SUMMER INTERNSHIP PROGRAM

at

Manipal Hospital Jaipur

From 12th May 2025 to 21st July 28, 2025

A REPORT BY

Name of the student: Urvi Sharma

Master of Business Administration

Hospital and Healthcare Management

2024-26

under the Mentorship of

Dr. Sarthak Sen Gupta

IIHMR UNIVERSITY

manipalhospitals
LIFE'S ON

21th July 2025

TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Ms. Urvi Sharma** has worked as a **Trainee** in the department of **Operations** at **Manipal Hospital, Jaipur** (A Unit of Manipal Health Enterprises Pvt. Ltd.) from **12th May 2025** to **21th July 2025.**

Her conduct was found to be good during this period.

For Manipal Hospital, Jaipur
(A Unit of Manipal Health Enterprises Pvt. Ltd)

Shweta Verma
Unit HR Head

MANIPAL HOSPITAL, JAIPUR
JAIPUR
A unit of MHEPL

Manipal Hospital Jaipur
Sector-5, Vidhyadhar Nagar, Main Sikar Road, Jaipur 302 039, Rajasthan
P +91 14 1516 4000 E infojaipur@manipalhospitals.com
Manipal Health Enterprises Pvt. Ltd.

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Urvi Sharma** 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: 29/07/2025

Dr. Sarthak Sen Gupta
Asst. Professor
IIHMR University, Jaipur

Enhancing patient efficiency in the Gastrosurgical patient A process improvement approach

Urvi Sharma (HM-29),
Under the guidance of Dr. Sarthak Sen Gupta
Hospital Mentor – Dr. Arpita Roy

About Company

Manipal Hospitals is one of India's leading multi-specialty healthcare providers, established in 1953 by Dr. T.M.A. Pai. Headquartered in Bengaluru, the hospital network operates over 30 hospitals across the country. It is part of the Manipal Education and Medical Group (MEMG), known for its commitment to clinical excellence and patient-centric care. With advanced medical technology and highly qualified professionals, Manipal Hospitals offers comprehensive services across various specialties. It has earned national and international recognition for quality healthcare, including accreditations from NABH and JCI. The group continues to expand its footprint with a strong focus on affordability, innovation, and trust.

Mission

- To enhance growth, differentiation, and people management
- To deliver high-quality healthcare with compassion and efficiency
- To serve every patient with a smile, ensuring a positive experience.

Vision

- To be the destination of choice for the communities we serve.
- To become the most preferred and respected healthcare organization
- To ensure excellence and trust in every location we operate

SWOT

Strengths

- Advanced Medical Infrastructure and experienced medical professionals.
- Well defined clinical pathways and service protocols.
- Strong Brand Reputation built over decades with trust in quality healthcare

Weaknesses

- The rising costs of healthcare de- livery makes it expensive for a normal middle-class family.

Opportunities

- Minimizing services Turn Around Time Expansion to underserviced areas

Threats

- The rising costs of healthcare de- livery makes it expensive for a normal middle-class family.

Major Learnings during Internship

- Gained insight into hospital operations across OPD, IPD, diagnostics, emergency, and billing.
- Observed workflow efficiency and identified TAT delays in admission, consultation, and discharge.
- Studied NABH quality protocols and the role of the Quality Department.
- Understood interdepartmental coordination and its effect on patient care.
- Developed problem-solving skills through real-time operational exposure.

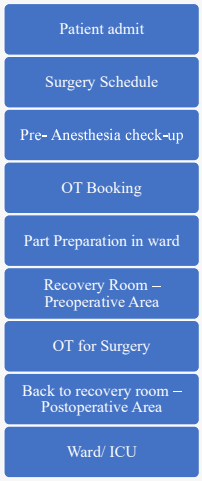
Objectives

1. To analyze the OT patient process flow during various phases of Operation theaters.
2. To identify reasons for delays in each phase of patient process flow.
3. To provide recommendation to improve the OT scheduling and reducing the delay in surgeries leading to more patient satisfaction.

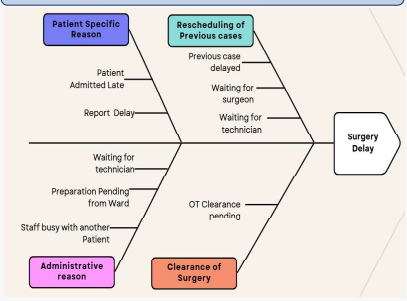
Methodology

Study Design	Observational Study
Sample Size	150 Patients
Study Tool	Fish Bone analysis, Bar chart & MS excel
Sample Technique	Non-Probability Convenience sampling

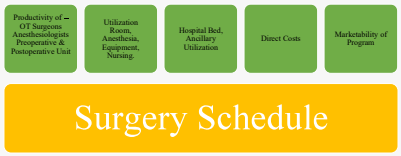
Flow Chart of Operation Theatre



Cause and Effect Analysis

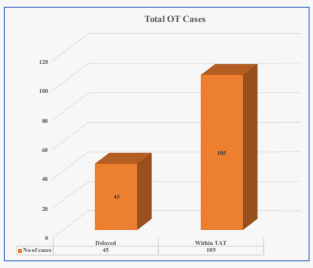


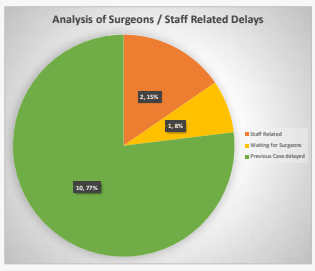
Effect of Hospital Due to OT Scheduling

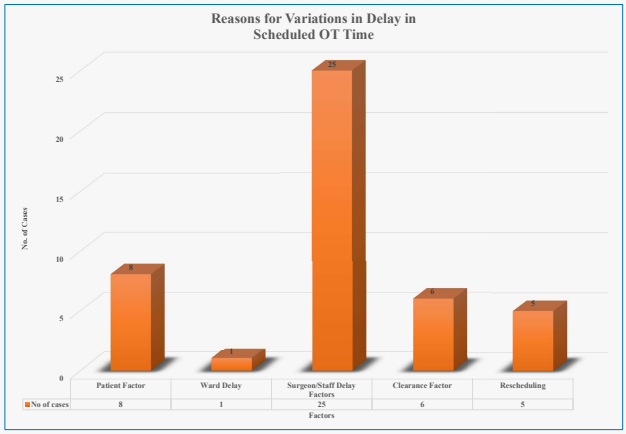


Surgery Schedule

Analysis







Difference Between practical exposure at Organization and Theoretical Understanding?

Theoretical

- Understood hospital hierarchy and interdepartmental roles
- Mapped full patient journey: OPD → IPD → Billing → Discharge
- Studied TAT, SOPs, emergency codes, inventory, and EMR systems

Practical

- Observed daily operations in OPD, IPD, diagnostics, and billing.
- Analyzed delays (TAT) in key hospital processes.
- Assisted in patient navigation and feedback handling.

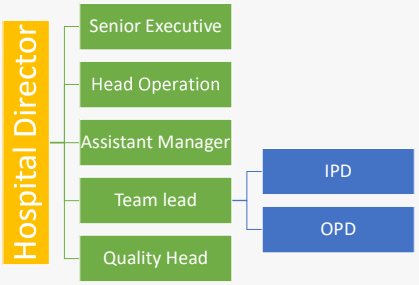
Challenges

- High patient volume
- Limited rural outreach
- Staff Coordination Gaps
- Despite EMR, some tasks still involve paperwork, causing inefficiencies

Suggestions

- Streamline TAT Processes
- Strengthen Rural and Tier-2 City Presence
- Enhance Patient Navigation
- Improve Discharge Planning

Organization Structure



Conclusion

1. Preparation of patient for OT cases must be done before reaching OT.
2. Improved coordination between OT staff should be maintained to smooth flow of the process.
3. Coordination between surgeons, anesthesiologists and OT staff should be ensured.
4. Delays affect patient flows and utilization of OT, thus audits and documentations should be done to keep check on it.

References-

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; Hospital and Health

Week no: 1st From: 12th May TO 17th May

Activity Done	· Document verification and mentor allotment · Orientation about hospital and departments · Observation of OPD billing area processes · Observation of Radiology Department operations · Observation of Oncology Department processes · Observation of CSSD and Biomedical Equipment Department |
Linking theory (Classroom learning) with practice at your Organisation	• The Health Information Systems subject emphasized the importance of digitization and EHR systems. During observation, I noticed partial automation in billing and diagnostics, linking to the classroom discussions on digital transformation in healthcare. • In the Radiology and Oncology departments, I saw protocols and safety measures that matched topics covered in Quality Management and Patient Safety, including the importance of signage, PPE usage, and patient communication. • In the CSSD and Biomedical Equipment departments, the importance of Infection Control and Medical Equipment Management—topics discussed in Hospital Operations—was evident through sterilization protocols and equipment tracking practices.

Gaps identified on the working area.	In the OPD, simultaneous handling of both walk-in and appointment patients leads to overcrowding and increased patient waiting time, indicating a lack of streamlined scheduling •Lead aprons, which are essential for radiation protection, were not being stored appropriately, potentially compromising their effectiveness and violating standard safety protocols. | •In the Radiology Department, poor infrastructure was observed, with indications of possible radiation leakage, which poses serious safety concerns for both patients and staff
Suggestions for improvement	•Display expected waiting times in diagnostic areas • Online diagnostic reports Navigation at hospital • Introduce digital queue management system in OPD billing
Plan for the next week	•- Awaiting allocation of a new project by the hospital mentor. • Will initiate preliminary groundwork including data collection, stakeholder interaction, and process observation as per project requirements. |

Signature of the Student

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no: 2nd From: 19th May to 24th May

Activity Done	* Allotted a new project on segmented care in gastro surgical patients and received education about the project. *Initiated understanding the purpose and objectives of the segmented care project. *Observed that the time taken for project-related tasks appears longer due to less coordination between departments. *Identified areas where problems or inefficiencies seem to exist. *Started compiling a list of all the departments involved in the gastrosurgical patient care pathway. *Dedicated time to studying for upcoming Swayam exams.
Linking theory (Classroom learning) with practice at your Organisation	*Principles of project management regarding timelines and resource allocation. *Concepts of organizational structure and its impact on communication flow.
Gaps identified on the working area.	* Apparent lack of seamless coordination between different departments involved in gastrosurgical patient care. *Potentially inefficient processes leading to increased time taken for project completion or patient care.

Suggestions for improvement	*Implement strategies to enhance interdepartmental communication and collaboration (e.g., regular joint meetings, standardized communication protocols). * Analyze the current workflow to identify bottlenecks and areas for process optimization. *Explore the potential benefits of digital tools or platforms to improve information sharing and coordination.
Plan for the next week	*Further investigate the specific pain points contributing to the lack of interdepartmental coordination. *Conduct a more detailed analysis of the current patient care pathway for gastrosurgical patients to pinpoint inefficiencies. *Research best practices or case studies related to segmented care and interdepartmental collaboration in similar healthcare settings. *Potentially shadow or interview staff members from different involved departments to gain a deeper understanding of their perspectives and challenges.

Signature of the Student

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no: 3rd From: 19th May to 24th May

Activity Done	• - Observed IPD workflow for gastro patients.
Linking theory (Classroom learning) with practice at your Organisation	• - Applied knowledge of hospital operations workflow, including scheduling and discharge process. • - Used concepts of patient flow management, SOP adherence, and turnaround time (TAT) from classroom lectures.
Gaps identified on the working area.	• - Lack of digital coordination between OT scheduling and patient record systems. • - Delays in post-op patient transport due to uncoordinated porter availability.
Suggestions for improvement	• - Integration of a centralized software dashboard for OT slots and patient records. • - Set up fixed time slots and responsibility allocation for transport staff.
Plan for the next week	• - Study the coordination process for emergency gastro-surgeries. • - Collect data on delays in pre-surgical diagnostics and analyze causes.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:4th From: 2nd June to 7th June

Activity Done	•-Assisted in coordination activities; analyzed Patient Turnaround Time (TAT) and Interdepartmental TAT.
Linking theory (Classroom learning) with practice at your Organisation	• - Applied concepts of operations management and hospital workflow optimization learned in class. - Understood how patient flow and departmental interdependence impact overall efficiency. Used Excel for data handling and basic analytics.
Gaps identified on the working area.	• - Lack of real-time tracking system for interdepartmental processes; delays in communication between departments affecting patient TAT.
Suggestions for improvement	• - Recommend implementation of digital dashboards for monitoring TAT and automated alerts for delays. Encourage interdepartmental review meetings for process improvements.
Plan for the next week	• - Observe coordination mechanisms during surgical scheduling and pre-operative assessments. Start working on documenting best practices in TAT management.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:5th From: 9th June to 14th June

Activity Done	•- Observed and supported coordination of surgical scheduling and pre-operative assessment workflow for gastro-surgical patients. Assisted in compiling patient preparation checklists.
Linking theory (Classroom learning) with practice at your Organisation	• - Applied knowledge of hospital pre-operative protocols and scheduling efficiency. Understood the importance of Standard Operating Procedures (SOPs) and resource allocation in OT management.
Gaps identified on the working area.	• - Not all departments strictly follow pre-operative checklist timelines. Inconsistencies in documentation and communication observed.
Suggestions for improvement	• - Recommend checklist digitization and daily review audits. Assign accountability to specific staff for timely pre-operative assessments.
Plan for the next week	• - Begin working on process mapping of discharge workflow for gastro-surgical patients. Evaluate factors delaying discharge and patient satisfaction post-surgery.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:6th From: 16th June to 21th June

Activity Done	•- Initiated development of Standard Operating Procedure (SOP) draft for the discharge process in gastro-surgical patients. • - Collected and analyzed sample data on discharge delays. •- Shadowed the Quality Assurance team to observe how patient feedback is collected and utilized for continuous improvement.
Linking theory (Classroom learning) with practice at your Organisation	•-Applied knowledge of SOP formulation and process standardization from Quality Management coursework. •-Understood feedback mechanisms and their role in hospital accreditation and service enhancement. •- Related patient-centric care models from classroom learning to real feedback handling on-ground.
Gaps identified on the working area.	• - Discharge procedures lacked a structured SOP and timeline enforcement. • - Delays were often caused by miscommunication regarding billing clearance and medication handover. • - Feedback was collected inconsistently and not always analyzed for trends.
Suggestions for improvement	• - Finalize and implement a standardized discharge SOP. • - Develop a checklist that coordinates billing, pharmacy, and ward clearance in sync. • - Set up a feedback analysis team to track trends and present findings weekly.

Plan for the next week	• - Finalize SOP with input from key departments. • - Pilot test the discharge SOP with a small batch of patients. •- Observe effectiveness and record time improvements, if any.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:7th From: 23rd June to 28th June

Activity Done	•- Piloted the newly developed discharge SOP in collaboration with nursing, pharmacy, and billing teams. •- Monitored improvements in TAT and coordinated patient discharge across three cases. •- Conducted staff feedback interviews regarding SOP practicality and ease of implementation.
Linking theory (Classroom learning) with practice at your Organisation	•- Applied principles of Plan-Do-Check-Act (PDCA) cycle from Quality Improvement frameworks. •- Used concepts of pilot testing and feedback loops as taught in Hospital Operations Management. •- Implemented monitoring techniques learned during classroom TAT analysis sessions.
Gaps identified on the working area.	• - Staff adherence to the new SOP varied by shift; night shifts showed higher non-compliance. • - Lack of digital alerts or notifications for pending clearance steps. • - Discharge documentation errors delayed final patient movement.
Suggestions for improvement	• - Provide targeted SOP training for all shift staff. • - Develop a simple digital alert system or checklist app for discharge workflow tracking. • - Introduce discharge documentation verification audits to prevent errors.

Plan for the next week	• - Expand SOP pilot to more cases. • - Collect comparative TAT data before and after SOP use. •- Start preparing a presentation/report for hospital management with findings and recommendations.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:8th From: 30th June to 5th July

Activity Done	•- Expanded the discharge SOP trial across five more gastro-surgical cases. •- Compared Pre-SOP and post-SOP discharge times to assess efficiency. •- Collected patient satisfaction data during the discharge phase.
Linking theory (Classroom learning) with practice at your Organisation	•- Reinforced understanding of performance metrics and patient satisfaction indicators from Quality and Operations modules. •- Practiced data interpretation and report writing using healthcare KPIs and process improvement methodology. •- Applied knowledge of continuous quality improvement and its role in patient-centered care.
Gaps identified on the working area.	• - Some departments were not consistently updating records post-discharge. • - Few patients reported delays in final medication handover. • - Limited staff availability at peak discharge hours was a bottleneck.

Suggestions for improvement	• - Create a discharge coordination desk during peak hours. • - Implement auto-alerts in patient records for discharge checklist steps. • - Establish a dedicated feedback station at the billing counter.

Plan for the next week	•- Compile final analysis report with graphical representations of data. •- Prepare a presentation for hospital mentor and faculty mentor. •- Document best practices and challenges faced during project implementation.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:9th From: 7th July to 12th July

Activity Done	•- Finalized and submitted a comprehensive report on the gastro-surgical patient care process improvement project. •- Presented project outcomes and suggestions to the hospital mentor. •- Participated in a feedback session and reflected on learning outcomes from the project.
Linking theory (Classroom learning) with practice at your Organisation	•- Applied end-to-end project management concepts including planning, execution, monitoring, and reporting. •- Understood the real-world application of health systems thinking and cross-functional coordination. •- Reflected on strategic thinking in operational efficiency improvement.
Gaps identified on the working area.	• - Resistance to change among some staff members despite evidence of improvement. • - Lack of long-term monitoring plan post-project phase.
Suggestions for improvement	• - Recommend periodic refresher training and internal audits to sustain improvements. • - Set up a monitoring committee for long-term discharge TAT tracking. • - Encourage digital transformation in other high-impact hospital processes.

Plan for the next week	•- This 10-week hands-on experience has been instrumental in connecting academic learning with on-ground hospital operations. • - Exposure to interdepartmental coordination, SOP development, and quality improvement sharpened my analytical and managerial skills.

Signature of the Student- Urvi Sharma

Reporting Format (Weekly)

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Week no:10th From: 14th July to 19th July

Activity Done	• Finalized and submitted a comprehensive report on the gastro-surgical patient care process improvement project. •Presented project outcomes and suggestions to the hospital mentor. •Participated in a feedback session and reflected on learning outcomes from the project.
Linking theory (Classroom learning) with practice at your Organisation	• Applied end-to-end project management concepts including planning, execution, monitoring, and reporting. •Understood the real-world application of health systems thinking and cross-functional coordination. •Reflected on strategic thinking in operational efficiency improvement.
Gaps identified on the working area.	• Resistance to change among some staff members despite evidence of improvement. • Lack of long-term monitoring plan post- project phase.
Suggestions for improvement	• Recommend periodic refresher training and internal audits to sustain improvements. • Set up a monitoring committee for long-term discharge TAT tracking. • Encourage digital transformation in other high-impact hospital processes.

Plan for the next week	• This 10-week hands-on experience has been instrumental in connecting academic learning with on-ground hospital operations. •Exposure to interdepartmental coordination, SOP development, and quality improvement sharpened my analytical and managerial skills.

Signature of the Student- Urvi Sharma

Approved by the IIHMR University's Mentor

Compiled Reporting Format

Name of the Organisation: Manipal hospital, jaipur.

Area/ Department/ Project of Summer Internship Program: Department of operations.

Name of the Student: Urvi Sharma

Roll no: 2108 Stream: Program; hospital and health

Activity Done	• Attended an orientation session to understand hospital operations and service delivery structure. • Observed key functional areas such as OPD billing, Radiology, Oncology, CSSD, and Biomedical Equipment management. • Participated in a project focused on streamlining the care pathway for gastro-surgical patients. • Conducted workflow assessments across OPD, IPD, OT, discharge processes, and coordination among departments. • Developed and trialed a Standard Operating Procedure (SOP) to improve discharge efficiency. • Collected and analyzed Turnaround Time (TAT) data, engaged staff for feedback, and presented final recommendations to senior mentors.
Linking theory (Classroom learning) with practice at your Organisation	• Applied knowledge from Health Information Systems to evaluate automation in billing and diagnostic services. • Utilized concepts from Hospital Operations and Quality Management to assess patient flow and infection control protocols. • Implemented project management tools and PDCA (Plan-Do-Check-Act) cycles in the SOP development process. • Leveraged Organizational Behavior principles to analyze communication barriers and team dynamics. • Applied performance metrics and healthcare KPIs during data collection and final reporting stages.
Gaps identified on the working area.	• Identified poor departmental coordination in managing gastro-surgical patient care. • OPD experienced congestion due to the lack of an electronic queue system.

	• Radiology had safety shortcomings and infrastructure-related issues, such as inadequate apron storage and shielding concerns. • Noted absence of real-time tracking for interdepartmental TAT. • Discharge process delays resulted from fragmented coordination between billing, pharmacy, and documentation units. • Feedback collection was irregular, and SOP compliance during night shifts was inconsistent. • Observed reluctance among staff to adopt new protocols and lack of long-term monitoring mechanisms.
Suggestions for improvement	• Introduce real-time digital dashboards to monitor TAT and discharge processes. • Install a queue management system in OPD to reduce patient wait time. • Digitize checklists and discharge SOPs for better standardization and accessibility. • Conduct regular interdepartmental meetings and staff training to enhance coordination. • Set up patient feedback stations and use analytics to derive insights from collected data. • Form a monitoring team to ensure ongoing SOP adherence and conduct routine audits. • Promote broader digital transformation initiatives within hospital workflows.
Key Learnings	• Gained practical exposure in applying theoretical knowledge to real-world hospital operations. • Understood the critical role of process standardization, communication, and data in healthcare quality. • Developed skills in identifying service delivery gaps and designing effective operational solutions. • Learned to manage change within organizational limitations and foster collaboration. • Strengthened leadership and analytical abilities through hands-on project involvement in a

	hospital setting.

Signature of the Student- Urvi Sharma