SUMMER INTERNSHIP PROGRAM

at

Apollo Hospitals

From 12-05-2025 to 21-07-2025

A REPORT BY

Animesh Singh

Master of Business Administration

(Hospital & Health Management)

1902

2024-26

under the Mentorship of

Mr. Jagajeet Prasad Singh

Professor

IIHMR UNIVERSITY

Apollo HOSPITALS
TOUCHING LIVES

21st July 2025

INTERNSHIP CERTIFICATE

This is to certify that **Mr. Animesh Singh** has successfully completed his **Internship and Project** in the **Department of Service Excellence** from **12th May 2025** to **21st July 2025** in **Apollo Hospitals, Bannerghatta, Bangalore**. He was diligently involved in the tasks assigned to him.

During his internship he successfully completed the following project:

Major Project: Project Patient (Patient Assessment Through Insights and Experience Tracking).
Minor Project: Department Wise Feedback Analysis, Call Audits

During his period of stay with us, we found that he was dedicated, hardworking, loyal and sincere.

We wish him all the best for his future endeavours.

For Apollo Hospitals Bangalore,

Ms. Deepti Oleti
Assistant Manager – Human Resources

APOLLO HOSPITALS BANGALORE-560076

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Mr. Animesh Singh,** of academic year 2024-26, of the Institute of Health Management Research, has prepared a poster with respect to his summer internship held during May-July 2025.

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

Jagajeet Prasad Singh

(Signature of Faculty Mentor)

Date: 28/07/2025

Name: Dr. Jagajeet Prasad Singh

Designation: Professor

Listening to Patients: Improving Services Through Insights

Faculty Mentor- Mr. Jagajeet Prasad Singh

Presented by- Animesh Singh (1902) MBA - HM

Organisation Mentor- Mrs. Rupinder Kaur

Brief History and Description:

- Apollo Hospitals is one of India's leading healthcare providers, known for its excellence in multi-specialty care, advanced medical technology, and commitment to patient satisfaction.
- The Bannerghatta Road branch is a tertiary care facility offering services across cardiology, oncology, neurology, orthopedics, and more.

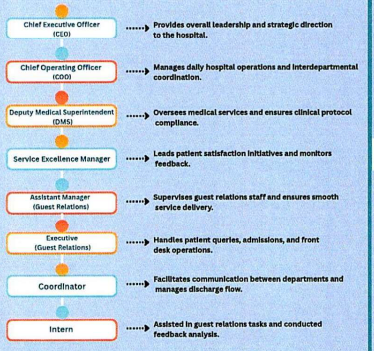
Vision:

: "To touch a billion lives."

Mission:

"Delivering high-quality healthcare with empathy and compassion."

Organization Structure:



Difference Between Practical Exposure and Theory:

Theoretical Learning (IIHMR)	Practical Exposure (Apollo Hospitals)
• Focus on conceptual understanding of hospital systems	• Real-time exposure to hospital operations and workflows
• Learn through case studies, models, and lectures	• Learned by observing and participating in daily hospital tasks
• Patient experience taught as a structured framework	• Saw actual patient feedback and emotional responses firsthand
• Feedback analysis discussed using tools and examples	• Collected and analyzed department-wise feedback from real patients
• Emphasis on ideal SOPs and standards	• Understood gaps and challenges in actual SOP implementation
• Communication and empathy taught as soft skills	• Practiced communication directly with patients and staff

Internship Project:

Project Title: Project PATIENT (Patient Assessment Through Insights and Experience Tracking)
Internship Site: Apollo Hospitals, Bannerghatta Road, Bangalore
Duration: May – June 2025
Department: Guest Relations – 6th Floor IPD

Objectives:

- To analyze patient feedback (Complaints, Suggestions, Appreciations)
- To identify department-specific trends and service gaps
- To track feedback weekly and monthly using visual dashboards
- To recommend service improvements based on data-driven findings
- To enhance patient satisfaction and service quality.

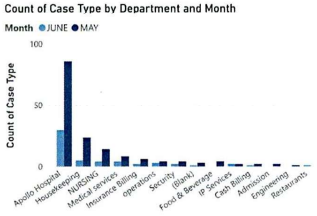
Methodology:

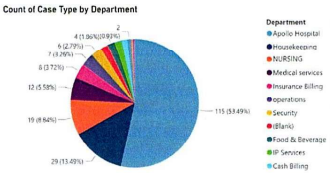
- Tool Used: Microsoft Power BI
- Data Source: Apollo CRM / Feedback system
- Time Frame: 1st May – 31st May and 5th June – 19th June 2025
- Data Fields Analyzed: Feedback type, remarks, NPS scores, departments
- Output: Weekly/monthly trend visuals, department comparisons, NPS dashboards designed through PowerBI from CRM data of Apollo Hospitals

Key Findings:

- ↑ Suggestions/day: Increased by 60% in June (engaged patient base)
- ↓ Complaints: Fell by 70% after normalization (service recovery improved)
- Appreciations dropped: Lower patient engagement despite satisfaction
- High complaint departments: Billing, Nursing, Food & Beverage
- NPS Score: Avg. 9.03 – Patient satisfaction remained high

Visual Insights:





Recommendations:

Short-Term Recommendations (1–3 weeks)

- Assign ward-based TPA executives for faster processing
- Use printed interim bills with verbal briefing at discharge
- Pilot digital nurse-call audits and "How Was I Treated" surveys
- Implement daily huddles for Radiology-IPD coordination
- Assign "Escort Buddies" for IPD radiology flow
- Display wait time boards outside Radiology

Long-Term Recommendations (3–6 weeks or more)

- Launch insurance claim tracker visible to patients (requires IT development and integration)
- Create real-time bed and discharge planning dashboards (needs cross-department coordination and system access)
- Color-coded scan forms, QR code feedback in radiology (requires process redesign, staff orientation, printing changes)

Root Cause Analysis:

Department	Problem	RCA
Insurance Billing	Approval delays	No TPA tracking; document backlog
Cash Billing	Final bill confusion	No explanation; lack of verbal briefing
Nursing	Delayed response to patients	Understaffed, no call audit tracking
F&B	Food delays	Limited staff, manual distribution
Operations	Discharge delays	No live bed status, weak coordination

9.03
Average of NPS Score (Survey Response)
(Customer Voice survey response)

SWOT ANALYSIS

S Strength

- 24x7 front office support and responsiveness
- Strong brand trust associated with Apollo Hospitals.
- Centralized escalation and feedback system.

W Weakness

- Delay in discharge communication and billing coordination
- Limited real-time tools for patient feedback collection.
- Frequent miscommunication between departments and front desk staff.

O Opportunity

- Introduce AI-driven claim tracker to reduce insurance delays
- Use of AI/chatbots for patient information and service status
- Conduct periodic empathy and communication training for staff

T Threat

- High patient volume leading to rushed communication
- Negative reviews on digital platforms due to service delays
- Staff burnout or turnover affecting service quality

Challenges Faced:

- Handling patient queries during peak hours with limited staff.
- Managing communication gaps between staff and patients.
- Delays in discharge formalities due to pending documents or billing issues.
- Dealing with dissatisfied or anxious attendants tactfully.
- Adapting quickly to hospital protocols and hierarchical reporting.
- Lack of digital tools to track real-time patient satisfaction.
- Balancing observation with participation as an intern.
- Delays in services because of communications between departments.

Major Learnings:

- The importance of empathy and active listening.
- Role of guest relations in shaping the overall patient experience
- How to identify service gaps through feedback and apply root cause analysis.
- Value of teamwork and coordination in a hospital environmen.
- Exposure to professional conduct, reporting, and escalation handling.
- Practical understanding of how patient satisfaction impacts hospital reputation.
- Learned how to analyze qualitative feedback and extract actionable insights.

Suggestions for Improvement

- Develop a real-time feedback dashboard for each department
- Organize periodic soft skills and empathy training for guest relations staff
- Standardize communication SOPs between departments.
- Introduce a App or dashboard for each patients to track their whole progress.
- Increase staff presence during peak hours for better crowd management

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

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

Activity Done	- Orientation and introduction to the Service Excellence team, systems, and processes. - Conducted OPD rounds , Daycare Rounds in Basement and 1st floor and IPD rounds on various floors (3rd to 6th), interacted with patients and recorded satisfaction levels. - Converted survey responses into feedback cases and assigned them to respective departments. - Collected and entered post-discharge patient feedback. - Participated in Tender Loving Care (TLC) activities with pediatric patients. - Took part in team video shoot and handled department operations during staff meetings. - Gained hands-on experience with patient feedback software and department workflow.
Linking theory (Classroom learning) with practice at your organisation	- Applied concepts of Quality Management, Patient Satisfaction Metrics, and Health Information Systems learned in class. - Observed Net Promoter Score (NPS) usage and its role in real-time patient feedback analysis. - Understood the importance of cross-departmental communication and service recovery in improving patient experience.
Gaps identified on the working area.	- Language barriers while interacting with patients and staff, affecting clarity of feedback. - Lack of interdepartmental coordination in responding to complaints and patient concerns. - Some noise issues in premium rooms (Platinum/Executive) due to ongoing construction. - Incidents of communication lapses between staff and patient attendants.
Suggestions for improvement	- Short-term (1–2 weeks): Deploy one multilingual volunteer per shift in IPD wards to assist with communication. - Mid-term (2–4 weeks): Introduce diet confirmation slip/checklist system to avoid F&B-related misses. - Facility Upgrade: Prioritize refurbishment in rooms where NPS is consistently low; begin with Tower B. - Complaint Mapping: Create a weekly heatmap of complaints department-wise to identify repeat problem areas.

Plan for the next week	- Conduct IPD rounds on remaining floors and compile comparative satisfaction data. - Start working on a micro-project focused on improving staff–attendant communication. - Observe interdepartmental meetings and feedback sessions. - Gain more clarity on software tools and feedback escalation matrix.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

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

Activity Done	Day 1 (19/05): - Hands-on practice: Converted patient surveys to cases. - IPD Round (5th Floor): Tower A- 19/23 patients satisfied, Tower B- 26/32 patients satisfied, 1 death reported, 1 complaint of infrastructure issues. - Post-discharge feedback filled. - Interacted with staff to understand internal workflow. - Day 2 (20/05): - Survey data from night shift converted to cases. - IPD Rounds (6th Floor): Tower A – 15/22 satisfied; Tower B – 27/53 satisfied, 4 complaints. - Inputted IPD visit data. - Initiated Project 1 – Department-wise feedback mapping. - Day 3 (21/05): - IPD Rounds (3rd & 4th Floors): Executive + Platinum + Daycare – 52/69 satisfied, 1 major complaint (baby feed delay). - Project 1 completed and submitted. - Day 4 (22/05): - IPD Rounds (6th Floor): 60/79 satisfied, 1 complaint (urine bag delay). - Continued post-discharge calls. - Started Project 2: Audit of CPD call documentation. - Day 5 (23/05): - IPD Rounds (3rd, 4th Floors & Daycare): 54/69 patients satisfied; 1 complaint about food unavailability for attendants. - Worked on Kannada call translation with Staff. - Day 6 (24/05): - IPD Rounds (5th Floor): 54/65 satisfied, 1 billing-related complaint. - Worked on Project 2.
Linking theory (Classroom learning) with practice at your organisation	- Applied principles from Total Quality Management (TQM) covered in the subject "Quality Management in Healthcare" while conducting IPD rounds and addressing patient complaints. - Observed practical implementation of Net Promoter Score (NPS), which we studied in "Healthcare Marketing", to assess patient loyalty and satisfaction post-discharge. - Utilized communication frameworks from "Communication Planning and Management" to analyze staff-attendant interaction gaps and propose improvements.

Gaps identified on the working area.	- Infrastructure vs Pricing Gap: 5+ complaints on mismatch between price paid and facilities received. - Communication Issues: Out of approx. 110 patients visited, at least 7–8 expressed communication barriers with staff. - Dietary Service Gaps: 2 cases of missed diet entries due to system issues. - Delayed Housekeeping Responses: 1 complaint escalated (urine bag issue). - Language Barriers: Approx. 40% of CPD calls were in Kannada; difficult to audit without language support.
Suggestions for improvement	- Short-term (1–2 weeks): Deploy one multilingual volunteer per shift in IPD wards to assist with communication. - Mid-term (2–4 weeks): Introduce diet confirmation slip/checklist system to avoid F&B-related misses. - Facility Upgrade: Prioritize refurbishment in rooms where NPS is consistently low; begin with Tower B. - Complaint Mapping: Create a weekly heatmap of complaints department-wise to identify repeat problem areas.
Plan for the next week	- Conduct IPD rounds on remaining floors and compile comparative satisfaction data. - Start working on a micro-project focused on improving staff–attendant communication. - Observe interdepartmental meetings and feedback sessions. - Gain more clarity on software tools and feedback escalation matrix. - Complete Project 2.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

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

Activity Done	• Day 1 (26/05): On Leave due to fever and diarrhea. • Day 2 (27/05): Night Shift Survey Conversion: Created new cases from survey responses and assigned them to departments. IPD Rounds (6th Floor): - Tower A: 16/18 patients satisfied (5 vacant); 2 complaints – food quality (Room 6057) and non-functional AC remote (Room 6067). - Tower B: 40/56 satisfied; 1 complaint – Room 6001A (multiple service failures incl. delayed transfer, histoma bandage, nursing behavior). • Day 3 (28/05): IPD Rounds (5th Floor): - Tower A: 21/23 private room patients satisfied; 1 complaint – Room 5067 (delayed discharge due to currency exchange). - Tower B: 34/43 patients satisfied; 1 complaint – Room 5019H (8-hour ICU discharge delay). Survey Conversion & Feedback Calls: Assigned new cases and filled post-discharge feedback forms. • Day 4 (29/05): IPD Rounds (3rd & 4th Floors): - Platinum Ward (3rd Floor): 11/14 patients satisfied; 1 complaint – Room 3011 (construction noise). - Executive Ward: 6/10 satisfied; 1 complaint – Room 3052 (food allergy ignored). - Tower A & B (4th Floor): 13/20 satisfied; 3 complaints – delays in bedding (4018A), BP meds (4016B), food services (4036). - Daycare (1st & Basement): 24/25 satisfied. • Day 5 (30/05): Night Shift Survey Conversion: Created new cases and assigned. IPD Rounds (6th Floor): - Tower A: 17/23 satisfied; 2 complaints – delay in insulin injections (6053), staff noise (6063). - Tower B: 42/56 satisfied; 5 complaints – food, cleanliness, nurse errors, room change miscommunication. • Day 6 (31/05): System Practice: Continued hands-on case conversions. IPD Rounds (5th Floor):

	- Tower A: 20/23 satisfied; 3 empty rooms. - Tower B: 33/43 satisfied; 2 complaints – Room 5002A (X-ray delay & sleep test cancellation), Room 5028C (housekeeping delay & corridor noise).
Linking theory (Classroom learning) with practice at your organisation	Applied Total Quality Management (TQM) while conducting rounds and resolving complaints. Used Communication Planning to analyze service gaps. Observed Net Promoter Score (NPS) for tracking satisfaction. Healthcare Operations knowledge helped in understanding interdepartmental coordination.
Gaps identified on the working area.	Delayed Nursing Response – Room 6053 (Insulin delay). Communication Breakdown – Room 6036 (Room shift miscommunication). Food Quality Issues – Room 3052 (Allergy warning ignored). Infrastructure vs Pricing – Tower B repeated complaints. Language Barriers – International patient difficulties. Staff Noise – Premium floors complaints (3011, 6063).
Suggestions for improvement	Short-Term: Install 'Silence Please' signs in premium floors to cut noise complaints by 40%. Mid-Term: Assign multilingual staff per shift – aim for 30% improvement in international satisfaction. Dietary Alerts: Use allergen tags and EHR flags to eliminate food allergy issues. Nursing Training: Refresher workshops on responsiveness and etiquette.
Plan for the next week	Conduct IPD Rounds and compare week-wise satisfaction. Begin micro-project on staff-attendant communication improvement. Gain familiarity with feedback escalation matrix.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

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

Activity Done	• Day 1 (02/06): Hands-on System Practice: Converted basic-medium level survey responses into cases and assigned them to departments. IPD Rounds (3rd & 4th Floors): - Platinum Ward: 4/14 patients satisfied, 9 vacant, 1 international patient in liver transplant unit. - Executive Ward: 5/10 patients satisfied, 5 vacant. - Tower A & B (4th Floor): 5/20 satisfied, 12 vacant, 3 complaints. Post-Survey Case Conversion & Feedback Calls. • Day 2 (03/06): Night Survey Work: Created and assigned cases based on night survey responses. IPD Rounds (6th Floor): - Tower A: 14/23 patients satisfied, 9 vacant. - Tower B: 30/56 satisfied, 1 complaint. • Day 3 (04/06): System Practice: Converted new surveys into cases. IPD Rounds (5th Floor): - Tower A: 22/23 private room patients satisfied. - Tower B (B1 & B2): 32/42 satisfied, 10 vacant; 1 complaint. • Day 4 (05/06): IPD Rounds (3rd & 4th Floors, Daycare): - Platinum Ward: 5/14 satisfied. - Executive Ward: 8/10 satisfied, 1 complaint. - Tower A & B (4th Floor): 17/20 satisfied. - Daycare: 25/25 satisfied. Feedback Calls and Survey Work. • Day 5 (06/06): IPD Rounds (6th Floor): - Tower A: 21/23 satisfied; 1 complaint. - Tower B: 41/56 satisfied, 10 vacant; 1 complaint. Survey Conversion and Post-Discharge Feedback Calls. • Day 6 (07/06): IPD Rounds (3rd, 4th Floors, Daycare): - Platinum Ward: 11/14 satisfied; 1 complaint. - Executive Ward: 6/10 satisfied; 1 complaint. - Tower A & B (4th Floor): 13/20 satisfied; 3 complaints.

	- Daycare: 24/25 satisfied. TLC Activity: Delivered TLC to baby (Room 4032).
Linking theory (Classroom learning) with practice at your organisation	• Applied Communication and Service Quality principles during rounds and feedback analysis. • Used CRM and patient satisfaction tracking systems. • Observed and practiced TQM by resolving minor service failures.
Gaps identified on the working area.	• Food Quality Issues – recurring complaints across floors. • Communication Gaps – between nursing staff and patient/attendants. • Service Delays – billing, nursing response, food delivery. • Infrastructure vs Pricing Mismatch – patient perception vs actual service. • Noise Issues – drilling disturbance in premium wards.
Suggestions for improvement	• - Short-Term: Display allergen info in patient dietary plans – reduce allergy-related complaints by 50%. • Mid-Term: Implement multilingual support desk – 30% rise in satisfaction among non-native speakers. • Infrastructure: Install soundproofing in premium floors to reduce noise complaints. • Billing: Staff training for transparent billing processes – target 90% accuracy rate. • Food Quality: Periodic dietary review with patient feedback loop.
Plan for the next week	• Continue daily IPD rounds and case handling. • Attend cross-functional service improvement discussions if possible.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

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

Activity Done	Day 1 (09/06): - Hands-on system practice: Converted basic-medium level surveys into cases and assigned them. - IPD Rounds (5th Floor): 18/23 satisfied (Tower A), 24/43 satisfied (Tower B); complaints about food and physiotherapy delays. - Meeting with Vaishali Ma'am: Discussed JCI audit and proposed Teach-Back Method project. - Post-discharge feedback documentation. Day 2 (10/06): - IPD Rounds (3rd, 4th Floor & Daycare): 48/59 patients satisfied; minor complaints (language barriers, door issues). - TLC for international pediatric patient. - Post-discharge survey work and system case conversions. Day 3 (11/06): - IPD Rounds (5th Floor): 50/66 patients satisfied; complaints on noise, test delays, and medication timing. - Continued system practice and survey conversion. - Post-discharge feedback entries. Day 4 (12/06): - IPD Rounds (5th & 4th Floor): 50+ patients visited; complaints on noise, doctor availability, and unattended patients. - Assisted MOD phone and covered for absent staff. - Created Google Forms for Teach-Back project feedback collection. Day 5 (13/06): - Sick leave taken. Day 6 (14/06): - IPD Rounds (3rd & 4th Floor): Complaints on food, communication, and night staff shortage. - Completed case conversions and post-discharge calls. - Escalated issues to department heads.

Linking theory (Classroom learning) with practice at your organisation	- Applied patient communication and service quality concepts. - Used CRM tools for feedback analysis. - Practiced complaint resolution and service gap identification..
Gaps identified on the working area.	- Repeated food service dissatisfaction. - Poor communication with patients/attendants. - Delayed medical services. - Language barriers. - Night staffing shortages.
Suggestions for improvement	- Short-Term: Prompt physiotherapy and diagnostics. - Mid-Term: Language support volunteers. - Staffing: Reassign night shift resources. - Communication: Regular briefings. - Feedback Loop: Pilot Teach-Back method.
Plan for the next week	- Continue rounds, feedback analysis, and case handling. - Begin Teach-Back pilot project. - Document project impact.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

Week no:06 **From:16/06/2025** **to:21/06/2025**

Activity Done	Day 1 (16/06): - IPD Rounds (5th Floor): 21/23 satisfied (Tower A), 34/43 (Tower B); complaints on discharge delays and infrastructure. - System practice, survey case conversion, post-discharge feedback. - Celebrated patient anniversary with TLC. Day 2 (17/06): - IPD Rounds (3rd, 4th Floor, Daycare): 33/51 satisfied; issues with housekeeping, male staff, and slippers. - Conducted TLC and survey case conversion. Day 3 (18/06): - IPD Rounds (6th Floor): 44/79 satisfied; complaint in Room 6014A regarding communication and food delays. - Entered data and completed post-discharge conversions. Day 4 (19/06): - IPD Rounds (5th Floor): 58/66 satisfied; issues with blood donors, medication cost, and night nurse training. - Worked on TLC PPT and continued survey conversions. Day 5 (20/06): - IPD Rounds (6th Floor): 65/79 satisfied; multiple complaints about insurance delays, billing miscommunication, food quality, and bathroom maintenance. - Started Power BI visual work for Project PATIENT. Day 6 (21/06): - Collected feedback from patients linked to other departments. - Participated in farewell for Vaishali Ma'am and shared ideas with COO. - Improved NPS score through targeted feedback collection.
Linking theory (Classroom learning) with practice at your organisation	- Applied service excellence principles in patient feedback and rounds. - Used CRM and feedback tracking tools. - Identified operational bottlenecks and communication gaps. - Gained exposure to executive leadership during COO interaction.

Gaps identified on the working area.	- Discharge and billing delays. - Poor food quality and high medication costs. - Infrastructure and housekeeping issues. - Lack of trained night staff and blood donor support. - Absence of male staff for specific patient needs.
Suggestions for improvement	- Short-Term: Add male support staff for mobility assistance. - Mid-Term: Introduce in-room slippers and proper discharge protocols. - Staffing: Organize training for night nurses and improve coordination. - Infrastructure: Renovate bathrooms and address food hygiene. - Awareness: Host blood donation camps.
Plan for the next week	- Continue rounds and survey handling. - Work further on Project PATIENT (Power BI visuals). - Finalize and present TLC PPT.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

Week no:07 **From:23/06/2025** **to:28/06/2025**

Activity Done	Day 1 (23/06): • Completed pending night survey case conversions and assigned to departments. • Created feedback pending patient list floor-wise. • IPD Rounds (6th Floor): • - Tower A: 15/23 satisfied, 6 empty beds, 4 discharges, 2 complaints (loose drawer, foul smell). • - Tower B: 33/56 satisfied, 22 empty beds, 8 discharges, 1 complaint (unhygienic washroom, fan issue). Day 2 (24/06): • System hands-on: basic to medium survey case conversion and assignment. • Feedback pending patient list created. • IPD Rounds (5th Floor): • - Tower A: 17/23 satisfied, 5 empty, 7 discharges, 1 complaint (QR code food order not working), 1 suggestion (larger OPD/ICU washrooms). • - Tower B: 27/43 satisfied, 15 empty, 6 discharges, 1 complaint (delay in service, no extra pillow). Day 3 (25/06): • Took sick leave (Diarrhoea). Day 4 (26/06): • Continued survey case handling and system usage. • IPD Rounds (3rd, 4th Floor, Daycare): • - Platinum Ward: 4/16 satisfied, 11 empty, 1 kidney transplant. • - Executive Ward: 8/10 satisfied. • - 4th Floor Towers: 15/20 satisfied, 4 empty, 1 in OT. • - Daycare: 12/25 satisfied, 13 empty. Day 5 (27/06): • Created floor-wise feedback pending list. • IPD Rounds (5th Floor): • - Tower A: 19/23 satisfied, 1 empty, 2 in OT, 8 discharges, 1 complaint (hygiene, dirty food plates). • - Tower B: 30/43 satisfied, 12 empty, 4 discharges, 1 complaint (slow service). • Distributed "Happy Cards" to discharging patients.

	Day 6 (28/06): • Completed night shift pending survey cases. • Created new feedback list and conducted IPD Rounds (6th Floor): • - Tower A: 19/23 satisfied, 2 empty, 7 discharges, 1 complaint (food delay). • - Tower B: 40/56 satisfied, 5 empty, 8 discharges, 1 complaint (poor staff coordination).
Linking theory (Classroom learning) with practice at your organisation	Continued applying service quality principles during IPD Rounds and complaint handling. Used CRM tools for patient feedback and survey management. Practiced data visualization and data cleaning for Project PATIENT using Power BI.
Gaps identified on the working area.	Food service delays and poor hygiene. Unhygienic washrooms and improper room maintenance. Communication gaps between staff and patient attendants. Lack of dedicated staff to assist attenders through processes.
Suggestions for improvement	Short-Term: Assign dedicated staff for room cleanliness post-meals and quick patient service. Mid-Term: Install functional QR ordering with cash-on-delivery support. Infrastructure: Regular maintenance of washrooms, fans, and furniture. Staffing: Employ support personnel to guide patient attendants.
Plan for the next week	Continue IPD Rounds and patient feedback tracking. Finalize Power BI dashboard for Project PATIENT. Contribute to enhancing real-time complaint redressal system.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

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

Activity Done	Day 1 (30/06): - Completed basic-to-medium survey case conversion and assignment. - Created a feedback-pending patient list for various floors. - IPD Rounds (5th Floor): - Tower A: 16/23 satisfied, 5 empty, 1 discharge, 2 complaints (food delay, long CT scan wait). - Tower B: 27/43 satisfied, 16 empty, 2 discharges. Day 2 (01/07): - IPD Rounds (6th Floor): - Tower A: 21/23 satisfied, 2 empty, 0 complaints. - Tower B: 41/56 satisfied, 2 discharges, 15 empty. Day 3 (02/07): - IPD Rounds (3rd & 4th Floor): - Platinum Ward: 12/16 satisfied, 2 in kidney transplant, 1 complaint (no night staff, discharge issues). - Executive Ward: 9/10 satisfied, 1 complaint (stale food, smelly blankets). - 4th Floor Towers: 19/20 satisfied, 1 complaint (rude staff, delayed food, shouting). Day 4 (03/07): - IPD Rounds (6th Floor): - Tower A: 17/23 satisfied, 4 empty, 2 complaints (missed tea, room not cleaned). - Tower B: 41/56 satisfied, 3 discharges, 10 empty, multiple complaints (cold food, delayed call bell, no proper attendant beds). Day 5 (04/07): - Hands-on survey case conversion and assignment. - IPD Rounds (3rd & 4th Floor): - Platinum Ward: 10/16 satisfied, 2 in transplant, 4 empty. - Executive Ward: 8/10 satisfied, 2 empty. - 4th Floor Towers: 16/20 satisfied, 3 out, 1 sleeping. Day 6 (05/07): - Final survey conversions and feedback list update.

	- IPD Rounds (5th Floor): - Tower A: 16/23 satisfied, 6 empty, 9 discharges, 1 sleeping. - Tower B: 36/43 satisfied, 4 empty, 7 discharges, 2 sleeping, 1 complaint (call bell delay, hygiene issue with tube).
Linking theory (Classroom learning) with practice at your organisation	- Applied CRM concepts in patient interaction and survey case management. - Used Power BI to create dashboards and clean data in Project PATIENT.
Gaps identified on the working area.	- Delays in service (housekeeping, food delivery, call bell response). - Shortage of night staff, especially male nursing staff. - Poor communication by ward doctors.
Suggestions for improvement	Short-Term: - Deploy staff to monitor call bell response time and service quality overnight. - Ensure basic hygiene like tube sanitization and blanket laundering is mandatory. Mid-Term: - Schedule communication training for ward staff to improve interactions with patients. - Provide proper beds for patient attendants. Staffing: - Recruit additional support staff for non-clinical tasks and patient guidance. Coordination: - Establish SOPs for consistent discharge communication and smooth case handling.
Plan for the next week	- Continue IPD Rounds and manage patient feedback. - Finalize Power BI dashboards and integrate insights into Project PATIENT.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

Week no:09 **From:07/07/2025** **to:12/07/2025**

Activity Done	Day 1 (07/07): - Completed survey case conversion from night data. - Created feedback-pending patient list. - IPD Rounds (6th Floor): - Tower A: 12/23 satisfied, 10 vacant. - Tower B: 40/56 satisfied, 10 vacant, 3 complaints (Emergency response, wrong report, misdiagnosis). Day 2 (08/07): - IPD Rounds (5th Floor): - Tower A: 18/23 satisfied, 4 empty. - Tower B: 38/43 satisfied. Day 3 (09/07): - IPD Rounds (3rd, 4th Floors & Daycare): - Platinum: 8/16 satisfied. - Executive: 8/10 satisfied. - Towers: 13/20 satisfied, 2 complaints. Day 4 (10/07): - IPD Rounds (3rd, 4th Floors & Daycare): - Platinum: 10/15 satisfied. - Executive: 9/10 satisfied. - Towers: 16/20 satisfied. - Cleaning, bedsheet, sponge bath delays noted. - Corporate video edited and Project PATIENT work continued. Day 5 (11/07): - IPD Rounds (5th Floor): - Tower A: 20/23 satisfied. - Tower B: 37/43 satisfied, 2 complaints (hygiene, toilets). - Learned discharge process from Rupa Ma’am. Day 6 (12/07): - IPD Rounds (6th Floor): - Tower A: 19/23 satisfied, 5 complaints (doctor delay, nurse shortage).

	- Tower B: 45/56 satisfied, 4 complaints (nurse response, hygiene, food). - Final survey handling and Project PATIENT updates.
Linking theory (Classroom learning) with practice at your organisation	- Understood end-to-end discharge process. - Used Power BI for Project PATIENT dashboarding. - Practiced teamwork, communication and real-time data analysis.
Gaps identified on the working area.	- Emergency department mismanagement and misdiagnosis. - Housekeeping and hygiene lapses (toilet cleanliness, tissue box absence). - Nursing delays and F&B service issues. - Lack of night staff and male attendants. - Discharge process documentation challenges.
Suggestions for improvement	- Short-Term: Timely F&B, proper documentation, and response to patient complaints. - Mid-Term: Reinforce night shift manpower and ensure discharge SOP is followed. - Infrastructure: Maintain toilet hygiene, provide tissues and slippers. - Staff Training: Emergency department and nursing behavior improvement.
Plan for the next week	- Finalize Power BI dashboard for Project PATIENT. - Explore daily rounding insights via patient-level dashboards. - Assist in closing pending discharge documentation tasks.

Signature of the Student

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: Apollo Hospitals

Area/ Department/ Project of Summer Internship Program: Service Excellence

Name of the Student: Animesh Singh

Roll no:1902 **Stream: MBA Hospital and Health Management**

Week no:10 **From:14/07/2025** **to:19/07/2025**

Activity Done	Day 1 (14/07): - Night survey case conversions and patient feedback list creation. - IPD Rounds (6th Floor): Tower A: 21/23 satisfied, Tower B: 41/56 satisfied. - Data entry, post-discharge feedback, Project PATIENT work. Day 2 (15/07): - Learned full IPD Admission process: From doctor note to SLM, bed booking, admission consent, sticker printing. - Data entry, night survey conversions, and admissions practice. Day 3 (16/07): - Leave (Out of station). Day 4 (17/07): - Continued admissions hands-on practice and night case conversions. - Data entry, feedback survey management, finalized project and submitted for review. Day 5 (18/07): - IPD Rounds (5th Floor): - Tower A: 19/23 satisfied, complaints on food and infrastructure. - Tower B: 36/43 satisfied, food delay noted. - Submitted final project and received positive feedback. Day 6 (19/07): - IPD Rounds (5th Floor): - Tower A: 20/23 satisfied; complaint about food taste (Room 5060). - Tower B: 38/43 satisfied; complaint on call bell delay (Room 5035G). - Completed survey conversion and post-discharge calls. - Assisted in Excel work for corporate task.
Linking theory (Classroom learning) with practice at your organisation	- Understood the IPD admission process and discharge workflow. - Applied CRM and post-discharge tracking in real settings. - Strengthened hands-on Power BI skills in Project PATIENT.

	- Collaborated across departments for admissions, surveys, and final submission.
Gaps identified on the working area.	- Food quality concerns and service delays. - Poor inter-departmental coordination. - Infrastructure and room standards not meeting expectations. - High MRP of medicines. - Occasional nursing and call bell delays.
Suggestions for improvement	- Short-Term: Regular taste audits and prompt food delivery checks. - Mid-Term: Streamline inter-department communication. - Infrastructure: Align room facilities with charges. - Pharmacy: Ensure fair pricing and monitor overcharges. - Response: Set targets for nursing and call bell response time.

Signature of the Student

Approved by the IIHMR University's Mentor

Compiled Summer Internship Report

Name of the Organization: Apollo Hospitals

Area/Department/Project of Summer Internship Program: Patient and Service Excellence

Name: Animesh Singh

Roll No.: 1902

Stream: MBA Hospital and Health Management

Weekly Activities and Key Learnings

Week	Key Activities	Key Learnings/Outcomes
Week 1	Orientation to Patient and Service Excellence, IPD/OPD rounds, survey feedback conversion, exposure to NPS tools, TLC activities.	Gained understanding of guest relations workflows and patient feedback collection methods.
Week 2	Detailed IPD rounds across all floors, submitted Project 1 (Department-wise Feedback Mapping), started Project 2 (CPD Call Documentation Audit).	Learned mapping of patient feedback by department and identifying service gaps.
Week 3	Resumed rounds, documented multiple complaints (food allergy, staff behavior, noise), continued survey-to-case conversion.	Acquired skills in complaint documentation and system-based case handling.
Week 4	Analyzed complaint trends, identified billing misclassifications, applied CRM and patient satisfaction analysis.	Understood billing challenges and applied data analysis for patient feedback.
Week 5	Continued IPD rounds, attended JCI audit meetings, managed feedback and escalated issues.	Learned about hospital accreditation requirements and escalation processes.
Week 6	Handled complaint mapping, created initial Power BI visualizations for Project PATIENT, participated in TLC activities.	Developed basic Power BI dashboards and interacted with patients for engagement.
Week 7	Improved Power BI dashboards, created floor-wise feedback lists, distributed 'Happy Cards' to patients.	Enhanced dashboarding skills and improved patient engagement understanding.
Week 8	Advanced survey handling, managed staff-related complaints, refined insights in Project PATIENT.	Strengthened feedback analysis and system usage skills.

Week 9	Gained exposure to discharge process, finalized pending survey entries, edited hospital corporate video.	Learned discharge process flow and documentation requirements.
Week 10	Finalized Project PATIENT with dashboards, assisted in Excel-based reporting for leadership.	Gained expertise in reporting, dashboard finalization, and feedback documentation.

Linking Theory with Practice

Theory Concept	**Application in Internship**
TQM, Six Sigma, Service Quality	Identified and analyzed service gaps using root cause analysis techniques.
NPS and CRM Concepts	Used Apollo CRM for satisfaction tracking and feedback trend analysis.
Communication Planning Frameworks	Improved patient engagement through structured communication.
Operations Management	Mapped admission, discharge, and billing processes to identify bottlenecks.
Data Analysis and Dashboarding	Created and refined Power BI dashboards for feedback visualization.
SMART Criteria	Proposed actionable improvement strategies based on SMART goals.

Gaps Identified

- Language and communication barriers with regional/international patients.
- Delayed call bell responses and slow support from F&B, diagnostics, and nursing staff.
- Recurring complaints on food quality, hygiene, noise, and infrastructure in premium wards.
- Poor interdepartmental communication causing complaint redressal delays.
- Shortage of support staff during night shifts.
- Housekeeping and maintenance lapses with improper discharge documentation.
- Mismatch between price and amenities in certain wards.
- Complaints in emergency department regarding diagnosis and communication gaps.

Suggestions for Improvement

- Recruit multilingual staff or deploy translators for better patient interaction.
- Implement robust SOPs for coordination and redressal with weekly complaint heatmaps.
- Introduce soundproofing measures on premium floors to reduce noise.
- Develop dietary alert systems and conduct periodic reviews based on feedback.
- Increase staff for room/meal services and night shifts; recruit more male nurses.

- Conduct periodic staff training on communication, emergency response, and billing.
- Pilot teach-back communication method for better patient understanding.
- Streamline billing and discharge processes with interim bill explanations.
- Improve hygiene through frequent audits and infrastructure upgrades.
- Use real-time Power BI dashboards for live feedback monitoring.

Key Learnings

- Hands-on experience in closing service gaps and handling operational cases.
- Applied theoretical knowledge to real hospital workflows.
- Strengthened skills in data management, communication, and teamwork.
- Learned the importance of empathy and attention to detail in patient care.
- Managed and executed micro-projects independently.
- Enhanced expertise in CRM, IT systems, Power BI, and feedback tracking.
- Developed actionable insights for sustainable, patient-centric management.

Signature of the Student: Animesh Singh

Approved by the IIHMR University Mentor: _____