

#### INTRODUCTION

Hospital is a healthcare institution with necessary medical facilities. Sick or injured persons are provided medical or surgical treatment in the hospital with the involvement of specialized healthcare staff. In other words, hospital manages the necessary facilities for the treatment of diseased people through well-qualified and trained medical staffs and medical equipments. In terms of infrastructure, hospital organization is identical to that of an industrial plant; only there is a difference in nomenclature of position. For example, the Director or Administrator of a hospital may be analogous to the General Manager of an industry. Small-sized hospitals needs a few numbers of administrative position. Private hospitals are organized by a corporation or board of trustees. Government hospitals usually managed by central or state government.

## **FUNCTIONS OF HOSPITALS**

Some important functions of hospital are:

- Both inpatients and outpatients get the facilities of diagnosis and treatment in the hospital.
- Hospitalization facilities are provided in hospital.
- Helpful for the prevention of diseases by providing immunization facilities.
- Give expert advices on the subject related to contraception methods necessary for family planning.
- Guide the patient for management of sexually transmitted diseases (STDs), AIDS. It is essential to improve social aspects and rehabilitation in community.
- Give educational training to newly recruited medical and paramedical (nurses, pharmacists, etc.) staff members by organizing seminars or setting camp.
- Educate the people in the community or society on matter related to personal hygiene and drug resistance.
- Hospital lowers the prevalence of disease with early detection, treatment and advice.
- Helpful in improving the standards of medical practice.

# CLASSIFICATION OF HOSPITAL ORGANIZATIONS BASED ON BED CAPACITY

Based on the numbers of beds in hospitals, there are three categories of hospitals—primary, secondary and tertiary.

### **Primary Hospital**

Primary hospital provides the initial basic level of contact for sick person or his family member or caregiver to primary healthcare provider in a health care system. Generally, less than 100 beds exist in primary hospitals in India. Minimum of 2 beds per 1000 people are recommended by the WHO in a community in any country. The preliminary basic health services, which include immunization, maternal and child healthcare, curative care and prevention of diseases are provided by primary hospitals. The primary hospital includes a general practitioner, a staff nurse and paramedical supporting staff. The primary hospitals are well connected to sub-centre and specialized hospital, where the patient can be sent in emergency.

## **Secondary Hospital**

Secondary hospitals exist in a district or medium-sized city to provide second level of contact in a healthcare system. More than 100 but less than 500 beds are occupied in secondary hospitals. These are considered higher to primary hospitals. Specialist like cardiologists, urologists, dermatologists, other specialists of various diverse fields are appointed to provide the expertise to patient, who are either referred from primary hospitals or directly come for treatment. The medical specialists in secondary hospitals provide acute care in serious illness during short period of stay in emergency department. Other healthcare providers such as psychiatrists, physiotherapists, respiratory therapists, X-ray technician, etc., also assist the medical specialist. In India, secondary hospitals are exemplified by district hospitals and community health centre at the block level.

## **Tertiary Hospital**

Tertiary hospitals are the third level of healthcare system, usually have more than 500 bed capacity to provide specialized healthcare services at national level. Generally, specialized services are provided in tertiary hospitals to patients, who are referred either from primary/secondary hospitals or directly in case of emergency. These are meant for advanced medical investigation and services such as neurosurgery, cancer therapy, cardiac surgery, etc., which cannot be treated either in primary or secondary hospitals. These have advanced equipments, required for treatment or procedures, often for life-threatening conditions (e.g. cancer). In India, specialized tertiary hospital service is provided at regional or central-level hospitals, which include university or college hospitals (e.g. AIIMS, Hamdard, etc.) super-specialized hospitals such as Rajiv Gandhi Cancer Hospitals, chest hospitals, infectious disease hospitals, and mental disease hospitals.

## CLASSIFICATION BASED ON CLINICAL AND NON-CLINICAL BASIS Clinical Basis

Based on System of Medicines

Based on system that followed in India, the hospitals are designated as: As per Indian system

- 1. Ayurvedic
- 2. Yoga
- 3. Siddha

- 4. Naturopathy
- 5. Homeopathic
- 6. Unani
- 7. Physiotherapy

#### Western system

8. Allopathic

## Based on diagnosis and treatment of major problems/diseases

- 1. TB hospital, e.g. Lala Ram Saroop TB Hospital in Mehrauli, Delhi.
- 2. Cancer hospital, e.g. Rajiv Gandhi Cancer Institute and Research Centre, Delhi.
- 3. Mental hospital, e.g. Institute of Mental Health and Hospital, Agra (UP).
- 4. Leprosy hospital, e.g. The Leprosy Mission Hospital, Shahdara, New Delhi.

## Based on types of specialized services

- 1. Hospital for eye care, e.g. Sankara Nethralaya, Chennai.
- 2. Gynecological and maternity hospital.
- 3. Urological hospital.
- 4. ENT hospital.
- 5. Pediatric hospital, e.g. Apollo Children's Hospital, Chennai.
- 6. Orthopedic hospital, e.g. Delhi Institute of Trauma and Orthopedics (DITO).

#### **Non-clinical Basis**

Ownership

## 1. Public Ownership

- i. Government controlled
  - A. Central Government, for example:
    - a. Military hospitals
    - b. Central Railway Hospital, New Delhi
    - c. LNM Railway Hospital, Gorakhpur (UP)
    - d. PGI, Chandigarh
    - e. Jawaharlal Institute of Postgraduate Medical Education and Research Hospital, Pondicherry
    - d. All India Institute of Medical Sciences, New Delhi

#### B. Hospital Controlled by State Government, for example:

- a. Aruna Asaf Ali Govt. Hospital, Rajpur Road, Delhi
- b. ESI hospital, Rohini
- c. Dr. Baba Saheb Ambedkar Hospital, Sector 6, Rohini, New Delhi
- d. Guru Teg Bahadur Hospital, New Delhi
- e. Babu Jagjivan Ram Hospital, Jahangirpuri, New Delhi
- d. Osmania General Hospital, Hyderabad (Telangana)
- e. Sassoon Hospital, Pune
- e. Victoria Hospitals, Bangalore
- C. Local self-government: Under municipalities or corporate (NDMC hospital, New Delhi; BMC, Mumbai)

### 2. Non-government/Private

- a. Individual proprietorship. Private hospital or non-government hospitals are owned by an individual, who may be either medical or non-medical person. They have unlimited liability. Medanta Hospital in Gurugram is an example of this category.
- b. Hospitals controlled by Religious bodies. CMC, Vellore, Ludhiana; Ramakrishna Hospital (Chennai and Kolkata).
- c. Registered companies (registered under Central/State Act). Apollo hospital (Delhi, Chennai).
- d. Society/trust (registered under Central/State Act). Bombay hospital, Jaslok hospital, etc.

#### BASIC CONCEPTS OF HOSPITAL ORGANIZATION

The ultimate aim of the hospital is to provide quality health care. Services provided by hospital is grounded upon the following principles:

- 1. **Professional collaboration:** Hospital organization consists of professional team of medical/paramedical staff members of diverse field. There is professional collaboration among all of these staffs to impart effective health care service.
- 2. **Division of services:** Hospital has diverse activities like diagnostic, treatment or therapy, rehabilitation, education and prevention. These activities are further sub-classified, which carry out these activities in an efficient manner with the aim to provide better health care facilities. The complete work load is divided into manageable units of health services. Each unit contributes to the total spectrum of health services.
- 3. **Homogenous approach:** A hospital caters to both outpatients and inpatients. The organization homogenously imparts a common or integrated services.
- 4. **Evaluation of services:** Services provided by the hospital is rated in terms of quality and adequacy for fulfilling the patient's and community requirements. Hospitals are accredited to check the conditions to be fulfilled by it to impart quality healthcare facilities. National Accreditation Board for Hospitals & Healthcare Providers, abbreviated as NABH, is set up for accrediting the hospitals. It is constituent board of Quality Council of India.
- 5. **Administrative responsibility:** Good relationship amongst the various people and tasks in a hospital must be carefully maintained. Once responsibility is assigned, accountability should be reported to the superior for its performance. This is necessary to ensure a high quality of patient care.
- 6. **Budget preparation and financing:** In general, large hospitals treat several lacs patient per year and perform thousands of major surgeries and minor surgeries. Their yearly budget is about ₹100−150 crores. Many hospitals have their own finance. The hospitals should, therefore, develop an effective planning and techniques to optimize their resources to run the hospital smoothly. Strong budgeting process and a planned program for capital financing should be implemented for capital financing.
- 7. **Talent search:** A hospital should be staffed by competent medical experts and non-medical staff. The organization should formulate a program to attract good physicians and surgical specialists as well as to attract the patients.

8. **Governing body:** Each hospital has the management system to decide its policy guidelines and to exercise overall supervision and control. It is the legal and moral responsibility of management system for the conduct of hospital as an institution. It is accountable to the patient staff community and the sponsoring organization.

#### ORGANIZATION COMPONENTS

The hospital organization consists of various components that are integrated to provide the effective healthcare. The big hospital organization has two basic components, one of the components is meant for the clinical administration and the other for office administration. The structure of these components is given in Fig. 1.1. Each component has multiple divisions or departments to carry out the task effectively. Each department is supervised by head, who is a qualified person with specialization and experience in the particular subject. There is no need to inform that staff members in the administrative component in big hospital organization are given special training and education after selection. The organizational setup in medium size hospitals like the Taluk hospitals and the others in small towns differ from big sized hospital. Some of the departments or sections which are not required does not exist in medium-sized hospitals. These may be added, whenever there is expansion of hospital or there is necessity. Big-sized hospitals are difficult to manage by an individual and so various committees are constituted to assist the head in their administration. These committees are given the designation of

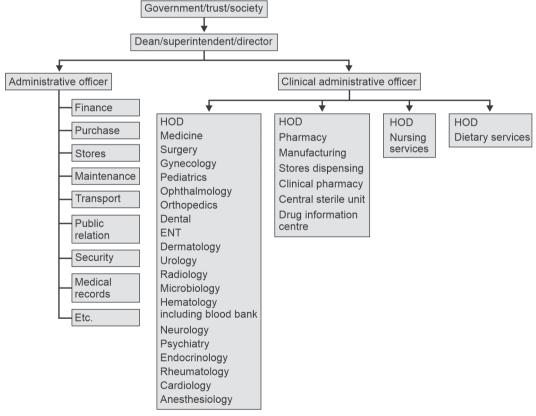


Fig. 1.1: Flowchart of hospital organization

governing councils or Board of Directors. Members from the trust, different departments of the hospital and even people from outside are also a part of governing councils. MLA, MLC, MP or MC, who are people representatives often given membership in Government Hospital Councils to fulfil the medical requirements of the community. Apart from this, finance committee, purchase committee, development committee, ethical committee, etc. are constituted along with clinically oriented subcommittees are also constituted in big-sized well-organized hospitals for smooth working.

#### **Hospital Organization Administration**

Meeting of members of the above committees are regularly held at some interval or whenever required to consider the various issues. The recommendation of meetings is forwarded to the governing council or Board of Directors for approval. Governing council may approve it, may be with some modification or may reject it. If recommendation is approved, then it is implemented by the head, either via administrative office or clinical administrative component. Only hospital policy matters concerning with healthcare of patients and recommendation which involves a requirement of large sum of money are implemented through the governing council. In contrast, recommendation related to other small issues and routine day-to-day affairs are implemented by the head themselves. However, all the important matters are reported by the head at periodic interval.

As illustrated above, hospitals are not only meant for the treatment of patients but also responsible to prevent or spread of disease from occurring. For this, hospitals frame a policy for organizing immunization programs at mass level. Hospital can promote the vaccination drives and other programs like oral polio drop campaign in a particular demographic area. The Government of India has been promoting these health-related drives and programs to prevent the spread of disease which is better than cure. These health improvement programs include mosquito eradication, chlorination of drinking water, awareness for COVID, awareness to prevent the spread of AIDS, etc. Various categories of medical staff are appointed in hospitals for executing the abovementioned functions. These are discussed in the coming text.

#### Medical Staff Members and Their Responsibilities

There are different categories of medical and paramedical department in hospital organization. Collectively, all of these departments are known as medical departments, although significant number of non-medical staff members, who are directly concerned with the treatment of patients, are included. The dean or superintendent or director of the hospital is topmost position in the medical staff list of the hospital. It is followed by HODs, surgeons, assistant surgeons, and house surgeon in the list. Similarly, there are a number of heads, supervising the non-medical and paramedical departments. The staff members in paramedical departments include pharmacists, nurses or lab technicians, who work in coordination with the basic aim of providing best possible quality healthcare treatment to the patients coming to the hospital. In a teaching or a medical college hospital, senior doctors teach the medical students by demonstrating the treatment of patients, coming to the hospitals and also via giving lectures in classrooms. Medical and surgical departments among the various departments are prominent departments, responsible for functioning of hospitals. Patient coming to the OPD (outpatient department) is attended by the concerning medical professionals, who

either give the treatment right away or recommend the patient in case of necessity to other specialized departments like skin, cardiac, eye, ENT, gynecology, etc. The patient is admitted in the ward if there is severity of disease or need for long-term treatment. The required diagnostic tests are conducted for making the conclusion about disease. The prescription listing the numbers of medicines is given to OPD patient or documented in the case sheets of admitted patients.

In department of surgery, surgeons perform the surgeries, scheduled in a day. After surgery, patient is transferred to the ICU unit or post-operative wards. In post-operative ward, each patient is kept admitted in the ward until complete recovery or patient become fit for discharge. Overall, treatment of OPD patient, admitted patients, conduct of surgical operations, and other clinical procedures are the main duties of the medical staff. Apart from this, they have to participate in the administrative functions of the hospital and attend the important meetings related to hospital policy matters. Generally, junior staff of both medical and non-medical departments are assigned the night shift duties. They may take the help of the senior staff during the working hours if required. Occasionally, non-medical staff associated with medical staff are also assigned the special tasks for organizing and conducting awareness medical camps in villages to prevent the spread of disease. They also attend seminars and conferences for the upgradation of knowledge in their fields of specialization. Pharmacists also contribute their expertise on routine bases to provide quality healthcare. Nurses provide their services to inpatients in the wards. Administration of drugs to patients both in OPD and wards are the main duty of nurses. Pharmacists are responsible for not only procurement of drugs but also assist in availability of drugs, dispensing of drugs to patients and performing the patient counselling services.

Paramedical staff may be involved in organising therapeutic physical exercise sessions. Physiotherapists organize therapeutic physical exercise sessions to the patients, which are referred to them by orthopedic. The lab technologists assist the physician by performing diagnostic tests required for diagnosis of disease in a patient. This is supported by X-ray, MRI technician, etc. Dieticians suggest the intake of nutritious food required for all inpatients. He also advises the food regimen to the selected outpatients. The entire hospital staff members perform their duties in team spirit manner to ensure the recovery of patient as early as possible. Thus, prevent the spreading of disease, and damaging of society. This is reason that the medical profession is called a noble profession. 'Health for all' is common slogan, which cannot be fulfilled alone by prevention and treatment of disease. For this, there is also a need for awareness and cooperation of society to use various medical schemes. Hence, Government organizes large scale educational program to create awareness in society. These programs are about diseases, preventive methods, nutrition, and personal and social hygienic practices, promoted via multiple communication methods like posters, cinema, TV and other media by the Government authorities.

## **EXERCISE**

## MULTIPLE CHOICE QUESTIONS Tick mark the appropriate choice

- 1. AIIMS belongs to which type of Hospital?
  - (a) Primary, Central Government
  - (b) Tertiary, Central Government
- (c) Tertiary, State Government
- (d) Secondary, State Government

- 2. General hospital at district level belongs to which type of hospital?
  - (a) Primary, Central Government
- (c) Tertiary, State Government
- (b) Secondary, State Government
- (d) Secondary, State Government

## SHORT QUESTIONS

- 3. Define the term 'hospital'.
- 4. Draw a flowchart of hospital administration.
- 5. What are secondary care hospitals?

## LONG QUESTIONS

- 6. Classify hospitals and explain each one of them in detail.
- 7. What are the functions of a hospital? Explain.
- 8. How are big hospitals administered? Enumerate the role of various committees in the administration policies of hospitals.
- 9. Discuss the functions of medical staff members of a hospital.

## Answer to MCQs

1. (b)

2. (b)