Summer Training at
Apollo BSR Hospital, Bhilai, Chhattisgarh
(April - June, 2013)

1. EXCELLENCE IN PATIENTS EXPERIENCE AT EMERGENCY DEPARTMENT.
2. PATIENT EXPERIENCE AND CONTENTMENT AT IN-PATIENT DEPARTMENT.

By
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Under the guidance of
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Post Graduate Diploma in Hospital and Health Management
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Jaipur
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CERTIFICATE

This is to certify that, Dr Meena Vishwakarma student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from Institute of Health Management and Research, Jaipur Batch 17th has undergone summer training in Apollo BSR Hospital, Bhilai, Chhattisgarh and has done following projects:

- Excellence in patient's experience at emergency department
- Patient's experience and contentment at in-patient department

The candidate has successfully carried out the mentioned studies assigned to her during summer training from 8th April 2013 to 8th June 2013 and her approach to study has been sincere, scientific and analytical.

I wish her success in all her future endeavors.

Seema Mehta
Assistant Professor
Faculty and Mentor
IIHMR, Jaipur

Dr. Ashok Kaushik
Dean, Academic and student affairs,
IIHMR, Jaipur

ACKNOWLEDGEMENT

The success and final outcome of this summer placement required a lot of guidance and assistance from many people and I am extremely fortunate to have got this all along the completion of my project work. Whatever I have done is only due to such guidance and assistance and I would not forget to thank them.

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I owe my profound gratitude to our hospital mentor & our alumni Miss Najia Rizvi, who took keen interest on our project work and guided us all along, till the completion of our project work by providing all the necessary information for completing our training.

I would not forget to remember Miss Mahima (Operations Manager) Mrs. Shreekala and Mr. Sanjay, of Quality Department for their unlisted encouragement and more over for their timely support and guidance till the completion of our project work.

I heartily thank my Institute Dean Dr P.sodani, for providing this opportunity of summer placement & my mentor Seema Mehta for her guidance and suggestions during this project work.

I am thankful to and fortunate enough to get constant encouragement, support and guidance from all staffs of Emergency & Inpatient Department which helped us in successfully completing my project work.

Dr Meena Vishwakarma

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ACRONYMS/ABBREVIATIONS

1. BSR- Bhilai Scan & Research
2. OPD-Out patient Department
3. IPD- In Patient Department
4. ICU- Intensive Care Unit
5. TPA-Third Party Administrator
6. SEC-Socio Economic Classification

INTRODUCTION TO APOLLO BSR HOSPITAL,BHILAI

Apollo BSR Hospitals is a Multi Specialty Quality Hospital with a motto to provide Quality Healthcare at Affordable Costs. It has a fully equipped center of international standard for cardiac interventions and surgeries.

Vision:

"To be the most **preferred** healthcare service provider in the region, to **selflessly** contribute to humanity by continuously **challenging** the existing standards of care."

Mission:

Apollo BSR Hospitals always **provide comprehensive and modern healthcare solutions**. People experience a wide range of **high quality technology** and a **humane approach** in the hospitals.

The Journey.

The Group started with diagnostic centre in the year 1993 at Bhilai. Over a period of time all modern diagnostic facilities like 1.5 T MRI, 64 Slice Cardiac CT , Multi-slice Spiral CT scan, 4-D Real Time Color Doppler, Ultra Modern Pathology, Endoscopy, Bronchoscope, Mammography, Echocardiography Sonography, Digital X-ray etc. have been installed at our various centre. Thereafter similar centre have been setup at other locations such as Nagpur, Raipur, Korba& Rajnandgaon.

In the Year 2000 the Group ventured into establishing ultra modern Superspeciality Cancer Hospital in Bhilai- BSR Cancer Hospital which is the only comprehensive cancer management centre in Chhattisgarh. After seventeen years into being called a pioneer and leader in Diagnostics in Central India and eight years in Comprehensive Cancer Management, BSR Health care is now a well known name in health care sector.

BSR realized the need for a Multispecialty Superspeciality Tertiary care hospital in Central India and prompted by the desire to extend high quality Medicare beyond the confines of the rich class, BSR Healthcare, has set up Superspeciality' Hospital at Bhilai . Apollo BSR Hospitals, Bhilai became operational from September 2007.

Commitment to the Community.

"*Caring for community."*
Those simple words describe the past, present and future of Apollo BSR Hospitals, Bhilai. Their roots run deep in the community, starting with the 1st Hi-tech diagnostic centre in 1993. After fifteen years of being pioneer in diagnostics in entire Central India, BSR healthcare started comprehensive cancer management hospital - BSR Cancer Hospital & Research Institute at Bhilai in June 2001.

Apollo BSR Hospitals is a 175 Bedded Super Specialty Hospital providing secondary & tertiary level healthcare at affordable cost in association with Apollo Hospitals, Chennai. The inpatient beds are classified into Deluxe Suite, Private Room, Double Bed Wards, Shared Ward and dedicated Cancer Wards.

The hospital enjoys the reputation of being the first and only hospital to have a digital flat panel Cath Lab and 4 modular OTs with laminar air flow and Hepa Filters for Coronary Bypass Surgeries, Coronary Angioplasty, and other special surgeries. They are having 42 beded ICUs including Cardiothoracic ICU, Surgical ICU, Critical Care ICU, Medical ICU, Neonatal ICU & Pediatric ICU.
They are having Ultramodern 175 beded Superspeciality and Multispecialty Hospital "Apollo BSR Hospitals" at Bhilai in association with Apollo Hospitals, Chennai which started its operations in September 2007.
Apollo BSR Hospitals at Bhilai is their attempt to integrate the best and most qualified medical professionals and Doctors by providing them the best infrastructure, latest technologies in bio Medical Engineering and health care services along with a dedicated team of nurses, technicians, staff and professional management in such a way that our Super Specialty Hospital can provide the best health care services, so that the patients of Chhattisgarh as well as neighboring states could be benefited.

Already they have got a very good response from the patients in this region and they are regularly getting the patients not only from Chhattisgarh but also from neighboring states.
They are recognized and empanelled by Govt. of Chhattisgarh, CSEB, NSPCL, FCI,BSNL, CISF, NMDC, SECL and various Insurance companies / TPA's etc and they anticipate tremendous increase in the OPD and IPD patients .
They have also started few more departments like Infertility Clinic (IUI), Cosmetology, Joint Replacement Surgery (Total Knee Replacement / Hip Joint Replacement), high end Ophthalmology etc.

They have plans to increase the Bed Capacity from 175 beds at present to 200 beds which will include additions of 10 more beds in our ICU.
Bhilai is very well connected by Air (nearest Airport Raipur – 30 kms.), Rail (nearest railway station Durg – 5 kms.) and Road (on main National Highway NH6).

PROJECT REPORT

ON

"EXCELLENCE IN PATIENT EXPERIENCE AT EMERGENCY DEPARTMENT"

INTRODUCTION TO THE EMERGENCY DEPARTMENT

The Emergency Department (A&E) provides ready access to emergency nursing and medical care 24 hours a day, 365 days a year. The department provides clinical services to treat the range of problems with which patients present as an emergency or urgently, from life-threatening conditions to minor injury and illness, in all age groups from babies to the elderly.

Apollo BSR hospital has Type II emergency department in which emergency room physician available round the clock and specialists on call.

Location

Emergency Department is located in ground floor with separate entrance. The area is divided into-

- Triage room
- Casualty room
- Duty doctor room
- Dressing room

Triage room

Triage room is for emergency /disaster Cases

Cases are treated according to color coding wrist bands, which is as follows-

- Red- Most serious patient
- Yellow- Serious patient
- Green- Normal patient
- Black- Patient going to die
- White- Brought dead.

Casualty room

- The Casualty room has 8 beds attached with all emergency equipments (Cardiac Monitor, Oxygen Cylinder, Suction Machine)
- Emergency medicines are available in trash cart & inventory.
- Minor OT attached for critical cases (e.g.-gasping patient) & hair transplantation, amputation procedure.
- 5 Nursing staff, 1 RMO,1 trauma staff,2 Dressing staff Present in a shift in Casualty

OBJECTIVES

- To analyze the patient view towards the hospital; staff & services of emergency department.
- To assess the awareness of patient about his/her treatment plan & procedure.
- To identify the gaps in quality services of emergency department.
- To provide suggestions for the improvement in patient satisfaction in the emergency department.
- To analyze the profile of the patients visiting Apollo BSR Hospital.

TOOLS & TECHNIQUE

- Sampling frame-All patient visiting emergency department.
- Sample size-86 patients

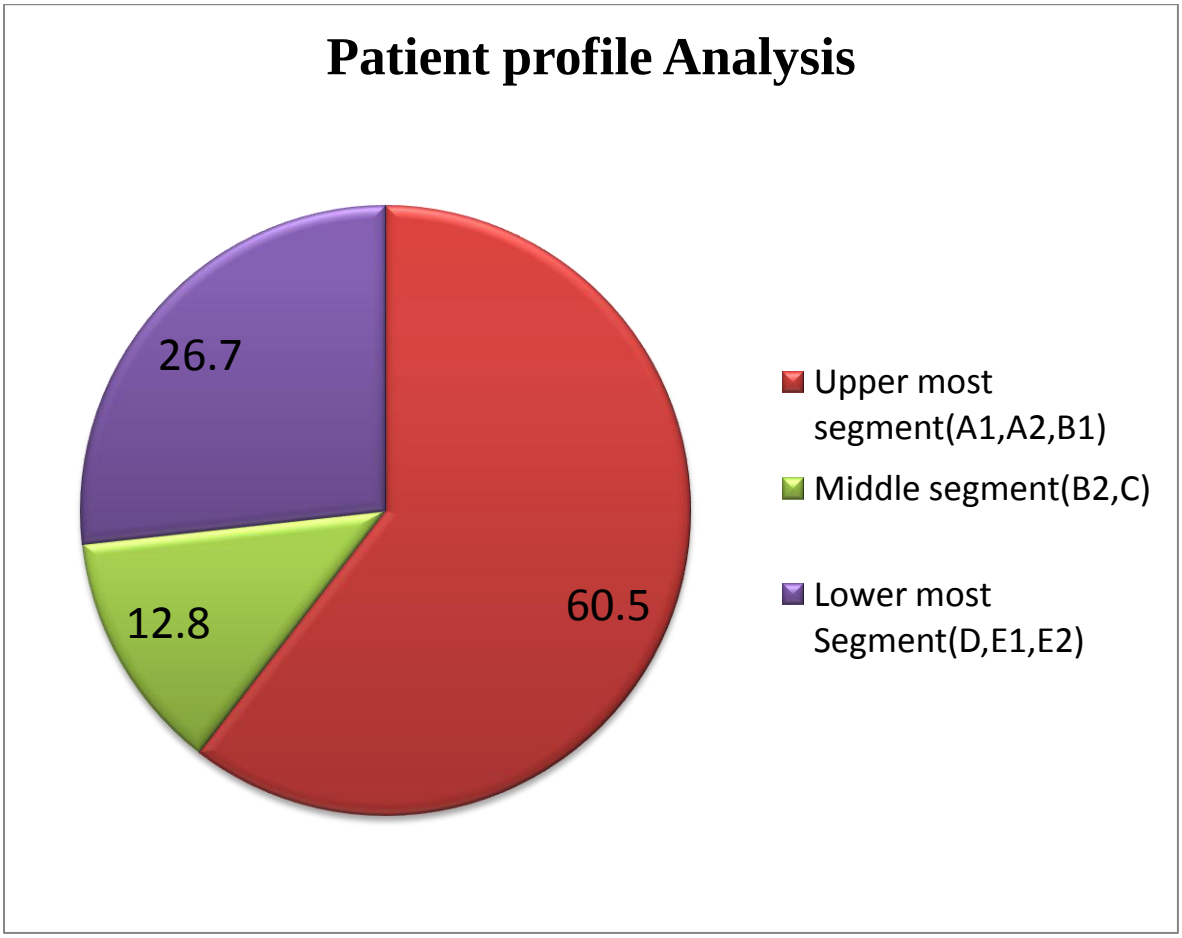
  (Total Casualty In-patient admission in a month-200 approx.)
- Sampling technique-Convenience method/simple random sampling.
- Study Period-15 days
- Study method-Face to face interview; Observation.
- Study tool-Questionnaire; Checklist.

PATIENT PROFILE ANALYSIS

Patient profile analysis is based on socio-economic classification grid, in which chief earner occupation & education is considered for grid analysis

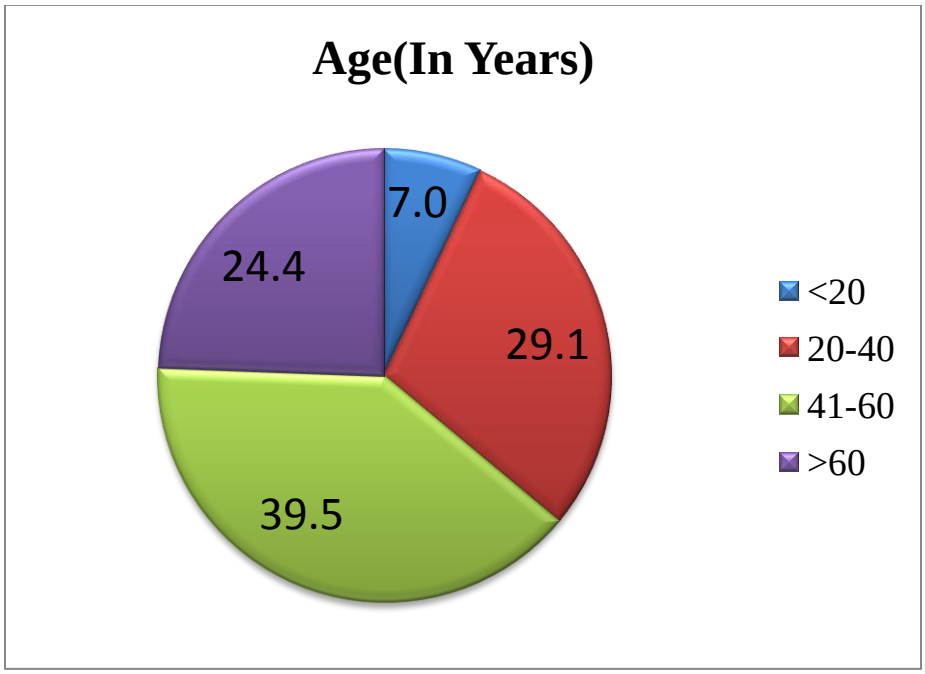
Findings

- ✓ 60.5% of patients belong to the upper segment of the society.
- ✓ 26.7% of patients belong to the lower segment of the society.
- ✓ 12.8% of patients belong to the middle segment of the society.



Age of the patients-

- ✓ 7.05% of patients are in the age group <20 years
- ✓ 29.1% of patients are in the age group 20-40years.
- ✓ 39.5% of patients are in the age group 41-60years.
- ✓ 24.4% of patients are in the age group >60years.



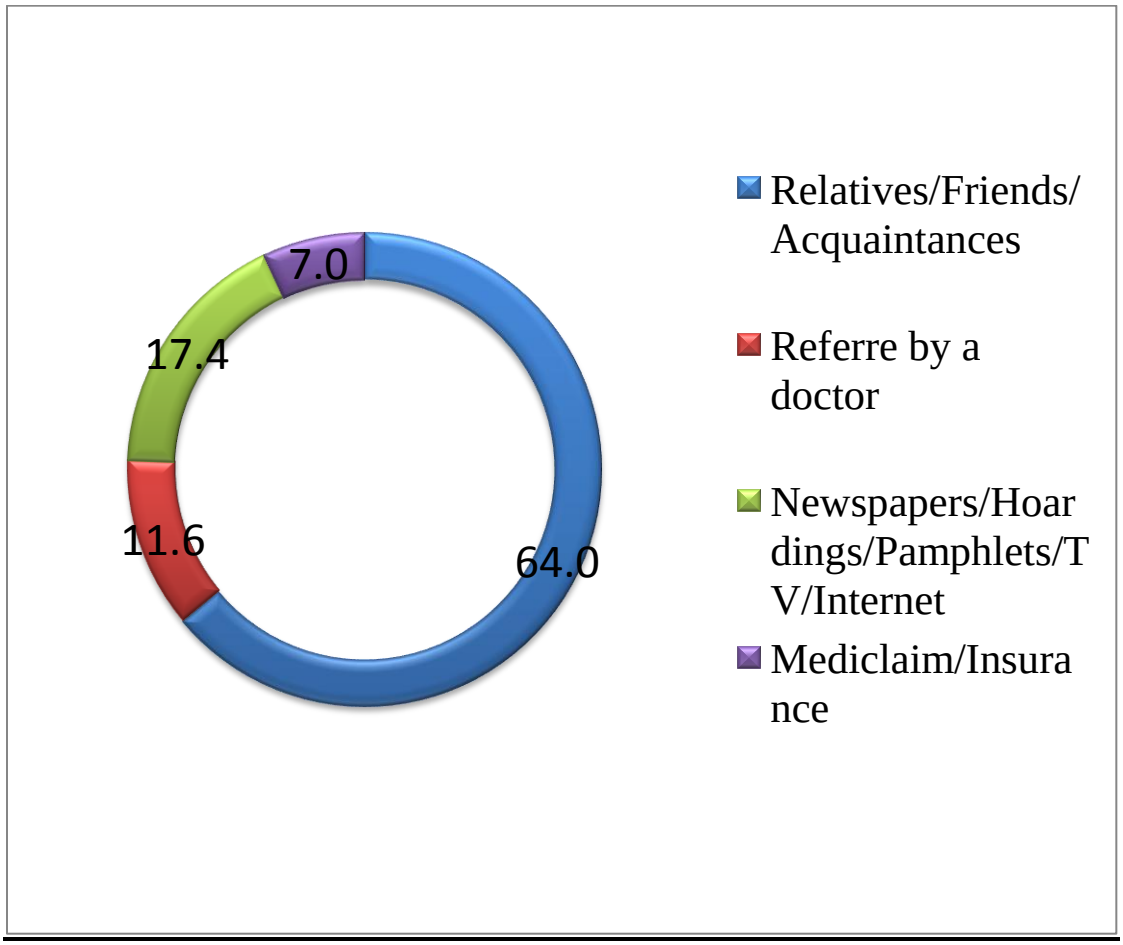
Apollo BSR hospital source of information

The source of information for the hospital can be

- ✓ Relatives/Friends/Acquaintances.
- ✓ Referred by a doctor.
- ✓ Newspapers/Hoardings/Pamphlets/TV/Internet.
- ✓ Medical claim /Insurance.

Apollo BSR hospital source of information helps in the analysis of the hospital profile, which is found as

- 64% of the patient's source of information of hospital is relatives/friends/acquaintances.
- 11.6% of the patient's source of information of hospital is referred by the doctors.
- 11.6% of the patient's source of information of hospital is media.
- 17.4% of the patient's source of information of hospital is medical claim and insurance of the patients.



Apollo BSR Hospital preference by the patient in emergency

The hospital preference in emergency can be-proximity of the hospital, eminent & qualified doctors, referred or suggested by the doctors or may be patient's own experience or the combination of options

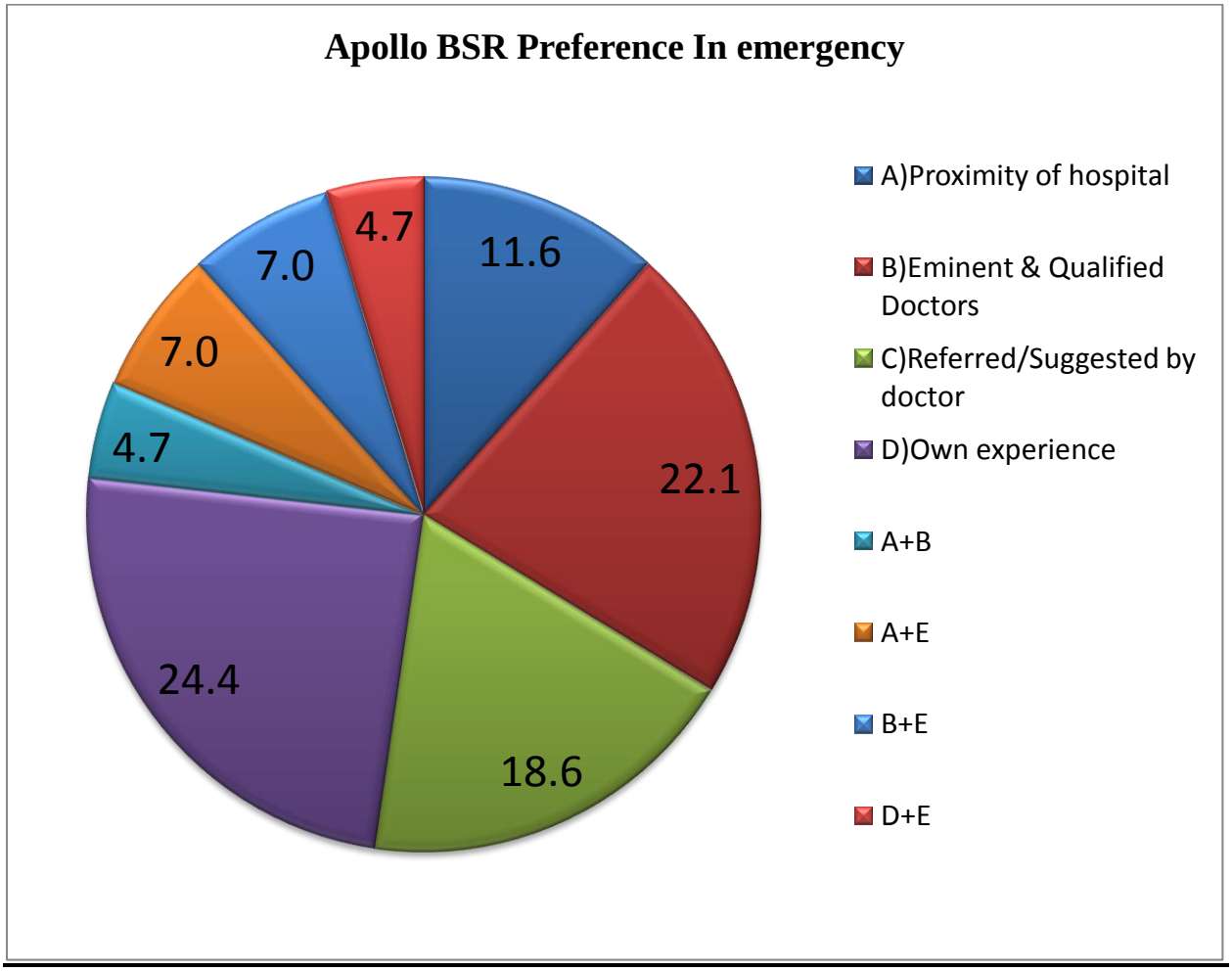
On analysis of the preference of hospital-

24.4% of the patients preferred Apollo BSR hospital in emergency on the basis of their own previous experience.

22.1% of the patients preferred Apollo BSR hospital in emergency on the basis of eminent & qualified doctors present in the hospital.

18.6% of the patients preferred Apollo BSR hospital in emergency as referred or suggested by the doctors.

11.6% of the patients preferred Apollo BSR hospital in emergency on the basis of proximity of the hospital.



ANALYSIS OF EMERGENCY DEPARTMENT SERVICES

The emergency department services can be assessed by the checklist of the services provided by the-

- ✓ Nursing staff of emergency department.
- ✓ Medical officers of emergency department.
- ✓ Trauma staff of emergency department.

NURSING STAFF

- Daily Roster of the nursing staff is maintained in a chart pattern list in which daily shift of every staff is written, which is prepared by the head nurse in charge of the department in the starting of every month
- Total availability of nursing staff in a shift is five, in which two are sister in charge of department, two are junior nursing staff & one is trainee nursing staff.
- Daily verification of emergency medicines & equipments are done by the nursing staff in particular register, but as observed only documentation is there, no physical verification of the medicines is done.
- Bio medical Waste management with color coded dustbin is properly maintained by the nursing staff.
- BLS/ACLS trained nursing staff is present in the department.

MEDICAL OFFICERS

- Daily roster of the medical officers is maintained in a chart pattern list in which daily shift of every staff is written, which is prepared by the doctor in charge of the department in the starting of every month.
- Total availability of nursing staff in a shift is one.

TRAUMA STAFF

- Total availability of nursing staff in a shift is one.
- Daily verification of emergency medicine kit & equipments of the ambulance are done by the trauma staff in particular register, but as observed only documentation is there, no physical verification of the medicines is done.
- BLS/ACLS trained trauma staff is present in the department.

Other services of the department

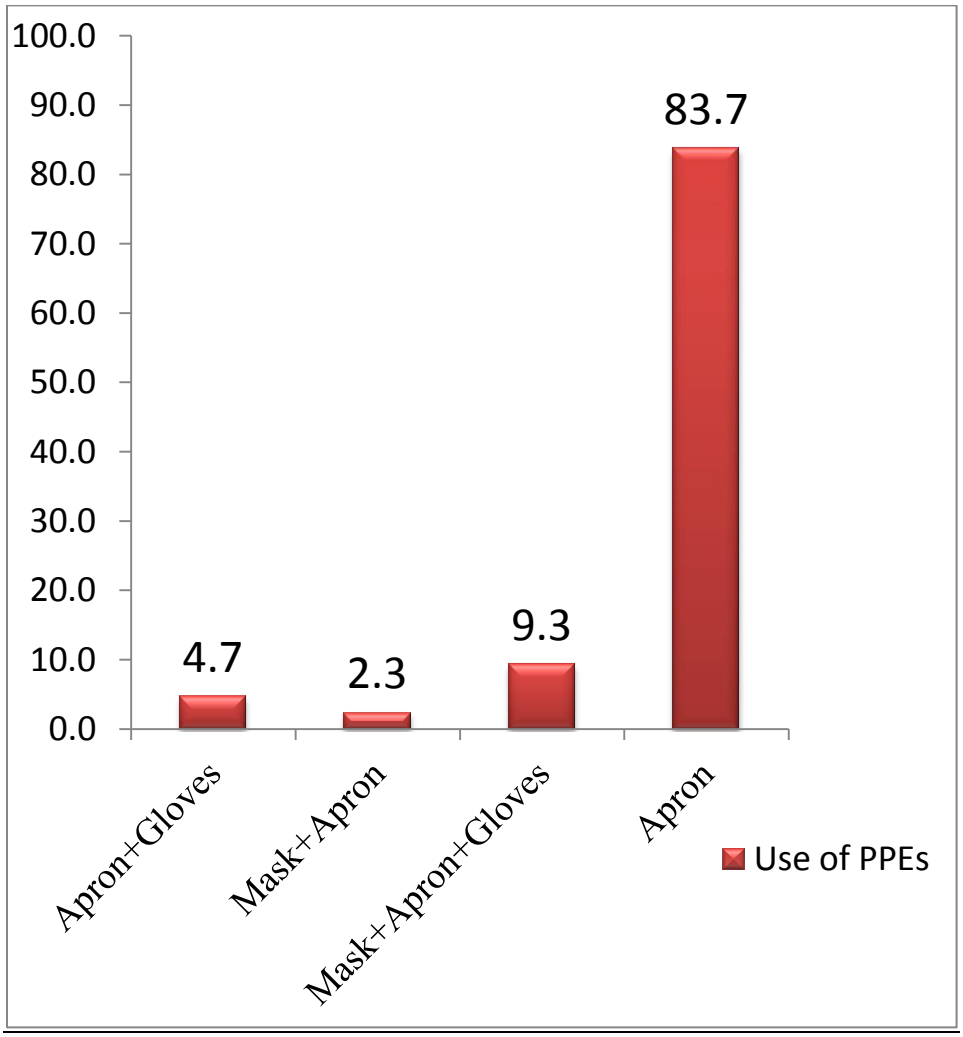
- Patient privacy, dignity & confidentiality are properly maintained in the emergency department by using curtains & courteous behavior with the patients.
- All the documents related to the patient registration, drugs used/ordered, investigations of the patients are properly maintained in the emergency department.

USE OF PERSONAL PROTECTION EQUIPMENTS (PPEs)

PPEs tray is present in the department which contains masks, gloves, head cap for the protection of staff with the acquired infection.

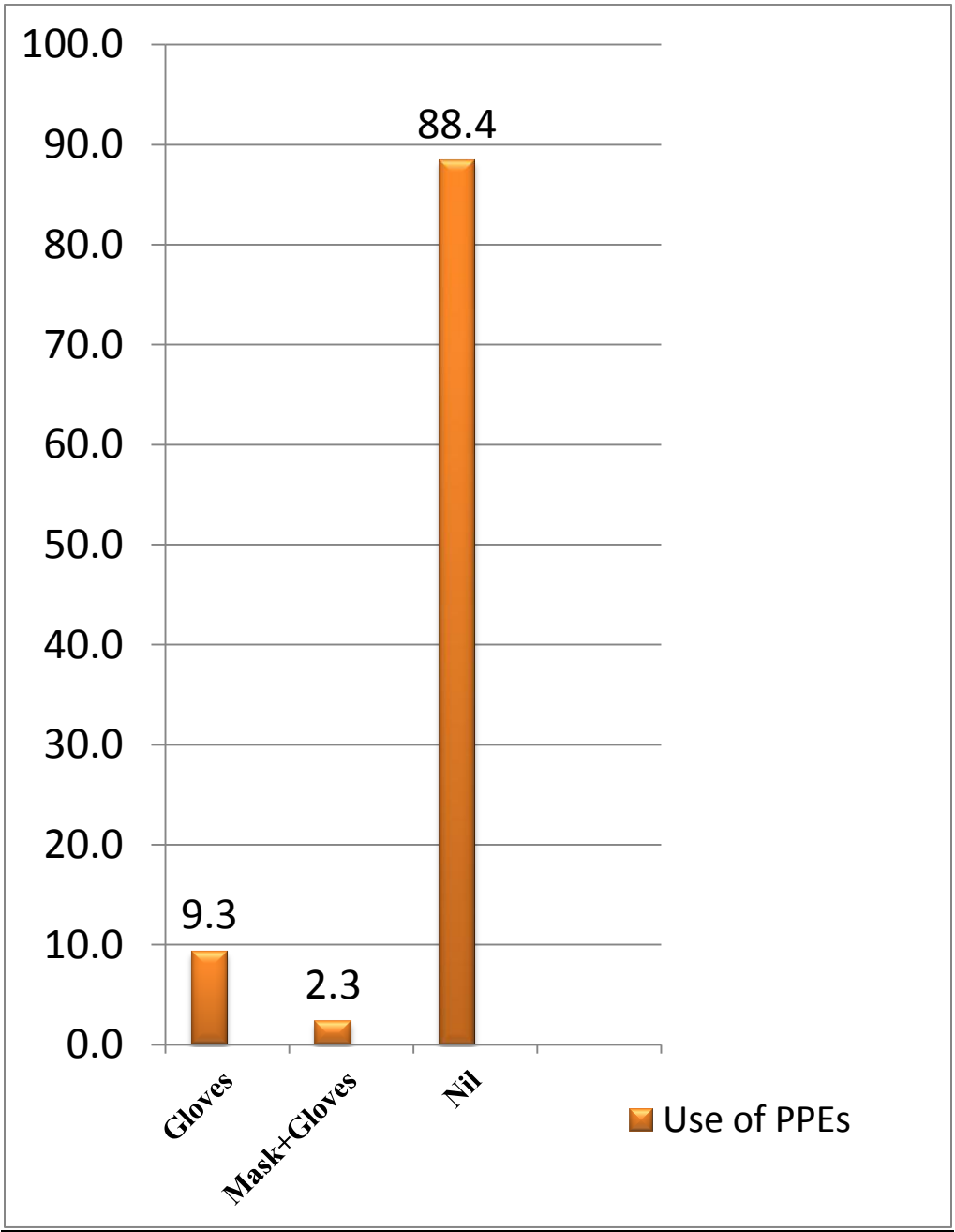
Nursing staff

PPEs used by the nursing staff of the department is mainly apron for almost all patients, apron& masks are used in 4.7% patients, in 9.3% patients apron, mask & gloves are used and in 2.3% patients mask & apron are used by the nursing staff.



By medical officers

PPEs used by the medical officers of the emergency department are mainly gloves & masks. In 88.4% patients no PPEs are used by the medical officers. PPEs are used only in cases where chances of acquired infections are there. In 9.3% patient's gloves is used & in 2.3% patients mask and gloves are used by the medical officers.



HAND HYGIENE MAINTAINANCE IN THE DEPARTMENT

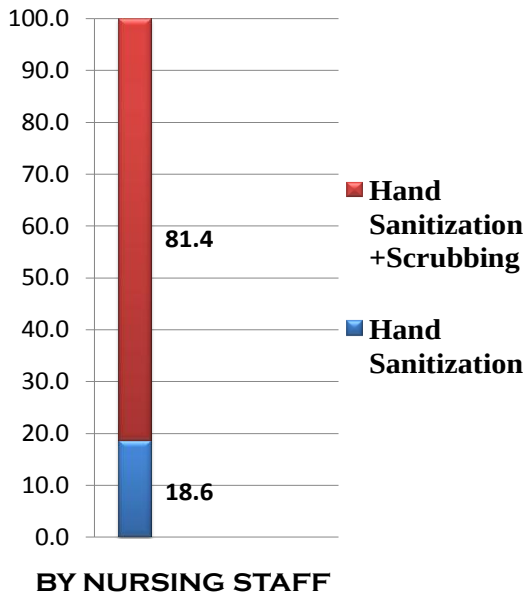
Hand hygiene is maintained by the nursing staff & medical officers of emergency department by hand sanitization by hand sanitizer, hand washing with proper scrubbing method by hand wash to prevent acquired infections from the patient or prevention of transmission of infection from patient to patient.

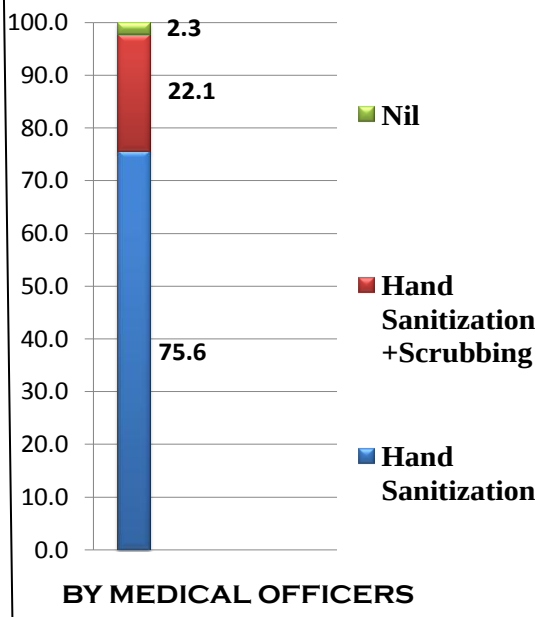
By nursing staff-

- In 81.4% of patients hand sanitization by sanitizer with proper scrubbing is adapted by the nursing staff.
- In 18.6% of patients only hand sanitization is done by the nursing staff.

By medical officers-

- In 75.6% of patients hand sanitization by sanitizer is adapted by the medical officers.
- In 22.1% of patients hand sanitization with proper scrubbing is done by medical officers.
- In 2.3% of patients no hand hygiene method is adapted by the medical officers.

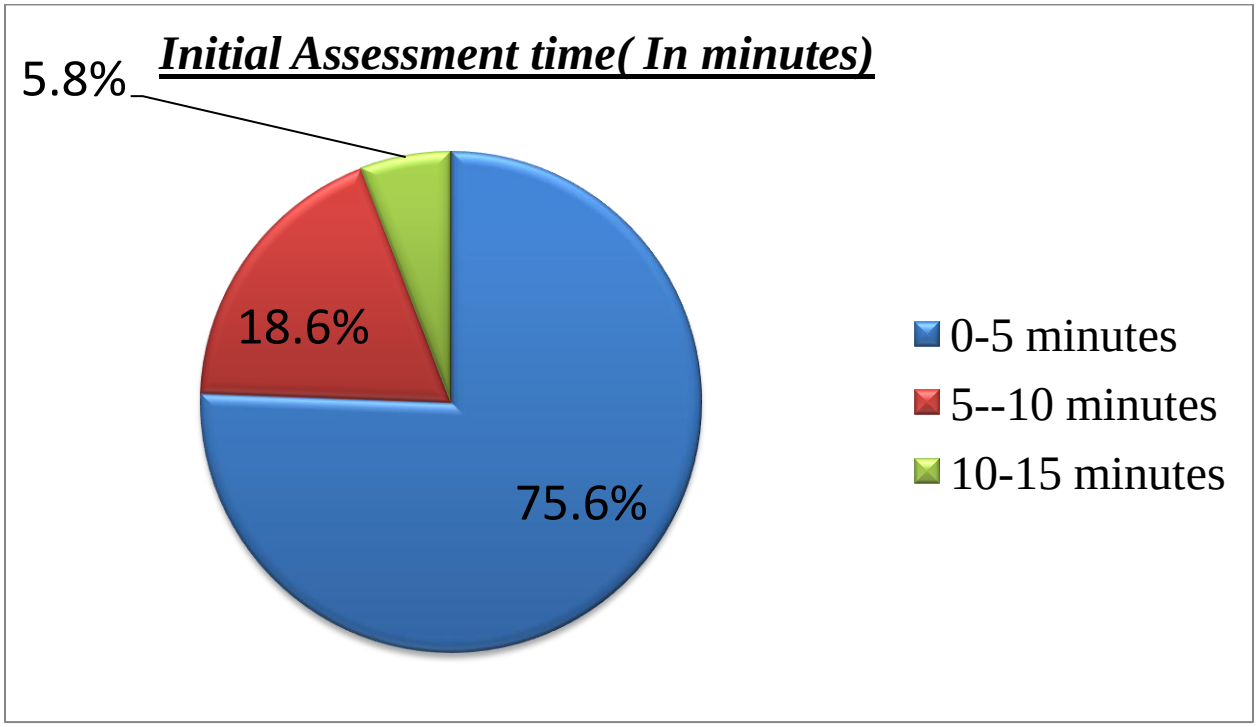




INITIAL ASSESMENT TIME BY RESIDENT MEDICAL OFFICERS

Initial assessment time is one of the indicator to assess the waiting time of patient in emergency. It is the time when patient comes to the department in emergency till the attendance of doctor to the patient for the assessment of initial condition of the patient. In indicates the promptness & responsiveness of the medical officers of the department.

- In 75.6% of patient's initial assessment time by the medical officers lies between 0-5 minutes.
- In 18.6% of patient's initial assessment time by the medical officers lies between 5-10 minutes.
- In 5.8% of patient's initial assessment time by the medical officers lies between 10-15 minutes.



CONSULTANT VISIT IN THE EMERGENCY DEPARTMENT

Consultant initial communication time

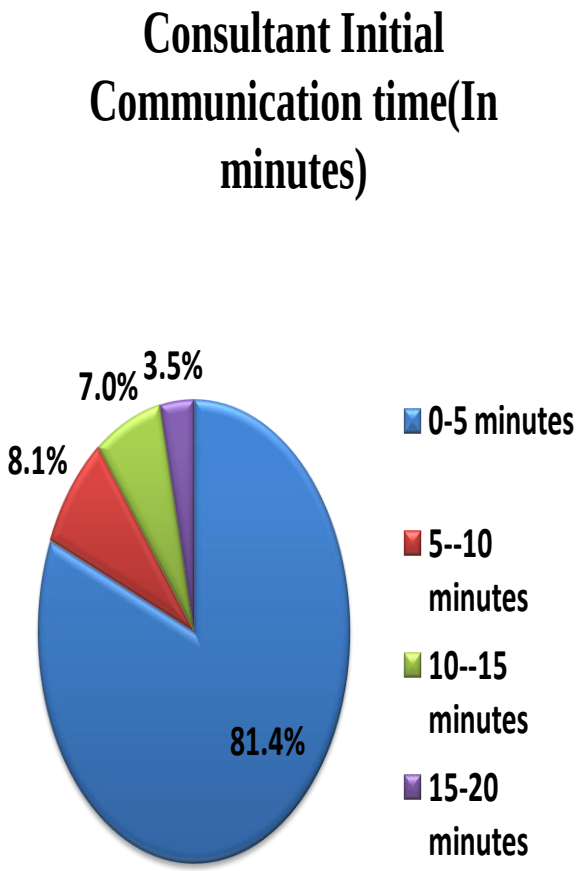
After the initial assessment of the patient by the duty doctor of emergency department, consultant are informed about the case for the further treatment of the patient. Consultants are informed by the duty doctor by telephone. In case of emergency initial communication time indicates the promptness of duty doctor of the department.

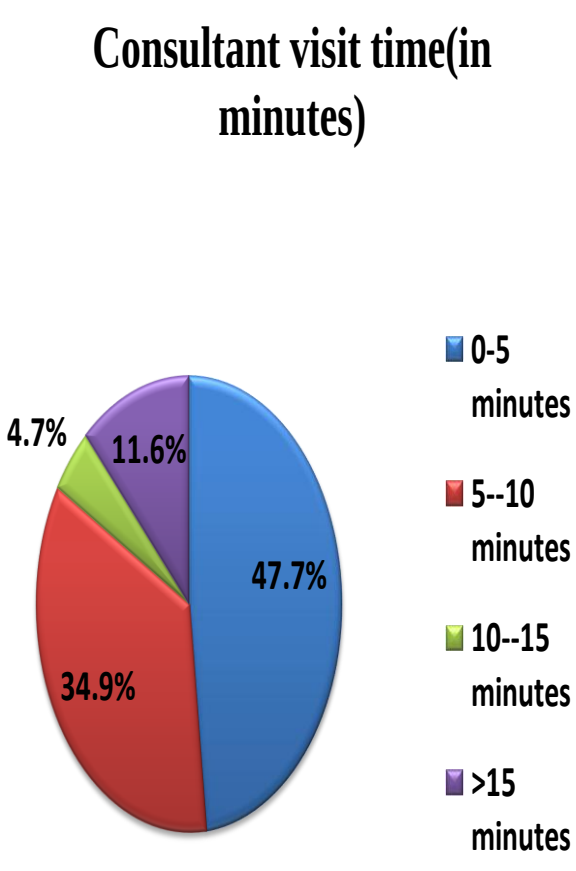
- In 81.4% of the total cases consultant are communicated within 0-5 minutes.
- In 8.1% of the total cases consultant are communicated within 5-10 minutes.
- In 7.0% of the total cases consultant are communicated within 10-15 minutes.
- In 3.5% of the total cases consultant are communicated within 15-20 minutes.

Consultant visit time

After the initial communication of consultant by the duty doctor, consultant either visits the department for the assessment of patient's condition or advice telephonically by discussing the condition of the patient with duty doctor. Consultant visit time indicates the promptness & responsiveness of the consultants.

- In 47.7% of the total cases consultant visited the department in <5 minutes.
- In 34.9% of the total cases consultant visited the department within 5-10 minutes.
- In 4.7% of the total cases consultant visited the department within 10-15 minutes.
- In 11.6% of the total cases consultant visited the department in >15 minutes.





EMERGENCY DEPARTMENT OF APOLLO BSR--- PATIENT PERSPECTIVE

Emergency department of hospital is analyzed according to likert scale ranging from satisfied to unsatisfied on following points as the perspective of patient visiting the department which reveals patient satisfaction level from the emergency department.

1. Emergency department entrance.
2. Nursing staff of emergency department.
3. Duty doctors of emergency department.
4. Consultant doctors of emergency department.
5. Services & environment of emergency department.
6. Overall view regarding emergency department of Apollo BSR hospital.

1. Emergency department entrance.

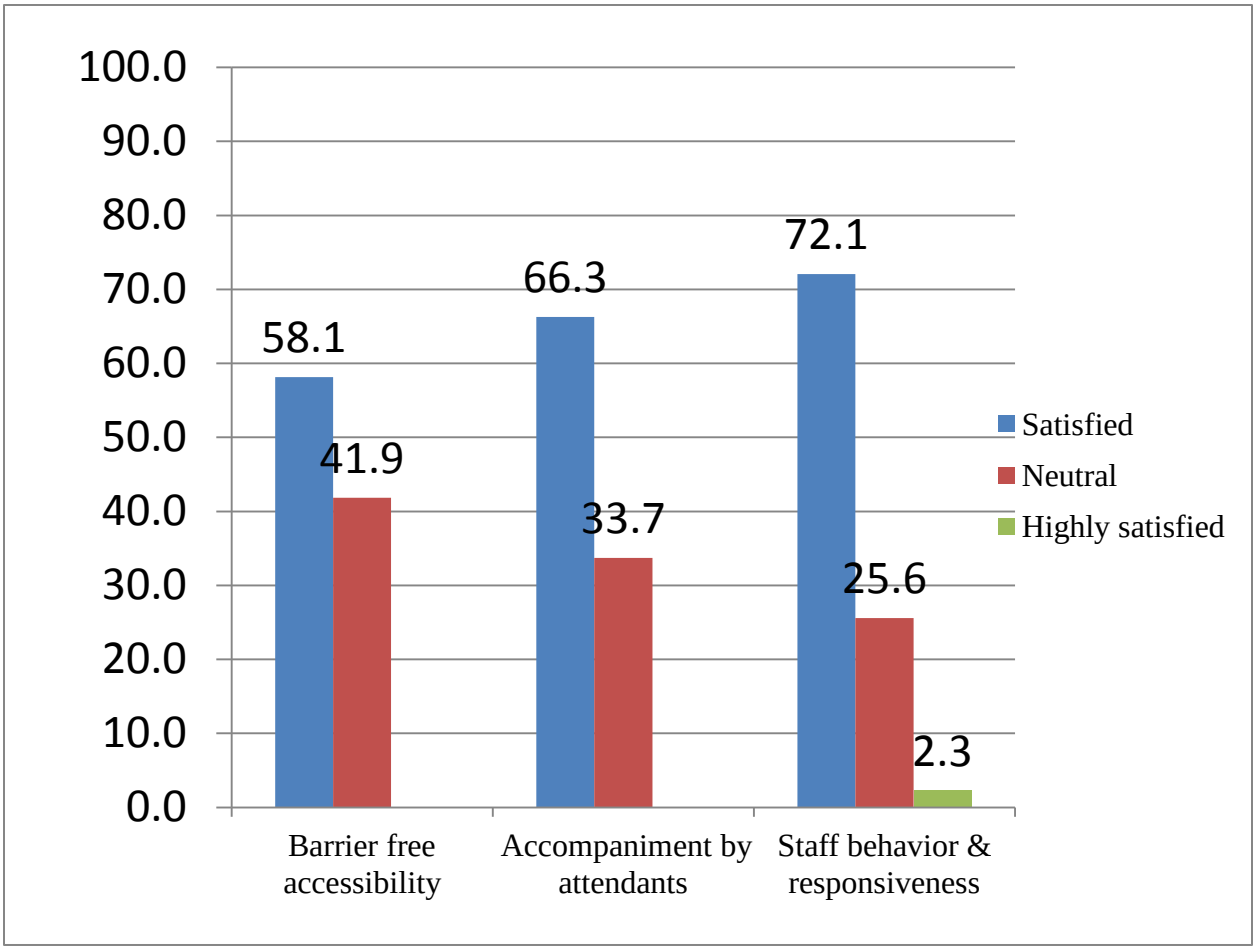
The entrance of the emergency department is analyzed by patient satisfaction level towards the

- Barrier free accessibility to the department.
- Accompaniment of the patient by attendants with wheel chair or stretcher at the entrance of the hospital.
- Behavior & responsiveness of attendants taking the patient from the main entrance of hospital to the emergency department.

Findings

- 58.1% patient is satisfied with the barrier free accessibility to the department.
- 41.9% patient is neutral with the barrier free accessibility to the department.
- 66.3% patient is satisfied with the accompaniment of the patient by attendants with wheel chair or stretcher at the entrance of the hospital.
- 33.7 % patient is neutral with the accompaniment of the patient by attendants with wheel chair or stretcher at the entrance of the hospital.
- 72.1% patient is satisfied with the behavior & responsiveness of attendants taking the patient from the main entrance of hospital to the emergency department.
- 25.6% patient is neural with the behavior & responsiveness of attendants taking the patient from the main entrance of hospital to the emergency department.
- 2.3% patient is satisfied with the behavior & responsiveness of attendants taking the patient from the main entrance of hospital to the emergency department.

Emergency department entrance



2. Nursing staff of emergency department

The nursing staff of the emergency department is analyzed by patient satisfaction level towards the

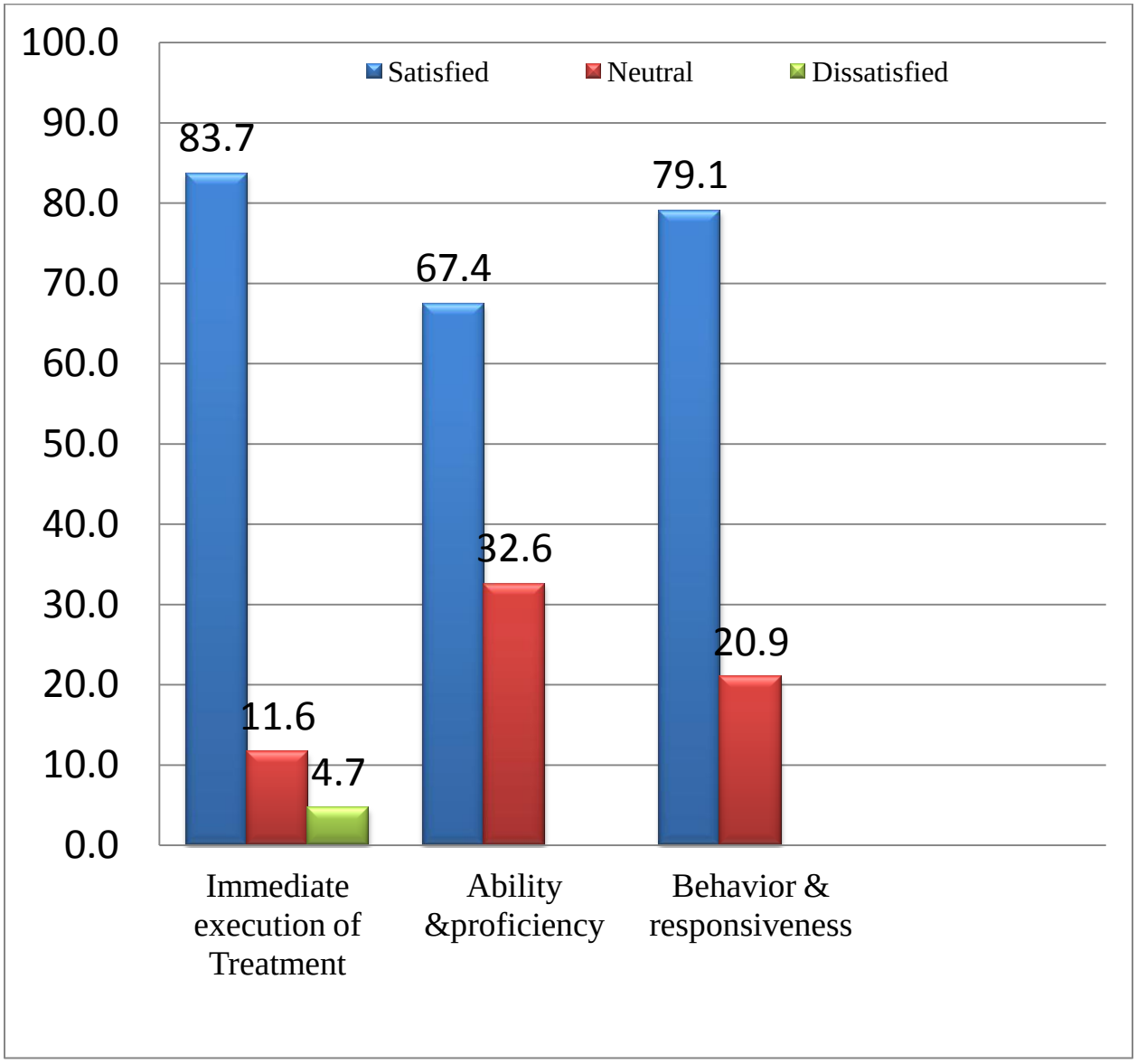
- Patient shifting & immediate execution of treatment actions by the nursing staff of the department.
- Ability & proficiency of work performed by the nursing staff of the department.
- Behavior & responsiveness of nursing staff towards the patient attendance & treatment.

Findings

- 83.7% patient is satisfied with the patient shifting & immediate execution of treatment actions by the nursing staff of the department.
- 11.6% patient is neutral with the patient shifting & immediate execution of treatment actions by the nursing staff of the department.

- 4.7% patient is dissatisfied with the patient shifting & immediate execution of treatment actions by the nursing staff of the department.
- 67.4 % patient is satisfied with the ability & proficiency of work performed by the nursing staff of the department.
- 32.6% patient is neutral with the ability & proficiency of work performed by the nursing staff of the department.
- 79.1% patient is satisfied with the behavior & responsiveness of nursing staff towards the patient attendance & treatment.
- 20.9% patient is neutral with the behavior & responsiveness of nursing staff towards the patient attendance & treatment.

Nursing staff of emergency department



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3. Duty doctors of emergency department.

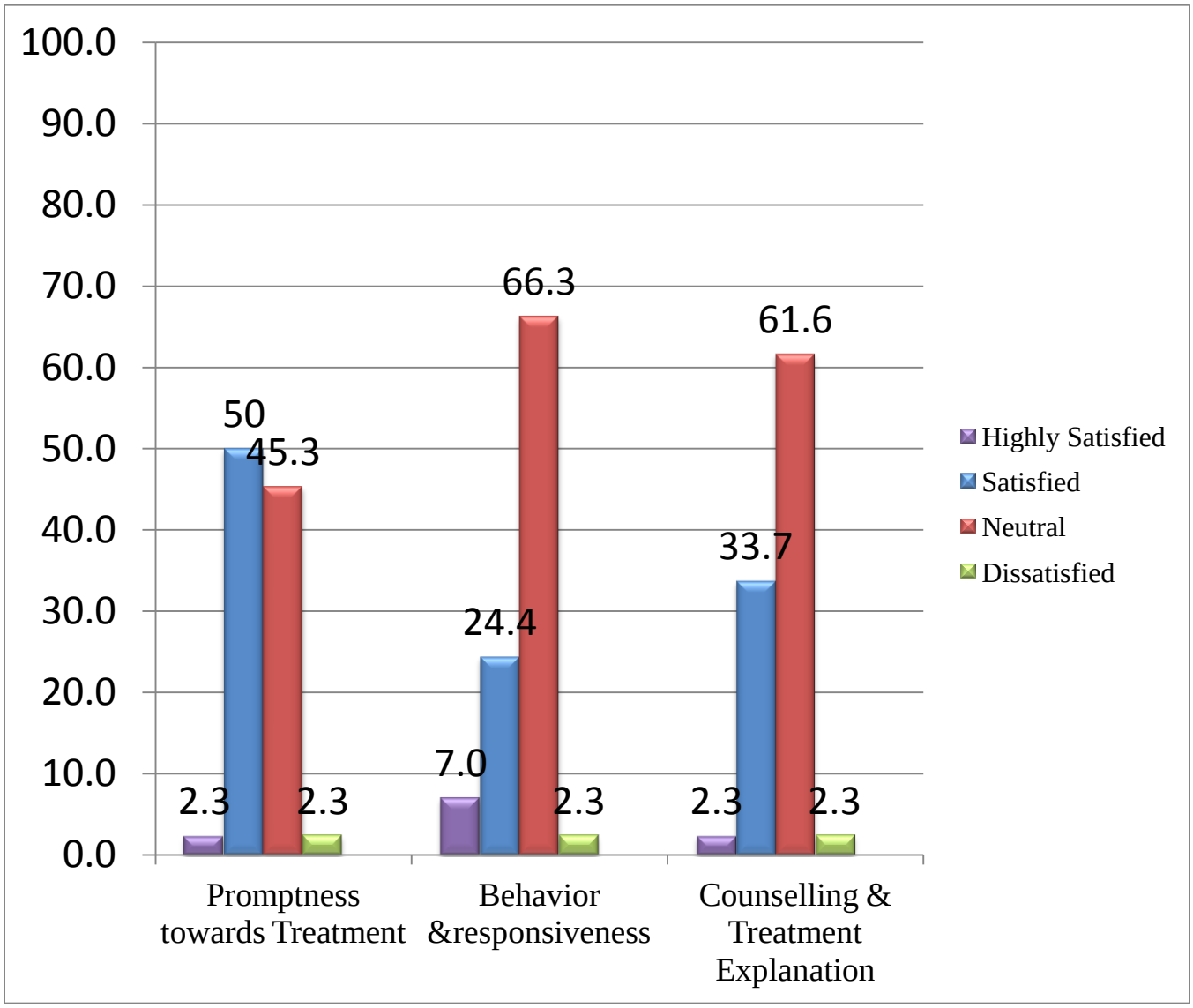
The duty doctors of the emergency department is analyzed by patient satisfaction level towards the

- Promptness of the duty doctors towards the treatment & patient stability.
- Behavior & Responsiveness of duty doctor towards the patient visiting the department.
- Counseling & treatment procedure explanation to the patient & relatives.

Findings

- 2.3% patient is highly satisfied with the promptness of the duty doctors towards the treatment & patient stability.
- 50% patient is satisfied with the promptness of the duty doctors towards the treatment & patient stability.
- 45.3% patient is neutral with the promptness of the duty doctors towards the treatment & patient stability.
- 2.3 % patient is dissatisfied with the promptness of the duty doctors towards the treatment & patient stability.
- 7.0% patient is highly satisfied with the behavior & responsiveness of duty doctor towards the patient visiting the department.
- 24.4% patient is satisfied with the behavior & responsiveness of duty doctor towards the patient visiting the department. .
- 66.3% patient is neutral with the behavior & responsiveness of duty doctor towards the patient visiting the department.
- 2.3% patient is dissatisfied with the behavior & responsiveness of duty doctor towards the patient visiting the department.
- 2.3% patient is highly satisfied with the counseling & treatment procedure explanation to the patient & relatives.
- 33.7% patient is satisfied with the counseling & treatment procedure explanation to the patient & relatives.
- 61.6% patient is neutral with the counseling & treatment procedure explanation to the patient & relatives.
- 2.3% patient is highly satisfied with the counseling & treatment procedure explanation to the patient & relatives.

Duty doctors of emergency department.



4. Consultant doctors of Emergency department

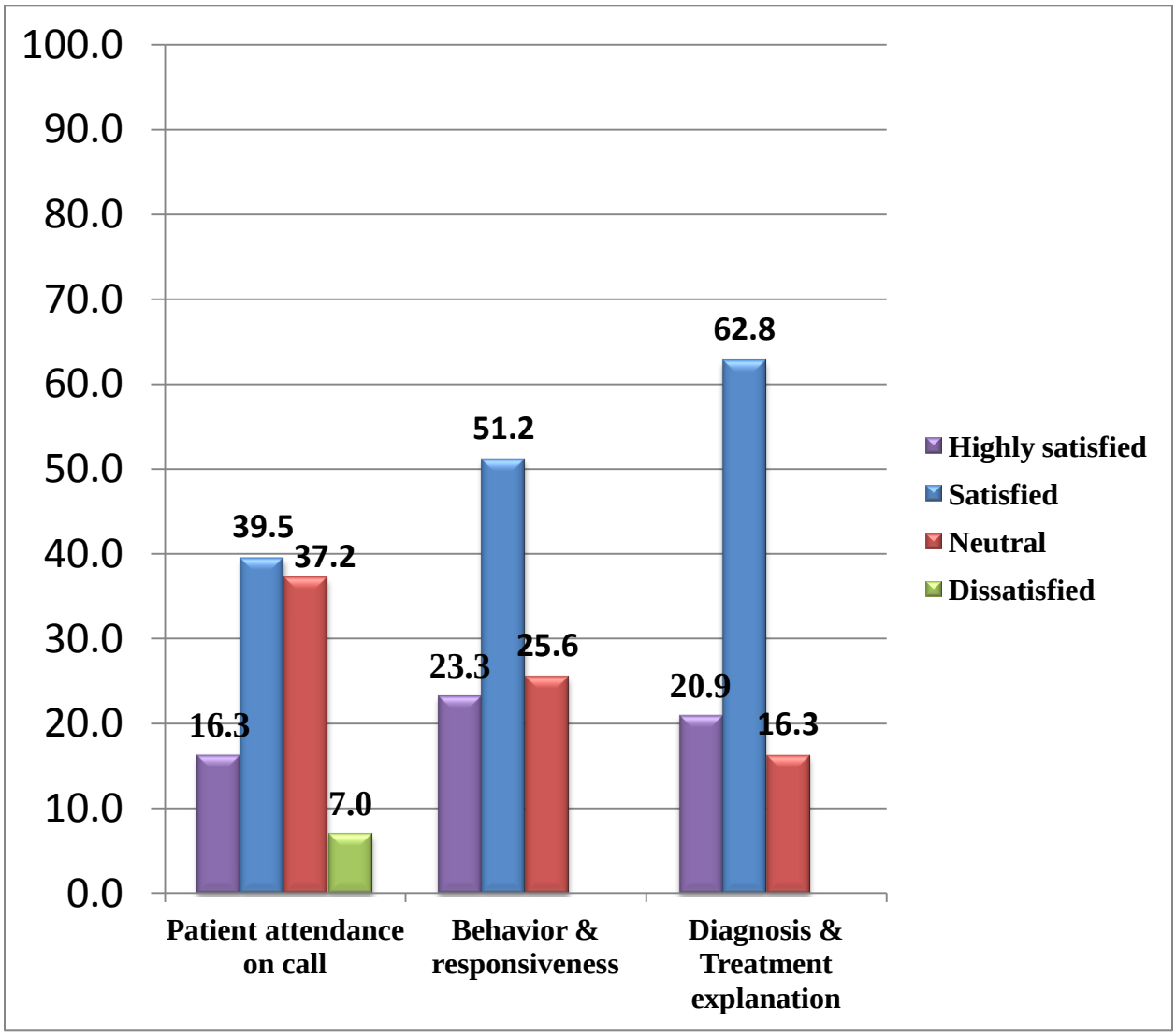
The consultant doctors of the emergency department is analyzed by patient satisfaction level towards the

- Immediate patient attendance on communication by the duty doctor of the emergency department.
- Behavior & Responsiveness of consultants towards the patient.
- Diagnosis & treatment plan explanation to the patient & the relatives.

Findings

- 16.3% patient is highly satisfied with the immediate patient attendance on communication by the duty doctor of the emergency department.
- 39.5% patient is satisfied with the immediate patient attendance on communication by the duty doctor of the emergency department.
- 37.2% patient is neutral with the immediate patient attendance on communication by the duty doctor of the emergency department.
- 7.0% patient is dissatisfied with the immediate patient attendance on communication by the duty doctor of the emergency department.
- 23.3% patient is highly satisfied with the behavior & responsiveness of consultant towards the patient visiting the department.
- 51.2% patient is satisfied with the behavior & responsiveness of consultant towards the patient visiting the department. .
- 25.6% patient is neutral with the behavior & responsiveness of consultant towards the patient visiting the department.
- 20.9% patient is highly satisfied with the diagnosis & treatment plan explanation to the patient & the relatives.
- 62.8% patient is satisfied with the diagnosis & treatment plan explanation to the patient & the relatives.
- 16.3% patient is neutral with the diagnosis & treatment plan explanation to the patient & the relatives.

Consultant doctors of Emergency department



5. Services & Environment of emergency department

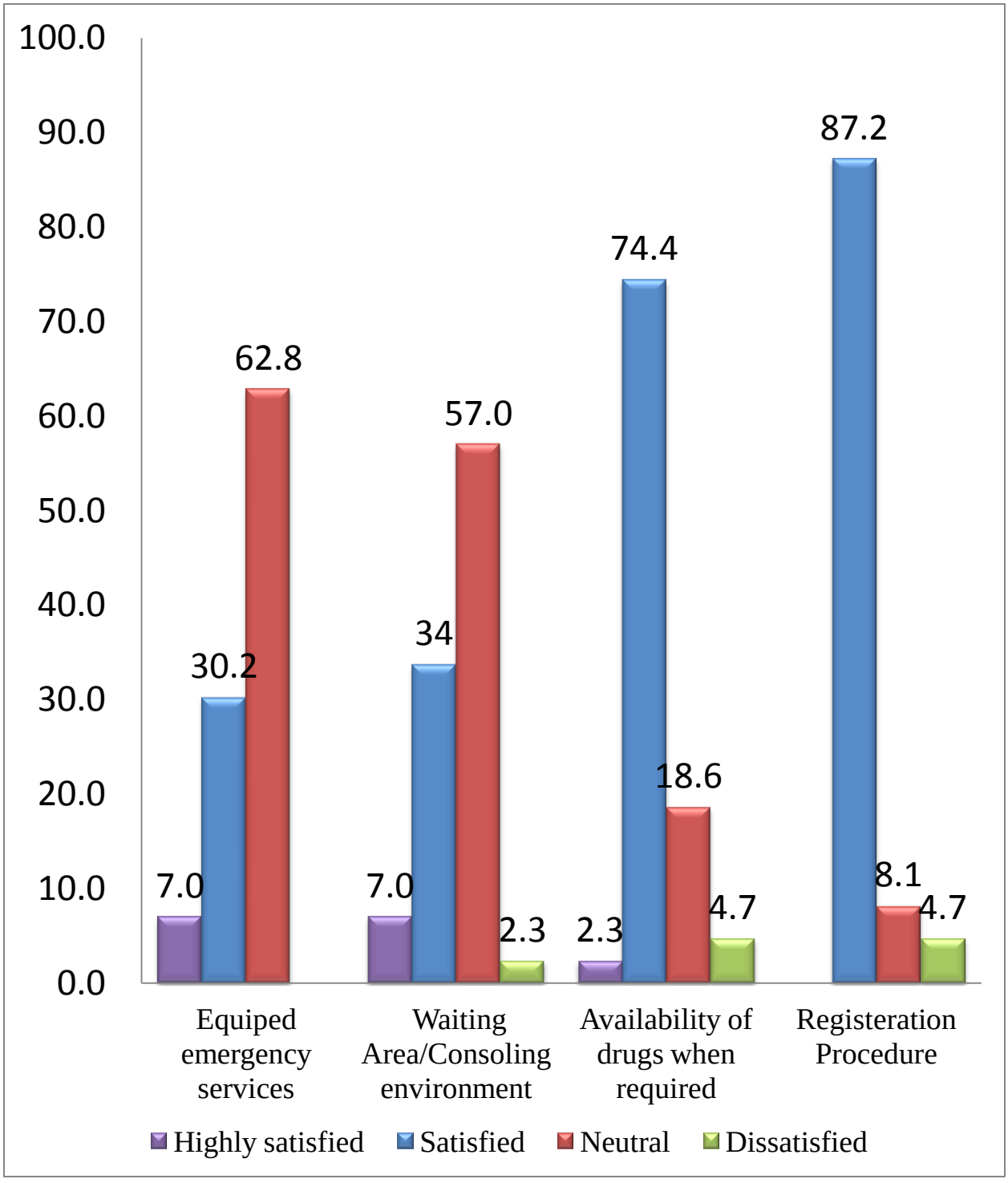
The services & environment of the emergency department is analyzed by patient satisfaction level towards the

- Department equipped services with all types of instruments availability to handle any emergency.
- Proper waiting area & consoling environment is maintained for patient's relatives.
- Immediate availability of drugs, consumables, attendants, as & when required
- Registration procedure of patient.

Findings

- 7.0% patient is highly satisfied with the department equipped services with all types of instruments availability to handle any emergency.
- 30.2% patient is satisfied with the department equipped services with all types of instruments availability to handle any emergency.
- 62.8% patient is neutral with the department equipped services with all types of instruments availability to handle any emergency.
- 7.0% patient is highly satisfied with the proper waiting area & consoling environment is maintained for patient's relatives.
- 34% patient is satisfied with the proper waiting area & consoling environment is maintained for patient's relatives.
- 57% patient is neutral with the proper waiting area & consoling environment is maintained for patient's relatives.
- 2.3% patient is dissatisfied with the proper waiting area & consoling environment is maintained for patient's relatives.
- 2.3% patient is highly satisfied with the immediate availability of drugs, consumables, attendants, as & when required.
- 74.4% patient is satisfied with the immediate availability of drugs, consumables, attendants, as & when required.
- 18.6% patient is neutral with the immediate availability of drugs, consumables, attendants, as & when required.
- 4.7% patient is dissatisfied with the immediate availability of drugs, consumables, attendants, as & when required.
- 87.2% patient is satisfied with the registration procedure of patient.
- 8.1% patient is neutral with the registration procedure of patient.
- 4.7% patient is dissatisfied with the registration procedure of patient.

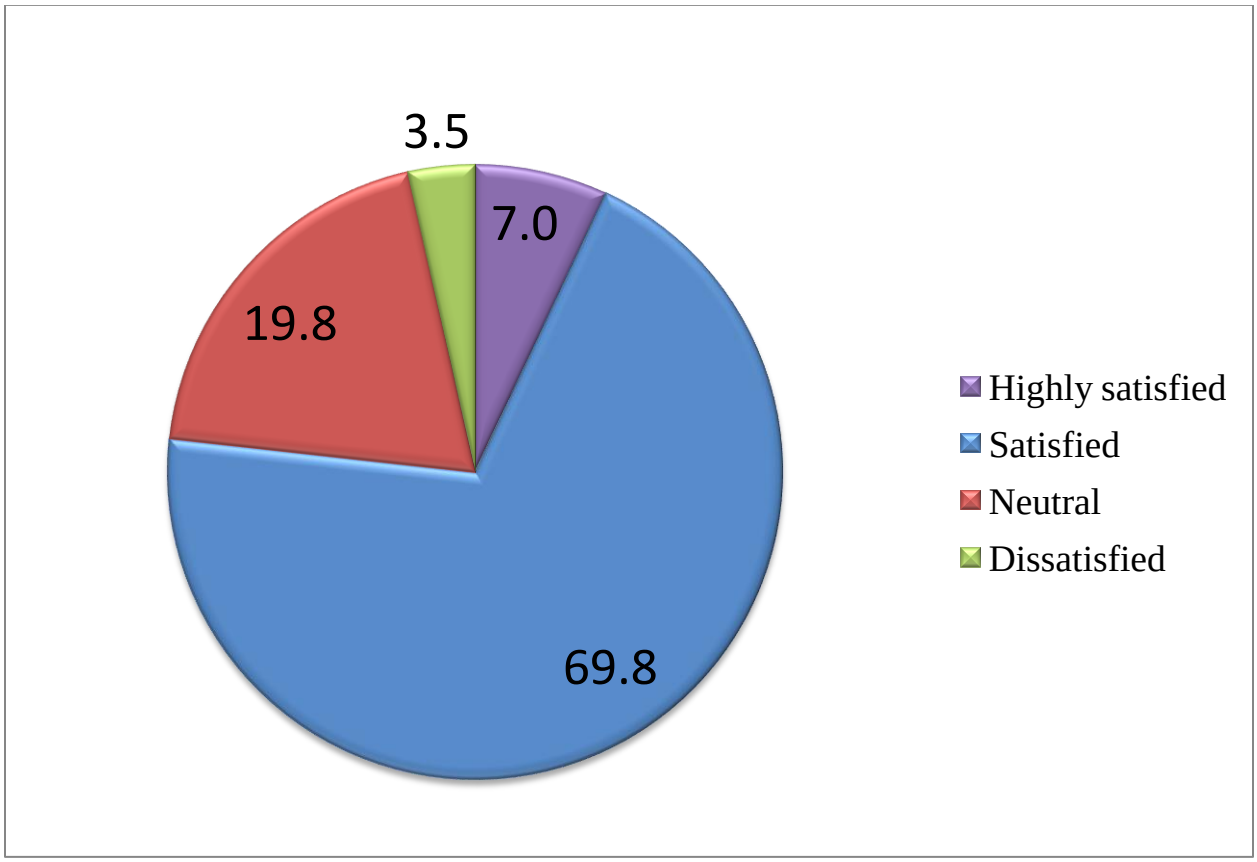
Services & Environment of emergency department



6. Overall view regarding emergency department of Apollo BSR hospital

Findings

- 7.0% patient is highly satisfied with the emergency department.
- 69.8% patient is satisfied with the emergency department.
- 19.8% patient is neutral with the emergency department.
- 3.5% patient is dissatisfied with the emergency department



SUGGESTIONS FOR IMPROVEMENT OF EMERGENCY DEPARTMENT-

PATIENT's PERSPECTIVE

- Patient are not properly guided for bill estimation ,investigation & registration procedure.(*9.3% Cases*)
- Delay in deciding the consultant for patient by duty doctor which leads to difficulty & repeat registration of the patient.*(5.9% Cases)*
- Inadequate explanation of treatment and counseling of patient and patient's relatives by duty doctor which is later on handled by consultant doctor.(*25.6% Cases*)
- Bed allotment of the patient is not properly done by nursing staff which leads to shifting of patient multiple times within the department.(*6.9% Cases*)
- In case of patient shifting ,long waiting time for file preparation & delay in availability of attendants for shifting the patient to other departments*(3.4% Cases)*

AREAS OF IMPROVEMENT IN EMERGENCY DEPARTMENT

- Emergency department medicines and equipments related documents are maintained by nursing staff of department but as observed no physical verification of medicines & equipments by staff is done, only at the month verification is performed.
- The bed sheets of the department are used for multiple times for multiple patients, as only ten bed sheets are provided by linen & laundry department.
- Nursing staff sometimes miss the daily entry of patients visiting to the emergency department in the patient daily entry register.
- Patient satisfaction with pain management feedback form filled by nursing staff in case of casualty admission patients without information to patient.
- There should be a proper protocol for consultant allotment to the patient which can reduce the waiting time of patient in registration procedure.
- In 2.3% cases hand hygiene is not maintained by the duty doctors of the emergency department.
- Emergency department entrance is not used rather main gate is used for shifting patient to department leading to long transit time & creating panic environment for OPD patients in few situations.
- 24.4% patients in the casualty are in the age group of >60years, So geriatric specialties (doctors specialized in geriatric care and training of nursing staff in geriatric care) can be introduced in the hospital.
- 60.5% of patients belongs to upper most segment of the society, So hospitality services like courteous behavior, good communication of hospital staff should be improved with high profile patients visiting to the hospital.

PROJECT REPORT

ON

"PATIENT's EXPERIENCE & CONTENTMENT TOWARDS IN PATIENT DEPARTMENT"

INTRODUCTION TO THE IN PATIENTDEPARTMENT

Most of the functions of the Apollo BSR hospital revolve around inpatient services. An independent sub unit of inpatient services is called a ward or nursing unit. Nursing unit is designed, equipped and staffed to look after the needs of patients by a team of hospital staff.

Functions of Inpatient Services

- To provide the highest possible quality of medical and nursing care to admitted patients.
- To make provision for essential equipments, drugs and all items required for patient care
- To provide comfortable environment to fulfill basic needs in the hospital like food, sleep and rest, entertainment and sanitation etc. of the admitted patients.

Location

Inpatient department located in second floor of hospital & have access with OPD, Emergency & OT by Elevator & staircase.

Layout

- Inpatient wards are nightingale type in general wards with well lighted and ventilated environment, in which nurses have view of all the patient and patient feels secure in presence of other patients. There are six general wards present in the hospital which is divided as-
    - Male general wards
    - Female general wards
    - Gynecology general wards
    - Day care general wards
    - Oncology general wards
    - NRHM general wards
- Private wards are divided as
    - Ten private wards
    - Ten semiprivate wards
    - Two executive suites
    - Three VIP suites
    - One super deluxe
- Total 154 beds available as inpatient wards in Apollo BSR hospital.

OBJECTIVES

- To analyze the patient/relative's experience during their stay in IPD.
- To analyze the points of lacuna leading to dissatisfaction to patient/relatives in IPD.
- To suggest the improvement in inpatient wards to enhance the patient delight.
- To analyze the profile of the patients visiting Apollo BSR hospital.

TOOLS & TECHNIQUES

- Sampling frame-All patient admitting in in-patient department.
- Sample size-186 patients

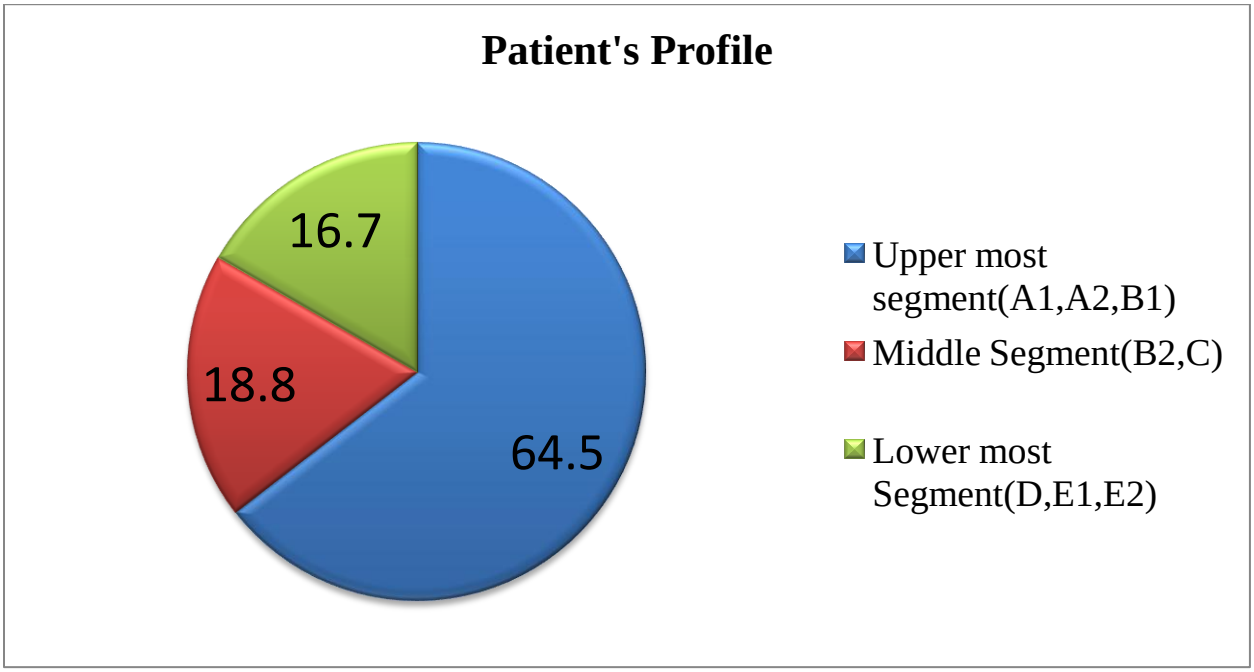
  (Total in-patient admission in a month-600 approx.)
- Sampling technique-Convenience method/simple random sampling.
- Study Period-15 days
- Study method-Face to face interview; Observation.
- Study tool-Questionnaire.

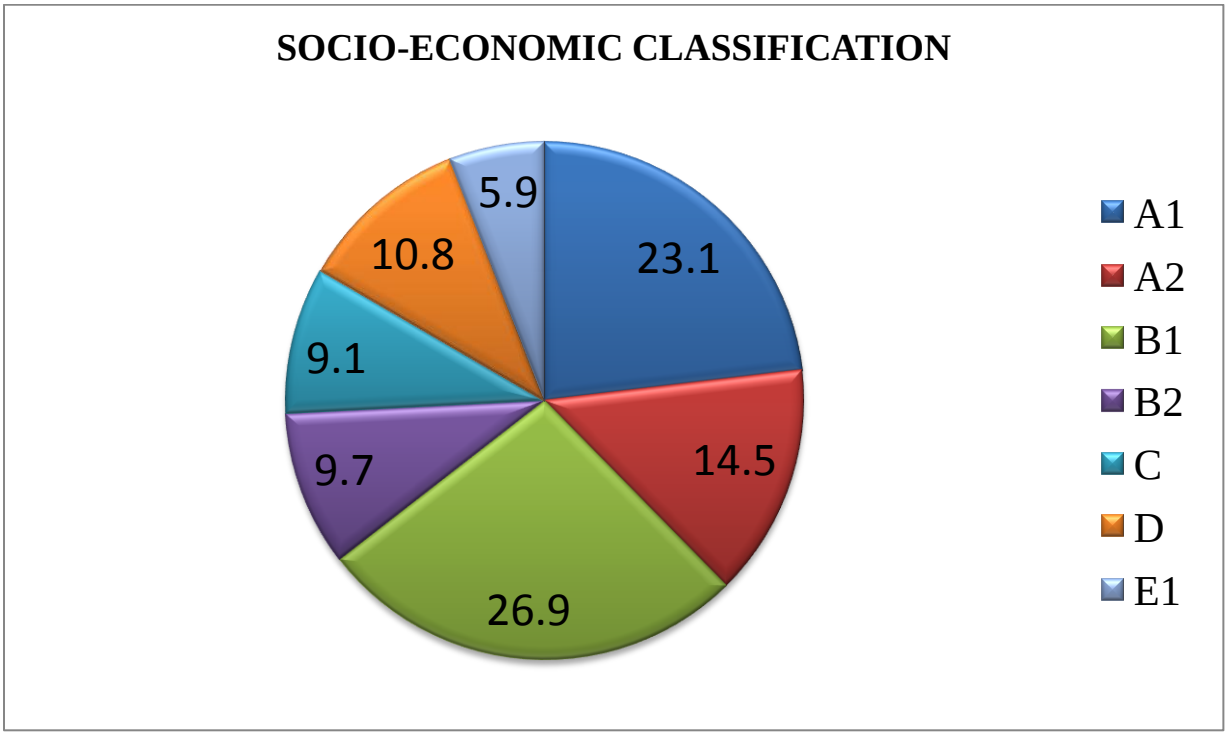
PATIENT PROFILE ANALYSIS

Patient profile analysis is based on socio-economic classification grid, in which chief earner occupation & education is considered for grid analysis

Findings

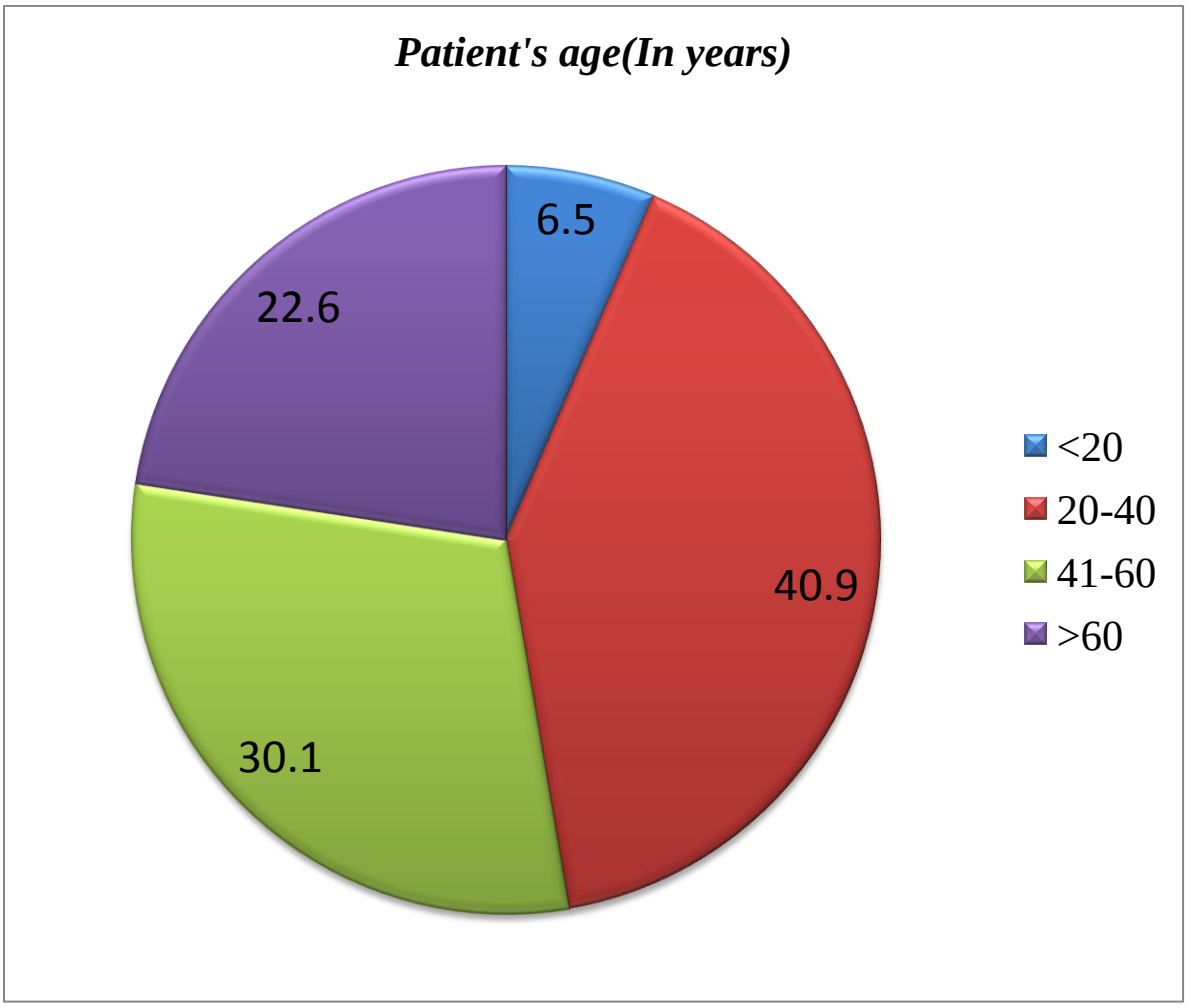
- ✓ 64.5% patients belong to the upper segment of the society.
- ✓ 18.8% patients belong to the lower segment of the society.
- ✓ 16.7% patients belong to the middle segment of the society





Age of the patients-

- ✓ 6.5% patients are in the age group <20 years
- ✓ 40.9% patients are in the age group 20-40years.
- ✓ 30.1% patients are in the age group 41-60years.
- ✓ 22.6% patients are in the age group >60years.



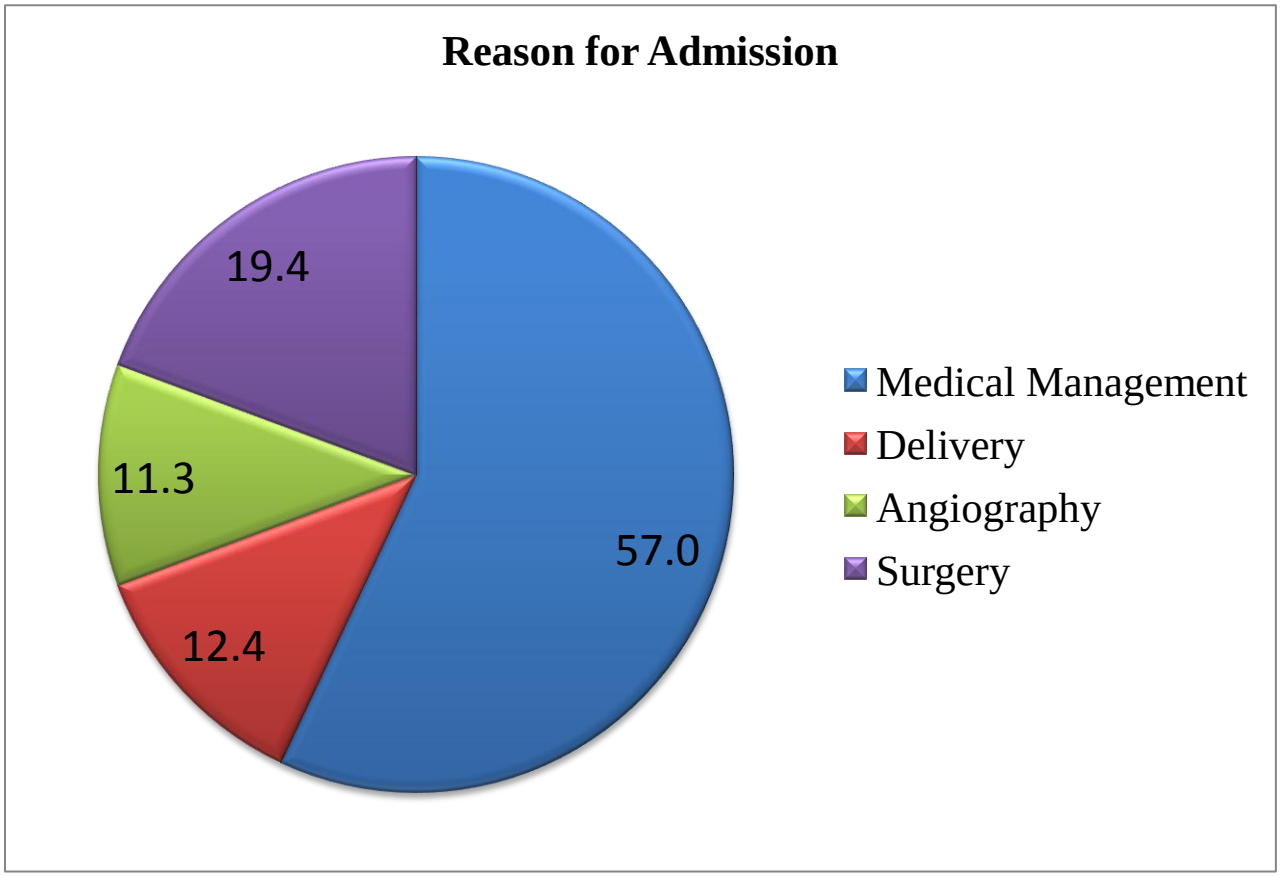
Reason for admission

The reasons for admission in in-patient wards of hospital are-

- Medical management
- Surgery
- Delivery
- Angiography/Angioplasty

Findings

- 57.0% patient has taken admission in hospital for medical management purpose.
- 12.4% patient has taken admission in hospital for delivery purpose.
- 11.3% patient has taken admission in hospital for angiography/angioplasty purpose.
- 19.4% patient has taken admission in hospital for surgery purpose.



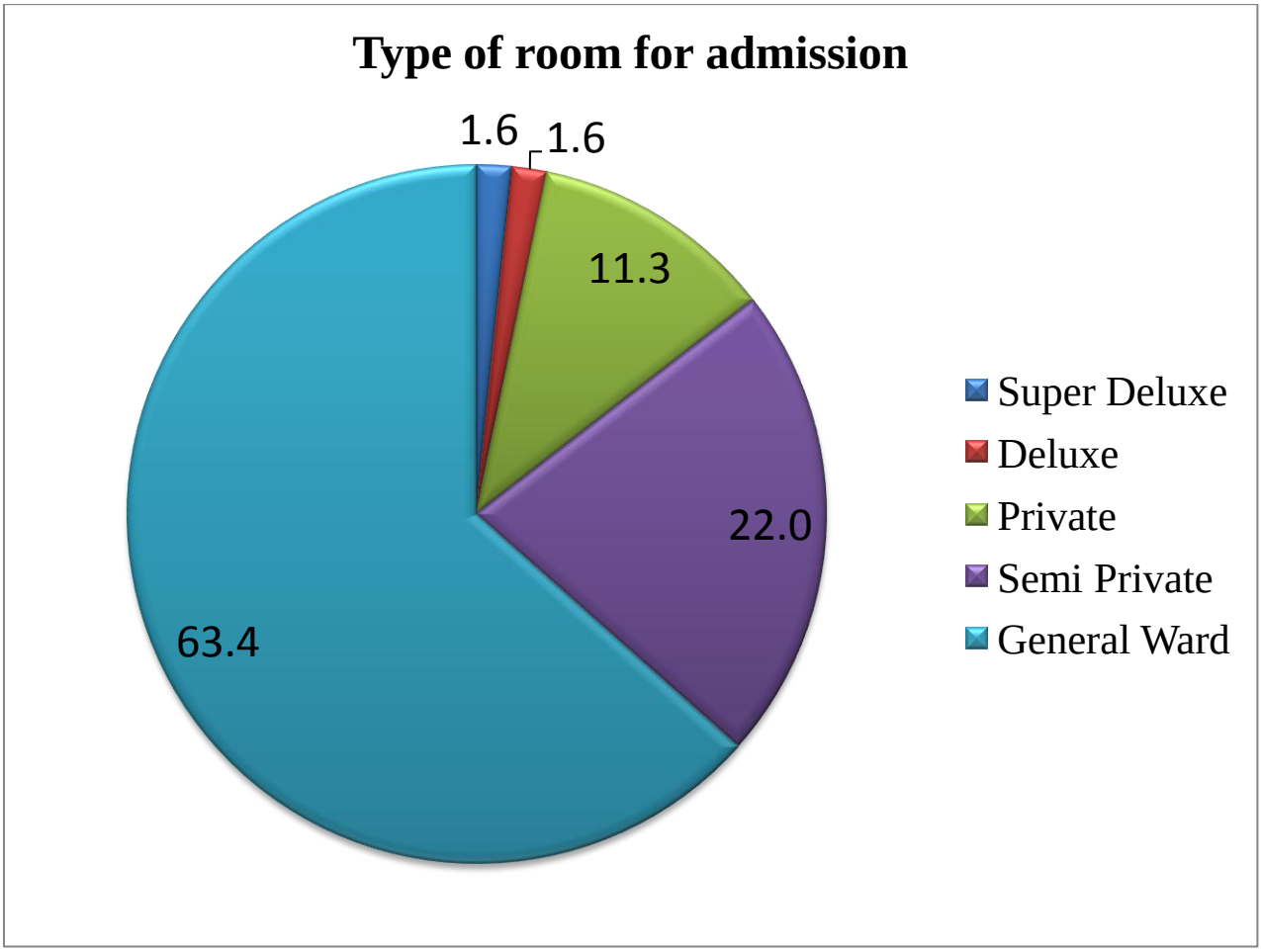
Type of room for admission

Patient visiting the in-patient department is admitted in following wards as per patient decision of room allotment.

- Super deluxe
- Deluxe
- Private
- Semi private
- General

Findings

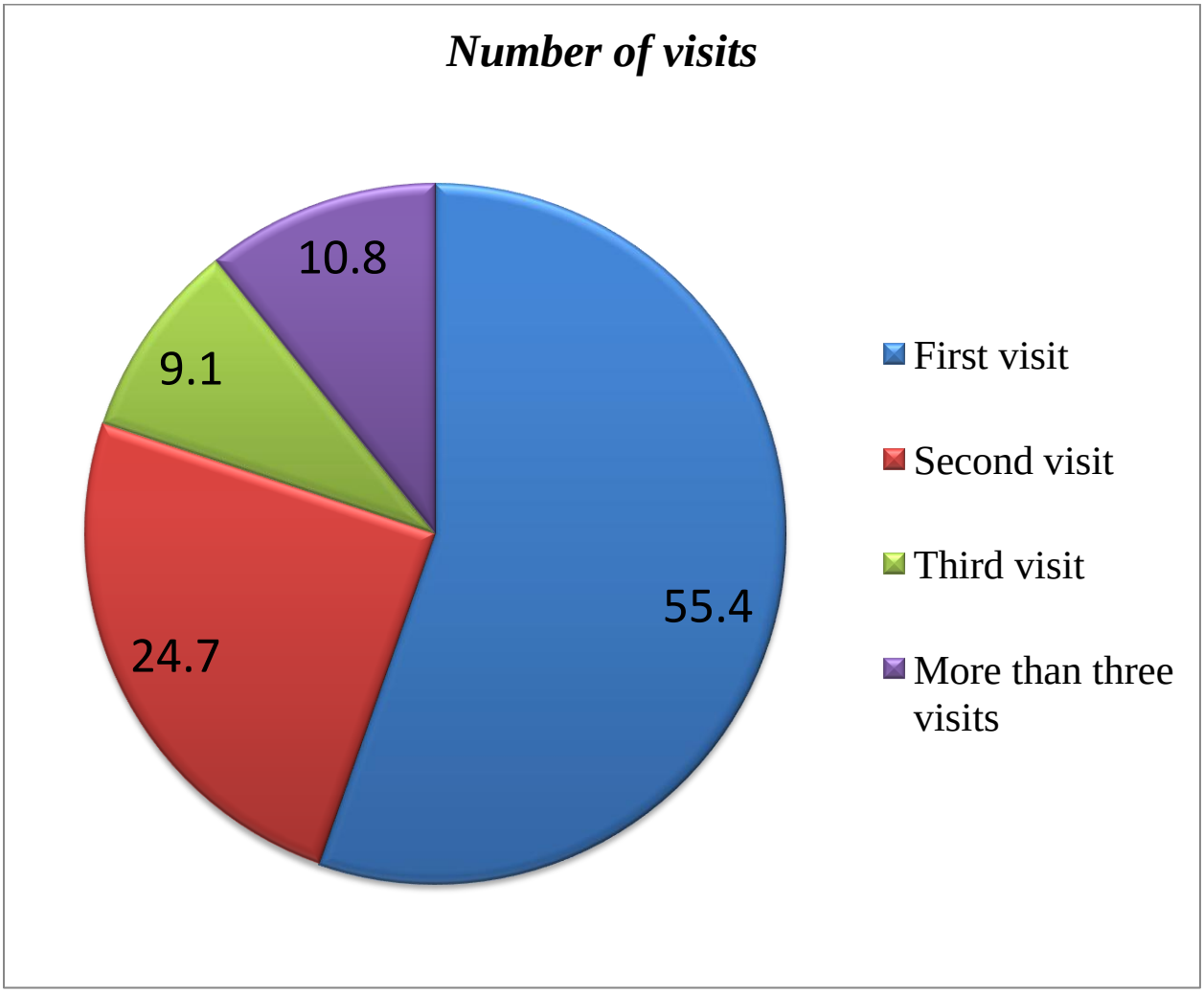
- 63.4% patient has taken admission in hospital in general wards.
- 22.0% patient has taken admission in hospital in semi private wards.
- 11.3% patient has taken admission in hospital in private wards.
- 1.6% patient has taken admission in hospital in deluxe wards.
- 1.6% patient has taken admission in hospital in super deluxe wards.



Number of visits

Findings

- 55.4% of patient visited the hospital for admission for the first time.
- 24.7% of patient visited the hospital for admission for the second time.
- 9.1% of patient visited the hospital for admission for the third time.
- 10.8% of patient visited the hospital for admission for the fourth time.



Apollo BSR hospital source of information

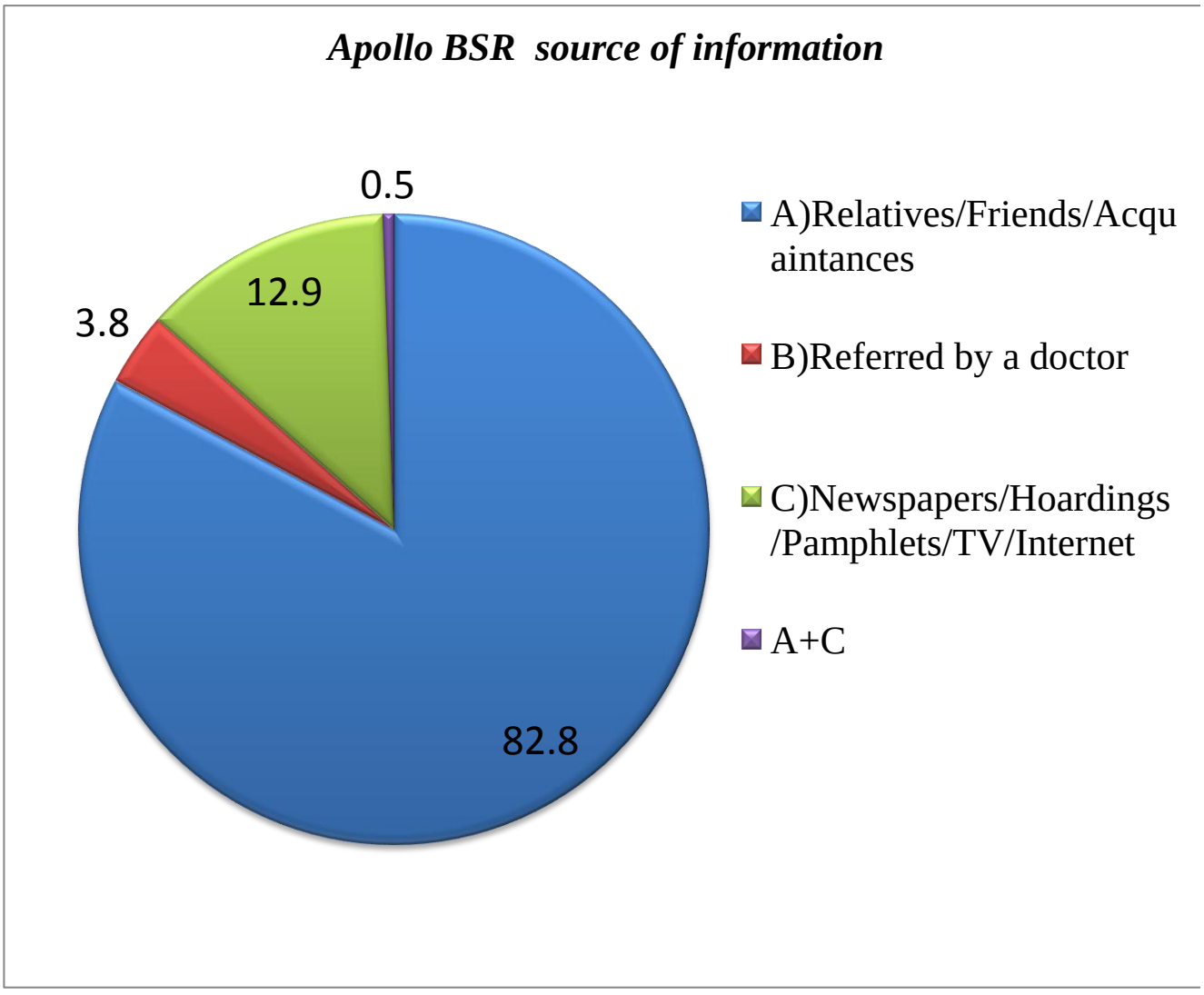
The source of information for the hospital can be

- ✓ Relatives/Friends/Acquaintances.
- ✓ Referred by a doctor.
- ✓ Newspapers/Hoardings/Pamphlets/TV/Internet.

Findings

Apollo BSR hospital source of information helps in the analysis of the hospital profile, which is found

- ➢ 82.8% of the patient's source of information of hospital is relatives/friends/acquaintances.
- ➢ 3.8% of the patient's source of information of hospital is referred by the doctors.
- ➢ 12.9% of the patient's source of information of hospital is media.

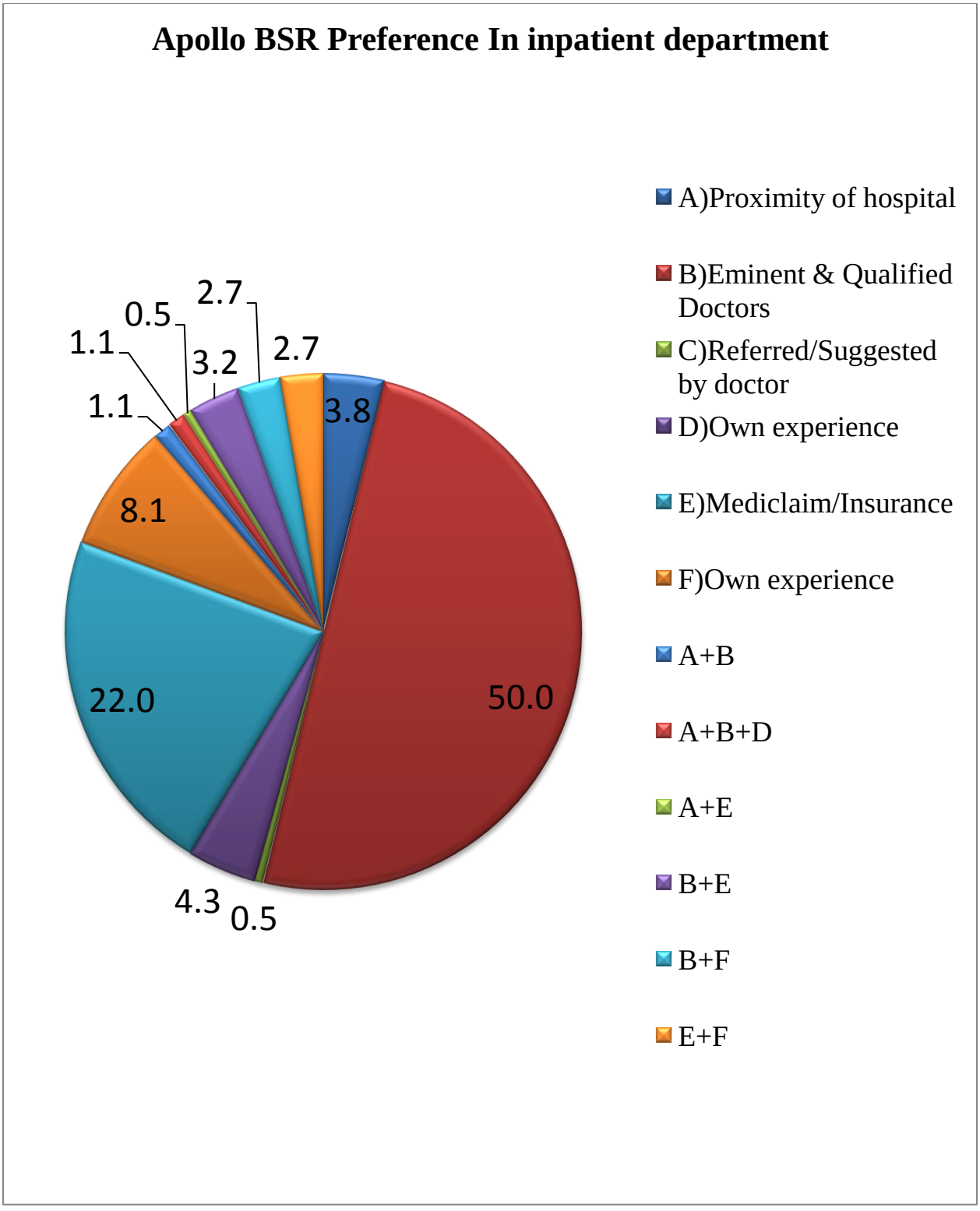


Apollo BSR Hospital preference by the patient in case of admission

The hospital preference in case of admission can be-proximity of the hospital, eminent & qualified doctors, referred or suggested by the doctors or may be patient's own experience or the combination of options

On analysis of the preference of hospital-

- 4.3% preferred Apollo BSR hospital in case of admission on the basis of their own previous experience.
- 50% of the patients preferred Apollo BSR hospital in case of admission on the basis of eminent & qualified doctors present in the hospital.
- 0.5% of the patients preferred Apollo BSR hospital in case of admission as referred or suggested by the doctors.
- 3.8% of the patients preferred Apollo BSR hospital in case of admission on the basis of proximity of the hospital.
- 22.0% of the patients preferred Apollo BSR hospital in case of admission on the basis of mediclaim or medical insurance.
- 8.1% of the patients preferred Apollo BSR hospital in case of admission on the basis of their own previous experience.


Apollo BSR Preference In inpatient department
2.7
0.5
1.1
3.2
2.7
1.1
3.8
8.1
22.0
50.0
4.3
0.5
A)Proximity of hospital
B)Eminent & Qualified Doctors
C)Referred/Suggested by doctor
D)Own experience
E)Mediclaim/Insurance
F)Own experience
A+B
A+B+D
A+E
B+E
B+F
E+F

IN-PATIENT DEPARTMENT ANALYSIS- PATIENT's PERSPECTIVE

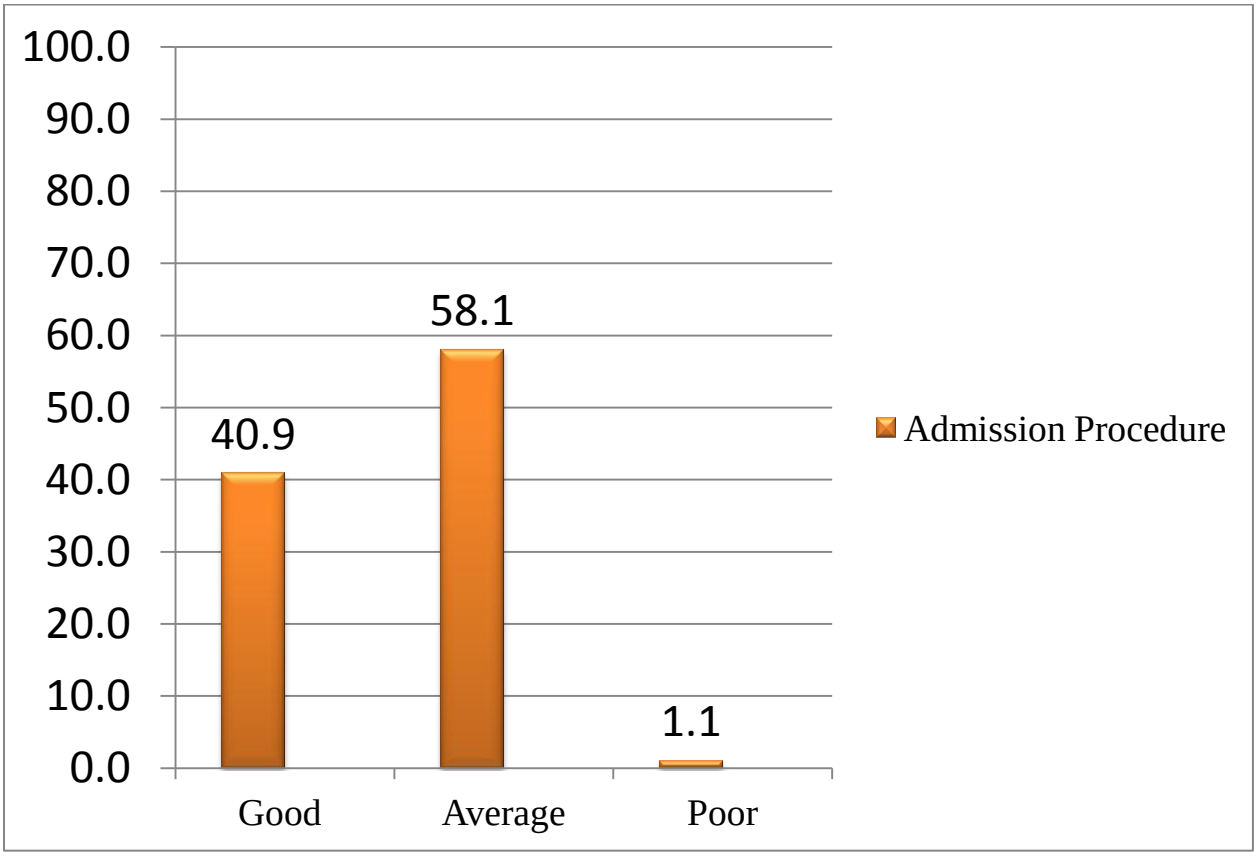
In patient department of hospital is analyzed according to likert scale ranging from good to poor on following points as the perspective of patient visiting the department which reveals patient satisfaction level from the in-patient department.

1. Admission procedure
2. Cleanliness of rooms
3. Quality of linen/bed sheet
4. Cleanliness of toilet
5. Services & care provided by nursing staff
6. Behavior of nursing staff
7. Quality & taste of food
8. Consultant visit & attention
9. Response & attention of duty doctors
10. Facilities for attendants/relatives/ friends
11. Security staff response & behavior
12. Billing procedure
13. Overall view regarding in patient department

1. Admission procedure

The admission procedure of the in-patient department is analyzed as

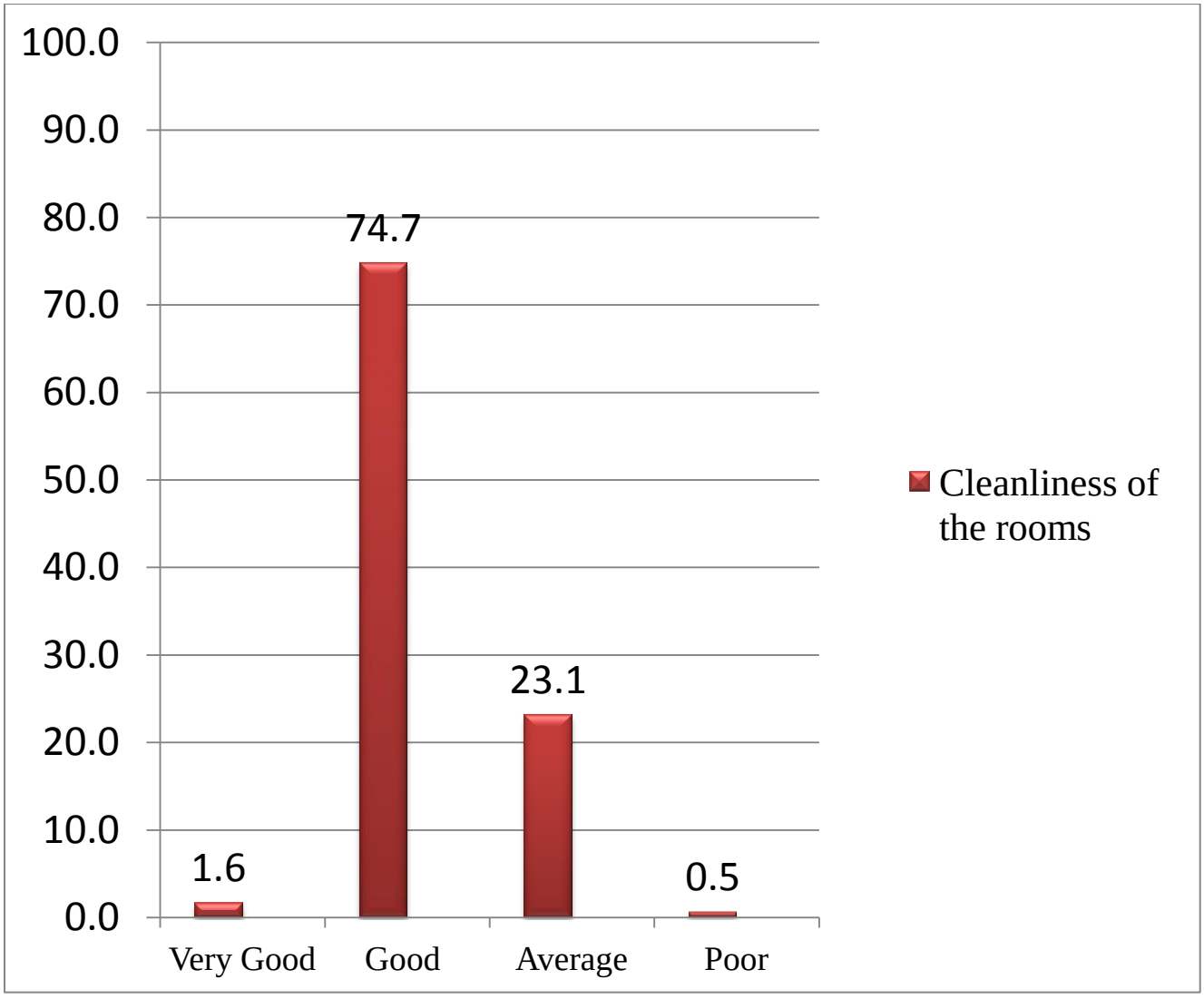
- 40.9% patient's experience regarding admission procedure is good.
- 58.1% patient's experience regarding admission procedure is average.
- 1.1% patient's experience regarding admission procedure is poor.



2. Cleanliness of rooms

The cleanliness of rooms of in-patient department is analyzed as

- 1.6% patient's experience regarding cleanliness of rooms is very good.
- 74.7% patient's experience regarding cleanliness of rooms is good
- 23.1% patient's experience regarding cleanliness of rooms is average.
- 0.5% patient's experience regarding cleanliness of rooms is poor.

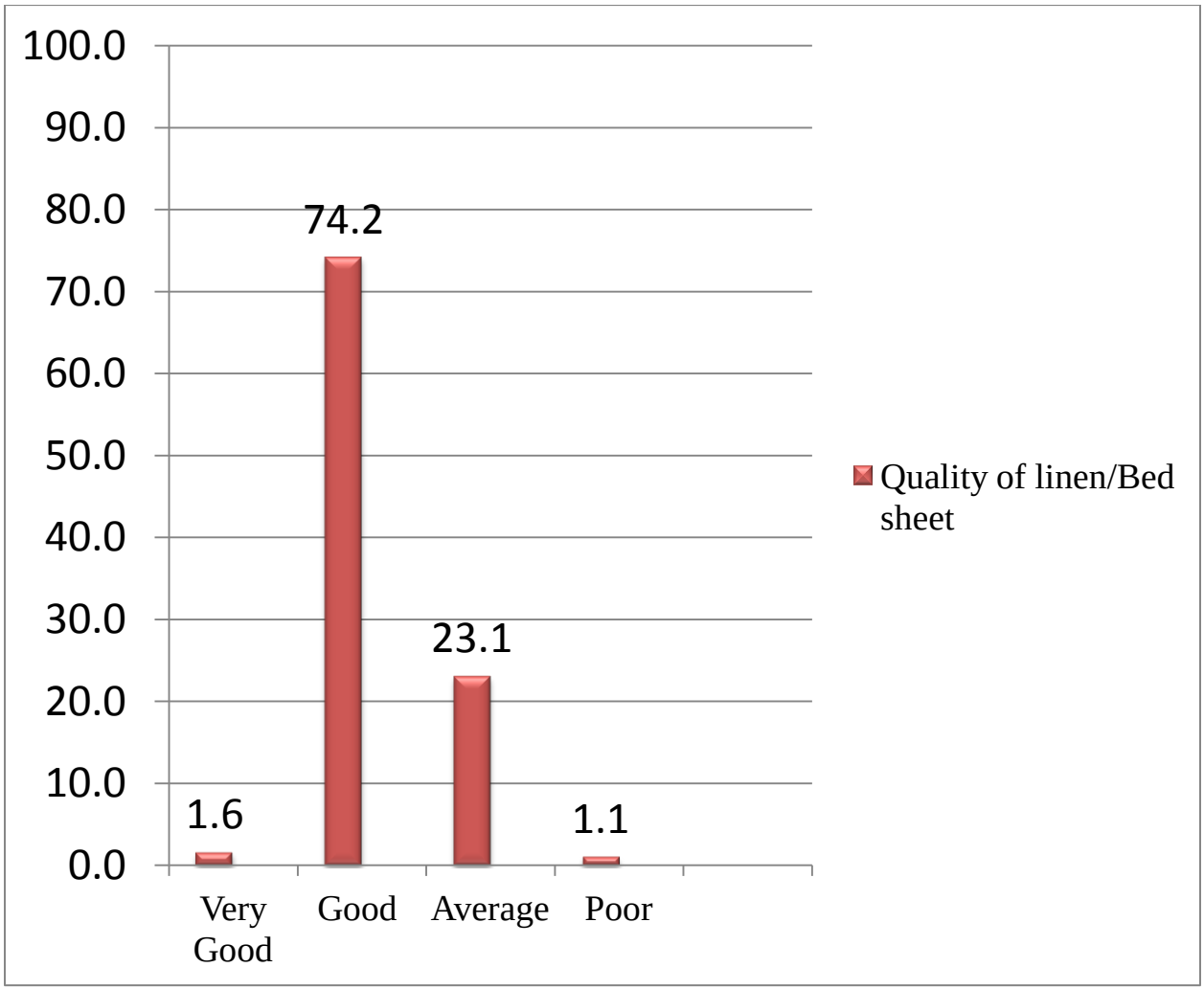


3.Quality of linen/bed sheets

The analysis of quality of linen is based on patient's experience regarding cleanliness of bed sheets used in the department, daily changing of the bed sheets and quality of the bed sheets.

Findings

- 1.6% patient's experience regarding quality of linen is very good.
- 74.2% patient's experience regarding quality of linen is good.
- 23.1% patient's experience regarding quality of linen is average.
- 1.1% patient's experience regarding quality of linen is poor.

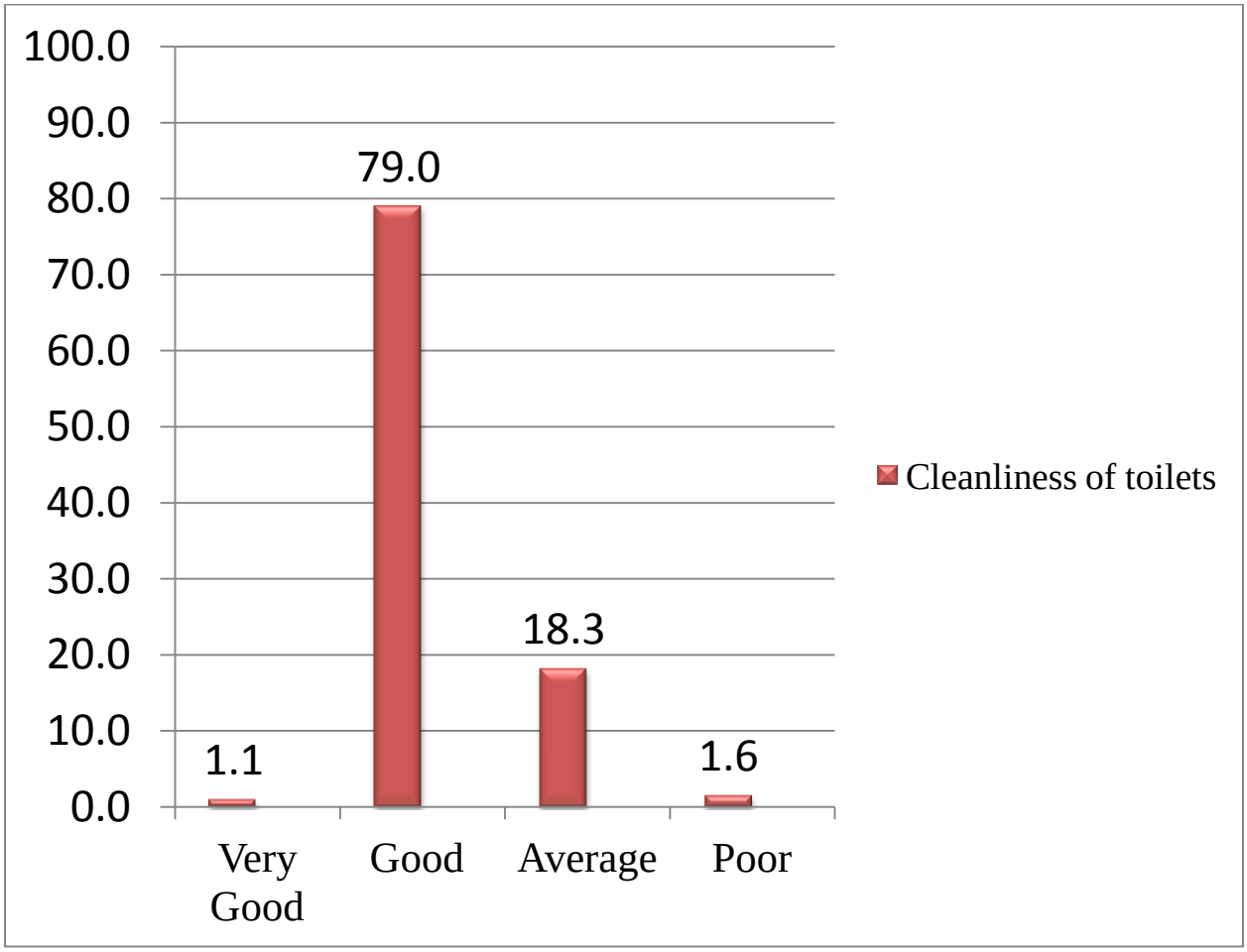


4. Cleanliness of toilets

The analysis of cleanliness is based on patient's experience regarding daily cleaning of the toilets and hygienic environment of the toilets.

Findings

- 1.1% patient's experience regarding cleanliness of toilets is very good.
- 79.0% patient's experience regarding cleanliness of toilets is good.
- 18.3% patient's experience regarding cleanliness of toilets is average.
- 1.6% patient's experience regarding cleanliness of toilets is poor.

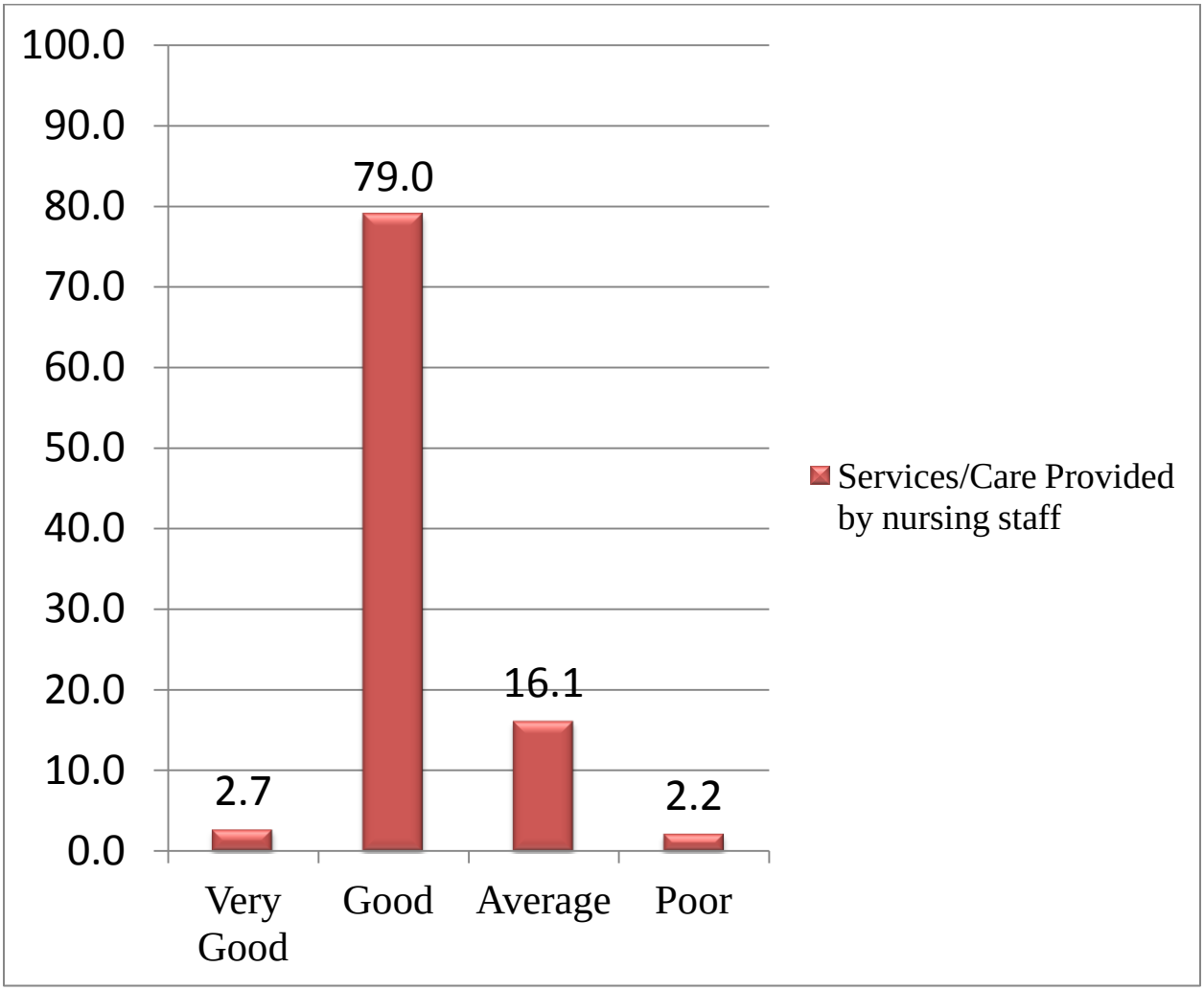


5. Service & care provided by the nursing staff

The analysis of services & care provided by the nursing staff is based on patient's experience regarding promptness and responsiveness of nursing staff in the treatment of the patients admitted in the wards.

Findings

- 2.7% patient's experience regarding services & care provided by the nursing staff is very good.
- 79.0% patient's experience regarding services & care provided by the nursing staff is good.
- 16.1% patient's experience regarding services & care provided by the nursing staff is average.
- 2.2% patient's experience regarding services & care provided by the nursing staff is poor.

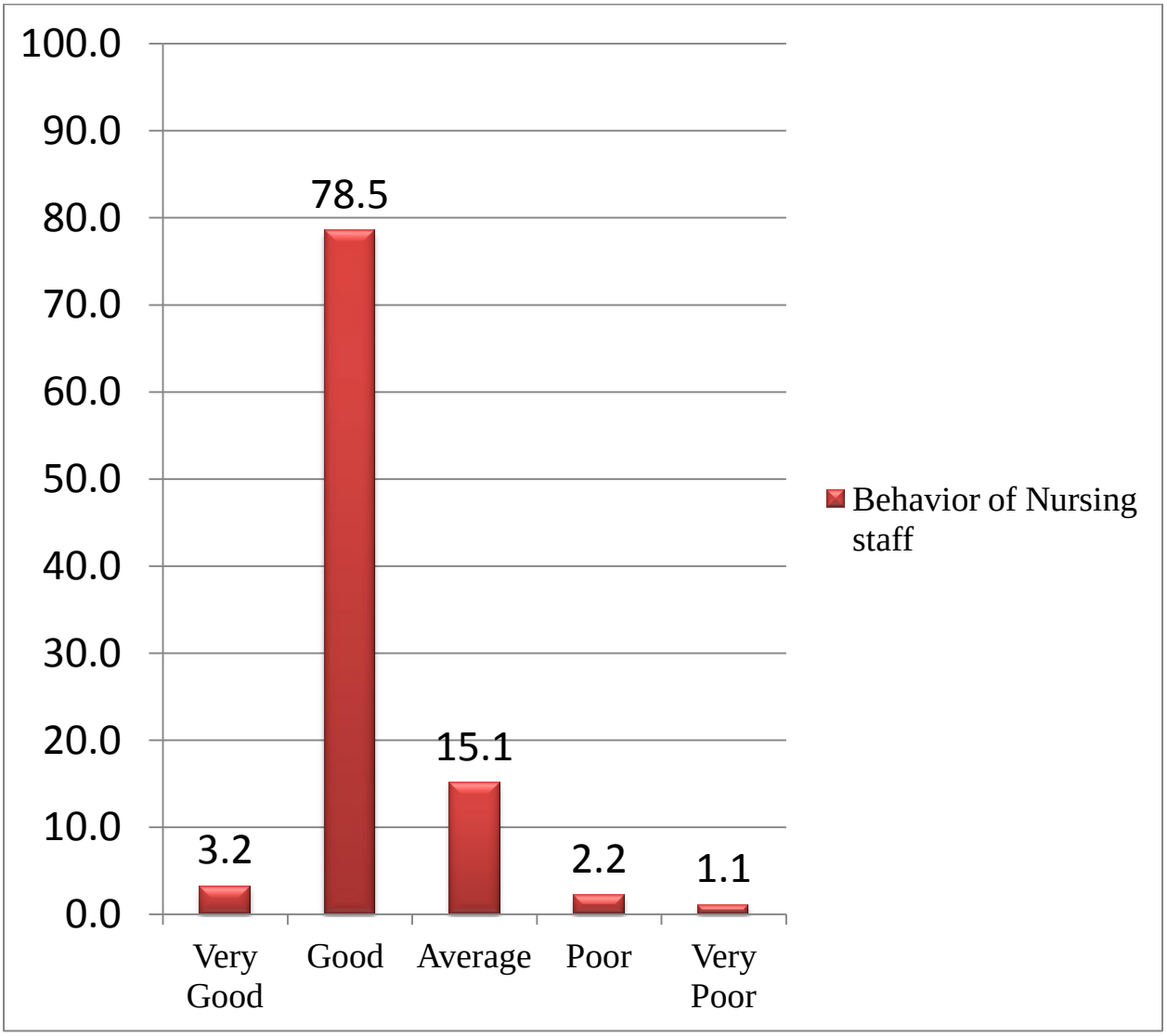


5. Behavior of nursing staff

The analysis of behavior of nursing staff is based on patient's experience regarding courteous behavior, polite communication of nursing staff during the treatment of the patient admitted in the wards.

Findings

- 3.2% patient's experience regarding behavior of nursing staff is very good.
- 78.5% patient's experience regarding behavior of nursing staff is good.
- 15.1% patient's experience regarding behavior of nursing staff is average.
- 2.2% patient's experience regarding behavior of nursing staff is poor.
- 1.1% patient's experience regarding behavior of nursing staff is very poor.

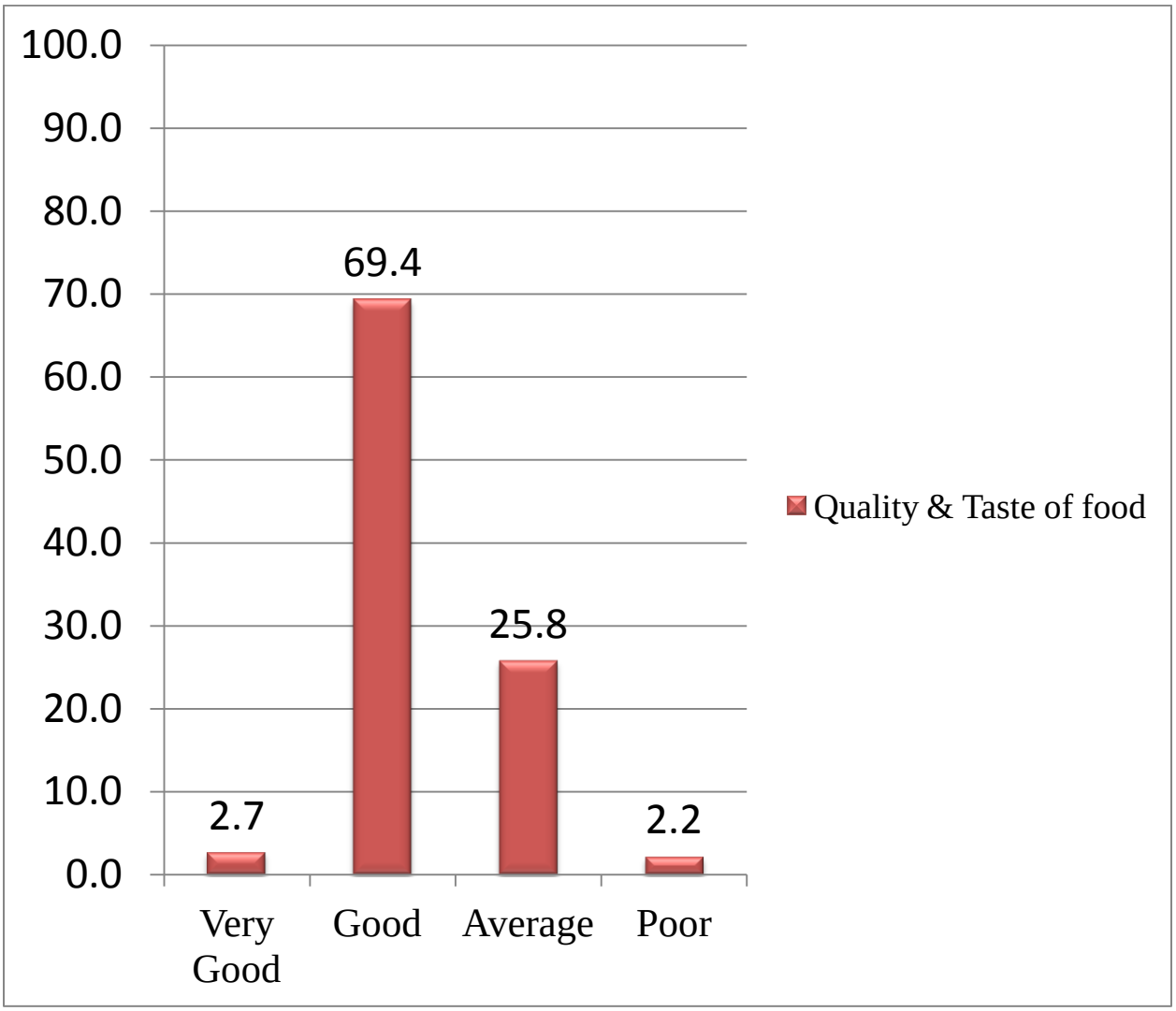


6. Quality & taste of food

The analysis of quality and taste of food is based on patient's experience regarding timely placement of food, freshness and taste of food to the patient admitted in the wards.

Findings

- 2.7% patient's experience regarding quality and taste of food is very good.
- 69.4% patient's experience regarding quality and taste of food is good.
- 25.2% patient's experience regarding quality and taste of food is average.
- 2.8% patient's experience regarding quality and taste of food is poor.



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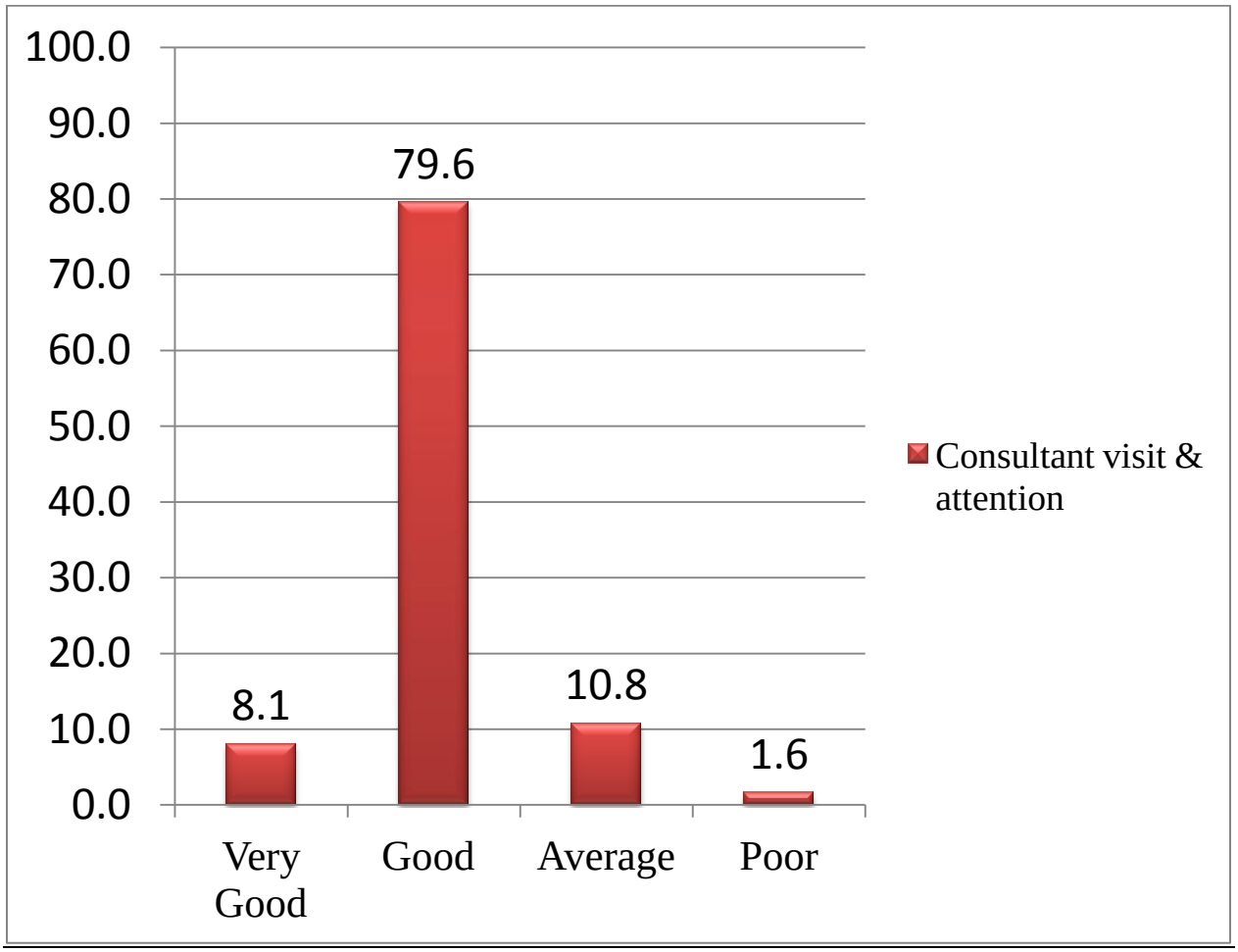
7. Consultant visit & attention

The analysis of consultant visit and attention is based on patient's experience regarding daily visit of consultant, proper counseling and treatment explanation to the patient admitted in the wards.

Findings

- 8.1% patient's experience regarding consultant visit and attention is very good.
- 79.6% patient's experience regarding consultant visit and attention is good.
- 10.8% patient's experience regarding consultant visit and attention is average.
- 1.6% patient's experience regarding consultant visit and attention is poor.

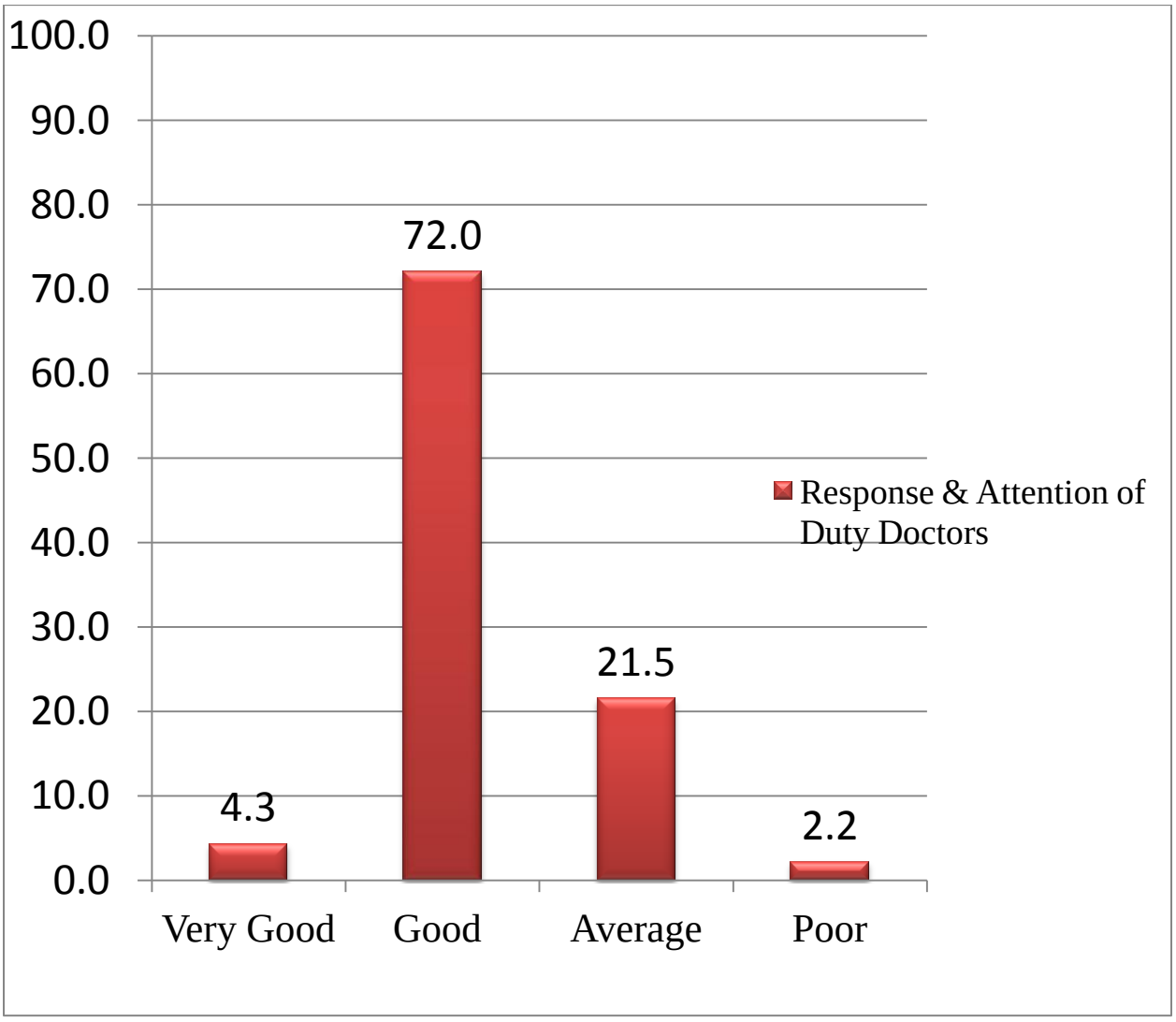


8. Response & attention of duty doctors.

The analysis of response and attention of duty doctors is based on patient's experience regarding daily visit of duty doctor, proper counseling and treatment explanation to the patient admitted in the wards.

Findings

- 4.3% patient's experience regarding response and attention of duty doctors is very good.
- 72.0% patient's experience regarding response and attention of duty doctors is good.
- 21.5% patient's experience regarding response and attention of duty doctors is average.
- 2.2% patient's experience regarding response and attention of duty doctors is poor.

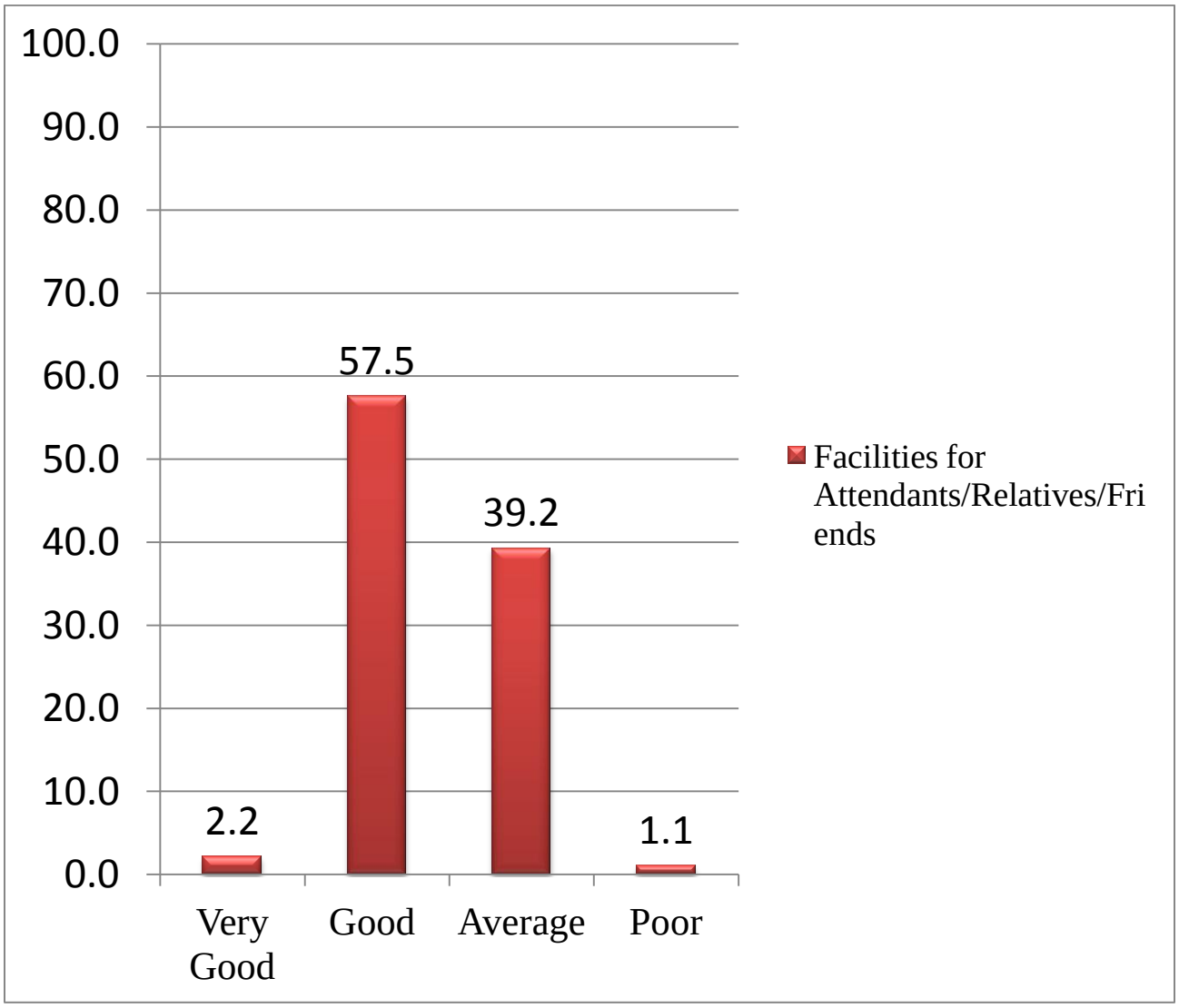


9. Facilities for attendants/relatives/ friends

The analysis of facilities for attendants/relatives/ friends is based on patient's experience regarding waiting facility, rest and food facility in the in-patient department.

Findings

- 2.2% patient's experience regarding facilities for attendants/relatives/ friends is very good.
- 57.5% patient's experience regarding facilities for attendants/relatives/ friends is good.
- 39.2% patient's experience regarding facilities for attendants/relatives/ friends is average.
- 1.1% patient's experience regarding facilities for attendants/relatives/ friends is poor.

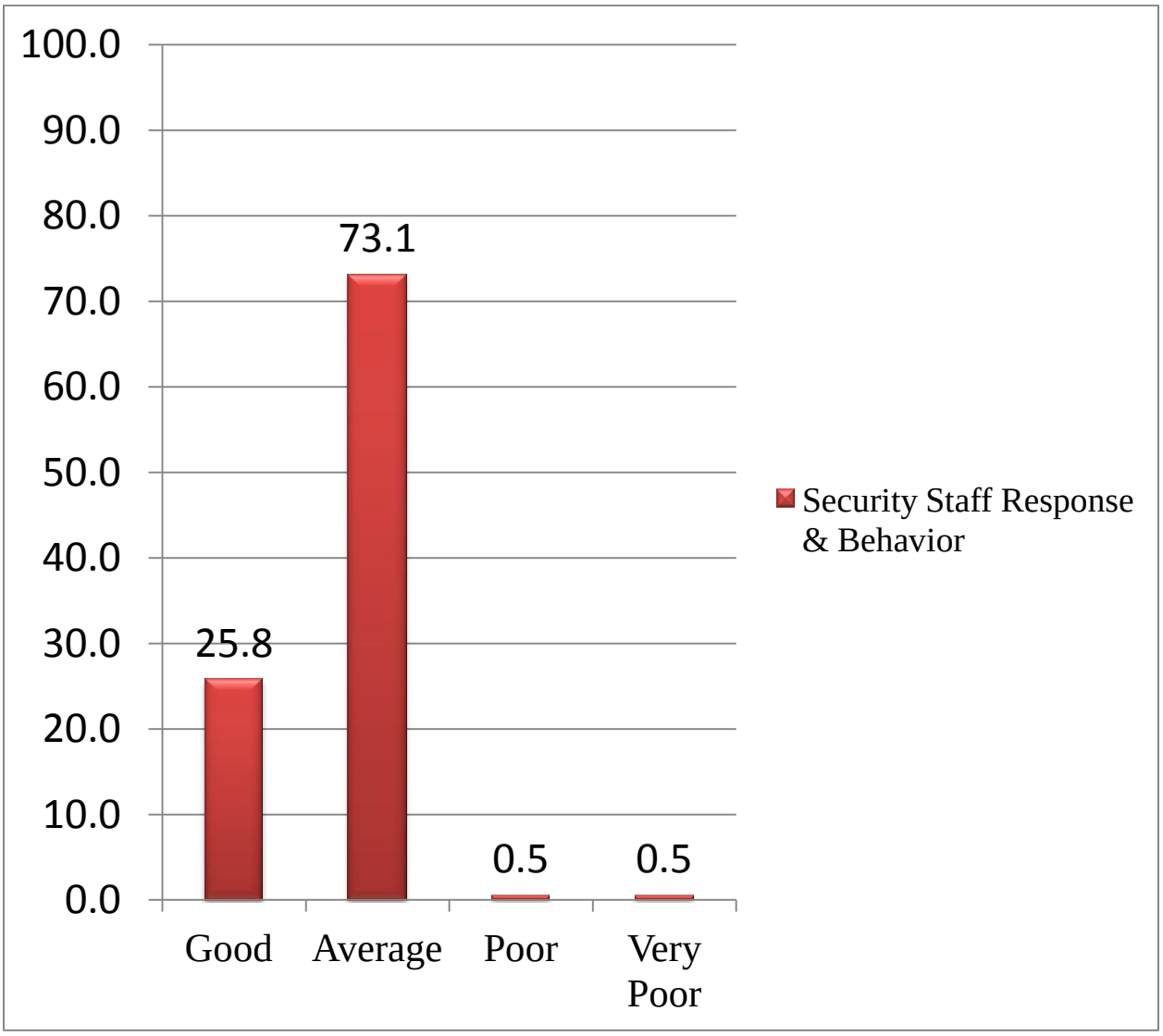


10. Security staff response and behavior

The analysis of security staff response and behavior is based on patient's experience regarding proper guidance, polite communication to the patient or relatives.

Findings

- 25.8% patient's experience regarding security staff response and behavior is good.
- 73.1% patient's experience regarding security staff response and behavior is average.
- 0.5% patient's experience regarding security staff response and behavior is poor.
- 0.5% patient's experience regarding security staff response and behavior is very poor.

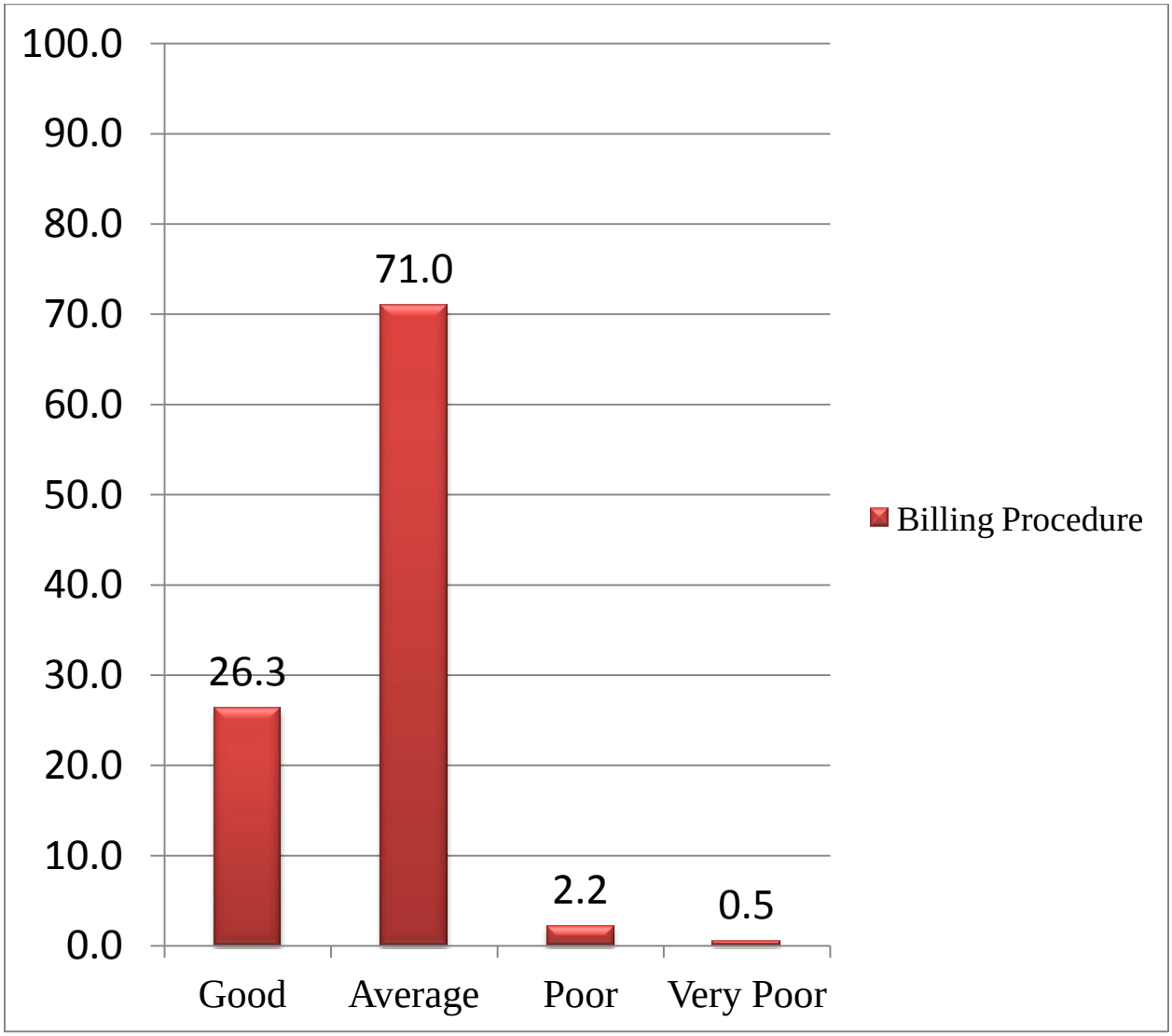


10. Billing procedure

The analysis of billing procedure is based on patient's experience regarding bill estimation, daily bill deposition slip and transparent billing procedure.

Findings

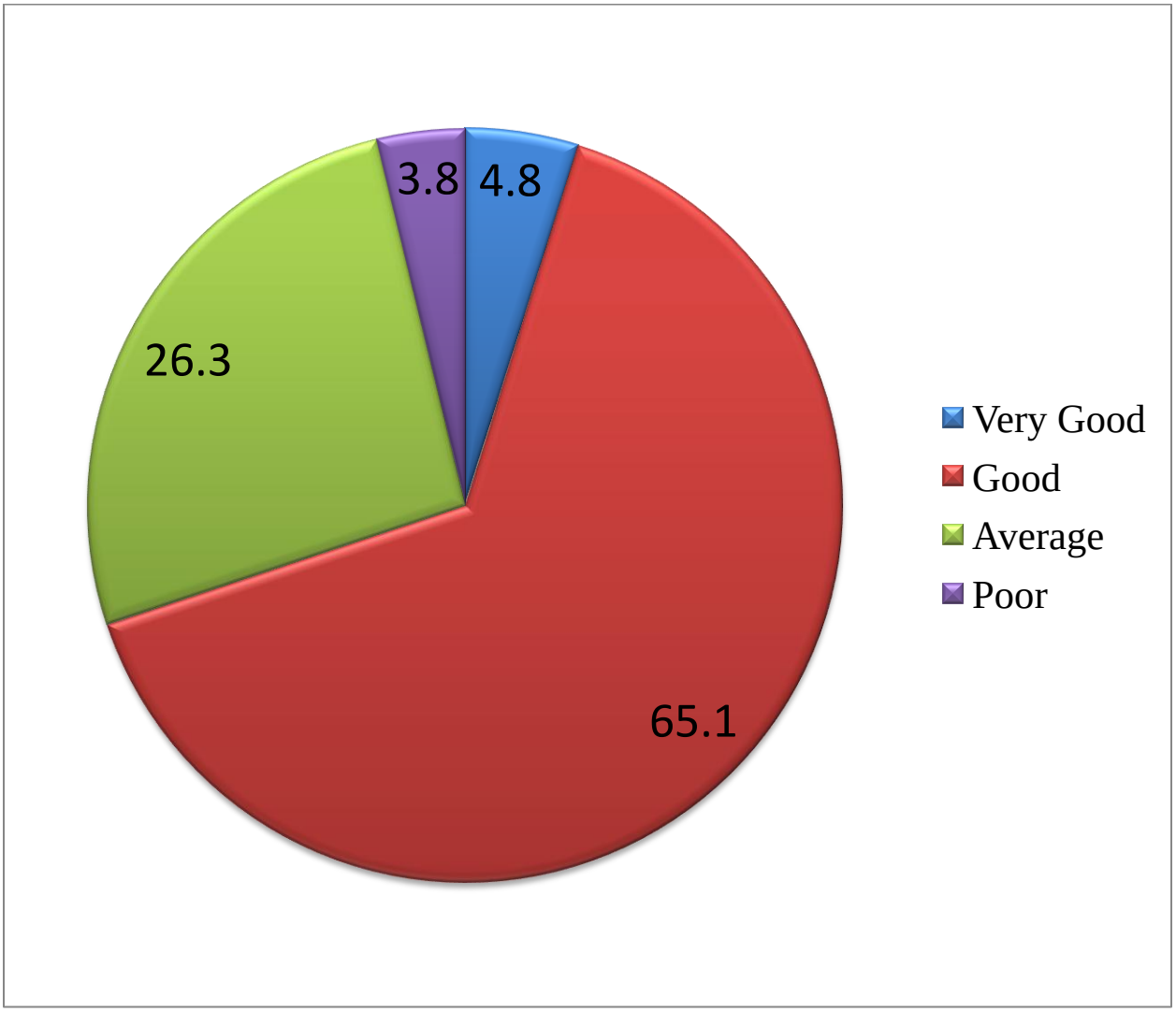
- 26.3% patient's experience regarding billing procedure is good.
- 71.0% patient's experience regarding billing procedure is average.
- 2.2% patient's experience regarding billing procedure is poor.
- 0.5% patient's experience regarding billing procedure is very poor.



13. OVERALL VIEW REGARDING IN PATIENT DEPARTMENT

Findings

- 4.8% patient's experience regarding overall view regarding in patient department is very good.
- 65.1% patient's experience regarding overall view regarding in patient department is good.
- 26.3% patient's experience regarding overall view regarding in patient department is average.
- 3.8% patient's experience regarding overall view regarding in patient department is poor.



SUGGESTIONS-PATIENT's PERSPECTIVE

- There is delay in availability of attendants leading to long waiting time for investigation and shifting of patient in 8.6% cases due to less number of attendants in the housekeeping department.
- Late housekeeping services leading to patient's inconvenience in 4.8% cases.
- There is inconvenience to the patient due to improper nursing staff behavior in Semi private wards in 3.2% cases.
- 4.3% patient complains of quality of food provided from canteen and 11.3% patient is not satisfied with the dietician behavior & counseling.
- The billing procedure of the hospital should be more transparent to the patient as stated by 3.2% patients.
- Patients are unsatisfied with behavior of security staff(2.6% cases)
- Patients are unsatisfied with duty doctor visit & treatment explanation.(4.3% cases)

CONCLUSION & RECOMMENDATIONS

- 64.5% Patients belongs to the upper segment of the society, so hospitality services like courteous behavior, polite communication should be adapted by the hospital staff.
- 57% patient take admission for medical management, so medicine specialty doctors should be increased in the hospital.
- 55.4% patients take admission for the first time, so services of the hospital should be satisfying to the patient, which can also act for mouth to mouth marketing for the hospital as in 82.8% cases, Apollo source of information is relatives/friends/acquaintances.
- In semiprivate wards incorrect entrance of patient MR number on the occupancy board.
- Patient entry register is not properly maintained in private, semiprivate wards.
- Polite behavior of floor in charge should be encouraged with the patient & relatives as in few situations there is arousal of arguments between patient and floor in charge.
- No proper explanation of feedback form given to the patients by floor in-charge.
- Nursing staff is engaged in documentation for maximum time in the department.

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ANNEXURE

CHECKLIST FOR EMERGENCY DEPARTMENT

Nursing Staff

1	Daily Rooster maintained.		
2	Availability of staff in a shift.		
3	Emergency medicines & equipments daily verification		
4	BMW management.		
5	BLS/ALS trained staff.		

Medical Officers

1	Daily rooster maintained.		
2	Availability of staff in a shift.		

Trauma Staff

1	Availability of staff in a shift.		
2	Daily checking of medicine kit & equipments of ambulance.		
3	BLS/ALS trained staff.		

QUESTIONNAIRE

I am a post graduation scholar pursuing Hospital Management Course from IIHMR; Jaipur.As a part of my training curriculum.Iam conducting a study on "***Excellence in patient experience at emergency"***. The data will be used for academic purpose only, maintaining the confidentiality. I would be grateful to you for your candid responses.

1. Specify your source of information for "Apollo BSR Hospital"(multiple choice)
   A) Relatives/friends/Acquaintances
   B) Referred by a doctor
   C) Newspaper/Hoardings/Pamphlets/TV/Internet/Camps
   D) Others. Please specify_____

2. Why you have preferred Apollo in case of Emergency.(multiple choice)
   A) Proximity of hospital.
   B) Eminent & Qualified Doctors
   C) Availability of Ambulance services.
   D) Referred/Suggested by a doctor.
   E) Own experience.

Mark tick for the following 7 questions.

Highly satisfied	Satisfied	Neutral	Dissatisfied	Highly Dissatisfied
1	2	3	4	5

1. Ambulance Services (If availed or skip to 2)

Availability of ambulance on phone call	1	2	3	4	5
First aid treatment by ambulance staff	1	2	3	4	5
Promptness & Responsiveness of staff towards patient	1	2	3	4	5

2. Apollo Emergency department Entrance

Barrier free accessibility to department	1	2	3	4	5
Accompaniment by attendants with wheel chair or stretcher	1	2	3	4	5
Behavior & responsiveness of staff	1	2	3	4	5

3. Nursing staff of emergency department

Patient shifting & immediate execution of treatment actions.	1	2	3	4	5
Ability & proficiency of work performed	1	2	3	4	5
Behavior & Responsiveness of nursing staff	1	2	3	4	5

4. Duty doctors of emergency department

Promptness towards treatment & patient stability	1	2	3	4	5
Behavior & Responsiveness of duty doctor	1	2	3	4	5
Counseling & treatment procedure explanation	1	2	3	4	5

5. Consultant doctors of Emergency department

Immediate Patient attendance on call	1	2	3	4	5
Behavior & Responsiveness of senior doctor.	1	2	3	4	5
Diagnosis & treatment plan explanation	1	2	3	4	5

6. Services & Environment of emergency department

Well Equipped with all types of emergency services	1	2	3	4	5
Proper waiting area & Consoling environment is maintained	1	2	3	4	5
Availability of drugs,consumables,attendants,when required	1	2	3	4	5
Registration procedure of patient	1	2	3	4	5

7. Overall view regarding Emergency department of Apollo BSR Hospital.

	1	2	3	4	5

8. In case of emergency, you will visit or recommend others for Apollo BSR hospital.

A) Yes

b) No

9. Any suggestions for further improvement_____

Personal Details

Name					
Patient's age	<20	20-40	41-60	>60	
Patient's sex	Male		Female		
Patient's income	<1.5	1.5-2.99	3-4.99	>5	
Patient's occupation	student	Business class	Service class	professional	Household

Socio Economic Status

Chief wage Earner's name							
Occupation	Worker	Shop Owner	Business/ Industrial ist	Self employed	Clerical	Supervisory	Executive- Junior/Senior

Education	Illiterate	School(Please Mention the last Standard)	College but not Graduate	Graduate- General/Profes sional.	Post graduate- General/Profes sional

Emergency Department Checklist

1) ***Use of PPEs—***
   a) Mask
   b) Head cap
   c) Apron
   d) Gloves
   e) Hand sanitizer

A) By Nursing Staff-_____ (Specify the PPEs)

B) By Medical officers--_____ (Specify the PPEs)

2) ***Hand Hygiene Maintained—***

   a) Hand wash by soap

   b) Proper scrubbing technique used.

A) By Nursing staff--_____ (specify a/b)

B) By Medical Officers--_____ (specify a/b)

3) ***Patient privacy, dignity& confidentiality maintained- – Yes/ No***

4) ***Initial Assessment Time***

A) Doctor's name-_____

B) Time-_____

4) ***Consultant visit***

A) Consultant's name-_____

B) Initial Communication time-_____

C) Consultant visit time-_____

5) Maintenance of documents related to patients/drugs/investigations. – Yes/ No

QUESTIONNAIRE

I am a post graduation scholar pursuing Hospital Management Course from IIHMR; Jaipur.As a part of my training curriculum.Iam conducting a study on "***Patient experience & contentment towards in patient department***". The data will be used for academic purpose only, maintaining the confidentiality. I would be grateful to you for your candid responses.

3. Specify your source of information for "Apollo BSR Hospital"(multiple choice)
   A) Relatives/friends/Acquaintances
   B) Referred by a doctor
   C) Newspaper/Hoardings/Pamphlets/TV/Internet/Camps
   D) Others. Please specify_____

4. Why you have preferred Apollo Hospital for admission.(multiple choice)
   F) Proximity of hospital.
   G) Eminent & Qualified Doctors
   H) Availability of Ambulance services.
   I) Referred/Suggested by a doctor.
   J) Mediclaim/Insurance
   K) Own experience.

5. Specify your number of visits to this hospital either for self or any family member/friends.
   A) First visit
   B) Second visit
   C) Third visit
   D) More than three visits.

6. Describe your mode of admission to this hospital.
   A) Referral from OPD
   B) Transfer from other nursing home/hospital.
   C) Referred from outside consultant
   D) Emergency

Mark tick for the following 13 questions.

Very Good	Good	Average	Poor	Very Poor
1	2	3	4	5

1)Admission procedure	1	2	3	4	5
2)Cleanliness of the rooms	1	2	3	4	5
3) Quality of linen/Bed sheet.	1	2	3	4	5
4)Cleanliness of toilet	1	2	3	4	5
5) Services & care provided by nurses.	1	2	3	4	5
6) Behavior of nursing staff.	1	2	3	4	5

7) Quality & taste of Food.	1	2	3	4	5
8)Consultant visit & attention	1	2	3	4	5
9) Response & attention of duty doctor.	1	2	3	4	5
10)Facilities for attendants/relative/friends	1	2	3	4	5
11)Security staff response & behavior	1	2	3	4	5
12) Billing procedure	1	2	3	4	5
13)Discharge procedure	1	2	3	4	5

5. Overall view regarding inpatient department of Apollo BSR Hospital.

	1	2	3	4	5

6. In case of admission, will you visit or recommend others for Apollo BSR hospital.

A) Yes

b) No

7. Any suggestions for further improvement_____

Personal Details

Name					
Patient's age	<20	20-40	41-60	>60	
Patient's sex	Male		Female		
Type of room admitted	Super Deluxe	Deluxe	Private	Semi private	General
Reason for stay	Medical Management	Dialysis	Delivery	Angiography/Angioplasty	Surgery(please specify)_____

Socio Economic Status

Chief wage Earner's name							
Occupation	Worker	Shop Owner	Business/ Industrialist	Self employed	Clerical	Supervisory	Executive-Junior/Senior

Education	Illiterate	School(Please Mention the last Standard)	College but not Graduate	Graduate-General/Professional.	Post graduate-General/Professional