



SUMMER INTERNSHIP AT FORTIS HOSPITAL, MOHALI



Title Of Study: From Plan to Discharge: An Analysis of TPA and NON TPA Discharges.



AIM:

To track and analyze Planned Discharges and TAT-based Length of Discharges for TPA and NON TPA patients.



OBJECTIVE:

- ✓ To study discharge process.
- ✓ Implementing Pre-Discharge Checklist
- ✓ To conduct analysis of planned discharges and to streamline and expediate the discharge process of planned discharges through pre-discharge checklist.
- ✓ To analyze and compare TAT based length of discharge for TPA and NON TPA patients.

METHODOLOGY:

No. of patients: 3836 Study period: 74 days
Type of study: Observational study
Inclusion criteria: Patients from all wards. (A1, A2, A3, A4, A6, A7)
Exclusion criteria: Intercompany payors
Type of data: Quantitative Data
Primary data: Data is provided by Ward MO of various wards in the evening for planned discharges the coming morning.
Secondary data: Collected through HIS.

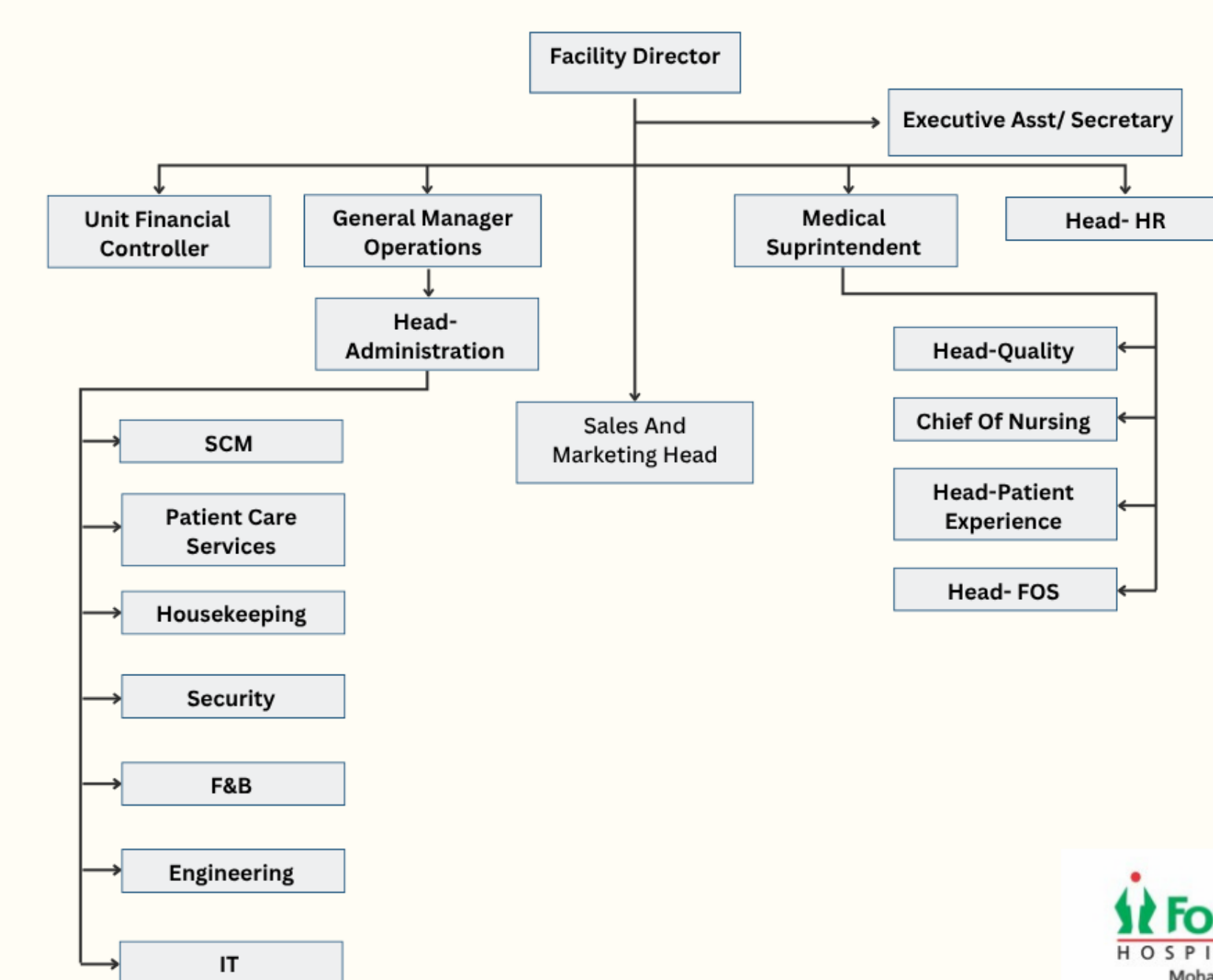
About The Organization

Fortis Hospital, Moali, established in 2001, is a leading Multispeciality tertiary care Hospital in North India, Known for advanced care in Cardiac Sciences, Orthopedics, Neurosciences, Oncology, Transplants, Critical Care and Vascular and Robotic Surgery. Accredited by NABH and JCI(2007), it is a part of Fortis Healthcare network and is known for its excellence in clinical care and patient services.

Vision

To create a world-class integrated healthcare delivery system in India, entailing the finest medical skills combined with compassionate patient care.

ORGANIZATIONAL CHART

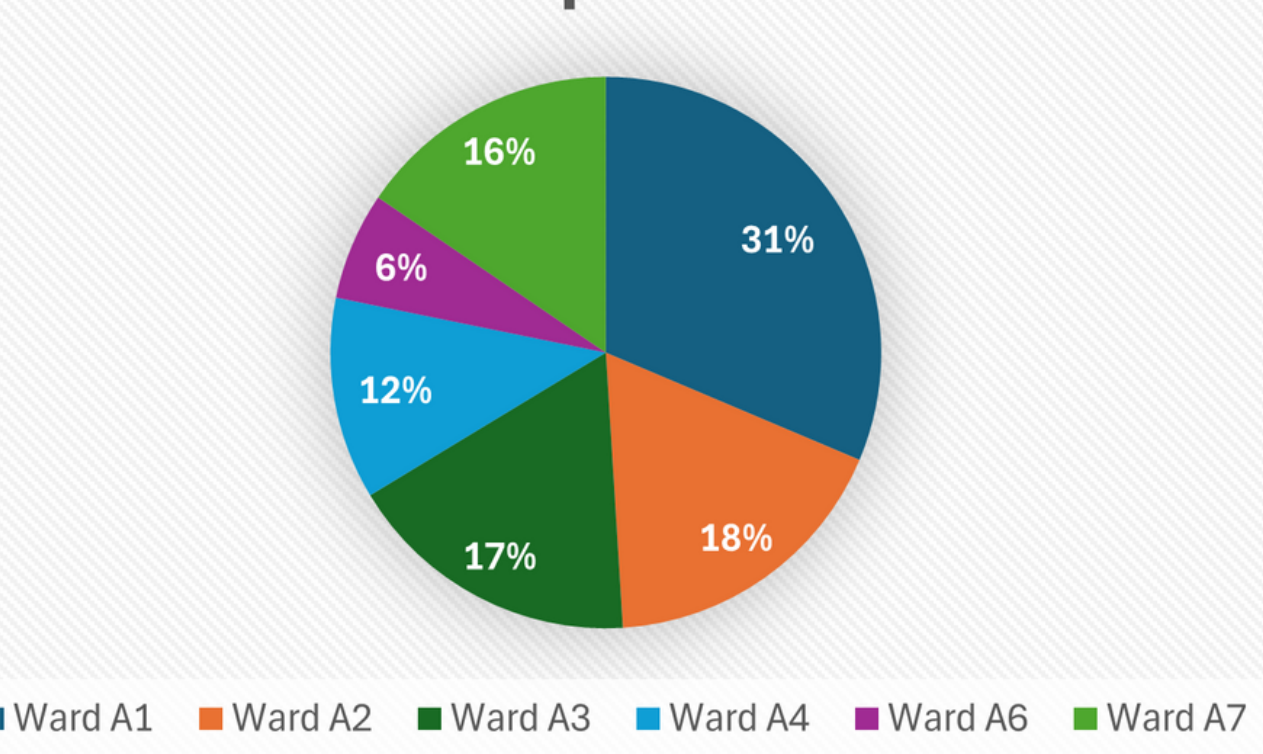


Mission

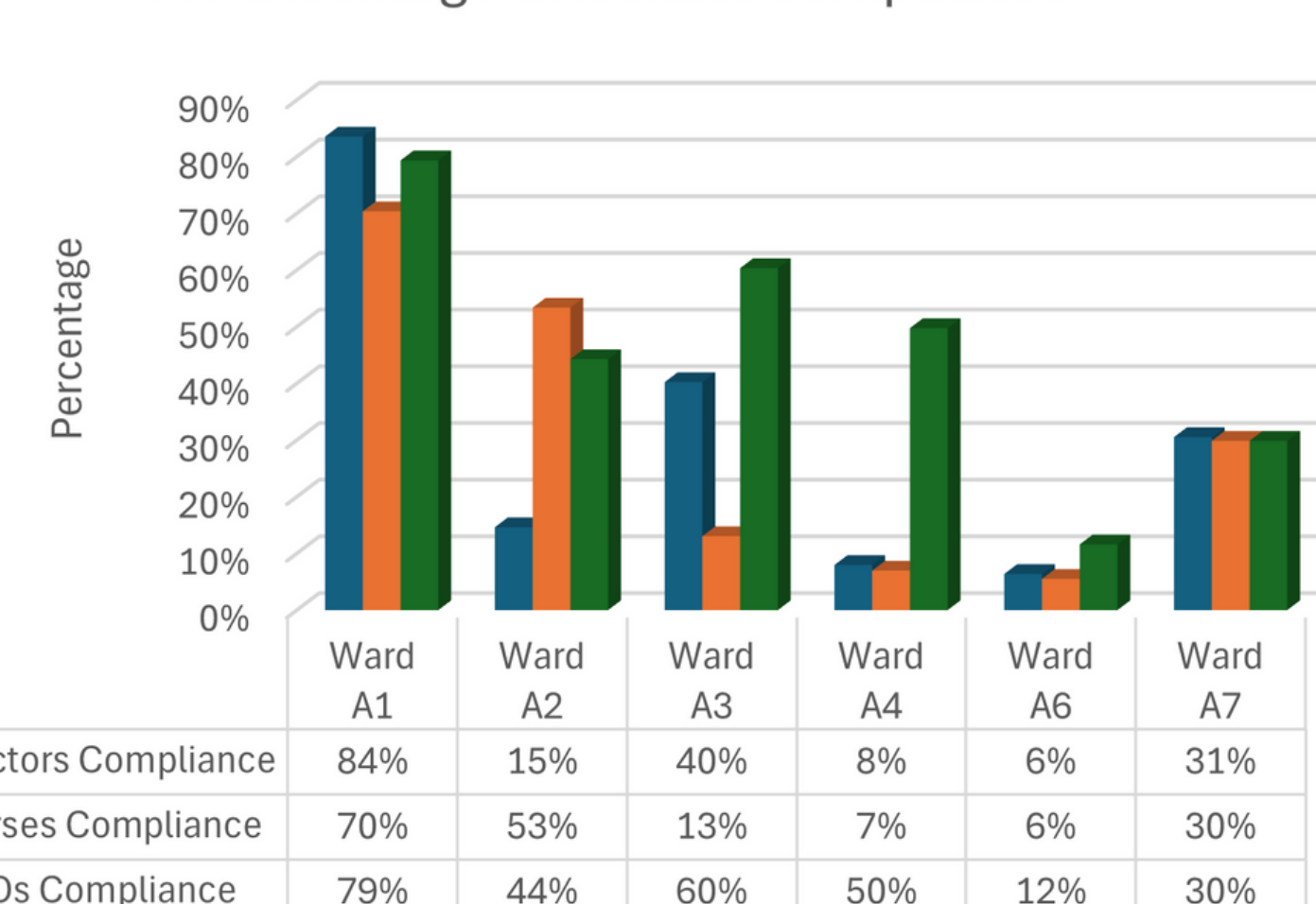
To be a globally respected healthcare organisation known for Clinical Excellence and Distinctive Patient Care.

DATA ANALYSIS

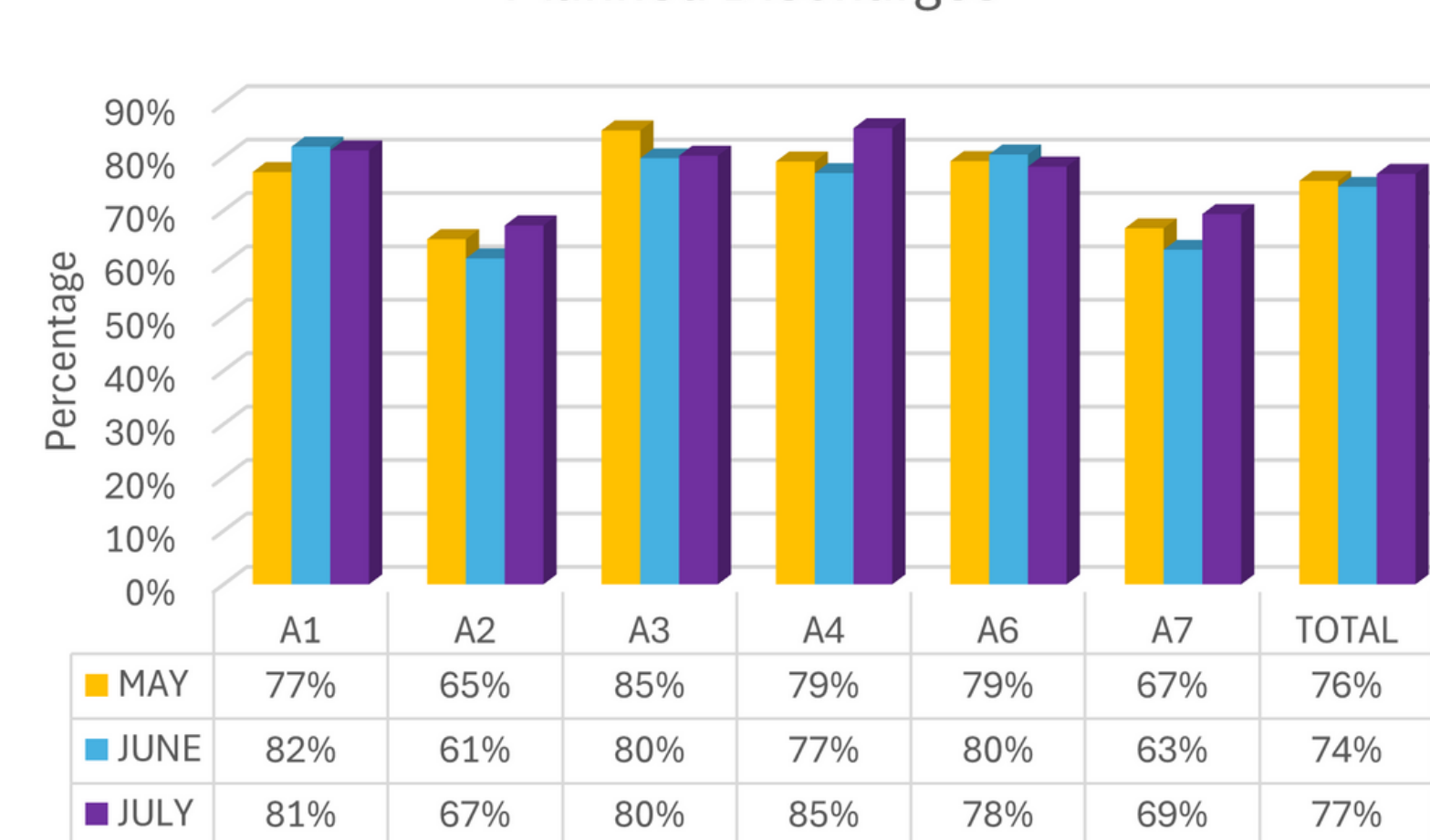
Pre-Discharge Checklist-Overall Compliance



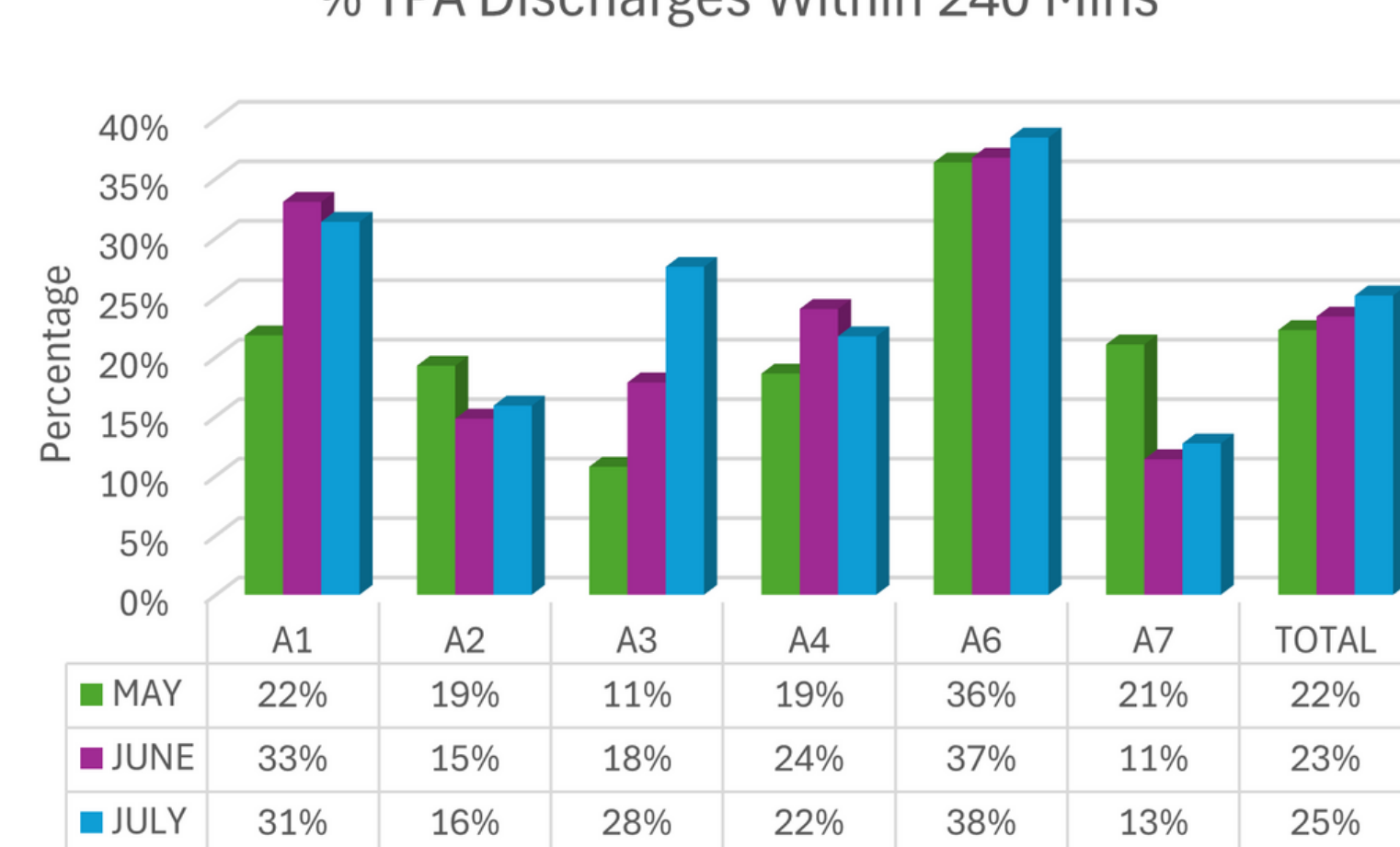
Pre-Discharge Checklist Compliance



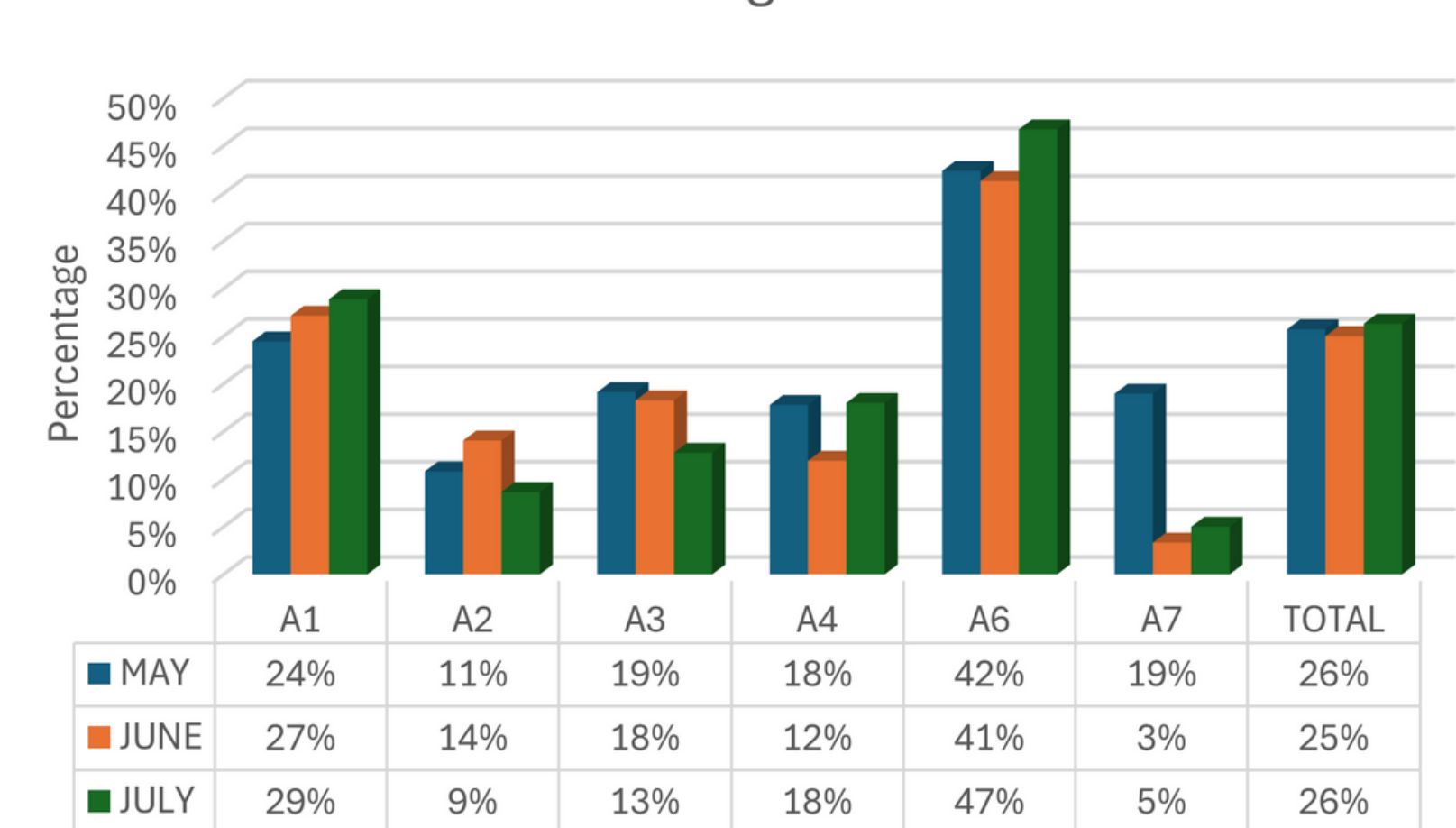
Planned Discharges



% TPA Discharges Within 240 Mins



% Non TPA Discharges Within 90 mins



Non TPA						
Months	Total Discharges	Bill Clearance	GAMS	IPD Clearance	Physical Clearance	LOD
May	991	00:20:59	00:22:38	00:46:03	00:50:14	02:33:36
June	912	00:35:47	00:12:40	00:43:43	00:44:44	02:33:34
July	380	00:31:49	00:11:50	00:45:53	00:44:14	02:31:02

Table 1: Non TPA Average Turn Around Time and LOD

TPA						
Months	Total Discharges	Bill Clearance	TPA	IPD Clearance	Physical Clearance	LOD
May	575	01:01:29	03:24:38	00:27:42	00:34:44	05:42:44
June	688	01:02:52	03:16:12	00:30:09	00:33:23	05:38:36
July	290	01:06:58	03:05:17	00:31:06	00:34:13	05:34:52

Table 2: TPA Average Turn Around Time and LOD

TOWS MATRIX

	Strengths	Weaknesses
Opportunities	S-O Strategies: - Use established HIS/EMR and standardized protocols to automate more functions and accelerate digital transformation across departments. - Conduct regular trainings and workshops to ensure rapid adoption of technology and best practices across hospital. - Enhance patient centric initiatives by building strong compliance and monitoring patient outcome to design new programs that further improve patient experience.	W-O Strategies: - Targeted Resource Investment and Infrastructure Improvement - Focused Technology Adoption Workshops and Campaigns - Enhance Communication Skills and Protocols through workshops and tools.
Threats	S-T Strategies: - Leverage audit systems and quality frameworks to proactively identify and resolve process gaps, reducing the risk of non-compliance - Enhance interdepartmental communication to ensure operational continuity enhancing patient care and satisfaction - Use recognition programs and high performing teams as models to improve compliance and staff motivation.	W-T Strategies: - Implement workload balance, schedule breaks and staff assistance programs, schedule events to reduce physical and mental fatigue. - Minimize risks from Manual Dependency by transitioning to newer digital processes. - Targeted Improvement in areas through regular audits to convert weaknesses into opportunities before they become threats.

Key Learnings:

- Day-to-Day hospital Operations and Comprehensive Functioning of various Departments within Hospital
- Importance of Teamwork and Coordination
- Process Mapping
- Data Analysis and Data Based Decision Making
- Data Interpretation
- Information Management through HIS & EMR
- Professionalism

Suggestions to Organization:

- Hiring adequate staff to meet the staff shortage and prevent individual burnout of existing staff.
- Regular and repeated training for EMR.
- Improve clear and effective communication
- Pre-discharge checklist should be maintained and regular audits should be conducted for its compliance
- A person in-charge should be appointed to track daily discharges to improve discharges.

Difference b/w Theoretical and Practical Exposure:

- Practical Exposure equipped me with dynamics of organizational behavior, enhancing my problem solving skills, while theory equipped me with the framework of it.
- Practical Exposure of softwares like HIS and EMR helped me deepen my understanding of Digital Health along with its challenges in implementation.

Challenges Faced During Internship:

- Adapting to organization's Culture initially.
- Communication with staff of wards and interdepartmental communication during initial phase.
- Understanding complex processes in hospital.

SWOT ANALYSIS



STRENGTHS

- Comprehensive Departmental Integration
- Standardized protocols and data driven decision making.
- Focus on patient centric care
- Commitment to compliance and quality

WEAKNESSES

- Inconsistent Process Implementation
- Communication and Coordination Challenges
- Resource Constrains
- Infrastructure Limitations
- Slow Technology Adoption.

OPPORTUNITIES

- Further Process Automation
- Continuous Staff Training
- Facility and Infrastructure Upgrades
- Recognition and Engagement Programs
- Benchmarking And Best Practices.

THREATS

- Staff Burnout and Attrition.
- Regulatory and Compliance Lapses
- Patient Safety and Satisfaction Risks
- Competition and Market Expectations
- Technology and Cybersecurity Risks

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