

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

**LOK SABHA
UNSTARRED QUESTION NO. 864
TO BE ANSWERED ON 23RD JULY, 2021**

SETTING UP OF HOSPITALS IN VILLAGES/REMOTE AREAS

864. SHRI RAMSHIROMANI VERMA:

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

- (a) the steps being taken by the Government to set up new hospitals or make the existing hospitals resourceful to provide basic facilities accessible to villages and remote areas;
- (b) whether the ongoing efforts being made in this regard are sufficient to sustain the pressure on healthcare system particularly in remote and rural areas in wake of the likely third wave of COVID-19 pandemic;
- (c) if so, the details thereof; and
- (d) if not, the corrective steps proposed to be taken thereon?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(DR. BHARATI PRAVIN PAWAR)**

(a) to (d): 1.5 lakhs Health & Wellness Centers (HWCs) are being set up especially in villages and remote areas by upgrading Sub-Centers (SC's) & Primary Health Centers (PHC's) for delivering comprehensive primary health care, closer to the homes of the people.

2. Health & Hospitals, being a State subject, primary responsibility of providing and strengthening health services lies with the respective State Governments. However, the Central Government, under NHM provides for technical and financial support to the States/UTs for improving their health care systems, in rural and remote areas. Accordingly, 77,284 HWCs have become functional with this support. The basic facility available through HWC's are at

Annexure-I

3. Government of India through the *Emergency Response and Health System Preparedness package* (ECRP) has extended support to the states/ UTs for managing the current and future imminent wave of COVID-19.

Details of ECRP I & II are at Annexure-II & III

4. In addition to the above, **Prime Minister Atmanirbhar Swasth Bharat Yojana (PMASBY)** Scheme has been announced in the budget FY 21-22, focusing on developing capacities of health systems and institutions across the continuum of care at all levels viz. primary, secondary and tertiary and on preparing for future pandemics/disasters. Details of PMASBY are at **Annexure-IV**

Health Wellness Centres

HWC's are providing a package of following 12 services to make basic health facilities equitable, accessible, affordable to under-served people especially in rural and remote areas:

1. Care in Pregnancy and Child Birth.
2. Neonatal and Infant health care services.
3. Childhood and Adolescent health care services.
4. Family planning, contraceptive services and other reproductive health care services
5. Management of communicable diseases: National Health programmes
6. General out-patient care for acute simple illnesses and minor ailments
7. Screening, prevention, control and management of non-communicable diseases and chronic communicable diseases like tuberculosis and leprosy
8. Basic oral health care
9. Screening and basic management of mental Health ailments
10. Care for common ophthalmic and ENT problem
11. Elderly and palliative health care services
12. Emergency medical services including burns and trauma.

In addition to the above there are a range of wellness activities which include the following:

- Regular Yoga sessions / Wellness sessions.
- Through Annual Health Calendar, 39 Health days have been identified to conduct health promotion activities.
- Ayushman Bharat -Health and Wellness Ambassador Initiative has been launched wherein two teachers in every school will be Ambassadors to foster growth, development and educational achievement of school going children by promoting their health and wellbeing. This is joint initiative of MoHFW and MHRD under comprehensive School Health Program (SHP).
- Eat-Right toolkit and Food Safety kit (Magic Box) have been developed in collaboration with FSSAI, under the initiative 'SahiBhojanBehtarJeevan (सहीभोजनबेहतरजीवन) Eat Right India'

India COVID-19 Emergency Response & Health System Preparedness Package(ECRP-I)

Health Infrastructure for Covid-19 Treatment

ECRP-I for **Rs. 15,000 Crore (USD 2 billion)** has been released to all states/UTs in April 2021 to prevent, detect and respond to the threat posed by COVID-19. Under the package, so far, a total of **Rs.13719.22 Cr** of committed expenditure has been reported by the implementation agencies. **Rs.8147.29 Cr** has been released to the States/UTs to prevent, detect, and respond to the threat posed by COVID-19.

To equip existing health facilities and to set up additional facilities resources are being made available. Dedicated hospitals have been set up for meeting the COVID-19 health emergency.

Table 1

| S. No. | Category | As on March 2020 | As on 30th June 2021 | No. of fold increase |
|---------------|---|-------------------------|--|-----------------------------|
| 1 | COVID dedicated hospitals | 163 | 4389 | 27 |
| 2 | Dedicated COVID health centres | 0 | 8340 | - |
| 3 | Dedicated COVID Care Centre | 0 | 10,015 | - |
| 4 | Oxygen supported beds | 50583 | 4,16,947 | 8 |
| 5 | Total isolation beds (excluding ICU beds) | 41000 | 1,811,850 | 44 |
| 6 | Total ICU beds | 2500 | 121,671 | 48 |

India COVID-19 Emergency Response & Health System Preparedness Package(ECRP-II)

ECPP- II for **Rs. 23,123 Crore** has been approved by Cabinet on 8th July 2021 and the amount is being released to the states, with an aim to strengthening district and sub district capacity for an effective and rapid response to the pandemic.

Support is available for States/UTs to:

Under India Covid-19 Emergency Response and Health Systems Preparedness Package - Phase-II”(ECRP-Phase-II) during 2021-22, approved by the Cabinet on 8.07.2021, an amount of Rs.23,123 crores, is earmarked for implementing the scheme in 9 months from 1st July, 2021 to 31st March, 2022. The Scheme is aimed to prevent, detect and strengthen national health systems, respond to the continuing threat posed by COVID-19 in India. The scheme is a Centrally Sponsored Scheme (CSS) with some Central Sector (CS) components.

Create Paediatric units in all districts (42 or 32 bedded units including Oxygen Supported beds and ICU beds)and also, to establish Paediatric Centre of Excellence (Paediatric CoE) in each State/UT, (either in Medical Colleges, State Govt. Hospitals or Central Hospitals such as AIIMS, INIs, etc) for providing Tele-ICU services, mentoring and technical hand-holding to the District Paediatric units

Establishing 6 bedded units at Sub Health Centres and Primary Health Centres and 20 bedded units at Community Health Centres for meeting the requirement beds inperi-urban and tribal areas.

Besides, the support is provided to provision of required drugs and diagnostics for COVID management, including maintaining a buffer stock for essential medicines required for effective COVID-19 management. Further, support is extended to establish Field Hospitals (100 bedded or 50 bedded units) wherever required.

Augment ICU beds in public healthcare system out of which 20% will be Pediatric ICU beds.

Provide care closer to the community due to the ingress of COVID-19 in rural, peri-urban and tribal areas, by creating pre-fabricated structures for adding additional beds at the existing CHCs, PHCs and SHCs (6-20 bedded units) and support would also be provided to establish bigger field hospitals (50-100 bedded units) depending on the needs at tier-II or Tier-III cities and district HQs.

Install Liquid Medical Oxygen Storage Tanks with Medical Gas Pipeline System (MGPS), with an aim to support at least one such unit per district.

Augment the existing fleet of ambulances especially ALS ambulances to ensure at least one ALS ambulance is available in each block.

Engage Final year MBBS students, Interns, Post Graduate Residents and final year BSc, & GNM nursing students for effective COVID management.

As “Test, Isolate and Treat” and following COVID Appropriate Behaviour at all the times, is the national strategy for effective COVID-19, support will be available to the States to maintain at least 21.5 lakhs tests per day.

Flexible support to the Districts for meeting the requirement of essential medicines for COVID-19 management, including creation of buffer stock.

Guidance Note on “India Covid-19 Emergency Response and Health Systems Preparedness Package - Phase-II” (ECRP-Phase-II) has been shared with the States/UTs on 14th July 2021, requesting the States to send the proposals for appraisal and approval.

15% of amount of Central Share of CSS components of ECRP-II (Rs.1,827.8 Cr) has been released to 36 States/UTs on 22nd July 2021, as an advance to enable the States/UTs to ensure implementation of critical activities.

Annexure IV

Prime Minister AtmanirbharSwasth Bharat Yojana (PMASBY)

- Prime Minister AtmanirbharSwasth Bharat Yojana (PMASBY) Scheme has an outlay of about **Rs. 64,180 Cr** over six years (to be implemented till 2025-26)

Under PMASBY efforts to enhance public health capacities are being undertaken like the following:

- A paradigm shift in provision of Urban Primary Health Care services with establishment of **11,024 new urban Health and Wellness Centers** across the country with a focus on slum and slum like areas
- Infrastructure support for **17,788 AB- Health and Wellness Centres** in rural areas in seven **High Focus States and three NE States.**
- Setting up of 3,382 Block Public Health Units (BPHUs) in **11 High Focus States/UTs** to strengthen Public Health functions such as surveillance, epidemiological investigations along with enhanced capacities for clinical diagnostic services and
- Establishment / Strengthening of Integrated District Public Health Labs (IPHLs) in all 730 districts.
- Establishment of 50/100 bedded Critical Care Hospital Blocks **in 602 Districts** and 150 bedded Critical Care Hospital Blocks **in 12 AIIMS and Central Institutions.**
- Health Emergency Response- Two state-of-the-art Self-contained container based mobile hospitals and 15 Health Emergency Operation Centres (HEOCs) towards strengthening Disaster and Epidemic Preparedness and response

The cabinet note for this scheme has been circulated and it is awaiting the approval of the cabinet.