

Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in



An International Journal for Researches in Ayurveda and Allied Sciences



not o

Journal of

Ayurveda and Integrated Medical Sciences

REVIEW ARTICLE Nov-Dec 2020

A study on role of front office administration in Max Super Speciality Hospital Bathinda

Isha Puri

Deputy Manager, Max Superspeciality Hospital, Bathinda, Punjab, India.

ABSTRACT

In Max Hospitals front office executive controls the flow of people through the organization and ensure that all receptionist are performing their task in a timely manner. Their works includes answering the calls, attending to the patients, overseeing the front office operation and maintaining the contact list of patients. Front Office Executive is a person who works in the hospital front office and manages a variety of tasks. The department keeps information and records of all the patients of the hospital. It also plays a key role in forming overall impressions of the services provided by the organization. A front office executive is the first point of contact at the office and is also an integral part of the administration team. They help to coordinate between the individuals visiting the office and the administrative team. They sometimes have to introduce the client to the higher management of the organization. It is necessary for a front office executive to possess a very pleasing personality and effective communication skills. The aims of this study to investigate service attributes in a hospital front office.

Key words: Front Office Executive, Max hospitals, communication skills

INTRODUCTION

The front desk (office), a term used for the reception area at a medical facility and its personnel (receptionists), is one of the unsung heroes of multitasking and keeping everyone happy. This is the first and last area client's visit, and thus it is on the frontlines of keeping customers happy and things running smoothly. From scheduling appointments to collecting payment, the front desk seems to do it all and it's not just about making clientele and patients feel warm and welcome. It's about:

Address for correspondence:

Dr. Isha Puri

Deputy Manager, Max Superspeciality Hospital, Bathinda, Punjab,

E-mail: puriisha8502@gmail.com

Submission Date: 03/11/2020 Accepted Date: 14/12/2020

Access this article online **Quick Response Code** Website: www.jaims.in **Published by Maharshi Charaka** Ayurveda Organization, Vijayapur, Karnataka (Regd) under the license CCby-NC-SA

- Scheduling the appointments at the correct time and with the correct doctor
- Listening to clients well and communicating in a positive and confident manner with those over the phone or clients in the reception area
- Handling billing errors and detailing client invoices
- Collecting payment to ensure the practice turns a profit so everyone can get paid
- Being on the frontlines of many complaints
- Pulling up medical records for the doctors
- Copying, faxing, and e-mailing documents between clinics, hospitals, and clientele
- Keeping the reception area clean

Elements of front office

When patients enter hospital, the front office area is the first thing they see. That front office areas create all important first impressions for every visitor from potential customers, Making the front office area both practical and attractive is one of best way to

make sure that the first impression is also a good one.^[1]

Reception Desk / Help Desk

- Having a patient care coordinator at help desk are makes it easier for patients and visitors to find the services they are looking for.
- Patient Care coordinator can also help to keep the office secure by signing visitors in and out and making sure that unauthorized visitors or person are not permitted into the back-office area, Help desk often include a telephone where the patient care coordinator can answer incoming calls and direct them to proper departmental staff

Etiquette for patient care coordinators at front office

The front office is often the first face for visitors. They are largely responsible for the first impression visitors have about a hospital. Proper training for this role is essential as well as clearly outlining what is expected of the patient care coordinators throughout their workday,

Appearance

Appearance of patient care coordinators at front office is important and a dress code should be enforced. Their personal hygiene must be well attended to and their over all grooming should be neat and orderly. If person has tattoos those should be covered up.

Phone Conversations

Patient Care coordinators should respond quickly to phone calls and answer callers with enthusiasm in a professional manner. They should be discouraged from professional behavior such as chewing gum or eating during calls, leaving callers on hold for an excessive time period, being short with people even during hectic times as well as keeping personal conversation to a minimum.

Patient / Visitor Relations

Patient Care Coordinators so well-schooled in handing different types of patient's visitors, It's easy to den pleasant people but when it comes to irritated or angry patient/visitor, all reasons mainly out the door Trait? Patient Care Coordinators in handling difficult such type of patients/visitors provide a set protocol that they can follow. When this occurs or getting them immediately to talk to managers.

Electronic Communication

It has become more important for Patient Care Coordinators to work on their e- skills as well. They should be instructed on the proper way to answer emails as well as given a time frame for responses, in addition they should be educated on what is considered to be appropriate for e-mails correspondence. Professionalism should be maintained at all times, especially when dealing with patients/visitors.

Seven phone etiquettes for front office

Following are seven phone etiquettes when dealing with patients, colleagues, doctors and other departmental staff.

Etiquette - 1

Answer calls as quickly as possible before the third ring la prevent a enter ram thinking the office is under staffed. Too many rings is an unnecessary irritation in waiting patients and can create a negative office atmosphere

Etiquette - 2

Greet callers in a friendly and professional manner with the office name like Good Morning OPD, Smile during every call, as smiling can naturally improve the voice to make it seem more energetic

Etiquette - 3

Speak in low moderate volume and speed to convey words in a clear understandable Way. Raise tone or volume to emphasize a point or clarify as the situation dictates. For example- A staff member might raise the volume of his voice for an clearly patient who asks him to speak up.

Etiquette - 4

Ask a caller's permission to place his/her on hold if necessary for example. After the greeting and ISSN: 2456-3110

REVIEW ARTICLE

Nov-Dec 2020

determining the caller's name, a staff member might say Mr. David. I am assisting patient on other line May I please place you on a brief hold (Wait for answer) Thank you, please hold.

Etiquette - 5

Use nontechnical language instead of medical abbreviation as a caller might not understand medical terminology. If use of a medical term phrase or abbreviation is necessary ask staff members to offer a definition in context to clarify meaning.

Etiquette - 6

Listen to the caller or call receiver attentively to determine the best way to assist and to show interest and concern.

Etiquette - 7

Close the call in friendly and professional way instead of simply hanging up.

Job Description - Patient Care Executive

Reporting to patient care executive objectives

To provide coring and patient centric services to Inpatient and Outpatient.

Responsibilities

- To manage the Total Customer Experience Questionnaire" process and follow through customer requests.
- To ensure total familiarity with all instructional manual and operating procurer applicable to the role.
- To efficiently handle appointment, admission and discharge of patients.
- 4. To ensure timely invoice generation with accuracy.
- 5. To accurately share Cash/Credit/Corporate billing and discount information with the
- 6. Customers and achieve high levels of customer satisfaction at each interaction.
- 7. To ensure timely registrations and timely report delivery.

- 8. To ensure timely submission of deposited. Cash/Cheque/Drafts/Credit slip to Finance.
- 9. To effectively utilize Hospital information system, EPABX System and other software provided,
- 10. To be well groomed punctual and adhere to company policies and practices.

Most Important Demands

- Core Competencies
- Eye for Detail
- Service Excellence
- Team Player

Technical / Function Competencies

- Excellent knowledge of computers.
- Numerical Ability.

Behavioural / Leadership Competencies

- Initiative
- Proactiveness
- Self motivated

TCE (Total Customer Experience)

Business experts recommended focusing on the entire customer experience with each service contact. It is the totality of the buying experience-that will keep you customer coming back for more

Mane than just the bastes of customer Services create a favourable experience for the customer everything conscious and unconscious can effect it Successful services companies Attend to every detail to ensure that the customers physical social and psychological experience it pleasant

TCE Q (Total Customer Experience Questionnaire)

It is a feedback forms which totally focusing on customer's experience. It consists of patient full detail Name, Phone no., Reg. No. or Email Id and Doctor's Name to whom they consult

There are same questionnaire for patient about their experience in hospitals

- 1. Experience With Your Doctor
- 2. Waiting Time Consultation
- 3. Sample Collection, Pathology Services.
- 4. Radiology Services
- 5. Cardiology Services,
- 6. Billing Services
- 7. Clean lines
- Mix Chemist Services
- 9. Ease of Contacting Hospital through Telephone
- 10. Car Parking Services
- 11. Security Assistance

Patients must choose options like excellent, good, average and poor for these questionnaire as per their experience. Patients can also give their comments and suggestions on the feedback form with signature.^[2]

HIS (Hospital Information System)

A comprehensive System dealing with all aspects of information processing in a hospital. It Is an integrated system designed to store, manipulated and retrieve information concerned with the administrative and clinical aspects of providing services within the hospital. Traditionally used to describe hospital computer systems with functions like patient admission and discharge, order entry for Laboratory tests or medications and billing function. Healthcare is a Very important part of our society and it is imperative for health care providers to do their jobs in an efficient and effective manner. Each day hundreds of thousands of patients enter health care facilities challenging the administration to run the show smoothly. The employees have to manage and integrate clinical, financial and operational information that grows with the practice. Previously this data was organized manually, which was lime consuming and failed to deliver the desired level of efficiency. Most professionally run hospital and clinics now rely on. Hospital information System (HIS) that them manage all their medical administration information.

Hospital Information System is essentially a computer system that can manage all the information to allow health care providers to do their jobs effectively. These systems have been around since they were first introduced in the 1960's and have evolved with time and the modernization of health care facilities, The computers were not fast in those days and they were net able to provide information in real time as they do today. The staff used them primarily for managing billing and hospital inventory this his changed now and today hospital information system include the integration of all clinical. Financial administration applications, Modem HIS include many applications addressing the needs of various departments in a hospital. They manage a data related to the clinic finance department Laboratory, nursing, pharmacy and also the radiology and pathology department. The hospitals what have switched to HIS have access to quick and reliable information including patients records illustrating details about their demographics, gender, age etc. By a simple click of the mouse they receive important data pertaining to hospital finance system & list of patients and even the distribution of medications with this information they can monitor drug usage in the facility and improve its effectiveness.

Processes of front office

The Help desk Module automates the day-to-day functions of the front office management ap hospital. This module helps in assisting patient will acute information and supports in handling patient related enquirer efficiently. This module having excellent features mind at advanced search facilities improves the quality of services hindered to the user. It provides for queries relating to the following.

Patient Related Enquires

- Bed Allotment
- Admission Details
- Payment Details
- Discharge Details

ISSN: 2456-3110

REVIEW ARTICLE

Nov-Dec 2020

Doctor Related Enquiries

- Bed Allotment
- OP Clinic Details
- Appointment Schedules
- Operation Schedules
- Charge Details.

Patient Registration and Appointment

Scheduling Module

The registration module is an integrated patient management system, which capture complete and relevant patient information. The system automates the patient or administration functions to have better and efficient patient care process.

Patient Registration Details

- Inpatient and Outpatient Registration
- Metical Alerts Details
- Appointment Scheduling (Patient/Doctor wise)
- Doctors Daily Schedule List
- Patient Visit History
- Appointments for Radiology tests and operations
- Patient visit slip.^[3]

Out Patient Management Module

The outpatient module serves as an entry point to schedule an appointment with the Hospital Resident Doctor or Consultant Doctor for Consultations and diagnosis, This module supports doctors, to take better and timely. Consultation decisions by providing instant access comprehensive patient information. Patient visits are divided into new. follow up and review. This module also handle requests and results of laboratory tests and other examinations External Doctors visit to on patients can be defined as "Call on" Some patients may avail only the hospital facilities like labs, Radiology, Radiation, physiotherapy and so on.

Objectives of Front Office at OPD

- 1. To facilitate smooth and effective OPD patient flow.
- 2. To provide accurate information to patients.

Resources of OPD

- 1. Consultants/Resident Medical officers
- 2. Front office staff
- 3. Nurses
- 4. Technicians
- 5. GDA

Processes of OPD (OPD patient treatment and diagnosis process)

- 1. Appointment fixing
- 2. Patient Registration
- 3. Permanent and Invoice Generation
- 4. Patient Consult Diagnosis and Treatment
- 5. Patient visits labs / pharmacy
- 6. Report reconciliation
- 7. Patient fills up the TCEQ form
- 8. Central announcement

Input

- 1. Patient Arrived
- 2. Registration for filled by patient
- 3. Payment and Invoice Generation
- 4. Patient consult / Diagnosis and Treatment
- 5. Patient visit lab/ Pharmacy
- 6. Reports Reconciliation

Output

- 1. Patient fills up the TCEQ form
- 2. Patient Treated/Consulted/ Diagnosed

Output Measures

- 1. Billing Invoice Error- 0
- 2. TCEQ rating more than 90%

Infrastructure

- 1. Stationeries
- Computers, Printer, Telephones, Machine, Scanner.
- 3. HIS

Indication for performance

- 1. Invoicing Error should be zero
- 2. Query resolution more than 90%.
- Submitting scroll to Accounts on Same day should be 100%
- 4. Call pick up rates should be less than 3 rings
- 5. Call connect accuracy should be more than 90%
- 6. Mismatch HIS/Registration form should he zero
- 7. Appointment accuracy should be 100%

Inpatient Management Module

Inpatient Management module handles and provide enquiries about the patient, the patients location, admission, appointment scheduling and discharge details. This module automates the day-to-day administrative activities which lead to better patient care. It provides comprehensive data pertaining to Admission of patients and ward Management availability of beds. estimation, Agreement preparation, planned admission, **Emergency** admission, Inpatient module also deals with ward Management shifting from one ward to the other. Bed availability surgery. Administration of drugs.^[4]

Objectives of front office at IPD

1. To ensure smooth patient admission

Objectives of front office for pre-employment check up

To ensure smooth flow of pre-employment check up

Processes of pre-employment check-up

- 1. Registration form should be filled
- 2. Registration and invoicing
- 3. Pre-employment Check-up coordination

4. TEQ completion by customer

5. Report dispatch.

Output Measures

- 1. Billing invoice error should be zero
- 2. TCEQ rating should be more than 90%
- 3. TAT (Tum Around Time) should be less then 3 hours.

Infrastructure

- 1. Stationeries
- 2. Computers, Printer, Telephones, Faxes, Scanner
- 3. HIS

Insurance Management

Objectives of front office insurance management

To facilitate smooth and accurate management of the TPA Process within stipulated limits

Process of insurance management

- 1. Filled Pre-authorization form
- 2. Receipt and verification of Pre-authorization form
- 3. Follow up with TPA for authorization
- 4. Receipt of authorization and intimation to IPD
- 5. Processing of billing
- 6. Report compilation and dispatch of bill to finance^[5]

OBJECTIVE OF THE STUDY

To Study how Hospital Information System is helpful In Front Office Administration.

REVIEW OF LITERATURE

The use of computers in medicine dates back to the 1950 with studies that attempted to expand we mental capacity of physicians or dealt with research on electronic Physiology: (Collen, 1986), with the evolution of this equipment, especially with the capacity, simultaneously execute various tasks beginning in 1960%, computer began to be used in processing of information in large hospitals in both

administrative and financial functions for collection of statistics and the development of research projects. (Stead, 2007, Stumpf and Freitas, 1997). The use of micro computers, beginning in the 1970s, introduced the concept of distributed processing, increasing the numbers of systems in use in large hospitals (Stump and Freitas, 1997).

Because this diffusion did not always occur in an organized or homogenous manner, the initial diffusion of computers in hospital led to the emergence of island of computerization, with isolated systems that lacked any form of inter connection and were developed by different teams. The redundancy and the lack of data integrity deterred health professionals who saw these systems as developed by systems professionals for systems professionals (Stumpf and Freitas, 1997). This situation was also investigated by Mc Donald (1997), who analyzed the lack of inter connection of different systems used by the hospitals laboratories and service providers in the healthcare field.

Collen (1986) described the development of approaches in the 1970s that sought to approximate the habitual processes of decision making with the use of artificial intelligence in differential diagnosis. In the same decade, studies were undertaken in search of a better organization of the healthcare system (Kaihara 1978). With the help of computer processed simulations, the author established an relationship between medical centres and population demands. The distributed processing: Was expanded during the 1980s with the development and greater availability in the 1920s (Stumpf and Freitas, 1997). This allowed for the mergence of hospital information System (H1S), covering medial, administration and hospitality arena, although hospitality may be considered as integrated into the administrivia area (Lortes, 2009), These areas are interlinked by horizontal din and information flows providing support to the developed activities: Figure shows in sample record for use in the medical information on the electronic records, which contain the procedures, prescriptions laboratory examinations, professionals, involved and hospitalizations applicable)

fundamental for an HIS (Wakamiya and Yamauchib, 2009 Pinochet and Albertin, 2008). [6]

MFTHODOLOGY

Methodology of research indicates the general pattern of organizing procedures together

Valid reliable data for investigation.

Research Type - Observational

Research Approach

A descriptive approach was considered appropriate

Selection and description of setting

The selection of study include role of Hospital Information System at front office of Max super specialty Hospital, Bathinda.

Population

Max super specialty Hospital

Sample Size

Front Office area of Max Super Special Hospital

Sample Selection

Front office at the Out Patient department

Front office at Radiology Department,

Designing the tools of data collection

Direct Observation

- How HIS Play key role for Billing
- Registration of New Patients
- Radiology information
- Laboratory information

Data Collection

Data Collection is done can the observational basis at the front office area of out.

Patient department, radiology department,

Data collection at out patient department

Registration of new patients

Registration of new patients should be done and their Max this generated before they consult with doctors. In registration process is completed through HIS. In which detailed information of patient should be there

ISSN: 2456-3110

REVIEW ARTICLE

Nov-Dec 2020

like first name middle name last name, date of birth, age, sex, home address, contact no, Occupation, religion, how they come to know about Max healthcare

Billing related to consultation

After registration there is a billing related to consultation according to patients dead health problem to whom they want to consult.

Billing related to laboratory and other investigations except radiology investigation

After doctors consultation if there are any investigation related to laboratory like Hematology, urology, Liver function test and many others cardio investigation like ECG, ECHO etc.

Visualization of doctor's order

Doctor's orders also visualized through the option of CPRS order.

Data collection at radiology department

Billing related to radiology investigation

Billing related to radiology investigation. Like ultrasonography, Bone densitoentry, MRI, X-ray, CT scan, ultrasound guided FNAC (Fine Needle Aspiration Cytology), Fluoroscopy etc.

Visualization of patient's entries for radiology investigation

In radiology department the entries of patients regarding radiology investigations from MSP, ICU, MICU, NICU Emergency, can visualize with the help of HIS.

Coding of data

At Out Patient Department

- Registration
- Billing for consultation
- Billing for laboratory and other investigations except radiology investigations.

At Radiology Department

Billing for radiology investigations

Visualization of patient's entries for radiology investigations.

Analysis of Data

This deals with the analysis of data for HIS how it is useful for front office services to be smooth and accurately. Data analysis done accordance with the objectives.

Objectives

To access the working of HIS at OPID and radiology department,

To access the problems which may affect HIS working

Objective - I

- To access the working of HIS at OPD and Radiology Department.
- HIS for front office at OPD level.
- Registration for new patients to generate their Max Id
- Billing for doctor's consultation i.e., consultation fee
- Billing for investigations
- Doctors order also visualized through HIS in CPRS orders.
- HIS for front office at Radiology Department
- Billing of radiology investigations

Visualization of patient's entries for radiology investigation from another ward like MSP, ICU, NICU, MSICU, Emergency, Entries are shown Inpatient, Outpatient, Health.

Checkups

With the help of HIS employees manage and integrated clinical, financial operational information that grows with the practice. HIS is essentially a computer system that can manage all information to allow health care providers to do their for effectively.

Patients / visitors also easily access the billing services and another doctor, investigation related information's at same place. Front office staff can also

easily communicate efficiently with patients and their attendants.

Objective - II

To access the problems which may effect HIS working.

HIS working may affect due to down time; In which processing of HIS temporarily ceased Down Time is that period in which previous data has been updated. So, for that particular time period HIS. Processing slow down. In down time there is no billing registration, visualization of any patients entries related to investigations have been take place. In that case patients and employees may get suffered.

CONCLUSION

The present study was conducted to study how Hospital Information System put key role for front office to provide quick and smooth functioning. A review of related literature was done which helped the investigation to understand. Research methodology, tool for data collection, coding and analysis of data were prepared. The finding of analysis of data regarding first objective reveals that HIS plays a key role in the working of frank office in ease,

- Registration of new patients
- Billing for consultation
- Billing for laboratory investigations, Radiology investigations, cardiac investigations

- Visualization of doctor's order through HIS from CRPS order option
- Visualization of patient's entries for radiology investigations form words MSP, MSICU, VICU, for Inpatients, Outpatient and Health checkups.

REFERENCES

- Jatashanker Tiwari. Front office operation and management. 2nd edition, Oxford University Press, New Delhi.
- S.K Batanagar. Front office operation and management. 2nd edition
- Rakesh Puri. Front office operation and management 2nd edition
- Dr Charanjib Kumar. Front Office Operation: A Training Manual for Hospitality Professionals. 2nd edition
- 5. BM Sakarakar, Principles of Hospital Administration and Planning. 2nd edition
- 6. CM Francis, Hospital Administration, 3rd edition.

How to cite this article: Isha Puri. A study on role of front office administration in Max Super Speciality Hospital Bathinda. J Ayurveda Integr Med Sci 2020;6:321-329.

Source of Support: Nil, **Conflict of Interest:** None declared.
