SUMMER INTERNSHIP PROGRAM

at

MAX HOSPITAL GURUGRAM

From May 6 to July 5 2024

A REPORT BY

Dr.Surbhi kumari

Master of Business Administration

Hospital and Health Management

2023-25

Under the mentorship of

Mr. S.P.Chattopadhyay

Assistant Professor

Certificate No – 2024/16947

CERTIFICATE

OF ACHIEVEMENT

MAX Healthcare

Max Institute of Medical Education

Certifies that

Dr. Surbhi Kumari

has completed Internship in the department of

Hospital Operation

at Max Hospital, Gurugram, Haryana

from 06th May 2024 to 05th July 2024

Head of the Department

Dr. Devesh Tiwari

Dr Vinitaa Jha
Director - Research & Academics
Max Healthcare Institute Ltd

MAX Healthcare

Annexure A

Completion Certification from the Organization

CERTIFICATE

This is to certify that Dr./Mr./ Ms. SURBHI of 28H (batch) of MAX HOSPITAL GURUGRAM (Name of the department/institute) has worked with our organization for his/her summer internship from 6 MAY to 5 JULY (date). The overall performance shown by him/her during the period was excellent/good/average. This certificate is being issued to meet the requirements of the IIHMR University.

Date: 5 July 2024

(Signature of organization Mentor)

Name: Dr. Devesh Tiwari

Designation: Head of the Hospital operations

Seal/Stamp of the Organization

MAX HOSPITAL GURUGRAM

Max Hospital, Gurugram
(A unit of ALPS Hospital Ltd.)
Opposite HUDA City Centre Metro Station,
B - Block, Sushant Lok - I, Gurugram - 122 001
For medical service queries or appointments,
call: +91-124 6623 000
www.maxhealthcare.in

ALPS Hospital Ltd.
Regd. Office: 401, 4th Floor, Man Excellenza, S. V. Road,
Vile Parle (West), Mumbai, Maharashtra - 400 056
T: +91-22 2610 0461/62
E: secretarial@maxhealthcare.com

(CIN: U74899MH1989PLC357940)

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Surbhi Kumari** of the academic year 2023-25 of **INSTITUTE OF HEALTH MANAGEMENT RESEARCH** has prepared a poster with respect to her summer internship held during May-June 2024.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 23 JULY 2024

(Signature of Faculty Mentor)

Name: **Mr. S.P.Chattopadhyay**

Designation: Assistant Professor

1, Prabhu Dayal Marg, Near Sanganer Airport, Jaipur- 302029, Rajasthan, India.
Ph.: 0141-3924700, 2791431- 32, E-mail: iihmr@iihmr.edu.in, Web.: www.iihmr.edu.in

Enhancing Patient CARE at MAX Healthcare Hospital

HISTORY

Max Healthcare, founded in 2000 by Analjit Singh, is a leading healthcare company in India. Its first hospital, Max Medcentre, was established in South Delhi. The company expanded its presence in Delhi NCR, including opening the Max Super Specialty Hospital in 2006. In 2012, it partnered with South African healthcare company Life Healthcare. The group continued to expand its network, adding more specialty hospitals and healthcare facilities across North India.

DESCRIPTION

Max Hospital Gurugram, a modern healthcare facility in North India, has treated over 5 lakh patients across 36 specialized fields. With 16 ICU beds, 6 PICUs, 7 NICUs, and 5 Cardiac Care beds, it offers a world-class healthcare experience with state-of-the-art technology, modular Operation Theatres, and NABH accreditation.

Enhancing Patient CARE in MAX GURUGRAM Hospital

Improving patient care at the hospital involves various factors such as quality of care, convenience, communication, accessibility, accuracy, reliability, responsiveness, and empathy. This project focuses on identifying and implementing strategies to enhance these aspects, aiming to improve the patient experience and health outcomes.

PURPOSE OF PROJECT

1. Improve Quality of Care
2. Enhance Convenience
3. Strengthen Communication
4. Increase Accessibility
5. Ensure Accuracy
6. Enhance Reliability
7. Improve Responsiveness
8. Promote Empathy

difference between theoretical and practical understanding

In hospital operation, Theoretical understanding, derived from textbooks and research, is crucial for clinical decision-making and problem-solving. Practical understanding, focus on real-world application, skills, development in patient care and critical thinking. Continuous learning is essential.

learning during the internship in the hospital

hospital operations, emphasizing the importance of understanding patient flow management, healthcare administration, resource management, financial management, data management, compliance, project management, patient experience, emergency preparedness, technology integration, leadership skills, ethical and cultural competence, healthcare laws and regulations, data analysis, and patient-centered care.

SWOT analysis of the hospital

Strengths

a) Highly skilled and experienced medical professionals, including doctors, nurses, and technicians.
b) Advanced Technology
c) Strong reputation and brand recognition in the community.
d) Convenient location, easily accessible to a large population.

Weaknesses

a) Limited number of beds and facilities can lead to long wait times.
b) Variability in patient satisfaction levels.

Opportunities

a) **Expansion**: Opportunities to expand services and facilities.
b) **Aging Population**: Rising demand for healthcare services due to an aging population.
c) **Preventive Care**: Increasing focus on preventive care and wellness programs.
d) Attract quality physicians and staff.

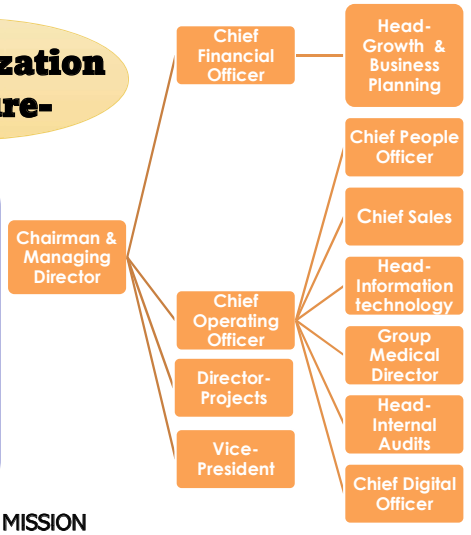
Threats

a) **Competition**: Increased competition from other hospitals and healthcare providers.
b) **Economic Factors**: Economic downturns affect patients' ability to afford care.
c) **Dissatisfied patients.**

Challenges Faced During Hospital Internship

- Working effectively within multidisciplinary teams
- Bridging the gap between theoretical knowledge and practical application.
- Continuous learning and adaptation are necessary to stay updated.

Organization structure-



usefulness of hospital internship

Internships provide practical experience, skill development, exposure to medical fields, professional networking, and patient care skills. It enhances communication, empathy, and decision-making abilities, prepares interns for independent practice, and fosters personal and professional growth. Internships also enhance employability and career growth.

Suggestions

- Prioritize patient experience by improving bedside manners, reducing wait times, and involving patients in decision-making.
- Use collaborative tools and regular meetings to ensure everyone is informed and aligned.
- Optimize scheduling and staffing to ensure adequate coverage and reduce burnout.

VISION

To be a leading healthcare institution recognized for delivering innovative, compassionate, and patient-centered care, while continuously advancing medical knowledge and fostering an environment of excellence, respect, and collaboration

MISSION

The mission is to improve the health and well-being of our community by providing high-quality, compassionate, and accessible healthcare services. We are dedicated to advancing medical knowledge through research and education, and we strive to create a safe and supportive environment for patients, families, and staff."

NAME- Dr.Surbhi Kumari
Roll no: 1860
Batch- 28th MBA HM
Project- Enhancing Patient CARE in Hospital
Organization mentor- Dr.Devesh Tiwari
University mentor- Mr. S.P.Chattopadhyay

Reporting Format

(Week 1)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

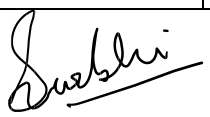
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 1 **From: MAY 2024 to 11 MAY 2024**

Activity Done	• **FULL ORIENTATION OF HOSPITAL.** • **TOOK ROUNDS OF WARDS WITH FLOOR MANAGERS.** • **DONE OBSERVATION OF INFECTION CONTROL DURING ENDOSCOPY PROCEDURE.** • **ATTEND MEETING IN EMERGENCY WITH HOD AND MANAGER ABOUT ISSUES OF ER DEPARTMENT.** • **DID PROJECT TOPIC DISCUSSION WITH MENTOR.**
Linking theory (Classroom learning) with practice at your organization	• **Area of OPD is about 15-17 sq. mt. Each clinic is managing 100 cases per day.** • **The room is immediately adjacent to the Ambulance entry of the Emergency Unit with a direct line of sight to incoming ambulance vehicles and the parking bays.**
Gaps identified on the working area.	• **PROLONG WAITING TIME AT CADIO DEPT** • **LESS EMPLOYEE AT RADIO DEPT** • **MISCOMMUNICATION BETWEEN DOCTORS AND NURSES IN ER DEPT** • **LESS BEDS IN THE EMERGENCY DEPT** • **PROLONG TIMING IN THE DISCHARGE PROCESS**

Suggestions for improvement	• **RECRUITMENT OF MORE DOCTORS** • **RECURTMENT OF MORE HUMAN RESOURCES.** • **PROPER COUNCELLING FOR COMMUNICATION GAP.** • **ARRANGEMENT FOR MORE BEDS** • **IMPROVEMENT IN PATIENT CARE**
Plan for the next week	**OBSERVATION AT PHP/ DAY CARE OF IPD , OPD, OF DISCHARGE PROCESS AND FULL PROCESS.**



Signature of the Student

Approved by the IIHMR University's Mentor

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Reporting Format

(Week 2)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

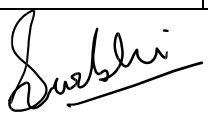
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 2 **From MAY 12 2024 to 18 MAY 2024**

Activity Done	• **Posted at PHP (preventive health program) for 1 week.** • **Educated the patient about their treatment patient.** • **Observed the staff performing task at the php dept.** • **Took feedback from the patient regarding the quality of service and treatment.** • **Done patient food quality test for the patient.** • **Solved the patient's query and issues regarding the treatment plan.** • **Explained to the patient about treatment packages for the test (such as package types, package price, TAT for health checkup, etc.**
Linking theory (Classroom learning) with practice at your organization	• **1. Appointment Scheduling System.** • **2. Triage System** • **3. Workflow Optimization** • **Lean Management** • **Process Mapping** • **4. Staffing Adjustments** • **Flexible Staffing** • **Cross-Training**
Gaps identified on the working area.	• **GAP Observation done:-1. Too much patient crowd.** • **2. Prolong waiting time before consulting doctor (1hrs)** • **3. Too much waiting time at the time of Ultrasound.** • **4. Lack of knowledge to guide patient about treatment plan packages, reports, tests properly.** **5. Mismanagement of calling patient at time of consulting physician. no sequence is followed at cardio, radio, ophthalmic dept.**

Suggestions for improvement	1. **The coordinator needed to guide the patients properly about treatment packages at the front desk.** 2. **Time Slot Management: Ensure that the booking system manages time slots effectively, avoiding overbooking and ensuring a steady flow of patients.** 3. **Flexible Staffing: Adjust staffing levels based on peak times to ensure adequate coverage during busy periods.**
Plan for the next week	**Doing observation and project topic:- queue management or patient sequence management. Reduce in waiting time in billing, at doctor, consultation, lab investigation.**



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Reporting Format

(Week 3)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

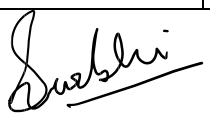
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 3 **From MAY 20 2024 to 25 MAY 2024**

Activity Done	• **Done the data collection for the project (Enhancing queue Management at MAX HOSPITAL). By doing-** • **1) gather the data on patient wait times, bottlenecks, and peak hours across the department.** • **2) Conducted the interviews with the patients.** • **3) learned about the discharge process and TPA process and then did the analysis of the time taken in this process.** • **4) took patient feedback about waiting time for the investigation test from dept radiology.**
Linking theory (Classroom learning) with practice at your organization	• Reducing waiting times at hospitals is a multifaceted challenge that involves improvements in various areas such as technology, workflow, staffing, and patient communication
Gaps identified in the working area.	• **No proper guidance about the timings of the treatment and consulting doctors.** • **Miscommunication between doctors and the patient regarding waiting timings.** • **No proper coordination between doctors to treat the patient at the emergency dept which results in prolonged the waiting time** • **There is no separate timing for the php and opd patient which is clashing the patient and increasing the waiting time for the test.**
Suggestions for improvement	• **Automated Queue Management Systems (QMS):** Use QMS with digital displays and mobile notifications to manage patient flow and keep them informed about their wait times.

	• **Online Portals and Mobile Apps:** Provide online platforms and mobile apps for appointment scheduling, pre-registration, and bill payments to minimize in-person wait times. • **Self – check-in kiosks:** install kiosks for patients to check in and receive queue numbers automatically.
Plan for the next week	• **Identify key issues such as identify the specific areas where delays are most frequent.** • **Assess if the resources (staff, equipment, space) are optimally allocated.** • **Analyze workflow to identify inefficiencies or redundant steps.**



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Reporting Format

(Week 4)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

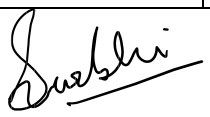
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 4 **From MAY 27 2024 to 1 JULY 2024**

Activity Done	• **RADIOLOGY DEPARTMENT** • **Done the data collection for the project (WAITING TIME) at the Radiology department. By doing-** **a) Done observation about the prolonged ultrasound waiting time, especially too much.** **b) Done observation about the queue management in the department.** **c) Analysed the workload in the department.** **d) Observed the Scheduling Inefficiencies.** **e) Observed the limited resources.** **f) Delays in administrative processes, such as patient registration, verification of insurance, and processing of referrals, can contribute to overall waiting times.** **g) Emergency or urgent cases that require immediate attention can disrupt the schedule, causing delays for patients with nonurgent appointments.** **h) Complexity of Cases: More complex cases that require longer imaging times or additional care can slow down the workflow, affecting subsequent appointments.** **i) Patients who arrive late, don't show up or need extra assistance can disrupt the schedule.**
Linking theory (Classroom learning) with practice at your organization	• **Reducing waiting times at hospitals is a multifaceted challenge that involves improvements in various areas such as technology, workflow, staffing, and patient communication**
Gaps identified in	• **High Patient Volume**: An increase in patients needing radiology services leads to longer wait times, especially when a department is not adequately staffed or equipped to handle the volume.

the working area.	• **Scheduling Inefficiencies**: Poor scheduling practices, such as PHP, and IPD, emergency are clashing and do not account for varying lengths of different procedures, causing delays. • **Limited Resources**: Insufficient availability of radiology equipment (e.g. ultrasound room) • **Communication Gaps**: Poor communication between different departments, or between the radiology department and patients, leads to misunderstandings and delays.
Suggestions for improvement	• **Improve Scheduling Practices**: Implement a dynamic scheduling system that adjusts appointment times based on the type and length of procedures. • **Increase Resources**: **Additional Equipment**: (ULTRASOUND ROOM). Invest in more radiology equipment to increase capacity and reduce wait times. **Extended Hours**: Extend operating hours or add weekend shifts to accommodate more patients. • **Enhance Communication**: **Clear Instructions**: Provide patients with clear instructions on preparation and arrival times to reduce delays. **Real-Time Updates**: Use electronic systems to provide real-time updates to patients about wait times and any delays. • **Patient Engagement**: By providing books magazines , televisions such as news channels , health programs etc.
Plan for the next week	• **Identify key issues such as identify the specific areas where delays are most frequent.** • **Assess if the resources (staff, equipment, space) are optimally allocated.** • **Analyze workflow to identify inefficiencies or redundant steps.**



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Reporting Format

(Week 5)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

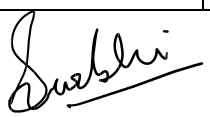
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 5 **From JUNE 3 2024 to 8 JUNE 2024**

Activity Done	**GROUND FLOOR (MAIN OPD AND BILLING DESK)** • **Done the data collection for the project (WAITING TIME and queue management) at the main OPD, BILLING FRONT DESK. By doing-** **The observation was done on -** • **1. Long Waiting Times.** • **2. Overcrowding.** • 3. **Inadequate Staffing.** • 4. **Poor Communication.** • 5. **Patient Dissatisfaction.** • **6. Billing queries.** • **7. Payment method.**
Linking theory (Classroom learning) with practice at your organization	• **Reducing waiting times at hospitals is a multifaceted challenge that involves improvements in various areas such as technology, workflow, staffing, and patient communication**
Gaps identified in the working area.	**A) LONG WAITING TIMES** • High patient volume. • Inefficient scheduling and appointment management. • Delays in patient registration and check-in processes. • Insufficient staffing levels. **B) OVERCROWDING** • High patient influx. • Lack of physical space. • Poorly managed patient flow. **C) POOR COMMUNICATION** • Miscommunication about the clear protocols and procedures • Miscommunication about the appointments and doctors' timing.

	D) PATIENT DISSATISFACTION • Long waiting times and overcrowding. • Poor communication and information dissemination. • Inadequate facilities for senior citizens. E) **Financial Barriers** o High cost of healthcare services. o Insurance issues and coverage limitations. o Lack of pricing information.
Suggestions for improvement	• **Improve Patient Flow Management:** Optimize the layout of the OPD and streamline processes to reduce bottlenecks. • **Increase Staffing Levels:** Hire additional healthcare professionals and support staff to meet patient demand. • **Enhance Communication:** Utilize technology such as electronic health records (EHR) and patient portals to improve information sharing. • **Enhance Patient Experience:** Provide adequate facilities, clear signage, and comfortable waiting areas. **Address Financial Barriers:** Offer transparent pricing, and financial counseling, and explore partnerships with insurance providers.
Plan for the next week	• **Identify key issues such as identify the specific areas where delays are most frequent.** • **Assess if the resources (staff, equipment, space) are optimally allocated.** • **Analyze workflow to identify inefficiencies or redundant steps.**



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Annexure-E

Reporting Format

(Week 6)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

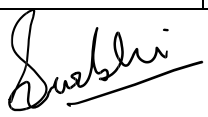
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 6 **From JUNE 10 2024 to 16 JUNE 2024**

Activity Done	**POSTED IN IPD DEPARTMENT FOR 1 WEEK** • **Done the data collection for the project (WAITING TIME and queue management) at the IPD** **The observation was done on -** • **1. Long Waiting Times for admission in ipd.** • **2. Delay in the discharge process.** • 3. **Inadequate Staffing.** • 4. **Poor Communication.** • 5. **Patient Dissatisfaction.** • **6. took rounds in IPD on a daily basis.** • **7**. Took feedbacks.
Linking theory (Classroom learning) with practice at your organization	• **Reducing waiting times at hospitals is a multifaceted challenge that involves improvements in various areas such as technology, workflow, staffing, and patient communication**
Gaps identified in the working area.	o Unavailability of rooms on time (waiting time is approximately 3 to 4 hours). o Understaffing and delaying in-room services. o INCOMPLETE AWARENESS OF THE DISCHARGE PROCESS o Discharge procedures are often cumbersome and poorly coordinated, leading to delays and patient dissatisfaction. o Lack of clear post-discharge instructions and support can result in inconvenience. o Lack of proper availability of a translator especially for international patients. o Uncleared knowledge about Discharge Planning

	○
Suggestions for improvement	• Manage Patient Load Effectively: Implement efficient triage systems to prioritize care for critically ill patients.• Focus on a quicker discharge process for the previous patient so that the bed will be vacant sooner. • **Efficient Discharge Planning**: Develop efficient discharge planning to ensure patients have everything they need before leaving the hospital. • **Post-discharge support**: Provide clear instructions and support for post-discharge care, including follow-up appointments and home care services. • **Overcome Language Barriers**: • Employ professional interpreters or use translation services to assist non-English-speaking patients. • Develop multilingual educational materials and signage to aid patient understanding. (SUCH AS TYPES OF IEC MATERIALS) • Ensure discharge plans are thorough, clearly communicated, and understood by patients and families. So that patients will be mentally prepared for the delays and waiting times of the process.
Plan for the next week	• **Identify key issues such as identify the specific areas where delays are most frequent.** • **Assess if the resources (staff, equipment, space) are optimally allocated.** • **Analyze workflow to identify inefficiencies or redundant steps.**



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Annexure-E

Reporting Format

(Week 7)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

Name of the Student: DR.SURBHI KUMARI

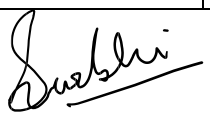
Roll no: 1860 **Stream: HM**

Week no: 7 **From JUNE 17 2024 to 23 JUNE 2024**

Activity Done	**Took positive and negative feedback from OPD, IPD, PHP, EMERGENCY, RADIOLOGY FOR 1 WEEK REGARDING –** • **care, convenience, communication** • **accessible, accurate** • **reliable, responsiveness** • **empathy**
Linking theory (Classroom learning) with practice at your organization	• **Improving patient care at the hospital involves various factors such as quality of care, convenience, communication, accessibility, accuracy, reliability, responsiveness, and empathy. This project focuses on identifying and implementing strategies to enhance these aspects, aiming to improve the patient experience and health outcomes.** • **Objectives** • **Improve Quality of Care: Ensure patients receive high-quality, evidence-based medical care.** • **Enhance Convenience: Streamline processes to make patient hospital visits more convenient.** • **Strengthen Communication: Foster clear and effective communication between patients and healthcare providers.** • **Increase Accessibility: Make healthcare services more accessible to all patients, regardless of their location or physical abilities.**

	• **Ensure Accuracy: Improve the accuracy of medical records and treatment plans.** • **Enhance Reliability: Ensure consistent and reliable healthcare services.** • **Improve Responsiveness: Enhance the responsiveness of healthcare providers to patient needs and emergencies.** • **Promote Empathy: Foster a culture of empathy and compassion among healthcare providers.** •
Gaps identified in the working area.	○ NEGATIVE FEEDBACK ○ Lack of coordination among healthcare providers leads to fragmented care, prolonged test waiting times, and conflicting treatments. ○ lack of proper Staff training or ongoing education, leading to errors and suboptimal care. ○ **Insufficient equipment:** Lack of resources results in insufficient supplies, and inadequate facilities(ULTRASOUND MACHINE) ○ **High Patient Volume**: the excessive number of patients overwhelms the OPD, resulting in long wait times. ○ A lack of doctors, nurses, and support staff leads to rushed consultations and inadequate patient attention. ○ b) Overworked staff are less attentive, more prone to errors, and less ○ Due to Insufficient numbers of nurses, and support staff lead to overworked staff and inadequate patient attention. ○ POSITIVE FEEDBACKS ○ **1. Equal Access to Healthcare Services** ○ MAX Hospital GURGAON is accessible to all individuals, including those with disabilities, promotes inclusivity and equal access to healthcare services. ○ **2. Early Intervention** ○ Accessible facilities are timely access to medical care, which is crucial for early diagnosis and treatment of health conditions. ○ 3. **Good Infrastructure Improvements** ○ Properly installed ramps, elevators, and automatic doors are available to facilitate movement for patients with mobility impairments. ○ all areas, including entrances, restrooms, and examination rooms, are wheelchair accessible. ○ 4. **Trained staff** ○ hospital staff are well trained on disability awareness and best practices for assisting patients with various needs.

	○ staff are knowledgeable about assistive technologies and accessible communication methods. ○
Suggestions for improvement	• Provide patients with clear and concise information about their care process, expected wait times, and whom to contact with questions. • Use digital communication tools, such as text messages or mobile apps, to keep patients informed about appointment schedules and delays. • Foster effective communication between departments to ensure smooth transitions and coordination of care. • Use standardized communication protocols like **SBAR (Situation, Background, Assessment, Recommendation)** to improve clarity during handoffs. • Empathetic communication can reduce patients' anxiety and stress, which can positively impact their recovery. • A calm and supportive environment helps patients feel safe and cared for, promoting healing •
Plan for the next week	**COMPLYING OFALL THE DATA FOR THE PROJECT UNDER MENTOR DISCUSSION AND GUIDELINES**



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Annexure-E

Reporting Format

(Week 8)

Name of the Organisation: MAX HOSPITAL GURGAON

Area/ Department/ Project of Summer Internship Program: OPERATION DEPARTMENT

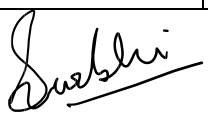
Name of the Student: DR.SURBHI KUMARI

Roll no: 1860 **Stream: HM**

Week no: 8 **From JUNE 24 2024 to 30 JUNE 2024**

Activity Done	• **STARTED THE COMPLYING OFALL THE DATA FOR THE PROJECT UNDER MENTOR DISCUSSION AND GUIDELINES** • **START THE SWOT ANALYSIS OF THE ORGANISATION FOR THE PRESENTATION AT THE ORGANISATION.**
Linking theory (Classroom learning) with practice at your organization	• **This analysis helps the hospital to understand its internal strengths and weaknesses, identify external growth opportunities, and recognize potential threats to its operations.**

Gaps identified in the working area.	○ Strengths ○ a) Highly skilled and experienced medical professionals, including doctors, nurses, and technicians. ○ b) Advanced Technology ○ c) Strong reputation and brand recognition in the community. ○ d) Convenient location, easily accessible to a large population. ○ e) Financial stability ○ Weaknesses ○ A) Variability in patient satisfaction levels ○ B) Limited number of beds and facilities can lead to long wait times.
	○ Opportunities ○ **a) Expansion**: Opportunities to expand services and facilities ○ **b) Aging Population**: Rising demand for healthcare services due to an aging population ○ **c) Preventive Care**: Increasing focus on preventive care and wellness programs. ○ d) Attract quality physicians and staff. ○ Threats ○ **a) Competition**: Increased competition from other hospitals and healthcare providers. ○ **b) Economic Factors**: Economic downturns affect patients' ability to afford care. ○ **c) Dissatisfied patients.** ○
Suggestions for improvement	• Improving patient care in hospitals involves addressing multiple aspects of the patient experience. This includes focusing on care quality, convenience, communication, accessibility, accuracy, reliability, responsiveness, and empathy. By prioritizing these factors, hospitals can greatly enhance patient satisfaction and health outcomes. It is crucial to continuously evaluate and adjust strategies to meet the changing needs of patients and healthcare providers. •
Plan for the next week	**COMPLETE PRESENTATION OF 2 PROJECT AND SWOT ANALYSIS OF THE HOSPITAL FROM 1 JULY TO JULY 6. SUBMISSION OF THE PROJECT TO THE MENTORS .**



Signature of the Student

Approved by the IIHMR University's Mentor

On the last day of every week report in the above format should be submitted to the faculty mentor. Submission of total 8 reports in 8 weeks is compulsory. Each report should not be more than 2 pages.

Compiled Reporting Format

Name of the Organisation:

Area/ Department/ Project of Summer Internship Program:

Name of the Student: Dr.Surbhi Kumari

Roll no: 1860 **Stream: MBA HM**

Activity Done	• Introduction to the organization and then was told to have induction of the hospital by visiting both the blocks on all floors and finding gaps for improvement. • Learnt about the role of the operations department of the hospital such as The operations department in a hospital plays a crucial role in ensuring that the facility runs smoothly and efficiently. Its primary responsibilities include: • Patient Flow Management: Ensuring that patients move efficiently through the hospital, from admission to discharge. This involves coordinating with different departments to minimize wait times and improve the patient experience. • Resource Allocation: Managing the allocation of resources such as hospital beds, medical equipment, and staff. This ensures that resources are available when and where they are needed most. • Staff Coordination: Scheduling and coordinating the work of medical and non-medical staff. This includes ensuring that there are enough staff members on duty to meet patient needs, and that they have the necessary skills and training. • Supply Chain Management: Overseeing the procurement and distribution of medical supplies, medications, and other necessary items. This includes working with suppliers, managing inventory, and ensuring that critical supplies are always in stock.

	• Facility Management: Ensuring that the hospital environment is safe, clean, and conducive to patient care. This includes maintenance of the physical plant, housekeeping, and security. • Compliance and Quality Control: Ensuring that the hospital complies with all relevant regulations and standards. This includes monitoring performance metrics, conducting audits, and implementing quality improvement initiatives. • Technology Integration: Overseeing the implementation and maintenance of information technology systems. This includes electronic health records (EHR), scheduling systems, and other software that supports hospital operations. • Patient Satisfaction: Working to improve the overall patient experience by addressing complaints, improving service delivery, and implementing patient-centered care practices. • The PHP (Public Health Programs) department in a hospital typically focuses on the broader aspects of healthcare that extend beyond direct patient care. It integrates public health principles into hospital operations and community outreach. • Posted at PHP (preventive health program) for 1 week. • Educated the patient about their treatment patient. • Observed the staff performing task at the php dept. • Took feedback from the patient regarding the quality of service and treatment. • Done patient food quality test for the patient. • Solved the patient's query and issues regarding the treatment plan. • Explained to the patient about treatment packages for the test (such as package types, package price, TAT for health checkup,

	etc. Done the data collection for the project (Enhancing queue Management at MAX HOSPITAL). By doing- • 1) gather the data on patient wait times, bottlenecks, and peak hours across the department. • 2) Conducted the interviews with the patients. • 3) learned about the discharge process and TPA process and then did the analysis of the time taken in this process. • 4) took patient feedback about waiting time for the investigation test from dept radiology. RADIOLOGY DEPARTMENT • Done the data collection for the project (WAITING TIME) at the Radiology department. By doing- a) Done observation about the prolonged ultrasound waiting time, especially too much. b) Done observation about the queue management in the department. c) Analysed the workload in the department. d) Observed the Scheduling Inefficiencies. e) Observed the limited resources. f) Delays in administrative processes, such as patient registration, verification of insurance, and processing of referrals, can contribute to overall waiting times. g) Emergency or urgent cases that require immediate attention can disrupt the schedule, causing delays for patients with non-

	urgent appointments. h) Complexity of Cases: More complex cases that require longer imaging times or additional care can slow down the workflow, affecting subsequent appointments. i) Patients who arrive late, don't show up or need extra assistance can disrupt the schedule. GROUND FLOOR (MAIN OPD AND BILLING DESK) • Done the data collection for the project (WAITING TIME and queue management) at the main OPD, BILLING FRONT DESK. By doing- The observation was done on - • 1. Long Waiting Times- due to Inefficient scheduling and appointment management and Delays in patient registration and check-in processes And also due to Insufficient staffing levels. • 2. Overcrowding • 3. Inadequate Staffing-**a)** A lack of doctors, nurses, and support staff leads to rushed consultations and inadequate patient attention. b) Overworked staff are less attentive, more prone to errors, and less. • 4. Poor Communication-* Patients may not receive clear instructions or explanations about their conditions and treatment plans. *Information may not be effectively shared among healthcare providers, leading to inconsistent care.(DUE TO LANGUAGE BARRIERS). • 5. Patient Dissatisfaction. • 6. Billing queries. • 7. Payment method

	POSTED IN IPD DEPARTMENT FOR 1 WEEK • Done the data collection for the project (WAITING TIME and queue management) at the IPD The observation was done on - • 1. Long Waiting Times for admission in ipd.- Due to patient overload in the hospital and a limited number of available beds. • • 2. Delay in the discharge process- Discharge procedures are often cumbersome and poorly coordinated, leading to delays and patient dissatisfaction. • Lack of clear post-discharge instructions and support can result in inconvenience. • 3. Inadequate Staffing. • 4. Poor Communication. • 5. Patient Dissatisfaction. • 6. took rounds in IPD on a daily basis. • 7. Took feedbacks. Took positive and negative feedback from OPD, IPD, PHP, EMERGENCY, RADIOLOGY FOR 1 WEEK REGARDING – • care, convenience, communication • accessible, accurate • reliable, responsiveness • empathy STARTED THE COMPLYING OFALL THE DATA FOR THE PROJECT UNDER MENTOR DISCUSSION AND GUIDELINES • START THE SWOT ANALYSIS OF THE ORGANISATION FOR THE PRESENTATION AT THE ORGANISATION.

Linking theory (Classroom learning) with practice at your organisation	Area of OPD is about 15-17 sq. mt. Each clinic is
	managing 100 cases per day.
	• The room is immediately adjacent to the Ambulance entry of the Emergency Unit with a
	direct line of sight to incoming ambulance vehicles
	and the parking bays.
	
	1. Assessment and Research
	
	• **Current State Analysis:** Evaluate the existing queue management systems and processes in place.
	• **Data Collection:** Gather data on patient wait times, bottlenecks, and peak hours across different departments.
	• **Stakeholder Interviews:** Conduct interviews with patients, healthcare providers, and administrative staff to identify pain points.
	
	2. Identify Key Issues
	
	• **Bottlenecks:** Identify specific areas where delays are most frequent.
	• **Resource Allocation:** Assess if resources (staff, equipment, space) are optimally allocated.
	• **Process Inefficiencies:** Analyze workflows to identify inefficiencies or redundant steps.
	
	3. Develop Strategies and Interventions
	
	• **Technology Solutions:**
	  ○ **Queue Management Software:** Implement or upgrade digital queue management systems that provide real-time updates and notifications.
	  ○ **Self-Check-In Kiosks:** Install kiosks for patients to check in and receive queue numbers automatically.
	  ○ **Mobile Applications:** Develop apps that allow patients to book

	appointments, check wait times, and receive notifications.
	• **Process Improvements:**
	  ○ **Triage Systems:** Enhance triage processes to prioritize patients based on the severity of their conditions.
	  ○ **Appointment Scheduling:** Optimize appointment scheduling to balance patient load throughout the day.
	  ○ **Staff Scheduling:** Align staff schedules with peak times to ensure adequate coverage.
	• **Physical Layout Changes:**
	  ○ **Signage and Directions:** Improve signage to guide patients efficiently through the hospital.
	  ○ **Waiting Area Enhancements:** Redesign waiting areas to be more comfortable and informative, with clear displays of queue information.
	
	4. Implementation Plan
	
	• **Pilot Programs:** Begin with pilot implementations in a few departments to test new systems and processes.
	• **Full-Scale Rollout:** Gradually expand successful strategies hospital-wide.
	• **Training Programs:** Conduct training sessions for staff on new technologies and procedures.
	
	5. Monitoring and Evaluation
	
	• **Performance Metrics:** Define key performance indicators (KPIs) such as average wait times, patient satisfaction scores, and queue lengths.
	• **Continuous Monitoring:** Use real-time data analytics to monitor queue status and system performance.
	• **Feedback Collection:** Regularly gather feedback from patients and staff to identify further improvement opportunities.
	
	6. Continuous Improvement

	• **Regular Audits:** Conduct periodic audits to ensure processes are followed and identify areas for further improvement. • **Ongoing Training:** Provide continuous education and training for staff on best practices in queue management. • **Patient Engagement:** Maintain open communication with patients to understand their experiences and needs.
Gaps identified on the working area.	A) **LONG WAITING TIMES** • High patient volume. • Inefficient scheduling and appointment management. • Delays in patient registration and check-in processes. • Insufficient staffing levels. * Prolong waiting time before consulting doctor (1hrs) * Prolonged waiting time at the time of Ultrasound B) **OVERCROWDING** • High patient influx. • Lack of physical space. • Poorly managed patient flow. C)**POOR COMMUNICATION** * Lack of knowledge to guide patient about treatment plan packages, reports, and tests properly. •Miscommunication about the clear protocols and procedures •Miscommunication about the appointments and doctors' timing.

	D)**PATIENT DISSATISFACTION** • Long waiting times and overcrowding. • Poor communication with doctors regarding the time of review, which leads to confusion, and then the patient asks for a second suggestion from another doctor. • Inadequate facilities for senior citizens. E) **POOR COORDINATION BETWEEN THE STAFF AND DOCTORS** • Front desk staff are frequently absent in between the billing due to some other work engagement which makes patients waiting. • Poor communication with each other for the responsibilities of different tasks which affects the patient care quality. • There is no alternate person for another person if someone gets absent which creates arguments with patients and increases the waiting time. • Poor information about doctors' timings and their schedule about OPD, rounds, and OT timing which affects the waiting time of the patient. • **High Patient Volume:** An increase in patients needing radiology services leads to longer wait times, especially when a department is not adequately staffed or equipped to handle the volume • **Scheduling Inefficiencies:** Poor scheduling practices, such as PHP

	,and IPD, emergency are clashing and do not account for varying lengths of different procedures, causing delays. • **Limited Resources**: Insufficient availability of radiology equipment (e.g. ultrasound room). • **Communication Gaps:** Poor communication between different departments, or between the radiology department and patients, leads to misunderstandings and delays. • Lack of coordination among healthcare providers leads to fragmented care, prolonged test waiting times, and conflicting treatments. • lack of proper Staff training or ongoing education, leading to errors and suboptimal care. • **Insufficient equipment:** Lack of resources results in insufficient supplies, and inadequate facilities(ULTRASOUND MACHINE) • **High Patient Volume**: the excessive number of patients overwhelms the OPD, resulting in long wait times. • Insufficient Staff and Burnout and Fatigue of staff. • **High Stress Levels and Insufficient Breaks** • a) The front desk is always have high-pressure environment, due to which it is leading to burnout and decreased performance. • b) Lack of adequate breaks are resulting in fatigue and reduced attentiveness among staff.

	• Unavailability of rooms on time (waiting time is approximately 3 to 4 hours). **CAUSE**: Due to patient overload in the hospital and a limited number of available beds. • Due to Insufficient numbers of nurses, and support staff lead to overworked staff and inadequate patient attention • ICUs often suffer from insufficient staff, which can lead to inadequate patient monitoring and delayed interventions. • Frequent staff changes can lead to inconsistency in patient care and loss of critical institutional knowledge. • Limited room service and personal assistance services lead to dissatisfaction among inpatients and their families. • Limited room service and personal assistance services lead to dissatisfaction among inpatients and their families • Discharge procedures are often cumbersome and poorly coordinated, leading to delays and patient dissatisfaction. • Lack of clear post-discharge instructions and support can result in inconvenience. • Patients and visitors often face long wait times for registration, appointment scheduling, and billing processes. • Due to Lack of automation and digital solutions leads to inefficiencies and errors in handling patient information. • Inadequate signage and wayfinding systems make navigating the hospital difficult for patients and visitors.

	• Facilities may not fully accommodate the needs of people with disabilities, leading to accessibility issues. • Waiting areas often lack adequate seating, entertainment options, and refreshment facilities, making the waiting experience unpleasant. • Overcrowding and poor layout design contribute to discomfort and stress for patients and visitors. • **Uncomfortable Waiting Areas**: • Waiting areas often lack adequate seating, entertainment options, and refreshment facilities, making the waiting experience unpleasant. • Overcrowding and poor layout design contribute to discomfort and stress for patients and visitors. • Lack of multilingual staff or translation services can result in miscommunication with patients who speak different languages
Suggestions for improvement	• There should be sufficient communication skills or protocol training to reduce misunderstandings. • Pay more attention to new staff and take frequent feedback from previous staff ABOUT THEM. • It is necessary to make appropriate changes to manage patient scheduling to prevent clashes between departments. • Such as changes like one more ULTRASOUND ROOM on the 2nd floor near the gynecology

	department and giving morning appointments on holidays to prevent overcrowding (for cases that are not emergencies). • Staffing and Training: • **Adequate Staffing:** Use historical data and predictive analytics to ensure sufficient staffing levels during peak times. • **Cross-training Staff:** Train staff to handle multiple roles so they can assist in various areas during high-demand periods. • **Customer Service Training:** Enhance staff training in customer service to handle patient inquiries quickly and effectively. • Flexible Staffing Solutions • **Part-Time and Per-Diem Staff**: Use part-time and per-diem staff to cover peak times and unexpected absences. • **Job Sharing**: Implement job-sharing arrangements where two part-time employees share the responsibilities of one full-time position. • **By Creating a Supportive Work Environment**: • Provide regular breaks and support to reduce stress and prevent burnout. • Foster a positive and collaborative work culture. • Manage Patient Load Effectively: Implement efficient triage systems to prioritize care for critically ill patients.• Focus on a quicker discharge process for the previous patient so that the bed will be vacant sooner. • **Enhance Staffing Levels and Training**:

	• Improve hiring practices and offer competitive salaries and benefits to attract and retain staff. • Provide ongoing training and professional development opportunities to keep staff updated. • **Increase Staffing**: Ensure adequate staffing levels to provide appropriate patient care and reduce burnout. • **Optimize Discharge Processes** • **Efficient Discharge Planning**: Develop efficient discharge planning to ensure patients have everything they need before leaving the hospital. • **Post-discharge support**: Provide clear instructions and support for post-discharge care, including follow-up appointments and home care services. • **Streamline Administrative Processes** • **Online Appointment Scheduling**: Implement an easy-to-use online booking system for appointments, pre-registration, and check-ins. • **Automated Check-in Kiosks**: Install kiosks for self-check-in to reduce wait times and administrative burdens. • **Efficient Billing Systems**: Ensure billing is transparent and user-friendly, with options for online payments and installment plans. • **Clear Signage**: Use clear and multilingual signage to guide patients and visitors throughout the hospital. • **Mobile Navigation Apps**: Develop a mobile app with hospital maps, department locations, and real-time navigation assistance,

	• **Mobile Navigation Apps**: Develop a mobile app with hospital maps, department locations, and real-time navigation assistance, • Ensure that waiting areas are equipped with comfortable seating and ample space. • Provide magazines, TVs, free Wi-Fi, and charging stations to keep patients and visitors occupied while they wait. • Offer coffee shops, vending machines, or a small café with healthy food and beverage options at AFFORDABLE PRICE (for the main OPD ground floor, for the PHP department when patients are coming for the review consultation and collection of reports) this will reduce the patient anxiety and will control the conflicts) • Develop clear, easy-to-understand informational materials for patients and families.(SUCH AS MORE EASY LANGUAGE TO MAKE THEM UNDERSTAND ABHOUT THEIR TREATMENT PLANS AND PROTOCOLS) • Use interpreters and translation services to overcome language barriers.(SPECIALLY FOR THE INTERNATIONAL PATIENTS)

Surbhi

Signature of the Student

Approved by the IIHMR University's Mentor

Report should be maximum of 10-12 page

Plagiarism report of SIP

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