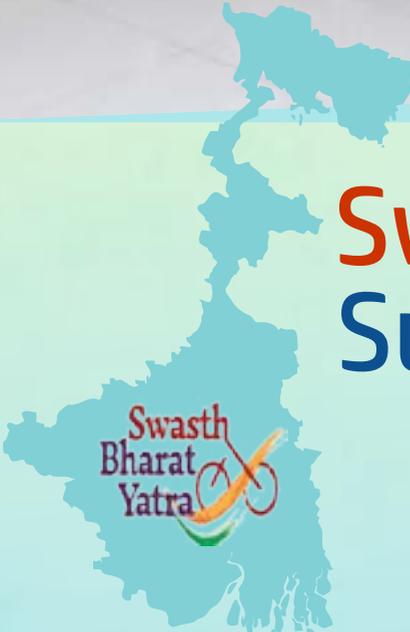




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*A roadmap for long-pending reforms in the
healthcare sector of West Bengal.*

West Bengal's healthcare sector is going through a terrible crisis. Behind the rosy picture painted by Mamata Banerjee through fake numbers and deliberate misinformation lies the grim reality.

With an institutional delivery rate of 75.2% way below the national average and the ruling party claiming 99%, the data discrepancy is too profound and an impediment to proper healthcare planning and implementation. The same was noticed with ever-changing Covid-19 incidence and mortality figures

No wonder Mamata Banerjee gov't's healthcare data is also frowned upon with distrust by the scientific community. Repeated toying with health related data weakens the country's fight against any disease- be it Covid-19 or Dengue or even malnutrition.

Healthcare delivery to the poor served a deadly blow

when in January 2019 Mamata Banerjee stopped the implementation of the Pradhan Mantri Jana Arogya Yojana- Ayushman Bharat in West Bengal. Her widely publicised SwasthyaSathi scheme is a sham with most of the leading multi speciality hospitals of Kolkata not accepting the card. Even the particular hospital Mamata Banerjee or her nephew Abhishek Banerjee goes for own treatment don't accept the card. Even the few private hospitals that are shown to be covered under the card don't accept the card for crucial surgical or medical interventions.

As far as government hospitals are concerned, the condition of majority of these hospitals continue to be pathetic. Inside most of the blue-white painted buildings lies nothing. New buildings under various central government schemes like PMSSY (Pradhan Mantri Swasthya Suraksha Yojana) have come up but most of these super speciality hospitals don't even have adequate number of specialist doctors and even if doctors are posted, they lack infrastructure for most essential medical services and ultimately patients are referred to 2-3 Kolkata-based hospitals from places 500-600 kms away. This is evident from the fact when a young BDO, ChogelMoktan Tamang of Tapan Block in Dakshin Dinajpur district had to die from a road accident on duty while being transported in ambulance to a private trauma care facility, 300 kms away, in absence of a single trauma care centre in

his district.

The minimal faith of people in the government health ecosystem is evident from the fact that every 1 out of 3 patients in Christian Medical College Vellore or Tata Memorial Hospital Mumbai is a resident of West Bengal. As many as 10000 residents of West Bengal had been in Vellore only at the time of announcement Coronavirus lockdown. Similar number of patients were reportedly there in Bangalore and Mumbai. If these numbers are extrapolated, that gives a figure of around half a million people travelling out of West Bengal every year in hope for better treatment.

In light of the above situation, it's very pertinent for us to prepare a detailed roadmap to ensure the people of West Bengal get access to quality health infrastructure within the state itself, at par with global standards.

1. Implementation of Ayushman Bharat in West Bengal along with the rest of India:

The Pradhan Mantri Jana Arogya Yojana (PMJAY)-Ayushman Bharat has been a phenomenal success across the length and breadth of India and has ensured the poorest of the poor have equitable access to best quality healthcare facilities both in the government and private sector. PMJAY is much more comprehensive in its coverage and so implementation of the PMJAY in West Bengal will ensure public access to all

essential clinical procedures and treatment modalities that continue to be uncovered. This will also boost the growth of multi speciality and super speciality healthcare services in various districts of West Bengal that are still deprived of quality healthcare infrastructure.

2. Decentralisation and Equitable Distribution of Healthcare Resources

Right to quality healthcare, both for critical diseases and emergency medical procedures, is as much a right of the people of Dinajpur or Coochbehar or Medinipur as much as that of the people of Kolkata. One of the most important priorities is to decentralise the allotment of healthcare resources and manpower uniformly across the state without any social, political or geographical bias.

3. Fully Equipped, Fully Functional Medical College in Every District

In line with the Government of India's vision to have a medical college and hospital for best quality tertiary care in every district, the West Bengal state government will work overtime to ensure the same holds true for every district of our state within the next five years. These medical colleges will not be just some coloured blocks of brick and mortar, but will be fully equipped and adequately staffed with medical specialists of every discipline delivering quality

treatment and imparting medical education.

4. Increase in Government Hospital General Beds and ICUs

Alongwithdecentralisation of healthcare resources, there has to be simultaneous augmentation of healthcare infrastructure in existing hospitals and medical colleges with increase in number of both general beds and Intensive Care beds. All efforts will be in place to ensure not a single person has to embrace death after being turned away by a hospital citing lack of bed.

5. Increase in Jana AusushadhiKendras for Quality Medicines at Low Rates

Due to narrow political interests of present ruling dispensation in West Bengal, the people of West Bengal have limited access to the Pradhan Mantri BharatiyaJanaushadhiPariyojana (PMBJP) wherein fair price medicine retail outlets are set up across the country for sale of medicines at much lower rates. Interested citizens will be encouraged to set up PMBJP Kendras in each and every rural block, every urban ward to ensure the diseased and the infirm have to spend less on purchase of medicines and still get good quality medicines at the most affordable rates.

6. Increase in Healthcare Spending

In 2019-20, West Bengal government had spent 4.5% of its total budget on health and family welfare. This is lower than healthcare spending by states such as Gujarat (5.3%), Uttar Pradesh (5.1%) or Madhya Pradesh (4.7%). As per the National Health Policy 2017, the states' spending in healthcare has to exceed 8% to meet the 2025 target of increasing India's public health spending to 2.5%. Over the next 5 years, efforts have to be directed to progressively increase our state healthcare spending as per National Health Policy requirements.

7. Implementation of One Nation One Health ID

On India's 73rd Independence Day, Prime Minister Narendra Modi had launched his ambitious One Nation One Health Card project with an aim to integrate and digitize medical health records of India's 1.38 billion population under a central backbone of super servers. This will ensure reduction in unnecessary diagnostic tests and facilitate easy accessibility and seamless delivery of healthcare to every citizen across the country without fear of losing crucial medical records over time. The residents of West Bengal shouldn't be deprived of its revolutionary benefits because of the incumbent government's political narrow-mindedness. If properly implemented, a West Bengal resident if fallen sick while on a business tour of Hyderabad won't have to worry. The doctor treating him in Hyderabad

can easily get access to his medical information by using his health id and treat him accordingly and immediately.

8. Establishment of Manned Trauma Care Centres

Accidents may happen anywhere, anytime. That's luck but what is more unfortunate is if you have to die in an accident because of lack of treatment. In 2019, 5723 people lost their lives only in West Bengal due to road traffic accidents and still we have districts like Uttar Dinajpur, Jhargram, Hooghly, Murshidabad and many more where you don't even have a neurosurgeon to man a trauma care centre. Nurses and paramedics trained in trauma care management are too scarce to find. In line with our vision of a Sustho Bangla, one of our foremost priorities will be the set up and proper functioning of trauma care facilities in each and every district of West Bengal. We can't claim a Sonar Bangla as long as a promising civil services officer has to die without treatment after suffering a road traffic accident.

9. Seamless Implementation of Health Programmes

The Government of India, from time to time, launches or intensifies national health programmes like Janani Suraksha Yojana (JSY), Universal Immunization Programme, Integrated Child Development Services (ICDS), Revised National Tuberculosis Control Programme (RNTCP), National Vector Borne Diseases Control Programme (NVBDCP),

etc as per the health needs of the Indian population. Healthcare, being a state subject, has to be implemented through states in the spirit of cooperative federalism. This requires combined planning, seamless implementation and monitoring of these programmes by both central and state health agencies at various levels for the most optimum benefit. The present ruling dispensation, in its never-ending spirit of oneupmanship, has not been cooperative with the central government implementing agencies which is detrimental to public health. We have to work synergistically and cooperate at various levels to ensure maximum benefit to the target population.

10. Transparency in Government Health Data

State Government data on various healthcare facts, numbers and indicators has to be transparent and driven by ground reality, not political considerations. Denying existence of Dengue cases amidst an ongoing Dengue outbreak or suppressing Covid-19 incidence, mortality figures amidst a raging pandemic is potentially lethal and impedes proper health resource planning and may provoke people to loosen their guard without reason. Healthcare related data for any disease incidence, mortality, specific indicators will be published as per actual, untampered data. This will lead to better healthcare planning, more focused targeting of diseases and organically improved health

parameters of West Bengal.

11. Universal Immunisation Coverage

As per National Family Health Survey (NFHS)-4 data from West Bengal, around 84.4% of children aged between 12-23 months were found to be fully immunised (BCG, Measles and 3 doses each of DPT and Oral Polio). Meticulous planning at the micro-level is required to ensure this figure reaches an effective coverage of 100% so that not a single child of West Bengal has to die or even suffer from a vaccine-preventable disease.

12. Statewide Implementation of App-based 108 Ambulance Service

A patient can survive many life-threatening medical conditions (heart attack, haemorrhage, childbirth complications, etc) if treated within the golden hour that is, the earlier you treat, the more your chances of recovery. In such a situation, a statewide robust network of patient transportation services that is ambulances has to be made available on standby at each and every ward (urban areas)/ panchayat (rural areas) to pick up the patient and ferry him/her to the nearest healthcare facility in the shortest possible time. This can be done through a toll-free emergency dial number 108 supplemented with an app-based real-time location sharing and booking option.

13. Promotion of Maternal Health and Reduction in Maternal Mortality

As per NFHS-4 data, only 21.8% mothers of West Bengal had complete antenatal care including antenatal checkups, neonatal tetanus immunization, Iron and Folic Acid supplementation among others. This is worrisome from the health perspective of both the mother and the child. Efforts have to be in place to ensure each and every mother of our state gets access to complete antenatal care. This can be achieved through health resource mobilisation, public health education and tracking by ASHA workers. It is also noted that the institutional delivery rate in West Bengal is 75.2%. Institutional delivery is crucial to arrest any deterioration of health of the mother and child at the very onset, thereby saving crucial lives. This needs to be increased to 100% through simultaneous improvement of peripheral health infrastructure and mother transport services.

14. Formation of Infectious Disease Committees at District Level:

The human race has many lessons to learn from the Coronavirus pandemic. An epidemic has far-ranging implications like any war and to win a war, battle preparedness is crucial. Proper analysis of health data and

active surveillance can prevent many local outbreaks that may later take the form of a rampaging epidemic. The state government will set up an Infectious Disease Management Committee in every district who will work round the year and meet at regular intervals to identify and arrest local outbreaks of dengue, malaria, influenza and other communicable diseases in the nascent stage and prevent loss of lives and livelihood.

15. Utilisation of AYUSH Power:

West Bengal has a steady number of duly qualified AYUSH graduates and postgraduates passing out every year but their services stay under-utilised. It is shocking to see that Rs 48.17 crores which is more than half the amount of Central grant of Rs.94.9 crores sent to West Bengal via the National AYUSH Mission since 2014 wasn't utilised by West Bengal government. The state government will ensure 100% utilisation of central grant under National AYUSH Mission through better planning and enhancement of healthcare delivery by AYUSH doctors.

16. Dialysis Unit in Every District SubDivision:

Dialysis is a life-saving procedure in patients with acute kidney failure, snakebite poisoning and other life-threatening conditions. Haemodialysis in chronic kidney disease patients requires ferrying of a moribund patient at 3-4 days' intervals

which causes both inconvenience and loss of adherence to treatment if not available nearby. So a dialysis unit in every district subdivision is needed to facilitate urgent access and strict adherence to the procedure for better outcome.

17. Radiotherapy Unit in Every District

Despite an ever-increasing rise in number of cancer patients in every district across West Bengal, radiotherapy facilities are too scarce and centralised in Kolkata and Siliguri besides one each in Bankura and Bardhaman districts. Most patients requiring 1-2 months full course radiotherapy have to leave home and come to city to stay along with his/her near ones at a rented accommodation or even inside hospital campuses over the entire duration of treatment. Often these stays cost the job of the patients' kins for which the suffering continues even after completion of treatment. The state government will encourage and promote setting up of at least one radiotherapy facility in every district to reduce physical inconvenience and financial losses of both the patient and his/her family members.

18. Transparency in Posting and Cessation of Political Interference

One of the major reasons why many promising doctors stay away from West Bengal government health services (WBHS, WBMES, WBPHAS) is excessive political interference

in day-to-day functioning and an opaque transfer/promotion policy guided by political nepotism instead of merit and performance. This has been going on for decades and successive governments of both the Left Front and the TMC have promoted this to serve their own political interests. However, people of West Bengal need more and more medical officers, specialists and super specialists to join the government health services and serve public. Without these doctors, newly painted buildings will gather dust while modern equipments will gather rust. To encourage more and more doctors into the public health services, the state government will come out with a transparent recruitment, posting, transfer and promotion policy to eliminate the need of doctors for political patronage. Conducting some VIP dog's dialysis in a human health facility will not be a precondition to seek promotion or avoid punishment transfers.

19. Skill Development Centres for Training of Healthcare Workers

Healthcare is one sector where there is immense scope for employment generation as there is a huge requirement of skilled healthcare workers for various medical services be it as paramedic in a critical care ambulance or the emergency attendant in a trauma care centre or the person providing home-based supportive care for a patient unable to visit

hospital. Setting up Skill Development Centres in every district for training youth with support of Government of India's Skill India mission can help both ways- delivering last mile care to the patient and at the same time providing jobs to the unemployed.

20. Real Time Display of Hospital Bed Status, Groupwise Blood Product Availability

Getting a proper bed in a government hospital in West Bengal is like lottery. Not a single day passes where we see patients coming from far off places being turned away by hospitals citing lack of beds. Sometimes this is a real issue for which we plan to ramp up the number of beds as mentioned earlier. However there is another middleman/tout nexus at play in many of these hospitals where coughing up few thousands can ensure a bed for the critically ill, albeit under the table. This has to stop. The entire admission process in each and every state government hospital has to be online with real-time data loaded into a common server and accessible from anywhere in the state at the click of a computer or mobile app. Similar issue with blood products has been noted at various times in the government blood banks. Collection, processing and dispatch of blood products has to be online with real-time information of groupwise blood product availability being displayed on the government website and app. Using a dedicated IT

infrastructure will help in establishing greater transparency and put an end to the artificial scarcity of essential beds and blood products.

21. Availability of Anti Snake Venom in Every Health Sub-Centre

As per data provided by the Central Bureau of Health Intelligence, West Bengal records the highest number of deaths due to venomous snake bites. Most of these deaths are of farmers working barefoot in agricultural fields in remote areas. Treatment for any case of snake bite has to be started early for which public health education and easy availability of anti snake venom in every health unit up to the level of a rural health sub-centre has to be ensured. Time is crucial and all efforts have to be in place so that our farmer doesn't have to die due to delay in treatment following a snake bite while harvesting our food.

22. Access to Contaminant-free Drinking Water

Drinking water is one of the essential determinants of good health. Contaminated water is the cause of both communicable diseases like Cholera and non-communicable diseases like cancer (Arsenic-induced). As per WHO, around 1.5 crore residents of west Bengal are likely to be affected by Arsenic contamination in groundwater. In accordance with Prime Minister Narendra Modi's vision, massive efforts

have to be undertaken to facilitate access to safe and clean drinking water in both urban and rural areas under National Rural Drinking Water Programme.

23. Promotion of Tele-Medicine in Digital India

As India takes giant steps in getting everyone connected to a superfast internet through the Union Government's ambitious Digital India initiative, healthcare delivery can't stay in the analog age. Decongestion of our overcrowded hospitals can be done by curtailing unnecessary hospital visits just to show investigation results or report a small issue. This helps both ways- the doctor at the hospital is able to devote more time to the patient requiring physical intervention while the patient and his/her kin is spared of unnecessary travel and resulting inconvenience. Both government and private hospitals have to be encouraged to run a robust telemedicine service that meets its desired goals.

24. Mobile Medical Units and Wellness on Wheels

Many poor people especially in villages are unable to spare a day's work and visit hospitals for clinical consultation. As a result, often many serious health conditions stay undiagnosed till they get too serious to be cured. As responsibility towards these people, the government will consider rolling out caravan-based Mobile Medical Units

(MMUs) equipped with a doctor, nurse or a paramedic and essential clinical instruments to remote villages on a regular basis for early detection and treatment of diseases that would have otherwise stayed undiagnosed. This will also reduce unnecessary overcrowding and overloading at regional or tertiary care centres. Other than MMUs, the government will also consider launching “Wellness on Wheels” with the intent to promote good health through promotion of better food habits, yoga and self-care.

25. Discourage Use of Addictive Substances

Usage of cigarette, bidi, gutkha, khaini, alcohol and other toxic substances of abuse will be discouraged by the state through public education and strict implementation of existing legislations in this regard. The state government will never promote use of substance of abuse by any of its citizens just to fill up its coffers. Health is wealth and good health of every citizen is crucial for comprehensive development of the state of West Bengal. Lesser incidence of tobacco-related diseases means lesser suffering, along with reduction in healthcare expenses and availability of more mandays of productive work.

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