IIHMR UNIVERSITY

Aster PRIME HOSPITAL
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ASTER DM HEALTHCARE

A Study On Discharge Process at Aster Prime Hospital, Hyderabad

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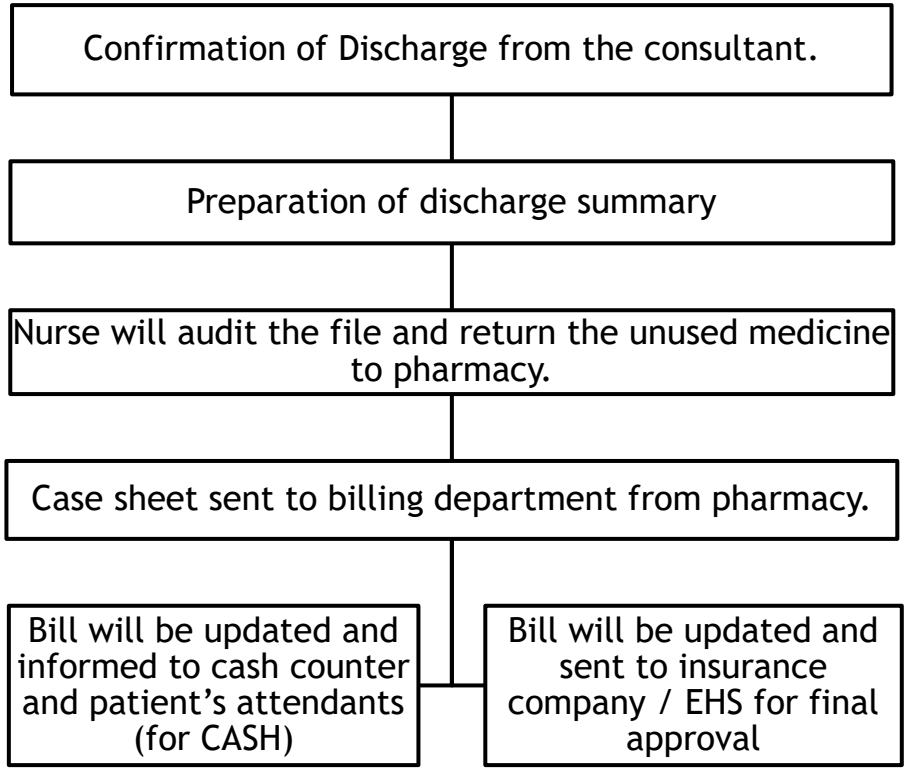
Discharge Process

Definition-“It can be defined as the processes, tools and techniques by which an episode of treatment and/or care to a patient is formally concluded by a health professional, health provider organization or individual.”

The discharge process represents the final contact between the patient and the hospital health professionals, and the outcomes of all procedures undergone by the patient are recorded at this stage

Discharge Process Flowchart Phase I



Discharge Process Phase II for cash patients

Patient attenders will go to cash counter and collect the checkout slip.

Checkout slip will be submitted at nursing department.

Collection of discharge summary and clinical documents from nurse station .

CHECK OUT

Discharge Process Phase II for Insurance/EHS Patients

Final approval received from Insurance / EHS.

Bill will be closed and informed to cash counter.

Patient attendants will go to cash counter & collect the checkout slip.

Checkout slip will be submitted at nursing department.

Collection of discharge summary and clinical Document from nursing station and CHECK OUT

Types of Discharge:

Discharge on advice

- The consultant shall advise discharge on satisfaction with the patient's condition.
- Discharge information shall be give to the resident / registrar / staff nurse/ ward secretary.
- Discharge summary shall be prepared by the resident in writing and approved by the consultant with signature.
- Consultants shall sign all discharge summaries / discharge briefs / death summaries, stating the date

Leave against Medical Advice (LAMA)

- The process for patient leaving the hospital on LAMA shall be the same as discharge on advice. However consent from patient is recorded on DAMA form.

Organization Profile

Aster Prime Hospital, Hyderabad is one of the chains of super speciality hospitals which is a part of the Aster DM healthcare group who is an emerging healthcare provider in India and the Middle East.

As a leading healthcare industry, Aster hospitals are certified by the National Accreditation Board for Hospitals & Healthcare (NABH), and their high-end laboratory is NABL certified.

Aster Prime Hospital, Hyderabad offers quaternary medical treatment with latest infrastructure and facilities on par with global standards to guarantee world-class healthcare to all the patients.

BRAND VALUE

“WE’LL TREAT YOU WELL”- To Reflect our confidence in our patient and trust in our medical and managerial team.

FACILITIES& SERVICES

Bed capacity of 204 Beds
24/7 Emergency service
24/7 modern laboratory & Radiology service
24/7Cath lab Service
24/7Blood Bank service
2D Echo
Dexa Scanning
Neurophysiology
Endoscopy
Equipped Operational Theatre
Equipped critical care.
Interventional Pulmonology
One of the Hospitals across the nation to own Philips's 3D Echo CVX Machine

Objectives

- To understand the patient discharge Process.
- To understand the reasons of delay in the discharge procedure.
- Recommend steps to shorten the time which takes patients to be discharged.
- To understand the timing differences between cash and insurance mode of payment.
- To understand the significance of HIMS software in discharge process.

Research Methodology

- Research method- Cross Sectional Study
- Sampling method- Convenience Sampling
- Sample Size- Total= 181 (Cash=97,Insurance=84)
- Data collection method (Tool)- Discharge Trackers and HIMS software as time taken in each steps are noted on discharge trackers and can be verified using HIMS software.
- Data Analysis- Data analysis done using Excel sheet.

Turn Around Time for Discharge Process

- In order to attain satisfaction level through discharge process it is important to plan the whole discharge procedure effectively. If discharge planning is delayed the patient stay gets unnecessarily extended leaving them frustrated and incurring unnecessary expenses on them.

- In order to reduce the TAT, the hospitals need to study the time taken for the whole discharge process beginning from Discharge order time till the patient leaves the Hospital.

- The TAT for discharge can be broken down into

Discharges for the month of May

Category	Discharge trackers collected
CASH	97
INSURANCE	84
TOTAL	181

FIG 3: Showing the time taken for discharge process - Cash.

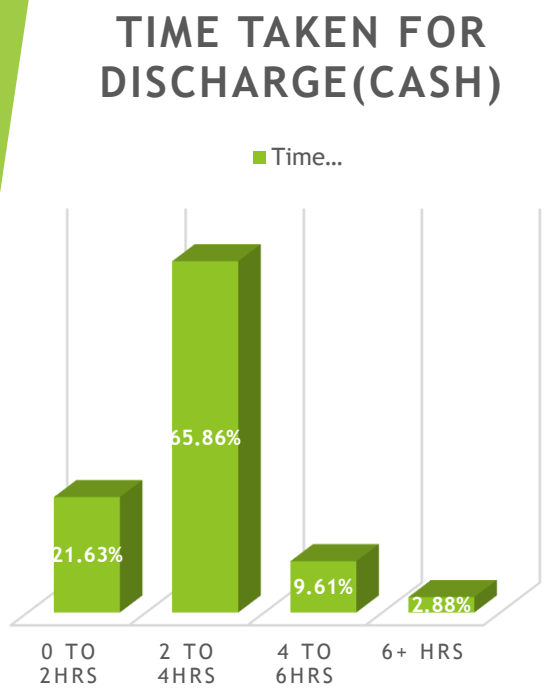
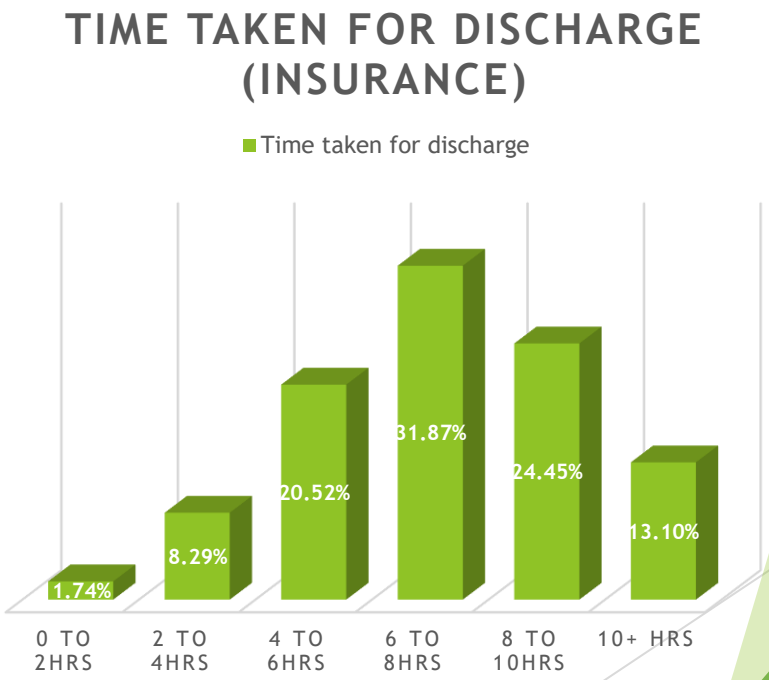
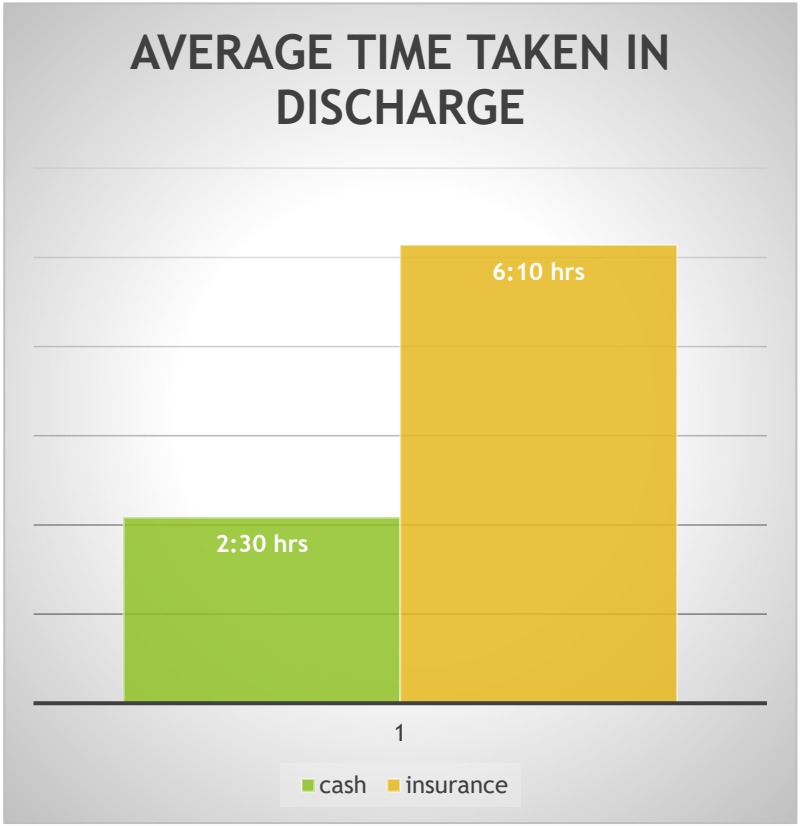
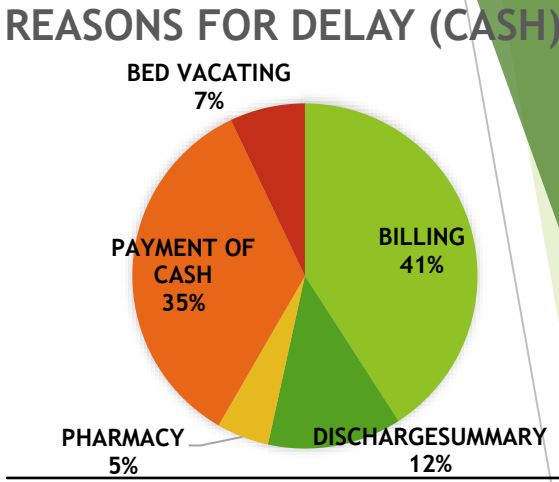


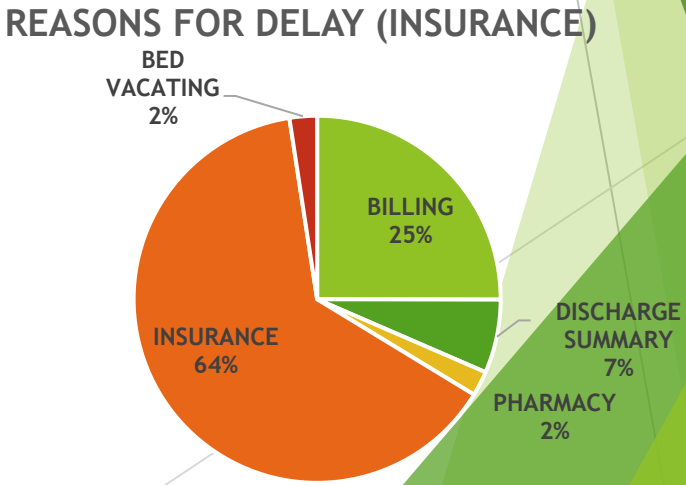
FIG 4: Showing the time taken for discharge process - Insurance.



Data Analysis







Data Collection Parameters

- Time when doctor advised for discharge (t1)
- Time when discharge summary is ready (t2).
- TAT1= t1-t2
- Time when pharmacy returns are sent(t3).
- Time when pharmacy acknowledged the receipts(t4).
- TAT2= t3-t4
- Time when bill is ready (t5).
- TAT3= t5-t1
- If Insurance- Time when insurance approval is received(t6).
- Time when patient closed the bill (t7).
- TAT4=t7-t1
- Time when patient left the ward(t8).
- TAT5=T8-T1

FINDINGS

- The first cause of discharge delay is discharge planning by the consultant that is done on the day of discharge which delays further process (t1).
- Major delay in discharge is billing and insurance process that takes more than 5-6 hours after the discharge summary and pharmacy returns are done. This can be optimized by framing a proper discharge policy(t5).
- Another area of delay is pharmacy clearance, due to lack of manpower to carry out the process.(t4)
- For Insurance patients discharge ,the approval time takes more than 4-5 hrs, due to too many queries and approval by TPA which is thrice compared to cash patients.(t6)
- Reason for delay in bed allotment is due to fail in closing the discharge status in HIS after the patients vacating (Manual error by staff)

RECOMMENDATION AND SUGGESTIONS

- The consultant may be asked to take rounds for likely discharge patients first and then to others or preplan the discharge on the previous day (Reduction of t1).
- The time taken for bill generation can be reduced by closing all the pending bills before discharge intimation to the billing department and proper communication between departments to close the bill.(Reduction of t5)
- Fully integrated HIMS System for faster streamlining of process.
- All ward secretaries should be provided with guidelines in discharge procedures to reduce the delay in time taken for discharge process(to avoid manual errors and delays).
- Adequate pharmacist should be allotted for each ward to carry out the clearance process.(Reduction of t4)
- Hospital can hire major TPA’s and complete the approval process quicker for faster discharge of insurance patients.(Reduction of t6)

CONCLUSION

Discharge of patients is one of the important areas that needs improvement in hospital. To reduce the delay in discharge ,the hospital needs proper cooperation and coordination of other department staffs.

Also reducing the discharge process timings of hospitals lead a lot of benefits to the hospital and proves to be very fruitful in terms of cost benefit analysis, in terms of revenue and for patient satisfaction to sustain in this competitive world.

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Thank You