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Introduction: – India In this present scenario achieving effective and efficient health care services is an acute issue that needs an immediate attention.

In developing countries this problem is mostly common as the government allow is not fully capable in undertaking different challenges to meet the health needs of fast growing populations. There was a need to develop an infrastructure of hospitals in our nation years ago. A country with an extremely high poverty rate, cataracts had become a major problem for the inhabitants. But one man came about to challenge its hold on the people of India. Dr Govindappa revolutionized the medical field of eye care and built a health institution that would allow everyone to attain help when needed. Doctor GOVINDAPPA “ A true social entrepreneur” Dr.

Govindappa had entrepreneurial quality, which is one of the four categories used to evaluate Ashoka nominees in 2004. People with this trait not only want to express their ideas but they want to go out and be a part of solving the problems by executing their ideas. Doctor has shown entrepreneurial quality through his work at standardizing the procedures for cataract surgery because this allowed the change to spread throughout the field, not just at his hospitals in India. Another possible way he has shown entrepreneurial quality is through the training that Aravind does for doctors in other countries. Finally, the fact that Dr. Govindappa did over 100, 000 eye surgeries successfully himself shows that he was willing to be a part in executing his idea in 2009.

He wanted to reach those who had not been reached before and help the poverty stricken individuals who without his help would not able to see, even after his death, his dream is still living on. Aravind continues to explore new approaches to the primary eye care market and continuously seeks new innovations to help the population. In 1976, his retirement from the government medical college he organized rural eye camps within the country and gathered their patients to the nearest hospitals base for minor treatment or surgeries.

Patients not only received treatment from medical services but are also provided foods, accommodation and even transportation for free. The process was as simple as to train people around the world without any discrimination to deriver in a same way in all over the globe. As his only perspective was to help human beings on no profit.

Looking after his determination or dedication towards public welfare many people came forward and became members of his foundation. They even showed great interest in opening many branches in all over the nation to provide only special eye care services to the needy people with great effectiveness of McDonalds for the sake of humanity. Later on after a passage of time finally, they got success to establish the “ Aravind Eye Hospital” with an aim to provide free eye care services for the demanding poor denizens, moreover, it was not only beneficial for them however for the others as well who could afford.

Furthermore, they even charged them at pocket friendly fares. Another fact to consider is that their charges remained extremely low. They were successful in maintaining quality standards and their services of other products as well. ARAVIND’S BUSINESS MODEL IN THE MARKET In 1980’s to make contract surgery affordable for the people, Aravind started manufacturing its own intraocular lenses, which till then were imported at $150 a lens. As his motive was to help only, he decided to eliminate some portion of its charges, he then cut the cost to $2 a lens and exported it to developing countries. As he was attaining popularity all around. They then started to compete corporate hospitals, and the transition in leadership between generations of the families. His motive behind that was model attribute its success to a clear vision eradicate needless blindness.

The main reason behind his goal was not to earn money or to achieve commercial success but to help community. Aravind Eye Care hospital has never invested in high- profile advertising campaigns, relying instead on camps and outreach programmers to bring patients from under developed areas. He helped those people specially who were unable to reach to the hospital although they were unaware about the local facilities provided by that hospital. For to brought them under knowledge he started doing seminars.

One of his consultant Mr. Harish Bijoor describes Aravind as a classic case of socially sustainable marketing. As they learnt very good things from the things happened bad with them. Reason behind they were encouraged to start helping poor. It is said by one of his well wisher lady named “ Shenay” that, “ Linking scale and quality, scale takes time but moral deeds with coverage can take organization keep growing. THINGS INTO PROCESS Recognizing the importance of this capacity building from the management perspective this process was designed in 1994 by LAICO. Over the last decade it was observed that over 100 eye hospitals have undergone this process of capacity building and putting in place good management systems. Result wise many hospitals doubled their output within 12 to 18 months and afterwards they moved towards full financial self reliance through user fees.

Later on it actually proved best for its quality and efficiency in a couple of days. Ultimately blindness is reduced when one patient at a time receives a sight restoring surgery and a pair of glasses as appropriate. There is 80% proven clinical solution and hence their main focus was on to bring turn to make it happen in future. CHALLENGER FACED BY THEMTo bring revolution in the society many people face challenges.

Even the reliable team of Aravind Eye Care Hospital itself faced many challenges. Either tough or easy all were acceptable by them. To bring satisfaction among the people who were badly suffering from eye issues were their real motive. For this none of the difficulties were as tough as impossible for them. Below are the highlighted challenges he and his committee faced at the time when they were in their starting years of development. LIST OF CHALLENGES: –      I.

Uncertain nature of financial support as only two thirds of operating expenditure were dependent on external funding through donation. After seeing his detrimental feeling towards the welfare of the society many came forward to help him with liquidity.    II.         Seasonal imbalance in services. As its mandatory to take good care of eye because it is the most sensitive part our body. People used to prefer the winter season the most rather than getting operated in summer that was the reason approximately 95% of the workload was there in winter season.

III.         Due to the uneducation denizens were not much award regarding quality of service of hospital activities in the newly constructed building. Lack of education was the reason behind such unawareness. Public was not much award at that time about the facilities given by that hospital. For this members of staff had to put many efforts to make them award.

IV.         In that scenario things were not much developed. Even they were not having much money to buy technology or advanced equipments. Due to the lack of technology only 20% of the surgeries were based on IOL.

V.         Due to less space available Aravind started with only 11 beds in his hospital. It was later on a big issue for him to give comfort zone to all e patients after being operated.   VI.         Not much people were educated in a medical field and even many who were helping him were unable to perform management. Lack o management practice was the reason. IMPROVEMENTS From 2000 onwards the hospital began to show marked improvement in all the defined core areas and some of his remarkable achievements highlighted the short spam of 2000-2004. New statistics clearly brought out that new strategies of introducing fees for services based on local paying capacity, conversion to EECCEIOL surgery from an exclusively ICCE surgical facility.

It even enhanced the hospital’s capacity good for many who were unable to meet with surgeries due to were not having a knowledge about the issues facing by them in vision. After getting acknowledged about their eye related problems they get related from their problems. Aravind no doubt has greatly enlarged its impact on society by not providing health care services but also providing employment to many social sectors. They have also provided transportation worldwide for its innovation and technical excellence, it attracts new ophthalmologists to the system.

We believe that Aravind is performing marvelous job so far and has a very sustainable model. Overall though, it is really an extra ordinary model providing a great help to the needy people of India.