

CHAPTER: 18

FEASIBILITY STUDY FOR 250 BED HOSPITAL IN NAGPUR

¹Archit Zomin Prashad

¹Student, IIHMR University

²Dr. Anoop Khanna

²Professor, IIHMR University

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INTRODUCTION

In Nagpur, a proposition was put forth for the creation of a 200-bed hospital, and a global healthcare conglomerate was contemplating acquiring it as a strategic foray into the Indian healthcare sector. The client enlisted the services of PwC to conduct a feasibility study in the Nagpur market, seeking to comprehend the practicality of procuring the hospital. Feasibility studies serve the purpose of impartially and logically evaluating the merits and drawbacks of an existing enterprise or a proposed initiative. These analyses also assess the potential opportunities and threats within the environment, the necessary resources, and, ultimately, the probability of achieving success [2]

Engaging in a feasibility study brings forth numerous advantages that can profoundly influence the triumph of a project. It brings clarity and delineates different approaches, refines business options, pinpoints the project's objectives, improves success prospects by considering various factors, assists in decision-making, and furnishes the business with a comprehensively documented status [1].

RESEARCH QUESTION

Was it viable to establish an additional hospital in Nagpur to offer tertiary healthcare services that meet the needs of the residents?

RESEARCH OBJECTIVES

1. To evaluate the healthcare requirements of the locality.
2. To gather demographic data pertaining to the designated area.
3. To identify and analyze market competition from other healthcare providers in the vicinity.

RESEARCH METHODOLOGY

The study involved analyzing the gathered data to assess feasibility. The geographical scope encompassed Nagpur and its adjacent districts. Data was gathered through in-person interviews with diverse stakeholders, including doctors, administrators, and equipment suppliers, utilizing a pre-arranged structured questionnaire. This method sought to acquire insights into the feasibility of establishing a healthcare facility in the region. The study took the form of a blend of primary and secondary research, with data analysis employed to evaluate feasibility. The focus was on Nagpur and its neighboring districts as the geographical area of interest. Data collection involved face-to-face interviews with diverse sources, such as doctors, administrators, and equipment suppliers, utilizing a pre-designed structured questionnaire.

RESULTS & DISCUSSION

The majority, around 70%, of patients who availed services in the private sector paid for them directly, indicating a limited prevalence of insurance coverage. Approximately thirty percent of patients possessed some type of insurance, encompassing private health insurance, public health insurance, and government schemes like Rajiv Gandhi Jeevandayee Yojana. Disbursements for government schemes varied between 4 to 8 months, and the potential for rejections adversely affected hospital cash flows. Launched in 2012 by the state government, the Rajeev Gandhi Jeevandayee scheme targeted Below Poverty Line families with an annual income below 100,000 INR across the state. Under this program, BPL families could receive treatment up to 150,000 INR per year at affiliated hospitals, with a special provision of up to 250,000 INR for kidney transplants. Hospitals such as Care, Meditrina, and Orange City played significant roles in this initiative, primarily aiming to enhance patient volumes.

CONCLUSION

Approximately 50% of the patient base in Nagpur hospitals comprised individuals from outside the city. The region faced a shortage of high-quality healthcare institutions, and aside from Wockhardt, Alexis, and a few new projects, the existing hospitals in Nagpur lacked the necessary infrastructure to offer comprehensive multispecialty care under a single roof. Moreover, in terms of ambiance and overall aesthetics, a majority of these facilities did not align with the corporate hospital setup style. Approximately 50% of the patient base in Nagpur hospitals consisted of individuals from outside the city. The region grappled with a shortage of high-quality healthcare institutions. With the exception of Wockhardt, Alexis, and a few new projects, the existing hospitals in Nagpur lacked the infrastructure to provide comprehensive multispecialty care under a single roof. Additionally, in terms of ambiance and overall aesthetics, the majority of these facilities did not conform to the corporate hospital setup style.

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