ETERNAL HOSPITAL, SANGANER

HISTORY:
Eternal Hospital (a unit of Eternal Heart Care Centre and Research Institute) is a tertiary care facility situated in Sanganer, Jaipur. This esteemed institution was established through the vision of Dr. Samin K. Sharma, a distinguished Interventional Cardiologist at Mount Sinai Hospital, New York, USA. Eternal Heart Care Centre (EHCC) was founded in 2013, with its branch, Eternal Hospital, Sanganer (EHS), commencing operations in October 2019. EHCC operates with a capacity of 250 beds, while EHS, with over 100 beds, stands as the only hospital in the state accredited by both JCI and NABH.

VISION: To provide high quality care and to touch the lives of the people through excellence in clinical care and affordable cost.

MISSION: To provide compassionate, accessible, high quality, patient centered, cost effective healthcare to one and all through best-in-class medical practices, technology and to work continuously to improve and sustain clinical outcomes, patient safety and satisfaction

PROJECT: Assessing Efficiency in Patient Discharge Process: From Verbal Clearance to Actual Discharge

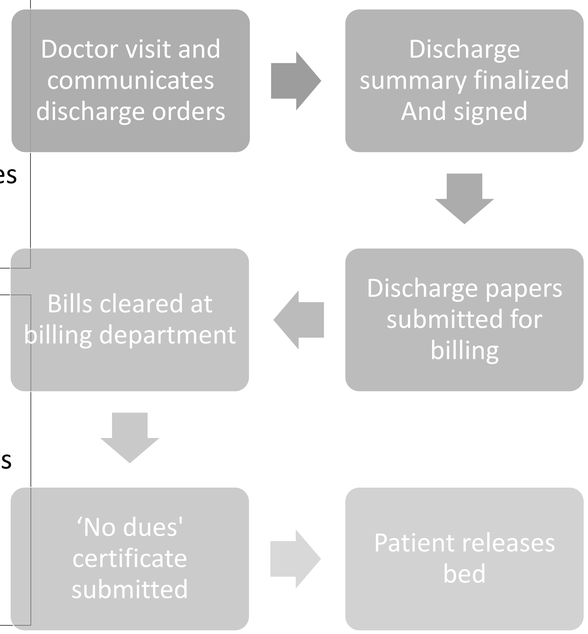
OBJECTIVE: To enhance discharge efficiency by identifying delay causes, quantifying delay times, assessing their impact on hospital operations, and recommending improvements to streamline the process and optimize resource use.

PROJECT FINDINGS:
- Average Discharge Process takes 336 minutes
- Out of 87 planned discharges, only 13 patients departed before 13:00, indicating significant delays.
- The doctor's visit, averaging 166 minutes after 9 AM, and the discharge summary finalization, averaging 119 minutes, were identified as major bottlenecks.

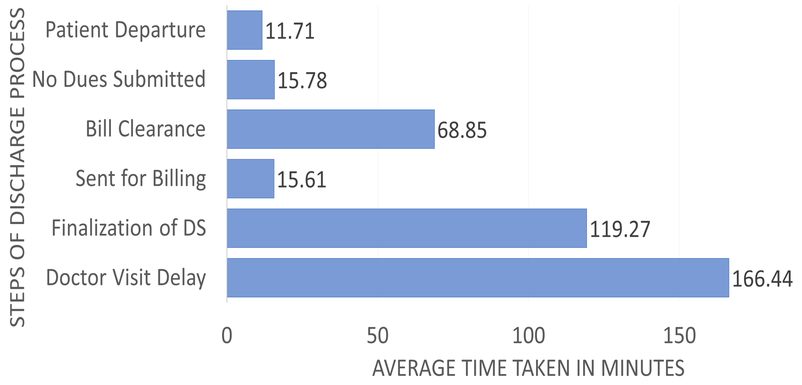
LEARNINGS:
Understanding Operational Efficiency
Interdepartmental Communication Skills
Data Analysis Techniques
Resource Management Insights

USEFULNESS:
Medical Industry Exposure
Collaboration with Healthcare Professionals
Communication Skill Development
Financial Impact Awareness

STEPS OF DISCHARGE PROCESS



Time Taken at each step of Discharge Process in Minutes

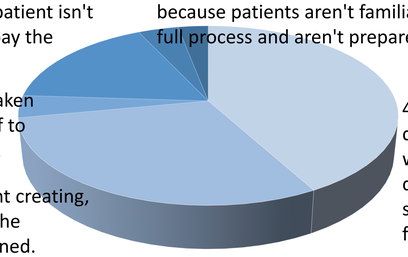


KEY REASONS FOR DELAY IN DISCHARGE PROCESS

17% of the time is spent on bill clearance, possibly because the patient isn't prepared to pay the amount.

7% of the time is taken by no dues submission and patient departure, mainly because patients aren't familiar with the full process and aren't prepared.

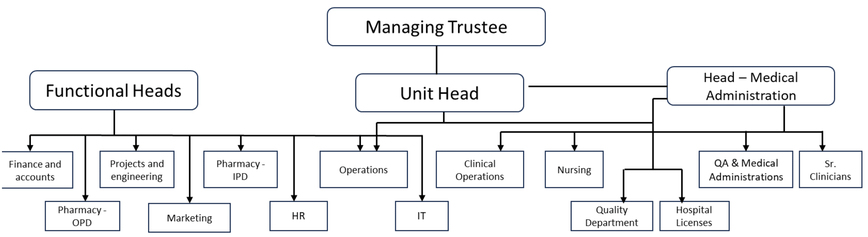
5% of the time is taken by the nursing staff to send file for billing.



41% of the entire discharge process time is wasted due to delays in doctor rounds, which should not be necessary for planned discharges.

30% of the time is spent creating, finalizing, and getting the discharge summary signed.

ORGANIZATION STRUCTURE:



CHALLENGES:
Adjusting from academic learning to the complexity and pace of real-world scenarios
Overcoming communication gaps and ensuring clear, effective interactions with staff members.
Building trust and demonstrating the ability to effectively assist with tasks took time and effort.

RECOMMENDATIONS:
- Stick to doctor schedules and have backups ready.
- Prepare discharge summaries early for review.
- Provide billing estimates and use express lanes.
- Inform families early for discharge readiness.
- Discharge cash, RGHS, TPA patients in 120/180/240 mins.
- To ensure patients leave by 13:00, the discharge summary must be finalized by 11:13 at the latest.

STRENGTHS:
- Established brand reputation
- Strong patient satisfaction
- Skilled doctors
- Robust staff training programs
- High-quality facilities

WEAKNESSES:
- The hospital had very limited space
- Poor floor management
- Inconsistent interdepartmental communication
- Insufficient patient counselling

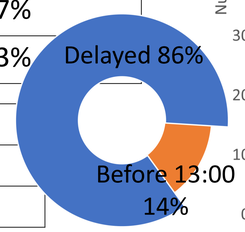
SWOT

OPPORTUNITIES:
- Growing healthcare demand
- Enhanced telemedicine services
- Strategic partnerships
- Government healthcare initiatives

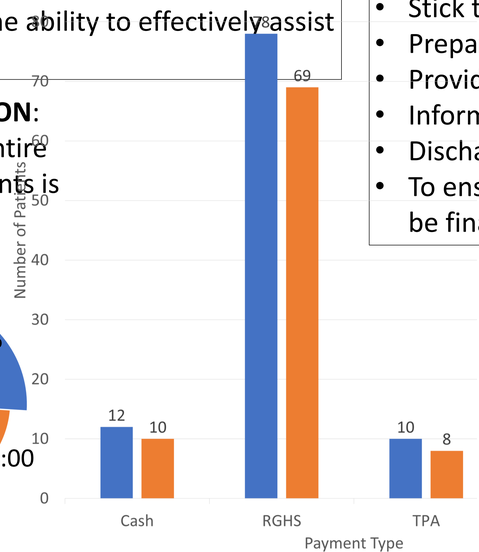
THREATS:
- Increasing competition
- Staff dissatisfaction
- Dissatisfied patients
- Health policy shifts

DATA ANALYSIS & INTERPRETATION:
The average time taken for the entire discharge process across all patients is 397 minutes.

Planned	87%
Unplanned	13%



Cash	12%
RGHS	78%
TPA	10%



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