

SUMMER INTERNSHIP PROGRAM

at

R.K. HIV AIDS Research & Care Centre

From 12th May 2025 to 25th July 2025

A REPORT BY

Koustav Maity

Master of Business Administration

Hospital & Health Management, Roll no: 1984

2024-26

under the Mentorship of
Dr. Deepti Sharma, Associate Professor

IIHMR University, Jaipur





R.K HIV AIDS RESEARCH AND CARE CENTRE'S

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CERTIFICATE OF INTERNSHIP

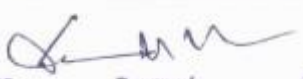
This is to certify that **Mr. Koustav Maity**, a student of **Batch HM29th** from the **MBA - Hospital & Health Management** department at **IIHMR University, Jaipur**, has completed his **summer internship** with our organization, **RK HIV AIDS Research and Care Centre**, from **12th May, 2025**, to **25th July, 2025**.

During this period, Mr. Maity was actively involved in our ongoing public health initiative, "**TB Mukh Bharat**", contributing meaningfully to various project activities. His overall performance during the internship was **excellent**. He accomplished the tasks assigned to him in a timely and effective manner and demonstrated a high level of diligence, professionalism, and commitment.

Mr. Maity exhibited a positive attitude, strong interpersonal and communication skills, and a clear understanding of public health dynamics. His contribution has been valuable to the progress of the project.

We wish him great success in all his future endeavours.

Regards,

For R K HIV & AIDS RESEARCH And CARE CENTRE

Managing Trustee/ Trustee

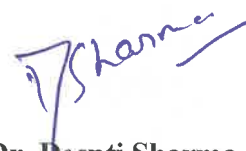
HR/ADMIN DEPARTMENT
RK HIV AIDS RESEARCH AND CARE CENTRE

IIHMR University Faculty Mentor Approval

This is to certify that **Mr. Koustav Maity** of academic year 2024-26 of **Institute of Health Management Research** has prepared a poster with respect to his summer internship held during 12th May – 25th July 2025.

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

Date: 29.07.25

A handwritten signature in blue ink, appearing to read 'D Sharma'.

Dr. Deepti Sharma
(Associate Professor)
IIHMR University

Corporate Social Responsibility in Jharkhand: A Comparative Study of Internship Learnings & Literature Review

By: Koustav Maity – 1984 – HM29th

Under the guidance of Dr. Deepti Sharma



About Organization:

RK HIV AIDS Research and Care Centre, established in 1997, is a globally recognized trust providing free healthcare to underserved communities. With 32,000+ medical camps, 6 crore + beneficiaries, and groundbreaking care, it holds 2 world records for its large-scale humanitarian efforts.



Vision:

To ensure equitable, free healthcare for all, transforming lives through compassion and innovation.



Mission:

Prevent and treat HIV AIDS, Cancer, TB and infections. Deliver free medical camps, surgeries and nutrition kit etc. Collaborate with doctors, CSR partners and Volunteers. Empower communities via rehabilitation and disaster relief.



Organization Structure:

Chairman / Founder

Board of Trustees/
Executive Committee

Chief Executive Officer
(CEO) / Director

Program Manager
(Health Projects)

Project Coordinators
(State-wise)

Field Officers /
Community Healthworkers

Support Staff



Objective:

To compare the field-based knowledge of the CSR as my internship experience, with the recent literature, with references to effectiveness, gaps and outcomes in Jharkhand.



Key Findings:

Internship Experience

- * There is a lot of CSR interest in Skill development/ lively hood, compared to health.
- * Slow responses by companies even after proposal alignment.
- * Customization to each company of the proposal with minimal feedback.
- * Poor connectivity of CSR teams and implementation partners.

Methodology:

Internship: what we have observed during writing proposals, field work, CSR co-ordination and implementation challenges.

Literature: The CSR Journal and SAGE, Emerald and news publications were reviewed on the CSR trends in Jharkhand between 2023 and 2025.



Comparison:

Alignment: There was an increase in health funding as recorded in the literature but the internship revealed a low interest in health projects.

Execution Gap: Both source are also point out about poor implementation & follow-through.

Communication: Literature validates the finding made during internship that CSR coordination is slow.



Implications:

The CSR in Jharkhand requires better implementation, online monitoring, and on-ground responsibility.

Ability to scale the health projects as long as the flow of funds can match the needs on the ground.



Limitations:

One org and one location based internship: does not capture all the models of CSR.

Literature is general: does not have field realities at the micro level.



Field Visits



Loiva, Jharkhand, India

SWOT Analysis:



Strength

- The organization has great offline presence acquired through decades of providing on-ground health services.
- It also has impressive awards such as those published on the Guinness Book and Asia Book of Records which are attention-getters and enhance its credibility.
- The healthcare provision is underpinned by trust because of the presence of a team of senior experts and medical professionals.



Weaknesses

- Communication gaps, which may exist between departments, tend to create delays or more effort than necessary to complete a task
- Lack of digital or technical skills among some staff also poses a problem to the efficiency of execution.
- The work environment and infrastructure should be improved to reflect the industry expansion.



Opportunities

- Such a powerful offline base provides a great opportunity to gain enormous visibility within companies and donors by establishing an online presence (website, LinkedIn, CSR platforms)
- The organization can develop through upskilling employees and building project execution through internal experts.
- It has a possibility to spread in more states, particularly with their own types of awareness models.



Threats

- Their efforts might be overlooking by other NGOs with improved online presence and money, although they have less ground-level influence.
- project continuity can be compromised by over-dependence on a limited number of CSR partners in case funding varies.
- The sudden change in policy or CSR rules may affect the direction and place of money allocation.

Practical Exposure Vs Theoretical Understanding (Difference):

Some differences experienced include:

- Classroom theories focus on developing academic skills like understanding ideas and critical thinking through hypothetical scenarios, while internships enhance practical skills such as problem-solving and applying academic knowledge in the field
- Practical exposure provides an understanding of community & cultural contexts that cannot be fully grasped in a classroom.
- Theoretical knowledge of data analysis and interpretation was invaluable when practically applying these skills to real time data sets for projects and other assigned tasks

Learnings during internships:

- Learned how to coordinate stakeholders with the officials and the CSR teams and the communities.
- Learned to adapt within a short period when it comes to field work and unexpected changes
- Acquired effective writing on proposal as well as budgeting.
- Managed groups and worked cross departmentally.

Challenges faced during internship:

- Extreme weather conditions
- Restricted field visits
- Unclear or poorly defined roles & responsibility
- Inter-departmental miscommunication

Suggestions for Organization:

- Develops strategies to improve interdepartmental communication & administrative efficiency.
- Properly monitor programs, resources facilities, & funds to ensure present & future sustainability.

Weekly Report:

Name of the Organization: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Week no: **1**

Stream: **MBA – Hospital & Health Management**

From: **19th May 2025** to **23rd May 2025**

Activity Done	I joined the Ranchi office as a project intern the same week that it opened for business. On my first day, the Program Head explained the project and told me how our organization served the community. He shared important documents like the project plan and procedures, as well as explained the goals of the project. The director visited the office towards the end of the week to understand how I was doing and reveal the specific duties I'd be handling. He encouraged me to start creating a funding proposal and I used the Operations Head's guidance while writing it. Moreover, he said that I'd get the chance to do fieldwork and hands-on activities starting the following week.
Linking theory (Classroom learning) with practice at your organization	This week gave an overview of how planning is carried out for health projects. Major concepts from my classes like engaging different partners (stakeholder alignment), organizing projects properly (project structuring) and involving the communities as contributors (public health outreach) were explored and explained. Creating the financial application helped me relate my knowledge of proposal development and budgeting with the requirements of actual health projects.
Gaps identified on the working area	❖ Starting some operational activities is delayed while we are engaged in setting up the office. ❖ We are currently undertaking preparatory activities and have not initiated interactions with our field teams.
Suggestions for improvement	Concluding the initial office setup as soon as possible would allow interns to focus on more useful and hands-on work. Prepare a well-organized field operations plan with clearly established schedules, roles and expected modes of communication that should be distributed prior to the start.
Plan for the next week	❖ I'll keep improving the funding proposal by incorporating ideas from the Operations Head. ❖ I'll participate in driving awareness or identifying cases at the community level once fieldwork has started. ❖ Learning about the tools and documentation standards used for project monitoring within the organization is one of my goals.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organization: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Week no: **2**

Stream: **MBA – Hospital & Health Management**

From: **19th May 2025 to 23rd May 2025**

Activity Done	This week I spent the time to teach myself the foundational knowledge that will help when the field visits start. I researched under the Program Head of the disease control project about the causes, modes of transmission, treatments for the disease and such problems like drug resistance. I also explored the difficulties faced by carrying out community engagement especially in awareness activity. I also started looking at specific geographic pockets in Jharkhand where emphasis could be given to TB awareness. Additionally, I was asked to develop a list of corporate organizations around the state that would be approached for CSR support towards this project. The purpose of this research is to assist the team in considering future partnerships. During the week, I continued my work on the funding proposal too. Field visits have yet to start, but over the past two weeks I've been using my time to build background knowledge for the team and support their planning activities.
Linking theory (Classroom learning) with practice at your organisation	This week's research allowed me to link academic lessons learned in Epidemiology, Public Health Behavior and Health Communication, to real world needs. For example: ❖ During Epidemiology lectures I learnt about the chain of infection, composed of the agent, the host and environment. And while researching TB, I could very clearly understand how TB spreads through air borne particles as well as how socio environmental factors affects transmission. ❖ During our Behavior Change Communication (BCC) sessions we look into how health messages need to be formulated to fit the population's knowledge and believes. In planning for TB awareness in rural or semi urban areas of Jharkhand, this helped me realize how culture sensitive communication strategies are important. As of yet, I haven't directly been involved in the field activity, but this phase has helped me to build a good knowledge base to directly interact with the community.
Gaps identified on the working area	❖ The team expansion and the process of office setup is still going on. ❖ We are yet to field engagement activities such as surveys and perhaps awareness campaigns.

	❖ At this stage, interns have limited opportunity to engage with the community, however time is being utilized effectively for gaining knowledge.
Suggestions for improvement	❖ Knowing when a field activity will take place could be made available to the intern (through a schedule/timeline) so the intern could begin preparation for it. ❖ During non-field weeks organization can keep interns engaged through periodic short sessions or case discussions. ❖ The potential of working in collaboration with senior staff in the tasks will be more insightful of planning and execution strategies.
Plan for the next week	❖ Keep trying to help with the funding proposal draft, as well as improving it. ❖ Start mapping areas with high prevalence of TB using data or guidelines which are at hand today. ❖ If the field operations start, then join the team in the first outreach or awareness campaigns. ❖ Study TB related community behaviour trends or opinions to learn people and plan for communicating more effectively.

Signature of the Student

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Weekly Report:

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Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Stream: **MBA – Hospital & Health Management**

Week no: **3**

From: **26th May 2025 to 30th May 2025**

Activity Done	In the third week of my internship, I did all the research on possible companies from which to raise CSR (Corporate Social Responsibility) funding, centered on the PSUs in Jharkhand. This is key to the assessing our TB project funding proposal thus meant for preparing and targeting the project proposal. Key activities during the week included: CSR Research: I have listed down major and mid-level PSUs which have a CSR track record of funding healthcare related projects. Among the important data obtained were the head office address, the name and contact details of CMDs and CSR heads as well as the parent ministry, PSU category (Maharatna, Navratna, Miniratna) and total CSR allocation. Sectoral Fund Analysis: I gleaned significant information about each company's areas of interest, especially how much money this number company is allotting for health initiatives; this enables narrowing down the number of suitable companies to work with. Documentation: To be more efficient and smoother in future communication and proposal submission, I started providing reporting and started compiling the collected data into a structured list with databases of possible CSR contacts. Proposal Preparation Review: The proposal drafting is on hold as we speak, and I spent time reviewing previous samples of proposals, examining how these are customized to the company's CSR priorities and ministry alignment. This was foundational work and will form the basis of proposals that can be tailored specifically to shortlisted CSR partners.
Linking theory (Classroom learning) with practice at your organisation	Health Policy and Healthcare Delivery System: This helped me to understand how PSUs are linked to different ministries and their responsibilities in real world which made it easier to connect policy level of governance to actual implementation. This demonstrated as to how the national policies dictates on health projects funded through CSR. Essentials of Health Economics and Financing: During my analysis of

	sector-wise CSR funding, I could associate it with economic principles such as prioritizing needs, allocation of scarce resources and financial planning for health outcomes. Entrepreneurship and Innovations in Healthcare: In fact, the evolution of the process of customizing project proposals for corporate partners was real world innovation in resource mobilization for public health initiatives. Business Communication: Contact details gathering and preparing for professional outreach with CSR departments make a perfect connection with everything we learned about formal business writing, tone and stakeholder engagement.
Gaps identified on the working area	❖ On-ground community activities have yet to begin due to a shortage of manpower and delayed setting up of an office. ❖ At this stage, interns' exposure to real time situations is delayed through field implementation. ❖ During research, region-specific CSR data (especially for health) was hard to access. ❖ The submission decision for the proposal lies pending till the final list is approved.
Suggestions for improvement	❖ Start with small scale activities or the initial TB awareness work in the nearest communities, utilize available resources and interns. ❖ Stay engaged by providing interns region specific IEC (Information, Education, Communication) materials and digital access to internal project documents. ❖ A shared online dashboard for shared CSR data, field planning and document tracking among interns and supervisors will be created. ❖ Organize a short expert talk or webinar with a professional working in CSR or healthcare partnerships.
Plan for the next week	❖ Once we have, a list of CSR companies, then we can sit down and finalize the list, and we can draft an initial email or cover letter to them. ❖ The first thing is to create a resume proposal and customize its content according to each PSU (Public Sector Undertakings) of interest. ❖ If field activity begins, start basic groundwork for potential awareness campaigns. ❖ To learn more about the reporting formats and documentation for the TB project.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organization: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Week no: **4**

Stream: **MBA – Hospital & Health Management**

From: **2nd June 2025** to **7th June 2025**

Activity Done	During the fourth week, I focused on organizing the companies that were selected to carry out CSR activities for us. I made sure the CSR data I had collected was still accurate and useful by following input and acceptance from the Director Sir and the Program Head Ma'am. Key activities included: Final Review and Approval of CSR List: After getting approval from the Director sir and Programme head ma'am, I finalized the database of CSR providers (mainly PSUs) and included the confirmed contact data, listings of healthcare funds distributed and any other relevant company informations. Funding Proposal Resumed: Once the key criteria were set, I went back to developing the proposal for funding. I edited certain sections of the content using the priorities of the selected companies and their views on CSR to make them more relevant. Daily Reporting System Initiated: From this week, every staff member and intern are required to provide an update on what they did in the past day and mention their work plans for the present day. This enabled the team to be more responsible and work as a unified group. Internal Coordination: I stayed in contact with the Operations Head and Program Head to go over the progress of the proposal and preparations for its submission. As soon as I get final confirmation from Director Sir and Program Head Ma'am, next week I plan to send the approved proposals to the finalized companies.
Linking theory (Classroom learning) with practice at your organization	• Business Communication: Being involved in writing the proposal and organizing data helped me use formal communication, a clear tone and clarity in my work. • Essentials of Health Economics and Financing: Examining CSR funding and creating appropriate proposals taught me how planning funds helps acquire resources in public health.

	• Organisation Behaviour: Daily reporting brings structure to our communication, makes team members more responsible and allows everyone to work more effectively because it is based on what we studied in organizational behaviour. • Entrepreneurship and Innovations in Health Care: Writing the proposal for several PSUs taught me that including creative ideas is crucial when attracting outside support for health projects.
Gaps identified on the working area	• Field activities that have not yet been planned include screening and awareness campaigns. • There are little chances for interns to connect to the community or practice field level activities. • Long term objectives are becoming clearer while daily task reporting evolves and changes. • Proposal submission deadlines depend on internal approval procedures and therefore outreach may be delayed.
Suggestions for improvement	• At least one pilot awareness campaign should be started by providing the interns practical exposure or experience. • Provide interns a weekly schedule is to be easily organized and to be in line with project objectives and reporting requirements. • Use interns to assign field-related monitoring tasks until full field deployment. • Speed up the timelines that submissions take to get approved by streamlining the internal review process for proposals.
Plan for the next week	• Once you get the final permissions, complete the funding proposal and send it to the shortlisted companies. • Keep continuing to follow up on proposal submission and communicate with CSR teams. • If initiated, support any groundwork for upcoming field activities. • Furthermore, get familiar with the procedures for documenting the feedback and the reporting of the field visits.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organization: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**
Week no: **5**

Stream: **MBA – Hospital & Health Management**
From: **9th June 2025 to 14th June 2025**

Activity Done	The fifth week of my internship experience was mainly dedicated to completing the funding proposal, particularly the budget breakdown part of it since it needed extensive work. When developing the financial section, I had difficulties trying to balance the total cost against the deliverables proposed. This took numerous revisions and internal consultations to make sure that all this was in line with project expectations and availability of resources. I also kept attending the daily meetings of the whole organization, where every member of the team must report on what they did the previous day and what they are planning to do the following day. Such meetings were useful in monitoring the progress and getting feedback on the proposal work. I also started planning the next field awareness campaigns, besides working on proposals. The organization has provided me with crucial project materials, and I have been briefed to study them well before proceeding to the field. Such documents contain information regarding the project aims, awareness plan, communication principles, and TB-related facts that will be referred to in the interactions with the community.
Linking theory (Classroom learning) with practice at your organization	Essentials of Health Economics and Financing: The experience of preparing the budget part of the proposal enabled me to use the ideas learned in the classroom such as cost analysis, resource distribution, and the balance between the cost and the projected health outcome. Communication Planning and Management: The awareness campaign approach review allowed me to make the connections between the BCC strategies including the community engagement, stigma reduction, and audience-specific messaging. Organisation Behaviour: The practice of daily reporting indicates well-organized organizational culture and time management which we have learned in the courses of team dynamics and workplace communication. Health and Development: The knowledge of funding proposal and awareness campaign organization to target TB is consistent with our lessons regarding the socio-determinants and population health agendas in developing regions.
Gaps identified on the working area	• Preparation of the budget was time consuming because balancing of the cost distribution and the project targets was involved.

	• Others, such as per-unit costing and field logistics, needed to be clarified again and again. • The procedure of decision-making can be time-consuming because of several levels of internal review. • Day to day reporting is very helpful, but sometimes it fails to provide a clear guide on what to do on the coming day.
Suggestions for improvement	• Designate a specific contact person who would help interns with technical aspects of their work such as budget formatting or calculations. • Be explicit about what is expected during daily meetings to enhance the planning of tasks and time. • Have a central folder of completed templates and formats to minimize back-and-forth. • Hold a brief pre-campaign orientation of the interns to make field preparations smooth.
Plan for the next week	• Submission of confirmed funding proposals to the chosen CSR companies. • Commence the fieldwork with TB awareness activities in the prospective communities. • Apply lessons learned in the project materials into work and connect with the community. • Provide support in reporting and documentation in case field awareness initiatives are being implemented.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organisation: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Stream: **MBA – Hospital & Health Management**

Week no: **6**

From: **16th June 2025 to 21st June 2025**

Activity Done	This week, I was working on documenting, submission of proposals and preparation of field-level awareness activities. I had to deal with routine work and a new assignment provided by the Project Head Ma'am. Even though this week no fieldwork could be conducted because of weather reasons, there were a few activities performed in the backend to also prepare us to make the next week. Developed a proposal of a new project: Project Head Ma'am giving me a new proposal assignment. I prepared the proposal, which was in the format and guidelines of the organization. The proposal contained background information, objective, important interventions, projected results, and indicative budget estimate. Submitted finalized TB proposals to selected companies: I started working on submission of the finalized TB project proposals to the CSR departments of the shortlisted companies. I wrote formal emails, attached the proposals and the other related documentation, and documented the communication in a follow up way. Went to day-to-day internal reporting meetings: Participated in the daily meetings, taking place in the organization as a routine practice of the entire staff and interns, as we all presented our updates about the work we performed and the upcoming forward plans. Such meetings gave beneficial feedback and kept the feeling of accountability and purpose. Prepared for upcoming field awareness visits: Since the field activities have been delayed by environmental conditions, I filled the time available by reading some essential project-related documents and IEC materials issued by the organization. This will equip me to feel confident as I go out there to interact with the community when conducting the TB awareness campaigns next week.
Linking theory (Classroom learning) with practice at your organisation	Business Communication: Composing formal proposal submission emails also allowed me to gain a real-world experience of implementing written communication skills such as clarity, professionalism, and tone, exactly as we learned them in classroom. Essentials of Health Economics and Financing: Working on a new proposal and repeating a budget alignment procedure once again gave a practical skillset in budget structuring and cost justification of healthcare costs. Human Resource Management: The proposal development also gave me the insight that when estimating the number of manpower to be used in the field it is important to match with the amount of money available in the budget.

	Research Methods: The process of identifying background data and justifying needs, as well as aligning the goals with priorities of the CSR funders, contributed to strengthening the proposal writing competencies acquired during the process of studying research-based coursework.
Gaps identified on the working area	❖ This week, the field activities could not start because the environmental circumstances were not favourable which delayed the start of the community awareness process. ❖ During proposal preparation, an even greater clarity would be needed regarding structures of budget and matching instances of activities which are proposed and cost estimation. ❖ Self-study is now used by interns to prepare the field, an orientation on the field before going to work may better their confidence and performance. ❖ Communication among the various departments should be enhanced on an interdepartmental basis (operations, finance, and field teams), to facilitate the flow of information and accelerate approvals.
Suggestions for improvement	❖ Develop a backup field plan or indoor community engagement opportunities in anticipation of disruption of awareness activities due to weather conditions. ❖ Create an easier budgeting table or a format, which interns will follow when estimating the costs in grant applications. ❖ Before actual fieldwork, conduct a brief orientation or mock session to make the interns aware of what is expected of them, build their confidence, and clarify their messages. ❖ Enhance inter-departmental co-ordination for smooth workflow and speedup in internal processes
Plan for the next week	❖ Commence field awareness activities, when conditions and weather allow. ❖ Follow up on CSR with companies in terms of proposals sent. ❖ Make preparations to support the team through first visits about community awareness and recording efforts. ❖ Have exposure to the field and see the response of the community in TB awareness sessions.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organisation: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MukT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Week no: **7**

Stream: **MBA – Hospital & Health Management**

From: **23rd June 2025** to **28th June 2025**

Activity Done	During this week, my key activities were following up of proposal submissions as well as contributions towards preparation of upcoming field awareness campaigns. The field visits could not be done as planned owing to the limitations and delays that were caused by weather conditions and the printing process. Backend work was however on-going in support of the outreach activities scheduled next week. Kept sending proposals to private & Central PSUs companies: I kept sending the finalized TB funding proposal to the chosen private companies and the Central PSUs. All the proposals were to be edited and tailored according to the profile of the company, areas that the company focuses on in its CSR. Reported Chairman sir about the Companies response on email: I also updated Chairman Sir on the progress of the proposal submission regularly, as also of the response or acknowledgement sent by companies. Supported in preparation of awareness campaign: I assisted in the organization of printing awareness materials such as banners, posters, and standees, which will be utilized in the community campaigns that will be conducted soon. The team reporting and coordination are carried out daily: Being a daily institutionalized system within the organization, I still participated in regular update meetings and provided coordination with the internal cap to monitor progress concerning the proposal editing and preparation of the campaign.
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Linking theory (Classroom learning) with practice at your organisation	Business Communication: My ability to compose tailored proposals to various companies and write professional updates to the top leadership enabled me to exercise formal communication skills in line with our course materials. Marketing Management: Creating campaign materials and helping to plan awareness resonated with such ideas as visual communication, audience targeting, and message delivery in the field of public health. Essentials of Health Economics and Financing: The knowledge of funding preference between the private and public company companies consolidated the notions of financial alignment, funding justification, and project costing. Organisation Behaviour: Indeed, frequent interactions with cross-functional departments and briefing senior management personnel provided me with an in-hand opportunity to experience how professional discipline, team collaboration, and hierarchies work in the workplace.
Gaps identified on the working area	❖ This week field visits were not started because of the weather conditions and the delay in printing out the campaign materials. ❖ There was no consistency in coordination with external vendors (to print), which resulted in delays in material-readiness. ❖ As a result of communication gaps within the organization, campaign schedules were mixed, a factor that was causing delay in the commencement of field activities. ❖ The delivery of campaign materials including posters, banners and standees was done later than expected which also resulted in the delay of schedules.
Suggestions for improvement	❖ The campaign preparation plan should be constructed with a vendor timeline buffer, in order to have the materials prepared earlier than usual. ❖ Delegate or have a single person take coordination of printing vendors and monitoring deliveries. ❖ Eliminate inner communication issues by holding daily planning sessions designed to focus on cross-departmental progress reports. ❖ Prepare a campaign checklist system by having everything in place before making a campaign (logistics, campaign materials, team roles).
Plan for the next week	❖ Initiate the field awareness program depending upon weather conditions and material preparedness. ❖ Assistance with the implementation and recording of awareness, training campaigns (community sessions) and the distribution of IEC. ❖ Follow ups with companies with sent proposals. ❖ Help in taking photos, field reports and success stories in order to document them.

Weekly Report:

Name of the Organisation: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Week no: **8**

Stream: **MBA – Hospital & Health Management**

From: **30th June 2025 to 5th July 2025**

Activity Done	This week became a significant milestone in my internship experience, where I started my first field visits as a part of the TB awareness campaign in Ranchi. Besides being involved in on-groundwork, I have also been engaged in organizational-level activities e.g. proposal follow-ups, outreach planning, and coordination work. Conducted two TB awareness Campaigns: I participated in two community-level awareness-raising activities as part of the field visit agenda, during which we could engage with the general population, distribute health-related materials, and acclimatize them to TB-related services. This provided me with practical access to field-level communication and interaction. Follow ups begun and CSR proposal continued: I kept on submitting proposals to Central PSUs and started sending follow-up mail to companies that are still not responding, ensuring at least a 7-day time lag after the initial contact is done. This assisted in enhancing consistency of communication. Health centres in target districts that were researched: I carried out online search and confirmed the contact details, addresses, and the surrounding locations of major health centres in our target districts to help us plan in advance some future TB services as well as coordinating with local health systems. Printing shop finalized & awareness materials have been ordered: Having approached several shops in the area, I secured a vendor, and ordered pamphlets, which will be distributed during the awareness and screening campaigns. Travelled With Chairman Sir: I also travelled with Chairman Sir due to some official work, and this showed me the concept of organizational representation and external coordination.
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Linking theory (Classroom learning) with practice at your organisation	Behaviour Change Communication (BCC): The field awareness activities allowed me to use the BCC concepts (message clarity, community participation and culturally appropriate strategies of communication). Marketing Management: Selecting print-material vendors and content of awareness materials align with the concept of audience-centric marketing and campaign planning. Health and Development: The way health problems such as TB are presented to the underserved community shows us what we observed in our classes, information about health outreach in rural and semi-urban settings. Essentials of Hospital Services: The research I did into the local health centres showed me how various aspects of touchpoints related to healthcare could be interconnected in terms of screening, referrals, and follow-ups.
Gaps identified on the working area	❖ Low participation of the local health workers (such as ASHAs or ANMs) in the awareness campaigns, which might assist in reaching more people and creating trust in the community. ❖ The organization of field visits in terms of route and time management can be enhanced because there were also certain delays within the campaign movement facilitated by uncomprehensible local directions or transport organization.
Suggestions for improvement	❖ Collaborate with local frontline health workers and participate in the campaign locations, achieve a higher level of participation, sub-local acceptance, and efficiency in outreach. ❖ As part of pre-planning, outline a simple field movement strategy with mapped out routes, contact people in places and buffer time to avoid time wastage in the event of awareness campaigns.
Plan for the next week	❖ Observation of a one-day outing to the adjacently situated district to evaluate the potentiality of subsequent awareness, nutrition, screening as well as testing exercises. ❖ Help the team to determine the possible places of service and the places that need high priority to the community. ❖ Attend the future awareness campaigns to be conducted in Ranchi & Khunti and assist in the distribution of IEC materials. ❖ Carry on with CSR proposal submission & follow-up activities.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organisation: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Stream: **MBA – Hospital & Health Management**

Week no: **9**

From: **7th July 2025 to 12th July 2025**

Activity Done	This week was a combination of proposal coordination, documentation activities, follow-ups and internal update. Among the best news yet also occurred this week- a company showed positive response to our proposal and asked to discuss and establish a document, which I assigned to handle. Send follow up mails and new proposal submission: I kept on with CSR proposal work, such as follow-up emails to companies we had not received a reply to, as well as placing new proposals to other possible corporate donors. Gathered printed IEC materials and managed vendors coordination: I picked up the pamphlets that had been ordered last week in preparation of future awareness campaigns and made arrangements with Accounts Department to effect the payment to the printing vendor. Weekly report on the update of PSU proposal: I updated one of the team members, who dealing with internal documentation. The report contained elements of submission status, dates of proposal, amount of budget applied, date of follow up, email ID of recipients, official address of respective company. Favourable CSR response and additional documentations preparation: One of the greater highlights this week was having a positive response to one of the firms I had made a proposal to and had further followed up on. They demanded in greater details, and they asked us to visit their office in Ranchi to discuss. In the past couple of days, I have been busy preparing the necessary paperwork and other information that they asked. I will deliver the entire documentation by next Monday and thereafter, I will visit their office with the team of the organization. Participation of the daily reporting meetings: This was our daily routine, and I would attend the daily update meetings to report progress on the tasks and get instructions from the rest of the team.
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Linking theory (Classroom learning) with practice at your organisation	Business Communication: Writing formal and organized follow-up mail and CSR update allowed me to utilize professional communication skills covered in formal and professional communication units. Entrepreneurship and Innovations in Healthcare: The customization of the documents and communication with CSR team, preparing for corporate negotiations are signs of the entrepreneurial side of project-based fundraising. Financial Management: I utilized the concepts concerning the distribution of funds, estimating costs and financial documentation when preparing the updates in relation to the proposed amounts of funds per company. Organisation Behaviour: Interdepartmental communication (accounts, documentation, field team) contributed to further reinforcement of the learning process on team interactions and working order.
Gaps identified on the working area	Sometimes I faced communication gap with certain employees, and they might not actually remember receiving information or documentation and properly going through it. This is confusing and wastes and duplication of effort.
Suggestions for improvement	At regular meetings, the team head can remind all employees by politely asking them to listen attentively and organize effectively with all people working on the project. This will help to prevent misunderstandings and will provide a healthy working environment, as needed information will be always recognized before any conclusion or feedback can be given.
Plan for the next week	1. Provide the company which has positively responded with additional documentation and reach out to them after the submission procedure is complete. 2. Meet the company in Ranchi office in a physical meeting discussion about the TB project proposal. 3. Participate in any current awareness campaign. 4. Keep going with proposal records and making arrangements with accounts and field team as necessary.

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report:

Name of the Organisation: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MUKT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Week no: **10**

Stream: **MBA – Hospital & Health Management**

From: **14th July 2025 to 19th July 2025**

Activity Done	The week was the final part of my internship experience, which encompassed not only the critical engagements and field work, but also the pre-series of interdepartmental coordination steps as well as follow-up CSR proposals. I took direct participation in the discussions of the projects at ground levels and in outreach of the organization. Completed and sent to PSU the CSR proposal (positive lead of last week): I did the documenting part, and I actually delivered the proposal both in a soft copy and as a hard copy to the particular Public Sector Undertaking that showed interest in it last week. The name of the PSU is not revealed because of organizational confidentiality. Attended 3-days field visit: I went with the Project Coordinator on three days field work in various blocks of Ranchi district. We also discussed our project plans with the Sub-Tuberculosis Officers (STS) and Community Health Officers (CHOs) to familiarize their plans with our projects. Visited offices of DTO at Ranchi and Khunti districts: We undertook a stakeholder engagement by visiting the District TB Officers (DTOs) to share with them the goals of our TB control initiative and understand how they could help. Follow up & New submissions of CSR proposals: I proceeded to submit CSR proposals to identified companies and made follow-up emails where necessary, according to the outreach plan of the organization. Prepared for our next awareness and medical camp: Planning was underway in coordinating a big awareness and health camp to be held the following Monday. I helped in organization of logistics and material preparedness.
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Linking theory (Classroom learning) with practice at your organisation	Health Policy and Healthcare Delivery System: Ground level visits to health blocks and interaction with CHOs and DTOs was not much different in comparison with the way public health programs are operating on the ground. Essentials of Epidemiology: My conversation with TB officers gave me the possibility to use theoretical knowledge about disease monitoring, case detection, and health system communication. Business Communication: Writing and handing structured proposals and doing communication to PSU departments enforced the practical learning in formal written and verbal communication. Organisation Behaviour: The close interaction with the various departments and field employees improved my ability to understand how my team dynamics, communication through leadership, and conflict situations work in a real workplace scenario.
Gaps identified on the working area	The stock of awareness material does not have a centralized tracking mechanism in place which can lead to last time shortages prior to an event.
Suggestions for improvement	Use internal logbook or a shared file to keep records of IEC and medical material use, re-order status and storage availability.
Plan for the next week	• Be present in the scheduled awareness and medical camp at the beginning of the week. • Support the event write-up such as data capturing, photography and reporting. • Provide any additional action that may be needed to support any final proposal or field coordination activities prior to ending the internship.

Signature of the Student

Approved by the IIHMR University's Mentor

Compiled Report:

Name of the Organisation: **R.K. HIV AIDS Research and Care Centre**

Project of Summer Internship Program: **TB MukT Initiative: Community Level Screening, Testing, Treatment & Nutritional Support to TB Patients in Ranchi & Khunti, Jharkhand**

Name of the Student: **Koustav Maity**

Roll no: **1984**

Stream: **MBA – Hospital & Health Management**

Activity Done	My experience with the internship went through an initial phase of research into to the actual fieldwork, combining higher level strategy and jumping into grassroots implementations. Week 1: The entrance into the sphere of my internship practice was marked with a valuable introduction to the organization by the Program Head, during which I was briefed on the general picture of the project, which is TB Control project in Jharkhand. I have become acquainted with operation blueprints, projected deliverables, and internal documentation. Direct instruction on my work came in the form of a personal visit by the Director sir in which I was challenged to begin the process of drafting a funding proposal which would push onwards the development which would take place as a many-faceted experience. Week 2: This week, I went in deep as I researched on the topic of tuberculosis - not only learning the biological cause, but also the structural issues surrounding its outreach and awareness. I learnt about patterns of transmission, resistance and vulnerable populations. At the same time, I began to research important corporate players, especially PSUs where they might possibly contribute to the project in the form of CSR activities. Week 3: The week saw some painstaking research - grouping PSUs according to their parent ministries and analyzing their CSR spend trends, as well as collecting the relevant contacts involving CMDs, CSR Heads and corporate liaisons. This information gathering used to be the main framework of the proposal outreach plan. I also updated the contents of the proposal to be more in line with the philosophy of each company with regard to funding. Week 4: I would have proposal drafts on different organizations that I had to update and make specific according to internal approvals with data in place. From this week we started our daily reporting meetings- where we basically shared our progress, discuss our obstacles and keep in alignment. I was in close contact with internal teams to make sure that the proposals were formed in accordance with the expectations and formatting standards of the organization. Week 5: This week, my work was concentrated on the perfecting of the budget breakdown of proposals. I was engaged in the optimization of costs and effects-on-operations-that required not only a certain level of strategic thinking but also accuracy. Also, I began preparations in advance of the actual campaign, such as communicating with printing vendors about making IEC, reading old project proposals of how to structure them, etc.
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Week 6:

This week I prepared a new proposal that was given to me by project head and started sending previously completed proposals to the chosen PSUs. I was also involved in the coordination with the accounts section so that the money is paid to the approved printing supplier. The weather adversity continued to slow us down, especially in the fieldwork but back at the desks work was progressing.

Week 7:

It was a turning point week -- we got a good response to our outreach to one of the PSUs that I contacted. I had ready the requested documents and I had started a communication process to make a physical submission at one of their offices in Jharkhand. At the same time, I was doing proposal follow-ups and helping with printing of the awareness campaigns materials. I have also prepared and made a thorough record of CSR interaction tracker so that the organization has a record of the same.

Week 8:

This week we started our first field activities - awareness campaigns in Ranchi. I arranged the IEC material use and communicated with people of the community. I also visited health centers within our areas of focus and assisted in locating potential locations of future interventions. I was also tasked to accompany senior staff on official meetings and undertake logistics preparation of future campaigns.

Week 9:

This week brought me into the depths of fieldwork again as we had a chance to visit several blocks in Ranchi and Khunti, seeing CHOs, STSs, and DTOs. These discussions provided a real grass-roots perception of implementation of public health. Additionally, I went to the PSU on my own time and delivered the physical copy of a proposal that received positive feedback, which was a milestone in my company outreach work. The daily meetings remained a chat full of sharing of ideas about insight and alignment.

Week 10:

During the last week, I completed documentation work related to interested PSU, and introduced the plan of further awareness and medical camps. The collaboration with local stakeholders and health authorities was also maintained, as well as the assistance of the team the realizations of the event.

Remaining Days (Five days):

During the last few days of my internship, I was able to organize more TB awareness campaigns in conjunction with general medical camps in diverse community pockets. Such activities included the ground contact with the local people, provision of IEC materials, initial health check-up, and education events. This experience gave me a full circle of seeing things through - both on paper planning and in-real time impact.

These campaigns concluded my internship experience in a satisfying manner - equipping me with newfound knowledge of the practical aspects within the field, along with a better understanding of where to grow personally on the journey towards becoming a genuinely good public health worker.

**Linking theory
(Classroom learning) with
practice at your
organisation**

During my 75 days of internship at the R.K. HIV AIDS Research and Care Centre, I was able to observe the translation of the textbook concepts into tangible action at the community levels. Every day was a new possibility to bring classroom experience to the field where the situation is realistic and frequently unpredictable. The most important academic topics that I ended up accessing in my case are listed below:

Health Policy and Healthcare Delivery System:

The structural framework of the study we learned in the classroom came into life through my conversations with District TB Officers (DTOs), Community Health Officers (CHOs), and health workers at the block levels. Since programming implementation using NTEP and to know details of referral pathways and coordination gaps, I personally witnessed the process of translating the national health policies through connections on paper to people.

Communication Planning and Management:

This topic was the most actively used in the planning and conducting of awareness campaigns. Be it creating IEC material, choosing means of communication and reaching out to the target audience, as well as the organization of the central points of communication and their joint meeting, behind each campaign, there was a careful design of communication. The principles I applied included the profiling of audiences, the simplicity of the messages, the selection of media, and systems of feedback.

Essentials of Epidemiology:

The ability to understand epidemiology of TB prevalence, drug resistance and high-risk populations with whom to conduct field visits allowed me to use epidemiological thinking. I had some connection with the word incidence, transmission, surveillance, and contact tracing: they all unfolded in front of my eyes, during campaigns, and at meetings with health departments.

Financial Management:

Formulation and updating of elaborate budgets on the proposals has enabled me to exercise some cost analysis, resource optimization and defense of funds expenditure. The breakdown of the proposal budget required a trade-off between impact and feasibility - which is what our classes on financial planning and management talked about.

Organisational Behaviour and Human Resource Management:

Coordination across the departments, leadership, and communication gap alignment enabled me to understand organizational dynamics in the real world. Adaptability to team behavior, conflict management, and interpersonal alignment were some of the aspects that needed to be well understood to ensure that productivity was achieved within a high-paced field environment.

Digital Health:

Although this aspect was restricted, the discussion about the use of digital databases, email records, online CSR portals, and digital follow-up systems demonstrated the added attribution of health organizations to use tech-based systems to understand the progress and communication.

Marketing Management:

Even though there were some ethical issues with it in this context, our approach at creating awareness, choosing the right images, influencers at the local level, the timeframe, and the mode of engagement, had references to the principles of marketing, particularly in the behavior-based format of health communication.

	Essentials of Health Economics and Financing: By presenting proposals that would be of interest to donors to CSR, I had to describe health interventions in cost-effective, return on investment (ROI) and long-term public good. This required us not only to think in a purely clinical way but also in financing supported health programing. The fact that theory became part of everyday operations not only enforced my technical knowledge, but confidence in being able to employ structured thinking in unforeseeable settings. The internship really connected the classroom and the community or rather learning was converted into action.
Gaps identified on the working area	Although there is a well formulated project vision as I found out during the period I was in the field, there exist a few operational and structural gaps noted during my internship. These were not trips but rather times to think about how real time challenges that may be encountered in field-based health interventions may be handled: Delay in Initiating the Field Work: Field-based operations like awareness creation exercise were not able to begin on time because of the set-up formalities in the office, rainy season, and the delayed delivery of IEC materials. This influenced the grassroots community association and creating steam. Internal Communications lapse: Misunderstandings also happened when an update posted by interns or junior employees was not appropriately recognized. There was also a need to repeat or re-check a few tasks because they were not completely and clearly confirmed, or documented handovers. Failure to support Travel Arrangements Completely: The organization had also intended to make available specialized modes of transport to enable commuting during field campaigns and medical camps, especially in interior and tribal regions; this could not be implemented by the end of my internship period. Consequently, field mobility was forced to be compromised either through individual arrangements or restricted collective transportation which sometimes proved to interfere with planning effectiveness and employee involvement. Planning of Campaign Route: In certain cases, the venues of the campaigns were not mapped out in terms of their routes during the fieldwork, or in terms of prior arrangements with the local health centers on where a specific field might be conducted, which caused delays of time and occasionally resulted in poor turnout of participants.
Suggestions for improvement	According to the realities in this field and organizational experience gained during my internship, the following workable recommendations can aid in enhancing project implementation, internal effectiveness, and outreach success in subsequent stages: Engaging Stakeholder in mapping First: Engage community-based health personnel (ASHA, ANM, local NGO volunteers) into the planning of campaigns to make the campaign more credible, have an effective mobilization strategy and develop the security of trust at the local level before intervention starts. Ensure a Timely Logistic Support of Field Travel: It is important to formalize transport arrangements early because the project will be in rural and far blocks. When company-provided vehicles are delayed, short term

	alternatives should be considered (e.g., pre-approved local for-rent scalable alternatives, ride-sharing services, etc). Disruptions in field campaigns should be avoided. Prior Planning & Field Coordination Process: Prior to every field visit create a rough route plan with area contacts, and attendance projection, critical points in the community, and emergence backup plans. That will ease the process of conducting the campaign and eliminate wasted time spent on navigation or becoming lost in the area. Carry out Short Pre-Campaign Training Sessions: Even a small internal 1-hour orientation prior to each campaign can do wonders to dispel the darkness, update messaging plans, and get team members to mentally prepare to smoother field operation - and that is something that is especially helpful to interns and indeed new team members.
Key Learnings	▪ My experience, or internship, was not merely a fulfillment of tasks but rather becoming acquainted with the rhythm of not only community health but also being inside a living system. ▪ I had an opportunity to learn how to maneuver in unpredictability, create a balance between structure and flexibility, and bring a vision of the public health into reality. ▪ All the proposals, the visits to the field, and the discussions among teams all taught me a lesson, not necessarily about TB management or CSR strategy, but about people, about working with a purpose. ▪ From Classrooms to village blocks, I observed that how change is initiated at the levels of communication, coordination, and care.

Signature of the Student

Approved by the IIHMR University's Mentor