

Mission at Grass Roots

Way back in 1988 I went to develop a case study on the first corporate hospital of India, which had earned a name as a highly respected super-specialty hospital in a little over 4 years of its establishment despite all adversities.

As I went to meet the General Manager (Administration) at reception, he took me to lift and asked me to get in and moved swiftly to a side ramp. When I reached fifth floor, he was there in a minute, smiling, to receive me. On being asked as to why he did not join me in the lift, he said, "The lift is meant for patients. No other person, except Chairman (Cardiologist), among us including the Chief Executive, Jt. Chief Executive (Chairman's daughter, the other General Manager, officers, staff at various floors, uses it. We go by ramp, may be 4-5 times a day. If we use lift, the lift operator may give preference to us not to patient".

When I met the Chief of Food and Beverages who had joined from Hotel Chola Sheraton, he said, "My experience there is of no use here. I have to prepare over 700 unique liquid diets every day for close to 300 patients. We have to ensure the diet of not only the patient but even guests reach them within very tight time frame, because if it does not, the condition of the patient may be adversely affected".

Experience of meeting the Matron in-charge of housekeeping was no different. She welcomed me but kept on counting bed linens and pillow covers. I was getting restless. After about 20 minutes she finished counting and turned to me. "Sorry to keep you waiting. What can I do for you?" She asked. Unable to control myself, I asked, "Could not you attend to me first and then counted bed linens? She replied, "Sir, our laundry is unable to take increased load. We have therefore to bank upon the service of outside washer men. I had to check the bed linen and pillow covers to be able to issue bed linen on time, twice a day". "Why don't you issue once in two days or a week or when the patient is discharged? In the government hospital in our city, they change it when the patient is discharged or goes abode" I said. "What?" she almost cried. With eyes and mouth wide open and in a state of shock, she mumbled, "But what will happen to the patient, he will get infection".

Irrespective whom I met, from Jt. Chief Executive to EDP Manager, the word "Patient" echoed in our conversation. I understood that the Mission "Patient Care" has percolated organization wide as shared values, and people knew what to do in situations when rules are not clear.

In a far off place from India, a city called Sabadel, about 40 kms from Barcelona, Spain, ParcTaulti Consortium Hospital was formed by merger of four hospitals, because their financial condition deteriorated in a way that they were not able to contribute to even mandatory National Security Fund. Two of them belonged to municipality, one was owned by a private Savings Bank and one by a Mutual Funds company.

After going through lot of post-merger turmoil for integration over 5 years, the hospital emerged as an Olympic referral hospital. I had heard a lot of good things about the hospital and its staff and held them at high esteem. But when I visited there, I was in for a shock with lot of noise, slogan shouting etc. I asked the doctor who had accompanied me as to what was it all about. He replied that staff is protesting against the government on wage issue. He added, "Don't worry, it will stop after half an hour". Looking at my inquisitive eyes, he said, "The staff is agitating to express solidarity with unions who have organized nation-wide protest on the issue.

But the staff here protests only during lunch hour, as they don't want that patients should not suffer for no fault of theirs on the issue".

The organization chart of the hospital was also peculiar with a thick border demarcating people in two sets; one with patient in the centre and medical units around it within the border and all other staff outside the border. On being asked, the Chief of Planning explained it as expression of centrality of patients, if anything happens to him, no one outside the border is required. Message was loud and clear to a visitor like me that "patient care" has become a shared value in that hospital.

"We talk so much of Mission and shared values, but I wonder how many of us realise the benefits of it", thought the case writer.

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