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Aarogya WeChaar

Shaping the Future of Healthcare Management

Multi-healthcare domain knowledge coupled with general management skills

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Healthcare IT
Medical Equipment & Supplies
Health Insurance
Healthcare Consulting
Lifesciences
Public Health

PGDM Healthcare Bi-Annual Newsletter

Edition 1 - June 2026

EDITORIAL BOARD

PROGRAMME VISION

To nurture healthcare management practitioners and thought leaders through inventive education

PROGRAMME MISSION

- Contemporary Education: To focus on inventive education by offering practical, innovative, and technology-driven healthcare management courses.
- Social and Economic Perspective: To instill healthcare and business management talent with a passion for learning, and the ability to critically analyze, and communicate while retaining values in a rapidly evolving economic and social environment.
- Industry Ready professionals and Entrepreneurs: To contribute significantly to the healthcare sector by preparing industry-ready professionals with a global perspective and encouraging entrepreneurship by leveraging stakeholders from the industry.
- Ecosystem to nurture leadership: To build healthcare management intellectual capital through faculty development, research, consultancy, and publication.

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Prof. Dr. Uday Salunkhe

Esteemed Readers,

We are happy to present you the first issue of Aarogya WeChaar, the bi-annual light of our PGDM Healthcare programme with pride and excitement.

As we embark on a transformative era in healthcare, where care is no longer just about intervention but a call to stewardship, this newsletter is a powerful reminder of our shared journey. Every edition is designed around a strong theme, sparks conversation, reflects progress and celebrates the inventive spirit that drives WeSchool.

This first theme — "Redefining Healthcare Management: People, Purpose, and Progress"— captures our belief in the elements of exemplary leadership: compassion, and a steadfast purpose, and a lasting impact.

This edition is alive with the intellectual energy of our PGDM Healthcare fraternity – a choir of voices from the students and the faculty, from the alumni and industry leaders, all tuned to propel change.

Aarogya WeChaar is not just a printed medium; it is a catalyst for convergence, enlightenment, and inspiration. It reflects the WeSchool vision of design-driven innovation, collaborative leadership, and a relentless pursuit of excellence.

My heartfelt hope is that you'll ponder, discuss, and collaborate to shape the next chapter in healthcare management as you journey through these pages, one thought, one idea, one edition at a time.

Hope it's a very fulfilling one for you.

Yours in visionary leadership,

Prof. Dr. Uday Salunkhe
Group Director
Prin. L.N. Welingkar Institute of Management Development & Research (PGDM)

Message from the Editor-in-Chief Dr. Anjali Kumar

Dear Readers,

It is my great honour that you are chartering this colourful newsletter as Program InCharge of PGDM Healthcare and Editor-in-Chief of Aarogya WeChaar.

This newsletter is not just a record—it's a canvas alive with the dreams of our students, the knowledge of our faculty, the legacy of our alumni, and the foresight of healthcare pioneers—all shaping the future of the field.

This edition embodies the rigor, creativity, and collaboration that exists throughout the hallways here at the University of Colorado Denver. Under the theme of "Redefining Healthcare Management: People, Purpose, and Progress", it is an intellectual treat. Each of our articles, designs and insights have been carefully developed, by our students, faculty, alumni, and industry friends for our collective future.

Aarogya WeChaar is not just a bi-annual release, it's a promise: to amplify voices, challenge assumptions, and inspire action. It reflects the DNA of WeSchool – bold thinking, empathetic leadership and purposeful innovation.

Thanks to the student editorial staff, contributors and mentors whose dedication and enthusiasm has been poured into this edition. To our readers: read, think, ask, and carry on the discussion that has been started here.

Make this the start of a powerful conversation to influence healthcare management for generations.

With optimism and resolve,

Dr. Anjali Kumar
Program In-Charge, PGDM Healthcare Management
Editor-in-Chief, Aarogya WeChaar
Prin. L.N. Welingkar Institute of Management Development & Research (PGDM)

PROGRAM EVENTS

ALUMNI INSIGHTS

Alumni meet was held on 8th October 2025 at WeSchool's Nirvana room. Alumni present were from Deloitte (Dr. Sheetal Sippy), IQVIA (Pratik Bhitale), Glenmark Pharmaceuticals (Aniket Narkar), and Sir HN Reliance Foundation Hospital (Anusha Kamodia). The objective of the Session was to deliver a practical understanding of career progression in the healthcare industry

CV Building

The session started with the alumni providing insights on CV Building, they emphasized that it is more than just a document; It's a professional identity. We were advised to build skills and align them with industry requirements, use a standard acceptable format and quantify our achievements. All of which are compulsory in the current job market.

The Alumni Session filled the gap between academics and industry. It enabled students to think practically and execute strategically. The event generated curiosity, adaptability and unwavering confidence among students. This opportunity elevated students with discipline and professionalism

-Ms. Tanushka Sisodiya,
Mr. Satchit Saraswati
(PGDM Healthcare Batch 25-27)

Beyond Academics

The alumni debunked the idea that internships and research projects are merely academic requirements. They are opportunities which demonstrate initiative. SOPs with industrial reality were focused on how a successful project can direct the whole interview.

Authenticity Matters

Students should use simple language to maintain credibility, clarity, consistency and conclusion (4C's). All of which should be presented with professionalism. We were told to refrain from making vague claims and using inflated language. The CV should be tailored to the domain of their career, aligned skillsets and error-free presentation truly matters, without which the profile will be overlooked.

BLOOD DONATION CAMP

- Mr. M. Amaan Kutiyanawala, (PGDM Healthcare Batch 25-27)

On 4th November 2025 a blood donation camp was organized at WeSchool in association with Kai. Wamanrao Oak Blood Bank, Thane. The program generated awareness on the value of blood donation, social responsibility, and volunteering among students, faculty and staff.

The reaction of the WeSchool society to this was astounding. Two hundred and eighteen donors, among them students, faculty as well as non-teaching staff, volunteered to give blood. The incident was an occasion where people demonstrated their unity and compassion for social service at the campus.

All medical and safety requirements were ensured under strict policy so that the donation be carried out under professional control by the representatives of the Kai Wamanrao Oak Blood Bank.

Donors were given refreshments and appreciation certificates as an appreciation of their donation.

The camp turned out to be a massive success that demonstrated WeSchool to be socially committed and acting on the behalf of the community. A significant amount of blood was collected from volunteers which would greatly benefit the patients. In volunteers it encouraged empathy and boosted the sense of serving their community.

YOGA FOR HEALTHCARE

- Mr. M. Amaan Kutiyanawala
(PGDM Healthcare Batch 25-27)

In the second trimester of the PGDM Healthcare program, students strengthen their mental acumen and physical stamina with specially designed yoga practice. Emotional resilience is also built into this program which is an important quality for future healthcare leaders.

In this session students were able to shake off a little of their academic stress and regroup with the reality of their bodies and inner peace. With that slices luck in mind, we passed through relaxation moments.

In the session, various yogic exercises were performed to enhance oxygen intake and vitality. Key exercises included Loosening, Suryanamskar, Ardhakathichakrasan, Vrukshasan, Vajrasan, Shashankasan, Ushtrasan, Padmasan, Bhujangasan, Dhanurasan etc.

The practice concluded with Patanjali Rishika Prarthana and peace descended upon all, so everyone was able to finish their practice filled with gratitude, tranquility and clear presence of mind.

Initiatives like this exemplify the program's commitment to educating students who are well-rounded and it also sends a powerful message to those students — you're never going to be able to take care of others if you can't take care of yourself first.

ACHIEVEMENTS

CII HOSPITAL TECH'2025

- Mr. Ansh Rastogi, Mr. Satchit Saraswati (PGDM Healthcare Batch 25-27)

The 8th CII Hospital Tech 2025 took place in Mumbai on September 10th and 11th, bringing people together to figure out how to get India's healthcare system ready for 2047. The big takeaway from the start was that we need to stop focusing so much on hospital buildings and start focusing on the actual patients. Dr. Ramakant Deshpande pointed out that the real challenge is closing the gap between urban and rural hospital networks to maximize accessibility.

When the conversation turned to insurance, the experts agreed that it needs to change. It was discussed that insurance companies and hospitals could work together to enhance patient care. Reports showed that many hospitals are now spending anywhere from 20% to 50% of their budgets just on IT. As AI is advancing in every sector, the proper training of staff to use it remains a major struggle.

On the second day, the discussion shifted to sustainability, or ESG. Dr. Karan Thakur from Apollo Hospitals explained that being eco-friendly isn't just about following rules—it saves money in the long run. By cutting down on energy and water use, hospitals can lower their costs while building trust with the community.

In the sessions on medical technology, the main advice was to take global ideas and adapt them for India. Shravan Subramanyam talked about "Bio-singularity," but the main point was that tech needs to be affordable and fit smoothly into how hospitals already work, rather than disrupting everything.

Finally, they tackled the workforce shortage. The panel noted that just having a degree isn't enough anymore; healthcare workers need constant training. They suggested using tools like VR and simulations to let students practice safely before treating real patients. However, Dr. Aruna Vanikar reminded everyone that while machines are great for training, they can't teach empathy, which is crucial for doctors. The event ended on a high note with students Aditi Kshirsagar, Atharv Kavthankar, and Varun Bothe winning a prize for their poster on future skills.

XLRI - HEALIX

- Dr. Ashwita Rao ,(PGDM Healthcare Batch 25-27)

Two teams from the PGDM Healthcare Batch (2025–27) earned the distinction of being finalists in the Healix – Healthcare Operations Ideation Challenge, conducted as part of OpsVision 2025 and organized by XLRI Jamshedpur. This national-level case competition brought together management students from leading institutions across the country to address contemporary challenges in healthcare operations and management.

Healix, organised by AXIOM (Association for Industrial and Operations Management), XLRI, serves as a premier platform for B-school teams to conceptualise and propose innovative, real-world solutions to critical healthcare operational issues. The competition is widely recognised for its emphasis on patient-centric care, healthcare supply chain resilience, and the integration of digital health technologies and analytics into operational decision-making.

Securing finalist positions at XLRI's Healix Operations Competition stands as a testament to the academic rigor, analytical depth, and innovative thinking demonstrated by the participating batch mates.

Their achievement not only brought recognition to themselves but also enhanced the institution's academic standing, inspiring peers to pursue excellence in both academic and professional domains.

Team Ethos emerged as the Second Runner-Up, with team members Vatsal Pandya, Swastik Khade, Durva Sankhe, Kanchan Rajput, and Shivam Chauhan. The team addressed the critical challenge of healthcare accessibility through their innovative solution, AyuSeva (Carepods).

Team WeHealix secured the 7th position among the Top 10 teams. Comprising Ashwita Rao, Aditya There, Shefalee Chaubey, Isha Kalyankar, and Mahek Porwal, the team focused on addressing cold chain inefficiencies in India's healthcare logistics ecosystem. Their solution, TempSafe, is an AI-powered Cold Chain Intelligence Platform aimed at minimising product degradation and enhancing supply chain standardisation and efficiency.

IIM PRODYSSEY

- Dr. Ashwita Rao, (PGDM Healthcare Batch 25-27)

IIM Prodyssey, organised by IIM Indore, is a national-level flagship case competition in product management, designed to attract visionary problem-solvers and strategic thinkers from leading management institutions across the country.

The competition comprises multiple competitive rounds featuring creative challenges and real-world business scenarios, rigorously testing participants' strategic planning, product lifecycle management, and decision-making capabilities.

A team from the PGDM Healthcare Batch (2025–27) participated in this prestigious competition and successfully advanced to the semi-final stage, marking a notable achievement in a highly competitive national forum. Participation at this level enabled the team to gain valuable exposure to contemporary product management practices, strengthen problem-solving and consulting-oriented thinking, and build meaningful networks with peers, industry professionals, and academicians associated with the IIM ecosystem and the product management domain.

The participating team, GenZ Managers, was led by Bhavana Gurram and included Sanjyot Shelke, Mrinalini Rajaraman, Varunraj Gharge, Kautuki Bhagat, and Brijesh Kukreja.

The team addressed a critical challenge faced by the MT-OER project, which experienced significant disruption due to the COVID-19 pandemic.

The cancellation of the in-person sprint resulted in technical bottlenecks, delayed reviews, and the risk of missing the August 2020 deadline for the release of a digital textbook.

To overcome these constraints, the team proposed a strategic shift to an agile, online execution model, narrowing the project scope to a Minimum Viable Product (MVP).

Through daily coordination and structured check-ins, the team ensured timely completion of essential content, enabling successful publication ahead of the Fall 2020 academic term.

CIPLA HEALTH LTD - IIT BOMBAY E-SUMMIT'25

- Ms. Divya Sadadekar, (PGDM Healthcare 25-27)

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AIMS ANNUAL MANAGEMENT EDUCATION CONVENTION 2025

- Ms. Divya Sadadekar, (PGDM Healthcare 25-27)

The prestigious AIMS Annual Management Education Convention 2025 lit up Siksha 'O' Anusandhan (SOA) University, Bhubaneswar from December 11th - 13th, hosted by the Association of Indian Management Schools (AIMS), Hyderabad. Centred on the bold theme "Management Education: India @ 2047", it explored how management education can propel India's growth over the next two decades.

Gathering top academicians, researchers, industry leaders, and students from India's leading institutions, the event sparked lively debates on building a future-ready workforce, resilient education systems, sustainability, and tech-driven change.

In the student research paper track, our very own junior batch students, Dr. Varun Bothe, alongside co-authors Ms. Eshika Kushwah and Ms. Mahek Porwal, unveiled their compelling paper: "Shaping the Future: Talent Development Strategies for India @ 2047". Guided by Prof. Chitralekha Kumar, Academic Mentor at Welingkar, the work dives deep into India's talent ecosystem.

Blending mixed-methods analysis, it spotlights gaps between education and industry needs amid megatrends like AI, digital shifts, green economies, healthcare evolution, and the gig boom.

The team scrutinized key initiatives such as Skill India Mission, PMKVY, Skill India Digital Hub, and NEP 2020, while crafting practical, inclusive strategies for a Viksit Bharat @ 2047.

Judges praised its rock-solid data, cross-sector insights (especially healthcare, tech, and green economy), clear problem-solving, and policy recommendations blending surveys with literature.

For its originality and impact, the paper clinched Second Prize in the Student Research Paper category, a testament to the team's rigor, teamwork, and PGDM Healthcare students' research excellence.

Participating in AIMS 2025 was truly enriching, immersing our students in forward-thinking discussions on management education and the power of research in shaping policy.

This recognition fills us with pride and motivates our team to continue advancing India's human capital vision for 2047.

IIM INDORE - VIGNETTE

- Mr. Ansh Rastogi, (PGDM Healthcare Batch 25-27)

Participating in Vignette, IIM Indore's prestigious national-level short film competition where, creativity meets craft, and storytelling becomes spectacle. They brought all the visionaries and creative heads together under one roof.

Selected as one of the finalist teams, our team was invited to the campus to create, shoot, and edit a 10-minute film within just five days. Strategic preparation was key to cracking this competition. Arriving a day early to scout the campus saved us a valuable amount of time. We chose a horror theme for our project, "The Hill Has Eyes."

Managing a 12-person team was a big challenge, especially when location restrictions forced us to change plans last minute. We had to rewrite scenes on the fly, which was a crash course in problem-solving.

All that preparation paid off in post-production. We used every skill we had—including recording original music—and ultimately took home 1st Place. Beyond the trophy, this project proved that with resilience and teamwork, we can handle any deadline.

INDUSTRY INSIGHTS

PEOPLE FIRST, ALWAYS: REDEFINING ORGANIZATIONAL EXCELLENCE IN HEALTHCARE

Mr. Krishnan V.

Chief Operating Officer
Raman & Weils

"In the dynamic and demanding context of healthcare, achieving excellence as an organization starts with the following idea: 'People first.'" Being "people first, always" translates into treating patients, workers, and communities, who lie fundamentally at the heart of any healthcare strategy, instead of functioning exclusively with profit and processes. By designing healthcare strategies based on human needs, it is enabled to design safer systems, better experiences, and more sustainable performance, going back to Rogers' principles of humanism, as outlined through his theory of person-centered psychology.

People at the heart of care

Health care is ultimately a human service needing the 'spirit' of the 'Hippocratic oath,' where understanding, empathy, and communication rank along with clinical skill. Person-centred theorists like Rogers strongly emphasize the role of empathy and unconditional positive regard practices by the counselor for the benefit of the client. These notions later formulated the framework for contemporary patient-centred care. A people-first orientation involves patients as partners and helps them make choices that ultimately enhance health outcomes.

However, this culture also understands that the same providers require psychological safety, equity in their workload, and support at the management level to deliver patient care. Research has indicated that when these individuals feel valued, have their voices heard, and feel empowered, there will be a significant increase in their patient-focused behaviors. Put differently, the well-being of patients will be protected through ensuring the well-being of the nurses, doctors, and other staff.

Redefinition of Excellence beyond

Usually, in healthcare organizations, success is determined on the basis of financial factors, bed occupancy rates, or technology improvements.

A people-centric outlook widens the success formula to include patient-reported outcomes, employee engagement, equity of access, infection control and prevention, and community effects.

By integrating the success factors with their business strategy that focus on people-centric factors, healthcare organizations can still record good financial success not necessarily in spite of people but because of people.

Organisational psychologists have suggested the culture within organisations operates as a 'silent performance system'.

Multilevel analyses have demonstrated the promotion of a patient-centred organisational climate can improve clinical staff's confidence in communication with patients, which in turn positively impacts experience.

By reconceptualising success using a people-centric understanding, success itself is reframed in the way it is both determined and accomplished.

Modeling a leadership approach of 'people first'

The process of culture change calls for leaders who are empathetic, transparent, and accountable with their culture on a day-to-day level. The most recent trends in leadership theories within health care circles emphasize the importance of intertwining strategic skills in health care leadership with humility and a genuine concern for health care workers and patient welfare.

There are encouraging instances from outside the healthcare sector. The manner in which the Taj Group handled the 26/11 crisis is one such example that showcases what happens when the service habit is instilled within employees. Employees become quiet heroes if they are trusted, empowered, and encouraged to make decisions for people.

New roles and approaches to leadership help embed this philosophy. There are new roles like the Chief People Officer or the Chief Wellness Officer: people who take culture, and people and psychological safety, front and centre. Organisational approaches to person-centric care maintain the focus on doing the right thing, like co-designing with patients and letting the frontline staff into decision-making, rather like seeking the views of the people operating the machines on the shop floor before rethinking the process. This embeds "people first" thinking into everyday life.

Creating people-centered systems

"People first, always" is more than just a mindset; it also has to be coupled with enabling systems and processes in place. Studies on person-centered health systems reveal how interprofessional teams, communication channels, and technology facilitating greater access and continuity in care all contribute to delivering person-centered care.

Ongoing learning in communication, ethical decision-making, and cultural competence further prepares practitioners to deal with differing needs in a compassionate manner. For readers of a business magazine, these points have relevance. Organisational psychology has shown repeatedly that people-centric organisational cultures excel in terms of innovation, crisis response, and adaptability.

As future managers, it is imperative that this decision remains both a moral imperative and a shrewd reinvestment in terms of prioritising people. This approach offers the greatest potential in redefining excellence in any organisational setting in healthcare, thereby ensuring that healthcare itself focuses on curing illness, but also on imparting sustainable opportunities for wellness in every life it touches. At the end of every effort, "In healthcare, metrics matter—but how people feel matters the most."

BEYOND THE BALANCE SHEET: WHY HEALTHCARE'S TRUE NORTH IS SOCIAL IMPACT

"The idea that some lives matter less is the root of all that is wrong with the world."

— Dr Paul Farmer,
Global Health Leader & Co-founder,
Partners In Health

Mr. Atin Roy

Senior Vice President
Ogilvy

A few decades ago, a certain word began to circulate in the atmosphere of global branding and marketing: Purpose. And although it was not a new word, it invigorated many corporate entities across industries to start thinking about "Leadership Beyond Profit". And nowhere is it more profoundly relevant than in the healthcare industry.

Innovation and Profit: Healthcare's Historical Drivers

The narrative around healthcare companies has been framed almost exclusively by breakthroughs in science and the accompanying financial returns. This direct relationship between innovation and profit is also fundamental for any enterprise's existence. For example, at the beginning of the COVID-19 pandemic, Pfizer had invested a huge, undisclosed amount towards vaccine development without knowing if that would yield any results. Eventually, the investment paid off, and Pfizer made billions of dollars in revenue during both 2021 and 2022, fuelled by massive COVID-19 vaccine sales.

The Evolving Demand: Beyond Financial Returns

However, today's connected, informed and demanding world expects more. Consumers, employees, investors and even regulators are now asking: "You are doing good, but what good are you really doing?" Going back to our example, Pfizer later got a lot of bad press and was sued several times for putting profits ahead of saving lives when it first sold its vaccines to rich countries. What does "Leadership Beyond Profit" mean? "Leadership Beyond Profit" does not mean giving up profits for the sake of helping others. On the contrary, it is about recognising how deep and authentic social impact has become a powerful engine for sustainable growth and unwavering brand loyalty. It is about understanding that the pursuit of a healthier planet and healthier populations isn't just morally commendable; it is also an excellent business strategy.

Johnson & Johnson: Building Foundational Health Capacity

More than 100 years ago, Johnson & Johnson made a commitment that continues today to always prioritise the needs of their customers and the community. They do this through the implementation of specific, purpose-driven initiatives that demonstrate this belief. Some of these initiatives focus on establishing global capacity within under-resourced communities by enhancing healthcare delivery through providing training and support to frontline healthcare professionals instead of just selling products.

As a result, they create many more opportunities for both the current population and Johnson & Johnson's future client base.

Philips: Innovating for Sustainable & Accessible Health

Philips is a leading company in healthcare technology. In addition to creating innovative solutions for healthcare, Philips is also responsible for developing solutions that reduce their carbon footprint, along with developing sustainable solutions for the healthcare industry. Philips has also developed Telehealth and Remote Patient Monitoring technologies to improve access to healthcare for people in areas that have limited access to care, as well as democratizing access to critical diagnostic testing for underserved populations.

Roche, as a leader in oncology, is committed to improving the lives of cancer patients, which includes ensuring that patients have access to their medications. Roche's patient advocacy and access programs help reduce the time it takes for a patient to receive a diagnosis and to start treatment for cancer, especially in low-resource countries, and often by using mobile diagnostic units and by training local healthcare professionals.

Roche also works to reshape the entire cancer experience, from screening to survivorship, by focusing on the impact of delayed diagnosis on patients and the overall cost of cancer care to society.

The 'Secret Sauce': Authenticity and Integrated Impact

It's evident that these organisations are not only making an impact on their balance sheet, but they are also creating a societal impact. It's about being authentic, being integrated, and having the ability to measure results. These organisations have a philosophy of working for human welfare that is incorporated into their core mission and their business strategy; therefore, philanthropic gestures are not merely done to comply with regulatory requirements set by the government.

These organisations have built their brands based on the belief of creating value for all people while also providing tangible benefits to communities. This not only helps them develop long-term brand profitability but also increases the value of brand equity that can withstand fluctuations in the market.

It helps attract and keep top-tier talent who want a purpose-driven career. And it meets the needs of today's new-age regulators, investors, and government officials who put high on their agendas Sustainability, Ethics, Social Responsibility and Governance (ESG) when deciding where to invest or how to regulate.

Therefore, the Leadership Beyond Profit ideology is no longer a lofty, purpose-driven ideal exclusive to healthcare companies; instead, it has become a valuable point of reference for every company in the world looking to add social impact to their brand value.

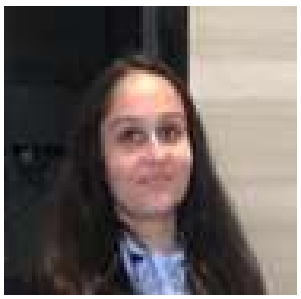
Companies that adopt Leadership Beyond Profit today will be tomorrow's leaders in the way they build equity through the establishment of brand love in an increasingly socially-aware and purpose-driven world.

ALUMNI SPOTLIGHT

PURPOSE-DRIVEN PRACTICE: APPLYING MANAGEMENT LEARNING TO REAL-WORLD HEALTH CHALLENGES

"Technology is best when it brings people together."

— Matt Mullenweg



Ms. Anusha Kamodia,
PGDM Healthcare (2018-2020)
Senior Application Specialist,
Sir H.N. Reliance Foundation Hospital & Research Centre

The journey from academic learning to executive decision-making in healthcare is no longer linear—it is dynamic, demanding, and deeply purpose-driven. For me, the shift from the classroom to the boardroom has always been anchored in one belief: technology should enhance the human experience of care, not complicate it.

At Sir H. N. Reliance Foundation Hospital, I have had the privilege of working at this very intersection, where digital innovation, operational excellence, and compassion come together to redefine what leadership means in a rapidly evolving healthcare ecosystem.

As a Senior Application Specialist, my role has grown far beyond system support. Every project I have undertaken has required strategic thinking, cross-functional collaboration, and a deep understanding of how technology directly shapes the quality of patient care. One of the milestones that continues to inspire me is my contribution to the award-winning Nutrition Patient Meal Dashboard. What started as a technical upgrade became a transformative approach to dietary services—introducing automated adjustments, personalised diet plans, and real-time visibility that strengthened operational tracking. Seeing this initiative directly support patient recovery reaffirmed my belief that even backend systems, when reimagined, can deliver front-line impact.

The opportunity to lead technical aspects of the E-Care Network project further expanded my understanding of purpose-driven innovation. Implementing a platform that connected specialist expertise to remote and underserved regions demonstrated how digital tools can dissolve geographical boundaries and bring equitable care within reach for many. Being part of this initiative reminded me that the true value of innovation lies not in complexity but in the access it creates.

My work in radiology has also been an essential part of my journey. Integrating Dental CBCT and OPG imaging with GE PACS, bringing eight teleradiology sites into a unified system, and overseeing upgrades and data migration demanded precision, patience, and system-level thinking. Achieving seamless transitions with zero disruption ensured that clinicians could rely on timely, accurate diagnostics—because at the heart of every scan is a patient waiting for answers.

Strong governance and quality assurance have been equally important. Supporting JCI and NABH audits required meticulous coordination across departments, reinforcing the culture of excellence that the hospital upholds. Leading data mapping efforts for DPDPA compliance further strengthened our digital ethics and commitment to secure, responsible data

practices—an increasingly critical area in modern healthcare.

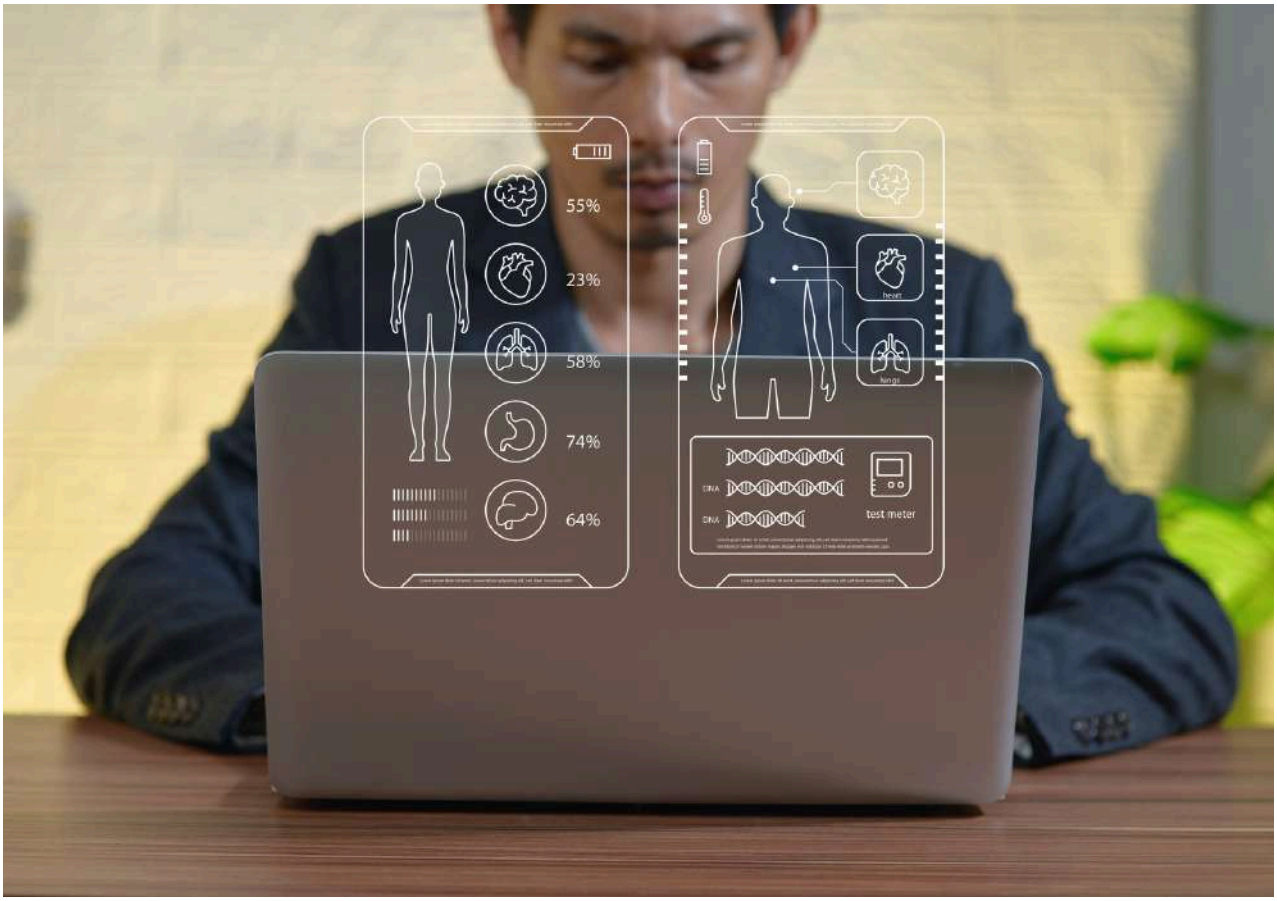
Empowering frontline teams has been another aspect of my work that I hold close. Implementing Dozee, a contactless vitals monitoring system, brought safer and more efficient monitoring into daily care routines. Facilitating speech-to-text documentation through Augnito helped clinicians reduce time spent on manual reporting, letting them focus more on what mattered most—patient care. Each of these initiatives reminded me that improving care is often about improving the tools that empower those who deliver it.

My role in scaling radiology and diet services to the Jamnagar site strengthened my ability to maintain consistency across locations without compromising on quality. Similarly, integrating AI-driven tools such as RapidAI, NeuroQuant, and Avanttec into PACS positioned our organisation to leverage advanced diagnostics for faster, more accurate decision-making.

Across every initiative, one thread has remained constant: a commitment to leadership rooted in innovation, collaboration, and purpose. From my early academic foundation in healthcare management to my current role shaping strategic decisions, the journey has been about much more than professional progress—it has been about contributing meaningfully to a system that touches lives every day.

Healthcare leadership today demands vision, adaptability, and a willingness to challenge conventions. As I continue this journey, I remain committed to embracing technologies that empower people, improve outcomes, and uphold the dignity of every patient we serve.

Because the future of healthcare will not be defined solely by digital transformation—it will be defined by how compassionately and intelligently we use that transformation to elevate human well-being.



STUDENT CORNER

WHY THE 5% GST CUT ON MED-TECH MATTERS?

Mr. Ansh Rastogi

PGDM Healthcare Batch 25 -27

We get so caught up talking about healthcare in terms of massive budgets and supply chains that we forget the obvious: for most of us, the reality of healthcare is the price tag at the chemist. That's why the government's move to drop GST on basics like thermometers and diagnostic kits to 5% feels like a real win. It's not just policy on paper; it's actual money saved. It finally recognizes that managing our health doesn't begin in a hospital ward—it starts right in our own living rooms.

The Economics

For us management students, this serves as a lesson in price elasticity. The working is straightforward: by lowering the cost barrier, the policy effectively puts health monitoring into the hands of more people. Ashwin Sapra, a Partner at Cyril Amarchand Mangaldas, summed it up well. He pointed out that this is a 'welcome measure' precisely because it eases the financial burden on items people use every single day. Think about the cumulative cost for a family managing a chronic condition like diabetes or hypertension. These small costs add up to a lot. A tax break here isn't just a saving; it's financial breathing room. Sudarshan Jain (Indian Pharmaceutical Alliance) seconds this, noting that the move brings "direct relief to patients." It's patient-centric economics in action, putting money back into the consumer's pocket, which can then be redirected toward nutrition or better treatment compliance.

The strategic pivot towards prevention

From a strategic standpoint, this is a long-game play. Ameera Shah, President of NATHEALTH, points out that this reform validates the critical role of preventive health. When diagnostic kits are affordable, people are "reactive" more likely to monitor their vitals. We move from a " healthcare model (treating the sick) to a "proactive" one (managing wellness). For the national healthcare infrastructure, this could mean significantly less pressure on hospitals down the line.

The Takeaway

That said, there is often a massive gap between announcing a policy and making it work. It's the classic Operations Management dilemma. This tax cut is a great start, but it won't fix the system overnight. The success of this move really depends on whether the market steps up. We need to make sure the price drop reaches the consumer and doesn't just add the profit margins of middlemen. We also need to close the knowledge gap—people won't buy tools they don't think they need—and prevent the 'WebMD effect' where self-monitoring leads to panic rather than prevention.

Ultimately, the 5% rate is a victory for all stakeholders. It's proactive and necessary. But as future business leaders, our job is to look past the announcement and focus on the implementation to make sure the policy delivers on its promise.

DIGITAL EVOLUTION IN INDIAN HOSPITALS: A PATH TO SMART AND EFFICIENT CARE

Dr. Ashwita Rao

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Batch 25-27

As part of our PGDM curriculum, we went on a hospital visit, where an observation led to the realization that there is some reluctance to switch to digital health in India. The term "digital health" describes technologies comprising mobile health applications, electronic health records (EHRs), telemedicine services, mHealth, wearable devices and biosensors, robotics and artificial intelligence (AI), cloud computing, Internet of Things (IoT), augmented reality, virtual reality and deep learning. Digitalization of the healthcare industry in India has numerous benefits including better disease surveillance, better preventive interventions, and stronger community health initiatives. As humans have evolved, digital innovation and its incorporation into various aspects of our lives have become inevitable. Its integration with our health and other systems is irrefutable.

Many healthcare systems operate under persistent workforce challenges, including staff shortages and clinician burnout. In this context, technology has emerged as a critical enabler in supporting healthcare delivery and alleviating operational pressures. Global insights from recent studies on digital transformation indicate a strong consensus that the integration of digital tools is increasingly essential for organisational effectiveness, with many institutions already reporting tangible returns from their investments in digitalisation. In India, there is a growing acceptance of digital health solutions among patients. A substantial proportion of individuals with access to digital health records express a preference for their healthcare providers to use these records in clinical decision-making. Similarly, patients demonstrate considerable comfort with receiving medical advice through mobile health applications, reflecting a broad willingness to adopt telehealth services and leverage their potential benefits.

Today, where the world is adopting AI to eliminate all the mundane tasks and accelerate processes, our country needs to progress towards complete integration of digitalisation in the healthcare industry. As of February 2025, about 73.98 Cr ABHA (Ayushman Bharat Health Account) has been created in a population of 121 Crore (as per 2011 Census). Many of our health records, especially in rural India, are still not digitalized. While the issues related to data privacy and security breaches due to digitalization are being addressed, the infamous COVID 19 situation was a wakeup call showing why it's the need of the hour for greater adoption of digitalization. We've come across various uses of AI and digitalization, and yet we are majorly lagging when it comes to its adoption and execution, as is reflected in the statistics. The success of major projects of India like Medical tourism, One Nation One Health, Ayushman Bharat Digital Mission, etc., all rely on how well we adopt digitalization in our healthcare system.

Our nation's dream of 'Viksit Bharat' also includes the vision of a technology-driven healthcare system to improve the access and provide quality and affordable care. But a nation is only as great as its citizens and not just the leader. Being open to this transformational idea, and encouraging everyone from the healthcare workers to the citizens, should be our goal. Hence, it is paramount that we work towards implementing digitalization in the healthcare industry in India, which has the potential to completely transform the landscape of preventive and social medicine.

NURTURING HEALTH FOR TOMORROW

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The moment you hear about health for tomorrow, it is natural to expect thoughts about AI/ML or other tech-savvy innovations that will transform healthcare 360 degrees in the future. However, if we look at the current 2024-2025 news and scenario across India, we see nothing short of a revolution happening slowly and steadily. Nurturing health is no longer just about curing diseases; it has become a fight and a voice for accessibility.

The most significant recent shift in Indian healthcare hasn't come from technology but from public awareness. Consider the recent victory regarding Oral Rehydration Solution (ORS). For many years, beverage companies have been selling sugary drinks or juices under the name of ORS, misleading millions of Indians. These drinks often worsen children's health and cause diarrhoea due to their high sugar content. A high appreciation is due to the 8-year-long battle waged by Dr. Sivaranjani Santosh and the highly public-active people on social media. Finally, the FSSAI cracked down on these misleading products. Additionally, the fight for healthy drinks was sparked by Food Pharmer (Revant Himatsingka), who insisted that the ministry advise e-commerce platforms to remove sugar-malt-based beverages from the health drinks category. These events signal a new era: Indian consumers are now reading the back of the pack.

While such challenges have been increasingly observed in urban healthcare settings, the expansion of the Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) has marked a significant step forward in improving access to affordable generic medicines. The growing network of Jan Aushadhi Kendras across the country, along with ambitious expansion goals, reflects a concerted effort to reposition quality healthcare as an accessible public good rather than a luxury reserved for a few.

Complementing this initiative, the Ayushman Bharat Health Account (ABHA) is transforming the management and portability of health data in India, much like how UPI revolutionised digital payments. With ABHA, an individual's health records remain accessible irrespective of geographic mobility. Whether a person migrates to Mumbai for employment in a corporate office or works as a daily wage labourer, their health information seamlessly accompanies them, enabling continuity of care and reducing disruptions in healthcare access.

To conclude, India's healthcare sparks brightest through everyday heroes, thoughtful buyers who make sure to read labels, families choosing affordable generics, and responsible voices demanding real accountability. These build the trust and access that technology alone cannot create. While Artificial Intelligence, Robotics, and ABHA bring incredible speed, the revolution truly takes place when humans lead, letting innovation lift everyone with genuineness and fairness.

SHAPING TOMORROW: HOW SUSTAINABILITY AND ETHICS GUIDE HEALTHCARE LEADERSHIP

Evolving Role of Healthcare Leadership

As sustainability and ethics are becoming critical components of how patients will receive the highest level of quality care in the future, there has been tremendous growth and evolution in leadership within healthcare systems. Globally, health systems continue to be impacted by an increasing prevalence of climate change threats, shortages of human (natural) resources, and pressure to operate in an ethical/ sustainable manner. As such, healthcare leaders need to take a broader approach when addressing health issues. In addition to treating illness, healthcare professionals are now required to also consider how their healthcare systems affect the population they serve. Therefore, leaders must take the responsibility for protecting and preserving healthy communities that support health overall.

Environmental Responsibility in Healthcare

Considering the rapidly changing health care industry, the intensive use of resources to sustain their operations has created a significant amount of biomedical waste. If healthcare organisations do not manage their environmental footprint appropriately, these practices will contribute to pollution and damage to the environment. This will ultimately endanger human health in years to come. Since the ultimate objective of healthcare is to provide protection for life, the healthcare industry's responsibility toward sustainability is a greater ethical obligation than that of other industries. Therefore, aspects of optimal patient care can be defined by minimising waste, implementing appropriate disposal methods of hazardous materials, and procuring goods and services from environmentally responsible suppliers.

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Ethics in Sustainable Decision-Making

Ethics is an important element of this work as it ensures that sustainability decisions are made so that patient safety, equity and trust are upheld. Transparency is essential in how organisations will implement sustainability for the benefit of patients and staff. Neither should the consideration of clinical safety be sacrificed by using eco-friendly materials, nor should cost- saving sustainability measures limit the ability of patients to access necessary services. Procurement processes will need to consider the environment, as well as the labor rights and quality of products, in the procurement of greener components to ensure that global supply chains remain fair and humane for all stakeholders.

Digital Health and Ethical Challenges

Digital health further complicates this obligation. While AI technology, remote monitoring and electronic health records will provide numerous benefits to improve outcomes and save resources, these technologies also present ethical challenges such as informed consent, bias and privacy issues. A successful use of digital health technologies is based upon using these technologies in a manner that 1) safeguards patient data; 2) communicates transparently; 3) ensures that technology will complement compassionate care and not replace it.

A Future-Ready Leadership Model

Sustainability and ethics, when combined, creates a leadership model that is socially responsible, future-ready and aligns with the mission of healthcare. Incorporating sustainability and ethics into everyday decision-making will assist healthcare organizations to reduce long-term risks, promote the well-being of staff, enhance the public's trust, and create a safer work environment.

In conclusion, healthcare systems that value ethical integrity and have a commitment to environmental stewardship are positioned to care for all people today and in the future.

Strengthening these pillars is accompanied by an emphasis on measurable accountability.

Healthcare leaders must put in place clear sustainability indicators, ethical compliance audits and public reports so that they can track the progress of their organisations. Incorporating these sustainability and ethical indicators into organisational performance establishes that sustainability and ethics are not one-time commitments; rather, they are ongoing commitments for which management will hold their organisations accountable. This will create a trust-based, long-term commitment and a transformative experience for the system.

REIMAGINING PURPOSE IN HEALTHCARE INSTITUTIONS: BALANCING CARE AND COMMERCE

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The healthcare system in India is currently at a pivotal point. There has been an unprecedented influx of capital from investors into the healthcare field, with a tremendous amount of hospital growth occurring. The question now is how we can care for our patients with the same values as when our focus was on providing the highest level of care while still benefitting from the financial efficiencies derived through commerce.

India's private healthcare sector is experiencing a phase of rapid expansion, supported by strong financial performance and sustained revenue growth among leading hospital groups. Consistently healthy operating margins over successive years indicate improving scale, efficiency, and rising demand for private healthcare services. This continued growth is being driven by capacity expansion, consolidation through mergers and acquisitions, and increasing investor confidence in the sector. Private equity participation, in particular, has played a significant role in accelerating industry growth, reflecting strong expectations around the long-term potential and resilience of India's private healthcare ecosystem.

The government and public systems matter because they help ensure fair access for all. Evidence from both the National Health Accounts and governmental agencies shows significant investment in the public sector and highlights the continued burden of out-of pocket costs which patients bear. This reminds us that simply increasing market share will not be enough to create affordable healthcare. There is an opportunity and a risk associated with having both commercial momenta, on one hand, and a G3 - Unmet Public Need, on the other. You can now provide bed capacity, technology, and specialist services into smaller cities with private capital. Because of this there is an increase in the capacity of beds, the introduction of higher-cost procedures closer to patients, and the reduction in loan traffic to Tertiary Centres through strategic acquisition and capital expenditure. On the flip side, however, if you continue to commercialise health care, you will favour more profitable high-cost procedures, create larger access disparities between urban and rural areas, and place added financial stress on families.

So, what actions are recommended for institutions? First, set up measurable policies within their mission statements that include commitments to provide Emergency Services, subsidised beds, and transparent pricing as part of their business plans and watch them publicly. Secondly, create partnerships with Government to contract for National programs, provide training for allied health personnel and utilise data to enhance System-level Planning. Finally, adopt Value-Based Care models in which payments are made based on Outcomes, not Volume. This aligns the best interests of patients with the financial sustainability of the institution.

Commerce is a necessary but powerful vehicle for all that we do, and it's not 'the end game'. "It's a tool." We need to construct a governance model within healthcare; whereby healthcare institutions are compelled to place a higher priority on people than profits and create transparency and accountability in making this decision. By setting up governance policies that tie private capital growth with specific social and accountability outcomes, Indians can maximise their ability to use capital to increase access to healthcare, while also keeping the sanctity of the healing arts.

TREATING THE UNTREATABLE

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Imagine that you are getting a scan at the hospital and it turns out that you have cancer, which unfortunately cannot be treated. Perhaps the cancer has spread too much, or it's located too close to a critical organ structure and it's too risky to be operated. For example, the tumour being located close to the portal vein, largest blood vessel supplying the liver, and if this vessel is damaged, there's no going back. So that means palliative care, chemotherapy and a life expectancy of maybe half a year. A sad story. Perhaps.

Perhaps not. Thanks to technology, something extraordinary can happen. A miracle of a kind. Our understanding of human medicine and treatment has increased life expectancy from less than 50 years to 73 years. Still, there are several diseases that cannot be treated. As an example, the survival rate of liver and bile cancer is very low.

Many surgeries are deemed too risky to perform. It's not necessarily because the condition is untreatable, but because the procedures themselves are extremely complex. Suturing or sewing intestines or very thin blood vessels is incredibly challenging, as even the steadiest hands can tremble.

Now think of how a robot operating a colorectal cancer patient is currently making it possible to do microsurgery through a small keyhole that would otherwise require open surgery. In early clinical use, the use of AI can predict the risk of breast cancer years before a diagnosis. And this leads to a better screening, and a much earlier diagnosis, and a much better treatment. In hospitals as well, AI assists radiologists in seconds to determine whether a patient has a bone fracture or not.

Surgical robots are classified in level 0 to 5, depending on their level of autonomy. This is very similar to self-driving cars. Most robots are remote controlled by a surgeon. And the most advanced robots now are at level 3, which means that they are still remote controlled, but they can do some tasks automatically. And this robot here can perform very precise movements inside of the body. Now they are becoming a lot more advanced and mainstream. More than 20,000 robots are being used worldwide. And these numbers are growing rapidly. Preliminary results have demonstrated that supervised autonomous procedures can outperform surgery performed by expert surgeons. So, the robots are not only catching up with humans, but they are also getting better in some cases.

So, with that in mind, I will conclude with an open question for the audience. Something to think about. Who would you like to operate on you? A human or a robot? Thank you.

DIGITAL HEALTH AND HUMAN TOUCH: FINDING THE RIGHT BALANCE

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What if, instead of going to a clinic having human physicians, you attended a clinic where all the physicians had been replaced with machines? These machines would be able to check your vitals, write prescriptions, perform medical procedures, and, of course, play the role of a doctor. This may sound like a fictional, futuristic dystopia, and not all of us are yet ready to consider a doctor as a robot. However, we are closer to this than we may realize. Most people do not realize the impact AI currently plays in the healthcare ecosystem.

The role of artificial intelligence has already become significant not only in medical diagnostics and drug development, but also in personalizing treatment options, assistant services, and even gene repairing. The effect of technology has been radical, and although the technological progress should allay the dystopian anxieties, the fact is that we are still a long way from a tech dominated healthcare ecosystem. Nevertheless, technology, however amazing, is unable to provide the human warmth and compassion that a doctor and nurse can. Healthcare is not only about technical competencies, but it is also an emotional service. A patient's relationship with their healthcare provider is often the key to determining the tendency of a patient to stay consistent with his/her treatment or respond to it positively. This relationship is built on the principles of trust, empathy and understanding the context of a patient's life, the features that digital health solutions can hardly replicate.

The definition of human touch in health care settings isn't just the healthcare providers interacting with us physically. It is also how they communicate, relate and connect with us. Human beings not only seek the services of the healing professions in treating their illnesses but also emotional support and counselling. Also, human judgment is vital in the process of making a patient care decision since, even though machines are excellent at processing information, they are incapable of dealing with the intricate ethical, rational, and emotional concerns that will emerge in the medical profession. Physicians and nurses make careful, informed choices employing their education, experience, and their knowledge of the specific situation of each patient.

Therefore, it's high time, we stop comparing AI and humanity in healthcare and start integrating the two. To strike the balance, one will need to devise a workflow that is highly innovative and has the focus on the patient: one that incorporates the AI and telehealth and other digital tools to augment, but not to replace the human presence in the care; and a comprehensive staff training: the training that puts the accents not only on the tools that can and do become technical, but also on the way to maintain meaningful engagement with the patient. Finally, one needs to promote Digital Literacy among patients by providing patients with the needed information and tools to alleviate anxiety and enhance interest.

AI can be used to bridge any gaps that are present within the healthcare system. Nevertheless, there should be a reasonable application of AI to preserve empathy, which forms the core of health care, making it a human sector. The more human- the more efficient. This is the other side of the digital health care systems' design that balances the effective use of health care technology.

TECHNOLOGY WITH A HEART

Using Innovation to Strengthen Human-Centred Care Modern medicine is trying to merge speed and kindness. Hospitals are chasing faster delivery of services, adopting software to aid in diagnosis, medical records storage. Hospital pharmacies are also continuously trying to digitalize their operations for the betterment of patients. Introduction of such technology can help doctor and other medical professionals pay more attention towards patients. In India there have been such cases where the adoption of technology has strengthened the bond between doctors and patients.

Apollo Hospitals demonstrates this by partnering with Medtronic to run software that reads CT scans and MRI report of patients in approximately 2 minutes. The faster analysis lets the treatment start sooner and every minute here is crucial for the survival of patient. Aravind eye care also has set up its rural vision centres in villages across Tamilnadu. The absence of ophthalmologist has resulted in an increase in cataract, glaucoma and diabetic eye cases. The rural vision centres take photos of retinas and share them with doctors in town via internet. The doctor then reviews and provides a suitable treatment plan for the patient.

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Today humans rely on machines to monitor their health vitals. Sensors to record weight, measure Blood pressure or sugar levels etc. A doctor can see his patient's vitals while present in his clinical settings. If the software/system used by the doctor finds any abnormality, then the doctor's team contacts the patient and books an appointment. This prevents the patient from experiencing any unknown health hazard.

For us to utilize technology for human centered care it is essential for us to follow ethics with care. We must ensure that the widely used digital tools in healthcare are available in villages, in homes with little income and to older patients who need the most care.

No device replaces the clinician who listens, understands the feelings and deciding what is best for the patient. Patient data also needs to be protected and without consent should not be accessed by any doctor. Any use of the patient data should be done with the patient's knowledge.

As we progress in the future, the aim should be to balance empathy and speed where innovation and invention grow with kindness. Technology should be used with compassion so that it stops being a machine but a caregiver's own hand.

FACULTY FOCUS

THE EVOLVING ROLE OF HEALTHCARE MANAGERS IN POST-PANDEMIC INDIA

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The COVID-19 pandemic also marked an iconic moment in the history of the Indian healthcare system that revealed issues in infrastructure, supply chains, digital preparedness, and workforce resilience. The position of healthcare managers in India has changed significantly in its aftermath. They are no longer perceived as administrators but as strategic leaders who are required to reinforce systems, facilitate innovation and guarantee readiness in case of future health emergencies.

One of the most important transformations has been the dislocation towards crisis-responsive and strategic leadership. The Indian healthcare managers had to cope with a high number of cases and low number of personnel, oxygen and other essential materials, employee burnout, and evolving policies by central and state health bodies during the pandemic. This experience compelled managers to acquire greater skills in risk management, scenario planning and coordination across organizations. They are supposed to institutionalize such learnings today through the development of strong emergency operation strategies, reinforcing partnerships between the public and the private sector, and building of the resilience of the long-term health system.

The increased momentum towards digital health change is another phenomenon increasing faster in India, mainly due to such initiatives as the Ayushman Bharat Digital Mission (ABDM), teleconsultation, and eSanjeevani. Due to this, healthcare managers now have to move through digital ecosystems, interoperability of digital health records, establish cybersecurity practice, and incorporate telehealth into the regular care mix. They are also the key players in providing digital literacy training to doctors, nurses, and administrative staff to make use of technology a non-discriminatory and user-friendly process. Digital leadership is now an unavoidable part of the administration of the Indian hospitals and government health programs in the modern context.

Another area of concern in the evolution has been workforce management. The pandemic revealed gaps in clinical and non-clinical work as well as burnout among frontline workers that have become the focus. Healthcare managers in India need capacity building and skill-enhancing, employee welfare, and new staffing patterns after the pandemic. Multidisciplinary workforce planning is also necessary because of the emergence of such roles as infection control officers, telehealth coordinators, and data analysts. Managers are also being increasingly called to practice a people-focused approach- to develop empathy, communication and psychological safety culture.

Oxygen crisis of 2021 revealed the weaknesses of India in procurement and logistical infirmness. This means that the contemporary healthcare management needs to enhance resilience of supply chain, diversify suppliers, use real-time inventory management, and exploit predictive analytics to prevent shortage. Most hospitals are currently spending on local oxygen supply, cold-chain, and electronic monitoring of inventory-efforts, which were mainly initiated by managerial leadership.

Healthcare managers are also needed by post-pandemic India to work more closely with community outreach and public health. Managers are involved in the management of vaccination drives, health literacy training and coordinating with ASHAs and primary health centres; in other words, they are at the junction of hospital care and community health. Their extended responsibility has also included social determinants of health, which comprise nutrition, sanitation, access, awareness, etc.

Finally, Indian patients have become enlightened, digitally empowered and quality of care conscious. Patient experience should be the focus of healthcare managers, enhancing the healthcare process, reducing waiting time, billing transparency, reinforced infection control measures, and a system of redressing grievances. NABH-accreditation which used to be optional, is rapidly becoming an accolade that is being propelled by managerial dedication to quality and safety.

To sum up, it is clear that the post-pandemic world has transformed healthcare management in India into an active profession with leadership orientation. Indian healthcare managers are at the vanguard of digital transformation, workforce renewal, community engagement and operational resilience. The changing role is important in their establishment of a better, fair, and future-focused healthcare system in the country.

STRESS MANAGEMENT AND RESILIENCE FOR MEDICAL PRACTITIONERS

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Medical Practitioners form one of the most stressed communities across geographical areas. Although healthcare systems differ across countries, one factor that remains constant among all Medical Practitioners is the continuous stress they experience within and outside their workplaces. Stress affects the physical and mental health of these doctors and has an impact on both their professional and personal lives. Doctors working under stress may be more prone to medical errors, and this can be a significant challenge to healthcare systems worldwide. Hence, this issue needs to be recognised, and appropriate and timely support needs to be provided to the Doctors.

Strategies for resilience building among Medical Practitioners need to be developed carefully and meticulously. There are numerous techniques for stress management which can be successfully incorporated into daily lifestyle and regularly practised for reducing stress levels and promoting good health and wellbeing among doctors. A few of them are discussed below:

Wellness Programs: Wellness programs with various interventions focused on mindfulness and self-awareness, yoga, meditation and breathing exercises need to be created as well as implemented regularly for doctors. Hospitals and professional bodies of doctors can play an important role in implementing such programs. These programs need to be incorporated into the daily routine of Medical Practitioners, and they need to be motivated to contribute and participate in these programs within their busy schedule.

Continuing Medical Education (CMEs) conferences and seminars: A portion of Continuing Medical Education conferences and seminars (CMEs) can be focused on awareness sessions and stress management interventions for doctors. Awareness sessions can include awareness regarding recognition of stress-related symptoms in oneself, the need to seek support, either personal or professional, and seeking timely medical treatment if necessary. Destigmatisation of mental health issues with their timely address needs to be an integral part of such sessions. Workshops on stress management and resilience-building interventions can also be included in these conferences. These interventions will effectively help to address the emotional challenges that doctors face. The presence of fellow colleagues during such conferences will help in the creation of informal support groups as well.

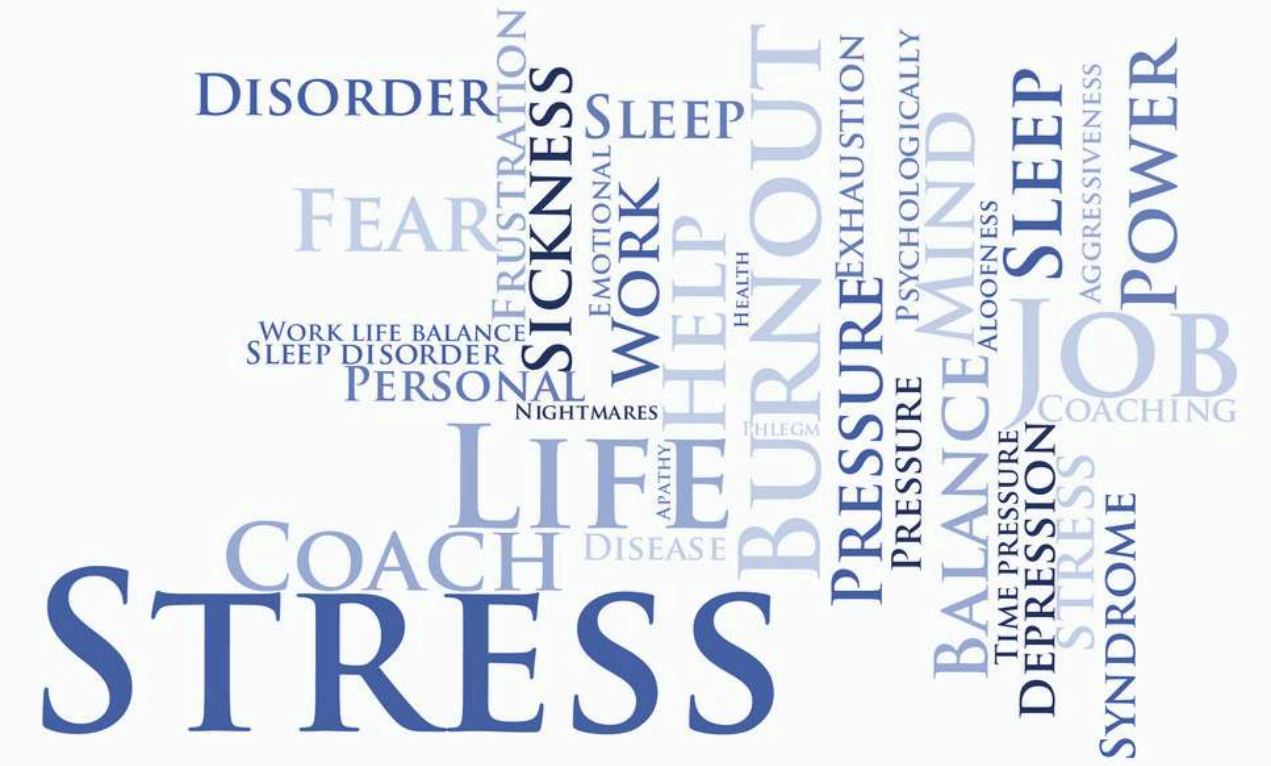
Creation of support groups among the medical fraternity: The medical fraternity is typically viewed as a highly competitive fraternity. Fellow doctors may be considered as professional rivals. However, there is a need to recognize these fellow colleagues as ones facing similar challenges in practice. Doctors can come together to form support groups which can support and empathise with each other and foster a positive professional work culture.

Counselling services for doctors: Easy access to counselling services, either offline or online, can enable a constant support system for doctors. Relaxation techniques can be taught, and encouragement can be

provided to doctors to regularly practice these for sound mental health.

Inculcation of a supportive, optimistic, and positive culture in the work environment: The stress epidemic can be successfully combated by creating a supportive and positive work environment for doctors. Focus on mental health needs to be an integral part of this work culture. Creation and maintenance of wellness strategies will help foster the health status of these providers of health. All doctors, juniors as well as seniors, need to support each other in this fight against the stress pandemic' not only themselves but also for the patient community whom they treat and cure.

Hospitals need to be sensitive and engage with doctors in a more enriching and empathetic manner. It is the need of the hour to inculcate a culture of stress management and resilience-building interventions within the healthcare delivery ecosystem. A strong and resilient medical fraternity will lead to the creation of a resilient healthcare delivery system, which will boost the patient outcomes and health status of the nation.



PATIENT SATISFACTION IN THE AGE OF SMARTER HEALTHCARE

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The way patients perceive the services they receive is now the single most influential factor for hospitals when trying to determine their level of service quality. While providing patients with excellent service has always been desirable for a hospital, providing patients with high levels of satisfaction will also provide a competitive advantage in the market place due to providing patients with better outcomes and an increased likelihood of them returning to receive treatment from the same facility. Research shows that hospitals that provide their patients with higher levels of satisfaction also provide patients with higher quality clinical outcomes and improved morale within staff members. Research also indicates that measuring patient satisfaction is important to improve patient care services, improve the movement towards a patient-centered method of delivering care, and continue to strengthen their ability to compete by providing greater access to care in the most convenient manner possible.

This article reviews the many facets of patient satisfaction and the role of new technologies in improving the patient's overall experience. The definition of patient satisfaction today goes beyond just providing clinical results. The scope of the definition of "patient satisfaction" has shifted from being a measure of only how well a doctor treated a patient to encompass all aspects of a patient's interaction with the healthcare system. Advancements in technology (i.e., AI,telehealth, big data, and wearables) have transformed how patients interact with the healthcare system. They allow for much more personalized service to patients, as well as convenient and efficient ways for them to access services. In addition, these same technologies have the potential to reduce patient errors and improve the quality of care that patients receive from hospitals.

Patient satisfaction is built on two closely connected pillars: care and service.

- Care refers to the clinical and technical aspects of treatment.
- Service encompasses the interpersonal and experiential dimensions—communication, empathy, comfort, and environment.

Both pillars mutually support each other; studies indicate the combination of both types of leadership creates a more loyal patient and perceived quality of care than either type of leadership alone. Improving patient satisfaction offers positive outcomes that includes:

- Better patient experiences and greater trust in the provider
- More compliance with treatment recommendations
- Lower levels of stress and fewer complications
- Higher levels of employee and physician satisfaction
- Improved financial health for the healthcare organization

Patient satisfaction also encourages patients to act as advocates for the organization, sharing their positive experiences with others i.e., referring others to the organization via word of mouth. Patient

satisfaction reflects the overall quality of care provided. Patients today typically use other industries, including the hospitality, aviation, and retail industries, as a point of comparison when evaluating their experience with a healthcare provider.

They expect services to be provided quickly, effectively, and efficiently; they want to see and feel valued throughout the process of receiving treatment. Due to the growing cost of healthcare and the fact that many patients now expect similar standards for their healthcare experience, many patients will assess not only the clinical outcome of the treatment but also the total experience with their healthcare provider (HCP). Therefore, it has become imperative for HCPs to ensure that the entire journey of a patient (from the initial call to schedule an appointment, till the last visit of follow up) provides continuity to the patient and a positive impression of the HCP. The expectation for a smooth check-in process, as well as good communication and prompt replies to questions and concerns from patients, is now expected of healthcare providers. The emergence of patient-centred care and value-based care models can be attributed (at least in part) to this migration toward patient-centred care models.

UNITED FOR WELLNESS: BRIDGING ACADEMIA, INDUSTRY, AND COMMUNITY

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"Alone we can do so little; together we can do so much."

— Helen Keller

In today's fast-changing world of healthcare, this simple truth feels more powerful than ever. No single institution—no matter how strong—can address the growing complexity of health and wellness alone. What truly moves us forward is collaboration. And that is exactly what the first edition of Aarogya WeChaar celebrates: the coming together of academia, industry, and community to build a healthier, more connected future.

Academic institutions have always been the heartbeat of new ideas. They nurture curiosity, encourage rigorous thinking, and prepare the next generation of healthcare professionals to meet emerging challenges. Yet, knowledge becomes meaningful only when it reaches people's lives. This is where industry steps in—bringing scale, technology, resources, and the ability to transform promising insights into workable, real-world solutions.

But even this powerful partnership finds its true purpose only when it stays rooted in community realities. Communities offer us something that neither research nor technology alone can provide: lived experience. Their voices remind us what truly matters—access, trust, culture, and everyday challenges. When communities actively shape the solutions designed for them, we move from imposing ideas to co-creating them. And that shift makes all the difference.

When academia, industry, and community come together, they create an ecosystem where innovation feels purposeful, grounded, and deeply human.

For corporate leaders, this collaboration isn't just socially impactful—it is strategically wise. It brings sharper insights, builds stronger partnerships, and paves the way for long-term, meaningful change.

Across India, we already see this spirit taking shape. Universities are teaming up with companies to pilot digital health tools. Preventive care programs are evolving with inputs from on-ground community groups. Together, these efforts show that when research sparks innovation and communities guide direction, healthcare becomes more inclusive and more effective.

As we launch **Aarogya WeChaar**, we imagine it becoming more than a newsletter. We see it as a meeting ground—where ideas grow, where students engage with industry realities, and where community perspectives inspire new possibilities.

Ultimately, our aim goes beyond improving systems—it is about shaping a shared future of wellness. A future where research labs speak to boardrooms, where stories from communities inspire prototypes, and where ideas move seamlessly from classroom discussions to industry implementation.

When every voice is heard, innovation becomes more human-centred. Wellness becomes a collective endeavour. And that is not just a closing thought—it is an invitation.
A call for all of us to build a healthier tomorrow, together.

EFFECTIVE HEALTH CARE OPERATION LEADING WITH EMPATHY

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Effective health care operations are largely based on empathetic leadership. It is an idea that for every procedure and rule, there are people who are standing behind, whose emotions and life experiences help them to behave each day. Leaders guide with empathy to know how to contribute to supporting staff in matters of well-being. The workplace always plays a vital role in communication, which motivates leaders in creating the entire atmosphere and nurturing not only patients but also colleagues.

Team engagement in decision-making is another cornerstone of empathetic culture. The joyfulness of kindness, be it an appraisal programme, a visionary activity, or just acknowledging these behaviours help people to be empathetic. Leadership makes you feel seen and important; it shows how you are understanding and giving worth to the emotions and experiences of others. It is a safe environment where staff and patients feel comfortable without the fear of judgment. It helps in building and increasing psychological safety, trust and engagement, which in turn reduces stress and supports mental health.

An empathetic leader not only manages tasks; their nurturing attitude helps people in their wellbeing, individually as well as collectively. The leader collaborates, when the staff feel safe and secure, the organisation as well as the career of the staff grow along with it. In healthcare organisations, this sense of safety is essential, as it directly aids in building trust, engagement and overall performance. A psychologically safe employee is much more confident, completely motivated and committed in his/her job. The trust comes when the leaders continuously show fairness and genuineness in their concern for the well-being of the employee or the team members. Empathetic leaders reduce the ongoing stress in the workplace, which promotes mental health.

In the modern work environment, especially in the healthcare and service sectors, the job is more challenging and demanding. Leaders who can identify the signs of stress and emotional fatigue, are the one who can provide timely support and be flexible with everything. Empathetic leaders provide healthier, more effective teams. This in turn reduces the emotional drain, absenteeism and staff turnover.

In the end, empathetic leadership is a strong force that changes the workplace into a supportive, trusting and high-performing place. Such leadership not only increases the efficacy of the organisation but also ensures the overall growth of individuals. In the hard, complicated, and challenging world, empathetic leadership is not only needed, but it is essential.

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