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Date: Thursday, 8 September 2022 at 12:26:02 am Australian Eastern Standard Time

From: no-reply@qut.edu.au

To: Saurabh Pawar

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Ref ID: 11232781 FORM-AEX-205761

IFN515

ASSIGNMENT 1

BUSINESS PROCESS REPORT

DOCUMENTING AND IMPROVING A HOSPITAL'S OUTPATIENT PROCESSES

11TH SEPTEMBER 2022

TEAM DECLARATION OF ORIGINAL WORK

By submitting this assignment, we are aware of the University rule that a student must not act in a manner which constitutes academic dishonesty as stated and explained in the QUT Manual of Policies and Procedures. We confirm that this work represents our team's effort, we have viewed the final version and does not contain plagiarized material.

Sl. No	Full Name	Student Number	Tutorial Group	Signature
1	Anjana Ranjan	N11119985	TUT 1- Thursday 7:00pm	Anjana Ranjan
2	Kavya Kore	N10840371	TUT 1 - Thursday 12-2pm	Kavya Kore
3	Ruturaj Suryawanshi	N11233991	TUT 1 - Thursday 12-2pm	R.Suryawanshi
4	Saurabh Pawar	N11232781	TUT 1 - Thursday 12-2pm	Saurabh Pawar

EXECUTIVE SUMMARY

Deegayu is a leading mid-sized private hospital based in Sri Lanka. The name 'Deegayu' means long life in the national dialect. It is among the top 10 private hospitals in the country. It offers in-patient, out-patient care facilities, multiple pharmacy outlets catering a wide variety of medicines from different brands, a large network of sample collecting centers and ISO 9001-2015 certified laboratories. Deegayu operates one private hospital for inpatient care and 11 other branches for outpatient care spread across Colombo and the Western Province of Sri Lanka. This includes seven ISO certified laboratories, six pharmacies and 150 sample collection centers.

Being a popular and multi-functional hospital, there are a lot of patients that come to this hospital for treatment. The hospital employs staff such as registration desk officials, nurses, doctors, clerks, and service and maintenance staff. The hospital has also taken steps to go digital post pandemic for social distancing measures and to promote convenience. They have an app where patients can check their position in the queue. They are also able to place orders for the pharmacy via WhatsApp.

The outpatient department sees the most traffic with a large number of patients coming to be treated with or without the assistance of their kin. In this department, patients are required to go through 3 main processes, in their order of precedence:

- **The Consultation process**, where patients are required wait in a queue until their token is called, after which they meet and explain their health concerns to the doctor

- **The Laboratory process,** where patients come to get tests that the doctor recommended

- **The Pharmacy process,** where patients come to buy medicines and other drugs for the treatment of their ailment

Each process has various sub-processes to ensure the orderly and organized flow of activities to cater to the patient. Payments are collected at each process differently by the register in charge.

As of today, many of the activities that take place in the hospital are manual. The hospital highlights themselves to be customer-focused in all their service offerings, which forms a major part of their marketing campaign. The hospital staff directly interact with the patient in every step of the way, which is great for personalized care, but in some cases can result to be tedious and time-consuming process.

Not many patients have taken too well to the digitization, that is using the application developed to maintain the queue but they are much more active on WhatsApp to order medicines.

There is also a lot of shutting happening in the appointment process when a patient wants to cancel or reschedule. Due to a few inefficiencies here, the waiting room is frequently clogged up with more than the desirable number of patients.

This report brings to light all the processes followed within the outpatient department and its three sub departments. We aim to visualize and bring out the big picture showing granular details of how everything works as-is. Senior executives of the hospital and external stakeholders can get a view of the current workings and explore scopes for improvement, growth, reducing costs, improving efficiency and quality of customer service. This report should exhibit processes in a simple, understandable way so as to assist in identifying mechanisms to create self-service opportunities for customers and reducing costs without compromise to service quality and speed.

TABLE OF CONTENTS

INTRODUCTION

This business report is created for 'Deegayu', a mid-sized hospital in Sri Lanka. Through semi-structured interviews, extensive information was gathered about the different process flows that take place in the Out-Patient department of the hospital. The intent of this report is to visualize, summarize and bind together all these processes in a structural format that is easily comprehensible and can be assessed by clients, stakeholders, and business executives alike.

This report aims to depict the processes as they take place currently. This is to assist the hospital's senior executives in systematically and qualitatively analysing the processes in place to figure out any scope for efficiency, improvement and service to their customers, including patients and their accompaniments.

The outpatient departments in hospitals are generally designed to provide immediate care to people with health problems that visit the hospital for diagnosis or treatment without getting admitted. Intuitively, it is the busiest department of a hospital which caters to the majority of people that come to receive treatment. Therefore, it is safe to say that it is the most important department in the hospital as it influences and sets an impression of the entire hospital, its facilities, and its operation. It is integral to have a smooth flowing operation to make the patients feel at ease and cared for.

The goal of this project is to highlight the processes followed in different sub-departments of the outpatient department, namely; the Consultation, Pharmacy and Laboratory areas. Using this report, one should be able to easily get the gist and understand how the process flows within these various departments. This report also gives an overview of the value chain of each of these processes. It also depicts the flow of control between the various stakeholders or actors(humans, digital systems, etc), and how data and objects are processed in each step of the way. Time, costs, flexibility, quality of work is taken into consideration but is produced as-is.

To summarize, this report is made to analyze the core processes in the outpatient department, describe a summary of findings for current work processes, bottleneck activities, and value to facilitate future development and improvements.
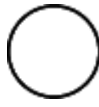
This report is structured as follows:

- Modeling conventions used

- The Consultation process flow, value chain and abstract level description

- The Pharmacy process flow, value chain and abstract level description

- The Laboratory process flow, value chain and abstract level description

- Summary, References, and an Appendix

- Personal reviews of working as a business executive
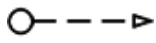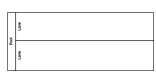
BUSINESS PROCESS MODELING

MODELING CONVENTIONS

Sl. No	Symbol	Description
	◯	Start-event: Indicates the first step of process.
2	◯	End-event: Indicates the final step in the process.
3	◎	Intermediate event: This element represents any event that occurs between the start of the process and the end event.
4	✉	Start Message Event: The flow of messages those are used to trigger the process are represented using this element.
5	⊕	Parallel Gateway: This gateway represents two concurrent tasks occurring in the model.
6	⊗	Exclusive (XOR) Gateway: It is used when a process splits into different paths and only one path needs to be considered based on the condition. That means only one outgoing path can be considered from the multiple paths.
7	◇◯	Inclusive Gateway: It is used as a division point which can be used to trigger the mode that one outgoing path.
8	⬠	Start Multiple Event: This is used where there are more than one events that could initiate the process. Only one event, depending on the situation triggers the process.

9		Timer event: This is used where time, date or recurring time and date triggers the process.
10		Data object: This element represents data placed or accessed into the process. It is used to represent if data needs to be collected or stored in the database.
11		Sequence Flow: This element connects flow objects in sequential order.
12		Association: This element is used to show relationships between artefacts and flow objects.
13		Message Flow: This element is used to show the message flow direction.
14		Pool/Lane: BPMN Pools describe whole organizations and contain lanes while the lanes describe who is executing a specific set of tasks.
15		Data Store (DB): The process of accessing or storing the data can be represented by this element.

THE CONSULTATION PROCESS

- This is the first process that a patient goes through when they make an entry into the outpatient department.

- The purpose of this process is to set up a consultation session between the doctor and the patient, in which the patients can talk about their health concerns and the main reasons for being in the hospital that day.

- The flow of events that take place is depicted in the value chain below:

Value Chain
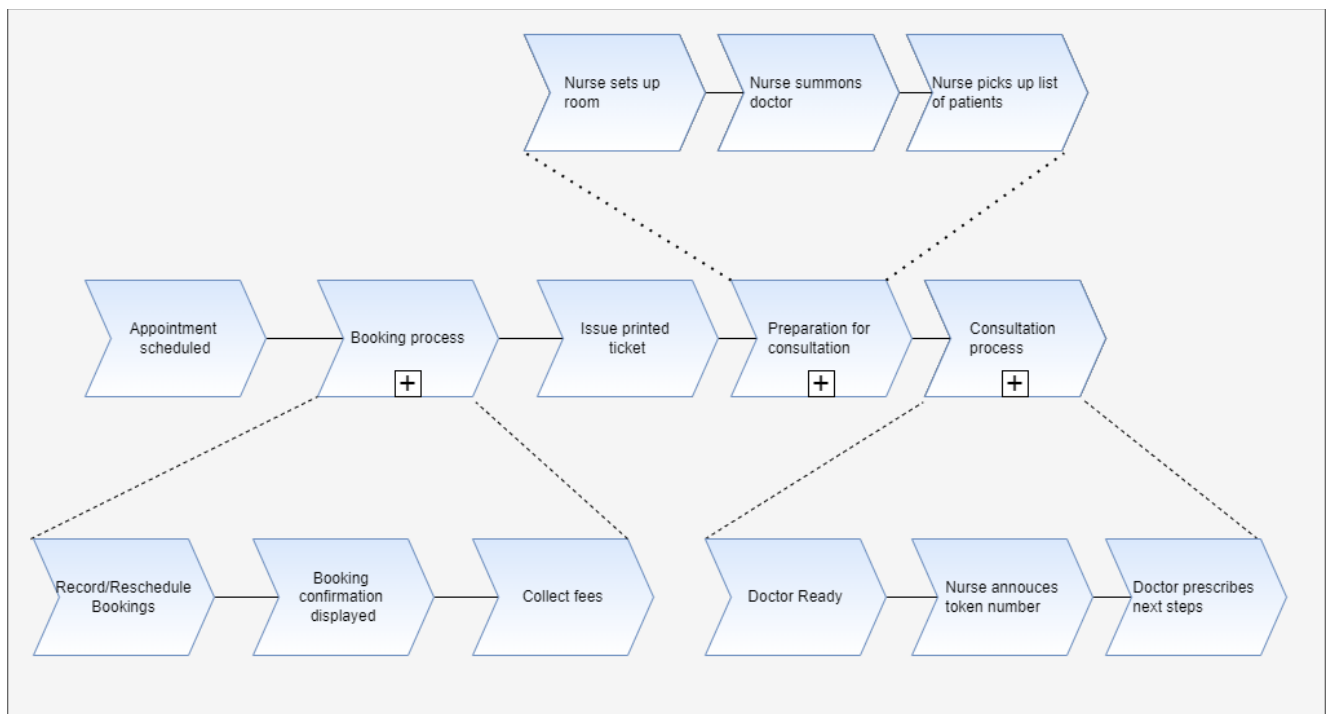
The agents or actors involved in this process in the order of interaction with the customer are as follows:

- The outpatient receptionist

- The practise nurse

- The doctor

The doctors may cap the number of patients they want to look at to a small number like 6-7 per hour. However, the reception books 8-9 patients in that hour to cater to potential rescheduled, cancellations and no-shows.

It is to be noted that the queue size varies but it is prone to get extremely crowded during peak times. The reception gives priority to the calls and messages over waiting customers in normal situations. However, if the queue is longer than 10 people, the walk-in customers are given priority.

A granular view of what happens in this process is represented in the Business Process Model Notation Diagram below:
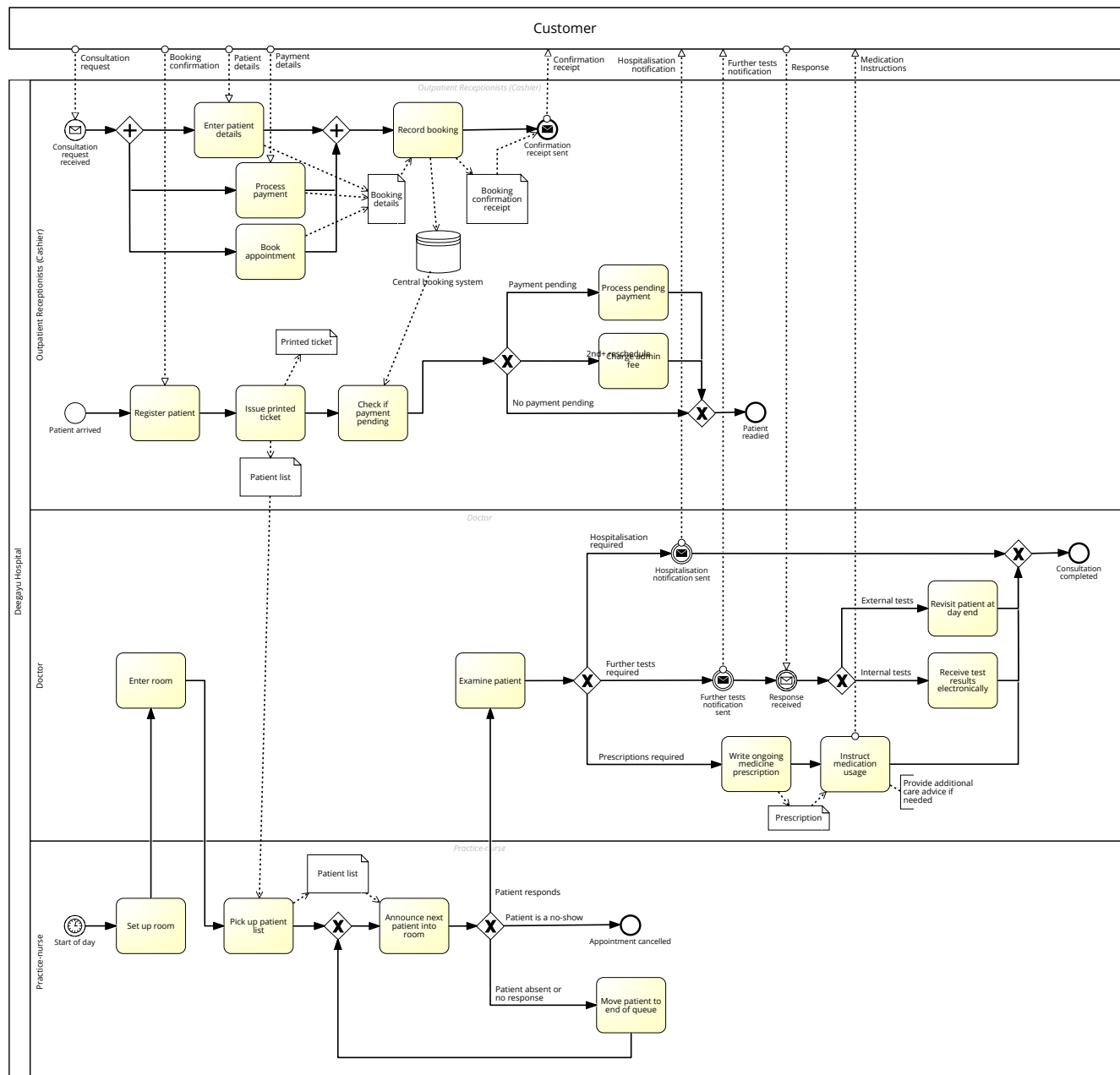
THE PHARMACEUTICAL PROCESS

- This is the part of the outpatient process where a customer visits the pharmacy to buy drugs and medicines for the treatment of their ailment.

- The Pharmacy services timings:

    - Mon-Fri 7:00am-7:00pm

    - Sat-Sun 8:00am-6:00pm

- The Delivery services timings:

    - Mon-Fri 9:00am-5:00pm

    - Sat-Sun 9:00am-12:00pm

- The customer presents a prescription acquired from the doctor either online or by walking in

- The customer receives their product by picking it up or getting it delivered. All payment is made through the pharmacist.

- A high-level view of the pharmacy process is depicted in the value chain diagram below:

Value Chain
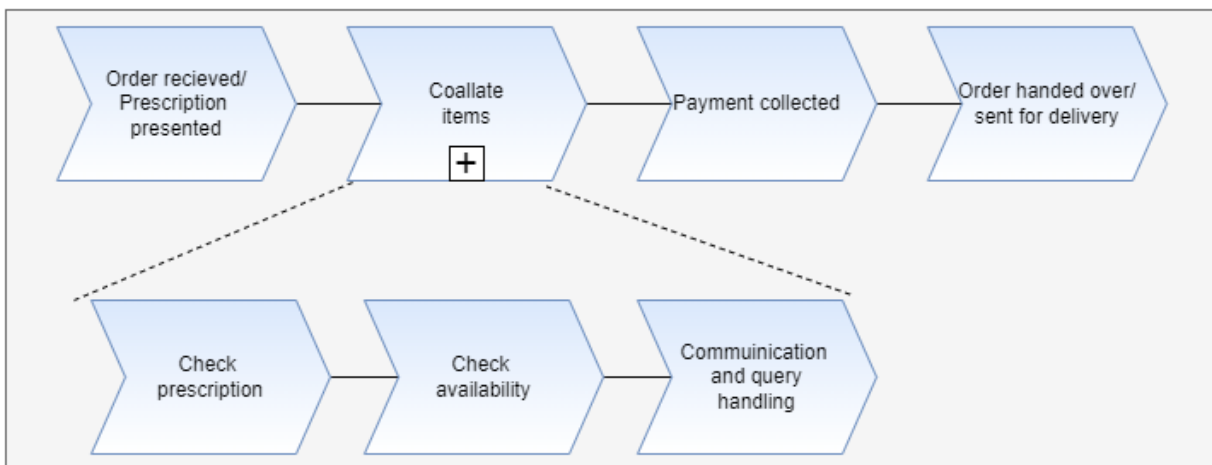
The actors involved in this process in the order of their interaction with the customer is as follows:

- Phone/WhatsApp communication medium (In case of online orders)

- Pharmacy assistant

- Cashier

- Chief pharmacist/ pharmacist (In case of help and intervention to the pharmacy assistant)

- Delivery executive (In case online customer opts of delivery)

It is to be noted that online orders take significantly more time to process than walk-in orders as the pharmacy assistant prioritizes walk-in orders and tends to online orders only when they get a break in the store. Package and delivery times should also be taken into consideration.

A granular view of this process is represented in the Business Process Model Notation Diagram below:
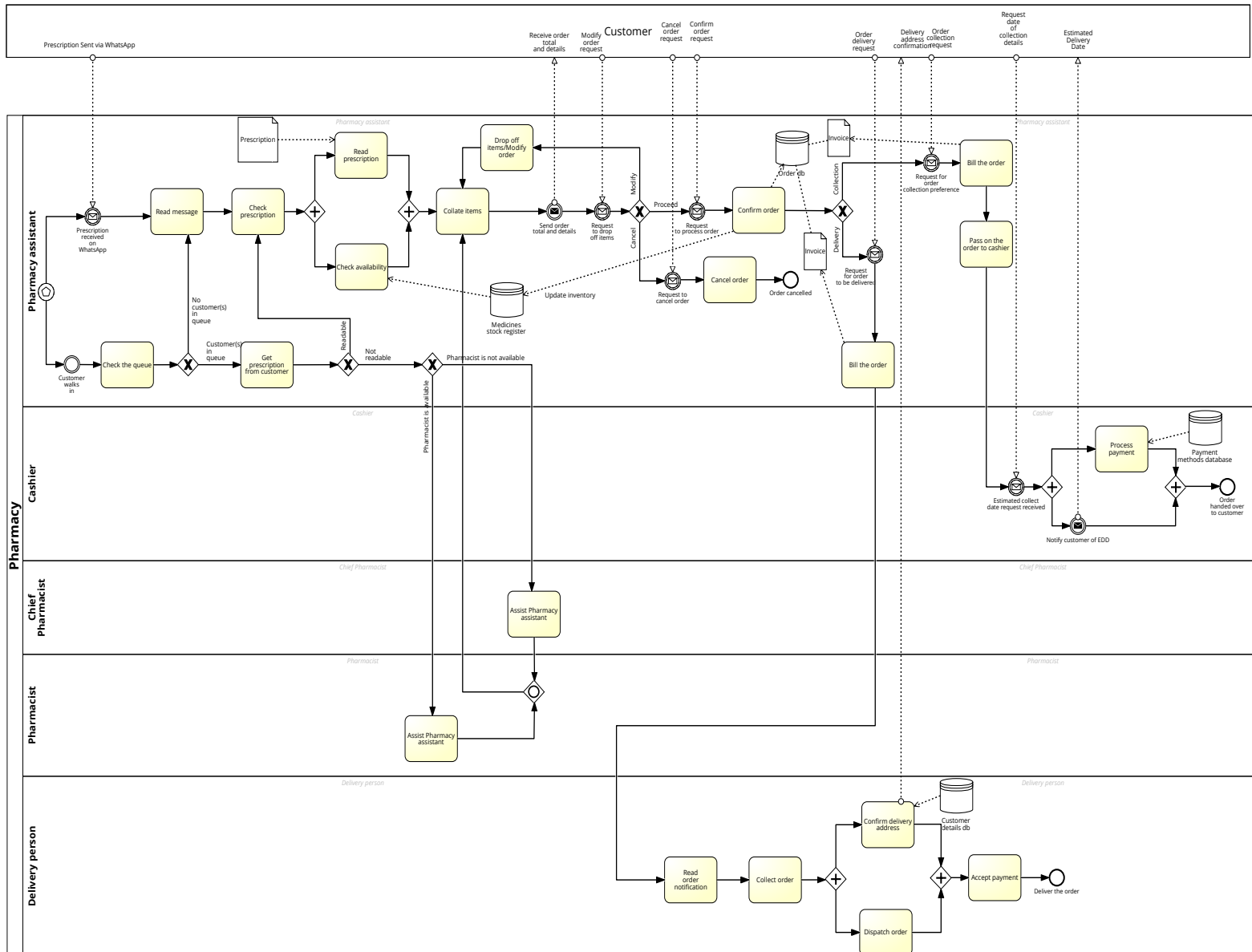
THE LABORATORY PROCESS

- In case the doctor requests for additional reports in order to approve or dismiss a certain ailment, the customer approaches the lab for further testing involving lab testing equipment and medical professionals.

- The Laboratory services from

  - Mon-Fri 7:00am to 6:00pm

  - Sat 8:00am to 1:00pm

- The customer walks and hands over the prescription made by the doctor on the tests they will be required to undergo.

- The request is processed and the customer is led through the way to provide a test sample.

- The test sample is analyzed and returned to the customer. One copy is forwarded to the doctor.

- After receiving the results, the customer goes back to consult the doctor again who recommends next steps- either inpatient treatment, further tests or writes a pharmaceutical prescription.

- A high level view of events happening in this process is represented in this value chain diagram below:

Value Chain
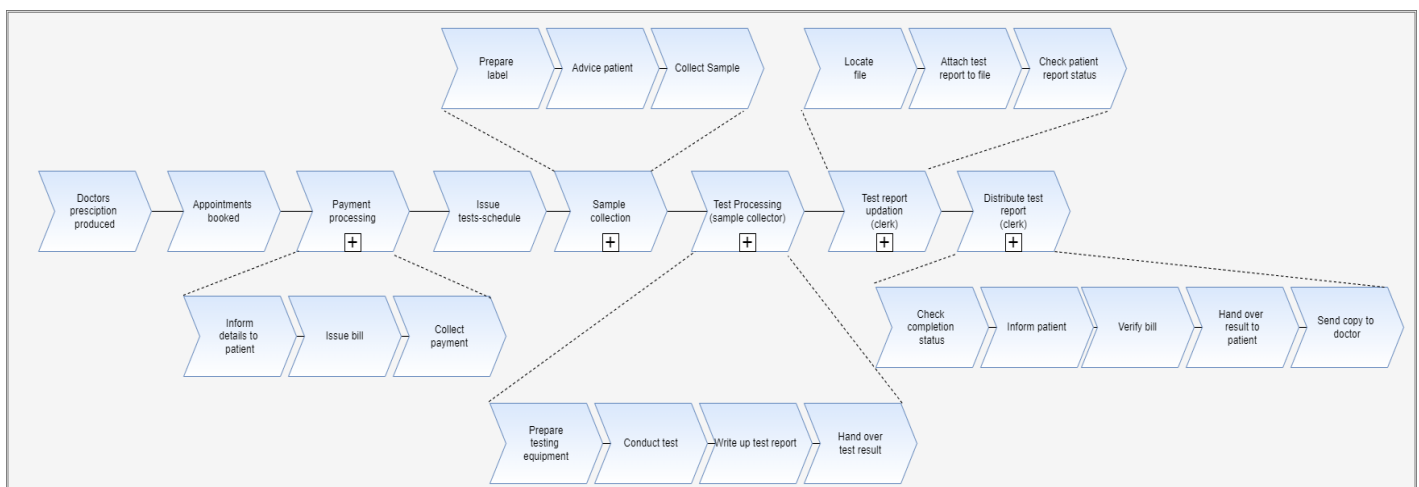
The actors involved in this process in the order of interaction with their customers is as follows:

- The Clerk

- The Cashier

- The Nurse

- Testing equipment

- The Sample collector

Apart from the above, there are a few more staff such as the lab technician, and some processes like the generation of test reports that have not been gone into detail and have been abstracted from the diagram to maintain relevance.

https://academic.signavio.com/p/model/1c012bcdf6f0462a8d7f8ebb9d78821e/png?inline&authkey=8d7fb30cb9aaa72c62b4e7d6962342ccc7676790698a1392f424a72925c5

A granular view of this process is represented in the Business Process Model Notation Diagram below:
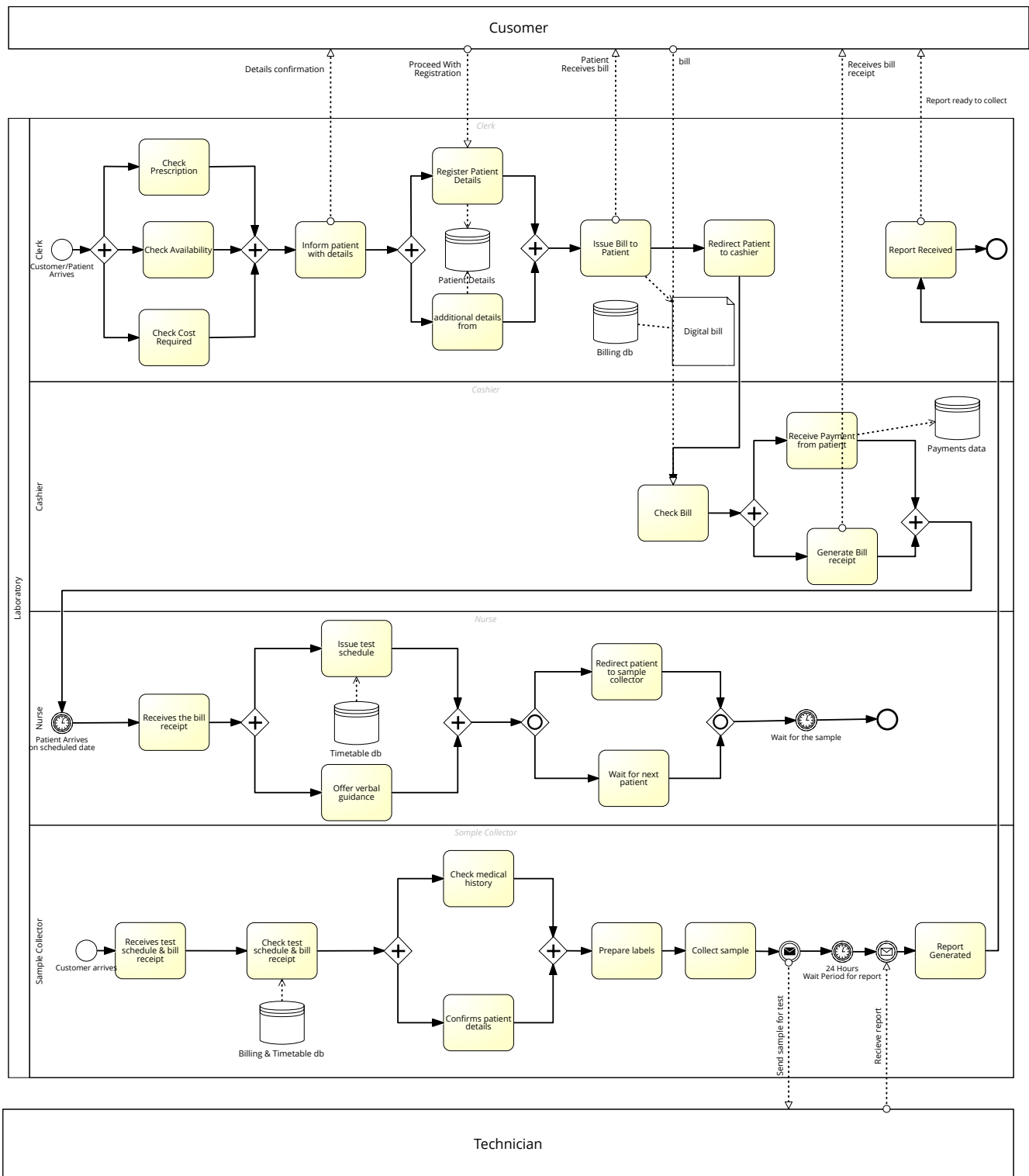
CONCLUSION

To conclude, it is safe to say that Deegayu hospitals stand by their claim of being customer-centric and service-focused. It provides personalised service to its many customers and adapts to the evolving trends. The hospital is quite adaptive to unintended circumstances such as the covid-19 pandemic and also took to digitisation to cope up with different regulations and safety procedures.

At each step of the way, it was noticed that the customers have direct interaction with the hospital staff, either face-to-face or by phone. Due to the immense popularity and traffic the hospital deals with, it is sometimes tough to manage multiple modes of communication. Since all processes are handled manually, it has an increased tendency for error, given the modern practises and technical stack available today. The hospital can use some level of automation in areas like appointment booking, cancellation and rescheduling. Instead of informing customers and rescheduling the queue manually, the better way would be to let a system handle and keep customers informed of their progress in the queue.

Another primarily manual process seems to be the pharmacy process. The pharmacy of Deegayu is a popular one with many orders coming in either through WhatsApp or by customers who walk in. It seems like all work, or most of the work of catering to the customers is performed by a single actor, the pharmacy assistant according to the support document. Since the customer has a choice of picking from several brands and prices, the process of explaining and exhibiting these different options tends to be time-consuming as the customer may take a while to make their decision, preventing the queue to proceed. As the pharmacy assistant themselves check the digital stock report for availability, options and other details, it would be a great idea to expose this inventory to the customers in the form of an easy to use e-commerce website or app. Instead of collating and tending to whatsapp orders, that are already digitized, it would save a lot of time and effort by putting an online shopping system in place that deals with inventory, delivery, customer support and payments. This is currently a very popular marketing method and would cut down the task of a pharmacy assistant to just checking and packing goods.

The laboratory process is one of those processes that involves a long waiting time and anticipation for customers as the await for their test as well as the result. In most circumstances, this wait cannot be avoided. But as in this case, it is noticed that the clerk performs a lot of tasks and handles several parts of the documentation. The clerk has to manually look up for patient folders, update and send the test results to a lot of other systems by themselves. If this is looked at from a technical perspective, as there are several databases already present, there is a huge potential in integrating a system that acts as an interface between the several databases that need updating, such as, the billing db, timetable db, patients db and payments db. The functionality of this system would be to perform quick updates and digitize test results so that they reach the patient as soon as the test has been processed. Another major advantage is that a patient can be recognized by his ID, there would be no searching of manual folders involved. The patient can register through an online form or PDF present in the hospital and this can quicly be upload and circulated to any subsystem that would require these details.

Overall, there is no denying to the emphasis on the quality of service Deegayu presents to its customers. They have several customer centric characteristics enough to set them apart from an average mid-sized hospital but also immense potential for growth and efficiency. From what was observed through the source documents, they are acceptable to change, digitization and growing with the modern times that drives every modern business today. Through a little bit of process improvements, it is very much possible to see this hospital reach greater heights in all respects and make life easier for their customers as well as their hospital staff.

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5. Bandara, Wasana, Merideth, John C., & Holmes, Elizabeth (2020) 'Means' for achieving process modeling success: Insights from a large Australian bank. In *Proceedings of the 18th International Conference of Business Process Management (BPM 2020) - Industry Forum.* Universidad de Sevilla, Spain.

6. *BPMN Diagram Symbols & Notation*. (n.d.). Lucidchart. Retrieved September 11, 2022, from https://www.lucidchart.com/pages/bpmn-symbols-explained

APPENDIXES

ASSUMPTIONS WHILE MODELING

Process	List of Assumptions
The Consultation Process	● The outpatient receptionist represents the same role as the cashier ● Practice nurse always sets up the room at the start of every day ● Patient will always follow directions by the doctor, such as if the patients are required to do external tests, they will go ahead with those tests
The Pharmacy Process	● There is no hard prerequisite that the patient must be supplied with a prescription from a doctor in Deegayu. Any patient with a relevant prescription from a certified medical professional issued to write prescriptions will be able to make the purchase. ● A prescription is only required for prescription drugs, which means it is not required for non-prescription, mild drugs consumed on a day-to-day basis by the general public.
The Laboratory Process	● Patient Must visit the laboratory counter to book appointments ● Already booked appointment Customer directly visit on Scheduled date to give sample ● Doctor Prescription is mandatory to book appointment ● Clerk notifies Patient when the report is ready to collect after a 24 hrs waiting period. ● How the report is made, how the technician processes the tests, the internal machinery of the testing equipment has been abstracted from the process model due to lack of information/ out of scope.

General	● Customer can be the patient or their kin. ● The order of precedence is as follows:
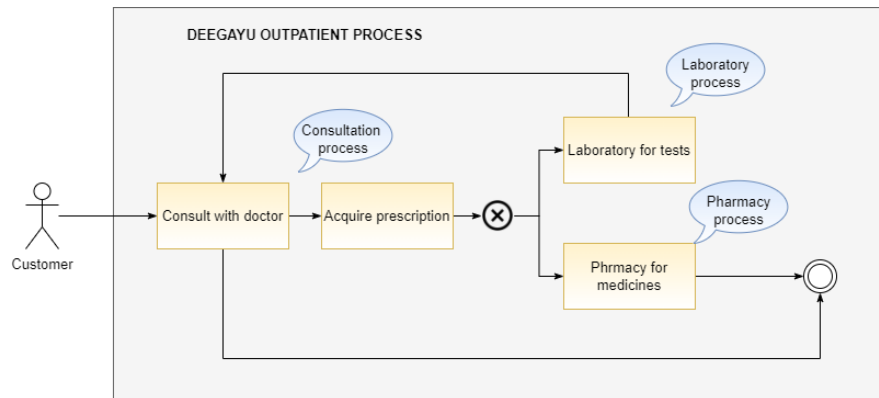
LINKS TO BPM DIAGRAMS:

Consultation process

Pharmaceutical process (Prescription fulfillment process)

Laboratory process

REFLECTION STATEMENTS

ANJANA RANJAN

When I started off with IFN515, I was extremely excited and elated to say the least. I am from a technical background, pursuing my masters in data analysis but I have always been intrigued by businesses, how they work and how to build one. People always say "it's not easy to build and maintain a business", "only 1 in a 100 business succeed", et cetra. Enrolling in this unit, going through the coursework and assignments greatly helped me to understand what actually happens inside the world of business, which was formerly a "black box" to me.

For this assignment, we were tasked to create a professional business report for a real business case- The Deegaayu Hospitals, a mid-sized private hospital in Sri Lanka. The task was to represent the process as-is to give all the stakeholders a simplified view of what is currently happening. This is to facilitate and encourage scope for further improvements. It is the first step taken to revamp or improve a currently existing business.

What was noticed first hand was that this is not a dying business nor does it need any improvements to sustain itself. It is already a well established, and in fact, one of the top 10 mid-sized private hospitals in Sri Lanka which offers multiple facilities. This goes to say that there is always scope for improvement and increasing efficiency no matter how well the business is doing. A businesses' primary objective is to cater for its customers, as they say "Customer is King". So if a business cares enough about sustenance and keeping their customers happy, they must adopt with the evolving trends and always find ways to do things better, and there are always ways to do so.

When I first went through this case study, I found it to be very interesting. It was well-documented in a comprehensive way which helped with easy understanding. The course coordinators were very prompt to resolve any hanging doubts and questions. Right off the bat, I was able to make some deductions of how certain processes can be improved and where certain processes in place were lacking.

The assignment got off to a rough start for me as I had to drop out from my original group due to lack of coordination and activity. I hoped to find a team with equally passionate, driven and proactive members as I stumbled upon Team 3 that was looking for an additional member. As I knew one of the group members before hand, I readily jumped on and it was the right decision to make, as this team was highly collaborative and interactive.

As opposed to what usually happens in team assignments, this group did not procrastinate and the first drafts of the diagrams were out within 1 or 2 weeks of the assignment being released. We regularly met, went through each others work, provided feedback which included ideas and criticism. As our first version was created so early on, we kept iterating and including what we learnt each week during the lectures into our respective diagrams. Tasks were assigned and our team was hustling and bustling with messages on MS Teams. Due dates were set for each task as we knew it would get stressful during the final days were a lot of assignment submissions were clumped together.

As I was a late entry into the team, by the time I entered, all 3 of my teammates were already assigned one of the three processes and I was left to fit myself and contribute wherever I could in all 3 of the diagrams. My core tasks were as follows:

- Putting together all the diagrams in a way that can be shared and feedback can be received within the group. Essentially creating a shared platform.
- Quality assessment of all 3 process flows and amending them to meet standards, and to ensure syntactical quality, structural correctness and semantic quality. This also included ensuring all the modelling conventions were designed in a presentable manner.
- Subprocess designing
- Helping out my teammates when they found something confusing or wanted to know better ways of modelling. For example, among a few instances, I helped my teammate in charge of the Pharmacy process to handle the duality of start events- walk in customer vs WhatsApp order
- Go over the diagrams regularly, make additions, deletions, updations and proactively provide feedback.
- I was incharge of creating all the value chains which worked as a preceder for the process models.
- I was also incharge of all the documentation work, including this report, adding all sections in writing, formatting, and following up with teammates when their intervention is required.
- I also took up the task of finding scope for improvement of the business processes and promptly documented them.

Working with this team was simple, easy and hassle free as all members got along really well with each other and contributed equally, which lessened the burden of a single individual. It was a great experience working in a collaborative environment with like minded peers. It also opened our minds to different perspectives and taught us how to accept criticism positively and always be open to feedback.

Although we tried to ensure we complete our tasks on time, it got a bit rushed in the end as we aimed for perfection and had too many constraints. Through the way, I learned lessons of time management, orderly processes, and how integral meeting regularly and assigning tasks are for the satisfactory completion of an assignment. At the end of it, I am thrilled and congratulate my peers for coming up with this together. Hopefully we get more chances of collaborating together soon.

I was part of a 4-member team, and we were tasked with producing a business report for Deegayu hospital.

To ensure that I worked efficiently, I first created a detailed plan of what needed to be done. I then divided the work among the team members and assigned each member a specific task. I also created a timeline for the completion of the report, so that we could track our progress and ensure that we met the deadline.

In terms of team efficiency, I think we worked well together. We communicated regularly and provided feedback to each other on our work. I think we could have been more efficient in terms of time management, as we left some tasks until quite late. However, overall, I think we did a good job in terms of working together as a team.

We know that a business process modeler is responsible for creating a model of the business process. This includes understanding the business process and mapping it out in a way that can be understood by all team members and stakeholders. Our team took the role of proficient business process modelers and reflected the perfect hospital process models. Members of our team are Me, Anjana, Ruturaj, and Saurabh.

Each team member contributed differently to the team. We split the as-is process models between us, and also the responsibility for writing the report. I think we all worked well together and helped each other out when needed.

My role in the team was to help to create a comprehensive as-is process model, detailing Deegayu's outpatient processes specifically in the consulting area. This involved mapping out the current process and detailing the various steps involved. I also wrote a section of the report on the consultation process. I provided feedback on the other sections of the report and also on the as-is process models for the pharmacy and laboratory processes. We often had group meetings to ensure we were maintaining the appropriate progress.

Producing the consulting model required sifting through the process description to find the steps that were specific to the consulting area. I also had to understand how the various steps in the process fit together, in order to create a detailed and accurate model. This required a good understanding of the process, as well as good analytical and problem-solving skills. Oftentimes the process was not very clear and there are also limitations with BPMN, so I had to use my judgment to fill in the gaps.

Ruturaj's role in this assignment is to develop a comprehensive process model for the hospital's pharmacy. This model will include all of the processes and activities necessary to operate the pharmacy, from ordering and receiving inventory to dispensing medications to patients. He will work closely to ensure that the model accurately reflects the real-world operation of the pharmacy.

Saurabh's role in this assignment is to create a business process model for the laboratory of a hospital. This will involve understanding the requirements of the hospital and then creating a model that captures the key processes and activities involved in running the laboratory. He is also responsible for ensuring that the model is accurate and up to date and that it conforms to the hospital's standards and requirements.

Anjan's role in this assignment is to develop a report that details the Deegayu hospital process models. This report will serve as a guide for the hospital staff to follow when implementing the new business process model. She will need to collect data, and then analyze that data to identify the most efficient and effective way to implement the new business process model. She will also need to display a visual representation of the hospital business process models built by us three team members in a way that the hospital staff can easily understand and follow the new model.

I really appreciate the work that my team put into this assignment. I know that it was a lot of work and required a lot of coordination, but everyone worked together really well, and the end result was great. I'm really proud of the work that we did and am grateful to have had such a great team to work with.

Overall, I think we produced a good report. We managed to cover all the required topics, and I think our as-is process models were comprehensive. I think we could have been more efficient in terms of time management, but overall, I think we did a good job.

The report presented here illuminates key processes of the Deegayu hospital. After analysis of the different stakeholders and different processes involved, we classified the entire process flow into three different processes and worked on it separately as a distributed task in the project group. Our group has 4 members, and we classified the processes accordingly:

1. The consultation process
2. The prescription fulfilment process (Pharmaceutical process) and modelling conventions.
3. Laboratory process
4. Report writing and value chain

The process model that I have worked on is "The prescription fulfilment process" (Pharmaceutical process).The prescription fulfilment process depicts how the customers can purchase the medicines using the prescription provided by the Doctors. It also includes key processes taking place within the pharmacy and a few marginal details which render the entire process flow and make it easy to understand. Also, I have worked on some parts of the report writing where I have described all the BPMN elements that we have used in process modelling. This part is represented as modelling conventions.

Process modelling task:

The process modelling task has been accomplished considering the "BMPN 2.0 standards". The tool used for process modelling is Signavio. With the help of Signavio's built-in "Convention check" feature, most of the convention errors and warnings were eliminated which enriched the readability of the model. I provided suggestions to my team members to make amendments based on the checks performed by the convention check feature in Signavio.

Approach towards the solution:

Developing a rough and simple model on paper before implementing it in the BPMN tool (Signavio) helped me visualizing the key processes. Following this, drawing a simple flowchart from the description exhibited the process flow from start to end which helped in understanding the start and end events. This clarified the scope of the model. We used a brainstorming approach to solve the problems that we came across with lateral thinking. Besides, I have used Effective Setup of The Modelling Methodology (Bandara, Wasana, Merideth, John C., & Holmes, Elizabeth, 2020) helped in understanding the key processes, sub-processes, and the scope of the business process. Using the BPMN life cycle concepts from the learning, the key concepts such as process identification and process discovery were applied to approach the objective. Apart from this, the same methodology clarified the key roles of each of the stakeholders which further provided direction in designing the model.

Identifying possible errors in the designed model:

Based on the discussions in the group meetings and feedback from the team members, I was able to identify some of the shortcomings in the process model that I had designed and rectified them. Also, I helped the other team members with the information that I had gathered from different resources in developing and correcting the process model. Following are the problems I have identified:

1. The OR gate is used to merge the activities from the Pharmacist and Chief Pharmacist's pool. XOR gate seems more accurate in that place, however, I had to assume the process in that way to make it more sensible considering the possibility that both the Pharmacist and Chief Pharmacist advise the Pharmacy Assistant to resolve the issue with understanding the prescription.
2. Inclusion of delivery person in the same pool. Since the report specifies that the delivery associates are casual employees who work for Deegayu (employed by Deegayu), it can be considered that they have the same level of responsibility as the others for fulfilling the order. To ensure that the task is completed successfully with minimal errors, we organized regular meetings where other team members provided feedback on the work which was done to date.

Teamwork:
Having equal responsibilities distributed among the team members helped us to concentrate completely on the given task. The group meetings held every week helped us to think out of the box. We set some expectations at the beginning of the assignment about the project work to ensure everyone is heading in the same direction and have the same set of goals. Different perspectives of all the members allowed us to think over the different possibilities the worked model could have. We clarified all our doubts in the group discussions, which helped in the improvement of the work. My feedback to the other team members included areas of improvement for the BPMN model that they have worked on. Apart from that, group meetings were organized virtually over Microsoft Teams which gave us the ability to work collaboratively. We shared our developed models and work drafts in Microsoft Teams regularly with every update and amendments done so far so that other group members can review the work and use it for their reference. Every team member worked on their assigned tasks by setting up a deadline which benefited us to collaborate toward achieving the shared goals within the given timeframe. All the team members were punctual in working with the assigned tasks. Everyone contributed helpful insights into process models and participated actively in group discussions.

SAURABH PAWAR

Our consultancy team has been tasked with creating a Business Report for the 'Deegayu' Hospital that would consist of an extensive collection of pre-production models covering Deegayu's outpatient processes, especially those of consulting, pharmacy, and lab.

To complete the entire report, we are splitting responsibilities evenly across our teams. My responsibilities in that team were to complete Laboratory flow models. We had ongoing meetings over the internet, discussing questions, sharing thoughts about one another's work, and deciding how we would carry out our tasks according to the talks we had, in order to produce this single report. Everyone completed the assigned tasks in a timely manner to minimize delays to the final report.

Each team member contributed to the team in many ways, including feedback, ideas, and BPM modeling abilities. The concise and transparent group talks made it easier for us to correct our errors. Everyone had a unique viewpoint that aided in understanding and discovering new ideas. I offered a couple improvements to the assignment that were favorably received and executed. We had various disagreements as a team over whether to offer a table for specific jobs or write a full description in paragraphs. We settled the matter after considering each other's points of view and proceeded on with our report completion. I also gave some comments regarding the layout of the report.

I offered several improvements on assignments which were received favorably and implemented. We had varying disagreements within the group about whether to propose tables for assignments, or to write the entire description in paragraphs. We settled this matter after considering each other's points and continued to work towards our reports. I have also made a few comments regarding layout of reports.

I believe that having teamwork increases chances to reach higher levels of effectiveness in your job. If we can assign different tasks to appropriate individuals, the effectiveness of the team is greatly increased, which will do good things to the individual motivation, and to the fact that there are less conflicts or complaints within a team. I also think the better performance provided by the group leads to higher production, since the weaknesses of one individual within a group can be compensated for by another person's strengths

Once we have settled on a group's makeup, it is then on to the storming stage, where everyone in a group starts feeling that they belong, learning each other's strengths and weaknesses, and being motivated to work as a team. At first, the storming phase felt a little awkward, but with every meeting, it got better, because we learned to work together as a team. Teamwork helped me to develop logic, improved my learning curve, and improved my personal growth through the skills I learned from working together. Working together helped me understand my skills and capabilities, because of the teamwork, I felt comfortable sharing my ideas and responses towards Owes given problems, as we had the same goal, creating the likely outcomes was easier.

The value of support by a team makes the student help easily solve problems. It also makes a group appreciate one another, leading to increased respect, trust, and openness within a group. There are times where the team cannot perform the way they are supposed to, particularly early on in an overall project. One of the biggest challenges that the team faced was a lack of time for meetings and practices, and distance between us. Our team had the responsibility of keeping the deadlines split, allowing for more time for compiling, editing, and revising, but were not able to keep up with them, because deadlines did not mean a lot to some members.

The teams were proactive about contributing to our projects, doing work assigned to them, and helping one another complete assigned work. I learned to be proactive in contributing to a team's project, and I tried to do my work best, as well as try to help out my teammates going forward. More importantly, it is what each team member has learned from working together, and the ways that these learning modules shape our instruction to become better students going forward, that will matter the most.

The three other members, Ruturaj, Kavya, and Anjana were generally punctual and keen on working on their assignments throughout online meetings. Each contributed helpful thoughts on process-modeling charts and were active participants in discussions.

Since responsibilities were already assigned, we were allowed to bring our own thoughts and originality to our assignments, and their complexity with respect to the project's general account. Despite having different opinions about how tasks should be performed, we worked efficiently together to produce a draft of the final report.