



Summer Internship Programme (SIP)

STUDENT GUIDELINE | 2024-26

for
MBA (Hospital and Health Management)
MBA (Pharmaceutical Management)
MBA (Healthcare Analytics)
MBA (Development Management)





INDUS
JAIPUR HOSPITAL



Ref-IJH/HR/2025

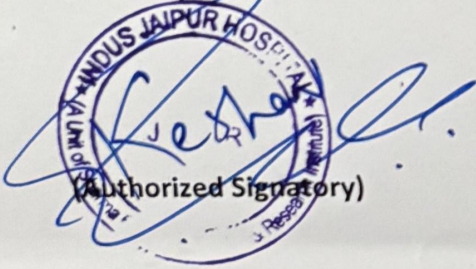
Date – 21st Jul'2025

TO WHOM IT MAY CONCERN

This is to certify that Ms. Aditi Hawa, a student of IIHMR University has successfully completed her 2.5 month internship at "Indus Jaipur Hospital" from 12th May'25 to 21st Jul'25 in Human Resource Department.

During this period we found her sincere, intelligent, and hard working.

For Indus Jaipur Hospital
(A Unit of Sharma Memorial Hospital & Research Institute)

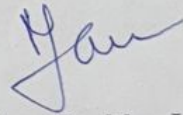

(Authorized Signatory)

IIHMR University Faculty Mentor Approval

This is to certify that **Ms. Aditi Hawa** of academic year 2024-26 of 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 guidelines. Her poster is approved for presentation.

Date: 28/07/2025

A handwritten signature in blue ink, appearing to read 'Nutan'.

Dr. Nutan Prabha Jain
Professor

EMPLOYEE SATISFACTION SURVEY AT INDUS JAIPUR HOSPITAL

ABOUT THE ORGANIZATION

- Indus Jaipur Hospital (A unit of Sharma Memorial Hospital & Research Institute) inceptioned its operations in March 2018, located in Jaipur.
- 200+ bedded multi speciality and NABH accredited hospital specialized in knee Joint Surgery and Cardiology.

VISION:

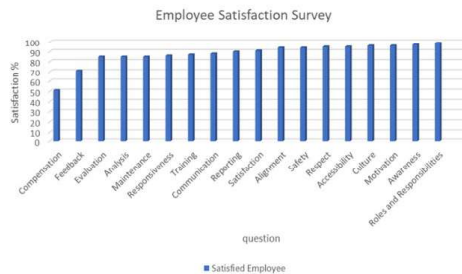
To be recognized as an excellent medical care institution of appropriate standards, quality and technology (given by HR head).

MISSION:

To provide compassionate, accessible, affordable and comprehensive healthcare services to the people and nurture efficient and committed workforce (given by HR head).

OBJECTIVES OF EMPLOYEE SATISFACTION SURVEY

- To study satisfaction among employees across areas like compensation, safety, communication, and feedback.
- To identify gaps and suggest improvements for HR practices.



SWOT ANALYSIS

STRENGTHS

- Experienced founders and leadership in orthopedic, Cardiology and hospital management.
- State of art infrastructure.
- Serves government schemes like RGHS.

WEAKNESS

- Limited partnerships with academic institutions for research and clinical training.
- Manual administrative processes; partial digitization.

OPPORTUNITIES

- Growth in medical tourism in Jaipur (especially for joint replacement, orthopedic care)

THREATS

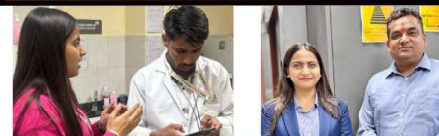
- Patient flow might be diverted due to price differences with competing hospitals

THEORETICAL UNDERSTANDING

- NABH standards, Infection control.
- Hospital Operations & Support Services.
- Human Resource Management, Organizational Behaviour.

PRACTICAL EXPOSURE

- NABH standard checklist was used for Floor rounds, Infection Control audits, Bio Medical Waste checks.
- Front desk management, kitchen hygiene.
- Staff onboarding, employee satisfaction survey, Human resource Management Information System updates.



MANAGING DIRECTOR

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CEO

↓

MEDICAL DIRECTOR

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GM ADMIN

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QUALITY DEPARTMENT NURSING DEPARTMENT HUMAN RAESOURCE MANAGEMENT FINANCE & ACCOUNTS DEPARTMENT MARKTING MEDICAL SUPPLY CHAIN MANAGEMENT

FINDINGS

- 51% are satisfied with their salary and allowances – significant dissatisfaction in compensation.
- 71% said they receive feedback– moderately satisfied with performance review mechanisms.
- 86% feel their concerns are heard by management– communication exists but still has scope for improvement
- 94% feel safe at the hospital– good working conditions and safety measures.
- 95% are satisfied with colleagues' behavior– strong interpersonal relations.
- 98% of employees know their work– a strong indication of role clarity.

SUGGESTIONS

- Implement a token system at reception to reduce crowding.
- Conduct monthly BMW audits and refresher sessions.
- Improve interdepartmental communication with digital tools for instant updates.
- Upgrade kitchen storage and shelf infrastructure.

Reporting Format (Week-1)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:1 **From:** 12th May 2025 **to** 16th May 2025

Activity Done	• Conducted floor visits to ICU, CCU, MICU, CTVSOT, OT, and general wards to observe functioning, patient flow, infection control, and coordination. • Participated in the modifying and improving the Employee Satisfaction Survey to make it more effective and staff friendly.
Linking theory (Classroom learning) with practice at your organisation	• Applied the concepts of Essentials of hospital services and Hospital operational management by observing the hospital and its different zones, sterilization processes, and biomedical waste handling. • Infection Control and safety practices aligned with the classroom teachings on NABH standards and Quality assurance.
Gaps identified on the working area.	• In a few clinical areas like OT, biomedical waste segregation practices required reinforcement. • Floor cleaning issues were noticed due to incorrect dilution techniques. • Some staff showed low engagement with the survey, indicating a need to strengthen trust that their feedback will lead to meaningful improvements.
Suggestions for improvement	• Reinforcement of BMW protocols with posters and regular training sessions for OT and ward staff. • Conduct weekly refresher training for housekeeping teams on cleaning chemicals and infection control.

Plan for the next week	Assist in monitoring initial survey responses and collect staff feedback on the improved format.
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Reporting Format (Week-2)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no: 2 **From:** 19th May 2025 **to** 24th May 2025

Activity Done	- Conducted floor visits to ICU, CCU, MICU, CTVSOT, OT, and general wards to observe functioning, patient flow, infection control, and coordination. - Participated in the modifying and improving the Employee Satisfaction Survey to make it more effective and staff friendly.
Linking theory (Classroom learning) with practice at your organisation	- Applied the concepts of Essentials of hospital services and Hospital operational management by observing the hospital and its different zones, sterilization processes, and biomedical waste handling. - Infection Control and safety practices aligned with the classroom teachings on NABH standards and Quality assurance.
Gaps identified on the working area.	- In a few clinical areas like OT, biomedical waste segregation practices required reinforcement. - Floor cleaning issues were noticed due to incorrect dilution techniques. - Some staff showed low engagement with the survey, indicating a need to strengthen trust that their feedback will lead to meaningful improvements.
Suggestions for improvement	- Reinforcement of BMW protocols with posters and regular training sessions for OT and ward staff. - Conduct weekly refresher training for housekeeping teams on cleaning chemicals and infection control.

Plan for the next week	Assist in monitoring initial survey responses and collect staff feedback on the improved format.
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Reporting Format (Week-3)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:3 **From:** 26th May 2025 **to** 31st May 2025

Activity Done	- Conducted and analysed responses from an employee satisfaction survey to assess the morale and motivation of hospital staff. - Collected data from 333 employees through 18 structured questions using a three-point Likert scale (Yes, No, Maybe).
Linking theory (Classroom learning) with practice at your organisation	- Understood that employee satisfaction directly impacts patient experience, linking it with classroom discussions in Hospital Operations and HR Management. - Saw the real-life connection between feedback, compensation, recognition, and employee retention under core topics in healthcare HRM.
Gaps identified on the working area.	Most employees feel heard, though a small percentage remain neutral, indicating scope to enhance open communication further.
Suggestions for improvement	Implement regular employee forums or suggestion boxes and ensure responses are acknowledged. Launch a formal recognition program with monthly awards and certificates.

Plan for the next week	• Gain hands-on understanding of patient registration, appointment scheduling, and report handling at the hospital reception. • Assist in resolving basic queries, related to RGHS schemes at hospital reception. • Observe how reception interacts with OPD, billing, and diagnostics departments, and how this impacts patient experience.
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Reporting Format (Week-4)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:4 **From:** 2nd June 2025 **to** 7th June 2025

Activity Done	• Posted at the hospital reception desk to observe daily patient coordination and support activities. • Understood end-to-end reception workflows including patient registration, appointment scheduling, and report handling. • Responded to basic patient queries, especially related to RGHS schemes and billing procedures. • Observed coordination between reception, OPD, billing, and diagnostics departments. • Learned how effective communication at reception impacts patient experience and hospital perception.
Linking theory (Classroom learning) with practice at your organisation	• Applied concepts from Hospital Information System (HIS) to understand digital registration and data entry. • Observed Healthcare Financing concepts through real-time handling of RGHS scheme queries and cash billing. • Practiced Communication and Soft Skills while guiding patients and managing their concerns. • Gained insight into Hospital Operations Management - especially crowd control, workflow coordination, and service delivery efficiency.

Gaps identified on the working area.	• Many RGHS patients were unaware of their scheme entitlements and needed constant assistance from the reception staff. • The absence of a token or digital queuing system caused overcrowding and confusion during peak OPD hours. • Unclear instructions from departments sometimes led to miscommunication and delays in guiding patients. • The reception area lacked sufficient space, leading to patient discomfort and chaotic movement during rush times. • Reception staff experienced long sitting hours and minimal breaks, increasing the risk of burnout and fatigue.
Suggestions for improvement	• Create easy-to-understand posters or leaflets for RGHS patients to explain their entitlements, coverage, and required documents. • Install a basic token system or digital queue display at the reception to manage patient flow and avoid crowding during peak hours. • Develop a clear inter-departmental communication system, such as an instruction logbook or WhatsApp group, to ensure smooth coordination. • Redesign the reception layout to improve space utilization, include additional seating, and create defined patient flow paths. • Implement shift-based micro-breaks for reception staff to help manage fatigue and maintain energy throughout their working hours.
Plan for the next week	• Support in conducting the induction session for newly joined staff, ensuring timely dissemination of hospital protocols and policies. • Follow up with floor in-charges to ensure that new nurses are well-adjusted and have reported to their designated units.

	• Assist in tracking pending documents or vaccination compliance for any new joiners who missed submission during onboarding. • Coordinate with the uniform and ID card issuing department to confirm issuance for any pending cases. • Begin preparing a simple feedback mechanism (form or checklist) to collect insights from newly joined staff about their onboarding experience.
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Reporting Format (Week-5)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:5 **From:**9th June 2025 **to** 14st June 2025

Activity Done	• Coordinated and facilitated the for newly recruited nursing staff. • Verified and collected documentation, and assisted in orientation procedures. • Ensured allocation of departments, ID cards, and uniforms. • Supported HR team in updating records on the Management Information System.
Linking theory (Classroom learning) with practice at your organisation	• Applied classroom knowledge from Recruitment & Selection, HR Operations, and Employee Orientation modules. • Understood hospital staffing structures and healthcare compliance requirements as discussed in HR and Hospital Support Services lectures. • Concepts related to NABH guidelines, documentation standards, and employee engagement were experienced in real-time.

	• Practically observed onboarding workflow and interdepartmental HR coordination.
Gaps identified on the working area.	• Delay in issuing ID cards and uniforms affected smooth integration on Day 1. • No formal feedback mechanism exists to evaluate how well new employees are settling in. • Some new staff were unclear about digital systems used in hospital operations (e.g., attendance, reporting). • A few candidates joined with incomplete documentation, causing delays in record finalization.
Suggestions for improvement	• To avoid delays in ID card and uniform issuance, maintain adequate stock and coordinate pre-joining logistics with admin. • Implement a structured post-joining feedback system (e.g., simple Google Form or printed feedback sheet) to evaluate new joiners' early experiences. • Introduce a brief digital orientation module during induction to familiarize employees with hospital systems like biometric attendance and duty rosters. • Send a pre-joining checklist of required documents well in advance and conduct a telephonic confirmation to ensure candidates bring everything on Day 1.
Plan for the next week	• Support in conducting the employee induction session for the nursing staff who joined this week. • Personally follow up with the new joiners to gather informal feedback and note their initial challenges or suggestions. • Coordinate with admin and IT teams to ensure quick generation of login credentials and ID access. • Join the HR executive for floor visits to confirm the placement and integration of new staff in their respective departments.

Reporting Format (Week-6)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:6 **From:**16th June 2025 **to** 21st June 2025

Activity Done	• Conducted routine floor visits across OPD entrance, General Wards, Washroom facilities, and CTVS ICU. • Identified hygiene and maintenance issues in compliance with NABH guidelines. • Assisted in conducting induction classes for newly joined nursing staff, familiarizing them with hospital SOPs. • Managed the punch-in process using the biometric system for regular attendance tracking of employees including housekeeping staff and GDAs.
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Linking theory (Classroom learning) with practice at your organisation	• Theoretical concepts from “Essentials of Hospital Services” and “Quality Management” were applied to observe gaps in hygiene compliance. • Practical understanding of NABH standards for cleanliness and biomedical waste handling was reinforced. • Observed real-life implications of lacking PPE inventory management, as discussed during academic modules.
Gaps identified on the working area.	• Dustbins at the OPD entrance were filled and not cleared regularly. • One tap of the water cooler was rusted, indicating poor maintenance. • Inadequate availability of PPE—masks, shoe covers, and head caps—in CTVS ICU and general wards. • Washrooms were not cleaned every 2 hours as required under NABH guidelines.
Suggestions for improvement	• Strictly follow a cleaning and sanitation schedule with 2-hour interval checks, especially for washrooms. • Set up a log and checklist system for waste bin clearance at patient-facing areas. • Conduct preventive maintenance of water facilities to ensure hygiene and safety. • Implement inventory control measures to avoid PPE shortages in critical care areas. • Periodic audits for hygiene compliance and training refreshers for housekeeping staff.
Plan for the next week	• Begin drafting a hygiene compliance checklist department-wise. • Conduct feedback interviews with nursing and housekeeping staff regarding resource availability.

	• Continue daily floor audits and prepare a comparative report on improvements. • Study the previous hygiene checklist that was used during the NABH survey conducted at the hospital to understand standard expectations.
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Reporting Format (Week-7)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:7 **From:**21th June 2025 **to** 28st June 2025

Activity Done	• Transitioned to the Dietetics Department this week, offering a valuable opportunity to explore patient nutrition and food services. • Involved in evaluating the quality of food provided to patients and attendants, including taste, presentation, and nutritional value. • Observed the kitchen's hygiene practices and food preparation processes as per institutional protocols.
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	• Participated in routine checks of meal standards and gained firsthand exposure to hospital food service operations. • Managed observation of food consistency and reported minor improvement areas, such as the cooking level of okra vegetable, to the kitchen team for immediate correction. • Assisted in reviewing the cleanliness and organization of kitchen storage areas, identifying older infrastructure like shelves that could be modernized for enhanced efficiency.
Linking theory (Classroom learning) with practice at your organisation	• Bridged classroom learning with practical exposure to hospital food service and dietary planning, especially from modules like <i>Hospital Support Services</i> and <i>Quality in Healthcare</i>. • Gained insights into how patient-specific diets are managed with precision and how hygiene standards play a critical role in patient safety. • Learned how effective kitchen management contributes to overall hospital quality standards, aligned with NABH requirements.
Gaps identified on the working area.	• One of the meals (okra curry) required additional cooking time, which was promptly addressed after feedback. • Kitchen cleanliness was maintained, though some areas like storage shelves could benefit from infrastructural upgrades to further enhance sanitation. • Minor improvements in routine cleanliness and monitoring can strengthen the hospital's existing food safety framework.
Suggestions for improvement	• Continue reinforcing cleaning protocols with periodic internal audits and visible checklists. • Replace older storage infrastructure with stainless steel shelves to ensure compliance with the highest hygiene standards.

	• Maintain regular taste testing and food temperature checks before dispatch to patient floors. • Conduct refresher training for kitchen staff to promote best practices in food handling and hygiene. • Encourage a system of timely feedback from patients to improve satisfaction and service quality.
Plan for the next week	• Continue participating in food quality reviews and collaborate with the Dietetics team for enhanced patient meal experiences. • Visit the ICU and other critical care areas to personally interact with patients and collect direct feedback on the meals provided. • Observe how patient feedback is processed and applied for service improvement.

Reporting Format (Week-8)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:8 **From:**30th June 2025 **to** 5th July 2025

Activity Done	• Continued my internship in the Dietetics Department, which provided further exposure to patient-focused nutritional services. • Took rounds in ICU and general wards to directly interact with patients and gather feedback regarding food quality, temperature, taste, and overall satisfaction.
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	• Observed how individual diet plans are tailored for patients based on their medical condition, in collaboration with dietitians and treating doctors. • Followed up on earlier suggestions shared with the team; noticed that improvements such as better cooking consistency and cleaner surfaces had already been implemented. • Participated in a team review meeting with the dietetics and housekeeping staff to discuss feedback and day-to-day challenges. • Developed a deeper understanding of the importance of food hygiene, presentation, and patient engagement in overall hospital care.
Linking theory (Classroom learning) with practice at your organisation	• Bridged classroom learning with practical exposure to hospital food service and dietary planning, especially from modules like Hospital Support Services and Quality in Healthcare. • Understood how clinical diet planning works in practice, particularly for patients with special needs like diabetes, post-operative recovery, or renal conditions. • Gained practical exposure to how quality food service and hygiene contribute to patient satisfaction—an essential aspect of healthcare delivery.
Gaps identified on the working area.	• Some patients shared that the food could be more flavourful, though they appreciated its health benefits.
Suggestions for improvement	• Continue reinforcing cleaning protocols with periodic internal audits and visible checklists. • Minor flavour enhancements can be considered for certain meals without compromising dietary restrictions. • Improve interdepartmental coordination, especially between the dietary team and nursing staff, to avoid delays in food delivery.

	• Maintain regular taste testing and food temperature checks before dispatch to patient floors. • Encourage a system of timely feedback from patients to improve satisfaction and service quality.
Plan for the next week	• Have a detailed discussion with the Infection Control Nurse to understand hygiene protocols specific to food safety, kitchen audits, and how they align with infection prevention practices across the hospital.

Reporting Format (Week-9)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no: 9 **From:** 7th July 2025 **to** 12th July 2025

Activity Done	• Closely engaged with the Infection Control Nurse (ICN) and explored the key areas of infection prevention and hospital hygiene practices. • Reviewed multiple infection control tools and formats including daily device days, environment checklists, NSI logs, antibiotic usage forms, and blood discard records. • Observed the hospital's kitchen hygiene protocols, CSSD practices, and biomedical waste management system. • Reviewed the vaccination tracking sheets for various hospital departments including doctors, nursing, housekeeping, GDA, laboratory, and radiology staff. • Studied the WHO Patient Hygiene and Safety Observation Form used in patient care areas to improve hygiene standards. • Participated in infection control discussions and understood how the hospital ensures quality compliance through data-based surveillance and documentation.
Linking theory (Classroom learning) with practice at your organisation	• Connected theoretical concepts from <i>Infection Control</i>, <i>Hospital Support Services</i>, and <i>Quality Management</i> to real-time hospital implementation. • Observed how international standards (like WHO) and national benchmarks (NABH) are applied in structured formats across departments. • Learned how infection control is a continuous process that involves regular audits, staff sensitization, and system improvements.

Gaps identified on the working area.	• During vaccination record review, it was observed that a few newly recruited staff members were yet to be vaccinated, mainly due to temporary unavailability of vaccines at the time of their joining. Follow-up for completion is in progress. • In some departments, MSDS files were present but not prominently displayed, which could limit staff accessibility during emergencies.
Suggestions for improvement	• Continue expanding the use of the WHO observation tool for routine hygiene audits and involve more staff in the process. • Ensure timely follow-up and documentation for pending vaccinations and maintain a buffer stock to avoid delays in onboarding compliance.
Plan for the next week	• Join the ICN during ICU rounds to gain deeper exposure to infection control in critical care settings. • Assist the infection control team in updating and verifying vaccination records, focusing on pending follow-ups. • Begin drafting the final comprehensive report summarizing my 10-week SIP experience and department-specific observations. • Schedule a debriefing session with the ICN or Quality Head to validate learnings and gain final insights.

Reporting Format (Week-10)

Name of the Organisation: Indus Jaipur Hospital

Department: HR Intern

Name of the Student: Aditi Hawa

Roll no: 1893

Stream: MBA Hospital and Health Management

Week no:10 **From:**14th July 2025 **to** 19th July 2025

Activity Done	• Learned about the roles and duties of the Infection Control Nurse (ICN). • Accompanied ICN during internal audit rounds in multiple departments. • Visited OT and observed biomedical waste segregation and hygiene practices.
Linking theory (Classroom learning) with practice at your organisation	• Applied infection control concepts from Hospital Support Services and NABH. • Observed real-time biomedical waste management and OT protocols. • Understood the importance of audits and documentation in infection prevention.
Gaps identified on the working area.	• Incorrect biomedical waste segregation observed in some areas, poly bags did not match the bin colour code as per BMW guidelines. • In one OT, biomedical waste was not properly segregated. • A few GDA staff were unaware of the updated infection control protocols.
Suggestions for improvement	• Conduct random checks in OTs for BMW compliance. • Provide regular training to GDA staff on IC protocols. • Assign a staff member per shift to monitor BMW segregation in each department.
Plan for the next week	

Report Summary

Activity Done	• Conducted regular floor visits to the various areas of the hospital including the ICU, CCU, MICU, OT, General Wards, to observe the workflows, hygiene, infection control, and interdepartmental coordination. • Modified and implemented an Employee Satisfaction Survey and took feedback from the employees. • Helped and Supported new staff onboarding- verified documents, coordinated uniforms/ ID cards and the orientation support. • Worked at front desk for patient registration, appointment scheduling, and resolving RGHS scheme queries. • Handled OPD patient flow, and guided patients across departments. • Observed how communication impacts the hospital perceptions and service efficiency. • Observed hospital kitchen hygiene practices and meal consistency. • Collected patient feedback from ICU and general ward on food quality, taste, and satisfaction. • Participated in food audits, meal rounds, and team review meetings. • Accompanied the infection control nurse in daily quality check rounds. • Reviewed the Biomedical Waste practices, kitchen hygiene. • Visited Ots and ICUs to observe real time biomedical waste segregation and hygiene compliance.
Linking theory (Classroom learning) with practice at your organisation	• Human Resource Management, Organization Behaviour, and Employee engagement helped in real life experience with onboarding of new employees, staff documentation tasks, etc. • Essentials in hospital Services and Quality in Healthcare helped in the Kitchen audits, hygiene inspections, ad food safety evaluation done in the hospital. • Biomedical waste segregation and infection control: learned the real-life application of the NABH and WHO standard practices.
Gaps identified on the working area.	• No token/ digital queuing system was there which usually led to OPD overcrowding.

	• Patients earlier felt that food lacked flavour which was improved later with coordination with the dietetics/ kitchen department. • The GDA staff lacked training for the biomedical waste segregation in the Intensive Care Units and the OT area. • Material Safety Data Sheet was not promptly displayed.
Suggestions for improvement	• Launch regular feedback system for all the employees including the new joiners. • Display posters which give knowledge about the RGHS scheme, and the services provided by the hospital both in Hindi and English. • Install a digital queue/ token system to avoid overcrowding at reception and OPDs. • Make sure that the kitchen hygiene is maintained and taken extra care of in monsoon season. • Perform random biomedical waste audits in Ots and adding a compliance staff per shift. • Train GDA and other nursing staff members about infection control and biomedical waste segregation regularly.



