



Daffodil
International
University

**An Analysis of the Customer Relationship Management Practices at
C&T Home Care.**

Supervised By

Professor Mohammed Masum Iqbal, PhD

Department of Business Administration

Faculty Of Business and Entrepreneurship

Daffodil International University

Submitted by

Tarikul Islam Akhand

ID: 211-11-1235

Program: BBA (Major in Marketing)

Department of Business Administration

Faculty of Business & Entrepreneurship

Daffodil International University

Date of Submission: 02 December, 2025



C&T Home Care
Home care you can trust

**An Analysis of the Customer Relationship
Management Practices at
C&T Home Care.**

Letter of Transmittal

02 December, 2025

To

Professor Mohammed Masum Iqbal, PhD

Department of Business Administration

Faculty Of Business and Entrepreneurship

Daffodil International University

Subject: Submission of Internship Report on "An Analysis of the Customer Relationship Management Practices at C&T Home Care"

Dear Sir,

I'm happy to turn in my internship report, "An Analysis of the Customer Relationship Management Practices at C&T Home Care."

This report came from the internship program, which is required to finish the BBA program. I did my best to finish the report. I have tried to make my report as complete as possible by using the data, information, and knowledge I have gained while working as an intern at C&T Home Care.

Thank you for giving me this chance to be a part of this internship program. I really hope you will read my report about my internship.

Yours truly,

Tarikul Islam Akhand

ID:211-11-1235

Program: BBA (Major in Marketing)

Department of Business Administration

Faculty of Business & Entrepreneurship

Daffodil International University

Certificate of Approval

This is to certify that the internship report entitled An Analysis of the Customer Relationship Management Practices at C&T Home Care is prepared by Tarikul Islam Akhand, ID: 211-11-1235, as a requirement of the BBA Program, Major in Marketing, under the Department of Business Administration and the Faculty of Business and Entrepreneurship at Daffodil International University.

The report is recommended for submission.



Professor Mohammed Masum Iqbal, PhD

Department of Business Administration

Faculty Of Business and Entrepreneurship

Daffodil International University

CERTIFICATE OF DECLARATION

I, Tarikul Islam Akhand, the student of the Department of Business Administration, bearing ID: 211-11-1235, Major in Marketing from Daffodil International University (DIU), do hereby sincerely declare that the internship report on “An Analysis of the Customer Relationship Management Practices at C&T Home Care.” has been authentically prepared by me. While preparing this internship report, I did not violate any copyright act intentionally.

I am further declaring that, I did not submit this report anywhere for awarding any degree, diploma or certificate.



Sincerely,

Tarikul Islam Akhand

ID: 211-11-1235

Program: BBA (Major in Marketing)

Department of Business Administration

Faculty of Business and Entrepreneurship

Daffodil International University

ACKNOWLEDGMENT

First, I want to thank God for helping me finish this report.

I would like to take this chance to thank my most respected advisor, Professor Mohammed Masum Iqbal, PhD, who works in the Faculty of Business and Entrepreneurship. When writing the report, Daffodil International University gave me that important piece of information. I owe him a lot for helping me during my internship. I had a hard time finishing my paper without your help and advice.

I also want to thank the management and staff at C&T Home Care from the bottom of my heart for their extensive professional knowledge, which helped me get important information, useful advice, and direction. It took a lot of thinking to write this report. Finally, I express my gratefulness to my classmates, seniors and all others for their valuable advice, suggestions and support.

Thank you.

EXECUTIVE SUMMARY

I completed a three-month internship at C&T Home Care's Dhaka Customer Management Office. I was curious to see how much of a difference their cross-border CRM would actually make on the ground. Especially pertaining to the highly regulated US home health care market.

In the coordination department, I dealt with lots of operational CRM. I did the scheduling of caregivers at the spot. I resolved errors and documented adherence to Electronic Visit Verification (EVV) rules. The Client understands how the speeds and staff compliance processes can help in increasing the Clients happiness and running services in a 24-7 BPO hub. The suggestions are helpful to verify and validate the service.

To find out how well operations were functioning, communication and data flow between Dhaka and New York offices was assessed. Clients regularly appreciated that Dhaka staff were always a phone call away. Staff used to complain that the data is all over the place, and there is no single CRM system, which made the problem hard to solve. As a result, we failed to do any proactive Analytical CRM.

I was able to apply what I learnt in the school like Service Marketing and Operations Management in a real life setting, thanks to the internship. Also, I got better at prioritizing and talking under pressure. Additionally, I learnt a lot about the compliance rules. The report adds that operations can be further improved through a central CRM platform and more cross-cultural empathy training.

In general, having an internship proved to be a huge leap in my career and realised how essential operational support safeguards the client care as well as the rules in the global healthcare sector.

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CHAPTER-1

INTRODUCTION

1.1 INTRODUCTION

Customer relationship management (CRM) basically consists of how businesses maintain records of their customers and make them happy. Customer service is the merging of strategies, processes and tools to help enterprises better understand their customers, interact with them and build customer loyalty through the provision of good customer service. You gather information on your customers, their past services, their interests, and behaviours, so you can respond quickly and accurately. Each touchpoint – call, message, mail or meeting – helps us make the next one better.

The three components of CRM are Operational, Analytical, and Collaborative. The term operational refers to day-to-day things scheduling, fixing things, recording keeping, fulfilling requests etc. which are very important in home healthcare as nothing can go wrong. Being analytical means looking at data to see patterns, whether a service is good, whether customers like it and to help the boss decide. Collaborative helps teams share information without a hassle or duplication.

When customers satisfied, they tend to be loyal. In the strict domain of home healthcare, CRM is an even bigger deal. It takes care of setting up the caregiver, record keeping, rule abiding, and personal care. Knowing how to use a CRM is critical in being able to check service quality and service efficiency at entities such as C&T Home Care.

1.2 The Background of the Study

This report is based on the BBA internship program implemented by Daffodil International University with a purpose of giving us business exposure. This program allows students to work in companies while they see how theory is applied. I completed mine at C&T Home Care, whose New York headquarters does patient care and the Dhaka office does customer management.

I was a Customer Representative from August 17 to November 17, 2024. I addressed emails and phone calls, resolved client issues, answered questions, and connected with caregivers and supervisors in New York. I have learned how to manage communication for local care on a global scale for service.

The experience linked my BBA studies to the service sector's real problem of customer retention. C&T Home Care uses CRM to ensure the client gets good satisfaction and service from teams that are so far apart.

1.3 Origin of the Study

This internship brought together school theories and real business and operations for the first time. I was involved with marketing and communication strategy lessons and applied those for my client at C&T Home Care. As a representative from Dhaka, I processed and actioned requests through challenges in emails and calls and coordinated with the caregivers and the clinical team.

I learnt how a service operating system works, how decisions are made, and dissociated consistency problems. I observed the efficiency of the service, and the challenges at client segmentation and engagement in the BPO. I was getting my hands on the operational side of the business, and I was able to build on my adaptability and communication and pressure.

All in all, this was one of the most valuable parts of my time at DIU BBA. I was able to collect a wealth of lessons, growth, and a more refined vision of the inner workings of a business, especially in the contextual of breaking down operations of a Customer Relationship Management systems.

1.4 Objectives of the Study

Main Objective:

The main objective of the study is to analyze customer relationship management practices at C&T Home Care.

Specific Objectives:

1. To explain customer relationship management;
2. To examine customer relationship management (CRM) practices at C& T Home Care;
3. To make some recommendations to improve customer relationship management practices at C&T Home Care;

1.5 Methodology of the Study

First, I looked into the activities needed to complete C&T Home Care's operational strategy by looking into the Operational CRMs, The EVV/HIPAA regulations, and the coordination of the Dhaka

BPO. I evaluated the mechanisms they use to maintain reliability in the home care sector in the US by looking into the service delivery and the real-time issue fixes, as well as the data logging.

Type of Study:

The type of study in this case is descriptive and exploratory. I described C&T Home Care's operational and service delivery processes using the observations collected from the internship. I focused on the live processes and their execution, along with the workflows aimed at assisting the clients and coordinating with the caregivers.

Analysis Method:

The main forms of data I used were qualitative, which I collected through observation and conversation, as well as through the performance of the work. I analyzed some quantitative metrics, such as the volume of calls and the time taken to resolve an issue, but the focus here was primarily on the evaluation of the strategies and their impact on level of satisfaction and adherence to regulation.

Collecting Primary Data:

The time I spent at office Dhaka in the period from August to November was used to collect primary data.

- Conversations I had with the supervisors, the managers, and the colleagues in the support and scheduling, and the compliance.
- I participated in the real coordination, such as managing call-outs from caregivers and changes to the schedule, and queries from clients.
- I gained operational CRM, advanced communication and compliance logging on the site.
- I received task feedback on real time fixes and data entry from employees within the company.
- I enhanced my soft skills in sensitive communication and time-zone EVV updates.

Collecting Secondary Data:

Contextualized the operations of the company in home care and BPO using available resources.

- Information from the C&T Home Care website and brochures.
- Internal documents, manuals, guidelines related to HIPAA, and client communication.
- Public documents from the New York State Health Department on EVV and home care regulations.
- Research articles, BPO case studies, and journals related to cross-border services and health operations.
- Internal documents on workflow and shift changes.

Chapter – 02

Company Overview

2.1. Company Overview

Based in New York, USA, C&T Home Care, a licensed home care agency, provides assistance to seniors and individuals with disabilities in addressing non-medical, everyday tasks. Founded in Queens in 2016, they service New York City (Manhattan, Bronx, Brooklyn, Queens, Staten Island) and Nassau County. “Compassion you can feel with the trust you deserve” is their slogan. They aim at personal care plans to establish long-term trust. They prioritize satisfaction and retention while focusing on adhering to the NYSDOH and NYSDOL regulations.

They offer New York (Jamaica, Bronx, Jackson Heights, Washington Heights) with administrative supervision and all-day, every-day assistance. Their Dhaka Office is the Operational CRM center, which manages emails and calls and provides caregiver coordination at varying hours. To New York homecare, they pledge the fastest service and they have a team of 400 to support this.

2.2. Mission of C&T Home Care

The C&T Home Care is committed in delivering caring, high-quality help to senior, disabled and families. We are the best home care provider in New York who knows how to meet the needs of clients. Our services are personalized and respectful, from personal care to medical management. "Our main goal is to improve our clients' quality of life by making sure their homes are comfortable, dignified, and happy places to be.

2.3. Vision of C&T Home Care

C&T Home Care's vision is "To raise the standards and expectations of the home healthcare industry by providing the best care, compassion, and dedication, building lifelong relationships by earning the client's trust, and helping them gain the independence they want."

2.4. Key Service Offerings

C&T Home Care mainly offers non-medical home care services, with a strong focus on government-funded programs in New York State:

- Consumer Directed Personal Assistance Program (CDPAP): The company is an approved fiscal intermediary (FI) for this important New York Medicaid program. People hire, supervise own caregivers often family or friends. This puts client in charge, fitting C&T's relationship focus.
- Personal Care Services (PCS) help with daily living activities. For example bathing, dressing, meals, med reminders, light housework, etc. Trained Home Health Aides (HHAs) serve as helpers.

2.5. Compliance and Quality Assurance

The company assures quality that meets the set standards.

- The Organization stays compliant with New York State Department of Health & New York State Department of Labor regarding retention-compliance.
- Each visit is electronically verified using the Electronic Visit Verification (EVV).
- Caregivers are trained to ensure safety, harassment prevention, and multi-lingual communication for professional services.

2.6 Core Objectives of the Company

C&T Home Care works to benefit both the client and the business as well.

- Make sure that our service is available 24/7 by using the Dhaka office.
- CDPAP Enrollment Boosting: Has added roles as a provider, managing operations for both clients and employees.
- Maintain Your Data Secure and Accurate – Data Records are HIPAA Compliant and Secure.
- You should promote staff retention. Staff should be paid fairly and given benefits to retain the quality of care.

Chapter – 03

Internship Role and Responsibilities

3.1 Role and Responsibilities

C&T Home Care Dhaka offered me an internship in the area of Service Coordination and Operational CRM. We want to offer the best quality care to our customers always while working at our facility in New York.

I helped staff with updated everything about their services. One of the important lessons learnt was about cross-border operation to enhance communication and compliance in health care.

Key duties:

- I got in touch with people to fix the delay issues in the production plan. Scheduling issues were happening in the calls.
- Make sure you keep the logs at the service site regularly updated. Also, check on the billing site the EVV data.
- A USA client and coach contacted me, and I gave it considerable thought. I got a message about scheduling and payments from them. I received incident number two when I reacted to the message. It was not really about the other stuff. I am taking precautions and ensure safety while executing this shoot in another New York City.
- We consider the hours spent on audit as evidence for activity on the database.
- I summarize my report to indicate whether any issue was there, solution of the issue and total call volume.

Through this project, I developed Logistics skills, ability to work under pressure, team spirit and behaviour and compliance of BPO.

3.2 Rationale of the Roles and Responsibilities

The customer representative for C&T in Dhaka is responsible for everything, from the company's policies to client retention. Healthcare operations team vital to safeguard HIPAA data and respond to crisis logistics.

My coordination and operational CRM work taught me how a BPO of global scale is used in the US service. The jobs of fixing schedules, EVV logging, cross-border handoffs were not merely admin jobs.

They lowered risk, accurate billing, client trust. This service is operation and CRM online communication with school ideas. I applied failure recovery, cultural talks coordination in real urgent spots. My work ensured seamless operations which made the client happy. I supplied BPO centers vital in modern service.

3.3 Examples of Tasks Completed

During my internship at C&T Dhaka, I was involved with daily operation work and gained practical experience in Operational CRM in a rule-centred cross-border environment. The company's strength along with where efficiency or compliance could be improved was revealed.

Standout Tasks:

Real-Time Service Triage and Conflict Resolution

- When caregivers but don't show up, we have a protocol. We contact the backup caregiver, update the system and inform the New York department if applicable.
- I corrected delays and wrong check-in issues by validating details and liaising between the US clinical lead and sites.
- I took calls from clients about pay, schedule mismatches, care details and client service issues.

Compliance and Data Integrity Management (EVP/HIPAA)

- I logged the service data and verified it to ensure accuracy for compliance and payments.
- I assisted during audits and helped the organization's HIPAA compliance and issues during my log review.
- Data Matching: Interfaced the booking software and clients' logs to show discrepancies in parallel systems.

Enhancing Communication and Operational Procedures:

- I drafted short synopses each day for New York at the end of every shift summarizing major occurrences and outstanding issues.
- I edited the call scripts to incorporate elements of empathy, the guidelines, and resolution.

- The common application issues and their uncomplicated answers were incorporated into the operations manual for the convenience of the new staff.

Assistance in Reporting and Data Analysis:

- It is a software many companies use to monitor their customer service calls.
- I examined the customer complaints in a triaged manner and categorized them by major driver (e.g., aide behaviour, logistics, system issues) for the ops manager.

CHAPTER FOUR:
Key Learnings and Experiences

4.1 Important Learnings

My time with C&T Dhaka was perhaps the first time I understood the edges of Service Marketing theory and how they are shaved down while doing real business. Its one thing to look at a map and another to actually walk over the terrain. our responsibility was to ensure there were no New York care operations in a compliant and steady state as it was less of a management role and more of a triage one.

Operational CRM as Survival:

I understood quite early on that Operational CRM is much deeper than keeping records. In reality, it is what holds the whole system together to make sure there is no disorder. From the outside it seemed that every client touchpoint was a “test” of how fast the Dhaka teams could work. We put effort on “menu wrap” to ensure that issues are resolved actually. In this case, how much more efficiency is there to be gained is a question of irrelevance, it is the output.

Cultural Calibration and the Legal Framework:

When communicating with the New York offices, there is a major learning curve. You are not just required to know English. You are required to understand New York culture. You have to go beyond the accent to understand the true urgency. You have to respond in a more formal tone of voice as there is a very American customer with strict legal requirements. Rules like HIPAA and EVV are not just background noise. They dictate how service delivery compliance is structured.

Managing Time Differences:

The logistical problems of the time difference cannot be ignored. Aligning activities for Disney to the New York team who is yet to wake up results to strange asymmetries. A proactive mindset will assist in resolving issues before it escalates to a crisis. Over time, this rhythm taught me not to view the client as a single entity but rather a split entity that requires that I differentiate between the CDPAP needs and the PCS requests. This enhanced the personalization of the care provided.

4.2 Rationale of the Roles and Responsibilities:

The function of the Dhaka operation for C&T was much more than that of a typical back office. Because of such Business Process Outsourcing back office support, US clinical staff were able to keep a laser focus on hands-on patient care.

The entire arrangement relied on the office's ability to manage the constant demands of the service loop. In other words, we will provide critical 24/7 coverage to resolve any type of crisis. Sick care aide, Plan modification, You name it. It appears that the capability to resolve problems quickly and effectively is the customer's greatest weapon in Relationship Marketing. Clients stay loyal not through promises, but through reliable actions that they can count upon.

The team also had to manage the caregivers, who were equally important. I was not merely an administrator - scheduling and short-term help is complex. Finding and addressing logistical problem quickly is important in addressing any pay issues or small conflicts that can lead to the turnover of aides. As far as I know, the NY Health EVV data requirement was achieved by consistently high quality, so without that, the required regulatory compliance would fall apart.

Hence, the contribution of the Dhaka office was not just supporting the business, but the engagement of the office in the service of excellence was doing an important work of internal marketing, thus sustaining the entire operational system.

4.3 Connection with Academia

This internship was crucial to seeing how BBA concepts applied to a health agency works in the US. I saw the service marketing theories, business communication and management theories in pretty much every activity. I remember the gaps model in service marketing got less abstract during the internship. Each phone call and email was a "Moment of Truth" where the agency and the client had a business relationship. I realized that small things in my effort to close the "Delivery Gap" made a huge difference like a quick reply or a prompt resolution to the email.

Operational CRM was about the creation of the choreography of a dance .. of rhythms i guess you could say. how you keep your logs and rout your messages and notes can help strengthen your relationship in ways you might not expect. It taught me that clean data and consistent communication are the relationship building bricks to fostering trust. I guess you could say the different interactions were clarified by the class frameworks to me. Principles of consumer behavior came alive too. I noticed that I modified my style based on whose call I received, a patient or a family member, and on how urgent or risky I felt the situation was or the client's history. This way, I was able to optimize resource allocation, and retention didn't come with the figure, but with the people.

There were also difficulties with Business Communication. Writing emails and screenplays was one thing, while keeping phone conversations succinct but HIPAA-compliant was a considerate care I

didn't realize was textbook necessary. In brief, the collaboration of strategy and logistics was something I was able to see in real time for the first time, and it was quite fascinating. The support that the Dhaka team provided New York in terms of RETENTION and COMPLIANCE showed that the fundamentals of scheduling, handling emergencies, and cross-checking are day-to-day tasks. This is the routine of strategy and concrete operational decisions, and it's that those decisions support or refute the overarching goals.

4.4 Example of Experience and Personal Growth

While I was at C&T, there have been a number of occasions where I was put with an environment where I was able to better push my limits both in my professional skills and my personal skills particularly under pressure. The Critical Missed Shift Scenario is one prominent and specifically classified scenario. The family in America started calling furiously one morning that their aide did not come. Since I heard receive no call, I ran to the system to notify the New York supervisor and pull another off the roster. The more relaxed and calm the caller became when we assured them that a replacement would be there within the hour, the more I realised stress management is all about knowing what you and your company can do.

Communicating cross-culturally was another learning lesson. Adapting bookings and their rules proved to be quite hard at the beginning owing to the accents, styles and other expectations of our American clientele. With the help of regular practice and feedback from my supervisor, I was able to improve my clarity and express care and optimism. The most impactful win of CRM that we have recorded is the changing nature of conversations over the years. From being information shared, conversations are now relationship-built.

The importance of data accuracy and responsibility arose. Any edit, comment or log affects how people comply, how services are delivered and how people get paid. I learned to be responsible through doing my chores carefully and paying attention. Eventually, I was sharper and much tougher in my communication and I was also able to sort out a lot of operational issues. The classes gave me practical knowledge about how marketing and servicing are done in the real world.

CHAPTER-5

Critique and Reflections

5.1 Critical Evaluation

I have come to realize that my time working with C&T Home Care has very different from my initial assumption. I thought the work would be mainly healthcare related. I did not realize that it mingled with operational healthcare, like a BPO, integrated with a set of very finite regulations that I have never seen. One of the most challenging aspects for me was the Operational CRM. Responding to situations of last minute schedule changes or no visas was critical. I learned how much a decision, even if it was made in a hurry, would affect the client and how much pressure the team would be in to remain compliant with the regulations. The support the Dhaka office was able to provide to the US clients was impressive. Sure, there is a cost benefit. But the ultimate value is how much support is available to users. This is what allows the model to really work.

At the same time, some concerns surfaced. The team was always willing to help and very communicative, but the systems did not always align. There were times when users were performing the same manual entries or when EVV duplication was taking place. Such work was a waste of time that could have otherwise been spent on strategic CRM work and process optimization. There is no doubt that the BPO model has some clear advantages. Yet, relying on one unified CRM would cut down on mistakes and cause the overall process to flow more smoothly.

5.2 Challenges Faced During the Internship

When I worked at that organization, I experienced many challenges that primarily consisted of complexity, communication and system constraints.

1. The biggest challenge I found was that the software applications used were disconnected from one another. The manual cross-checks for EVV compliance are laborious and lend themselves to mistakes.
2. Rescinding on short notice is particularly stressful. Moving aides across the distance quickly was not an easy task, and being late could mean care to the client.
3. It was challenging to use professional and culturally appropriate language for US healthcare conversations, including sensitive issues, due to HIPAA. It was especially tough when the conversation turned to sensitive subjects, like salary and job.
4. Most of the day went in being slapped around for urgent fixing, thus less time remained for analysing data as well as planning. A lot of the time, the work did not feel like we were creating

something but solving something i.e. reactive how breathing space is constrained by operational constraints.

5.3 Learning from Challenges

Overcoming those operational and communication problems taught me a lot.

- Because I was always forced to fix things, I learnt to triage quickly, assess risk and stay calm and collected in pressure situations. Gradually, it enhanced my project-handling abilities.
- My knowledge of how the integrity of records can have financial and legal consequences has deepened by cycling the data fixes. The operational success of healthcare organizations is based on a compliance-first foundation.
- Working between different zones has made me communicate more clear, friendly and following the guidelines. It also taught me to listen more in tough conversations.
- The need was felt due to lack of a centralised CRM. An integrated customer relationship management (CRM) system adds more functionality to your e-commerce system. It also boosts efficiency which reduces the risk of things going awry. Moreover, it allows the top executives to make better decisions. Finally, integrated CRMs also provide actual analytical insight.

5.4 Overall Reflection

During my internship at C&T Home Care, I gained personal and professional growth. The theoretical knowledge I gained about Service Operations and CRM became practical skills that I could apply in the real world. I also learned how complicated the BPO model is. For instance, I found out how a non-clinical office in Bangladesh can assist the major US healthcare service while still adhering to all the US regulator rules. I learnt to relax and deal with a stressful situation through the experience. I was taught how to handle an urgent requirement by working in a 24/7 operations setup. No lesson could have prepared me for this. I also got better at talking to people. To feel less anxious when facing tough conversations at work, I needed to be clear, confident, and understanding around sensitive issues. This internship helped solidify my interest in operational management and helped me confirm the important link between the smooth back-end logistics of a company and its strong

front-end client relationships. The experience provided a solid understanding of global service delivery. It also provided an understanding of operational risk management.

CHAPTER SIX

Conclusion

The internship in C&T Home Care provided a unique opportunity to know Operational Customer Relationship Management (CRM) in cross border service delivery model. One of the experiences that I found most fulfilling was being able to apply theories learned in school in real life. I was providing customer service and scheduling caregivers for a healthcare agency in the United States. The team in Dhaka did a set of primary activities involving people. It gave Dhaka team a rudimentary idea of how we do client servicing in the high-pressure, regulated home care industry. This allowed me to find a stronger connection between the concepts of service marketing and the actual day-to-day running of the business. I realized that building and nurturing client "relationship" is a highly integrated and organized operational system. In the case of Dhaka, the support was limited to. C&T home care BPO system has built, and I believe, it is still building, the support systems that are responsive and thus, able to provide regulatory and operational adaptability and resilience. At the same time, the need for improvement of the Analytical and Collaborative CRM systems was acknowledged. The improvement of these systems built around a single repository of data, pro-active client data analysis, and cross-cultural training will create a stronger client relationship and will provide opportunities of expansion.

The participation in the placement also made it necessary to develop new soft skills in a short period of time. There would be moments during the placement that service recipients would be unhappy, as an example, gaps in caregiver scheduling. In these moments, I had to be patient, remain in control of my emotions, and be aware of the patient's protected health information. The fact that I was dealing with these service users at a time with the big time zone difference built my time management on me, flexibility, and professionalism to responsible service delivery. This greatly improved my professionalism in service delivery.

Some of the work did involve actual triages and coordination of resources in the field. I was to balance many things at once in relation to the clients and the staff. This involved a lot of documentation with attention to detail, and a lot of communication with New York. I built on skills, like professional phone handling, that I had to juggle problem solving with during the time constraints. This training was a good foundation that could be built on for a health care support role.

In general, the placement allowed for significant professional development and practical exposure. I gained experience at my workplace in the demanding BPO and healthcare environment which will help me in my future career as well as my ability to work in a result-oriented work environment. The internship got me interested in Operational Excellence and Strategic CRM. What I learned from the internship is that it would help me in both academic and professional work in the times to come.

CHAPTER SEVEN

Implications

Taking up this internship made me realize that compliance has real implications in the world, not just a legal formality. It is the financial backbone of US healthcare. I saw this most clearly in the EVV logs. Because of a small manual entry error, compliance is having a problem and it is blocking full state payment approvals. The vulnerability in fragmented systems is very concerning. It pushed me to rethink the whole idea of Analytical CRM. Given an analogy from the analysis that has no operation base, it may be more goals than fact.

That being said, the coordination team that I saw working from Dhaka was astonishing to me. I expected typical logistical support, and I was not sure what that would look like, but I witnessed true clinical empathy. This team was executing live triage and urgent reschedule across multiple time zones. While they are not on the ground, they display the same level of calmness and strength that I would associate with on-site teams. This made me realize that it's not just about the cost, it's about setting on a multidisciplinary approach to overcome the challenges of different cultures and languages.

Going forward, the organization has to stop addressing data risks with a fire-fighting approach after the fact. A single solvable risk is to have a single CRM to capture data risks before payments are frozen, rather than after. My triage instincts are sharper and my skin is tougher for high-pressure communications after this experience. I consider these tools very helpful to prepare for the future in operations management.

Problems Identified and Future Plans

According to The Internship, system fragmentation is the main issue. It was recommended that Scheduling and communication systems should be connected to centralize the data. This would simplify operations and improve audit readiness.

The experience also confirmed strong personal aptitude in operations management and risk management. A future career path is indicated in implementing integrated systems and leading global service teams to bridge the gap between BPO efficiency and regulatory compliance. The professional network established between operations staff in Dhaka and supervisors in New York provides valuable insights into both sides of the cross-border service chain.

Recommendations

To improve the CRM practices at C&T Home Care and get around the problems that come with the cross-border model, the following suggestions are made:

1. Set up a Unified Collaborative CRM Platform: Use one cloud-based healthcare CRM system that makes it necessary to combine communication logs (Dhaka), scheduling (New York/Dhaka), and important patient records (New York). This will make Collaborative CRM better by giving the Dhaka team a complete, up-to-date view of clients, which will make them less dependent on manual cross-referencing.
2. Make Proactive Analytical CRM official: Start looking at service data from the Dhaka office on a regular basis (for example, keeping track of the types of complaints clients make, how often caregivers miss shifts, and the most common questions they get). Analytical CRM should aim to guess and solve the problems before they happen. Because, I think, only responding to them is not enough.
3. Provide advanced training in cultural sensitivity and empathy to the team in Dhaka, beyond the ability to speak English. The project will focus on U.S. healthcare client experience, community cultural variation in New York, and how to stay calm while working with agitated or emotionally engaged clients. By collaborating with clients on complex engagement challenges, the team will improve their cultural adeptness.
4. Create feedback loops that focus on outcomes. To set up a system through which the Customer Representatives (DRs) in Dhaka receive clear feedback on the outcome of their urgent interventions (for example: “the replacement HHA arrived within 30 minutes, client confirmed happy). Getting precise feedback as you go will strengthen good behaviours, highlight improvement areas, and enable the team to continuously improve and exchange good operating practices.
5. If you are still relying on email or manually assigning tasks, then implementation of automated ticketing or workflow systems within your project will ensure that urgent tasks will be passed on to the Dhaka – New York operational teams immediately and with full accountability. By altering time zones, you ensure that tasks do not go to waste as opportunities will diminish.

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DAFFODIL INTERNATIONAL UNIVERSITY

Faculty of Business and Entrepreneurship (FBE)

Department of Business Administration

Intern Assessment Form (Employer)

Semester: Summer

Year:2025

Name of the Intern: Tarikul Islam Akhand

Name of the Supervisor: Shafiq Akhand

Please rate the Intern's Performance based on the following criteria (Please Tick“✓”)

Specific Area	Please rate his/her performance on a 10-point Scale (1=Poor Performance.....10= High Performance)									
	1	2	3	4	5	6	7	8	9	10
Regularity in Office										
Communication Skill										
Work Responsibilities & Accountability										
Work Ability (Independently/Team)										
Adaptability in working place										

Signature with date

(Including official seal)



DAFFODIL INTERNATIONAL UNIVERSITY
Faculty of Business and Entrepreneurship (FBE)
Department of Business Administration
INTERNSHIP LOG BOOK

Student's Name:	Tarikul Islam Akhand	Internship Site:	C&T Home Care
Supervisor's Name:	Professor Mohammed Masum Iqbal, PhD	Week beginning:	17-08-2025
Internship Coordinator/Advisor:	Shafiq Akhand		

Summary of Internship Activities

C&T Home Care is dedicated to providing consistent quality service to its New York clients. Prioritizing Operational CRM and making compliance with regulations non-negotiable. Our Dhaka Customer Management Office is highly trained. They get lots of training in real-time scheduling triage. They learn all things HIPAA compliant. They get trained in cross-cultural professional communication. They practice accurate data logging for EVV (Electronic Visit Verification). You will not only learn theoretically but also practically through hands on exercises, shadowing and clear written procedures. This method not only expands their technological skills but also strengthens their commitment to client-centricity. Because of this strong foundation, the Dhaka team works out of New York to back up operations on urgent requests, sudden changes of shift, and other time-sensitive requests for care.

<p>Week 1:</p>	<p>HHA/PCA service scope was tailored to C&T’s mission and consistent with NYSDOH requirements. I have learned what Dhaka does 24/7 from the coordination point of view. I received training on the tools for communication, logging routines, basic HIPAA practices, etc.</p>
<p>Week 2:</p>	<p>Detailed study EVV protocols, role billing/compliance. Hands-on scheduling software, logging client interactions. Shadowing staff accessing/interpreting client care plans.</p>
<p>Week 3:</p>	<p>Training for professional and warm communication with customers and colleagues in the US. I practiced proper phone behaviour, using empathy scripts for stressful calls, and following protocol for health information. It was important to learn the escalation matrix for urgent issues.</p>
<p>Week 4:</p>	<p>Intro managing routine ops tasks: confirming shifts with caregivers, logging minor adjustments/late arrivals, initiating follow-up non-urgent issues. Understanding geographical service zones.</p>
<p>Week 5:</p>	<p>Focused operational side Caregiver CRM: handling inbound calls payroll discrepancies, time-off, gathering employment docs. Ensuring service logs match hours accurate payroll.</p>
<p>Week 6:</p>	<p>I focus on the experience and operations side of Caregiver CRM, where I take inbound calls related to payroll issues, time-off requests, and other employment documents. I ensured that the service logs and hours worked matched to ensure payroll operations.</p>

Week:7	Deep dive data quality control. Assisting auditing shift logs catch discrepancies scheduled/documented EVV check-in/out. Practicing meticulous docs client complaint resolutions auditable trails.
Week:8	Specific training role-playing managing emotional conversations distressed/frustrated clients care delays. Learning de-escalate phone maintaining pro boundaries, adherence protocol.

Week:9	Focus coordination US teams: compiling daily/weekly ops summary reports New York Clinical/Scheduling Supervisors. Learning protocol secure handover complex billing/HR appropriate US dept.
Week:10	Analyzing recorded support calls, service logs identify recurring ops bottlenecks (e.g., issues specific shift time/location). Using comm data structured feedback scheduling team process improvement.
Week:11	Developing end-to-end understanding ops flow client intake service completion. Identifying manual steps (e.g., cross-referencing disparate scheduling/logging systems) benefit CRM automation/integration.
Week:12	I made sure to check the whole collection of Coordination Logs and Compliance Tasks as well as help to collect data for the final report and attend a meeting with our Dhaka Supervisor to provide formal feedback on Service Management's performance, how we are doing in terms of Compliance Adherence and what we can do to improve our Ongoing Professional Development.

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