Analyzing Discharge Turnaround Time and Delays in the IPD Discharge Process

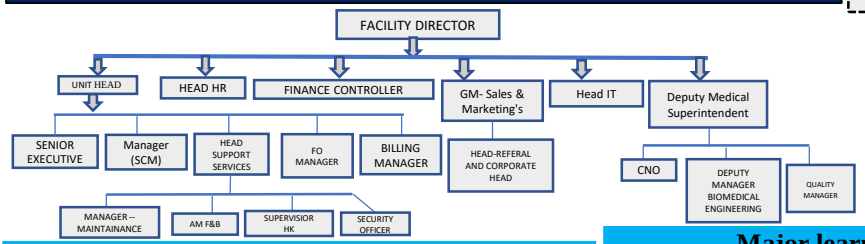
About Paras Health

- Paras Healthcare Pvt. Ltd. Is a chain of hospitals that offers specialized tertiary medical care.
- The first Paras Hospital was established in **Gurgaon in 2006** and was founded by **Dr. Dharmendra Nagar**.
- They have eight hospitals that operate under the "Paras Health" brand, which are spread across five states and one union territory in North India: Gurugram and Panchkula in Haryana; Patna and Darbhanga in Bihar; Kanpur, Uttar Pradesh; Udaipur, Rajasthan; Ranchi, Jharkhand; and Srinagar in the union territory of Jammu and Kashmir.
- Paras Yash Kothari Hospital, located in Kanpur, stands as a beacon of medical excellence in the Mithilanchal region.
- With a robust infrastructure of 100 beds, their state-of-the-art facility offers a wide spectrum of medical services. This hospital hosts a distinguished team of specialists in Cardio Science, Gynecology, Neuroscience, Onco Science, Gastroenterology, Dental and many more. With an expanded capacity of **435 beds in Paras Hospital, Kanpur,** they continue to set benchmarks in healthcare delivery.

VISION: Partner for Healthy Bharat

MISSION: To make affordable and quality tertiary health accessible to the communities they serve with compassion, and provide specialized tertiary medical care in Tier 2 and 3 cities, while seeking to strike balance between providing quality healthcare services and affordability.

ORGANOGRAM



Key Suggestions for Improvement

1. Strengthen Inter-Departmental Handoff Protocols
2. Establish clear, documented Service Level Agreements (SLAs) for inter-departmental tasks related to discharge.
3. Optimize Discharge Summary Authorization & Documentation.
4. Perform regular audits of the discharge process.
5. Expedite Discount and Corporate Billing Verification.
6. Address Patient Payment Delays with Clear Communication & Options.
7. Resolve Billing System/Package Code Issues.
8. Comprehensive HIS Training for All Nursing Staff (Especially New Joinees)
9. Enhance Patient Education & Communication Skills Training for Clinical Staff.
10. Strategic Manpower Planning & Resource Allocation

Challenges Faced

- Some staff were reluctant to cooperate during observations.
- Limited Guidance Availability.
- Difficulty in collecting complete and accurate Discharge Data.

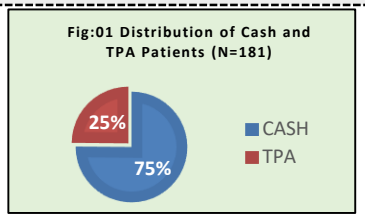
Topic: Analysis of Discharge Process (TAT)
Organization Name: Paras Health, Kanpur
Name: Dr. Shefali Mishra
Roll No.: 2075
Stream: MBA HM 29th (2024-2026)
University mentor: Dr. Anupam Mehrotra
Organization mentor: Dr. Riddhi Purwar

Discharge Process:

- The discharge process in a hospital is an intricate orchestration, functioning seamlessly due to the collective efforts of various departments and staff members. Each individual plays a crucial role in ensuring a smooth and efficient discharge process for patients.

Objectives:

- To analyze discharge turnaround time in HIS
- To identify the bottle necks in the discharge process.
- To evaluate the interdepartmental communication and coordination.
- Suggest strategies to improve discharge efficiency.



Major learnings during Internship

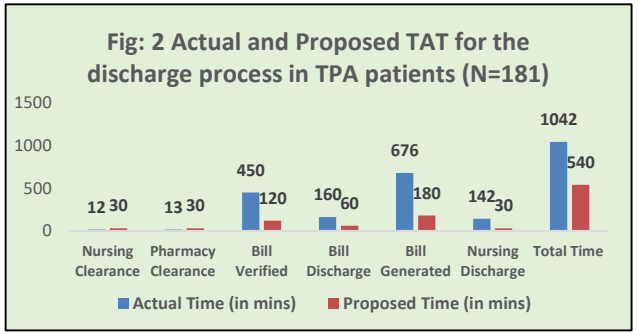
- Gained in-depth exposure to IPD discharge workflow from initiation to patient exit and understood coordination between nursing, pharmacy, billing, and TPA departments.
- Learned how to track, analyze, and calculate TATs (Turnaround Times) and identified delays in key areas such as billing initiation, nursing discharge, and TPA approval.
- Observed real-world gaps and bottlenecks in the discharge process.
- Understood the ideal discharge timelines as per NABH standards.
- Improved skills in data cleaning, average calculation, and visual presentation (pivot/bar charts).
- Gained experience in using Excel/Google Sheets for healthcare data analysis.
- Developed confidence in observational auditing, interviewing staff, and handling sensitive process data.

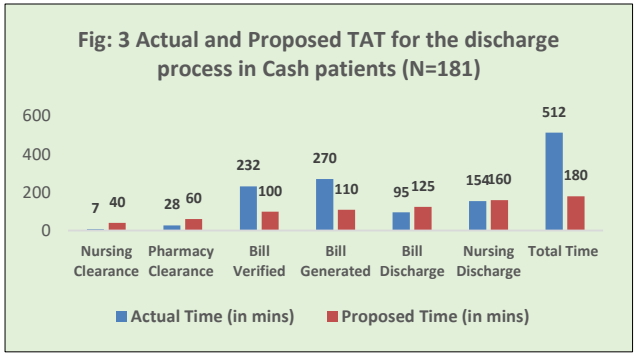
Practical vs Theoretical learning

- **Theoretical:** Learnt about hospital policies, understood roles of various department in Hospital services module, learned structured communication modules, NABH standards.
- **Practical:** Identified deviations from NABH guidelines in live discharge cases, Interacted with different stakeholders to understand workflow, Faced real challenges in inter-departmental communication.

Methodology:

- **Study area:** IPD wards (3rd floor)
- **Study type:** Descriptive study
- **Study duration:** 16th May, 2025 to 16th July, 2025
- **Sampling and sampling size:** Convenient sampling, 180 patient discharges (both cash and insurance) between 9 am to 6pm.
- **Inclusion criteria:** Only Cash (corporate cash patients) and TPA patients were included in the study.
- **Exclusion criteria:** Time taken for the discharge of Ayushman patients and CGHS patients were not recorded, Discharges that took place after 6pm were not recorded.





STRENGTHS

- Practical exposure to hospital operations
- Hands-on data collection and analysis.
- Opportunity to interact with multiple departments.

WEAKNESS

- Communication gap within staff.
- Difficulty accessing real-time discharge information.

OPPORTUNITIES

- Suggesting TAT improvement strategies to management.
- Future consulting opportunities in hospital quality process.

THREATS

- Staff resistance to change.
- Patient dissatisfaction due to delays.
- Multiple competitors.