

SUMMER INTERNSHIP PROGRAM

at

Government of Rajasthan

(Super Specialty Hospital, RNT Medical College, Udaipur)

From 15TH May 2025 to 29th July 2025

A REPORT BY

Janhvi Prashant Patil

Master of Business Administration

(Hospital and Health Management)

Roll No - 1965

2024-26

under the Mentorship of

Dr. ARINDAM DAS

PROFESSOR



OFFICE OF THE SUPERINTENDENT
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Sr.no.MS_SSH/EST.SEC/F /2025/989

Date :- 29-07-2025

CERTIFICATE

This is to certify that **Ms. JANHVI PRASHANT PATIL** batch of HM-29 of IIHMR UNIVERSITY, Jaipur has worked with our organization for her summer internship from 15th May 2025 to 29th July 2025. I found her very sincere, honest and dedicated student.

I wish her a very bright future.

Date :- 29-07-2025

Dr. Vipin Mathur
Superintendent
Super Specialty Hospital
R.N.T. Med. College, Udaipur

IIHMR University Faculty Mentor Approval

This is to certify that **Ms. Janhvi Prashant Patil** of academic year 2024-26 **Institute of Health Management Research** has prepared a poster with respect to her summer internship held during May-July 2025.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 31/07/2025

A handwritten signature in blue ink that reads 'Arindam Das'.

Dr. Arindam Das

Professor

About the organisation

The Super Specialty Hospital at RNT Medical College consists of 360 beds. Initially, it was a part of the Maharana Bhupal Government Hospital (MBGH). Later, in 2021, it was officially declared and converted into a separate hospital. The hospital has various advanced departments such as Neurology, Cardiology, Urology, and Nephrology, and is equipped with modern ICUs and well-developed Operation Theatres, providing high-quality tertiary care services.

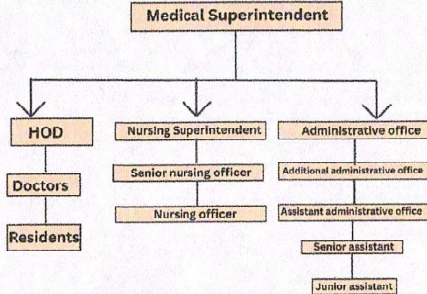
Vision

To excel in all spheres of health services with an aim to serve humanity

Mission

Scientific medical approach for serving Humanity by providing quality care to everyone

Organisation strcture



SWOT Analysis

Strengths

- Reputed government hospital.
- Well-equipped ICU and OT.
- Skilled staff and doctors.
- Good infrastructure.

Weaknesses

- Staff shortage.
- High patient load.
- Long queues and waiting time.
- Server issues affecting documentation and processes.

Opportunities

- Staff expansion.
- Digital system adoption.
- Shift-wise planning.

Threats

- Risk of medical errors during peak workload.
- Negative patient feedback impacting hospital image.
- Slow adoption of technology or digital systems.

Objective of Project

- To study the staffing pattern of nurses during the morning shift in the Urology Ward.
- To observe the daily activities of the morning shift nurses.
- To analyze weekly workload patterns and identify on which day(s) of the week the workload is higher compared to others.
- To assess the work satisfaction of nurses.
- To gather feedback from morning shift nurses regarding challenges, physical or mental stress.

Methodology

- Type of study - Descriptive and Observational study
- Before & After Study.
- Sampling Technique - Purposive Sampling Technique
- Sample - 2-3 nurses' average daily observed.
- Duration of study - 1st June 2025-15th July 2025
- Data Collection Tool- Excel, Google Form, Duty Register.



Findings

Figure 1. Before, workload on nurses (in %)

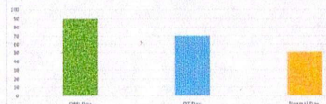


Figure 2. Before & After number of nurses (n = 15)

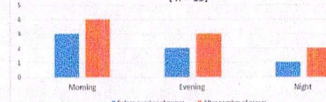
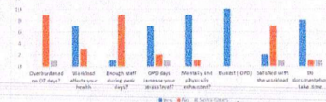


Figure 3. Workload survey on nurses (n=10)



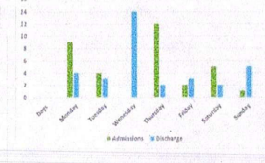
Limitations

- The study was restricted to only the Urology Ward of RNT, SSH, Udaipur.
- The duration of observation was limited, which may not reflect long-term patterns.

Recommendation

- Conduct weekly meetings to review workload and adjust staffing.
- Plan duty rosters based on patient load.
- Increase nurse staffing during peak workload days.
- Delegate routine non-clinical tasks to support staff.

Figure 4. Admission & Discharges n=66



Result

- Nurses had a higher workload on OPD days compared to OT and normal days.
- Only 2-3 nurses were there in the morning shift, which was not enough.
- After the study, 4 nurses & 1 reliever nurse were kept on the morning shift. This helped reduce workload and gave better care to patients.
- The survey showed that documentation work, OPD days, and insufficient staffing were major issues.



Major learnings

- Understood the structure and workflow of hospital systems.
- Improved teamwork, communication, and problem-solving skills.
- Got the deep knowledge about different government schemes like MAA Yojna, RGHS & PMJAY.
- Developed a practical understanding of hospital operations.

Usefulness of internship

- Learned how to implement a project in a government hospital setting, including planning, coordination, and execution.
- Improved understanding of healthcare workflows, patient care, and administrative duties.
- Built confidence to work in a healthcare setting effectively.
- Improved skills in workload analysis, staff planning, and time management.

Challenges faced

- Difficulty in coordinating with multiple departments for data collection.
- Language barrier while interacting with patients.
- Staff were hesitant to take on new roles after the single window system was introduced.

Suggestions of improvement

- Increase staff across all departments.
- Maintain proper hygiene and clean washrooms.
- Implement a Queue Management System (QMS).
- Appoint separate staff for documentation in each ward.
- Take steps to reduce patient waiting time.
- Ensure the admin office has proper and updated information about doctors, staff duties, and floor plans.

Practical Understanding

- It helped to understand the functioning of departments.
- It helped to understand MAA, RGHS & PMJAY Yojna.
- HRM helped to implement the project.

Theoretical Understanding

- In Essentials of hospital services, we learnt about the functioning of the departments.
- National Health Policies helped me know about the schemes.
- In HRM, I learned about resources.



Week-1

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur (Government of Rajasthan)

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 01

From: 15/May/25 to 17/May/25

Activity Done	• On the first day, I gained an understanding of how the health system functions. • Learned in detail about the hierarchy of the healthcare system. • Visited the hospital to identify the departments located on each floor. • Observed and assessed the hospital infrastructure.
Linking theory (Classroom learning) with practice at your organisation	• Essentials of Hospital Services helped me know how hospitals are designed.
Gaps identified on the working area.	• The cancer department has only a black dustbin • The 2nd floor of the hospital has garbage on the floor, not in the dustbin. • There's only one counter for sample collection.
Suggestions for improvement	• The cleanliness in charge should train the staff to keep all three dustbins in all departments properly (yellow, black, and blue) • Counters for sample collection should increase
Plan for the next week	To find the OPD waiting time for 25 patients.

Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Week-2

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 02

From: 19/May/25 to 24/May/25

Activity Done	• Observed RGHS Scheme and MAA Yojna Scheme counter operations, such as patient admissions, discharges, and TID generation. • Determined how many OPD, IPD, MAA, and RGHS counters there were at each location and evaluated the staffing levels. • Performed ward rounds in the surgery department to confirm admission, package booking, and discharge protocols, and look for process flaws. • Noted 25 patients' average waiting times at OPD, sample collection, X-ray/CT scan, USG, and MAA Yojna, RGHS services, ID registrations, and bed occupancy. • Examined the hospital's justifications for rejecting MAA Yojna claims.
Linking theory (Classroom learning) with practice at your organisation	• The subject National Health Programs provided a clear understanding of the Maa Yojana scheme.
Gaps identified on the working area.	• Lack of Jan Aadhaar Card: Patients eligible for the MAA Yojana scheme were unable to avail of benefits due to not having a Jan Aadhaar card, which is mandatory for scheme enrollment and service access. • Unresolved Queries Post-Discharge: Queries related to discharged patients under MAA Yojana were not resolved in a timely manner because: • The contact numbers provided by patients were often non-functional.

	• Patients took their reports home, leaving the hospital without the necessary documentation to respond to MAA Yojana queries. • Identified a process gap where MB Hospital requires patient relatives to handle discharge formalities at the MAA Yojana counter, unlike the Super Specialty Hospital, where staff manage the process, ensuring a smoother and more efficient discharge experience.
Suggestions for improvement	• Mandatory Jan Aadhaar Awareness • Pre-Discharge Documentation Check • Uniform Discharge Protocol • Centralized Helpdesk or Support Team • Training for Staff on Scheme Protocols
Plan for the next week	• Implement Single Window System • Introduce the Queue Management System

Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Week 3

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 03

From: 26/May/25 to 31/May/25

Activity Done	• Received initial task and information about replacing dot matrix printers with laser printers in the OPD and IPD of the Super Speciality Block. • Conducted a time study using a stopwatch to compare the efficiency of dot matrix and laser printers. • Prepared a detailed project report and concept note on “Implementing Laser Printers in OPD and IPD Counters. • Visited the DDC (Drug Distribution Centre) and sub-stores to understand the flow of drugs in the Super Speciality Hospital — from the sub-store to the DDC. • I accompanied the inspection team from Jaipur during their visit to assess the cleanliness and infrastructure of the hospital. I observed the inspection process closely
Linking theory (Classroom learning) with practice at your organisation	• The subject Essentials of Hospital Services helped me understand the functioning of the DDC and the hospital supply chain. • Communication Planning Management helped me create a proper, detailed project report. • I applied concepts from Research Methods to carry out studies for implementing laser printers
Gaps identified on the working area.	• There is no proper queue management system, which leads to patient crowding and delays. • The waiting time for patients has increased due to the use of dot matrix printers, which take approximately 14 seconds to print an OPD slip, compared to just 3 seconds with a laser printer. • There is a need for proper cleaning and maintenance of hospital toilets to ensure hygiene and patient satisfaction.

	At DDC counters, medication instructions are being given verbally, which increases the risk of medication errors due to miscommunication or misunderstanding by patients.
Suggestions for improvement	- Implement a Digital Queue Management System by displaying waiting numbers on digital screens and integrating SMS alerts for better crowd control. - Replace Dot Matrix Printers with Laser Printers. - Provide Written Medication Instructions at DDC Counters - Encourage the use of the 'Mera Aspatal Meri Zimedari' app, developed by the Super Speciality Hospital, to report toilet cleanliness issues.
Plan for the next week	- To spend 15 minutes every morning to check the MA Yojana data – specifically, to review how many TIDs have expired, identify the reasons for cancelled TIDs by discussing with MA Yojana operators, and check the number of patients currently admitted (on bed). - To prepare a detailed project report on implementing a Single Window System, including integrating laser printers at the same counters. - To develop a detailed project report on the workflow and implementation of a Queue Management System to improve patient flow and reduce wait times.

Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Week 4

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 04

From: 2/June/25 to 7/June/25

Activity Done	• Delivered a presentation on the Single Window System, including its implementation by replacing dot matrix printers with laser printers, and prepared a detailed note on the same. • Conducted a visit to the EEG lab, Day Care Unit for cancer treatment, and Blood Collection Department at the Super Specialty Hospital. • Attended a video conference with the Health Secretary of Rajasthan, presenting all completed and ongoing projects. • Collected data for Maa Yojana and RGHS patients from 1st to 31st May, including patient admissions and TIDs generated. • Initiated work on the Queue Management System (QMS): • I met with the contractor who supplied QMS materials (cables, displays, and token dispensers). • I gathered the doctor and resident contact details for SSO ID integration. • Created a structured Excel chart for room arrangements of doctors to improve organization. • Started working on the individual project.
Linking theory (Classroom learning) with practice at your organisation	• Essentials of Hospital Services helped me understand the roles of various departments, which was useful during visits to the EEG lab, Day Care, and Blood Collection units. • National Health Programmes gave me clarity on government schemes like Maa Yojana and RGHS, aiding in data collection and understanding their implementation.

	Human Resource Management taught me how to efficiently plan projects, using limited resources for maximum output, which was applied during QMS setup and team coordination.
Gaps identified on the working area.	- Incomplete Doctor Information at the Admin Office - Outdated Floor Plans—The hospital's floor plans are not updated according to the current layout, causing coordination issues. - Unresolved TIDs in Maa Yojana - Many TIDs remain pending due to unbooked packages, absconded cases, or other unresolved cases. - Patient load observed all over hospital.
Suggestions for improvement	- Create a centralized, regularly updated database of doctors' contact details. - For floor plans, conduct an audit and update the hospital's floor plans to match the current layout. - For unresolved TIDs, regularly monitor TIDs in Maa Yojana and ensure timely action on pending or unbooked cases.
Plan for the next week	- To spend 15 minutes every morning to check the MA Yojana data – specifically, to review how many TIDs have expired, identify the reasons for cancelled TIDs by discussing with MA Yojana operators, and check the number of patients currently admitted (on bed). - To implement the Queue Management System (QMS) in the next 15 days. - To explore different departments of the hospital.

Signature of the Student

Janhvi Prashant Patil

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Week 5

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 05

From: 9/June/25 to 14/June/25

Activity Done	• Issued and circulated the order for implementing the Single Window system and replacing dot matrix printers with laser printers. • Conducted a meeting with in-charges and operators (MA Yojna, OPD, IPD, RGHS) to brief them on the Single Window project. • Delivered a presentation explaining the workflow and implementation of the project. • Attended a video call with Hitachi MGRM Net regarding their app for digitizing staff and student attendance. • Prepared the minutes of the meeting held for the Single Window project. • Compiled day-wise data (1st to 31st May) on IPD and OPD patients, including breakdowns for MA Yojna, RGHS, and out-of-Rajasthan patients. • Actively participated in and closely observed the complete government process, from drafting the order to getting it signed by the Medical Superintendent and circulating it among the staff. Gained firsthand experience in how information and directives are officially floated within a government hospital during project implementation. • Collected the data from all over hospital departments of number of nurses in each shift
Linking theory (Classroom learning) with practice at your organisation	• Organizational Behavior helped me understand how to deal with people, interpret behaviors, and handle resistance during the project's implementation in a government hospital. • Human Resource Management guided me in planning the Single Window setup by efficiently allocating

	resources to counters, aiming for improved service delivery and higher output. • National Health Programmes gave me clarity on government schemes like Maa Yojana and RGHS, aiding in data collection.
Gaps identified on the working area.	• A key gap I observed during implementation was the mindset of some operators, who believed they were hired only for specific schemes like MA Yojna or OPD. This misconception led to resistance when asked to take on broader roles. In reality, their responsibilities cover overall hospital operations, and addressing this misunderstanding is crucial for the effective rollout of the Single Window system. • The deficiency of nurses was observed.
Suggestions for improvement	• To overcome resistance, staff can be motivated through clear communication, reinforcing that they are capable of handling multiple tasks. Assuring them that work will be distributed equally can help reduce hesitation and build confidence, ensuring smooth implementation of the single window project. • There should be a proper staffing pattern.
Plan for the next week	• Evaluated the working of the Single Window system and the replacement of dot matrix printers with laser printers to identify hurdles and suggest necessary improvements. • To implement the Queue Management System (QMS) in the next 15 days. • To start working on the individual project of the summer internship.

Signature of the Student

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Approved by the IIHMR University's Mentor

Week 6

Name of the Organisation: Super Specialty Hospital, RNTMC. Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 06

From: 16/June/25 to 21/June/25

Activity Done	• Designed a new prescription format for the hospital, as prescriptions will now be printed using A4-size printers under the Single Window and Laser Printer Implementation Project. The new format replaces the outdated version and aligns with the updated infrastructure and has been approved by the Medical Superintendent. • Gained a comprehensive understanding of the Set Project, an initiative by RNT Medical College. Observed its workflow, core functionalities, and witnessed its live operation to understand how the system performs in real-time • Conducted a follow-up on the implementation of laser printers, which are part of the Single Window System. Ensured progress tracking and verified compatibility with the new system. • Took a trial of the thermal printer installed at the counter for printing new stickers. Verified its performance, printing accuracy, and confirmed whether it meets the requirements for daily use. • Observed the nurse work in the Urology ward.
Linking theory (Classroom learning) with practice at your organisation	• The Principles of Management subject taught me how to effectively manage tasks and resources during the implementation phase of a project. It helped me understand the importance of planning, coordination, delegation, and monitoring to ensure smooth execution and timely completion of project activities.
Gaps identified on the working area.	• The earlier prescription was printed on low-quality, non-standard paper and contained only a limited amount of information. This format lacked consistency,

	clarity, and did not meet the standards required for professional medical documentation Some staff members are finding it difficult to use the Single Window System, especially when handling tasks from multiple sections on a single PC. While a few have adapted well due to proper training, others are facing challenges and may benefit from additional support and hands-on guidance.
Suggestions for improvement	- A new prescription format was designed to replace the outdated version. It is now printed on standard A4-size paper using laser printers, ensuring better print quality, professionalism, and adequate space for complete and structured medical information. - To address the challenges faced by some staff members, additional training sessions are being planned. These sessions aim to improve user comfort with multitasking across departments on a single PC, and to ensure smoother operation and wider system adoption
Plan for the next week	- Evaluated the working of the Single Window system and the replacement of dot matrix printers with laser printers to identify hurdles and suggest necessary improvements. - To implement the Queue Management System (QMS) - To start working on the individual project of the summer internship.

Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Week 7

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 07

From: 23/June/25 to 28/June/25

Activity Done	• Collected and verified the availability of Anti-Diphtheria Serum from the sub-store, warehouse, and MCDW. • Observed two referred cases under the SETU (RNT Medical College Initiative Project)—one from Trauma and one from Medicine, to understand the referral and treatment process. • Visited ICU, Nephrology, Urology, and Cancer wards to assess patient occupancy and ward utilization.
Linking theory (Classroom learning) with practice at your organisation	• The subject Essentials of Hospital Services helped me to understand how to effectively observe hospital wards, including aspects like patient admission patterns, bed occupancy.
Gaps identified on the working area.	• A significant gap observed in the SETU (RNT Medical College initiative project) was that the nursing staff was not properly tracking the patient movement. This led to a lack of clarity in patient handover and coordination, potentially affecting timely care and documentation within the referral process.
Suggestions for improvement	• it is suggested to maintain a patient movement register to accurately track referred cases. Nursing staff should receive brief training on the importance of timely and proper documentation during patient transfers. A simple checklist can be introduced to ensure each step in the referral process is followed systematically.
Plan for the next week	• Working on the individual project of summer internship.

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Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Week 8

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 08

From: 30/June/25 to 5/July/25

Activity Done	• Conducted meeting with OPD, IPD, and MAA Yojna in-charges to introduce the Single Window System. • Explained workflow changes and guided them on training junior staff and computer operators. • Performed cost analysis between dot matrix and thermal printers for prescription printing. • Identified locations for placing thermal printers to improve queue management and patient flow. • Collected data from each ward on bed strength and nurse availability (morning, evening, night shifts). • Observed and understood the daily duties of nurses in the Urology Ward. • Time motion study done for the nurses' workload.
Linking theory (Classroom learning) with practice at your organisation	• Principles of Management helped me understand the hospital's hierarchy and organizational structure • Organizational Behaviour helped me observe and understand the work behaviour and coordination among hospital staff
Gaps identified on the working area.	• In some wards, the number of nurses is insufficient as per the Indian Nursing Council (INC) staffing norms about bed strength. • There is a deficiency of nurses in the urology ward
Suggestions for improvement	• To ensure adequate nurse staffing in all wards by aligning the nurse-to-bed ratio with Indian Nursing Council (INC) norms. Regular audits and workforce planning should be conducted to maintain optimal staffing levels and ensure quality patient care.

Plan for the next week	Observation and Data Collection : • Nurse-to-patient ratio in each shift as per INC norms • Shift handover process – whether it’s properly done and documented • Availability and use of nursing care plans • Quality of patient assessment – including vitals, intake/output, medications, procedures, and doctor’s orders
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Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University’s Mentor

Week 9

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 09

From: 7/July/25 to 12/July/25

Activity Done	• Visited the CSSD (Central Sterile Supply Department) to observe and understand its functioning. • Monitored the Implementation of the Single Window System in the hospital. • Took daily follow-ups to ensure the Single Window System was functioning smoothly. • Observed the nurses' work patterns in the Urology Ward to study their weekly workload. • Collected and analysed data on patient admissions and nurse duty rosters from previous months to assess workload distribution and staffing patterns. • After all the observations, the changes in staffing pattern was done to see the difference before and after. • Conducted a feedback meeting with ward in-charges where the Single Window System was implemented to identify challenges post-implementation. • Attended the meeting where all Head and HODs from 6 Hospitals of RNT Medical College were present, the meeting was related to the status of the MAA Yojna Scheme of each hospital. I had collected data on the number of TIDs cancelled.
Linking theory (Classroom learning) with practice at your organisation	• The subject "Essentials of Hospital Services" helped me understand the basics of nursing care and ward management. This knowledge, gained through working on my project, which is Assessment of Nurse Staffing Patterns and Workload Analysis in the Urology Ward of RNT, Super Specialty Hospital. • Through this subject, I also gained knowledge about CSSD.

Gaps identified on the working area.	• Patients from rural areas face difficulty using western-style toilets, leading to hygiene issues and discomfort for both patients and staff. • Pest control is not properly done, and insects are present, affecting patient comfort and cleanliness. • The number of nurses available is insufficient in comparison to the number of patients admitted, leading to increased workload and stress among the nursing staff.
Suggestions for improvement	• Install Indian-style toilets or provide visual instructions for using Western toilets. • Ensure regular pest control and regularly monitor it. • Reliever nurses should be appointed during peak hours or high-patient-load periods to support regular staff and maintain quality patient care. • To increase the staff in the ward.
Plan for the next week	• To prepare a detailed report on the Queue Management System (QMS) implementation in the hospital. • Design guidance posters for patients on how to use the token dispenser to be installed. • Visit the Operation Theatre (OT) to observe its functioning and workflow. • Review the weekly duty roster of nurses to identify workload imbalance and make necessary changes to ensure quality patient care.

Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Week 10

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no: 1965

Stream: MBA (HM)

Week no: 10

From: 14/July/25 to 19/July/25

Activity Done	• Took follow-up of the Single Window System and identified issues faced during implementation. • Surveyed the computer operators to gather feedback after the implementation of the Single Window System. • Visited the Operation Theatre (OT) to observe its working and functioning. • Reviewed the surgical safety checklist used in the OT. • Observed the nursing workload and suggested improvements based on the findings. • A survey was done on nurses regarding their workload. • After the changes, the pattern and workload were observed.
Linking theory (Classroom learning) with practice at your organisation	• The subject “Essentials of Hospital Services” helped me understand the basics of the OT department in a hospital
Gaps identified on the working area.	• The newly implemented thermal printer was causing technical glitches, occasionally delaying the workflow. • Server-related issues were observed, leading to increased patient waiting time during peak hours. • Through a survey, it was observed that documentation, OPD day, and no staff were found during peak days.
Suggestions for improvement	• In case of technical glitches with the thermal printer, it should be directly connected or reported to the hospital server/IT room, so that the issue can be monitored and resolved from their end, and if not solved by them, then rely solely on the external vendor or supplier from whom the printer was purchased. • There should be a different staff for non-clinical work

Plan for the next week	NA
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Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor

Compiled Report

Name of the Organisation: Super Specialty Hospital, RNTMC, Udaipur

Area/ Department/ Project of Summer Internship Program: Hospital Management Intern

Name of the Student: Janhvi Prashant Patil

Roll no:1965

Stream: MBA-HM

Activity Done	• Gained orientation on the functioning and hierarchy of the healthcare system on the first day. • Identified and mapped the hospital departments across all floors. • Assessed overall hospital infrastructure. • Observed activities at RGHS and MAA Yojna counters, including admission, discharge, and TID generation. • Evaluated staffing levels and number of counters for OPD, IPD, MAA Yojna, and RGHS. • Conducted ward rounds in the Surgery Department and reviewed admission, package booking, and discharge procedures. • Recorded average waiting times for 25 patients across OPD, diagnostics, sample collection, ID registration, and bed occupancy. • Analyzed causes behind MAA Yojna claim rejections. • Started the project to replace dot matrix printers with laser printers in OPD and IPD. • Performed stopwatch-based time study comparing dot matrix and laser printer efficiency. • Drafted a concept note and detailed project report on “Implementing Laser Printers in OPD and IPD Counters.” • Visited the DDC and sub-stores to track the drug flow system within the hospital. • Accompanied the Jaipur inspection team during their hospital cleanliness and infrastructure visit.
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	• Delivered a project presentation on the Single Window System and printer implementation. • Visited EEG Lab, Day Care Unit (cancer), and Blood Collection Department. • Attended a video conference with the Rajasthan Health Secretary regarding ongoing projects. • Collected patient data (admissions and TIDs) under MAA Yojna and RGHS for 1st–31st May. • Coordinated with the contractor to initiate QMS (Queue Management System) work. • Collected SSO ID details for integration purposes. • Created an Excel chart for doctor room allocation. • Issued and circulated the official order to implement the Single Window System and laser printer setup. • Conducted briefing meetings with in-charges of MAA Yojna, OPD, IPD, and RGHS. • Explained workflow changes and guided staff training. • Attended a video call with Hitachi MGRM Net regarding staff/student attendance app. • Prepared meeting minutes for the Single Window System project. • Compiled IPD and OPD data (May 1–31), including MA Yojna, RGHS, and out-of-state patients. • Followed up on printer installation and system compatibility under the Single Window System. • Observed live operations of the SETU project by RNT Medical College. • Designed and implemented a new A4 prescription format, approved by the Medical Superintendent. • Tested the thermal printer for sticker printing and verified usability. • Verified Anti-Diphtheria Serum availability from sub-store, warehouse, and MCDW.
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	• Observed two referred SETU cases (from Trauma and Medicine departments). • Visited ICU, Nephrology, Urology, and Cancer wards for occupancy and utilization review. • Conducted cost comparison between dot matrix and thermal printers. • Identified thermal printer placement areas to streamline queue flow. • Implemented the Single Window System in the hospital. • Started a detailed assessment of nurse staffing patterns and workload in the Urology Ward. • Collected bed strength and nursing shift-wise data. • Conducted time-motion study of nurses' daily routines. • Tracked patient admissions and discharges daily in the Urology Ward. • Interacted with nurses regarding workload and staff shortages. • Observed nurses' responsibilities on both OT and OPD days. • Conducted a mental health workload impact survey for nurses. • Observed nurse-patient interactions for quality-of-care insights. • Analysed the daily nursing strength, especially during morning shifts. • Noted increased documentation as a factor in nursing workload. • Discussed nursing shortages with ward nursing in-charges. • After all the observations, the changes in staffing pattern was done to see the difference before and after • Visited CSSD to understand its functioning. • Conducted follow-ups to monitor Single Window System performance post-implementation.
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	• Held feedback meetings with ward in-charges to identify challenges post-implementation. • Attended an inter-hospital meeting with HODs regarding MAA Yojna status and TID cancellation data. • Surveyed computer operators on Single Window System feedback and usability. • Visited the Operation Theatre to observe surgical workflow. • Reviewed the surgical safety checklist used during procedures. • Suggested to the nursing supervisor the need for extra staff to compare changes in nurse workload.
Linking theory (Classroom learning) with practice at your organisation	• Essentials of Hospital Services helped me understand how a hospital works and the roles of different departments like DDC, OT, ICU, EEG Lab, and wards. This knowledge supported my nursing staff workload project during the internship. • National Health Programmes gave me a clear idea about government schemes like Maa Yojana and RGHS, which helped me collect and analyze scheme-related data. • Communication Planning and Management taught me how to write clear, detailed project reports and improved my documentation skills. • Research Methods helped me plan and carry out practical studies, such as evaluating the use of laser printers. • Human Resource Management taught me how to plan projects with limited resources and how to coordinate teams effectively, especially during QMS setup. • It also helped me allocate staff properly while working on the Single Window System for better service delivery. • Organizational Behaviour helped me understand how to deal with different types of people and manage resistance during changes in hospital processes.

	• Principles of Management taught me how to manage tasks and resources efficiently by planning, delegating, and monitoring work during the project
Gaps identified on the working area.	• There are separate counters for IPD and admissions, which increases patient movement and creates confusion. • Lack of a proper queue management system results in crowding and delays. • Dot matrix printers slow down OPD slip printing (14 seconds vs. 3 seconds with laser printers). • Hospital toilets are poorly maintained and require better cleaning for hygiene and patient satisfaction. • Verbal instructions at DDC counters increase the risk of medication errors due to miscommunication. • Doctor information at the Admin Office is incomplete, affecting coordination and communication. • The hospital's floor plans are outdated and not aligned with the current layout, causing operational confusion. • Many TIDs under Maa Yojana remain unresolved due to unbooked packages, absconded patients, or other issues. • Some operators believe they are only responsible for specific schemes, leading to resistance in taking broader roles. • The old prescription format used low-quality paper with limited and inconsistent medical information. • Some staff are struggling with the Single Window System due to multitasking demands; they require additional training and support. • Patient movement is not properly tracked by nursing staff in the SETU project, impacting timely handovers and coordination. • Rural patients face difficulty using Western-style toilets, resulting in discomfort and hygiene concerns.

	• Pest control is inadequately managed, with insects present in some areas, affecting cleanliness and patient comfort. • Nurse-to-patient ratio is low, leading to increased workload and stress among the nursing staff. • The newly implemented thermal printer has technical glitches that occasionally delay the workflow. • Server-related issues during peak hours are contributing to increased patient waiting times.
Suggestions for improvement	• Install a digital queue management system with display screens and SMS alert integration to streamline patient flow and reduce crowding. • Replace outdated dot matrix printers with faster, high-quality laser printers for improved efficiency in OPD/IPD operations. • Provide written medication instructions at DDC counters to minimize the risk of miscommunication and medication errors. • Encourage the use of the 'Mera Aspatal Meri Zimedari' app for reporting toilet cleanliness issues to enhance hygiene and patient satisfaction. • Develop and regularly update a centralized database of doctors' contact details to improve internal coordination. • Conduct a physical audit and update hospital floor plans to match the existing infrastructure layout. • Regularly monitor and resolve unbooked or pending TIDs under the Maa Yojana scheme to ensure timely service delivery. • Clearly communicate the broader responsibilities of operators beyond scheme-specific roles to support hospital-wide operations. • Use effective communication and equitable task distribution to reduce staff resistance and increase confidence during system changes.

	• Implement the newly designed A4-size prescription format with structured medical details for better documentation and clarity. • Organize additional hands-on training sessions to help staff adapt to multitasking on the Single Window System. • Introduce a patient movement register and checklist for referred cases; provide training to nursing staff on proper documentation practices. • Install Indian-style toilets or provide illustrated instructions for using Western toilets to accommodate all patients. • Schedule regular pest control activities and ensure their consistent monitoring to maintain a clean and safe environment. • Appoint reliever nurses during peak hours or high-patient-load periods to support regular nursing staff and maintain quality care. • In case of printer malfunction, ensure thermal printers are connected to the hospital server/IT room for quick diagnosis and resolution before relying on external vendors.
Key learnings	• I learned how a government hospital system works and how different departments are connected. • I understood the structure and hierarchy of the healthcare system. • I got hands-on experience working with different hospital schemes like MAA Yojna and RGHS. • I learned how to observe, collect, and analyze data (like patient waiting time, nurse availability, and TID status). • I gained confidence in communicating with staff, nurses, and higher officials. • I understood how to handle resistance from staff by using clear communication and training. • I learned how to prepare and present reports, concept notes, and meeting minutes professionally.

	• I was involved in planning and implementing the Single Window System, which helped improve patient services. • I learned the importance of good documentation, teamwork, and time management in hospital operations. • I saw how important proper training is for staff when new systems are introduced. • I observed how nurse shortages and heavy workload affect patient care and staff well-being. • I learned how to do time-motion studies and basic cost analysis. • I got to see how government orders are drafted, approved, and shared with staff. • I also learned about common hospital issues like outdated infrastructure, hygiene problems, and poor queue systems, and how small changes can help fix them. • I improved my Excel and observation skills while working on doctor room arrangements and staffing data. • I developed a practical understanding of project planning, monitoring, and follow-up in a real healthcare setting.
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Signature of the Student

Janhvi Prashant Patil

Approved by the IIHMR University's Mentor