

SUMMER INTERNSHIP PROGRAM

at

**Sir Padampat Institute of Neonatology and Pediatric Health
(SMS Hospital), Jaipur**

From: 15 May 2025 to 29 July 2025

A REPORT BY

Keerti Jat

Master of Business Administration

Healthcare Analytics

Roll no: 0012

2024-26

under the Mentorship of

Dr. Ritu Vashistha



JAIPUR

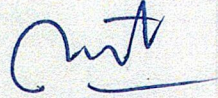
Sir Padampat Institute of Neonatology and Pediatric Health.

S.No./Gen/M.S/ 2900

Dated : 28/7/25

Completion Certification from the Organization

As per order of Directorate medical Education Department क्रमांक
F.21(124)DME/HA/IHMR/2025-00037/833 दिनांक: 13.05.25. Ms. **KEERTI JAT**
pursuing MBA in Healthcare Analytics 2024-26 from IIHMR, Jaipur **Sir Padampat**
Institute of Neonatology and Pediatric Health for her summer internship from
15-05-25 to 29-07-25 The overall performance shown by her during the period was
Excellent.



Superintendent
Sir Padampat Institute of
Neonatology and Pediatric Health
Jaipur अधीक्षक

सर पदमपत् मातृ एवं शिशु स्वास्थ्य संस्थान
जयपुर

IIHMR University Faculty Mentor Approval

This is to certify that **Ms. Keerti Jat** of academic year 2024-26 **School of Digital Health, IIHMR University, Jaipur, Rajasthan** has prepared a poster with respect to her summer internship held during May-July 2025.

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

Date: 30/07/2025

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Dr. Ritu Vashistha

Assistant Professor

BRIEF HISTORY AND DESCRIPTION OF THE ORGANIZATION

Sir Padampat Institute of Neonatology and Pediatric Health in Jaipur also known as J.K Lone Hospital was established in 1963. The hospital primarily focus on pediatric and maternal care, has grown to be the largest children's hospital in the country. It was founded with a building donated by the J.K. Group of industries. The hospital initially had 894 beds hospital including 7 MUs, 6 NICUs, 3 PICUs, 2 SNNRs, 4 PSUs. The hospital has three departments Medicine Pediatric, Surgical, and Genetic rare disease. The hospital undergone expansion, the super speciality ward. The hospital has focused on enhancing its infrastructure with facilities like centralized oxygen supply, oxygen plant.

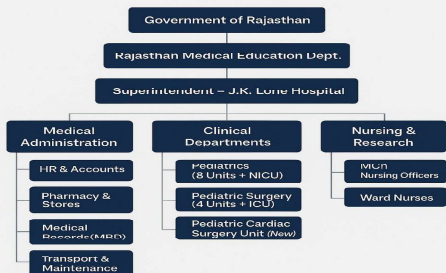
MISSION

To improve the quality of healthcare and became the most revered healthcare service provider in the region.

VISION

Deliver world class integrated healthcare combining medical excellence and compassion.

ORGANIZATION STRUCTURE



THEORETICAL EXPOSURE

- Applied Healthcare Operations management theories to analyse OPD processes.
- Used process mapping and workflow analysis to identify delay.
- The importance of patient experience.

PRACTICAL EXPOSURE

- Conducted real time observation in the OPD
- Collected data on:
 1. Patient waiting time at registration and doctor consultation
 2. Peak hours and flow patterns.
 3. Average consultation duration.
- Participated in design of token based QMS

OBJECTIVES

- To assess the existing patient flow process in the OPD and identify operational bottlenecks causing delays
- To design and implement a Queue Management System (QMS) to streamline registration, waiting, and consultation processes
- To reduce average patient waiting time and improve overall patient experience in the OPD.

QUEUE MANAGEMENT SYSTEM IN OPD

- Patients are issued tokens during OPD registration, helping to maintain order and first-come, first-served consultation.
- Organizes patient flow and ensures timely consultation.
 - Helps patients know their expected waiting time, reducing anxiety.
 - Systematic queue avoids large crowds at the registration or doctor's desk.
 - Maintains social distancing and infection control, important in pediatric hospitals.
 - Staff can focus on patient care instead of manually managing queues.
 - Tokens or digital queues follow a "first-come, first-served" system.

METHODOLOGY

- STUDY PLACE-** Sir Padampat institute of neonatology and pediatric health.
- STUDY POPULATION-** OPD, Lab, Pharmacy and Radiology department
- STUDY DURATION-** 2 months.
- BASELINE ASSESSMENT:** OPD workflow and collected data on patient waiting time.
- STAKEHOLDER ENGAGEMENT:** Consulted doctors, nurses, registration staff, and administration to identify operational gaps.
- GAP ANALYSIS :** Identified issues like manual registration delays, overcrowding, and lack of real-time queue updates.

SWOT ANALYSIS

STRENGTHS

- Improved patient flow and reduced waiting time.
- Enhanced patient satisfaction and experience.
- Organized and transparent queuing process.

WEAKNESS

- Limited digital infrastructure in OPD.
- Staff resistance to change in workflow.
- Lack of technical expertise among OPD staff.

THREATS

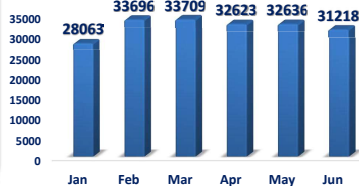
- Scope for integration with IHMS.
- Can serve as a model for other department

OPPORTUNITIES

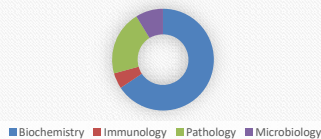
- System failure or technical glitches may disrupt operations.
- Over-dependences on manual backups if digital fails
- Delay in adoption due to administrative approval.

ANALYSIS

TOTAL PATIENT VISIT



Monthly laboratory average patient footfall



CHALLENGES

- Limited digital infrastructure in OPD for implementing QMS.
- Resistance from staff due to unfamiliarity with the new process.
- High patient volume during peak hours made data collection difficult.
- Lack of integration between QMS and existing IHMS system.

LEARNING

- Gained practical understanding of queue management and patient flow optimization in a real hospital setting.
- Learned how to perform gap analysis, develop workflow charts, and collect operational data.

USEFULNESS

- Helped in identifying key operational inefficiencies in the OPD.
- Proposed a realistic and low-cost solution to reduce patient waiting time.
- Contributed to improved patient satisfaction and smoother workflow.

SUGGESTION FOR IMPROVEMENT

- Introduce a semi-digital QMS system as a first step.
- Conduct regular staff training and sensitization on using QMS and patient flow protocols
- Improve digital infrastructure to support full-scale implementation.
- Integrate QMS with IHMS to track patient visits, timings, and service feedback.

Monthly average radiology average patient footfall



WEEK 1

Name of the Organisation: Sir Padampat institute of Neonatology and Pediatric health (J K Lon hospital) Jaipur

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student: Keerti jat

Roll no: 0012

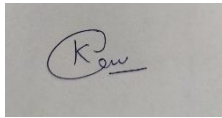
Stream: Healthcare analytics

Week no: 1st

From : 15-05-25 to 17-05-2025

Activity Done	Day-1: Joining Formalities Day-2: Department Visit / observed daily operations Day-3: Completed task given by Dr. Vandana and observed working of IHMS and helped in making QR Code for cleanliness related grievance redressal.
Linking theory (Classroom learning) with practice at your organisation	Used Knowledge acquired during the hospital services module, familiarity with the organizational structure of the government, practical understanding of national health programs, including their registration, number of claims and rejections, etc., and an understanding of the manner in which health policies are implemented, as taught in the health policy and delivery system.
Gaps identified on the working area.	Lack of real-time data entry in IHMS, communication gaps, interdepartmental interactions, service delivery gaps, and technological gaps.
Suggestions for improvement	Proper signages, Washroom facility in waiting areas, maintenance of waiting area, improve data collection in IHMS, data quality audits, need to increase human resource.
Plan for the next week	I have assigned to Review appointment centres Checking how each department schedules patient appointments. Observing their workflow (who does what, when, and how).

	Identifying issues like double bookings, delays, or data entry errors.
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Signature of the Student

WEEK 2

Name of the Organisation: Sir Padampat institute of Neonatology and Pediatric health Jaipur

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student: Keerti jat

Roll no: 0012
analytics

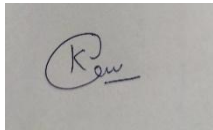
Stream: Healthcare

Week no: 2nd
05-2025

From : 19-05-2025 TO 24-

Activity Done	Day-1 I was assigned to understand the type of data collected as a part of RGHS criteria of the patients. Day-2 : I observed and understood how the IHMS system functions in the hospital ward, including the various processes involved. Day-3 : I learned about the processes of the IHMS system in the Blood Bank -how data is entered, what departments are linked to it, and how the data is stored and managed. Day-4: I was assigned to analyse the IHMS blood bank data. Day-5: We are assigned to calculate Waiting Time of the patient spends between arriving at the DDC and actually receiving their medicine. Day-6 I had gone to give my Swayam exam.
Linking theory (Classroom learning) with practice at your organisation	During my time at the organization, I was able to apply theoretical knowledge from the classroom to real-world hospital settings. we learned about health information systems (HIS) and their importance in improving healthcare efficiency. Observing the IHMS functioning in the hospital ward gave me a real-time understanding of how digital tools streamline patient registration, admission, diagnosis, and discharge processes.

Gaps identified on the working area.	I noticed that some staff faced difficulties using the IHMS system due to limited training, and data was often incomplete or inconsistent. Departments had different ways of working, which caused confusion, and communication between teams wasn't always smooth. Also, room allocation information wasn't well-organized, making it harder to manage efficiently.
Suggestions for improvement	Provide regular IHMS training for staff, standardize procedures across departments, improve communication channels between teams, and maintain organized, up-to-date records for better data and resource management.
Plan for the next week	I have assigned to understand data entering process in the IHMS system



Signature of the Student

WEEK 3

Name of the Organisation: Sir Padampat institute of Neonatology and Pediatric health Jaipur

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student: Keerti jat

Roll no: 0012

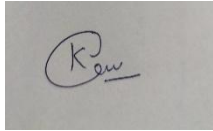
Stream: Healthcare analytics

Week no: 3st

From: 26-05-2025 TO 31-05-2025

Activity Done	Day-1 I was assigned to observe the IHMS system data entering process from IPD Day-2: Observed various NICUs, ICUs data entering process Day-3: Continue to work on that. Day-4: GH holiday Day-5: We are assigned by DME to prepare report of modules of IHMS & their functionality. And, then I joined the internal inspection team by DME to check the cleanliness and repair work in the hospital. Day-6: Created report of the areas required repair and cleanliness in the hospital.
Linking theory (Classroom learning) with practice at your organisation	During my time at the organization, I was able to apply theoretical knowledge from the classroom to real-world hospital settings. we learned about health information systems (HIS) and their importance in improving healthcare efficiency. Data entry and data flow through DBMS module
Gaps identified on the working area.	- Inconsistent Data entry practices. - Improper usage of data for clinical and strategic decision making. - Limited use of collected data
Suggestions for improvement	- Implement uniform Data entry processes. - Provide staff training on Data quality. - Improve Inter-department Data flow.

Plan for the next week	I have assigned to work module of doctor desk.
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Signature of the Student

WEEK 4

Name of the Organisation: Sir Padampat institute of Neonatology and Pediatric health Jaipur

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student: Keerti jat

Roll no: 0012
analytics

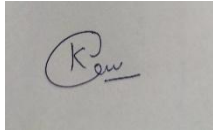
Stream: Healthcare

Week no: 4th
TO 7-05-2025

From: 2-06-2025

Activity Done	Day-1: Working on new involved IHMS module training of kitchen and laundry Day-2: Provide training to the ward Incharges Day-3: learn about mapping Day-4: Continue working on these modules. Prepare a report of the wards using this system and analyse the problems. Day-5: Learn about MAA yojana. Day-6 : GH Holiday.
Linking theory (Classroom learning) with practice at your organisation	Linking theory as I relate it towards the clinical data management process of handling during the clinical trials
Gaps identified on the working area.	- Inconsistent Data entry practices. - Improper data entry by the staff. - Improper coordination between staff and receiver of the laundry and kitchen receiver staff
Suggestions for improvement	- Develop and implement a data entry guideline/manual for staff to follow. - Organize regular team meetings between laundry/kitchen staff and receivers to improve communication. - Introduce a digital checklist or task management tool to track daily responsibilities of staff.

Plan for the next week	I am assigned to work on the MAA yojana project.
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WEEK 5

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no : 0012

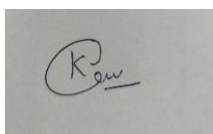
Stream: Healthcare analytics

Week no: 5th

From: 09-06-2025 to 14-06-2025

Activity Done	Day 1: I observed how the doctor's desk works, including managing patient files and prescriptions. Day 2: I saw how the reception handles patient registrations and appointments. Day 3: I shadowed the nurses and learned how they assist doctors and care for patients. Day 4: I learned about entering medical records and the importance of data accuracy. Day 5: I received feedback from my supervisor and reflected on everything I learned. Day-6: Holiday due to second Saturday.
Linking theory (Classroom learning) with practice at your organisation	During my time at the organization, I was able to apply theoretical knowledge from the classroom to real-world hospital settings. we learned about health information systems (HIS) and their importance in improving healthcare efficiency. Data entry and data flow through DBMS module
Gaps identified on the working area.	- Inconsistent Data entry practices. - Improper data entry by the staff. - Improper coordination between staff and receiver of the laundry and kitchen receiver staff

Suggestions for improvement	- Develop and implement a data entry guideline/manual for staff to follow. - Organize regular team meetings between laundry/kitchen staff and receivers to improve communication. - Introduce a digital checklist or task management tool to track daily responsibilities of staff.
Plan for the next week	I am assigned to work on the MAA yojana project.



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WEEK 6

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no: 0012

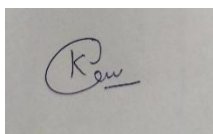
Stream: Healthcare analytics

Week no: 6th

From: 16-06-2025 TO 21-06-2025

Activity Done	Day 1: Understand MAA Yojana scheme in detail their objective, benefits, eligibility. Understand their guidelines and scheme documentation. Day 2: Collect data from hospital registers and system of MAA yojana like no. of infant provided free care, vaccination, diagnostic, medicines Day 3: Field observation and interaction what services they receive, recorded issues in accessibility or awareness. Day 4: Data entry and analysis. Understand the main problems of claim rejections in MAA Yojana. Day 5: Case study and visualization about benefits received and issues faced, no. of beneficiaries per month. Day-6: observed the data insights, awareness and tracking scheme delivery in different departments
Linking theory (Classroom learning) with practice at your organisation	We learned about types of data, cleaning methods and preparing datasets for analysis. Linking the MAA yojana scheme of government from the module of Health policy.
Gaps identified on the working area.	- MAA Yojana software is not integrated with the IHMS system . - Difficult to track beneficiaries due to this. - Increase the chances of data mismatches.

Suggestions for improvement	- Propose Integration linking between IHMS system and MAA Yojana software - Create monthly summary from MAA software. - Prepare the beneficiaries to understand to reduce te claim rejections.
Plan for the next week	Assigned to work on project of prepare a SOP of Queue management integration in IHMS in IPD and OPD.



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WEEK 7

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no: 0012

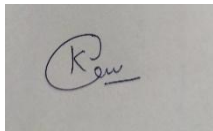
Stream: Healthcare analytics

Week no: 7th

From: 23-06-2025 TO 29-06-2025

Activity Done	Day 1: I observed and understand the doctor desk module in IHMS. Observed a general OPD flow. Day 2: Understood and observe how patient history and vitals are recorded in the system. Day 3: Observed how doctors write prescriptions digitally, learned about integration with pharmacy module. Day 4: Studied how lab reports are viewed through doctor desk. Identify delay in lab report uploading in some cases. Day 5: Participated in reviewing radiology reports via the system. Day-6: Reviewed the referral and follow-up system in doctor desk.
Linking theory (Classroom learning) with practice at your organisation	Linked with the topics in have studied • Electronic Health Records • Clinical Workflow System • Health Information System
Gaps identified on the working area.	- Doctors found the system difficult to navigate. - The Tabs provided were not working properly. - The OPD patient flow in very much difficult to work for the doctors. - No alert for abnormal vitals, missed, follow ups

Suggestions for improvement	- Provide regular training to the doctors - Provide well functioned tablets to the doctors - To manage patient flow provide operators in each OPD to enter the data .
Plan for the next week	Continue work on Doctor Desk.



Week-8

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no: 0012
analytics

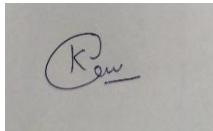
Stream: Healthcare

Week no: 8th
2025 TO 5-07-2025

From: 30-06-

Activity Done	Day 1: Created a checklist of tasks doctors perform daily on the Doctor Desk. Day 2: Collected verbal feedback from 3 doctors in the pediatric and general medicine department. Day 3: Analysed data entry patterns • Errors in entering vitals • Missing diagnosis codes. Day 4:Suggested implementing voice typing for faster case notes entry. Day 5: Worked with IT Team to understand back-end flow of Doctor Desk module. Day-6: Created a doctor desk SOP and Presented to mentor.
Linking theory (Classroom learning) with practice at your organisation	Linked with the topics in have studied • Electronic Health Records • Clinical Workflow System • Health Information System
Gaps identified on the working area.	- No formal system to collect feedback from doctors regularly. - Doctors suggested that typing long cas notes manually is tiring. - Some doctors still prefer writing on paper, especially when system is slow power.

	- Data collected is not analyzed or used to improve clinical decision or patient outcomes.
Suggestions for improvement	- Create a simple digital feedback form within the IHMS for doctors to report problems. - Develop a personal dashboard for each doctor showing numbers of patient seen, pending actions.
Plan for the next week	Continue work on Doctor Desk.



Signature of the Student

WEEK 9

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

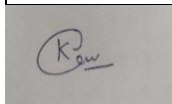
Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no: 0012 **Stream:** Healthcare analytics

Week no: 9th **From:** 7-07-2025 TO 12-07-2025

Activity Done	Day 1: Analyses the OPD load and do the time analysis Day 2: Do the disease trend analysis, most common diagnosis codes, seasonal disease pattern, gender wise disease Day 3: Prescription pattern analysis Day 4: Investigation referral analysis like most ordered lab radiology tests. Day 5: analyses the doctor performance and efficiency Day-6: Patient feedback
Linking theory (Classroom learning) with practice at your organisation	• Electronic Health Records • Clinical Workflow System • Health Information System
Gaps identified on the working area.	- Incomplete data entry - Low adoption by doctors - Lack of real time data sync - Limited use of clinical decision support
Suggestions for improvement	- Training and capacity building. - Make data entry mandatory - Create dashboards to show up disease, prescription trends
Plan for the next week	Continue work on Doctor Desk Project



Signature of the Student

WEEK 10

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no: 0012

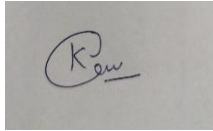
Stream: Healthcare analytics

Week no: `10th

From: 14-07-2025 TO 29-07-2025

Activity Done	Day 1: Understand the current queue management system the queue analysis in the different departments. Day 2: understand and collected data on patient documentation journey, noted time in each section. Average waiting time of patient. Day 3: Collected two weeks data of OPD/IPD patients' data. Day 4: Collected lab data of total patients visit in last two months which are the most test conducted. Day 5: Analyses of patient time from OPD to pharmacy and radiology test Day-6 created report on the queue management, work with the Deloitte team of collecting the data.
Linking theory (Classroom learning) with practice at your organisation	Linked with the topics in have studied • Electronic Health Records • Clinical Workflow System • Health Information System
Gaps identified on the working area.	- Incomplete data entry - Token display system is not their - Waiting area for patient is not their. - No feedback mechanism - Manual overrides and paper slips.
Suggestions for improvement	- Set up digital screen outside OPDs - Prepare a waiting areas for patients - Strict monitoring of IHMS usage

Plan for the next week	As my internship has concluded, there is no further plan for the upcoming week. The final tasks, data collection, analysis, and reporting have been successfully completed and submitted as part of the project deliverables.
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Signature of the Student

COMBINED REPORT

Name of the Organisation: Sir Padampat institute of neonatology and pediatric health

Area/ Department/ Project of Summer Internship Program: Department of Medical Education Rajasthan

Name of the Student- Keerti jat

Roll no: 0012

Stream: Healthcare analytics

Activity Done	Throughout the internship, I was actively involved in multiple hospital departments and digital system modules, contributing to both observation and implementation tasks: • Initial Orientation & Observations: ○ Underwent joining formalities and departmental orientation. ○ Visited key departments such as OPD, IPD, NICU, ICU to observe real-time clinical and administrative operations. ○ Observed appointment scheduling systems and identified issues such as double bookings, long waiting times, and workflow inefficiencies. • Support in IHMS System and Training: ○ Assisted in training sessions related to IHMS modules including kitchen and laundry workflows. ○ Supported ward in-charges in understanding the use of digital modules for data entry and operations tracking. ○ Learned about system mapping, documentation flow, and reporting structures. • Engagement with Doctor Desk Module: ○ Shadowed doctors, nurses, and receptionists to study the functioning of the doctor desk. ○ Understood how patient data, vitals, prescriptions, and investigations are entered and managed in the IHMS system.
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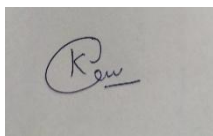
	○ Participated in evaluating performance and usability of the doctor desk module, including the pharmacy and lab integration. • MAA Yojana Scheme Evaluation: ○ Studied the objectives, eligibility, and documentation process of the MAA Yojana. ○ Collected data on the number of beneficiaries receiving free treatment, diagnostics, and medicines. ○ Investigated challenges such as claim rejection and lack of awareness among patients. ○ Conducted field observations to assess how services are delivered and what barriers exist. • Data Analysis and System Reporting: ○ Performed detailed data analysis including OPD load and patient flow time tracking. ○ Analyzed trends in disease patterns, seasonal variation, gender-specific diagnoses, and referral frequencies. ○ Studied doctor efficiency based on prescription behavior and investigation ordering. ○ Collected and interpreted patient feedback to evaluate service satisfaction and digital adoption levels. • Queue Management System Study: ○ Reviewed current queue systems in OPD and IPD departments. ○ Collected time-based data for each stage of the patient journey, from registration to pharmacy/lab completion. ○ Worked alongside the Deloitte team to report findings and propose improvements
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Linking theory (Classroom learning) with practice at your organisation	My academic learning in healthcare analytics was directly applied and strengthened through practical experience in the hospital setting. Key integrations include: • Health Policy & Delivery Systems: ○ Applied knowledge of public health schemes, particularly in evaluating the structure and delivery of the MAA Yojana scheme. ○ Understood government hospital workflows, policy implementation strategies, and challenges in real-world settings. • Hospital Services and Operations Management: ○ Leveraged classroom insights on hospital department coordination, patient pathways, and administrative structures to evaluate operational workflows. ○ Identified bottlenecks in data entry, coordination, and patient registration. • Health Information Systems (HIS) and IHMS: ○ Applied concepts from HIS modules to assess data flows in IHMS, doctor desk usage, and electronic health records. ○ Observed firsthand how digital systems affect decision-making, communication, and care delivery. • Electronic Health Records and Clinical Workflow: ○ Studied how clinical information is stored, accessed, and updated through the doctor desk. ○ Linked theory on clinical workflows to practical scenarios like prescription entry, lab report review, and patient follow-ups. • Data Analytics and Visualization: ○ Used data management and statistical knowledge to analyze OPD load, trends in diagnosis, and feedback results.
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	○ Created visual summaries and dashboards for reporting department-level findings and patient satisfaction insights.
Gaps identified on the working area.	During the internship, I observed several system-level, operational, and data-related challenges across departments: • IHMS & Data System Gaps: ○ Data entry was often inconsistent or delayed, affecting data accuracy and reporting. ○ The IHMS system was not integrated with external platforms like MAA Yojana, making data verification and claim tracking difficult. ○ Inter-departmental data flow was fragmented, leading to redundancies and delays. • Doctor Desk Challenges: ○ Many doctors found the system difficult to use or resisted adopting it fully. ○ The tablets provided were outdated or malfunctioning, hindering proper use. ○ No automatic alerts were available for abnormal vitals or missed patient follow-ups. • Queue Management Issues: ○ There was no digital token or display system to organize patient queues. ○ Manual paper slips were still being used, creating confusion and inefficiencies. ○ Overcrowding in waiting areas and lack of seating made the patient experience poor. • Operational and Coordination Gaps: ○ Communication between departments (e.g., laundry/kitchen and receiving wards) was weak, leading to errors and inefficiencies.

	○ Patients lacked awareness about schemes like MAA Yojana, resulting in lower enrollment and higher claim rejection. ○ There was no formal system to collect structured patient feedback to improve services.
Suggestions for improvement	Based on the observations and analysis, I recommend the following strategies to enhance hospital efficiency, digital adoption, and patient satisfaction: • Digital Integration and Infrastructure: ○ Integrate IHMS with schemes like MAA Yojana to enable seamless tracking and reduce claim rejection rates. ○ Install token display screens outside OPDs for better queue management. ○ Provide high-performance tablets or desktop systems to doctors for efficient IHMS use. • Data Entry and Staff Training: ○ Standardize data entry protocols across departments to ensure consistency and accuracy. ○ Make data entry mandatory for key fields like diagnosis, prescription, and vitals. ○ Conduct regular training workshops for doctors, nurses, and support staff to improve system usage. • Operational and Communication Enhancements: ○ Introduce task management tools and digital checklists for support services (e.g., kitchen, laundry). ○ Organize regular interdepartmental meetings to improve coordination and accountability. ○ Raise awareness among patients through posters, videos, and counselors about the benefits and process of government health schemes.

	• Patient-Centric Improvements: ○ Develop structured feedback forms (digital or paper-based) and analyze responses regularly. ○ Create comfortable and well-marked waiting areas with seating, water, and sanitation facilities. ○ Implement alert systems for follow-up appointments and abnormal health indicators to assist clinical decision-making.
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Signature of the Student

Approved by the IIHMR University's Mentor