

SUMMER INTERNSHIP PROGRAM

At

AIIMS Vijaypur, Jammu

From 13.05.2025 to 21.07.2025

A REPORT BY

Sehba Singh

Master of Business Administration

Hospital & Health Management

Roll no 2073

under the Mentorship of

Prof. Dr. Jagajeet Singh





Lt Gen (Dr) Sunil Kant, SM, VSM (Retd)
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F. No. AIIMS/JMU/MS/2025/ 32

Dated: 21st July 2025

CERTIFICATE

This is to certify that **Dr. Sehba Singh** of **MBA Hospital & Health Management** batch **29th** of **IIHMR Jaipur** has worked with our organization for her summer internship from **13.05.2025 to 21.07.2025**.

The overall performance shown by her during the period was ~~excellent~~/good/average.

This certificate is being issued to meet the requirements of the IIHMR University.

लेफ्टिनेंट जनरल (डी) सुनील कान्त, एसएम, वीएसएम, (सेवानिवृत्त)
Lt Gen (Dr) Sunil Kant, SM, VSM (Retd)
चिकित्सा अधीक्षक सह प्रोफेसर और एचओडी
Medical Superintendent cum Professor and HoD
अस्पताल प्रशासन विभाग
Department of Hospital Administration
अ.भा.आ.सं., विजयपुर, जम्मू - १८४१२०
A.I.I.M.S., Vijaypur, Jammu. 184120

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Sehba Singh** of academic year 2024-26 of **Institute Of Health Management Research** 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: 28.07.2025

A handwritten signature in blue ink, reading 'Jagajeet Prasad Singh'.

Dr Jagajeet Prasad Singh

Professor

Institute mentor: Dr. Jagajeet Prasad Singh
Organization: AIIMS Jammu

Presented by: Dr Sehba Singh MBA HM (2073)
Organization mentor: Dr Sunil Kant

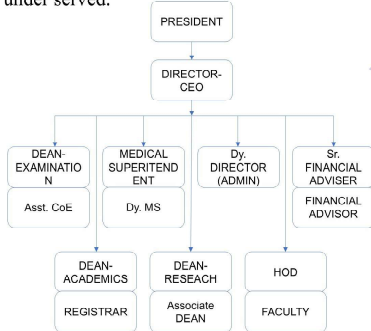
All India Institute of Medical Sciences Jammu, located in Vijaypur, was announced in 2015 under the PMSSY scheme. The AIIMS is a group of autonomous government medical universities of higher education under the jurisdiction of the MoHFW, Government of India. AIIMS Jammu is part of a special development package aimed at strengthening the healthcare infrastructure in the region.. AIIMS Jammu became functional in 2024.

Trinity of Mission

Medical Education, Research & Patient care

Vision

to establish a centre of excellence in medical education, training, health care and research imbued with scientific culture, compassion for the sick and commitment to serve the under served.



MAJOR LEARNING

- Gained exposure to NABH standards, quality audits & research methodology.
- Enhanced skills in data collection, survey design, excel analysis, report writing & presentation.
- Learned hospital operations, planning & change management in a tertiary care setting.

STRENGTH

- Strategic location.
- Association with AIIMS brand & quality.
- State of the art equipment.
- Research & teaching centre.

WEAKNESS

- Low human resource.
- Limited HMIS integration.
- Absence of KPI monitoring.

OPPORTUNITY

- Tertiary care demand in region.
- scope for outreach program.
- research collaborations.

THREATS

- Delays in procurement & administrative decisions.
- Difficulty in retaining manpower.
- Competition from established tertiary care centres.

S-O

- Attract research & grants by brand name.
- Implement outreach programs with govt collaboration.
- Expand regular audit.

W-O

- Recruit & train by fellowships/ academic collaborations.
- integrate digital solutions & monitor KPI's.
- outreach telemedicine programs.

S-T

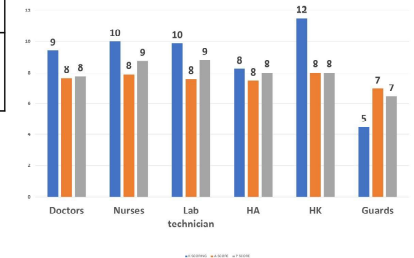
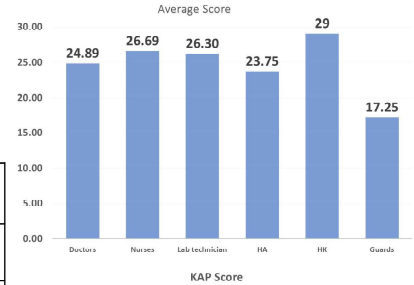
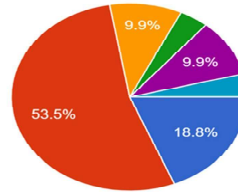
- Promote staff welfare & support their growth.
- Strengthen quality system.

W-T

- Develop retention policies, career development.
- diversify funding sources.
- implement digital solutions to overcome inefficiencies.

Objectives: To assess healthcare workers for their knowledge, attitude, and practices towards biomedical waste management.

Study Design	Cross-sectional, descriptive study
Study Setting	Tertiary care teaching hospital
Study Duration	07.07.2025-18.07.2025
Sample Size & Method	101 samples (convenience sampling)



Suggestions:

- Annual BMW training.
- Regular audits of BMW management.
- Staff-wide Hepatitis B vaccination coverage

CHALLENGES

- Initial communication was misunderstood as criticism, affecting study conduct; improved later with clearer approach.
- Staff showed reluctance in accepting changes, especially those related to NABH standards.
- The hospital was around 40 km away, and long travel hours often led to reduced productivity compared to what I am otherwise capable of.

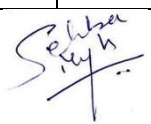
Theory learning	Practical learning
Structure of hospital services.	Interdependent functioning of individual hospital services.
NABH accreditation ensures quality and efficiency.	Compliance process enhances work quality and operational efficiency.
Administration of hospital services.	PCM plays a central role in managing communication and workflows.

Summer Internship Report (Weekly)

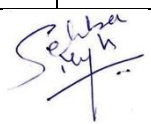
Week 01 (12.05.2025 to 17.05.2025)

Activity Done	1. Introduction to Emergency & Trauma Department layout. 2. Compiled NABH 6th edition standards applicable to E&T Department. 3. Assigned task to conduct risk assessment report of E&T Department. 4. Participated in internal audit of Emergency & Trauma Department.
Linking theory	1. Applied hospital planning concepts. 2. Applied Excel-based skills while compiling standards. 3. Internal audit demonstrated principles of organisation behaviour.
Gaps identified on the working area.	1. Record-keeping stationery unsuitable. 2. Staff reluctant to change.
Suggestions for improvement	1. Include multilevel staff in meetings. 2. Use clear, motivating communication for smoother change adoption.
Plan for the next week	1. Draft outline of the risk assessment report. 2. Finalize and present to the Medical Superintendent.
Dr Sehba Singh 17.05.2025  Signature of the Student University' Mentor Approved by the IIHMR	

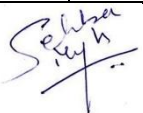
Week 02 (19.05.2025 to 17.05.2025)

Activity Done	1. Audited the Emergency & Trauma Unit. 2. Finalized the SOP format. 3. Completed risk assessment checklist & observations. 4. Visited the OPD. 5. Finalised risk assessment report.
Linking theory	1. Applied NABH quality and patient safety principles. 2. Professional documentations. 3. Structured observation for risk assessment report. 4. Linked OPD workflow to operations.
Gaps identified on the working area.	1. Healthcare worker - patient ratio is inadequate. 2. Absence of a defined contingency plan for disruptions.
Suggestions for improvement	1. Include multilevel staff in decision making. 2. Standardize workflows.
Plan for the next week	1. Present risk assessment report. 2. Visit OT & anaesthesia unit.
Dr Sehba Singh 24.05.2025  Signature of the Student Approved by the IIHMR University' Mentor	

Week 03 (23.05.2025 to 31.05.2025)

Activity Done	1. Discussed quality assurance. 2. Attended a meeting on NABH non-compliance in the Emergency Department. 3. Visited OPD and interacted with the Patient Care Manager.
Linking theory	1. Applied NABH quality assurance and TQM. 2. Observed supportive feedback communication. 3. Understood OPD workflow coordination.
Gaps identified on the working area.	1. Long waiting times in OPD. 2. Delays in diagnostic.
Suggestions for improvement	1. Identify bottlenecks in workflow. 2. Analyse causes of delays.
Plan for the next week	1. Develop a structured OPD workflow study. 2. Analyse Patient-Reported Experience Measures (PREM) for OPD.
Dr Sehba Singh 31.05.2025  Signature of the Student Approved by the IIHMR University' Mentor	

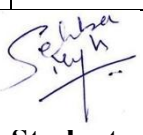
Week 04 (02.06.2025 to 07.06.2025)

Activity Done	1. Attended a meeting on the new system installation [Pneumatic Tube System (PTS), Automated Waste and Laundry System (AWLS), and the Nurse Call System]. 2. Attended presentation on NBAH compliance. 3. Visited the Diagnostic Block. 4. Attended a session on “PanchAmrit & Mission LiFE,”.
Linking theory	1. Applied change management theory. 2. Observed supportive feedback communication. 3. Understood role of hospital in SDG's.
Gaps identified on the working area.	1. Staff queries deferred to training sessions. 2. Human resources constrain in diagnostic section.
Suggestions for improvement	1. Assessed diagnostic unit workflow. 2. Analyse causes of delays.
Plan for the next week	1. Mapping OPD workflow for value stream mapping. 2. Visit to CSSD & laundry unit.
Dr Sehba Singh 09.06.2025  Signature of the Student Approved by the IIHMR University' Mentor	

Week 05 (09.06.2025 to 14.06.2025)

Activity Done	1. Completed OPD VSM data collection. 2. Visited the CSSD 3. Assessed hospital wards using the NABH self-assessment toolkit. 4. Met with faculty from IIM Jammu.
Linking theory (Classroom learning) with practice at your	1. Applied lean concepts for VSM. 2. Understood infection control zoning principles. 3. Assessed ward compliance to NABH standards..
Gaps identified on the working area.	1. Incomplete digitalization causing to inefficiencies. 2. Prescriptions lack full details.
Suggestions for improvement	1. Integrate digital documentation. 2. Ensure proper prescription signing.
Plan for the next week	1. Draft OPD VSM study. 2. Visiting the IPD pharmacy.
Dr Sehba Singh 16.06.2025  Signature of the Student Approved by the IIHMR University' Mentor	

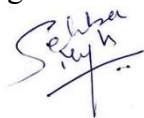
Week 06 (16.06.2025 to 21.06.2025)

Activity Done	1. Review OPD prescriptions. 2. Collected data for prescription review. 3. Assessed NABH compliance in surgery ward. 4. Mentor suggested for changes in OPD VSM study.
Linking theory	1. Applied rational drug use concepts. 2. Quality assurance in NABH compliance.
Gaps identified on the working area.	1. Legibility issues. 2. Lack of countersignature with name and stamp. 3. NABH non-compliance noted in surgery ward.
Suggestions for improvement	1. Provide constructive feedback on prescription writing. 2. Communicate NABH compliance gaps for corrective actions.
Plan for the next week	1. Draft a 10-day plan for study on phlebotomy and lab work in the OPD. 2. Collect prescription data.
Dr Sehba Singh 21.06.2025  Signature of the Student Approved by the IIHMR University' Mentor	

Week 07 (23.06.2025 to 28.06.2025)

Activity Done	1. Collected OPD prescriptions data. 2. Assessed NABH compliance in wards. 3. Switched OPD VSM to LAB VSM & TAT study.
Linking theory	1. Applied audit objectives. 2. Applied systematic data collection & lean tools for process improvement.
Gaps identified on the working area.	1. Prescriptions legibility issues. 2. Missing the prescriber's details. 3. NABH noncompliance in wards. 4. Inadequate lab requisitions. 5. Patients not well informed.
Suggestions for improvement	1. Informed department on necessary improvements in lab working. 2. NABH non-compliance review.
Plan for the next week	1. Analyse prescription audit. 2. Present NABH ward compliance to the Quality Manager. 3. Collected laboratory turnaround time data.

Dr Sehba Singh
28.06.2025



Signature of the Student

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Week 08 (30.06.2025 to 05.07.2025)

Activity Done	1. Analysed OPD prescriptions. 2. Joined senior management on rounds. 3. Collected LAB VSM & Turnaround Time study data.
Linking theory	1. Applied excel for data analysis. 2. Observed change management and interdepartmental coordination.
Gaps identified on the working area.	1. Digital data entry lacking. 2. Poor sanitation & absence of hand sanitizers.
Suggestions for improvement	1. Conduct hands-on digital data entry raining sessions. 2. Implement cleaning audits & provide sanitizer.
Plan for the next week	1. Prepare draft prescription audit study. 2. Complete Laboratory Turnaround Time & VSM data. 3. Visit purchase department.
Dr Sehba Singh 05.07.2025 	
Signature of the Student	Approved by the IIHMR University' Mentor

Week 09 (07.07.205 to 12.07.2025)

Activity Done	1. Completed Lab TAT & VSM data collection. 2. Visited purchase department. 3. Got permission to conduct a KAP study on BMW management.
Linking theory	1. Understood procurement under GFR. 2. Designed objective and questionnaire for KAP study after literature.
Gaps identified on the working area.	1. Digitalisation resources present but staff is reluctant.
Suggestions for improvement	1. Conduct hands-on sessions for digital work & paperless hospital.
Plan for the next week	1. Get questionnaire approved. 2. Reach staffs for study sample.
Dr Sehba Singh 12.07.2025  Signature of the StudentApproved by the IIHMR University' Mentor	

Week 10 (14.07.2025 to 21.07.2025)

Activity Done	1. Created BMW questionnaire with HOD Microbiology. 2. Collected responses via Google Forms. 3. Observed BMW workflow. 4. Presented final PPT.
Linking theory	1. Applied principles of survey design. 2. Connecting BMW rules with practices. 3. Used communication & presentation skills.
Gaps identified on the working area.	1. Many staff members lack awareness of BMW management.
Suggestions for improvement	1. Conduct annual training sessions as per BMW Rules 2016 guidelines.
Plan for the next week	1. Complete final SIP report and poster. 2. Report to IIHMR Jaipur.
Dr Sehba Singh 21.07.2025  Signature of the StudentApproved by the IIHMR University' Mentor	

Compiled SIP Report

This is a compiled report summarising the 10-week summer internship programme at AIIMS Jammu, highlighting key activities, learnings, gaps identified & suggestions for improvement.

Key Activities

- Conducted NABH self-assessment in emergency & trauma unit, OPD & IPD.
- Performed FMEA study on potential risks in the Trauma and Emergency Unit.
- Formulated a patient feedback form for OPD patients.
- Conducted a prescription audit based on NHM 2025 guidelines at the hospital pharmacy.
- Visited CSSD, laundry unit, and pharmacy to understand their operations.
- Conducted a Value Stream Mapping (VSM) and Turnaround Time (TAT) study in the Clinical Biochemistry Laboratory.
- Designed a questionnaire and conducted a KAP study to assess BMW management awareness among staff.
- Observed procurement workflow & participated in quality improvement meetings.

Linking theory :

- Hospital Services: Interdepartmental functioning across CSSD, laundry, diagnostics, OPD, and IPD.
- Layouts & Zoning: Planning and zoning in functional areas of the hospital.
- Organisational Behaviour: observed change management & supportive feedback communication.
- Research Methodology: Understood the principles of literature review, study design, sampling, data collection, survey development, and Excel-based analysis.
- Business Communication: constructive communication with staff, professional documentation and presentation skills.

Gaps identified:

- Staff reluctance towards digitalisation and change in workflow.
- FMEA Study: documentation gaps, equipment maintenance, inventory tracking, and ambulance checklist protocols.
- Biochemistry Lab: workflow inefficiencies.
- Prescription Audit: Poor legibility and incomplete information.
- KAP study: Low Hepatitis B vaccination coverage & inadequate BMW training.

Suggestions for improvement:

- Encourage inclusive departmental meetings with representation from all staff levels.
- Track Lab TAT as a KPI for continual improvement.
- Strengthen the use of PTS and AWLS to improve hospital efficiency.
- Conduct regular digital & BMW training.
- Implement standard prescription format.

Key Learning:

- Gained exposure to NABH standards, quality audits & research methodology.
- Enhanced skills in data collection, survey design, excel analysis, report writing & presentation.
- Learned hospital operations, planning & change management in a tertiary care setting.

Dr Sehba Singh

21.07.2025



Signature of the Student

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