SUMMER INTERNSHIP PROGRAM
HCG MANAVATA CANCER CENTER, NASHIK

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FOUNDER -
IN 2007, DR RAJ NAGARKAR ESTABLISHED MANAVATA CANCER CENTRE AS A COMPREHENSIVE CANCER CARE HOSPITAL IN NASHIK.
2010 – THIS ORGANISATION JOINED HANDS WITH HEALTHCARE GLOBAL ENTERPRISES PVT. LTD. TO BECOME HCG MANAVATA CANCER CENTRE (HCGMCC).

VISION-
WE AIM TO CHANGE ATTITUDES FROM IGNORANCE AND FATALISM TO UNDERSTANDING AND OPTIMISM BY PROVIDING QUALITY CANCER COMPASSIONATELY.

MISSION :
THIS ORGANISATION IS COMMITTED TO PROVIDE QUALITY CANCER CARE AND TO PROMOTE ACCOUNTABILITYY AND RATIONALITY IN HEALTHCARE.

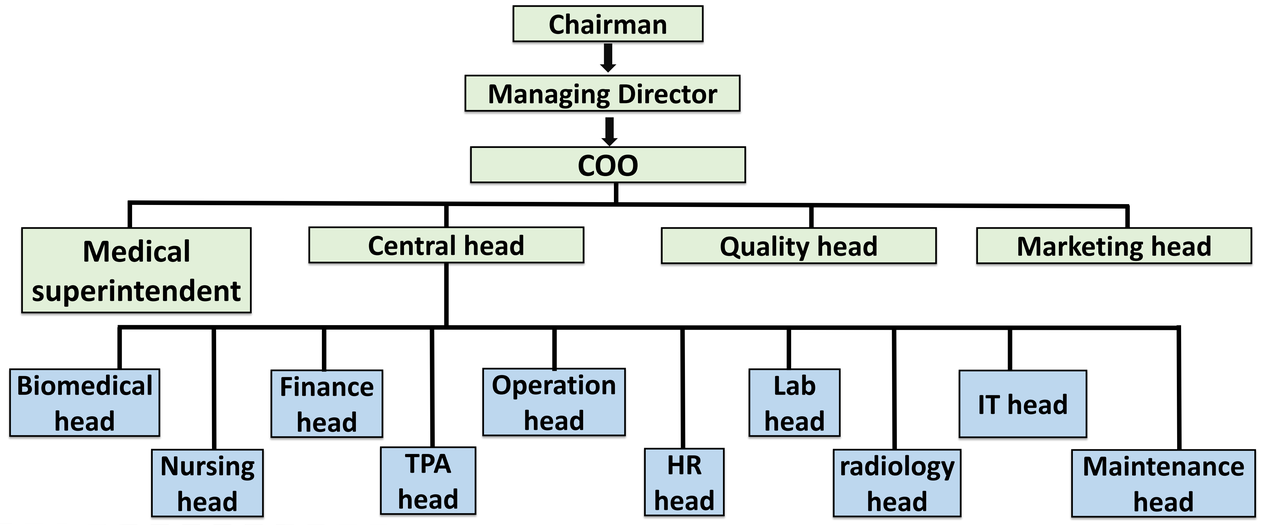
WEAKNESS -
- Lack of funding for needy BMT patients
- Regulatory Concerns
- Lack of cancer awareness in the community

THREAT -
- Government mandates
- External Condition
- Rate regulation by insurance companies
- Competition
- Economical Breakdown

S W O T

STRENGTH –
- Superior Cancer treatment
- Strong focus on coordinated care
- Highly visible website.
- Prominent center for robotics surgery in North Maharashtra
- Hold the dominant position and Onco Market share in North Maharashtra
- Good infrastructure
- Geographic Advantage (Niche Patient base)
- Technology Advantages

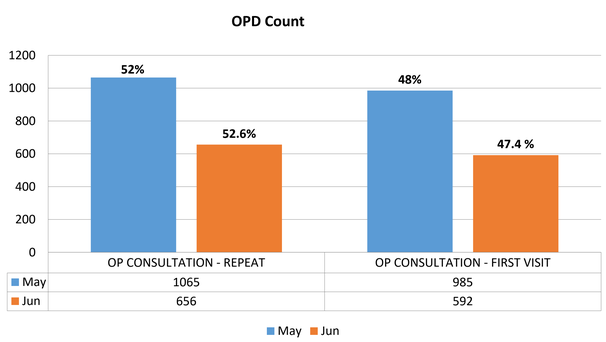
OPPORTUNITIES -
- Ability to develop additional cancer care setup in the peripheral area
- Starting a new 325 bedded quaternary care institute on the same premises
- Increase in the population provides an opportunity to serve more cancer patients in future
- Continued expansion of Digital Marketing

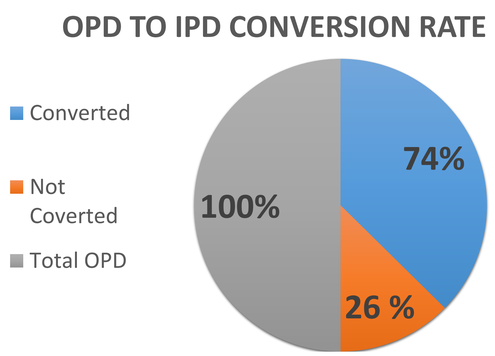


Theoretical work	Practical exposure
Patient centred care model	Patient-centered care was observed where organization is not only focus on diagnosing and treating disease but also considered overall well-being .
Ample knowledge and understanding of topic -	Hands-on experience and exposure to different situations.

USEFULNESS OF INTERNSHIP
- UNDERSTANDING THE WORKING MODEL OF CORPORATE HOSPITALS
- DEVELOPED & UNDERSTOOD THE IMPORTANCE OF PROFESSIONAL NETWORKING
- ENHANCEMENT OF INTERPERSONAL & TECHNICAL SKILLS
- EXPOSURE TO CORPORATE WORKING CULTURE
- LEARNED THE IMPORTANCE OF FEEDBACK

CHALLENGES
- LIMITED ACCESS TO CONFIDENTIAL FILES.
- DIFFICULTY IN COPING UP WITH LONG WORKING HOURS AS HOSPITAL DEMANDS LONG SHIFTS.
- PATIENT COUNSELLING DEALS WITH INFORMING THEM REGARDING THE PACKAGES AND CHARGES OF THE SURGERY. AT TIMES, IT WAS DIFFICULT TO HANDLE FINANCIAL LY ILL PATIENTS.





KEY LEARNINGS & VALUE ADDITION

WEEK 1

ORIENTATION SESSION AT HOSPITAL
- AN OVERVIEW OF INFRASTRUCTURE OF HOSPITALS
- ACCLIMITISATION WITH WORKING OF HOSPITAL

WEEK 2

NABH AUDIT
- CLOSELY OBSERVED NABH AUDIT
- SUGGESTED EVIDENT BASED ANSWERS IN CLOSING THE NC RAISED DURING AUDIT
- VISITED DAY CARE UNIT

WEEK 3

OPD DEPARTMENT
- MONITORED WORKING OF OPD
- SEGGREGATED TWO DESL IN OPD AS APPOINTMENT DESK & PRESCRIPTION DESK FOR SMOOTH RUNNING OF OPD
- PREPARED ROTA FOR EMPLOYEE & UPDATED IN ORGANISATION'S SYSTEM

WEEK 4-5

IPD & MRD DEPARTMENT
- LEARNED THE ENTIRE PROCESS OF ADMISSION TO DISCHARGE OF PATIENT IN IPD DEPARTMENT.
- LEARNED THE PROCEDURE OF KEEPING RECORDS IN MRD DEPARTMENT.
- MONITORED & MANAGED HEALTH CHECKUP CAMPS

WEEK 6-7

INFECTION CONTROL DEPARTMENT & BMW DEPARTMENT
- LEARNED ABOUT INFECTION CONTROL INDICATORS
- LEARNED SEGGREGATION OF BIOMEDICAL WASTE & COLORCODING OF WASTE BAGS

WEEK 8-9

RADIOLOGY DEPARTMENT & CSSD DEPARTMENT
- VARIOUS RADIOLOGY SERVICES OFFERED AT HCG
- LEARNED THE ENTIRE PROCEDURE AT CSSD DEPARTMENT'
- CLOSELY MONITORED THE FUNCTIONING OF BOTH DEPARTMENT.