Summer Internship Program

at

Apollo Sage Hospitals

From **12 May 2025** to **21 July 2025**

A Report By

Prashant Singh

Masters of Business Administration

Hospital & Health Management

2024- 2026

Under Mentorship of

Dr. Goutam Sadhu

Ref.No. ASH/Cert/2025/

18th July 2025.

To whom so ever it may concern

As per Letter No. IIHMRU/2025/05/SIP-111 dated 12-05-2025 of IIHMR University, Jaipur, this is to certify that Mr.Prashant Singh, S/o Mr.Ahivaran Singh, Roll No. IIHMR-U/01/2024-26/2031, student of MBA 1st year - Hospital and Health Management has completed his Professional training of 70 days in Operations department w.e.f. 12th May 2025.

We found him dedicated, sincere, hard working with good behaviour. We wish him success in his future endeavours.

For Apollo Sage Hospital, Bhopal.

Jagrati Raizada
General Manager – Human Resource

Ashish Supase
Manager – IP Operations.

Apollo Sage Hospitals - Bhopal
Regd No. NH/7272/Sept. 2022 (A unit of S. R. Associates)
KH.No. 98/3-99-100,E-8 Extension, Arera Colony, Bhopal- 462026 (MP) India
+91- 0755 - 4308111, 4308101 Emergency +91 -755- 3505050
info@apollosage.in www.apollosage.in

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IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Mr. Prashant Singh** of academic year 2024-26 of **Institute of Health Management Research (MBA-Hospital and Health Management)** has prepared a poster with respect to his summer internship held during May-July2025.

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

Date: 28/7/2025

(Signature of Faculty Mentor)

Dr. Goutam Sadhu
Professor

1, Prabhu Dayal Marg, Near Sanganer Airport, Jaipur- 302029, Rajasthan, India.
Ph.: 0141-3924700, 2791431- 32, E-mail: iihmr@iihmr.edu.in, Web.: www.iihmr.edu.in

Patient Experience Survey in Inpatient Department

Submitted By: **Prashant Singh**
Roll no: 2031 Stream: MBA (HM 29)

Organization Mentor- Mr. Ashish Supase (Head- IP Operations)

University Mentor- Dr. Goutam Sadhu
(Professor, IIHMR University)

HISTORY AND DISCRIPTION OF ORGANIZATION

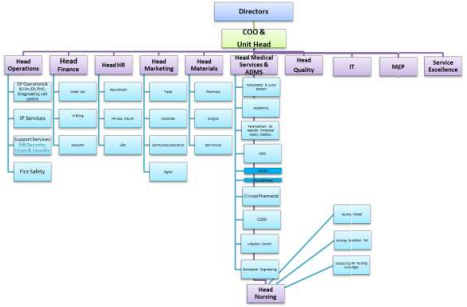
Apollo SAGE Hospital, Bhopal, inaugurated in January 2023, is a joint venture between The SAGE Group and Apollo Hospitals. Founded to bring world-class healthcare to Central India, it offers 350+ beds and over 25 specialties including cardiology, oncology, and critical care. The hospital features advanced technology like robotic surgery, modular OTs, MRI/CT, and a Cath lab. NABH-accredited and patient-focused, it combines Apollo's clinical excellence with SAGE's regional legacy to deliver high-quality, accessible care.

VISION and MISSION

VISION: Apollo Sage Hospital envisions improving the health and well-being of the community by providing world-class patient care, medical education, and training. We work to be trusted by the people who need healthcare, valued partners in the community, and creators of positive change.

MISSION: We are committed to providing patient-centered, quality medical care and services to people in a highly efficient environment. Apollo Healthcare has a robust presence across the healthcare ecosystem. From routine wellness & preventive health care to innovative life-saving treatments and diagnostic services, Apollo Hospitals has touched more than 120 million lives from over 120 countries, offering the best clinical outcomes. Sharing the larger vision with Apollo, The SAGE Group is joining hands with the largest network of the world's finest and brightest medical experts who provide compassionate care using outstanding expertise and advanced technology.

Organization Structure



THEORETICAL v/s PRACTICAL EXPOSURE

Theoretical learning presents an ideal setup; however, real hospital settings during my SIP revealed practical challenges such as delays, coordination gaps, and staff-related issues. Theoretical concepts are well organized, actual hospital operations are heavily influenced by human behavior and real-time decision-making.

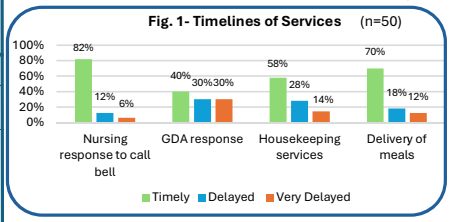
OBJECTIVE : to assess and improve the inpatient patient experience at Apollo Sage Hospital by systematically collecting and analyzing patient feedback on various aspects of their hospital stay.

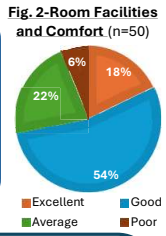
METHODOLOGY

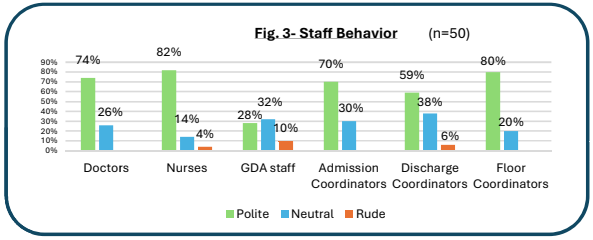
Study Area: Inpatient Department (IPD), Apollo Sage Hospital, Bhopal
Study Type: Descriptive study
Study Duration: 2 months
Sample Size: 50 IPD patients
Inclusion Criteria:
- Patients admitted in the IPD for more than 2 days and are going to be discharged within next 24 hours
- Patients or their attendants willing to participate and provide feedback.
- Patients from general, semi-private, and private wards.

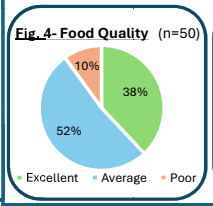
Mode of Data Collection: Structured patient satisfaction survey using a questionnaire.

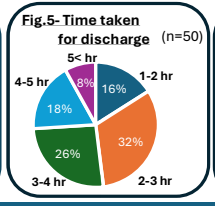
ANALYSIS

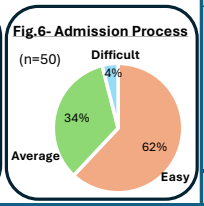












KEY LEARNINGS

1. Learned how floor operations are managed through structured staff roles, shift handovers, and daily task coordination.
2. Understood the importance of timely, respectful, and holistic patient care in enhancing overall hospital experience.
3. Observed that effective interdepartmental coordination is essential to avoid delays in services like billing, radiology, and discharge.

SWOT ANALYSIS

STRENGTHS
1. Well equipped (private and semi-private) patient rooms and suites for luxury.
2. The hospital is staffed with top medical professionals in Bhopal.
3. Offers 350+ beds, with 100+ critical care beds

WEAKNESSES
1. Services are considered costly.
2. It is a relative newcomer in Bhopal versus legacy hospitals in the region.
3. Lapses in ground staff performance such as GDA, housekeeping, F&B attendants etc.

OPPORTUNITIES
1. Growing disease burden.
2. Surrounding regions of Bhopal still lack good medical services.
3. Demand for specialized post-operative care

THREATS
1. Growing competition from other private hospitals providing cheaper services.
2. Any negative publicity, medical errors, or patient dissatisfaction can severely damage the hospital's reputation.
3. Shortage or unavailability of staff.

TOWS ANALYSIS

STRENGTHS & OPPORTUNITIES
Capitalize on luxury rooms, top medical talent, and extensive bed capacity to attract patients from underserved regions and medical tourism seeking specialized, intensive post-operative care for complex and growing disease burdens.

WEAKNESS & OPPORTUNITIES
Drive patient acquisition by offering premium, value-added packages that justify costs and aggressively marketing specialized care to underserved areas. Improve ground staff performance to boost reputation and attract more patients

STRENGTHS & THREATS
Ensure exceptional patient care with expert staff and well-equipped facilities to prevent negative publicity. Attract and retain skilled personnel by leveraging the hospital's reputation for quality, combating staff shortages.

WEAKNESS & THREATS
Combat high-cost perceptions and competition by transparently showcasing the value of premium care and optimizing operations. Address ground staff issues through rigorous training to prevent negative publicity and build trust. Implement robust recruitment and retention strategies for all staff, focusing on excellent patient outcomes to overcome newcomer status and strengthen reputation.

CHALLENGES FACED

1. Lack of structured guidance from the mentor and senior staff led to confusion and delays.
2. Hospital protocols restricted access to patient data and hospital software systems affecting project data collection and hands-on learning.
3. Patients and attendants were hesitant to participate in surveys as the hospital already had a feedback form, and they were often not in the right frame of mind to engage in additional paperwork or formalities.

SUGGESTIONS

1. Implement Better Staff Rotation Practices.
2. Conduct regular training programs for under-skilled staff and introduce reward based incentives or recognition to motivate performance and encourage adherence to protocols.
3. Actively value patient feedbacks and address them seriously.

Weekly Report

Name of the Organisation: Apollo Sage Hospital Bhopal

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 **Stream: MBA (Hospital and Health Management)**

Week no: 1 From: 12-05-2025 to: 17-05-2025

Activity Done	During my first week at Apollo Sage Hospital, I was assigned to the 5th floor, which includes in-patient rooms, suites, the Blood Bank, Laboratory, and CSSD. I conducted pre-admission and post-discharge room checks, ensuring cleanliness, supply availability, and equipment functionality. I learned about sanitation protocols, checklist documentation, and the roles of GDAs and housekeeping staff in maintaining patient care standards. I also interacted with patients to understand and address their concerns, gaining insight into the importance of service quality and patient satisfaction in hospital operations.
Linking theory (Classroom learning) with practice at your organisation	During my first week at Apollo Sage Hospital, I connected academic modules to practical experiences. Patient-centric care from **Essentials of Hospital Services** was evident in patient room preparation and involvement in related support services. **Organisation Behaviour** insights helped me understand team coordination between GDA, housekeeping, and nursing teams. The **UHVE (Universal Human Values and Ethics)** course guided my patient interactions with empathy, compassion, and respect, highlighting the importance of ethical conduct alongside technical skills in healthcare.
Gaps identified on the working area.	I frequently observed a lack of coordination and poor communication among nursing staff, GDA, and housekeeping, leading to confusion and overlapping responsibilities. This resulted in delayed patient requests and negatively impacted patient satisfaction. Short staffing during some shifts increased workload and affected service quality. Inconsistent adherence to SOPs for room turnaround, sanitation, and supply handling caused operational inefficiencies.

	Missing or delayed inventory updates hindered the availability of essential supplies and equipment, disrupting patient care preparation.
Suggestions for improvement	**Enhance Staff Coordination**: Implement regular briefings and establish clear communication channels among nursing staff, General Duty Assistants (GDAs), housekeeping personnel, and floor coordinators to ensure timely and efficient patient care. **Address Staffing Shortages**: Assess staffing needs and consider hiring additional support staff or optimizing shift schedules to ensure adequate coverage, especially during peak hours. **Reinforce SOP Compliance**: Conduct training sessions to familiarize all staff with Standard Operating Procedures (SOPs) and perform periodic audits to ensure adherence, thereby maintaining consistency and quality in patient care. **Implement Inventory Management System**: Adopt a digital inventory tracking system to monitor stock levels in real-time, ensuring timely replenishment of supplies and reducing instances of stockouts. **Develop Patient Request Protocols**: Establish a standardized process for logging and addressing patient requests, ensuring that all concerns are tracked and resolved promptly to enhance patient satisfaction.
Plan for the next week	I will focus on observing and documenting workflows of nursing, GDA, and housekeeping staff, specifically patient requests and room turnover. I aim to assess the inventory management system, including stock updates and the impact of delays. I will review SOPs for room turnaround, sanitation, and supply handling, comparing them to actual practices. I will develop a plan to address identified gaps and seek staff feedback for improvement recommendations.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 2 From: 19-05-2025 to: 24-05-2025

Activity Done	During my second week at Apollo Sage Hospital, I was assigned to the 3rd floor, which comprises the Male General Ward, Female General Ward, Ayushmaan Ward, Private and Semi-Private Rooms, MICU, Stroke ICU, and the Billing and Discharge Department. I assisted the floor coordinators and service excellence staff in managing patient flow and daily floor activities. My tasks included monitoring pre-admission and post-discharge room and bed readiness, ensuring the corridors were clean and organized, and verifying the availability of supplies and functionality of medical equipment. Additionally, I supported the coordination of General Duty Assistants (GDA) and housekeeping teams to maintain operational efficiency. I also worked with the Service Excellence team to collect patient feedback, address complaints, and resolve issues in real-time to ensure patient satisfaction.
Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services:** Applied concepts of patient flow, room readiness, and equipment checks during pre-admission and post-discharge processes. **Organisation Behaviour:** Observed the role of team coordination, motivation, and communication in managing GDAs, housekeeping, and service excellence teams. **Business Communication:** Used active listening and clear communication to handle patient complaints and feedback effectively. **Principles of Management:** Practiced planning, organizing, and supervising daily floor operations, including patient movement and service coordination.

Gaps identified on the working area.	Washrooms in the General and Ayushmaan wards were often not cleaned thoroughly or at regular intervals. Shortage of GDAs and housekeeping staff compared to the number of beds on the floor, affecting timely care and cleanliness. Occasional unavailability or non-functionality of basic equipment or supplies due to delayed reporting or replacement. Some communication gaps in conveying patient complaints or service requests to the relevant department. Lack of structured coordination between GDAs, nursing, and housekeeping teams, leading to delays in service delivery.
Suggestions for improvement	Increase the frequency of washroom cleaning in General and Ayushmaan wards and enforce strict sanitation audits with documentation. Review staffing ratios based on bed capacity and consider recruiting additional GDAs and housekeeping staff to meet workload demands. Conduct regular inter-shift briefings and define clear roles for GDAs, housekeeping, and nursing teams to streamline responsibilities and avoid delays. Schedule routine checks and implement a prompt reporting system for faulty or missing equipment and low supply levels.
Plan for the next week	In the coming week, I aim to continue assisting on the 3rd and 5th floor with a stronger focus on identifying process gaps in the discharge and billing workflows. I also plan to collaborate more closely with the Service Excellence team to analyze trends in patient feedback and identify recurring service challenges. Additionally, I intend to observe and document ICU workflow to understand the complexities of critical care coordination.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 3 From: 26-05-2025 to: 31-05-2025

Activity Done	During the third week of my internship, I actively assisted the Service Excellence team in their daily patient rounds. The team comprised the Service Excellence Head, AGM – Operations, Quality Head, Chief Nursing Officer, and Floor Coordinators. We met each patient and their attendant personally to gather feedback on both clinical and non-clinical services. I attentively listened to their concerns, complaints, and requests, and helped in resolving issues on the spot wherever possible. I also received valuable inputs from the team regarding ways to enhance service delivery and implement practical action plans to minimize patient inconvenience. Discussions during the rounds also included proposed improvements, SOP revisions, and future planning to avoid operational mismanagement and elevate the overall quality of care.
Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services:** Applied concepts of patient satisfaction, SOP adherence, and service quality during feedback rounds. **Principles of Management:** Observed planning, delegation, and coordination among multidisciplinary teams. **Organisation Behaviour:** Understood team dynamics and the impact of leadership and communication on service delivery. **Business Communication:** Practiced active listening and clear communication while handling patient concerns. **Human Resource Management:** Saw how staff responsiveness, role clarity, and manpower allocation influence patient experience.

	Health Policy and Health Care Delivery System: Linked hospital-based service improvements to broader goals of quality and patient-centered care.
Gaps identified on the working area.	Frequent complaints about **late meal delivery**, affecting patient satisfaction. **Delayed response from GDA staff**, especially for basic support tasks, was observed on multiple floors. Instances of **used or unclean linen being allotted** to new patients, indicating lapses in housekeeping and linen management.
Suggestions for improvement	**Coordinate with the dietary department** to streamline meal delivery schedules, with clear timelines and accountability for delays. **Improve GDA response time** by conducting role-based training, setting response time benchmarks, and introducing floor-wise duty rosters to enhance efficiency. **Strengthen linen management protocols** to ensure proper collection, cleaning, and distribution. Introduce a checklist for room readiness before admitting new patients. **Conduct regular refresher sessions** for GDAs, housekeeping, and support staff on hospital SOPs and expected service standards. **Display SOPs and response protocols** on each floor through notice boards or visual aids to increase awareness and adherence.
Plan for the next week	In the upcoming week, I plan to work closely with the discharge team to observe and analyze the discharge process. The focus will be on identifying workflow patterns, assessing the turnaround time (TAT), and documenting any delays or issues that affect patient experience. This will help in suggesting process improvements to enhance efficiency and satisfaction at the point of discharge.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 4 From: 01-06-2025 to: 06-06-2025

Activity Done	During the fourth week of my internship, I coordinated with the Discharge Coordinator on the 3rd floor to observe and analyze the discharge process in detail. I closely followed each step of the process from the initiation of discharge to the final exit of the patient. This included interactions with the treating team, nursing staff, billing department, pharmacy, and TPA. I documented the sequence of activities, turnaround time (TAT), and common delays faced during discharge. I also gathered feedback from patients and staff regarding discharge-related issues and supported the Discharge Coordinator in resolving minor bottlenecks. This experience helped me understand interdepartmental coordination and the operational challenges involved in ensuring timely and efficient patient discharge.
Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services:** Applied principles of service quality and discharge process standardization to assess patient flow. **Principles of Management:** Observed planning, coordination, and delegation among multiple departments during discharge. **Organisational Behaviour:** Understood the importance of teamwork, time management, and communication in a discharge workflow. **Business Communication:** Practiced clear communication and professional interaction while coordinating between departments and addressing patient concerns. **Human Resource Management**: Noted how staff availability and role clarity affect the discharge timeline and overall patient satisfaction.

Gaps identified on the working area.	Delays in final billing clearance due to pending doctor orders or pharmacy approvals. Lack of proactive communication with attendants about estimated discharge timing. Insufficient coordination between departments, leading to prolonged waiting times for patients.
Suggestions for improvement	Implement a standardized discharge checklist that includes all steps and responsible personnel to avoid confusion or delay. Set up a discharge communication board or digital update system on each floor for better coordination with patients and attendants. Conduct discharge process training for nurses and floor coordinators to streamline documentation and interdepartmental communication. Monitor and record average TAT for discharges floor-wise to track performance and implement focused improvements.
Plan for the next week	In the next week, I plan to continue working on the discharge process by collecting TAT data, comparing different cases, and preparing an analysis report. I will also begin drafting recommendations to optimize discharge workflows and enhance patient satisfaction related to discharge experiences.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 5 From: 08-06-2025 to: 14-06-2025

Activity Done	During the fifth week of my internship, I continued my regular patient feedback rounds and discharge coordination activities on the 3rd and 5th floors. I tracked patient satisfaction levels, helped resolve minor service-related issues, and followed up on previously noted concerns, especially around the discharge process. Additionally, I visited and familiarized myself with key hospital departments, including the Intensive Care Units (ICUs), Operation Theatres (OTs), and the Physiotherapy Department. These visits gave me insights into the operational setup, patient handling protocols, interdepartmental workflows, and support services in critical care and post-operative rehabilitation areas.
Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services**: Observed real-time operations in ICUs and OTs, gaining exposure to high-dependency service standards and infection control protocols. **Organisational Behaviour:** Understood how cross-functional teamwork is crucial in ICUs and OTs, especially under time-sensitive conditions. **Principles of Management:** Noted the importance of planning and coordination between departments like surgery, anesthesia, nursing, and physiotherapy for smooth patient transitions. **Hospital Operations Management:** Learned about process flows in the physiotherapy unit, and how rehabilitation planning contributes to discharge readiness and long-term patient outcomes.

	Communication Skills: Continued engaging with patients and their attendants to gather feedback, explain discharge processes, and improve their experience through effective communication. **Human Resource Management:** Noted how staff availability and role clarity affect the discharge timeline and overall patient satisfaction.
Gaps identified on the working area.	Continued delays in discharge due to uncoordinated clearance processes. Limited patient awareness regarding ICU and physiotherapy services and their protocols. Occasional miscommunication between floor staff and departments like billing and pharmacy, causing delays.
Suggestions for improvement	Introduce brief orientation for patients/families about ICU protocols and physiotherapy support at admission. Set up floor-wise communication SOPs for smoother coordination between billing, pharmacy, and clinical teams. Continue collecting patient feedback to identify recurring issues and take proactive steps for resolution.
Plan for the next week	In the coming week, I plan to visit and study critical departments such as the Intensive Care Units (ICUs), Operation Theatres (OTs), and the Emergency Department in detail. I aim to understand their workflows, coordination mechanisms, patient handling protocols, and interdepartmental communication. I will also observe the role of support services in these high-dependency areas to gain deeper operational insights that contribute to overall hospital efficiency and patient care quality.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 6 From: 06-06-2025 to: 21-06-2025

Activity Done	During the sixth week of my internship, I continued my routine patient feedback rounds and discharge coordination activities on the 3rd and 5th floors. I engaged with inpatients and their attendants to capture feedback, address concerns, and monitor satisfaction levels. I also ensured smooth discharge coordination by aligning with the relevant departments. In addition to these regular tasks, I was exposed to the **Third Party Administrator (TPA)** and **CGHS** (Central Government Health Scheme) desk operations. I gained an understanding of the insurance documentation process, pre-authorization workflows, coordination with insurance representatives, and common challenges in claim approvals and settlements. I also observed the **admission process** at the front office and admission counter, learning about patient registration, documentation, bed allocation, and communication between the admission team and clinical departments. This gave me a clearer picture of how first impressions and initial interactions affect patient perception and operational efficiency.
Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services**: Practical exposure to patient admission workflows and TPA processes helped me relate to real-world applications of service quality, access, and patient rights. **Health Insurance & TPA Management:** First-hand learning about TPA and CGHS processes allowed me to understand the importance of accurate documentation and timely communication with insurers.

	Hospital Operations Management: Observing the admission process and discharge coordination highlighted how efficient administrative workflows contribute to overall patient satisfaction. **Communication Skills**: Regular feedback interactions and TPA desk observations reinforced the need for clear, empathetic communication with patients, attendants, and external stakeholders. **Organisational Behaviour:** The TPA and front office teams' collaboration with billing, nursing, and clinical departments reflected the interdependence of departments and the value of teamwork.
Gaps identified on the working area.	Delays in discharge continue due to coordination gaps between billing, pharmacy, and TPA desks. Patients and attendants often lack awareness about TPA documentation and CGHS processes, leading to last-minute confusion. Occasional delays in patient admission due to communication lapses between admission and nursing staff.
Suggestions for improvement	Create informational pamphlets or digital screens to explain TPA and CGHS processes at the admission desk. Introduce a checklist for admission and discharge documentation to minimize delays and improve clarity. Conduct regular interdepartmental briefings to align admission, nursing, and billing teams, especially during peak hours.
Plan for the next week	In the upcoming week, I plan to study the Emergency Department (ED) in detail, focusing on its triage system, patient categorization, admission decision flow, and interdepartmental coordination. I will also explore the ambulance service and the role of support staff in emergency care delivery.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 7 From: 23-06-2025 to: 28-06-2025

Activity Done	In the seventh week of my internship, I continued floor operations, including patient feedback rounds and discharge coordination on the 3rd and 5th floors. I interacted with inpatients and attendants to gather feedback on nursing care, GDA support, housekeeping, and communication. These insights helped identify service gaps and areas for improvement. I visited the **Emergency Department**, where I observed the triage system, patient categorization, admission flow, and coordination with other departments. This exposure helped me understand how critical cases are prioritized and managed efficiently. I also spent time in the **Day Care Unit**, observing short-stay procedures such as dialysis, chemotherapy, and minor surgeries. I learned about scheduling, consent documentation, and patient monitoring post-procedure. Additionally, I revisited the **admission process** to understand the coordination between the front office, nursing, and billing teams during high patient load situations. This reinforced the importance of smooth communication and workflow at the entry point of care.
Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services:** Exposure to floor operations, admissions, and emergency care helped me connect theoretical concepts of patient flow, service access, and quality. **Health Insurance & TPA Management**: Practical experience at the TPA and CGHS desks deepened my understanding of insurance workflows and the need for accurate documentation.

	Hospital Operations Management: Observations in the Emergency Department, Day Care Unit, and discharge processes highlighted how smooth coordination improves hospital efficiency. **Communication Skills:** Interactions with patients, attendants, and departments emphasized the importance of clear and empathetic communication in hospital settings.
Gaps identified on the working area.	Continued delays in the discharge process due to coordination issues between billing, pharmacy, and the TPA desk. Lack of awareness among patients and attendants regarding TPA and CGHS documentation, often leading to confusion and last-minute issues. Occasional delays in patient admissions due to miscommunication between admission and nursing teams. Limited patient education at the time of admission and discharge, impacting their preparedness and satisfaction.
Suggestions for improvement	Display digital screens or provide pamphlets at the admission desk to inform patients about TPA and CGHS procedures. Develop a standardized checklist for admission and discharge documentation to streamline the process and reduce errors. Conduct regular interdepartmental meetings, especially during peak hours, to ensure alignment between the admission, nursing, and billing teams. Introduce brief orientation or counseling for patients and their families regarding their care journey and documentation requirements.
Plan for the next week	In the upcoming week, I plan to work with the **Quality Department** and explore aspects of clinical operations. My focus will be on understanding quality indicators, NABH-related documentation, audits, infection control practices, and how clinical and non-clinical teams collaborate to maintain service standards and patient safety.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 8 From: 30-06-2025 to: 05-07-2025

Activity Done	In the eighth week, I continued floor operations and gained deeper exposure to the Emergency Department, focusing on triage, critical case handling, and interdepartmental coordination. I also studied the structure and functions of key hospital committees, which play a vital role in governance, safety, and quality improvement. These included: • **Safety & Disaster Management**, **Infection Control**, **Mortality**, **Code Blue**, and **Brain Death Committees** (focused on emergency preparedness and clinical safety), • **Digital Transformation**, **Patent**, and **Medical Records Committees** (ensuring innovation and efficient data handling), • **DTC**, **Blood Transfusion**, and **OT Committees** (standardizing clinical protocols), • **Quality Improvement**, **Grievance**, **Internal Complaints**, and **Credentialing & Privileging Committees** (focused on patient/staff rights, compliance, and service standards), • **Clinicopathological**, **Clinicoradiological**, **Purchase & Condemnation**, and **Medical Committees** (enhancing diagnostic accuracy, procurement decisions, and clinical governance). This exposure gave me an integrated understanding of hospital systems, decision-making processes, and quality control mechanisms.

Linking theory (Classroom learning) with practice at your organisation	**Hospital Administration & Committees:** The exposure to committee structures helped bridge theoretical understanding of hospital governance and practical implementation. **Healthcare Quality Management:** Observing quality improvement practices and infection control measures illustrated classroom concepts of continuous quality improvement (CQI) and NABH standards. **Legal and Ethical Issues in Healthcare:** Committees like Brain Death, Grievance, and Internal Complaints provided real-world examples of ethical and legal compliance. **Information Management in Hospitals:** The Digital Transformation and Medical Records Committees demonstrated how IT tools are used in real-time to enhance data security, documentation, and reporting.
Gaps identified on the working area.	Limited awareness among staff regarding committee roles and their importance, especially at the operational level. Variation in documentation practices across departments, affecting the consistency required for NABH audits. Some committees are underutilized due to irregular meetings or inadequate staff participation.
Suggestions for improvement	Organize monthly orientation sessions for staff to educate them about the roles and functions of hospital committees. Standardize documentation formats across departments to support internal audits and NABH readiness. Encourage more interdisciplinary participation and frequent meetings of key committees to ensure continuity and effectiveness.
Plan for the next week	In the upcoming week, I plan to work more closely with the **Quality Department**, focusing on internal audits, tracking of quality indicators, patient safety goals, and how data-driven insights are used to enhance operational efficiency and patient satisfaction.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 9 From: 07-07-2025 to: 12-07-2025

Activity Done	In the ninth week, I expanded my exposure beyond operations by engaging with support service departments critical to hospital functioning. • **Food and Beverage Services**: I observed the entire food preparation and delivery process for both patients and staff. I understood diet planning based on patient conditions, hygiene standards followed in the kitchen, and the coordination between the dietician and the F&B team. Timeliness, food safety audits, and satisfaction tracking were also noted. • **Hospital Security Services**: I interacted with the security team to understand visitor management, patient escort protocols, emergency evacuation plans, and CCTV monitoring. The team's role in managing conflict situations, asset protection, and fire safety was also explored. • **Engineering Department**: I studied the functioning of the maintenance team responsible for utilities like HVAC, electricals, plumbing, lifts, and biomedical equipment upkeep. I also gained insights into preventive maintenance schedules, breakdown management, and vendor coordination.
Linking theory (Classroom learning) with practice at your organisation	**Hospital Support Services:** Theoretical learnings about the role of F&B, security, and engineering in hospital operations came to life through direct observation of SOPs, coordination models, and workflow systems. **Operations Management:** Concepts like resource optimization, supply chain management, TAT (Turn-Around-Time), and service quality were directly applied in F&B services and engineering.

	Facility Management in Healthcare: Interactions with the engineering team highlighted the importance of infrastructure maintenance, risk management, and safety compliance.
Gaps identified on the working area.	**Delays in patient meal delivery** and **untimely clearance of used utensils**, which may impact patient comfort and hygiene. **Security team occasionally fails to effectively manage visitors and attenders**, especially during peak OPD hours, leading to overcrowding and confusion. **Limited integration between support services and clinical departments**, resulting in occasional communication and coordination gaps.
Suggestions for improvement	Introduce a meal tracking system (manual or digital) to monitor TAT (Turn-Around-Time) for patient food delivery and clearance of used utensils, ensuring timely service and hygiene compliance. Conduct periodic training for the security team on soft skills, visitor flow control, emergency response, and patient-attender communication to enhance situational handling. Implement daily coordination meetings or dashboards involving clinical and support services to ensure aligned operations, especially during meal times and peak hours. Display clear signages and instructions at entry points and waiting areas to support the security team in crowd management and streamline patient flow.
Plan for the next week	In the upcoming week, I plan to **conclude my project on patient satisfaction**. This will involve finalizing data analysis, deriving actionable insights, preparing the project report, and presenting key recommendations to the quality and operations team. I also aim to reflect on implementation feasibility and suggest strategies to sustain improvements in patient experience.

Weekly Report

Name of the Organisation: Apollo Sage Hospital

Area/ Department/ Project of Summer Internship Program: Operations

Name of the Student: Prashant Singh

Roll no: 2031 Stream: MBA-HM

Week no: 10 From:14-07-2025 to: 21-07-2025

Activity Done	In the final week of my internship, I focused on concluding my patient satisfaction project while also gaining exposure to remaining operationally significant areas of the hospital. **Project Conclusion – Patient Satisfaction (IPD):**The final steps in my patient satisfaction project involved data consolidation from IPD surveys, analysis of key parameters (such as nursing care, hygiene, food, communication, and discharge process), identifying top concerns, and drafting actionable recommendations. The final report and presentation were submitted to the Operations and Quality teams. **OPD Department:**I observed the registration, consultation, and billing processes within the Outpatient Department. Emphasis was placed on queue management, patient flow, appointment scheduling, and inter-department coordination. I noted the importance of front-desk behavior and real-time problem resolution in shaping outpatient satisfaction. **Non-Medical Supply Store:**I visited the non-medical store to understand inventory management for general consumables, housekeeping items, stationery, linen, and other hospital utilities. I examined the demand and supply planning process, stock issuance protocols, vendor tracking, and the storage conditions for various non-clinical items. **Dormitory for Staff and Patient Attenders:** I also inspected the dormitory facilities provided for hospital staff and patient attenders. I assessed cleanliness, space utilization, security, feedback mechanism, and allocation policy. These support facilities play a crucial role in overall patient-family experience and employee well-being.

Linking theory (Classroom learning) with practice at your organisation	**Healthcare Operations:** Observing OPD functioning aligned with classroom topics like queue management, TAT, and service experience delivery. **Inventory and Store Management:** Practical understanding of the non-clinical supply chain and consumption-based inventory planning reinforced supply chain concepts. **Support Services & Facilities**: Dormitory inspection tied in with facility planning, hospitality standards, and feedback mechanisms from hospital management theory. **Project Execution:** The end-to-end execution of a real-time patient satisfaction project applied research methodology, quality improvement models, and operations analysis.
Gaps identified on the working area.	OPD congestion during morning hours due to overlapping appointments and limited waiting space. Lack of regular maintenance and periodic deep cleaning in dormitory areas. Inventory mismatches and occasional stockouts in the non-medical store due to manual tracking systems
Suggestions for improvement	Implement an appointment staggering system in OPD and integrate digital display boards to optimize patient load. Introduce regular dormitory inspections and feedback-based upgrades for enhanced hygiene and comfort. Digitize the non-medical inventory system for real-time stock visibility, auto-replenishment triggers, and better vendor accountability.
Plan for the next week	

Signature of the Student

Compiled Report

Activity Done	• Assigned to various floors (5th and 3rd floors) including in-patient rooms, wards, suites, Blood Bank, Laboratory, CSSD, MICU, Stroke ICU, Ayushmaan Ward, Private/Semi-private rooms, Billing & Discharge Department. • Conducted pre-admission and post-discharge room and bed readiness checks, ensuring cleanliness, supply availability, and equipment functionality. • Supported and coordinated with General Duty Assistants (GDAs), housekeeping staff, and floor coordinators for maintaining operational efficiency and patient care standards. • Conducted regular patient feedback rounds alongside the Service Excellence team, interacting with patients and attendants to gather feedback, address complaints promptly, and monitor patient satisfaction. • Assisted in daily patient rounds with the Service Excellence team, contributing to on-spot issue resolution and service improvement discussions. • Observed and analyzed the discharge process in detail, working closely with Discharge Coordinators and various departments (billing, pharmacy, TPA, nursing, treating team) to document workflows, turnaround times, and identify bottlenecks. • Visited and familiarized with critical hospital departments such as Intensive Care Units (ICUs),

	Operation Theatres (OTs), Physiotherapy Department, Emergency Department including triage and admission processes, Day Care Unit for short-stay procedures, and outpatient registration and billing. • Studied insurance desk operations, specifically Third Party Administrator (TPA) and Central Government Health Scheme (CGHS), including documentation, pre-authorization, claim settlement, and coordination challenges. • Observed patient admission workflows, including registration, documentation, bed allocation, and coordination among front office, nursing, and billing teams. • Gained exposure to hospital support services such as Food and Beverage Services, Hospital Security, and Engineering Department to understand their role in patient care, safety, and infrastructure maintenance. • Completed patient satisfaction project by collecting, consolidating, and analyzing data; identified key concerns and drafted actionable recommendations for quality and operational improvements. • Inspected non-medical supply stores and dormitory facilities for staff and patient attendants to assess inventory management, cleanliness, security, and overall support environment.

Linking theory (Classroom learning) with practice at your organisation	**Essentials of Hospital Services** • Applied principles of *patient-centric care* in patient room preparation, infection control, and monitoring service quality in areas like admissions, discharge, critical care, and support services. • Utilized theory on *operation and support service standards* through direct involvement in facility management, service excellence rounds, and checklists for process audits. **Principles of Management:** • Observed and practiced planning, delegation, coordination, resource management, and process improvement across departments to optimize patient flow, service delivery, and discharge efficiency **Organisational Behaviour:** • Gained insights on teamwork, communication dynamics, leadership styles, motivation, conflict resolution, and organizational culture impacting staff performance and patient satisfaction. **Business Communication** • Practiced *active listening and clear communication* while handling patient feedback, complaints, and interdepartmental interactions. • Used *professional communication skills* in coordinating with billing, pharmacy, support teams, and during training for SOP adherence. **Human Resource Management** • Observed how *manpower allocation, role clarity, and training* influence patient experience, process efficiency, and discharge timelines.

	• Noted the critical role of *staff responsiveness, briefings, and orientation programs* in maintaining service standards. **Foundation Course on Universal Human Values and Ethics (UHVE)** • Practiced empathy, compassion, and respect in daily patient interactions, applying ethical principles while addressing patient and staff concerns. • Maintained discretion and professionalism, especially during sensitive situations like patient feedback, discharge processes, and complaint handling **Bio-Statistics** • Collected, analyzed, and interpreted patient satisfaction data as part of the patient satisfaction project. • Used basic statistical techniques (e.g., trend analysis, percentage calculations) to support data-driven quality improvements and present actionable insights **Essentials of Health Economics and Financing** • Observed the role of budgeting, resource allocation, and cost containment through inventory management, staff deployment, and supply chain optimization. • Participated in processes related to billing, insurance authorizations, and financing mechanisms (TPA, CGHS), understanding the financial impact on hospital operations and decision-making.

	Research Methods • Applied classroom learning by designing, conducting, and analyzing patient satisfaction surveys as part of a hospital quality improvement project. • Used basic statistical tools for data analysis and report drafting, working closely with the quality team to translate insights into actionable recommendations. • Participated in meetings where research data was utilized for operational enhancement and better patient outcomes. **Digital Health** • Noted the increasing use of digital systems for inventory, admissions, discharge tracking, and patient information management. • Saw application of telemedicine, electronic health records, and digital dashboards during committee work and quality improvement meetings. • Observed how digital tools contributed to faster decision-making, improved patient record maintenance, and seamless interdepartmental coordination. **Behaviour Change Communication** • Assisted in campaigns and communications aimed at patient and staff behavior improvements (e.g., hand hygiene, discharge preparedness). • Engaged with patients through feedback mechanisms to encourage better compliance with hospital routines (diet, medication adherence). • Saw the use of posters, digital screens, and interpersonal interactions as tools for driving positive health behaviors within the hospital environment

Gaps identified on the working area.	**Coordination & Communication Gaps** • Inconsistent coordination and poor communication among nursing staff, GDAs, and housekeeping, leading to overlapping responsibilities and delays in patient care. • Lack of structured handover and coordination between departments (nursing, housekeeping, billing, pharmacy, TPA), causing delays in admissions, discharge, and service requests. • Occasional miscommunication between floor staff and support departments (e.g., billing, pharmacy, physiotherapy) resulting in delayed responses. **Staffing & Role Clarity** • Shortages of GDAs and housekeeping staff, especially relative to bed numbers and workload demands, negatively impacting service punctuality and thoroughness. • Inadequate availability or unclear roles of staff at times, leading to unaddressed patient needs, delayed processes, and inconsistent adherence to protocols. **SOP and Protocol Adherence** • Inconsistent or insufficient adherence to SOPs for room turnaround, sanitation, supply handling, and linen management, leading to operational inefficiencies and issues like unclean linen for new patients. • Occasional inadequate communication of SOPs and lack of refresher training for ground staff. **Cleanliness and Maintenance** • Washrooms in some wards not cleaned thoroughly or regularly; insufficient audits of sanitation standards.

	• Delays or lapses in routine maintenance and deep cleaning of dormitory areas used by staff and attendants. • Delays in meal clearance and cleanliness standards in food delivery affecting hygiene and patient comfort. **Equipment & Supplies** • Missing or non-functional equipment and unreported or delayed supply replenishments disrupting patient care preparation and readiness. • Inventory mismatches and occasional stockouts in non-medical supplies due to manual tracking systems. **Discharge and Admission Processes** • Persistent delays in discharge due to uncoordinated processes across billing, pharmacy, and TPA desks. • Lack of proactive communication with patients or attendants about discharge timelines, leading to confusion and dissatisfaction. • Gaps in educating patients and attendants about admission/discharge procedures and insurance (TPA/CGHS) documentation, causing last-minute confusion and process delays. **Service Delays & Quality** • Frequent complaints about late meal delivery and delayed responses to basic support requests. • Security team occasionally unable to manage visitors and crowd flow effectively, particularly during peak OPD hour.

Suggestions for improvement	**Coordination & Communication** • Implement a structured handover system between shifts and departments using standardized checklists or digital handover tools. • Introduce regular interdisciplinary coordination meetings (e.g., daily huddles) involving nursing, housekeeping, billing, and pharmacy to align priorities and resolve bottlenecks. • Use internal communication platforms (e.g., WhatsApp Business API, hospital intranet) to streamline real-time updates and minimize delays in response. **Staffing & Role Clarity** • Conduct a workforce planning assessment to determine optimal GDA and housekeeping staffing ratios based on bed occupancy and workload. • Clearly define and communicate the scope of responsibilities for all support staff through departmental orientation and visual role charts on each floor. • Introduce float or backup staff to cover absenteeism or high workload situations, ensuring continuity of care. **SOP and Protocol Adherence** • Reinforce the importance of SOP compliance through routine audits and surprise checks by the quality team or floor supervisors. • Conduct monthly refresher training sessions for housekeeping, nursing aides, and support staff to reinforce key SOPs. • Display simplified, laminated SOP charts in utility areas and nursing stations for quick reference.

	Cleanliness and Maintenance • Increase the frequency of washroom cleaning and sanitation audits, especially in high-traffic wards. • Set a fixed schedule for deep cleaning of dormitories and shared staff areas; maintain a logbook for supervisor review. • Introduce automated meal tray clearance alerts to housekeeping via EHR or nurse calls to reduce meal tray clearance delays. **Equipment & Supplies** • Implement a preventive maintenance plan for medical and non-medical equipment with regular checklists and escalation protocols. • Digitize inventory tracking using barcoding or RFID technology to reduce mismatches and ensure timely replenishment. • Train floor staff to promptly report equipment faults or low stock through a dedicated internal helpdesk system. **Admission & Discharge Processes** • Develop and circulate a discharge workflow SOP across billing, pharmacy, nursing, and TPA departments with defined timelines for each step. • Assign a discharge coordinator or case manager per floor to track and facilitate timely discharge for each patient. • Provide patients and attendants with a printed or digital guide outlining admission/discharge procedures and insurance documentation requirements upon admission. **Service Timeliness & Quality** • Review and optimize F&B service logistics to ensure timely meal delivery, possibly by staggered scheduling and clear tracking systems.

	• Establish a centralized call system for housekeeping and support requests with performance tracking (TAT – turnaround time) dashboards. • Train security personnel in crowd management, with deployment adjusted during peak OPD hours; use token systems or barricades if necessary.
Key learnings	**Patient-Centric Care and Service Quality** • Gained a firsthand understanding of how patient room preparation, sanitation, and support services directly impact patient satisfaction and service quality. • Observed the importance of empathy, compassion, and ethical conduct in all interactions with patients and their families. **Interdepartmental Coordination** • Recognized the critical role of effective communication and coordination among nursing, GDAs, housekeeping, billing, pharmacy, and other departments to ensure efficient operations, especially in admission and discharge processes. • Learned that gaps in communication lead to operational delays and reduced patient satisfaction. **Application of Management Principles** • Practiced planning, delegation, and supervision through daily operational activities on different hospital floors. • Improved process tracking using checklists, structured workflows, and standard operating procedures (SOPs) to enhance quality and turnaround times.

	Importance of SOP Compliance • Understood that consistent adherence to SOPs in areas such as sanitation, linen management, and supply handling is vital for smooth hospital operations and audit preparedness. **Resource and Inventory Management** • Gained practical exposure to inventory management for non-clinical supplies, noting how digital systems can reduce supply shortages and improve operational efficiency. **Communication Skills** • Enhanced verbal and written communication abilities when interacting with patients, resolving service complaints, and working across departments. Found that clear, empathetic communication is key for patient comfort and teamwork. **Research, Data Analysis, and Project Execution** • Executed a patient satisfaction survey project: designed the survey, collected data, performed analysis, and presented actionable recommendations, integrating research and operational improvement skills. **Operational Challenges and Problem-Solving** • Faced real-world challenges including staffing shortages, process delays, SOP deviations, and communication gaps; learned problem-solving, proactive feedback gathering, and practical solution implementation