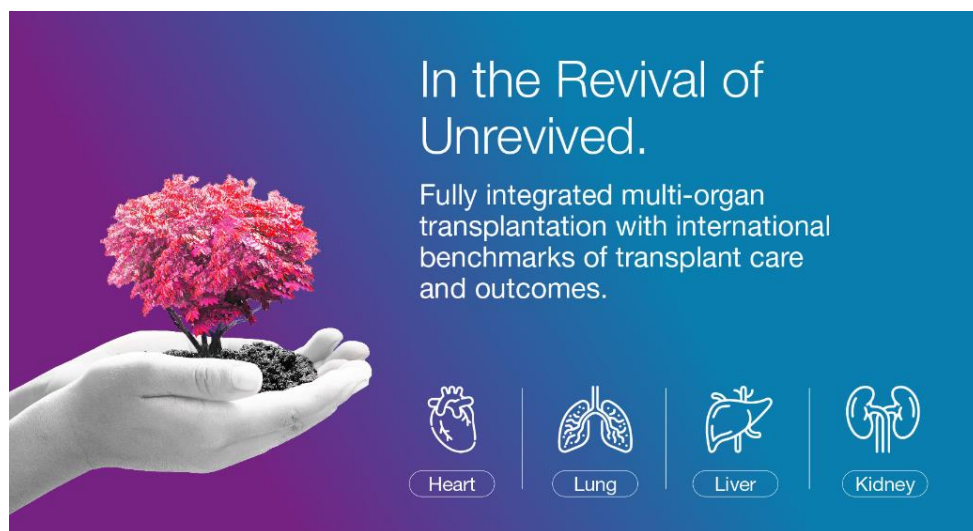
Discharge TAT (Turnaround Time)

An important aspect that affects how well a hospital provides healthcare is the discharge TAT (Turnaround Time). It describes how long it takes for a patient to leave the hospital after their medical care is finished. A crucial indicator of the hospital's effectiveness and patients' satisfaction is the discharge TAT.

The hospital may become overcrowded, patient care may be delayed, and healthcare expenses may rise because of a longer Discharge TAT. On the other hand, a shorter Discharge TAT can boost patient satisfaction, expand the number of available beds, and boost hospital productivity.

In this situation, hospitals are continuously working to reduce their Discharge TAT by identifying and resolving the causes of lengthier TATs. Longer Discharge TATs can be caused by a variety of elements, including missing medical records, backlogged paperwork, and insufficient patient education.

The purpose of this overview is to investigate the significance of Discharge TAT in a hospital and its influencing elements. An overview of the hospital's Discharge TAT and its significance for the provision of healthcare services will be given in this report. Also, it will go over ways to shorten hospital discharge times and factors that influence this.



Chapter 2

Objectives of Internship

An overall introduction to every department such as Bed board management, Financial Counselling, I-Porters, Corporate discharges along with investigation of the reasons that lead to longer discharge TATs and the identification of measures to enhance the discharge process and shorten discharge TATs may be the main goals of a study on discharge TAT in hospitals. The research queries can be:

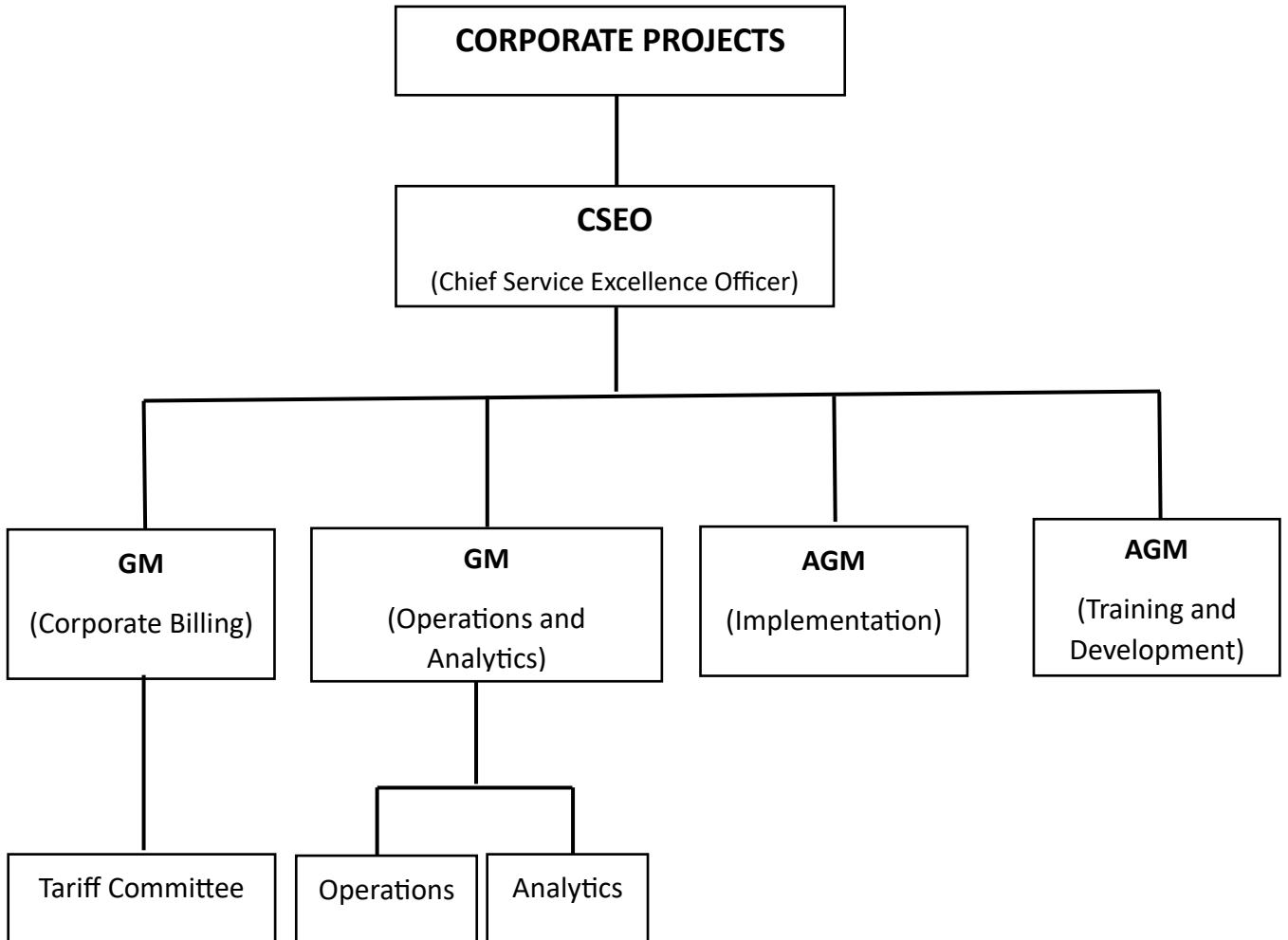
- What are the hospital discharge times-to-discharge (TATs) factors?
- What effects do these variables have on hospital performance and patient outcomes?
- What are some tactics that might be used to streamline the discharge procedure and shorten the discharge TATs?
- How well do these techniques function in terms of lowering Discharge TATs and enhancing patient outcomes and hospital efficiency?
- What obstacles stand in the way of implementing these tactics at the hospital, and how may they be removed?

With the purpose of gathering information from patients, healthcare professionals, and hospital personnel, the report may combine qualitative and quantitative techniques, such as surveys, interviews, and observations. To spot patterns and trends in discharge TATs as well as elements that contribute to longer TATs, the study may additionally incorporate an analysis of patient records and hospital data from HIMS/MIS/EHR/REMEDINET software.

To improve patient outcomes and hospital performance, the report will aim to provide hospitals with suggestions that are based on solid data.

Chapter 3

Organizational Profile



Various operational departments:

POLICIES:

Admission Policy:

- There are 3 types of mode of payments:
 - Cash (Self- paid)
 - Insurance
 - Corporate
- 2 types of patient management:
 - Medical Management- Planned: 50% of the estimate is collected / Emergency: minimum 30% of counselled estimate to be collected.
 - Surgical Management- Planned/Emergency

Bed Management Policy:

- Room Categories:
 - Day Care
 - General
 - Twin sharing
 - Single
 - Deluxe
 - Suite
 - Presidential suite
 - ICU (ICCU/CTICU/MICU/SICU/PICU/NICU/Pre-OP/Post OP/Pre Angio/Post Angio)
- Order of upgrade preference is:
 - Cash
 - Insurance
 - Corporate
- Order of downgrade preference is:
 - Corporate
 - Insurance
 - Cash
- Preference for admission/ transfers:
 - Medical Condition –Unstable patients
 - Senior Doctor's requests irrespective of patient type
 - Surgical Management –cash
 - Medical Management –Cash
 - Surgical Management –Insurance
 - Medical Management –Insurance
 - Surgical Management –Corporate
 - Medical Management –Corporate

- If ICUs are full, request consultants to shift non-critical patient to wards to accommodate the critical patient irrespective of payer type.

Insurance Policy:

- **Package types**
 - Hospital Packages: All private insurance companies allow billing to be done according to the packages defined by the hospital.
 - GIPSA packages: All public sector insurance companies (National Insurance, New India Assurance, United India, Oriental Insurance) have pre-defined packages designed by them (known as General Insurance Public Sector Association –GIPSA). Bills must be mandatorily done as defined by GIPSA packages.
- **Room Eligibility**
 - Room eligibility per day is 1% of sum insured for all wards (Gen, twin, single, etc) & 2% of sum insured for all ICUs. For Insurance policies where eligibility varies from that mentioned above, the billing executive shall confirm with patient / patient attendant to confirm the room eligibility. This is followed by obtaining an undertaking from patient /patient attendant on the same.

OP Billing Policy:

Registration fee is valid for lifetime from date of registration. UMR No is generated at the time of registration & is a unique identifier for the patient for all subsequent visits. UMR Number is valid lifetime.

Registration shall be done on a doctor's name.

OP consultation fee is charged for consulting with the doctor through appointment, walk in, cross referral.

Refund shall be processed for the patient & a refund voucher generated and filed with the cancelled consultation bill copy (secretary / doctor / Op manager sign).

OP Billing includes billing investigations / procedures/ services in lab, radiology, other departments. OP bill shall be verified against doctor prescription.

IP Billing Policy:

Cash patients:

Billing department is responsible for updating all charges of the patient and attendant (defined charges – F&B, additional room charges, etc). The department also generates out-standing due statement for due mobilizations, provides financial clearance for surgery / procedure / major investigations, and checks out the patient after final payment at time of discharge.

BILLING HEADS:

Sr.No.	Component	Brief
1	Bed Category	Bed type: General Ward Twin Sharing Single Deluxe Suite ICU (MICU / SICU / NICU / PICU / ICCU / Pre-Op / Post – Op) Emergency Beds

2	Professional Charges	Surgeon, Consultant, Asst Surgeon, Anaesthetist, Asst Anaesthetist, Intensivist, Asst Intensivist
3	Ward Charges	Room Charges, ICU charges, Intensivist charges
4	Pharmacy Charges	OT Pharmacy, IP Pharmacy, Cath lab Pharmacy, Pharmacy Returns
5	Investigation Charges	Laboratory test, Radiology investigations, Departmental investigation, Bed side investigation
6	Procedure Charges	Department Procedure Bed side procedure
7	Service Charges	Drug Administration Charges
8	OT Charges	Theatre Charges, Equipment Charges-OT, OT Instruments, Disinfection Charges Physiotherapy charges F&B Charges Dietician Charges Medical Record Charges MLC (Medico Legal Charges) Charges Transportation Charges Blood Bank Charges Anaesthesia Charges Emergency Charges Hospital Services
9	Payer Types	Cash – Patients who pay bill amount by themselves (as per either hospital tariff / corporate tariff) Insurance Corporate
10	Tariff for these billing areas is dependent on the bed types	Cross Consultation Visit Charges Theatre Charges Investigation Charges Procedure charges Physiotherapy charges Bed Charges Packages Blood composition/ services
11	Pharmacy charges	IP Pharmacy: Auto billed to the patient when IP Pharmacist saves (initial / modified) indent. raised by Nurse. All MRP items are charged at MRP. OT Pharmacy: Auto billed when OT Pharmacist accepts the indent raised by OT Nurse and OT Technician after pre-booking the surgery by OT Coordinator. Cath Lab: Cath Pharmacy: Same as OT Pharmacy.

AUDIT:

All bills (final approximate bills) prepared by Billing team shall be audited by Internal Audit department. Any discrepancies found will be notified to billing team, who shall make necessary corrections.

Once audit clearance is received, final approximate bill is closed & handed over to patient to clear dues.

MATERNITY:

A baby born in the hospital and staying in the same room as the mother will be treated as a new patient (Ip No generated & case sheet opened). No room charges will be levied. Only consultant visits, Investigations, pharmacy & equipment will be charged as per services availed. MRD charges will be posted as a discount.

PACKAGES:

Packages shall be defined, where applicable. Packages may have defined inclusions and exclusions, limits for pharmacy, investigations, room stay, professional fee, OT charges, etc., depending on the type of package. Limits can be fixed either for quantity, value or both. Packages can be prepared for all payer types.

Financial Counselling & Admissions

Objectives of FC Department / function:

- Provide financial estimates to patients who are advised admission by a consultant. This includes:
- Both medical and surgical management
- Self-paid (cash), Insurance, Corporate and Government Schemes
- Emergency and planned admissions.

Re-counselling patients in the event of:

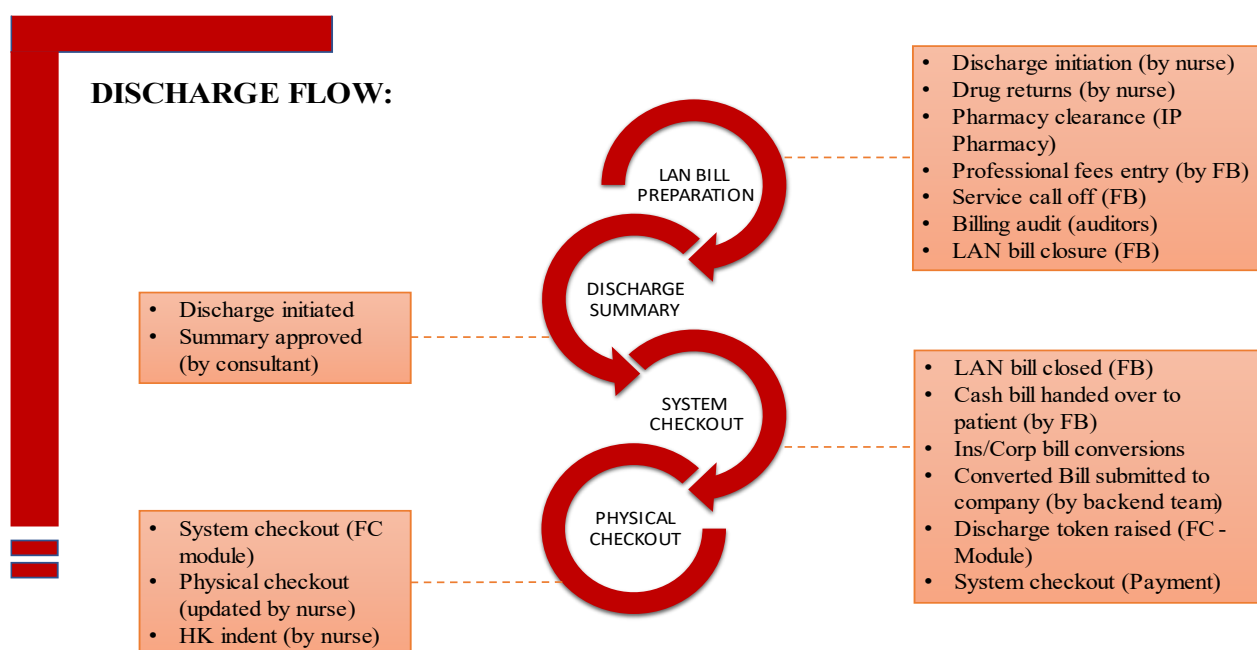
- Change in plan of care.
- Extended length of stay
- Change in room category etc.
- Ensure that estimates provided do not vary more than 10% from the actual bill. (This shall be a Key Performance Indicator).
- Explain bed / room categories and allot bed / room for admission.
- Collect deposit amount for self-paid (cash) patients, as per policy.
- Ensure patient is escorted to the allotted bed and handed over to Nurse on duty.

Process Brief

The Admissions office / desk is responsible for:

- Financial counselling
- Issue of estimates
- Room allotment
- Collection of deposit
- Wheeling patient to bed
- Handover to nurse
- Admissions Cancellations

Discharge Process Manual



Objectives of the department / function:

- Initiate & follow up with discharge process after doctor's advice. This includes:
 - Both medical and surgical management
 - Self-paid (cash), Insurance, Corporate and Government Schemes (Arogya Shree) where applicable
 - Planned, Unplanned & LAMA Discharges.
- Ensure that the discharge process is completed within the set benchmark.
- Ensure that the final bill is cleared, and patient is given checkout
- Ensure that the Discharge Summary is ready.

Discharge Notification to team

- Discharge process counselling to patient
- Pharmacy returns
- Discharge Medication indents (where applicable)
- Investigation reports printing
- Discharge summary printing
- In-Patient bill readying
- Clearance from OT & IP Pharmacy (where applicable)
- Clearance from blood bank (where applicable)
- Clearance from F&B
- Clearance from Cath lab (where applicable) ☐ Bill clearance by patient Issue Check out slip.
- Counselling on discharge summary
- Patient checkout
- Room readiness for next patient.
- Discharge cancellation
- Indent cancellation

Insurance Process Manual

Objective:

The objective of this manual is to detail the procedures on Insurance Pre Auth, Interim Enhancement, Final Approval, Bill Submission, and Realization & Reconciliation.

Objectives of the department / function:

- Processing the preauthorization of the insurance patient & communicate the approval terms the patient.
- Daily monitoring of bill amount and processing interim enhancements when bill amount exceeds initial submitted amount.
- Converting open bills into insurance package bills.
- Processing final approval of the insurance patient and communicating the approved amount, difference amount, NME & co-payment to the patient.
- Collection of payment & providing final bill to the patient
- Preparation & Submission of Insurance Docket to the Insurance company
- Responding to all queries raised by TPAs quickly.

Process Brief:

- The Insurance Desk is responsible for:
- Pre-Authorization
- Interim Enhancement
- Final Approval
- Query Management
- Counselling & Payment
- Bill Submission

Radiology Manual:

The objective of this manual is to detail the operational procedures in Radiology.

Objectives of the department / function:

- Scheduling Appointments for OP & IP.
- Checking patients in & Out
- Carrying out Investigation with applicable prerequisites
- Reporting the findings & dispatching films & reports
- Communicating critical findings to doctors/patients

Process Brief

- Billing of the investigation (IP/OP)
- Scheduling of the investigation by radiology secretary
- Investigation process
- Reporting of results

Manpower Involved in Radiology:

- Floor Biller
- Nurse
- Radiology Secretary
- Reports Dispatch Executive
- Radiology Technician
- Radiology Nurse
- Radiologists
- Radiology Typist
- Housekeeping

IP Daily Activities

The objective of this manual is to detail the procedures on Daily activities of In- patient services.

Objectives of the department / function:

- Checking In Patient to their respective beds / rooms after admission
- Counselling patient on room stay.
- Obtaining initial assessment of patient by Nurse.
- Initiating patient's treatment by Nurse as per consultant's orders
- Monitoring patient's treatment as per consultant's orders on regular basis by Nurse & DMO
- Carry out patient's investigations by Nurse as per the consultant's orders.
- Carry out patient's bedside services by Nurse / department executive as per the consultant's orders.

- Carry out patient's department procedures are carried out by Nurse as per the consultant's orders. Ascertain patient receives his diet as per the dietician's orders based on his medical condition and nutritional values.
- Ascertain patient's transfers to respective wards / department are done as per the medical condition / requirement.
- Ascertain patient receives blood / blood product as per the consultant's orders if required in time. Ascertain patient receives any cross consultations as per the primary consultant's orders in time.

Process Brief:

In-patient daily activities involve all events of the patient after their admission till the patient is ready for discharge as advised by the treating consultant. These activities include:

Patient room check in.

- Orientation of room amenities by Relationship Manager.
- DMO visit.
- Consultant's visit
- Nurse orientation on bed usage and safety
- Dietician visit

Laboratory tests

- Indents & Reports

Radiology Tests

- Indents & Reports

Pharmacy

- Indents & Returns

Ward Services

- Bedside services / equipment usage
- Cross consultations
- Physiotherapy Sessions

Department Investigations / procedures

- Indents & Reports

Chapter 4

Services Provided by Organization

KIMS

INSTITUTES:

KIMS provide a full range of cutting-edge techniques and procedures across all over the institutes.

	
Cardiac Sciences	Dental Science
	
Gastroenterology and Hepatology	Heart and Lung Transplantation
	
Neurosciences	Oncological Sciences
	
Organ Transplantation	Orthopaedic Sciences
	
Paediatrics	Renal Sciences
	
Reproductive Sciences	Robotic Sciences

Specialities:

			
Accident	Andrology and Infertility Centre	Arthroscopy Centre	Alzheimer's Centre
			
Anaesthesiology	Bariatric Surgery	Biochemistry	Bone Marrow Transplantation Centre
			
Cancer Rehabilitation	Bone and Joint Centre	Breast Centre	Cardiac Arrhythmia Centre
			
Cardiac Diagnosis Centre	Dentist	Diabetology	Dialysis centre
			
Diagnostics and Imaging	Endocrinology	Emergency Medicine	Epilepsy Centre
			
Fertility Centre	Heart Transplant	Infectious Diseases	Kidney Health Centre
			
Laparoscopic and Robotic Surgery	Liver Transplantation Centre	Medical Oncology	Neonatology
			
Neuro ICU	Nephrology	Neurology	Neurosurgery
			
Oncology Robotic Centre	Orthopaedics	Paediatrics	Radiology and Imageology
			
Spine centre	Transfusion Medicine	Urogynaecology	Vascular and Endovascular Surgery
			
Women Oncology	Women Orthopaedics	Wellness Clinic	Women Cardiology Care

Chapter 5

Key Activities/ Projects Undertaken Other than Dissertation.

iPorters

- **Transportation:** iPorters can transport various items within the hospital, such as medication, lab samples, documents, and supplies. They can navigate through corridors, elevators, and different floors autonomously or with minimal human guidance.
- **Delivery of equipment:** iPorters can deliver medical equipment, such as portable ultrasound machines, EKG monitors, or mobile X-ray units, to different departments or patient rooms as needed. This helps save time for healthcare staff and ensures equipment availability when required.
- **Patient transportation:** In some cases, iPorters may be equipped with specially designed platforms or stretchers to transport non-ambulatory patients within the hospital. This can be particularly helpful for transferring patients between departments or from the emergency room to other units.
- **Assistance with wayfinding:** iPorters can be equipped with interactive touchscreens or voice-enabled interfaces to provide directions and guidance to visitors, patients, or staff members. They can help navigate the hospital premises, locate specific departments, or provide general information about the facility.

Roles and responsibilities:

iPorters play several roles in hospitals to improve efficiency, streamline operations, and enhance patient care. Here are some key roles of iPorters:

- **Logistics support:** iPorters assist in the logistical aspects of hospital operations. They can transport medical supplies, equipment, medications, and documents between different areas of the hospital, ensuring timely delivery and reducing the need for manual handling by healthcare staff. This improves overall efficiency and allows staff to focus on more critical tasks.
- **Patient support:** iPorters can provide support to patients by delivering meals, snacks, or medication to their rooms. This helps ensure that patients receive their required nourishment and medications on time. iPorters can also transport patient belongings or assist with transferring non-ambulatory patients within the hospital, reducing the strain on nursing staff and improving patient comfort.

- Wayfinding and information provision: iPorters can guide patients, visitors, and staff members to their intended destinations within the hospital. Equipped with interactive touchscreens or voice-enabled interfaces, they provide directions, answer frequently asked questions, and offer general information about the facility. This enhances the overall experience and reduces the confusion associated with navigating a large hospital.
- Collaboration with healthcare staff: iPorters work in collaboration with healthcare professionals to support their work. They can be programmed to notify the appropriate staff members when a task is completed, when supplies need to be restocked, or when there are urgent requests. This enables seamless communication and coordination between the iPorters and the hospital staff.
- Enhanced infection control: By reducing the need for human intervention in certain tasks, iPorters can help minimize the risk of spreading infections within the hospital. They can be programmed to follow strict cleaning and disinfection protocols, ensuring that they maintain high standards of cleanliness while performing their duties.
- Overall, iPorters play a vital role in hospitals by automating routine tasks, improving efficiency, and freeing up healthcare staff to focus on delivering high-quality patient care. They contribute to a more streamlined and productive hospital environment.

Bed-Board management

- Bed board management in hospitals refers to the process of effectively managing and optimizing the allocation and utilization of hospital beds. It involves tracking the availability, occupancy, and status of beds, as well as coordinating patient admissions, transfers, and discharges. Here are some key aspects of bed board management:
- Bed tracking: A bed board system or software is used to track the status of each hospital bed in real-time. This includes information such as bed availability, occupancy, cleanliness, and maintenance status. The bed board provides a visual representation of the hospital's bed capacity and helps staff make informed decisions regarding bed assignments.
- Admissions and transfers: Bed board management involves coordinating patient admissions and transfers based on bed availability and clinical needs. When a patient needs to be admitted, the bed board system can identify suitable available beds based on factors like specialty requirements, isolation needs, and proximity to certain facilities or services. It ensures efficient and timely placement of patients in appropriate beds.

- Discharge planning: Effective bed board management involves proactive discharge planning to optimize bed turnover. Hospital staff work closely with the care team to anticipate patient discharges and plan for subsequent admissions. By streamlining the discharge process and facilitating timely patient discharges, the bed board system helps maximize bed utilization and minimize delays in patient flow.
- Capacity management: The bed board system plays a crucial role in capacity management by providing an overview of bed availability and occupancy across different units and departments. This information helps hospital administrators and managers make informed decisions regarding resource allocation, staffing, and patient flow. It enables them to identify bottlenecks, manage patient demand, and optimize bed utilization to enhance operational efficiency.
- Communication and coordination: The bed board system facilitates communication and coordination between various hospital departments involved in bed management. It enables staff from different units, such as nursing, emergency department, operating rooms, and intensive care units, to view and update bed statuses in real-time. This ensures seamless collaboration and efficient utilization of resources.
- Reporting and analytics: Bed board management systems generate reports and analytics on bed occupancy rates, patient flow, average length of stay, and other relevant metrics. These insights help identify trends, monitor performance, and make data-driven decisions to improve bed management processes. It enables hospitals to identify areas for improvement, optimize resource allocation, and enhance patient flow and satisfaction.
- Effective bed board management is essential for hospitals to ensure efficient use of bed capacity, streamline patient flow, reduce wait times, and enhance overall operational efficiency. By implementing robust bed board systems and processes, hospitals can effectively manage their bed inventory and provide timely and appropriate care to patients.

Financial Counselling

Objectives of FC Department / function:

- Provide financial estimates to patients who are advised admission by a consultant. This includes:
 - Both medical and surgical management
 - Self-paid (cash), Insurance, Corporate and Government Schemes
 - Emergency and planned admissions.

Re-counselling patients in the event of:

- Change in plan of care.
- Extended length of stay
- Change in room category etc.

- Ensure that estimates provided do not vary more than 10% from the actual bill. (This shall be a Key Performance Indicator).
- Explain bed / room categories and allot bed / room for admission.
- Collect deposit amount for self-paid (cash) patients, as per policy.
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Process Brief

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- Issue of estimates
- Room allotment
- Collection of deposit
- Wheeling patient to bed
- Handover to nurse
- Admissions Cancellations

Chapter 6

Key Learnings from Internship

- **Time management and prioritization:** Hospitals are fast-paced environments with multiple demands and competing priorities. This internship helped me to develop skills in time management, organization, and prioritization as they navigate patient care responsibilities, documentation, and collaboration with the healthcare team. These skills are crucial for efficient and effective healthcare delivery.
- **Critical thinking and problem-solving:** During this internship I encountered with various operational scenarios that require critical thinking and problem-solving skills.
- **Process improvement and optimization:** Through the discharge TAT project, I learned how to analyse and evaluate the discharge process in the hospital. Identified bottlenecks, inefficiencies, and areas for improvement. This experience taught me the importance of streamlining workflows, implementing standardized processes, and optimizing the discharge process to enhance efficiency and patient flow.
- **Data analysis and metrics:** During the project, I have collected and analysed data related to discharge TAT. This process introduced me to data analysis techniques and the use of metrics to measure performance. Got to learn how to identify relevant data points, track key performance indicators (KPIs), and use data to identify trends, measure progress, and make data-driven decisions to improve discharge TAT.
- **Project management skills:** Working on a corporate projects team exposed me to project management principles and practices. I gained experience in project planning, setting goals, defining milestones, and creating action plans to achieve desired outcomes. Helped me to develop skills in coordinating with various stakeholders, managing timelines and resources, and effectively communicating project updates and progress.
- **Collaboration and stakeholder engagement:** Discharge TAT projects often involve multiple stakeholders, including healthcare providers, nursing staff, administrative staff, and patient care coordinators. During this internship tenure, learned how to collaborate with these stakeholders, understand their perspectives, and engage them in the project. This experience taught me the importance of effective communication, teamwork, and fostering buy-in and support from different departments to drive successful project outcomes.
- **Problem-solving and critical thinking:** Discharge TAT projects require problem-solving skills and critical thinking abilities. I encountered challenges and obstacles along the way and had to think creatively to find solutions. This experience honed me ability to analyse complex situations, identify root causes, propose feasible solutions, and implement changes to improve discharge TAT. I also learned the importance of monitoring and evaluating the effectiveness of implemented solutions and adjusting as needed.

These key learnings from working on a discharge TAT project under the corporate projects team during your hospital internship have equipped me with valuable skills and knowledge in process improvement, data analysis, project management, collaboration, and problem-solving. These skills will be transferable and applicable to various healthcare settings and future endeavours within the healthcare field.