

SUMMER INTERNSHIP PROGRAM

at

Manipal Hospitals Dwarka

From 02.05.2024 to 02.07.2024

A REPORT BY

RISHI NANDAN GARG

Master of Business Administration

Hospital & Health Management

2023-25

under the Mentorship of

Dr. Vinod Kumar SV

(Professor & Dean In-Charge S.D Gupta School of Public Health)





03rd July 2024

TO WHOMSOEVER IT MAY CONCERN

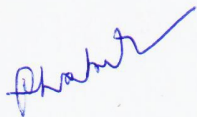
This is to certify that **Mr. Rishi Nandan Garg** has undergone his internship with us from **02nd May 2024** to **02nd July 2024**.

During this period, he has completed a project as an intern in the **Department of Operations**.

His performance on the project assigned and his conduct was found to be good.

We wish him success in his future endeavors.

For Manipal Hospitals Dwarka Pvt. Ltd.



Authorized Signatory



Manipal Hospitals (Dwarka) Private Limited

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Annexure A

Completion Certification from the Organization CERTIFICATE

This is to certify that ~~Dr./Mr./~~ Ms. Rishi Nandan Garg of HM-28 (batch) of MBA - Hospital & Health Management (Name of the department/institute) has worked with our organization for his/hersummerinternship from 02-05-2024 to 02-07-2024 (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: 06.07.2024

(Signature of organization Mentor)

Name: Pankaj Sharma

Designation: Operations (Head)

Seal/Stamp of the Organization

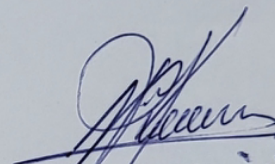


IIHMR University Faculty Mentor Approval

This is to certify that **Mr. Rishi Nandan Garg** of the academic year 2023-25 of **INSTITUTE OF HEALTH MANAGEMENT RESEARCH** has prepared poster with respect to his summer internship held during May-July 2024.

He has carried out work as per the guidelines. His poster is approved for presentation.

Date: 25/07/ 2024

A handwritten signature in blue ink, appearing to read 'Vinod Kumar SV', written over a horizontal line.

(Signature of Faculty Mentor)

Vinod Kumar SV

Professor

About

Manipal Hospitals stands as a prominent multi-specialty healthcare provider in India, catering to a wide range of patients both locally and internationally. With a network of 37 hospitals spread across 19 cities, Manipal Hospitals is recognized as the second-largest hospital chain in the nation. Among its facilities, HCMCT Manipal Hospitals Dwarka, backed by the Human Care Medical Charitable Trust and situated in Dwarka, New Delhi, has been in operation since 2014. This hospital boasts a capacity of 350 beds, including 118 critical care beds, and features 13 state-of-the-art operating theatres. It is well-equipped with advanced medical technologies and staffed by a team of experienced and highly qualified healthcare professionals.

Mission

To enhance "GROWTH, DIFFERENTIATION and PEOPLE" and to serve our patient with smile.

Vision

Destination of Choice to the community we serve
Be the most preferred and respected healthcare organization in every location that we operate.

Organization Structure



SWOT Analysis



Objectives

1. Evaluate Doxper's Impact on Operational Efficiency: Assess how the integration of Doxper's digital solutions enhances operational workflows from Outpatient Department (OPD) to Inpatient Department (IPD) conversions at Manipal Hospitals Dwarka, focusing on the reduction in patient wait times, the accuracy of data entry, and overall patient throughput.
2. Explore the effectiveness of Doxper's technology in terms of ease of adoption by healthcare staff and integration with existing hospital management systems at Manipal Hospitals Dwarka

Doxper's Innovative solution is an AI and ML-enabled system that digitizes healthcare data using a digital pen and encoded paper. This user-friendly method ensures that any information written by healthcare providers is instantly converted into digital format. The data is then processed through an AI-driven handwriting recognition engine and undergoes a quality check for accuracy. The final results are provided as both raw images and structured fields, accessible through various platforms such as Excel, web apps, and mobile apps. Additionally, Doxper offers robust API integration for data sharing and updates across client databases, including government and other healthcare systems (HIS/HMS), facilitating enhanced data analysis and healthcare outcomes.

Methodology

Study setting: MANIPAL HOSPITALS DWARKA
Inclusive Criteria: - In patients - All Cash patients and Panel patients, outpatients
Exclusive Criteria: - ICU / OT patients, EWS and TPA patient Data collection:
Documents and records collected from Trackcare - Hospital targeted time, actual timings in each step of the hospital visits, and services availed from various departments of the hospital. Observation interaction with hospital personnel & patients: Interaction with patients, GROs, floor managers, PCAs and conversion spokesperson to gather information and figure out what's causing the delays and reasons for non-conversion
Observed hospital professionals working to understand the process of how they are handling and coordinating with other departments.

Theoretical vs Practical Exposure

Theoretical knowledge provides an extensive understanding of how hospitals operate and how various departments are structured. However, my hands-on experience has shown that the strategic placement of these departments is essential for minimizing patient transfers, thus enhancing both efficiency and safety. Additionally, my direct participation has deepened my appreciation for the unique roles and duties within the hospital.

Usefulness of Internship

- Diverse Learning Opportunities
- Professional Networking in the Industry
- Development of Professional Competencies
- Engagement with Advanced Technology
- Understanding of Hospital Management

Suggestions

- Precise Role Allocation and Responsibility Sharing.
- Optimization of Billing Processes
- Improved Teamwork within the Radiology Department
- Responsibility for Completing Tasks
- Advanced Handling of Telephone Communications
- Enhancement of Staff Skills and Patient Education

Challenges faced during Internship

The summer internship largely went smoothly, although there were some challenges, primarily due to inconsistent meetings with my mentor. Additionally, there were multiple instances where the guidance on the next steps for my tasks or responsibilities was ambiguous.

Weekly Internship Report

Name of the organization: Manipal Hospitals Dwarka

Area/Department: Operations

Name: Rishi Nandan Garg

Roll no: 1795

Stream: MBA HM

Week 1

<u>Activity Done</u>	Observational Activity Knowledge gain
<u>Linking Theory</u>	Implementing Doxper for OPD digitization enhances EMR effectively.
<u>Gaps Identified on working area</u>	Dilution in KRA Lack of communication Missing appointments slots.
<u>Suggestions for improvement</u>	Role clarity and task allocation to focus on patient conversion and engagement.
<u>Plan for next week</u>	To maximize the patient conversion rate. To record data from depts: Radiology, Laboratory, Pharmacy, etc.

Week 2

<u>Activity Done</u>	Observational Activity Patient feedback analysis. Doxper lead management.
<u>Linking Theory</u>	Hospital as a system and a subsystem includes clinical, utility services, supportive and administrative services.
<u>Gaps Identified on working area</u>	Dilution in KRA Lack of communication

	Phone calls unanswered.
<u>Suggestions for improvement</u>	Implement call forwarding/automated messaging system during peak hours. Enhanced staff-patient communication. Optimize waiting areas
<u>Plan for next week</u>	Observation of Gaps/leakages associated with non-conversions of OPD patient.

Week 3

<u>Activity Done</u>	Observational Activity Slot Booking Leed Management Waste management Gain insights
<u>Linking Theory</u>	Emergency codes of hospital Process map of ER Dept Triage criteria in ER BMW
<u>Gaps Identified on working area</u>	Learning attitude in concerned members Dilution in KRA Lack of communication Prolonged waiting time in billing
<u>Suggestions for improvement</u>	Billing process optimization Phone call management Optimize waiting areas
<u>Plan for next week</u>	Observation in PLTV Time motion analysis

Week 4

<u>Activity Done</u>	Callings management Libre office management Data management in PLTV
<u>Linking Theory</u>	PLTV in hospital for estimation of total value a patient will contribute

<u>Gaps Identified on working area</u>	Prolonged waiting slots in radiology dept. Non completion of callings by staff which affects conversion
<u>Suggestions for improvement</u>	Improving listening skills Prompt slot booking process
<u>Plan for next week</u>	Preparation of PLTV for OPDs. Observational activity in ER dept.

Week 5

<u>Activity Done</u>	Engaged in NABH audit. Leed management MIMATE application management
<u>Linking Theory</u>	Patient retention rate to increase the revenue.
<u>Gaps Identified on working area</u>	Non passionate employees. Poor communication and coordination in various dept,
<u>Suggestions for improvement</u>	Proper coordination to decrease the waiting period Minimize the billing time for panel patients.
<u>Plan for next week</u>	Observational activity Floor management activities.

Week 6

<u>Activity Done</u>	IPD observational activities Patient care routines in IPD Involved in discharge planning.
<u>Linking Theory</u>	Smooth discharge process enhances the patient experience.
<u>Gaps Identified on working area</u>	Communication breakdowns. Care coordination issues.
<u>Suggestions for improvement</u>	Improving communication. Proper training to reduce the billing time.
<u>Plan for next week</u>	Engage in discharge process of ER.

Week 7

<u>Activity Done</u>	OPD observational activity Time motion analysis in PFCs.
<u>Linking Theory</u>	Time motion analysis is aimed to analyse the required at various service delivery stations within the OPDs for smooth workflow, specific tasks.
<u>Gaps Identified on working area</u>	Prolonged waiting time Inefficient patient flow Inadequate resource allocation.
<u>Suggestions for improvement</u>	Patient flow management Adequate resource allocation
<u>Plan for next week</u>	Observational activity. Floor management.

Week 8

<u>Activity Done</u>	Observation activity in NICU Determination of counselling process performed by PFCs.
<u>Linking Theory</u>	Proper counselling and prompt request delivery leads to better patient lifetime value.
<u>Gaps Identified on working area</u>	Prolonged waiting time Inadequate resource allocation.
<u>Suggestions for improvement</u>	Prompt service delivery. Adequate resource allocation
<u>Plan for next week</u>	Summarize the report.

COMPILED REPORT

Name of the Organisation: Manipal Hospitals Dwarka

Area/Department/Project of Summer Internship Program: Operations/ Enhancing Healthcare Efficiency: Integrating Doxper's innovative Solutions for Seamless Digital Transition and OPD to IPD Conversion at Manipal Hospitals, Dwarka, Delhi

Name of the Student: Rishi Nandan Garg

Roll no: 1795

Stream: MBA Hospital and Health Management

Activity Done	Observational Work - Continuous monitoring of clinical and administrative processes within the hospital to identify efficiency issues and areas for improvement. - Regular walkthroughs in various departments to observe interactions and workflows, ensuring adherence to protocols and identifying non-compliance issues. Patient-Feedback Analysis - Collecting feedback from patients through surveys, interviews, and suggestion boxes. - Analysing the feedback data to understand patient satisfaction levels, concerns, and areas needing improvement. - Implementing changes based on feedback to enhance patient care and services. Data Analysis - Gathering and examining data from multiple sources, including patient records, operational metrics, and financial reports. - Using statistical tools to identify trends, patterns, and outliers that can inform decision-making processes. - Reporting findings to relevant stakeholders and suggesting data-driven recommendations for strategic actions. Conversion Optimization - Analysing the patient journey from initial contact through to treatment completion to identify drop-off points. - Implementing strategies to improve patient conversion rates, such as enhancing marketing efforts, streamlining the registration process, and improving patient follow-up protocols. Doxper Lead Management - Managing and optimizing the use of the Doxper system for capturing and tracking leads. - Ensuring accurate data entry and timely follow-up on potential patient leads to increase conversion rates. - Training staff on the effective use of Doxper tools to enhance patient engagement and data quality. Process Flow Mapping - Creating detailed maps of key processes within the hospital to visualize workflows and identify inefficiencies. - Collaborating with department heads to refine these processes, thereby improving patient flow and reducing wait times. - Updating process maps regularly to reflect changes and improvements in workflow.
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Lead Management in Patient Lifetime Value Section

- Tracking and analysing patient interactions over their entire lifecycle to determine the lifetime value of each patient.
- Using insights from lifetime value data to optimize marketing and service strategies, aiming to enhance patient retention and increase overall revenue.

Libre Office Management

- Managing documents, spreadsheets, and presentations using LibreOffice software to support hospital administrative functions.
- Ensuring that all documents are up-to-date and accessible to relevant staff, facilitating smooth operations and communication within the hospital.

MI-MATE Application Management

- Overseeing the operation and maintenance of the MI-MATE application, which supports medical information management.
- Training staff on the effective use of the application to ensure accurate and efficient patient data management.
- Regularly updating the application to incorporate new features and address any operational issues.

Observational Work

- Purpose and Methods: This involves systematically observing the interactions between healthcare providers and patients, as well as the functioning of different hospital departments. Techniques such as shadowing, time-motion studies, and digital monitoring (via CCTV) are employed to gather detailed insights.
- Impact: The findings from observational studies can lead to significant improvements in patient care protocols, the physical layout of the hospital, and staff workflows, enhancing both patient outcomes and employee satisfaction.

Patient-Feedback Analysis

- Tools and Techniques: Advanced analytical tools and software are used to dissect the feedback data. Sentiment analysis, for instance, is employed to gauge emotional responses, while statistical methods are used to quantify satisfaction and detect patterns.
- Outcome: This analysis directly influences policy changes, staff training programs, and patient care practices, aiming to boost patient satisfaction and adherence to treatment plans.

Data Analysis

- Scope: Beyond clinical and operational data, this also covers financial and administrative data,

helping to optimize budgeting, resource allocation, and compliance with health regulations.

- Technology: Leveraging big data technologies and AI to predict trends, prepare for future demands (like epidemics), and personalize patient care based on historical data.

Conversion Optimization

- Online Integration: Enhancing the hospital's online presence to facilitate easier appointment bookings, inquiries, and access to medical records, thereby improving patient conversion rates.
- Continuous Improvement: Regularly updating conversion strategies based on latest data analytics to keep up with changing patient needs and market conditions.

Doxper Lead Management

- Integration with CRM: Integrating Doxper with existing Customer Relationship Management (CRM) systems to ensure seamless information flow and better follow-up strategies.
- Analytics: Using the data from Doxper to refine marketing strategies and customer service approaches, tailoring communication to meet the specific needs of different patient demographics.

Process Flow Mapping

- Iterative Process: Continuous updates and refinements to process maps as new technologies are adopted and as feedback from staff and patients is incorporated.
- Stakeholder Involvement: Engaging different stakeholders, including frontline staff and patients, in the mapping process to ensure the maps accurately reflect real-world scenarios and are practical.

Lead Management in Patient Lifetime Value Section

- Customization of Care: Using insights from lifetime value assessments to tailor communication and care plans for individual patients, enhancing their engagement and satisfaction with services.
- Resource Allocation: More effectively allocating hospital resources based on the estimated lifetime value of patient segments, maximizing ROI on high-value patients.

Libre Office Management

- Document Security: Implementing robust security measures within LibreOffice to protect sensitive patient data and ensure compliance with health data protection regulations.
- Efficiency Enhancements: Customizing the LibreOffice suite with macros and templates that

	speed up routine documentation tasks, saving time for healthcare providers. MI-MATE Application Management - Feature Development: Working closely with software developers to add new features or modify existing ones in the MI-MATE app according to the evolving needs of the hospital. - Data Integration: Ensuring that MI-MATE is fully integrated with other hospital management systems for a unified data management strategy that enhances decision-making and patient tracking.
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Linking theory (Classroom learning) with practice at the organisation	Detailed Explanation of Doxper Implementation and Hospital Systems Implementation of Doxper for OPD Digitization The integration of Doxper into the Outpatient Department (OPD) significantly enhances the management and accessibility of Electronic Medical Records (EMRs). By digitizing these records, Doxper facilitates a more efficient, accurate, and seamless healthcare delivery process, allowing for better tracking of patient histories, easier data retrieval, and improved communication among healthcare providers. Hospital Subsystems Overview The hospital is comprised of various subsystems that ensure its full functionality: -Clinical Subsystem: Focuses on the direct provision of health services to patients, including diagnosis, treatment, and patient care. -Utility Subsystem: Manages essential services such as water, electricity, and HVAC that support both medical and non-medical functions of the hospital. -Supportive Subsystem: Includes services that support clinical activities, such as pharmacy, laboratory, and radiology. -Administrative Subsystem: Handles the overall administration of the hospital, including finance, human resources, and facility management. Process Flow Map in Outpatient Department The process flow map for the OPD outlines the patient journey from registration through to consultation, treatment, and discharge. This map is crucial for identifying bottlenecks and improving patient flow efficiency. Triage Criteria and Biomedical Waste Management Effective triage criteria ensure that patients are prioritized based on the urgency of their medical needs, optimizing resource allocation and patient outcomes. Additionally, stringent biomedical waste management protocols are essential to maintain sanitation and prevent the spread of infections within the hospital environment. Patient Lifetime Value in Hospital The concept of Patient Lifetime Value (PLV) is utilized to estimate the total value a patient contributes to the hospital over time. This metric helps in strategizing long-term financial planning and resource allocation, acknowledging that long-term patient relationships contribute significantly to the hospital's revenue.
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	Patient Retention Rate Improving the patient retention rate is crucial as it enhances revenue and supports the hospital's conversion rate. Strategies to increase retention include improving patient satisfaction, offering follow-up services, and personalized patient care. NABH Audit The NABH (National Accreditation Board for Hospitals & Healthcare Providers) audit is a comprehensive evaluation that ensures hospitals meet high standards of quality and safety. Preparing for and passing the NABH audit can significantly enhance a hospital's reputation and patient trust. Discharge Process in Inpatient Department (IPD) The discharge process in IPD involves several steps designed to ensure patient safety and continuity of care post-discharge. This includes final medical assessments, patient education on home care, prescription management, and scheduling follow-up visits. By effectively managing these elements, hospitals not only improve their operational efficiency but also enhance the quality of care provided to patients, thereby boosting overall patient satisfaction and institutional reputation.
Gaps Identified on the working area	Comprehensive Overview of Identified Gaps in Hospital Operations Communication Deficiencies Between Conversion Spokesperson and Patients A significant gap has been identified in the communication between the conversion spokesperson and the patients. This lack of effective communication can lead to misunderstandings and diminished patient trust, which are critical to patient retention and satisfaction. Improving this area requires targeted training programs for spokespersons to enhance their communication skills and regular monitoring to ensure that communication standards are maintained. Role Dilution of Conversion Spokesperson The responsibilities of the conversion spokesperson have become overly broad, causing a dilution of their Key Responsibility Areas (KRAs). Engaging in activities beyond their primary role of managing patient conversions has likely reduced their effectiveness in their main job function. To rectify

this, a clear delineation of job responsibilities should be established, and additional tasks should be reassigned to other staff members or departments to allow the spokesperson to focus on their core objectives.

Neglect in Post-Consultation Patient Care

There is a noted lack of dedication in attending to patients following their consultations, with patients frequently left unattended. This oversight can lead to patient dissatisfaction and could potentially compromise patient care outcomes. Implementing a structured follow-up process and training staff on the importance of comprehensive patient care could help bridge this gap.

Staff Involvement in Conversion Rates

There appears to be minimal involvement from staff members in efforts to increase patient conversion rates. Engaging staff through incentives, clear communication of goals, and regular training on conversion best practices could enhance their participation and effectiveness in improving these rates.

Inefficiencies in Appointment Scheduling and Billing Procedures

Complaints have been raised regarding the appointment scheduling system and the time-consuming nature of the billing procedure, leading to missed appointments and patient dissatisfaction. Streamlining these processes through better scheduling software and more efficient billing procedures could significantly improve patient experience and satisfaction.

Communication Skills and Learning Attitude Among Staff

There is a lack of effective communication and a learning attitude among hospital staff, which can hinder both personal and organizational growth. Developing a culture of continuous learning and improvement through regular training sessions and encouraging open communication can address these issues.

Extended Waiting Times in Billing and Radiology

Patients experience excessive waiting times during billing and radiology procedures, which can lead to frustration and dissatisfaction. Implementing more efficient workflow processes, possibly through technological advancements or additional staffing during peak times, could help reduce these wait times.

	Timeliness of Staff Callings The concerned staff members are reportedly not completing their callings on time, which negatively impacts the hospital's conversion rates. To address this, it's crucial to monitor staff performance closely, set clear expectations for timely follow-ups, and consider implementing a tracking system to ensure accountability. By addressing these identified gaps systematically, the hospital can improve its operational efficiency, enhance patient satisfaction, and ultimately increase its overall conversion rates. These improvements require a committed approach to staff training, process optimization, and a constant re-evaluation of systems and procedures to align with best practices and patient expectations.
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Suggestions for Improvement	Communication Enhancement -Training Programs: Implement comprehensive communication training programs for all staff, focusing on interpersonal skills, patient interaction techniques, and conflict resolution. -Open and Transparent Communication: Foster a culture of openness by encouraging staff to share insights and feedback through regular meetings and anonymous feedback platforms, which can lead to improved policies and patient care strategies. Role Clarity and Task Allocation -Streamlining Tasks: Clearly define and distribute roles and responsibilities, particularly for those involved in patient conversion and engagement, to ensure focus and efficiency. -Focus on Core Activities: Restrict the conversion spokesperson's duties primarily to patient interaction and conversion, minimizing their involvement in peripheral tasks that can dilute their effectiveness. Phone Call Management -Call Forwarding Systems: During peak hours, implement call forwarding systems to manage high call volumes more efficiently, ensuring no patient queries are missed. -Automated Messaging: Use automated voice messages to handle frequently asked questions and provide information during non-operational hours or when staff are unavailable. Billing Process Optimization -Self-Service Kiosks: Introduce self-service kiosks in the billing department to allow patients to handle payments, print receipts, and check billing details without staff assistance, reducing wait times and staff workload. -Streamlining Procedures: Revise and streamline the billing and appointment scheduling processes to expedite these services, reducing delays and improving patient satisfaction. Task Completion Accountability -Monitoring and Reporting: Establish systems to monitor task completion, particularly for spokespersons and staff directly involved in patient care, ensuring accountability and timeliness in their responsibilities. Improving Listening Skills -Training in Active Listening: Provide targeted training in active listening skills for all staff, enhancing their ability to understand and respond to patient needs and concerns effectively. Coordination in Radiology Department
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- Improved Scheduling: Optimize appointment scheduling to evenly distribute patient load throughout the day, minimizing peak time congestion.
- Enhanced Workflow Management: Implement advanced workflow management tools to coordinate patient flow, equipment usage, and staff assignments more effectively in the radiology department.

Staff Skills and Patient Education

- Continual Professional Development: Encourage ongoing education and professional development opportunities for staff, focusing on both technical skills and soft skills like patient communication and empathy.
- Enhancing Patient Awareness: Develop and distribute comprehensive educational resources for patients, both in print and digital formats, to inform them about their health conditions and treatment options, fostering a better understanding and engagement in their own care.

1. Enhanced Communication Training

- Implementation: Develop a curriculum that includes scenario-based training modules, focusing on common communication challenges in healthcare settings. Utilize role-playing exercises to help staff practice and refine their communication skills.
- Impact: Improved communication can lead to better patient outcomes, increased patient satisfaction, and fewer misunderstandings or conflicts between staff and patients.

2. Role Clarity and Task Allocation

- Implementation: Conduct regular role clarification sessions and workshops where job descriptions are reviewed and updated. Use visual aids like flowcharts to delineate responsibilities clearly.
- Impact: Clear roles can reduce overlap and confusion, increase job satisfaction among employees, and enhance the efficiency of patient care processes.

3. Advanced Phone Call Management

- Implementation: Integrate a sophisticated telephony system that supports intelligent call routing based on caller needs and available resources. Implement voice recognition software to help direct calls more efficiently.
- Impact: Efficient call management can reduce patient wait times on calls, improve information accuracy, and enhance patient experience even before they visit the hospital.

4. Billing Process Optimization

- Implementation: Apart from installing self-service kiosks, redesign the billing software to make it more user-friendly. Consider options for online payment and mobile app integrations that allow patients to handle their transactions remotely.

- Impact: Streamlined billing processes can drastically reduce crowding in the billing area, lessen administrative burdens, and improve overall patient flow within the hospital.

5. Ensuring Task Completion

- Implementation: Use digital tools like task management software to assign tasks and track completion in real time. Regularly review task completion rates and address any bottlenecks or issues in daily briefings.

- Impact: This ensures that all tasks, especially critical ones, are completed on time, improving hospital operations and reducing the chances of errors or delays in patient care.

6. Improving Listening Skills

- Implementation: Include listening skills as a core part of the training modules and use patient feedback to assess and improve these skills among staff. Encourage empathy by sharing patient stories and outcomes that resulted from effective listening.

- Impact: Better listening skills can lead to more accurate diagnoses, increased patient satisfaction, and a stronger patient-provider relationship.

7. Coordination in Radiology Department

-Implementation: Use scheduling algorithms that optimize the use of radiology equipment and personnel. Implement a queue management system that informs patients of waiting times and updates in real time.

-Impact: Improved coordination can reduce waiting times, enhance patient throughput, and lead to better utilization of radiology resources.

8. Staff Skills and Patient Education

- Implementation: Create a continuous learning environment by providing access to online courses, seminars, and workshops. Develop patient education programs that are accessible in multiple formats (videos, pamphlets, apps) and languages.

- Impact: Ongoing staff education ensures that the hospital stays at the forefront of medical and technological advancements, while comprehensive patient education programs empower patients to participate actively in their own care.

Richa
Signature of the Student

Approved by the IIHMR University's Mentor