P.D. HINDUJA NATIONAL HOSPITAL AND MEDICAL RESEARCH CENTRE, MUMBAI

IIHMR UNIVERSITY

INPATIENT SURVEY (STUDY OF LEVEL OF SATISFACTION OF PATIENTS) , VALUE STREAM MAPPING AND TIME MOTION STUDY OF ADMISSION AND DISCHARGE PROCESS.

NAME – DR. INGLE RACHANA RAJU
ROLL NO – 1514 (MBA- HM 27)
FACAULTY MENTOR – S. P. CHATTOPADHYAY
INDUSTRY MENTOR- DR. PREETI GORAKSHA , BHAVISHA KHARNARE

BRIEF HISTORY , VISION AND MISSION OF THE ORGANIZATION

OVERVIEW OF HOSPITAL

P.D. HINDUJA NATIONAL HOSPITAL AND MEDICAL RESEARCH CENTRE is multi-speciality, tertiary care hospital in Mumbai, founded by PARMANAND DEEPCHAND HINDUJA in 1951. It is ranked as 6th best hospital in India and 3rd best private hospital in India. It is 400 beded ultra-modern multi-speciality hospital representing 3 strong pillars of health care 1) Academics 2) Research and 3) Clinical work. It is the first hospital in India to acquire Gamma knife and start a NAT blood testing.

ACCREDITATION/ CERTIFICATION

- CAP Accreditation
- NABL certification
- NABH
- HACCP
- ISO 27001:2005 INFORMATION CERTIFICATION

ORGANIZATION VISION

To provide Quality Healthcare For All i.e. healthcare that is – Affordable, Value-based, Ethical, Transparent, Outcome based & Backed by Technology & Innovation**.**

ORGANIZATION MISSION

To create the hospital as world class medical institution by delivering quality medical care to all the patients, continuous medical education to doctors and training to nurses as well as basic and clinical research with the focus on the needs of the country**.**

PRACTICAL VS THEORETICAL APPROACH OF INTERNSHIP

PRACTICAL -

1. We have to collect the primary data to complete the task/ work given to us .
2. We don't have all the information available to us so we have to make efficient moves to gather the information and complete the task successfully.
3. We have to do the sorting of the data collected and analyse it so that it will make some senses to us and also serve our purpose of data collection.
4. After analysing the data, we have to identify the concern areas and find the suitable solutions and give appropriate/ rational suggestions to deal with the problems/ concern areas.

THEORETICAL

1. We have to deal with the hypothetical situation and analytical problems given to us.
2. We usually deal with the secondary data provided to us and we are supposed to find the solution of the concern issues.

OBJECTIVES OF THE TOPIC -

1) To assess/study the level of patient satisfaction.
2) To examine patient satisfaction with special focus on interdepartmental communication of the hospital. To evaluate the factors affecting the patient satisfaction.
4) To identify the problems/causes of dissatisfaction, if any and suggest recommendations to improve the services of hospital system.

METHODOLOGY –

TYPE OF STUDY APPROACH – DESCRIPTIVE

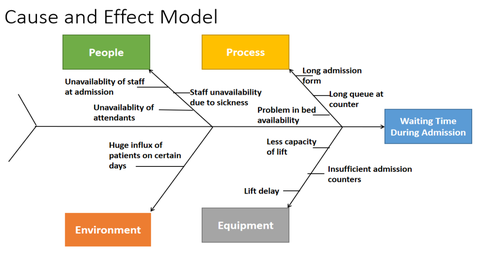
STUDY TOOLS – VSM, FISH BONE MODEL, TIME MOTION STUDY, PERSONAL INTERVIEWS WITH PATIENTS AND RELATIVES, MICROSOFT EXCEL,POWERPOINT.

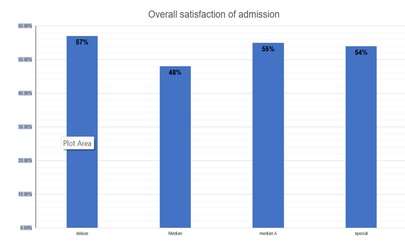
POPULATION COVERED – 600 { 100 – ADMISSION PROCESS FEEDBACK
50 – ADMISSION VALUE STREAM MAPPING AND TIME MOTION STUDY }
{ 400 – ON FLOOR PATIENTS FEEDBACK [350 – WEST BLOCK , 50 – S1 BUILDING]}
{ 50 – DISCHARGE PROCESS FEEDBACK AND VALUE STREAM MAPPING}

STUDY PERIOD – 02/05/2023 – 30/06/2023

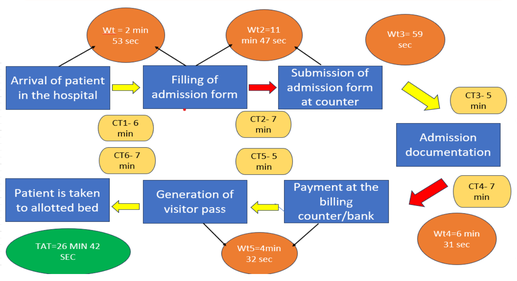
FINDINGS - FEEDBACK OF ADMISSION PROCESS AND VSM OF ADMISSION , FEEDBACK OF ON FLOOR PATIENTS AND LEVEL OF SATISFACTION, FEEDBACK OF DISCHARGE PROCESS AND VSM OF DISCHARGE PROCESS.

ADMISSION PROCESS FEEDBACK (100)

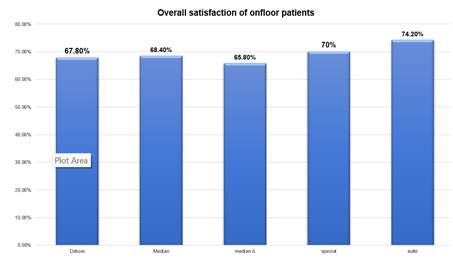




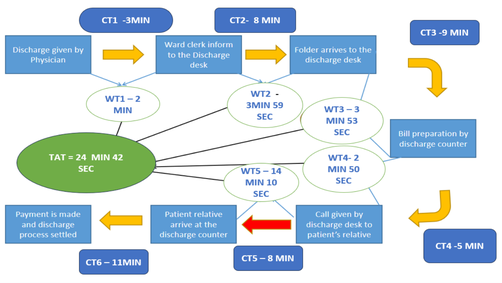
ADMISSION PROCESS VSM (50)



ON FLOOR FEEDBACK (400)



DISCHARGE VSM STUDY (50)



ISSUES & SUGGESTIONS

ADMISSION PROCESS

Issues	Suggestion
Long time for filling admission form	Can make digitalised admission form and send them while booking the bed.
Waiting for bed availability or undesirable allocation	Bed availability status should be made available at the lobby area on digital screen
Long queue at admission counter	Train the receptionist to allow only one person at the admission counter of each family.
Customer care takes too long to pick up calls	Improve functioning or staff for bed booking process
Lift waiting in lobby area to go to allocated room	Can increase lift capacity and efficiency
Payment hassles	Payment method should be confirmed well in advance and advance payment should be done.
Waiting during S1 transport of patients	We can increase the number of ambulance
Chaos at admission counter during peak times	Can make block-wise admission cubicles to avoid disturbance

ON-FLOOR

Issues	Suggestions
Food quality is not as good as it should be.	Strict monitoring regarding the quality of food and some variety should be added
Outside food for the relatives in the hospital.	There should be provision of the outside food for relatives only but not in the patient's room.
Bags provided by the hospital for keeping the documents are of very bad quality.	Instead of paper bags JUTE bags can be used.
Only female patients get shawl while going for any diagnostic procedure.	This provision should also be for the male patients.
Cheque is not accepted in the hospital/ bank.	Cheque should be accepted from the long stay patients.
Trolly bags are not allowed.	With proper security checking, wheel/trolly bags should be allowed.
Lot of disturbance due to pantry on the floor.	Acoustic foams/sheets to be installed in the pantry.

DISCHARGE PROCESS

Issues	Suggestions
Don't accept cash at 14th floor	Instead of sending relatives to bank at the ground floor, cash should be accepted at the 14th floor itself.
Don't give information about the mode of payment on the call.	When the call is given to the relatives for paying bill, they should inform them for cash to be submitted at bank.
Patient relative come late to the counter for payment resulting in delay	Can charge them extra if not came within 15 min

LEARNINGS DURING INTERNSHIP

1. Along with the academic study, internship opportunity helped me to put the skills and knowledge into practice.
2. This internship gave me the chance to develop professional network within the field. Also gave me the chance to work with experienced professionals and learn from them.
3. Better understanding regarding the collection of primary data and and how to overcome the different hurdles during the collection.
4. To develop good communication skills.
5. Good explozure of the corporate world.

CHALLENGES FACED DURING INTERNSHIP

1. Dealing with variety of people with different socioeconomic conditions, languages, mindsets.
2. Very limited time period to carry out and finish the project.
3. Social desirability bias of the employes of the hospital as they and their relatives were reluctant to give any negative feedback about the hospital.
4. Adapting the work culture of the organization.
5. Competition from co interns.

USEFULNESS OF INTERNSHIP

1. The induction process provided me with the deep knowledge of the functioning of the various department.
2. To understand the patient satisfaction is a subjective thing and it varies from person to person.
3. To understand the non -clinical working of the hospital.
4. The access to variety of live projects going on in the hospital and departments of the hospital.

SWOT ANALYSIS OF HINDUJA HOSPITAL

STRENGTH

- Great platform to deal with every kind of medical issues .
- Separate buildings to serve different purposes to ensure smooth workflow.
- Location of the hospital is convenient for all the people.
- Advance technology adaption and excellent marketing strategy of the hospital.

WEAKNESS

- Does not have a dedicated Obstetric department at the Mahim, Mumbai Hospital.
- Does not have provisions to treat snake bite & scorpion bite victims.
- Transport of patients & blood samples take considerable time due to poor connectivity between the different buildings of the hospital.

OPPORTUNITY

- New Projects for further development & rectifying outstanding problems.
- Partnerships with smaller hospitals for further growth and increase in revenue.
- Expanding the services by covering the untapped market.

THREATS

- Facing stiff competition from Lilavati Hospital, Kohinoor hospital, Kokilaben Dhirubhai Ambani Hospital etc.
- Chances of maintaining the existing growth rate is low.
- Entry of new competitions in the area such as Fortis & Apollo Hospitals etc.

P. D. HINDUJA NATIONAL HOSPITAL & MEDICAL RESEARCH CENTRE
(Established and managed by the National Health & Education Society)
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June 30, 2023

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr. Ingle Rachana Raju did her Internship in our Hospital from 02/05/2023 – 30/06/2023 as an Administrative Intern.
During this period, her assignment was as follows:
1. In-patient survey (400 patients) west block & s1 building.
2. Study of admission and discahrge process (200 patients).

I wish her all the success in future endeavours.

Joy Chakraborty
Chief Operating Officer

Dr. Preeti Goraksha
Assistant Director Quality & Clinical Administration