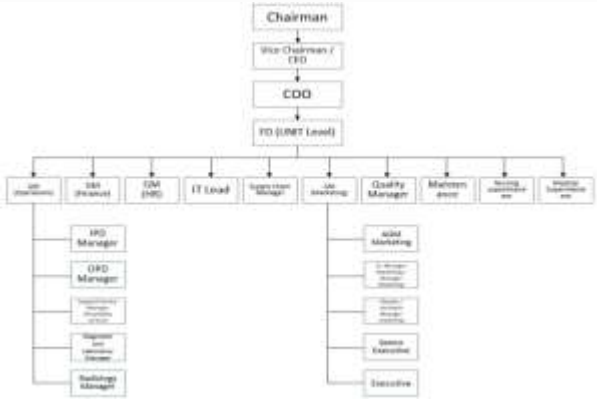
NAME- DR. SHAIVALINI SARKAR
ROLL NO.- IIHMR-U/01/2022-24/1602
MENTOR NAME- DR. SEEMA MEHTA
INDUSTRY NAME- NH MMI NARAYANA SUPERSPECIALITY HOSPITAL, RAIPUR (C.G.)

"DELAYS IN IN-PATIENT DISCHARGES AT NARAYANA HRUDALAYA(NH) - A DESCRIPTIVE STUDY"

BACKGROUND OF THE ORGANISATION

Dr. Devi Shetty founded Narayana Hrudalaya (NH) in the year 2000 with a 280-bed heart hospital in Bangalore. It has a network of 23 multispeciality and superspeciality hospitals with 7 heart centres spread across 18 locations in India and 1 multispecialty hospital in Cayman Islands.

ORGANISATIONAL STRUCTURE



METHODOLOGY & DATA COLLECTION

A) NATURE OF DATA-

• Primary data were collected of 300 patients by day to day interaction with hospital staff to find the TAT and reasons for the delay in discharge process.

• Secondary data were collected from software ATHMA & other documents related to the topic referred i.e. Checklist prepared for planned discharges and a list of patients in the ward.

B) SETTING- Deluxe ward/2A wing of NH MMI Narayana Hospital, Raipur.

C) STUDY DESIGN- A Descriptive study was carried out.

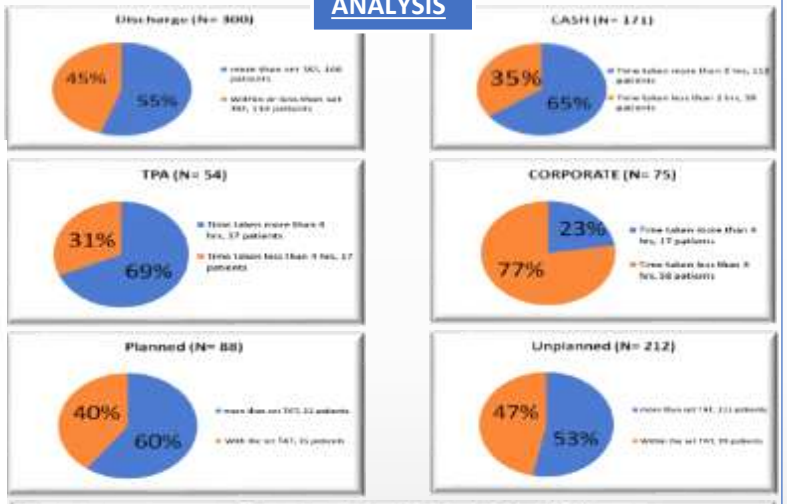
D) SAMPLE SIZE- A sample sizes of 300 patients in the process of discharge from hospital, who are Cash/Insurance/TPA/Corporate were arbitrarily selected, observed & tracked.

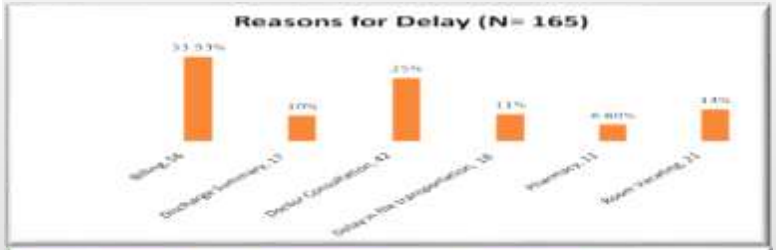
E) DURATION OF DATA COLLECTION- 42 Days

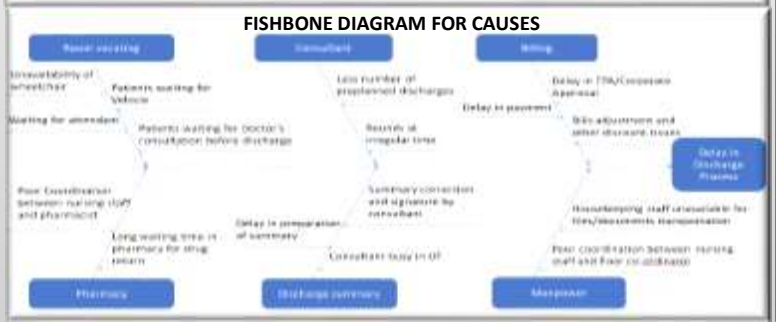
OBJECTIVES

- To study the discharge process of Patients.
- To find the average discharge turnaround time (TAT) in IPD patients.
- To find out reasons for the delay in discharge process.

ANALYSIS







SUGGESTIONS

- By closing all the pending bills before discharge intimation
- there should be a fixed time for consultant rounds.
- In order to reduce the delay in vacating, the hospital must have a discharge waiting area where the patients can wait after their discharge
- Timely preparation of discharge summary and signature.
- The increase availability of housekeeping staff for timely execution of process
- File completion and other updates can be done on the previous day for patients with planned discharge.
- Better co-ordination between management & nursing staff is suggested as well as also roles & responsibilities should be taught to the staffs

CHALLENGES FACED

- Was unable to find the opportunity/time to work in a cross-functional capacity.
- During the initial days, data collection was difficult due to lack of assistance from the staff. As time progressed, it was resolved.

KEY LEARNINGS

- Learnt discharge process and auditing.
- Observed and inculcated how the things are managed by a Floor- coordinator.
- Learnt how to handle patients and interact with them in a better manner.

USEFULNESS OF INTERNSHIP

- Time management.
- Internship increased skillsets.
- Better opportunity for Networking.