HEALTHCARE INDUSTRY WITH SPECIAL REFERENCE TO MADURAI HOSPITALS

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Abstract—One of the basic vitalities of good living is quick access to essential services like health care. But many times, it could mean a condition of life and death for an individual who is unable to get the access to these services. Thus, an important part of social sector development is incomplete without adequate health care facilities. The quality of human health is the foundation upon which the realization of life goals and objectives of a persona, the community or nation as whole depends. It is both an end and means of development strategy. The relationship between health and development is mutually reinforcing- while health contributes to economic development, economic development, in turn, tends to improve the health status of the population in a country. India as a nation has been growing economically at a rapid pace particularly after the advent of New Economic Policy of 1991. However, this rapid economic development has not been accompanied by social development particularly health sector development. Health sector has been accorded very low priority in terms of allocation of resources. Public expenditure on health is less than 1 per cent of GDP in India.

Keywords—Development Strategy, Economic Development, Healthcare Industry, New Economic Policy, Social Sector Development.

INTRODUCTION

According to the World Health organization, Health is a "State of complete physical, mental and social wellbeing and not merely the absence of disease or deformility". One of the fundamental rights of every human being without distinction of race, religion, political belief, etc. is the enjoyment of the highest attainable standard of health. But, owing to a variety of factors like lack of health consciousness, low per capita income, lack of adequate education, on availability of proper sanitary condition and safe drinking water, unhealthy social taboos etc., the health status of the average Indian remains dissatisfactory. It has been the endeavor of successive Government in India to improve the situation. This is especially so after the Independence. The National Health Policy which was approved by the Parliament and announced by the Government in 1983 marked a beginning to the Quest for equity in health expressed as WHO's goal of "Health for All" by the year 2000 A.D. To achieve this goal massive inputs with restructuring of the organization setup and management has been achieved incurring huge amounts of revenue expenditure as well as capital expenditure financed from various sources- Central Government, State Government and externally aided projects

OVERVIEW OF HEALTHCARE INDUSTRY

Healthcare System in General

Hospitals

Government hospitals – It includes healthcare centres, district hospitals and general hospitals

Private hospitals - It includes nursing homes & mid-tier & top-tier private hospitals

✤ Pharmaceutical

It includes manufacturing, extraction, processing, purification & packaging of chemical materials for use as medications for humans or animals

Diagnostics

It comprises businesses & laboratories that offer analytical or diagnostic services, including body fluid analysis

* Medical equipment and supplies

It includes establishments primarily manufacturing medical equipment & supplies, e.g. surgical, dental, orthopaedic, ophthalmologic, laboratory instruments, etc

✤ Medical insurance

It includes health insurance & medical reimbursement facility, covering an individual's hospitalisation expenses incurred due to sickness.

* Telemedicine

Telemedicine has enormous potential in meeting the challenges of healthcare delivery to rural & remote areas besides several other applications in education, training & management in health sector.

HEALTHCARE SYSTEM IN INDIA

Hospitals after Independence

India became free in 1947 and there were 7400 hospitals and dispensaries in India. There were 113000 beds with bed population ratio of 2/1000 population. There were 19 medical colleges and 19 medical schools. It was felt by Government of India that with the rising population and projected growth rate, it would not be possible to cope up with the health needs and demands of the community. Various committees were formed to suggest means and methods to reorganize the health care delivery system. Some of these important committees were Bhore Committee, Mudaliar Committee. Jain Committee, Siddhu Committee, Rao Committee, Sri Vastava Committee and Bajaj Committee.

As per Health information of India, we have 229 medical colleges, 189 dental colleges, 209 Ayurvedic medical colleges, 36 Unani, 6 Siddha and 180 Homeopathic medical colleges, 36 Unani, 6 Siddha and 180 Homeopathic medical colleges. As on 1st January, 2002, India has 15393 hospitals with 914543 total beds and 89 beds/lakh population. India has 3043 CHCs, 22842 OHCs and 137311 Sub Centers as on 1st March, 2001. Since independence, lot of advancement has been made in health sector but still much remains to be done because still all these figures are far below the national target of at least 1 bed/1000 population as recommended by Mudaliar Committee in 1961.

Public Healthcare System in India

Public healthcare is free for those below the poverty line. The public health care system was originally developed in order to provide a means to healthcare access regardless of socioeconomic status. However, reliance on public and private healthcare sectors varies significantly between states. Several reasons are cited for relying on the private rather than public sector; the main reason at the national level is poor quality of care in the public sector, with more than 57% of households pointing to this as the reason for a preference for private health care. Most of the public healthcare caters to the rural areas; and the poor quality arises from the reluctance of experienced healthcare providers to visit the rural areas.

Private Healthcare System in India

With the help of numerous government subsidies in the 1980s, private health providers entered the market. In the 1990s, the expansion of the market gave further impetus to the development of the private health sector in India. After 2005, most of the healthcare capacity added has been in the private sector, or in partnership with the private sector. According to National Family Health Survey-3, the private medical sector remains the primary source of health care for 70% of households in urban areas and 63% of households in rural areas.

General Research Objective

The main objective of this study was to **HEALTH CARE INDUSTRY WITH SPECIAL REFERENCE TO MADURAI DISTRICT**

Healthcare Industry with Special Reference to Madurai Hospitals

REVIEW OF LITERATURE

Kashyap et al (2000) presents a quantitative approach to the problem of performance assessments of CBT systems, using a theoretical framework known as General Systems Performance Theory. The use of computers for imparting education and training is rapidly gaining widespread acceptance. There is considerable evidence in literature to show that computerbased training (CBT) can lower training costs and shorten the time taken to complete training. They demonstrated the proposed approach by applying it to evaluate the performance of a set of training systems towards achieving the goal of training situational awareness skills.

Judith Strother (2002) assessed the effectiveness of e-learning in Corporate Training Programs. Corporate managers are constantly looking for more cost-effective ways to deliver training to their employees. E-learning is less expensive than traditional classroom instruction. In addition, many expenses – booking training facilities, travel costs for employees or trainers, plus employee time away from the job - are greatly reduced. However, some firms that have spent large amounts of money on new e-learning efforts have not received the desired economic advantages.

Jeffrey C. Nesbitt (2004) analyzed the practices utilized by XYZ Medical Center to evaluate the effectiveness of EHS training with respect to preferred evaluation practices. An effective Environmental Health and Safety (EHS) training program can result in fewer employee injuries and illnesses, better morale, and lower insurance premiums among other benefits.

Jeeyon Paek et al (2006) examined the impact of training program characteristics on training effectiveness among organizations receiving training services from external training providers. Two surveys were sent to HRD managers and senior managers per company. The results showed that the operational margin of the programs where private training providers was involved increased more and that senior managers perceived the entirely developed training program was more effective than the generic, standard programs.

RESEARCH METHODOLOGY

Research Meaning

Research as "the manipulation of things, concepts of symbols for the purpose of generalizing to extend, correct or verify knowledge, whether that knowledge aids in construction of theory or in the practice of an art".

Research Design

Descriptive Design

Descriptive is used for frequencies, averages, and other statistical calculations. Survey research is the systematic gathering of information from the respondents for the purpose of understanding and/or predicting some aspect of the behaviour of the population of interest.

Data Collection

Collection of data is first step in statistics. The data collection process follows the formulation for research design including the sample plan. The data can secondary or primary.

1) Collection of Primary Data

It means the first-hand information. Primary data were collected through questionnaire method.

2) Collection of Secondary Data

It means data that is already available i.e., they refer to data, which has already been collected and analyzed by someone else. This includes information from various books, internet, websites etc.

Sampling Unit

The sample unit has collected from the patentients in Madurai district hospitals.

Sampling Size

The sample size taken to conduct the research 120 respondents.

Sampling Method

Simple random sampling technique is used.

Simple Random Sampling

A probability sampling technique in which each element in the population has a known and equal probability of selection. Every element is selected independently of every other element and the sample is drawn by a random procedure from a sampling frame.

Tools used for this analysis

a) Percentage analysis

a) Percentage analysis:

Percentage method refers to a specified kind which is used in making comparison between two or more series of data. Percentages are based on descriptive relationship. It compares the relative items. Since the percentage reduces everything to a common base and thereby allow meaning comparison.

Percentage = Number of respondents x 100/Total no of respondents

S.No	Particulars	No of respondents	Percentage of respondents
1	Highly Satisfied	50	41
2	Satisfied	40	33
3	Average	20	17
4	Dissatisfied	10	9
5	Highly dissatisfied	0	0
	Total	120	100

1.1. Table Showing the Working hours of the organization



Chart1.1: Working hours of the organization

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From the above table shows the working hours of the organization. From that 41% of the respondent are Highly satisfied, 33% of the respondent are Satisfied, 17% of the respondent are average in that

1.2. Table Showing the public Vs private healthcare in India

Table 1.2

Public Vs Private Healthcare in India

Sl. No.	Sector	Cost of the Treatment on Average (in USD)		Place of Treatment (In %)	
		Rural	Urban	Rural	Urban
1	Public Sector Healthcare	88	120	28	21
2	Private Sector Healthcare	340	507	72	79

Source: Annual Report of WHO, 2017-18

It is clear from Table 1. that the cost of private healthcare is about four times greater than the country's public healthcare. About 72 percent of residents of rural areas and 79 percent of residents of urban areas use private healthcare services.

CONCLUSION

In this chapter, the researcher has present the brief introduction, it is providing the background of the present study which includes Overview of Healthcare Industry, Healthcare System in India, Overview of Private Sector Healthcare in India, Overview of Public Sector Healthcare in India, Major Problems of Health Services in India and the like.

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