



Research Paper

## Streamlining Transitions: Tackling Admission and Discharge Delays in Tertiary teaching hospital

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### ABSTRACT

*This descriptive study aimed to identify challenges in hospital admission and discharge processes, which are critical to ensuring efficient patient flow and quality care. Effective admissions and timely discharges are key to optimizing hospital resources, improving patient satisfaction, and reducing delays. Data was collected from 86 patients admitted to general wards using a structured questionnaire. A sample size was calculated using the formula, with participants selected through convenience sampling. The data was analyzed using frequency and percentage distributions, while Pareto and fishbone analyses identified root causes. The study provides insights into operational inefficiencies and proposes targeted interventions to improve patient care and hospital efficiency.*

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### I. INTRODUCTION

Hospital admission and discharge are complex processes for healthcare professionals, patients, and caretakers. Ensuring high-quality, affordable care requires effective planning and communication. A systematized admission and discharge process is essential for organizational effectiveness and addressing the patient problems. Improved communication and proper procedures are crucial for healthcare accessibility. Effective discharge planning can enhance patient health and reduce readmissions. This study aims to explore the challenges faced by patients during these processes and propose strategies for improvement.

### II. MATERIALS AND METHODS

The study is descriptive type and data was collected from the patients admitted to the general wards by a questionnaire. A sample size of 86 patients was calculated based on following formula:  $Z\alpha^2/e^2 \times P(1-P)$  & were selected using convenience sampling techniques. Data was analysed using frequency and percentage. Further Pareto analysis and Cause effect diagram was used to identify causes of the problems.

### III. RESULTS:

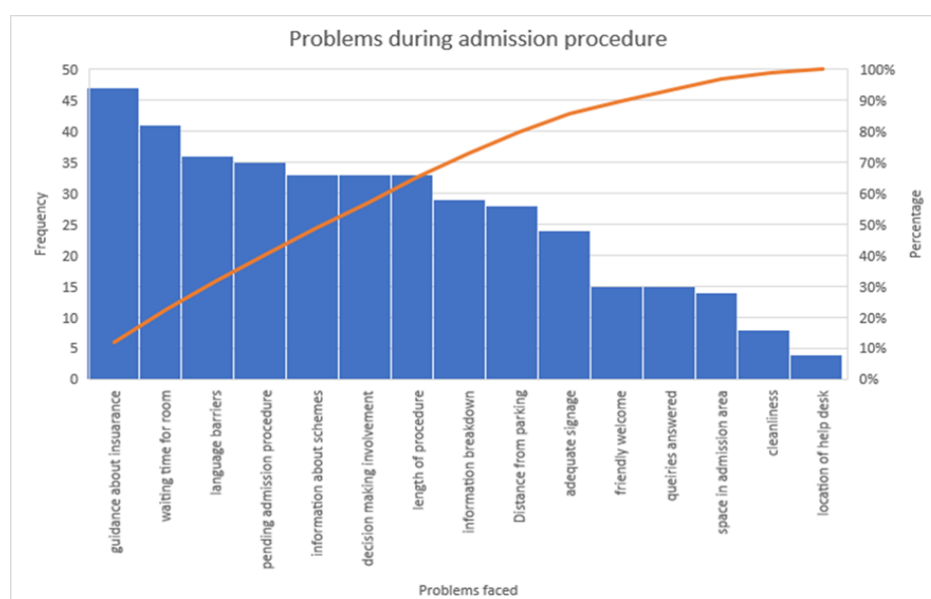
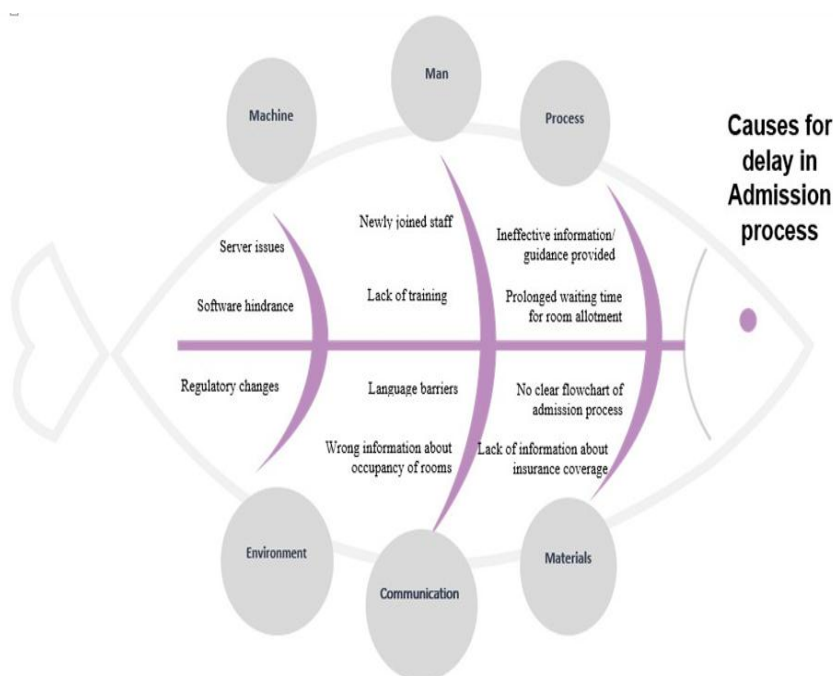
The study revealed significant issues in hospital admissions and discharge processes, with key challenges including insurance guidance, room allocation delays, and language barriers. Post-intervention, targeted strategies such as staff training, language support for Malayalam-speaking patients, and standardized discharge summaries led to notable improvements. A re-audit confirmed a reduction in discharge delays, enhanced communication between staff and patients, and improved efficiency in discharge procedures. The implementation of junior doctor responsibilities and regular nursing audits contributed to sustained compliance with best practices. Overall, the interventions resulted in smoother patient transitions, better resource utilization, and improved patient satisfaction. Patients in hospitals face significant issues during admission and discharge, including excessive costs, poor quality of care, and discharge delays. To preserve hospital reputation and quality of care, it is crucial to address these problems and ensure, communication, and emotional support, providing the best possible patient care.

#### 1 The problems faced by patient during admission process.

To gather information on issues patients encountered during the admissions process, a systematic questionnaire

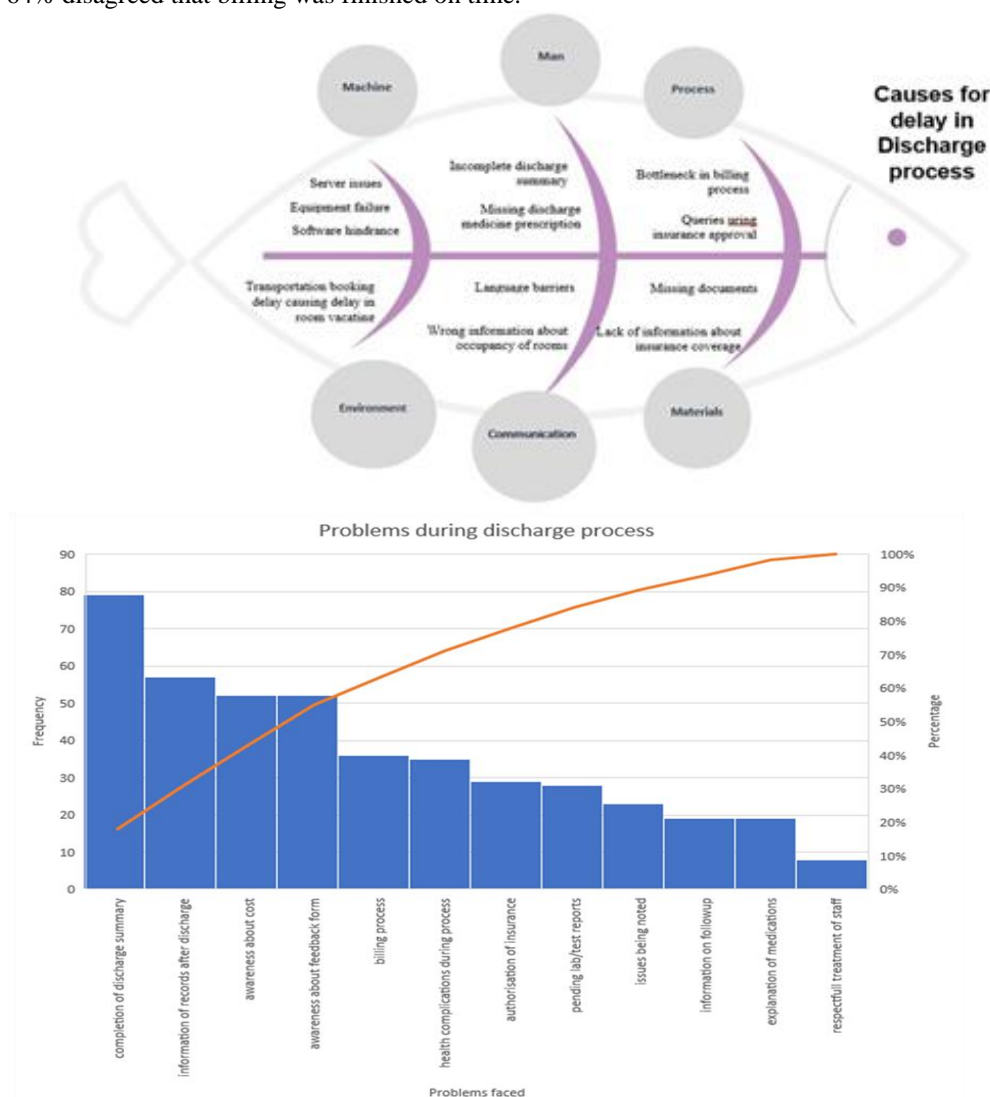
was employed. The position of the support desk received the highest rating from patients (97%), followed by cleanliness (92%), the physical space's adequacy (86%), and the staff's friendly demeanour (85%). Responses to questions and communication received favourable ratings of 85% and 71%, respectively. But only 59% of respondents were happy with the length of time they had to wait in a room, 65% reported treatment delays, and 54% thought they had received enough insurance guidance. 36% of respondents said they were hampered by language issues, but 67% said they were satisfied with the information they received regarding hospital plans and available treatments. Sixty-seven percent said the admissions procedure was adequate overall.

Long wait periods to secure a requested room and inadequate insurance information were the main issues patients encountered during the admissions procedure. The most common challenges faced upon admission were "waiting time for room," "language barriers," and "guidance about insurance," according to the results of a Pareto analysis of these concerns. This suggests that resolving these primary concerns may be able to address most of the challenges encountered throughout the admissions process.



## 2. Problems Faced During Discharge

Data on the issue's patients encountered during the discharge process was gathered using a structured questionnaire. The following results were noted: 92% of patients said they received courteous treatment from workers. However, 79% of respondents said they had not received their discharge statement in a timely manner, and 52% expressed dissatisfaction with the information given on treatment expenses. While 72% of respondents disagreed that pending tests were the reason for delays, 71% of respondents confirmed timely insurance authorization. Sixty-five percent of individuals reported additional health issues. Positively, 81% of respondents said they were given sufficient follow-up details and explanations about their post-discharge prescriptions. However, 76% disagreed with the availability of post-discharge records, 52% felt ignorant about the feedback forms, and 64% disagreed that billing was finished on time.



## Quality tool

The Pareto analysis of problems faced during hospital admission revealed that the most frequently encountered issues included inadequate guidance about insurance, long waiting times for room allocation, and language barriers. These issues, represented by the highest bars on the chart, contributed significantly to patient dissatisfaction. The accompanying cumulative line graph illustrated that addressing just the top few problems—up to the issue of "length of procedure"—could resolve a major portion of the overall concerns reported during the admission process.

Similarly, the Pareto analysis for discharge-related problems showed that the top four issues accounted for approximately 70% of the total concerns. Key discharge-related problems identified were delays in the completion of discharge summaries, lack of information regarding post-discharge records, limited awareness about treatment costs, and billing delays. Prioritizing these issues for improvement would likely result in a significantly smoother and more efficient discharge process. To further understand the root causes of these

challenges, a fishbone diagram (cause-and-effect analysis) was utilized. This tool offered a comprehensive, multidirectional view by categorizing contributing factors under domains such as personnel, procedures, policies, and environment. It enabled a more targeted approach to developing effective interventions for both admission and discharge inefficiencies.

### **Measures for Admission and Discharge Optimization**

Based on the issues identified during the admission and discharge processes, several corrective and preventive actions were implemented to improve patient experience and hospital efficiency. Pareto analysis revealed that the most common challenges during admission were inadequate insurance guidance, long waiting times for preferred rooms, and language barriers, particularly for Malayalam-speaking patients. In response, a patient feedback committee meeting was held under the leadership of hospital management to discuss and resolve these concerns. A comprehensive five-day training program was conducted for insurance department staff, focusing on soft skills, commonly used insurance procedures, and updated documentation practices. To overcome communication barriers, a Malayalam phrase booklet was distributed at reception counters, and a trilingual staff member (fluent in Kannada, English, and Malayalam) was recruited for the main reception. For room allocation delays, discrepancies were found in ward update protocols and coordination between the admission desk and ward staff. Nursing superintendents were assigned to conduct regular rounds and provide training to ensure timely updates and smoother room transfers. Regarding discharge-related issues, delays in preparing discharge summaries were traced to doctors' unavailability and the absence of standardized templates in the hospital software. As a solution, department heads assigned junior doctors on rotation to handle daily discharges, ensuring responsibility and timely completion. A standardized discharge summary template was also developed and integrated into the hospital's information system. These corrective and preventive actions demonstrate a strategic and patient-focused approach to resolving systemic inefficiencies and enhancing service quality across hospital operations.

## **IV. DISCUSSION**

A descriptive survey was used to systematically identify a number of major inefficiencies in hospital admission and discharge processes, and quality tools like Pareto and fishbone analysis were used to assess the results. Language hurdles, lengthy wait times for room assignment, and a lack of proper insurance information were among the main issues that were found to have a substantial impact on the admission experience. On the other hand, delays in creating discharge summaries were identified as a key factor in extended hospital stays. Standardized discharge report templates were introduced, language support pamphlets were distributed to patients who spoke Malayalam, and staff members received training on soft skills and insurance procedures as part of a series of focused initiatives. Notably, junior physicians were given specific tasks to speed up discharge procedures, and continued adherence to new procedures was guaranteed by frequent audits and ongoing training conducted by nursing personnel. Measurable gains were found in a re-audit after these interventions, demonstrating the value of an organized, iterative approach to quality improvement. These results emphasized the value of proactive planning and interdisciplinary collaboration in healthcare settings by improving operational efficiency, improving patient experiences, and optimizing resource use.

## **V. CONCLUSION**

Enhancing hospital admission and discharge processes is crucial for delivering patient-centered care and maintaining trust in healthcare services. As patient involvement in decision-making increases, any lapses—whether due to organizational inefficiencies or lack of communication—can significantly affect patient perceptions and outcomes. Issues such as incomplete care plans, consent problems, and delayed discharge summaries highlight the need for systematic planning and coordinated care. Socioeconomic and organizational factors, including nutritional assessments and pending diagnostics, further complicate the discharge process. By employing quality tools like Pareto Charts and Cause-Effect Analysis, hospitals can effectively identify root causes and implement targeted improvements. Prioritizing clear communication, patient safety, and structured planning not only improves service quality but also reduces readmission rates, ensuring more effective and equitable healthcare for all.

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