

Synopsis

1. TITLE: Gap Analysis of Delay in Discharge Process at Dr. Mukesh Baghel Multispecialty Hospital, Agra

2. INTRODUCTION:

Hospital discharge processes are crucial for patient flow, efficient bed utilization, and overall patient experience. Timely discharge reduces hospital stay costs and improves patient satisfaction. However, delays in discharge can occur due to various factors, leading to increased TAT. This study aims to identify gaps contributing to extended TAT in the discharge process at Dr. Mukesh Baghel Multispecialty Hospital Agra.

3. RESEARCH QUESTION:

How can Turnaround Time (TAT) in the discharge process be reduced at Dr. Mukesh Baghel Multispecialty Hospital, Agra, to improve patient satisfaction and operational efficiency?

4. OBJECTIVES:

- To identify key delay points in the discharge process, particularly in billing, pharmacy clearance, and documentation preparation.
- To evaluate the efficiency of the discharge process based on Turnaround Time (TAT) and assess the impact on patient satisfaction.
- To recommend process improvements, such as discharge planning, better documentation practices, and dedicated discharge coordinators, to reduce overall discharge TAT.

5. HYPOTHESIS:

Null Hypothesis -There is no significant difference in the turnaround time (TAT) of the discharge process in Dr Mukesh Baghel Multispecialty Hospital.

Alternate Hypothesis -There is a significant difference in turnaround time (TAT) of the discharge process in Dr Mukesh Baghel Multispecialty Hospital.

6. MATERIAL AND METHODS Study Design:

This study will utilize a cross-sectional observational study design.

Setting: The study will be conducted at Dr Mukesh Baghel Multispecialty Hospital, multispecialty hospital located in Agra Uttar Pradesh.

Study Population:

- Inclusion criteria: All adult patients discharged from Dr Mukesh Baghel Multispecialty Hospital during a defined period.

- Exclusion criteria: Patients who died during hospitalization or were transferred to another facility.

Study Tools:

- Medical records review: Data on patient demographics, diagnosis, length of stay, and discharge TAT will be collected from electronic medical records (EMR).

- Semi-structured interviews: Key stakeholders involved in the discharge process for e.g., nurses, physicians, etc.... will be interviewed to understand their perspectives on delays and potential gaps.

Duration of Study: The study is expected to be completed within 3 months.

Sample Size: A sample size of 150 patient records will be analyzed, along with interviews with key stakeholders.

Sampling Technique: A convenient sampling technique will be used to select patient records based on discharge and length of stay. Purposive sampling will be used to select key stakeholders for interviews.

Data Collection Procedure: Data will be collected through a review of medical records and semi-structured interviews conducted in person or via phone.

Operational Definitions:

- Turnaround Time (TAT): Defined as the total time elapsed between the decision to discharge a patient and their actual departure from the hospital.

- Discharge Delay: Defined as any event or factor that prolongs the discharge process beyond a predetermined timeframe.

7. DATA ANALYSIS PLAN:

Data from medical records will be entered into a spreadsheet and analyzed using descriptive statistics (e.g., mean, median, range) to calculate TAT and identify stages with frequent delays.

8. ETHICAL CONSIDERATIONS:

This study will adhere to ethical principles. Informed consent will be waived for the medical record review. Interview participants will be informed about the study objectives and their right to confidentiality will be ensured. All data will be anonymized.

9. IMPLICATIONS OF RESEARCH:

Findings from this gap analysis will help identify areas for improvement in the discharge process at Dr Mukesh Baghel Multispecialty Hospital addressing these gaps, the hospital can achieve faster TAT, leading to improved patient flow, bed utilization, and overall patient experience. Additionally, the study findings may be applicable to other healthcare settings facing similar challenges.

10. REFERENCE:

1. Chaudhari PS, Shinde V, Gudhe V. A Study on Reducing the Discharge Turnaround Time of IPD Patients at AVBRH.
2. Sharma MR, Kapadia N, Raval MS, Shah MS, Patel MA. A STUDY OF DISCHARGE PROCESS WITH STRATEGY TO REDUCE THE TURN AROUND TIME IN TERTIARY CARE HOSPITAL.
3. Hisham S, Rasheed SA, Dsouza B. Application of predictive modelling to improve the discharge process in hospitals...