SUMMER INTERNSHIP PROGRAM

at

APOLLO HOSPITAL BANNERGHATTA ROAD, BANGALORE

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

A REPORT BY

ADITYA MAHESHWARI

Master of Business Administration

Hospital and Health Management

Roll no- **1895**

2024-26

under the Mentorship of

Dr. Neetu purohit

Professor

IIHMR UNIVERSITY, JAIPUR

Apollo HOSPITALS
TOUCHING LIVES

21st July 2025

INTERNSHIP CERTIFICATE

This is to certify that **Dr. Aditya Maheshwari** has successfully completed his **Internship and Project** in the **Department of Quality** 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: Implementing Green Training to Build Sustainable Workforce in Apollo Hospitals – A new initiative introduced in the 8th Edition of Joint Commission International (JCI) That encourages hospitals to care for the environment while caring for patients.**
- **Minor Project: Improving the compliance of IPSG 4 in the dental department – This aims to improve our compliance with IPSG 4 in the dental department, ensuring every procedure is performed safely, correctly, and with care.**

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,

O. Deepti

Ms. Deepti Oleti
Assistant Manager – Human Resources

APOLLO HOSPITALS BANGALORE-560076

Annexure A

Completion Certification from the Organization

CERTIFICATE

This is to certify that Dr./Mr./ Ms. Aditya Maheshwari of 29th (batch) of IIHMR University (MBA-HM) (Name of the department/institute) has worked with our organization for his/her summer internship from 12/5/25 to 21/7/25 (date). The overall performance shown by him/her during the period was excellent/good/average. This certificate is being issued to meet the requirements of the IIHMR University.

Date: 21/7/25

(Signature of organization Mentor)

Name: Rekha Chakrabarti

Designation: General Manager
Regional Head Quality

Seal/Stamp of the Organization

APOLLO HOSPITALS
BANGALORE-560076

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. ADITYA MAHESHWARI** of academic year 2024-26 of 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.

Date: 25/07/2025

Dr. Neetu Purohit
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

IIHMR UNIVERSITY

Apollo Hospital Bannerghatta Road, Bangalore

Implementing Green Training to foster a Sustainable Work Culture in Apollo Hospital

Presented By - Dr. Aditya Maheshwari (1895,HM29)
University Mentor - Dr. Neetu Purohit
Organisation Mentor - Rekha Chakrabarti (Zonal Head)

BRIEF HISTORY

Apollo Hospitals was established in 1983 by Dr. Prathap C. Reddy. The Apollo Hospital Bannerghatta Road, Bangalore, is a 250-bedded facility located in the heart of the city and is accredited by the Joint Commission International (JCI). The hospital is renowned for pioneering procedures, including the first Y-shaped stent for tracheoesophageal fistula in the region and for performing the largest series of airway stents in India. The Bannerghatta branch commenced operations on 1st August 2015 and continues to provide advanced, patient-centered care across multiple specialties.

VISION

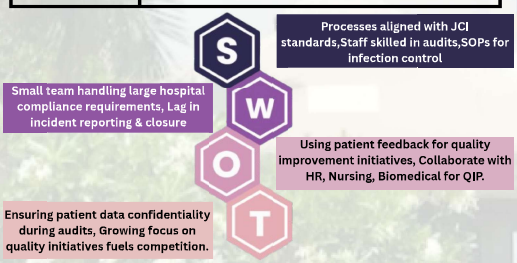
Apollo's vision for the next phase of development is to 'Touch a Billion Lives'.

MISSION

"Our mission is to bring healthcare of international standards within the reach of every individual. We are committed to the achievement and maintenance of excellence in education, research and healthcare for the benefit of humanity"

ORGANIZATIONAL STRUCTURE

Theoretical Understanding	Classroom discussions on communication and leadership, Learning audit processes in theory, Learning how to design and interpret quality indicators theoretically, Learning policy and SOP drafting in a structured manner, Theoretical examples on waste reduction, energy management
Practical Exposure	Coordinating with doctors, nurses, and FMS for quality compliance, Participating in safety rounds, mock drills, and departmental audits, Collecting, verifying, and analyzing actual hospital data for audits , Reviewing and correcting documentation gaps in actual files, Observing green practices and resource challenges practically



INTRODUCTION

Green Training is a new initiative introduced in the 8th Edition of Joint Commission International (JCI) that encourages hospitals to care for the environment while caring for patients. Green training refers to the process of educating and training employees, especially in organizations like hospitals, industries, and offices, to adopt environmentally sustainable practices in their daily work.

OBJECTIVE

To assess the level of green awareness among hospital staff.
To implement a structured training program to increase knowledge about green practices in the hospital.
To evaluate the improvement in staff knowledge about green practices post training.

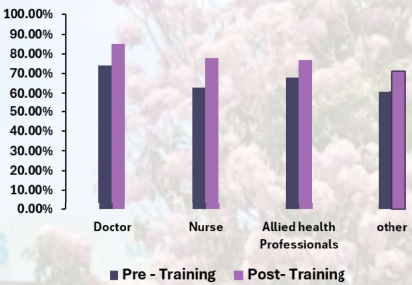
METHODOLOGY

Number of Participants - 243 staff members participated
Participant Profile - Doctors, Nurses , Allied Health professionals, FMS, Housekeeping
Method of Data Collection - Pre and Post Training assessment through google form

COMPONENTS OF TRAINING

Identified training needs by circulating Google Form questionnaires to the staff and analyzing responses.
Created customized training material focused on Green Training to increase awareness.
Offline training sessions were conducted using interactive methods to maximize staff engagement and participation.
The training was conducted over a period of two weeks, comprising a total of 5 sessions, each lasting half an hour.

Role	Pre - Training Awareness (%)	Post- Training Awareness (%)	Improvement (%)
Doctor	74%	85%	11%
Nurse	63%	78%	15%
Allied health Professionals	68%	77%	9%
Other	61%	71%	10%



KEY FINDINGS

Training Completion: 94% of staff completed the training.
Positive Feedback: 88% Staff found the training useful.
Progressive attitude: 82% Staff are wiling to adapt Sustainability practices.

LEARNING

Participated in facility rounds that provided exposure to diverse hospital departments, deepening my understanding of hospital operations.
Gained insight into hospital quality processes by conducting both pulse and file audits.
Completed a Quality Improvement project in the dental department, learning to find gaps, analyze data, and implement changes to improve care.
Gained valuable networking opportunities in healthcare.
Improved my communication skills through regular interactions with staff across departments.
Learned to conduct training sessions and share knowledge effectively.

CHALLENGES

Lack of dedicated infrastructure affecting day to day operations.
Data unavailability within the required timeframe is causing delays in monitoring.
The constrained workspace allotted to the Quality Department limits effective workflow and productivity.

SUGGESTIONS

Recommend setting up infection control committees with regular reviews.
Establish formal protocols and schedules for timely data delivery.
Suggest setting up a "Quality Improvement Suggestion Box" for staff to share innovative ideas.

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA - HHM

Week no: 1 From: 12/5/2025 to 18/5/25

Activity Done	• Facility round for audit on level – 5 • Facility round for audit on level – 4 in Gastroenterology and hepatology department • Facility round for audit on level – 4 in bronchoscopy, pulmonary and sleep lab Department • Audit by self- using IPSG – 1,2,3
Linking theory (Classroom learning) with practice at your organisation	• Infection control and waste management • Hospital safety and facility management • Equipment maintenance and calibration • Quality assurance and internal audit • Communication and teamwork
Gaps identified on the working area.	• Wrongly disposal of bio medical waste in containers • No labelling for high alert medications • Temperature of refrigerator containing vaccine is not optimum • Expired date passed • Calibration overdue • Wrong labelled sticker on hand wash area
Suggestions for improvement	• Conduct regular staff training on biomedical waste segregation • Label all high alert medications with red stickers • Check and record refrigerator temperature daily • Check expiry date weekly and remove expired items • Keep a calendar and set reminder for calibration • Fix and replace incorrect handwash area labels
Plan for the next week	• Facility round for audit on level – 4 in OT - complex

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA - HHM

Week no: 2 From: 19/5/25 to 25/5/25

Activity Done	• Facility round for audit on level – 2 in OT complex (OT pharmacy, OT store) • Facility round for audit on level – 4 in Neonatal ICU and OT recovery • Reading of International patient safety goals (JCI)
Linking theory (Classroom learning) with practice at your organisation	• Zoning in OT • Hand hygiene and aseptic techniques • Personal protective equipment (PPE) • Instrument Sterilisation • Air handling unit (AHU) and HEPA Filters
Gaps identified on the working area.	• The electrode gel bottle found without a cap. • The machine was placed without proper boundary marking on the floor. • OT safety check list was not filled out. • The anaesthesia kit in the OT store did not have the anaesthetist's signature. • The Microshield bottle did not have an opening date mentioned.
Suggestions for improvement	• Use capped bottles and check regularly to prevent contamination. • Mark proper yellow boundaries to ensure safe equipment placement. • Ensure mandatory completion of the checklist before every procedure. • Implement a signing protocol for anaesthesia kit verification. • Label all bottles with opening dates to track usability and shelf life.
Plan for the next week	• Facility round for audit on level – 2 in SICU, MICU, CATHLAB. • Quality improvement project in dentistry

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA-HHM

Week no: 3 From: 26/5/25 to 1/6/25

Activity Done	• Facility round for audit on level – 3 in MICU -2 • Observation of the mock drill for Code Purple i.e. Violence/Aggression • Finalisation of a Quality Improvement Project (QIP) Topic in Dentistry • Discussion on JCI Chapter patient centred care (PCC) • Auditing and preparation of report in the dental department • Facility round for audit on level – 2 in MICU -1, Cath lab store and Cardiac ICU • Observation of the mock drill for code Black i.e. Bomb Threat
Linking theory (Classroom learning) with practice at your organisation	• Infection control, patient safety, and ICU protocols • Emergency response in crisis management. • Concepts of patient rights and care standards to practice • Quality assurance and internal audit • Disaster management protocols
Gaps identified on the working area.	• Dirty eye wash bottle • No preventive maintenance label on the new dental chair • No sanitizer available on the patient bed • No NFPA sticker on the hydrogen peroxide bottle • Blood samples kept without patient records • Tap water used instead of RO water for cleaning • Oxygen cylinder filling date overdue
Suggestions for improvement	• Clean daily, maintain checklist • Attach label, record maintenance schedule • Place dispensers at each bed, refill regularly • Apply proper hazard labeling as per guidelines • Implement strict labeling with patient details • Ensure use of RO water, train staff accordingly • Monitor expiry, maintain timely refill log
Plan for the next week	• Facility round for audit outside hospital • Data collection for Quality improvement project in dentistry

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA-HHM

Week no: 4 From: 2/6/25 to 8/6/25

Activity Done	• Facility round for audit on Level – 1 in Radiology and dialysis • Facility round for audit on Level – 1 in OPDs • Facility round for audit in Emergency And ambulance • Finalized the topic and worked on the presentation for the main project. • Created a Self-Assessment Tool (SAT) for audit in the main project • Created a google form for pre-training in the main project • Data collected for the quality improvement project in dentistry
Linking theory (Classroom learning) with practice at your organisation	• Quality Assurance & Accreditation Standards • Hospital Operations Management • Risk Management & Safety Protocols • Health Information Systems & Data Tools • Project Management in Healthcare
Gaps identified on the working area.	• HAZMAT cupboard is not locked • Smoke detector is not working • Cut strip policy is not being followed • Blue light is not working in the ambulance • Vials are disposed of beneath the beds • Dustbin is filled beyond 75% capacity. • Visible dust in IR Fluoroscopy suite
Suggestions for improvement	• Keep the HAZMAT cupboard always locked for safety. • Repair or replace the smoke detector promptly. • Follow the cut-strip policy, ensure regular staff training. • Fix the ambulance blue light for emergency use. • Dispose of vials properly, avoid placing waste under beds. • Empty dustbins before they exceed 75% capacity. • Clean the IR Fluoroscopy suite daily to maintain sterility.
Plan for the next week	• Work on Quality improvement project in dentistry • Work on main project • Facility round for audit in Basement

Dr. Aditya Maheshwari
Signature of the Student
Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA-HHM

Week no: 5 From: 9/6/25 to 15/6/25

Activity Done	• Facility round for Audit on Basement in blood centre • Facility round for cross checking on level 6 and 7 • Facility round for cross checking on level 5 and 4 • Worked on Excel data for the Quality improvement project in dentistry • Collected responses via google forms related to the main project
Linking theory (Classroom learning) with practice at your organisation	• Hospital management theory • Quality assurance concepts • Facility planning • Data analysis skills • Research methods
Gaps identified on the working area.	• Expired product found in the HAZMAT box • No date of opening and NFPA sticker on Insta-Act • Heavy items Stored above cupboard • Sharp Container filled beyond 75% • Eye wash area is dirty • Calibration is overdue • Sanitizer machine is not working
Suggestions for improvement	• Remove and dispose of expired products regularly • Label Insta-Act with opening date and NFPA sticker • Store heavy items on lower shelves for safety • Dispose sharps containers before they exceed 75% full • Clean eye wash area daily • Keep a schedule for timely equipment calibration • Repair or replace the sanitizer machine quickly
Plan for the next week	• Auditing the data in a quality improvement project in dentistry • Implementation of the main project

Dr. Aditya Maheshwari
Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA-HHM

Week no: 6 From: 16/6/25 to 22/6/25

Activity Done	• Conducted file audits for surgical cases on levels 4 and 5 • Created a poster for the main project • Performed auditing for a quality improvement project in dentistry
Linking theory (Classroom learning) with practice at your organisation	• Applied quality audit concepts • Used Canva skills learned in class for poster creation • Linked theory of clinical governance to compliance checks
Gaps identified on the working area.	• Patient's signature missing on the consent form • Witness signature not obtained on the HIV consent • Reason for patient's inability to give consent not mentioned • Doctor's name not mentioned • Alternative treatment options not filled
Suggestions for improvement	• Ensure patient signs the consent form before procedure • Always obtain witness signature for HIV consent • Mention reason if patient is unable to give consent • Doctor must fill in their name on the form • Document alternative treatment options clearly
Plan for the next week	• To conduct file audits • To implement the main project • To perform facility rounds outside periphery area

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 Stream: MBA-HHM

Week no: 7 From: 23/6/25 to 29/6/25

Activity Done	• Conducted a pulse audit in the dialysis department • Created graphs for trend analysis in a quality improvement project in dentistry • Prepared IPSG 4 training material for the dental department • Performed file audits on levels 4 and 5 in private wards
Linking theory (Classroom learning) with practice at your organisation	• Applied classroom audit cycle concepts during the pulse audit in the dialysis department • Used Excel and data visualization techniques from quality classes to create trend analysis graphs • Understood practical challenges in ensuring IPSG adherence while preparing training content • Practiced documentation review and compliance checks as taught in quality management sessions during file audits
Gaps identified on the working area.	• An infection risk assessment is not filled out in the doctor's initial assessment form • An abbreviation is used in the doctor's initial assessment form • Benefits and alternatives are not documented in the consent form for procedure and treatment • Aldrete scores are not mentioned in the consent for anaesthesia form • Labor details are not documented in the neonatal delivery notes • Date and time are not mentioned in the consent for admission form
Suggestions for improvement	• Ensure infection risk assessment is completed in the doctor's initial assessment form • Avoid using abbreviations; write terms in full in assessment forms • Document benefits and alternative treatment options in consent forms • Record Aldrete scores in the consent for anaesthesia form post-procedure • Include detailed labour information in neonatal delivery notes

	• Mention date and time clearly in the consent for admission form
Plan for the next week	• Pulse audit on Endoscopy, Cath lab and ICU • Stroke pathway validation • Consent compliance audit in cardiac department

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 **Stream: MBA-HHM**

Week no: 8 **From: 30/6/25 to 6/7/25**

Activity Done	• Conducted a pulse audit in the Private wards • Conducted a Pulse audit in the Endoscopy, Bronchoscopy and sleep lab • Conducted a pulse audit in the MICU – 2 • Conducted a pulse audit in the IP Pharmacy and Neuro ICU • Filling of Safety Culture Survey Form • Training Given in Dental Department on Quality improvement project • Training Given to OT Nurses on Main Project
Linking theory (Classroom learning) with practice at your organisation	• Applied audit tools and checklist methods learned in quality management classes during pulse audits. • Practiced observation and documentation skills while auditing wards, ICUs, labs, and pharmacy. • Linked patient safety theory with practical data collection during Safety Culture Survey form filling. • Used adult learning principles while conducting training sessions for OT nurses on the main project. • Linked hospital policy compliance concepts with real-time observation during audits. • Reinforced teamwork and interdepartmental coordination as learned in class while executing activities.
Gaps identified on the working area.	• Pain score is not mentioned after intervention in the doctor's initial assessment form. • Reason for patient not signing is not mentioned in the consent form for MRI scan. • Gynaecology history is not filled for a female patient in the doctor's initial assessment form. • Procedure is not mentioned in the Consent for Anaesthesia form. • Plan of care is not filled in the doctor's initial assessment form. • Medication trolley is not locked. • Name of the patient is not mentioned in the Consent for Anaesthesia form.

Suggestions for improvement	• Ensure pain score is documented after every intervention. • Record reason for patient not signing on MRI consent forms. • Fill gynaecology history for all female patients during initial assessment. • Mention procedure clearly on the Consent for Anaesthesia form. • Complete plan of care in the doctor's initial assessment form. • Keep medication trolley locked when not in use. • Write patient's name on the Consent for Anaesthesia form.
Plan for the next week	• To conduct File audit • To conduct pulse audit in Radiology

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 **Stream: MBA-HHM**

Week no: 9 **From: 07/07/25 to 13/07/25**

Activity Done	• Conducted pulse audit in Pathology, Biochemistry and hematology • Conducted Pulse audit in the department of Physiotherapy and chemotherapy • Conducted Pulse audit in Cardiac ICU and MICU – 1 • Conducted Facility round on Level 7,6,5 • Provided Training to Nurses on the Main Project • Provided Training to FMS staff on the Main Project
Linking theory (Classroom learning) with practice at your organisation	• Interpretation of quality control measures in laboratory services • Documentation compliance and departmental SOP adherence • ICU quality parameters and critical care protocols • Observation techniques for housekeeping, fire safety, and waste management • Importance of staff sensitization and capacity building in QMS • Techniques for engaging non-clinical staff in quality initiatives
Gaps identified on the working area.	• Dirty eyewash station • Date and sign are missing on MOUs • TAT not completed for July month in the Biochemistry department • Patient label missing on the “Physiotherapy Department Assessment Chart” • Follow-up and lab findings not filled in the “Transfer Information Sheet” • Time and date not mentioned on the “Emergency Initial Assessment Form”
Suggestions for improvement	• Clean eyewash stations regularly to keep them ready. • Ensure all MOUs are signed and dated properly. • Send reminders for timely report completion. • Always label patient charts to avoid mistakes. • Train staff to complete follow-up info on transfer sheets. • Always note time and date on emergency forms.

Plan for the next week	• To conduct pulse audit in Wards And OT • To conduct Facility round in Level 4,3,2 • To Provide Training to staff on the main Project

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

REPORT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 **Stream: MBA-HHM**

Week no: 10 **From: 14/7/25 to 21/7/25**

Activity Done	• Conducted Facility round on Level 4,3,2,1 • Provided Training to Security staff on the Main Project • Provided Training to Nurses on the Main Project • Conducted Pulse audit in Cath lab • Conducted Pulse audit in CSSD • Conducted Pulse audit in Blood Bank
Linking theory (Classroom learning) with practice at your organisation	• Applied classroom infection control learnings while training nurses. • Used audit skills from class during pulse audits in Cath lab, CSSD, and Blood Bank. • Observed gaps between theory and ground reality, helping me learn problem-solving. • Used observation skills from theory to check sterile practices during audits.
Gaps identified on the working area.	• An infection risk assessment is not filled out in the doctor's initial assessment form • Benefits and alternatives are not documented in the consent form for procedure • An abbreviation is used in the doctor's initial assessment form • Dustbin is filled beyond 75% capacity. • HAZMAT cupboard is not locked • Oxygen cylinder filling date overdue
Suggestions for improvement	• Ensure infection risk assessment is completed in the doctor's initial assessment form • Document benefits and alternative treatment options in consent forms • Avoid using abbreviations; write terms in full in assessment forms • Empty dustbins before they exceed 75% capacity.

	• Keep the HAZMAT cupboard always locked for safety. • Monitor expiry, maintain timely refill log
Plan for the next week	• Reflect on the internship experience and align key learnings with my career goals.

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor

COMPILED REPORTING FORMAT

Name of the Organisation: Apollo Hospitals Bannerghatta, Bangalore

Area/ Department/ Project of Summer Internship Program: Quality

Name of the Student: Dr. Aditya Maheshwari

Roll no: 1895 **Stream: MBA-HHM**

Activity Done	• My journey at Apollo Hospitals began with an orientation in the Quality Department, where I was introduced to the hospital's commitment to patient safety and quality care. I learned about the International Patient Safety Goals (IPSG) under JCI standards, which helped me understand how even small actions can impact patient outcomes. • I spent time reading and discussing the IPSG, which set the foundation for my upcoming audits and facility rounds. It was insightful to see how global standards translate into everyday hospital practices. • Early in my internship, I finalized two key projects: • A Quality Improvement Project (QIP) in the Dental Department on "Improving Compliance of IPSG 4 in Dentistry." • A **main project on 'Implementation of Green Training to Create a Sustainable Workforce at Apollo Hospitals.'" • These projects aligned perfectly with my interest in quality management and sustainability in healthcare, motivating me to learn and contribute meaningfully during my time here. • Facility Rounds – Learning on the Ground • One of the most enriching parts of my internship was participating in facility rounds and audits across different hospital areas. These rounds helped me understand how quality checks are carried out practically and how various departments function together to maintain safety and efficiency. • I participated in facility rounds across: • Level 5: Private wards. • Level 4: Gastroenterology, hepatology, bronchoscopy, pulmonary and sleep lab, Neonatal ICU, OT recovery, and private wards. • Level 3: MICU-2, dialysis. • Level 2: OT complex, Cath lab, Cardiac ICU, MICU-1. • Level 1: Radiology, dialysis, OPDs, Emergency and ambulance. • Basement: Blood Centre. • During these rounds, I observed infection control practices, medication management, documentation, and patient safety checks while cross-checking data on levels 6, 7, 5, and 4 to ensure consistency in compliance. • It was particularly interesting to see how each department, whether it was a high-dependency area like MICU or a patient-centric space

	like OPDs, followed quality guidelines while balancing patient care. Each day was a new learning experience, and I was able to connect my theoretical understanding with real-time observations. • Hands-on Auditing and Analysis • As my learning progressed, I was entrusted with conducting pulse audits independently, which boosted my confidence in applying quality principles practically. I conducted audits in: • Dialysis, endoscopy, bronchoscopy, sleep lab. • MICU-1, MICU-2, Cardiac ICU. • IP pharmacy, Neuro ICU. • Pathology, biochemistry, hematology. • Physiotherapy, chemotherapy. • Cath lab, CSSD, Blood Bank. • Private wards. • These audits helped me identify areas of improvement and appreciate how continuous monitoring ensures patient safety in the hospital environment. I also observed a mock drill for Code Purple (violence/aggression scenarios), which helped me understand hospital emergency preparedness and teamwork under pressure. • For my QIP in Dentistry, I: • Collected data using Google Forms and converted it into actionable insights. • Created graphs for trend analysis to visually track compliance. • Used Excel to organize and clean the data systematically. • Developed a Self-Assessment Tool (SAT) to support department audits. • Collected feedback before and after training sessions to measure impact. • Each activity strengthened my analytical skills, and seeing the direct impact of data on quality improvement kept me motivated. • Training and Project Implementation • Towards the later part of my internship, I shifted focus towards training and project implementation, which allowed me to interact closely with staff across various departments. • For the QIP in Dentistry, I created training materials on IPSG 4, ensuring staff understood the importance of correct patient identification and site marking. I conducted training sessions in the dental department, engaging the team to clear doubts and improve their confidence in following protocols. • For the main project on Green Training, I: • Designed and delivered training for nurses, FMS staff, OT nurses, and security staff to incorporate sustainable practices into daily work. • Collected pre-training and post-training data to analyze knowledge improvement and identify further training needs.

	• Worked on simplifying concepts like biomedical waste segregation, energy conservation, and paper reduction into practical steps for staff to follow. • Additionally, I filled out the Safety Culture Survey, reflecting on my learning and the environment within the hospital. • Through these training sessions and project activities, I realized the importance of communication and teamwork in implementing quality and sustainability initiatives in a hospital setting. It was fulfilling to see staff showing interest and willingness to adopt new practices, and I felt a sense of contribution towards patient safety and environmental responsibility. • Conclusion • Overall, my internship in the Quality Department at Apollo Hospitals was a transformative experience. From observing audits to conducting them, analyzing data, preparing reports, and delivering training, I developed a well-rounded understanding of hospital quality management. • Most importantly, it helped me grow professionally, sharpening my observation, analytical, and communication skills while instilling the value of continuous improvement in healthcare.
Linking theory (Classroom learning) with practice at your organisation	• I applied what I learned in class about infection control and waste management while observing hand hygiene practices, PPE usage, and aseptic techniques during audits in the OTs and ICUs. Watching the staff follow protocols on instrument sterilisation, zoning in OT, and handling biomedical waste helped me understand the practical importance of infection control in protecting patients and healthcare workers. • My understanding of hospital safety, facility management, and equipment maintenance deepened as I joined facility rounds, checking fire safety, air handling units (AHUs), and HEPA filters, and ensuring calibration of equipment was up to date for safe patient care. • Participating in emergency preparedness drills and disaster management discussions showed me how crisis management protocols translate into action. Observing ICU protocols and patient safety measures strengthened my knowledge of critical care, and I could relate these to patient rights and care standards discussed in our classroom sessions. • Page 2: Applying Theory to Practice in Quality Management • The internship allowed me to bring alive many classroom learnings: • I linked clinical governance theory to compliance checks during audits. • The audit cycle taught in class was practically applied during pulse audits in dialysis, Cath lab, CSSD, and the Blood Bank. • I used Excel and data visualization skills to create trend analysis graphs for quality improvement projects.

	• Canva skills were used to design posters for training sessions, ensuring content was clear and engaging. • During file audits, I practiced documentation review and compliance checks as taught in quality management classes. • Using audit tools and checklists, I conducted systematic audits in wards, ICUs, labs, and pharmacy areas. • I observed firsthand how data analysis and research methods help in quality improvement projects and how facility planning and hospital operations management impact service delivery. • My observation skills, honed in class, helped me assess housekeeping practices, fire safety readiness, and waste management compliance during facility rounds. I also saw the importance of engaging non-clinical staff in quality initiatives, realizing that building a quality culture requires teamwork and continuous sensitization. • While preparing training material for the dental department on IPSG 4, I understood the challenges of ensuring protocol adherence and the need to simplify information for staff. • This internship made me realize that while theory provides a foundation, the real hospital environment tests your adaptability, observation, and problem-solving skills. The opportunity to connect classroom learnings to practical settings has given me confidence to handle quality management responsibilities in the future.
Gaps identified on the working area.	• During my facility rounds and audits across various departments, I realized that maintaining quality and safety requires constant attention to detail and teamwork. While many processes were well-managed, I observed some practical gaps that can impact patient safety, infection control, and compliance. • For instance, during biomedical waste checks, I found wrong disposal of biomedical waste in containers, dustbins filled beyond 75% capacity, and sharp containers overfilled, indicating a need for regular monitoring and staff reinforcement. Some eye wash stations, and eyewash bottles were dirty, reflecting lapses in daily cleaning protocols. • In the medication management areas, there were no labels on high-alert medications, and I found expired products in the HAZMAT box and vials disposed of beneath beds. In some areas, cut strip policies were not followed, and NFPA stickers were missing on chemical containers like hydrogen peroxide and Insta-Act. These observations highlighted the importance of labelling, safe storage, and disposal practices to ensure patient and staff safety. • During equipment checks, calibration was overdue on some machines, preventive maintenance labels were missing on new dental chairs, and oxygen cylinders were past their filling dates. I also observed unlocked medication trolleys and HAZMAT cupboards, a non-functional smoke detector, and a sanitizer

	machine that was not working, all of which could pose risks in an emergency. • As I continued my audits, I noticed infection control practices needing improvement. Tap water was being used instead of RO water for cleaning in some areas, and sanitizers were not available at certain patient beds. I found Microshield bottles without opening dates, which can affect the efficacy of infection prevention measures. • In the OT areas, zoning protocols needed closer monitoring as OT safety checklists were not filled out, and anaesthesia kits lacked signatures from anaesthetists. Additionally, the electrode gel bottle was left without a cap, and machines were placed without proper boundary markings, indicating the need for attention to OT safety and organization. • In the ambulance, the blue light was not functional, and in radiology, visible dust was seen in the IR fluoroscopy suite, showing the importance of equipment readiness and environmental hygiene in patient care areas. • In the laboratory, blood samples were found without patient records, and TAT (Turnaround Time) documentation was incomplete in July in the Biochemistry department. This highlighted the need for documentation compliance to ensure traceability and accountability. • During facility rounds, I observed heavy items stored above cupboards, creating a potential safety hazard, and smoke detectors were found non-functional, emphasizing the importance of regular facility safety checks. • Documentation plays a crucial role in quality assurance and patient safety. During file audits, I noticed gaps such as missing patient and witness signatures on consent forms and reasons for the patient's inability to sign not mentioned in some cases. In the consent for anaesthesia forms, the patient's name, procedure, and Aldrete scores were missing, which can affect the legal and clinical clarity of the documentation. • In the doctor's initial assessment forms, I found incomplete sections such as gynaecology history, infection risk assessment, plan of care, and pain scores after interventions. Additionally, the use of abbreviations in clinical documentation and absence of alternative treatment options and benefits in consent forms were noted, indicating areas for improvement in record completeness. • In the "Transfer Information Sheet", follow-up and lab findings were missing, and in the "Physiotherapy Department Assessment Chart," patient labels were not attached, which can lead to misidentification risks. Similarly, date and time were missing on the "Emergency Initial Assessment Form" and the consent for admission form, affecting the traceability of care events. • These findings helped me realize the practical challenges in documentation despite clear guidelines and the need for ongoing

	staff sensitization, audits, and reinforcement to improve compliance. Each observation was an opportunity for learning, reinforcing how detailed checks, effective communication, and teamwork are essential to sustaining quality care in the hospital environment.
Suggestions for improvement	• Based on my observations, a key area for improvement is infection control and waste management. To address issues like improper biomedical waste disposal, dirty eyewash stations, and overfilled sharp containers, the following steps are suggested: • Regular Staff Re-Training: Conduct short, periodic refresher trainings for staff on waste segregation, disposal guidelines, and infection control practices to reinforce accountability. • Visual Aids and Signage: Place clear, color-coded charts near waste bins and biomedical waste areas to remind staff about proper segregation and disposal protocols. • Daily Monitoring and Feedback: Assign responsibility to infection control nurses or department coordinators to check eyewash stations, sanitizer availability, and waste bin levels daily, providing real-time feedback to staff. • Functional Hand Hygiene Practices: Ensure all hand hygiene stations are filled and functioning, with opening dates on antiseptic bottles monitored, and incorporate these checks into daily housekeeping rounds. • Periodic Audits with Staff Participation: Engage housekeeping, nursing, and allied staff in random infection control audits to build a sense of ownership. • Water Source Monitoring: Regularly audit cleaning practices to ensure RO water is used where mandated, and educate staff on its importance in infection control. • By focusing on these practical, routine improvements, Apollo Hospitals can enhance compliance while building a culture of safety and responsibility among all staff. • Equipment readiness and facility safety are critical to patient safety and service efficiency. Based on observations such as overdue calibrations, missing preventive maintenance labels, non-functional smoke detectors, and medication mislabelling, these improvement measures are suggested: • Preventive Maintenance Scheduling: Create a centralized preventive maintenance tracker visible to department heads, ensuring timely calibration and equipment checks. Mark equipment visibly with last calibration and next due dates. • Facility Safety Checks: Integrate weekly facility safety rounds focusing on: • Smoke detectors, • Fire safety equipment, • Storage practices (avoiding heavy items above cupboards), • Boundary markings around equipment.

	• Regular HAZMAT and Chemical Storage Audits: Ensure all chemical containers have NFPA labels, opening dates, and are stored securely with HAZMAT cupboards locked at all times. • Medication Management Enhancements: • Implement double-check systems for high-alert medications and expiry date monitoring. • Label all high-alert medications clearly and maintain updated medication trolleys that remain locked when not in use. • Ambulance Readiness Protocols: Include checks on lights, oxygen cylinders, and emergency equipment in the ambulance during daily readiness checks. • To sustain these improvements, Apollo Hospitals can create a compliance dashboard for quality staff and department heads to review progress weekly, ensuring accountability while fostering interdepartmental collaboration. • Proper documentation ensures legal safety and continuity of care while reflecting hospital quality standards. To address issues like missing signatures, incomplete forms, and inconsistent documentation, the following are recommended: • Documentation Training Workshops: Conduct department-wise workshops explaining the importance of complete documentation, highlighting frequent gaps (missing signatures, incomplete consent forms, unrecorded pain scores, etc.). • Audit-Based Feedback: Share anonymized documentation audit findings with teams, illustrating practical examples of incomplete forms and how to correct them. • Checklists for Critical Forms: Provide laminated quick-reference checklists for consent forms and initial assessment forms, guiding staff on required fields (name, date, time, procedure, alternative treatments, benefits, signatures). • Electronic Health Record (EHR) Utilization: Where EHRs are used, explore system prompts for mandatory fields to prevent incomplete form submissions. • Regular File Audits: Continue periodic file audits across departments with immediate feedback and reinforcement, emphasizing the “why” behind each documentation requirement. • Department Champions for Quality: Appoint a “Quality Champion” in each department to act as a liaison for addressing documentation and compliance queries from staff. • Staff Engagement in Quality Improvement: Involve staff in small quality projects to improve documentation compliance, such as “Consent Form Week,” where departments aim for 100% complete documentation, supported by positive reinforcement and recognition. • Implementing these improvement measures will not only enhance compliance with quality standards but will also: Reduce infection risks, Improve patient and staff safety,

	Strengthen legal and clinical documentation, Enhance staff accountability and teamwork. • By combining training, system improvements, monitoring, and staff ownership, Apollo Hospitals can continue its journey toward excellence in quality care and patient safety.
Key Learnings	• My internship at Apollo Hospitals was a transformative experience that went beyond theoretical learning, allowing me to observe, participate, and contribute to quality improvement in real hospital settings. • Participating in facility rounds across different hospital departments exposed me to the complexity of hospital operations. From ICUs and OTs to labs and OPDs, I saw how each department functions and how coordination among them is essential for seamless patient care. Observing the flow of patients, support services, and safety practices helped me appreciate the behind-the-scenes efforts that keep a hospital running efficiently. • Conducting pulse audits and file audits deepened my understanding of hospital quality processes. It was insightful to see how quality indicators are measured on the ground and how even small gaps can affect patient safety and care standards. These audits taught me to look for details while maintaining a patient-centered perspective, reinforcing the importance of quality checks in everyday hospital operations. • Learning to Contribute to Quality Improvement • A significant highlight of my internship was completing a Quality Improvement Project in the dental department, where I worked on improving compliance with IPSG 4. Through this project, I learned to identify gaps, collect and analyze data systematically, and design practical solutions to enhance patient safety. Seeing the changes implemented and observing the department's commitment to improvement was a rewarding experience, teaching me that quality improvement is a continuous and collaborative process. • The internship also provided valuable networking opportunities, allowing me to connect with professionals from various healthcare domains. Interacting with the quality team, nursing staff, and department heads helped me understand different perspectives within the hospital, and I learned the importance of clear, respectful, and effective communication in building professional relationships. • Additionally, I developed communication and teaching skills by conducting training sessions for staff. Preparing training materials and delivering sessions to different teams helped me learn to explain concepts in a simple and practical manner, ensuring that everyone could understand and implement quality practices in their daily routines. • Overall, this internship helped me bridge the gap between classroom learning and practical application, nurturing my skills in observation, data analysis, teamwork, and problem-solving while

	strengthening my commitment to quality and patient safety in healthcare.

Dr. Aditya Maheshwari

Signature of the Student

Approved by the IIHMR University's Mentor