

FICCI 10th Annual Healthcare Excellence Awards - 2018
Application form - Learning and Development

Section 2 – Academic Research and Training Statistics

A) Description on the trainings undertaken by the organization (All data should pertain to the period April 1, 2017 to March 31, 2018)

Information required:					
1	Total hours of training conducted in the organization : (for all employees including outsource staff)				
2	Trainings attended	Total number of hours		Average hours/person/year	
		Technical training	Soft skill	Technical training	Soft skill
2.a	Doctors (eg.CME)				
2.b	Nurses (eg.CNE)				
2.c	Technicians				
2.d	Support staff				
3	Total number of hours of CME conducted				
4	Total number of hours of total CNE conducted:				

B) Man power trained by the organization: as on 31 March 2018 (if applicable)

Types of Personnel	Number of Personnel
Total Employees(including Contractual staff)	
Senior Doctors (Consultants and above)	
Junior Doctors (Associate consultant, Senior Resident, Resident)	
Nurses	
Nursing Aid (GDA)	
Administrative staff	
Contract employees(not included above)	

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Section 3 – Case Study

A) Training program plans *

<p>1. Summarise the project/initiative/innovation/service which you are entering for the Awards <i>This should clearly explain the jury members what the case study is about and should summarise remaining part of the application form</i></p> <p><i>Innovation is defined as a new solution or an older solution implemented in a new way to achieve the goal</i></p>	
<p>Name of Project Team (maximum of 3 persons)</p>	<p>1. Name: Email & Mobile:</p> <p>2. Name: Email & Mobile</p> <p>3. Name: Email & Contact:</p>
<p>Name of project/initiative/innovation/service (max 50 words)</p>	
<p>Project/initiative/innovation/service implementation date (DDMMYY):</p>	
<p>Describe in detail the project/initiative/innovation/service undertaken (max 200 words)</p>	
<p>Explain in brief the problem identified or inspiration for the project/initiative/innovation/service (max 100 words)</p>	
<p>What were the cost involved to run the project/initiative/innovation/service (max 75 words)</p>	
<p>Other highlights to showcase how innovatively the project/initiative/innovation/service were implemented in your organization (Max 150 words)</p>	

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Who are your peer bench marks in the industry for the project/initiative/innovation/service? Please name up to 2 names (Max 50 words)	
Describe the 3 unique aspect of your project/initiative/innovation/service implemented (max 250 words)	

B) Impact on business and stakeholders*

<p>1. Describe the benefits of implementing the above project/initiative/innovation/service to various parameters depending on the category selected. Please explain the parameters on the Business, Operations, Patients, others etc applicable to the category selected</p> <p><i>Impact should be measurable and generic statements should be avoided. parameters (max 200 word)</i> Change in percentage / absolute numbers YoY / MoM must be mentioned <i>E.g. - Turnover – 5% increase in turnover</i> <i>Absolute numbers YoY/MoM – Reduced by 10%</i></p>	
Parameter	Measurable impact
<p>Business <i>Please demonstrate tangible impact of the project/initiative/innovation/service include participating company's increase in revenue, profit, reduction in cost, reduction in manual effort, increase in efficiency levels etc.</i></p>	
<p>Patients <i>Please demonstrate tangible impact of the project/initiative/innovation/service w.r.t patient service, sanitation, accessibility of services, security etc</i></p>	

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Impact should be measurable and generic statements should be avoided. parameters (max 200 word)
Change in percentage / absolute numbers YoY / MoM must be mentioned
E.g. - Turnover – 5% increase in turnover
Absolute numbers YoY/MoM – Reduced by 10%

Parameter	Measurable impact
Operations <i>Please demonstrate the impact of project/initiative/innovation/service on operational parameters (mentioned above)</i>	
Any Other	

C) Plans to grow *

1. Please describe the key developments from your end to ensure the sustainability of project/initiative/innovation/service in the long run (max 200 words)

2. Why should your project/initiative/innovation/service win this award (max 75 word) *

Details of any other awards or certification(s) obtained by the organization w.r.t project/initiative/innovation/service (Please provide supporting documents)

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Has this project been submitted earlier to FICCI for awards?

Yes

No

If yes....please specify year _____

Section 4 – Participant Declaration

I declare that the information provided in this entry form is correct and accurate to the best of my knowledge. I agree to abide by the rules and regulations of participation. I /We agree, on behalf of my/ our Organization authorise the award management to use the content submitted as part of my/our entry, in whole or in part and use and display such entry, which shall include trade publications, press releases, electronic posting to the Awards website, electronic hyperlinks to the website of the Participant, and any display format selected by the award management during the awards ceremony or at a later point in time, for a period of five years.

Participant's name: _____

Signature: _____

Designation: _____

Date: _____

COMPANY
STAMP

** The Application Form needs to be signed by the authorized signatory from the participant organization (Senior Management)*