Evaluation of the Need for Establishment of Geriatric Facility Ina Tertiary Care Teaching Hospital

¹Dr.SeshadriBilla, ²Dr.Venkat Raju U, ³Dr.D.Srikanth

¹Associate Professor, department of Hospital Administration, Gandhi Medical College & Hospital ²Senior Resident, department of Hospital Administration, Gandhi Medical College & Hospital ³Senior Resident, department of Hospital Administration, Gandhi Medical College & Hospital Corresponding Author: Dr. Venkat Raju U

ABSTRACT

The average life expectancy of the Indians has been on the increasing side over the years on account of advancement in Medical Treatment & Technology, penetration of better health care facilities, better awareness of IEC activities in health care delivery system, increase in the affordability for better living conditions and because of all these consequences, the percentage of elderly people (above 60 years) has increased and been increasing in reference to their health needs.

According to the population census 2011, there are nearly 104 million Geriatric age group population (aged 60 years or above) is present in India with a ratio of 53 million females and 51 million males. A report released by the United Nations Population Fund and Help Age India suggests that the number of Geriatric age group is expected to reach up to 173 million by 2026.

METHODOLOGY: Retrospective and Observational.

RESULTS AND OBSERVATIONS: observational study was conducted in all the departments and data was collected from hospital information management system and medical records department. A Gap analysis was done on Geriatric Health Care Management in comparison with the already established Pediatric department where in having all the required facilities like The trained Health care providers, specialized ICU units and Treatment Centersgives an outcome with evaluation of the Geriatric patient load in various departments when compared to the Pediatric patient load establish a big gap with acute shortage and dearth of Specialized Geriatric Health Care Units and specific centers with lack of qualified and trained Health Care providers in adequate number in this specialization reveals the fact that there is an acute need to bridge the gap to establish a full-fledged Geriatric Department to cater the needs & requirements of huge Geriatric patient load in all the treatment areas of various departments

RECOMMENDATIONS:

Establishment of full-fledged Geriatric Department with the above mentioned facilities with allocation of nearly 20% of beds to this specialization in the existing hospital bed complement. KEY WORDS: Geriatrics, Health care Facility, Urbanization

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I. Introduction

The average life expectancy of the Indians has been on the increasing side over the years on account of advancement in Medical Treatment &Technology, penetration of better health care facilities, better awareness of IEC activities in health care delivery system, increase in the affordability for better living conditions and because of all these consequences, the percentage of elderly people (above 60 years) has increased and been increasing.

According to population census 2011 there are nearly 104 million elderly persons (aged 60 years or above) in India; 53 million females and 51 million males. A report released by the United Nations Population Fund and Help Age India suggests that the number of elderly persons is expected to grow to 173 million by 2026. In 2013, the age specific death rate per 1000 population for the age group 60-64 years was 19.7for rural areas and 15.0 for urban areas. Altogether it was 18.4 for the age group 60-64 years. As regards, sex-wise, it was 20.7 for males, and 16.1 for females. The old age dependency ratio climbed from 10.9% in 1961 to 14.2% in 2011 for India as a whole. Most common disability among the aged persons was locomotor disability and visual disability as per census 2011.

With the above preamble, the increasing number of elderly persons has a direct impact and load on the demand for health care services due to consequent rise in degenerative diseases of aging, social, cultural, economical, psychological & emotional issues and overall changing aspects in the life style. The elderly people

suffer from both communicable & non communicable diseases and further compounded by impaired visual, hearing, motility & stability, and also decline in Immunity and as well age related physiological changes lead to an increasing load of burden on elderly age group (Geriatric Age Group).

In the population over 60 to 70 years, more than 50% suffer from one or more chronic disorders and more over with rapid urbanization and societal modernization changes in thought & perception lead to decline in joint families culture has also brought lot of changes like break down in families and family values, lack of care, love & affection, changes in the frame work of family support resulting in economic insecurity, social isolation, cultural detachment, disownment by own family members and above all the Elderly Abuse leading to a host of psychological illnesses.

With the above scenario of change in health transition and other issues demands an appropriate, timely intervention and initiation in this aspect to make it a policy to arrange and mobilize additional budget and other resources for the setup of Geriatric Health Care Facility. This is a burning issue and emerging as a challenge and major responsibility for all health care providers, all health care organizations, major NGOs, all corporates under CSR activity and above all the Government should take immediate measures and initiatives in the form of a policy and compulsion to design the Geriatric Health structure and process in the health care delivery system with a Holistic, Multidisciplinary and proactive approach.

AIM: Evaluating the need for establishment of Geriatric Facility in a tertiary care teaching hospital.

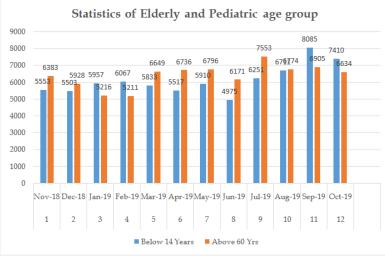
II. Methodology:

Observational study was conducted in all the departments and data was collected from hospital information management system and medical records department. Retrospective data of one year from 1st November 2018 to 31st October was collected and analyzed. Gap analysis was done to evaluate the need for establishment of geriatric facility. The study area is Gandhi Hospital, Secunderabad is a tertiary care teaching hospital.

III. Results And Observations:

Retrospective data of one year from 1st November 2018 to 31st October was collected and analyzed.

		Gandhi Hospital	
	Below	14 Yrs & Above 60 yrs Statistics	
	Fre	om 01-Nov-18 To 31-Oct-19	
S.No	Month& Year	Below 14 Years	Above 60 Yrs
1	Nov-18	5553	6383
2	Dec-18	5503	5928
3	Jan-19	5957	5216
4	Feb-19	6067	5211
5	Mar-19	5833	6649
6	Apr-19	5517	6736
7	May-19	5910	6796
8	Jun-19	4975	6171
9	Jul-19	6251	7553
10	Aug-19	6711	6774
11	Sep-19	8085	6905
12	Oct-19	7410	6634



Above statistics clearly explains the need for establishment of geriatric facility on par with pediatric facility.

Distribution of Elderly

		CO X			
	Unit	>60 Years	F	0	
		M	F	0	T
Antenatal	Antenatal Op	0	7	0	7
	Sub Total	0	7	0	7
ART	ART	1454	685	0	2139
	Sub Total	1454	685	0	2139
C T Surgery	CT Surgery	63	16	0	79
	Sub Total	63	16	0	79
	Female	0	2341	0	2341
Cardiology	Male	3556	0	0	3556
	Sub Total	3556	2341	0	5897
Casualty	Casualty	9588	5386	3	14977
	Sub Total	9588	5386	3	14977
	Dermatology	1406	945	0	2351
D V L	S T D	24	4	0	28
	Sub Total	1430	949	0	2379
Dental	Dental	691	600	0	1291
Dental	Sub Total	691	600	0	1291
	Female	0	1159	0	1159
Endocrinology	Male	786	0	0	786
	Sub Total	786	1159	0	1945
ENT	ENT	751	719	0	1470
ENT	Sub Total	751	719	0	1470
E'l Dl'	Family Planning	0	8	0	8
Family Planning	Sub Total	0	8	0	8
	Female	0	279	0	279
Gastroenterology	Male	663	1	0	664
	Sub Total	663	280	0	943
	Female	2	4763	0	4765
	Male	5988	5	0	5993
General Medicine	Unit 6 Male	1	0	0	1
	Sub Total	5991	4768	0	10759
	Female	0	1125	0	1125
General Surgery	Male	2752	0	0	2752
	Unit 4 Female	0	0	0	0
	Sub Total	2752	1125	0	3877
ІСТС	ICTC	46	20	0	66
	Sub Total	46	20	0	66
Malaria Clinic	Malaria Clinic	0	1	0	1
	Sub Total	0	1	0	1
	Female	0	689	0	689
Nephrology	Male	1118	0	0	1118
	Sub Total	1118	689	0	1807
	Female	0	684	0	684
Neurology	Male	1197	1	0	1198
	Sub Total	1197	685	0	1882
	Female	0	374	0	374
Neurosurgery	Male	698	0	0	698
	Sub Total	698	374	0	1072
	Gynaecology	0	360	0	360
Obstetrics & Gynaecology	Sub Total	0	360	0	360
	Ophthalmology	696	720	0	1416
Ophthalmology	Sub Total	696	720	0	1416
	Female	3	2858	0	2861
Orthomadics	Male				
Orthopaedics		3182	1	0	3183
	Sub Total	3185	2859	0	6044
Paediatrics	Paediatric	0	2	0	2
	Sub Total	0	2	0	2
Pain Clinic	Pain Clinic	218	241	1	460
	Sub Total	218	241	1	460
Physiotherapy	Physiotherapy	29	16	0	45
пузющетару	Sub Total	29	16	0	45
	Female	0	40	0	40
	1 childre			_	174
Plastic Surgery	Male	174	0	0	174
Plastic Surgery		174 174	0 40	0	214

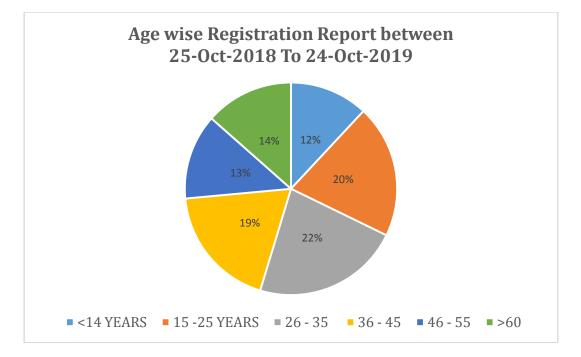
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	Male	217	0	0	217
	Sub Total	217	124	0	341
	Female	115	296	0	411
Respiratory Medicine	Male	469	8	0	477
Pulmonology	Speciality R M	5	1	0	6
	Sub Total	589	305	0	894
Swine Flu	Swine Flu	1	8	0	9
	Sub Total	1	8	0	9
TB Clinic	TB Clinic	93	42	0	135
	Sub Total	93	42	0	135
Urology	Female	0	433	0	433
	Male	1127	0	0	1127
	Sub Total	1127	433	0	1560
	Grand Total	37113	24963	4	62080

Distribution of Geriatric patient load in various departments: Casualty > General Medicine > Orthopedics > General Surgery

AGE WISE REGISTRATION REPORT BETWEEN 24-0ct-2018 to 25-Oct-2019

S.No	Age	Registrations
1	<14	83880
2	15 - 25	142303
3	26 - 35	157741
4	36 - 45	132306
5	46 - 55	91223
6	>60	94585
7	Total	702048



Gap analysis was done on Geriatric Health Care Management gives an outcome of an acute shortage and dearth of Specialized Geriatric Health Care Units and specific centers with lack of qualified and trained Health Care providers in adequate number in this specialization to establish a full-fledged Geriatric Department.

- Creation of Geriatric Medical Wards
- Creation of Geriatric Surgical Wards
- Geriatric Intensive Care Units (GICU)
- Assisted living facility units with a recoup and rehabilitation services
- Counseling centers for Socio psychological issues.
- Palliative Care Units and other facilities as per the needs and requirements
- Geriatric living centers.

Keeping in view of the above and with the growing demand for this specialization, there is an acute need for establishing a Geriatric Department with specialized Geriatric Care Units and Centers in all the existing hospitals of Government, Private, Corporate and other Health Care Organizations to meet the Challenge and responsibility in a very professional way catering not only to their treatment needs but also for their social, cultural, economical, psychological & emotional needs in an integrated and comprehensive manner for the better outcome with allocation of special funds and other resources in the Government and under CSR activity from all the major corporate bodies to inculcate a feel of cure, care, comfort and compassion in the Geriatric Age Group with a 'motto' of creating a feel of perception of an 'Extended Family' in their minds.

IV. Suggestions And Recommendations:

- Establishment of full-fledged Geriatric Department with the above mentioned facilities with allocation of nearly 20% beds to this specialization in the existing hospitals bed strength.
- Recommending the age group from 60 years and above to include in the Geriatric Age Group.
- Hospitals seeking to commence geriatrics services should strive for effective interdisciplinary teams.
- Establishing the academics in this specialization as per the MCI requirements like, MD in Geriatrics/fellowship and post MD programs in this Specialization.

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