

SYNOPSIS

Submitted By – Siddhartha Kale

Roll No – 1725

MBA- HOM

2023-2025

1. **TITLE:** Optimizing Homecare Services in a Superspeciality Maternity Hospital: Current Practices and Future Recommendations
2. **INTRODUCTION:** Homecare services have become an essential extension of hospital-based care, especially in maternity-focused superspeciality hospitals where continuity, comfort, and convenience play a critical role in patient satisfaction and outcomes. With increasing demand for services such as home nursing, home vaccinations, postnatal care, and remote monitoring, hospitals are expected to deliver quality care beyond their physical boundaries. This study aims to analyze the current state of homecare services in a superspeciality maternity hospital, identify operational and service-level gaps, and provide actionable recommendations to optimize care delivery.
3. **RESEARCH QUESTION:** How can the homecare services of a superspeciality maternity hospital be optimized by analyzing the current practices and identifying areas for improvement in service delivery?
4. **OBJECTIVES:**
 - To assess the current structure, processes, and service offerings of homecare services in a superspeciality maternity hospital.
 - To identify operational, clinical, and patient-related gaps or challenges in the delivery of existing homecare services.
 - To propose practical and evidence-based recommendations for optimizing homecare services to improve efficiency, patient satisfaction, and clinical outcomes.
5. **HYPOTHESIS:** Optimizing the current homecare services in a superspeciality maternity hospital will lead to improved operational efficiency, enhanced patient satisfaction, and better continuity of care
6. **MATERIAL AND METHODS:**

STUDY DESIGN: This study will employ a mixed- method descriptive study (Retrospective and Prospective)

SETTING: The study will be conducted at Cloudnine hospital which is a superspeciality maternity care hospital with high volume of maternity specific patients.

STUDY POPULATION

- **Inclusion criteria:** New mothers who have just delivered and opting for home care services.
- **Exclusion criteria:** Patients not opting for home care services or are gynecology and fertility specific patients.
- **Study tools:** Process mapping templates, Service Performance Dashboard will be used.

DURATION OF STUDY: Study will include data of 6 months from December, 2024 – May, 2025.

SAMPLE SIZE: A sample size of 300 patients will be included, using convenient sampling due to small volume and accessibility constraints.

DATA COLLECTION PROCEDURE: Data will be collected from hospital's HMIS system for past months along with active data tracking for services wise data for current months.

OPERATIONAL DEFINITIONS:

- **Homecare Services**

Definition: These are the clinical and supportive healthcare services that the hospital provides to patients at their homes, such as home lab tests, nursing care, vaccinations, pharmacy deliveries, and ear piercings.

Measurement/Determination: We'll assess these services by reviewing records from the hospital's Management Information System (MIS) for the past 6 months, as well as observing current processes to understand how these services are delivered.

Type: **Exposure Variable**

- **Service Utilization**

Definition: This refers to how often patients use the homecare services offered by the hospital.

Measurement/Determination: Will measure this by looking at the number of service requests and completions recorded in the MIS.

Type: **Outcome Variable**

- **Service Gaps**

Definition: These are any areas where the homecare service delivery is not as efficient as it could be, including delays or disruptions.

Measurement/Determination: Will identify these gaps through process mapping and analysing both the MIS data and workflow observations.

Type: **Outcome Variable**

- **Optimization**

Definition: This refers to improving the delivery of homecare services by addressing the identified gaps.

Measurement/Determination: Will use gap analysis and develop suggestions based on evidence to improve the services.

Type: **Outcome Variable (End Goal)**

7. DATA ANALYSIS PLAN: The data will be analyzed using Microsoft Excel (Microsoft 365). Descriptive statistics like counts, percentages, averages, and trends will help summarize key aspects such as service utilization, turnaround time, and delays. Comparisons and trend analysis will be done using Excel tools like pivot tables, charts, and formulas to identify patterns. The aim is to generate meaningful insights from the data that can guide practical recommendations for improving homecare services.

8. ETHICAL CONSIDERATIONS: As this study involves analysis of secondary data from the hospital's Management Information System (MIS) and observation of existing processes, no direct interaction with patients will take place. Hence, informed consent is not required from patients. However, verbal consent will be obtained from relevant staff during process observations. All data will be handled with strict confidentiality. Patient identifiers will not be used, and data will be anonymized where necessary. Access to data will be restricted to the researcher, and all digital records will be stored securely with password protection. The study will adhere to ethical guidelines to ensure privacy, respect, and data integrity throughout.

9. IMPLICATIONS OF RESEARCH: This study will help improve the efficiency and quality of homecare services in a superspeciality maternity hospital. The insights can guide service enhancements, benefiting both the hospital by streamlining operations, increasing revenue and patients' satisfaction by ensuring timely, convenient care at home.

10. REFERENCES:

- Landers S, Madigan E, Leff B, Rosati RJ, McCann BA, Hornbake R, et al. The future of home health care: a strategic framework for optimizing value. *Home Healthcare Now*. 2016;28(4):262–78.
- Shah S, Diwan S, Kohli C. Home-based care: a key component in maternal and newborn health services. *Indian J Public Health*. 2020;64(3):208–12.
- World Health Organization. Strengthening home-based care for mothers and newborns: a resource for program managers. Geneva: WHO; 2015.