## GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

# LOK SABHA UNSTARRED QUESTION NO. 851 TO BE ANSWERED ON 5<sup>TH</sup> FEBRUARY, 2021

### PANDEMIC PREPAREDNESS

#### **851. SHRI SHRINIWAS PATIL:**

## Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether the Government has conducted any comprehensive study to identify the shortcomings in the Public Health System of the country in view of the COVID-19 pandemic;
- (b) if so, the details of findings thereof; and
- (c) if not, whether the Government plans to institute any such study to identify the present shortcomings to ensure that any such pandemic in future can be dealt with more effectively?

#### **ANSWER**

# THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY)

- (a) to (c): In wake of COVID-19 pandemic, Ministry of Health & Family Welfare has identified the following areas of continued focus in the existing public health systems in India:
  - i. Need for higher investments on public health infrastructure
  - ii. Maintaining essential health services, closer to the community
- iii. Need for robust public health and outreach systems
- iv. Need for robust surveillance systems with IT enablement
- v. Need to augment capacity of Public Health units at Points of Entry
- vi. Need to strengthen effective emergency response
- vii. Need for comprehensive Research Ecosystem

Accordingly, provisions have been made under the PM Aatma Nirbhar Swasth Bharat initiative for increased investments in Public Health and other health reforms to manage future pandemics, if any.

PM Aatma Nirbhar Swasth Bharat Yojana, is proposed with an outlay of about Rs 64,180 crore over 6 years. This will develop capacities of primary, secondary, and tertiary care Health Systems, strengthen existing national institutions, and create new institutions, to cater to detection and cure of new and emerging diseases. The main interventions under the Scheme are:

1. Support for 17,788 rural and 11,024 urban Health and Wellness Centers

- 2. Setting up integrated public health labs in all districts and 3382 block public health units in 11 states;
- 3. Establishing critical care hospital blocks in 602 districts and 12 central institutions;
- 4. Strengthening of the National Centre for Disease Control (NCDC), its 5 regional branches and 20 metropolitan health surveillance units;
- 5. Expansion of the Integrated Health Information Portal to all States/UTs to connect all public health labs;
- 6. Operationalisation of 17 new Public Health Units and strengthening of 33 existing Public Health Units at Points of Entry, that is at 32 Airports, 11 Seaports and 7 land crossings;
- 7. Setting up of 15 Health Emergency Operation Centers and 2 mobile hospitals; and
- 8. Setting up of a national institution for One Health, a Regional Research Platform for WHO South East Asia Region, 9 Bio-Safety Level III laboratories and 4 regional National Institutes for Virology.