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## Importance and Carrier Opportunities in Healthcare Management

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### Abstract

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Healthcare management is the profession that provides leadership and direction to organizations that deliver personal health services, and to divisions, departments, units, or services within those organizations. There are three levels in health care in India, Primary, secondary and tertiary. It is the first level of contact of individuals, the family and community with the national health system, where primary health care or essential health care is provided through the agency of health guides and trained dais, by primary health centres and sub-centres. The secondary or intermediate level of care deals with more complex problems. It is usually provided by community health centres and district hospitals. The tertiary is a more specialized level and requires specific facilities and is usually provided by regional or central level institutions like medical college hospitals, all India institutions, regional hospitals, specialized hospitals, other apex institutions. This is an exciting time for healthcare management. Healthcare is changing more rapidly than almost any other field. The field is changing in terms of how and where care is delivered, who is providing those services, and how that care is financed. Healthcare management requires talented people to manage the changes taking place. In their roles, healthcare executives have an opportunity to make a significant contribution to improving the health of the communities their organizations serve. The six important functions of managers in healthcare management are Planning, Organizing, Staffing, Controlling, Directing and Decision making. In this paper the importance and carrier opportunities in healthcare management sector are discussed.

**Keywords:** Healthcare, community, hospitals, staffing, opportunities, organizations.

### Introduction

Medical systems in the World have defined Health in their own ways since time immemorial. According to WHO "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". Knutson defined public health as "Public Health is people's health. It is concerned with the aggregate health of a group, a community, a state or a nation". As the prevalence of infectious diseases in developed world decreased through the 20<sup>th</sup> century, public health began to put more focus on chronic diseases such as cancer and heart disease. The growing field of population health has broadened the focus of public health from individual behaviors and risk factors to population level issues such as inequality, poverty and education. Modern public health is often concerned with addressing determinants of health across a population, rather than advocating for

individual behavior change. There is a recognition that health is affected by many factors including where people live, genetics, income, educational status and social relationships – these are known as "social determinants of health". A social gradient in health runs through society, with those that are poorest generally suffering the worst health. The new public health seeks to address these health inequalities by advocating for population-based policies that improve the health of the whole population in an equitable fashion.

An understanding of health is the basis of all health care. Health has evolved over the centuries as a concept from an individual concern to a world – wide social goal. The changing concepts are biomedical, ecological, psychosocial and holistic concepts. These concepts influenced one way or other by social, psychological, cultural, environmental, economic and political factors. Health and disease lie along a

continuum and there is no single cut off point. The lowest point on the health – disease spectrum is death and the higher point corresponds to the WHO definition of positive health.

In the history of public health, 4 distinct phases may be demarcated: Disease control phase (1880 – 1920), Health promotional phase (1920 – 1960), Social engineering phase (1960 – 1980) and Health for all phase (1981 – 2000). Against this background the 30<sup>th</sup> World Health Assembly resolved in May 1977 that “the main social target of governments and WHO in the coming decades should be the attainment by all citizens of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life”. In 1981, the 34<sup>th</sup> World Health Assembly formulated and adopted the Global Strategy for Health for all. With the adoption of the goal of “health for all”, a new public health became evident world-wide, which may be defined as “the organized application of local, state, national and international resources to achieve health for all”. In May 1998, WHO adopted a resolution in support of the new global Health for all Policy. The new policy, Health for all in the 21<sup>st</sup> Century, succeeds the Health for all by the year 2000 strategy launched in 1977. In the new policy, the worldwide call for social justice is elaborated in key values, goals, objectives and targets. The Un Millennium Development Goals:

- Eradicate extreme poverty and hunger
- Achieve universal primary education
- Promote gender equality and empower women
- Reduce child mortality
- Improve maternal health
- Combat HIV/AIDS, malaria and other diseases
- Ensure environmental sustainability
- Develop a global partnership for development

The 10 global health targets are the most concrete end points to be pursued:

- Health equity, childhood stunting
- Survival, maternal mortality rates life expectancy by 2020
- Reverse global trends of five major pandemics, HIV/AIDS, malaria, diseases related to tobacco and violence or trauma by 2020
- Eradicate and eliminate certain diseases: measles, Lymphatic filariasis, vitamin A and iodine deficiencies by 2020.
- Improve access to water, sanitation, food and shelter
- Measures to promote health
- Develop, implement and monitor national Health for all policies
- Improve access to comprehensive, essential health care
- Implement global and national health information and surveillance systems
- Support research for health

The above 10 goals can be divided into three subgroups – 4 health outcome targets, 2 targets on determinants of health and 4 targets on health policies & sustainable health systems. All member states are supposed to set their own targets within this framework, based on their specific needs and priorities. Such a great importance is given for health care throughout the world.

**1. Health Care in India**

There are three levels in health care in India, Primary, secondary and tertiary.

**Primary Health Care Level:** It is the first level of contact of individuals, the family and community with the national health system, where primary health care or essential health care is provided. It is the essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-determination. It is provided, through the agency of health guides and trained dais, by primary health centres and sub-centres. Equitable distribution, Community participation, Intersectional coordination, appropriate technology and focus on prevention are the principles of the primary healthcare.

**Secondary Care Level:** The secondary or intermediate level of care deals with more complex problems. It is usually provided by community health centres and district hospitals. These also serve as the first referral level.

**Tertiary Care Level:** This is a more specialized level and requires specific facilities and is usually provided by regional or central level institutions like medical college hospitals, all India institutions, regional hospitals, specialized hospitals, other apex institutions. A fundamental referral of a health care system is to provide a sound referral system, which must be a two- way exchange of information and returning patients to those who referred them for follow- up care.

**Health Committees**

Various health committees have been formed by the Government of India from 1946 to provide advice about health and disease:

**Table 1:**

Name of the Committee	Year	Recommended
Bhore Committee	1946	One Primary Health Centre for a population of 40,000
Mudaliar Committee	1962	Advised to strengthen Primary Health Centres
Kartar Singh Committee	1973	One health centre for a population of 50,000
Shrivastav Committee	1975	The creation of health workers from within the community itself
Rural Health Scheme	1977	A 4 tier system of services provided at the level of the village, the sub centre, the Primary Health Centre (PHC) and the Community Health Centre (CHC)

**Health System Administration**

In India there are 3 main tiers of the health system: Centre, State and District.

**Table 2:**

Centre	State	District
Ministry of health and family welfare	State ministry of health	Sub - division
Directorate General of Health Services	State health Directorate	Tehsills (Talukas)
Central Council of Health and Family Welfare	—	Community Development blocks
-----	-----	Municipalities and corporations
-----	-----	Villages - Panchayats

Health care sectors in India:

- Village level workers
- Sub-Centre level
- Primary Health Centre level (PHC)
- Community Health Centre level (CHC)
- Hospitals
- Health Insurance
- Other Agencies
- Private Sector
- Indigenous systems of Medicine
- Voluntary Health Agencies
- National Health Programs

## 2. Health Care Management

This is an exciting time for healthcare management. Healthcare is changing more rapidly than almost any other field. The field is changing in terms of how and where care is delivered, who is providing those services, and how that care is financed. Healthcare management requires talented people to manage the changes taking place. In their roles, healthcare executives have an opportunity to make a significant contribution to improving the health of the communities their organizations serve.

With growing diversity in the healthcare system, executives are needed in many settings, including:

- Clinics
- Consulting firms
- Health insurance organizations
- Healthcare associations
- Hospitals
- Nursing homes
- Physician practices
- Mental health organizations
- Public health departments
- Rehabilitation centers
- Skilled nursing facilities
- Universities and research institution

Managers implement six management functions as they carry out the process of management:

**Planning:** This function requires the manager to set a direction and determine what needs to be accomplished. It means setting priorities and determining performance targets.

**Organizing:** This management function refers to the overall design of the organization or the specific division, unit, or service for which the manager is responsible. Furthermore, it means designating reporting relationships and intentional patterns of interaction. Determining positions, teamwork assignments, and distribution of authority and responsibility are critical components of this function.

**Staffing:** This function refers to acquiring and retaining human resources. It also refers to developing and maintaining the workforce through various strategies and tactics.

**Controlling:** This function refers to monitoring staff activities and performance and taking the appropriate actions for corrective action to increase performance.

**Directing:** The focus in this function is on initiating action in the organization through effective leadership and motivation of, and communication with, subordinates.

**Decision Making:** This function is critical to all of the aforementioned management functions and means making effective decisions based on consideration of benefits and the drawbacks of alternatives.

Today, an estimated 100,000 people occupy health

management positions at numerous organizational levels, from department head to chief executive officer. Requirements for senior-level positions in healthcare organizations are demanding, but these jobs also offer opportunities to improve the system of care giving.

If you choose a career in healthcare management, your first job might be an entry- to mid-level management position in a specialized area, such as:

- Finance
- Government relations
- Human resources
- Information systems
- Marketing and public affairs
- Material management (purchasing of equipment and supplies)
- Medical staff relations
- Nursing administration
- Patient care services
- Planning and development

## 3. Healthcare Sector in India

Healthcare management is a huge, complex, and ever-changing field. In fact, healthcare services will increase 30 percent from 1996-2006 and will account for 3.1 million new jobs, the largest increase of any industry. Healthcare has become one of India's largest sectors - both in terms of revenue and employment. Healthcare comprises hospitals, medical devices, clinical trials, outsourcing, telemedicine, medical tourism, health insurance and medical equipment. The Indian healthcare sector is growing at a brisk pace due to its strengthening coverage, services and increasing expenditure by public as well private players.

Indian healthcare delivery system is categorised into two major components - public and private. The Government, i.e. public healthcare system comprises limited secondary and tertiary care institutions in key cities and focuses on providing basic healthcare facilities in the form of primary healthcare centres (PHCs) in rural areas. The private sector provides majority of secondary, tertiary and quaternary care institutions with a major concentration in metros, tier I and tier II cities.

India's competitive advantage lies in its large pool of well-trained medical professionals. India is also cost competitive compared to its peers in Asia and Western countries. The cost of surgery in India is about one-tenth of that in the US or Western Europe.

### Healthcare Market Size

The overall Indian healthcare market is worth around US\$ 100 billion and is expected to grow to US\$ 280 billion by 2020, a Compound Annual Growth Rate (CAGR) of 22.9 per cent. Healthcare delivery, which includes hospitals, nursing homes and diagnostics centres, and pharmaceuticals, constitutes 65 per cent of the overall market. The Healthcare information Technology (IT) market which is valued at US\$ 1 billion currently is expected to grow 1.5 times by 2020.

There is a significant scope for enhancing healthcare services considering that healthcare spending as a percentage of Gross Domestic Product (GDP) is rising. Rural India, which accounts for over 70 per cent of the population, is set to emerge as a potential demand source.

India requires 600,000 to 700,000 additional beds over the next five to six years, indicative of an investment opportunity of US\$ 25-30 billion. Given this demand for capital, the number of transactions in the healthcare space is expected to witness an increase in near future. The average investment

size by private equity funds in healthcare chains has already increased to US\$ 20-30 million from US\$ 5-15 million

A total of 3,598 hospitals and 25,723 dispensaries across the country offer AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy) treatment, thus ensuring availability of alternative medicine and treatment to the people.

The Indian medical tourism industry is pegged at US\$ 3 billion per annum, with tourist arrivals estimated at 230,000. The Indian medical tourism industry is expected to reach US\$ 6 billion by 2018, with the number of people arriving in the country for medical treatment set to double over the next four years. With greater number of hospitals getting accredited and receiving recognition, and greater awareness on the need to develop their quality to meet international standards, Kerala aims to become India's healthcare hub in five years.

#### 4. Conclusion

There have been significant advances in the healthcare system in India over last few decades. Despite these recent strides health systems remain ineffective in providing basic minimum care as promised in the Indian Constitution. The fiscal constraints on the government make it obligatory for the private healthcare providers to take over part of the responsibility. New ways for establishing, strengthening and sustaining the private-public co-operation are essential for rejuvenating the system. At the same time decentralization exercises can make the health system more efficient and improve the quality of healthcare delivery. All these changes will need to be based on a strong political will and should be accompanied by economic and social reforms.

*Healthcare industry* at present is considered to be among the most dynamic industries with ample number of job opportunities. Among the rapid growing sectors in India, *Health Care sector* has immense potential! Several studies disclose the fact that the Health Care industry in India has witnessed a growth of about 30% in the year 2008-2009, which accounts to about 1.3 million jobs opportunities, the maximum increase in any kind of industry. Today, India is known for offering top class health care facilities to all through its world class health institutes and hospitals. At present more than 100, 000 people are there at various levels of the health care industry.

The health care sector in India is in need of skilled and efficient personnel who are excellent in medical science and also technologically sound.

“Whether you are a Doctor, Nurse, Chemist, Physiotherapist, Paramedical staff, Public Health Professional or hold any other health sector expertise, Connecting Health... Touching Lives In India ... Join The Healthcare Group.”

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