

The Role of Government Hospitals in the Treatment of Poor Patients: A Sociological Study

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ABSTRACT

The history of hospitals began in ancient Greece, the Roman Empire, and the Indian subcontinent with hospitals, beginning with precursors in the Asclepian temples of ancient Greece and later the military hospitals of ancient Rome. Greek temples were dedicated to the sick and infirm but did not resemble modern hospitals. The Romans did not have dedicated, public hospitals. Public hospitals, in turn, did not exist until the Christian period. St Bartholomew's Hospital in West Smithfield, London, founded in 1123, is considered the oldest functioning hospital today. St Bartholomew's in London was rebuilt in 1730 and the London Hospital opened in 1752. These hospitals represented a turning point in the functioning of the institution; they began to evolve from basic places of patient care into centres of medical innovation and discovery, and became important places for the education and training of prospective doctors.

Key Words: *Asclepian, Dispensary, Surgical, Nursing, Medicine, Paramedical, Rehabilitation, geriatric*

INTRODUCTION:

A hospital is a healthcare institution that provides patient care with specialized health sciences and allied health personnel and medical equipment. The most well-known type of hospital is the general hospital, which usually has an emergency department to treat urgent health problems, ranging from fire and accident victims to sudden illness. A district hospital is typically the main health care facility in its area. It has many beds and extra beds for patients requiring long-term care. India's oldest government hospital, Raju Gandhi Government Hospital, is located in Chennai. It is the first modern Indian hospital and was established in 1964. Its founder was Sir Edward Winter. The largest government hospital, Ahmedabad Civil Hospital, is located in Asia.

HISTORICAL BACKGROUND

The history of hospitals began in ancient Greece, the Roman Empire, and the Indian subcontinent with hospitals, beginning with precursors in the Asclepian temples of ancient Greece and later the military hospitals of ancient Rome. Greek temples were dedicated to the sick and infirm but did not resemble modern hospitals. The Romans did not have dedicated, public hospitals. Public hospitals, in turn, did not exist until the Christian period. St Bartholomew's Hospital in West Smithfield, London, founded in 1123, is considered the oldest functioning hospital today. St Bartholomew's in London was rebuilt in 1730 and the London Hospital opened in 1752. These hospitals represented a turning point in the functioning of the institution; they began to evolve from basic places of patient care into centres of medical innovation and discovery, and became important places for the education and training of prospective doctors. Patient care. Another Enlightenment Age charitable innovation was the dispensary, which provided free medicines to the poor. The London Dispensary opened its doors in 1696, the first such clinic in the British Empire. The idea took off slowly until the 1770s, when several institutions began to appear, including the Public Dispensary of Edinburgh (1776), the Metropolitan Dispensary and Charitable Fund (1779), and the Finsbury Dispensary (1780). Dispensaries opened in New York in 1771, Philadelphia in 1786, and Boston in 1796.

MEANING AND DEFINITION OF GOVERNMENT HOSPITAL

An institution that provides medical or surgical care to the needy, elderly, infirm, or young, sick, or injured. A hospital is a health care facility that provides specialized medical and nursing care and medical supplies to patients. The most well-known form of hospital is the general hospital, which usually carries an emergency department to handle urgent health problems such as fire and accident victims and medical emergencies.

DEFINITIONS

According to Johnson “Other categories that continue to outpace the overall inflation rate include food, electricity, and hospital and outpatient medical services.” According to the definition of a government hospital, a district hospital is typically a primary healthcare facility in an area, with a large number of intensive care beds and additional beds for patients requiring long-term care. Trauma centers, children's hospitals, rehabilitation hospitals, hospitals, and senior (geriatric) hospitals are examples of specialized hospitals that handle specific medical conditions, such as psychiatric care, and several other disease categories. In contrast to general hospitals, specialized hospitals help save money on healthcare. Based on the source of revenue, hospitals are classified as general, specialized, or government.

DEPARTMENTS IN HOSPITAL

The following are the department working in government hospitals at Hukkeri. They are as follows:

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| ➤ Outpatient Department (OPD), | ➤ Pharmacy Department, |
| ➤ Surgical Department, Inpatient Service (IP), | ➤ Operation Theatre Complex (OT), |
| ➤ Nursing Department, | ➤ Radiology Department (X-ray) |
| ➤ Physical Medicine, | ➤ Non-Professional Services are some of the |
| ➤ Paramedical Department, and | departments present in hospitals. |
| ➤ Rehabilitation Department, Dietetic | |
- Department,

SERVICES FROM THE HOSPITALS

The following services are available in Government Hospital located at Hukkeri of Belgaum District.

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|------------------------------|---|
| • Emergency room services | • General and specialized surgical services |
| • Short-term hospitalization | • Blood services |
| • X-ray/radiology services | • Laboratory services |

Healthcare organization hospitals supplement the basic list with a variety of specialized and ancillary services, including:

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| • Pediatric specialty care | • Nutritional counseling |
| • Prescription services | • Genetic testing and counseling |
| • Better access to surgical specialists | • Family support services |
| • Rehabilitation services and physical therapy | • Financial services |
| • Home nursing services | • Case management or social work services |
| • Mental health care | |

FUNCTIONS OF GOVERNMENT HOSPITAL

The following are the functions of Government Hospital as per the directions depicted by Medical Board

- Medical Hospital - A medical hospital involves the treatment and management of patients by a team of physicians.
- Patient support provides nursing, nutritional diagnostics, counseling, pharmacy, and medical supplies, all of which are directly related to patient care.

- Administrative responsibilities include maintaining hospital guidelines and directives that govern the delivery of support services in the areas of finance, personnel, housekeeping, materials and property, laundry, security, transportation, engineering and board and several other management areas.
- Plan, guide and coordinate the financial activities of the hospital
- Prepare employment and financial plans for services and initiatives, as well as funding projections.
- Track cash receipts and disbursements.
- Maintain staff development plans, procedures, and standards; provide guidance on policy, implementation, and administration of laws, rules, and regulations.

TYPES OF BEDS IN HOSPITALS

The following types of beds facilities available in Government Hospitals of Hukkeri in Belgaum district

01) Simple beds: • Closed bed • Open bed • Occupied bed	02) Special beds: - Operation bed • Cardiac bed • Blanket bed • Amputation bed - Fracture bed
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TYPES OF HOSPITALS

Hospitals are usually subsidized by the government, non-profit or for-profit health agencies, health insurance providers, or charities such as direct charitable donations. Based on funding, hospitals can be classified into one of three groups. 01) Publicly Owned Hospital 02) Non-Profit Hospitals 03) For-Profit Hospitals

Hospitals are required by law to treat patients in life-threatening emergencies regardless of their financial ability to pay. Privately operated hospitals that accept people without insurance in emergencies, including after Hurricane Katrina, suffer significant revenue losses.

ICU- Intensive Care Unit

OPD- Out Patient Department

HCU- High Care Unit

CMO- Chief Medical Officer

ICCU- Intensive Coronary Care Unit

ROLE OF CHIEF MEDICAL OFFICER:

Chief Medical Officer is a senior government servant who heads the medical department of a government hospital. This post is held by a senior doctor who acts as a consultant and directs and supervises a group of medical specialists, doctors and examines public health problems. For government hospitals, the CMO holds the top position in the medical staffing system. There are many different definitions of the CMO position in different countries. By definition, Chief Medical Officer is usually used as a job description for a physician who is the qualified head of all the doctors in a hospital.

Importance/Importance of Hospitals: Hospitals are essential for providing healthcare services to people in need. These facilities are equipped with advanced medical technologies and equipment, enabling medical professionals to provide high-quality medical care to patients. Hospitals provide a wide range of medical services, including emergency care, diagnostic testing, surgery, and long-term care. Health promotion has become prevalent at the local, national, and international levels over the past decade and is now part of the global health initiatives endorsed by the World Health Organization.

MEANING AND DEFINITION OF HEALTH

According to Bandley “Health is the study of health and illness in terms of social and physical conditions, which provides a critical perspective on the medical profession.”

According to the World Health Organization “Health is a state of complete physical, mental, and social well-being.”

According to Webster’s Dictionary, “Health is a state of complete physical, mental, and social well-being.”

Review of Literature

Dr. Amit Kumar (2018) "Patient Attitude towards Government Hospital: A Study of Sirsa General Hospital", The facilities provided by private or government hospitals play a crucial role in the good health of the citizens of the country. The objective of this article is to find out the attitude of patients towards the facilities provided in government hospitals. This study is exploratory and descriptive. Primary data was collected from General Hospital. For descriptive statistical analysis of data t test was applied to compare two or more variables. After analysis of data the result shows that there is less possibility of improvement in any of the facilities. This study will benefit the state government. It will help to enrich the facilities provided by the civil hospital.

Ranjita Kumari (2009) "A Study on Patient Satisfaction in Government Allopathic Health Facilities in Lucknow District, India" The outcome of any disease is influenced by decisions to seek care, timely access to appropriate diagnostic and treatment services, and receipt of adequate care from service providers. Satisfaction with service delivery is increasingly being used as a measure of health system performance. Satisfaction manifests itself in the delivery, access, and utilization of health services. Objectives: To determine the areas and causes of low satisfaction among patients and suggest ways for improvement. Multi-stage stratified random sampling was used to select government allopathic healthcare facilities in Lucknow district and a systematic random sample was used to select patients for interview.

Vikas Bajpai (2014) "Challenges Facing Public Hospitals in India, Their Sources and Possible Solutions", Despite the implementation of the National Rural Health Mission over a period of nine years since 2005, the public health system in the country is facing extraordinary challenges. In the context of plans to roll out "Universal Health Care" in the country, this paper analyses the social, economic and political sources of the major challenges faced by public hospitals in India. The perspective taken here is that the class nature of the country's ruling classes and the development model they are following are at the root of the current problems facing public hospitals. The solutions suggested are in line with these realities. Higher-level institutions should cater to more selective patients who require more specialized services that are not available in lower-level public health.

THE PROBLEM

The Problem:

The Research Problem of the present study constitutes, "**The Role of Government Hospitals in the treatment of Poor Patients**": A Sociological Study of Government Hospital". Majority of the population in rural area depended on Agriculture for their livelihood. These rural population has been depended on Government Hospitals for their illness. The socio-economic condition of rural population is poor and they are unable to spend the money for private medical hospital. The pay structure of government hospital is too cheap and well qualified medical officers are available. It is quite difficulty to get the service of different medical professionals. Therefore, some patients are not willing to take the treatment in government because of non-availability of doctors. Those who are economically sound they are taking the treatment in private hospitals. Taking all this into consideration, the above mentioned problem is selected for research study.

SIGNIFICANCE OF THE STUDY

This study has a greater significance in health sectors, because the facilities available in government is little poor. The drastic problem in the government hospitals are the availability of different professionals. The department like ortho, optho, neurologists doesn't have the specialists in these fields. Therefore, the majority of the people will go to hospitals at the city level during serious issues. These issues help the government to provide necessary infrastructure amenities to the hospitals and recruits the new doctors for fulfilling the demands of public and also rest of the facilities. Taking this into consideration, Government will improve the socio-economic condition.

OBJECTIVES OF THE STUDY

The following are the objectives for present study:

- To understand the socio-economic problems of poor patients
- To understand the environment and treatment facilities of government hospitals

Hypothesis

- Poor patients are deprived of medical facilities
- Poor patients are not getting information about government facilities
- Doctor-patient relationship is good

Background of Study Area

Hukkeri is a taluk and the administrative headquarters of the taluk in Belgaum district of the state of Andhra Pradesh. It is surrounded by Chikkodi taluks in the north, Gokak taluks in the east, Belgaum taluks in the south and Maharashtra state in the west and a small part of the south. It has two towns and a total of 119 villages. The area of the taluk is 992.0 sq km. The population is 3,57,127. Many branches of the Sahyadri range spread in the taluk. These are also called the Ghataprabha ranges. The Ghataprabha is the main river of the taluk. This river reaches the southern edge of the taluk near Shettihalli and flows eastwards and forms the boundary of the taluk for a short distance. It then separates Maharashtra and Belgaum taluks and then flows northeastwards in this taluk and then separates Gokak taluk for a short distance and then enters Gokak taluk. Markandeya and Hiranyakeshi are tributaries of Ghataprabha. A large dam has been built on Ghataprabha river near Hidkallu to facilitate irrigation. The average annual rainfall of the taluk is 808.19 mm.

Photo of Hukkeri Taluka Hospital



Methodology:

An interview schedule was prepared to collect research information from the informants and information was collected from the informants.

Sample Selection:

The Hukkeri Taluk Hospital of Hukkeri Taluk of Belagavi district was selected and 30 poor patients coming to the taluk hospital were selected through simple random sampling.

Data Collection Methods: Information was collected through primary data and secondary data 01) Primary Data The primary data researcher prepared an interview schedule and personally met the informants face to face and collected information through interviews. 02) Secondary Data Secondary data is information collected from files maintained by the hospitals, books, newspapers, magazines, and other secondary sources.

Table 1: Distribution of Class using the Hospital Services

Sl No.	Particulars	Frequency	Percentage
01	SC	12	40%
02	ST	07	23.33%
03	OBC	10	33.33%

04	GM	01	3.33%
	Total	30	100

Table 1 reveals the fact about the class-wise using the services of the hospitals. Out of all the respondents, more than 60 percent of the respondents belongs to downtrodden class (SC&ST) who are fully depend on the Government Hospital for their health issues, whereas 33 percent of Other Backward Community takes the benefit of Government Hospitals and rest of the percentage belongs to General Category. The overall picture of the table indicates that, downtrodden and poor families are entirely depended on the Government Hospital services for their medical treatment.

Table 2: Educational Status of Respondents

Sl No.	Particulars	Frequency	Percentage
1	Illiterate	13	43.33
2	Primary	6	20.00
3	High School	5	16.66
4	PUC	2	6.67
5	Graduation	2	6.67
6	Others	2	6.67
	Total	30	100.00

Table 2 enunciates about the educational status of the respondents who visited to the hospitals. More than 50 of the respondents are educated and whereas the illiterates are around 43 percent. The table can be concluded that, the educated respndents are more to have the service of Government Hospitals.

Table 3: Occupation of the Respondents

Sl No.	Particulars	Frequency	Percentage
1	Agriculture	10	33.33
2	Buisness	08	26.67
3	Labours	12	40.00
	Total	30	100.00

The occupation of the respondents who visited to hospitals are analysed in the table 3. More than 70 percent of the respondents had the occupation of agriculture and labour working in different sectors are taking the benefits of Government Hospitals, whereas around 27 percent of the respndents are in business. The above table can be concluded that, the majority of the members of society involved in business are taking the service of private medical hospitals for their health issues.

Table 4: Annual Income of the Respondents

Sl No.	Particulars	Frequency	Percentage
1	50,000 to 1,00,000	22	73.33
2	1,00,000 to 1,50,000	06	20.00
3	1,50,000 to 2,00,000	01	3.33
4	More than 2,00,000	01	3.33
	Total	30	100.00

The annual income of the respondents visited to government hospitals have been analysed in table 4. Majority of the respondents (73.33) annual income ranging between 50000 to 100000, whereas 20 percent of the respondents ranging between 100000 to 150000. Rest of the percentage of respondents income is more than 150000. The above table gives clear picture that the respondents belongs to below poverty line are using the services of government hospitals.

Table 5: Number of days admitted to hospitals

Sl No.	Particulars	Frequency	Percentage
1	1 day	12	40.00
2	2 days	08	26.67
3	3 days	06	20.00
4	More than 4 days	04	13.33
	Total	30	100.00

Table 5 illustrates about the total number of days admitted by the patients in government hospitals. Out of all the respondents, 40 percentage of the respondents opined that, the patients admitted to the hospitals for only one day, whereas 26.67 percentage of the respondents admitted to hospitals for 2-3 days and around 13.33 percentage of the respondents admitted to hospitals for more than 4 days. The overall picture of the table indicates that, more than 80 percent of the patients admitted for shorty days and this shows that the patients are treated well and make discharge at the earliest and facilitating for new patients.

Table 6: Supply of free medicine

Sl No.	Particulars	Frequency	Percentage
	Yes	2	3.33
	No	08	26.67
	Total	10	30.00

Table 6 analysed about the supply of free medicine in the government hospital. Majority of the respondents (73.33 percent) agreed that the supply of free medicine in the government hospital, whereas 26.67 of the respondent didn't agreed for the supply of free medicine for patients and they prescribed that the prescription written by the doctors are not available in the hospitals, therefore they purchased these medicines outside the hospitals by paying money.

Table 7: Nature of Diseases among the patients

Sl No.	Particulars	Frequency	Percentage
1	Dengue	3	1.00
2	Typhoid	16	53.33
3	Vomitting	04	13.33
4	Other	10	32.34
	Total	30	100.00

Table 7 constitutes about the nature of diseases in Hukkeri town. The staff government hospital have conducted IEC programmes regarding the cation of cholera and malaria among the members of the society. Out of 30 respondents, 53.33 percent of ther respondents expressed that the typhoid patients are more compared to the rest of the diseases. Th, the statistical figure of the above table indicates that the serious diseases very less except dengue. They are taking care of conducting the awareness programme during monsoon season among the members of society in Hukkeri Taluka.

Table 8: Facilities available in the Hosptial

Sl No.	Particulars	Frequency	Percentage
01	X-Ray	15	50.00
02	Blood Testing	03	10.00
03	ECG	07	23.33
04	Others	05	16.66
	Total	30	100.00

The above table indicates about the information pertaining to the facilities available. Out of all the respondents, 50 percent of the respondent opined that, the hospital had the facility f X-Ray, 23.33 percentage state that the facility of ECG is available. The availability of bood test is about 10 percentage. Around 16 ercentage of the respondents expressed that the other facilities such as machine of dialysis, ICU and machines related to cardiac arrest. The overall picture of the able table indicates that essential facilities for emergency is available in the government facilities.

Table 9: Other Facilities

Sl No.	Particulars	Frequency	Percentage
1	Beds	30	100.00
2	General ward	30	100.00
3	Special Ward	00	00
4	VIP ward	00	00
5	24x7 Emergency Services	03	10.00
6	Trained Doctors	05	16.67
7	Trained Nurses	06	20.00
8	Dressing Room	00	00
9	Observation Room	00	00

SI No.	Particulars	Frequency	Percentage
10	Medical Shop Room	30	100.00
11	Room for Nurses	08	26.66
12	Ambulance	30	100.00
13	Security	00	00
14	Others	02	6.66

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Table 10: Facilities of Bath Rooms in the Hospital

SI No.	Particulars	Frequency	Percentage
1	Good	08	26.67
2	Average	08	26.67
3	Poor	14	46.66
	Total	30	100.00

Table 10 enunciates about the facility of bath room in the hospitals. Out of all the respondents, 26.67 percentage of the respondents opined that the condition of bath rooms is good and average, whereas 46.66 respondents stated that the condition of bath room is too poor. This table can be concluding that more than 70 percent of the respondents stated the condition of bath room is too poor and average.

Table 11: Facility of Drinking Water

SI No.	Particulars	Frequency	Percentage
1	Good	08	26.67
2	Average	14	46.66
3	Poor	08	26.67
	Total	30	100.00

The drinking water facility in the hospital as been analysed in the table 11. More than 25 percent of the respondents opined that, the quality of drinking water facility in the hospital is good, whereas the percentage of average poor is too high. The overall picture of the above table indicates that more than 70 percentage of the respondents are not happy with the quality of drinking water facility in the hospital.

Table 12: Telephone facility

SI No.	Particulars	Frequency	Percentage
1	Good	03	10.00
2	Average	19	63.33

3	Poor	08	26.67
	Total	30	100.00

Table 12 illustrates about the availability of facility of telephone in the hospital. 10 percentages of the respondents opined that the telephone facility is in good condition, whereas around 90 percent stated that the facility of mobile is average and poor. The above table can be concluded that, the majority of the respondents are not dependent on telephone because of mobile.

Table 13: Facility of Security

Sl No.	Particulars	Frequency	Percentage
1	Good	06	20.00
2	Average	2	6.67
3	Poor	22	73.33
	Total	30	100.00

Table 13 expresses about the facility of security in the hospital. 80 percent of the respondents stated that, the security facility is average and poor. The overall picture of the above table indicates that, there will be an issue of security in the government hospitals.

Table 14: Availability of Wash Room Facility

Sl No.	Particulars	Frequency	Percentage
	Good	02	6.67
	Average	06	20.00
	Poor	22	73.33
	Total	30	100.00

The availability of wash room facility in the hospital has been analysed in the table 14. Majority of the respondents opined about the facility of wash room in the hospital is too poor, whereas around 20 percent is average and only a few percent of the respondents opined that the condition of wash room is good. The above table gives a clear picture that the poor condition of wash room facility in the hospital.

Table 15: Nursing facility

Sl No.	Particulars	Frequency	Percentage
1	Good	12	40.00
2	Average	12	40.00
3	Poor	06	20.00
	Total	30	100.00

Table 15 illustrates about the facility of nursing in the hospital. Out of all the respondents, around 40 percent of the respondents stated that the nursing facility is good and taking care of patients on regular mode, whereas the equal percentage of respondents stated that the facility is average and rest of the percentage opined that the facility of nursing is poor.

Table 16: Facility of Medicine

Sl No.	Particulars	Frequency	Percentage
1	Good	12	40.00
2	Average	14	46.67
3	Poor	04	13.33
	Total	30	100.00

Table 16 describes about the availability of facility of medicine in the hospital. More than 60 percent of respondents opined that, the medicine facility in the hospital is average and poor, because all the medicines will not be available in the counter and to be depended on private medical shop. Sometime the prescription of medicine can't be afford in medical shop outside the hospitals because of poor income.

Table 17: Attitude of Nurses

Sl No.	Particulars	Frequency	Percentage
1	Good	05	16.66
2	Average	20	66.67
3	Poor	05	16.66
	Total	30	100.00

Table 17 constitutes about the attitude of nurses during the treatment to patients. Nearly 70 percent of the respondents opined about the behavior of nurses during the treatment is average, whereas 16.66 percent good and same percent is poor. The overall percentage of the respondents stated that service about the nurse is average in percentage is high.

Table 18: Route for reaching the Hospital

Sl No.	Particulars	Frequency	Percentage
1	Easy	08	26.67
2	Not Easy	10	33.33
3	Its not easy to reach during night	12	40.00
	Total	30	100.00

The information pertaining to route for reaching the hospital has been analysed in the Table 18. Out of total respondents, nearly 65 percent of the respondents expressed that, the route for reaching the hospital is not easy task especially during night.

Table 19: Service about Ambulance (108)

Sl No.	Particulars	Frequency	Percentage
1	Yes	25	83.33
2	No	05	16.67
	Total	30	100.00

The above table indicates that the availability of ambulance service in Government Hospital. More than 80 percent of respondents stated that the ambulance service is good and available on time, whereas almost 17 percent respondents did not agree for the service of Ambulance.

FINDINGS

The following are some important findings of Government Hospital in Hukkeri Taluka. They are as follows:

- The economically poor families depended on the Government Hospital for their health issues.
- The educated families are also preferred to take treatment in Government Hospitals, because there is no qualified MBBS doctors are not available in Hukkeri Taluka.
- Majority of members of society in Hukkeri Taluka are taking the treatment in Government Hospitals except business families. These business families are also taking the treatment in Government Hospital for first aid and finally visits to private clinics in nearby cities such as Kolhapur, Miraj and Belagavi.
- The analysis of admitting the patients in government hospital which shows the patients are treated well and discharged at the earliest.
- Good percentage of medicines supply to the patients has been observed.
- The government hospital staff has controlled serious diseases such cholera, malaria and dengue due their awareness programmes organized for the society.
- The hospital is well equipped with labs such as ECG, Blood testing, Dialysis centre and X-ray.
- Majority of the respondents stated about the condition of washroom is too poor and average.
- The facility of nursing in the hukkeri government hospital is poor and average.
- It has been observed that to reach the hospital by the members of society is quite difficult.

SUGGESTIONS:

- The hospital should be easily accessible
- Staff should be appointed
- The building should be made bigger
- More beds should be provided
- Specialist doctors should be appointed
- Bathrooms and toilets should be improved
- Security arrangements should be made
- The Government should take necessary steps to provide all the medicine as per the requirement of Doctors.
- Telephone system should be improved

CONCLUSION:

As healthcare quality becomes an increasingly important issue around the world, hospitals need to pay more serious attention to this issue. Independent external assessment of quality is one of the most powerful ways to assess this aspect of healthcare, and hospital accreditation is one way to achieve this.

In 2011, the World Health Organization reported that hospitalization was more dangerous than flying. Globally, the probability of a patient experiencing a treatment error in a hospital was about 10%, and the probability of death from an error was about one in 300. According to Liam Donaldson. 7% of hospitalized patients in developed countries and

10% in developing countries, acquire at least one healthcare-associated infection. In the US, 1.7 million infections are acquired in the hospital each year, leading to 100,000 deaths, much worse than Europe, where 4.5 million infections and 37,000 deaths occurred.

A hospital is a place where patients are provided with health care and treatment. Specialized medical staff monitor the condition of patients on an ongoing basis. It also provides medical treatment for chronic illnesses. Today, hospitals are mostly privately funded, either through for-profit or non-profit health organizations, health insurance companies or charities, or through direct charitable contributions. Throughout history, hospitals have been funded, established, and maintained by religious institutions, with the help of individuals other than themselves for the benefit of the public. Modern-day hospitals are now staffed by a large number of professionals, including surgeons and nurses. Today, religious organizations, charitable foundations, and volunteer groups establish hospitals.

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