

## **ORGANISATION STUDY OF TELlichERRY CO- OPERATIVE HOSPITAL**

**<sup>1</sup>Dr. N. Junior Sundresh, <sup>2</sup>\*Roshna K. V. and <sup>3</sup>Dr. Vijaya**

<sup>1</sup>Associate Professor in Surgery, Rajah Muthaiah Medical College, Annamalai University, Annamalai Nagar 608002.

<sup>2</sup>Research Scholar M. B. A (H.M), 2<sup>nd</sup> Year Annamalai University, Annamalai Nagar 608002.

<sup>3</sup>Chief Medical Officer, Govt Ayurveda Hospital, Kasargod.

### **ABSTRACT**

The provision of high quality, affordable, health care service is an increasingly difficult challenge. The field of Health Service Research (HSR) is relied on by decision makers and the public to be the primary source of information on how well health systems in the United States and other countries are meeting this challenge. The goal of HSR is to provide information that will eventually lead to improvements in the health of the citizenry. Tellicherry co-operative hospital has been transformed as the unsurpassed hospital in the Malabar region within a short span of 2 decades. The Tellicherry Co-operative hospital occupies

a prominent place among medical institutions in Kerala as a vital, diverse, inter-denominational community with 250 beds, 6 ICUs, 6 CCUs and over 25 specialty departments. TCH affirms a shared commitment of healing the total person through the pursuit of professional excellence, and through the care of those who are disadvantaged, disabled and marginalized. Tellicherry Cooperative hospital was awarded the ISO 9001:2000 Certificate for "Providing Preventive and Curative Health care Service". TCH constantly strive towards excellence through patient-Centered Service, Quality Care, Innovation, Cooperation, Diversity, Cutting-edge technology, Specialist expertize and integrity.

### **REVIEW**

India is one of the pioneers in health service planning with a focus on primary health care. The Bhore Committee report, which laid the foundation of the health care system in

Article Received on  
09 Jan. 2017,

Revised on 30 Jan. 2017,  
Accepted on 20 Feb. 2017

DOI: 10.20959/wjpr20173-8066

#### **\*Corresponding Author**

**Roshna K. V.**

Annamalai University,  
Annamalai Nagar 608002.

Independent India, preceded the Alma-Ata declaration 1978. India is thus committed to attaining the goal of "Health for all by 2000 AD".

At the time of independence the country's healthcare infrastructure was mainly urban and clinic based. These hospitals and clinics provided curative care to patients who came to them. Now the country is passing through a stage of "Health transition", which refers to the transformation of a society with high morbidity and mortality rates, into one in which people as a rule, live long, disease-free lives.

From the First-year Plan, efforts were made to build up primary, secondary and tertiary care centers and to link them through appropriate referral systems. National programmes for combating major health problems were evolved and implemented. India's achievement in the health front is significant particularly in the attainment of development indicators i.e. reduction in birth rate, death rate, infant mortality rate and increase in life expectancy.

In order to meet manpower shortages and reach world standards, India would require investments of up to \$20 billion over the next five years. 40 per cent of the primary health centres in India are understaffed. Currently, India has approximately 860 beds per million

There is a strong demand for tertiary care hospitals, which emphasize the treatment of lifestyle diseases, focusing on specialities such as neurology, cardiology, oncology and orthopaedics. Tertiary hospitals are projected to grow faster than the overall healthcare sector, in response to the growing incidence of lifestyle disease and the accelerating growth of medical tourism. According to WHO statistics there are over 250 medical colleges in the modern system of medicine and over 400 in the Indian system of medicine and homeopathy (ISM&H). India produces over 250,000 doctors annually in the modern system of medicine and a similar number of ISM&H practitioners, nurses and para professionals. More than 136 medical schools admit 6,000 odd PG trainees in their programmes.

The number of non-allopathic doctors in India is slightly more than the number of allopathic doctors. Ayurvedic doctors are almost 63 per cent of AYUSH doctors (practitioners of Ayurvedic, Unani, Siddha and Homeopathy systems of medicine). General Practitioners constitute almost 90 per cent of total doctors. There are about 688,000 doctors and 14,62,000 Nurses presently in India.

### Health Care Scenario in Kerala

Kerala has made remarkable achievements in health almost comparable to that of even developed countries. The widely accepted health indicators like crude death rate, infant mortality rate and life expectancy is evidence for this. Kerala's achievements in spite of the government's lack of resources have prompted many analysts to talk about the unique "Kerala Model of Health" worth emulating by other developed countries. The hall mark of the Kerala model is the low cost of health care, universal accessibility and availability even to the poorer sections of the society.

Kerala state has a three-tier-system of health care - the Primary Health Centers (PHC), Community Health care Centre (CHC), Taluk and District hospitals and Medical Colleges evenly distributed in the rural and urban areas. Apart from this, there is an extensive network of medical care institutions practicing homeopathy and Ayurvedic medicine in government, voluntary and private sectors. There are 7831 public health institutions, comprising all the three modes of provision. Of this, 71.8% are PHCs (including sub centers), 8.2% are CHCs and 11% are hospitals (census 2001). Apart from this there are 81 co-operative hospitals functioning effectively in Kerala. The number of sub-centers is 5074 one for every 6.16 sq.km and a primary health center for every 33.3 sq.km. In terms of health personnel, there are 25225 medical and Para medical personnel and there is one medical officer for every 8244 population in Kerala

According to WHO statistics there are over 250 medical colleges in the modern system of medicine and over 400 in the Indian system of medicine and homeopathy (ISM&H). India produces over 250,000 doctors annually in the modern system of medicine and a similar number of ISM&H practitioners, nurses and para professionals. More than 136 medical schools admit 6,000 odd PG trainees in their programmes.

The number of non-allopathic doctors in India is slightly more than the number of allopathic doctors. Ayurvedic doctors are almost 63 per cent of AYUSH doctors (practitioners of Ayurvedic, Unani, Siddha and Homeopathy systems of medicine). General Practitioners constitute almost 90 per cent of total doctors. There are about 688000 doctors and 14, 62,000 Nurses presently in India. Modern society has a developed formal institution for patient care. The hospital, a major social institution offers considerable advantages to patients and society. A number of health programs require intensive medical treatment and personal care, which normally can't be available in a patient's home or in the clinic of a doctor. This is possible

only in a hospital where large numbers of professionally and technically skilled people apply their knowledge and skills with the help of world class expertise, advanced sophisticated equipment's and appliances.

Co-operative Hospitals are member organizations. These institutions have achieved organic growth arising out of locally felt needs, which are satisfied by the initiative shown by local leadership. They can play a beneficial role by providing low-cost health care services as compared to private hospitals. The benefits also largely accrue to the lower and middle strata of the society.

A brief description about the functioning of various departments in Tellicherry Co-operative Hospital is presented in the following paragraphs. Each department is having one, two or three specialist doctors in the respective areas of medicines.

#### Department of anesthesiology

No surgery or procedure can be carried out without anaesthesia. Full-fledged and well equipped, modern anaesthesia equipment & ventilators are the salient features of the Anaesthesiology department of Tellicherry Co-operative Hospital.

#### Facilities

- Multiparameter monitors, Latest Boyle's anaesthesia machines with isoflurane and iseroflurane vapouriser, Syringe infusion pumps for intraoperative & post operative administration of epidural anaesthesia and post-operative analgesia, intra venous infusion pumps for correctly monitoring I.V fluid administration.
- Five, roof mounted shadowless and cool OT light fitted operation theatres with electrically operated and radiolucent OT tables separate for orthopaedics, urology, general surgery, gynaecology, ENT, neurosurgery.
- Central venous pressure monitoring system.
- Centralized gas supply to OTs and ICUs.
- Actively involved in the care of all critically ill patients.

#### Departments of cardiology

Cardiology is the branch of medicine which deals with the diagnosis and treatment of heart diseases. The cardiology department of Tellicherry Co-operative Hospital under the guidance of well experienced doctor extends comprehensive heart care treatment to patients in and

around Kannur district. Other key success factors which enable us to deliver preventive, curative and rehabilitative heart care.

### **Facilities**

- Well-equipped intensive care unit & critical care unit.
- Giving excellent individualized care for 15 patients at a time.
- Centralized nursing station with state of the art facilities.
- Diagnostic services such as Computerized Tread mill test, Color Doppler echocardiography etc.
- Department of Casualty and accident unit
- Violence and Accidents are rising day by day in our society. This is resulting in disability or untimely death. The timely medical intervention can prevent such situations. The function of Hospital Casualty is to provide immediate, initial treatment to patients with broad spectrum of illness and injuries which may sometime be life threatening. Tellicherry Co-operative Hospital is having the best functioning casualty and emergency unit in the region.
- Facilities
  - Well equipped casualty & accident care unit.
  - Round the clock service of trauma trained staffs and specialist doctors.
  - 24 hours of well-equipped diagnostic, blood bank, blood transfusion and surgical facilities.
  - Capable of handling all emergency cases including Road Traffic Accident / Poisoning / Cardiac / Neuro / renal.... Etc.
  - Availability of mobile hospital service.
  - Full-fledged intensive care unit with ventilator support.

### **Department of Dentistry**

The Dental department is been set up with state-of-the-art facilities to carry out all routine dental procedures and surgeries which makes it on par with the quality norms followed by the most modern hospital.

Maxillo facial surgery is concern with treatment and correction of injuries and defects in head, neck, face, jaws, hard and soft tissues of the oral and the mouth area, wisdom teeth. Maxillo

facial department of Tellicherry Co-Operative Hospital provides both cosmetic and reconstructive treatment giving a new face to the needy.

**Facilities**

- Implants.
- Tooth whitening.
- Gum surgery.
- All routine dental procedures and surgeries including root canal treatment (RCT).
- Cosmetic facial surgeries for highly protruded teeth and jaw bones.
- Surgery for cyst and tumor.
- Restoration of lost tooth with ceramic fixed partial dentures and crowns.
- Dental X-ray.
- Well equipped, air conditioned outpatient department.

**Department of Dermatology**

Skin problems are common to people of all ages. Dermatology is the branch of medicine which takes care of all these diseases in the widest sense and some cosmetic problems of skin, hair scalp and nails.

Dermatology department of Tellicherry Co-operative Hospital manages all types of dermatological & cosmetic procedures. Warts, naevus (epidermal), actinic keratosis using radio frequency, chemical cautery for xanthlasma, liquid nitrogen cryotherapy for molluscum, contagious and resistant warts, electrocautery for sebhorric keratosis, acne treatment and comedone extraction, microdermation for scars and acne, chemical peeling for pigmentation (using glycolic acid) are some of the routine procedures provided at Tellicherry Co-Operative Hospital.

**Facilities**

- Dermatological and cosmetic procedures using radiofrequency.
- Chemical cautery.
- Cryotherapy and electrocautery.

**Blood Bank**

- Well equipped unit
- Round the clock service

- Facilities for all routine and emergency transfusions
- Capacity to store 200 units of blood
- Facilities for ELISA and western blot tests.

**Pharmacy**

Well stocked pharmacy store; separate pharmacies for inpatients and outpatients; round the clock service.

**Biomedical engineering**

The department ensures the upkeep and maintenance of all crucial equipment.

**Community Health Services**

TCH is committed to serve the community and frequently puts whole hearted efforts to conduct programmes that are arranged with a social cause. TCH works with public health departments, conducts medical camps, immunization programmes and patient education programmes in rural areas.

**Academic activities**

Hospital conducts BLS (Basic Life Support) training for all staffs to provide an immediate care in case of emergency situation.

**Ambulance services**

Two ambulance services ; one is functioning as 'MINI MOBILE HOSPITAL'.

**Neethi Medical Store**

TCH runs a Neethi Medical Store opposite to Government hospital, Thalassery for the poor and under privileged who cannot afford costly medicines. It is a part of our endeavor to reach out to the masses and serve them to best of our ability.

**Member privileges**

- Preference to meet the doctors.
- Discount on hospital charges.
- Accident insurance cover.
- Insurance cover for families.
- Other benefits offered by the management from time to time.

**Clinical Lab**

- Molecular biology

Polymerase chain reaction (PCR)- a confirmatory test for all infectious diseases which amplifies DNA or RNA of micro organisms several thousand times.

- Biochemistry and immunology

Round the clock service; special investigations like 24hour urine estimation for various parameter like micro albuminurea, glycosylated haemoglobin, stone analysis, thyroid function test, endocrinology, tumormarkers, electrophoresis, western blotting for HIV.

**Human Resource Department****Compensations**

Employee's compensation is an important text of human resource management. Employee's compensation plan must attract talented and efficient employees to the organisation. If the compensation is not attractive, the existing employees will leave the organisation and joint in other firms. Compensation refers to the wide range of financial and non financial reward to employees for their service. Section 80 of Kerala Co-operative Societies Act, 1969 specifies the rule to be followed while giving compensation.

**Salary**

The hospital gives fixed monthly salary to each staff depends upon the nature of job. There is no time rate system for giving remuneration to the employees. The salary is paid on the first day of the next month.

**Dearness allowance (DA)**

Dearness allowance is intended to give relief to the employees from ever increasing cost of living. This hospital management gives certain percentage of the basic pay of employees as DA. This percentage is fixed as per Kerala State Rules.

**House Rent Allowance (HRA)**

It is given to an employee to meet the expenditure on rented accomodation. Tellicherry Co-operative Hospital provides House Rent Allowance to it's employees. Section 80 of Kerala Co-Operative Societies Act, 1969 specifies the percentage of HRA on Basic pay, of each employee.



**Transport allowance**

It is given to an employee to meet his expenditure for commutency between place of residence and place of duty.

In this hospital, transport allowance also fixed according to Kerala State Co-operative Rules.

**Uniform allowance**

In tellicherry co-operative hospital, entertainment allowance, vehicle allowance, family planning allowance etc are not provided to its employees. Tellicherry co-operative hospital provides uniform allowance to its employees for purchasing the uniform.

In tellicherery co-ooperative hospital there is no uniform for office staff. Nursing staff, security staff and cleaning staff having uniforms. The uniform of nursing staff is white saree and coat. For cleaning staff blue saree and coat.

**Grievance of workers**

Tellicherry co-operative hospital set up a complaint box for workers to drop their complaints by suggestion. This box is opened on every Monday and the outcome is documented in a register. The matters which are usually subjects are.

- Health and safety.
- Freedom for association.
- Discrimination.
- Discipline.
- Hours of work.

**SWOT ANALYSIS****Strengths**

- Strong and powerful board of directors.
- Employees dedication.
- Location of the hospital.
- Medical facilities.
- Management fully supportive of doctors and other employees.

**Weaknesses**

- Lack of funds.
- Deficiency in number of staffs.

- Lack of modernised equipments.
- Lack of cooperation among the staffs.
- Inability to attract highly skilled staff.

**Threat**

- The rising number of medical hospitals with large amounts of funds.
- Competitors with more modern facilities.
- Other hospitals willing to pay higher salaries and attract our staffs.

**Opportunity**

- To attract large numbers of middleclass people.
- Ideal location of the hospital.
- To develop an ancillary building across the road into a second hospital site.
- To develop super specialities not provided by other competing hospitals

**Findings**

Major findings of the study based on the data collected, analyzed and interpreted are as follows.

1. Defficiency in number of staffs.
2. Staff morale is very low.
3. Tellicherry cooperative hospital planning to start Genetic service in partnership with Harvard University
4. Hospital provides allowances like DA, HRA, Transport allowance, Uniform allowance and benefits like ESI, Bonus, Provident Fund, Gratuity and Pension to the employees.
5. 64% of the employees have the opinion to improve the salary.
6. There is no proper system in the hospital for performance appraisal. If the superior doesnot recognize the good performance of the employees, it will reduce their morale.
7. Lack of equipments is hampering the provision of good medical care.
8. Lack of systems and procedures.
9. Lack of systematic care plants for patients.
10. Lack of regular maintenance of equipments.
11. Lack of accountability at every level.
12. There is no psychologist in the hospital to undertake the job of counselor in the hospital.
13. The hospital doesnot have proper layout. Therefore the visitors find difficult to locate the rooms/ lab/ office where they want to go.

14. To standardize purchase with in the hospital, a purchasing committee has been formed.
15. To oversee the clinical aspects of care with in the hospital a clinical governance committee has been formed that meets every week.
16. A finance committee has been formed made up of members of the board and senior managers to monitor both the income and expenditure and to make recommendations to the board.
17. Regular daily meetings are conducted with the nursing supervisors and the executive director to ensure that the services are improved daily.

### **Community Health Services**

TCH is committed to serve the community and frequently puts whole hearted efforts to conduct programmes that are arranged with a social cause. TCH works with public health departments, conducts medical csmps, immunization programmes and patient education programmes in rural areas.

### **Academic activities**

Hospital conducts BLS (Basic Life Support) training for all staffs to provide an immediate care in case of emergency situation.

### **Ambulance services**

Two ambulance services; one is functioning as 'MINI MOBILE HOSPITAL'.

### **Neethi Medical Store**

TCH runs a Neethi Medical Store opposite to Government hospital, Thalassery for the poor and under privileged who cannot afford costly medicines. It is a part of our endeavor to reach out to the masses and serve them to best of our ability.

### **Member privilages**

- Preference to meet the doctors.
- Discount on hospital charges.
- Accident insurance cover.
- Insurance cover for families.
- Other benefits offered by the management from time to time.

**CONCLUSION**

Tellicherry co-operative hospital playing a vital role in medical field. It is aquipped with modern medicine apparatus. In the field of co-operative in the entire Kerala. Telicherry co-operative hospital assumes a leadership role and provides a role model for other co-operative hospitals in India.

**BIBLIOGRAPHY**

1. [www.cooperativehospital.in](http://www.cooperativehospital.in) Hospital records.
2. Aswathappa k., "Human Resource Management"
3. Dr. Mamorica C.B., Saksena R.D., "co-operation in India", kitab Mahal, 1997. Francis., Hospital
4. Administration, Saga Publications Limited, 2000.