SUMMER INTERNSHIP PROGRAM

at

MAX SUPER SPECIALITY HOSPITAL, SHALIMAR BAGH

From MAY 02ND, 2024 to JULY 01ST, 2024

A REPORT BY

Shalini Singh

Master of Business Administration

(Hospital and Health Management)

2023-25

under the Mentorship of

DR. SEEMA MEHTA, PROFESSOR

IIHMR UNIVERSITY

Certificate No – 2024/16733

CERTIFICATE

OF ACHIEVEMENT

MAX Healthcare

Max Institute of Medical Education

Certifies that

Shalini Singh

has completed Internship in the department of

Hospital Operation

at Max Super Speciality Hospital, Shalimar Bagh, New Delhi

from 02nd May 2024 to 01st July 2024

Head of the Department

Dr Vinitaa Jha
Director - Research & Academics
Max Healthcare Institute Ltd

MAX Healthcare

Annexure A

CERTIFICATE

This is to certify that **Dr. Shalini Singh** of MBA-HM28 of IIHMR University, Jaipur has worked with our organization for her summer internship from 02nd May 2024 to 01st July 2024. The overall performance shown by her during the period was excellent. This certificate is being issued to meet the requirements of the IIHMR University.

Date: 02nd July 2024

(Signature of organization Mentor)

Name: Dr. Gurpreet Kaur

Designation: Manager

Seal/Stamp of the Organization

Max Super Speciality Hospital-Shalimar Bagh MAX

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IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that Dr. Shalini Singh of academic year 2023-25 of Institute of Health Management Research has prepared a poster with respect to his/her summer internship held during May-June 2023.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Seema Mehta

Date: 18 July 2024

(Signature of Faculty Mentor)

Name: Dr. Seema Mehta

Designation: Professor

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TURN AROUND TIME(TAT) FOR DISCHARGE PROCESS OF IN-PATIENT DEPARTMENT: A STUDY OF MULTISPECIALITY HOSPITAL

Name- Shalini Singh
Roll number- 1825
Faculty Mentor- Dr. Seema Mehta

Name of the Organisation- Max Super Speciality Hospital, New Delhi
Organisation Mentor- Dr. Gurpreet Kaur

ABOUT MAX HOSPITAL

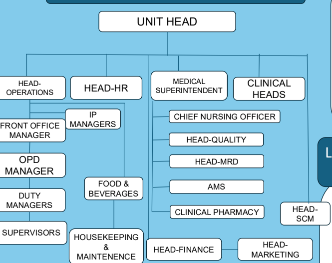
Max Super Specialty Hospital, Shalimar Bagh is a 402-bed hospital established in 2011. It has treated more than 400,000 patients and is equipped with cutting-edge technology and a team of knowledgeable staff to deliver the best care possible. Max Super Speciality Hospital, Shalimar Bagh boasts over 34 clinical specialties. The hospital has various accreditations such as NABH and NABL.

VISION

- To be the most well-regarded healthcare provider in India committed to the highest standards of clinical excellence and patient care, supported by the latest technology and cutting-edge research.
- To push the boundaries of excellence in everything they do to deliver the highest standards in patient-centered care.

Purpose - To serve. To excel

ORGANISATIONAL STRUCTURE



SWOT ANALYSIS (DISCHARGE PROCESS)

S
- Designated Floor managers to facilitate the discharge process
- The process is organized and divided into six steps

W
- Lack of staff at the billing counter during peak discharge hours
- Delay in discharge summaries
- High turnover rate among staff

O
- Digital transformation
- Capacity enhancement for staff and coordinators
- Good collaboration with other departments

T
- Better performing branches
- Regulatory changes for documentation requirements
- Patient dissatisfaction leading to a shift in patients' loyalty

AIM OF THE STUDY

The Study aims to understand the patient's journey through the hospital and further align the journey for IPD patients by investigating the discharge process

OBJECTIVES

- To map the patient's journey through the hospital and identify key touch-points throughout the journey
- To measure the Turn Around Time (TAT) for the whole process of discharge
- To analyze the gap in the discharge process

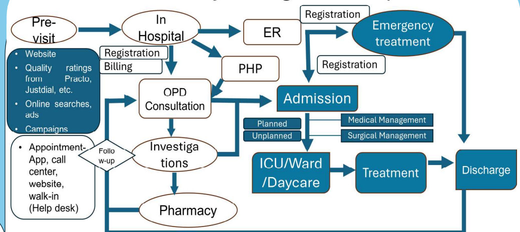
CHALLENGES

- Technology integration
- Navigating bureaucratic hurdles
- Time- management
- Adjusting to the new work environment and culture

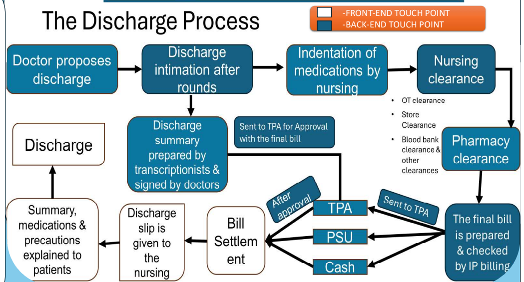
LEARNINGS & USEFULNESS OF INTERNSHIP

- Exposure of various departments in the hospital and their way of co-functioning and interdependency
- Different regulatory and hospital policies
- The functioning of the hospital and how different departments have their roles in it
- Learned the process of admission, discharge, OPD billing, etc.
- Observed and learned floor management from experienced managers
- Observed how to interact with patients in a better manner
- Learned time management and the importance of teamwork

A Patient's Journey Through The Hospital



The Discharge Process

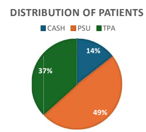


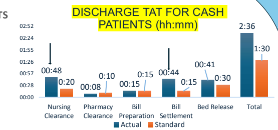
METHODOLOGY

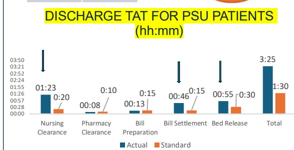
- Study setting- In-patient and Out-patient department of Max Super Speciality Hospital, Shalimar Bagh, New Delhi
- Study design- Descriptive & Observational
- Sampling- Convenience Sampling
- Sample- 1256 patients admitted between June 1st 2024 to June 25th 2024 in the in-patient department of Max Hospital
- Data collection- Secondary data was collected from HIS and primary data was collected from nurses, administration, and through observation and activity mapping
- Inclusion criteria- Cash, TPA, and PSU patients admitted to the hospital between June 1st 2024 to June 25th 2024 in the in-patient department of Max Hospital
- Exclusion criteria- Daycare, corporate, EWS, International patients
- Data analysis- Average, TAT, Process flow, and Root cause analysis.
- Hospital Standard TAT for discharge- Cash and PSU patients- 90 minutes and TPA patients- 180 minutes
- According to NABH, TAT-180 minutes

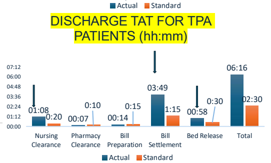
DISCHARGE PROCESS TAT

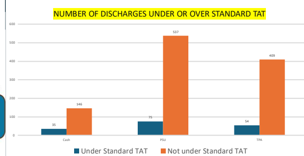
CATEGORIES	NUMBER
CASH	181
PSU	612
TPA	463

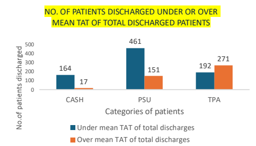


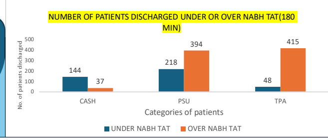












- Out of 1256 patients, only 13% had discharges within the standard period.
- According to the observation, the major reason for increased TAT is the delay in nursing clearance and bill settlement, which are further analysed by Fishbone analysis.

SUGGESTIONS

FRONT-END

- During peak hours, there should be proper management of staff
- Every floor or every two floors can have one discharge billing desk
- Approximate bill should be informed to the attendants a day before discharge

BACK-END

- For planned discharges, the discharge summary should be finalized a day before discharge to reduce delays
- Fixed timing of rounds by the doctors
- Updated bills should be sent to the insurance companies every day and queries should be resolved quickly

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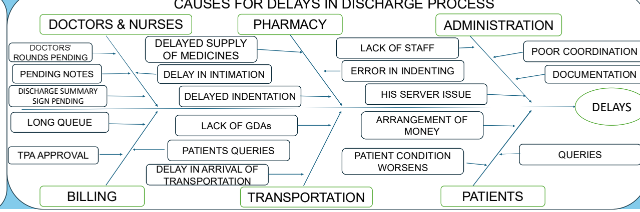
CAUSES FOR DELAYS IN DISCHARGE PROCESS



Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (OPD and Admissions)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 01 **From: May 02nd, 2024 to May 11th, 2024**

Activity Done	• **Observed the registration and billing process in the OPD** • **Got to know about the mandatory documents needed for DMS** • **Learned about the necessary fields to be filled in the patient info in the registration** • **Did registration and OPD billing for consultations and investigations for cash patients** • **Generated invoice** • **Learned about different panels like CGHS, DGEHS, DDA, ECHS, NDMC, and their tariffs** • **Observed the refund cases in the OPD** • **At the admission desk, learned about the process of admission and bed allotment** • **Learned about the journey of patient from arrival to admission** • **Generated passes for attendants and visitors** • **Learned how to do DMS- necessary documents required** • **Learned about the different categories of patients- Category A is for EWS, Category B is for Panel and Category C is for cash or TPA** • **Learned how the HIS works- how wristbands and labels are printed, how the documents are arranged, and checklists for patients or attendants** • **Did the process of admission and DMS of patients** • **Average waiting time for patients coming for admission and bed allotment was observed to be 2 hours**
Linking theory (Classroom learning) with practice at your organization	• **Organisational culture is very inclusive, and values are well-embedded in every staff** • **Emergency has a separate entrance.** • **There is a picture of the hospital behind the bills which is a good way of promotion.** • **Nursing day was celebrated with the participation of most of the employees which was a good recreational activity for employees** • **Cleanliness and hygiene were well taken care of** • **Wheelchairs were available at the entrance.** • **Quality standards are well maintained**

	• **Patients' concerns are well taken of** • **There is a good HIS system in the hospital** • **Waiting area is available at every OPD** • **IPD is on top floors and OTs are on first floor** • **Different types of rooms available** • **Documentation is done with utmost importance**
Gaps identified in the working area.	• **Patients seem to be confused about where to get the appointment, they come to the billing counter then go back to reception for an appointment, and then come back to the OPD billing counter for payment and billing which leads to an increase in the time between patient coming to hospital and getting treatment.** • **Patients don't know about separate panel counters. There is a waste of their time coming to cash OPD and then going to PSU counters** • **The OPDs are not based on different departments. It becomes difficult for patients to search for a particular doctor.** • **There are two towers, another tower is dedicated to cancer care, signage on how to reach tower 2 is not proper.**
Suggestions for improvement	• **When a patient enters the hospital, he should be able to see the OPD billing counter as well as Panel billing.** • **It should be written somewhere at the reception about appointments.** • **There should be a better communication system between employees so that the status of vacant rooms can be known to all IPD staff and the staff on the admission desk.** • **If an emergency patient arrives and there are no vacant beds in the emergency, there should be a separate provision for those patients.**
Plan for the next week	• **Learning more about admission** • **Learning about TPA and more exposure of IPD**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (Admissions)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 02 **From: May 13th 2024 to May 18th 2024**

Activity Done	• **Did Registration of patients** • **Learned how to do admission of international patients and the room tariff for them** • **Learned how to do a refund** • **Did Pre-ADT of patients** • **Learned about preventive health packages** • **Did admissions** • **Learned about the tariff of different wards for CGHS and other panel patients** • **Did modifications in name, email-id, date of birth, etc** • **Learned about different policies of the hospital through the checklist** • **Booked appointments at the reception desk** • **Learned about different levels of NICU**
Linking theory (Classroom learning) with practice at your organisation	• **There is a policy that prioritizes patient consent and ethical handling of personal information** • **The staffs are scheduled according to patient volume** • **Use of HIS which records patient's past medical information also** • **Use of queuing and token system in the OPD to manage patient flow** • **Patient feedback system in IPD and OPD** • **Appointment scheduling system** • **Regular briefing of staffs by senior employees** • **Coordinators are available in the OPD to streamline the flow of patients**
Gaps identified in the working area.	• **Patients experience long waiting time for admission** • **In case of absence or delay of doctors due to any reason, patients should be informed beforehand** • **There is a token system for Panel patients in the OPD, the appointments should also be based on that considering the waiting time**

Suggestions for improvement	• **There should be more than one counter for TPA** • **The checklist should also be available in Hindi** • **The Doctors who see panel patients on a particular day should see them via a token system only**
Plan for the next week	• **To understand more about different pillars of operations**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (Admission, Billing)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 03 **From: May 20th ,2024 to May 25th ,2024**

Activity Done	• **Pre-ADT process orientation** • **Observed the stages of discharge** • **Observed Admission process** • **Learned how to see patients' outstanding bills, bill summaries, and detailed bills** • **Observed different types of patients at the billing desk, how to deal with patients getting TPA denial or patients who cannot pay the bill** • **Answered patients' queries about their bills** • **Performed rounds with the Floor Manager and learned about patients' concerns**
Linking theory (Classroom learning) with practice at your organization	• **Employees working in the healthcare sector should be empathetic and patient, one should try to place oneself in the patient's shoes and try to understand their condition** • **A digital live dashboard on every IPD floor so that patients or attendants can see the status of the discharge process** • **Boosting the confidence of employees by giving them awards for their good scores**
Gaps identified in the working area.	• **No proper orientation of OPDs** • **Wing-wise cohorting of doctors absent in the OPD** • **Waiting time for bed allocation and admission is very high on some days, so admissions should be planned beforehand**
Suggestions for improvement	• **When the patient is waiting at the admission counter after bed allocation, the live dashboard should be present there also so that he/she can see the status of their bed, it will help them not lose their cool while waiting**
Plan for the next week	• **To understand how Nephrology & Urology OPD functions**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (OPD, Discharge, Emergency, Estimate)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 04 **From: May 27th ,2024 to June 01st ,2024**

Activity Done	• **Observed the process of OPD billing for cash and panel patients** • **Discharge billing process orientation** • **Documentation process for the discharge of cash, panel, or insurance patients** • **Understood the ER admission process** • **Observed the behaviour of staff & patients during the time of chaos** • **Learned the Process of estimation and observed how to counsel patients**
Linking theory (Classroom learning) with practice at your organization	• **Regular MCQ tests for staff to understand their level of information and understanding regarding policies** • **Scores for better performances** • **Talks by doctors to inform everyone about new procedures or treatment**
Gaps identified in the working area.	• **Poor coordination between staff** • **Sometimes, the Body language of staff is not proper while answering patients' queries** • **Counseling is not provided properly to the patients due to lack of time**
Suggestions for improvement	• **Better communication & coordination system for staff** • **Waiting area near ER** • **Estimate and counseling should be separate**
Plan for the next week	• **To understand more about emergency admissions and estimates**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (Call centre)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 05 **From: June 03rd ,2024 to June 08th ,2024**

Activity Done	• **Learned about patients' queries and concerns in the call centre** • **Answered calls & observed various data entries & dashboard** • **Got to know about the KPIs of the call centre & how to get business leads** • **Learned about the discharge process & causes of delay in discharge**
Linking theory (Classroom learning) with practice at your organization	• **Analysis of all calls received and done to check the quality of calls** • **Proper data analysis to get business leads & KPIs** • **Ranking of all operators at the end of the month**
Gaps identified in the working area.	• **Not having proper knowledge about medical procedures & tests may lead to patient dissatisfaction** • **Wrong data entries and dashboards**
Suggestions for improvement	• **Staff should be aware of all the tests & procedures happening at the hospital** • **Proper training for data analysis for making dashboards**
Plan for the next week	• **To understand in depth about the discharge process**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (Estimation & counselling, OPD, Patient coordination)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 06 **From: June 10th ,2024 to June 15th ,2024**

Activity Done	• **Learned the process of Estimation** • **Counselled patients** • **OPD billing for cash & PSU patients & the documentation** • **Observed what happens when the different codes are announced** • **Did patient coordination for doctors & learned the process of conversion** • **Observed the whole process of OPD**
Linking theory (Classroom learning) with practice at your organization	• **IPD & OPD patient feedback analysis** • **Regular briefing for staff** • **Analysis of past cases for estimation** • **Separate OPD billing desk at floors to manage the rush**
Gaps identified in the working area.	• **Understaffing leading to overburdened staff and patient dissatisfaction** • **Lack of coordination between staff** • **Clash of OPD timing of doctors with rounds**
Suggestions for improvement	• **Separate timings for rounds and OPD for doctors** • **Proper distribution and utilization of staff** • **Capacity enhancement for staff for better communication and coordination**
Plan for the next week	• **To explore more and have a deeper understanding of Operations**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (Floor management, MRD, OPD)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 07 **From: June 17th, 2024 to June 22nd, 2024**

Activity Done	• **Learned Floor management from the experienced floor managers** • **Got to know about the patient's concerns & queries** • **Learned about the birth and death registration process at the Citizen Portal** • **Reporting of certain communicable diseases on IHIP** • **Documentation process for correction of names or addresses in the birth or death certificate** • **Learned about the checklist for medical records** • **Learned about OPD billing and documentation for PSU patients**
Linking theory (Classroom learning) with practice at your organization	• **National health program- IHIP (Communicable diseases notification)** • **Informed consent from patient and family members** • **Checklist for medical records** • **Every floor has its MRD where filing is done** • **Medical records are arranged according to IP number** • **Most of the records are not on paper but on EHR**
Gaps identified in the working area.	• **Poor coordination between GDAs and their supervisor** • **Overburdened staff in the F&B department, poor communication between them**
Suggestions for improvement	• **GDAs should have a standard turnaround time which can be monitored from time to time** • **Every floor should have its F&B supervisor who can cater to the needs of patients on that floor**
Plan for the next week	• **To understand about IP billing process**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Weekly Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Operations (IP billing, OPD)

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA- Hospital & Health Management**

Week no: 08 **From: June 24th, 2024 to July 1st, 2024**

Activity Done	• **Learned about the process of IP billing** • **Got to know about the documentation and process of the TPA backend** • **Documentation for PSU IP patients** • **Did OPD billing for Cash and credit patients** • **Learned about TMS**
Linking theory (Classroom learning) with practice at your organization	• **Corporate Social Responsibility- 15% of IP beds are for EWS patients** • **While registering, everyone gets a unique ID which eases the further documentation and identification process** • **Learned about Public-Private partnerships**
Gaps identified in the working area.	• **Patients were not informed about doctors being on leave or if they were in OT which led to an increase in patient dissatisfaction** • **Poor workforce management** • **Underutilisation of resources**
Suggestions for improvement	• **Coordinators should inform patients if the doctors are not available** • **Workforce should be managed efficiently and in a planned way** • **Resources should be utilized as per the workload**
Plan for the next week	• **This was the last week of my internship**

Signature of the Student:

Approved by the IIHMR University's Mentor:

Compiled Report

Name of the Organisation: "Max Super Speciality Hospital, Shalimar Bagh, New Delhi"

Area/ Department/ Project of Summer Internship Program: Hospital Operations

Name of the Student: Shalini Singh

Roll no: 1825 **Stream: MBA in Hospital and Health Management**

Activity Done	• **Observed and participated in the registration and billing procedures within the Outpatient Department (OPD).** • **Acquired knowledge of mandatory documentation requirements for the Document Management System (DMS).** • **Familiarized with essential fields for patient information during registration.** • **Executed registration and OPD billing for consultations and investigations for cash-paying patients.** • **Proficiently generated invoices for services rendered.** • **Studied various panels such as CGHS, DGEHS, DDA, ECHS, NDMC, and their respective tariff structures.** • **Observed refund processes within the OPD setting.** • **Learned the process of patient admission and bed allocation at the admission desk.** • **Gained insight into the patient's journey from arrival to admission.** • **Generated passes for attendants and visitors.** • **Demonstrated proficiency in Document Management System (DMS), including necessary documentation.** • **Familiarized with patient categorization: Category A (EWS), Category B (Panel), Category C (Cash or TPA).** • **Acquired operational knowledge of Hospital Information System (HIS), including wristband and label printing, document organization, and patient/attendant checklists.** • **Conducted patient admissions and DMS procedures.**

	• **Noted an average waiting time of 2 hours for patient admission and bed allocation.** • **Completed patient registrations efficiently.** • **Successfully managed international patient admissions, including room tariff calculations.** • **Executed refund processes as required.** • **Conducted Pre-ADT (Pre-Admission, Discharge, Transfer) procedures for patients.** • **Acquired knowledge of preventive health packages offered by the hospital.** • **Managed admissions, including understanding tariff structures for different wards and patient categories.** • **Made modifications to patient records such as name, email, and date of birth.** • **Familiarized with hospital policies through comprehensive checklists.** • **Scheduled appointments at the reception desk.** • **Learned about different levels of the Neonatal Intensive Care Unit (NICU).** • **Observed discharge stages and procedures.** • **Reviewed patient outstanding bills, bill summaries, and detailed bills.** • **Handled various types of patients at the billing desk, including those facing TPA denials or financial constraints.** • **Addressed patient queries related to billing.** • **Accompanied the Floor Manager on patient rounds and learned about patient concerns.** • **Observed OPD billing processes for cash and panel patients.** • **Received orientation on discharge billing procedures.** • **Participated in documentation processes for cash, panel, and insurance patient discharges.** • **Learned about Emergency Room (ER) admission procedures.** • **Observed staff and patient behaviour during chaotic situations.** • **Participated in the estimation process and observed patient counseling techniques.** • **Addressed patient queries and concerns at the call center.** • **Managed incoming calls, performed data entries, and monitored dashboards.**

	• **Gained insights into Key Performance Indicators (KPIs) of the call center and lead generation techniques.** • **Learned about discharge processes and identified common causes of delays.** • **Received training on the estimation process and actively counseled patients.** • **Managed OPD billing for cash and Public Sector Undertaking (PSU) patients, including documentation.** • **Observed operational responses to codes announced within the hospital environment.** • **Coordinated patient appointments for doctors and observed the conversion process.** • **Witnessed the entire OPD process from start to finish.** • **Received training in floor management from experienced Floor Managers.** • **Addressed patient concerns and queries effectively.** • **Gained knowledge of birth and death registration processes through the Citizen Portal.** • **Learned the reporting procedures for certain communicable diseases on the Integrated Health Information Platform (IHIP).** • **Experienced the documentation process for correcting names or addresses on birth or death certificates.** • **Familiarized with medical records checklists.** • **Acquired knowledge of OPD billing and documentation procedures for PSU patients.** • **Learned about In-Patient (IP) billing processes.** • **Became acquainted with documentation and processes related to the Third Party Administrator (TPA) backend.** • **Managed documentation for PSU In-Patient (IP) patients.** • **Conducted OPD billing for cash and credit patients proficiently.** • **Acquired understanding of the Transaction Management System (TMS).**
Linking theory (Classroom learning) with practice at your organization	• **The organizational culture is highly inclusive, with values well-embedded in every staff member.** • **The emergency department has a dedicated entrance.**

	• **The hospital promotes itself by including its picture on the bills.** • **Nursing Day was celebrated with extensive employee participation, serving as a good recreational activity.** • **Cleanliness and hygiene are meticulously maintained.** • **Wheelchairs are readily available at the entrance.** • **High-quality standards are consistently maintained.** • **Patients' concerns are addressed with great care.** • **The hospital has an efficient Hospital Information System (HIS).** • **Waiting areas are available in every OPD.** • **In-Patient Department (IPD) is located on the top floors, and Operation Theatres (OTs) are on the first floor.** • **Various types of rooms are available for patients.** • **Documentation is handled with utmost importance.** • **Policies prioritize patient consent and the ethical handling of personal information.** • **Staff scheduling is based on patient volume.** • **The HIS records patients' past medical information.** • **A queuing and token system is used in the OPD to manage patient flow.** • **Patient feedback systems are in place in both IPD and OPD.** • **An appointment scheduling system is available.** • **Regular briefings are conducted by senior employees for the staff.** • **Coordinators are available in the OPD to streamline patient flow.** • **Healthcare employees are encouraged to be empathetic and patient, understanding patients' conditions by placing themselves in the patients' shoes.** • **Digital live dashboards are present on every IPD floor, allowing patients or attendants to see the status of the discharge process.** • **Employee confidence is boosted by awarding those with good performance scores.** • **Regular MCQ tests are conducted to assess staff knowledge and understanding of policies.**

	• **Performance scores are used to motivate employees.** • **Doctors give talks to inform staff about new procedures or treatments.** • **All calls are analyzed to check the quality of service.** • **Data analysis is performed to generate business leads and monitor KPIs.** • **Operators are ranked at the end of each month based on performance.** • **Patient feedback from IPD and OPD is regularly analyzed.** • **Regular briefings are held for staff members.** • **Past cases are analyzed for better estimation processes.** • **Separate OPD billing desks are present on each floor to manage patient flow.** • **The hospital participates in the National Health Program - IHIP for communicable disease notification.** • **Informed consent is obtained from patients and their family members.** • **Checklists are used for maintaining medical records.** • **As part of Corporate Social Responsibility, 15% of IP beds are allocated for EWS patients.** • **Each patient receives a unique ID during registration, simplifying documentation and identification processes.** • **Gained knowledge about Public-Private Partnerships (PPP)**
Gaps identified in the working area.	• **Patients often appear confused about where to obtain appointments. They initially go to the billing counter, then to the reception for appointments, and finally return to the OPD billing counter for payment. This results in increased time between the patient's arrival and receiving treatment.** • **Patients are unaware of the separate panel counters, leading to wasted time as they first go to the cash OPD and then to the PSU counters.** • **OPDs are not organized by different departments, making it difficult for patients to find a specific doctor.** • **Signage to reach Tower 2, dedicated to cancer care, is inadequate.** • **Patients experience long waiting times for admission.** • **In case of a doctor's absence or delay, patients should be informed beforehand.**

	• **The token system for panel patients in the OPD should be integrated with appointment scheduling to reduce waiting times.** • **OPDs lack proper orientation.** • **There are no wing-wise cohorts of doctors in the OPD, leading to confusion.** • **The clash between doctors' OPD times and their rounds causes scheduling issues.** • **Poor coordination among staff affects patient experience.** • **Staff body language is sometimes inappropriate when responding to patients' queries.** • **Inadequate knowledge about medical procedures and tests among staff can lead to patient dissatisfaction.** • **Incorrect data entries and dashboard inaccuracies were observed.** • **Understaffing leads to overburdened staff and patient dissatisfaction.** • **Lack of coordination between staff members affects efficiency.** • **Patients were not informed about doctors being on leave or in the OT, leading to increased dissatisfaction.** • **Poor workforce management affects service delivery.** • **Resources are underutilized, impacting overall efficiency**
Suggestions for improvement	• **Patients should be able to easily locate the OPD billing counter and Panel billing upon entering the hospital.** • **Clear information about appointments should be displayed prominently at the reception.** • **Improve communication systems among employees to ensure all IPD staff and admission desk personnel are aware of the status of vacant rooms.** • **Provision for emergency patients should be made when there are no vacant beds in the emergency department.** • **Increase the number of counters for TPA to improve service efficiency.** • **Make the checklist available in Hindi for better accessibility.** • **Implement a token system for doctors seeing panel patients on specific days to streamline the process.** • **Install a live dashboard at the admission counter to display the status of bed**

	allocation, helping patients stay informed and calm while waiting. • **Enhance communication and coordination systems among staff for better workflow.** • **Provide a waiting area near the Emergency Room (ER) for patient convenience.** • **Ensure staff are knowledgeable about all tests and procedures conducted at the hospital.** • **Provide proper training for data analysis to improve the accuracy and usefulness of dashboards.** • **Improve staff management on busy days to ensure efficient service delivery.** • **Schedule OPD and rounds at different times to avoid conflicts.** • **Ensure better coordination between staff members for smoother operations** • **Separate timings for doctors' rounds and OPD consultations to prevent scheduling conflicts** • **Ensure proper distribution and utilization of staff for optimal performance** • **Enhance staff capacity for better communication and coordination** • **Conduct regular satisfaction surveys for both patients and staff to identify areas for improvement and celebrate successes** • **Develop a disaster preparedness plan to ensure the hospital is ready to respond effectively to emergencies and natural disasters** • **Create a dedicated space for family members to wait comfortably during surgeries or procedures or after discharge for the patients** • **Conduct regular audits of billing processes to ensure accuracy and transparency in patient charges** • **Introduce wellness programs for staff to promote their physical and mental health, thereby improving overall job performance and satisfaction** • **Ensure regular maintenance and updating of the Hospital Information System (HIS) to prevent technical issues and improve data accuracy** • **Introduce a triage system in the OPD to prioritize patients based on the urgency of their medical needs**

	• **Develop an internal communication platform for staff to share updates, and announcements, and coordinate activities more effectively** • **Develop multilingual informational materials and signage to cater to non-Hindi and non-English speaking patients** • **Create a patient liaison team to assist with navigating the hospital system, addressing concerns, and providing real-time support**

Signature of the Student:

Approved by the IIHMR University's Mentor: