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A STUDY ON DISCHARGE TURN AROUND TIME OF CORPORATE PATIENTS IN INPATIENT DEPARTMENT

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ABSTRACT

By identifying workflow inefficiencies and putting targeted interventions in place, the Corporate Discharge Project sought to improve the effectiveness of corporate patient discharges. Between December 1 and March 10, 200 patients' data were gathered in order to compare typical discharge times to a predetermined standard. According to preliminary results, the average discharge time was 3 hours and 13 minutes, which was 43% longer than the norm and suggested serious process delays.

Process enhancements were implemented to overcome these inefficiencies. Data from before and after the intervention showed significant improvement, with the average discharge time falling to 2 hours and 27 minutes. This decrease demonstrates how well workflow optimisation works to expedite hospital discharge processes. Reducing delays, raising patient satisfaction, and guaranteeing better resource use all depend on increasing efficiency in this area.

Keywords: Healthcare Process Improvement, Workflow Interventions, Patient Satisfaction, Hospital Discharge Delays, Operational Efficiency, Healthcare Quality Improvement, Corporate Patient Discharge, Hospital Workflow Efficiency, Discharge Process Optimisation, And Patient Turnaround Time.

I. INTRODUCTION

HCG Manavata Hospital, Nashik, is a NABH-accredited tertiary care multi-specialty hospital and one of India's leading private healthcare providers. The hospital collaborates with **55** corporate organizations, including private and public sector entities, to ensure quality healthcare services for employees. Corporate discharge, the process of releasing a patient after treatment, requires seamless coordination between doctors, nurses, pharmacy, and billing departments. Inefficiencies in this process can cause delays, reducing hospital bed availability and affecting patient satisfaction. This study aims to analyze the corporate discharge process at HCG Manavata Hospital, identify factors causing delays, and implement strategies to reduce discharge turnaround time (TAT). By optimizing workflow and addressing bottlenecks, the hospital can enhance operational efficiency, improve patient experience, and ensure better resource utilization.

Key Objectives:

1. **Assess the current corporate discharge process** to identify inefficiencies.
2. **Analyze factors contributing to delays** in discharge turnaround time.
3. **Implement process improvements** to streamline discharge procedures.
4. **Evaluate the impact of interventions** on reducing discharge TAT.
5. **Enhance patient satisfaction and hospital resource management** through optimized workflows.

II. LITERATURE REVIEW

1. A study of the Discharge Process of a Multi-Specialty Hospital.

Pandit & Prashar (2019) emphasize that an inefficient discharge process can lead to patient dissatisfaction and hospital workflow disruptions. Their study found that TPA patients face longer discharge times due to complex approval and billing procedures. They also highlighted that streamlining interdepartmental coordination and implementing digital automation can significantly reduce discharge turnaround time (TAT). Their research underscores the importance of optimizing hospital discharge workflows to improve patient experience and operational efficiency. This study builds on their findings by further analyzing discharge inefficiencies and proposing targeted interventions for improvement.

2. Predictive Modelling for Turn Around Time (TAT) of Discharge Process for Insured Patients in a Corporate Hospital of Pune City Effective discharge management is essential for both hospital operations and

patient satisfaction, according to Udayai & Kumar (2012). Some studies compare the discharge delays of insured and uninsured patients (Mehta et al., 2015; Tak et al., 2013), while others examine both groups of patients together (Kumari, 2012). Only a small amount of research, though, concentrates on patients who are insured (Arora, 2015). Even though in-house TPA departments streamline coordination, insurance approvals, TPA processing, and final bill clearance frequently cause delays in insured patient discharge. The purpose of this study is to use predictive modelling to determine the main factors that influence insured inpatients' discharge delays and to examine how different process steps affect the total Turnaround Time (TAT).

3. To Study the Factors Contributing to Delay in Discharges of Inpatients and Applying Lean Intervention to Improve the Discharge Process in a Tertiary Care Teaching Hospital in South India Fatima et al. (Year) highlight that hospital discharge delays often stem from communication gaps, incomplete documentation, and coordination issues among healthcare providers. Rajiv and Satyanarayana (Year) emphasize that unclear discharge instructions and financial clearance delays significantly impact patient flow. Rao (Year) discusses the importance of standardized discharge protocols and electronic health records (EHR) integration to streamline the process. These studies suggest that improving discharge planning, enhancing patient education, and adopting digital solutions can reduce delays, lower hospital costs, and improve patient outcomes.

4. Role of discharge planning and other determinants in total discharge time at a large tertiary care hospital Mehta et al. (2021) highlight the crucial role of discharge planning in reducing hospital discharge delays, emphasizing the need for well-structured protocols. Nair (2021) discusses how factors such as documentation, financial clearance, and care coordination impact discharge efficiency. Rao (2021) underscores the importance of integrating electronic health records (EHR) to streamline the process, while Shukla (2021) points out that patient education and post-discharge follow-up significantly influence timely discharges. These studies collectively suggest that improving discharge planning, enhancing communication, and adopting digital solutions can optimize hospital discharge times and improve patient outcomes.

5. Determinants of Hospital Discharge Process: Experience from an Apex Tertiary Care Autonomous Institute of National Importance of Eastern India. Sahoo et al. (2019) examined the discharge process in a tertiary care teaching hospital, identifying key steps and potential delays in inpatient discharges. Dora (2019) highlighted that inefficiencies in documentation, medication reconciliation, and final billing contribute to prolonged hospital stays. Talwar (2019) emphasized the role of interdepartmental coordination, noting that delays in consultant approvals and discharge summaries are significant bottlenecks. The study suggests that streamlining administrative workflows, implementing digital solutions, and enhancing communication among healthcare teams can improve discharge efficiency and reduce hospital stay durations.

III. CONCLUSION

Optimizing inpatient department operations, cutting expenses, and raising patient satisfaction all depend on effective discharge procedures. This study examined corporate patients' discharge turnaround times (TATs), pinpointing the main causes of delays and suggesting solutions. The results show that delayed final bill clearance, insurance approvals, and cooperation between several stakeholders are some of the variables that frequently affect prolonged discharge TAT. Hospitals should employ digital solutions for speedier communication, expedite financial clearance procedures, and improve departmental cooperation in order to increase efficiency. Discharge delays can be greatly decreased with ongoing monitoring and process adjustment, which will increase patient satisfaction, bed utilization, and hospital efficiency. The effects of automation, regulatory changes, and technology-driven solutions in cutting down on discharge delays can be investigated further.

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