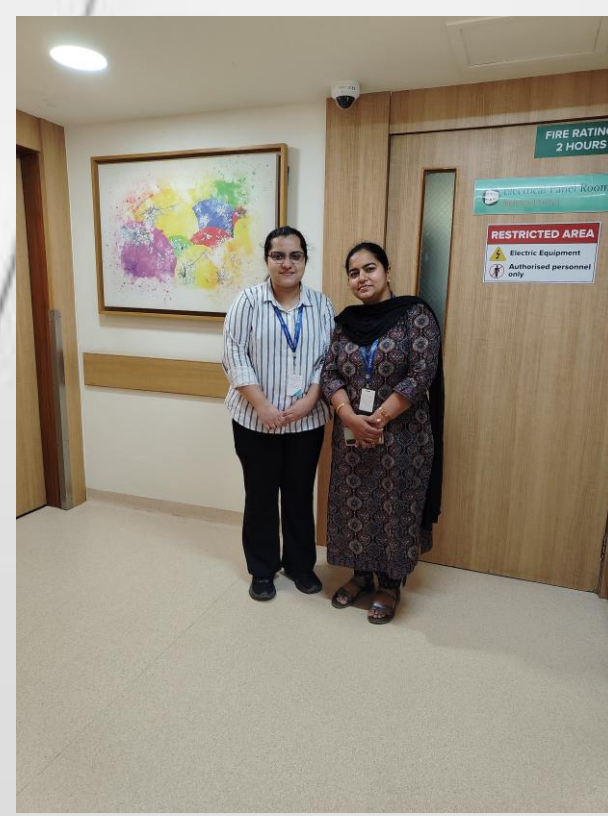




PROJECT ON OP TO IP CONVERSION PROCESS EVALUATION IN HOSPITAL

Presented by – Dr. Pratibha Boora
Batch - 2024-2026 (MBA Hospital and Health)
University mentor – Dr. Arindam Das (Professor)



Guided by:
Dr. Nutan Panda (Organization mentor)



Brief history and description about organization

Prior to being purchased by Max Healthcare in 2015, Saket City Hospital was the name of the 250+ bed tertiary care facility in South Delhi known as Max Smart Super Speciality Hospital, Saket. It provides cutting-edge care in cardiology, neurology, oncology, nephrology, and orthopaedics and is now a digitally enabled facility. It incorporates EMR, smart intensive care units, and tele-ICU systems and is well-known for renal transplants, intricate surgeries, and minimally invasive procedures. Accredited by NABH and NABL, and empanelled under TPAs, EWS, and CGHS. Offering ethical, patient-centered, and technologically advanced healthcare throughout North India, services include clinical research, DNB training, and international patient care.

Organization Vision and Mission

Vision: To put patients at the center of everything organization do by fusing cutting-edge technology, compassionate care, and medical excellence to make high-quality healthcare accessible.

Mission: The mission is to provide safe, moral, and excellent medical care to all patients using skilled personnel and cutting-edge medical procedures while treating each one with kindness and respect.

Organization structure



Challenges faced during internship

Process Discrepancies: Seeing notable irregularities in the exchange of information and patient flow, especially at crucial transition points such as the estimation desk.

Limitations on Information Access: Handling data collection while making sure that patient privacy and hospital system restrictions are strictly followed.

Learning during an internship

Optimizing Hospital Operations: Acquired vital knowledge on how to simplify intricate processes and boost productivity in a highly specialized hospital environment.

Improving Patient Experience: Recognized how smooth communication and navigation directly affect patient satisfaction and important decision-making processes.

SWOT Analysis

Strength	Weakness
- Reputable hospital; strong clinical foundation. - Existing energy-efficient infrastructure (LEDs, HVAC upkeep, water reuse, backup)	- Inconsistent patient navigation; estimation delays. - High energy use; no real-time monitoring; lack of smart sensors/solar.
Opportunities	Threats
- Leverage digital adoption for efficiency & revenue. - Implement smart tech & renewables for sustainability.	- Patient defection; financial concerns/trust erosion. - Rising energy costs; environmental impact.

Practical exposure VS Theoretical understanding

- Practical exposure focuses on applying management principles directly within a healthcare facility's operations, while academic knowledge establishes the foundational concepts.
- Direct engagement cultivates immediate problem-solving, real-time decision-making, and effective communication in a dynamic clinical setting, whereas Theoretical learning broadens understanding and refines analytical capabilities.

Usefulness of internship

- Hospital industry exposure
- Networking with hospital industry members
- Opportunity to improve communication skills
- Learned about healthcare settings

A B O U T T H E P R O J E C T

Objective

- The study aims to analyse the current OP to IP conversion and recommend improvements. Objectives include tracking patient journeys, identifying barriers, evaluating estimation services, and understanding non-admission reasons.

Methodology

This descriptive study at Max Smart Super Specialty Hospital used both qualitative and quantitative methods.

Quantitative Methods

•**OPD Observations:** 70 observations recorded on patient movement to the estimation desk.

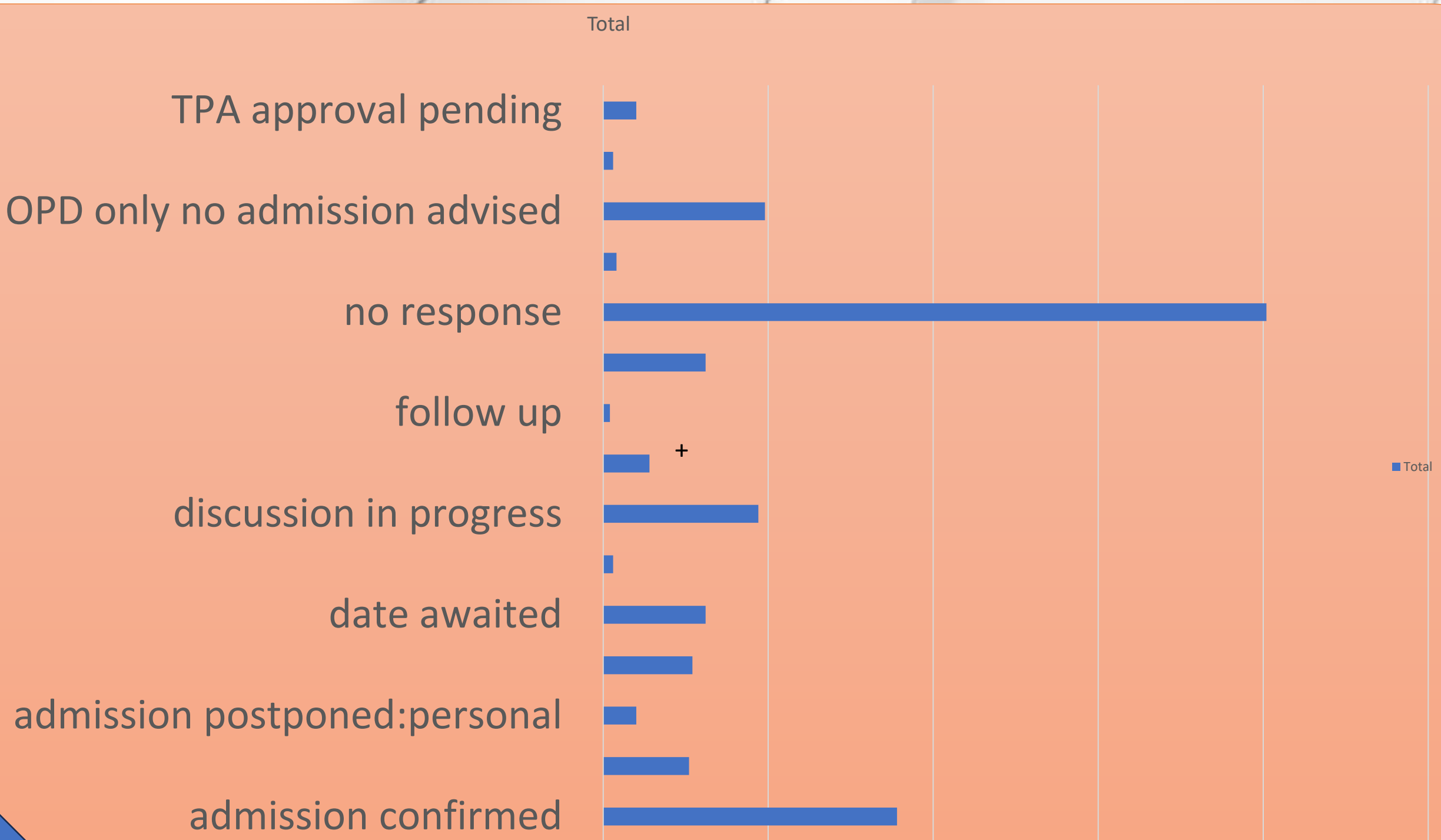
•**Retrospective Calling:** 547 calls tracked patients from OPD for admission advice, estimation receipt, and conversion reasons.

Qualitative Methods

•**OPD Observations (Logged Issues):** Detailed patient and coordinator interactions at the estimation desk.

•**Estimation Desk Observation:** Identified issues like delays, unclear communication, and weak OPD coordination at IP admission and Gynae/Obstetrics estimation desks.

•**Feedback Calls:** Conducted with admission-advised patients to understand non-conversion reasons.



Key observations include:

- "No response"** is the most frequent outcome, indicating a significant communication gap.
- "Admission confirmed"** represents a substantial portion of successful conversions.
- Other categories like "OPD only no admission advised," "discussion in progress," "date awaited," "follow up," and "TPA approval pending" highlight retrospective calling Data analysis..

Results

Observations revealed significant challenges in patient navigation, estimation desk processes, and communication.

Issue	Frequency	Challenge	Impact	Status	Percentage
Navigation	High	Delayed Estimates	High	Converted	50%
Estimation Delay	High	Poor Coordination	Moderate	Planning	20%
Communication	Moderate	Counseling Gaps	High	Dropped	30%

Discussion

- Key inefficiencies (estimation delays, navigation/infrastructure gaps, communication/counselling deficiencies) negatively impact patient trust and conversion rates.

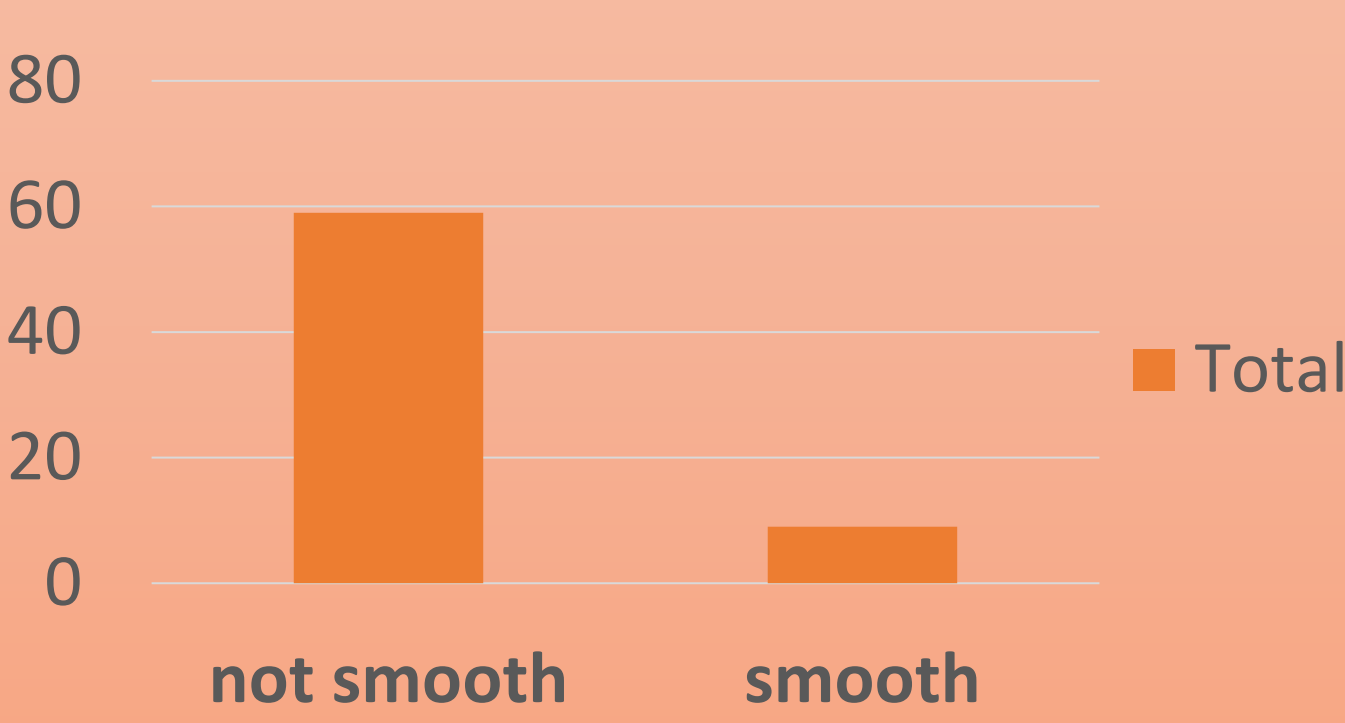
Conclusion

- Operational inefficiencies and communication gaps are primary contributors to sub-optimal OP to IPD conversion.

Recommendations:

Category	Recommendation
Infrastructure & Navigation	Clear signage; escort services for patient guidance.
Process Standardization & Timeliness	Standardized estimation procedures with defined timelines.
Dedicated Follow-up Mechanisms	Establish a team for timely patient follow-ups.
Staff Training & Communication	Regular training on empathetic communication and patient engagement.
Workflow Enhancements	Clear OPD advice, guided navigation, prompt estimates, immediate follow-up, smooth admission confirmation.

Findings



Samples: ~70 patients.

•**"Smooth" Process:** 59 patients had a smooth journey to the estimation desk.

•**"Not Smooth" Process:** 9 patients experienced difficulties.

•**Key Reasons for Difficulty:** Patients often went alone, lacked proper counseling, or required additional coordinator/doctor contact for procedure details/codes.