



CHAPTER II

HOSPITAL PROFILE

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HOSPITAL PROFILE :

Present Survey has been conducted in Matrumandir Maternity Home, Miraj. In this chapter, we are introduced to the various aspects of the hospital. on the backdrop of this description further analysis is carried out.

Before Eighteen to Nineteen years the hospital had one waiting room and one consulting room and nine beds in a rented building at station road, Miraj in the 1978.

Then the need for expansion was felt. Actually the number of indoor and outdoor patients was increasing to high level. That is why the hospital was shifted to the new building containing nearly 30 rooms.

It has also a small office where 3-4 persons can comfortably discuss with doctor.

2.1 COMPOSITION OF HOSPITAL :

Waiting room for 15 – 20 patients.

Doctors room / chamber.

Assistant Ward Attendant - 1

Nursing Staff of - 2 nurses

Receptionist -1

Consulting Room -1

Small Pathology Laboratory -1

Labour Room -1

Minor Operation Theater -1

Major Operation theater -1

General Wards -4

Special Rooms -20

As the “Maternal and Child Health Problems” were multifactorial in origin, their importance as well as advances were also looked upon through different angles and then Dr. A. V. Yadav got a well constructed building of 7000 sq. ft. area on the State High-Way (Miraj-Sangli Road) at Mangalwar Peth, Miraj.

A lot of modifications have taken place and now it gives at its best accommodations and pleasantness with situation, climate, manners and disposition.

2.2 LOCATION :

On 18th sept. 1981, this hospital was started in this decent premises which has same name as it was having previously viz. "MATRUMANDIR MATERNITY HOME". The previous capacity of 9 beds is now raised 36 beds and various other facilities. This complex also comprises of residential complex within it.

Existing hospital has got centrally placed well designed 2 floor building open space for parking vehicles is 20' x 10' feet. It is surrounded by a well constructed compound wall and iron grill compound of 7 x 5 feet size. It is just on the way on church situated at Gandhi Chowk, Mangalwar Peth, Miraj.

2.3 GROUND FLOOR CONSTITUTES :

There is open space parking vehicles of size 20 x 10 feet. By the side there is a dark room of size 10 x 5 feet used to develop x-rays. (On either side 3 private rooms are there which are surrounded by a big free giving nice natural ventilation.) in front of these private rooms people are provided with varanda for sitting comfortably and can have nice chitchat and enjoyment. There are 20 private rooms. Private rooms are provided with attached bathrooms, gas cylinder connection, separate small size kitchen, shelf for keeping food material etc. two beds one for patient and other for attendant. A cradle is kept for neonate or new born baby.

The Matrumandir Hospital is located at the north end of the Miraj. The Hospital is located in Gandhi Chowk, near the Mission Hospital. the hospital building is constructed in the are of 7000 sq. ft.

2.4 BED CAPACITY OF THE HOSPITAL :

This hospital provides facilities for nearly 25 indoor patients at a time. In emergencies the beds can be increased by using floor space. In at time 25 patient can be admitted there are twenty special rooms in this hospital and General Ward with 4 cots.

2.5 NEED OF MATERNITY HOME :

In the olden days health service centre, were not in existence, specially for the delivery cases. But now-a-days the population has increased due to high birth rate. In present situation there is need of taking care of mothers and their new born babies. The place where the delivery cases are handled carefully is called as "maternity Homes". Matrumandir Hospital is a famous in the city. This hospital provides health at reasonable charges with due care for cleanliness etc. It takes care of mothers and babies and provide the good health services which is becoming essential for the people in the area.

Health is not a single entity but it is result of various factors viz. Biological, social, cultural, psychological and other non medical dimensions. World Health Organization definition of health is - "It is a state of complete physical, mental, social, well-being and not merely an absence of disease problems.

Since the problems affecting mother and child are multifactorial in origin, the present strategy is to provide, maternal and child health care services as an integrated package in order to achieve a greater impact. In recent years increasing emphasis has given to the "Risk approaches for improved maternal and child health care and Family Planning Services."

As it has got wide spectrum to cover, these activities are undertaken as "National Program". In our country by Government of India, in the integrated form of maternal and child health package into the basic health services. Despite of all current efforts however, the health of mother and child still constitutes one of the most serious problems before Government.

There is a need for strategy to ensure maximum coverage of the target population by an effective and efficient maternal and child health services. As an approach to the problem, government is currently establishing primary health care centre in the rural underserved areas. These primary health care centre, approach combines all elements in the local community necessary to make a positive impact on the health status of majority of population. At present, it is primary achievement especially at maternal and surgical homes/centre.

In this country, the health protection of mother and the child is the responsibility and challenge.

2.6 MANAGEMENT OF THE HOSPITAL :

Day by day hospital management is being presented with problems and challenges of increasing complexity and magnitude in ensuring smooth running of various hospital departments. The ever increasing pressure of patients and their demands for hi-tech medical care. In the hospitals, together with the rising cost of administration of services is further coupled with the lack of corresponding increasing in the government health budget. The dilemma has, in fact forced the issue of health care and its costs into the national limelight. It is expected that a hospital's management must serve as a communicator, motivator and protector of administration and also to train carefully to achieve the requisite enthusiasm and success to meet the growing needs of the suffering humanity. Success in this behalf lies in with standing the political and administrative pressures from above and on charitable criticism from the society in general without titling the balance of hospital services in any way to provide reasonable high quality medical care to the public at an affordable price. This would require capacity, capability, experience, patience and resources, besides the requisite support and planning to make the hospital a viable institution.

2.7 PLANNING :

One of the major responsibilities of hospital management is that of planning. Planning is looking ahead determining the goals, objectives, politics, procedures and methods, considering various alternatives, select the best alternative under the circumstances, work out a time frame, fix a target. Planning raises all the questions of what, why, where, when, who and how as also how much and how many.

Planning is a continuous process starting with the conceptual stage of setting up the hospital, effecting improvements and solving problems encountered. Constant efforts must also be made to improve the quality of planning, which in turn improves implementation.

2.8 ORGANIZATION :

Organization structure is the network of relationship between the various persons in an organization. In this structure different tasks and authorities are distributed.

2.9 COMMUNICATION :

Communication is a means of imparting ideas and making oneself understood by others. Success of all administrative and managerial functions depends on effective communication. The manager must know what is happening in the hospital and be able to convey information to all those involved with the hospital – employees, patients and the public. Communication implies that there is a message to be transmitted that it is received and understood. Hopefully, the message is accepted and where action is indicated the action is taken at right time by the right person. In order to have effective communication, there must be upward, downward, horizontal and tangential communication within the hospital. there must also be lines of communication with other health care institutions organization and with the community.

Communication is a two-way process, hence, the manager must listen and observe, listening is not easy but one can and should cultivate

the art of good listening. In order to achieve this objective. The listener must concentrate on what the speaker is saying by keeping his eyes and mind open at the same time, avoiding distraction. One must be equally responsive while listening.

2.10 DELEGATION :

A hospital administrator cannot do everything by himself. Good management also means getting things done through others. It is, therefore, necessary to delegate to others certain tasks. The hospital management team members often pass the buck upwards to top management. This tendency must be resisted. Delegation confers on the subordinate the right to act utilizing the resources to achieve the pre-determined goals. It also enables the manager to extend his effectiveness and to enlarge his functional capabilities.

It is advisable to list all the jobs which have to be done, to mark those jobs which can be done by others and to delegate these jobs. While entrusting the job one should make sure that the job is spelt out in detail. Simultaneously sufficient authority should be provided. Delegation can be effective only if the person is given the 'authority' along with the 'responsibility'.

The choice of the person is important. Delegate to developed people second in command. Assess the subordinate and then delegate. The person to whom responsibility and commensurate authority are delegated must have aptitude, ability, knowledge and skill to carry out the delegated responsibility, utilizing the given authority. The manager cannot delegate his own function. The purpose of delegating is to enable the manager to concentrate on his own job. Delegation cannot be indiscriminate. The work is to be carried out by the person to whom the responsibility is delegated has to be chosen carefully. While delegating tasks, it is also necessary to give sufficient authority to match the requirements of the tasks. If authority

is not delegated, the person to whom the tasks is delegated will not be able to perform the task.

2.11 HOSPITAL INFORMATION SYSTEMS :

The larger the hospital and more complex the services provided by it, the greater the need to pay attention to upto-date, reliable information because all administrative and managerial processes depend on proper information.

Information has to be collected about various issues and aspects that affect the day to day and long term functioning of a hospital. too much information may be as bad as too little. The manager must be able to digest and absorb the information so that suitable action follows.

The manager has to know about various management functions like finance, medical service, personnel and marketing as all these are inter – related. Absence of information in any one area will have repercussions on the others.

Information helps the management to match the resources with the needs as best as possible. It should be provide periodic reports on the clinical, laboratory, radiography, operations, deliveries and pharmacy, periodic reports on the number out patient and in patients supported by an analysis of length of stay, total patient days and number of births. Reports on medical and nursing care are equally important. Reports on the functioning of stores, dietary, linen and laundry, central sterile supply, maintenance and personnel should be obtained periodically. So also there is a need for periodic reports with analysis of finance and account.

Information is only a tool for better administration. Information by itself is of no use but if not properly used, it helps in better administration. Without correct and adequate information, it is very unlikely that it will be possible to effectively manage a hospital.

2.12 MATERIALS MANAGEMENT : Material management bring about a control over the acquisition storage, distribution. Use and disposal of supplies and

equipment in order to carry out the primary responsibilities of the organization in an efficient, effective and economical manner. Material management seeks to ensure the availability of the right materials at the right time to the right place at the list cost.

Material management entails two basic functions, purchase and store. Draw up specifications, invite quotations, make a comparison of offers based on basic prices, freight and insurance charges, taxes and levies, quantity and payment discounts, payment terms, delivery period, guarantee, vendor reputation, short list offers and negotiation for better terms issue. Purchase orders taking care to list out all requirements of the institution seek on order acknowledgement and follow up for supply, these are the standard steps in purchasing procedure.

STORAGE :

The store department should be conveniently located to facility to easy receipt of materials from supplies an easy dispatch of supplies to the ward and departments. It should be of sufficient size to accommodate all the supplies. Provision be made for separate areas for receipt of materials, their inspection, storage and issue as well as office space for stores personnel, a fire proof room for storage of rubber goods and plastics and refrigerators for certain drugs and biological preparations. The materials should be adequately protected from fire, pests, water seepage etc.

2.13 INCOME OF THE HOSPITAL :

One of the largest area of responsibility of hospital management is the finance. Health services were labour-intensive. Now these have become both capital and labour intensive with escalating costs. The act of balancing income and expenditure has become difficult. In a hospital a very wide range of materials are needed to be purchased and stocked every year. The expenses and the income for August 1990 is shown below.

Profit and loss Account

August 1990

Description	No. of Item
Expenses :	
1. Medical items (such as perfusion material, surgical, Disposable, instruments etc)	10,000
2. Electrical, mechanical & civil engineering items for maintenance	5,000
3. House keeping materials like linen.	1,500
4. Bio-medical equipment spares	1,000
5. medicines and drugs	20,000
6. Printing & stationary items	1,750
7. Food & Beverages materials	1,750
8. Salary of Nursing staff and Doctors workers.	19,000
9. Bank Installments	5,000
	1,10,000

Description	No. of Item
INCOME :	
1. Maternity deliveries	30,000
2. Sterilization procedures	2,200
3. hysterectomy	10,000
4. Laproscopy	20,000
5. Abortion	7,000
6. Tubectomy	15,000
7. Sonography	15,000
8. LSCS (Lower Segment Caesarian Section)	25,000
9. Income from outdoor Patient Department	13,250
10. Income from Laboratory	3,250
	Profit : - 30,700.00
INCOME :	30,700

At last the income of the hospital depends upon the number of patients coming to the hospital for the services.

Financial Information System is designed to economically collect, carefully organize, properly process and selectively transmit, financial data to designated points. In the organization the focus is on the flow of information. It presents a network of information required for management decisions. The following types of report are maintaining in the hospital.

2.14 REPORTS AND STATEMENT FOR EFFECTIVE MANAGEMENT :

1. Daily Reports : Includes daily cash collection and cash disbursement, daily census report, daily bank / cash position reports.
2. The Monthly Reports : Include monthly financial reports, report with department wise break-up in budget format as also the expenditure on free and concessional care.
3. The Quarterly Report : Include budget performance statements and comparative statements of all major departments.
4. The Half Yearly Reports : Include revenue expense summary with comparative analysis. Balance sheet (current ratio, working capital, inventory turnover, collection period, payable outstanding) etc.
5. Yearly Reports : Include comparative balance sheet, analysis of department wise income and expenses, cost analysis broken down by departments and further broken down to give unit costs of service (how much does it cost to a patient general / semi – private / private service-wise) salary and wages contents.