PROJECT REPORT

TEAM ID	PNT2022TMID26934
PROJECT NAME	ANAYTICS FOR HOSPITALS HEALTH - CAREDATA

TEAM MEMBERS:

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CHAPTER 1

INTRODUCTION

This project deals with the analytics for hospital's health care data using dataanalytics. Data analytics (DA) is the process of examining data sets in order to findtrends and draw conclusions about the information they contain. Increasingly, data analytics is done with the aid of specialized systems and softwa re.Data_analyticstechnologies and techniques are widely used in commercial industries enable organizations to make moreto informed business decisions.

a. **PROJECTOVERVIEW:**

Recent Covid-

19Pandemic has raised alarms over one of the mostoverlooked areas to f ocus:Healthcare Management.

While healthcare management has various use cases for using data

science, patient length of stay is one criticalparameter to observe and predict if one wants to improve the efficiency of the healthcare mana gement in a hospital.

This parameter helps hospitals to identify patients of high LOS-risk (patients who will stay longer) at the time of admission. Once identified, patients with highLOS risk can have their treatment plan optimized to minimize LOS and lower the chance of staff/visitor infection. Also, prior knowledge of LOS can aid in logistics such as room and bed allocation planning.

Suppose you have been hired as Data Scientist of Health Man

— a not
for profit organization dedicated to manage the functioning of Hospi
tals in a professional and optimalmanner

b. **PURPOSE**:

Data analytics in health care is vital. It helps health care organizations to evaluate and develop practitioners, detect anomalies in scans and predict

outbreaks in illness, per the Harvard Business School. Data analytics can also lower costs for health care organizations and boost businessintellige nce. Hospital dataanalytics can look over patient data and any prescribed medication to alert doctors and patients of incorrect dosages or wrong prescriptions, which lessens human error and the cost to your hospital. This in turn helps in gaining better insights and also enables healthcare practitioners to make well-informed decisions.

CHAPTER 2

LITERATURE SURVEY

The main aim of this paper is to provide a deep analysison the research field of healthcare data analytics. This paper is analyzing the previous studies and works in this research area, as well as highlighting some of the guidelines and gaps. This study has used seven popular databases and selected most relevant papers, in order to conduct this paper. The paper has listed some data analytics tools and techniques that have been used to improve healthcare performances in many areas such as: medical operations, reports, decision making, and prevention system. Moreover, the systematic review has showed an interesting demographic of fields of publication, research approaches, as well as outlined some of the possible reasons and issues associated with healthcare data analytics, based on geographical distribution theme[1]

This part deals with the advanced analytical methods focused on healthcare. This includes the clinical prediction models, temporal data mining methods, and visual analytics. Integrating heterogeneous data such as clinical and genomic data isessential for improving the predictive power of the data that will also be discussed. Information retrieval techniques that can enhance the quality of biomedical search will be presented. Data extremely important privacy is an in concern

healthcare. Privacy-

preserving data publishing techniques will therefore be presented.[2].

One of the promises of the growing critical mass of clinical data accumulatingin electronic health record (EHR) systems is secondary use (or re-use)of the data forother purposes, such quality improvement and clinical research.1 The growth of such data has increased dramatically in recent years due to incentives for EHR adoption in the US funded by the Health Information Technology for Economic and Clinical Health (HITECH) Act.2-3 In the meantime, there has also seen substantial growth in other kinds of health-related data, most notably through efforts to sequence genomes and other biological structures and functions.4 The analysis of this data is usually called analytics (or data analytics). This chapter will define the terminology of this field, provide an overview of its promise, describe what workhas been accomplished, and list the challenges and opportunities going forward[3].

Clinicians, healthcare providers-

suppliers, policy makers and patientsareexperiencing exciting opportunities in light of new information deriving from the analysis

of big data sets, a capability that has emerged in the last decades. Due to the rapid increase of publications in the healthcare industry, we have conducted a structured review regarding healthcare big data analytics. With reference to the resource-based view theory we focus on how big data resources are utilized to create organization values/capabilities, and through content analysis of the selected publications we discuss: the classification of big data types related to healthcare, the associate analysis techniques, the created value for stakeholders, the platforms

and tools for handling big health data and future aspects in the field. We present a number of pragmatic examples to show how the advances in healthcare were madepossible. We believe that the findings of this review are stimulating and provide valuableinformation to practitioners, policy makers and rese archers while presenting them with certainpaths for futureresearch[4].

In this modern techno-world, the term data is unavoidable and certainly, nothing is possible without its usage. The trends about how to analyze the data are the need of the hour. Data analytics is becoming a future escalating tool of all industries including medicine, robotics, etc. This article briefly explains how data analytics is used

healthcare systems. Health the of in care is process maintaining and improving the health of an individual by prevent ing, diagnosing and treatingthe diseases, illness and other physical and mental imbalances in people. Data analytics is classified into four types and they are descriptive, diagnostic, predictive and prescriptive analysis. Health care makes use of prescriptive analysis to arrive atthe best results and make better decisions. Big data plays a major role in data analytics. It helps the data analysts to collect data from the patients and store themefficiently. After the completion of this whole reader will article, the be able to getthe collective idea about health care analytics.[5]

a. EXISTINGPROBLEM

- i. Low accuracy in prediction
- ii. No feature extractiondone
- iii. High complexity

b. **REFERENCES**

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- [2]. From: "Book of Data Analytics" Chandank Reddy (Wayne State University) CharuC. Aggarwal (Watson Research Center)
- [3]. From: Hoyt,RE,Yoshihashi,A,Eds.(2014).Health Informatics:Practical Guide for Healthcare and formation Technology Professionals,SixthEdition.Pensacola,FL,Lulu.com.

- [4]. Panagiota Galetsia , Korina Katsaliakia , Sameer Kumarb,* a Sc hool of Economics, BusinessAdministration & Legal Studies, Interna tional Hellenic University, 14th km Thessaloniki-N. Moudania, Thessaloniki, 57001, Greece b Opus College of Business, University of St. Thomas Minneapolis Campus, 1000 LaSalle Avenue, SchulzeHall 435, Minneapolis, MN 55403, USA
- [5]. from"n book: Innovative Data Communication Technologies and Application (pp.83-96)" P. Nagaraj-Professor (Assistant) at Kalasalingam University
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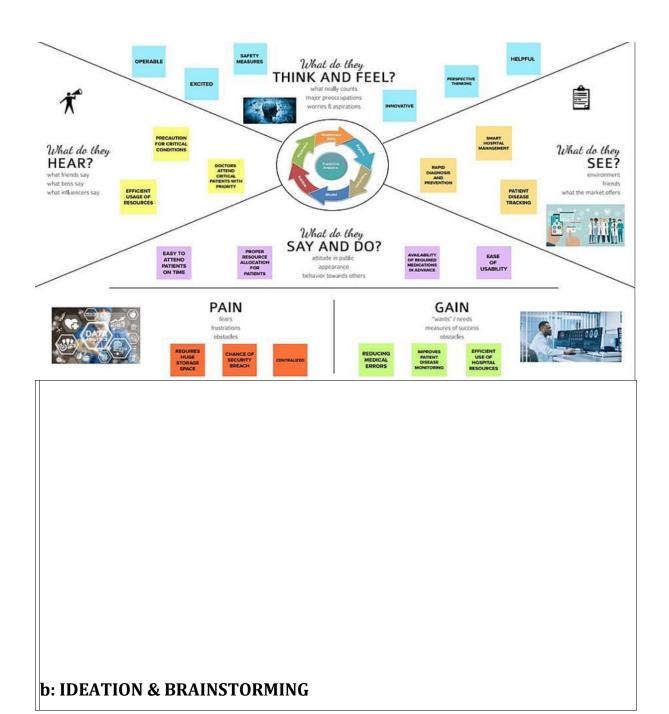
[16]. J. Rapoport, D. Teres, Y. Zhao, S. Lemeshow Length of stay d ata as a guide tohospital economic performance for icu patients Med Care, 41 (3) (2003), pp. 386-397

c. PROBLEMSTATEMENT AND DEFINITION

- The aim is to accurately predict the Length of Stay fo r each patienton case bycase basis so that the Hospitals can use this information for optimal resource allocation and better functioning.
- ii. The length of stay is divided into 11 different classes ranging from 0-10 days to more than 100 days.

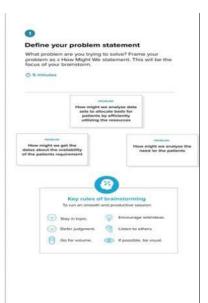
CHAPTER 3 IDEATION & PROPOSED SOLUTION

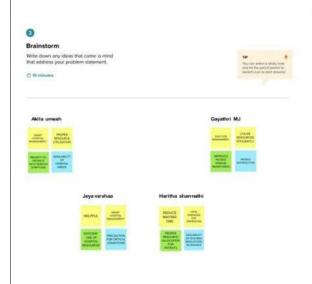
a. EMPATHY MAP CAMPUS

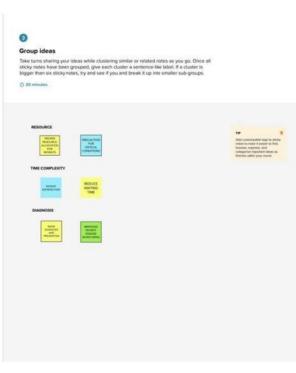


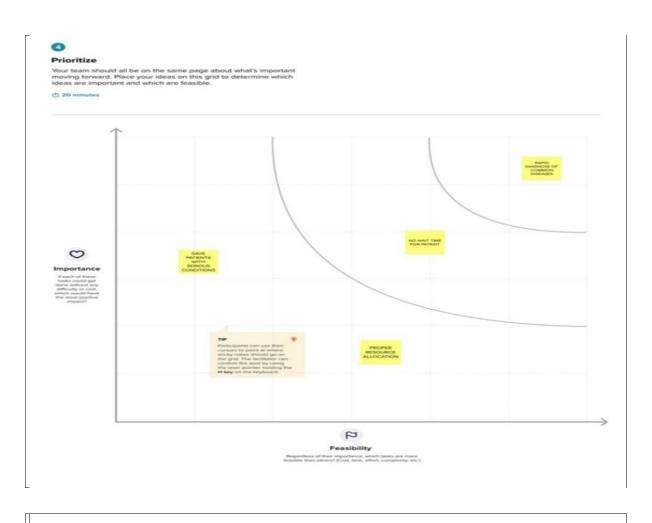


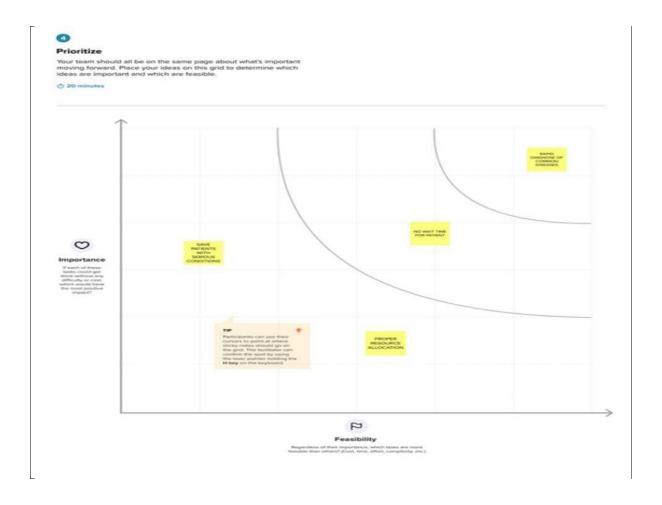












c:PROPOSED SOLUTION

Predict the length of stay of patients.

The length of the stay can be predicted using either Random forest or Decision Tree for more accuracy. Certain parameters like age, stage of the diseases, disease diagnosis, severity of illness, type of admission, facilities allocated, etc., are used for prediction. IBM Cognos will be used for data analytics.

The model will be trained using collab.it predicts the length of stay(LOS) of the patients with more accuracy. As a result proper resources and therapy can be provided. Patients can get proper treatmentand better medicalc are than beforewhich helps them for their faster recovery. So the prediction minimizes the overflow of patients and helps in resource management and optimize their resource utilization. Hence this leads to faster the recovery and lower expenses fortreatment. It improves the trust in hospital management.

It avoids the major risk of spreading infection among the hospital staff. This leads to overall safety of hospital staff and patients. Resource consumption is optimized. This model can be used by all government hospitals, private hospitals, and this model is also trained with the real world hospital survey for better prediction smallclinics.

Length of the stay will be predicted with more accuracy. This model predicts the length of the stay for all kinds of patients and predicts with more accuracy.

d:PROBLEM SOLUTION FIT

1. CUSTOMER SEGMENT(S)

- Patients
- Hospital Management

6. CUSTOMER STATE

Inadequate information about availability of required

5.

- > Tableau cloud
- Text Mining
- > Information Retrieval

2. PROBLEMS / PAINS

- Effective Resource allocation
- Reduce Waiting time for patients in Hospitals

9. ROOT / CAUSE of every problem

 No proper system or less efficient Prediction System

7. BEHAVIOR

Tracking the information with the available Technologies

J.

- Covid-19 Pandemic
- Emergency Situations

4.

- BEFORE: Feeling bad & Frustrated
- AFTER: Feeling better &Relaxed

10. YOUR SOLUTION

Existing: ratio of discharges in given period of time to no. of beds in hospital during the time period

Proposing: Using predictive analysis powered by AI

CHANNELS OF BEHAVIOR

ONLINE: Use of data from all region (data Exploration)

OFFLINE: Use of data Collect from nearby facilities

CHAPTER 4 REQUIREMENT ANALYSIS

a:FUNCTIONAL REQUIREMENT

FR No.	Functional Requireme nt(Epic)	Sub Requirement (Story/ Sub-Task)
FR- 1	User Registration	Registration throughForm Registration throughGmail
FR- 2	User Confirmatio n	Confirmation via Email Confirmation via Messag e
FR-3	Interoperability	Dashboard helps to share the patient's information interoperable to t he hospitals in timely manner.
FR- 4	Accuracy	Dashboard helps predict patient's Healthrisk saccurately base don LOS (Length of Stay).
FR- 5	Compliance	The compliance of a dashboard is like to use veryinteractively in realtime-by the hospitals.

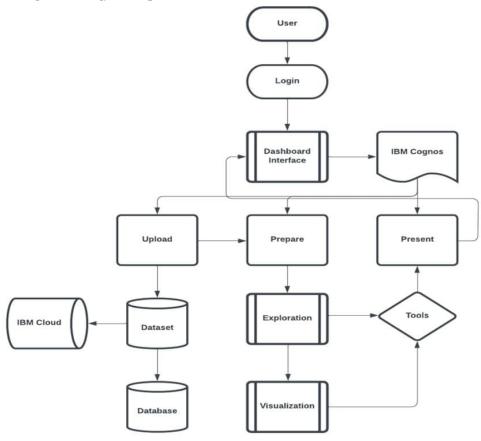
FR-	Concise	These dashboards are clear, intuitive, and customizable and intera
6		ctive in manner.

a. NON FUNCTIONAL REQUIREMENT

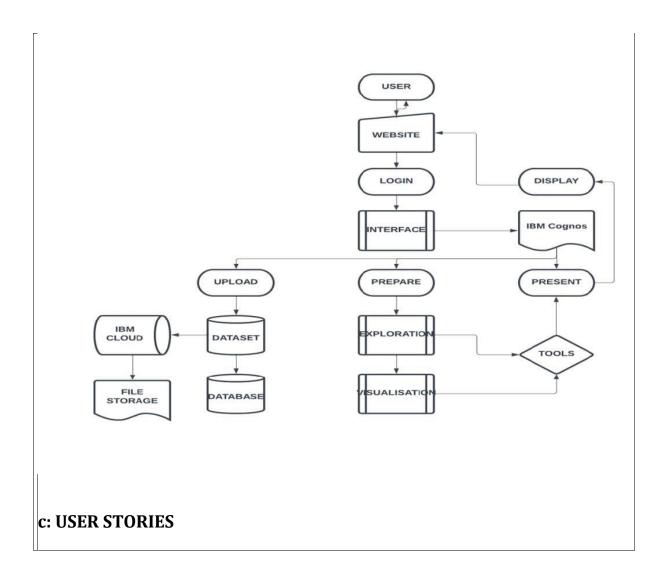
FR No	Non- Functional R equirement	Description
NF R-1	Usability	This Dashboards are designed to offer a comprehensive overview of patient's LOS, and do sothrough the use of d atavisualization tools like chartsand graphs.
NF R-2	Security	The Dashboard helpsto indicate the current threatlevelto the Hospitals; an indication of events and incidents that have occurred; a record of authentication errors; unauthorized access
NF R-3	Reliability	This dashboard will be consistent and reliable to the usersand helps th euser to use in effective, efficientand reliablemanner.
NF R-4	Performance	This dashboard canscan the backend users and analyzingthe frequency in which they visit the dashboard helps understand how useful and helpful the data displayed is for tasks.

CHAPTER 5 PROJECT DESIGN

a: DATA FLOW DIAGRAMS



b:SOLUTION & TECHNICAL ARCHITECTURE



User type	Functional requireme nt (epic)	User story numb er	User story/task	Acceptance criteria	Priority	Release
Customer	Registrati on	USN-1	As a user i an login to my dashboard	I can access dashboard	High	Sprint-1
	Collect data	USN-1	As a user i can provide my details	I can view my data	Medium	Sprint-1
Admin	Collect data	USN-2	As an analyst i collect the data		High	Sprint-2
	Analyze	USN-2	As an analyst i analyze the given dataset	I can analyze the dataset	High	Sprint-2
	Upload data	USN-3	As an analyst i can upload datasets	I can upload the dataset	Medium	Sprint-3
	Prediction	USN-6	As an analyst i will predict the length of stay of patient	I can predict the length of stay	High	Sprint-4
Visualization	Prepare data	USN-4	As an admin i prepare the data for visualization	I can prepare the data with visualization techniques.	High	Spint-3
	Dashboard	USN-5	As an admin i present the data that is visualized	I can present the result	High	Sprint-4

CHAPTER 6

PROJECT PLANNING &SCHEDULING

a: SPRINT PLANNING & ESTIMATION

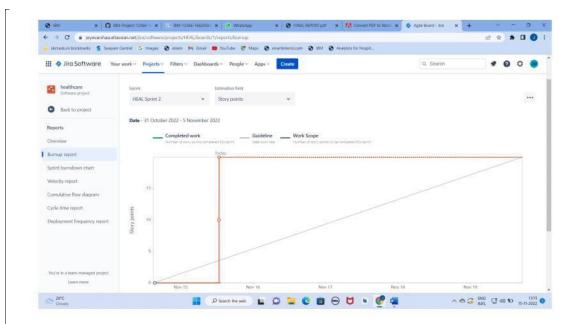
Sprint	Functional Requireme nt (Epic)	User Story Number	User Story/ Task	Story Points	Priority	Team Members
Sprint-1	Registration	USN-1	As a health care provider can create account in IBM cloud and the data are collected.	20	High	Haritha Shanmathi S Jeya Varshaa M
sprint-2	Analyze	USN-2	As a healthcare provider all data are collected is cleaned and uploaded in the database or IBM cloud	20	medium	Haritha Shanmathi S Akila Umesh

b:SPRINT DELIVERY SCHEDULE

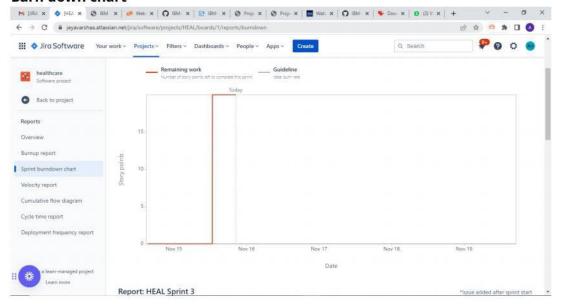
Sprint		User Story Number		Story Points	Priority	Team Members
sprint-3	Dashbord	USN-3	As a healthcare provider I can use my account in my dashboard for uploading dataset	10	medium	Haritha Shanmathi S Gayathri M J
Sprint-3	Visualization	USN-4	As a health care provider I can prepare data forVisualization.	10	High	Haritha Shanmathi S Akila Umesh
Sprint-4	Visualization	USN-5	As a health care provider I can present data in my dashboard.	10	High	Haritha Shanmathi S Jeya Varshaa M
Sprint-4	Prediction	USN-6	As a health care provider I can predict the length of stay	10	High	Haritha Shanmathi S Gayathri M J

c:REPORTS FROM JIRA

Burnup chart

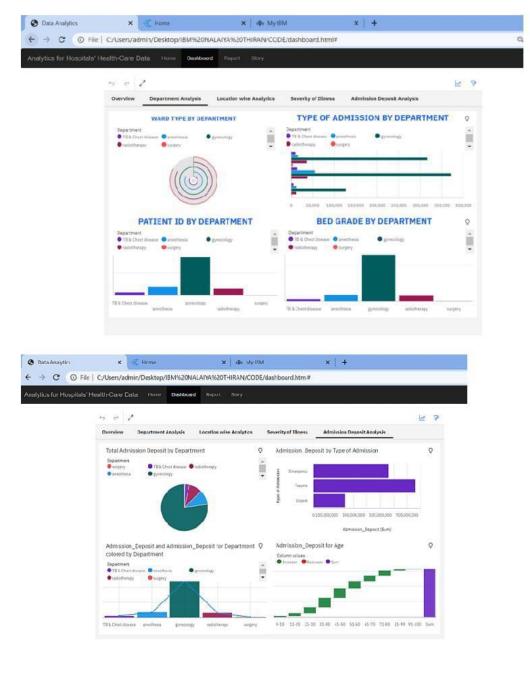


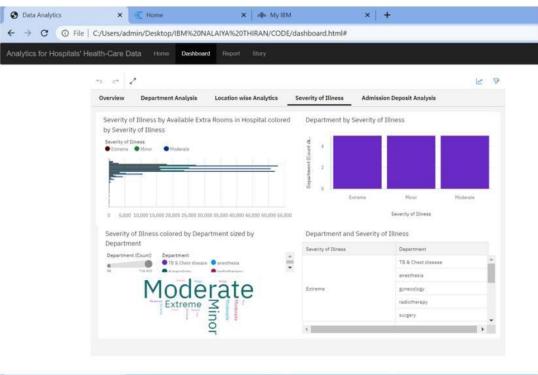
Burn down chart

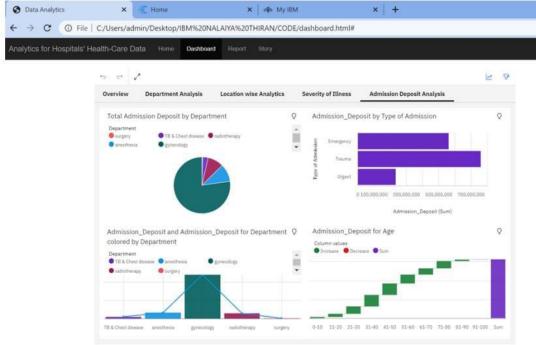


CHAPTER 7 CODING & SOLUTIONING

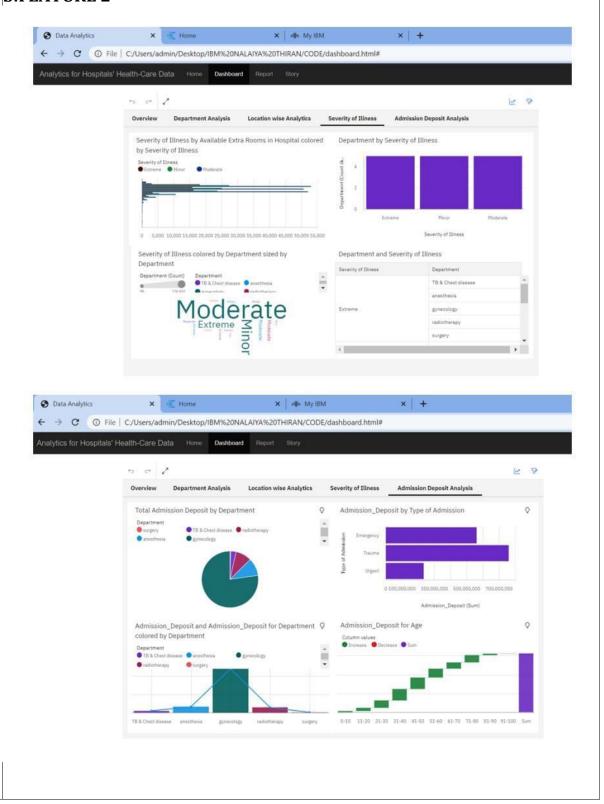
a:FEATURE 1

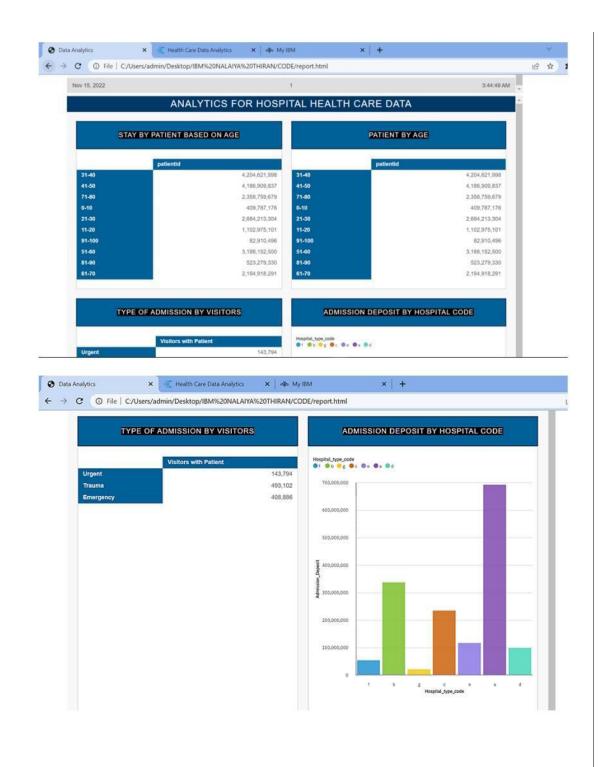


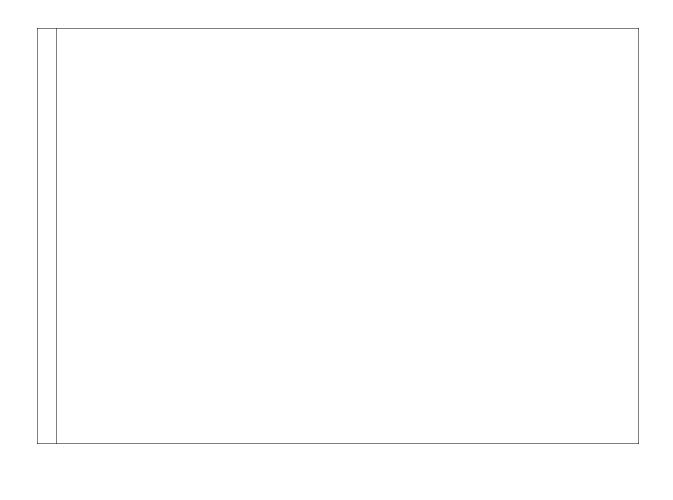


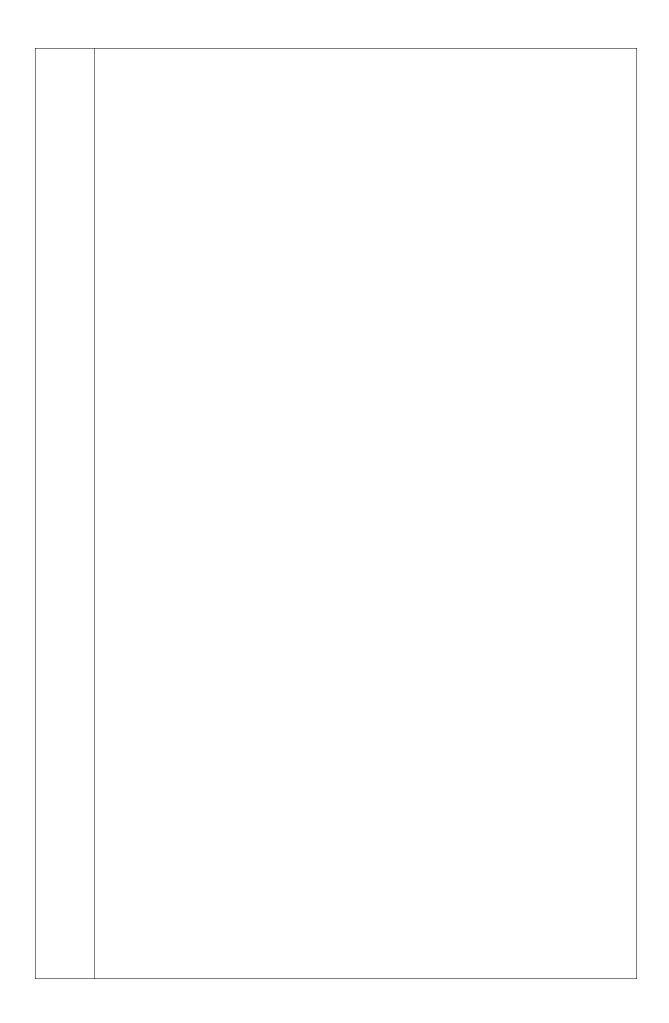


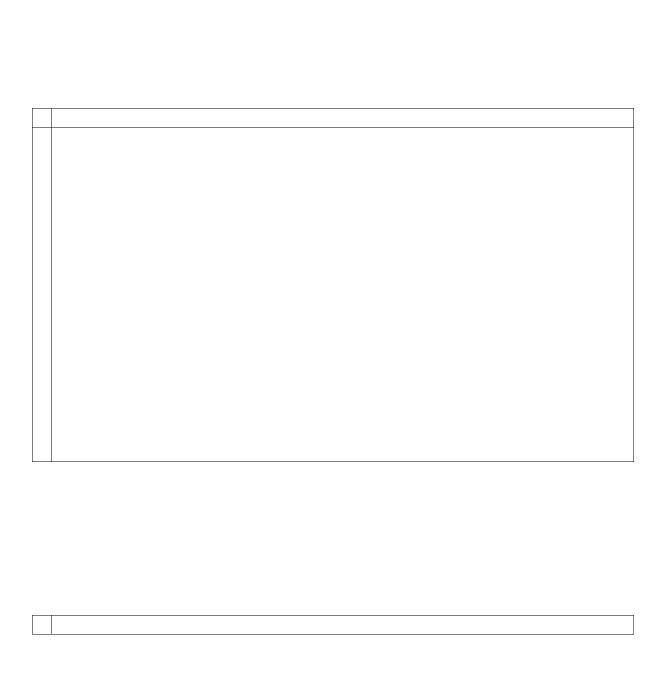
b:FEATURE 2

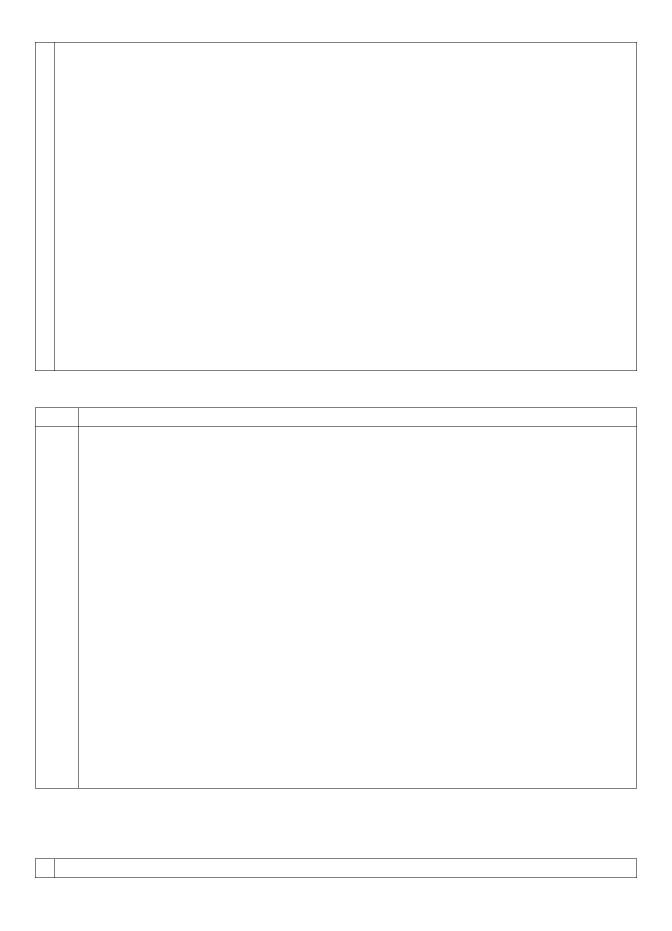


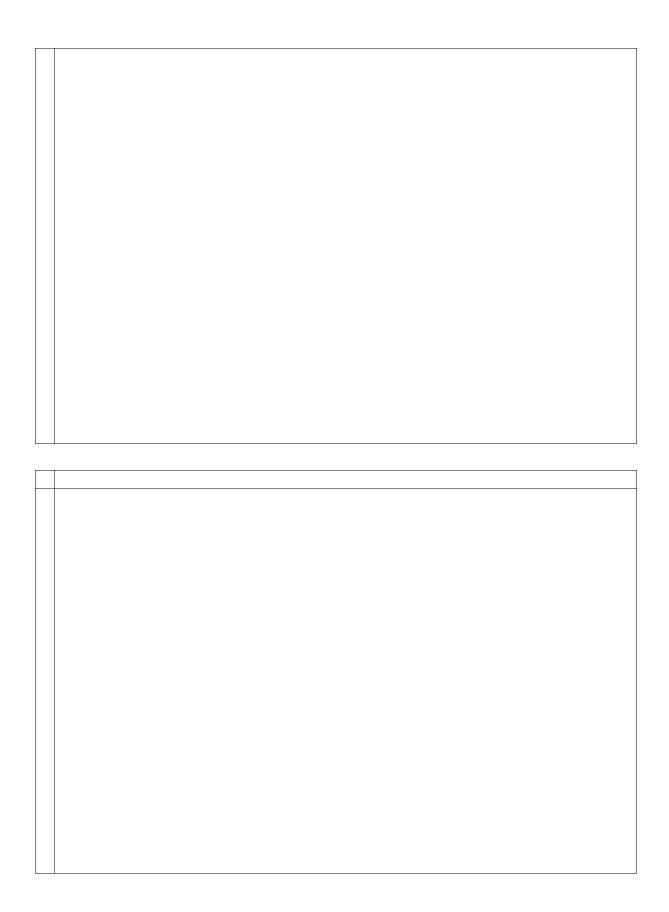












CHAPTER 8 TESTING

a: TEST CASES

- verify user is able to see home page
- verify user is able to see dashboard page
- verify user is able to navigate to story page
- verify filters are working

a:USER ACCEPTANCE TESTING

1. Purpose of Document

The purpose of this document is to briefly explain the test coverage and open issues of the [ProductName] project at the time of the release to User Acceptance Testing (UAT).

2. Defect Analysis

This report shows the number of resolved or closed bugs at each severity level, and how they were resolved

Resolution	Severity 1	Severity 2	Severity 3	Severity 4	Subtotal
By Design	8	5	0	3	16
Duplicate	1	0	5	0	6
External	0	3	2	1	6
Fixed	13	4	3	16	36
Nat Reproduced	0	1	0	0	1
Skipped	0	1	0	1	2
Won't Fix	1	4	2	1	8
Totals	23	18	12	22	75

3. Test Case Analysis

This report shows the number of test cases that have passed, failed, and untested

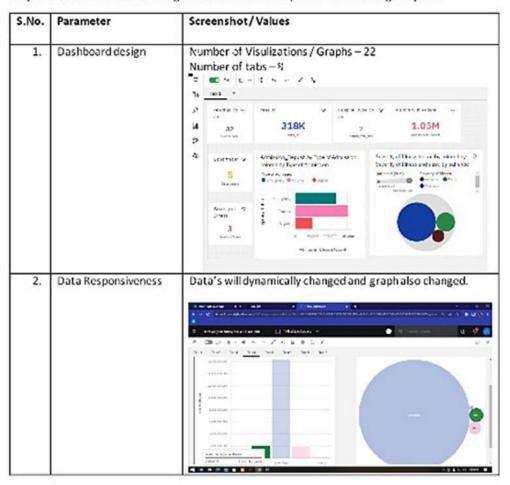
Section	Total Cases	Not Tested	Fall	Pass
Print Engine	9	0	0	9
Client Application	43	0	0	43
Security	1	0	0	1
Outsource Shipping	1	0	0	1

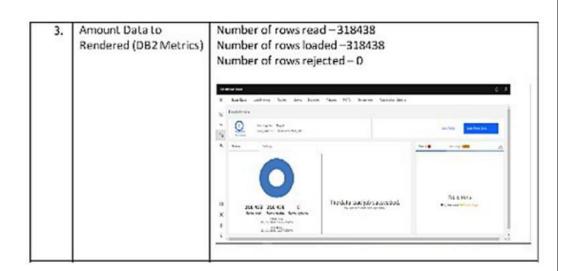
CHAPTER 9 RESULTS a: PERFORMANCE METRICS

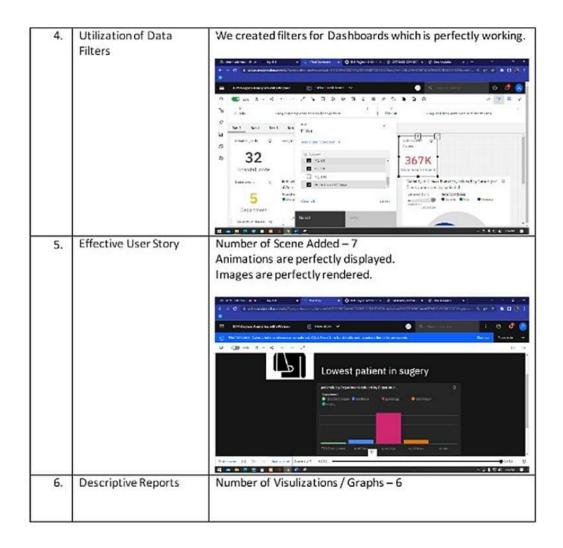


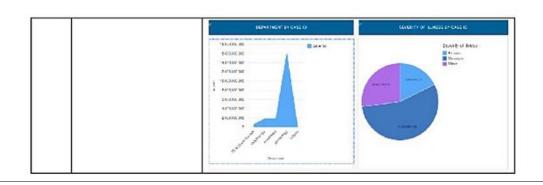
Model Performance Testing:

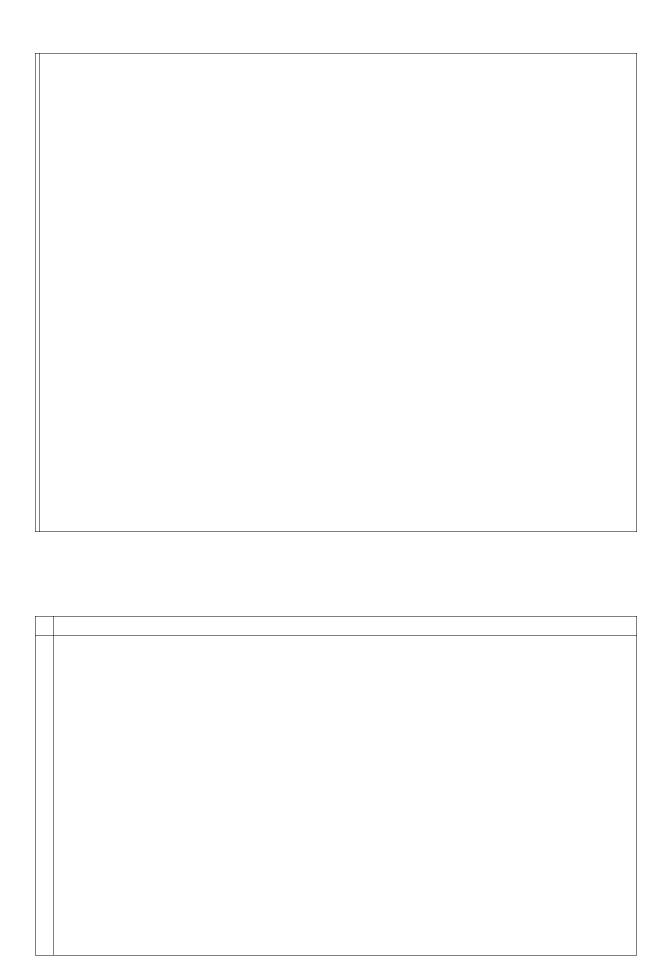
Project team shall fill the following information in model performance testing template.











CHAPTER 10

ADVANTAGES AND DISADVANTAGES

ADVANTAGES:

- i. Cost-effective use of technology
- ii. Improved project management
- iii. Sustaining the improvements in the result
- iv. Boosting hospital capacity
- v. Enhance the qualityand efficiency of healthcare
- vi. benefit areas like emergency preparation, charting, administration, compliance, and financial management.
- vii. Analysing clinical data to improvemedical research
- viii. Using patient data to improve health outcomes
 - ix. Gaining operational insights from healthcareprovider data
 - x. Improved staffing throughhealth business management analytic s
 - xi. Early detection of disease.
- xii. Prevention of unnecessary doctor's visit
- xiii. Discovery of new drugs.
- xiv. More accurate calculation of health insurancerates.
- xv. More effective sharing of patient data

DISADVANTAGES:

REPLACING MEDICAL PERSONNEL:

Application of technology in every sphere of human life is improving the way things are done. These technologies are are also posing some threat to world ofworks. Robotics are replacing human labour.

DATA SAFETY:

Data security is another challenge in applying big data in healthcare. Big datastorage is usually targets of hackers. This endangers the safety of medical data. Healthcare organisations are very much concerned about the safety of patients' sensitive personal data. For this, all healthcare applications must meet the requirement for data security and be HIPAA compliant before they can be deployed for healthcare services.

PRIVACY:

One of the major drawbacks in the application of big data in healthcare industry is the issue of lack of privacy. Application of big data technologies involves monitoring of patient's data, tracking of medical inventoryand assets, o rganizing collected data, and visualization of data on the dashboard and the reports. So visualization of sensitive medical data especially that of the patients creates negative impression of big data as it violets privacy

MAN POWER:

Applying big data solutions in healthcare requires special skills, and such kills are scarce. Handling of big data requires the combination of medical, technological and statistical knowledge.

CHAPTER 11

CONCLUSION

The impact of data analytics in healthcare has already ma de a substanticcal difference in the ability of healthcare providers to offer patients high-quality care inan efficient, cost-effective manner. However, the role of data analytics in improving patientout comes and healthcare processes continues to grow and expand as moretypes of data become available and new tools are developed that make the results of the analytics clear and easy for healthcare professionals to access.

Realizing the potential of data analytics to transform the healthcare industry begins by understanding how the technology can be applied to address healthcare providers' challenges, including staff recruitment and utilization, operational efficiencies, and enhanced patientexperiences. Patient-centered healthcare depends on knowing what patients want and

need. Data analytics holds the key to unlockingthis vital information.

CHAPTER 12

FUTURE SCOPE

Artificial Intelligence (AI) will play a significant role in data analytics in

healthcare for the next decade. For example, the field of AI-enabled clinical decisionsupport is just emerging. This type of support can fit compare patients who similar profiles within a system, then it can alert doctors to trends in d ata that may have been overlooked. The use of big data in healthcare will include testing for drug interactions that small studies are catch unlikely to and prevent patients from takingharmful drug combinations.

Decisions made by physicians, like what test or treatments to give a particular patient, makeup 80-90% of all healthcare spending, so using artificial intelligence to make more educated decisions will bring down healthcare costs. It's crucial to have informed leaders at the vanguard of these innovations in healthcare.

CHAPTER 13

APPENDIX

SOURCE PAGE:

HOMEPAGE:

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target=" blank"><strong>IBM Login</strong></a>
      <h1>Analytics For Hospitals' Health-Care Data</h1>
          <h2>Team ID: PNT2022TMID29634</h2>
          <h3>Team Members</h3>
          <h4>Dilli Prasath S - 310819104023<br>
              Dhakshnamoorthy B - 310819104020<br>
              Deepika K - 310819104019<br>
              Afra Jabeen S - 310819104004</h4>
          Category: Data Analytics<br><br><br>
            <strong>Skills Required:</strong><br>
            Exploratory Data Analysis,IBM Cloud<br><br>
            <strong>Project Description:</strong><br>
            Recent Covid-19 Pandemic has raised alarms over one of the most
overlooked areas to focus: Healthcare<br>
Management. While healthcare management has various use cases for using data
science, patient length of stay is one critical parameter to observe and
predict if one wants to improve the efficiency of the healthcare management in
a hospital.<br>
This parameter helps hospitals to identify patients of high LOS-risk (patients
who will stay longer) at the time of admission. Once identified, patients with
high LOS risk can have their treatment plan optimized to minimize LOS and
lower the chance of staff/visitor infection. Also, prior knowledge of LOS can
aid in logistics such as room and bed allocation planning. <br>
Suppose you have been hired as Data Scientist of Health Man a not for profit
organization dedicated to manage the functioning of Hospitals in a
professional and optimal manner.<br><br>>
<strong>Goal:</strong><br>
The goal is to accurately predict the Length of Stay for each patient on case
by case basis so that the Hospitals can use this information for optimal
resource allocation and better functioning. The length of stay is divided into
11 different classes ranging from 0-10 days to more than 100 days.<br>
<strong>Technical Architecture:</strong><br><br>
<img src="ibm image.png" alt="IBM Cognos Analytics">
        <style>
url('https://fonts.googleapis.com/css2?family=Poppins:wght@300;400;500;600&dis
play=swap');
body {margin: 10px;;
```

```
padding: 40PX;
    box-sizing: border-box;
    font-family: 'Poppins', sans-serif;
    background: -webkit-linear-gradient(right, #a445b2, #9542fa);}
h2,h3,h4 {
     text-align: center;
ul {
 list-style-type: none;
 margin: 5px;
 padding: 8px;
 overflow: hidden;
  background-color: #333;
 border-radius: 12px;
 position: fixed;
 top: 0;
 width: 100%;
li {
 float: left;
 display: flex;
   justify-content: center;
   align-items: center;
   flex-direction: column;
   text-decoration: none;
   transition: all 0.5s cubic-bezier(0.68, -0.55, 0.265, 1.55);
li a {
 display: block;
 color: rgb(246, 239, 239);
 text-align: center;
 padding: 14px 14px 16px 16px;
 text-decoration:none;
li a:hover{
 background: -webkit-linear-gradient(left, #f1dbf5, #b280ee);
  border-radius: 12px;
</style>
 </body>
</html>
```

DASHBOARD PAGE:

```
<!DOCTYPE html>
<html lang="en" dir="ltr">
   <head>
     <meta charset="utf-8">
     <title>Analytics For Hospital Data - Dashboard</title>
     <link rel="stylesheet" href="#">
     <meta name="viewport" content="width=device-width, initial-scale=1.0">
      <link href='https://unpkg.com/boxicons@2.1.2/css/boxicons.min.css'</pre>
rel='stylesheet'>
   </head>
   <body>
    <l
       <a class="active" href="Home.html"><strong>Home</strong></a>
       <a href="dashboard.html"><strong>Dashboard</strong></a>
       <a href="Report.html"><strong>Report</strong></a>
       <a href="Stories.html"><strong>Stories</strong></a>
     <h1>Analytics For Hospitals' Health-Care Data - Dashboard</h1>
      <iframe
src="https://eu1.ca.analytics.ibm.com/bi/?perspective=dashboard&pathRef=.m
y_folders%2FNew%2Bdashboard&closeWindowOnLastView=true&ui_appbar=false
&ui navbar=false&shareMode=embedded&action=view&mode=dashboard
&subView=model0000018470453873_00000002" width="1300" height="550"
frameborder="10px" gesture="media" allow="encrypted-media"
allowfullscreen=""></iframe>
href="https://eu1.ca.analytics.ibm.com/bi/?perspective=dashboard&pathRef=.my f
olders%2FNew%2Bdashboard&action=view&mode=dashboard&subView=model0000018470453
873_00000002" target="iframe_a"><strong>IBM Cognos Analytics -
Dashboard</strong></a>
     <style>
       @import
url('https://fonts.googleapis.com/css2?family=Poppins:wght@300;400;500;600&dis
play=swap');
body {margin: 10px;;
padding: 40PX;
box-sizing: border-box;
font-family: 'Poppins', sans-serif;
background: -webkit-linear-gradient(right, #a445b2, #9542fa);}
```

```
iframe{
    display: flex;
p{
    text-align: center;
ul {
list-style-type: none;
margin: 5px;
padding: 8px;
overflow: hidden;
background-color: #333;
border-radius: 12px;
position: fixed;
top: 0;
width: 100%;
li {
float: left;
display: flex;
justify-content: center;
align-items: center;
flex-direction: column;
text-decoration: none;
transition: all 0.5s cubic-bezier(0.68, -0.55, 0.265, 1.55);
li a {
display: block;
color: rgb(246, 239, 239);
text-align: center;
padding: 14px 16px;
text-decoration:none;
li a:hover{
background: -webkit-linear-gradient(left, #f1dbf5, #b280ee);
border-radius: 12px;
</style>
</body>
</html>
```

REPORT PAGE:

```
<!DOCTYPE html>
<html lang="en" dir="ltr">
   <head>
     <meta charset="utf-8">
     <title>Analytics For Hospital Data - Dashboard</title>
     <link rel="stylesheet" href="#">
     <meta name="viewport" content="width=device-width, initial-scale=1.0">
      <link href='https://unpkg.com/boxicons@2.1.2/css/boxicons.min.css'</pre>
rel='stylesheet'>
   </head>
   <body>
   <l
       <a class="active" href="Home.html"><strong>Home</strong></a>
       <a href="dashboard.html"><strong>Dashboard</strong></a>
       <a href="Report.html"><strong>Report</strong></a>
       <a href="Stories.html"><strong>Stories</strong></a>
     <h1>Analytics For Hospitals' Health-Care Data - Report</h1>
      <iframe
src="https://eu1.ca.analytics.ibm.com/bi/?pathRef=.my_folders%2FData%2BModule%"
2FTrained%2B-
%2Breport&closeWindowOnLastView=true&ui appbar=false&ui navbar=fal
se& shareMode=embedded& action=edit" width="1300" height="550"
frameborder="0" gesture="media" allow="encrypted-media"
allowfullscreen=""></iframe>
href="https://eu1.ca.analytics.ibm.com/bi/?pathRef=.my folders%2FData%2BModule
%2FTrained%2B-%2Breport&action=edit" target="iframe a"><strong>IBM Cognos
Analytics - Report</strong></a>
     <style>
       @import
url('https://fonts.googleapis.com/css2?family=Poppins:wght@300;400;500;600&dis
play=swap');
body {margin: 10px;;
padding: 40PX;
box-sizing: border-box;
font-family: 'Poppins', sans-serif;
background: -webkit-linear-gradient(right, #a445b2, #9542fa);}
iframe{
   display: flex;
```

```
p{
   text-align: center;
ul {
list-style-type: none;
margin: 5px;
padding: 8px;
overflow: hidden;
background-color: #333;
border-radius: 12px;
position: fixed;
top: 0;
width: 100%;
li {
float: left;
display: flex;
justify-content: center;
align-items: center;
flex-direction: column;
text-decoration: none;
transition: all 0.5s cubic-bezier(0.68, -0.55, 0.265, 1.55);
li a {
display: block;
color: rgb(246, 239, 239);
text-align: center;
padding: 14px 16px;
text-decoration:none;
li a:hover{
background: -webkit-linear-gradient(left, #f1dbf5, #b280ee);
border-radius: 12px;
</style>
</body>
</html>
```

STORY:

```
<!DOCTYPE html>
<html lang="en" dir="ltr">
   <head>
      <meta charset="utf-8">
     <title>Analytics For Hospital Data - Stories</title>
     <link rel="stylesheet" href="#">
     <meta name="viewport" content="width=device-width, initial-scale=1.0">
      <link href='https://unpkg.com/boxicons@2.1.2/css/boxicons.min.css'</pre>
rel='stylesheet'>
   </head>
   <body>
    <l
       <a class="active" href="Home.html"><strong>Home</strong></a>
       <a href="dashboard.html"><strong>Dashboard</strong></a>
       <a href="Report.html"><strong>Report</strong></a>
       <a href="Stories.html"><strong>Stories</strong></a>
     <h1>Analytics For Hospitals' Health-Care Data - Report</h1>
      <iframe
src="https://eu1.ca.analytics.ibm.com/bi/?perspective=story&pathRef=.my_fo
lders%2FTrained%2BData%2B-
%2BStory&closeWindowOnLastView=true&ui appbar=false&ui navbar=fals
e& shareMode=embedded& action=view& sceneId=model00000184991994ba_000
00000&sceneTime=0" width="1300" height="550" frameborder="10"
gesture="media" allow="encrypted-media" allowfullscreen=""></iframe>
href="https://eu1.ca.analytics.ibm.com/bi/?perspective=story&pathRef=.my folde
rs%2FTrained%2BData%2B-
%2BStory&action=view&sceneId=model00000184991994ba 00000000&sceneTime=0"
target="iframe_a"><strong>IBM Cognos Analytics - Stories</strong></a>
     <style>
url('https://fonts.googleapis.com/css2?family=Poppins:wght@300;400;500;600&dis
play=swap');
body {margin: 10px;;
padding: 40PX;
box-sizing: border-box;
font-family: 'Poppins', sans-serif;
background: -webkit-linear-gradient(right, #a445b2, #9542fa);}
iframe{
```

```
display: flex;
p{
    text-align: center;
ul {
list-style-type: none;
margin: 5px;
padding: 8px;
overflow: hidden;
background-color: #333;
border-radius: 12px;
position: fixed;
top: 0;
width: 100%;
li {
float: left;
display: flex;
justify-content: center;
align-items: center;
flex-direction: column;
text-decoration: none;
transition: all 0.5s cubic-bezier(0.68, -0.55, 0.265, 1.55);
li a {
display: block;
color: rgb(246, 239, 239);
text-align: center;
padding: 14px 16px;
text-decoration:none;
li a:hover{
background: -webkit-linear-gradient(left, #f1dbf5, #b280ee);
border-radius: 12px;
</style>
</body>
</html>
```

Importing required Packages

72]: import numpy as np import pandas as pd import matplorlib.pyplot as plt import seaborn as sns Nmatplorlib inline cns.set_typle("darkgrid") plt.style.use("dark_background")

Importing the dataset

In [73]: train = pd.read_csv('/content/input/training_data.csv')
test = pd.read_csv('/content/input/testing_data.csv')
Paramters_Description = pd.read_csv('/content/input/testing_target.csv')
sample = pd.read_csv('/content/input/testing_target.csv')

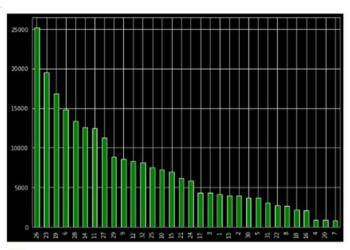
Viewing dataset

[74]:	train.head(5)													
t[74]:		case_id	Hospital_code	Hospital_type_code	City_Code_Hospital	Hospital_region_code	Available_Extra_Rooms_in_Hospital	Department	Ward_Type	Ward_Facility_Code	Bed_Grade			
	0	1	8	¢	3	z	3	radiotherapy	R	F	2.0			
	1	2	2	c	5	Z	2	radiotherapy	\$	F	2.0			
	2	3	10	ė	1	х	2	anesthesia	\$	Ē	2.0			
	3	4	26	b	2	Y	2	radiotherapy	R	D	2.0			
	4	5	26	b	2	Y	2	radiotherapy	2	D	2.0			

Dataset Column Description

Paramters_Description

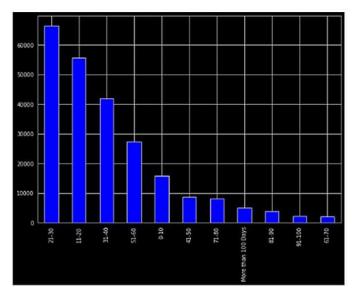
Column Description	Column	
case_id It is identity number given by hospital admin	case_id	0
pital_code It is the code (identity number) given to the	Hospital_code	1
type_code It is the unique code given to the type of ho	Hospital_type_code	2
le_Hospital It is the code given to the city where the ho	City_Code_Hospital	3
gion_code It is the code given to the region where the I	Hospital_region_code	4
n_Hospital It will display the number of rooms that are	Available_Extra_Rooms_in_Hospital	5
epartment. The department that is overlooking the patien	Department	6
Ward_Type The unique code given to the type of ward to v	Ward_Type	7
cility_Code The unique code given to the facility in the v	Ward_Facility_Code	8
Bed_Grade It is the quality or condition of the bed in	Bed_Grade	9
patientid It is the unique identity value given to the	patientid	10
de_Patient It is the unique identity code given to the o	City_Code_Patient	11
Admission It is the admission type registered in the ho	Type_of_Admission	12
_of_Illness It is the severity level of the patients' illn	Severity_of_Illness	13
ith_Patient Number of the visitors with the patients to to	Visitors_with_Patient	14
Age It is the age of patients. It is given in per	Age	15
on_Deposit It is the deposit amount that the patient paid	Admission_Deposit	16
Stay It is the Length Of Stay (LOS) of patients.	Stay	17



Stav

train.Stay.value_counts()

21-30	66497
11-20	55691
31-40	41951
51-60	27458
0-10	15866
41-50	8665
71-80	8861
More than 100 Days	5029
81-90	3821
91-100	2179
61-70	2090
Name: Stay, dtype:	int64



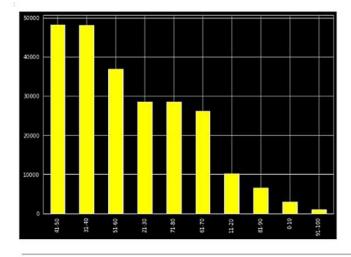
Age

train.Age.value_counts()

41-50 31-40 51-60 21-30 71-80 61-70 11-20 48272 48106 36969 28555 28552 26139 10141

```
81-90 6578
0-10 3030
91-100 966
Name: Age, dtype: int64

#Age distribution
plt.figure(figsize=(10,7))
train.Age.value_counts().plot(kind="bar", color = ['Yellow'])
```

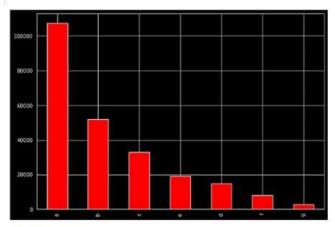


Hospital_type_code

```
train.Hospital_type_code.value_counts()
```

: a 107545 b 51925

```
c 32995
e 19105
d 14833
f 8166
g 2740
Name: Hospital_type_code, dtype: int64
  #Hospital_type_code distribution
plt.figure(figsize=(10,7))
train.Hospital_type_code.value_counts().plot(kind="bar", color = ["Red"])
```

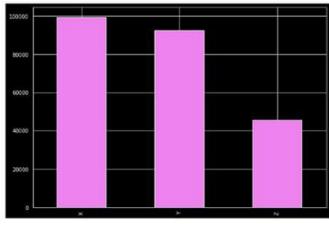


Hospital_region_code

```
train.Hospital_region_code.value_counts()
```

- : X
- X 99568 Y 92214 Z 45527 Name: Hospital_region_code, dtype: int64

```
#Hospital_region_code distribution
plt.figure(figsize=(10,7))
train.Hospital_region_code.value_counts().plot(kind="bar", color = ['Violet'])
```



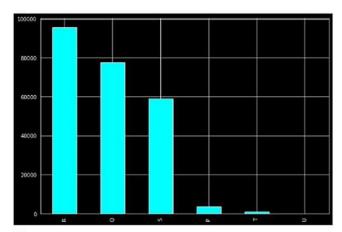
Available_Extra_Rooms_in_Hospital

```
train_Available_Extra_Rooms_in_Hospital.value_counts()
```

- 74877 68517 67756 13879 5344 4288 1876 622 144 46

```
R 95788
Q 77707
S 59022
P 3691
T 1092
U 9
Name: Ward_Type, dtype: int64
```

```
#Ward_Type distribution
plt.figure(figsize=(10,7))
train.Ward_Type.value_counts().plot(kind="bar", color = ['cyan'])
```



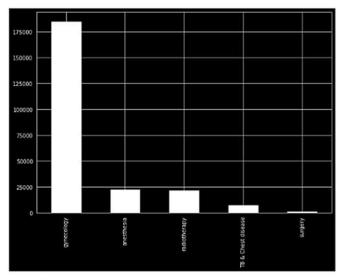
Ward_Facility_Code

```
train.Ward_Facility_Code.value_counts()
```

F 84438 E 41246

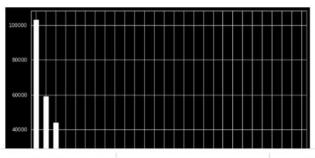
```
anesthesia 22557
radiotherapy 21725
T8 & Chest disease 7017
surgery 948
Name: Department, dtype: int64

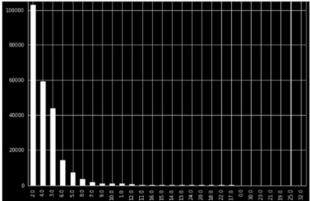
#Department distribution
plt.figure(figsize=(18,7))
train.Department.value_counts().plot(kind="bar", color = ['white'])
```



Ward_Type

train.Ward_Type.value_counts()



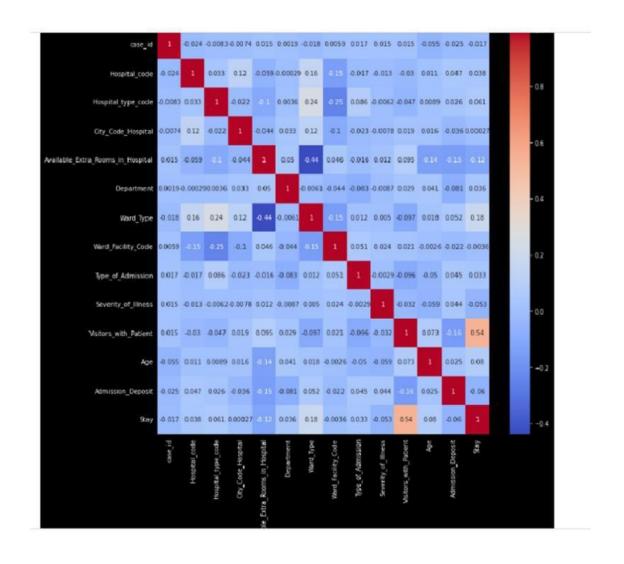


Severity of Illness

```
]: train.Severity_of_Illness.value_counts()
```

]: Moderate 134324 Minor 55665 Extreme 47319 Min 1 Name: Severity_of_Illness, dtype: int64

]: #Severity_of_Illness distribution
plt.figure(figsize=(18,7))
train.Severity_of_Illness.value_counts().plot(kind="bar", color = ['red'])



SSGitHub & Project Demo Links:

GithHub link: https://github.com/IBM-EPBL/IBM-Project-1054-1658337094

Project demo

link: https://drive.google.com/file/d/1YIteqP82M5z45KuksjTocswXXMJ

OtQ45/vie w?usp=sharing