# SUMMER INTERNSHIP PROGRAM

**at**

# MedySeva

From 12/05/2025 to 21/07/2025

A REPORT BY

Mrinal Srivastava

Master of Business Administration

Hospital and Health Management

Roll no 1997

**2024-26**

under the Mentorship of

**Shyam Prasad Chattopadhyay**

**Assistant Professor**

medyseva
अच्छी सेहत का वादा

21st July, 2025

**TO WHOMSOEVER IT MAY CONCERN**

This is to certify that Dr. Mrinal Srivastava, of IIHMR, Jaipur, batch 24-26 has worked with our organization for their summer internship from 12th May, 2025 to 21st July, 2025. During the period of her internship, she has been found to be very punctual, quick learner, detailed oriented and disciplined, always open to learn new things and came forward with new ideas. She will be an asset to the organization she joins.

We wish Dr. Mrinal Srivastava all the best and success in her career endeavors.

Yours faithfully
for **Medyseva Technology Private Limited**

(Dr. Vishesh Kasliwal)
**MD**

Medyseva Technologies Pvt. Ltd.



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Registered Office : 18/A, Electronic Complex, Pardeshipura, Indore. M.P. - 452010

IIHMR UNIVERSITY

# IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Mrinal Srivastava** of the academic year 2024-26 **Institute Of Health Management Research** has prepared a poster with respect to his 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**

**S.P. Chattopadhyay**

**Asst. Professor**

# MedySeva : Phygital Healthcare Company


## Presented by – Mrinal Srivastava HM-29 1997

University mentor - S.P Chattopadhyay

Organization mentor – Dr. Shristi Singh


## About Telemedicine and Phygital Model

About telemedicine Market India's telemedicine market was valued at 1.10 bn dollar in 2022 and is estimated to expand at a CAGR of 21.2% from 2022-30 and will reach 5.15 bn dollar in 2030.One of the main reason propelling the growth of this market is advanced technologies.

The phygital model in telemedicine merges the physical and digital aspects of healthcare to provide a more comprehensive and accessible medical experience. This hybrid approach leverages both in-person services and digital technologies to create a seamless, integrated healthcare system

## About MedySeva

MedySeva Founded year-2021

Founder and CEO of MedySeva-Dr. Vishesh Kasliwal

Co-Founder of MedySeva -Rachita Kasliwal

MedySeva is a healthcare startup focusing on Telemedicine in Rural India. It Seek to become the ultimate healthcare partner of all citizen such that they can get access to high quality healthcare services with ease and at affordable prices. MedySeva Bridges the gap between the urban doctors and rural patients through e-clinic. like many startup stories, MedySeva journey began during covid pandemic with the realization for the need of good doctors to our friends and family living in rural areas. This led to emerging of MedySeva who provide the video consultation through our phygital Centre the ideal mix of online and offline. Currently MedySeva has 75+ operational Centre all over India and over 15,000+patient consultation has been done by the organization.

## Mission & Vision

To be the nearest, affordable and the most reliable healthcare destination for the rural citizen of India.

To ensure that every rural citizen of India has access to high quality doctors and medical services at their convenience and at affordable prices.

## ORGANISATION STRUCTURE

**CO-Founder/Marketing & HR**

- Head HR & Admin
- Chief Marketing Officer
- Digital Marketing Executive
- Content Writer
- Field Executive
- Graphic Designer

**Founder & CEO**

- Chief Finance Officer
- Chief Medical Officer
- Chief Operating Officer
- VP Operations & Supply Chain Telemedicine

**Co-Founder/Technology**

- Chief Technical Officer
- Project Lead
- Developer
- Tester

## SWOT ANALYSIS

**S**

RURAL FOCUS & ACCESIBILITY

PHYGITAL MODEL ( PHYSICAL + DIGITAL CLINICS)

AFFORDABLE & SCALABLE MODEL

INNOVATION IN DELIVERY (MEDYVEND)

**W**

LOW AWARNESS & HEALTH LITERACY

STAFF TRAINING & RETENTION

LIMITED PERSONNEL CONNECTION

DATA SECURITY RISK

**O**

TECHNOLOGICAL ADVANCEMENTS

GOVERNMENT COLLABORATIONS(ABDM)

COST EFFECTIVE

BROAD RANGE OF SERVICES

**T**

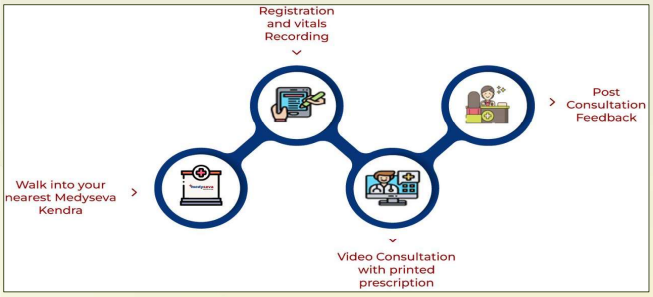
PATIENT TRUST AND ACCEPTANCE

REGULATORY ISSUES

TRUST BARRIER

FUNDING CHALLENGES

## Patient Journey




## Activities

Gathered data on population, schools, colleges, hospitals, and pharmacies in Hinganghat, Umred, and Saoner for setting up a MedySeva Clinic.

Tele called to invite ASHA Workers for conducting successful health camps.

Attended ABDM integration meeting and reviewed MedySeva's platform.

Created a video on awareness on common diseases for patient education.

| Theoretical Exposure | Practical Exposure | Usefulness |
|---|---|---|
| • Gained comprehensive knowledge about telemedicine and it's role in modern healthcare.<br>• Understood data privacy and security measures, principles of management.<br>• Gained knowledge of software<br>• Learned about patient relations management. | • Organizational behavior communication market research<br>• Identification of the patient through tele calling learning app functionalities and user interface.<br>• Collaborated with doctors.<br>• Leaned to manage patient queries and provide information remotely. | • Practical application of theoretical knowledge.<br>• Skills development-communication, data analysis, problem solving.<br>• Industry exposure.<br>• Professional network.<br>• Personal Growth-Adaptability, confidence, |

## CHALLENGES FACED

Interaction with the staff during the initial phase.

Managed the increase screen timing.

Organizational culture and working dynamics.

Understanding the complexity of different processes.

## LEARNINGS & SUGGESTIONS

Understanding the concept of telemedicine.

Team Dynamics: Understood the importance of teamwork and collaboration

Data interpretation, information management

Patient-Centric Approach

Bridged the gap between academic concepts and real-world application.

Professionalism

Need to work together for the betterment of the organization

Need to do Aggressive Marketing.

listen everyone opinion and discuss with everyone.

Avoid politics in the organization.

Give views, on which organization collaboration can be beneficial to the organization

## Conclusion

MedySeva's phygital model is bridging the healthcare gap rural India by combining digital and on-ground services for accessible, affordable care. Rapid growth and positive impact highlight its success. Collaborations with government and NGOs will further strengthen its mission to become the most reliable healthcare partner for rural citizens.

# Reporting Format (Weekly)

**Name of the Organisation: MedySeva**

**Area/ Department/ Project of Summer Internship Program: Operations and Outreach intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital and Health Management**

**Week no: 01 From: 12/05/2025 to 17/05/2025**

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|---|---|
| **Activity Done** | Orientation, Assignment to make an Implementation plan to promote MedySeva in Rural Indore and a Roadmap on marketing strategies.<br>A session on Telemedicine and assessment test, presentation for medical representative and enhancing Doctor's pitch script in sales communication.<br>How MedySeva app works, appointments booked and how revenue is generated from Teleconsultations.<br>Went for field visit to nearby villages where MedySeva clinics are there. |
| **Linking theory (Classroom learning) with practice at your organisation** | Applied classroom knowledge to real-world scenarios by analysing incidence and prevalence rates during community visits and planning.<br><br>Gained practical insights into public health outreach and healthcare delivery models through MedySeva's operations. |
| **Gaps identified on the working area.** | Inconsistency in project objectives and field execution.<br><br>Presence of communication gaps between team members and departments. |
| **Suggestions for improvement** | Establish regular check-ins and project alignment meetings to ensure clarity and consistency in objectives. |

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| | Implement structured internal communication protocols (e.g., shared digital task boards or daily briefings).<br><br>Introduce standard operating procedures (SOPs) for interns and team members to enhance coordination and role clarity. |
| **Plan for the next week** | To work on how to improve the efficiency and efficacy of work.<br>Work on team coordination and documentation. |

*Mrinal Srivastava*
*MBA HM 29*
*1997*

**Signature of the Student**

**Approved by the IIHMR University's Mentor**

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# Reporting Format (Weekly)

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**Area/ Department/ Project of Summer Internship Program: Operations and Outreach Intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital and Health Management**

**Week no: 02** **From: 19/05/2025 to 24/05/2025**

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| **Activity Done** | Coordinated with ASHA Workers to support patient mobilization for camps.<br>Attended ABDM Integration meeting and reviewed MedySeva's platform.<br>NGO Outreach for collaboration with MedySeva.<br>Regional research for clinic expansion.<br>Participated in discussion on improving fixed income strategies. |
| **Linking theory (Classroom learning) with practice at your organisation** | Applied concepts of Community engagement and primary healthcare delivery.<br>Utilized health policy and digital frameworks from ABDM sessions<br>Implemented strategic planning and stakeholder mapping<br>Applied principles from the NGO Management and collaboration module during coordination with partner organizations. |
| **Gaps identified on the working area.** | Limited digital literacy among grassroots health workers hindered effective ABDM integration.<br>Lack of standardized protocol for inter NGO collaboration.<br>Inadequate baseline data for regional needs assessment in proposed clinic expansion areas. |
| **Suggestions for improvement** | Organize orientation sessions or digital training for field workers on ABDM tools and procedures.<br>Develop an Standard Operating Procedure (SOP) for NGO engagement and collaborative action.<br>Recommended a preliminary health needs survey in potential areas to support data-driven clinic expansion decisions. |

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| **Plan for the next week** | Follow-up with NGO's for formalizing MoUs or collaborative plans.<br>Attend internal review meetings on outreach effectiveness and provide feedback from field activities.<br>Support the planning and execution of a pilot health needs assessment survey. |

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**Area/ Department/ Project of Summer Internship Program: Operations and Outreach intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital and Health Management**

**Week no: 03** **From: 26/05/2025 to 31/05/2025**

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| **Activity Done** | Handled patient queries and messages.<br>Connected with several pharmacies in the Hinganghat region to gather information on available rental spaces for establishing a medyseva clinic.<br>Gained hand-on experience and insight into how appointment booking process is managed.<br>Worked on identifying, drafting and curating content for promotion.<br>Compared prices of hospital services and office equipment for Doctor Consortium.<br>Reviewed Medyseva's website and suggested about the changes to be made in order to make the website more engaging to the general Audience. |
| **Linking theory (Classroom learning) with practice at your organisation** | Applied concepts from Health Communication, Hospital Operations, and Outreach Management learned in class. Used theoretical knowledge of patient flow, health behavior models, and IEC (Information, Education, Communication) strategies while interacting with patients and drafting health promotional materials. |
| **Gaps identified on the working area.** | Limited local language customization in digital content.<br>Some patients found it difficult to understand teleconsultation benefits without visual aids.<br>Delay in real-time doctor availability updates at centers.<br>Lack of structured feedback collection from patients post-consultation. |
| **Suggestions for improvement** | Increase use of regional language visuals and voiceover content.<br>Develop quick video explainers or visual guides for first-time users.<br>Improve synchronization between doctor schedules and booking slots in the system.<br>Introduce short feedback forms at the end of each consultation to measure satisfaction and improve services. |

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| **Plan for the next week** | Assist in designing a visual health education board for the center.<br>Help in testing an updated version of the appointment system.<br>Draft weekly awareness content for Medyseva's Facebook and WhatsApp campaigns.<br>Collect patient feedback post-consultation to analyze service experience. |

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# Reporting Format (Weekly)

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**Area/ Department/ Project of Summer Internship Program: Operations and Outreach Intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital and Health Management**

**Week no: 04** **From: 02/06/2025 to 07/06/2025**

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| **Activity Done** | Conducted field-level research in Saoner and documented details of its villages and Gram Panchayats.<br>Compiled a list of potential villages in Umred, Saoner, and Hinganghat for organizing health camps. Created Excel databases of villages in Saoner and Hinganghat highlighting nearby target areas.<br>researched current healthcare policies of Maharashtra relevant to telemedicine setup and made a documentary.<br>Gave promotional ideas for PRO to increase patient footfall in camps.<br>Researched licenses/documents required for setting up a teleconsultation clinic.<br>Started making awareness videos on common diseases for patient education.<br>Collected data on key parameters (community, banks, dealers, etc.) in Umred, Hinganghat, and Saoner. and made a documentary.<br>Reviewed and corrected the MedySeva brochure and suggested content changes.<br>Created a 25-slide PPT on Nutrition & Diet for AKSA Indore. |
| **Linking theory (Classroom learning) with practice at your organisation** | Applied public health and policy knowledge to analyze Maharashtra's telemedicine framework.<br>Utilized skills from communication and healthcare marketing subjects to design awareness material and brochure corrections.<br>Used research and data analysis concepts to create field-based demographic reports. |
| **Gaps identified on the working area.** | Limited awareness material in local languages for patients.<br>Need for stronger strategies to improve camp participation.<br>Need for stronger marketing strategies to make people aware about MedySeva setup |

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| **Suggestions for improvement** | Create more culturally relevant awareness videos and posters. Company have to make effective marketing strategies |
| **Plan for the next week** | We will work towards ensuring the smooth planning and execution of both the new setup and upcoming health camps. |

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# Weekly Report

**Name of the Organisation: MedySeva**

**Area/ Department/ Project of Summer Internship Program: Operations and Outreach Intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital and Health management**

**Week no: 05** **From: 09/06/2025 to 14/06/2025**

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| **Activity Done** | Compiled an Excel database of 10 doctors each from Madhya Pradesh and Uttar Pradesh across 19 medical specialties for potential collaboration with MedySeva.<br><br>Created a list of ASHA workers from Saoner and Umred regions to support the launch of new MedySeva centers, with the aim of mobilizing local patients.<br><br>Developed a presentation (PPT) for proposed collaboration with Vedantaa Medical College, Palghar**,** outlining key benefits and partnership opportunities.<br><br>Conducted research to identify potential villages suitable for setting up MedySeva clinics, focusing on underserved areas with scope for healthcare outreach. |
| **Linking theory (Classroom learning) with practice at your organisation** | Data Compilation<br>Stakeholder mapping<br>Field Level planning for rural healthcare delivery<br>Outreach strategy development |
| **Gaps identified on the working area.** | Limited availability of updated contact data for doctors and ASHA workers, especially in rural regions.<br><br>Lack of structured criteria or framework to evaluate village suitability for clinic setup.<br><br>Need for more localized insights (like disease burden or health behaviour trends) to strengthen collaboration proposals. |
| **Suggestions for improvement** | Establish a standardized database format for all outreach efforts to ensure consistency and easy integration across teams.<br><br>Collaborate with local health departments or NGOs to access more reliable and real-time data**.** |

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| | Include field surveys or telephonic interviews with village leaders or ASHA workers to validate the suitability of new clinic locations.<br><br>Develop templates or toolkits for future collaborations to streamline proposal drafting. |
| **Plan for the next week** | Follow up with shortlisted doctors from Madhya Pradesh and Uttar Pradesh to discuss collaboration opportunities and gather their availability and willingness for onboarding.<br><br>Coordinate with ASHA workers from Saoner and Umred to schedule awareness sessions or outreach drives to promote upcoming Medyseva clinics.<br><br>Finalize and present the collaboration PPT to relevant authorities at Vedantaa Medical College, incorporating any feedback or additions.<br><br>Shortlist top 3–5 potential villages based on criteria like population, healthcare access gaps, and accessibility to initiate groundwork for clinic setup.<br><br>Assist in drafting communication material (posters, WhatsApp messages, or pamphlets) to support outreach efforts in the newly identified regions.<br><br>Document insights and field feedback from ASHA workers and potential partners to refine MedySeva's rural expansion strategy. |

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# Weekly Report

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**Area/ Department/ Project of Summer Internship Program:** Operation and Outreach intern

**Name of the Student:** Mrinal Srivastava

**Roll no:** 1997 **Stream:** MBA Hospital and Health Management

**Week no:** 06 **From:** 16/06/25 **to** 21/06/25

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| **Activity Done** | We shared suggestions with the team regarding the setup of the clinic, focusing on space utilization, patient flow, and arrangement of essential equipment and materials to ensure efficient operations.<br><br>I attended the inauguration ceremony of the MedySeva clinic in Umred virtually, the event provided a clear understanding of the clinic's objectives, services, and its potential impact on improving healthcare access in the region.<br><br>I conducted research on schools in the Saoner and Umred regions, collecting their names, addresses, and contact details. This information will support future outreach efforts, health awareness sessions, and potential school-based health camps under MedySeva.<br><br>Supported the preparations for upcoming health camps in Saoner and Umred by assisting with planning, promotional material, and coordination efforts to ensure smooth execution. |
| **Linking theory (Classroom learning) with practice at your organisation** | Applied **healthcare operations and service design concepts** from classroom learning to suggest efficient clinic setup ideas.<br><br>Implemented **marketing and communication skills** while creating awareness material for camps. |
| **Gaps identified on the working area.** | Many people in target villages are still unaware of telemedicine services or hesitant to try virtual consultations.<br><br>The patient turnout in some regions has been relatively lower than expected, possibly due to limited local awareness about MedySeva's services or lack of trust in teleconsultation among first-time user |

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| **Suggestions for improvement** | Strengthen School & NGO Collaborations<br>Enhance Local Awareness Through Community Engagement |
| **Plan for the next week** | We will focus on ensuring the **smooth functioning of the newly established MedySeva clinics**, by coordinating with local teams, assisting with setup finalization, preparing promotional materials, and supporting initial operations to streamline patient experience and service delivery. |

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# Weekly Report

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**Area/ Department/ Project of Summer Internship Program:** Operation and outreach intern

**Name of the Student:** Mrinal Srivastava

**Roll no:** 1997 **Stream:** MBA Hospital and Health Management

**Week no:** 07 **From:** 23/06/25 **to** 28/06/25

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| **Activity Done** | 1. Conducted in-depth research on Parseoni, gathering data on schools, banks, colleges, population, and other essential infrastructure to evaluate the potential for setting up a new MedySeva clinic.<br>2. Created a documentary report based on the collected Parseoni data to visually and systematically present the findings for internal planning.<br>3. Designed a visual diet chart for students as part of the Diet and Nutrition session organized by MedySeva, to improve understanding and encourage healthy habits.<br>4. Edited the existing company documentary, enhancing its content, structure, and presentation for better impact and clarity. |
| **Linking theory (Classroom learning) with practice at your organisation** | 1. Used community health assessment skills to analyze Parseoni for new clinic feasibility.<br>2. Applied health promotion techniques to create a diet chart tailored for students.<br>3. Utilized media and documentation knowledge to edit and prepare visual reports and documentaries. |
| **Gaps identified on the working area.** | 1. Patient hesitancy towards teleconsultation persists due to unfamiliarity or lack of visible success stories in rural communities.<br>2. Insufficient collaboration with local institutions like colleges, NGOs, and self-help groups which could boost outreach and trust. |
| **Suggestions for improvement** | 1. Strengthen School & NGO Collaborations<br>2. Enhance Local Awareness about tele consultancy .<br>3. Strengthen partnerships with local groups |
| **Plan for the next week** | We will focus on ensuring the smooth functioning of the newly established MedySeva clinics**,** by coordinating with local teams, assisting with setup finalization, preparing promotional |

| | |
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| | materials, and supporting initial operations to streamline patient experience and service delivery. |

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# Weekly Report

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**Area/ Department/ Project of Summer Internship Program: Operation and Outreach Intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital And Health Management**

**Week no: 08** **From: 30/06/2025 to 05/07/2025**

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|---|---|
| **Activity Done** | • Conducted research on Parseoni block to establish community-level connections for telemedicine promotion.<br><br>• Interacted with **ASHA workers** to introduce the MedySeva platform, explain its benefits for rural populations, and explore collaboration for last-mile awareness and service delivery.<br><br>• Approached **local pharmacies** to inquire about availability of space to set up small kiosks or referral desks to guide patients towards MedySeva consultations.<br><br>• Searched **local government offices** and **NGOs** working in the area to identify potential partners for community engagement and awareness-building activities.<br><br>• Gathered information on local health-seeking behaviour and common barriers faced by the rural population in accessing primary healthcare. |
| **Linking theory (Classroom learning) with practice at your organisation** | • Applied principles of **community outreach**, **health systems management**, and **stakeholder engagement** as learned in Health Program Management and Rural Health lectures.<br><br>• Utilized communication techniques taught in the **Healthcare Communication** module to effectively approach field workers, government officials, and community members.<br><br>• Understood the role of **public-private partnerships** and **healthcare delivery models** in real-life rural health settings. |
| **Gaps identified on the working area.** | • Lack of awareness among ASHA workers and rural communities about digital/telemedicine platforms.<br><br>• Pharmacies showed interest but expressed concerns about infrastructure and footfall-based incentives. |

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| | • NGOs are willing but need structured MoUs or clarity on their role in the collaboration.<br><br>• Absence of a defined outreach plan or promotional toolkit for field teams to standardize communication. |
| **Suggestions for improvement** | • Develop **training modules** and simplified IEC materials (Information, Education, Communication) in the local language to support ASHA workers in awareness efforts.<br><br>• Design an **incentive model** for pharmacies referring patients to MedySeva to ensure sustainability of engagement.<br><br>• Prepare an **MoU template** for NGO collaboration, outlining roles and benefits for both parties.<br><br>• Create a **standard operating procedure (SOP)** or checklist for field officers to maintain consistency during outreach. |
| **Plan for the next week** | • Conduct awareness meetings in village clusters in collaboration with identified ASHA workers.<br><br>• Pilot a referral model at one pharmacy and monitor footfall, referrals, and challenges.<br><br>• Finalize at least one NGO or local SHG for partnership and plan a joint promotional activity.<br><br>• Draft SOPs for outreach activities and get feedback from the local field team. |

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# Weekly Report

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**Area/ Department/ Project of Summer Internship Program:** Operation and Outreach intern.

**Name of the Student:** Mrinal Srivastava

**Roll no:** 1997 **Stream:** MBA Hospital and Health Management

**Week no:** 09 **From:** 07-07-25 **to** 12-07-25

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|---|---|
| **Activity Done** | • Successfully conducted health camps in **Umred** and **Parseoni** regions.<br>• Collected patient feedback during the health camps conducted in Umred and Parseoni to assess service quality, patient satisfaction, and areas for improvement.<br>• Assisted in daily coordination between doctors and patients for smooth teleconsultation.<br>• Coordinated with the center head and clinic nurse to ensure smooth daily operations and effective patient management. |
| **Linking theory (Classroom learning) with practice at your organisation** | 4. Healthcare Operations & Service Management.<br>5. Marketing and Communication Strategies.<br>6. Data Collection & Analysis.<br>7. Teamwork & Leadership. |
| **Gaps identified on the working area.** | 1. Limited awareness material in local languages for patients.<br>2. Awareness**:** Many individuals in target areas are still unaware of the availability and benefits of teleconsultation services provided by MedySeva. |
| **Suggestions for improvement** | 1. Introduce Digital Literacy Support: Deploy volunteers or brief training sessions during camps to help patients understand and use teleconsultation platforms confidently.<br>2. Increase regular postings, patient testimonials, and awareness content on Facebook, Instagram, and WhatsApp groups to enhance visibility. |

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| **Plan for the next week** | We will work towards ensuring the smooth planning and execution of both the new setup and upcoming health camps. |

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# Weekly Format

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**Area/ Department/ Project of Summer Internship Program: Operation and Outreach Intern**

**Name of the Student: Mrinal Srivastava**

**Roll no: 1997** **Stream: MBA Hospital and Health Management**

**Week no: 10** **From: 14/07/2025 to 20/07/2025**

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| **Activity Done** | Spoke with ASHA workers in Parseoni to understand their role and feedback regarding the ongoing telemedicine services provided through MedySeva camps.<br><br>Collected patient feedback on service satisfaction, consultation quality, and overall experience with the camp setup.<br><br>Assessed community acceptance of digital health services and identified awareness gaps.<br><br>Virtually checked on with centre head and the nurse about the telemedicine centre to observe patient registration, consultation flow, and support. |
| **Linking theory (Classroom learning) with practice at your organisation** | Applied tools from the **Health Communication** and **Community Health** modules to interact effectively with ASHA workers and patients.<br><br>Used qualitative feedback techniques discussed in **Health Research Methods** to collect and document firsthand insights.<br><br>Understood real-world applications of **Monitoring and Evaluation (M&E)** and **Service Delivery Models** in rural telemedicine outreach.<br><br>Employed principles from **Quality Management** to evaluate satisfaction levels and identify operational inefficiencies. |
| **Gaps identified on the working area.** | Some ASHA workers lacked detailed understanding of the telemedicine process and their referral role.<br><br>Limited follow-up mechanisms in place after the teleconsultation.<br><br>Feedback mechanisms were informal and not consistently documented. |

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| | The telemedicine center staff are occasionally overburdened during peak hours due to limited manpower. |
| **Suggestions for improvement** | Conduct short orientation and capacity-building sessions for ASHA workers before each camp.<br><br>Introduce a structured patient feedback form in vernacular language to ensure standard documentation.<br><br>Develop a post-consultation follow-up strategy involving ASHA or ANM workers for continuity of care.<br><br>Improve staffing and add technical support during peak consultation hours to reduce wait times. |
| **Plan for the next week** | Summarize and analyse feedback data for reporting to the MedySeva core team.<br><br>Prepare the final internship presentation/report. |

*Mrinal Srivastava*

*MBA HM 29*

*1997*

**Signature of the Student**

**Approved by the IIHMR University's Mentor**

*On the last day of every week Saturday -) report in the above format should be submitted to the faculty mentor. Submission of total 10 reports in 10 weeks is compulsory. Each report should not be more than 2 pages.*

# REPORT COMPILED

**Name of the Organisation: MEDYSEVA**

**Area/ Department/ Project of Summer Internship Program: OPERATIONS AND OUTREACH INTERN**

**Name of the Student: MRINAL SRIVASTAVA**

**Roll no: 1997** **Stream: MBA HOSPITAL AND HEALTH MANAGEMENT**

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| **Activities Done** | - Orientation<br>- Attended a session on Telemedicine<br>- Gained hands-on experience on working of MedySeva app, appointments booked and how revenue is generated from Teleconsultations.<br>- Went on field visit to nearby villages where MedySeva clinics work.<br>- NGO Outreach for collaboration.<br>- Attended ABDM Integration meeting and reviewed MedySeva's platform.<br>- Handled patient queries and messages.<br>- Compared prices of hospital services and office Supplies for Doctor's Consortium.<br>- Connected with Several Pharmacies in the Hinganghat region of Nagpur to gather information on available rental spaces for establishing MedySeva clinic.<br>- Compiled a list of potential villages in Umred, Saoner, and Hinganghat for organizing health camps.<br>- Made awareness videos on common diseases for patient education.<br>- Created list of ASHA Workers from Saoner and Umred regions to support the launch of new MedySeva centres, with the aim of mobilizing local patients.<br>- I attended the inauguration ceremony of the MedySeva clinic in Umred virtually, the event provided a clear understanding of the clinic's objectives, services, and its potential impact on improving healthcare access in the region. |

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| | - Conducted in depth research on Parseoni, gathering data on schools, banks, colleges, population and other essential infrastructure to evaluate the potential for setting up a new MedySeva clinic.<br>- Approached local pharmacies to enquire about availability of space to set up small Kiosks or referral desk. To guide patients towards MedySeva consultation.<br>- Interacted with AASHA workers to introduce the MedySeva platforms, explained it's benefits to rural population and explore collaboration for last mile awareness and service delivery.<br>- Gathered information on local health seeking behaviour and common barriers faced by rural population in assessing primary healthcare.<br>- Co-ordinated with the centre head and clinic nurse to ensure smooth daily operations and effective patient management.<br>- Collected patient feedback on service satisfaction, consultation quality and overall experience with the camp setup. |
| **Linking theory (Classroom learning) with practice at your organisation** | - Applied classroom knowledge to real-world scenarios by analysing incidence and prevalence rates during community visits and planning.<br>- Utilized health policy and digital framework from ABDM sessions.<br>- Applied concepts of health communication, hospital operations and outreach management.<br>- Applied public health and policy knowledge to analyse Maharashtra's telemedicine framework.<br>- Data Compilation.<br>- Applied healthcare operations and service design concepts.<br>- Implemented Communication skills to create awareness for camps.<br>- Applied health promotion techniques.<br>- Used community health assessment skills to analyse Parseoni for new clinic feasibility.<br>- Understood the role of public private partnership and health care delivery models in real life rural health settings.<br>- Utilized communication techniques taught in the health care communication module to effectively |

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| | approach field workers, government officials and community members. |
| **Gaps identified on the working area.** | - Inconsistency in project objectives and field execution.<br>- Limited digital literacy among grassroot health workers.<br>- Limited local language customization in digital content.<br>- Lack of structured feedback collection from patients post consultation.<br>- Lack of structured criteria or framework to evaluate village suitability for clinic setup.<br>- Insufficient collaboration with local institutions like colleges, NGOs, and self-health groups which could boost outreach and trust.<br>- NGOs are willing but need structure MoUs or clarity on their role in the collaboration.<br>- Absence of a defined outreach plan or promotional toolkit for field teams to standardised communication. |
| **Suggestions for improvement** | - Introduce Standard Operating Procedure (SOPs) for interns and team members to enhance coordination and role clarity.<br>- Recommend a preliminary health needs survey in potential areas to support data-driven expansion decisions.<br>- Introduce short feedback forms at the end of each consultation to measure satisfaction and improve services.<br>- Collaborate with local health departments or NGOs to access more reliable and real-time data.<br>- Enhance local awareness about tele consultancy.<br>- Strengthened partnership with local groups.<br>- Design an incentive model for pharmacies referring patients to MedySeva to ensure sustainability of engagement.<br>- Developed training module and simplified IEC material (information education communication) in the local language to support AASHA workers in awareness efforts.<br>- Introduced digital literacy support. |

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| **Key Learnings** | - Gained hands on experience in telemedicine operations, including appointment management and revenue generation.<br>- Learned the practical application of digital healthcare platforms through field visits to rural clinics.<br>- Developed outreach and collaboration skills by engaging with NGOs and community health workers (AASHA).<br>- Enhanced ability collect and analyse community health data for planning feasibility studies.<br>- Applied public health and policy knowledge to real-world scenarios, particularly in rural healthcare delivery.<br>- Improved communication skills for patient education and awareness through creating videos and IEC material.<br>- Observed challenges related to digital literacy and local language barriers among healthcare workers and patients.<br>- Recognized the importance of structured feedback collection and ongoing service improvement.<br>- Understood the operational aspects of setting up clinics, from identifying locations to co-ordinating with pharmacies.<br>- Experiences the significance of partnerships with government bodies, NGOs, and local groups for effective outreach. |

**Signature of the Student**

**Approved by the IIHMR University's Mentor**