

# A STUDY ON DISCHARGE TURN AROUND TIME OF CORPORATE PATIENTS IN INPATIENT DEPARTMENT AT KIMS HOSPITAL, SECUNDERABAD

<sup>1</sup>Divya Singh <sup>1</sup>Student, IIHMR University

<sup>2</sup>**Dr. Anoop Khanna** <sup>2</sup>Professor, IIHMR University

### INTRODUCTION

The efficient management of corporate discharge is a critical aspect of hospital care, especially for individuals receiving treatment under workplace benefit programs. Identifying and addressing factors leading to delays in the corporate discharge process is essential. This study aims to analyze the corporate discharge process at KIMS Hospital, focusing on identifying common issues or gaps causing unnecessary delays [1].

Government initiatives such as AROGYA BHADRATA, SBI, CGHS, ECHS, and NFC play a significant role in ensuring that corporate patients receive comprehensive healthcare benefits. The CGHS program, established by the Indian Government, is designed to provide inclusive healthcare services to employees, retirees, and their dependents. It covers a wide range of medical systems, including allopathy, homeopathy, and alternative methods [2].

The Ex-Serviceman Contributory Health Scheme (ECHS), initiated by the Indian government in support of ex-servicemen's welfare, caters to the medical requirements of ex-service personnel and their immediate family members. This comprehensive healthcare scheme extends coverage to ex-servicemen not entitled to treatment at a military hospital and includes necessary hospitalization. The NFC Contributory Health Scheme by the National Fertilizers Limited provides medical care, including hospitalization, testing procedures, and clinical care, benefiting employees and their dependents [3].

#### RESEARCH OBJECTIVES

- 1. To pinpoint all factors contributing significantly to delays in corporate discharge.
- 2. To develop and execute an intervention aimed at minimizing corporate discharge turnaround time (TAT).
- 3. To evaluate the effectiveness of the intervention in reducing corporate discharge TAT within inpatient departments.

# RESEARCH METHODOLOGY

The study utilized a time-motion design and spanned a duration of three months, from February 27th, 2023, to May 26th, 2023. The sample included 200 corporate inpatients, chosen through selective sampling. Real-time tracking was employed, with data meticulously documented in MS Excel. Inclusion criteria encompassed all corporate patients whose discharges commenced during regular working hours (9:30 am – 5:00 pm) from various hospital wards, including the inpatient ward, chemotherapy ward, maternity ward, general ward, ICU, OT, and dialysis. Notably, cash and insurance patients with discharge initiation after 5 pm were excluded from the study.

# **RESULTS & DISCUSSION**

The study revealed that approximately 61% of observed processes or activities experienced delays; however, by May, there was a notable decrease in the occurrence of delays, bringing down the delay percentage to 39%. The substantial drop of 22 percentage points (from 61% to 39%) serves as a clear indication of the success of the intervention. The implementation of measures during this interim period led to smoother processes, reduced bottlenecks, and increased efficiency, contributing to the reduction in delays. This significant improvement, reflecting a positive impact, highlights the effectiveness of the intervention in simplifying processes, addressing bottlenecks, and enhancing overall efficiency, resulting in a decrease of 22 percentage points from the initial 61% to 39%.

#### CONCLUSION

Ultimately, the optimization of the company's discharge procedure is imperative for enhancing efficiency and delivering a high standard of patient care. The thoughtful adoption and execution of various strategies can significantly improve both patient and staff experiences. A crucial step in fostering seamless communication and collaboration involves collocating the Corporate Discharge and Corporate Admissions departments on the same floor.

# **REFERENCES**

- 1. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4334352/
- 2. https://www.researchgate.net/publication/333746428\_Streamlini ng\_the\_Hospital\_Discharge\_Process\_in\_a\_Tertiary\_Care\_Hospital \_with\_a\_Holistic\_Approach\_1
- 3. https://ijcrt.org/papers/IJCRT2004012.pdf