



Patient Food Experience : A Journey
Dt. Charu Dua
HOD Clinical Nutrition & F&B

Challenge / AIM

Business Case`			Opportunity Statement	
<p>Hospital food and nutrition services play an important role in patient recovery and well-being</p> <p>a) Foodservice quality can also influence patient's satisfaction with their overall hospital experience.</p> <p>a) Competition on the rise, many hospital foodservice operations are looking for ways to improve patient satisfaction, as well as reduce the cost.</p>			Reduce Cost / Improve Patient Satisfaction	
Goal Statement			Project Scope	
Areas	Current level (2015- 2016)	Target- G2 & G1	All In patients	
<ul style="list-style-type: none"> •Patient Satisfaction •Reduce F&B Cost per bed 	51.00% •(Apr-Jul'16) per day meal cost Rs509	<ul style="list-style-type: none"> •60% & 65% •Rs 450 		
Project Plan start			Project Team	
Phase	Start	End	Sponsor :- Mr. Neeraj Mishra, Vinita Bhasin	
Define	1 Apr'16	31 st Mar'17	Champion :- Dr Gaurav Aggarwal	
Measure	16 th apr'16	10 th May'16	SME :- Gitesh Mongia & Rashmi Chawla	
Analyze	11 th May'16	30 th Jun'16	Project Leader – Charu Dua	
Improve	1 st July'16	30 th Sept'16	Quality Head :- Dr Pooja Arora	
Control	1 st Oct '16	31 st Mar'17	BB Quality Mentor :- Atik Gupta	
Team Members :- Dietician , F&b , Commercial Team				

Monitor

Measure

Improve

5 Whys ?

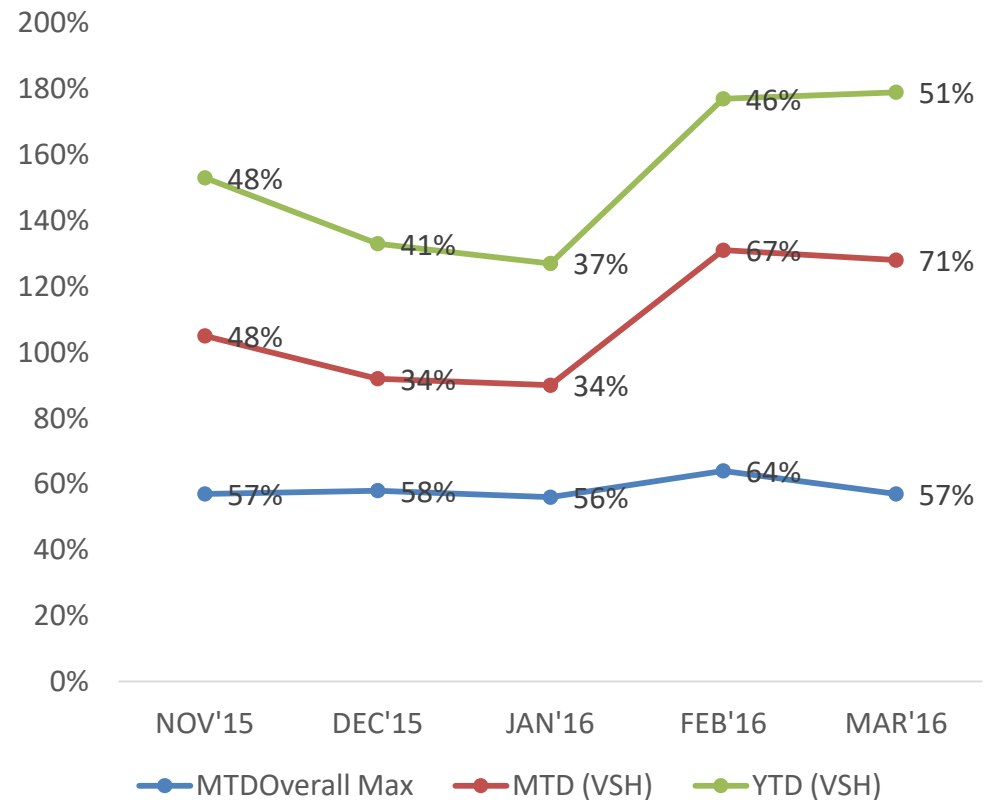
- Max Standard
- Unique Feedback Mechanism
- Match Max Standard
- Match Max Lay Out
 - Economy 4services vs 5 services
 - CCG used in Economy

5 Whys ?

YTD Scores Pan Max 2015-2016

Units	T2-B2
Vaishali	51%
Shalimar Bagh	64%
Mohali	69%
Dehradun	67%
Pitampura	65%
Noida	50%
Bhatinda	69%
Patparganj	55%
Saket (DDF)	51%
Saket (MSSH)	50%
Gurgaon	56%
Overall	59%

YTD / MTD Scores 2015- 2016



Second Last Position In the Network

Monitor

Measure

Improve

5 Whys ?

F&B Cost Summary	
	FY-16 Cost/OBD
Unit	FY-16 Cost/OBD
Saket	617
GGN	634
PPG	671
NDA	554
S.Bagh	511
Mohali	441
Bathinda	628
DDN	536
Vaishali	529
PPA	604
PSH	-
MHC	596

**Middle Position In
Network**

- IMRB**
- VOC
 - Data File Deep Diving

Step 01

Step 02

On Ground Heard from Patients

- Interviews
- Rounds
- Questionnaire

With Increasing expectations and demand of better quality care amongst patients, Max Healthcare conducts a monthly customer transaction program amongst segments **OPD, IPD and Emergency**, which covers all processes of the hospital.

- OPD Segment –

- Appointment Process
- Front Office
- Doctor
- Nursing
- Housekeeping
- Diagnostics Services
- Pharmacy

- IPD Segment

- Ambulance Services
- Emergency Services
- Admission Desk
- Doctor
- Nursing
- Diagnostics
- Food and Beverage
- Housekeeping
- Discharge

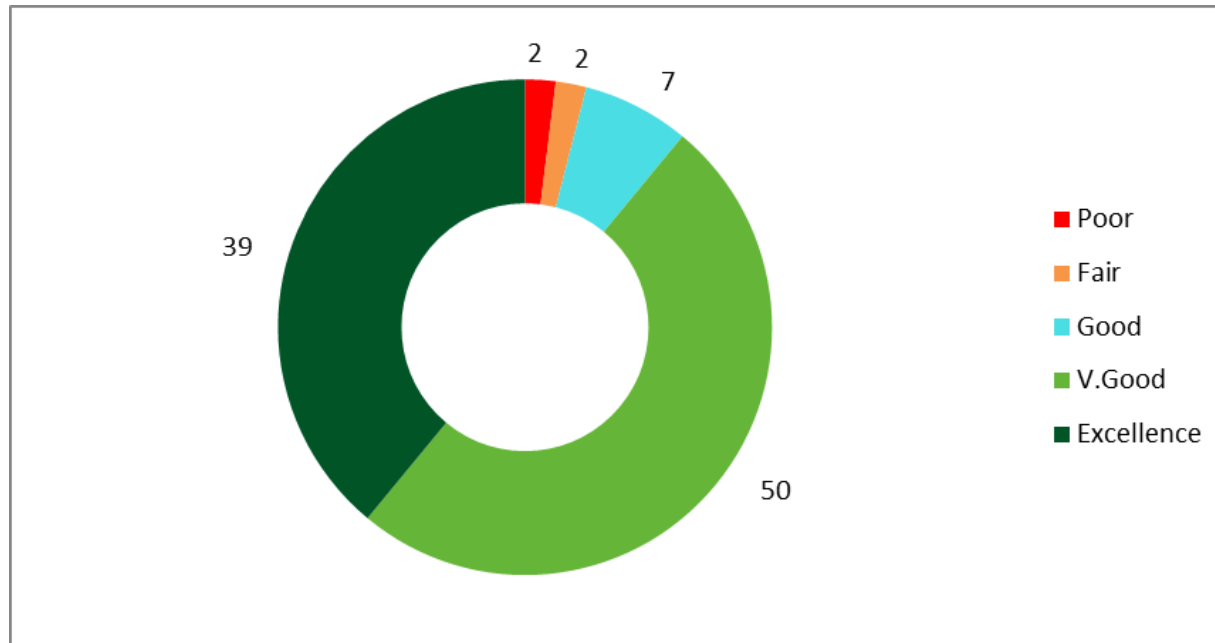
■ Methodology

- Methodology of conducting each the interviews for OPD/IPD are -
 - we address the overall satisfaction question for each of the process, and any customer rating bottom 3 scores (Good/Fair/Poor), would be addressed specific attributes for the respective processes, otherwise we skip ahead to the next process
 - For the Emergency segment on the other hand, all questions in the questionnaire are addressed to the customers
- **LOI:** The average length of Interview for each of these segments is 4-5 minutes
- Data of all OPD bills generated and IPD discharges is shared with IMRB on a daily basis. IMRB calls on that database randomly and covers a fixed sample for each Hospital every month. Speciality-wise quotas are fixed.

How do we see results

- Online Dashboard – The dashboard is an online platform that showcases the overall satisfaction scores for these segments (OPD/IPD/Emergency) and this is uploaded on a daily basis with a lag of 2-3 days, post conducting audits
- Red Flag cases are shared with MHC as and when the caller encounters a customer who have given MHC a rating of - Good/Fair/Poor for any specific process along with the verbatim for immediate action

How do we see results



T2 - 89 B2 - 4

Score

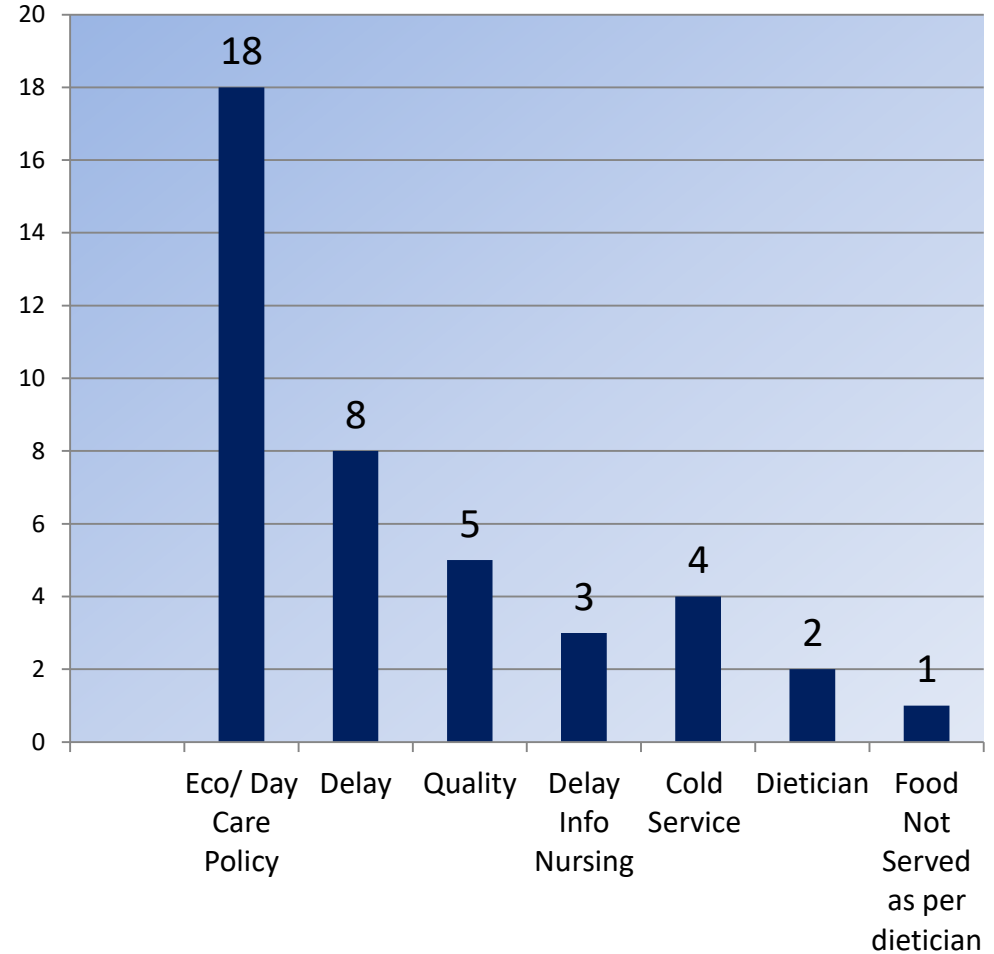
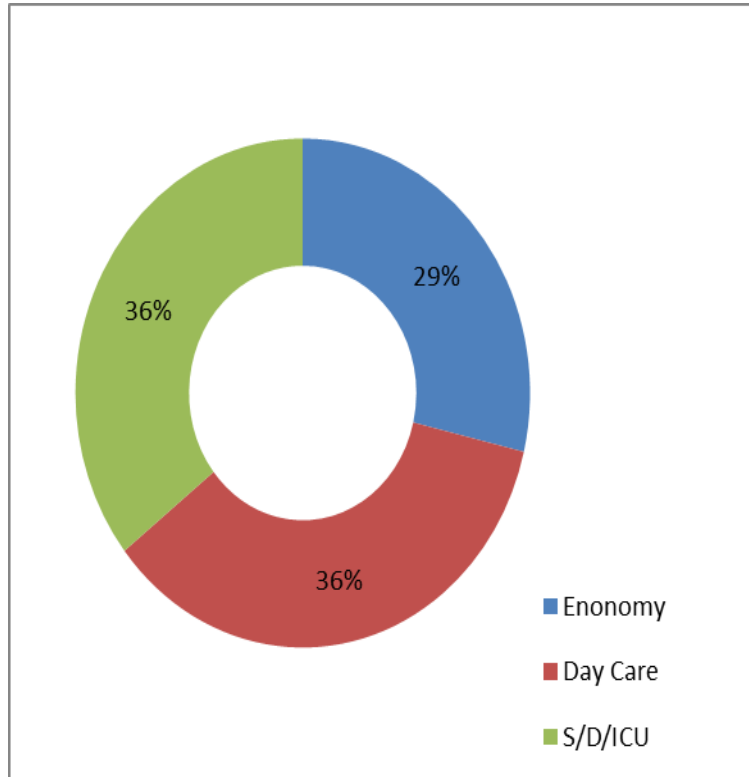
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Monitor

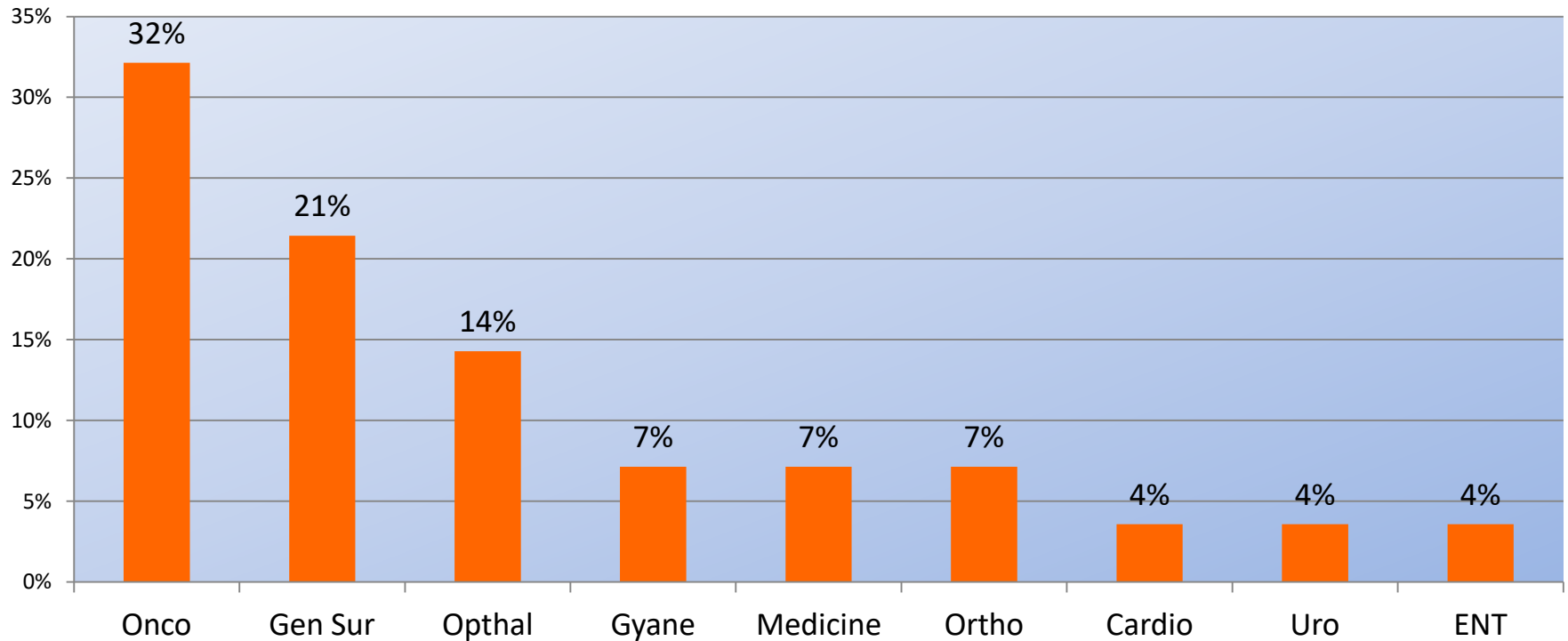
Measure

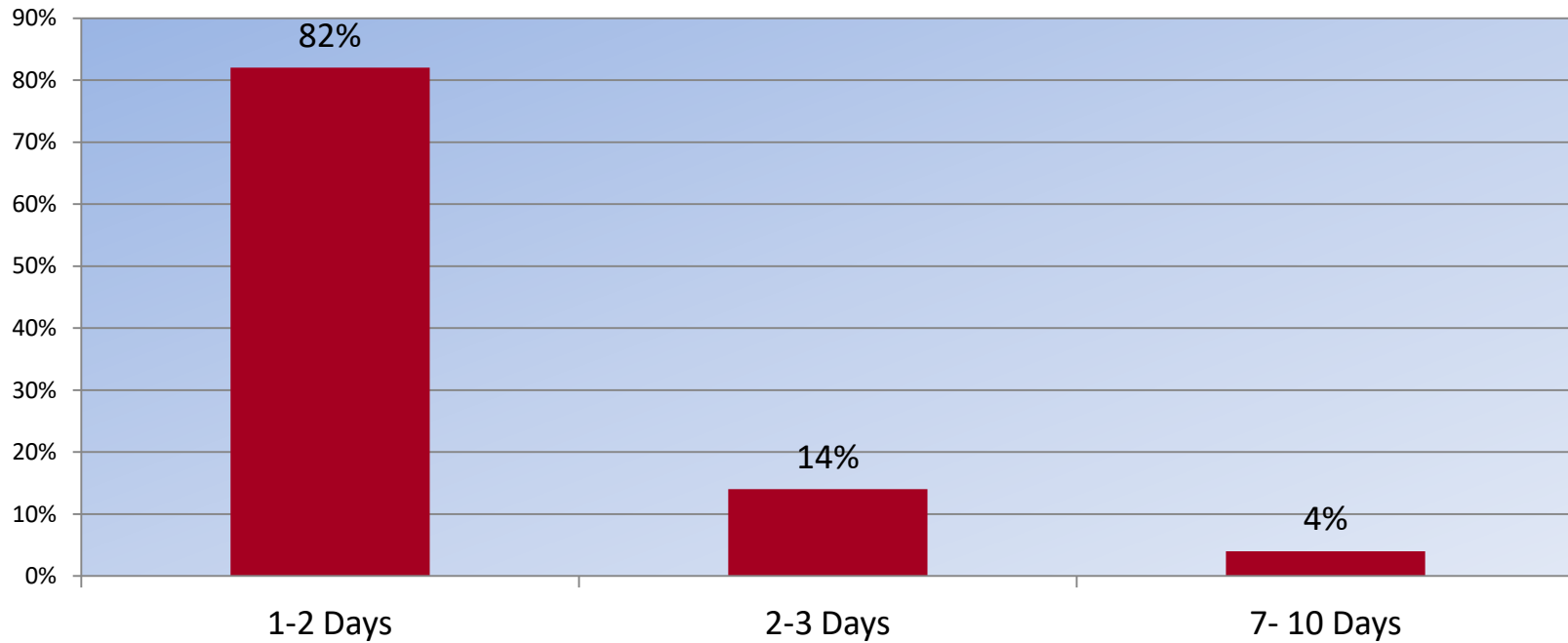
Improve

F&B B2 Reasons Bed category / Pareto Complaints Nov'15 – March'16

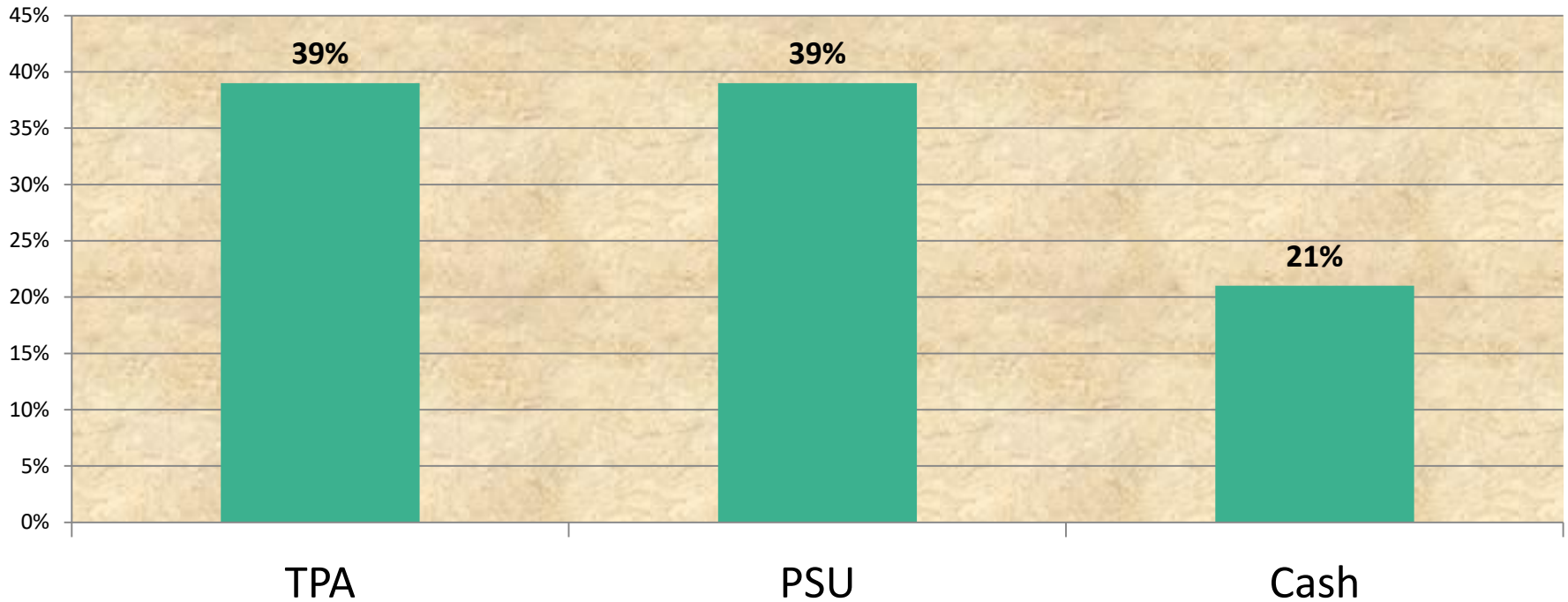


F&B Specialty Wise B2 Nov '15 – March '16





ALOS Wise B2 :Nov '15 – March'16



Payment Mode Wise B2 Nov '15 – March 16

Monitored / Analysis

VOC – Food & Beverage- Take VSH Data

They took lots of time to delivered our order, they did not give us instant service.

At the day of discharge they did not provide me food. I was a sugar patient I asked them that I need food because I have to take my sugar injection but they did not gave me any food.



Food quality should more better & nutrias, they should provide boil egg and banana and should not give tea and biscuit to patient. -

Food quantity should be more and they should provide more fruits .

They don't provide warm food on time , staff member do not listen us properly even they did not come with tea on time.

They should provide food to attendant also , their rates are very costly , it should be minimum.

Monitor

Measure

Improve



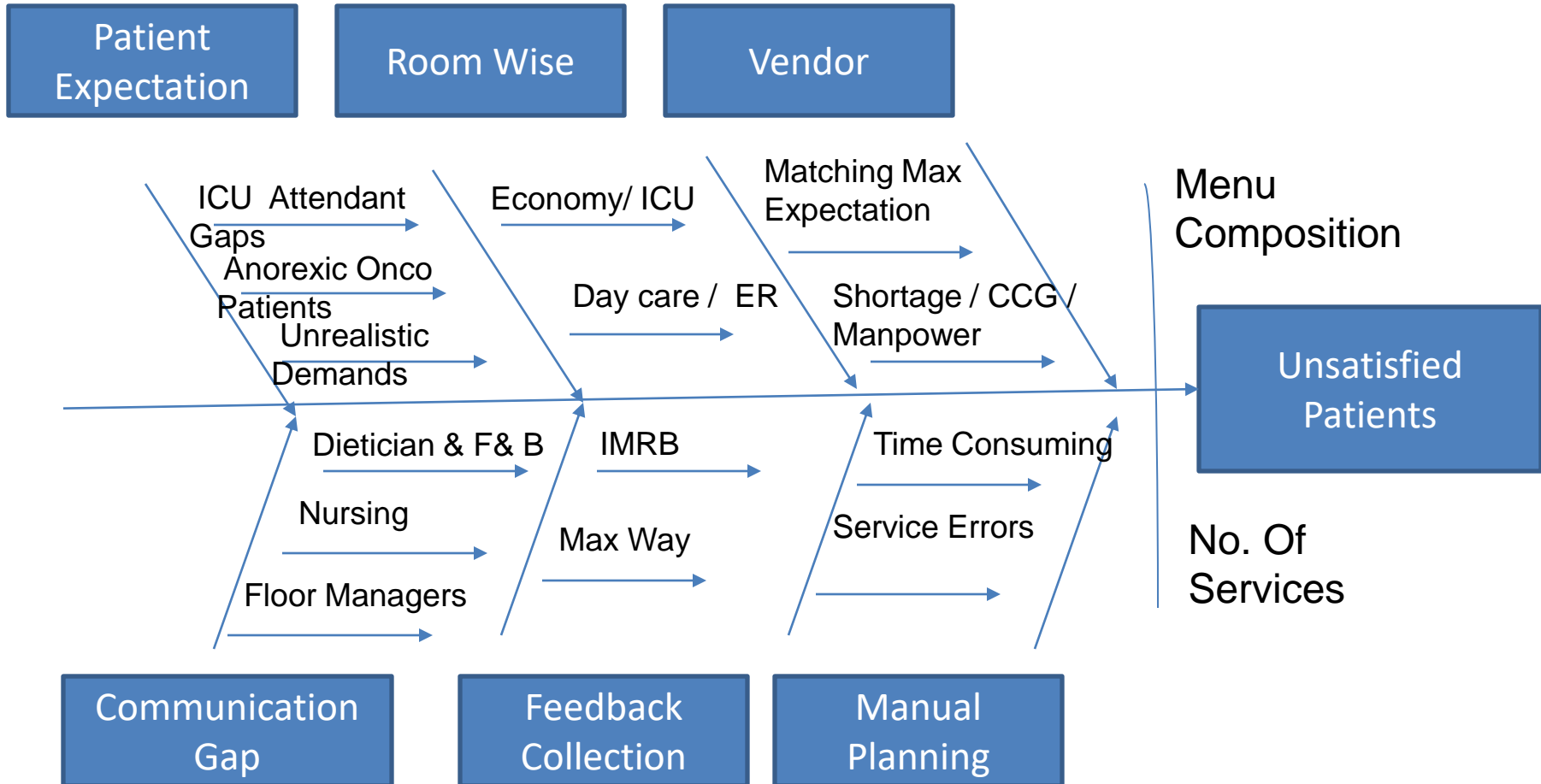
Tool Used was Fish Bone

Monitor

Measure

Improve

Fish Bone



Self Rounds



- Communication Gap
 - Dietician
 - Hospital Level
- Team work
- Unsatisfied Attendants
- Process Clarity
- Monitoring
- Equipment Repair
- Technology Not in Use

IMRB



Vendor



- Denial State (.....)
- CCG
- Manpower
 - Quality
 - Quantity
 - Roaster
- Statutory

Action Plan



Monitor

Measure

Improve

Action Plan- Patient Satisfaction



- Patient Handout
- ICU rounds Meeting Attendants
- Floor Dieticians – Owners/ Mentors
- Team Briefings / Rounds
- Instant NPO Meal Trays
- Oncology Menus
- Diet Module
- Trainings
- Vendor Change



Monitor

Measure

Improve

Action Plan – Cost Rationalization

- Vendor Change
- Billing Methodology – MN Count Vs Actual
- Liquid rates Separate
- Change in Menu Composition and Grammage
- Economy Meals Increased from 4 servings to 5 servings



NUTRITION FOR NORMAL DIET		
Food		
Grammage	2350 Gms	1865 Gms
Energy	2200	1915
Protein	65gm	65gm

ncology Patient Menu's
Enhanced

Monitor

Measure

Improve

Action Plan – Cost Rationalization

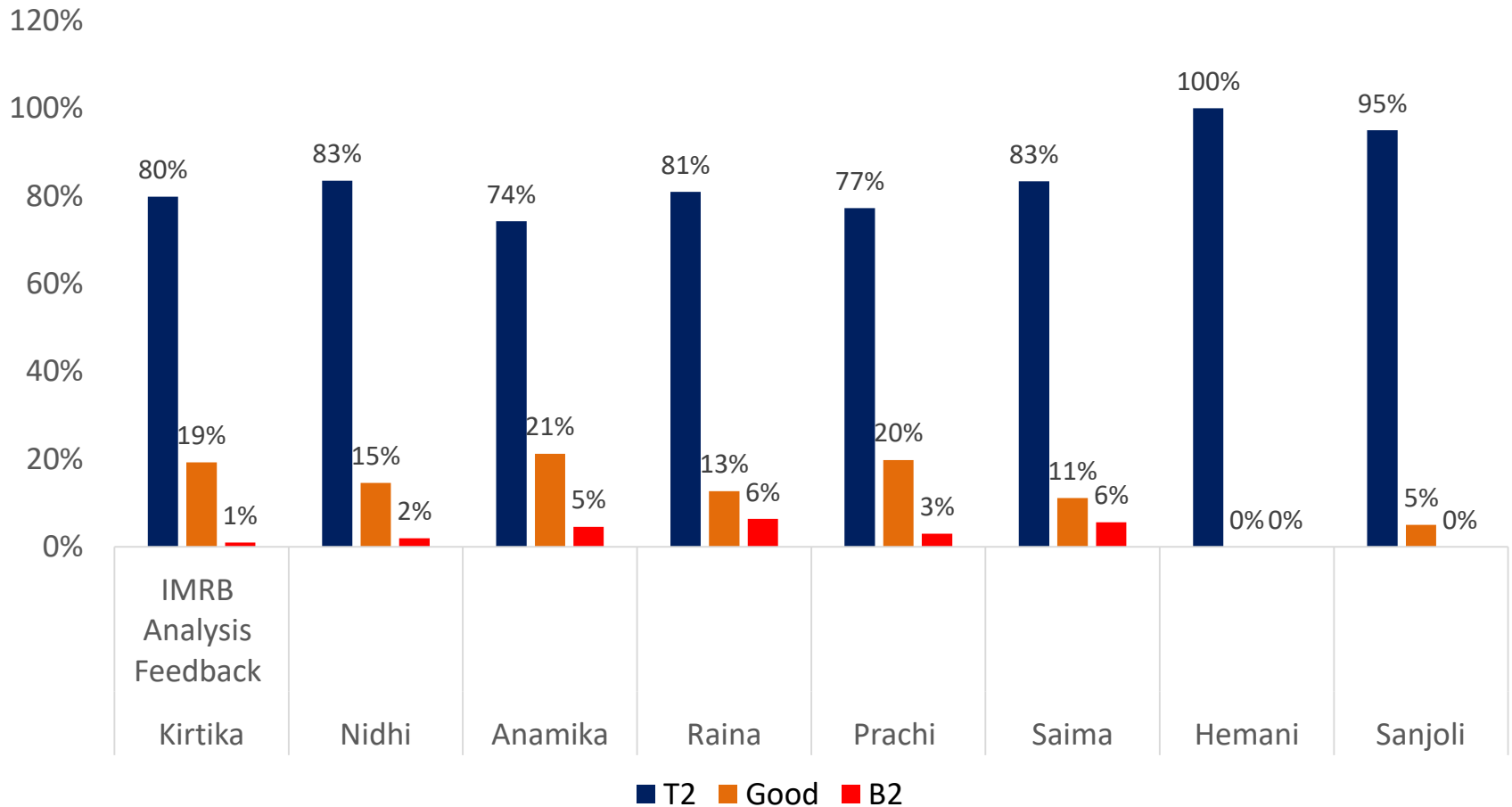
		Date	MN Count	Billing				
1	MN Count Billing	01-01-2017	100	100* 400	40000			
			MN Count	Breakfast	Lunch	Dinner	Liquids	
2	Actual Billing	01-01-2017	100	70	110	120	10	
				80*120	110*145	120* 135	10* 310	
				9600	4950	16200	3100	33850

Rates	Billing Methodology	OBD
OLD Rates	MN Count Billing	529
New Rates	MN Count Billing	417
New Rates	Actual Meal Billing	394



Individual Performance

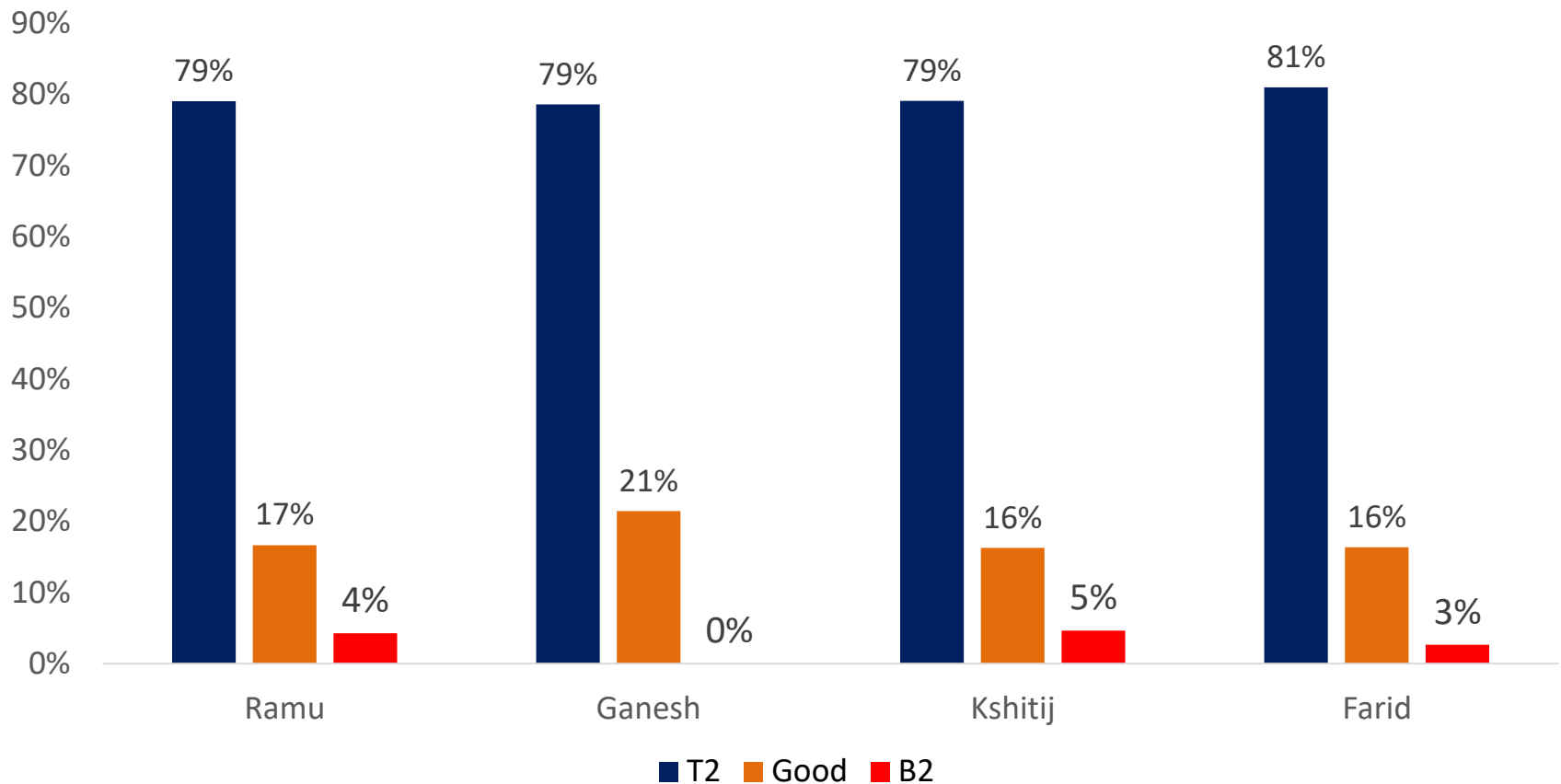
Individual Performance



Dieticians Performance
April'16 - March'17



Individual Performance



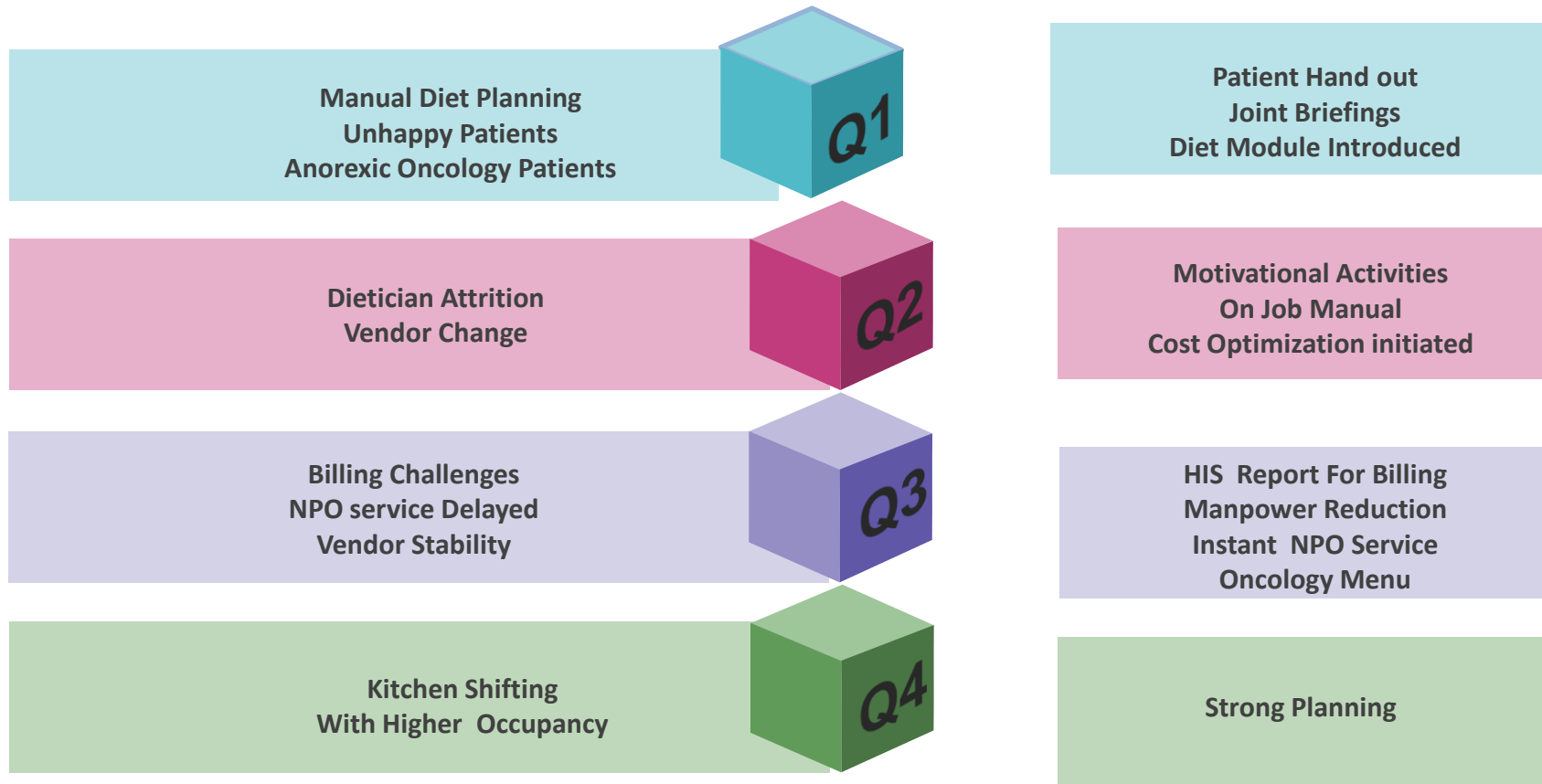
F&B Performance
April'16 - March'17

Monitor

Measure

Improve

Speed Breakers





Patient Nutrition Information – Max Health Care Vaishali

- The dietician along with your treating consultant develops a meal plan for you to ensure that your meals are nutritionally balanced. The dietician will take into account your therapeutic needs / preferences while planning your meals. Kindly inform her about your preferences
 - If you have any food allergy
 - If you have any food dislikes
 - If you have specific food needs such as food without onion and garlic
 - If you are a breast feeding mother of an infant on the pediatrics floor. If so, you will be served meals from the regular menu during patient meal timings.
- If your doctor prescribes liquid diet you may be served liquids at an interval of two hours starting from 6:00am – 10:00pm.
- A test or procedure coincides with meal timing; the staff will arrange to bring your meal at a more suitable time or as per the requirement of the procedure.
- You may log your patient food orders and F&B related service at 4000. They shall be served on payments basis if out of menu scope.
- If you are kept NPO for a test/ procedure you should not be consuming any meals for the duration told by your doctor. Once your procedure is over nurse informs the dietician/ F&B department meal would be served to you as per the timings of the day. If the lunch/ dinner time is over i.e. after 3:00pm / 11:00pm, if you desire to have a meal a composite meal tray would be served to you. For immediate service call you floor dietician speed dial, she may assist you.
- To ensure highest standards of hygiene and to prevent infection, we do not permit any outside food in patient areas.
- We have a fixed menu plan .However, should you desire an alternate option (with the Knowledge and advice of the dietician), and this may be provided on additional payment. Your alternate preference must be conveyed at least 24 hours in advance.
- At your discharge your floor dietician will prepare a diet chart for you, and prescribe you a diet that has to be followed at home.
- For attendant Orders you may call at
3092 (CCD) / *055 (Temptation) / 3088/3087 (Kitchen)

FMT/DNFB/39/21.08.16/1.0



Food and Beverage meal service pattern for Patients

Based on the diet prescribed by the dietician Food and Beverage department serves the following meals at below mentioned times.

Meals	Time of service	Suite/ Deluxe/ Single/ Double/ICU	Economy	Service Timing of Liquid diet / Ryles Tube Feed
		6 Meal Service Pattern	5 meal Service Pattern	
Early Morning tea	5:30am - 6:15am	√	√	5:45am - 6:30am
Breakfast	8:00am - 9:00am	√	√	7:45am - 8:30am
Mid-morning	10:45am - 11:30am	√	X	9:45am - 10:30am
Lunch	12:30pm -1:45pm	√	√	11:45am - 12:30pm
Evening Tea	4:00pm - 4:45pm	√	√	1:45pm - 2:30pm
Dinner	7:30pm - 8:45pm	√	√	3:45pm – 4:30pm
Jain Food (On Prior Request)	6:00pm - 6:30pm			5:45pm - 6:30pm
				7:45pm - 8:30pm
Last Oral Liquid Diet Service			√	9:45pm - 10:30pm
Last Service for Ryle Tube Feed				11:45pm - 12:30am (RT Feed Only)

The above mentioned meal patterns is served at no cost to the patient. Patient are advised not to eat anything besides the prescribed meal planned by the dietician and served by F&B. Anything other than prescribed meal/ food for the patient has to be confirmed by the dietician and would be charged for.

I am your Dietician: _____

You may contact me @: _____

Departmental Speed Dials: Dietician *122 F&B *101

For Feedback / Escalations:

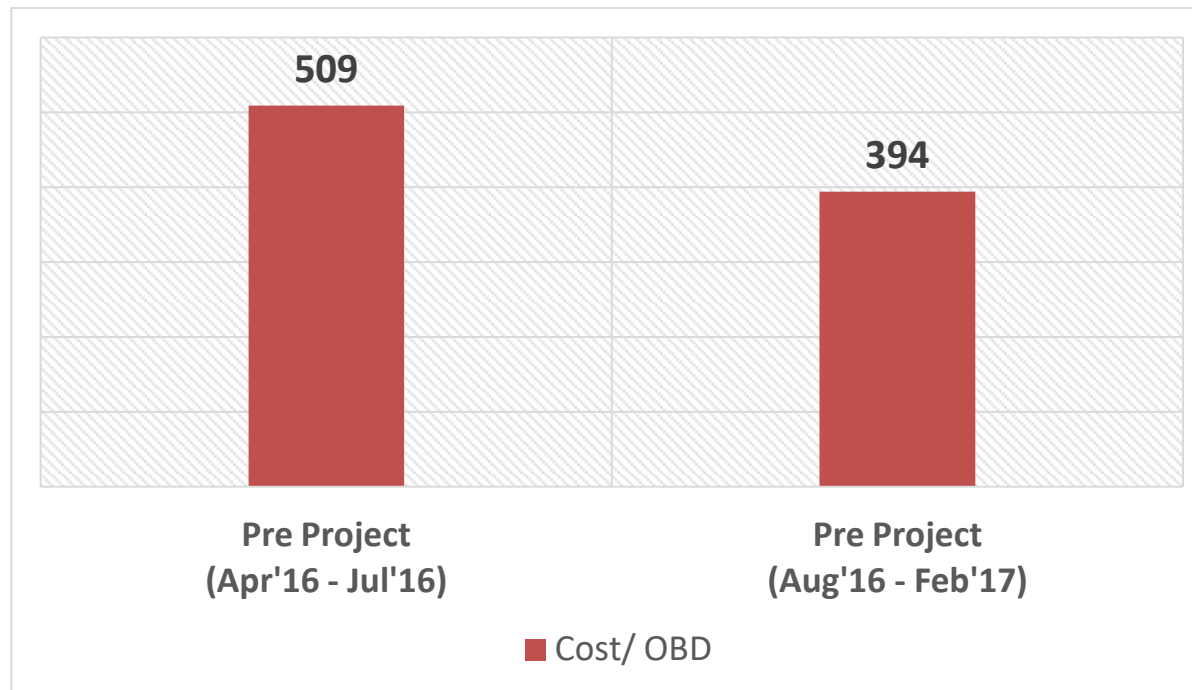
*062 Mr. Farid – Manager
*061- Dt. Charu Dua – HOD

FMT/DNFB/39/21.08.16/1.0

HIS Report

		C.T.V.S(I	Classi	Day	Double	Economy	Four	ICU	PICU	SICU	Single	Suite	Total
VSH 1STFLR HDU	Bedtime	0	0	0	0	0	0	40	0	0	0	0	40
	Breakfast	0	0	0	0	0	0	133	0	0	0	0	133
	Dinner	0	0	0	0	0	0	128	0	0	0	0	128
	Early Morning	0	0	0	0	0	0	133	0	0	0	0	133
	Tea												
	Evening Tea	0	0	0	0	0	0	128	0	0	0	0	128
	Lunch	0	0	0	0	0	0	138	0	0	0	0	138
	Mid Morning	0	0	0	0	0	0	134	0	0	0	0	134
VSH 1STFLR MSP	Bedtime	0	17	0	49	0	22	0	0	0	49	0	137
	Breakfast	0	33	0	180	0	147	0	0	0	186	0	546
	Dinner	0	38	0	179	0	168	0	0	0	193	0	578
	Early Morning	0	34	0	183	0	148	0	0	0	188	0	553
	Tea												
	Evening Soup	0	0	0	0	0	0	0	0	0	1	0	1
	Evening Tea	0	31	0	165	0	140	0	0	0	173	0	509
	Lunch	0	33	0	170	0	146	0	0	0	179	0	528
Mid Morning	0	33	0	167	0	21	0	0	0	182	0	403	
VSH 1STFLR PICU	Bedtime	0	0	0	0	0	0	0	5	0	0	0	5
	Breakfast	0	0	0	0	0	0	0	51	0	0	0	51
	Dinner	0	0	0	0	0	0	0	54	0	0	0	54
	Early Morning	0	0	0	0	0	0	0	51	0	0	0	51
	Tea												
	Evening Tea	0	0	0	0	0	0	0	54	0	0	0	54
	Lunch	0	0	0	0	0	0	0	50	0	0	0	50
	Mid Morning	0	0	0	0	0	0	0	50	0	0	0	50
Total		135	748	901	4721	4042	2197	5160	315	641	4687	8	23555

Cost Savings



Annualized Savings of
80 lacs

F&B Cost Summary

Unit	FY-16 Cost/OBD		H1-YTD FY-17 Cost/OBD		Feb'17 Cost/OBD	
	FY-16 Cost (in lacs)	FY-16 Cost/OBD	FY-17 Cost (in lacs)	FY-17 Cost/OBD	Jan'17 Cost (in lacs)	Jan'17 Cost/OBD
Saket	878	617	657	574	51	502
GGN	122	634	96	573	12	827
PPG	748	671	629	633	51	563
NDA	67	554	56	583	5	627
S.Bagh	364	511	330	520	34	552
Mohali	227	441	189	412	11	308
Bathinda	87	628	74	488	6	444
DDN	180	536	153	459	15	484
Vaishali	-	529	244	509	23	394
Max Smart	-	-	225	453	20	399
PPA	113	604	102	-	8	-
PSH	36	-	25	-	3	-
MHC	2822	596	2781	529	240	513

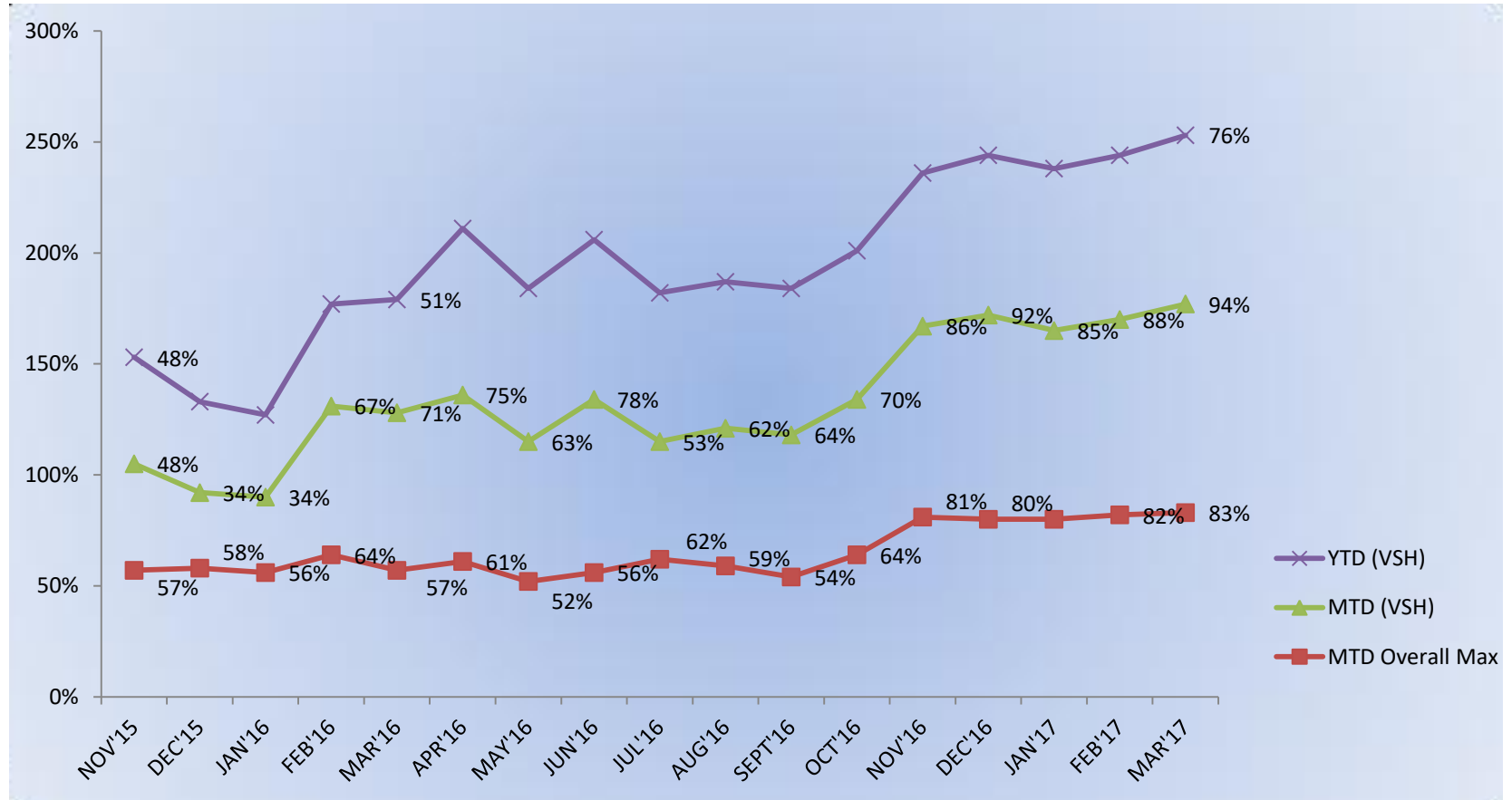
Monitor

Measure

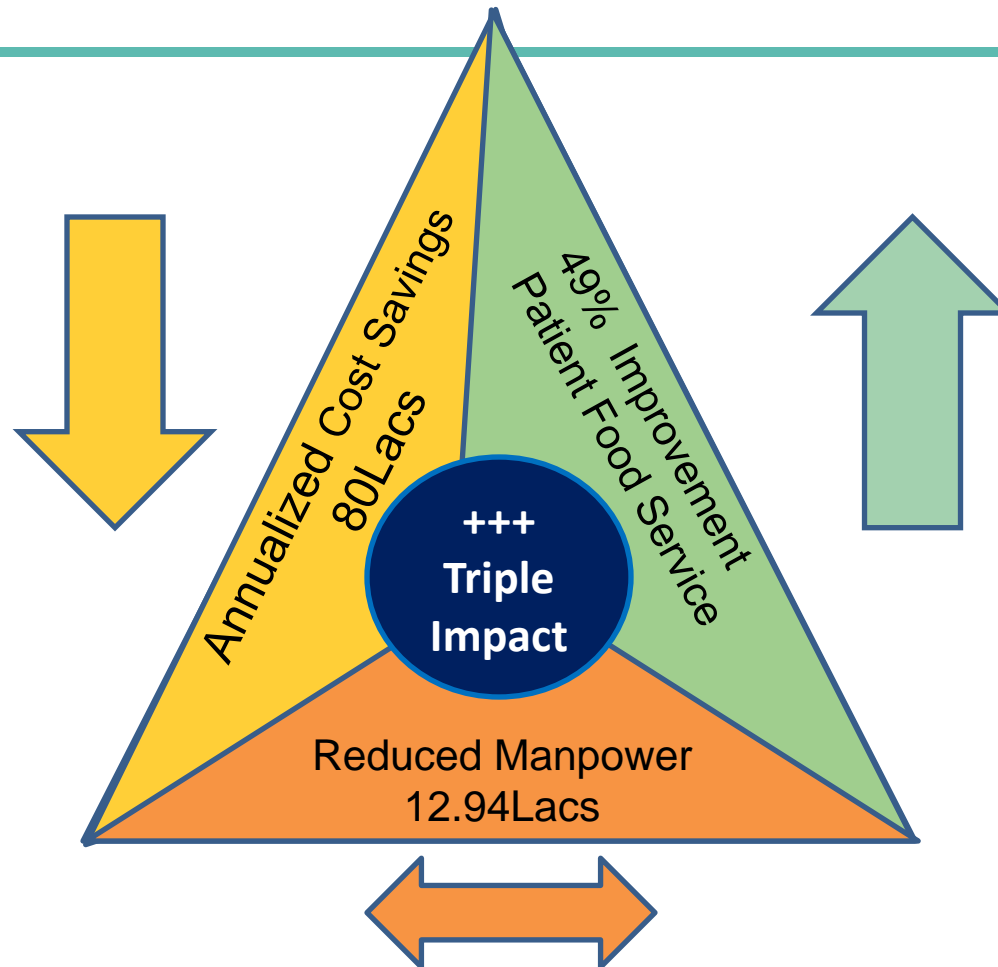
Improve

IPD	FY 15-16	FY 16-17	Growth	Trend FY 16 vs. FY 17
Units	T2-B2	T2-B2	T2-B2	Trend
Panchsheel Park	-	-	-	-
Vaishali	51%	76%	49%	▲
Shalimar Bagh	64%	73%	14%	▲
Mohali	69%	71%	4%	▲
Dehradun	67%	70%	4%	▲
Pitampura	65%	70%	7%	▲
Noida	50%	67%	32%	▲
Bhatinda	69%	66%	-3%	▼
Patparganj	55%	65%	17%	▲
Saket (DDF)	51%	63%	22%	▲
Saket (MSSH)	50%	61%	24%	▲
Gurgaon	56%	59%	6%	▲
Overall	59%	68%	15%	▲

Patient Satisfaction



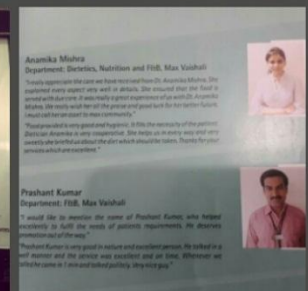
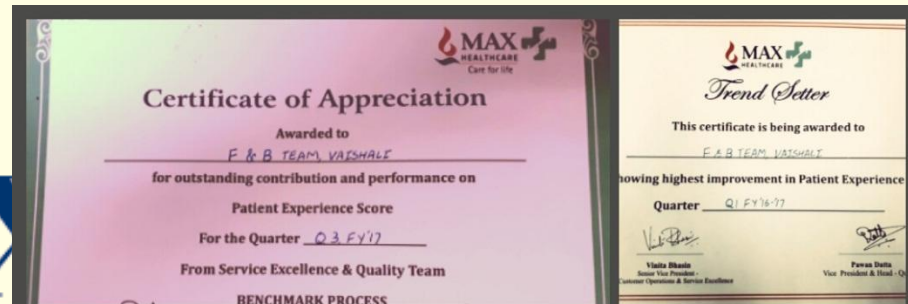
Triple Impact



Monitor

Measure

Improve



Thank You

