Dissertation

On

Title: Situational analysis of work flow of Credihealth: an e-healthcare service
at
Credihealth

by

Name Dr. Ashiya Mahran
Enroll No. PG/16/10

Under the guidance of

Ms. Kirti Udayai
Assistant Dean
(Academic & Student Affair)

Post Graduate Diploma in Hospital and Health Management

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International Institute of Health Management Research New Delhi

ACKNOWLEDGEMENT

(Completion of Dissertation from respective organization)

The certificate is awarded to

Name Dr. Ashiya Mahran

in recognition of having successfully completed his/her
Internship in the department of

MEDICAL OPERATIONS

and has successfully completed his/her Project on

Situational analysis of work flow of credihealth: an e healthcare service

Date 11.05.18

Organisation- Credihealth

She comes across as a committed, sincere & diligent person who has a
strong drive & zeal for learning

We wish him/her all the best for future endeavors

Training & Development

Zonal Head-Human Resources

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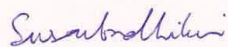
TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr. Ashiya Mahran student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from International Institute of Health Management Research, New Delhi has undergone internship training at Credihealth from 1-02-18 to 30-04-18.
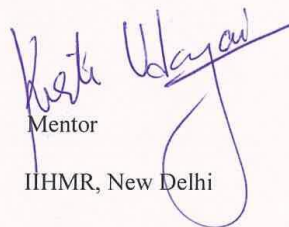
The Candidate has successfully carried out the study designated to her during internship training and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.

Dr Supten Sarbadhikari
Dean, Academics and Student Affairs
IIHMR, New Delhi

Mentor
IIHMR, New Delhi

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Certificate of Approval

The following dissertation titled "Situational analysis of work flow of Credihealth: an e-healthcare service" at **CREDIHEALTH**is hereby approved as a certified study in management carried out andpresented in a manner satisfactorily to warrant its acceptance as a prerequisite for the award of **Post Graduate Diploma in Health and Hospital Management** for which it has been submitted.It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

Dissertation Examination Committee for evaluation of dissertation.

Name	Signature
Dr. Anandhi Ramachandran(Asso. Prof.)	
Dr. Nishikant Bele, Asst. Prof.	
Dr. Sanjeev Kumar (Director)	Sanjiv Kumar
Dr. P. L. Joshi	

Certificate from Dissertation Advisory Committee

This is to certify that **Dr. Ashiya Mahran,** a graduate student of the **Post- Graduate Diploma in Health and Hospital Management** has worked under our guidance and supervision. He/ She is submitting this dissertation titled "Situational analysis of work flow of credihealth: an e healthcare service" at "CREDIHEALTH" in partial fulfillment of the requirements for the award of the **Post- Graduate Diploma in Health and Hospital Management.**

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.

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Designation: AVP— SERVICE DELIVER

Organization: CREDIHEALTH

INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH, NEW DELHI

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled "Situational analysis of work flow of Credihealth: an e-healthcare service" and submitted by (Name) Dr. Ashiya Mahran Enrollment Number PG/16/10under the supervision of Ms. KirtiUdayaifor award of Postgraduate Diploma in Hospital and Health Management of the Institute carried out during the period from 1/02/18 to 30/4/18.

Embodies my original work and has not formed the basis for the award of anydegree, diploma associate ship, fellowship, titles in this or any other Institute orother similar institution of higher learning.

Signature

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FEEDBACK FORM

Name of the Student; Dr. Ashiya Mahran

Dissertation Organisation: Credihealth

Area of Dissertation: Situational analysis of workflow of Credihealth

Attendance: Regular

Objectives achieved: 1) Worked on developing relationships with the partner hospitals.
2) Helped patients in their consultation and other medical needs.

Deliverables: 1) Helped in case recon with the hospitals.
2) Carried out analysis on various aspects and helped in formulation of new action plans.

Strengths: Committed and focused.

Suggestions for Improvement: Need to go deep into industry specific skills.

Suggestions for Institute (course curriculum, industry interaction, placement, alumni):

Signature of the Officer-in-Charge/ Organisation Mentor (Dissertation)

Date: 11/5/2018
Place: Gurgaon

Contents

LIST OF FIGURES AND TABLES

Table 1: List of symbols and abbreviations

Serial No	Abbreviation	Full Form
1.	CH	Credihealth
2.	&	And
3.	IT	Information Technology
4.	B2B	Business 2 Business
5.	B2C	Business 2 Customers
6.	CE	Customer engagement
7.	CS	Customer Sales
8.	TAT	Turnaround Time
9.	BM	Business Managers
10.	RM	Regional managers
11.	WHO	World Health Organization
12.	EHR	Electronic health records
13.	MIS	Management Information System
14.	CPOE	Computerized physician order entry
15.	UN	United Nations
16.	E health	Enterprise of Healthcare
17.	E HP	E Health Points

SITUATIONAL ANALYSIS OF WORK FLOW OF CREDIHEALTH: AN E-HEALTHCARE SERVICE

1.1 Background of the study

Credihealth (CH), was set up in year 2014, it is one of the first omni-channel player in the hospital inpatient business. It has changed the face of healthcare industry in India and is inventing new ways for all of us to know about our health and get reliable and authentic health related inputs as and when we need it. Credihealth has one of the biggest applaud hospital network all across our country, it is introducing an innovative pioneering approach so that people can compare and make a choice from a complete and collective database of the various networked hospitals, with the doctors working at the different specialties and about the various diagnostic and treatment procedures. It works for those people who have visited a general physician and now in a need to have an attention and care from a specialized doctor in their field at the tertiary care hospital. The organization works by providing medical assistance in these ten cities across India- Delhi NCR, Mumbai, Kolkata, Hyderabad, Chennai, Bangalore, Pune, Indore, Jaipur and Ranchi. It also provides care to international patients from African continent and Indian Sub-Continent, predominantly from the South Asian Association for Regional Cooperation nations- Afghanistan, Bangladesh and Nepal.

a) Vision
We envision a healthcare ecosystem where people from around the world can quickly find credible and reliable answers to their medical problems, along with easy access to the best healthcare experts to guide them towards a healthier, happier and more fulfilling life. We aim to be the first port of call for customers having healthcare related need, doubt, or query. We support the patient through the entire journey of their hospital experience.

b) Mission
Our mission is to help the people get credible information at the time of the need.

c) What Services It Offers?

- Initial evaluation of options to procedure completion and post-op care focused on hospitalization
- Provide a 'start to end' solution, for hospitalization
- Premium content-medical articles, blogs, videos, interaction with in house doctors.
- Tie ups with hospitals for domestic and international patients.
- Tools to compare doctors and hospitals on various parameters.

Limitation of Credihealth

- It does not provide assistance to patients at government hospitals
- It does not have tie – up with the insurance companies so queries related to the related to their cashless and reimbursements plans.
- Chat box option for interacting with the doctors.

CH is a kind of a platform which supports the patient at hospital through their entire journey. It assists people to find the doctors and hospitals all across the major cities of India, aid in booking their appointments with the doctor and hospital of their choice; it also helps in getting quotes from hospitals for any treatment or surgery and post-operative care. There are various sources of interactions with the customers by using the credihealth website, its mobile app, by means of incoming telephonic calls & with the whatsapp. It gives its customers a holistic service.

The company has also launched its apps for Android and iOS users. It is very beneficial for users who want to seek a second opinion about their medical conditions or diagnosis being made by their previously consulting doctor regarding the treatment method by uploading their medical reports from specialists, for a very nominal fee.

According to Mr. Ravi Virmani, founder and managing director "It's an online platform with a human touch"

d) Why was Credihealth founded and started?

All families need healthcare facilities, CH helps to easy sail through this complex healthcare system and it aims to grip As technology by expanding the boundaries of healthcare, by accrediting

- ➤ **Accessibility to the Healthcare -** By means of Information and Service Delivery
- ➤ **Information** – It provides relevant information about the Hospital and Doctor Credentials related to their qualifications and experience, Procedures, Treatments,

Feedback, and healthcare content in the form of blogs for the common man so that they can have an easy understanding about it.

- ➢ **Ensuring Certain Delivery** – It is a reliable partner to make sure that the patient is helped through their complete journey at the hospital.
- ➢ **Transparency-** CH enfranchises people to make their informed health care decisions about their health problems, with the help of reviews given by the users about the doctors and hospitals, price quotations for various diagnostic and therapeutic procedures at different hospitals. With all these type of information they feel more convinced and satisfied for their future treatment regime.

Credihealth follows an innovative model that challenges the beliefs of traditional healthcare practices. The main differentiators of the credihealth from its competitors are its tie ups with networked hospitals, medical guidance from in-house doctors, aiding in second opinions and referrals, comparable packages for different procedures in various hospitals, Hospital- custodian services, articles, blogs, videos, diagnostics, ambulance services, pharmacy services and tie-up with loan facilities.

The Credi Users can search the doctors based on their specialty and preferred location or with a doctor name. Further the search can be filtered based on the user's location distance within the city, doctor's availability/ appointment schedule and consultation fee. Users can directly book appointments through the search results of displayed doctor's according to their specialty, their clinical experiences, their timings, fees, their added certifications, reviews and address of their current working status with the hospital.

Credihealth has a dominion algorithm running in its backend, which gives rating to the doctors who have been listed on its website, based on its relevance, location and department, feedback or reviews from patients about the doctor and their appointment experience with them.

Credihealth provides an online live search for various specialty doctors and different procedures so that the patient can choose the best clinician according to his suitability by weighing all the parameters and by reading the present literature at the website he can understand about the disease and the procedure in a better way. The User Engagement can be low to moderate where people ask for our guidance and recommendation and are not very sure whether to go for it or not, in such kind of the cases notifications can be helpful by providing related free stuff so that it acts a reminder to the patient to rethink for their treatment. Retention can be moderate to high, in

those cases where the condition is not so serious but if attention not paid can lead to the future consequences. Highly satisfied patients depicts high retention, they are usually satisfied with their experience with doctor and know exactly about their medical condition. Health care services need lot of collective efforts from all the shareholders who contributes in providing the healthcare services. It is also dependent on the lot of recommendations and goodwill.

e) What is the difference between Credihealth & Conventional Scenario?

Whenever a family member gets ill, the first thing we do is to ask our near and dear about the best service provider. The process starts with first consultation with General Physician- who is a general practitioner or a family doctor, and then after the referral from him the patient moves forward to seek a second opinion for his problem. Further, the patient goes to the recommended hospital, based upon the advised treatment and the urgency to take the treatment. In this we can observe, what is missed out in this process? It is the right guidance for the near and dear one. Already the family is under lot of stress and worry of their family member regarding their health.

So, Here Credihealth pitches in. It provides a complete solution to all type of healthcare needs- it starts with providing the vast information to help patient about the disease, procedure and various doctors available to help. By this way the patient and the family makes an informed and independent decisions by evaluating all the parameters, secondly the team of the in house helps them empathizing with them, thirdly it helps them by avoiding the long waiting and ques by providing them with the confirmed appointment at their desired time. It provides an additional service of providing the patient with comparable cost of various procedures at the hospitals; it provides help to the patient who are admitted for a procedure if they have any requirement during their stay at the hospital and also the very necessary post treatment care. All these services are at just a call away!

f) Benefits provided by Credihealth to its Users

1. Easy and Nuisance Free Experience – priority appointments, discounted diagnostic tests, complete knowledge about procedures and necessary hospital documentation.
2. Crystal clear or genuine medical costs and the discounts are directly shared to the Patients; Prevention of mal practices done by middle men.
3. Accessibility to the big number of doctors, hospitals and diagnostic centers.

4. Credi Health Assistant, provides personal direct contact along with post-op care and support.
5. Provides acute and complete knowledge & helps in making correct decisions.
6. Find best and suitable Doctor for Patient; arrange second opinion if required before any procedure.

"Credihealth helps users to make informed choices and manages the whole treatment lifecycle of patient".

Credihealth stands distinctly with the biggest number of the networked hospitals. The number of the contracted hospital is more than 630 hospitals pan India- the hospital within network are like mainly Apollo Hospitals, Fortis Group, Medanta, Narayana Hrudalaya, Jaslok, Columbia Asia, BLK, Artemis, Medica and AMRI. The credi's service is free for its users but it charges a minimal annual subscription and market development fee from its networked hospitals those contracted.

g) Formation of the Credihealth Team

The credihealth is led with the clear vision of Mr. Ravi Virmani, founder and Managing director of Credihealth.
It comprises of following teams:

- Operations team comprising of the medical doctors and healthcare providers who are deputed into various cities and patient care executives.
- Business Development Team
- Digital Marketing Team
- Product Operations Team
- Technical Team
- Management team

1.2 Introduction:

a) Work Flow at Credihealth

The work flow followed at Credihealth has 3 major components-

1. Discovery & Direct Online Search - Online: Provides vast knowledge in aiding the users to make their independent informed decision regarding their treatment.
   - Holistic and Collected Database regarding the numerous Doctors and hospitals.
   - Doctor Interviews been recorded, Articles, blogs patient's reviews, feedback and patient testimonials about their experience of hospitalization and treatment.

2. Trust & Standard - The Personalized Human touch:
   - In-house Doctor team provides genuine information & explanation: to the patient for their health and treatment related queries
   - Glassy and clear comparison of procedure pricing across hospitals

3. Benefit & Convenience – Offline and hassle free service without any nuisance:
   - Project management team guides and oversees the entire hospitalization process and even after discharge with post-operative care.

<u>**Work Flow at Medical Operations**</u>

New Requests are generated via: Website, Direct Call, Mobile app

⇩

After speaking with Patient: Processed

⇩

Request in Process ⟵

⇩

Booked

⇩

Booked and Reminded ⟹ Cancelled ⟹ Add new

⇩

Patient went for the appointment
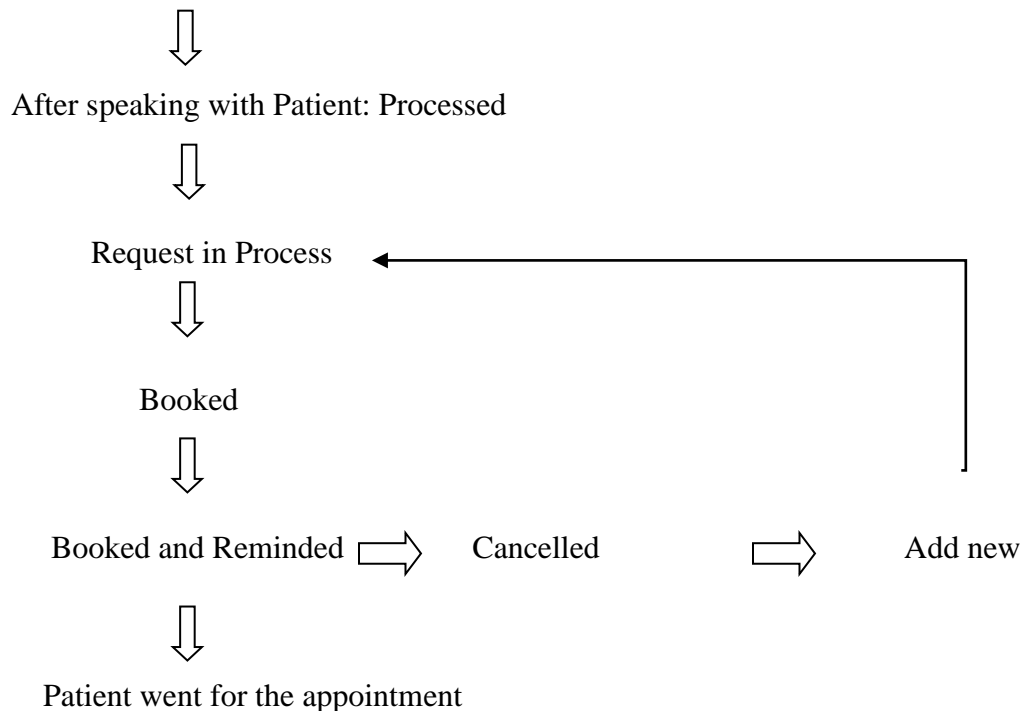
I)   A new request is received by means of sources like- Credihealth Website, Mobile App., or by means of incoming calls, Direct Calling through Toll Free Number or by various other means- Google search campaign leads and social media: Facebook, LinkedIn

II)   The new requests handled by in-house doctors are processed.

III)   In case the same timeslot of the doctor is available for this particular request, then the appointment will be booked.

IV)   The operator calls the patient who does the booking to remind them a day prior to their requested appointment date through their database system.

V)   Lastly, if the patient goes for consultation as per booking then its status gets converted, if the patient does not go for the consultation then the booking gets cancelled or rescheduled to their new desired date.

b) Searching Doctor online: Google

On the onset of any illness or disease with in the family, the family members tries to take advises from near and dear ones including friends and neighbors, who either had gone through similar disease or they know about the service somehow. They will consult the recommended doctor

who is usually a general physician. If required, then they referred to a specialist, during this procedure the patient and family members sometimes searches about the procedure, doctor and various options of hospital online. That's how companies like Credihealth are found. This phenomenon is called as Google-Doctor-Google Phenomenon.

The average age of Credi users generating requests are usually lies between 25-32years and average age of the patient is 53years.

c) Rate of Conversion

The main challenge for eHeathcare sector is not only to receive the patient traffic at their web site but to assure their retention, stickiness and life time engagement. Another crucial thing for the credihealth is to monitor the customer acquisition which is calculated by the means of conversion rates of admission. This rate suggests us that the service provider took some actions which stimulated the consumers to go a bit further down the acquisition funnel.

1.3 Review of Literature

Service industry constitute to more than half of the India's GDP whereas the industrial and agriculture sector have contribution of 26.4 percent, and 18.5 percent respectively. In the world it contributes to almost 61 % of the world's total GDP and gives employment to 40% of global labor force. [1] The service industry is very complex sector as it has involvement of the intangible things which can't be easily accounted or projected. It depends upon on the perception of the user. These perceptions get built up with the previous individualized experiences of usage and consumption in many contexts. Consequently, quality and service time adds to the complexity.

The unique features to these services are:
- Intangible: services can't be felt
- Inseparable: Services are produced and consumed at the same time
- Perishable: Services utilized when offered & can't be stored for future usage.

- Variable: Quality of service depend upon who is a provider, when, where & how services are been provided.

Hence, to be standing out performer in the enumerable competitors, a standard and benchmark has to be achieved which is never achieved by anyone. To reach to such a level continuous improvement and up gradation of all the processes is required along with technological advancements. For example: In the airline business, the biggest challenge was to meet the changing requirements and under the condition economic variability. There is a change in capacity, atmospheric effects, consumer satisfaction along with the safety and security of the customer while meeting ongoing requirement for the economic viability of the service providers.

According to,Parasuraman A, Valarie A. Zeithaml and Leonard L. Berry (1985) recognized 10 elements of service quality as reliability, responsiveness, competence, access, courtesy, communication, credibility, security, understanding and tangibles and stated that the high quality of a product or a service is a contributory factor significantly.

According to,Atul Dhyani, Batra G.S. and Jaskaran Singh Dhillon (2006) said that the foreign banks work with a "commitment" and because of that they are able to perform consistently in providing the quality service. At private sector banks the service quality has improved, but still the cost providing the services is higher than the actual service provided. Whereas Government owned banks completely deficient with "commitment" in providing the service quality.

Automation is always exciting and fascinating too, it eases our work by removing the unnecessary and time-consuming steps. It is very beneficial aid to the financial department by providing an oversight about the business and forecasts by means by various analyses which are performed in no time.

According to, Sivakumaran (2005) stated that due to the adoption of technology there are following advantages: higher production, greater profit, and increased efficiency; fast rate of service delivery and satisfied customers; comfort & malleability; round the clock operations; and money is saved.

According to, Berger (2003), the use of IT is broadly referred to computers and similar automated equipment, it is seen that there is a enormous growth in service industries. For

example: banking sector, where the introduction of IT has revolutionized the services being provided like internet banking, e payments, safety investments etc. Hence banks now provide more services to the customers with less manpower.

Lack of staff, increase incurring cost due to inflation and higher demand have escalated the need for better utilization of the resources by means of integrated service delivery models.

Services are dependent on the demand and sensitivity of the market. It is very much necessary to ensure that the patient gets the "right care at the right place at the right time". To understand, it is essential to understand the behavior of the patient, their needs and perceptions. So that you may know they will move to seek healthcare facilities within the system.

According to McKinsey & Company, The application of IT Lean principles can lead to higher development and maintenance productivity up to 40% with the improvement with the quality and speed of execution. Value-Stream mapping (VSM) is most beneficial tool in finding the wastage and& improvement areas. VSM provides a standardized way for documentation of the process step by step of all the work items. This is helpful to analyze the processes in a systematic way to generate an improvement work plan.

1.4 Rationale

India is one of the largest populations in the world, almost 5% out of these needs a health services in one form or the other in a month. The Indian health sector is largely predominantly captured by the private players as the public sector do not have adequate resources and infrastructure to provide standardized health care services to its citizens.

Currently, Healthcare industry is not easy to reach and attainable for the people. These services are not dependable & constant.

This study is done because in its current state Medical operations team of Credihealth aren't sure of leakages, despite constant follow-ups with patients the conversion rates are poor due to which:

- ➢ Credihealth operations team isn't able to put efforts in a streamlined way to resolve root cause for poor conversions
- ➢ Employees are not able to turn around the situation despite long working hours, which is poorly impacting their morale

1.5 Aim of the research

The aim of this study is to understand the work flow to identify the concern areas that can be addressed to streamline the workflow. It is expected to increase the effectiveness and productivity of the medical team which gives assistance to the patients, hence enhancing the rate of conversion of the credi patients from the received requests for the help in some or the other form by giving them the right advise according to their requirement.

1.6 Research Question:

What are the leakages in the patient value chain.
How can we go about improving the conversion rates of patient admissions through Credihealth.

1.7 Objectives of the Research:

To identify the leakages in the patient value chain and propose recommendations to minimize the drop out at each stage of patient journey.

1.8 Methodology

The methodology includes working in association with the various teams and knowing the kind of the work they do, how it is processed and what are the difficulties and issues faced by the team which are affecting the results. The work is carried out at various level and proportions which leads to the conversion at each level. The following table highlights the methododlogy adopted.

Table 2: The elements of Methodology

S. No.	Elements of Methodology	Description
1	Study Type	Analytical, Quantitative (CRM Patient Data Base Analysis) Qualitative (Employee's Interview)
2	Study Area	6 big cities of India- Metropolitan Cities- Delhi-NCR, Bangalore, Chennai, Hyderabad, Kolkata and Mumbai and Four Small Cities – Jaipur, Indore, Pune and Ranchi
3	Study Duration	Three months (February- April 2018)
4	Study Respondent	Employees
5	Sample Size	Approximately 60 employees
6	Sample Method	Non Probability Convenience Sampling • Medical Operations Team- Medical Assistants and Executives • Product Operations Team • Market Development Team • Digital Marketing Team • Product Management Team • Technical Team/ IT Team • Management Team
7	Type of the Data	Primary Data

8	Data Collection Technique	Questionnaire and Checklist MIS reports
9	Data Collection Tool	CRM
10	Limitations faced in Data Collection	• Due to confidentiality and Personal Identification Information (PII) clauses, denied access to patient demographics and other specifications. • Biased opinions of the employees
11	Analysis of the data	Data analyzed by using Microsoft Excel
12	Ethical Consideration	• The patient's information has to be kept confidential throughout the study. • The information provided by the employees and to be maintained confidential. • The report and data can only be used for the dissertation purpose.

1.9 Findings and Analysis

Analysis

Table 3: Overall Conversion Rate
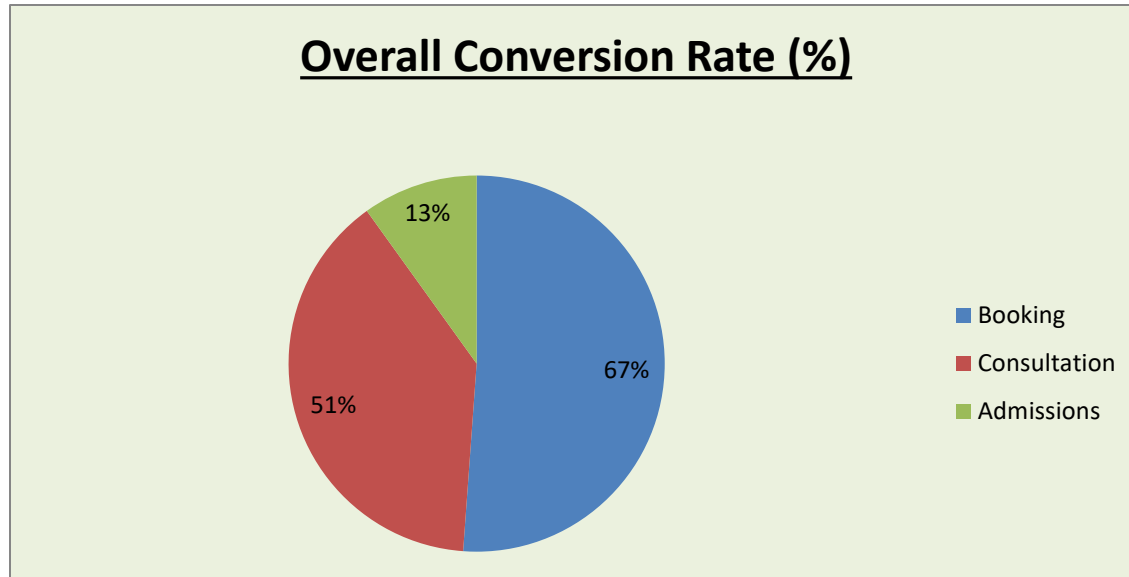
Interpretation: From the total requests it is found that that only 67% are booked for the appointment, out of them only 51% goes for the consultation to the doctors, out of these only 13 % gets converted to hospitalizations or admissions.

Here,

Appointment % = No. of Appointments / Total Requests *100

O.P.D Consultation % = No. of Patients Consulted at O.P.D/ Total No. of Appointments Done*100

I.P.D Admission % = No. of Admissions/ Total No. of Patients consulted at O.P.D *100

Conversion Rate results when the status of the new request is changed to the appointment booking, from the confirmed appointment to the consultation done and from the consultation to the I.P.D converted.

Table 4: Comparison of Conversion Rates in different Cities

Comparison of Conversion Rates in different Cities
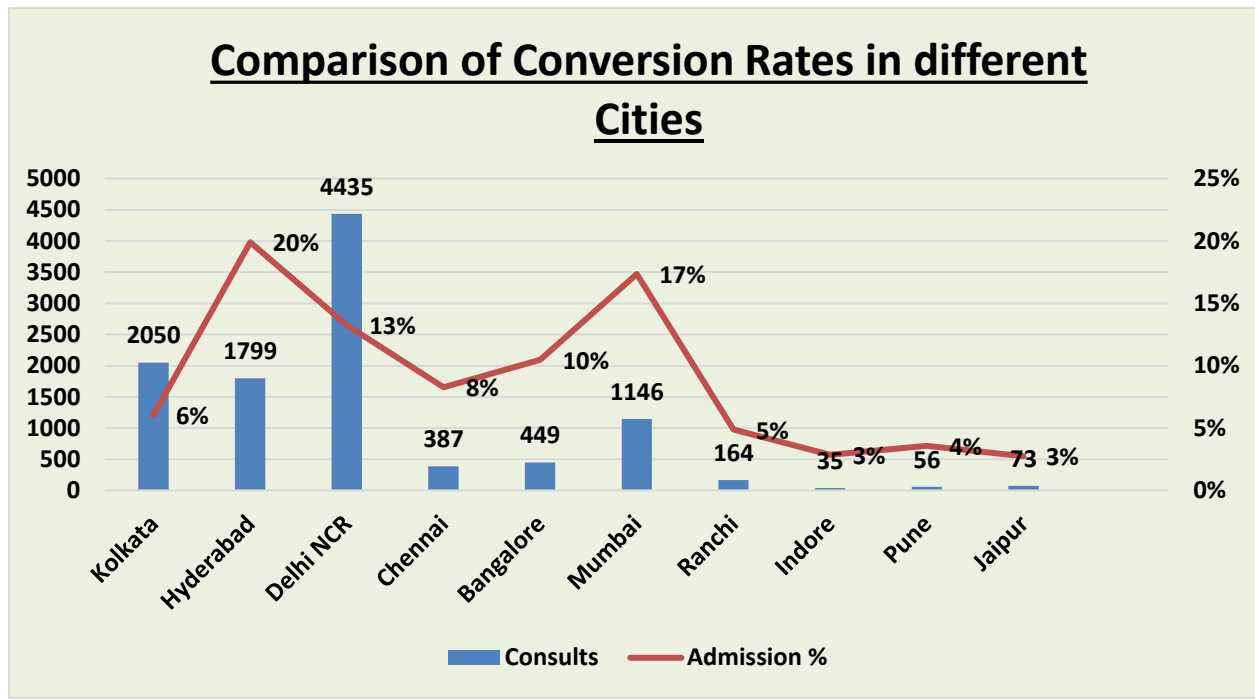
Interpretation: The Delhi NCR region host for the maximum number of O.P.D consults within networked hospital and yet it does not have highest I.P.D admissions. Within networked hospitals but still the maximum number of IPD conversions are shown by Hyderabad (Twenty percent).

Table 5: Deciding Factor for Request- Doctor' Profile

Deciding Factor For Request- doctor's profile

City	Percentage
Kolkata	30%
Hyderabad	43%
Delhi NCR	40%
Chennai	29%
Bangalore	36%
Mumbai	34%
Average	35%
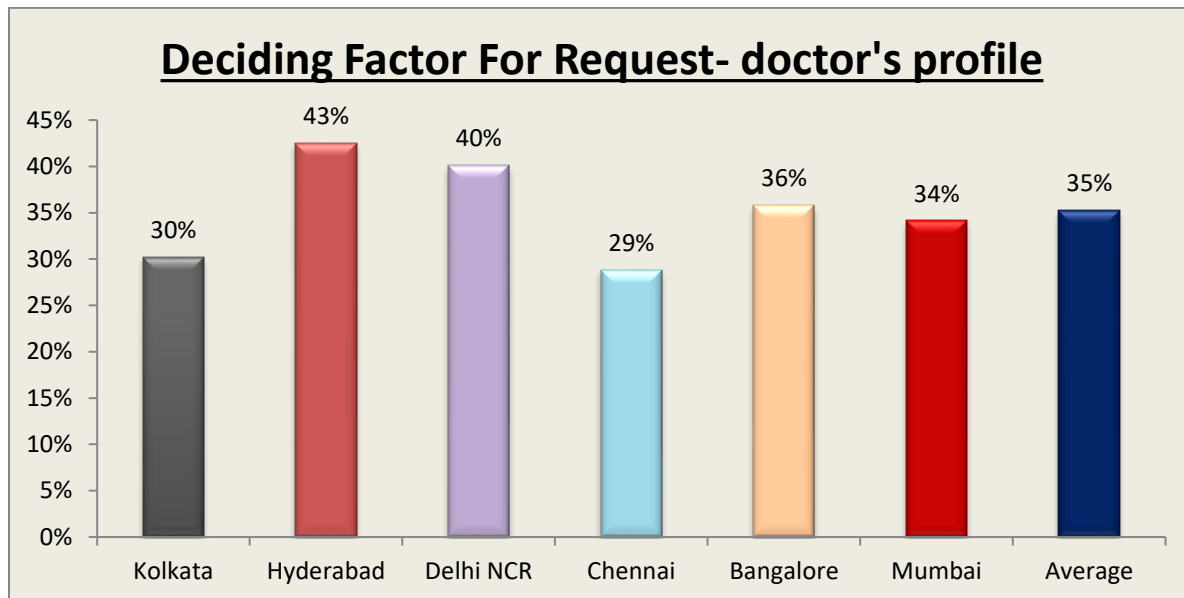
Interpretation: Users prefer to book an appointment after viewing the complete profile of the doctor. In Hyderabad Forty-three percent of users prefer to check the doctor's profile before going for the consultation. If we look at an average percentage that is thirty five percent of the users look for the doctor's qualifications and experience prior to their appointment.

Table 6: Deciding factor for Request- Hospital's Profile

Deciding Factor For Request- Hospital's Profile

City	Percentage
Kolkata	35%
Hyderabad	54%
Delhi NCR	50%
Chennai	35%
Bangalore	50%
Mumbai	47%
Average	45%
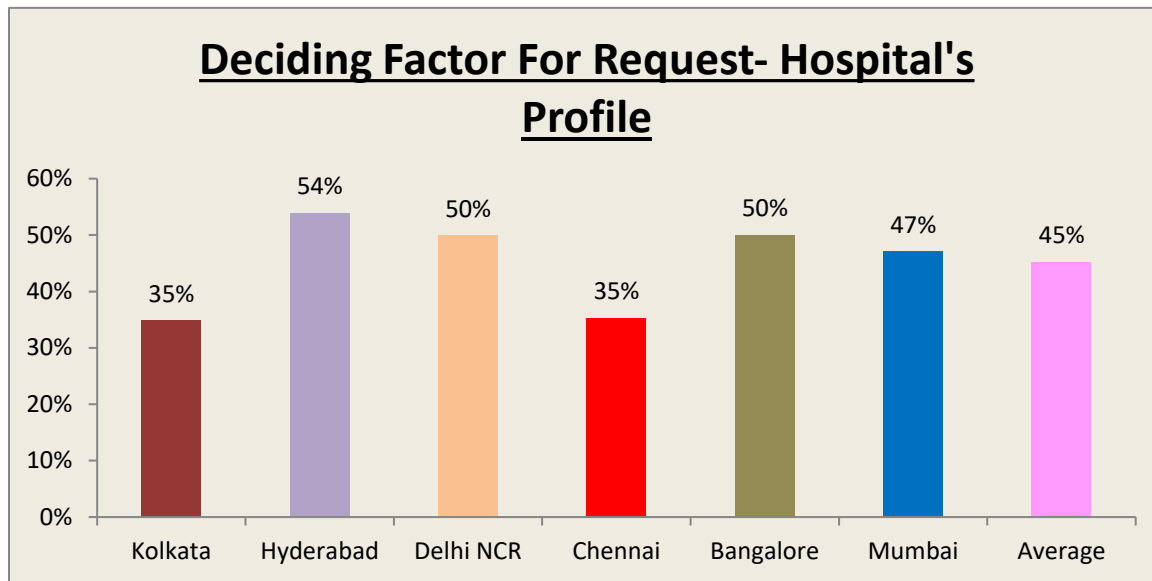
Interpretation: User's prefer to know about the reputation and profile of the hospital. Hyderabad has the maximum percentage of Fifty Four, where users prefer to know about the hospital before fixing their appointments. The average for the cities is forty five percent where users prefer to go to the branded hospitals.

Table 7: Channels for Requests at Delhi NCR Region:

Channels for Requests at Delhi- NCR Region

Channel	Percentage
android	40%
portal	5%
call	46%
profile_treatments	14%
search_doctors	21%
profile_hospitals	50%
profile_doctors	40%
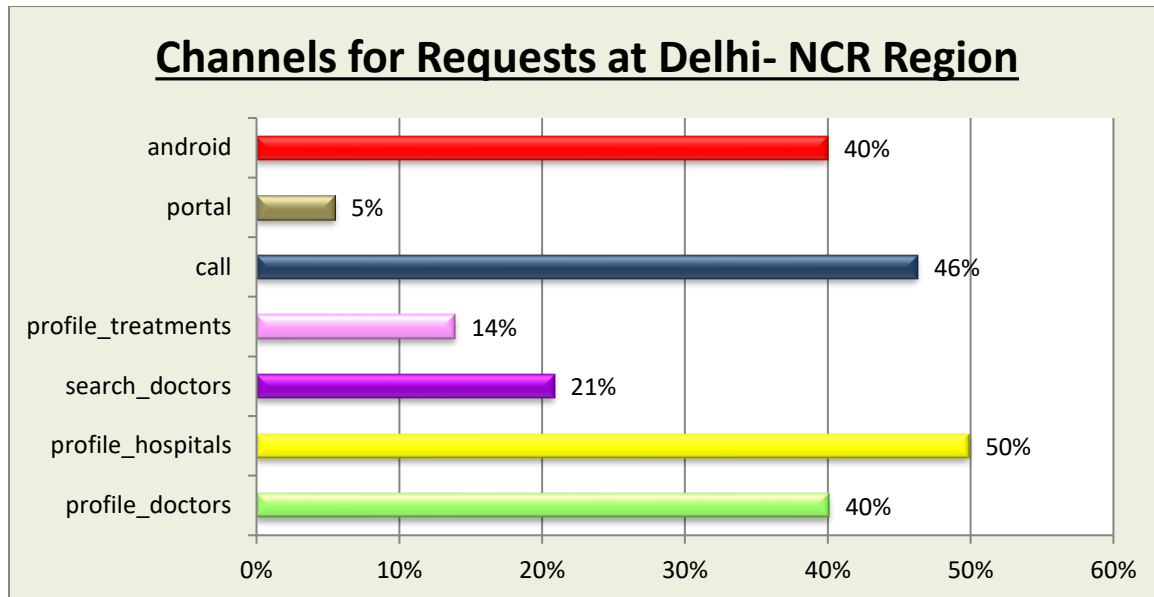
Interpretation: In Delhi NCR: The users prefer to decide for their treating after checking the profile of the hospital that is fifty percent. By this we can comprehend that the driving force of the healthcare industry in this region is the hospital brand and image.

Elements of the graph:

Android- Requests received by the means of the mobile application.

Online Portal- Requests received by the means of Credihealth website.

Direct Phone Calls-Requests received by means of incoming phone call.

Profile Treatments- Requests made after reading about the disease.

Doctors Search - Requests made after knowing the qualifications and proficiency of doctors by word of mouth recommendations of the family, friends or given reference by family doctor.

Hospital's Profile - Requests made by choosing the a hospital(going by brand name or image)

Doctor's Profile - Requests made after knowing the doctor's profile.

1.11 Results:

'Customer Acquisition Funnel'

Delhi NCR ~42% | **Mumbai** ~18% | **Kolkata** ~5% | **Hyderabad** ~3% | **Others** ~32%

Direct calls
Website Traffic
Mobile Apps

Request

OPD Booking

Consult

Admissions

60% requests are converted into bookings

51% are converted into Consultations.

13% are converted into Admissions.

~7.5% of website traffic requests for using Credihealth services

~60% of Requests decide to book a doctor's appointment

~60% of OPD Bookings actually consult the doctor

~9-10% of Consultations are hospitalized

The above diagram shows the conversion rates at every level of work flow at Credihealth.

Process Flow at Credihealth

```
                    ┌─────────────────┐
                    │      Start      │
                    └────────┬────────┘
                             ▼
          ┌──────────────────────────────────────┐
          │ Request is generated by the user on   │
          │           Credihealth                  │
          └──────────────────┬───────────────────┘
                             ▼
          ┌──────────────────────────────────────┐
          │ Case History & Symptoms are recorded  │
          └──────────────────┬───────────────────┘
                             ▼
          ┌──────────────────────────────────────┐
          │ Based on request, Options are provided│
          └──────────────────┬───────────────────┘
                             ▼
          ┌──────────────────────────────────────┐
          │ Appointment Booking is done           │
          └──────────────────┬───────────────────┘
                             ▼
          ┌──────────────────────────────────────┐
          │ Doctor Consultation                   │
          └──────────────────┬───────────────────┘
                             ▼
          ┌──────────────────────────────────────┐
          │ Patient Feedback Recorded regarding   │
          │         consultation                   │
          └──────────────────────────────────────┘
```

Further Treatment advised   No further Treatment

Options & Price Quotes provided   **Patient Feedback** recorded

Admission   Stop

Patient Feedback recorded

Stop

As a result of deep-dive into process flow I noted that:

1) Calls are not passed through since the call lines were reported busy
2) There is no follow up based on the criticality of calls coming through
3) Cases are not categorized and tracked

1.12 Discussion

This study shows, that there's a gap at every step. The traffic produced at the Credihealth website is generated by the joint effort and handwork being put by the marketing and digital marketing team, through varied channels to visit Credihealth website portal. It is later reinforced by the inputs from the product and IT team.

The requests are received by one of the following ways:

1. Request for appointment
2. Request for call backs
3. Request for tele-consultation or video- consultation

The request is received by the health partner, who will be directly contacting the patients. (Credi Consumers). The health partner's will be further coordinating with the patient in guiding to the specialist doctor or the hospital of their preference. After wards medical executives calls the patient to confirm about their consultation. Lastly the medical doctors or health partners keep a follow up with the patients on the next day to find about the patient consultation , whether there is any requirement for further treatment or not. The discovery team plays a pivotal role in tracking about the I.P.D admissions.

The inefficacious work flow leads to unsatisfied users, unhappy employees due to stress; duplication of work, targets never gets achieved and high incurring costs too. Hence, a road map is needed for all the processes so as to improve the quality and productivity of the work.
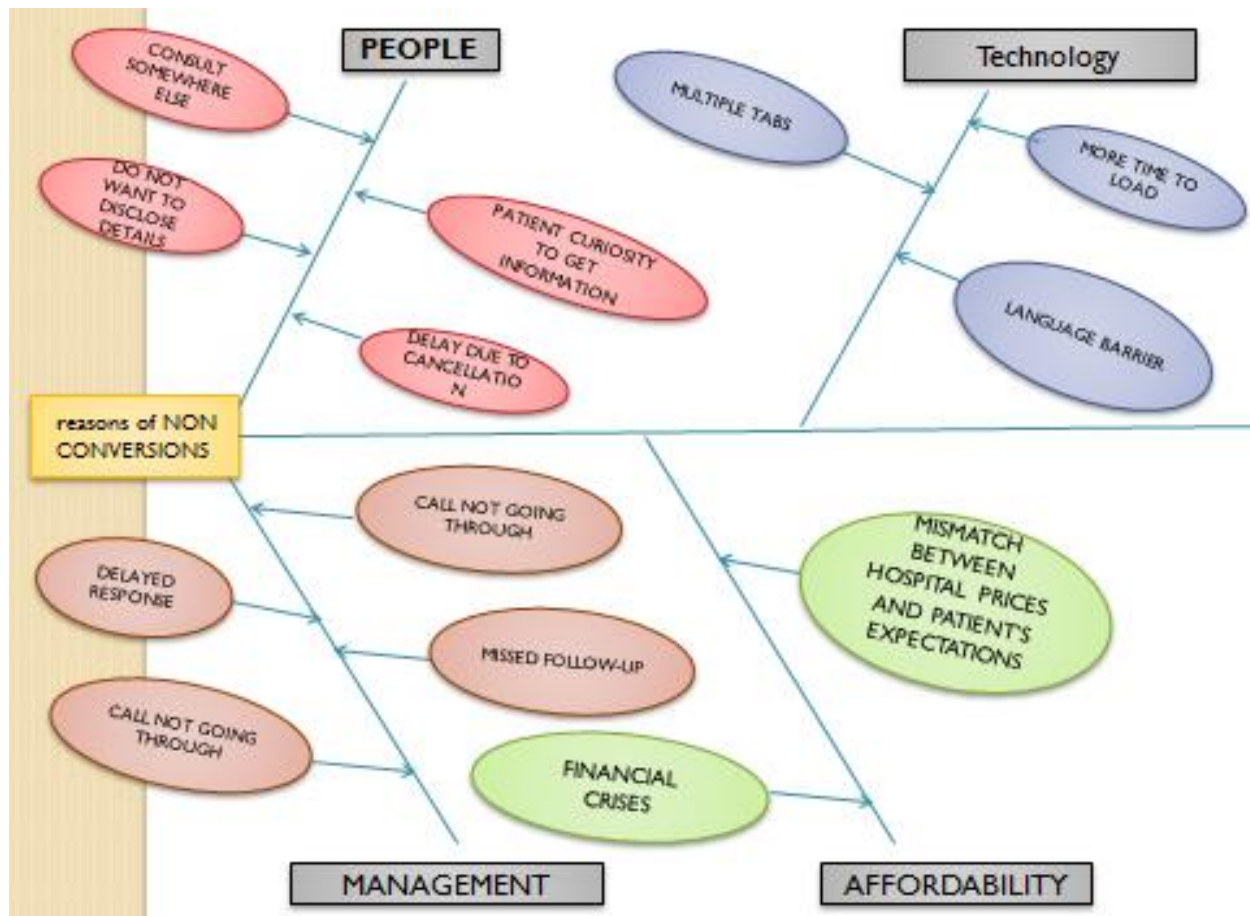
The potential reasons for poor conversions, as observed were-

- Missed traffic to the site due to site not working well, increased loading time, heavy load on website etc.
- Prolonged time in attending the cases
- Missed Calls or Unanswered Calls
- Inadequate guidance to the patients- distinct information provided by medical professionals of operation team and the hospital
- Insufficient follow-ups- Maybe due to inattentiveness of the employee or disinterested patient in sharing the details.
- Lack of information or inaccurate information for the admissions

1.14 Conclusion:

The study shows that the conversion rate of the OPD is 51%. It is approximate half of the total requests we receive, out of these only 13% gets sieved out of the funnel as IPD or admissions.

This motivates us to understand the leakages or crevices between the process flows. These crevices can be loaded with re-engineering of the current work flow using the recommendations sited above. Some of the recommendations have been executed too and have resulted in increased number of cases attended per day. The cumulative effort of all the teams can make the Credihealth: e-Health Company to be a pathfinder in the technologically driven healthcare industry.

1.13 Recommendations

1. The requests received should be prioritized for handling according to the first concern or urgency and according to the consultation time required—Admin Queuing System.

2. Introduction of buffer time. Earlier there was no buffer time between two calls, which led to computation of higher abandon rate (Number of calls that went unanswered). Recommended a buffer time of 2 mins between two calls which allows the employee to make notes from previous call.

3. Metricized employee productivity: Introduced new performance metric that is utilization rate, which is defined by amount of time employee was busy on a call in the total available time in a shift. This would ensure higher compliance to answering calls, thereby reducing call abandonment rate.

4. Introduce priority bifurcation for calls to classify requests on criticality of need for follow up.

5. Use of RPA (Robotic Process Automation) to automate the exhaustive and non-essential process- Example- Automatic ISD country codes for the international patients.

6. Provision of separate tabs to track the cases with the medical signs & symptoms or surgery done or diagnostic procedure done.

7. Follow-up of serious and acute illness patients that requires tertiary care should be on time. Example- cardiology and oncology cases.

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