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SUMMER INTERNSHIP PROJECT 2024

REPORT TITLE

Analysis of gap in OPD and diagnostic (X-ray, CT & LAB) services

SUBMITTED BY

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MBA Batch: 2023-25
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CERTIFICATE OF FACULTY/INTERNAL GUIDE

This is to certify that Mr. BISHAL RANJAN DAS bearing university registration No 2306258042 of 2023-25 batch, has completed his/her summer internship at ASHWINI HOSPITALS (organization name) from 01/06/2024 to 15/07/2024 under the supervision of Mr.BISWAJEET DEHUIRY (corporate guide) and has submitted this project report under my guidance in partial fulfillment of the requirements for award of the degree of Master of Business Administration at Biju Patnaik Institute of Information Technology and Management Studies, Bhubaneswar. To the best of my knowledge and belief, this project report has been prepared by the student and has not been submitted to any other institute or university for the award of any degree or diploma.

Date:	Signature of the Faculty/Internal
Guide Place: Bhubaneswar	Name:
Designation:	

DECLARATION

I, Mr. BISHAL RANJAN DAS Bearing university registration, no-2306258042 (2023- 25batch), hereby declare that the project report titled GAP ANALYSIS IN OPD AND DIAGNOSTIC SERVICES is based on my internship at ASHWINI HOSPITALS (organization name), during the period 01/06/2024 to 15/07/2024 and is an original work done by me under the supervision of Mr. BISWAJEET DEHURY (Corporate Guide) and Dr. NAVEEN.L (Internal Guide). This report is being submitted to Biju Patnaik Institute of Information Technology and Management Studies, Bhubaneswar, affiliated to Biju Patnaik University of Technology, Odisha, in partial fulfillment of the requirements for the award of the degree of Master of Business Administration. This project report has not been submitted to any other institute/university for the award of any degree or diploma.

Date:

Place: Bhubaneswar

Signature……………….

EXECUTIVE SUMMARY

This report is mainly based on the data collected from Ashwini trauma center, Cuttack. This hospital is making every effort to meet patient satisfaction and making best use of the resources, policies, rules and regulations. Ashwini hospital is the largest privatemedical center of Cuttack and commissioned in 2006 with an aim to provide tertiary level health care in selective super-specialty branches of medicine and surgery. Ashwini Trauma center have established their firm credentials as the leading trauma care facility of the Odisha and adjoining states. The team has orthopedic Surgeons, Critical care physicians and therapists.

This gap analysis assesses the current state and identifies opportunities for improvement in outpatient department (OPD) and diagnostic services, specifically X-ray, CT scans, and laboratory testing. Currently, the OPD experiences significant delays in diagnostic service delivery, with average wait times exceeding industry benchmarks. This inefficiency results in patient dissatisfaction and potential health risks due to delayed diagnosis and treatment. Key findings reveal a lack of integrated scheduling systems for diagnostics, leading to redundant paperwork and prolonged wait times. Additionally, outdated equipment in the radiology and laboratory departments contributes to inefficiencies and inaccuracies in test results.

The desired state includes implementing a centralized scheduling system for diagnostics, upgrading equipment to state-of-the-art technology, and enhancing staff training on efficient patient management protocols. These initiatives aim to reduce wait times, improve service quality, and enhance overall patient experience. The gap analysis recommends prioritizing investments in technology and infrastructure, streamlining operational processes, and fostering a culture of continuous improvement through regular performance monitoring and feedback mechanisms.

ACKNOWLEDGEMENT

It is really a great pleasure to have this opportunity to express the feeling of gratitude imprisoned in the deepest core of my heart. It is not possible to prepare a project report without the assistance & encouragement of other people. This once is certainly no exception. On the very outset of this report, I would like to extend my sincere obligation towards all the personages who helped me in this endeavor. Without their active guidance I would not have made head way in the project. I do express my sincere thanks to **Dr. NAVEEN.L,** faculty of BIITM for his Guidance and continuous monitoring of my work. I must also express my deepest gratitude to **Prof. (Dr.) Mihir Ranjan Nayak, the principal**, **BIITM**, and all the faculty council of BIITM, for their timely help as and when required. I cannot conclude this acknowledgement without thanking my family, relatives, acquaintances and friends who offered their valuable cooperation to me at every stage in the research and project report.

Date:

BISHAL RANJAN DAS

Place:
Bhubaneswar

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Chapter-I

TITLE: “ANALYSIS OF GAP IN OPD AND DIAGNOSTIC (X-ray, CT AND LAB) SERVICES.”

INTRODUCTION

In the dynamic landscape of healthcare management, Out Patient Department(OPDs) serve as critical tools for monitoring and optimizing organizational performance. A Gap Analysis Operation within the realm of OPDs involves a systematic evaluation aimed at identifying disparities between current performance levels and desired benchmarks or goals. This analytical process enables healthcare institutions to pinpoint areas of inefficiency, areas lacking compliance with standards, or opportunities for improvement. Gap analysis between the OPD (Outpatient Department) and diagnostic services (X-ray, CT scan, and lab) is crucial for identifying and addressing disparities in healthcare delivery, ensuring efficient and effective patient management. This analysis aims to assess the current state of diagnostic capabilities within the OPD setting and compare them with the services provided by specialized diagnostic units such as radiology and laboratory departments. By understanding these gaps, healthcare providers can implement targeted improvements to enhance diagnostic accuracy, streamline workflows, and optimize patient care pathways.

The OPD serves as the frontline for initial patient evaluation and management, where clinicians rely on clinical history, physical examination, and basic diagnostic tests to guide treatment decisions. However, the scope of diagnostic capabilities within the OPD, particularly with basic imaging (like X-rays), may be limited compared to more advanced modalities available in specialized departments. This disparity can impact the timeliness and accuracy of diagnoses, potentially delaying appropriate treatment initiation or referral to higher-level care.

SCOPE

The scope of Gap Analysis in OPDs involves assessing current performance against predefined benchmarks or goals. It encompasses analyzing metrics such as patient wait times, staff productivity, resource utilization, and patient outcomes. This evaluation helps identify discrepancies or gaps where performance falls short of expectations. The scope of gap analysis between the OPD (Outpatient Department) and diagnostic services (X- ray, CT scan, and lab) is extensive and encompasses various dimensions of healthcare delivery and operational efficiency. Gap analysis of Outpatient Department (OPD) and diagnostic services involves evaluating the difference between the current state and the desired state of these services. This process helps identify areas for improvement in both the efficiency and quality of care.For OPD services, the gap analysis focuses on aspects like patient wait times, appointment scheduling, patient flow, and the quality of interactions with healthcare providers. It examines whether the current practices meet the needs of patients and align with best practices and standards.

In diagnostic services, the analysis assesses the accuracy, timeliness, and accessibility of diagnostic tests and results. It identifies gaps in technology, such as outdated equipment, and processes, including delays in test processing or reporting. By comparing current performance metrics with desired outcomes or industry benchmarks, organizations can pinpoint inefficiencies, redundancies, and potential areas for enhancement. The goal is to improve overall service delivery, enhance patient satisfaction, and optimize resource utilization in both OPD and diagnostic services.

- First point of contact
- It is the shop window of hospital
- Makes or mars the hospital image
- A good OPD service can reduce the load on in-patient services
- It is a place for implementing preventive & promotive health activities.
- Facilitates teaching
- About twice the in-patients attend OPD every day

OBJECTIVE

The primary objective of conducting Gap Analysis in Operational Performance Dashboards (OPDs) within healthcare is to systematically evaluate and improve organizational performance by identifying and addressing discrepancies between current and desired outcomes. This process is crucial for achieving the primary objectives of conducting a gap analysis between the OPD (Outpatient Department) and diagnostic services (X-ray, CT scan, lab) are multifaceted, aiming to improve healthcare delivery, operational efficiency, and patient outcomes.

Specific Objectives of the study are:

1. To assess the Outpatient Department in the hospital with the identification of Inputs, Outputs and process flow of each process occurring at each section of the outpatient department with the relevant records.
2. To identify the significant gaps observed on all the processes in each section and explanation of the gap statement with document evidences and photographs. The gaps are analyzed based on NABH.
3. To prepare Time Bound Action Plan to fulfill the gaps, if any.

METHODOLOGY

The study has been completed in 3 stages.

STAGE I: Primary and secondary data was used for a total survey of the departments in terms of services provided, Manpower, Physical infrastructure, Equipment's, drugs and Lab services.

STAGE II: Observation and personal interview were used to map the various processes of the hospital and to know the functioning of the each department.

STAGE III: Extensive analysis based on data collected from stage I and Stage II. Based on this Gap analysis was prepared reflecting the processes, Infrastructure, Equipment's, Manpower. The report reflects strengths of the department and various gaps observed in the processes and other parameters.

Area of Study: The study was under taken in Ashwini hospitals, Cuttack, Odisha.

Study Design: Observational study to analyse the gaps within the facility by using primary and secondary data compared to the NABH standard.

Data Collection: Primary data & secondary data

Duration of the Study: 1st June 2024 to 1 July 2024

LIMITATION

Limitation gap analysis in OPD (Outpatient Department) and diagnostic services such as X- ray, CT scan, and lab testing typically involves identifying and addressing shortcomings or gaps in the services provided.

- The study was conducted in Ashwini hospitals, Cuttack; hence it cannot be generalized to every hospital.
- Perception and priorities are qualitative in nature and it is differing along with person to person.
- Proper data is not available so there is a difficulty to measure things. Certain assumption is taken in this gap analysis.

Chapter -2

Company profile and industry analysis

COMPANY PROFILE

Ashwini Hospital, Cuttack's premier private medical center, commissioned in 2006 with a singular focus on delivering tertiary-level healthcare in specialized branches of Medicine and Surgery. Nestled in Sector 1, CDA project area, our strategic location ensures easy accessibility via major State roads and National Highways, making us a beacon of healthcare excellence in the region. Since our inception, we have carved a niche in critical patient care, excelling in Trauma, Neurology, Cardiology, Pulmonology, and addressing various complex medical issues.

Today, Ashwini Hospital stands as a healthcare powerhouse with 500 patient beds spread across three specialty hospitals and three out-reach clinics. Our commitment extends beyond treatment to education, offering a spectrum of training courses, including Diploma and B.Sc. programs in Nursing, Diploma in Critical Care Medicine, Masters in Emergency Medicine, and Super specialty courses such as Dr NB in Neurology, Dr NB in Neurosurgery, and Dr NB in Plastic Surgery.

Our Vision: -

Ashwini Hospital, the temple of healing is committed to provide ethical, reliable, high quality and cost-effective health care services with care and compassion to ensure complete patient satisfaction.

Our Mission: -

Ashwini Hospital would strive to establish a world class institute in healthcare and stay in the forefront of medical technology and best practices thereby fulfilling the long felt need of true super specialty healthcare in the region.

Our objectives: -

To achieve clinical excellence as per benchmarking standards, practices and evidence- based approach.

1. To demonstrate critical thinking skills in making decisions in all situations in order to provide quality care.
2. To build trust and faith among patient community and develop the image for the hospital and poster preferred destination for their health.
3. To provide promotive, preventive and restorative healthcare services with the national health policy and program.
4. To delight the stakeholders (patients, employees, suppliers and others).
5. To offer services up to the affordable cost to the patients."

To create a center of excellence for medical, nursing, allied health sciences and other areas of education and also promote continuous education for professional development and growth of organizations and individuals.

Our values

Compassionate Care: Feel and enhance the lives of patients by practicing Tender Loving Care to create better experiences for our patients.

Healing: Inspire hope and nurture the well-being of the whole person, respecting physical, emotional and spiritual needs.

Patient Safety: To Install, develop & implement various modalities for ensuring patient safety & make health care safer for everyone.

Respect: Treat everyone in our diverse community, including patients, their families and company colleagues, with dignity and protecting their individuality & privacy.

Integrity: Adhere to our organization's "Values" and Incorporate openness and honesty and demonstrate moral courage to speak up & do the right things. Highest standards of professionalism, ethics and personal responsibility, worthy of the trust our patients place in us.

Teamwork: Value the contributions of all, blending the skills of Individual staff members in unsurpassed collaboration.

Professionalism: Value professionalism which inculcates Ingenuity and entrepreneurship at every level and creates an environment of team spirit.

Ownership: Be responsible and take pride in actions initiated for positive change, by taking the initiative and going beyond the call of duty.

Innovation: Infuse and energize the organization, enhancing the lives of those we serve, through the creative ideas and unique talents of each employee.

Tapping the potential: Believing in quantifying performance and devising methods to identify employee's true potential & act in an equitable manner.

Excellence: Deliver the best outcomes and highest quality service through the dedicated effort of every team member.

Trustworthy Spirit: Continue to be an institution of trust and an Inspiration of hope to all patients by keeping their best interests at heart and delivering on all our promises.

Social Responsibility: To devote itself to work impeccably in order to ensure social service, community health, and environmental safety.

TYPE OF FRIM: -

Ashwini Hospital operates within the healthcare industry, specifically within the healthcare services sector. As a hospital, it provides medical care and treatment services to patients, encompassing a wide range of medical specialties such as internal medicine, surgery, pediatrics, obstetrics and gynecology, orthopedics, and more.

STRUCTURE OF THE FRIM: - Ashwini Hospital, like many healthcare institutions, operates with a structured framework aimed at delivering effective medical care while managing administrative and operational functions. Its organizational structure typically comprises several key departments: clinical services, Administrative services, finance, human resources, and support services.

Clinical services form the core of Ashwini Hospital's operations, encompassing departments such as internal medicine, surgery, pediatrics, obstetrics and gynecology, orthopedics, and more specialized medical disciplines. These departments are responsible for patient care, diagnosis, treatment, and medical procedures, ensuring the delivery of high-quality healthcare services.

Administrative services support the hospital's daily operations, including managing patient admissions, scheduling appointments, maintaining medical records, and coordinating between different clinical departments. They play a crucial role in ensuring smooth workflow and efficient patient management within the hospital.

The finance department oversees financial matters such as budgeting, accounting, billing, and revenue management. They monitor financial performance, handle insurance claims, and ensure compliance with financial regulations to sustain the hospital's fiscal health.

Support services include departments like maintenance, housekeeping, and IT, which ensure the hospital facilities are clean, safe, and equipped with necessary technology to support clinical operations.

Overall, Ashwini Hospital's organizational structure is designed to integrate clinical expertise with efficient administration and support services, aiming to provide comprehensive healthcare services while maintaining operational excellence and patient satisfaction.

LOCATIONS

1. Ashwini hospitals
2. Ashwini trauma center
3. Aditya Ashwini hospital
4. Ashwini wellness
5. Ashwini college of nursing

Departments: -

1. Neurology
2. Neurosurgery
3. Orthopedic surgery
4. Emergency medicine
5. Critical core
6. Pulmonology
7. Cardiology & intervention
8. Cardiothoracic surgery
9. Nephrology & dialysis
10. Urology
11. General surgery
12. Anesthesiology
13. Radiology
14. Physiotherapy rehabilitation
15. Pathology

Activities of Ashwini Hospital

NEURO SURGERY

Ashwini hospital is regarded as one of the leading hospitals for neurology and neurosurgery in Eastern part of India. Our Department of Neurosciences is committed to provide high quality, secondary and tertiary neuro services to patients in the region, as well as to all those

Who have recourse to our facility Well accompanied by Department of Neuroradiology, Neurointerventional, Neuro anesthesia and Critical care we are able to provide 24X7 services with treatment outcomes are comparable to global statistics.

Irrational experience in the region and dedicated service helped us gather the trust and confidence of our customers. Ashwini Pharmacy provides advanced clinical pharmacy services and serves as a reliable source of drug Plastic Surgeons, Neuro-Surgeons, Vascular Surgeons, Maxillo-Facial Surgeons, Critical Care Physicians and Therapists. With a robust armamentarium, round the clock emergency and dedicated y. Recognising this, Departments of Health and Transport

EMERGENCY MEDICINE

Ashwini Hospital, Emergency department is a popular, trust worthy department for the people of Cuttack and surrounding areas. Prompt service, quality service and team approach for patients coming with emergency problems is the key to its success. It attracts patients of acute brain stroke, status epilepticus, AIDP, Myasthenia gravis in crises, AMI, acute abdomen, metabolic emergencies, poisoning, Respiratory failure, acute kidney injury and polytrauma.

CARDIOLOGY & CARDIOTHORACIC SURGERY

Ashwini Hospital is a premier Cardiac institute of Odisha since 2006. A steady increase of diagnostic and therapeutic procedures including some breakthrough lifesaving techniques have positioned Ashwini Cardiac Centre as a top performer in the State of Odisha. A strong team of senior as well as younger consultants have made the uninterrupted day and night care possible across all seasons. Be it a routine cardiac check-up before a major surgery or a difficult post-operative cardiac monitoring, the Cardiologists of Ashwini Hospital proved their mettle beyond doubt. Wellness clinics, camps and preventive cardiac health check-ups have helped numerous patients identify their ailments before they could take the patient by surprise.

ORTHOPEDICS TRAUMA & REHABILITATION

Ashwini Group of Hospitals and outreach clinics (Ashwini Emergency & Trauma Centers) have established their firm credentials as the leading trauma care facility of the Odisha and adjoining States. We run a comprehensive trauma care program, especially for poly-trauma patients from resuscitation and stabilization to effective rehabilitation of the patient. The team has Orthopedic Surgeons, Spine Surgeons, Plastic Surgeons, Neuro-Surgeons, Vascular Surgeons, Maxillo-Facial Surgeons, Critical Care Physicians and Therapists. With a robust armamentarium, round the clock emergency and dedicated support staff we strive to save as many lives and limbs as possible. Recognizing this, Departments of Health and Transport have offered free treatment to road traffic accident victims for first 48 hours of the accident.

NEPHROLOGY & UROLOGY

The department provides specialized care for the patients with UTI, acute and chronic renal failure, hypertension, glomerulo- nephritis, check-up of post kidney transplant patients and also extends support to other departments in the management of wide-ranging renal problems.

Our new renal dialysis unit is well equipped with 8 nos. of Machine including ARRT Plus to provide the renal replacement therapy for patients suffering from end stage of renal disease and acute kidney injury on a regular basis. With the support of dedicated staffs and efficient doctors, the department is committed to deliver the specialized services with care and compassion.

ALLIED SERVICES

ASHWINI PHARMACY

Ashwini Pharmacy- your family pharmacy- is one of the reliable pharmacies in the region. Our long years of operational experience in the region and dedicated service helped us gather the trust and confidence of our customers. Ashwini Pharmacy provides advanced clinical pharmacy services and serves as a reliable source of drug information to patients and other health care professionals. Medication management and use within the hospitals are carefully monitored to meet international standards in quality healthcare and patient safety.

BLOOD BANK

Every minute every day, some needs blood. Ashwini offers blood bank for routine and emergency purpose for the emergency cases done at the hospital and any other health care provider in the city.

OPERATION THEATRE

The hospital is equipped with three specialized operation theatres and state-of-the-art facilities designed to meet international standards. All the theatres cover a wide range of surgical specialties. There is a dedicated team of theatre staff, who play an important role in ensuring the smooth recovery of every patient. There is a total of 12 well equipped Operation theatres for 350 beds and 5 modular operating suites for high-end surgical procedures.

DEPARTMENT OF LABORTARY

Ashwini Hospital has a well-equipped modern laboratory. The laboratory performs all the routine and special investigations related to clinical chemistry, immunology, Endocrinology, Hematology, Microbiology, Toxicology, Cytology and Histopathology. Facilities are Available for a number of profiles for the screening and follow up diseases. The laboratory houses very sophisticated and state-of-the-art equipment operated by well-trained laboratory personnel. All the tests are performed under strict standard Quality Control Protocols by well qualified and experienced technicians with expert guidance. The laboratory is open 24 hours, seven days a week .

ADMINISTRATIVE AND SUPPORT UNITS

The administrative and support units of Ashwini Hospital provide a wide variety of important routine support functions that are vital to the day to day running of the hospital. The functions are managed by well trained and highly qualified staff from their respective fields of work. The support services include:

- Ambulance Services
- Quality Assurance
- Bio medical department
- Information Technology
- Human Resource
- Marketing and Business development
- Finance
- Insurance

FINANCE PERFORMANCE

Ashwini group of hospitals has a total shareholder equity of ₹131.80 crores and total debt of ₹1.04 crores which brings its debt-to-equity ratio to 0.78%. Its total assets and total liabilities are ₹147.70 crores. Its operating profit and net profit are ₹18.27 crores and ₹9.19 crores respectively. It also able to make a total revenue of 102.58 crores in the year 2022-23 which was 150.22 crores and 115.36 crores in 2021-22 and 2020-21 respectively. From the above information we can derive the followings:

Debt-to-Equity Ratio: The debt-to-equity ratio is calculated as total debt divided by total shareholder equity. In this case, the ratio is 0.78% (1.04 crores / 131.80 crores), which is relatively low. This indicates that the company has a low level of debt in relation to its equity, which can be seen as a positive financial indicator as it suggests lower financial risk.

Total Assets and Total Liabilities: The total assets and total liabilities are both mentioned as ₹147.70 crores. This indicates that the company's assets are financed entirely by its equity and debt, with no excess of assets over liabilities. The balance sheet is balanced.

Operating Profit: The operating profit for the year 2022-23 is ₹18.27 crores. This represents the profit generated from the core operations of the hospital business before considering interest and taxes. It's a measure of the company's operational efficiency.

Website	http://www.ashwinihospitalcuttack.com
Industry	Hospitals and Health Care
Company size	201-500 employees
Headquarters	Cuttack, Orissa
Type	Privately Held
Founded	2006

Total revenue, operating profit, Net profit of food canteen

Its total revenue is $3 billion. The month of July witnessed equity markets just about holding on to the gains of June, ending the month largely flat. Some minor gains witnessed in the first half of the month were negated by rising concerns of the Delta across the globe as well as the crackdown by Chinese government on education, property, and tech sectors. Markets were also hit by a fall in the monthly GST collection below Rs 1 Tn, for the first time in eight months in Jun. The outperforming sectors for the month were Consumer Durables, Realty and Capital Goods while Autos, Oil & Gas and Power were the main laggards. FIIs turned net sellers again in the month of July to the tune of USD 1.5bn.

After slipping into contraction for the first time in 11-months during June, the seasonally adjusted IHS Market India Manufacturing Purchasing Managers' Index (PMI) moved back above the critical 50.0 thresholds in July. The headline figure was up from 48.1 to 55.3, pointing to the strongest rate of growth in three months. Output, new orders, exports, the quantity of purchases and input stocks all returned to expansion territory, while a marginal increase in employment ended a 15-month sequence of job shedding.

June CPI inflation remained flat at 6.3%, which was the same as the figure for May. There was a 1.2% increase in food prices, led primarily by vegetables, eggs, and oils and fats. Fuel and light inflation went up by 12.7% from 11.9% in May. Urban inflation was marginally higher at 6.4% compared to rural inflation

HR POLICY & ORGANISATION CHART: -

As an employer, you want to provide the best opportunity to your employees while ensuring the interest of your Company. It is important to strike a balance between these twin objectives without compromising on either. Presenting ―Pramerica Life Group Traditional Employee Benefit Plan‖ which is a non- linked, non-participating, fund based, variable insurance group product offered toemployer-employee groups to provide financial security to employees and helps you provide solutions for a better work place as well as helps in being one of the key differentiators while attracting talent. As an employer, you can use this plan for provisioning of employee benefits i.e. funding gratuity, leave encashment and postretirement medical benefits. This plan can be offered to employer-employee groups under Defined Benefit Schemes only.

Basic objective: -

Structure of company: -

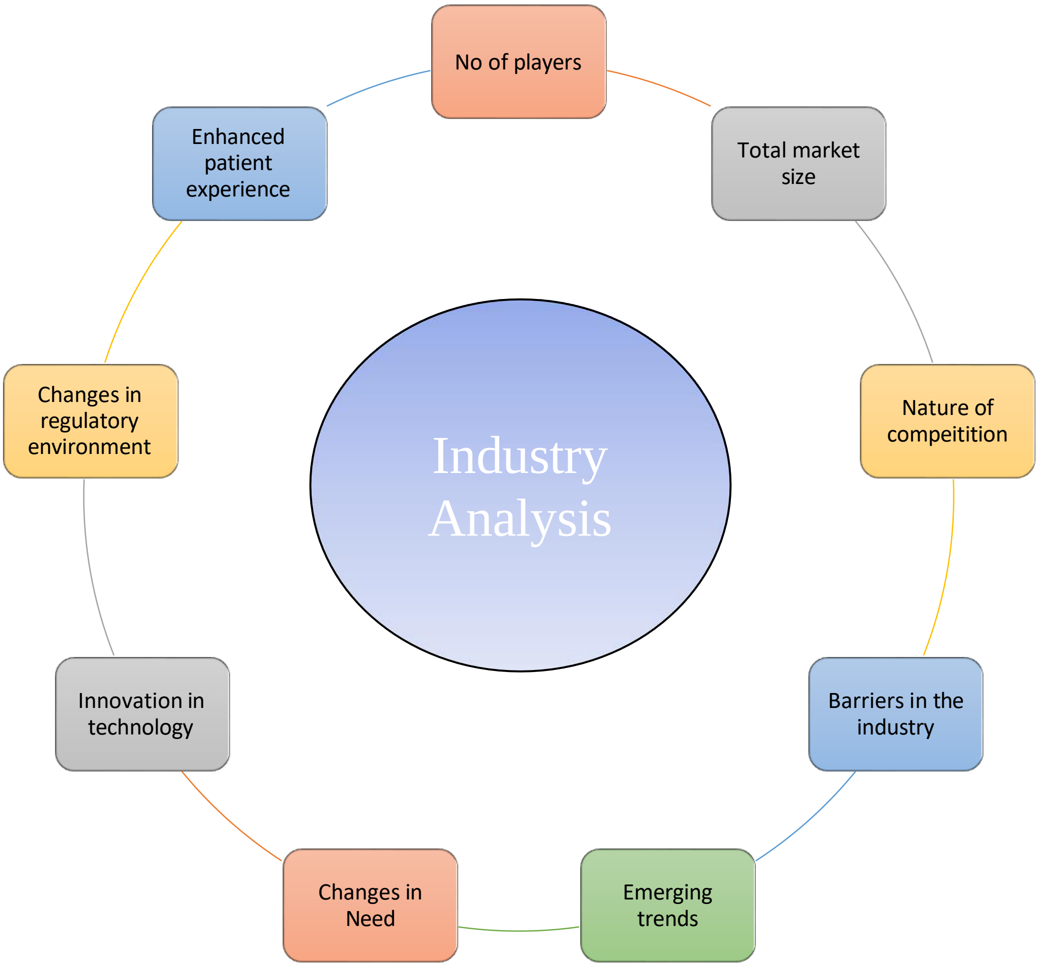
OVERVIEW – Ashwini Group of hospitals

Pramerica Life Insurance Limited is an unlisted public company incorporated on 25 June, 2007. It is classified as a public limited company and is located in Goagaon, Haryana. Its authorized share capital is INR 2,000.00 cí and the total paid-up capital isINR 374.06 cí.

the client status of Pramerica Life insurance Limited is - Active.

The last reported AGM (Annual General Meeting) of Pramerica Life insurance Limited, pie out íecoíds, was held on 29 September, 2020. Also, as pie out íecoíds, its last balance sheet was prepared for the period ending on 31 March, 2020.

INDUSTRY ANALYSIS


No of players
Total market size
Nature of compeitition
Barriers in the industry
Emerging trends
Changes in Need
Innovation in technology
Changes in regulatory environment
Enhanced patient experience
Industry Analysis

INDUSTRY ANALYSIS

1. No. of players –Ashwini Group of Hospitals operates in a competitive landscape comprising approximately

1,120 players within the healthcare industry. This substantial number of participants underscores a dynamic environment where numerous entities vie to provide healthcare services. Such diversity within the sector suggests a wide array of service offerings, specialization areas, and geographic coverage, reflecting both the opportunities and challenges inherent in navigating this expansive market. Understanding this competitive context is crucial for comprehending the strategic positioning and market dynamics impacting Ashwini Group of Hospitals.

2. **Total market size –**

The total market size for Ashwini Group of Hospitals is valued at approximately 4.79 crores. This figure illustrates the scale and financial magnitude of the healthcare market in which the group operates. Understanding this market size provides insight into the economic significance and potential growth opportunities within the sector, influencing strategic decisions and investment priorities for Ashwini Group of Hospitals amidst its competitive landscape.

3. **Nature of competition-**

Ashwini Group of Hospitals faces a competitive landscape characterized by perfect competition. In this environment, numerous healthcare providers offer homogeneous services, leading to price transparency and minimal differentiation among competitors. Perfect competition typically fosters efficiency and benefits consumers by ensuring competitive pricing and quality standards. For Ashwini Group, navigating within this framework involves focusing on operational excellence, service innovation, and patient satisfaction to maintain and enhance its market position amidst a level playing field.

Understanding this competitive nature informs strategic decisions and market positioning strategies for sustainable growth and success.

4. **Barriers in the industry-**

In the healthcare industry where Ashwini Group of Hospitals operates, significant entry barriers exist. These barriers can include stringent regulatory requirements, high capital costs for establishing healthcare facilities, complex licensing procedures, and the need for specialized medical personnel. Such barriers make it challenging for new entrants to establish themselves in the market, thereby reducing the threat of new competition for established players like Ashwini Group. Understanding these barriers is crucial for assessing market stability, strategic planning, and sustaining competitive advantage within the healthcare sector.

5. **Emerging trends**:

Emerging trends in the healthcare industry, such as online consultancy, doorstep medicine delivery, and quick follow-ups, are reshaping patient care and service delivery models for Ashwini Group of Hospitals. Online consultancy allows for convenient remote access to healthcare professionals, expanding patient reach and engagement. Doorstep medicine delivery enhances convenience and adherence to prescribed treatments. Quick follow-ups improve patient outcomes through timely monitoring and intervention. Embracing these trends enables Ashwini Group to enhance patient satisfaction, operational efficiency, and competitiveness in a rapidly evolving healthcare landscape.

6. **Changes in need:**

   Changes in patient needs within the healthcare industry are emphasizing fast health evaluation in outpatient departments (OPDs), online appointment booking systems, and efficient transportation options. Patients increasingly prioritize prompt diagnosis and treatment, driving demand for streamlined OPD services that reduce waiting times and improve efficiency. Online appointment booking enhances convenience and accessibility, catering to digital-savvy patients. Quick transportation options ensure timely access to medical facilities, crucial for emergency cases and routine visits alike. Adapting to these evolving needs enables Ashwini Group of Hospitals to deliver superior patient care experiences and maintain competitive advantage in the healthcare.

7. **Innovation in technology:**

   Innovation in technology within Ashwini Group of Hospitals encompasses advanced operating theater instruments, online feedback procedures, and reduced paperwork. Advanced OT instruments improve surgical precision and patient outcomes, reflecting the hospital's commitment to cutting-edge medical practices. Online feedback procedures enhance patient engagement and satisfaction by facilitating easy and immediate communication. Embracing digital solutions reduces administrative burdens and enhances efficiency, streamlining processes for better patient care delivery. These technological innovations underscore Ashwini Group's dedication to leveraging technology for enhanced medical services and operational excellence in the healthcare industry.

8. **Changes in regulatory environment.**

   Changes in the regulatory environment significantly impact operations within Ashwini Group of Hospitals. Regulatory updates may involve stringent compliance requirements, updated standards for patient care and safety, and revisions in healthcare reimbursements. These changes necessitate ongoing adaptation and adherence to ensure legal and ethical practices. Understanding and navigating the regulatory landscape is crucial for maintaining operational continuity, mitigating risks, and aligning with evolving healthcare policies. Ashwini Group must stay informed and agile to effectively manage regulatory changes while continuing to deliver high-quality care and uphold patient trust.

9. **Enhanced patient experience.** Enhancing patient experience is a pivotal focus for Ashwini Group of Hospitals, aiming to provide personalized care and exceptional service at every touch point. This includes optimizing waiting times, improving communication channels, and ensuring comfortable facilities. Implementing patient-centric initiatives such as patient feedback mechanisms, empathetic staff training, and digital healthcare solutions further enhances satisfaction and loyalty. By prioritizing patient comfort, safety, and engagement, Ashwini Group strengthens its reputation and competitive edge in the healthcare industry, fostering long-term relationships and positive outcomes for patients and their families.

10.regulatory violations.

Lowering regulatory violations is a critical goal for Ashwini Group of Hospitals, reflecting its commitment to maintaining compliance with healthcare laws and standards. This objective involves rigorous adherence to regulatory guidelines, continuous staff training on protocols, and implementing robust internal auditing processes. By fostering a culture of strict adherence and accountability, Ashwini Group minimizes the risk of regulatory infractions. This proactive approach not only enhances operational efficiency but also upholds patient safety and trust, reinforcing the hospital's reputation as a responsible healthcare provider within a regulated environment.

11.Effective Internal audits.

Effective internal audits play a crucial role within Ashwini Group of Hospitals, ensuring operational excellence and regulatory compliance. These audits involve thorough reviews of processes, protocols, and financial controls to identify areas for improvement and ensure adherence to standards. By conducting regular and comprehensive audits, the hospital can proactively address issues, mitigate risks, and enhance overall efficiency. This systematic approach not only promotes transparency and accountability but also strengthens internal controls, fostering a culture of continuous improvement and excellence in patient care delivery.

12. Centralized procedures and data.

Centralized procedures and data management are pivotal for Ashwini Group of Hospitals, facilitating streamlined operations and enhanced decision-making. Centralization involves consolidating administrative processes, medical records, and operational protocols into a unified system. This approach ensures consistency in patient care, improves communication across departments, and enables efficient resource allocation. Additionally, centralized data management enhances data security, simplifies access for healthcare professionals, and supports evidence-based practices. By centralizing procedures and data, Ashwini Group optimizes workflow efficiency, promotes collaboration, and ultimately enhances the quality of healthcare services delivered to its patients.

13. Beat the compliance curve.

To "beat the compliance curve," Ashwini Group of Hospitals must proactively stay ahead of evolving regulatory requirements and industry standards. This approach involves anticipating future compliance challenges, implementing preemptive measures, and continuously updating policies and procedures. By prioritizing compliance readiness, the hospital not only avoids potential penalties and disruptions but also fosters a culture of compliance throughout its operations. This proactive stance not only enhances regulatory adherence but also promotes operational efficiency and reinforces trust with patients and regulators.

Chapter-III

COMPETITOR ANALYSIS

Differential Competitor analysis

Hospital	**Services Provided**	**Key Differentiators**
Apollo	neral healthcare, surgical procedures	ialized pediatric care, moder infrastructure
KIMS	cardiology, neurology, oncology	dvanced medical research center renowned specialists
disha Orthopedics hospital a shanti fertility care	Orthopedic, fertility treatments	State of the art of fertility center, specialized orthopedic surgeries
Odisha multi-specialty hospital trauma care center private limi	Emergency care, trauma center	el 1 trauma center, round the clo critical care services

Key competitor analysis

Apollo Hospital:

Apollo Hospital is a renowned chain of hospitals known for its comprehensive healthcare services across India. It boasts of state-of-the-art medical infrastructure, cutting-edge technology, and a wide range of specialties including cardiac care, oncology, neurology, and organ transplants. Apollo's strong brand reputation and extensive network give it a significant advantage in terms of patient trust and accessibility. However, its premium pricing might pose a challenge in competing with more localized hospitals like Ashwini in certain market segments.

KIMS Hospital:

KIMS Hospital, another prominent player, focuses on providing high-quality healthcare services with a strong emphasis on affordability and accessibility. It is known for its specialization in areas such as orthopedics, nephrology, and oncology. KIMS often attracts patients seeking quality care at relatively lower costs compared to premium hospitals like Apollo. However, its market penetration and brand recognition might vary depending on the region compared to a localized competitor like Ashwini.

Shanti Fertility Care & Odisha Multispecialty Hospital:

This hospital combines fertility care with a multispecialty approach, indicating a dual specialization that caters to both reproductive health and general medical services. Its unique positioning appeals to patients seeking fertility treatments alongside comprehensive healthcare services. However, it may face competition from more established multispecialty hospitals like Ashwini in terms of overall service breadth and market presence.

Trauma Care Center Private Limited:

Focused on trauma and emergency care, this hospital serves a critical role in providing immediate medical attention to accident victims and emergency cases. Its strengths lie in emergency preparedness, trauma surgery, and critical care facilities. However, it may have limited outpatient services compared to hospitals like Ashwini, which offer a broader range of elective procedures and long-term care options.

Strengths:

Identify what each competitor excels in such as specialized services brand reputation technology or patient care.

Weaknesses:

Areas where competitors may fall short such as limited-service offerings regional market presence or operational inefficiencies.

Opportunities:

Potential growth areas or market segments that competitors could tap into such as expanding specialty services or entering new geographic markets.

Threats:

External factors that could impact competitors, such as regulatory changes, economic conditions, or shifts in patient preferences.

Apollo HOSPITALS
TOUCHING LIVES

KIMS HOSPITALS™

SUSHRUTA HOSPITAL AND TRAUMA CARE PVT LT
ODISHA

Chapter- IV

CUSTOMER ANALYSIS

Customer is defined as “someone who buys goods or services from a business”. To date, no uniformly agreed on definition of healthcare customer has emerged, but the previous definition could apply to a patient. Popular insurance plan options, such as high-deductible plans and health savings accounts, have led to rapid growth in consumer-driven healthcare, where consumer is generally accepted to mean customer. With the advent of these and other products in the healthcare marketplace, individuals are motivated to shop for providers on the basis of price and quality information that is publicly available, which may be influencing the shift in labeling from patient to customer. Importantly, the use of the term customer has long depended on the person or organization using the term. For instance, healthcare administrators might refer to customers rather than patients when negotiating privileges with physician groups.

Administrators might refer to insurance providers as customers, as insurers often influence where patients seek treatment. The purpose of this case study was to identify a hospital’s customers, as viewed by both patients and healthcare team members, and to identify variables that lead to customer satisfaction. The study was conducted at one acute care. The study’s findings may be of interest to hospital administrators who wish to incorporate customer service techniques to build customer relationships. It also offers a method to identify potential customer segments and the attributes those segments deem important to making the decision to do business with the hospital. Ultimately, this case study provides a framework in which to identify a hospital’s customers and the best ways to attract and retain them.

Is patient a customer?

A patient is viewed as an individual who grants authority to the physician, whereby the physician is presumed to be the sole decision maker regarding the services provided. Conversely, customer is defined as ―someone who buys goods or services from a business‖, implying that medical services are commodities to be managed in the market. When an individual is a customer, he or she purchases services and is fully responsible for checking the quality of the goods before the purchase is made. If the patient is labeled a customer, the provider assumes the role of seller, whose aim is to satisfy the customer’s needs. Switching the labels alters the nature of the relationships between healthcare practitioners and their clients/patients. If the patient label is used, the provider has the ultimate decision-making authority, whereas if the customer label is used, the receiver of care may dominate the negotiations regarding the treatment plan. Evidence from other countries suggests that patients prefer to be called patients and not customers. Based on

The number of studies that collectively polled 2,165 people in four different countries (UK, Poland, Canada, and Australia) the overwhelming majority of people appeared to 61_5_Mazurenko_JHM prefers the term patient, whereas only 1 in 33 people chose to be

Called service user. Importantly, the patient’s preference for the label may be different in United States, where the healthcare system is not a single-payer system. As patients increase their health literacy and control over healthcare decisions, they are transitioning from their roles as pure patients to roles more closely resembling customers. It is therefore useful to review how customer satisfaction has been studied in the healthcare literature.

Customer Satisfaction in Healthcare one commonly used marketing research tool to assess customer satisfaction is the SERVQUAL model. This instrument, in its original form, is used to explore the gaps between expectations and actual perceptions of a service provider’s performance. Proposed that customer expectations are an important antecedent to customer satisfaction in a healthcare setting. Therefore, if customer satisfaction is the goal, a service provider must first identify the customer and then work to understand the customer’s expectations of the clinical encounter. Often, these expectations are not congruent with the service provider’s assumptions.

Incorrectly or inadequately identifying who the customer is and what his or her expectations are can lead to inefficient resource allocation, thereby satisfying assumed expectations at the cost of not meeting actual ones.

Customers of food canteen

The clientele of the hospital's food canteen comprises a diverse spectrum of individuals, encompassing patients and their caregivers, hospital staff, including doctors and nurses, as well as members of the general public. This varied demographic represents a broad cross- section of the hospital community, each with distinct dietary preferences, nutritional requirements, and expectations regarding food quality and service. Understanding and catering to these diverse needs is crucial for optimizing the canteen's offerings and enhancing overall satisfaction among its clientele.

Do hospitals have other customers?

Historically, hospitals have developed physician incentives, such as offering hospital-based positions, managerial roles, or ownership interests, to influence physicians' decisions on where to admit their patients. Research has identified physicians' preferences for particular hospital attributes when selecting a facility for their patients, such as the distance to the hospital from the physician's office or the percentage of the physician's admissions at the hospital. Evidence suggests that the hospital– physician collaboration is nevertheless often suboptimal, characterized by strong disagreements on costs or quality issues. One reason for a lack of alignment between hospitals and physicians may be that hospitals do not understand the physicians' true expectations. The hospital is also often chosen for the patient by the insurance company. Therefore, it seems rational to view all parties— physicians, insurers, and other stakeholders as well as patients—through the lens of their role as customers who provide business for the hospital. Physicians as Customers Industry experts consistently stress that hospitals should treat their physicians as a primary customer to ensure the sustainability of the hospital. Hospital attributes typically identified as important to satisfying physicians include outcome-oriented standards; protocols for communication between physician and hospital staff, particularly in terms of manners and courtesy; scheduling that accommodates the physician's needs; appointment of a primary team with whom the physician works on a regular basis; and a facility that is ready for the physician's arrival to maximize efficiency.

Types of Patients

No two patients are alike. But the longer you work as a physician, the more you notice patterns in the types of patients you treat. They make you laugh, make you cry, make you want to pull your hair out and, at times, remind you of exactly why you got into this line of work. No matter what, you can always count on them to liven up your task. Where would you be without this colorful cast of characters to care for? Keep reading to see how many of these mm

The self -diagnose:

You know this patient. This is the one who is convinced they've contracted a rare disease. If a diagnosis was really that easy, then medical professionals would be out of the job.

Thankfully physicians are there to field the questions and help correct the diagnoses when they go a little overboard. This patient is sure they have something rare, trendy and difficult to treat.

They are often disappointed when they don't have multiple specialists asking them insightful questions they've already prepared answers.

The one with over bearing family:

Here's another one you're likely to see. You know the drill walking into a patient's room chock full of visiting family members. All eyes shift to you. In an instant they bombard you with a litany of questions. Or they try to speak for their fully capable family member in a misguided attempt at showing they care. These patients are typically sweet and laid back, unlike everyone related to them. Often, family members ignored them until they got really sick and are now trying to make up for it at your expense.

The one you get attached to:

You've been told not to get attached to your patients, but the head and the heart don't always agree. You'll likely find yourself remembering special patients long after they're gone. Whether it was their optimistic outlook, or the way you bonded before a big surgery, some patients occupy a special place in your heart.

The skeptic:

These incredulous patients are always looking for a second opinion. They may come into their appointment with medical knowledge after a little online research.

However, this patient is hesitant to accept any of your explanations or advice, questioning your every move.

Sometimes you can't blame them—if they've been from doctor to doctor only to be hurried through the system and placed on some drug that works on most people.

The one that never goes to doctor:

You know this patient—They're rarely happy to see doctors and think their time would be better spent elsewhere: Running errands, finishing that project at home or a million other excuses. And they can't remember the last time they had an appointment for a checkup.

The Indolent

You know this patient-these are individuals who do not take much interest in describing their ailments because of the following reasons –lack of interest or laziness, not to trouble others by his complaints, false modesty etc.

Hypochondriacs and hypersensitive patients:

Hypochondriac patients imagine complaints because of their nervousness and morbid fear, whereas the hypersensitive patients intensify the symptoms because they want prompt relief.

The one who reminds you why you do what you do:

Even on your toughest days when nothing seems to go right, there will always be the patients who remind you of why you responded to the call of medicine and took up the rigor and reward of the field.

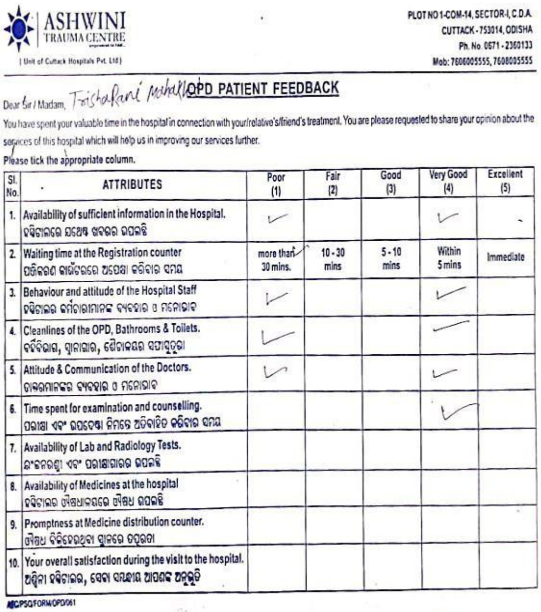
Whether it’s the humbling moments of your toughest patients fighting for their lives, the patients who are truly grateful for your care or simply knowing you made someone’s time in the hospital a brighter experience, these special patients come into your life again and again to remind you of why you first became a doctor laziness, not to trouble others by his complaints, false modesty etc.

Whether it’s the humbling moments of your toughest patients fighting for their lives, the patients who are truly grateful for your care or simply knowing you made someone’s time in the hospital a brighter experience, these special patients come into your life again and again to remind you of why you first became a doctor

Chapter-V

Actual work done, analysis & finding

FEEDBACK FORM



ASHWINI TRAUMA CENTRE
(Unit of Cuttack Hospitals Pvt. Ltd)

PLOT NO 1-COM-14, SECTOR-I, C.D.A.
CUTTACK - 753014, ODISHA
Ph. No. 0671 - 2360133
Mob: 7606005555, 7608005555

OPD PATIENT FEEDBACK

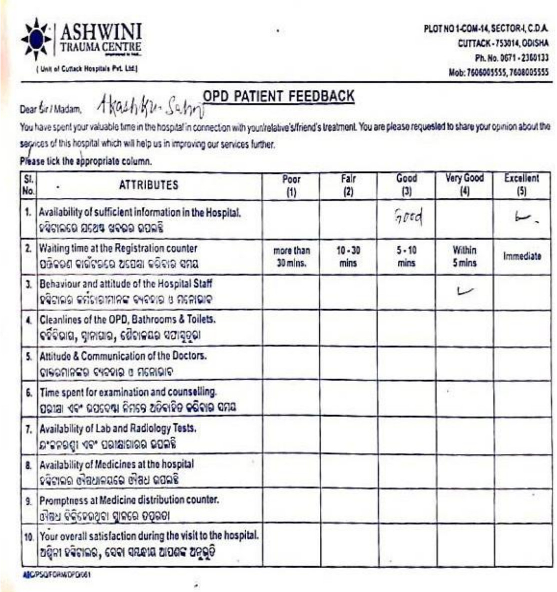
Dear Sir / Madam, Trishakani Mohal

You have spent your valuable time in the hospital in connection with your/relative's/friend's treatment. You are please requested to share your opinion about the services of this hospital which will help us in improving our services further.

Please tick the appropriate column.

Sl. No.	ATTRIBUTES	Poor (1)	Fair (2)	Good (3)	Very Good (4)	Excellent (5)
1.	Availability of sufficient information in the Hospital. ହସ୍ପିଟାଲରେ ଯଥେଷ୍ଟ ଖବରର ଉପଲବ୍ଧି	✓			✓	
2.	Waiting time at the Registration counter ପଞ୍ଜିକରଣ କାଉଁଟରରେ ଅପେକ୍ଷା କରିବାର ସମୟ	more than ✓ 30 mins.	10 - 30 mins	5 - 10 mins	Within 5 mins	Immediate
3.	Behaviour and attitude of the Hospital Staff ହସ୍ପିଟାଲର କର୍ମଚାରୀମାନଙ୍କ ବ୍ୟବହାର ଓ ମନୋଭାବ	✓			✓	
4.	Cleanlines of the OPD, Bathrooms & Toilets. ବର୍ହିବିଭାଗ, ସ୍ନାନାଗାର, ଶୌଚାଳୟର ସଫାସୁତୁରା	✓			✓	
5.	Attitude & Communication of the Doctors. ଡାକ୍ତରମାନଙ୍କର ବ୍ୟବହାର ଓ ମନୋଭାବ	✓			✓	
6.	Time spent for examination and counselling. ପରୀକ୍ଷା ଏବଂ ଉପଦେଷ୍ଟା ନିମନ୍ତେ ଅତିବାହିତ କରିବାର ସମୟ				✓	
7.	Availability of Lab and Radiology Tests. ଋଂଜନରଶ୍ମୀ ଏବଂ ପରୀକ୍ଷାଗାରର ଉପଲବ୍ଧି					
8.	Availability of Medicines at the hospital ହସ୍ପିଟାଲର ଔଷଧାଳୟରେ ଔଷଧ ଉପଲବ୍ଧି					
9.	Promptness at Medicine distribution counter. ଔଷଧ ବିକ୍ରିହେଉଥିବା ସ୍ଥାନରେ ତତ୍ପରତା					
10.	Your overall satisfaction during the visit to the hospital. ଅଶ୍ୱିନୀ ହସ୍ପିଟାଲର, ସେବା ସମ୍ବନ୍ଧୀୟ ଆପଣଙ୍କ ଅନୁଭୂତି					

ATC/PSQ/FORM/OPD/061



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OPD PATIENT FEEDBACK

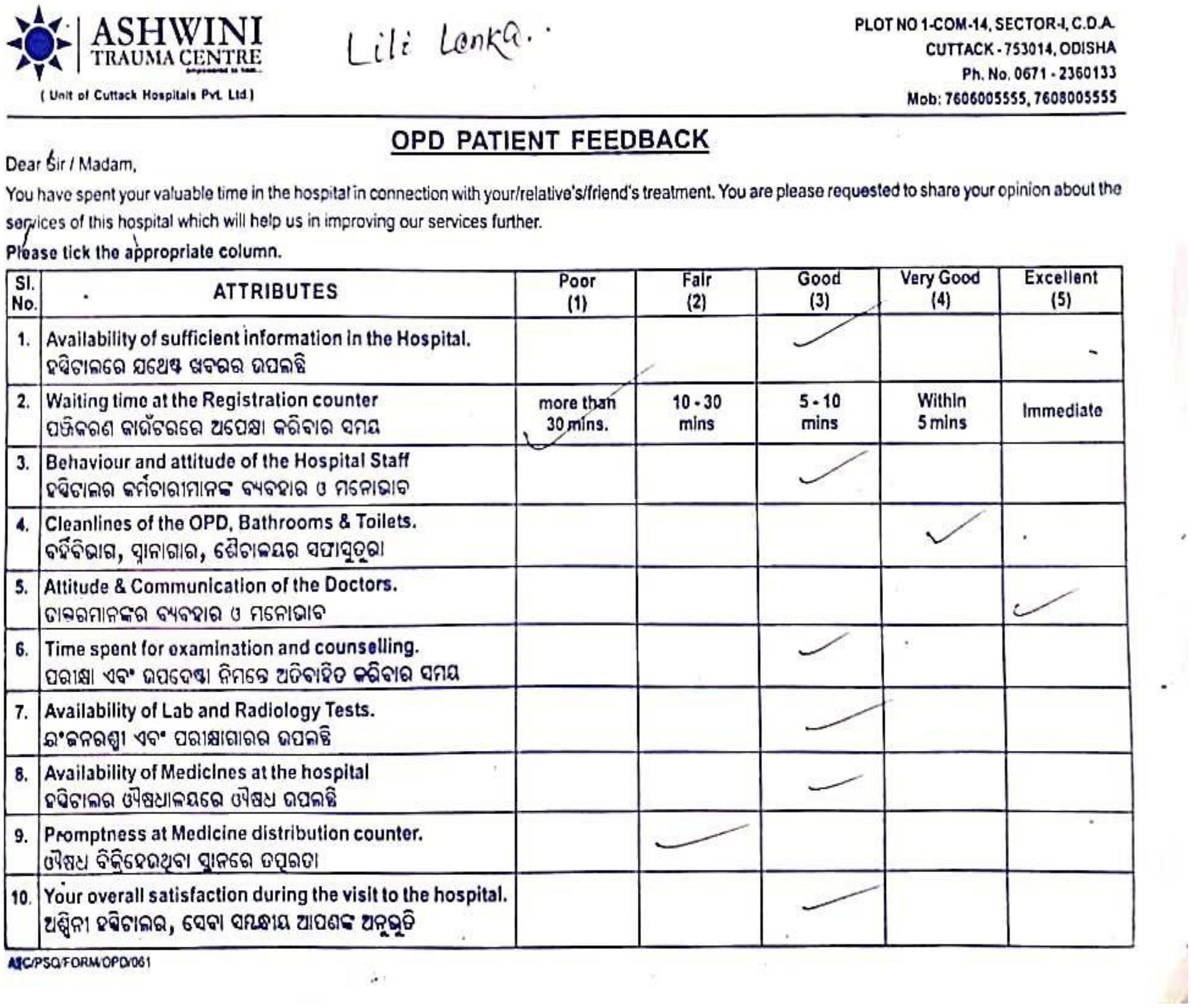
Dear Sir / Madam, Akash Ku. Sahu

You have spent your valuable time in the hospital in connection with your/relative's/friend's treatment. You are please requested to share your opinion about the services of this hospital which will help us in improving our services further.

Please tick the appropriate column.

Sl. No.	ATTRIBUTES	Poor (1)	Fair (2)	Good (3)	Very Good (4)	Excellent (5)
1.	Availability of sufficient information in the Hospital. ହସ୍ପିଟାଲରେ ଯଥେଷ୍ଟ ଖବରର ଉପଲବ୍ଧି			Good		✓
2.	Waiting time at the Registration counter ପଞ୍ଜିକରଣ କାଉଁଟରରେ ଅପେକ୍ଷା କରିବାର ସମୟ	more than 30 mins.	10 - 30 mins	5 - 10 mins	Within 5 mins	Immediate
3.	Behaviour and attitude of the Hospital Staff ହସ୍ପିଟାଲର କର୍ମଚାରୀମାନଙ୍କ ବ୍ୟବହାର ଓ ମନୋଭାବ				✓	
4.	Cleanlines of the OPD, Bathrooms & Toilets. ବର୍ହିବିଭାଗ, ସ୍ନାନାଗାର, ଶୌଚାଳୟର ସଫାସୁତୁରା					
5.	Attitude & Communication of the Doctors. ଡାକ୍ତରମାନଙ୍କର ବ୍ୟବହାର ଓ ମନୋଭାବ					
6.	Time spent for examination and counselling. ପରୀକ୍ଷା ଏବଂ ଉପଦେଷ୍ଟା ନିମନ୍ତେ ଅତିବାହିତ କରିବାର ସମୟ					
7.	Availability of Lab and Radiology Tests. ଋଂଜନରଶ୍ମୀ ଏବଂ ପରୀକ୍ଷାଗାରର ଉପଲବ୍ଧି					
8.	Availability of Medicines at the hospital ହସ୍ପିଟାଲର ଔଷଧାଳୟରେ ଔଷଧ ଉପଲବ୍ଧି					
9.	Promptness at Medicine distribution counter. ଔଷଧ ବିକ୍ରିହେଉଥିବା ସ୍ଥାନରେ ତତ୍ପରତା					
10.	Your overall satisfaction during the visit to the hospital. ଅଶ୍ୱିନୀ ହସ୍ପିଟାଲର, ସେବା ସମ୍ବନ୍ଧୀୟ ଆପଣଙ୍କ ଅନୁଭୂତି					

ATC/PSQ/FORM/OPD/061



ASHWINI TRAUMA CENTRE
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Lili Lenka.

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2.	Waiting time at the Registration counter ପଞ୍ଜିକରଣ କାଉଁଟରରେ ଅପେକ୍ଷା କରିବାର ସମୟ	more than 30 mins. ✓	10 - 30 mins	5 - 10 mins	Within 5 mins	Immediate
3.	Behaviour and attitude of the Hospital Staff ହସ୍ପିଟାଲର କର୍ମଚାରୀମାନଙ୍କ ବ୍ୟବହାର ଓ ମନୋଭାବ			✓		
4.	Cleanlines of the OPD, Bathrooms & Toilets. ବର୍ହିବିଭାଗ, ସ୍ନାନାଗାର, ଶୌଚାଳୟର ସଫାସୁତୁରା				✓	
5.	Attitude & Communication of the Doctors. ଡାକ୍ତରମାନଙ୍କର ବ୍ୟବହାର ଓ ମନୋଭାବ					✓
6.	Time spent for examination and counselling. ପରୀକ୍ଷା ଏବଂ ଉପଦେଷ୍ଟା ନିମନ୍ତେ ଅତିବାହିତ କରିବାର ସମୟ			✓		
7.	Availability of Lab and Radiology Tests. ଋଂଜନରଶ୍ମୀ ଏବଂ ପରୀକ୍ଷାଗାରର ଉପଲବ୍ଧି			✓		
8.	Availability of Medicines at the hospital ହସ୍ପିଟାଲର ଔଷଧାଳୟରେ ଔଷଧ ଉପଲବ୍ଧି			✓		
9.	Promptness at Medicine distribution counter. ଔଷଧ ବିକ୍ରିହେଉଥିବା ସ୍ଥାନରେ ତତ୍ପରତା		✓			
10.	Your overall satisfaction during the visit to the hospital. ଅଶ୍ୱିନୀ ହସ୍ପିଟାଲର, ସେବା ସମ୍ବନ୍ଧୀୟ ଆପଣଙ୍କ ଅନୁଭୂତି			✓		

ATC/PSQ/FORM/OPD/061

By filling the feedback form I got,

- **Improving Services**: Feedback forms provide valuable insights into the patient experience. Hospitals and clinics use this feedback to improve the quality of care they provide. This could include anything from improving waiting times to enhancing the communication skills of staff.

- **Patient Satisfaction**: By giving feedback, patients contribute to their own satisfaction levels. Knowing that their opinions matter can improve trust and patient-provider relationships.

- **Quality Assurance**: Healthcare institutions use feedback forms as part of their quality assurance processes. They help identify areas that need improvement and monitor changes over time.

- **Policy and Decision Making**: Feedback forms can influence policy decisions within healthcare organizations. For instance, if there are consistent complaints or suggestions regarding a particular aspect of service, it may prompt management to make changes.

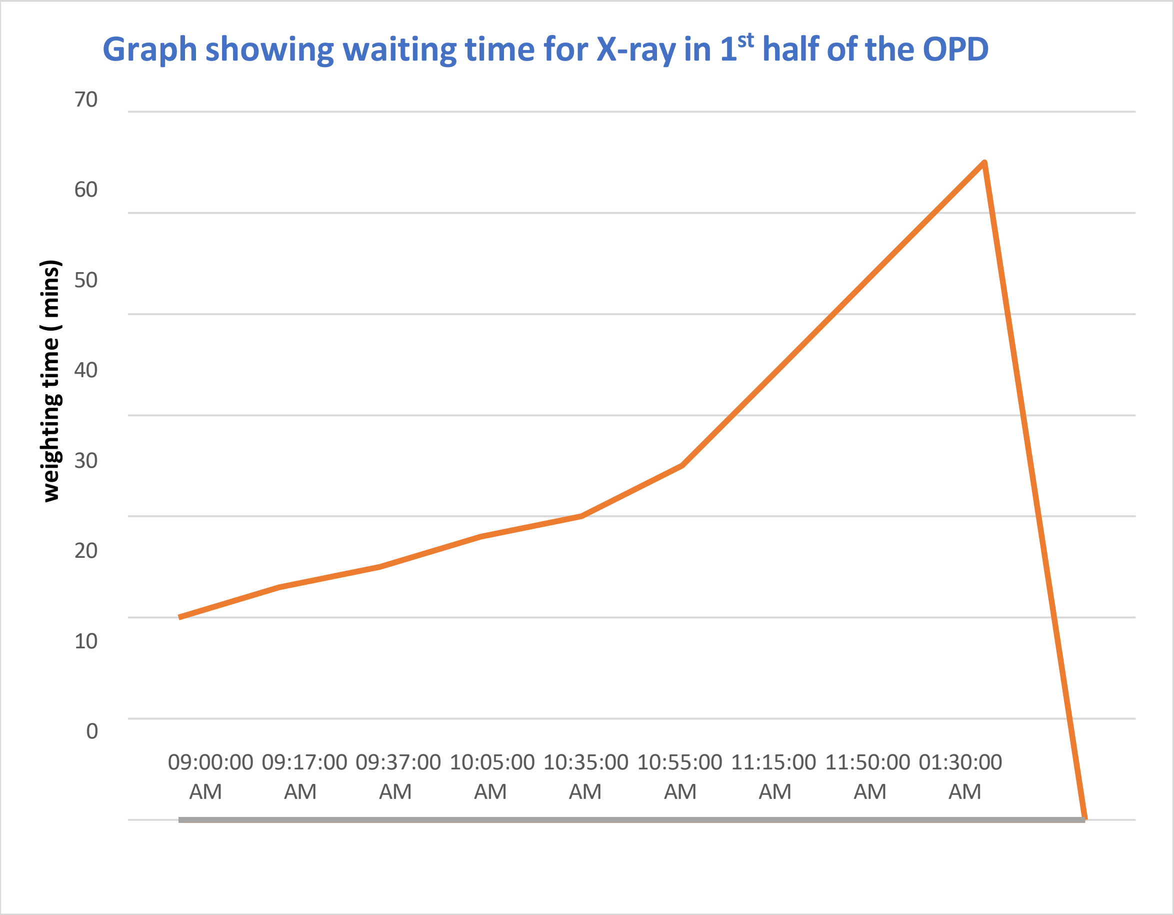
- **Professional Development**: Feedback can also be used for training and professional development purposes. Healthcare professionals can learn from patient feedback to enhance their skills and approach to patient care.

X-ray –

- **Data Collection**: Gathering data is crucial to assess the current state of X-ray services. This involves collecting information on equipment performance, staff qualifications, workflow processes, patient satisfaction levels, and compliance with standards.

- **Performance Evaluation**: Analyzing the collected data to evaluate current performance against established standards. This step may involve comparing metrics such as image quality, radiation exposure levels, waiting times, equipment maintenance records, and adherence to safety protocols.

- Patient average waiting time for an X-ray is 50- 60 min when the patient registration exceeds 65. Patient registrations bellow 65 average waiting time 35 min.
- Average time one X-ray take 7-8 min, the least time taking is chest X-ray about 4min and the highest time require is bilateral knee about 12 min.



CT- scan –

- **Data Collection**: Gathering data is crucial to assess the current state of CT-scan services. This involves collecting information on equipment performance, staff qualifications, workflow processes, patient satisfaction levels, and compliance with standards.

- Average time take for a CT-scan 35 min.
- Average patient weighting time is 50-60 min.

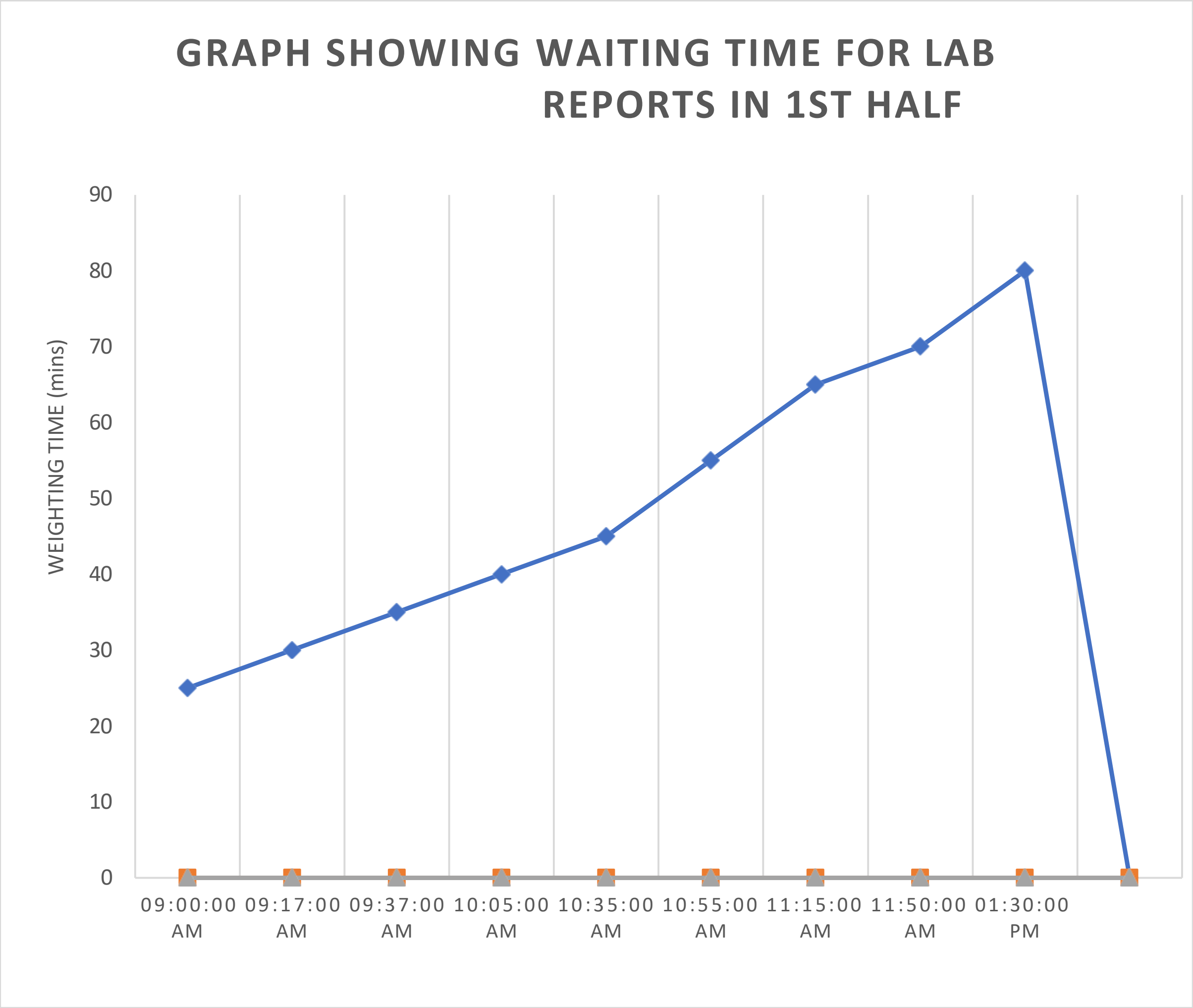
LAB-

- **Defining Standards and Objectives**: Identify the relevant standards, guidelines, regulations, and objectives that the laboratory should adhere to. This could include quality standards, safety protocols, operational efficiency targets, and regulatory requirements.

Document Review: Review current documentation, policies, procedures, and protocols in place within the laboratory. This includes examining standard operating procedures (SOPs), quality manuals, safety manuals, calibration records, maintenance logs, and personnel training records

Data Collection and Analysis:

- **Performance Metrics**: Gather quantitative data on laboratory performance metrics such as turnaround times, accuracy rates, error rates, proficiency testing results, and compliance with regulatory requirements.
- Various tests require various timing like ESR- 1hr, AGT- 5min, CBC– 30-40 min, CRP- within 1hr, pus culture- 72 hr.
- **Feedback and Surveys**: Collecting feedback from the staff, doctors and patients about the lab report accuracy and about the weighting time.
- **Comparison with Standards**: Compare the collected data against established standards, guidelines, and best practices. Identify gaps where current performance falls short of desired benchmarks.
- Root **Cause Analysis**: Investigate the underlying reasons for identified gaps. This involves understanding factors such as equipment deficiencies, insufficient staff training, procedural inconsistencies, resource limitations, or regulatory non-compliance.
- SWOT **Analysis**: Conduct a SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis to further explore internal and external factors influencing laboratory operations and performance.


GRAPH SHOWING WAITING TIME FOR LAB REPORTS IN 1ST HALF
WEIGHTING TIME (mins)
90
80
70
60
50
40
30
20
10
0
09:00:00 AM
09:17:00 AM
09:37:00 AM
10:05:00 AM
10:35:00 AM
10:55:00 AM
11:15:00 AM
11:50:00 AM
01:30:00 PM

ANALYSIS &FINDINGS

Infrastructure and Equipment:

- **Gap:** according to the patient registration there is a shortage of equipment's and skilled radiologist.
- **Finding:** There is one machine for the entire department OPD, IPD and EMERGENCY. Machine causing breakdowns and delays in obtaining diagnostic images.

Staffing and Training:

- **Gap:** Insufficient number of trained staff members in critical roles.
- **Finding:** There is a shortage of radiology technicians trained to operate CT scan machines during evening shifts, resulting in extended wait times for patients needing urgent scans.

Process Efficiency:

- **Gap:** Inefficient patient flow from OPD to diagnostic services.
- **Finding:** Lack of a streamlined process for transferring patient information and test requisitions from OPD to the laboratory, causing delays in test completion and **reporting.**

Quality Assurance:

- **Gap:** Inconsistent quality control measures in diagnostic procedures.
- **Finding:** There is a lack of regular calibration of X-ray machines, leading to variability in image quality and potential diagnostic errors.

Patient Experience:

- **Gap:** There is a communication gap between the patient and doctors in language and medical terms, sometimes they don't properly understand about the patient condition.

Resource Allocation:

- **Gap:** Inadequate allocation of resources based on patient demand.
- **Finding:** During peak hours, there is a significant backlog in the laboratory due to insufficient staffing, impacting the turnaround time for test results.

Financial Management:

- **Gap:** Inefficient billing and reimbursement processes.
- **Finding:** Delayed submission of billing claims for diagnostic services results in delayed revenue and financial strain on the department.

Capacity Planning:

- **Gap:** Inadequate capacity to meet fluctuating demand for diagnostic services.
- **Finding:** During flu season, the CT scan department experiences a surge in demand that exceeds its current capacity, leading to scheduling difficulties and patient dissatisfaction.

CHAPTER-VI

Suggestion & conclusion

- ISSUE: Doctors come late/absent for prolonged duration/or in IPD round during OPD timings.

✓ SOLUTION: Doctor’s checklist which would contain information about doctor’s time in and time out.

- ISSUE: The ERP (HOSPEDIA) should be properly worked every patient detail with their diagnostic report if they have previously visited our hospital should be shown in the doctor’s computer and the prescription should be written in the computer but the patient count is so high that this could not be done properly.

✓ SOLUTION: There should be an experienced pharmacist with a good typing speed who can understand the medical terms said by the doctor. This could solve a lot of problem like,

if the patient is educated then he/she clearly read the prescription without

taking help of any specialist. The history of the patient is transfer at one click if there is any need.

Every time there is a doubt in the patient mind that they are coming before everyone who are present over in the OPD and they start arguing with the PRO present in the OPD, this gives a clear statement and a proper sequence with time. As all we know for a doctor every patient is equal so the things are going well.

- ISSUE: MRs used to crowd the OPD area during OPD timings this problem occur mostly in Tuesday, Thursday and Saturday.

✓ SOLUTION: MR’s ask to seat outside in the reception area or in the conference room.

- ISSUE: In OPD hours there are many paper work like discharge form and corporate paper work have to be checked by the Doctor which made a gap between the patient and doctor.

✓ SOLUTION: There should be a fix timing for this work

- ISSUE: Error in OPD schedule.

- ✓ SOLUTION: Needs to be corrected.
- ISSUE: Non availability of OPD wheelchairs and ward boy during the peak hours. The patient face difficulty and waiting for a long time for the availability of the service.
- ✓ SOLUTION: At least 3 wheelchairs and 3 ward boy present at the OPD, one for diagnostic service and one for doctor consultation and another one for dressing, taking patient outside the hospital as well as to the IPD .
- ISSUE: GAP between the doctor consultation and diagnostic services.
- ✓ SOLUTION: There is a requirement of skilled employee in diagnostic service at least 2 required. the gap is filled by deploy more machines with advance technology in the diagnostic services. This could be solved by fix the lunch hours differently for the doctor, patient and members of diagnostic services.

- ISSUE: Non availability of change at the billing counter.
- ✓ SOLUTION: Change of Rs 5000/- to be issued to the department.
- ISSUE: Delay in lunch for the patient who are not able to come to the canteen.
- ✓ Solution: There should be a quick action taken by the canteen manager.
- ISSUE: There is a communication gap because of the language between some doctors and patients.
- ✓ SOLUTION: An ODIA known doctor or attendant should be present there when ever such situation occurs.
- ISSUE: The seating capacity of the OPD should be increase.
- **ISSUE: Recruitment in X-ray -2, LAB- 0, OPD- 1 attendant, 1 ward boy., dressing- 1.**

conclusion

In conclusion, the gap analysis conducted on OPD and diagnostic services, including X-ray, CT scan, and laboratory facilities, reveals several critical areas for improvement and enhancement. Through thorough evaluation of current infrastructure, technology, staffing levels, and patient feedback, significant gaps have been identified.

Key findings include the need for upgrading diagnostic equipment to meet technological advancements and regulatory standards, enhancing staff training and skills development to ensure proficient service delivery, and improving operational efficiencies to reduce patient waiting times and enhance overall service quality.

Moreover, addressing patient experience concerns through better communication, streamlined appointment scheduling, and improved facilities will be pivotal in achieving higher satisfaction rates. Compliance with regulatory requirements and the implementation of robust quality assurance measures are also imperative to ensure accurate diagnostic outcomes and patient safety.

Moving forward, the recommendations derived from this gap analysis will guide strategic initiatives aimed at bridging identified gaps, thereby fostering a more efficient, patient-centered healthcare environment that meets both current and future healthcare needs effectively

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