



Identifying the Inherent Needs of the Society and Accordingly Designing a New Business Proposition - Case of a Medico Entrepreneur in India

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Abstract

This case study showcases the vision and initiative of a young medical professional from India who has profound compassion and empathy towards the senior citizens. He wanted to make the society and family sensitive towards senior citizens, help them lead an easy life. This case study discusses in detail the education acquired by the entrepreneur, his vision, his route to entrepreneurship, his venture and its operations, major impediments encountered by him, the growth enjoyed by him and his plans for future expansion and growth. It also showcases how the medico-entrepreneur was successful in creating new jobs in the society, besides assisting the ageing adults in leading a healthy and happy life.

Keywords: *Medico - entrepreneur, entrepreneurial vision, business proposition, future growth, social entrepreneurship.*

Introduction

Longevity has been one of the greatest achievements of the 20th century. India's success in increasing life expectancy has led to a larger number of the elderly in the country. According to the Registrar General and Census Commissioner of India forecasts the share of older persons (age 60 years and above) in the total population to rise from 6.9% in 2001 to 12.4% in 2026 (Source: Dr Abhishek Shukla). Economic and social developments brought about major changes in our social structure. The centuries old joint family system has disintegrated and with it collapsed the safety-net of parents and grandparents. They are left disillusioned, shattered and lonely. Thus issues related to the emotional security and medical care of older people have become increasingly important. Though was already very popular in developed countries like USA, UK etc it still had to gain recognition in the developing countries.

This study show cases the initiatives of an enterprising medical professional who of conscious of the issue related to the old age and felt that there was absence of standalone medical centres

which are solely dedicated to treating aging adults and patients undergoing terminal illness. He felt there was an inherent need for medical centres, which specialize in geriatric care, are able to address the medical problems faced by the aging adults and also extend long term support and assistance to the ailing patient and his family.

Methodology

The methodology adopted includes the following: visiting the project site, conducting series of interviews of the entrepreneur and interacting with the other stakeholders. A questionnaire was drafted and then those questions were administered on the entrepreneur and the other respective groups. A rough draft was prepared and then it was refined. The entrepreneur`s endeavours, experiences, hardships, success and other nuances of business have been developed by way of a case and the vital learning`s drawn have being illustrated by way of figures and diagrams.

About the Entrepreneur

Dr Abhishek Shukla belongs to Luckow. He did his primary education from Missouri and higher secondary from Lucknow. He then went to Russia and stayed there for seven years and did MBBS and MD from there. He also worked as volunteer in geriatric care, terminal care, and palliative care and during this time he came in contact with elderly people; people with organ failures and people suffering from HIV, Hepertisis B and C, who were neglected by their family members. This made him realize the lack of family support and emotional security was deterring and hampering their curing process. And these people needed extraordinary care and empathetic treatment for a speedy recovery.

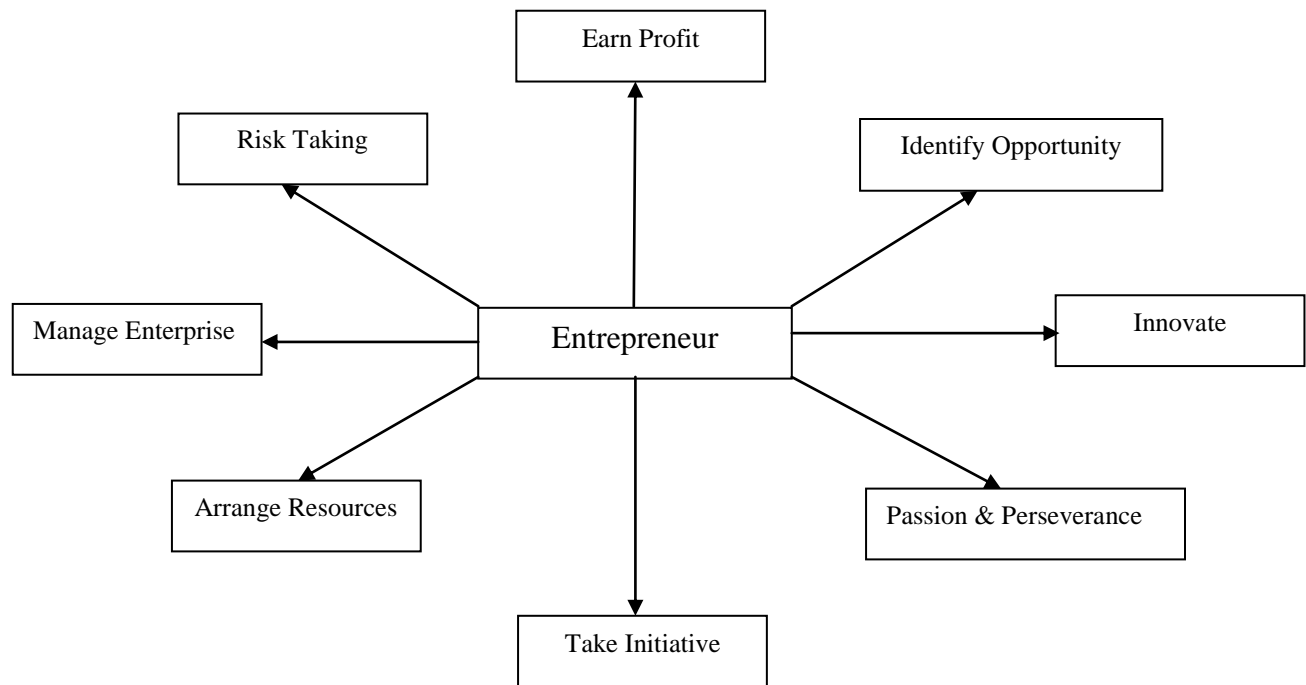
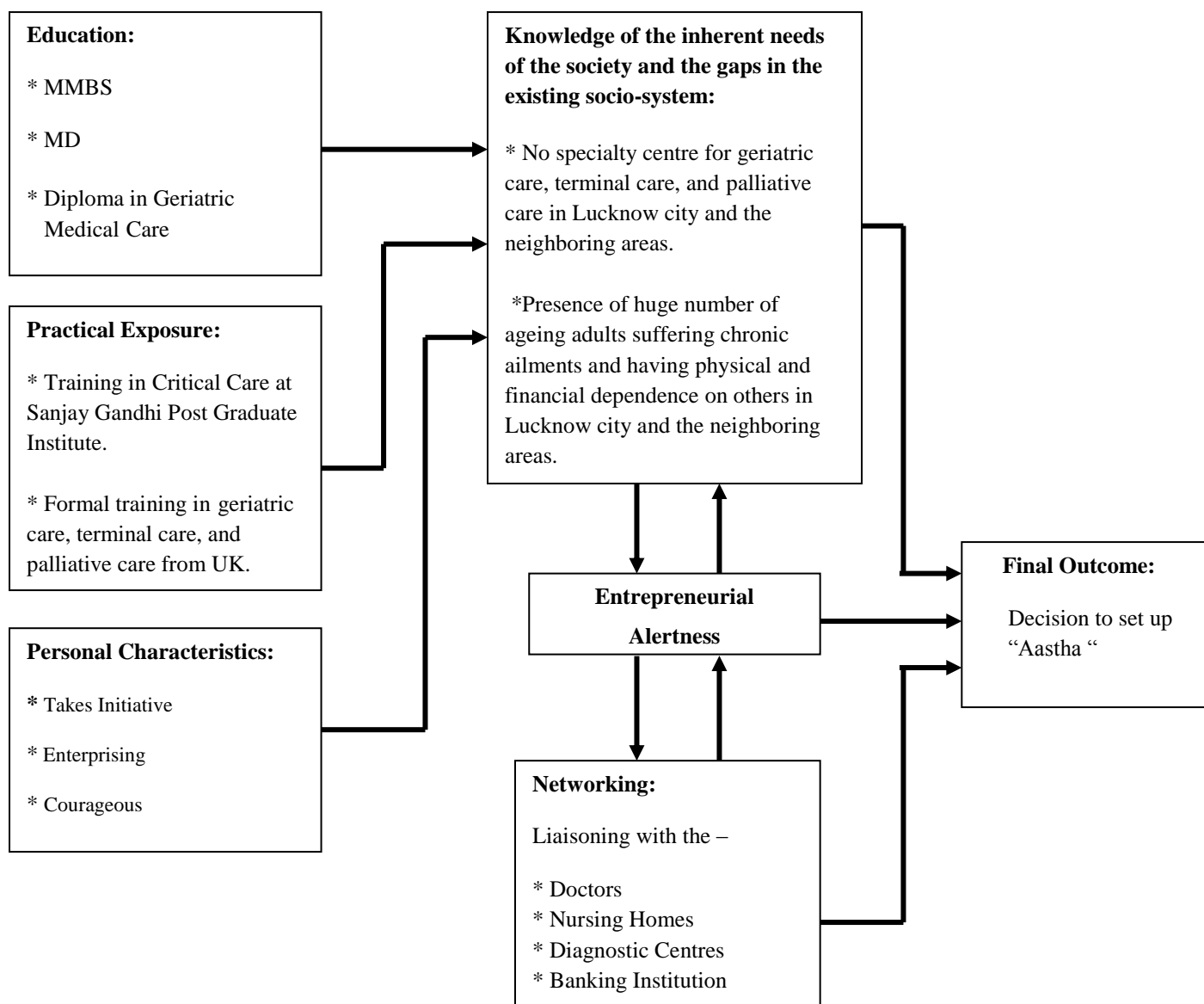


Figure1: Essential Qualities of an Entrepreneur

Entrepreneurial Vision

After completing his medical education from Russia Dr. Abhishek Shukla returned to India and did internship at King George Medical College Lucknow and started working with a private hospital at Lucknow at a meager salary of INR 3,000/-per month and from there he switched to another private hospital at INR 8,000/- per month. But he did not derive pleasure and job satisfaction, and he decided to do Diploma in Geriatric Medical Care from Banaras Hindu University (India). After completing his diploma he did training in Critical Care at Sanjay Gandhi Post Graduate Institute, Lucknow (India). He decided formal training in geriatric care, terminal care, and palliative care from St Christopher Hospice, London, which was a very renowned medical centre. He came across a senior professor who had once visited India and was surprised to see that a huge country like India lacked the necessary medical facilities for terminally ill patients. He even commented that the facility given to terminally ill patients in United Kingdom were far better than the facility provided to a guest in a five star hotel in India. This brought a turning point in the life of Dr Abhishek Shukla, who he decided to come back to India and start a hospice for geriatric care, terminal care and palliative care even though he was offered a job by Department of Palliative Care, Oxford University.

Figure 2: Opportunity Identification Model



Choice of Product / Service

After coming back to his native place Lucknow (India) Dr Abhishek Shukla started writing articles in newspapers and put up a stall in local 'melas' such as '*Lucknow Mahotsav*' to create awareness about the geriatric care, terminal care and palliative care. And as there were large number of ailing adults in the city, people started approaching him with their problems and queries. Dr. Shukla also conducted a survey of twelve thousand families living in the city to collect the data related to the age group, medical ailments, percentage of monthly budget spent on medical care, physical and financial dependence on family members and use of medical insurance etc. They were also asked them to express their expectation from a Geriatric care centre. Dr. Shukla finally started a hospice, in the name of 'Aastha', at Lucknow (India). This was the first one of its kind in Northern India there was one in Tamil Nadu. It was dedicated to provide high-quality healthcare services to the geriatric and terminally-ill patients and also to provide the "Old Age Home" facility to the aging adults who suffered from age-related ailments.

Business Proposition

Dr Shukla started his hospice in a rented premise, which had only OPD facility. He requested all to donate INR1 per day to 'Aastha' to help take care of elderly people in the city. For the first four months 'Aastha' did not have any patients, as people had lots of apprehension about the medical services being offered by them and people preferred to consult personally known and renowned doctors in the city. Initially Dr Shukla had a tie-up with another private nursing home for admitting the patient who needed prolonged care. So when 'Aastha' got its first patient he was admitted in that nursing home and Dr Shukla use to visit his patients thrice a day. Gradually when the patients were satisfied with the treatment and care of Dr Shukla they recommended him to the other friends and relatives as well and gradually the patient turnout increased.

In no time Dr Shukla took some more rooms on rent, to set up semi-private rooms for the aged patients, who needed long-term care. 'Aastha' soon became a known name in the city for its quality of service and reasonable charges. The quality of services was continuously improved by regular training and development of the staff. He was approached by the many families in the city who wanted him to create critical / acute care facilities as well. In the fourth year Dr Shukla purchased a building and shifted his hospice in his own building. Aastha Geriatric Hospital was a uniquely designed, acute care hospital which provided geriatric long term acute care, outpatient clinic, nursing care facility and hospice facility. Patients stay under the supervision and consultation of renowned physicians who are experts in Geriatric Care. This facility was especially for aging adults who no longer require treatment in the intensive care unit of a regular hospital, but still needed acute and special care. The hospice had a team of ten doctors and fifty trained staff wherein thirty people worked inside the hospice and twenty were field staff who provided homecare.

Dr Shukla was the first one in the city to offer homecare facility for the ailing elderly family members with partial or full physical disability. To provide this service Dr Shukla developed a team of healthcare staff (male and female) who were trained in geriatric care, terminal care and palliative care. They were counseled and groomed to deal with the patients in a sympathetic and courteous manner. The patients were charged for a twelve hour shift basis. In case of twelve hour shift single staff was appointed and 24x7 assistance two staff rendered the services.

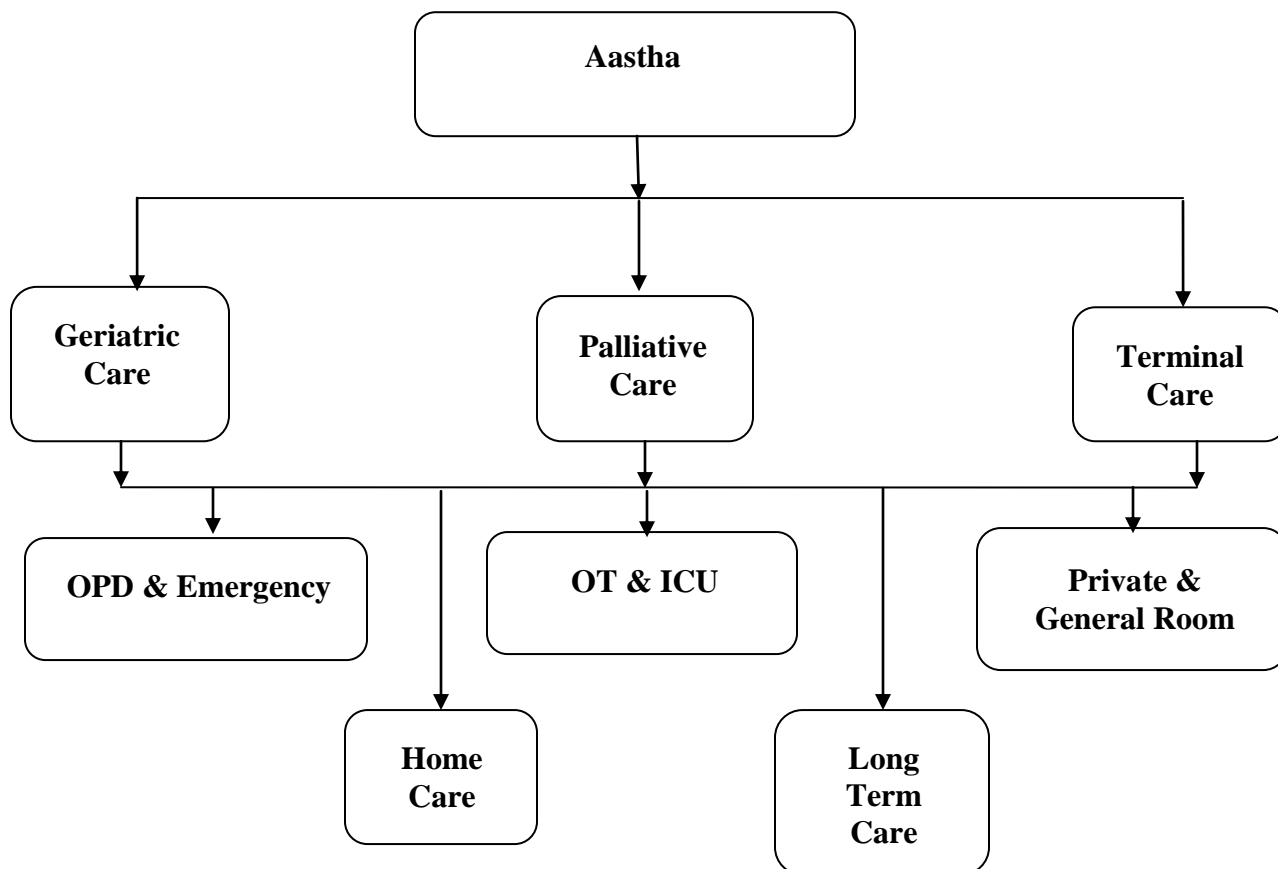


Figure 3: Services offered by Aastha

The various services offered at ‘Aastha’ are:

1. Geriatric Care

Geriatrics care is medical care that is dedicated to treating older adults. The aging adults often suffer wide range of physical and mental disorders; social and spiritual issues/concerns. A geriatrician is an expert who is trained diagnose such problems and provide full social, emotional, physical, and healthcare needs of the elderly people. Many a time physical, emotional, mental, social, and environmental problems act as constraint, obstruct the independent movement and affect the daily routine of the aging adults which the family members fail to understand. At Aastha, the geriatric care experts under the supervision of Dr. Shukla, diagnose such problem, counsel the family members and provide individualized solutions to promote health and emphasize successful aging.

2. Palliative Care

Palliative Care is an area of health that focuses on treating curable illnesses, chronic and/or life-threatening diseases, as well as taking care of patients who are approaching the closing stage of life. Efforts are made for early detection; flawless assessment and apposite treatment of the illness. Palliative Care uses multidisciplinary approach and inputs are obtained from physicians, pharmacists, nurses, psychologists, spiritual guru and other allied health professionals in formulating a plan of care to relieve the patient of his sufferings. The Palliative Care unit at Aastha provides affordable treatment to people suffering with cancer, HIV/AIDS

and other life-limiting illnesses. It unit strives hard to: stabilizes the clinical condition of the patient; offer relief from unnecessary pain and suffering; ensures use of affordable and effective drugs ;supports and complements anti-retroviral treatment (ART) ; empowers the family to take better care of their dear one; empower the community to counter HIV/AIDS and cancer cases.

3. Terminal Care

Team at '*Aastha*' brings comfort to terminally-ill patients and their families by providing physical, emotional and medical care. Aastha Hospice services are delivered to patients in their homes or in homelike settings such as community-based residential facilities, assisted living facilities; nursing homes and hospitals. Majorly the patients and their family prefer to take such services in their home. The Inpatient Unit provides short-term, intensive monitoring and treatment of complex problem and acute pain. Aastha Hospice also offers respite care to the families who need a break from ongoing care-taking of the ailing family member.

4. Home Care

Home Care is one of our most important services. Trained and experienced staff is attached to the patient to assist them in their homes. On an average eighty patients per month are under the care and supervision of '*Aastha*'. The doctors and staff at '*Aastha*' provide 24-hr emergency services. The staff is trained to provide the following assistance to the patient : keep personal hygiene and dressing ;assist in freshening up; feeding ; teach their families the essential nursing tasks ; nutritional advice ;administration of medicines ;help patient to become mobile ; take care of pressure areas and pressure sores ;stay with the patient; enable the main caretaker to attend to more demanding jobs.

5. Long Term Care Facility

Under the long term care, services are designed to meet the patient's and family's multi-faceted needs which ranges from relieving the patient of the pain , providing him physical and emotional support; helping to explore spiritual expedition and adding new meaning and fun to his life. Care for family members includes counseling, spiritual support, educating them about the patient's illness, giving them guidelines to take proper care of the patient and encouraging them. Trained volunteers are also available to provide companionship to the patients and provide respite to the caretakers. The patient and his family decide the ranges of service which they desire.

Dr Shukla has team of doctors who have specialized in geriatric care, terminal care and palliative care. The doctors are motivated to attend the conferences and workshop to keep them updated with the latest developments in the field of medical science. In case of assisting staff Dr Shukla prefers to hire people who are in early twenties. The candidate must be high school pass and what is necessary is that they must be compassionate and loving and preference is given to people who already have undergone any specific training. Aastha also hire untrained health volunteers. Induct them and train them. Usually the training period is for fifteen days to one month training by the experts' .The trainees and taught to assist the bed-ridden patients in their day - to - day activities. This training is free of cost and there is continuous monitoring and reporting of feedback by the trainer. Dr Abhishek is compassionate, cooperative and caring .He treat the staff as family-members. Free medical aid to the staff and their family members open to share their personal problems as well. In times of emergency he even provides financial aid to them.

Dr Shukla initiated free Health Check up Camps for senior citizens of sixty years and above. These camps were for ten day and were organized once in two months. Free check up, free medicines, free information. Pharma companies like – Cipla, Allembic, Sun Pharma and Ranbaxy also joined Dr. Shukla in his endeavour. On an average one hundred and fifty to three hundred people use got registered for check up. Extremely poor people are given the medical treatment free of cost. Food is cooked in hygienic condition under the supervision of a qualified dietician. The private rooms provide unique facilities such as AC; plasma TV; refrigerator; phone; curtains; soothing colour scheme.

Recently ten bedded Intensive Care Unit has been constructed. The bed capacity has been increased to thirty. In total the employee size has increased to one hundred and fifty employees. There are more than four hundred inpatients and three thousand five hundred outpatients that come to Aastha Geriatric Hospital each year. It provided homely environment to the patients where special care was been taken of their physical and medical needs. The aim is to help patients lead as confident, comfortable life. The patients' families rate Aastha high and are ready to offer donations, as token gratitude towards the services rendered by Dr Abhishek and his team.

Future Growth Agenda

Dr Shukla plans to create a hi-tech “Old Age City”, with residential facility for aging adults, who need 24x7 assistance, while their children do not have time to look after them. This would be located in the scenic beauty of natural environment in the suburb adjoining Lucknow and would have proper in-house residential, medical and recreation facility. He would design and develop about two hundred small cottages – ordinary, luxury and deluxe, with start-of-art décor (fusion of conventional with contemporary). The cottages would be designed in a manner that they are able to harness fresh air and natural light which are very vital for healthy mind and body. It would be a complete green zone, the greenery would be enhancing the beauty of the place as well as would facilitate and enhance wellness among the dwellers. There will be a video conferencing room and internet facility so that these people can speak to the children located in different part of the world. The ambience of these cottages would be ethnic and it would have most up-to-date in-built facilities such as – cooling as well as heating facility; plasma television; refrigerator; phone etc. These cottages would be available on rental basis.

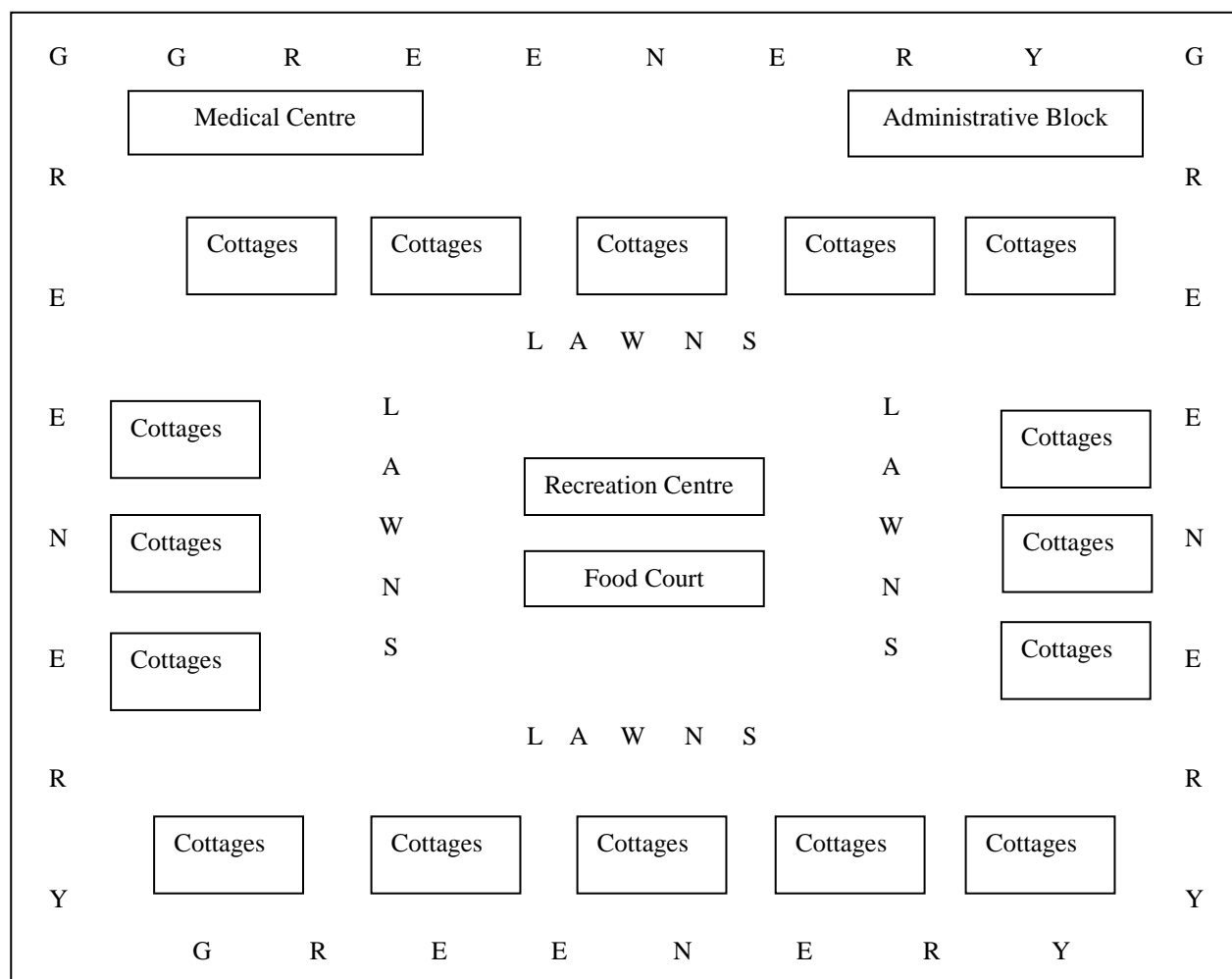


Figure 4: Plan Lay Out for Old Age City

There would be team of professional trained workforce, who will provide round the clock assistance and would look after the day-to-day needs of the aging adults. Initially a full time doctor along with assisting staff would be present round the clock, to keep a watch on the health related issues and the team would be expanded as per the need of the project. Food would be organic in nature, cooked in hygienic condition, by the trained people and under the supervision of qualified dieticians. The recreation staff would organize events such as art of living classes, yoga, meditation classes, spiritual discourses, sessions on life management, talks on medical issues, etc to keep the elderly people occupied and busy. There will be in-house team of technicians who have expertise in acupressure, physiotherapy, acupuncture, oil massage, music therapy, sunlight therapy, naturopathy etc to help the old age people tackle their day-to-day problems.

Concepts Learned

One should be capable of identifying the inherent needs of the society and offer products or services to serve those unmet needs. Today when the socio, economic and demographic structure of the society is fast-changing there are people who have enough riches but are leading a lonely lives. These are the people who have reached the age-group, where they need round the clock assistance, which their children fail to give either because they are too busy in the career in the other corner of the world or because of the so called *modern outlook*, where they prefer the nuclear family set-up and like to devote all their time only on their immediate family. So if there are organizations who can take care of these aging and ailing adults and provide them special care and assistance in return of some charges it would be a great social endeavour. To initiate an innovative venture one must have self-belief, courage, perseverance and honesty and the rest automatically fall in line. Such projects are the need of the hour and can easily be replicated across the world and in specific in the developing countries. Such projects aptly qualify under social entrepreneurship, wherein one needs to create such ventures which root out social problems, enhance social well-being, create numerous jobs in the society and thereby contribute in economic growth of the country.

References

Dr Abhishek Shukla <http://www.hospiceindia.org/>