

Summer Training At



Shalby Multispecialty Hospitals, Jaipur

(May 10-July 2, 2021)

Project Title

**Study on the importance of home care and its existence as a
separate vertical**

By

Tushar Chaudhary

MBA Hospital and Health Management

2020-22



TO WHOMSOEVER IT MAY CONCERN

Ref. No: **SHACD/IN21-22/85**

Date: 20.07.2021

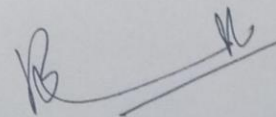
Mr. Tushar Chaudhary has undergone an Internship in "**Homecare Department**"
from 10th May 2021 to 10th July 2021 at **Shalby Hospitals, Jaipur**

During this period he exhibited a high level of professionalism and a tremendous
zest for learning.

We would like to thank his sincere efforts during Covide-19 Period.

We wish Mr. Tushar Chaudhary all the best in his future endeavors.

With Best wishes,



Babu Thomas

(Chief Human Resource Officer)

Acknowledgment

I'd like to express my heartfelt gratitude to all of the professionals at Shalby Hospital, Jaipur for sharing their knowledge and time, as well as our CAO, Mr Anubhav Sukhwani, for providing me with the opportunity to work on this excellent project on the issue of home care existence as a separate vertical.

This also aided me in conducting extensive study on a variety of topics, allowing me to learn about vast and new things.

I express my warm thanks to **Mr P.R Sodani (President of IIHMR University)**.

I would like to say thanks to **Dhirendra kumar (Dean of IIHMR University)**.

I would like to thank **Dr. Pallavi Choudhary** for supporting me in my project.

And I would Also like to say thanks to Dr. Samir Banzal for helping me.

And I'm thankful to them.

and I would like to thank my organization mentor Ajay Chaoudhary and friends Dr. Nidhi Sharma and Nidhi Jadho who help me a lot for in finishing this project with in the limited.

It helped me increasing my knowledge and skills.

Thank you again to all who supported.

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ACRONYMS/ ABBREVIATIONS

- **CSSD** – Central Sterilization and Supply Department
- **Dept.-** Department
- **MS** – Medical Superintendent
- **OPD** – Out Patient Files
- **IPD** – In-Patient Files
- **HOD** – Head of Dept.
- **POST OP.** – Post Operation
- **MO** – Medical Officer
- **TKR-** total knee transplant.
- **VSN-** vital essential desirable
- **ABC-**always better control
- **PR-** purchase request.

Observational Learning

BRIEF DESCRIPTION OF THE ORGANIZATION



Shalby Hospitals is established by Dr. Vikram Shah in 1994. First hospital established in Gujrat (Ahmedabad). Shalby hospital has chain of multi-speciality hospital in india. Shalby Jaipur holding bed capacity of 237 hospitals beds. shalby recognition as a multi-speciality hospital chain in the Indian healthcare industry was established by its founder.

Approach to Healthcare

Persistent centric care through proficient and moral approach is the trademark of Shalby hospitals.

Modest Beginning & Thundering Success

Modest Starting & Thundering Success Shalby hospital may be a world-renowned Joint replacement Middle nowadays setting up numerous records. Since 2007, we have effectively performed thousands of joint replacement surgeries, and the number is on the rise day by day. The change of Shalby into a chain of multispecialty healing centers in around 26 a long time talks volumes for our validity and energy for Healthcare Excellence.

Shalby Multi-specialty Hospitals

Jaipur's Shalby Hospital is located in Chitrakoot, Vaishali Nagar. This Healing Center, which is stretched over a plot zone of 42,033 sq. ft. with a built-up area of 192550 sq. ft., is one of the best-equipped multi-specialty hospitals in Jaipur's western region. It is a one-of-a-kind multi-specialty hospital with 237 beds, including 23 Basic Care beds for restorative and surgical care.

•Sports Pharmaceutical & Orthopaedics Shalby Jaipur provides multi-specialty care throughout the spectrum

- Replacement of joints.

- Cardiology is the study of the heart.

- Oncology, Restorative, Plastic, and Reconstructive Surgery

- Cosmetic dentistry, dental implants, and dental surgery
- In case of an emergency
- Trauma & Casualty
- Gastroenterology (Medical and Surgical) and Endoscopy
- Ophthalmology
- Arthroscopy
- Replacement of joints.
- Cardiology is the study of the heart.
- Oncology, Restorative, Plastic, and Reconstructive Surgery
- Cosmetic dentistry, dental implants, and dental surgery
- In case of an emergency
- Trauma & Casualty
- Gastroenterology (Medical and Surgical) and Endoscopy

Address:

Near Gandhi path underpass,200 ft. Bypass,

Chitrakoot, Vaishali Nagar Jaipur

Rajasthan 302021

Email.www.shalby.org.

Mission

“Leveraging worldwide administration in Joint replacement to set up multi-specialty care over geographies.”

Vision

“Exceeding expectation from health.”

Values

We esteem each human life put in our hands and always work towards assembly the desires of our patient and partners by raising the benchmarks of our benefit conveyances, each time.



Specific Objective

- To understand and the learn day to day micro level operations of management.
- Provide some specific solution for specific problem that we had in that area.

Modes of data collection-

- The primary data collected by the questioner which were approved by the department
- The data is collected by the patient through call and broad casting messages and visiting patient.

General finding on learnings

Department wise observations (Major critical factors) and learnings

A. Business Development Department

- A considerable amount of time (4 weeks) was spent in the business development (home care) dept.
- The main function and motive this department is generate revenue for the hospital in different form and they form are as written following
 - 1) Referral sales (Direct business)
 - 2) Society and social welfare communities
 - 3) Corporate development
 - 4) Home care department
 - 5) Digital marketing
- Main purpose of this department is customer satisfaction and resolve the customer query and generate leads to hospital in the form of patient.
- Referral units main work is contact self to doctors and motive of this contact is generate revenue for the hospital.

- A unit is recognized by the Business development department who has main task is work on Society and social welfare communities of that specific area. And generate leads and contract to hospital.
- 3rd unit and most essential unit in the business development department is corporate department.
- The main function of this department is making contact to PSU(public service unit) like bank, corporates, meet with HR and tie-up from the organization Both govt. & private and generate revenue. As well as TPA (Third party assurance) and generate revenue.
- Some documentation required in the govt tie-up like DD, cash ,

MOU (Memorandum of understanding).

Like we can contact any organization suppose ACC cement and ask for the required for health, and told them about internal policies regarding our services TKR (total knee replacement) and home care are one of them. And tell them about TPA health insurance.

- Another department is digital marketing department this department is main function is maintaining social media campaign and social media page and social media page of the hospital.
- Many things happened in this is-
 - ✚ copy writing
 - ✚ Landing pages
 - ✚ Email
 - ✚ Chat box
 - ✚ Product discretion
 - ✚ Reading times
 - ✚ Copy written.
 - ✚ Free SEO tools
 - ✚ PPC(pay per click advertising
 - ✚ Conversation rate organization.

B. Home care department

- Homecare department is also part of the business development it has create revenue in short manner rather than corporate.
- In- domestic care administrations can offer assistance. Who have automatically help to patient. Proficient care providers such as medical cretakers, associates, and advisors for give short term care and long term care with in the domestic.
- The care you would like within the put you cherish. Domestic care can incorporate.
 - i. Help with everyday exercises such as dressing and showering
 - ii. Assistance with securely overseeing errands for the house.
 - iii. Treatment and rehabilitative services.
 - iv. Short- or long-term nursing care for an ailment, or failure- tallying tracheostomy and ventilator care. Types of domestic care -
- 1. Personal care
- 2. Private nursing care
- 3. Home wellbeing care Individual care
- Other subsidizing sources may be:

How home care department generate revenue?

These are many marketing factors involves for generate revenue from home care.

1) In house branding – parts of in-house branding is

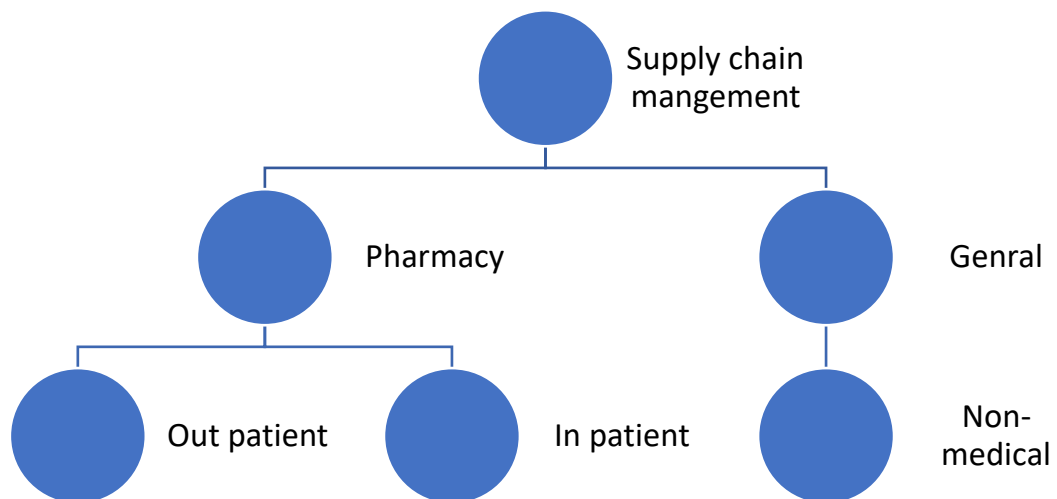
- i. Admission
- ii. Waiting hall
- iii. Templets
- iv. Flyer
- v. Leaflets
- vi. Banner

- vii. Wall branding
- viii. Stanley
- ix. Promotion in IPD patient.

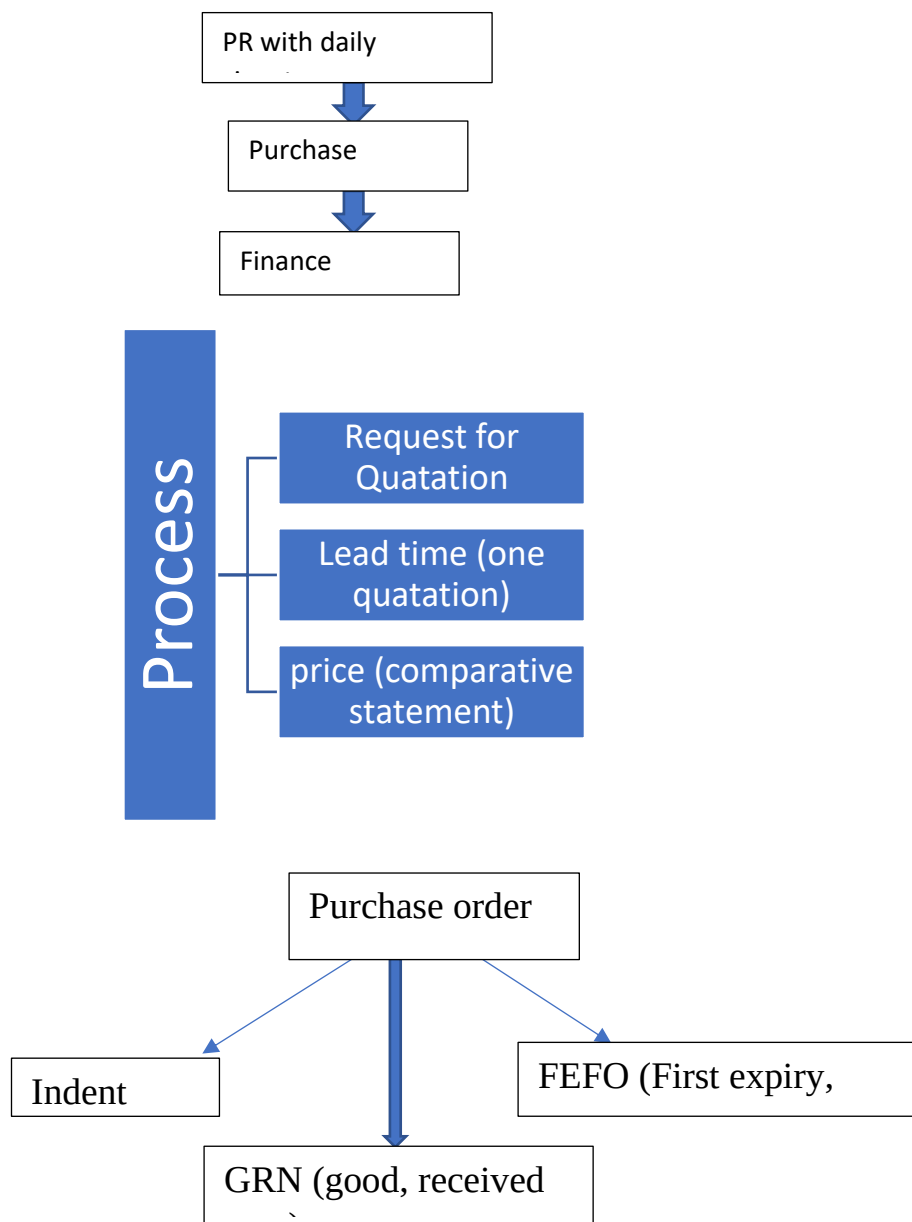
2) Out house branding- part of outhouse branding is-

- i. Reach campaign.
- ii. Branding through google.
- iii. Marketing (in park and social gathering)
- iv. Branding and marketing through gross income.
- v. Promotion of home care packages
- vi. Calling as well as on whatsapp also and broadcasting email to patient.

(C) Purchase Department (Supply Chain Management)



Purchase requisition / Indent



Purchase request form/ purchase requisition (copy sent to administrator for approval)



Purchasing officer



Quotation Invitation



Purchase order form (7 copies)



Receipt of goods



Release of payment to supplier



Purchase manager



Budget manager

GRN return (if amount or quality do not match)

Types of item-

- 1) Capex-capital item
- 2) Opex – operational item.

Inventory control-

- Inventory management techniques for effective inventory management planning.
- The basic function, inventory management is counting- it is used for the management and control of item in stock.
- It is used to determine the prices and for the analysis customer behaviour trends and patterns.
- Best policies dictate that an inventory management system be automated feature cycle counting.
- Create strategic partnership with vendors use historical data to predict future inventories and streamline procurement and delivery efficiently.

ABC Analysis- (always, better, control)

- This is stock managing techniques categories stock into Items of high values , item of moderate value and low value items to help manage stock level decisions.
- It is also called the 80/20 principal.

Category A- they account for 20% of the inventory stock items, but their value or output is worth 80% of the revenue of the stock.

Caring cost of there item are high and the stocking level is low.

Category B- moderate value

The account for 30% of the inventory stock, but their revenue output 15% of the inventory stock. Time could be monthly or quarterly.

Category C—They are purchased frequently.

They usually account for 5% of the revenue output but 50% of the inventory stock items. Associated cost are low and they are typically re-ordered in bulk qualities.

The ABC analysis is better suited to small scale businesses stocking a variety of items.

VED (vital, essential, desirable)-

- The cycle time is +ve time required to gather or pick this item from A storage facility until the item enters the manufacturing process.
- The value recorded in units of time determine how an item is stocked and recorded.

Reorder level-

$(\text{maximum daily sales} \times \text{maximum lead time in days}) - (\text{average daily sales} \times \text{average lead time in days}) = \text{safety stock}$

$\text{Lead time demand} + \text{safety stock} = \text{reorder point}$

D) Infection control department-

- Infection control nurse
- Infection control officer
- Infection control committee

Fumigation occurs (deep clean)- process.



Silver nitrate gas + hydrogen peroxide

Staff training – (a) hand washing

(b) hand hygiene

BMW- bio medical waste - 1) black bag 2) yellow bag , 3) white bag, 4) red bag

HAI- hospital acquired infection.

- Self-life
- Spill management
- Care bundles
- Sterilization
- Disinfection

HAI has 5 types.

- 1) **VAP- Ventilator Associated Phenomena.**
- 2) **CABI- Centreline Associated Blood Infection.**
- 3) **CAUTI- Catheter Associated Urinary Tract Infection.**
- 4) **NSI - Needle Stick Injury**
- 5) **SSI- Surgical Site Infection.**

Prevention CCD Guidelines

White colour container (**AVOID.**)

A- Always discard in puncture proof container.

V- vaccinated with hepatitis fortitis

O- observed universal. Precaution

I – intermediate discard

D- do not recap.

Do

1. Hand wash in running water 4-5 minutes.
2. Inform to ICN in charge.

Don't

1. Do not press.
2. Do not panic.
3. Do not squeeze
4. Do not suck & mouth.

E) Fire Management-

- Fire pump room
- Sprinkler pump
- Hydrant pump
- Jockey pump

Trestle tank in basement – pressure 6.5 kg to 7 kg.

Other equipments

- House drum
- White pipe-less water
- Red pipe- more water
- MCP- (manual care point)
- Dry chemical powder
- ABC – cylinder type

Acronyms to use

- R-Rescue

- A-Alarm
- C-Confine
- E-Extinguish.

PASS

- Pull
- Aim
- Squeez
- Sweep

Sprinkler temperature- 68°C

F) CCSD- (central sterile supply department)

- This process for autoclave the HOSPITAL items, all plastic and OT items.
- ETO machine used for autoclave all the plastic items. ETO have 50°C temperature.
- Ethylene oxide gas used in the ETO machine.
- It takes 6 hours for complete 1 cycle. And item is 1 year usable approx..

Autoclave machine-

- PCD- processing challenging device:-

Autoclave cape indicator-d. Autoclave sterilization at 134 degrees and at 2.2 kg pressure for 7 minutes and 121°C for 15 minutes.

Project Report

Aim- To understand the future possibilities in home care services. `

Objectives- To assess the market size and relevance in today's scenario.

Introduction

Rationale

In India, the domestic healthcare market was estimated to be worth USD 5.2 billion in 2019 and is expected to increase at a CAGR of 19.2 percent from 2020 to 2027. The demand for far better quality and critical care, as well as progress in innovation, can be recognised for the development. Other factors expected to propel the market over the next few years include a growing senior population and disposable income.

the time frame of the estimate According to the World Health Organization (WHO), chronic and lifestyle infections are expected to increase healthcare utilisation in India during the next 25 years. The rising occurrence of chronic illnesses, combined with the need for better emergency and postoperative treatment, is expected to fuel market growth in the country.

A vast variety of factors are combining to generate increasing expectations by patients for an increased role and voice in their health status, according to a report published by journals.sagepub.

Another study published by nejm.org found that home health care was frequently a long-term intervention, with 61 percent of visits going to enrollees who had received home health care for six months or longer.

Research question

To Study the importance of home care and its existence as a separate vertical.

Specific Objectives

To assess the market size and relevance in today's scenario.

Research design

Descriptive study.

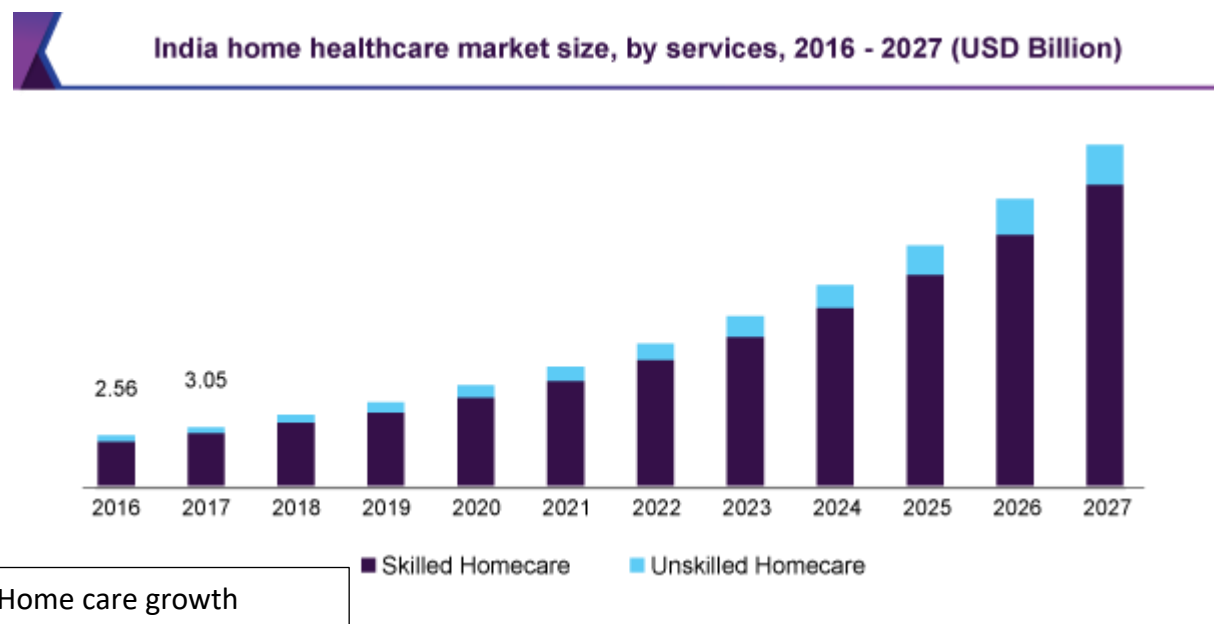
Sample size

Sample size is 40 was used for analysis of the data.

Mode of data collection

- The data was collected in person by visiting IPD and OPD.
- The data is collected through emails and broadcasting google form from patient.

Introduction of Organization (Shalby Hospital)



Domestic healthcare gives restorative treatment for an sickness or damage, expects to assist the quiet recoup, recaptures their freedom, and ended up as self-sufficient as conceivable. More than fair giving great care at domestic, domestic healthcare gives quality care at a division of the cost. Shalby “home care “is one such activity that's pointed at changing the viewpoint of essential domestic wellbeing care administrations in India breaking the boundaries of conventional opinions and profiting master healthcare administration domestic for quick and helpful recuperation of patients from sickness and inabilities. Shalby domestic care is an expansion of Shalby’ hospital firm belief that patients incline toward healthcare administrations within the consolation of their homes. With the developing concept of core families, Domestic Wellbeing care administrations discover a put of comfort for master healthcare which spares time and eases concerns of family individuals approximately the weak individuals of the family, generally the elderly.

Who is in need of in-home health care?

- Patients who have had surgery and require care, supervision, and help at home in order to receive better care.
 - Individualized nursing care, with a focus on patients who have recently been transferred from the ICU to the ward.
 - People with chronic diseases and disabilities, such as Alzheimer's disease, heart failure, kidney disease, and diabetes, who will need specialised care at home.
 - Senior folks who require assistance with everyday activities and are looking for a caring caregiver to assist with healthcare and basic daily tasks.
- For patients who want to provide safe and high-quality care at home for their parents or loved ones.

Shalby home care Services

- a) Pathology services
- b) Nursing Services
- c) Physiotherapy services
- d) Pharmacy

- e) Doctor consultation
- f) Attendant Services
- g) Medical Equipment on Rent/sale
- h) Covid home Isolation Package

. Because of the rising need for treatment and evaluation of cardiopulmonary disorders such as bronchitis, asthma, COPD, and others, domestic respiratory treatment hardware dominated the market. It includes C-PAP, Bi-PAP, ventilators, and nebulizers, among other things. A few of the country's major retailers include Koninklijke Philips, India Bazaar Connect Work Ltd., and Healthgenie.in.

Diagnostics accounted for roughly 35% of revenue in 2019 and is expected to grow at the fastest rate throughout the forecast period. Mechanically advanced products that enable precise and timely determination, such as strapless heart rate monitors, iPhone heart rate monitors, and TQR heart rate monitors, are expected to influence fragment growth. Assist in increasing understanding, consciousness, and awareness of well-being.

- Showcase Share Insights & Key Companies Because of the proximity of a few local and national companies, the Indian market is deeply split. Companies are expanding their operations in response to rising demand.

- Songbirds Domestic Wellbeing Administrations, for example, has recently begun operations in Chennai. To expand its service offerings, Portea Restorative is advertising at-home COVID-19 testing administrations. Furthermore, the market is largely uncontrolled, which could lead to unjustified competition and hostile takeovers. India's domestic healthcare industry's key participants

- Nightingales Domestic Wellbeing Services

- Portea Medical

- Apollo Homecare

- Domestic Wellbeing Care in India (IHHC)

- Senior Care at Grand World

- Home-based healthcare

- Bharath Domestic Medicare is a government-run health-care programme in India.

Details

Report Attribute

-In 2020, the market is expected to reach a value of USD 6.2 billion

Revenue forecast in 2027	USD 21.3 billion
Growth rate	CAGR of 19.2% from 2020-27
Base year for estimation	2019
Historical data	2016- 2018
Forecast period	2020-2027
Qualitative units	revenue in USD million &CAGR
Report coverage	revenue forecast, growth factor
Segment covered	equipment, services.
Country scope	India
Customization scope	free report customization&purchase

- Med Find
- Swarga Community Care
- Suburban Diagnostics
- Shalby homecare

India Home Healthcare Market Report Scope

- **Equipment Outlook (Revenue, USD Million, 2016 - 2027)**
 - Therapeutic
 - Insulin Delivery Devices
 - Home Respiratory Therapy Equipment
 - IV Pumps for the Home
 - Dialysis Equipment for Use at Home

- Other Therapeutic Devices
- Diagnostic
- Diabetic Care Unit (DCU)
- Blood Pressure Monitors
- Diagnostic Monitors with Multiple Parameters
- Kits for Pregnancy and Fertility at Home
- Other Self-Monitoring Technology
- Monitors for sleep
- Holter Monitors are a type of heart rate monitor.
- Heart Rate Monitors
- Other Diagnostic Instruments

- Wheel Chair Home Medical Furniture Mobility Assist

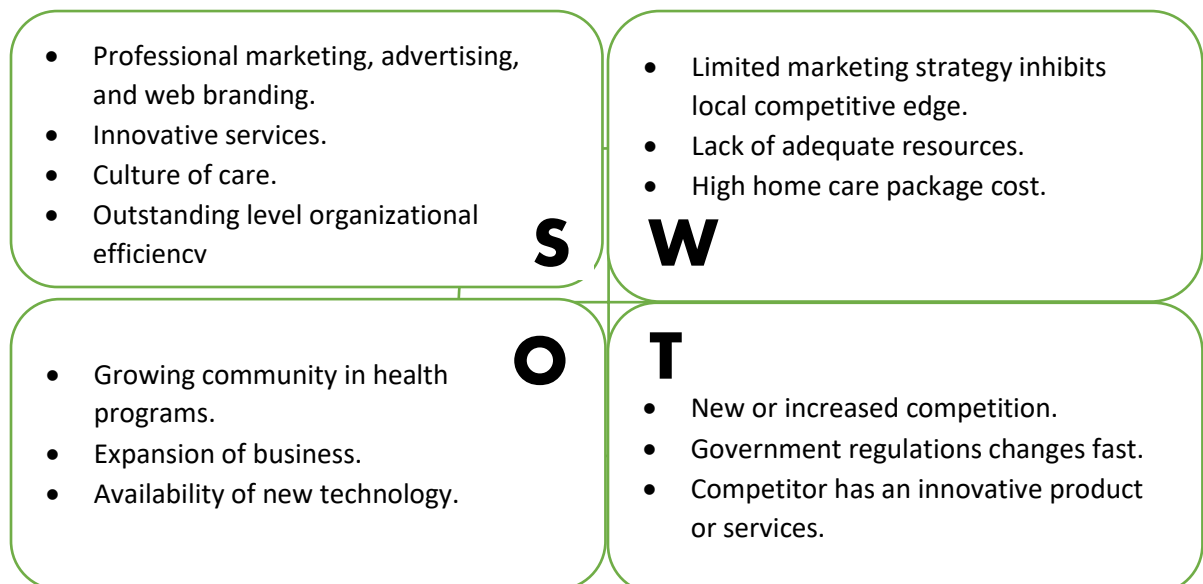
-Walking Assist Devices are a type of walking aid that helps people get around more easily.

Perspectives on Services (Revenue, USD Million, 2016 – 2027)

- **Professional Homecare Services**

- Physicians/Primary Care Physicians/Primary Care Physicians/Prim
- Nursing Assistance
- Occupational, physical, and/or speech therapy
- Nutritional Assistance
- Palliative & Hospice Care
- Other Professional Homecare Services- In 2019, the Indian home healthcare industry was valued at USD 5.2 billion, and it is predicted to grow to USD 6.2 billion by 2020.
- From 2020 to 2027, the India home healthcare market is predicted to increase at a CAGR of 19.2%, reaching USD 21.3 billion.
- -home care market established in 2019 I approx. 83%

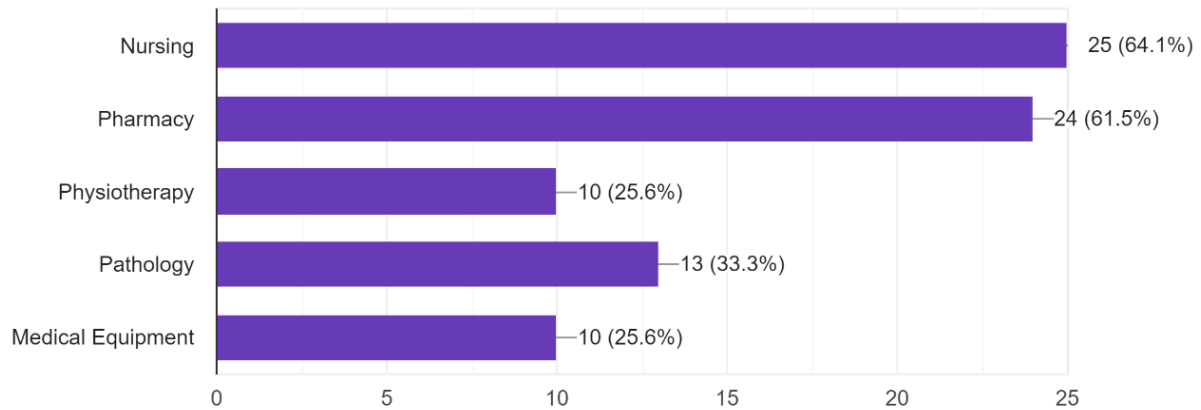
SWOT Analysis



Data Analysis

Which home care services would you prefer ?

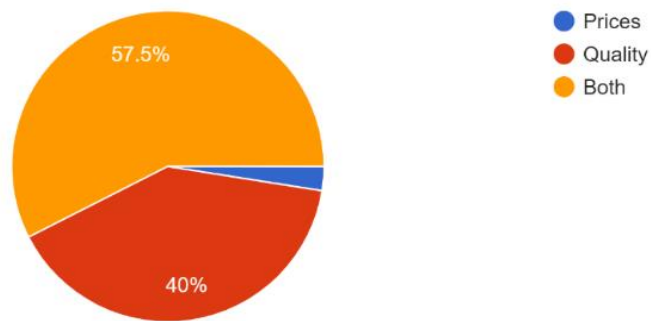
39



Interpretation – Out of the total responses, 64.1% of the people require home care services for nursing needs. The people with chronic diseases who require treatment in every few days prefer more of homecare services then hospital treatment. In this COVID times, home care service shows a very high demand for their treatment. 61.5 % people needs homecare services for their daily pharmacy needs.

While booking Homecare services what will you prefer?

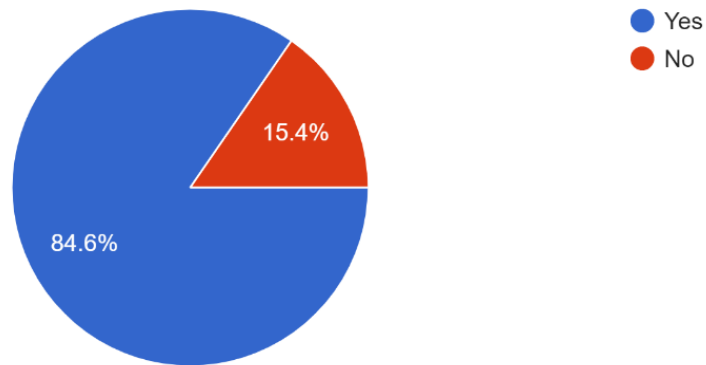
40 responses



Interpretation- With a high demand of homecare services, organization have to provide the quality services at an affordable price. 40% of the respondents require quality services. Mostly patient prefer quality services over the cost

Would you prefer reminder services for regular medicines supply at your doorstep?

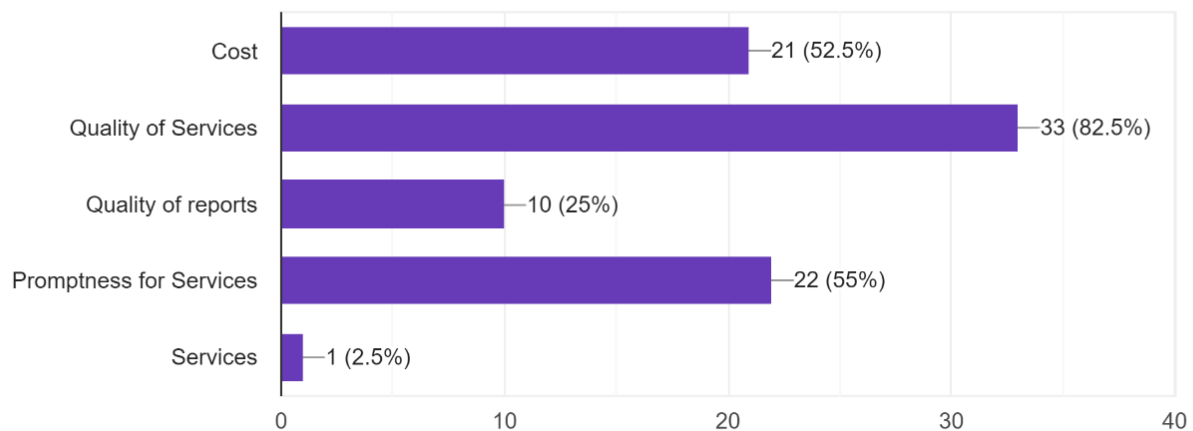
39 responses



Interpretation- 84.6% of the patients require reminder services for their regular medicine needs. Mostly patients have to take their medicines regularly and they want to get a reminder when their medicines is over.

What are the factors that affect your buying decision towards a home care service ?

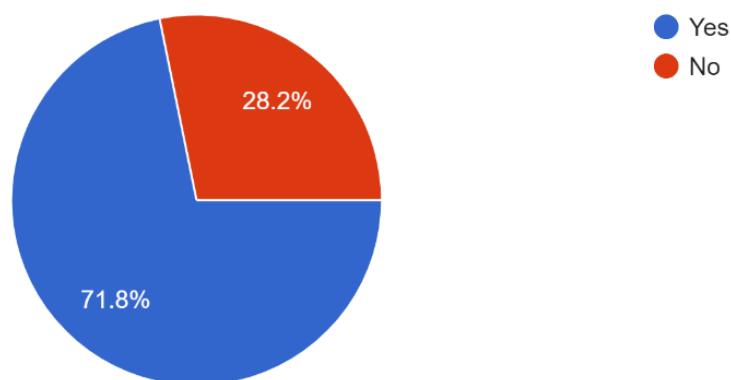
40 responses



Interpretation- 82.5% of the patients looking for good quality services while availing home care services. 52.5% of the patients also want that the providing service would be at effective cost.

How soon you expect services once booked 2 hours, 4 hours, 8 hours, 24 hours does this effect your decision like sample collection or medicine delivery?

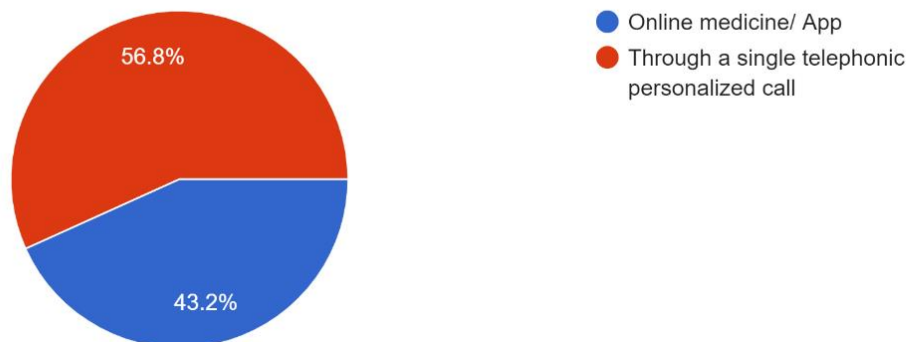
3'



Interpretation- After analysis the data approx. service time affects 72% of people buying decision. We should reduce our service time as much as we can. Because It can improve our quality.

Which mode for availing the services would you prefer ?

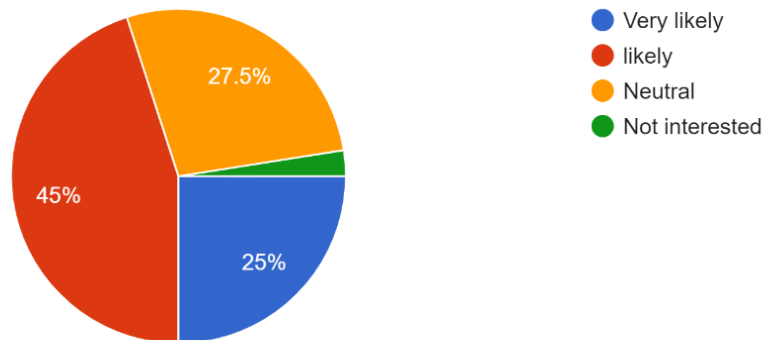
37 responses



Interpretation- 57% of the patients wants to get a homecare service at their place through a single telephonic call. Many times, medical services are emergency in nature which requires a spontaneous response to get the service at their place. Availing service with the use of website or mobile was time consuming many a times.

How likely would you recommended our home packages to your friends/ Relative / Family ?

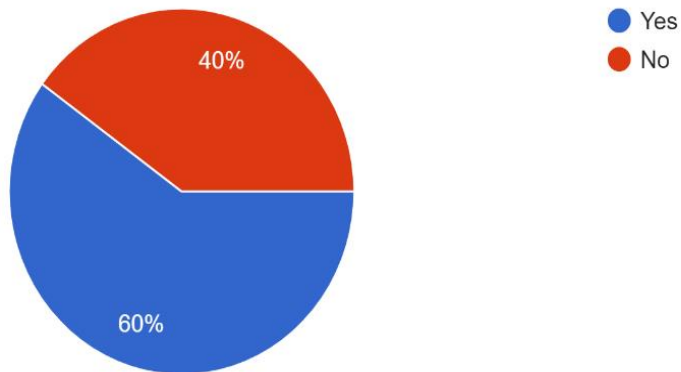
40 responses



Interpretation- As we can see in the graph 45% people like the homecare services. 25% people have preferred home care services.

Do you prefer video consultation at home?

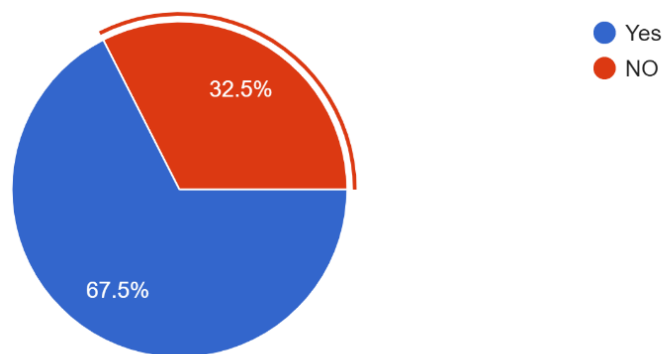
40 responses



Interpretation- 60% of the patients' needs video consultation with doctors. Online consultation with doctors saves time for the patient and provide it at a less cost.

Do you want to understand medical terminology after Dr. prescription ?

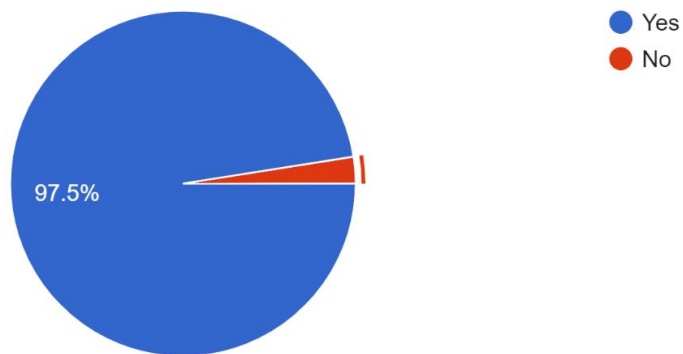
40 responses



Interpretation- 67.5% of the patients wants to understand medical terminology in doctors prescription. It helps to understand their treatment plan, their problems. Also, as per NABH accreditation, it is mandatory to write prescription in capital letters.

was the service employee friendly and helpful?

40 responses



Interpretation- 97.5% patient have noticed our employee nature is friendly and have positive attitude also. This figures defines our quality of skills of shalby nursing homecare employee.

Finding-

- Shalby home care do have increased growth rate every month.
- Shalby home care mostly dependent on TKR. Maximum part of the total home care revenue.
- Through home care we can engage patient to hospital by HMC services.
- In shalby mostly staff are new. It may reduce the services quality of patient.
- During the internship time I had visited most of the department.
- Business development department work efficiently with team. IPR is better in this department than other.

Conclusion

Home health care is predicted to increase at a higher rate than practically any other industry. Increased population ageing, increased incidence of chronic diseases, and the demand for personal medical care expenditures are some of the primary factors driving the expansion of the home health care market size, as well as employee friendly behaviour.

According to survey conducted for shalby home care it is clear that most people want to take the home care services and their buying decision depends on quality of care, nursing and pharmacy services, quick response to their problems and they want these services as it saves time.

They also prefer telephonic or personalised communication with doctors through video conferencing as well as with staff of home care. They also likely to advice their friend and relatives for home care services.

Therefore home care services are also patient centric that hospital needs to take care off as it leads to mouth publicity of hospital as well.

However from this survey the key concern that came across that aroused was lack of communities.

If we go by revenue generation also the 6 months revenue data shows that revenue generated by home care services is sustained and it has the potential to flourish more in future as shalby home care is in its niche state.

Recommendations-

- Shalby hospital Jaipur should implement good system.
- Set goals and commit to ongoing evaluation.
- Collect data and Analyse patient outcomes.
- We should Focus on patient engagement.
- Connect and collaborate with other Organizations. (B to B)
- Focus on the patient satisfaction report.
- Increase man power in the home care department.
- Increased monitoring of the employee and ask for daily leads.

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ANNEXURE

a) Time Schedule					
.No.	Name of the Department	Date(s) of visit	% of time spent	Interacted with (Name and Designation)	
1.	Home care Dept.	10th May	20 days	Ajay Chaudhary (Assistant manager)	
2.	CSSD	14th June	1 day	Ravindra kumar (HOD)	
3.	Fire safety	15th June	1 day	Harindra kumar (HOD)	
4.	Engineering Dept. (IT)	16th June	1 day	Deepak singh (HOD)	
5.	MRD	17th June	1 day	Harish Chaudhary (HOD)	
6.	Maintenance	19th June	1 day	Rajendra singh	
7.	Marketing	21th June	1 day	Devesh Rawat (HOD)	
8.	Pharmacy	25th June	1 day	Mahendra singh (HOD)	