A Review of Corporate Social Responsibility Programmes Conducted in a Large Public Hospital in a Metropolitan City

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ABSTRACT

Background: Through Corporate Social Responsibility (CSR), a company achieves a balance of economic, environmental and social objectives and is also mandated by Indian law. CSR can help in strengthening healthcare in public hospitals catering to the needy population. Aims: This study documents the various CSR activities going on in a large tertiary care teaching and public hospital in a metropolitan city, challenges in their implementation and effectiveness of such activities. Materials and Methods: Cross sectional questionnaire based descriptive study in a large public hospital in Mumbai, India. A questionnaire was distributed to nine departments which had received CSR support in the year 2017-18. Details recorded were the kind of initiatives and amount received, difficulties faced in implementation, mode of implementation, its effectiveness and number of people benefitted by the activity. Results: In all, companies have provided a total funding of Rs.10,18,24,940 in a year. Difficulties were faced due to lack of knowledge of the procedure and clear guidelines for CSR implementation. Approximately 84,251 indoor patients and 20,77,146 OPD patients were directly or indirectly benefited by these activities. Conclusions: Public hospitals are best settings where companies can implement their CSR activities for healthcare of the poorer sections of society, thus fulfilling their social obligations in a fruitful way. In view of the advantages of CSR, a dedicated CSR department and guidelines for CSR utilisation need to be set up with adequate expertise and responsibilities.

KEYWORDS: Corporate Social responsibility, Public hospital.

INTRODUCTION

Corporate Social Responsibility (CSR) is a process by which a company tries to integrate social and environmental concerns without affecting the expectations of shareholders and stakeholders [1].Adopting CSR also helps in improving the reputation of the company in the public domain. In India, there exists a major gap between people in terms of socio-economic status[2]. Health insurance is not seen as a priority in India, and the out of pocket expenditure on health is around 60%[2,3,4]. Companies in India have started to focus on need-based initiatives aligned with the national priorities[5]. The Government of India has made it mandatory for companies to undertake and declare their CSR activities under the Companies Act 2013. This is applicable to companies having an annual turnover of Rs.1000 crore or more, a net worth of Rs.500 crore or more or a net profit of Rs.5 crore or more. Such companies are supposed to set aside at least 2% of the average profit in the last 3 years for CSR activities[1].

Health forms a major opportunity for CSR activities[6]. The various activities taken up by companies in health care are, setting up health camps, running mobile dispensaries, setting up of nurse training institutes and carrying out blood donation camps. There are very few studies published related to social responsibility in healthcare organizations, especially in public hospitals and therefore it was decided to conduct this study[7].

The present study was conducted in the year 2017-18 to:

a. document the extent of CSR initiatives being provided to a major tertiary care public hospital in a metropolitan city,
b. understand difficulties and challenges faced in routing the benefits and final implementation,
c. Know the benefits to the patients and its extent.

MATERIALS AND METHODS

This is a 2250 bedded tertiary care public hospital in Mumbai which caters to 22 million population having 20,77,146 OPD attendees and 84,251 admissions annually from all over India [8]. The hospital has 38 medical/paramedical departments including specialties and super-specialties. Permission for waiver of review by Institutional Ethics committee of the hospital was sought before initiating this study. As per the administrative records, the heads of departments receiving CSR support during the year 2017-2018 were contacted and details of these activities were recorded in the questionnaire. The details recorded were list of companies providing these initiatives, number of years associated with the department, items provided, mode of routing the funding/ equipment/ consumables (NGO or Companies own CSR committee), procedure followed, the waiting period and the outcome/ effectiveness of these initiatives.

The CSR activities going on in the hospital were divided into three categories:

1. One-time supply of consumables e.g. drugs, vaccines etc.
2. Creation of infrastructure – This may be supply of equipment and/or civil & structural remodelling for a particular service/ department.
3. Regular maintenance and servicing of facilities provided.

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RESULTS

In the year 2017-2018, nine departments had received support through CSR initiatives. These are: Paediatrics, Cardiology, Paediatric Surgery, Paediatric anaesthesia, Neonatology, Haematology, Gastrointestinal surgery, Radiology and the Medical Social worker department.

The companies providing these initiatives included: Thyssenkrupp Industrial Solutions (India) Private Limited, SIS Imports, Tata Trusts, Mazgaon Dock Shipbuilders ltd., NATCO Pharma, Hindustan Construction Company (HCC), Bharat Petroleum Corporation Ltd (BPCL), Jindal Steel, India Humes & Pipes Private ltd and Jewelex foundation.

The details of the activities initiated in the nine departments listed above, the routing of these initiatives, the efficiency and effectiveness/outcome of these initiatives and the extent benefits received by the patients are summarised in the following two tables, Table. 1 & Table 2.

The difficulties faced during the process of receiving the CSR support and the final implementations by the departments were:

1. Knowledge of formal procedure for implementation of CSR was lacking in many of the departments,
2. No particular staff/department available to carry out the procedure of CSR activities,
3. No guidelines available regarding accepting donations as part of CSR initiatives.
4. Time taken from initiation to final implementation took very long i.e. from 4 months to at least a year.

Table 1: Corporate Social Responsibility activities undertaken in various departments.

<table>
<thead>
<tr>
<th>Department providing CSR</th>
<th>Paediatrics</th>
<th>Cardiology</th>
<th>Paediatric surgery</th>
<th>Paediatric anaesthesia</th>
<th>Neonatology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thyssenkrupp Industrial Solutions(I) Pvt.ltd. (TKIS) SIS imports</td>
<td></td>
<td></td>
<td>Tata group</td>
<td>Tata group</td>
<td>Mazagaon Dock Shipbuilder’s ltd.</td>
</tr>
<tr>
<td>Tata group (own trust of company)</td>
<td>Tata trusts (own trust of company)</td>
<td>CSR cell of MCGM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotary club, Mahim Navjyot Sewabhavi Sansthan</td>
<td>Rotary club, Mahim</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of initiative</td>
<td>Category 1</td>
<td>Category 1</td>
<td>Category 1</td>
<td>Category 1</td>
<td>Category 2</td>
</tr>
<tr>
<td>Items provided</td>
<td>TKIS: Syringe infusion pumps, Neonatal ventilators, Multipara monitors, SIS imports: Multipara monitors</td>
<td>2D Echocardiography machine, ETO sterilizer</td>
<td>3 D laparoscope</td>
<td>14 critical equipment provided (viz. Paediatric fiberscope, video bronchoscope, Video laryngoscope, Baby warmers)</td>
<td>Renovation of NICU, 23 critical equipment provided</td>
</tr>
<tr>
<td>Cost of the CSR (Rs)</td>
<td>TKIS-53,64,040 SIS-10,60,900</td>
<td>50 lakhs</td>
<td>1.2 crores</td>
<td>1 crore 79 lakhs</td>
<td>3 crores 72 lakhs</td>
</tr>
</tbody>
</table>
Efficiency

| Efficiency | Less time for sanction & implementation
No wastage of time for staff as procedures done by company
Cost of equipment lesser (25-30%)
Good quality of equipment
Nurse: patient ratio not adequate |
|------------|----------------------------------------------------------------------------------|
| Less time for sanction & implementation
No wastage of time for staff as procedures done by company
Cost of equipment lesser (25-30%)
Good quality of equipment |
| Less time for sanction & implementation
No wastage of time for staff as procedures done by company
Cost of equipment lesser (25-30%)
Good quality of equipment |
| Less time for sanction & implementation
No wastage of time for staff as procedures done by company
Cost of equipment lesser (25-30%)
Good quality of equipment |

Outcome/ Benefits

| Outcome/ Benefits | 20% more patients can be ventilated.
More ICU like facilities
No sharing of equipment, so less chances of cross infection. |
|--------------------|----------------------------------------------------------------------------------|
| 2 D Echo: 1.5 times greater number of patients can be tested.
Appointment time for patients reduced by half time saving, decision making faster, better patient survival. |
| 5% more patients operated. Complicated cases accepted too with good outcomes.
Complications during surgery reduced. Better training of postgraduate students |
| Number of beds increased from 37 to 42.
Ward cleaner, more comfortable for patients and staff.
Better services as adequate equipment available.
No patient turned back. |

<table>
<thead>
<tr>
<th>No. of patients benefited</th>
<th>442 patients admitted to ICU in a year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 D Echo – 7844 patients in a year</td>
<td></td>
</tr>
<tr>
<td>67 patients in 1.5 years</td>
<td></td>
</tr>
<tr>
<td>5% more babies operated</td>
<td></td>
</tr>
<tr>
<td>1108 surgeries in a year</td>
<td></td>
</tr>
<tr>
<td>1689 patients in a year</td>
<td></td>
</tr>
</tbody>
</table>

Table 2: Corporate Social Responsibility activities undertaken in various departments (continued):

<table>
<thead>
<tr>
<th>Department providing CSR</th>
<th>Company providing CSR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haematology</td>
<td>NATCO, Hyderabad</td>
</tr>
<tr>
<td>Gastroenterology surgery</td>
<td>Hindustan Construction</td>
</tr>
<tr>
<td>Radiology</td>
<td>BPCL</td>
</tr>
</tbody>
</table>
| Medical Social Worker dept | 1.Indian Humes and Pipes Pvt. Ltd
2.Jindal steel
3.Various Diamond merchants |

<table>
<thead>
<tr>
<th>Routed through (Company’s own trust)</th>
<th>NATCO trust</th>
</tr>
</thead>
<tbody>
<tr>
<td>Navrottam Sukhseria Trust</td>
<td>Company’s CSR dept</td>
</tr>
</tbody>
</table>
|                                    | 1.Pramilaben Mehta Charitable trust (PMC)
2.Jindal foundation
3.Jewelex foundation |

<table>
<thead>
<tr>
<th>Type of initiative</th>
<th>Category 2 &amp; Category 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category 3</td>
<td>Category 3</td>
</tr>
</tbody>
</table>
| 1.Category 1
2.Category 3
3.Category 1 |

| Items provided | Set up of new Day care ward
Ward furniture
Laminar flow
Children’s play area
Staff pay for 2 years |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding for 10 liver transplant surgeries</td>
<td></td>
</tr>
</tbody>
</table>
Funding for 10 immunosuppression cases for transplant |
| 1000 MRI made free for patients (paid by company) |
| 1. PMC trust
a. State of the art Effigia ECG machines
b. Temporary pacemaker machine
2. Jindal Trust Funding for Congenital Heart surgeries
1. Jewelex |

**DISCUSSION**

This is one of the largest public hospitals which receives CSR grants in various departments of the hospital. Provision of vital equipment have helped the Paediatrics department to increase its capacity to take care of more number of critical children in a more effective manner. The long-term warranty and annual maintenance contract provision made the system sustainable as an equipment in regular use may go through minor faults and damages due to which they may get out of use till repair thus causing the activity to come to a standstill. The 2D Echo machine provided to cardiology department was very helpful as patients cannot afford expensive testing in private hospitals. Early availability of 2D Echo reports will help in speeding up the treatment decisions of the patients resulting in better survival rates.

The ETO sterilizer that was provided was an upgraded version of the one in use earlier which requires less time for processing as well as quality is assured with better electronic logs provided in the machine. Due to the availability of the 3D laparoscope in the paediatric surgery department, surgeries on very young babies became simpler and those complicated cases which were turned away earlier have also begun to be admitted and operated with better outcomes. The funding provided to the Neonatology department led to...
a better, cleaner, comfortable renovated ward for the neonates with increase in bed capacity by five beds (total 42 beds at present). Provision of a complete day care ward for Haematology was a very good addition to the hospital as it provided better treatment for patients coming for chemotherapy or for other haematological disorders and didn’t need to be admitted. Treatment is free for all patients so more patients have been able to avail this facility. Liver transplant surgery which is very expensive outside in private set-ups is much cheaper now.

Making MRI scans free for the deserving poor patients is commendable. The procedure adapted is also quite very sensible by providing the support in instalments over a period of time so that this support is there for a longer time making it a sustainable activity. The procedure here was easy and though a lot of paperwork was involved, it but got sanctioned in 6 months.

As seen from the above, companies have tried to provide facilities which are very important in any medical set up. This has helped approximately 84,251 patients who have benefited directly and, in many cases, survived because of help from the corporate sector. The provision of vital equipment like 3D laparoscopy in paediatric surgery, 2D echocardiography machine in Cardiology, other vital equipment in paediatrics, paediatric anaesthesia and neonatology have helped in reducing the waiting time for procedures and investigations in patients which sometimes goes up to a month or more in public hospitals. The annual OPD load of a government hospital is very high (20,77,146 patients annually in this case) who have to spend hours in the overcrowded government hospitals waiting for their turn either for consultation or laboratory investigations or for surgeries. Providing a comfortable seating atmosphere helps a lot in alleviating the pain and discomfort to a patient who is already ravaged by sickness and disease. By providing benches, this aspect has been addressed.

In gastroenterology surgery department, the company helped in setting up liver transplant service and supported it for the initial two years after which the hospital administration took over. Here the benefit to the hospital was that initial difficulties faced in setting up of a particular service along with the high financial burden was taken care of by CSR after which it was easy for the department to run the service efficiently. This would be a typical model for providing CSR by handholding in the initial stages of set up, thus making the maximum use of the support provided.

There have been various hurdles which were faced by both the stakeholders, i.e. the company and the departments involved in finally implementing the activity. This was due to mainly due to procedures not being in place or lack of awareness of the route of implementation, delay in clearing the paperwork and administrative procedures. Framing of clear guidelines regarding the process would be very helpful in the future. A special CSR department set up by the hospital would help in streamlining the process for improved efficiency. This could be made mandatory by the government.

Recently, companies have been focussing significantly on healthcare. In 2012-13, a major part of CSR activities being carried out by different industries was in the health sector [6]. The maximum expenditure on health is by the automobile industry (40%), iron and steel industry (35.3%), pharmaceutical industry (30%), consumer durables industry (24.8%) and oil and gas industry (23.5%). But the average expenditure on health altogether by these companies is a mere 22-24% of their total CSR spends which is not adequate[6]. Much of this spending is focused on health camps[8]. These camps tend to have short-term goals. Setting up and running of hospitals are often poorly targeted which should be looked into[5,9,11] 74% of companies are focussing on healthcare as part of CSR and 68% of this is in the form of providing infrastructure and equipment support to healthcare services[5].

In the present study, 7 out of 12 companies carried out their CSR through NGOs (58.3%), 3 had their own trust (25%), one had its own CSR department (8.3%) and one was through the hospitals own CSR department (8.3%). Studies have indicated that 30% of companies collaborate with NGO’s to carry out their activities[5]. Many companies have set up their own foundations to implement their CSR activities though at present it is not mandatory[5]. Under the CSR rules, the company can facilitate the implementation of its CSR activities through a trust, society, or a non-profit organization [5].

Partnerships with other companies could help in supporting cost-intensive social initiatives, increasing the reach of CSR projects and ensuring its long-term sustainability. Only 28% of the companies have established partnerships with other companies for CSR activities[6]. Strategic planning is needed to develop collaboration between companies[5].

Partnership with local and state governments is another important factor that will help in better utilization of resources. Partnerships and support to the government helps in strengthening ongoing social programs and ensure long-term sustainability [9]. 46% of companies have established partnerships and support programs or schemes of local or state government through CSR. This support is mainly in terms of improving infrastructure, providing equipment, educational material and other supplies to government programme[5]. This support should help in complementing the efforts that are already on in various fields as well and those fields which not addressed yet.

Some important findings needing to be addressed on an urgent basis, are presented here. Most of the departments were short staffed in all categories, so a CSR plan should look first at strengthening the staff structure; be it the housekeeping staff for better hygienic environment, nursing staff for better patient care or the consultants. As per literature, nurse to patient ratio in ICU’s should be 1:1 to maximum 1:2 and in the ward it should ideally be 1:4 in the morning and afternoon shifts and 1:7 on night shifts[10,11]. But this is not so in most public hospitals. Suggestions given by clinicians included trainings and workshops in newer techniques which should be arranged for them so that better and advanced services can be provided to the patients. This could also act as an incentive to retain good and experienced consultants and prevent their exit from a government set up to a private one.

Many other areas of health are still to be addressed by CSR which includes geriatric health which has become a major issue due to the increased number of ageing population, cancer diagnosis and treatment, cardiac diseases, mental health, malnutrition and preventive health.[3] Security in
hospitals is a major concern with cases of child thefts and increased attacks on doctors, this could also be the area that could be addressed. Most of the wards and ICU’s in the hospital are short of beds and space as a government hospital cannot deny services to any patient who comes to its doorstep. These should be increased by provision of space for expansion.

Companies could also adopt particular areas of the hospital or complete departments and provide a continuous ongoing support in terms of manpower, consumables, servicing & maintenance of equipment and this should be an ongoing process.

For a good CSR practice, a long-term (three to five years) vision should be planned and strategy reviewed annually and the activities and budgets should be planned by the company on an annual basis[9]. Sustainability reporting and disclosure are also mandatory requirements of the government[5]. The Companies Act, 2013 through its disclose-or-explain mandate, has been promoting greater transparency and disclosure[6].

CONCLUSION

In all nine departments benefitted from CSR activities provided to this public hospital. The difficulties faced were mainly related to there being an unavailability of clear guidelines for implementation of CSR, no formal knowledge of the procedure and undue prolonged delay in carrying out the procedure. A vast number of patients were benefitted by these activities and the waiting time for procedures was greatly reduced leading to decreased morbidity.

Since it has become mandatory for large companies to invest in CSR, many of these organizations have started funding CSR activities in the healthcare sector of which public hospitals are also beneficiaries. Providing CSR support at the time of starting a new service and handholding in the initial 2-3 years of service would be a very good model of providing CSR for the benefit of patients as well as allowing companies to fulfill their social obligations in a fruitful way. Companies should look into providing a continuous collaboration between themselves, government bodies and other stakeholders to provide a sustainable effort for the benefit of society.

In addition to the above areas of concern, other areas which need support but are not addressed are medical care for the elderly, mental health, malnutrition, preventive health, security and housekeeping facilities. Providing CSR to public hospitals will have the maximum benefit for the poorer sections of the community who otherwise cannot afford the private hospitals.

Competing interest: The authors declare that they have no competing interests.

REFERENCES


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