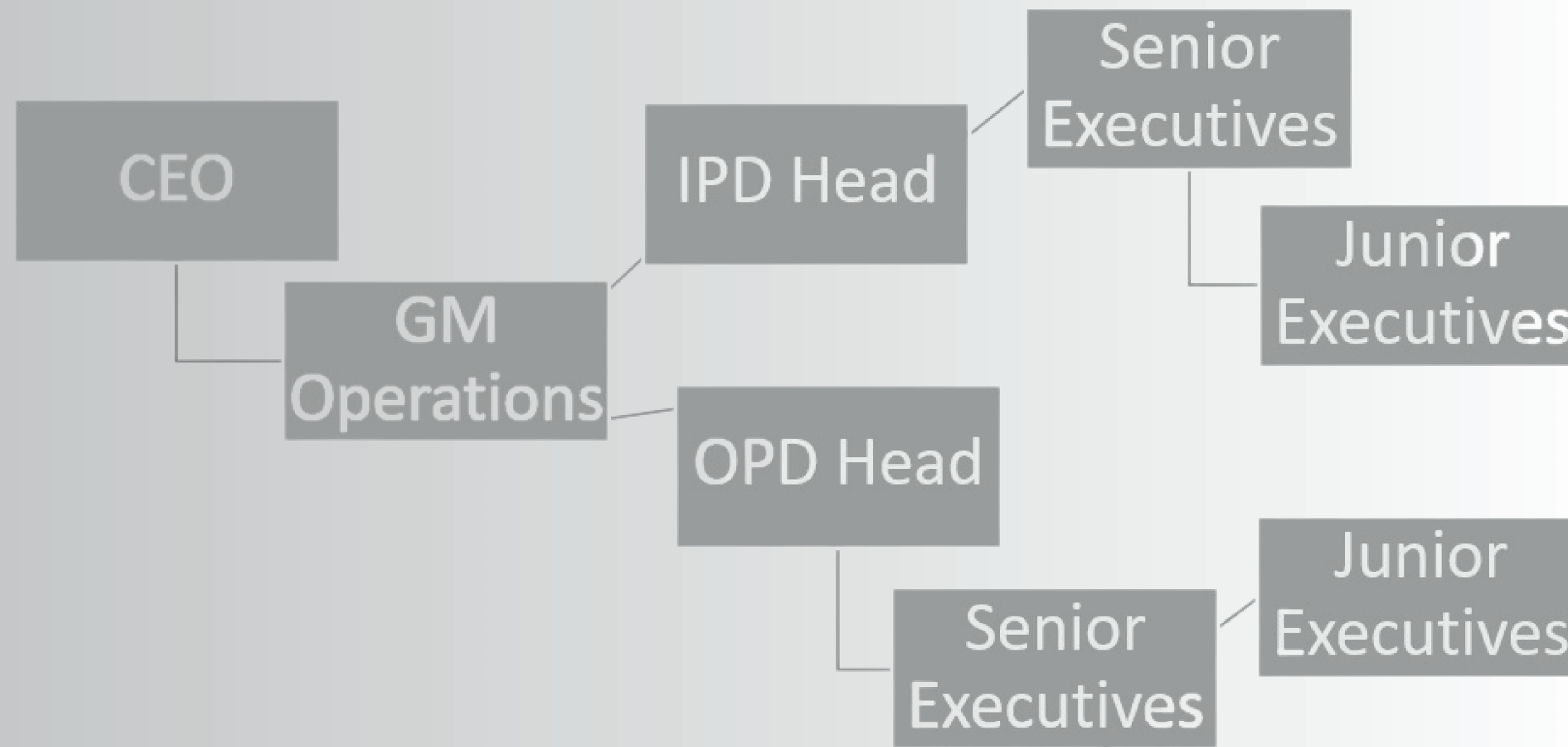


Streamlining Discharge Process to optimize Operational efficiency at Jehangir Hospital, Pune

Brief Overview:

- Jehangir Hospital, established in 1946 as Jehangir Nursing Home, is a renowned healthcare institution in Pune, India.
- It was founded by Sir Cowasji Jehangir and Lady Hirabai Jehangir with the aim of providing high-quality and affordable personalized care. Over the years, the hospital has grown and partnered with the Apollo Hospitals Group in 1998, enhancing its capabilities and patient care.
- With 350 beds and accreditations from NABH, NABL, and Nursing Excellence, Jehangir Hospital is synonymous with medical excellence, affordability, and patient satisfaction. It offers a range of services, including a state-of-the-art emergency department, 9 operation theaters, and specialized DNB programs in Emergency Medicine, Pathology, and Orthopaedic Surgery.

Organization Structure (Operations):



Introduction:

- The discharge process is a series of activities that ensure a safe and smooth transition of patients from a healthcare facility to their home or appropriate care setting.
- It involves tasks such as finalizing medical documentation, providing instructions for self-care, arranging follow-up appointments, and coordinating with caregivers.
- By streamlining this process, healthcare organizations can enhance efficiency, patient safety, and overall experience.
- In order to provide the highest quality of care and improve resource utilization, it is essential to identify and address any bottlenecks, inefficiencies, and challenges within the discharge process.

Objectives:

- The objective of this internship project is to conduct a detailed study of the discharge process at Jehangir Hospital in Pune, with a focus on streamlining it to enhance operational efficiency.
- By identifying bottlenecks and implementing improvements, the project aims to optimize resource utilization, reduce errors, and improve the overall flow of the discharge process.

Methodology:

The data collection for this project primarily involved direct monitoring of the patients' discharge process from the 'Consultant order' on the file to the 'Allowed to go' issued by the billing department, and subsequently observing the patient's exit from the hospital. The following details regarding data collection were employed:

- Sample Sizes: The project included a sample of **138** patients who opted for insurance and **110** patients who paid in cash.
- Sample Selection Technique: **Simple random sampling** was utilized to select patients for data collection. This technique ensured that each patient had an equal chance of being included in the sample.
- Daily Monitoring: Approximately **12-15 patients were closely monitored each day** to obtain a representative sample for analysis. This allowed for a comprehensive understanding of the discharge process.
- Inclusive Sample: Patients from all hospital wards were included in the sample, covering general wards, semi-private rooms, private rooms, deluxe rooms, and super-deluxe rooms. This diverse representation ensured that the findings encompassed the entire hospital's discharge process.
- Monitored Departments: The departments closely monitored during the project included the billing department, typing pool responsible for discharge summary typing, TPA (Third Party Administrator), and the IP (Inpatient) Pharmacy. These departments played crucial roles in the discharge process and were analysed to identify potential areas for improvement.

Vision

Our vision is to be the region's foremost healthcare provider with access to diverse clinical services focusing on consistency in delivery of quality care and use of best technology.

Mission

Our mission is to provide healthcare of international standards through a team of qualified professionals and at a cost affordable to the community. We are also committed to maintain clinical excellency focusing on healthcare academics and use of latest technology.

Values

- “We Add Care” by demonstrating our constant commitment towards the principles of ethics through:
- Commitment to be a leader in healthcare with a human touch
 - Advancing a professional patient-centered approach and serving our community through outreach and social responsibility initiatives
 - Respecting our patients, their families and our co-workers
 - Ensuring innovative approach and facilitating curative research initiatives

Analysis and results:

Data analysis of the sample taken was done using excel data analysis tools. Mean, median, mode and standard deviation were carried out so as to note the major gaps in the process.

Insurance Patients: Sample Size: 138

TAT	Standard TAT	Mean	Median	Mode	Standard deviation
CO to DM	20 mins	01:32	01:11	01:47	0.05
DM to Pharmacy clearance	20 mins	00:50	00:11	00:04	0.09
CO to AS billing dept.	20 mins	01:30	01:12	00:15	0.05
DM to DS print	20 mins	00:31	00:14	00:08	0.05
Insurance approval to ATG	20 mins	01:31	01:02	00:41	0.06

Cash Patients: Sample Size: 110

TAT	Standard TAT	Mean	Median	Mode	Standard deviation
CO to DM	20 mins	00:51	00:40	00:49	0.03
DM to Pharmacy clearance	20 mins	00:14	00:09	00:06	0.01
CO to AS billing dept.	20 mins	00:46	00:30	00:30	0.03
DM to DS print	20 mins	00:23	00:15	00:08	0.02

SWOT Analysis:

Strengths - Established reputation - Collaborative approach - Data-driven approach - Diverse Sample	Weaknesses - Dependency on Pharmacy return - Errors in discharge summary - Inconsistent system timings
Opportunities - Process Optimization - Technology integration - Training and Education	Threats - Resistance to change - Resource limitations

Internship Key Learnings:

- Process Analysis
- Collaboration
- Data-driven Decision Making
- Process Standardization and Training
- Technology Integration
- Change Management
- Continuous Improvement Mindset



Figure 1: Staff members and hospital environment.

Figure 2: Hospital lobby with a large sculpture.

Figure 3: Hospital lobby with a large sculpture.

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