

# Reducing Turnaround Time in Outpatient Departments: An Analytical Study from a Government Hospital in West Bengal

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## ABSTRACT

The efficiency of healthcare delivery in the Outpatient Department (OPD) is a critical determinant of patient satisfaction and hospital performance. One of the key performance indicators in OPD operations is the Initial Assessment Turnaround Time (TAT), which refers to the time taken from a patient's arrival to their first clinical evaluation. This study conducts an analytical investigation into the causes of prolonged TAT at Habra State General Hospital in West Bengal. A mixed-methods approach was used, involving time-motion study, structured interviews, and patient feedback. Major findings highlighted registration delays, staff shortages during peak hours, lack of digital systems, and patient misguidance. Based on the analysis, actionable interventions such as workflow redesign, digital queue systems, and improved patient communication are proposed to reduce TAT and enhance overall OPD performance.

**Keywords:** Turnaround Time, OPD Efficiency, Patient Satisfaction, Hospital Management, Health Services, Process Improvement

## INTRODUCTION

This study was conducted as part of the MBA curriculum at Brainware University during an internship at Habra State General Hospital. The focus was on understanding real-world applications of hospital management theory. The OPD was chosen due to its critical role in healthcare delivery, managing large patient volumes daily. Turnaround Time (TAT) from arrival to first consultation was observed as a major service quality factor.

### Objectives of the Study

- To analyze the workflow and processes in OPD assessment.
- To identify factors contributing to high TAT.
- To assess the impact of delayed TAT on patient satisfaction.
- To propose process improvements and measure their impact.

## METHODOLOGY

A descriptive analytical design was adopted. Data was collected over three months (Feb-April 2025) using:

- Time-motion tracking of 120-150 patients
- Staff and patient interviews
- Secondary data analysis (logs, registers)

Quantitative data was analyzed via Excel; qualitative data was thematically analyzed.

## FINDINGS

- Avg TAT: Ranged from 25 to 45 mins; peak delays in morning (9 AM–12 PM)
- Top delay causes: Registration bottlenecks, lack of queue displays, understaffed counters
- Patient feedback: 70% found wait time frustrating; 80% found doctor behavior professional
- April (post-intervention): Avg TAT dropped to 22.5 mins from 30 mins (March)

## SOLUTIONS PROPOSED

- Digital registration & token system
- Queue displays & signage
- Extra staff during peak hours
- Daily monitoring of TAT metrics
- Improved communication for new/elderly patients

## CONCLUSION

TAT in OPD is directly tied to hospital efficiency and patient experience. This study shows that simple low-cost interventions can significantly reduce TAT. The findings advocate for more structured OPD workflows and basic tech adoption even in government setups.

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## AUTHOR BIOGRAPHY

I am Tapamoy Ghosh, a postgraduate in Hospital and Healthcare Management from Brainware University, Kolkata. This research paper is a part of my academic internship project conducted at Habra State General Hospital, West Bengal. My primary interest lies in optimizing healthcare delivery systems, especially in public sector hospitals, to enhance efficiency and patient satisfaction through process improvement and management innovation.