

INTRODUCTION

Discharge includes the medical instructions that the patient is recovered completely and is stable to go home. Discharge process is the point at which the patient leave the hospital and either return home or is transferred to another facility such as for rehabilitation or to a nursing home after the

OBJECTIVES

- To understand the discharge process of the hospital
- To identify the stakeholders in the discharge process.
- To identify the reasons of delay in

METHODOLOGY

Study design: Observational Descriptive Study

Study time: April 25th 2017 to May 24th 2017

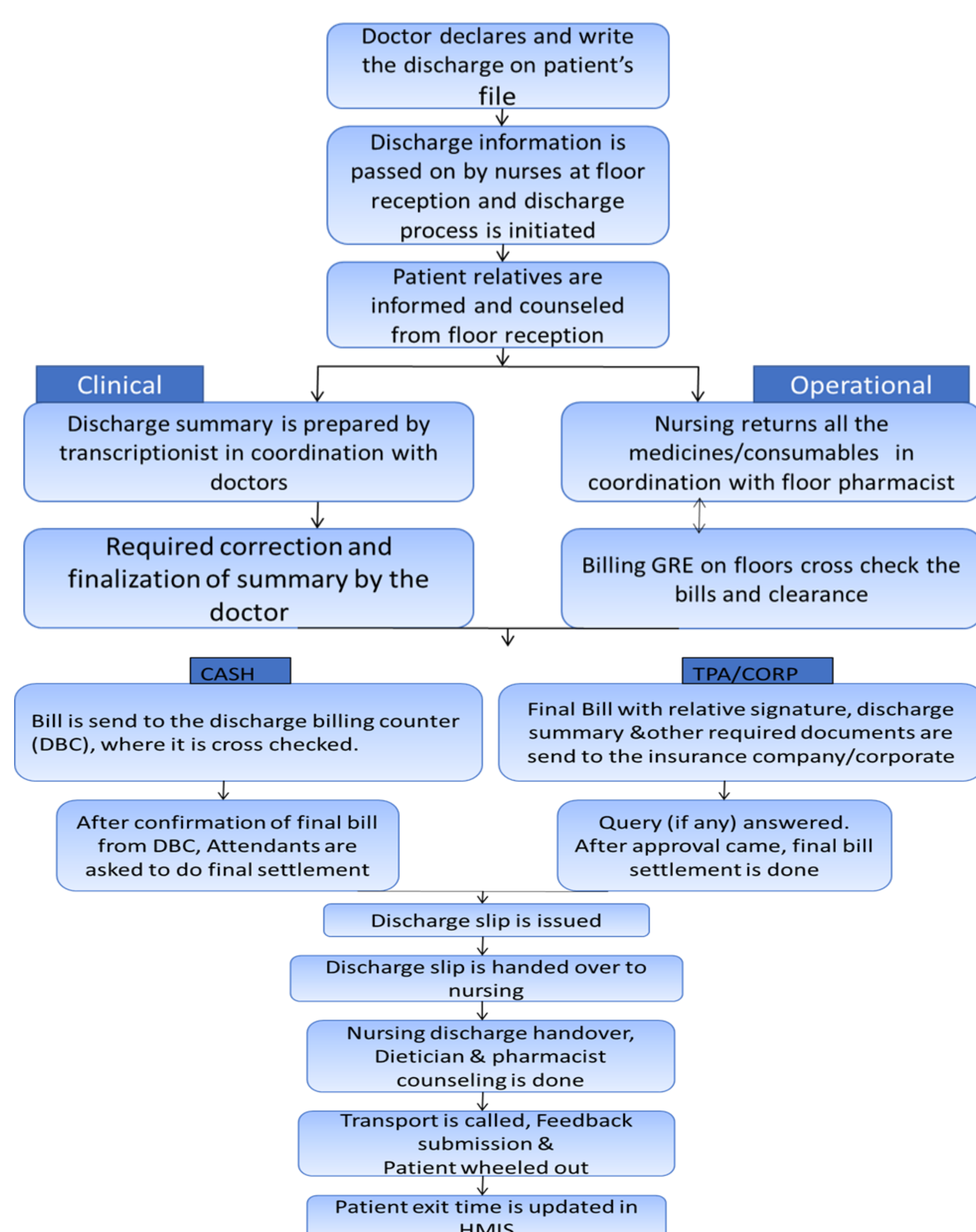
Sample size: 388

Sampling technique: Convenience Sampling

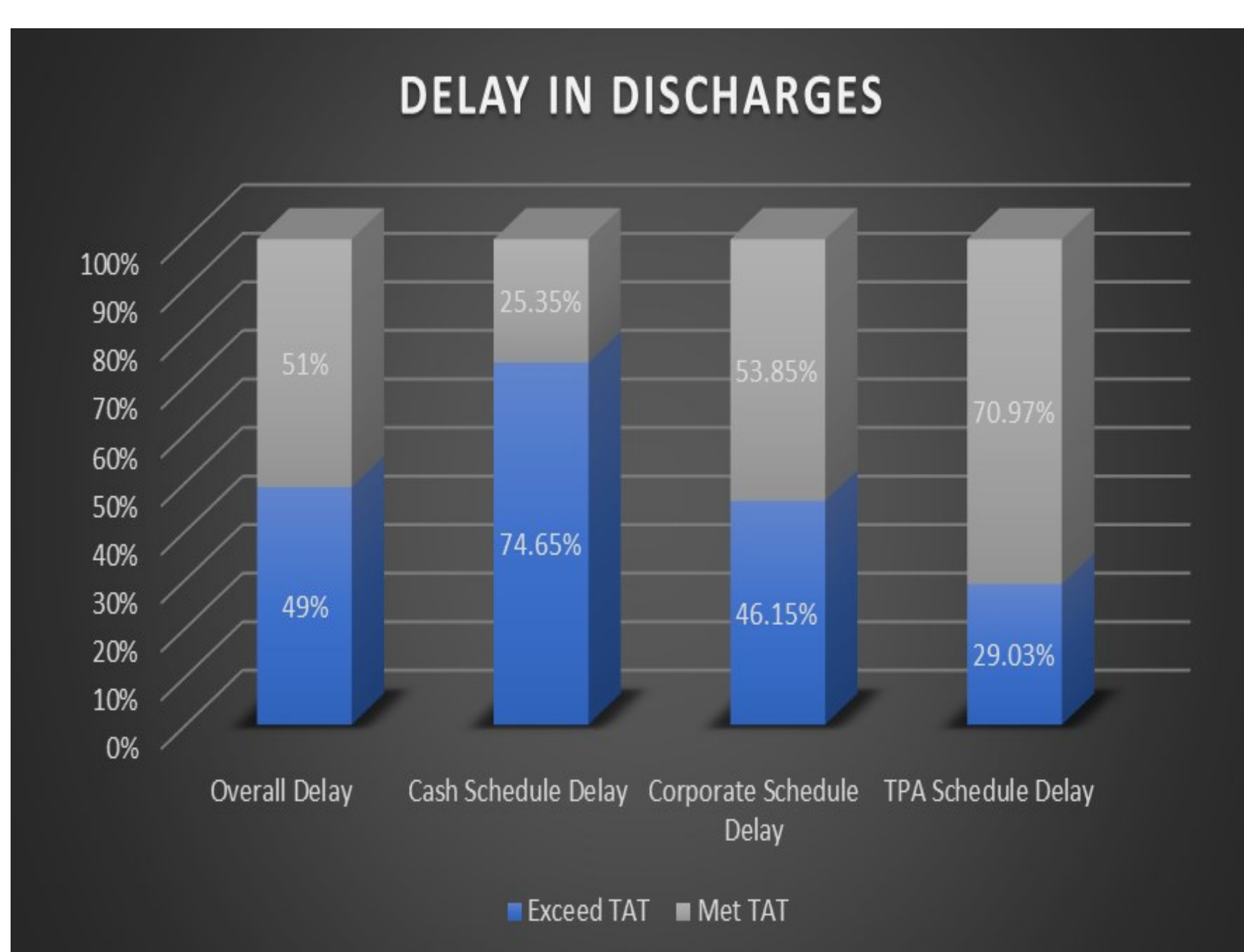
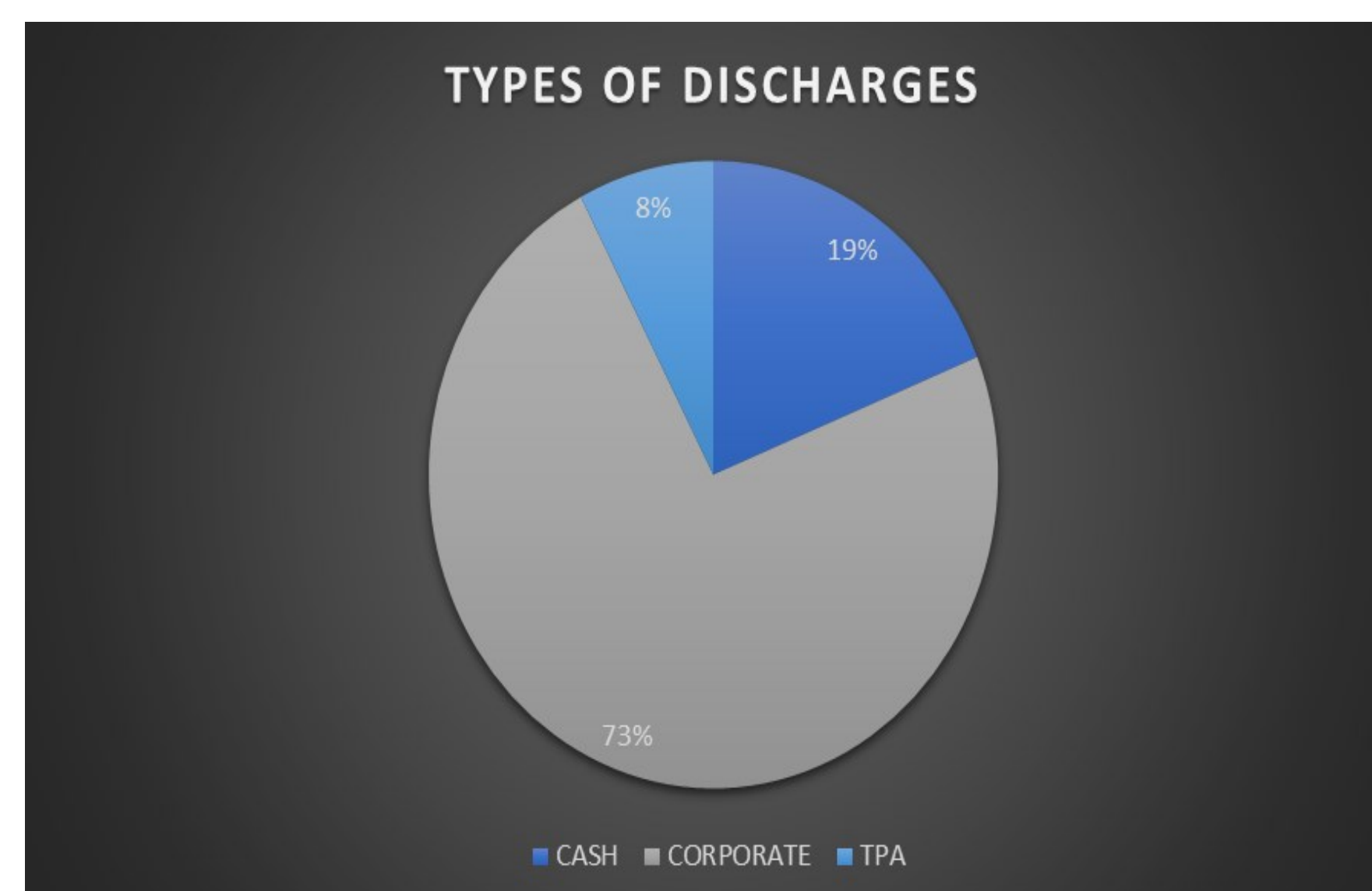
Department: In-patient Department

Tools of Data Collection: Direct Observation, using checklist for discussion with different stakeholders involved in

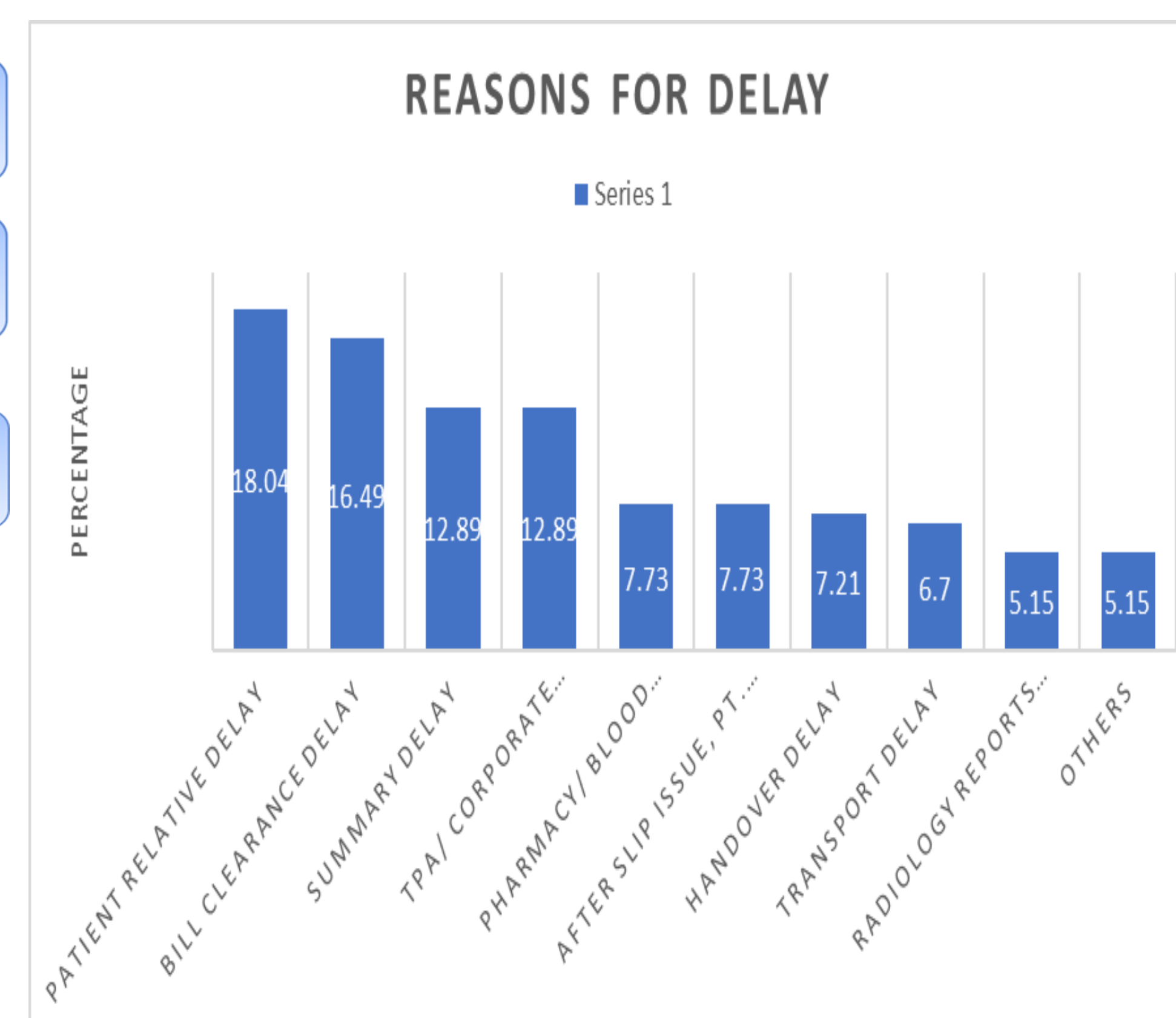
PROCESS FLOW OF



DATA ANALYSIS



TAT for different schedules		
Schedule	Average waiting time	
	Planned	Unplanned
Cash	3 hours 20 minutes	4 hours 45 minutes
TPA	4 hours 28 minutes	7 hours 19 minutes
Corporate	4 hours 12 minutes	4 hours 40 minutes



KEY STAKEHOLDERS OF



CONCLUSION

A systematic approach to develop the structure and key processes of the discharge planning system is critical in ensuring the quality of care and maximizing organisation effectiveness.

In this study, important views on barriers experienced in hospital discharge were provided. Suggestions for building a comprehensive, system wise and policy driven discharge planning process with clearly identified staff roles were raised.

SUGGESTIONS

- Summary & bill could be prioritized, first preference should be given to cash patient (number of cash patient is less).
- Spell check/ formulary in summary format could be added.
- Floor billing and discharge staff should be allotted according to the peak hours and their lunch timings should be different.
- Pharmacist, dietician and physiotherapist handover can be given after getting the discharge summary so that the patient gets physically out just after the nursing handover after slip issue.
- There could be a patient holding area for patients who got discharged and want to have lunch or want to meet the consulting doctor before getting discharge.
- Discharge summary of the planned discharges should be given before the day of discharge and their billing card should also be ready.