

fud 7
Jaimin - Reach - 11:00 AM
11:00 - 2:00 PM → M.Y.
Unko
hajit

Sample Questions

- How did you hear of MLA?

where we here?

Sample Questions

- How did you hear of MLA?
- Why are we here?
- Who really owns the issue—eg a particular line of the CEO, the HR person?—see also Miller Heiman the customer?
- What exactly does your company do? Is it currently profitable?
- What is its position in the market place: eg a leader, number two, a newcomer?
- How many people work for it and what is the turnover staff—ie how are you managing your talent?
- Where are your people mainly based, geographically?
- What is the structure of the company—could I have an organisation chart?
- Does your company have any key business goals you do share?
- Who heads up HR or Learning and Development and their boss?
- Who are the key people with responsibilities for training development?
- Would I be able to meet them at some time?
- Do you have a budget for tackling this issue, if so what is it?
- When do you finalise your training budget during the year?
- Who else in the company might be interested in what we offer?

Robert - Chief
grower
mentor to the machine

GMAC - Rahul Khosla
 Dr. Pradeep Dnyo - Rajit Mehta
 Dr. Harit Kidney - Dr. K Singh
 Dr. Ananth Kidney
 Dr. K K Talwar
 Dr. Anag - Dr. Director
 Subhash - Liver Transplant
 Wandeep Dethmaga - Dr. Director
 Group medical advisory - Clinical
 Dr. Candeep Garg
 Dr. Shradha Garg

Dr. Rajat Bakshi - 1 office
1st one since Rajat

SITUATION

i. Who are the target audience

110-125. Dr. Singh
130 clinicians
(Director & above)
cream of all department

ii. Job Profile (understand how they contribute to Basic Human Need : try and take a simplified approach to how they serve this world)

55 years. Cream of all
department, visiting consultants
Doctors in support, quality Drs. of
renal, medical, surgical, etc.

iii. Age , Qualification – (grade of collegesA or B or C), Experience in years

iv. Span of control (do they lead people , or , are individual contributors)

VC reporting to them.

v. What is the current state VS desired state (expectations- knowledge, skills, attitude, habit)

Current State	Desired state
<p>→ More structured HMEC.</p> <p>→ Most of the directors unit based.</p> <p>→ Go review all the committee in the units.</p>	<p>→ Way forward for doctors & how clinicians support</p> <p>→ Fun event</p> <p>→ Alignment with the vision.</p> <p>→ What is in it for me?</p> <p>→ Create a sense of ownership & management</p>

Peer review of management only introduced in
experience, sense of achievement
in the world.

maynardleigh

PROBLEM

Brand stability, culture,
respect - Strength

gaps in performance, quality or relationships (repeated probe from previous question)

→ No referral fee payment
→ Practice building care provided
by team is way better than any
other.

How have you arrived at these gaps (one person said, you observed, multiple leaders said, is it from training need analysis, is it a problem diagnosed at company level, has it come from a customer / consumer / partner / senior leader)

Validate the source of problem and try and rationalise it (percentage on customer score, talent engagement score, performance index, documented observations, result of a team hurdle). It will be good to record the name of the person who has articulated the problem statement. metrics

Khushi Anand, Patient
satisfaction scored 1M RB.

Implication

- How has this problem impacted the business (ex increase in cost, decrease in revenue, opportunity lost, brand tarnished, attrition, low morale, reduced customer satisfaction, conflict, low internal service, wastage of time, money, bandwidth)

Leakage of ~~no~~ reference of
patients → doctors have refer-
ed to AIIMS: 50-60%
four point

Need

What according to you is the solution to bridge this gap

soft landing

Have you tried this solution or any other solution in the past

Vision cascading per department already done

i. How will you measure the effectiveness of this solution (MOS – measures of success)

iv. What does the solution look like to you (modular , one day , two day , three months , bespoke , quickie)

3-4 hour

v. What level of solution would you like to attend (at the level of knowledge , or practise , or internalised)

HMEC.

→ tough cases.

Zone 1 - 83

" 2 - 29

" 3 - 9

Punjab - 9.

Delhi - 1

NABH - External auditor
each unit has medical advisor
and Medical superintendent

Attention → Junior & Senior
doctors 40-45%.

→ senior most level

Attracting senior doctors is an
exclusive issue.

Visiting consultants < Non-Exclusive
Zone 1 & 2.

Management - This is not business
you will have to share profit/
business
We are not saying don't
do BPL.

If you want to cha
lls you from partic
then don't cha
high from us.

One team on doc

② Doctor not good
professional

→ Moving / creating all
Sherman, Cho
your own com

Diagnosis

MAC

Rahul Ghosla

Rajit Mehta

Day 1.

Rajit

3 EC members

1 Zone 3

1 Punjab

Zone 2

started with business part
after aspects of training

Circle HR head.

like HBP

↳ HR head specific region.

mid level leaders

function heads also
They need to appreciate the
role understand
what function or
business head
would be required

4- timelines not met.
staggered 10-15
days post
deadlines.

Keep your course
create rapport going
on mine the

person.

→ How do I manage
conflicts?

What are many
that you need
take care.

Business

→ Manage enough
idea in better

many in
at

→ Open conversation
respecting people

→ Looking out for
future!

Working in
silo men