SUMMER INTERNSHIP PROGRAMME
HEAPS HEALTH SOLUTIONS PRIVATE LIMITED

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INDUSTRY MENTOR - MR.RITESH MITTAL

HEAPS is a health tech platform and software as service (SaaS) provider that helps in optimising care coordination.HEAPS uses cutting-edge technologies, data analytics and artificial intelligence to create highly efficient and effective care coordination systems for hospitals, insurance companies and patients.HEAPS was founded by Dr.Suman Katragadda in the year 2020. It is making inroads into the North American market and plans to enter Europe and the MENA region.

MISSION

Empower clients by providing them with revolutionary technology solutions that are designed to:

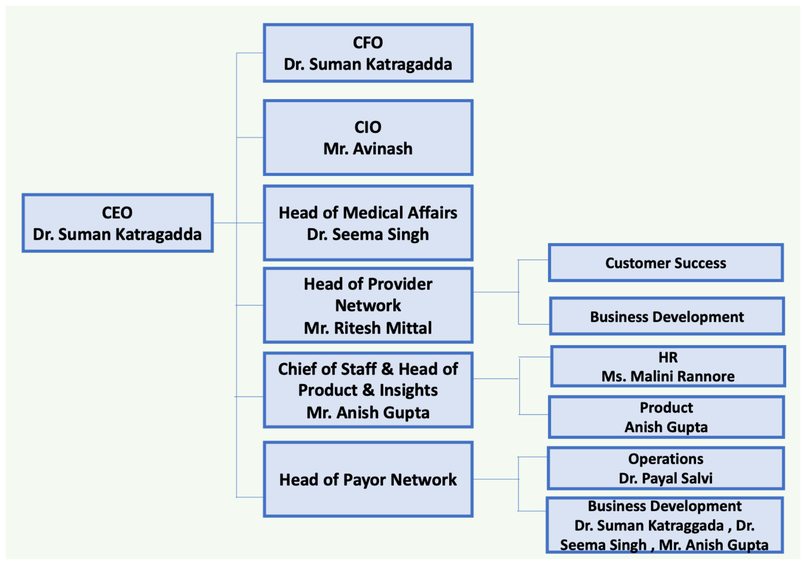
- accelerate their growth,
- enhance patient outcomes,
- Foster value-based networks,
- Effectively manage population health.

Through comprehensive approach, heaps is dedicated to support clients in achieving their goals and driving positive change within the healthcare landscape.

VISION

To save more lives across the globe through the network of our clients

ORGANIZATIONAL STRUCTURE



LEARNINGS

- How health tech start-ups work in care coordination using Technology
- Complexity of product use case for different clients
- Understanding real life implication of care coordination in cohort- diabetic retinopathy for client
- learned how to work with outside vendors to support already-existing infrastructure
- Uncovered how to fill a variety of responsibilities in an organisation

CHALLENGES

- Found it challenging to adapt in fast paced and dynamic environment with shifting priorities
- Difficulty in understanding the product/ platform in initial weekss

ABOUT THE PROJECT

TITLE- REVAMPING THE CALL AUDIT PROCESS

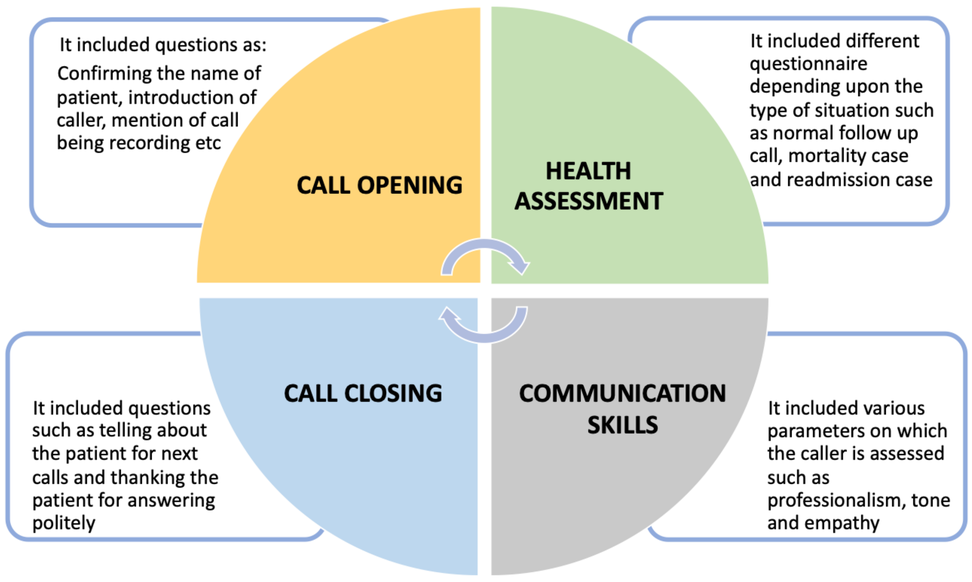
PROBLEM STATEMENT-

Enhancing the process for evaluating and analysing phone conversations in order to assure quality is part of call audit process. Given that callers represents clients, the existing platform had questions for the call audit process which were unstructured and the requirement of the hour is to evaluate phone calls and redefine a standard checklist that auditors may use for review process. Metrics had to be established in order to guarantee call quality because there was no dashboard to visually represent and monitor the call audit process.

OBJECTIVE –

- To Streamline call audit process to make it more efficient
- To develop key metric related to call quality and performance to measure improvements and make data driven decisions to further optimize the call audit process
- To identify training needs and gaps in care coordinators skills through revamped call audit process

CALL AUDIT SCORECARD



A) NORMAL FOLLOW UP CALL

(II)	HEALTH ASSESSMENT	YES	NO	NA	EXISTING OR PROPOSED
1.	Asking the patient about any issue or problem being faced post discharge	❑	❑		EXISTING
2.	Asking and marking all the symptoms in checklist. Also checked for additional symptoms if any	❑	❑		EXISTING
3.	Physician escalation raised	❑	❑	❑	EXISTING
4.	Physician escalation closed	❑	❑	❑	EXISTING
5.	Asked about the follow up instructions given by the doctor (follow up appointment ,dietary instructions, exercise and so on) as per discharge summary	❑	❑	❑	PROPOSED
6.	Asked the patient about the medication intake as prescribed by the doctor	❑	❑	❑	PROPOSED
7.	Pitched for homecare service (when not been marked) Asked all leading questions for the home care services (when being marked)	❑	❑		PROPOSED
8.	Patient feedback collected properly	❑	❑	❑	PROPOSED
9.	Complaints/ compliments noted	❑	❑	❑	EXISTING

B) IN CASE OF MORTALITY

(II)	HEALTH ASSESSMENT	YES	NO	EXISTING OR PROPOSED
1.	Date and place of mortality (within the hospital or not) documented	❑	❑	PROPOSED
2.	Reason of mortality asked	❑	❑	PROPOSED
3.	Empathize with the patient	❑	❑	PROPOSED

C) IN CASE OF READMISSION TO HOSPITAL

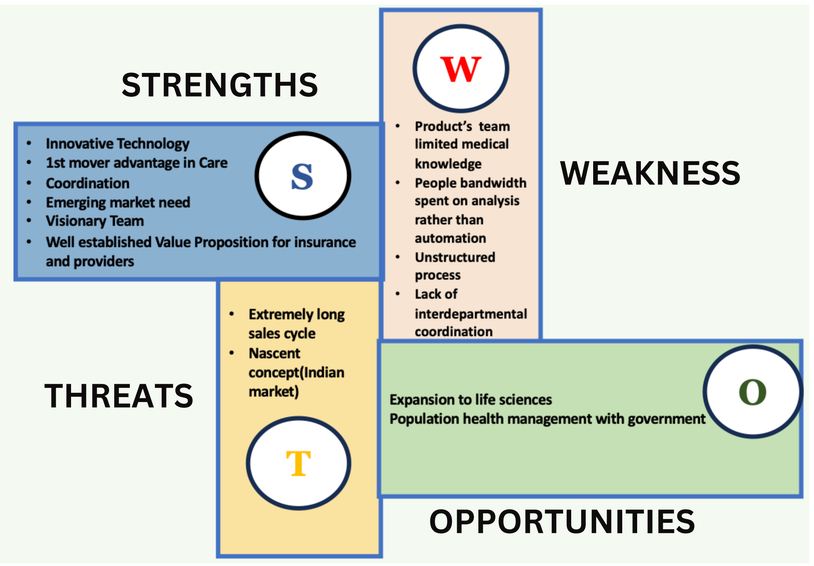
(II)	HEALTH ASSESSMENT	YES	NO	EXISTING OR PROPOSED
1.	Asking the patient about any issue or problem being faced post discharge	❑	❑	EXISTING
2.	Asked when and where the readmission has been done	❑	❑	PROPOSED
3.	Reason for readmission asked (due to same condition or other other)	❑	❑	PROPOSED
4.	In case of leakage, reason asked	❑	❑	PROPOSED

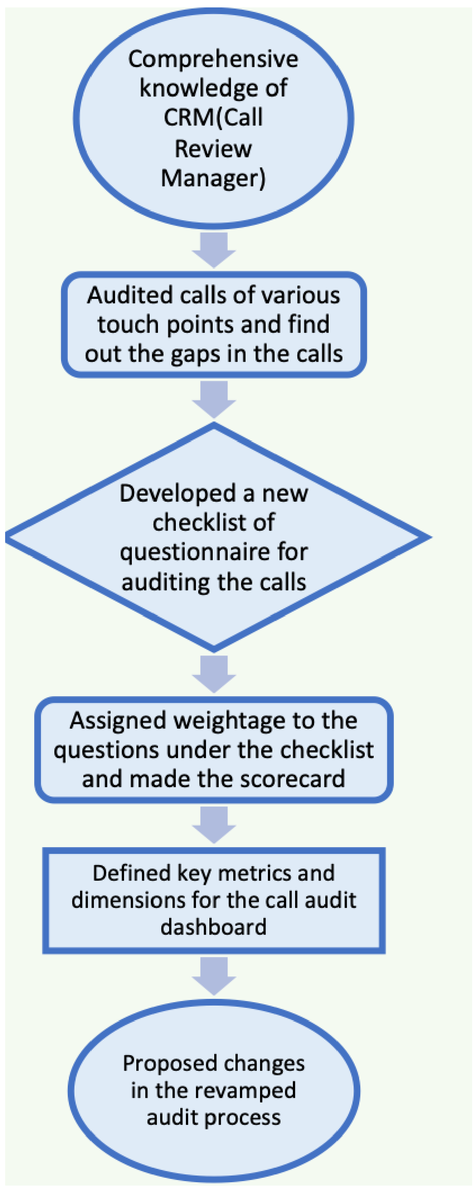
HEALTH ASSESSMENT

- NORMAL FOLLOW UP CALL
- MORTALITY CASE
- READMISSION CASE

CALL ANALYTICS DASHBOARD METRICS

				DIMENSIONS						
SR NO.	METRIC BUCKET	METRIC	FORMULA	Agent level	TL level	Call center level	Client level	Region level	speciality level	doctor level
1	QUALITY SCORING	Caller audit score - overall		YES	YES	YES	YES	YES	NO	NO
		Caller audit score - call opening		YES	YES	YES	YES	YES	NO	NO
		Caller audit score - health assessment		YES	YES	YES	YES	YES	NO	NO
		caller audit score - communication skills		YES	YES	YES	YES	YES	NO	NO
		Caller audit score- call closing		YES	YES	YES	YES	YES	NO	NO
		Average team score	sum of scores of all agents /no of agents							
		No of ZT calls	no of ZT calls/ total calls audited*100							
		No of ZT calls - Physician Escalation Raised		YES	YES	YES	YES	YES	YES	NO
		No of ZT calls - homecare services		YES	YES	YES	YES	YES	YES	YES
		No of ZT calls - Complaints & Compliments noted		YES	YES	YES	YES	YES	YES	YES
		No of ZT calls - Empathize with patient		YES	YES	YES	YES	YES	YES	NO
		No of ZT calls - When & where readmission has taken place		YES	YES	YES	YES	YES	YES	NO
		No of ZT calls - Reason for readmission asked		YES	YES	YES	YES	YES	YES	NO
		No of ZT calls - Leakage		YES	YES	YES	YES	YES	YES	YES
		no of times homeservices missed by caller		YES	YES	YES	YES	YES	YES	
2	PRODUCTIVITY/ EFFICIENCY	Calls done per day by agent		YES	YES	YES				
		Average talk time of caller	talk time of all the calls/total no of completed calls	YES	YES	YES	YES	YES	NO	NO
		Average team talk time	total talk time of all the callers/ no of callers	YES	YES	YES	YES	YES	NO	NO
		No of hits generated	total no of hits/total no of audit questions*100	YES	YES	YES	YES	YES	NO	NO





PRACTICAL VS THEORETICAL

- Hands on practice of the various excel tool applications
- Identify the problem/need that exists real time
- In the communication module, we were taught how vital it is to have two-way communication, but during my internship, I discovered how the client is perceiving the product and its use case for it , is also important.

USEFULNESS

- Exposed to current industry trends and emerging technologies in healthcare sector- Real world evidence,AI
- Opportunities for networking with healthcare industry professionals
- Enhanced and refined skills such as soft skills, teamwork and adaptability
- Learnt how to make client presentations

SUGGESTIONS

- Weekly inter-departmental meetings should be held to coordinate workflow
- Onboard human resource with the health background