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# A STUDY ON CAUSES OF DELAY IN DISCHARGE PROCESS IN ONE OF THE PROMINENT HOSPITALS IN TAMILNADU

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*Abstract:* The major area that needs to be streamlined in hospital is discharge process of patients which is directly related to patients satisfaction. The aim of the study is to find out the root cause for delay, highlight the areas that needs improvement and provide suggestions. The study was done in one of the prominent hospitals in Tamilnadu for a period of 3 months. A checklist was framed and time taken for each process was recorded and analysed both for self payment and insurance patients using simple percentage analysis, simple average and quality tools. The average time taken for cash patients is 6 hrs 90 mins and insurance patients is 7 hrs 20mins. From this study, it is evident that high percentage of delay is due to vacating the room which consequently increases the waiting time of inpatients for bed allotment. Based on the findings proper training in communication skills for staff, adequate staffing and framing of policy for patients discharge are some of the recommendations given. The study concludes that delayed discharge is one of the prime factor and have an impact on ability to cut the waiting lists and deliver healthcare effectively and efficiently.

# Keywords: Patient Satisfaction, Bed Allotment, Delayed Discharge

# I. INTRODUCTION

Delayed discharge is one of the common problem in hospital that needs to be addressed in order to increase the occupancy of bed and to reduce the long waiting time. Long waiting time of patients causes frustration which reflects on patients dissatisfaction. Discharge involves coordination and cooperation of all other departments in hospital to reduce the delay. The study monitors and records the time taken in each department such as billing, pharmacy, insurance, cash, discharge summary and ward to reduce the delay. Through this study factors affecting the discharge and causes are identified and suggestions were given which aims at quality of care, patient satisfaction and increase reputation of hospital. The aim of the study is to find out the causes of delay for cash and insurance patients. Discharge is one of the quality indicator that needs improvement and time taken is compared with NABH standards.

Discharge is the point were the patient leaves to their home or other facility from the hospital. Consultant doctor will decide about the discharge of the patients. Patients are requested to inform about the probable time of departure to the ward secretory. The secretory will ensure that the bills are kept ready. After the advice of the consultant, the secretory will inform to the billing and bills are ready once the pharmacy clearance is over. After the payment of the bills, the patients can leave their rooms. Before leaving the hospital, the patient can collect their discharge summaries and prescribed medicines from the ward secretory.

# The objectives of the study include:

- To study the discharge process of Patients.
- To find out reasons for the delay in discharge process.
- To recommend measures to reduce discharge time of Patients.

#### **II.LITERATURE REVIEW**

Shobitha Sunil<sup>1</sup>, Sarala K.S<sup>2</sup>, R G Shilpa<sup>3</sup> October (2016)., Time taken for the completion of discharge process is an important indicator of quality of care. As per NABH, the time taken for completion of the discharge process should not exceed 180 minutes. Discharge process is the last stage of the patient journey in the hospital and is more likely to be remembered by the patient. So delay in the discharge process can be depressing to the patients and also increases the pressure on hospital beds. The present study was conducted in M.S Ramaiah hospital to analyse the break up time taken for discharge and evaluate the level of patient satisfaction for the discharge process. The total time taken for the discharge process was broken up into time taken for discharge summary writing, discharge summary completion, billing completion and patient to leave the ward.

Dr.Niloy Sarkar<sup>1</sup>, Ms. Tatini Nath<sup>2</sup> August (2016)., The main objective of the study is to identify the gaps, highlight those areas where delay can be eliminated and recommend accordingly, so that the hospital discharge process can be managed smoothly. This paper has explained the hospital discharge process in a simple way and has tried to find out the root causes for the delay in discharge process. The set-up of the study was Apollo Hospitals, Greams Lane, Chennai (15th June – 14th August, 2012).

A Abiramalakshmi<sup>1</sup>, Dr. Sn Soundara Raja<sup>2</sup> October (2017)., The aim of the study is to find the cause of delay in inpatient discharge and to increase the patient satisfaction. Objective of the study is to identify the cause of delay in inpatient discharge and to suggest some valuable information related to it to rectify the problem. Due to Discharge summary, Pharmacy, Nurses delay and Allied services the discharge of inpatients is getting delayed and this may lead to dissatisfaction in inpatients. The study is being done in order to find out the cause and to provide suggestion related to the findings.

#### **III.RESEARCH METHODOLOGY**

The present study was conducted in one of the prominent hospital in south zone of Tamilnadu for a period of 3 months as a measure to improve the discharge process. Checklist was framed and time taken was recorded from consultant advice time, discharge intimation time, discharge summary preparation, bill payment time, bill generation time and vacating time for analysis. The collected data was analysed using simple percentage and simple average analysis and quality tools. From the study, percentage of delay in each process and average time taken for cash and insurance patients was calculated and recommendations were given.

#### **IV.ANALYSIS**



FIG 1: SHOWING THE PERCENTAGE OF REASONS FOR DELAY IN DISCHARGE PROCESS

Figure 1: The above chart shows that 34% of delay is due to vacating, 20% of delay due to cash, 18% of delay due to pharmacy clearance,8% of delay due to insurance,8% due to billing,9% due to cts,1% is due to discharge summary and auspicious time.

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FIG 2:: SHOWING THE TIME TAKEN FOR DISCHARGE PROCESS

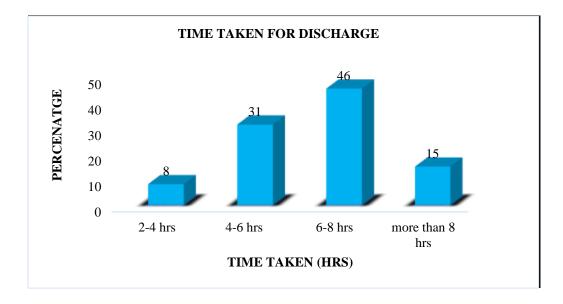


Figure 2: The above chart shows that 46% of patients discharge in 6-8 hrs,31 % of patients in 4-6 hrs,15% of patients in more than 8 hrs and 8% of patients in 2-4 hrs.

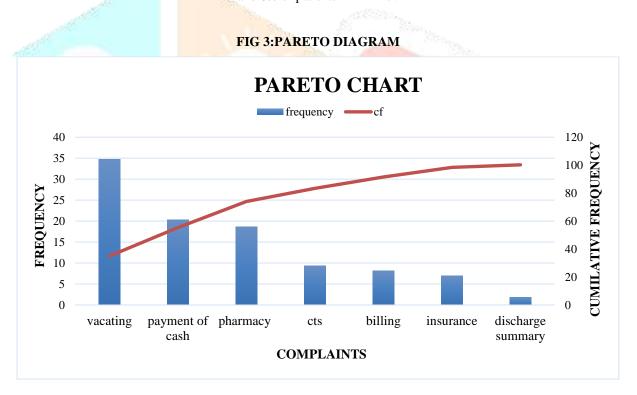
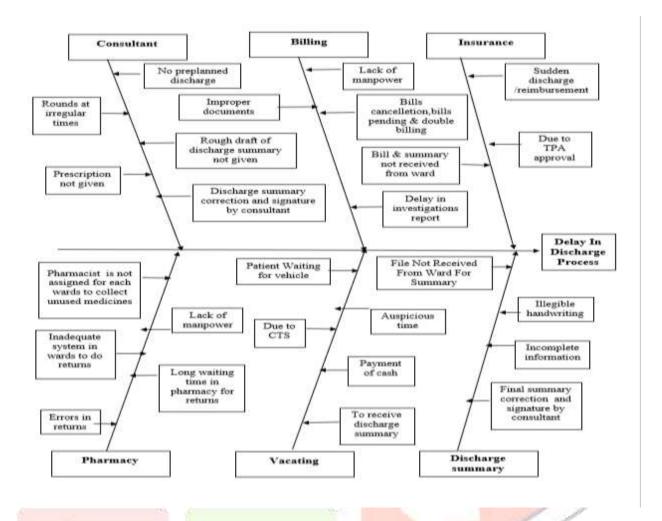


Figure3: 20% of delay in vacating causes 80 % of delay in bed allotment

FIG 4: CAUSE AND EFFECT DIAGRAM (CEDAC)



#### V.FINDINGS AND RECOMMENDATIONS

- The first cause of discharge delay is discharge planning by the consultant that is done on the day of discharge which delays further process. The consultant may be asked to take rounds for likely discharge patients first and then to others or preplan the discharge on the previous day.
- Major delay in discharge is vacating the room that takes about 5-6 hrs after the payment of cash/insurance approval which can be optimized by framing a discharge policy for vacating the room within an hour after cash payment /insurance approval.
- Almost 74% of patients discharge time takes about more than 4hrs which is not according to prescribed NABH standards. All ward secretaries should be provided with guidelines in discharge procedures to reduce the delay in time taken for discharge process. Staffs should also be trained in proper communication skills to carry out the process.
- Another area of delay is pharmacy clearance which takes about 2-3hrs due to lack of manpower to carry out the process. In order to fasten it, adequate pharmacist should be allotted for each ward to carry out the clearance process.
- Billing is a major area in discharge process. The time taken for bill generation can be reduced by closing all the pending bills before discharge intimation to the billing department and proper communication between departments to close the bill.
- Another area of delay is discharge summary preparation and signature by consultant. Discharge when preplanned, ward secretaries should ensure that all the summaries are ready by the next day for signature and correction by consultant.
- For Insurance patients discharge ,the approval time takes about 4-5 hrs due to too many queries and approval by TPA. In order to optimize the delay ,the hospital can hire major TPA's and complete the approval process quicker for faster discharge of insurance patients.
- Another reason for vacating delay is due to lack of central transport system (CTS) in hospital which can be rectified by providing adequate wheelchairs in each floor and a ward boy to help the patients during vacating.
- Cash patients are not informed about the bill amount in prior which causes delay in payment of cash. The ward secretory/cash counter should track the patients bill and ask their attenders to pay all the outstanding bills from time to time.
- Reason for delay in bed allotment is due to fail in closing the discharge status in HIS after the patients vacating which is caused because of lack of knowledge or inadequate staffs in the ward. The staffs and secretaries should be properly trained in every details of discharge process.
- In order to reduce the delay in vacating, the hospital must have a discharge waiting area where the patients can wait after their discharge for their vehicle/attenders/doctor opinion which will reduce the time taken for assigning bed to the next patient.

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### VI.CONCLUSION

Discharge of patients is one of the important area that needs improvement in hospital. In order to reduce the delay in discharge ,the hospital needs proper cooperation and coordination of other department staffs. Through this study the time taken for both cash and insurance patients were analysed and compared with NABH standards. The factors for delay were identified and suggestions were given which will decrease the time taken for bed allotment for next patient which eventually increase the reputation of the hospital and reduce the patients waiting time.

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